

NSW Health

# Regional Health Strategic Plan 2022–2032

Progress Snapshot  
2022–23



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NSW Ministry of Health  
1 Reserve Road  
ST LEONARDS NSW 2065  
Tel. (02) 9391 9000  
Fax. (02) 9391 9101  
TTY. (02) 9391 9900  
[www.health.nsw.gov.au](http://www.health.nsw.gov.au)

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The NSW Ministry for Health acknowledges the traditional custodians of the lands across NSW. We acknowledge that we live and work on Aboriginal lands. We pay our respects to Elders past and present and to all Aboriginal people.

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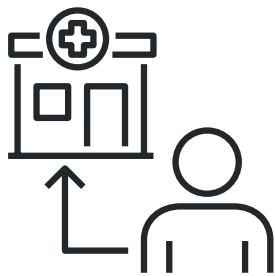
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# Key Achievements

In the first year of the Regional Health Strategic Plan (2022–23 financial year) we achieved:

## 1,490

more staff (full time equivalent) employed in regional local health districts



## 59%

increase in new patients accessing the Isolated Patients Travel and Accommodation Assistance Scheme

## 30%

increase in Rural Generalist medical trainees



## 10%

increase in regional webpage visits



## 8%

increase in nurse practitioners in regional local health districts



# Introduction

NSW Health is committed to keeping our communities informed and engaged, and that includes providing regular updates on progress to our staff, stakeholders and communities.

This Progress Snapshot for 2022–23 highlights work being undertaken to implement the **NSW Regional Health Strategic Plan 2022-2032** (the Plan) including key achievements against the strategic priorities.

Progress is outlined against the 19 targets set out for the first three years of the Plan. While this first snapshot shows there is still more to be done to improve health outcomes and access to health services, it also highlights significant progress in many key areas.

From a virtual intensive care unit linking patients in the Far West of NSW with specialist clinicians at Sydney's Royal Prince Alfred Hospital, to a healthy lunchbox program designed in regional NSW now being shared across the nation, the priorities of the Plan are being brought to life.

The Plan is a blueprint for the future provision of health services that understands, and celebrates, the diverse and unique nature of regional, rural and remote communities.

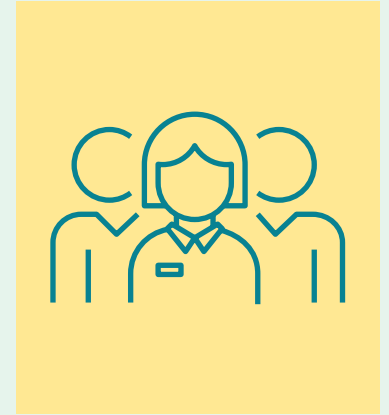
The Plan identifies six strategic priorities to:

- Priority 1:** Strengthen the regional health workforce
- Priority 2:** Enable better access to safe, high quality and timely health services
- Priority 3:** Keep people healthy and well through prevention and education
- Priority 4:** Keep communities informed, building engagement, seeking feedback
- Priority 5:** Expand integration of primary, community and hospital care
- Priority 6:** Harness and evaluate innovation to support a sustainable health system.

The Plan aligns closely with the NSW Health state-wide strategy **Future Health: Guiding the next decade of health care in NSW 2022–2032** and the **NSW Health Workforce Plan 2022–2032**. Continued collaboration and alignment of these strategic plans, and the new 10-year Aboriginal Health Plan (under development) will lead to shared outcomes that improve health services and health outcomes for people living in regional NSW.

The Regional Health Strategic Plan includes actions that address the recommendations from the Rural Health Inquiry and reaffirms the NSW Government's commitment to improving health outcomes for all people living in rural, regional and remote NSW.

Across regional NSW, local health districts and other key stakeholders are putting the Plan into action to improve health outcomes for their communities.



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# Priority 1: Strengthen the regional health workforce

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# 1

NSW Health recognises the tireless efforts and commitment of all staff who work to deliver health care across regional, rural and remote NSW.

We acknowledge our regional health workforce requires boosting to ensure staff are supported to thrive, and our existing and future staff are equipped with the skills they need.

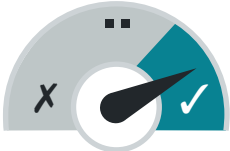



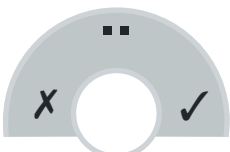
The **Rural Health Workforce Incentives Scheme** rolled out in July 2022, has significantly improved the attraction and retention of health staff in rural areas. At the end of 2022-23, around 850 new health workers had been recruited to regional, rural and remote locations in NSW using incentives under this scheme and more than 7,600 staff were retained with incentive payments.

NSW Health has developed and published **Rural Nurse Practitioner – A framework for service and training in NSW Health**. The framework supports rural LHDs to implement a Nurse Practitioner (NP) model of care within their services. In addition to the framework, NSW Health has committed funding for 20 Rural Generalist NP positions.

In 2022-23, NSW Health completed a **Health Staff Accommodation Feasibility Study**. The study looked at the availability of accommodation in regional LHDs and identified solutions to improve and increase accommodation to better attract and retain staff.

NSW Health also started to deliver new accommodation in Far West, Hunter New England, Murrumbidgee, Southern NSW and Western NSW LHDs. The accommodation will be modern, sustainable and fit-for-purpose and will help to attract staff in these regions.

In November 2022, NSW Health established the **Rural Doctors Employment Arrangements Working Group** to look at ways to strengthen working conditions, contracts and incentives for General Practitioner Visiting Medical Officers (GP VMOs). A vital part of the regional, rural and remote workforce, GP VMOs practise as a GP in the community while also working at the local hospital.

