



Special Commission of Inquiry into Healthcare Funding

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Name: Northern NSW Local Health District
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Mr Richard Beasley
SC Commissioner
The Special Commission of Inquiry into Healthcare Funding

Northern NSW Local Health District response to the Special Commission of Inquiry into Healthcare Funding

Dear Commissioner Beasley,

On behalf of the Northern NSW Local Health District (NNSWLHD), thank you for the opportunity to provide a response to the Special Commission of Inquiry into Healthcare Funding. This response has been prepared after consultation with various executive members within the NNSWLHD. Following this engagement, we have elected to focus on matters for the NNSWLHD as they relate to border issues/opportunities with Queensland [Qld].

Introduction

NNSWLHD provides a diverse range of public healthcare to over 300,000 residents across the district through twelve hospitals and multi-purpose services, 21 community health centres and other facilities.

NNSWLHD covers a large area in north-eastern NSW extending from Tweed Heads in the north to Tabulam and Urbenville in the west and to Nymboida and Grafton in the south, an area of 20,732 square kilometres.

The district delivers health services ranging from specialist services through to community and ambulatory care.

NNSWLHD is undertaking major capital projects at several facilities, for example The new Tweed Valley Hospital in Kingscliff will be opening on 14 May 2024, The Facility comprises 430 overnight and day only beds (bed number will increase to 430 by 2032 in line with population growth and demand). Continued developments in Information Communication Technologies and Integrated Care have also resulted in improved patient outcomes and hospital services.

Our residents

The Bundjalung, Githabul, Gumbaynggirr, and Yaegl Nations are traditional custodians of the land covered by the district.

People of Aboriginal and Torres Strait Islander heritage make up 5.2 per cent of the population, compared to 3.4 per cent for all NSW. The district has fewer culturally and linguistically diverse residents compared with NSW.

In 2021 the population within NNSWLHD was 311,117 and is projected to increase to 330,731 by 2036. During the equivalent period, the percentage of people aged 65 years and older is expected to increase by approximately 31%. These residents make use of more acute health services due to chronic and complex conditions, dementia, and fractures because of falls.

The Northern Rivers region records 2 out of 7 LGAs in the lowest socioeconomic group in 2021, and none in the highest of the same group for the same period.

On a comparative basis, the top four health issues for NNSWLHD are.

- Poor health behaviours such as risky alcohol consumption, smoking during pregnancy, physical inactivity, overweight and obesity.
- Chronic disease and ageing-related conditions
- High rates of hospitalisation for type 1 diabetes, intentional self-harm, and illicit drugs
- High rates of suicide

Our staff

NNSWLHD values the essential role our staff play in delivering innovative ways to respond to the health needs of our patients and clients. We have over 5,500 people working in our hospitals and health services across the district.

NNSWLHD is committed to offering diverse career pathways, professional and personal development and help with further study and education. Work environments are flexible and supportive and encourage opportunities for staff to start or build a career or re-enter the workforce.

Roles within NNSWLHD are challenging, inspiring, and rewarding. These include Medical, Nursing, Allied Health, Corporate Services, Hospital Assistants and Administration, Oral Health Practitioners and Support Workers and Scientific and Technical Clinical Support Staff among many others.

General Overview – Relationship with Queensland

Queensland [Qld] residents accounted for 6% of overall Emergency Department [ED] activity in NNSWLHD in 2020/21 (5-yr average is 8%). This increases to 19% of ED activity at The Tweed Hospital (5-yr average is 24%). Most Qld resident activity in 2020/21 was in triage categories 3 (42%) and 4 (38%). This is consistent with prior years.

Qld residents accounted for 4% (1,830 separations (seps)) of inpatient separations in NNSWLHD in 2021/22 (5-yr average is 7%). This has been declining year on year. 85% of this activity was delivered at The Tweed Hospital.

There were 3,802 inpatient separations in Qld public hospitals for NNSWLHD residents in 2021/22. This was below the 5-yr average and will have been impacted by covid restrictions.

The highest volume specialties provided by Qld for NNSWLHD residents includes interventional cardiology (392 seps), orthopaedics (330 seps), neurosurgery (294 seps), neurology (230 seps) and general surgery (217 seps)¹.

¹ The planning datasets (developed by the Ministry) are updated to 2020/21 for ED and 2021/22 for admitted. ED data does not include outflows of residents to Qld Emergency Departments

As of 15 November 2023 - 910 NNSWLHD staff live in Qld (12% of total NNSWLHD staff). Of these 458 (50%) are nurses or midwives. Of the 2,719 staff working at The Tweed Hospital or Murwillumbah Hospitals, 29% of the staff reside in Qld. As of October 2023, The Tweed Hospital had nurse vacancies of 13.5%; and Murwillumbah Hospital nurse vacancies were 16.2%

Qld Health is rapidly expanding and their requirements for staff is growing with new build facilities in the southern part of the state.

Key points relating to SCOI Terms of Reference

iii. evaluating financial and non-financial factors impacting on retention and attraction of staff.

1. Qld have a higher base rate pay salary for nursing positions.
2. A disadvantage for Qld staff coming to NSW is the inability to bring all their all entitlements with them, for instance sick leave.
3. In Qld, several positions are incentivised, some with a sign-on bonus. For example, a clinical coder on an Enterprise Agreement can have an incentive of \$ 300 week and work from home (interstate) working hours are flexible 6am – 6 pm.

