



## Ordinary Meeting

MM01

**BUSINESS PAPER**

**Tuesday, 11 November 2025  
at 7:00 PM**



Griffith City Council Chambers  
Phone: 1300 176 077

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## AGENDA

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### ORDINARY MEETING OF GRIFFITH CITY COUNCIL TO BE HELD IN GRIFFITH CITY COUNCIL CHAMBERS ON TUESDAY, 11 NOVEMBER 2025 AT 7:00 PM

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#### MEETING NOTICE

Notice is hereby given that an Ordinary Meeting of Council will be held in the Griffith City Council Chambers on **Tuesday, 11 November 2025**.

In accordance with Griffith City Council's Code of Meeting Practice and as permitted under the Local Government Act 1993, this meeting is being live streamed and recorded by Council staff for minute taking and webcasting purposes.

No other webcasting or recording by a video camera, still camera or any other electronic device capable of webcasting or recording is permitted without the prior approval of Council.

Those that are participating in this meeting are advised that your image and what you say will be broadcast live to the public and will also be recorded. You should avoid making statements that might defame or offend and note that Council will not be responsible for your actions and comments.

Members of the public may address Council in relation to the items listed in this Agenda by contacting Council on 1300 176 077 by 12.00 pm on the day of the meeting.

#### Mayoral Minutes

MM01            p3            Murrumbidgee Local Health District (MLHD) Health Services Survey Results

**Scott Grant**

**GENERAL MANAGER**

**CLAUSE** **MM01****TITLE** **Murrumbidgee Local Health District (MLHD) Health Services Survey Results****FROM** **Doug Curran, Mayor****TRIM REF** **25/128203****SUMMARY**

At the Ordinary Meeting of Griffith City Council meeting held Tuesday, 23 September 2025 the following was resolved:

*Resolved on the motion of Councillors Doug Curran and Jenny Ellis that Council:*

- (a) *Acknowledge the significant concerns within the community regarding the adequacy of health service governance under the current Murrumbidgee Local Health District arrangements.*
- (b) *Note the advocacy in the community for the establishment of a Western Riverina Local Health District, and recognise the merit of those views.*
- (c) *Undertake community and stakeholder engagement, including a survey of residents and consultation with local health professionals and First Nations leaders, to obtain evidence of community preferences regarding governance of Griffith Base Hospital and health services in the Western Riverina, to close Friday 31 October 2025.*
- (d) *Write to the NSW Minister for Health, the Premier of NSW, local Members of Parliament, Chief Executive of MLHD, NSW Shadow Minister for Health, and other Councils in the current Murrumbidgee Local Health District to:*
  - *Request a meeting with NSW Minister for Health, The Hon. Ryan Park, MP as soon as practicable;*
  - *Advise them of Council's concerns and the actions it is taking to gather evidence; and*
  - *Request that the State Government commit to an independent review into the governance of health services in the Western Riverina.*
- (e) *Receive a report within two months outlining the results of the community engagement and consultation, and consider at that time whether to adopt a formal advocacy position in favour of the establishment of a Western Riverina Local Health District.*

In response to the above Resolution:

- *A survey was released to the public by Council.*
- *Letters have been dispatched to the nominated parties*
- *No response to date has been received from the NSW Minister for Health, The Hon. Ryan Park, MP*
- *Mayor and General Manager have attended two Meetings with MLHD Executives*

After the close of the survey, the following results were tabulated:

### **Overall survey results**

Total responses: 791

Option	Responses	Percentage
Split from MLHD into two Health Districts	493	62.3%
Hospital Board with MLHD retained	241	30.5%
Retain current MLHD model	22	2.8%
Undecided	35	4.4%

### **Identified Healthcare Professional responses**

Total responses: 54

Option	Responses	Percentage
Split from MLHD into two Health Districts	27	50%
Hospital Board with MLHD retained	17	31.5%
Retain current MLHD model	7	13%
Undecided	3	5.6%

### **RECOMMENDATION**

- (a) Council recognise community sentiment and support advocacy for the establishment of a Western Riverina Local Health District.**
- (b) Council continue to work with MLHD in the current management structure.**
- (c) Council writes to NSW Minister for Health, The Hon. Ryan Park, MP confirming the results of the Community Health survey.**

### **REPORT**

The Committee on Community Service has announced an inquiry into and report on the [Health Services Amendment \(Splitting of the Murrumbidgee Local Health District\) Bill 2025](#), which proposes to split the Murrumbidgee Local Health District into the Murrumbidgee Local Health District and the Western Riverina Local Health District.

