

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

## **Questions from the Hon. Mark Banasiak MLC**

### **Broken Hill**

1. What have you and the Ministry have done to vary the staffing numbers to appropriately meet the operational need for Child Psychiatry services in Broken Hill?
2. Broken Hill and the Far West is a known hotspot for youth suicide, alcohol and other drug addictions. What additional allied health staff or funding has been provided to the Far West Local Health district to improve access to assessment and therapy for mental health conditions in children and young people?

## **ANSWER**

### **1 – 2.**

In 2020-21, Far West Local Health District received budget enhancements from the Ministry of Health for Mental Health initiatives. The approved staff profile from these enhancements included:

- Child and Adolescent Psychiatrist
- Youth Alcohol & Other Drug Clinician
- Child and Adolescent Mental Health Clinician
- Child and Adolescent Mental Health Peer Worker
- Senior Child and Adolescent Clinician.

In 2022, funding was announced for the development of a new Mental Health Inpatient Unit in Broken Hill, with two additional beds appropriate for young persons.

There is planned implementation of a Safeguards Team in Broken Hill in 2024, which includes up to eight additional multidisciplinary staff.

The Safeguards team will be a new dedicated Child and Adolescent Mental Health Service designed to provide care to children and young people aged 0 to 17 years old who are experiencing acute mental health distress. The team will be community based and provide rapid, mobile, intensive, and flexible short-term support to help during a mental health crisis. The team will also provide extended hours mental health services and partner with relevant health services to ensure 24/7 support to young people and families. Initial funds have been released to develop a local model of care.

The District will also receive funding under the Towards Zero Suicides in Care Initiatives in 2022 for Safe Haven and Suicide Prevention Outreach Team, which includes services for young people over 17 years old.

In addition, in April 2021 a Safe Haven was established in Broken Hill. Safe Havens act as an alternative to Emergency Department and drop-in centres that are available to anyone aged 16 (younger than 16 must be accompanied by an adult) and over without an appointment or referral. They are inviting, non-clinical spaces for people to seek refuge or support and allow people to access timely care in the community, outside of the hospital system.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Parkes Dialysis service**

3. Presently NSW residents on blood dialysis who live in Parkes and must travel a round trip of 200kms per day to Orange, three times per week, for blood dialysis treatment. (There is a dialysis chair/s at Forbes which is only 35kms from Parkes, however that is constantly booked out and difficult to get into. Therefore most people go to Orange.  
Will the minister commit to either funding extra capacity at Forbes or developing capacity at Parkes?

**ANSWER**

**3.**

Western NSW Local Health District has a comprehensive, multilayered renal service that incorporates two Level 5, one Level 4, and four Level 3 dialysis units, along with a range of facility based renal replacement therapy options (self/supervised care) for dialysis in a range of the smaller and more remote hospitals across the District.

All patients who receive care in a satellite unit (Level 3 service) commence their clinical care in one of the District's two Level 5 services (at Orange or Dubbo) until their condition is clinically stable and they are suitable for lower level care at a satellite unit.

Where care needs cannot be met at a particular location, the District aims to support patients to access care through alternative pathways. This includes home-based dialysis when and where it is clinically appropriate.

Demand for services invariably fluctuates across locations, given the nature of renal disease.

The District is currently refreshing its 10-year Renal Services plan. A response to demand in the Lachlan area will be addressed through that process, noting that care as close to the patient's home as possible, is a priority for the District.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Yass District Hospital**

4. There was a letter signed by 25 staff members from Yass District Hospital stating they had concerns in relation to a staffing crisis at the hospital. To quote from the correspondence “The current staffing crisis at Yass Hospital means that there have been periods of time where no appropriately trained clinical staff are present at the Hospital to provide any form of emergency service”.
  - a. Please provide information regarding the number of occasions or shifts where staffing has not been adequate?
  - b. Please provide information regarding the number of times or shifts the Emergency Department has been without a doctor?
5. The correspondence also suggests that on the night of July 6, 2022 there was no Doctor on site and only one nurse for the entirety of the facility, including the emergency department. Please provide information regarding the staffing levels at Yass District Hospital on July 6, 22?
  - a. How many Doctors?
  - b. How many Nurses?

**ANSWER**

**4 a – b.**

On only two occasions in the past 12 months, alternate staffing models have been implemented at Yass Hospital to cover short-term crisis relief vacancies.

During periods where there is no doctor on site, there is an established business continuity plan for Yass Hospital staff to access medical support from Goulburn Hospital via a tele/virtual consult if required.

**5 a – b.**

On 6 July 2022, a nightshift vacancy for a ward registered nurse was filled by a senior nurse manager. At approximately 7pm, the executive on call was informed of late notice unplanned leave for the emergency trained registered nurse. There was further notification that the medical officer was also unavailable for the night shift.

Consultation was undertaken with the:

- General Manager, Tablelands and Monaro Network
- Senior Nurse Manager Tablelands Network (who was due to work the nightshift)
- Executive Director of Operations
- NSW Ambulance Service health manager.

The situation was assessed as follows:

- there was a security guard on the premises 24 hours
- there were 3 acute inpatients at Yass for the overnight period
- the Senior Nurse Manager has Advance Life Support training, Intensive Care capability, and also has worked extensively as an After-Hours Senior Nurse Manager.

The Senior Nurse Manager offered to work at the facility with the backup and support of the NSW ambulance service who would provide emergency assistance and transfer if required, under the Clinical Emergency Response System protocols. Two low acuity patients accessed

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

the facility between the hours of 10pm and 8am, and both were assessed and safely discharged.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Regional Health Ministerial Advisory Panel**

6. How many Expressions of Interest were received for positions on your Regional Health Ministerial Advisory Panel?
7. When will the first meeting of the panel take place?
8. Will they be setting their own agenda or will the Minister for Regional Health be setting the agenda?
9. How often will the Advisory Panel be meeting?
10. Will the Advisory Panel meeting minutes be made public?
11. What will be their first priority to advise the Minister on?

