

Draft Health Position Statement:

Regional Business Chamber and Federation Council – January 2025

Advocating for Strategic Investment in Albury Wodonga Regional Health Infrastructure, Services and Murrumbidgee Local Health District Infrastructure (Corowa and Urana) and Services across the Federation Local Government Area

Introduction:

The community, business, health care professionals along with local, state and federal government elected representatives across our region are unified in a commitment to securing the long-term health and prosperity of our communities. With a population of 130,000-150,000 in the immediate primary catchment area for the Albury Wodonga Hospital, and a wider including specialist access catchment extending to potentially 300,000 people, the demand for future-proof healthcare infrastructure is paramount. The need for well-planned health services has become increasingly urgent, particularly considering the ongoing worsening development of serious issues with the Albury Wodonga Regional Hospital and its physical constraints, posing critical patient risks.

We acknowledge the current situation that the Victorian and NSW Governments are in, trying to match limited, severely insufficient funding, by way of revising/updating the master plan from October 2023 to the new concept design released in July 2024. This is aimed to meet the \$558 million budget from the NSW and Victorian Government commitments. However, it is imperative to ensure that we balance timely delivery of improvements, critically needed, with the medium to long-term healthcare needs of the region. This requires a commitment to funding that fully supports the 2021 Clinical Services Plan (CSP), to deliver an entirely new hospital.

Restoring the 2021 Clinical Services Plan for Albury Wodonga Hospital (CSP):

Consensus has been reached by many Councils, including Wodonga, Albury, Federation, Towong, Indigo, Bright and others, along with hundreds of Local Health Professionals and associations such as Better Border Health and the Border Medical Association, on the need to restore the 2021 CSP, as it offers the most comprehensive approach to addressing the healthcare needs of the region. The plan was developed with input from clinicians, Albury Wodonga Health (AWH), and government representatives from both NSW and Victoria. It was based on a 15-year projection, providing a robust framework for service delivery.

However, the subsequent revisions to the CSP in 2022 and 2023, made without clinical or any community consultation, to fit within budget constraints, have raised concerns. These revisions were limited in the data-driven approach that formed the basis of the 2021 CSP and failed to reflect the region's long-term service needs. NSW Health Infrastructure has used a 10-year projection from 2022, which is not aligned with the 15-year planning horizon used in Victoria. It is recommended that this be reconsidered by NSW for what is needed for this region. They do not now even allow a staged approach to ensure logically, physically, practically and realistically, how the future stages can work, to deliver on the 2021 CSP on the current site. Some objectors say this is because the current site cannot achieve this, hence

many Councils including those mentioned above, now favour an entirely new site, to deliver the hospital the catchment needs (not desires or would like, needs),

Greenfield vs. Brownfield Development:

There is alignment among many of the stakeholders that a greenfield development would offer the most future-proof, single-site solution. A greenfield site offers greater flexibility for expansion and modern healthcare infrastructure. However, the estimated cost (\$1.5 billion) and timeframe (7-10 years) remain significant challenges. However, the many opponents of the current \$558 million project also argue that the timeframe for this will still be lengthy, and delays are sure to be encountered and it is not correct to compare say a 4 year brownfield to a 7-10 year greenfield, as the 4 year brownfield will not deliver what a greenfield would deliver. If the current brownfield plans could show over time, past the 4 year build, what the future stages are, to get to an equivalent 10 year/greenfield result, this would assist. Opponents say this is now shown as it is not possible to deliver an integrated new entire facility on this site, not to mention the immense disruption that would be caused by having development works occur across 10 plus years. The greenfield is a 'shift and lift' process where it is built at the new site, and equipment patients and staff are moved when it is ready.

As above a fully completed Brownfield site to meet the 2021 CSP could even take longer than a Greenfield site. There is clearly no commitment being made on further stages of the Brownfield at this time. This appears the primary flaw in the argument of the NSW and Victorian Governments, in attempting to 'sell' to the community and the many Councils, that the \$558 million build will suffice. Also clearly, the push to seek Federal Government funding, even if the Federal Government were flush with funds, which clearly they are not, is considered futile with no plans to support either the greenfield/2021 CSP build, or some future stages of the current proposal, that are unplanned.

Either way, interim measures must be taken to address the current health crisis with the current Albury Base Hospital, including modular solutions to address the pressing need for theatres, wards, and workforce expansion. All stakeholders are considered to agree that the pursuit of greenfield funding must remain a top priority, while ensuring that current services are not compromised.