Target	Has progress been made in the first year of the plan?	Description of progress at the end of Year 1 (30 June 2023)
<b>PRIORITY 1</b>		
<p><b>There are 3,800 more staff working in regional local health districts by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>The number of staff working in regional LHDs increased by 1,491 full time equivalent (FTE) staff at the end of the first year of the Plan compared to the same period the year before.</p>
<p><b>There are 100 more Nurse Practitioners working in regional local health districts by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>The number of Nurse Practitioners in regional LHDs increased by 10.3 FTE staff at the end of the first year of the Plan compared to the same period the year before.</p>
<p><b>At least 85% of the Rural and Regional Health Career Scholarships have been taken up by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>In 2022-23, 81% of the Rural and Regional Health Career Scholarships were taken up.</p> <p>This year was the first year that the new suite of scholarships was available. NSW Health promoted the scholarships widely, through universities, regional LHDs and other regional groups. It is expected uptake of scholarships will grow over time as awareness of the scholarships increases.</p>
<p><b>All regional LHDs have achieved and maintained at least 4% or greater representation of Aboriginal staff employed by 2026</b></p>	 <p><b>NO CHANGE</b></p>	<p>At the end of 2022-23 four of the nine regional LHDs had 4% or greater Aboriginal workforce employment: Far West, Hunter New England, Mid North Coast and Western NSW.</p> <p>This is the same number of LHDs as 2021-22. NSW Health has a range of strategies to increase Aboriginal employment in regional areas, and these will continue to be rolled out in 2023-24.</p>
<p><b>Access to new and existing staff accommodation in regional LHDs is increased by 10% by 2026</b></p>	 <p><b>STATUS NOT KNOWN YET</b></p>	<p>NSW Health conducted an initial stocktake of health staff accommodation in regional LHDs in 2022-23 which showed there are a total of 792 health staff accommodation assets across regional LHDs. Another stocktake will be done in 2023-24 to assess the increase in staff accommodation.</p> <p>In 2022-23, most regional LHDs worked to increase their available health staff accommodation by buying, leasing or building new sites to attract and retain staff.</p>



## Scholarship a real ‘lifesaver’ for Chelsea

Chelsea Devenish couldn't be happier working at Orange Base Hospital. She loves the support she gets from her co-workers, the variety and depth of skills she is gaining, and the country feel of the friendly regional community.

Regional to her core, Chelsea is a local of Scone in the Upper Hunter Valley. She studied nursing at Charles Sturt University's Port Macquarie campus and is now living and working in the Central West of NSW.

Chelsea is a recipient of NSW Health's New Graduate Nursing and Midwifery Relocation Scholarship and is grateful for the support she has received to help with relocation costs and living expenses.

“Moving to a new town and needing furniture, a rental bond and facing other living expenses, this was a lifesaver. It helped take away the financial stress and made the transition into a new job so much easier.



“Working in a larger base hospital and knowing we are also supporting the smaller health services and people from across the region is really great. I'm not going anywhere!”



## Nurse Practitioners making a difference

Nurse Practitioners, like Elsie Mari from Central Coast Local Health District, are expert, highly qualified nurses who can work independently and collaboratively at an advanced level of practice. Nurse Practitioners assess and diagnose patients, request and interpret tests, prescribe therapies and medications, and receive and make referrals to other health practitioners.

From neonates to aged care, emergency to women's health and rural healthcare, Nurse Practitioners deliver care across the life span in a broad range of health settings.

“I have the privilege and honour of providing compassionate, individualised care – holding someone's hand and just being present – as well delivering complex clinical expertise,” said Elsie.

## Where will we focus next?

NSW Health is developing a **refreshed Workplace Culture Framework** in consultation with all health agencies to further improve workplace culture and enhance patient care and staff satisfaction. Fundamental to this work is further embedding the NSW Health CORE values of Collaboration, Openness, Respect and Empowerment. The Culture Framework refresh supports priorities in NSW Health strategies including Future Health 2022-2032, the NSW Health Workforce Plan 2022-2032, the NSW Regional Health Strategic Plan 2022-2032, and Health initiatives including **Elevating the Human Experience**.

In line with the 2023-24 Budget, health workforce initiatives will be rolled out in regional NSW over the next 12 months, including:

- Addressing paramedic shortages and improving ambulance response times with 500 new regional paramedics through a \$438.6 million investment over four years.
- Beginning the introduction of Safe Staffing levels, including with a \$419.1 million statewide investment over four years to deliver better outcomes and experiences for patients, including in rural and regional hospitals.
- Doubling of the incentive payment for healthcare workers relocating to work in hard to fill and critical vacancies in regional, rural and remote areas from \$10,000 to up to \$20,000.
- Delivering salary packaging benefits for eligible NSW healthcare workers at a cost of \$170.8 million over four years.
- \$121.9 million will be invested over five years to support 4,000 annual scholarships for nurses, midwives, doctors, and a range of other clinical roles including paramedics, allied health professionals and Aboriginal health practitioners, with over half to be regional, rural and remote areas.



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## **Priority 2:** Enable better access to safe, high quality and timely health services

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# 2

NSW Health is committed to ensuring all people living in regional, rural and remote communities have access to safe, high quality care, regardless of where they live.



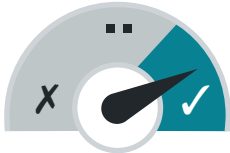
There have been significant improvements in making health services more accessible and investing in the future of regional health facilities.

An example of this is the **Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS)**.

The scheme ensures people living in rural, regional and remote areas of NSW have access to timely, high quality health care by helping pay for some of their out-of-pocket expenses for travel and accommodation. In the first year of the Plan, NSW Health increased the travel subsidy from 22 to 40 cents per kilometre, increased accommodation subsidies and expanded the eligibility criteria to include patients participating in non-commercial clinical trials, or attending high risk foot services, highly specialised publicly funded oral health clinics in NSW and ophthalmologists.

Virtual Care continued to expand across regional NSW in 2022-23 including the **NSW Telestroke Service** which provides people across NSW with rapid virtual access to specialist stroke diagnosis and treatment. The service helps local emergency physicians connect with expert stroke clinicians to determine the most appropriate treatment for each patient. It links staff in rural and regional public hospitals virtually with a network of specialist stroke doctors, helping to save lives and improve health outcomes. The **NSW Telestroke Service** connects 23 rural and regional hospitals across NSW with a network of virtual specialist stroke doctors, managed by the Prince of Wales Hospital.

