

**Submission  
No 88**

**THE IMPLEMENTATION OF PORTFOLIO COMMITTEE No. 2  
RECOMMENDATIONS RELATING TO CROSS-JURISDICTIONAL HEALTH  
REFORM AND GOVERNMENT CONSULTATION WITH REMOTE, RURAL AND  
REGIONAL COMMUNITIES**

**Organisation:** NSW Nurses and Midwives' Association

**Date Received:** 14 November 2024

**SUBMISSION BY THE  
NSW NURSES AND MIDWIVES' ASSOCIATION**

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**Inquiry into the implementation of Portfolio  
Committee No. 2 recommendations  
relating to cross-jurisdictional health reform  
and government consultation with  
remote, rural and regional communities**

**OCTOBER 2024**



**NSW NURSES AND MIDWIVES' ASSOCIATION**  
AUSTRALIAN NURSING AND MIDWIFERY FEDERATION NSW BRANCH

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This response is authorised by the Elected Officers of the New South Wales Nurses and Midwives' Association.

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## Introduction

1. The New South Wales Nurses and Midwives' Association (NSWNMA) is the industrial and professional body for nurses and midwives in New South Wales, representing over 80 000 members across the full spectrum of health care services in NSW, including public and private hospitals, midwifery, corrective services, aged care, disability, and community settings.
2. NSWNMA strives to be innovative in our advocacy to promote a world class, well-funded, integrated health system by being a professional advocate for the health system and our members. We are committed to improving the quality of all health and aged care services, whilst protecting and advancing the interests of nurses and midwives and their professions.
3. We work with our members to improve their ability to deliver safe and best practice care, fulfil their professional goals and achieve a healthy work/life balance.
4. Our strong and growing membership and integrated role as both a trade union and professional organisation provides us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.
5. Through our work with members, we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.
6. The NSWNMA thanks the New South Wales Government for the opportunity to provide feedback on the 'Inquiry into the implementation of Portfolio Committee No. 2 recommendations relating to cross-jurisdictional health reform and government consultation with remote, rural and regional communities'.

## Overview

7. The NSWNMA actively pursues our members' rights and supports member empowerment to influence decision makers for a fair and just society. A fair and just society is one in which all levels of government genuinely value, and invest in, public health services for the benefit of all.
8. Nurses and midwives exercise their right to a voice on professional and industrial issues through the NSWNMA, and we are committed to ensuring that those voices are heard loudly and clearly at every table where decisions about public health services are made.
9. The NSWNMA expresses its appreciation to the current NSW government for a willingness to engage with our organisation and members. We acknowledge that there have been concerted efforts to address the 44 recommendations identified in the original inquiry. We are, however, aware of numerous ongoing difficulties faced by our members and their communities that remain unaddressed and unresolved.
10. The NSWNMA with our members working in regional New South Wales has made its position clear on matters related to these recommendations through submissions to NSW and Federal Government inquiries. We reiterate below our position on pertinent matters from this final tranche of the inquiry in relation to the terms of reference relevant to our members.

## Summary of Recommendations

11. Recommendation 1: That healthcare funding between the state and Federal government should be equally shared.
12. Recommendation 2: That state and Federal governments must create financial policies for a fair and just taxation revenue system that ensures adequate funding for an equitable, high-quality public healthcare services.
13. Recommendation 3: That any future initiatives, services or training programs seek to embed nurses and midwives as respected healthcare leaders with broad capabilities suitable to serve the needs of rural communities.
14. Recommendation 4: That competitive pay and safe working conditions that allow nurses and midwives to provide the highest possible level of quality care is the key to attracting and retaining a strong nursing and midwifery workforce in rural, regional and remote NSW.

