
Special Commission of Inquiry into Healthcare Funding

Statement of Bradley Scotcher

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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 letters of 28 June 2024 and 19 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 Coastal Network at Southern NSW Local Health District (**SNSWLHD, the LHD**). The Coastal Network is a geographic area of SNSWLHD, running from north of Batemans Bay down the coast to the Victorian / NSW border. It includes Batemans Bay Hospital, Moruya District Hospital, Narooma Community Health Centre, South East Regional Hospital, Pambula District Hospital and Eden Community Health Centre. The Inland Network covers the remaining geographic area of SNSWLHD.
4. I report to Fiona Renshaw, the Executive Director of Operations. My responsibilities include oversight of strategic planning and recruitment, oversight of clinical and corporate governance, community, consumer and staff engagement, and performance for the facilities and services provided in the Coastal Network.
5. My direct reports include the following roles which are located in the Coastal Network area:
 - a. Facility Site Managers/Directors of Nursing & Midwifery Services,
 - b. Manager of Integrated Care and Allied Health,
 - c. Directors of Medical Services,
 - d. Corporate Services Manager, and
 - e. My executive assistant.

6. A copy of my curriculum vitae is exhibited (**MOH.0014.0232.0001**).

B. WORKFORCE

7. Workforce recruitment and retention of a senior medical workforce is a challenge for SNSWLHD. There are ongoing vacancies in particular medical specialities which has led to a reliance on locums. Factors contributing to these challenges are recognised shortages in some clinical specialties such as Anaesthetics and Obstetrics and Gynaecology and Emergency Medicine, as well as working in relative professional isolation in some smaller sites, and some clinical departments have no junior medical support making these positions less attractive for senior medical staff. In addition, as there are no private health facilities in the area, specialists have less opportunities to generate a private income and are inclined to work in Canberra or Sydney if they seek opportunities in both the public and private health care systems.
8. Currently in the Coastal Network, we are recruiting for specialists in Obstetrics and Gynaecology, Intensive Care, General Medicine, Surgery, Orthopaedics, Anaesthetics and Emergency Medicine.
9. SNSWLHD has undergone work to mitigate its reliance on locums, which has led to use of a 'fly-in, fly-out' (**FIFO**) model for some Visiting Medical Officers, who work in SNSWLHD one week every four weeks, or other rostering patterns as individually negotiated. This has presented its own challenges as these FIFO arrangements often require the LHD to bear the cost of transport and accommodation for such workers. It is recognised that this method of appointment is still more cost effective than the ongoing reliance on locum medical staff and the associated agency payments. The FIFO model has also increased the reliance on public outpatient rooms being allocated within the hospital to Visiting Medical Officers, as they do not have consulting rooms in the area.
10. Similarly, there is a challenge in recruitment and retention of nursing staff since COVID-19, and a reliance on agency staff. An overseas recruitment campaign in the United Kingdom and Ireland has been reasonably successful and has led to the appointment of 26 full-time registered nurses in the Coastal Network, with a further 10 scheduled to commence. We have also had nine overseas-trained nursing staff commence in the Coastal Network through agency recruitment, with a further seven to come from this strategy. This is a total of 35 new registered nurses who have commenced and 17 scheduled to arrive before the end of 2024.

11. In addition, SNSWLHD has increased its new graduate nursing intake. Previously, appointments to these positions were for an initial 12-month temporary role and these staff were then required to reapply for a permanent position at the completion of this period. SNSWLHD has now moved to offering permanent appointments on commencement of their new graduate position, leading to greater job security. Through this method, SNSWLHD has increased its retention of new graduate nurses, which is currently sitting at an 87.5% retention rate.
12. The current proportion of workforce in the Coastal Network who identify as Aboriginal is 2% against the State target of 3.6%. As a result, it is clear that a key part of the workforce strategy for the new Eurobodalla Regional Hospital will be to increase community engagement around higher Aboriginal employment targets, including the identification of targeted positions across all salary bands, clinical departments, and other specialty groups.
13. A final challenge is the lack of key worker accommodation. At present, SNSWLHD has entered into 50 leases in Eurobodalla and the Bega Valley to rent accommodation for workers. There is currently very little on-site hospital accommodation in SNSWLHD. The lease arrangements cost approximately \$1.5 million a year and require a significant time resource for SNSWLHD to manage. There are also additional costs associated with cleaning and maintenance of these properties. In addition, we are seeing more workers who are mature aged and require family accommodation or accommodation that is pet friendly, which can be challenging to locate.

C. FUNDING

14. There is also a challenge for facilities within the Coastal Network to acquire new pieces of major medical equipment to replace those reaching the end of their life. For example cardiac monitoring equipment at South East Regional Hospital, endoscopy equipment, laparoscopic towers, and other clinical equipment used in the perioperative service at hospitals in the Eurobodalla region and South East Regional Hospital.

D. EUROBODALLA REGIONAL HOSPITAL

15. A key role I have in the Coastal Network is the development of the new Eurobodalla Regional Hospital. Together with Health Infrastructure, I am responsible for ensuring the project is completed, on budget, and within the designated timeframe, and has an appropriate workforce to staff it. I am also responsible for engaging with clinicians and the community. As the most senior member of the SNSWLHD executive team located in

the Coastal Network, my role in the development is to provide executive leadership and to advise SNSWLHD's Executive team on planning and progress. I also chair the Project Delivery Team and the Workforce Project Working Group.

