



Special Commission of Inquiry into Healthcare Funding

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**SUBMISSION – Special Commission of Inquiry into Healthcare Funding
31 October 2023**

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By way of introduction to this submission, both authors are directors of Better Border Health (betterborderhealth.org), established in 2022, in response to community concerns about the inadequate infrastructure and resources provided to Albury Wodonga Health; and in support of the Border Medical Association, which has clearly identified the clinical risks to patients and the risks to recruitment, training and retention of clinicians within the current inadequate hospital infrastructure over two separate sites at Albury and Wodonga.

Albury Wodonga Health is a cross border health service managed by the Victorian Government.

Di Thomas is a former professional journalist who wrote extensively with The Border Mail media outlet regarding the introduction of the cross Border health service in Albury Wodonga. She is a long-term observer of the development and delivery of public health services in the region.

Stan Stavros is managing director at SBM Stavros in Albury, which includes Medical Practice Consultants, a division wholly focused on providing business advisory services to the medical profession. He is also a long-term observer of the development and delivery of public health services in the region.

Both authors are members of the general public who are making this submission to the inquiry identifying their interest in the work of the inquiry and specifically the following Terms of Reference.

- A. The funding of health services provided in NSW and how the funding can most effectively support the safe delivery of high quality, timely, equitable and accessible patient-centred care and health services to the people of NSW, now and into the future;
- B. The existing governance and accountability structure of NSW Health, including:
 - i. the balance between central oversight and locally devolved decision making (including the current operating model of Local Health Districts);
 - ii. the engagement and involvement of local communities in health service development and delivery;
 - iii. how governance structures can support efficient implementation of state-wide reform programs and a balance of system and local level needs and priorities;
 - iv. the impact of privatisation and outsourcing on the delivery of health services and health outcomes to the people of NSW;
 - v. how governance structures can support a sustainable workforce and delivery of high quality, timely, equitable and accessible patient-centered care to improve the health of the NSW population;

C. The way NSW Health funds health services delivered in public hospitals and community settings, and the extent to which this allocation of resources supports or obstructs access to preventative and community health initiatives and overall optimal health outcomes for all people across NSW;

J. To have regard to existing reviews, reports and recommendations in relation to the national public hospital funding model and other national settings insofar as they impact on the delivery of high quality, timely, equitable and sustainable public hospital and community health services in NSW, in particular co-payments, oversight of compliance and influence of private capital on the health services market.

The situation

Albury Wodonga Health (AWH):

- Is one of the largest regional health services in Victoria, with a vision of **providing care for our community, as close to home as possible**.
- The AWH Clinical Services Plan (2021) highlights the need for **significant service expansion** – increasing its capacity, capability and complexity of services (e.g. neonatal care and heart surgery).
- AWH's catchment population is growing and ageing and has a high incidence of chronic disease.
- Over the next 15 years, AWH's primary catchment population (Albury and Wodonga) is expected to be almost **one-third bigger** than it is now.

By 2040, AWH will need to support the following projected annual service demands:

- Up to **150,000** emergency presentations
- Up to **80,000** total admissions
- Approximately **40,000** surgeries
- **5,700** paediatric admissions
- **3,200** intensive care patients
- **1,900** births

The announcement

In October 2022, the NSW and Victorian Governments made a joint announcement to commit a combined \$558 million for the redevelopment of the existing Albury hospital site, **that is \$225m each State Govt**, plus \$108m in previously committed funding. That is, NOT new money.

A comparative analysis sourced from Health Infrastructure NSW

Even if you include the \$108M for the emergency department upgrade (which we understand included some federal money) Albury is well behind Wagga, Griffith and Tweed on a per capita basis.

Location	Cost \$	Population	Per Capita \$
Albury	225,000,000	54,000	4,167
Wagga Wagga	431,000,000	57,000	7,561
Griffith	250,000,000	27,000	9,259
Tweed Heads	723,000,000	64,000	11,297
Dubbo	234,000,000	44,000	5,318

Our observation

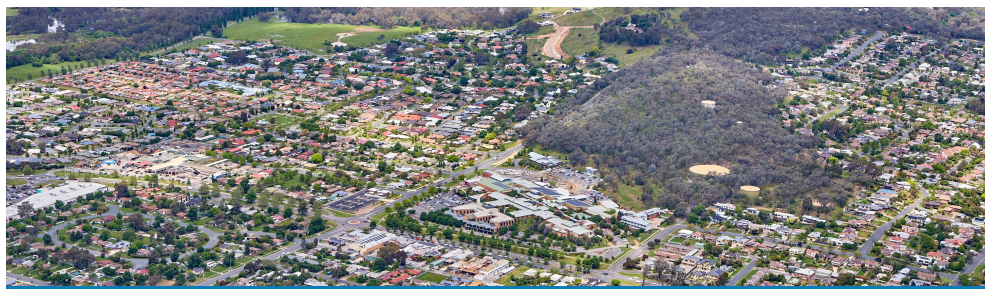
There is not a Government mandated benchmark or uniformity of funding for health services in regional NSW.

Instead, it is our observation that funding appears pretty much dependent on political circumstance, pork barrelling and marginality of the political seat.

Governments and their departments have the data to make better decisions but choose not to do so. Refer to the Albury Wodonga Clinical Services Plan 2021, developed in consultation with clinicians from Albury Wodonga Health. The bed numbers etc in this plan have been rejected by Health Infrastructure NSW as it attempts to “cut its cloth” to ensure the project expends only the amount of money committed by both NSW and Vic governments.

The master plan release – October 2023

<https://nswhealthinfrastructure.mysocialpinpoint.com.au/awrhproject>



HEALTH INFRASTRUCTURE

Albury Wodonga Regional Hospital project

October 2023 | Master plan briefing

HI-Albury@health.nsw.gov.au



Our concerns with the release of the Master Plan October 2023 by NSW Health Infrastructure

- No bed numbers
- No operating theatre numbers
- Likely no growth in numbers other than what needed to decant from antiquated facilities in Albury and Wodonga.
- When completed in 2028 we will be further behind on a landlocked site.
- Major disruption on Albury site and little gain.
- The planning horizon is 2032. If project finished in 2028, the service will have 3 years at very best before it's overwhelmed again.

In conclusion

We would appreciate the opportunity during the 2024 hearings of this **Special Commission of Inquiry into Healthcare Funding** to expand on the issues raised in this brief submission related to healthcare funding as it relates to the provision of health infrastructure and services in the Albury Wodonga region.