Current Funding and the Need for Additional Investment:

The \$558 million funding commitment from the state governments (there is some minor federal investment in this amount) is a positive step forward but is severely insufficient to deliver the healthcare outcomes outlined in the CSP. Given these limitations we agree that further investment is urgently required. It is imperative that we secure additional state and federal funding to restore and fully implement the 2021 CSP. However to do this, planning needs to occur to show how a 2021 CSP would look on the ground. Planning should also occur to recognise the immediate need for enhanced healthcare services in the region. We (the parties to this document) propose a pragmatic approach to address the short-term gaps while pushing forward with long-term plans.

Short-Term Solution

The immediate need for service delivery in the region requires utilising **part of the \$558 million** to expand necessary theatres, ward spaces, and modular solutions to accommodate patient demand over the next 7-10 years while the greenfield hospital is being developed. Completing the Northeast Building and car park could be considered an appropriate investment today to alleviate current constraints. This investment would not be considered a waste in the future, considering the many re-use options that would present, in a growing city the size of Albury Wodonga, once the greenfield is built for the current and future buildings on this site. Think enhanced cancer and other specialist treatment centre, private hospital, university, or many other commercial and or part residential uses for the structures on this site.

Long-Term Solution

In parallel, we must lobby for the additional funding required to pursue the greenfield development. This site would provide a long-term, single-site solution that meets the projected needs of the population for decades to come. The greenfield project will take 7-10 years to complete, making it essential to ensure continuity of care and infrastructure enhancements during the interim period.

The combination of immediate, targeted investments in theatres, wards, and parking, alongside a focused push for greenfield funding, will provide the region with a balanced approach to meet both short-term healthcare needs and long-term strategic objectives. Critical in this though, is planning funding to commit to and commence the site selection and concept planning for the new site. To think the community should just accept the current funding and proposed build, and be happy with that, and hope some future Government/s plan for the future, is extremely disrespectful and in fact negligent to the immediate and wider catchment by not planning for the future in such a critical service as health.

The Role of Corowa Hospital and the Urana Multi-Purpose Health Service (MPS) in Supporting Regional Healthcare:

While the Corowa Hospital and the Urana MPS are part of the NSW Government Murrumbidgee Local Health District (MLHD), distinct from the joint Victorian and NSW Government funded, Victorian ran, Albury Wodonga Health (AWH) Hospital, the proximity to and the reliance of our many local communities—Corowa, Wahgunyah, Rutherglen, Urana, Oaklands, Balldale, Rand and the many other villages around the area,—on the Albury Wodonga Hospital, underscores the need for close cooperation and collaboration between these health districts. This cross-district collaboration must be prioritised to ensure that healthcare delivery is seamless and efficient, especially as Albury Base Hospital faces significant pressures.

Given the current healthcare crisis and the future development of a new regional hospital, the role of Corowa Hospital and the Urana MPS in supporting AWH's capacity and alleviating immediate patient needs cannot be understated.

Corowa Hospital

For Corowa Hospital, Strategic investments in Corowa's Emergency Department (ED), specialised theatre services, and associated healthcare infrastructure will not only strengthen Corowa's capacity to provide critical care but also ensure that our hospital contributes to the

broader regional healthcare solution. There was recently the commencement of a new Clinical Services Plan for the Corowa Hospital, with a stakeholder group established including local Federation Council representation, and representation from the Corowa Local Health Advisory Committee, Regional Chamber of Commerce and other community leaders. This has however been stalled, and an unknown timeframe with which it will be recommenced.

Urana Hospital/Multi-Purpose Service (MPS) – Enacting/Funding the approved Clinical Service Plan (CSP)

For the Urana MPS, it was the first of its kind built, with the MPS containing a mix of emergency department, short stay high care and lower care beds, along with a Community Health section and an aged care section.

The Urana MPS has an approved CSP, that requires a new facility along with nursing accommodation. This has been endorsed by the MLHD Board, since around 2021, and is now with the State Government to consider funding this. The longer this is delayed, the further the issues worsen at the site, making it difficult to attract and retain staff, requiring use of other limited accommodation in the town, and clearly putting staff and patients at risk due to the upgrades required not being done.