**ANSWER**

**6 – 11.**

Over 180 Expressions of Interest were received for the Regional Health Ministerial Advisory Panel.

The first meeting of the Advisory Panel was held on 23 September 2022 with the second held on 5 October 2022.

The meeting agendas will be prepared in consultation with the Advisory Panel, Advisory Panel Chair, Coordinator General, Regional Health, Secretary, NSW Health and the Minister for Regional Health.

Regular meetings of the Advisory Panel will be held four times a year. Extraordinary meetings may be called by the Minister for Regional Health where required.

A communique will be issued after each Advisory Panel meeting.

The first priority for the Advisory Panel will be to advise the Minister for Regional Health on the development and implementation of the Regional Health Strategy for NSW.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Suicide**

12. Please provide evidence of how the Government is tracking on the Premier's Priority to reduce suicide deaths by 20% by 2023?
  - a. What is the current shortage of Mental Health Nurses in NSW?
  - b. What is the current shortage of Psychiatrists in NSW?
  - c. What is the current shortage of Psychologists in NSW?
13. What are the external factors or contributors attributed to the rise in suicide numbers across NSW?
14. What evaluation of the Towards Zero Suicide strategy has the Government completed?
  - a. Please provide information regarding the evaluation.
  - b. Are these reports made public?
15. Is the Towards Zero Suicide Strategy inclusive of pandemic and natural disasters?
  - a. If yes, please provide the relevant information of how natural disasters and the COVID pandemic are considered with the strategy?
16. Is NSW seeing increases in emergency department presentations and ambulance call outs for self-harm, suicide ideation or suicide attempts?
17. Last financial year, how many calls were made for ambulances for assistance for people suffering a mental health crisis?
18. What percentage increase is this on the previous financial year?
19. Please provide information regarding the number of mental health patients, suicide ideation or suicide attempts presenting to emergency departments last financial year?
20. What is the average wait time in emergency for an individual to receive treatment who has presented to emergency suffering a mental health episode?
21. Can the Minister please provide an update of how much money has been allocated in this financial years' budget specifically for suicide prevention and response initiatives?

**ANSWER**

**12 – 15.**

Information on the Towards Zero Suicides (TZS) Premier's Priority is available at [www.nsw.gov.au](http://www.nsw.gov.au).

Information on NSW Health staffing can be found in its annual reports via [www.health.nsw.gov.au](http://www.health.nsw.gov.au) and in the Budget Papers.

Suicide is a complex issue and can have multiple contributing factors. Numbers and rates of deaths by suicide change over time as social, economic and environmental factors influence suicide risk. Preventing deaths by suicide requires a coordinated approach involving local communities, the private sector and government. More information is available via the NSW Suicide Monitoring System at [www.health.nsw.gov.au](http://www.health.nsw.gov.au) and on the Australian Institute of Health and Welfare website at: [www.aihw.gov.au](http://www.aihw.gov.au).

An independent process and outcome evaluation is underway for six of the TZS initiatives. Evaluation findings will be used to inform the future direction of TZS. When finalised, findings will be summarised and distributed.

The TZS Strategy was not inclusive of pandemic and natural disasters. Specific packages have been announced to support responses, this included a \$73 million COVID-10 package in 2020, a \$130 million COVID-19 mental health recovery package in 2021 and \$25 million flood recovery package in 2022.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**16 – 20.**

Information on emergency department presentations for self-harm, suicide ideation, suicide attempts or other mental health issues in NSW is available on the Healthstats NSW website at: <https://www.healthstats.nsw.gov.au/#/home>

Information on ambulance call outs for self-harm, suicide ideation, suicide attempts or mental health related emergency department presentation waiting times in NSW is published on the Australian Institute of Health and Welfare website at: <https://www.aihw.gov.au/>

**21.**

From 2022-23, the NSW Government is investing \$143.4 million over 4 years to address priorities in the Strategic Framework for Suicide Prevention. This investment builds on the \$87 million investment in TZS from 2019-20 to 2021-22. \$14 million will also be invested in 2022-23 for statewide suicide prevention training funded under the COVID-19 Mental Health Recovery Package.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Suicide Prevention Training**

22. In relation to the Premier's announcement to fast track the state's mental health recovery some \$14 million was allocated over two years to train 275,000 people across NSW in suicide prevention training. Please provide an update of how many people have been trained through this investment?

- a. How many people trained last financial year?
- b. To date, how many people trained this financial year?

**ANSWER**

**22 a – b.**

Over 10,000 people have been trained across the Community Gatekeeper Training and COVID recovery initiatives, which includes over 1,300 people trained in the first ten weeks of this financial year.

Extensive engagement and planning is underway to significantly ramp up rollout of training this financial year, including with the NSW Department of Education, Catholic Schools NSW and the Association of Independent Schools NSW. Wide-scale dissemination of training is expected from October 2022, when a statewide communications campaign is launched.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Seclusion and Restraint**

23. BHI data from January to March 2022 shows the average durations of a seclusion event was 11 hours and 18 minutes up on the same quarter of the previous year. What actions are being taken to move closer to the KPI?
24. Of particular concern is Cumberland hospital, with an average seclusion of 22 hours and 20 minutes. What happened at Cumberland hospital to incur such a long average?
25. What does the patient have access to while in seclusion?
  - a. How often is the patient checked by staff?
  - b. How is the checking done?
  - c. How is the patient fed?
  - d. How is the patient kept hydrated?
26. How many times has the Minister for Mental Health, The Honourable Bronwyn Taylor MLC requested briefings on the public hospitals that have seclusion times outside the benchmark?
27. How many secluded patients tested positive to COVID?

**ANSWER**

**23.**

The Western Sydney Local Health District's mental health service has undertaken actions to move closer to the KPI, including increasing support from the allied health department to engage consumers in the ward, using sensory modulation rooms and groups activities in the acute settings, holding fortnightly meetings with stakeholders to implement strategies to reduce seclusion and restraint events, detailed education on trauma-informed care, de-escalation domains and minimisation of least restrictive practices, and improved clinical supervision program for nursing staff.