In 2022-23, NSW Health developed **Connecting, Listening and Responding: A Blueprint for Action – Maternity care in NSW**. The Blueprint supports a key action from the Rural Health Inquiry, to help strengthen maternity care in regional NSW. The Blueprint is NSW Health's commitment to ensure all women in NSW receive respectful, evidence-based and equitable maternity care that improves experiences and health and wellbeing outcomes. The Blueprint aims to strengthen maternity care to ensure services are collaborative, equitable and woman-centred, while acknowledging and striving to address the contemporary challenges for maternity services in NSW.

Target	Has progress been made in the first year of the plan?	Description of progress at the end of Year 1 (30 June 2023)
<b>PRIORITY 2</b>		
<p><b>75% of applications for the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS) are completed online to ensure faster payments to patients by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>In 2022-23, 31% of IPTAAS applications were completed online. This is an increase of 4 percentage points from the year before. While there is work to be done to increase the proportion of applications submitted online, the number of overall IPTAAS users has increased significantly as awareness of the program has grown.</p>
<p><b>There will be over 45,000 patients accessing IPTAAS each year by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>In 2022-23, the number of patients accessing IPTAAS increased by 40.8% from 23,229 people in 2021-22 to 32,700 in 2022-23.</p>
<p><b>Maintain 90% 'very good' or 'good' patient experience rating for virtual care in regional areas by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>The target is on track with 91% of rural* patients reporting 'very good' or 'good' experiences with virtual care in 2022.</p> <p>This data includes responses from the most recent Bureau of Health Information (BHI) Virtual Care Survey in 2022.</p> <p>*BHI responses are reported based on the Accessibility/Remoteness Index of Australia (ARIA), which categorises locations as regional or remote based on how geographically close they are to services. Patient responses are broken down into 'rural' (inner and outer regional, remote and very remote) and 'urban' (major cities).</p>

## Broken Hill virtual intensive care (vICU) service

The vICU service links critically ill patients and their Far West Local Health District (LHD) clinicians with Sydney-based specialists. In 2022-23, the vICU had its first full year in operation.

This model uses remote monitoring and video conferencing to connect clinicians, patients and carers in Broken Hill Service with intensive care staff at Sydney's Royal Prince Alfred Hospital and virtual hospital, rpavirtual.

vICU allows remote communities to prioritise treatment and provide continuous high-definition monitoring of multiple critically ill patients.



The partnership between Sydney and Far West LHDs shows how the highly networked NSW Health system continues to collaborate to improve patient experiences and health outcomes throughout the state.

## A helping hand for Bob and Pat

Armidale couple Bob and Pat Hanson thought they'd have to budget for large travel and accommodation costs when Bob learned he needed cancer treatment in Coffs Harbour.

"When Bob was diagnosed with cancer, it was a very stressful and overwhelming time as his treatment was going to be in Coffs, 180km away, and he needed six weeks of radiation treatment," Pat said.

Pat contacted their local Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS) office and was assisted through the application process by team member Anneliese, who Pat said was "just amazing".

"It was very fulfilling being able to help Bob and Pat at such a difficult time. To be able to assist patients financially with their travel and accommodation costs to help them access life-saving treatments is very rewarding," Anneliese said.



Through IPTAAS, the couple was able to stay in Coffs Harbour, easing their concerns around travel and giving them the opportunity to really focus on Bob's health.

"I hope that patients who receive assistance through IPTAAS feel some sort of ease when going through such a difficult time in their lives," Anneliese said.

IPTAAS provides financial subsidies to contribute to covering the out-of-pocket costs of people living in rural, regional and remote NSW accessing health services and treatment not available locally. The scheme continues to expand to support more people.

## Where will we focus next?

Improving access to and awareness of the **Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS)** will remain a key focus area, with work underway to simplify the application process and make it easier for people to complete applications online. Increasing awareness of IPTAAS, particularly for Aboriginal and Torres Strait Islander people and communities as well as people from culturally and linguistically diverse backgrounds will also be a priority for the next year of the plan.

NSW Health will continue to partner with NSW Ambulance on the review of the **statewide patient allocation matrix**, to ensure ambulance patients are taken to the most appropriate emergency department based on their clinical condition and location. NSW Health recently completed an intensive 12-week scoping project and developed an implementation roadmap to inform future enhancements to the matrix, which will be a key focus for 2023-24.

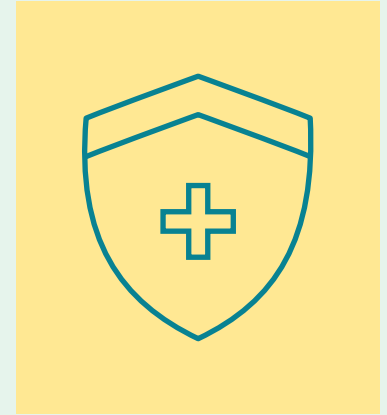
The **Virtual Rural Generalist Service (VRGS)** is expanding to Southern NSW Local Health District from July 2023 to support local medical and nursing staff to deliver virtual and face-to-face care to rural communities, keeping residents closer to home and on Country. The VRGS was developed by Western NSW Local Health District (WNSWLHD) and delivers a comprehensive virtual service, the first of its kind in Australia. VRGS doctors work both virtually and in person to provide rural generalist medical coverage or hospital and multipurpose services (MPS) and fatigue management when a local visiting medical officer (VMO) is not available.

NSW Health will collaborate with key stakeholders to develop an implementation plan for **Connecting, Listening and Responding: A Blueprint for Action - Maternity Care in NSW**. The implementation plan will focus on the first phase of priorities to further strengthen maternity care in NSW, including in regional and rural areas.

NSW Health will **continue to embed virtual care** to improve access to safe, high quality and timely health care. The Remote Patient Monitoring initiative will deliver technical foundations for a state-wide remote patient monitoring solution within NSW Health. The \$20 million initiative is currently being rolled out across the state, and by 2024 we will see patients across NSW having access to this technology.