## Cross-jurisdictional cooperation between the New South Wales and Australian governments

15. The NSWMA through the Australian Nursing and Midwifery Federation (ANMF) advocate for a universally accessible and free public healthcare system as the best way to provide healthcare for all Australians (Australian Nursing and Midwifery Federation 2023).
16. While there has been an uplift in funding under strengthening Medicare measures, the ramifications of the 2017 Abbott governments \$56billion cuts to public healthcare continue to have ramifications through to today. NSWMA members frequently raise stories of subversive cost-cutting efforts by Local Health Districts, for example chronic and deliberate understaffing (NSWNMA 2023), removal of supplies of patient food and water bottles from wards and provision of lower quality clinical care items (NSWNMA 2024).
17. State and Territory governments funding of health services have increased to a greater percentage of funding over time with decreased funding from insurance providers and other non-government sources (Australian Institute of Health and Welfare 2023). A fractured system of funding reliant on negotiation with private health insurance providers is wasteful, inequitable and inefficient, using administrative resources that would be better spent re-directed to delivery of high-quality healthcare. The Commonwealth Government must deliver policy to support the states and create an equitable system with regard to health insurers.
18. The NSWMA supports a robust taxation system that ensures there is sustainable funding for equitable healthcare provision, regardless of postcode (ACTU 2024). State and Federal governments must work together to create financial policy settings that secure sufficient revenue for the delivery of high-quality public healthcare in rural, regional and remote (RRR) NSW. A starting point would be a return to shared 50/50 funding between state and Federal governments for healthcare expenditure. The principles of the now superseded 'Medicare Agreements Act 1992' should be reinstated, especially principle 3;

*Equity in Service Provision: To the maximum practicable extent, a state will ensure the provision of public hospital services equitably to all eligible persons, regardless of their geographical location.*  
(Parliament of Australia 2016)

19. Issues around funding and allocation of money is fracturing services, causing bed-block (E.g., People awaiting aged care placement in acute hospital beds, lack of mental health primary care services leading to people with mental illness unable to be discharged with effective services in place) and does not create conditions that serve the needs of RRR communities. The healthcare system needs to be seen and funded as a whole not a number of parts.

## Collaboration between NSW Health and Australian Government bodies on particular initiatives, services or training programs

1. Nurses and midwives value needs to be recognised, factored in to state and commonwealth funding and they should be utilised as the leaders and drivers of care co-ordination across the different sectors of healthcare. It is of great concern and alarm to the NSWNMA that nursing and midwifery roles continue to be challenged and eroded by non-regulated health workers and other professions. This has ramifications for care fragmentation and, where greater scope is handed to non-regulated health workers, greater risk of missed opportunities for cost-saving preventative action. Nurses and midwives have the requisite level of education, knowledge, skill and authority to provide the broadest range of healthcare services while creating implicit value through their educated ability to assess and proactively act on healthcare risks early and prevent higher cost care.
2. Equally we feel this recommendation should consider the work “Rural Nurse Practitioners - A framework for service and training in NSW Health”  
<https://www.health.nsw.gov.au/nursing/practice/Pages/rural-nurse-practitioner-framework.aspx>  
Acknowledging this work recognises that employing NPs in rural settings maximises the sustainability of services by enhancing access to assessment, diagnosis and treatment and recommends Nurse practitioner rural generalist programs are developed and supported by an evidenced-based Australian framework termed ‘metaspecialties’.
3. The NSWNMA acknowledges that in response to this recommendation the NSW Government has referred to the ‘National Nursing Workforce Strategy’ a developing “strategy to address workforce challenges and support the nursing profession to deliver person-centred, evidence based, compassionate care to Australian communities”. However, we feel that this recommendation superficially covers the complexities of workforce shortages in rural and remote communities, with nil reference to the emerging international interest in task shifting/ sharing (Coales, et al. 2023) and the need to consider how task shifting impacts on the health care team, the role of advanced practice nurses and patient centred accessible care in the rural and remote setting.
4. We appreciate the numerous schemes and incentives that have been implemented that look to bolster the nursing and midwifery workforce more broadly (E.g., paid clinical placements) and to attract more nurses and midwives to rural areas (E.g., Rural incentive schemes). Notwithstanding, the NSWNMA continues to assert that structural change in NSW health, the implementation of nurse and midwife to patient ratios and a genuinely competitive wage increase will be the strongest drivers in attracting and retaining nurses and midwives to RRR practise.

## Conclusion

The NSWNMA once again thanks the NSW Government for the opportunity to contribute to the rural, regional and remote inquiry, and the ongoing inquires into the implementation of the recommendations. NSWNMA members stand ready to advocate for their professions, their communities and the healthcare system in rural, regional and remote New South Wales. We would welcome any further opportunities to contribute further to this inquiry should the need arise.



## **References 2021 03 Professional Team Chicago** **Referencing Guide 2021**

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