**24.**

Increased average seclusion hours are due to a small number of acutely unwell patients that can require multiple episodes of seclusion for an extended duration.

**25 a – d.**

NSW Health staff must continuously observe and, where possible, engage with a person in seclusion. Observations must be conducted in person; they must not be undertaken using closed circuit television (CCTV). The needs of consumers in seclusion are fully met.

**26.**

NSW Health provides quarterly reports to the Minister on rates of seclusion and restraint.

**27.**

Between January and March 2022, 55 patients tested positive for COVID-19 and were cared for during a seclusion episode.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Emergency Departments**

28. In relation to Statistics sourced from the Bureau of Health Information, latest report January to March 2022. Why are 20% of patients who attend Maitland Hospital ED leaving without treatment?
29. Given this is the highest percent in the State, what additional resources have been provided to this hospital?
30. Please provide information regarding the Central Coast LHD as to why it worsened from 61% in Jan to Mar 2021 to 50% in Jan to Mar 2022?
31. For Shoalhaven Hospital, in Jan to Mar 2021 it was already low at 59% and then it fell even lower to 54% for Jan to Mar 2022. Why is it getting worse?

**ANSWER**

**28. – 29.**

It is important to note that the Bureau of Health Information points out that its March 2022 quarterly report reflected the impact of the Omicron surge on the NSW Healthcare system, and as the health system adapted, it continued to experience fluctuations in hospital and ambulance activity and performance.

Hunter New England Local Health District's clinical information system does not capture the reasons why a patient departed the emergency department before receiving treatment. In these cases, the record indicates that the patient 'left at own risk' or 'did not wait'.

Since the new hospital opened in January 2022, the District has invested at least a further \$2.5 million to improve care and treatment in Maitland Hospital's emergency department - opening additional treatment spaces and ambulance offload beds and permanently recruiting additional nurses to staff these, increasing allied health resources, transferring non-urgent elective surgeries to District private partners, and increasing virtual medical coverage to support other local hospitals.

**30. – 31.**

The performance measures quoted in these questions are not identified. As a result, it is not possible to answer these questions.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Elective Surgery Delays**

32. Some patients in Northern NSW have been waiting up to 465 days for elective surgery.  
What is the KPI on elective surgery for Northern NSW?

**ANSWER**

**32.**

Information about KPIs for Northern NSW Local Health District can be found in the District's 2022-23 Service Agreement and is available at: [www.nnswlhd.health.nsw.gov.au](http://www.nnswlhd.health.nsw.gov.au).

Fluctuations in elective surgery wait times was driven by necessary health responses to the COVID-19 pandemic, and was reflected nationwide.

In response, The NSW Government announced that it will invest a further \$408 million in the 2022-23 Budget to fast-track elective surgeries delayed due to the COVID-19 pandemic. The funding boost will take the Government's total commitment to reducing wait times to almost \$1 billion.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Corowa District Hospital**

- 33. How many clinical nurse managers are located at Corowa District Hospital?
- 34. Are you aware of how many vacant positions there currently are in Corowa Hospital?
- 35. On average how many shift hours are unfilled each week at Corowa District Hospital?
- 36. How many staff have recently left Corowa Hospital?
- 37. Is the hospital experiencing staffing shortages?
- 38. Are you actively recruiting for this hospital?
- 39. If a patient at Corowa needed an ultrasound today, are they able to get one?
- 40. Are there any known changes expected for ultrasounds at Corowa?

**ANSWER**

**33.**

Three clinical nurse managers are located at Corowa District Hospital.

**34 – 38.**

All vacancies are currently advertised. A targeted supported recruitment model has been implemented since August 2022 which has seen a decrease in vacancy rate. A more recent strategy has been implemented to visit local Universities and TAFEs for pop-up recruitment cafés. A Wodonga TAFE visit held on 12 September 2022 resulted in 12 Enrolled Nurses completing on-boarding processes.

There are no shifts left unfilled at Corowa District Hospital. Casual nurses and part time staff are used to fill roster gaps.

**39 – 40.**

Corowa District Hospital has recently taken delivery of a new ultrasound machine and provides ultrasound services three days per week.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Safe Havens**

41. What is the investment in Safe Havens?
42. How much money over three years has been allocated to Safe Havens?
43. The model of staffing is an alternative to clinical or hospital setting. They are usually operated by peer workers with a lived experience of suicide. Can the Minister please provide some further information of how people are employed – what are their qualifications?
44. Do newly appointed roles then go through rigorous training on site or off site?
45. How many individuals have accessed Safe Havens across the State since they have opened?
46. On average how long will an individual experiencing suicidal ideation stay in the Safe Haven space?
47. How many individuals are then referred to emergency?
48. For individuals that present to emergency departments that are experiencing suicidal ideation – are these individuals triaged or are they given an option to move out of the emergency department and over to a nearby Safe Haven?
49. It could be said that there is lack of general awareness in the community that the Safe Haven space is something people can access and that is free. How can awareness be improved?
50. It has been a year since Associate Professor Michelle Banfield received funding through the Federal Government to conduct research into the effectiveness of Safe Haven's – is this research now available?
51. Has the Minister read the findings?
52. Please explain how Safe Haven's in NSW are evaluated and reviewed?
53. Some of the Safe Havens in NSW are not within walking distance to the local hospital, for example Campbelltown- the hub is located in Ambarvale. Approximately a 20 minute walk. Please explain the decisions and methodology used behind where the hubs are located?

**ANSWER**

**41 – 42.**

As part of the \$143.4 million investment across 4 years in Towards Zero Suicides initiatives, \$45.7 million is being invested in the Safe Haven initiative. In addition, as part of the \$25 million investment over three years in mental wellbeing for flood impacted communities, \$1 million of this funding is dedicated to four Safe Haven Hubs in Northern NSW, with a further \$7 million for clinical and non-clinical staff in the region, including staff at the four Safe Havens Hubs.