Workforce Expansion:

It is understood that Stage 1 funding for the Albury Wodonga Hospital includes provision for an additional 500 Full-Time Equivalents (FTEs) for AWH. However, further clarification is needed regarding where these roles will be allocated and how they will support the overall healthcare system in the region. It is vital to ensure that workforce expansion aligns with the growing demand for services, particularly in critical areas such as theatres and intensive care.

Going forward

The further sites like Corowa and Urana are left to decline, the more pressure is placed on the Albury Wodonga Hospital clearly, as not only do these sites take significant patients, they are also very useful in discharge from the larger hospitals like Wagga and Albury Wodonga, to be in sites closer to their homes whilst in recovery.

For the Corowa and Urana Hospitals to fulfill these roles effectively, strengthening the collaboration between MLHD and AWH is crucial. This collaboration would allow the sites at Corowa and Urana, to support AWH hospitals by absorbing overflow and addressing critical healthcare gaps. It also ensures that residents of Corowa, Wahgunyah, and Rutherglen receive the care they need locally, reducing travel times and easing the burden on larger hospitals.

By securing these investments now, the Corowa and Urana sites can play a central role in addressing the immediate healthcare challenges facing our region, while also being a key player in the long-term strategy for sustainable regional healthcare. We call on health districts to prioritize this cooperation, ensuring that the healthcare needs of our communities are met both now and in the future.

Contingency Planning in the Absence of Additional Funding:

There is no clear alignment on the approach should further funding not be secured. In this scenario, it will be necessary to reconvene all stakeholders and assess the available options.

However, the current priority remains unified advocacy for additional state and federal funding.

Next Steps:

1. Engagement on this draft Position Statement; and pending adoption of a final version, the below draft actions can be considered, and suitable funding (point 3) sought to deliver on these.

2. Facilitated Stakeholder Workshop:

- Convene a workshop with key stakeholders, including council representatives, community leaders, business groups, healthcare professionals, and advocacy organizations such as Better Border Health.
- Focus on refining a unified advocacy strategy, setting actionable goals, and identifying roles for all stakeholders in driving investment and outcomes.

3. Financial Commitment for a 6-12 Month Plan of Action:

- Secure funding from participating stakeholders to support an initial 6-12 month action plan.
- Use this funding for advocacy efforts, including community engagement, lobbying, and detailed planning.

4. Community Engagement:

- Design and execute a community engagement campaign to demonstrate widespread support for:
 - Immediate service enhancements at Albury Wodonga Health and local Hospitals/MPS/s such as Corowa and Urana.
 - The longer-term development of a greenfield site and restoration of the 2021 CSP.
- Engage the broader public through surveys, petitions, and public forums to strengthen the advocacy case.

5. Engagement of Professional Advocacy Support:

- Appoint a third-party advocacy firm to provide expert guidance on lobbying state and federal governments. This firm will:
 - Facilitate meetings with key stakeholders, including Ministers and government officials.
 - Develop and implement a comprehensive media strategy to keep healthcare challenges and proposed solutions in public focus.
- Organize delegations to state and federal parliaments to meet with elected officials and decision-makers.

6. Creation of a Regional Healthcare Working Group:

- Establish a working group to oversee the implementation of the action plan, advocacy efforts, and stakeholder engagement.
- This group could be Better Border Health-led or a newly established organisation inclusive of councils, health districts, community groups, and

business representatives.

7. Ongoing Monitoring and Feedback:

- Create a mechanism for regular updates and feedback from all stakeholders to ensure alignment and responsiveness to emerging challenges or opportunities.
- Leverage existing relationships with federal and state representatives to keep them engaged and accountable.

Incorporating Federation area Role:

- Highlight Corowa & Urana Hospitals/MPS's importance in the context of regional advocacy:
- Reiterate the vital role of Corowa Hospital and Urana MPS in alleviating pressure on Albury Wodonga Health by:
 - Expanding services, including emergency, theatres at Corowa, and ward capacity.
Implementing the approved Urana MPS CSP.
 - Supporting overflow patients from larger regional hospitals.
 - Acting as a critical element of the regional healthcare ecosystem, particularly under the Murrumbidgee Local Health District.
- Advocate for greater cross-district collaboration between MLHD and AWH to ensure seamless healthcare delivery.

Conclusion:

By working together and remaining focused on the facts, we can achieve a unified position that serves the long-term healthcare needs of the Albury Wodonga region and its surrounding areas. Securing additional funding to restore the 2021 CSP and pursue a greenfield site remains the ultimate goal, while ensuring immediate investments in critical services to maintain continuity of care.