Improving **transport options to access healthcare** in regional NSW will be a key priority for 2023-24. NSW Health will undertake a review of the Transport for Health policy to identify opportunities to improve transport options in regional, rural and remote areas, to ensure people can more easily access health services. NSW Health will also review the performance of Non-Government Organisation (NGO) community transport providers that receive grant funding after June 2024 and work collaboratively with LHDs and Transport for NSW on the future direction of the NGO Grants Program. NSW Health will continue to work with partner agencies like Transport for NSW to improve access to public bus services through the 16 Regional Cities Improvement Program. In the coming 12 months, HealthShare NSW will work to transition health transport services in regional local health districts to Patient Transport Services, to ensure services are consistent and joined up across districts.

The NSW Government will continue to **build for the future** through new and upgraded infrastructure to improve access and quality of health services across regional New South Wales. The 2023-24 NSW Budget provided funding to improve infrastructure at a number of regional health sites, including Albury-Wodonga Regional Hospital, Eurobodalla Regional Hospital, Bathurst Hospital, Grafton Hospital, Griffith Hospital, Moree Hospital, Glen Innes Hospital, Temora Hospital and Milton Ulladulla Hospital.



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**Priority 3:** Keep people healthy and well through prevention, early intervention and education

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3



Understanding the social and environmental determinants of health so we can keep people healthy and prevent illness is a priority in the Plan.

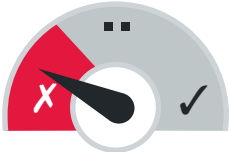
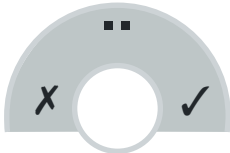

This requires working effectively across disciplines, sectors and governments to understand causes of ill health and aligning governance structures so we can tackle this as a system. Strong partnership and consultation with consumers and communities in regional NSW is needed so we can learn together and develop long-lasting solutions with positive outcomes.

In 2022, a new communications strategy was developed as part of the **Rural Adversity Mental Health Program (RAMHP)**, to increase awareness of mental health and local services among rural communities. There are 20 RAMHP coordinators in regional, rural and remote NSW who link people to local mental health services and resources and support mental health and wellbeing in times of natural disasters and adversity.

The **NSW Healthy Eating and Active Living Strategy 2022-2032**, published in September 2022, continues NSW Health's investment in health and wellness for the people of NSW. It outlines steps for preventing overweight and obesity and achieving better health outcomes for all, including targeted initiatives in regional, rural and remote communities where there can be additional barriers to leading a healthy lifestyle.

The **Central West Aboriginal Mental Health and Wellbeing project** continued in its second year in 2022-23 to address the current service gaps in trauma-informed wellbeing services for Aboriginal people in central west NSW. It is a collaborative initiative co-designed by the Ministry of Health, Western NSW Local Health District, and four Aboriginal Community Controlled Health Organisations (ACCHOs). The project supports a regional workforce model between stakeholders that is suitable to the community.

The **NSW Cancer Plan 2022-2027** commenced in 2022-23 to provide a whole-of-sector perspective on cancer control and describe how key stakeholders across the state will work together to deliver better outcomes. Regional, rural and remote communities are a focus population within this Plan. A periodically reviewed Implementation Plan supports the NSW Cancer Plan and provides a high-level snapshot of key statewide activities to be delivered to address the priorities and achieve the goals.

Target	Has progress been made in the first year of the plan?	Description of progress at the end of Year 1 (30 June 2023)
<b>PRIORITY 3</b>		
<p><b>75% of mental health patients in regional NSW are followed up within 7 days after discharge from hospital by 2026</b></p>	 <p><b>REGRESS</b></p>	<p>In 2022-23, 71.9% of mental health patients in regional LHDs were followed up within 7 days of discharge. This is a decrease compared with the year before, when 74.4% of patients were followed up within 7 days of discharge. NSW Health is continuing to implement strategies to improve mental health patient follow up after discharge.</p>
<p><b>Increase the number of pregnant women in regional NSW quitting smoking by the second half of their pregnancy by 4 percentage points each year through to 2026 by 2026</b></p>	 <p><b>STATUS NOT KNOWN YET</b></p>	<p>Due to reporting timeframes, only baseline year data is available for this target. In 2021-22 (the year before the Plan commenced) the percentage of pregnant women who smoked at the beginning of their pregnancy and quit smoking by the second half of pregnancy was 32.7%.</p>
<p><b>Maintain the number of referrals to the Get Healthy Service – Get Healthy in Pregnancy to over 5,000 referrals in regional NSW per year by 2026</b></p>	 <p><b>REGRESS</b></p>	<p>In 2022-23, there were 4,564 referrals to the Get Healthy in Pregnancy service across the nine regional LHDs, which is slightly lower than the target. However, this includes four LHDs that exceeded their local target for referrals. NSW Health is continuing work to increase the number of women referred to the program which offers high quality advice about ways to stay healthy during pregnancy.</p> <p>The Get Healthy in Pregnancy service improves the health outcomes of both women and babies by supporting pregnant women across NSW to meet nutrition and physical activity recommendations, abstain from alcohol, access support to quit smoking, stay healthy during their pregnancy and return to a healthy weight after birth.</p> <p>In July 2023, NSW Health launched enhancements to the Get Healthy Service with a new provider, Diabetes Australia. The enhanced service offers expanded virtual engagement options, an Aboriginal Health Coach and streamlined referral processes, which will improve patient and clinician experiences with the program.</p>

## Digital lunchbox program improving child nutrition

Every day across NSW, more than 850,000 children consume an average of 3.5 serves of unhealthy food in their school lunchbox, increasing risks of obesity and Type 2 diabetes.

Hunter New England Local Health District co-designed an innovative healthy school lunchbox program called SWAP IT which is helping improve the nutritional health of nearly a million children in Australia each day.

SWAP IT is a free evidence-based healthy lunchbox program. The program supports parents and carers to swap what is packed in their child's lunchbox from sometimes foods to everyday foods.

This approach has provided world first critical evidence to guide service provision and improve local and global health outcomes.

SWAP IT started as a pilot project in Hunter New England and it is now being scaled up at sites across Australia.



## Mobile Breast Screen assessments saving travel time

BreastScreen NSW provides free breast screening services to women aged 40 and over, with around 31,000 women screened each year across Murrumbidgee and Southern NSW local health districts. About one third of those women are currently being screened in mobile vans in rural and remote parts of the districts.