**43 – 44.**

Guidance material for employment and qualifications of peer workers in Safe Havens is available on the NSW Health website at: [www.health.nsw.gov.au](http://www.health.nsw.gov.au)

**45.**

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

Data methodology is being refined, however it is estimated that over 6,600 occasions of service has occurred at Safe Havens from 1 January to 2020 to 31 March 2022.

**46.**

Safe Havens are person-centred, and the time attended by an individual varies and is according to their need.

**47.**

Statewide data is not available.

**48.**

Models of care differ across local health districts.

**49.**

The Ministry of Health continues to work closely with local health districts and speciality health networks to strengthen awareness of Safe Havens. This has included promotion of Towards Zero Suicides initiatives on the NSW Health website and regular newsletters.

**50.**

No.

**51.**

N/A

**52.**

An independent process and outcome evaluation is underway.

**53.**

Where possible local health districts sourced spaces close to local hospitals. Where this was not possible, local protocols are in place to ensure safety and accessibility. Statewide guidance is provided at page 2 (headline 'Safety and Accessibility') of: [www.health.nsw.gov.au](http://www.health.nsw.gov.au)

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Eurobodalla**

54. How much is the NSW Government spending on locum services in the SNSWLHD?
55. How much is the NSW Government spending on locums state-wide?
56. How many VMO, Staff Specialist and CMO resignations have there been in the SNSWLHD?
57. How many resignations have there been state-wide?
58. How many nursing, midwifery and allied health resignations have there been in the SNSWLHD?
59. How many resignations have there been state-wide?
60. What is the cost of the Studer group consultancy service to the SNSWLHD?
61. How many mental health beds will the proposed Eurobodalla Regional Hospital have on opening?
62. How many psychiatrists will service the patients?
63. How many paediatric beds will the proposed Eurobodalla Regional Hospital have on opening?
64. How many paediatricians will be appointed to the new Eurobodalla Regional Hospital?
65. Will the proposed new Eurobodalla Regional Hospital open with Intensive Care and level 4 services?

**ANSWER**

**54.**

Locum services are defined by Southern NSW Local Health District as any medical staff engaged through an external agency. In 2021-22, the District spent \$33.6 million on locum services including salaries paid directly to the locum medical staff and the agency fee to external agencies. Total cost includes all COVID-19 related activities.

**55.**

This question should be directed to the Minister for Health.

**56.**

Information on staff fluctuations can be identified via the SNSWLHD annual review reports published on its website.

**57.**

This question should be directed to the Minister for Health..

**58.**

Information on staff fluctuations can be identified via the SNSWLHD annual review reports published on its website.

**59.**

This question should be directed to the Minister for Health.

**60.**

This information is available on the [tenders.nsw.gov.au](https://tenders.nsw.gov.au) website.

**61 – 64.**

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

Bed numbers do not reflect the volume and quality of health services delivered to patients in hospital or in the community. Bed numbers also do not reflect the new innovative models of care NSW Health has implemented to provide integrated care outside of the hospital, closer to patients' homes and utilising new technologies such as virtual health and the Hospital in the Home program. The Medical Workforce plan is currently being developed, which includes medical cover for paediatric patients.

The new hospital will provide four mental health beds. This is more beds than are currently available as neither the Batemans Bay Hospital nor the Moruya Hospital currently have mental health beds, and will be the first time public mental health beds have been established in this area.

**65.**

Planning is underway for the new Eurobodalla Regional Hospital to be built to accommodate a level 4 health facility including Intensive Care services.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Rylstone Hospital**

66. In relation to Nurses at Rylstone Hospital, they have written to management about being attacked with forks, pens, landline telephones and sprayed with urine, only to be told they have the same staffing levels as similar facilities. Is it true a staff member has had urine thrown over them by a patient in April this year?
67. Is it true that a staff member was attacked by a patient who stabbed the staff member with a fork?
- a. How was this situation managed?
  - b. What systems have been put in place to prevent such an incident again?
68. Is it true a letter was written to management requesting additional staff for the night shift?
- a. Has this happened?
69. A request was made for upgrades to the camera system to address blind spots, has this been done?

**ANSWER**

**66 – 67.**

Two incidents occurred at Rylstone Hospital and involved acutely unwell patients. In response to these incidents, the Clinical Emergency Response was activated which involved local police, ambulance and hospital staff. This is a planned response arrangement in place to assist staff in duress. The incidents were fully investigated, and risk practices strengthened including through the supply of additional duress tags for workers to summon assistance and additional security upgrades. These upgrades included installation of security screens on external windows and doors, and removal of vegetation to improve camera visibility. Works are also being completed to install additional security swipe card access to external doors. All staff in high-risk areas wear duress tags. A Health Assistant role has been converted into a Health and Security Assistant role.

**68.**

Yes. Rylstone Hospital continues to be staffed in accordance with the relevant Award.

**69.**

Yes. Security arrangements are continuously under review and in this instance the CCTV arrangements were enhanced.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Grafton Base Hospital**

70. How much money has been spent or allocated for the planning of this hospital?  
71. When will construction finally commence?

**ANSWER**

**70.**

The 2022-23 NSW State Budget committed \$263.8 million to the Grafton Base Hospital Redevelopment project, and included a \$1 million allocation in 2022-23 to progress initial planning for the redevelopment.

**71.**

Construction timeframes will be confirmed once further planning is undertaken. Updates on health infrastructure projects in planning or delivery are publicly available on NSW Health websites.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Deniliquin Hospital Maternity**

72. In April last year, issues and concerns were raised from the community regarding the maternity services in Deniliquin. Have you hired an agency midwife on a temporary contract or a permanent midwife?