Palaszczuk Government ups efforts to bolster health workforce - Ministerial Media Statements

4. Salaried medical officers, senior and junior, have lower rates of remuneration than their counterparts in Qld - examples and references below.
 - 4.1 The starting salary for an intern at The Tweed Hospital as of 1.7.23 is \$76 009 (p 14 of Queensland award medical officers). The starting salary for an intern at Gold Coast University hospital as of 1.7.23 is \$87 517 (p.54 of attachment 2). The difference is 11.5%,
 - 4.2 For staff specialists the paid work hours for a staff specialist in NSW are 40 hours per week. There is no overtime provision, except for emergency medicine (p.10 of NSW staff specialists award). A staff specialist in Qld is paid for all their hours worked, with penalty rates applying as more overtime is undertaken, or as it extends into non-business hours. (p. 30 of Queensland specialist award).
 - 4.3The impact of that is: very few of the medical students that we train at The Tweed Hospital elect to come here to work as early career doctors. It is disruptive to the pipeline effect we are attempting to achieve through strong undergraduate training programs.
5. Pay and working condition differential between NSW and Queensland (below) results in the following – Tweed Hospital Case study August 2023

The interstate data covers public hospitals.

5.1 Tweed ED RMO position and Byron Central Hospital RMO positions Feb 2024 –, no Queensland doctors applied. Over 90 were from International Medical graduates who did not meet the selection criteria or who lacked ED experience.

5.2 Tweed ED Unaccredited Trainee position Feb 2024 - 2 Queensland Doctors applied – One had worked in our department last year, the other had not.

5.3 Tweed ED Advanced trainee Feb 2024 – no Queensland doctors applied.

5.4 As of August 2023 in the Tweed Hospital ED Department there were 1 Australian RMO and 28 overseas doctors from UK, Brazil, Nepal and the Philippines

6. The use of locums, Visiting Medical Officers, agency staff and other temporary arrangements.

Average nurse agency use YTD for FY24 is currently 214.91FTE, compared to 265.46FTE for the same period last year. Total agency use for the period 02/10/2023 – 15/10/2023 was **220.57FTE.**

For senior doctors, it is difficult to attract staff specialists to work at The Tweed Hospital, when they could obtain similar jobs at Gold Coast University Hospital [GCUH], with better remuneration. Craft groups such as General Medicine Visiting Medical Officer physicians, whom we might view as profitably being replaced by Staff Specialists from the point of view of junior doctor training and hospital engagement, are difficult to convert to Staff Specialist because NSW Terms and Conditions are uncompetitive with GCUH and with VMO rates.

7. Current education and training programs for specialist clinicians to meet future needs including - placements.

In the Tweed network, all our medical students come from Queensland Universities

NSW universities do not offer to provide medical students to either The Tweed or Murwillumbah Hospitals. This is primarily due to the lack of a Modified Monash Rurality rating at those sites which means that the NSW universities have no rural funding to support medical student placements at 'non-rural' sites.

Queensland commences Junior Medical Officer recruitment 6 weeks before NSW which means that Queensland applicants have an opportunity to accept placements in Queensland before they receive offers from NSW Health.

8. Potential Solutions – other than base pay rate increases:

8.1 Junior Medical Officers – commence recruitment process and provide placement offers at the same time as Qld.

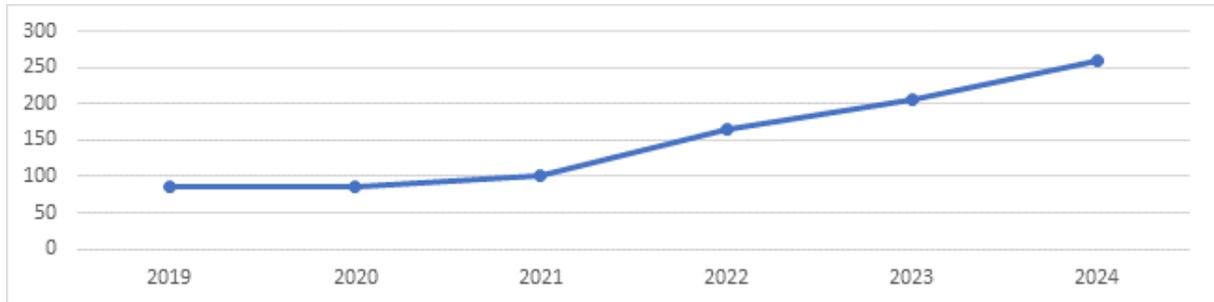
8.2 Improve flexibility of shift lengths e.g., 6 / 8 /10- or 12-hour shifts: Qld has complete flexibility in their arrangements.

8.3 Routinely recognise length of service and transfer of leave entitlements.

8.4 Rural funding for university places be made available for training at The Tweed and Murwillumbah Hospitals.

9. New Graduate Nurses

NNSWLHD is proud to show a steady increase in the number of new to practice registered nurses / midwives and enrolled nurses that we have continued to employ and support over the last five years. This has grown from 85 in FY19 to 259 in FY24. This is an increase of 174 places offered per annum for 2023/24.



10. The engagement between medical colleges and local health districts and specialty health networks

We have positive training relationships with the Bond and Griffith universities, with many placements occurring for undergraduates in all disciplines. However, the income differential upon graduation means that we cannot optimally benefit from the efforts and excellence related to the undergraduate training we provide.

Sincerely,

Tracey Maisey
Chief Executive NNSLWHD
30 November 2023