16. As General Manager, I am the Network Lead and work closely with the Project Director and Asset Management team to manage the project from SNSWLHD's perspective. When I came into the project November 2022, we were in the planning stages and the project had reached the point of moving into the Detailed Design phase. The key risks associated with the project have been budget, community engagement and workforce planning. While there has been a significant increase in the budget position, with an additional \$70 million committed to the project in the recent NSW State Budget, the LHD has ongoing concern with the majority of the contingency budget having already been allocated prior to the commencement of construction. Workforce planning remains a constant risk to the project, with the requirement to transition from a Role Delineation Level 2 facility (Batemans Bay Hospital) and a Role Delineation Level 3 facility (Moruya District Hospital) to the new Level 4 Eurobodalla Regional Hospital. This will require significant changes in volume and capability of staff prior to the new hospital opening. Finally, community engagement is an ongoing risk with the Batemans Bay community leading a campaign to save the Emergency Department at Batemans Bay Hospital, which is not consistent with the Clinical Services Plan that was developed to support the project.
17. A significant workforce uplift will be required for the new Eurobodalla Regional Hospital. Currently SNSWLHD is developing a strategy for the Ministry of Health to plan for scaling up positions in the lead up to the opening of the new Eurobodalla Regional Hospital, so that services are able to be provided in line with it being a Role Delineation Level 4 facility. A concurrent challenge is the expansion of Shoalhaven District Memorial Hospital and the development of the new Shellharbour Hospital in Illawarra Shoalhaven Local Health District (ISLHD). In my view, both the new Eurobodalla Regional Hospital and those developments in ISLHD will be competing for a finite workforce at the same time, and there will be a need to create partnerships between the two Districts, for example through rotational employment opportunities.

E. PRIMARY CARE

18. SNSWLHD has a good relationship with the South Eastern Primary Health Network (**Coordinare**), and collaborations include the provision of Commonwealth Health Supported Programs in aged care services, primary care service provision for Ear Nose

and Throat services, Aboriginal health care, and aged care services in partnership with the Rural Doctors Network. This has also now included the provision of the Urgent Care Centre at Batemans Bay Hospital coordinated by Coordinare and operated by a private provider, ForHealth, as set out below.

19. A challenge is the general decline in the numbers of general practitioners (**GPs**) in the region as GPs retire and/or no longer work in the hospital setting. This has a flow on impact with increased reliance on emergency departments. Regular meetings take place between SNSWLHD and local medical practitioners, and there is a medical engagement dinner twice per year. Regular medical staff council meetings also occur at South East Regional Hospital on a monthly basis and at the Eurobodalla region hospitals every second month.
20. In my role, I mostly meet with Coordinare about the Urgent Care Centre, which opened in Batemans Bay in December 2023. This is operated by a private provider, ForHealth, and is administered by Coordinare. Following a tendering process for this service, consultation occurred between Coordinare, ForHealth and SNSWLHD and a decision was made that the service would be best located at Batemans Bay Hospital adjacent to the existing Emergency Department. A Memorandum of Understanding was entered into between all parties to facilitate this arrangement and operational procedures were put in place to support the partnership agreement. We also have an annual meeting to review services provided under agreement with the Rural Doctors Network and plan service provision for the following year.
21. Since the commencement of the Urgent Care Centre in Batemans Bay, there has been a reduction in the number of Triage Category 4 and 5 presentations to the Batemans Bay Emergency Department. The Urgent Care Centre service is expected to expand and operate up to 24 hours per day following the closure of Batemans Bay Hospital and the transition of emergency services to the new Eurobodalla Regional Hospital.

F. OPPORTUNITIES

22. In my view, there are important opportunities in relation to SNSWLHD's specialist medical workforce, and particularly outpatient services. This includes a review and/or development of formal networks with the Australian Capital Territory and other LHDs, particularly ISLHD due to its proximity. For example, SNSWLHD currently partners with ISLHD for particular cancer services not able to be provided in SNSWLHD. There will be opportunities for formal networks, such as the provision of cardiology services at

Shoalhaven Hospital following the current redevelopment at that site. There is also the potential for formal networking arrangements for the provision of intensive care services across the region with the establishment of this service at Eurobodalla Regional Hospital.

23. There is also an opportunity for an increasing use of virtual care services, particularly to address the requirement to expand outpatient services in SNSWLHD. Health services in rural and regional NSW should embrace this technology to support patients in receiving care close to home where possible for services such as orthopaedic fracture clinics, outpatient medical clinics, chronic care programs, and allied health services. In addition, virtual care is also being explored in SNSWLHD in relation to the vCare model in partnership with Western NSW Local Health District (**WNSWLHD**). This is a virtual unit model that provides specialty-level advice, critical care expertise, transport, logistics, and coordination support.
24. SNSWLHD and WNSWLHD are currently scoping the requirements to establish this service at a number of locations across SNSWLHD, including Batemans Bay Hospital and Moruya District Hospital. This will also support these smaller sites in the management of deteriorating patients in inpatient units.



Bradley Scotcher



Witness:

7/8/2024

Date

7.8.2024.

Date