**ANSWER**

**72.**

Deniliquin Hospital Maternity Service continues to operate with a mixture of permanent and agency midwives. Deniliquin Hospital Maternity Service has successfully transitioned a student midwife to a registered midwife position in August 2022. Recruitment to staff vacancies continues, with incentives offered as part of the recruitment process.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Tweed Valley Hospital**

73. The redeveloped Tweed Valley Hospital is said to be having 12 operating theatres, which is an increase from the five existing. Will all 12 be fully open and funded, and up and running when the hospital opens in 2023?
74. Can the Minister please reaffirm the 2019 election promise made by the Member for Tweed, Geoff Provest and the then Deputy Premier John Barilaro that parking would be free at the Tweed Valley Hospital when building works are complete?
75. How many dedicated mental health beds will be present in the new Tweed Valley Hospital?
76. What plans are in place for the current Tweed Hospital in Tweed Heads once the Tweed Valley Hospital is opened?
77. Will it remain as a hospital facility in public hands?
78. What is the current wait time for adults and children to see a Sexual Assault Counsellor at the Tweed Hospital?
79. Is there a Work Force Plan for the upcoming Tweed Valley Hospital?
- a. If so, where is it available?
  - b. Can you please provide this?
80. What communication has the Minister had in relation to Cudgen Connection?
- a. If there has been communication, have these been face to face meetings?
  - b. Correspondence via email?
  - c. Staff member representative?
81. Will the Murwillumbah Hospital maintain its current levels of service?

**ANSWER**

**73.**

Detailed information on the Tweed Valley Hospital development can be found at [www.tweedvalleyhospital.health.nsw.gov.au](http://www.tweedvalleyhospital.health.nsw.gov.au) including fact sheets with floor plans.

**74.**

The NSW Liberals and Nationals stands by its commitments.

**75.**

Detailed information on the Tweed Valley Hospital development can be found at [www.tweedvalleyhospital.health.nsw.gov.au](http://www.tweedvalleyhospital.health.nsw.gov.au) including fact sheets with floor plans.

I am advised the new Tweed Valley Hospital will have 40 mental health inpatient beds, including eight high-dependency beds. This is a significant increase from 25 beds at the existing Tweed Hospital.

**76/77.**

Hospital services will move from the existing Tweed Hospital to the new hospital when it opens to patients in 2023. A range of community health and other out-of-hospital services including BreastScreen will continue to be provided in Tweed Heads.

**78.**

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

For business hours and after-hours intake an immediate response and assessment is provided. Currently, for ongoing counselling there is no wait for adults, the waiting time for children varies depending on clinical priority.

**79.**

The Tweed Valley workforce plan remains under development with key stakeholder consultation not yet finalised.

**80.**

Information on meetings the Minister has with stakeholders is publicly disclosed quarterly.

**81.**

Existing services at the Murwillumbah Hospital such as the Emergency Department, low-complex day surgery, inpatient wards, rehabilitation, palliative care, chemotherapy and renal dialysis will remain in place.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Ballina Hospital**

- 82. To date, how many Doctor vacancies exist at the Ballina Hospital?
- 83. Is there a current doctor shortage in Ballina hospital?
- 84. If, yes what is being done to address the shortage?

**ANSWER**

**82 – 84.**

Medical staff vacancies at the Ballina Hospital Inpatient Unit and Emergency Department (ED) are being covered with locums in the ED or the rotation of staff from Lismore to the inpatient unit.

The vacancies are subject to recruitment. Northern NSW Local Health District is undertaking a marketing and overseas recruitment strategy to address the medical vacancies.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**New Forster Public Hospital**

- 85. What is the expected commencement date for construction of the hospital?
- 86. What is the expected completion date for the new hospital?

**ANSWER**

**85 – 86.**

NSW Health is currently undertaking clinical planning to determine the required clinical and support services to be incorporated into the new hospital and the detailed scope and timeframe for the hospital.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Regional Hospital and MPS**

87. What incentives is NSW Health currently offering to attract nursing and midwifery staff to rural, regional and remote hospitals, health services and MPSs?
88. What recruitment strategies is NSW Health and/or LHDs utilising to attract new staff to available positions?
89. How many FTE nursing and midwifery vacancies currently exist across the 7 regional LHDs?
90. What is the breakdown of these vacancies, per classification?
91. How many regionally based NSW Health nurses have First Line Emergency Care training qualifications?

**ANSWER**

**87.**

NSW Health recognises that attracting and retaining health workforce in rural areas of NSW can be challenging. To assist health agencies to stabilise the supply of health workers in rural locations, incentives over and above award entitlements may be offered to entice workforce to roles that are hard to fill and/or critical to service provision.

The NSW Government is investing \$883 million over the next four years to attract and retain staff in rural and regional NSW.

Relevant health agencies have been allocated funding and are currently working through attraction and recruitment processes to onboard new workforce.

The NSW Health Rural Health Workforce Incentives Scheme provides the framework for identifying and enabling payments of incentives for hard to fill and critical vacancies, including nursing and midwifery positions. It applies to locations classified as a Modified Monash Model (MM) 3 – 7 as part of the Australian Government Department of Health and Aged Care rural/regional classification model.

Incentive packages of up to \$10,000 for eligible roles can be offered to attract new nursing and midwifery workforce to rural and regional locations, or to retain existing nursing and midwifery workforce at these locations.

These incentives can also include accommodation assistance; professional development; utilities reimbursements; additional personal leave; ongoing rural and regional health allowance; cash bonuses; travel assistance including return airfares, compassionate travel, and family travel assistance; transfer incentives; and study assistance.

**88.**

Health agencies have developed a range of targeted recruitment campaigns, advertising on job seeking platforms and international recruitment.

Health agencies have partnered with training and recruitment providers to attract workforce by using online social media and job websites such as Seek, Jobs NSW, LinkedIn, Facebook, Koori Mail, and Indigenous Times.

Health agencies have also increased new graduate intakes for the Allied Health, Nursing and Midwifery, and Junior Medical Officer Workforce for the 2023 clinical year, as well as their traineeship and scholarship positions to attract additional workforce to NSW Health.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

Health agencies are also partnering with TAFE and other educational institutions offering direct appointments for students.

Worker Accommodation is also being established at several sites across the state including Southern NSW, Hunter New England, Western NSW, Far West and Murrumbidgee Local Health Districts.