The large geographical nature of the service means that clients from rural and remote areas who are recalled for further assessment after their screening mammograms had to travel long distances. Until August 2022, these tests could only be conducted at Albury, Wagga Wagga and Queanbeyan.

Following consultation with key stakeholders and providers, BreastScreen NSW started conducting assessment clinics using remote telehealth on the mobile van, the first of its kind in NSW, saving hours in travel time and costs for clients who previously could not access testing locally.



## Where will we focus next?

NSW Health will continue to work with Department of Regional NSW and other government agencies to contribute to a **coordinated drought plan** to improve drought preparedness and resilience in regional, rural and remote communities. In the 2023-24 Budget, \$24.9 million over 4 years was committed to deliver specialist mental health Disaster Recovery Clinicians across drought and disaster affected communities in NSW.

NSW Health will continue to lead and participate in exercises to test current emergency arrangements in regional areas and **strengthen our preparedness for emergency and disaster situations**. This includes the regional cross-agency Evacuation Centre exercises led by the Department of Communities and Justice.

There will be continued education and training opportunities across regional NSW in 2024. In 2023-24, we will keep **expanding cancer services** in regional, rural and remote NSW. Cancer centres are expected to open in Griffith and Taree in late 2023, and an integrated cancer care centre will be opened at the new Tweed Valley Hospital in early 2024.

**Improving pregnancy and maternity care** in regional NSW through initiatives like Get Healthy in Pregnancy, the First 2000 Days Implementation Strategy and Brighter Beginnings will remain a key focus area. As part of its commitment to Closing the Gap, NSW Health will continue to work with key stakeholders including the Aboriginal Health and Medical Research Council to strengthen culturally safe maternity services across regional NSW.

We will continue to expand **Safe Havens** across regional NSW to improve access to mental health care. Safe Havens are a non-clinical alternative for people in distress or who are having suicidal thoughts to go to for support. Peer-support workers at the frontline of Safe Havens across NSW come from many different cultural and career backgrounds, many of which have their own lived experience with mental illness. There are currently 19 Safe Havens in NSW, with 11 of these based in regional areas. A new Bega Safe Haven is due to open in late 2023, providing access to dedicated peer-led suicide prevention support for Bega and the local community.

The **Aboriginal Communities Water and Sewerage Program** is a joint initiative of the NSW Government and the NSW Aboriginal Land Council which aims to ensure that regional, rural and remote Aboriginal communities have high quality water and sewage services. NSW Health will continue this program in 2023-24 and work closely with Aboriginal communities to ensure water supplies are safe and free of contaminants.



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**Priority 4:** Keep communities informed, build engagement, seek feedback

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We learn from the feedback and experiences of our staff and communities and connect with them regularly to ensure services are aligned to specific needs.

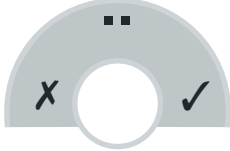
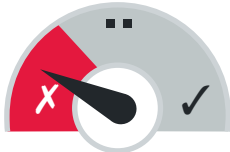
Consultation and engagement across diverse populations, including Aboriginal people and communities, are essential for this priority to be successful.

Engaging with regional communities and sharing information about work underway to implement the Plan has been an important focus in 2022-23. NSW Health has engaged stakeholders in a range of ways in the first year of the Plan, including via the **Regional Health webpage** which had a 9.5% increase in web traffic compared to last year (2021-22).

In 2022, NSW Health undertook a comprehensive **review of local health committees** and developed five guiding principles for strengthening community engagement across regional NSW. The **Strengthening Local Health Committees** report was published in February 2023. The report found local health communities play a vital role in supporting service planning and delivery in regional NSW, and identified five guiding principles to be embedded in all regional LHDs.

The **Regional Health Topic Page** on the **HealthStats NSW** website was developed in 2023, to share key trends in health outcomes across all nine regional local health districts. The page provides publicly accessible data on health outcomes aligned to the six strategic priorities of the NSW Regional Health Strategic Plan.

At the end of 2023, the **Regional Health Division embarked on a roadshow** to share the Regional Health Plan with staff and executive teams in regional local health districts. Several districts have established local working groups to implement Regional Health Plan initiatives in their region and strengthening of existing practices to achieve the priorities in the Plan. The Regional Health Division has engaged with a range of stakeholders over the past 12 months including regional community groups, local government, Aboriginal Community Controlled Organisations (ACCHOs), Primary Health Networks, local councils and other partners in healthcare.

Target	Has progress been made in the first year of the plan?	Description of progress at the end of Year 1 (30 June 2023)
<b>PRIORITY 4</b>		
<p><b>All regional local health districts have an effective local community engagement model that elevates the voice of communities and consumers in health service planning and outcomes by 1 July 2024</b></p>	 <p><b>STATUS NOT KNOWN YET</b></p>	<p>In 2022, the Regional Health Division led a review of local health committees and developed five guiding principles for effective community engagement through this model. The five guiding principles are being implemented across all regional LHDs. Regional Health Division is working closely with LHDs to monitor progress and assess the effectiveness of community engagement models in place.</p> <p>The Regional Health Division will seek a formal update from all regional LHDs in 2024 to understand how the guiding principles have been implemented to embed the local health committee model for effective community engagement.</p>
<p><b>By 2026, further improve the cultural appropriateness of health services delivered to Aboriginal people by ensuring that all staff in regional local health districts complete Aboriginal cultural training: Respecting the Difference by 2026</b></p>	 <p><b>REGRESS</b></p>	<p>In 2022-23, 73.9% of staff in regional LHDs had completed the online Respecting the Difference training, and 55.0% of staff had completed the face to face training.</p> <p>In July 2022, the training became mandatory for all NSW Health staff. Completion rates were slightly lower in 2022-23 than the year before, as the training requirement was extended to more staff.</p> <p>NSW Health is supporting staff to complete mandatory Respecting the Difference training to achieve 100% compliance across regional LHDs.</p>

## The art of engagement

Knowing that many Aboriginal people encounter barriers to accessing healthcare, the project team of the Tweed Valley Hospital development set out to make healthcare more inclusive.

