

Special Commission of Inquiry into Healthcare Funding

Statement of Brian Bonham

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Occupation: General Manager, Southern NSW Local Health District

1. This statement made by me accurately sets out the evidence that I would be prepared, if necessary, to give to the Special Commission of Inquiry into Healthcare Funding as a witness. The statement is true to the best of my knowledge and belief.
2. This statement is provided in response to the letters dated 28 June and 31 July 2024 issued to the Crown Solicitor's Office, and addresses the topics set out in the 28 June 2024 letter relevant to my role.

A. INTRODUCTION

3. I am the General Manager of the Inland Network at Southern NSW Local Health District (**SNSWLHD**). I have been in this role for 2 years. Prior to this, I was the Tablelands General Manager for 12 months until there was an amalgamation of the Monaro and Tablelands Network, at which point I was appointed General Manager of the Inland Network.
4. The sites that fall within the Inland Network include Goulburn Base Hospital, Queanbeyan Hospital, Cooma Hospital, Crookwell District Hospital, Yass District Hospital, Bombala Multipurpose Service (**MPS**), Delegate MPS, and Braidwood MPS. Karabar Community Health and Jindabyne 'Health One' also report to me. The site managers / directors of nursing and midwifery for these facilities report to me, as well as the Director for Allied Health and Integrated Care for the Inland Network.
5. A copy of my curriculum vitae is exhibited (**MOH.0014.0231.0001**).

B. MEETING THE HEALTH NEEDS OF RESIDENTS IN THE INLAND NETWORK

6. The Inland Network covers a diverse population. To the north and into Queanbeyan there is a growing population of young families. Conversely, the population within Cooma and Jindabyne is ageing. Cooma also has a large itinerant population associated with the Snowy 2.0 project.

7. There are mixed funding models in the Inland Network:
 - a. Goulburn Base Hospital, Queanbeyan Hospital and Cooma Hospital receive Activity Based Funding (**ABF**);
 - b. Yass District Hospital and Crookwell District Hospital receive block funding;
 - c. Bombala MPS, Delegate MPS, and Braidwood MPS receive a mix of state and federal funding.
8. Cooma Hospital's ABF funding is particularly challenging as this facility does not have conventional activity. For example, it has a low volume birthing service of about 150 births in the past financial year, however, despite the low volume, the service has to be fully staffed 24 hours per day, due to unpredictable nature of birth and the distance from the next available service such as Canberra or Queanbeyan hospitals.
9. Provision of outpatient clinics is a challenge across the board within SNSWLHD. Cooma Hospital does not have specialist clinics. Due to its proximity to Canberra, Queanbeyan Hospital provides a limited number of specialist outpatient clinics, mainly in orthopaedics and gynaecology. A cardiologist visits Jindabyne bi-monthly. An orthopaedic clinic has just commenced at Goulburn Base Hospital.
10. Jindabyne does not have a hospital or MPS, however there is a community health centre ('Health One') which is co-located with a GP practice. The Jindabyne community health centre provides community health outreach and clinics for allied health only. Access to health services could be improved in this part of the region with an MPS model of care.

C. WORKFORCE CHALLENGES

11. The Inland Network relies on a fly-in fly-out (**FIFO**) (or drive-in drive-out in some cases) model to deliver services, particularly for the midwifery workforce but also the medical workforce.
12. The use of FIFO nursing and medical staff puts a strain on resources and adds additional costs. There is also a resulting need to manage accommodation for staff. This can cause challenges, particularly in an area such as Cooma which has accommodation shortages due to the large number of itinerant workers in the area. Twelve relocatable Key Worker Accommodation pods are being installed at Cooma Hospital commencing in August 2024.

13. Due to Queanbeyan Hospital's close proximity to the Australian Capital Territory (ACT) and more favourable pay conditions in the ACT, recruiting and retaining nursing staff in Queanbeyan is a challenge.

D. VIRTUAL CARE SERVICES

14. All of the facilities within the Inland Network have virtual services.
15. SNSWLHD has partnered with Western NSW LHD (**WNSWLHD**) to deliver the Virtual Rural Generalist Service (**VRGS**) for triage category 3-5 patients. SNSWLHD has also partnered with WNSWLHD to deliver vCare for triage category 1-2 patients, which is in the planning phase to go live in September / October 2024.
16. In my view, there is a greater role for virtual models of care with central hubs for specialist services or outreach. This will allow SNSWLHD to continue to provide care and support at smaller facilities but to use time more efficiently, for example by not having a clinician drive 4 hours to a facility to provide face-to-face consultations.

E. CROSS BORDER CHALLENGES

17. There are challenges with funding and staffing of Queanbeyan Hospital due to its proximity to the ACT. This is because nursing and medical staff can receive higher rates of pay in the ACT in comparison to NSW. As a result, a number of medically trained residents from the Queanbeyan area will choose to work in the ACT rather than NSW.
18. Due to Queanbeyan's proximity to the ACT, it has not previously been recognised as part of the Rural Workforce Incentive Scheme in NSW. SNSWLHD has recently been successful in having Queanbeyan recognised as part of this scheme, so staff are paid a similar amount as they can receive in the ACT. However, Queanbeyan has been assessed at the lowest level under the scheme.

F. CAPITAL WORKS WITHIN THE NETWORK

19. In 2024, the Federal and State Governments announced a combined \$40 million of investment in Bombala MPS to extend the residential aged care facilities.
20. Yass District Hospital has received around \$4.7 million in Federal funding to restore maternity services at Yass. The additional funding will allow the District to increase pre- and post-natal services available at Yass District Hospital and to undertake a partial refurbishment of an existing building on the Yass campus.

21. Queanbeyan Hospital sees the most ED presentations and births within the District. It is anticipated that these demands will increase with population growth within this part of the region. Queanbeyan Hospital is in need of redevelopment to keep up with these demands: in particular, this is needed to increase the inpatient and maternity ward capabilities.

G. ABORIGINAL HEALTH PROGRAMS

22. The Inland Network currently has 3 Aboriginal Health Workers. There is also an Aboriginal Health Clinic space at Goulburn Hospital as part of the recent refurbishment. SNSWLHD has also applied for a grant to build an Aboriginal health clinic space at Queanbeyan.
23. There is currently no external Aboriginal Medical Service provider in the Inland Network and the closest service is Winnunga Nimmityjah Aboriginal Health and Community Services based in Canberra.
24. There is a need for an external Aboriginal Medical Service within the Inland Network. The Aboriginal population in the Local Government Area that covers Goulburn is 5.7%, which is above the State average, and there is a growing Aboriginal population in Queanbeyan and Yass.



Brian Bonham



Witness: Alexandra Murphy

7/8/2024

Date

7/8/2024.

Date