**89. – 90.**

This information is not collected centrally.

**91.**

This information is not collected centrally.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Visiting Medical Officers**

92. How many VMOs (FTE and Headcount) are currently engaged across NSW Health, by LHD and by craft group/speciality?
93. How does this compare to the number of VMOS engaged across NSW health in 2017?
94. What is the number and percentage of VMOs on 'zero hours' contracts?
95. What is the number and percentage of VMO contracts that are exclusively for the provision of clinical service (i.e., they are not required to provide clinical support activities like quality assurance, teaching, policy, and procedure development)?
96. How many staff specialists are employed in NSW (FTE and Headcount, by LHD) and how does this compare to each year for the past five years?
97. How much money did NSW Health spend on VMOs in 2019/20 and then 2020/21?
98. Recommendation 12 in the Rural Health Inquiry called on NSW to review the conditions, contracts and incentives of GPs working as VMOs. Is this one of the recommendations you will be adopting?
99. Recommendation 13 from the inquiry is for NSW to establish a state-wide accreditation. Is this a recommendation you will be adopting?

**ANSWER**

**92.**

There were almost 6,500 VMOs engaged across 19 Health agencies, working in 65 specialties.

**93.**

There were 5,745 VMOs engaged across 19 Health Agencies working in 69 specialties.

**94.**

This information is not collected centrally.

**95.**

All VMOs provide clinical and non-clinical services.

**96.**

NSW Health only reports Staff Specialist in FTE due to the flexible nature of the workforce. The number of Staff Specialists has gradually increased each year from 3,659 FTE in 2018 to 4,151 FTE in 2022.

**97.**

2019-20: \$914,896,999

2020-21: \$962,339,172

**98.**

Yes, it was supported.

**99.**

Yes, it was supported in principle.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Locums**

100. What is the average cost per day for Locums visiting rural NSW?
101. What is the highest rate that is currently paid for Locums visiting NSW per day?
102. What other costs are covered for Locums when they visit rural NSW? (ie accommodation, food, incidentals)
103. Has NSW Health become so reliant on Locums that they are just paying more and more?
104. What is the benefit to the community to have locums rather than permanent doctors?
105. Have you had any discussions about capping the Locum rates?

**ANSWER**

I refer the member to the response provided at Portfolio Committee No. 2 – Health – Budget Estimates Hearing – 23 August 2021 – supplementary questions 101 – 106.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**North Coast Mental Health Post Flood Response**

106. What was the number of Mental Health Clinicians that were deployed to assist the north coast community as part of the immediate response? (a) How long was the deployment?
107. Could you please elaborate on the immediate assistance provided – for anxiety, distress and post trauma?
108. Can you please explain the challenge in terms of re-deploying staff and was there hesitancy in taking up the roles?
109. Did the re-deployment of health workers to the North Coast leave gaps in existing departments?
110. Funding by the Government specifically targeted to the North Coast is an allocation over three years. \$3.5 million over three years to recruit 10 Local Recovery Coordinators. What is the status of recruitment – have all positions been filled?
- a. In what LGA's?
111. Considering the long term mental health recovery of flood effected areas is estimated to be substantial and possibly years, how is the Government going to monitor the funding and recovery models in North Coast NSW?
112. Is the Mental Health package sufficient in addressing the needs of the community of the North Coast?

**ANSWER**

**106.**

Northern NSW Local Health District Mental Health, Alcohol and Other Drugs Service received a total of 39 redeployed NSW Health staff. The individual deployments ranged from 1 to 3 weeks.

**107.**

Disaster Recovery Team clinicians were deployed to evacuation centres and recovery centres to provide mental health assessment, counselling, psychosocial supports and referral to Northern NSW Local Health District clinical services and Primary Health Network commissioned clinical services.

**108.**

NSW Health staff from across NSW were generous with their time and commitment to the needs of Northern NSW Local Health District communities impacted by the natural disaster flooding event.

**109.**

No.

**110 a.**

The Primary Health Network/Healthy North Coast is responsible for commissioning services targeted by this funding allocation.

**111.**

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

Governance frameworks are in place to monitor funding and delivery.

**112.**

Funding allocations are forecasted to meet ongoing community needs, and will continue to be evaluated with service provision adapted to meet changing needs.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Commitments**

113. In relation to the Liberal Government election promise in 2019, stating they would employ 100 additional School Counsellors or Psychologists and additional 350 Student Support Officers to ensure every public high school has access to services. Were all positions filled?
114. Can the Minister please provide a breakdown of how many of these positions were filled with psychologists compared with counsellors?
115. In relation to \$46.8 million to expand the program to deliver 100 new school-based nurses to support student wellbeing.
- a. To date, how many of these positions have been filled?
116. Of the 7,674 Additional Frontline Health Staff promised, how many of these Health professionals were mental health professionals?
117. How many Psychiatrists are currently employed in metropolitan Sydney?
118. How many Psychiatrists are currently employed in regional NSW?
119. How many Psychologists are currently employed in metropolitan Sydney?
120. How many Psychologists are currently employed in regional NSW?

**ANSWER**

**113 - 114.**

This is a matter for the Minister of Education.

**115 a.**

As at 20 September 2022, 93 wellbeing nurse positions have been filled. Local health districts continue recruitment to the remaining positions.

**116.**

Service delivery needs for clinical requirements are determined at the local level. Local health districts (LHDs) will apportion resources to mental health in accordance with community needs.

**117.**

Information on NSW Health and District staffing can be found in NSW Health Annual reports, NSW Government Budget Papers and individual LHD annual review reports, all published on the NSW Health, NSW Government and individual LHD websites.

**118.**

Information on NSW Health and District staffing can be found in NSW Health Annual reports, NSW Government Budget Papers and individual LHD annual review reports, all published on the NSW Health, NSW Government and individual LHD websites.

**119.**

Information on NSW Health and District staffing can be found in NSW Health Annual reports, NSW Government Budget Papers and individual LHD annual review reports, all published on the NSW Health, NSW Government and individual LHD websites.