They collaborated with Aboriginal staff and communities to make sure the new hospital in Northern NSW Local Health District will be a culturally sensitive and safe space for everyone.

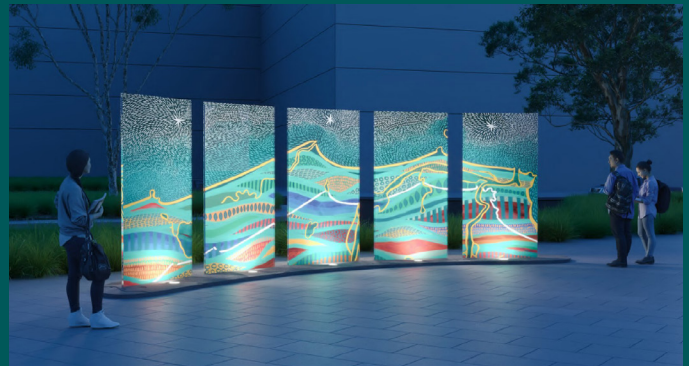
The priority for Linda Brandon, Communications and Engagement Manager, and the team has been to build trust and inclusivity.

“We wanted to make sure the input of our Aboriginal Health Service staff and community members was deeply valued and considered throughout all stages of development,” said Linda.

“An important part of the project is the Arts and Culture Program, which has been developed with local Aboriginal artists to create a safe and welcoming environment for Aboriginal staff and community members at the hospital.”

The collaboration with the Aboriginal Community Working Group has led to some fantastic outcomes, including an Aboriginal ‘Welcome’ artwork, ‘Healing Together’ garden sculpture, and Aboriginal language translations of more than 30 new signs.

“The inclusive artwork in the Aboriginal meeting room, where the Aboriginal Liaison Officer will be based, was a highlight for the staff who have been involved,” said Linda.





## Where will we focus next?

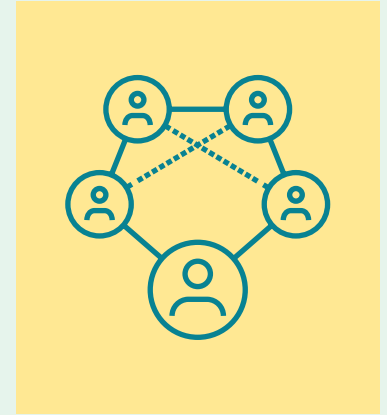
The Regional Health Division will continue working closely with all nine regional local health districts to embed the **five guiding principles for local health committees into practice**. NSW Health will develop a capability program as part of this work, to support community engagement through local health committees.

In the coming 12 months, NSW Health will continue to build engagement with regional stakeholders through the **Regional Health webpage** on the NSW Health website. Updates on performance against the targets and key projects in the Regional Health Plan will be published on the webpage to keep the community informed on progress.

The Regional Health Division will continue to collaborate with regional communities, partner organisations, NSW Health colleagues and cross-government stakeholders to deliver on the priorities of the **Regional Health Strategic Plan**.

## Five guiding principles for local health committees





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## **Priority 5:** Expand integration of primary, community and hospital care

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# 5

To truly integrate services across state, Commonwealth and non-government sectors, we need strong partnerships, effective communication, clearly defined roles and accountability.

Integrating care across all sectors will ensure that patients and clients of NSW Health receive the best care possible through seamless delivery.

The **NSW Rural Generalist Single Employer Pathway (RGSEP)** is a Single Employer Model pathway for junior doctors seeking a career as a rural generalist. Trainees on the pathway are employed for up to four years by a regional Local Health District (LHD) while completing training in primary care and hospital settings. Extensive work has been done in the first year of the Plan to start expanding RGSEP across regional NSW, including engaging regional General Practices, and setting up recruitment processes ahead of trainees commencing at the beginning of 2024.

The **Collaborative Care Program** is a community-centred and place-based planning approach to address primary health care challenges in remote and rural NSW. To date, this program has been implemented across 5 sub-regions in Murrumbidgee, Western NSW and Far West LHDs. It has been led by the Rural Doctors Network in collaboration with LHDs, Primary Health Networks, Aboriginal Community Controlled Health Organisations, and other community stakeholders. In 2022-23, the Regional Health Division commenced a Scalability Assessment of the Collaborative Care Program to look at how to effectively expand the program to more areas in regional NSW.

Target	Has progress been made in the first year of the plan?	Description of progress at the end of Year 1 (30 June 2023)
<b>PRIORITY 5</b>		
<p><b>Deliver at least 10 urgent care services that are available to residents in regional NSW by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>There are currently three urgent care services in regional NSW: Bulli, Wauchope and a virtual children's urgent care service run by Sydney Children's Hospitals Network which has been rolled out in Hunter New England LHD and will be expanded statewide by the end of 2023.</p> <p>NSW Health will establish 25 urgent care services across the state by 2025 and several of these will be based in regional areas. Plans are underway to establish services in Tweed Heads, Wagga Wagga, Long Jetty and the Mid North Coast region. In addition to the NSW Health urgent care services, the Australian Government will establish 14 Medicare Urgent Care Clinics in NSW and nine of these will be based in regional areas.</p>
<p><b>Reduce preventable hospital visits in regional areas by at least 5 percentage points by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>In 2022-23, the proportion of preventable hospital visits in regional LHDs was 23.6%. This is a decrease of 0.7 percentage points compared to baseline (2021-22). NSW Health will continue working with our partners in the primary care sector to improve access to primary and community care and reduce potentially preventable hospitalisations.</p>
<p><b>Double the number of Collaborative Care models across regional local health districts by trialling and expanding on effective models by 2026</b></p>	 <p><b>NO CHANGE</b></p>	<p>In 2022-23, the Regional Health Division started a review of the Collaborative Care Program to understand how the approach can be expanded across regional NSW and whether the five models being piloted through the program can be implemented in other regional communities. The findings from this review will be used to establish new Collaborative Care sites in 2023-24.</p>

## Welcoming babies to Bourke

Birth on Country helps babies build a strong cultural connection to Country, but it is not always possible.

The Western NSW Local Health District Bourke Baby Project was initiated to support the connection for new mums and bubs and is now planning its third annual Welcome to Country Ceremony. The project is made possible through strong partnerships between government and non-government stakeholders and the community. Everyone in the community is invited to welcome little babies and even big 'babies' up to 21 years old!

Pat Canty, Manager of Partnerships and Community Engagement has been part of the Bourke Baby project since the very beginning.

“The ceremony is very important culturally and promotes inclusion and belonging in our community. It allows us to come together and share our Aboriginal culture with everyone and introduce all our babies to this great little community called Bourke,” said Pat.

The ceremony opens with an acknowledgement from Aboriginal Elders and is filled opportunities for babies to be welcomed into community and immersed in culture. There is even an opportunity to wash babies' feet in the Darling River water which flows through the town.

“Last year we had fathers bringing their babies up on stage to be welcomed by our Mayor and community Elder,” said Pat.

“With the help of our community groups and services, we're able to give babies a beautiful welcome and gift them items like bracelets made by Elders and a jar filled with dirt from Country that they can take with them wherever they go.”

Helping babies and parents have a closer connection to land can have a positive flow on effect on their health and wellbeing too.



## Where will we focus next?

In 2023-24, we will recruit the first cohort of trainee doctors to start on the **NSW Rural Generalist Single Employer Pathway** at the beginning of 2024. Up to 80 trainees can be recruited to the program, including the trainees already engaged in the program in Murrumbidgee Local Health District, where the Single Employer Model was first trialled.

In the coming year, NSW Health will continue working to make it easier for doctors in regional NSW to **work across the primary care and hospital sectors**. A NSW Health working group will review General Practitioner/ Visiting Medical Officer (GP VMO) work arrangements to improve attraction and retention. The Ministry of Health will also keep working with regional local health districts to streamline the credentialling process for GP VMOs to make it easier for doctors to work in our regional hospitals.

In 2023-24, NSW Health will start rolling out Urgent Care Services across regional and metropolitan NSW. The 25 Urgent Care Services will support people with urgent but non-life threatening health care needs outside hospital emergency departments. It is expected all 25 **Urgent Care Services** will be up and running by 2025.

In 2023-24, NSW Health will support Illawarra Shoalhaven Local Health District and the South Coast Women's Health and Wellbeing Aboriginal Corporation (Waminda) to plan for the **Birthing on Country** project. Phase 1 of the project is to implement a midwifery model of care. Minga Goodjaga Midwifery Practice (a group of privately practising midwives employed by Waminda) will provide labour and birth care to women at Shoalhaven District Memorial Hospital. The Waminda midwives currently provide antenatal and postnatal care in the community. Phase 2 of the project is to establish a birth centre in a local community hub, with Waminda midwives to provide antenatal, labour, birth and postnatal care. Phases 1 and 2 will be rolled out over the coming years.





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## **Priority 6:** Harness and evaluate innovation to support a sustainable health system

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# 6

Building a sustainable health system will help us future proof the way we deliver care in regional NSW for generations to come.




The Regional Health Strategic Plan is focused on improving health system sustainability through aligning funding models, investing in digital technologies, undertaking research and committing to environmental sustainability.

In 2022-23, NSW Health prepared to establish three Clinical Trial Support Units under the **Rural, Regional, and Remote Clinical Trial Enabling Program (R3-CTEP)**. The program will deliver increased and more equitable access to clinical trials for patients in regional, and remote NSW. The Australian Government's Medical Research Future Fund invested \$30.6 million in this program, improving access to innovative healthcare in rural, regional and remote NSW and ACT to support local health districts, Canberra Health Services and many other partners.

In September 2022, 10 **Net Zero Leads** were appointed across NSW Health, with six based in regional local health districts. Net Zero Leads act as change agents for the system and lead a network of like-minded peers working in partnership to develop and implement scalable low carbon models of care for NSW.

**NSW Health Sustainable Futures Innovation Fund** provided funding to staff employed within local health districts, speciality health networks, pillar or support organisations. The Fund was designed to build sustainable innovation capability and accelerate innovation projects that improve patient care and reduce our environmental footprint (either in emissions or waste). Six of the 17 grant recipients were from regional Local Health Districts.



Target	Has progress been made in the first year of the plan?	Description of progress at the end of Year 1 (30 June 2023)
<b>PRIORITY 6</b>		
<p><b>50% of regional general practices enrolled in the Lumos data system by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>By the end of 2022-23, 23% of regional general practices were enrolled in the Lumos program. This is an increase of 2 percentage points compared with the end of 2021-22.</p> <p>The Lumos program links primary care data from general practices with NSW Health data (including hospital data) to better understand the patient journey. It is particularly important to understand how and when patients use primary care in regional NSW to help improve health outcomes and access to care.</p>
<p><b>10% increase in the number of health sites that are exempt under section 19(2) of the Health Insurance Act 1973 (Commonwealth) across regional NSW to provide access to primary care in rural and remote areas by 2026</b></p>	 <p><b>REGRESS</b></p>	<p>The number of NSW Health facilities with Section 19(2) exemptions decreased from 48 in 2012-22 to 47 in 2022-23. One hospital with a current exemption became ineligible after its Modified Monash Model (MMM) rating was changed from 5 to 4. Only hospitals with an MMM rating of 5-7 are eligible for the exemption.</p> <p>The Regional Health Division has identified several new health facilities that are eligible to apply for an exemption. One new application was submitted in 2022-23 and is currently awaiting a decision from the Australian Government.</p>
<p><b>Deliver 3 clinical trial support units (CTSUs) in regional, rural and remote areas to deliver increased and more equitable access to clinical trials by 2026</b></p>	 <p><b>PROGRESS</b></p>	<p>In 2022-23, NSW Health commenced work to establish three Clinical Trial Support Units in regional NSW. The units will be based in Northern NSW, Southern NSW and Western NSW LHDs and it is expected they will start operating by 1 April 2024. The Office for Health and Medical Research is leading the project.</p>

## Meet the NSW Health Net Zero champions

Frontline staff are playing a critical role in NSW Health's transition to a future with net zero carbon emissions, by bringing their personal passion and commitment to new positions as Net Zero Leads.