**120.**

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

Information on NSW Health and District staffing can be found in NSW Health Annual reports, NSW Government Budget Papers and individual LHD annual review reports, all published on the NSW Health, NSW Government and individual LHD websites.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Third party contractors or consultancies**

121. For every agency, department, or state-owned corporation within your portfolio, please provide the following:
- a. A list of all third-party contractor or consultancies engaged in communications services, including:
    - i. Contractor name
    - ii. Contractor ABN
    - iii. Service provided
    - iv. Total cost paid
  - b. A list of all third-party contractor or consultancies engaged in PR services, including:
    - i. Contractor name
    - ii. Contractor ABN
    - iii. Service provided
    - iv. Total cost paid
  - c. A list of all third-party contractor or consultancies engaged in marketing services, including
    - i. Contractor name
    - ii. Contractor ABN
    - iii. Service provided
    - iv. Total cost paid
  - d. A list of all third-party contractor or consultancies engaged in Government relations or lobbying services, including:
    - i. Contractor name
    - ii. Contractor ABN
    - iii. Service provided
    - iv. Total cost paid
  - e. A list of all third-party contractor or consultancies engaged in industry or peak body membership, including:
    - i. Contractor name
    - ii. Contractor ABN
    - iii. Service provided
    - iv. Total cost paid
  - f. A list of all third-party contractor or consultancies engaged in policy or strategy development, including:
    - i. Contractor name
    - ii. Contractor ABN
    - iii. Service provided
    - iv. Total cost paid
  - g. A list of all third-party contractor or consultancies engaged in project management, including:
    - i. Contractor name
    - ii. Contractor ABN
    - iii. Service provided
    - iv. Total cost paid

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Third party contractors or consultancies (continued)**

- h. A list of all third-party contractor or consultancies engaged in accounting and audit, including:
  - i. Contractor name
  - ii. Contractor ABN
  - iii. Service provided
  - iv. Total cost paid
- i. A list of all third-party contractor or consultancies engaged in legal services, including:
  - i. Contractor name
  - ii. Contractor ABN
  - iii. Service provided
  - iv. Total cost paid
- j. A list of all third-party contractor or consultancies engaged in any other services, including:
  - i. Contractor name
  - ii. Contractor ABN
  - iii. Service provided
  - iv. Total cost paid

**ANSWER**

**121 a – j.**

Information on the use of consultants is included in the NSW Health Annual Report and on the NSW Government eTendering website.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Menopause hubs**

122. How will the \$40 million over four years for 16 new menopause services and four hubs, announced in June 2022, be distributed?
123. Have the locations of the hubs been determined?
  - a. If so, what are the locations?
  - b. If not, what is the timeline for these locations to be determined?
124. Will menopause hubs be located within existing services, or require new premises?
  - a. If the hubs will be in new premises, will they also offer holistic medical services for women experiencing menopausal symptoms?
125. Have the locations of the menopause services to be funded been determined?
  - a. If so, what are the locations?
  - b. If not, what is the timeline for these locations to be determined?
126. How will existing services apply for funds under the new program?
127. Will existing service provision be taken into account when assessing services' suitability for menopause service/hub funding?
  - a. If so, how?
128. How will the NSW Government ensure there is not a duplication of services in areas which already supply menopause care?
129. Were existing services and medical professionals specialising in menopause care consulted about the planned funding roll out?
  - a. If so, who was consulted?
    - i. When were they consulted?
    - ii. Did the consultation happen before or after the announcement?
130. Will Women's Health Centres, which specialise in the care of women and offer menopause services, be funded to continue to deliver their services under this funding model?
  - a. Is the NSW Government proactively working with Women's Health NSW to make the most of the existing services they provide?
131. How was the Expressions for Interest (EOI) process for the Menopause Hubs' clinical and community advisory groups, as referred to by Director of Women NSW Tanya Smyth during the 6 September Budget Estimates hearing, publicised?
  - a. Was it by invitation only?
  - b. What will be the role of the clinical advisory group?
  - c. (What will be the role of the community advisory group?
  - d. (What will be the process following the EOI?
  - e. When will services/organisations know the outcome of the EOI process?
  - f. How will the NSW Government ensure diversity of representation for each of these groups?

**ANSWER**

**122,124, 126 &127-131.**

The NSW Government has committed \$40.3 million over four years to establish up to 16 new services for women experiencing severe symptoms of perimenopause and menopause.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

Distribution will occur across four years to the Agency for Clinical Innovation, local health districts and St Vincent's Health Network, and Women NSW:

- \$40 million for the health services and a statewide group to lead the implementation planning and support of these services
- \$300,000 for Women NSW to roll out a statewide education and awareness campaign focussing on perimenopause and menopause symptoms and workplace education.

Local health districts and St Vincent's Health Network will determine the best way to deliver services in line with a model of care.

NSW Health is engaging with stakeholders to inform work of the planned services. Women's Health NSW has been informed of the planned services and a Menopause Taskforce has been established to inform the development of a model of care. Membership includes a clinician from a Women's Health Centre.

An initial EOI process to participate in the Clinical and Consumer Reference Groups has been publicised alongside the Women's Health Week campaign on social media, within clinical networks, and on the Agency for Clinical Innovation website. Opportunities to join the Reference Groups remain ongoing.

**123.**

I refer the Member to the response at Portfolio Committee No. 2 – Health – Budget Estimates hearing - 6 September 2022 – question taken on notice on page 26.

**125.**

This information is published on the NSW Health website.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Women’s Health NSW**

- 132. Women’s Health NSW has been funded to supply a business case for additional annual funding. What additional information is required, considering Women’s Health NSW provided a detailed breakdown of funding needs in its 2022-2023 budget submission?
- 133. Will the business case look at a funding model that will address the substantial waiting lists most Women’s Health Centres are experiencing?
- 134. What is the timeframe for the delivery of the business case?
- 135. What is the timeframe for the NSW Government to respond to the business case?

**ANSWER**

**132-135.**

In 2021-22, the Minister for Health provided additional one-off funding of \$200,000 to Women’s Health NSW to develop a business case for further investment into women’s health centres. The scope and timeframes for the business case are being managed by Women’s Health NSW.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Illawarra Women’s Trauma Recovery Centre**

136. What was the process for assessing the old Port Kembla Hospital site as suitable for the Illawarra Women’s Trauma Recovery Centre?
- a. Would any work have to be undertaken to remediate the site ahead of building?
  - b. What aspects of the site make it suitable?
137. Will the NSW Government commit to fund building the centre?
- a. If not, why not?
  - b. If so, how much?

**ANSWER**

**136 a. – b.**

I am advised:

NSW Health are working closely with the Illawarra Women’s Health Centre to identify a suitable location for the new Women’s Trauma Recovery Centre as part of the master planning process for the old Port Kembla Hospital site.

**137 a. – b.**

The NSW and Australian Governments are working with the Illawarra Women’s Health Centre to identify capital funding requirements for the Women’s Trauma Recovery Centre.

**Women NSW**

138. What is the total budget for Women NSW?
139. Women NSW now has funding for 26 roles. When will the additional 18 staff be in place?
140. What particular projects will Women NSW staff be working to implement in the 2022-2023 financial year?
141. As there will be a team dedicated to work on “evidence and evaluation”, which projects in particular will be evaluated in 2022-2023?
- a. How will the NSW Women’s Strategy be tracked/monitored?

**ANSWER**

**138.** The NSW Government has invested more than \$60 million for Women NSW over four years (2022-2026).

**139.** All roles have been advertised and interviews are currently taking place.

**140.** Women NSW will be working on a range of policy issues, grant programs, communications and events related to advancing the key priorities of the NSW Women’s Strategy and Women’s Economic Opportunity statement.

**141.** Women NSW will provide research support to the NSW Government and cluster agencies, update the Gender Equality Dashboard, and support the monitoring of grant programs in addition to the NSW Women’s Strategy.

**141a.** Women NSW will continue to coordinate the tracking and monitoring of the NSW Women’s Strategy

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Women’s action plans**

142. As all NSW Government agencies will be required to develop a women’s action plan as an outcome of the Women’s Opportunity Statement, how will these plans be developed?
- a. Will the work be undertaken by Women NSW?
    - i. If not, will the work be undertaken by each individual government agency?
143. Will the plan format be set by Women NSW or will each individual agency create their own unique action plan?
144. What will the timeframe be for the creation of these plans?
145. Will the action plans have measurable actions/outcomes?
- a. If so, how will their success be measured?
146. Will the plans be made publicly available?

**ANSWER**

**142.** Women’s Action Plans will be developed by all NSW Government agencies with the support of Women NSW.

**143.** Women NSW will develop guidance for agencies to apply.

**144.** Women’s Action Plans will be developed from 2023 onwards.

**145.** Yes. Women’s Action Plans will include outcomes and indicators of success for agencies to track.

**146.** Yes.

**Women’s Strategy**

147. How much did the evaluation of the current Women’s Strategy cost?
148. How many people in total were consulted as part of the creation of the new NSW Women’s Strategy?
- a. How many people attended the NSW Women’s Strategy Consultations?
  - b. How many people completed the online survey?
  - c. How many people made contact with Women NSW to request to make a direct submission?
    - i. How many people provided a direct submission?
149. Will the new Strategy set Key Performance Index targets?
- a. If so, what will they be?
    - i. How will they be measured?

**ANSWER**

**147.** \$50,000 (excluding GST).

**148.** 2,100.

**148 a.** 314.

**148 b.** 1796.

**148 c.** 15 and 15 submissions were received.

**149.** This is yet to be determined.

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

**Respect at Work Taskforce**

150. What is the current status of the Respect at Work Taskforce?
151. What is the membership of the Respect at Work Taskforce?
- a. What specific actions will the taskforce be setting out to achieve?
    - i. By what process will these actions be achieved?
152. Has the Minister for Women participated in the creation of the Respect at Work Taskforce?
- a. If so, what role has she played?
153. Has Women NSW participated in the creation of the Respect at Work Taskforce?
- a. If so, what role has it played?

**ANSWER**

This is a matter for the Minister for Fair Trading.

**Return to Work Program**

154. How many women participated in the Return to Work program in:
- a. Phase 1?
  - b. Phase 2?
  - c. Phase 3?
155. What has been the total investment in the program?
156. How many women claimed the maximum \$5000 amount available?
157. Has the full allocation of each phase been spent?

**ANSWER**

**154.** 2227 women participated in Phase 1 of the Return to Work Program. Phase 2 was specifically targeted at victim-survivors of domestic and family violence. Women in these circumstances will continue to be a priority in Phase 3 which is currently open.

**155.** \$10 million investment over 2020 to 2022. \$32 million has been allocated in the 2022-23 Budget for financial years 2022-23 and 2023-24.

**156.** 588.

**157.** The Return to Work Program is currently open.

**Equity Taskforce**

158. How will the NSW Government work with the Federal Government's Women's Economic Equality Taskforce?
159. Who will represent NSW on the Taskforce?

**ANSWER**

**158-159.** Information can be found here:

<https://ministers.pmc.gov.au/gallagher/2022/inaugural-womens-economic-equality-taskforce-meet-first-time>

**Grants for women**

160. What grants are available for women?

**Portfolio Committee No.2 – Health  
Budget Estimates  
Responses to supplementary questions  
Women, Regional Health and Mental Health – 6 September 2022**

---

161. For each of the financial years 2022/2023, 2021/2022 and 2020/2021:

- a. What was the maximum value of each grant?
- b. What was the total budget for each grant program?
- c. How many applications were received for each grant program?
- d. How many applications were granted in each program?

**ANSWER**

**160.**

There are a large number of grants available to women across NSW. Women NSW administers the Investing in Women and Women's Week grants programs.

**161.**

Information about the grants programs is available here: <https://www.nsw.gov.au/women-nsw>