A group of 10 clinicians from nursing, medicine and allied health are working to address known carbon hotspots and embed low-carbon models of care in their workplaces.

Six of the Net Zero Leads are based in regional NSW, including Dr Brian O'Connell, Emergency Staff Specialist, Mid North Coast Local Health District.

"Globally, if the health sector were a country, it would be the fifth biggest polluter on the planet, so as frontline staff we all have a crucial role to play in our net zero transition," Dr O'Connell said.

"I feel this program is a vital first step towards reducing healthcare's clinical carbon footprint. I can see NSW Health is really walking the walk and showing our staff we are taking this seriously" Dr O'Connell said.

**The team will act as change agents and lead a network of like-minded peers focused on developing, implementing and embedding scalable low-carbon models of care.**



**Dr Kate Charlesworth, Senior Advisor, Climate Risk and Net Zero Unit, NSW Ministry of Health, shared how exciting it is that the leads have been given the opportunity to take climate action into their own hands at work.**

"NSW Health is the first in any state government across Australia to establish a staff-led program like this. While initiatives such as solar panels and electric ambulances will be important in reducing carbon emissions, more than half of healthcare's emissions comes from clinical care, so we want staff to feel empowered and inspired to take action," Dr Charlesworth said.

**The six regional Net Zero Leads are based in Hunter New England, Mid North Coast and Western NSW Local Health Districts.**

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## Providing access to clinical trials closer to home

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The NSW, ACT, and Australian Governments are working together to improve access to innovative healthcare in rural and regional communities with a \$30.6 million investment to fund clinical trials in the bush.

The expanded network of new clinical trial support units across the regional local health districts of Northern, Western, and Southern NSW will be supported by ACT Health, Canberra Health Services and partnerships with academic institutions, industry, and local community.

Illawarra Shoalhaven LHD Director of Clinical Trials and Head of Medical Oncology Professor Lorraine Chantrill (pictured above with Illawarra Shoalhaven LHD Chief Executive Margot Mains and Canberra Health Services Director of Clinical Trials Professor Walter Abhayaratna) said this is an incredible opportunity for Illawarra Shoalhaven, Murrumbidgee and Southern NSW Local Health Districts to work together to expand their clinical trial activity.

“The program will enable increased access to innovative treatments for people across Southern NSW, helping improve health outcomes for patients and contributing to the ongoing development of evidence-based care,” Prof Chantrill said.

“Traditionally, most clinical trials are delivered in metropolitan areas, however this funding will allow rural, regional and remote patients to receive the latest therapies closer to home and reduce the need to travel long distances for treatment.”

Southern NSW LHD Director of Project Management and Service Commissioning Nicola Yates said the Clinical Trial Support Units will work closely with academic, health and industry partners to identify and prioritise research areas that will have the greatest impact on patients.



“By participating in clinical trials, patients can access new therapies that are not yet available on the market, giving them access to potentially life-saving treatments before they are widely available,” Ms Yates said.

Murrumbidgee LHD Director of Research Dr Barbara Taylor said that while the program is a collaboration, it will provide resources, infrastructure and support adapted to the individual needs of each local health district and its community.

“This program will provide funding across a range of areas, including research projects and equipment, as well as support for the recruitment and training of research staff,” Dr Taylor said.

The Australian Government’s Medical Research Future Fund, Rural Regional and Remote Clinical Trial Enabling Infrastructure Fund has invested \$30.6 million, over five years, in the Rural, Regional and Remote Clinical Trial Enabling Program: improving access to innovative healthcare in RRR NSW and ACT to support rural local health districts, Canberra Health Service and many other partners across the academic, industry, and community space. Australia has a long track record in leadership in clinical trials which continues to grow, and in which NSW and ACT are key players.

## Where will we focus next?

A key focus area for the next 12 months is increasing access to primary care for rural, regional and remote NSW through the **section 19(2) exemptions initiative scheme**. This Commonwealth Scheme grants exemptions under the *Health Insurance Act (1973)* to bill for primary care services in hospital settings, increasing access to primary care. The revenue raised under section 19(2) exemptions is reinvested back into primary care services at the site. Regional Health Division will continue to support local health districts to increase section 19(2) revenue and submit new applications for exemptions through the Section 19(2) Network Group. A number of potential new sites have been identified for 2023-24.

The Ministry of Health will work in partnership with districts and the Office of Energy and Climate Change to upgrade infrastructure and install charging points across regional NSW, to prepare for the transition to **electric vehicles** in the NSW Health vehicle fleet. Around a third of the car fleet in regional local health districts is currently made up of low emissions vehicles (hybrid or electric). The NSW Government has committed to electric vehicles making up 50% of fleet vehicles purchased by 2026 and 100% by 2030.

In the coming year, NSW Health will work to increase the number of regional General Practices who are engaged in **Lumos**. Lumos is a project that links up data from participating General Practices in NSW with data from hospitals and other health services, to provide a better understanding of patients' journeys through the health system and ways to improve care. NSW Health is aiming for 50% of regional General Practices to be engaged in Lumos within the first three years of the Plan.

In 2023-2024, NSW Health will continue working on the design of the **Single Digital Patient Record (SDPR)** which will be rolled out across the state in coming years. The SDPR will give healthcare teams real-time access to clinical records and pathology information for all patients regardless of location. The SDPR will better support the coordination of public health services especially in regional, rural and remote NSW.



## The road ahead

The Regional Health Strategic Plan 2022-2032 will be regularly reviewed and consultation undertaken to ensure effective planning, delivery, monitoring, reporting and evaluation which is responsive to the evolving needs of regional communities.

A comprehensive evaluation will be conducted at 3, 5 and 10 years to determine the impacts and success of the plan. These findings will be reported publicly to increase visibility and accountability from NSW Health to deliver on the actions in the Plan.

The Plan will continue to be overseen by the Regional Health Committee and the Regional Health Plan Steering Committee, which provide strong governance and are an avenue to escalate issues and promote successes of the Plan.

The next Progress Snapshot is due to be released in late 2024.

For more information, please contact the Regional Health Division at:

**[MoH-ODS-Regional@health.nsw.gov.au](mailto:MoH-ODS-Regional@health.nsw.gov.au)**