Submissions close on 19 December 2025 - [Health Services Amendment \(Splitting of the Murrumbidgee Local Health District\) Bill 2025](#)

### **OPTIONS**

#### **OPTION 1**

As per the recommendation.

## **OPTION 2**

- (a) Council do not support advocacy for the establishment of a Western Riverina Community Health District.
- (b) Council continue to work with MLHD in the current management structure.

## **OPTION 3.**

- (a) Council acknowledges community feedback regarding repairing health care services in Griffith.
- (b) As Council has no jurisdiction over health policy, Council takes no position in respect to the governance of health services.

### **POLICY IMPLICATIONS**

Not Applicable

### **FINANCIAL IMPLICATIONS AND RISK**

Nil.

**Minor Low Risk: Low financial loss <\$10,000**

### **COMPLIANCE / LEGAL / STATUTORY IMPLICATIONS AND RISK**

**Minor Low Risk: Policy or regulatory breach has no impact.**

### **ENVIRONMENTAL IMPLICATIONS AND RISK**

Nil.

**Minor Low Risk: Minimal environmental impact handled internally.**

### **REPUTATION / COMMUNITY IMPLICATIONS AND RISK**

**Moderate Low Risk: Minor adverse public/staff reaction and/or negative publicity. Resolved with Manager or Director Comment. No impact on staff morale.**

### **SERVICE DELIVERY IMPLICATIONS AND RISK**

**Minor Low Risk: Nil impact to service delivery.**

### **WHS / HR IMPLICATIONS AND RISK**

**Minor Low Risk: No injuries/Nil impact to service delivery.**

### **LINK TO STRATEGIC PLAN**

This item links to Council's Strategic Plan item 2.1 Develop and maintain partnerships with community, government and non-government agencies to benefit our community.

### **CONSULTATION**

Senior Management Team.

**ATTACHMENTS**

(a) Survey Summary	<a href="#">Download</a>	7
(b) Health Services Survey	<a href="#">Download</a>	9

# Griffith City Council Health Services survey

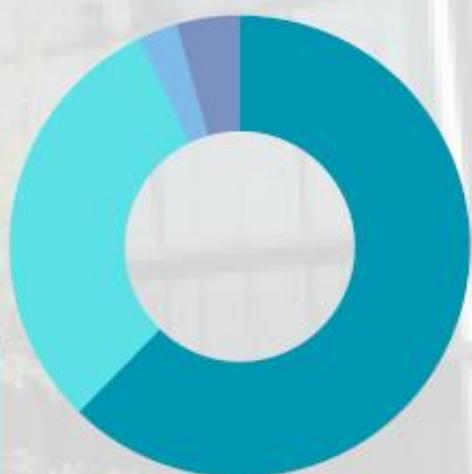
## Results

**791**

Total responses

Create new Health District	Retain MLHD with Hospital Board	Undecided	Retain MLHD
62.3%	30.5%	4.4%	2.8%
493 responses	241 responses	35 responses	22 responses

- Create new Health District
- Retain MLHD with Board
- Retain MLHD model
- Undecided



**62.3%**  
of those surveyed want to split MLHD into two Health Districts

**50%**  
of healthcare professionals surveyed support a split of MLHD into two Health Districts, suggesting awareness of system complexities.

**54**  
Responses from healthcare professionals

Create new Health District	Retain MLHD with Hospital Board	Retain MLHD model	Undecided
50%	31.4%	13%	5.6%
27 responses	17 responses	7 responses	3 responses

# What the community said

“ My 12yr old daughter was sent to fracture clinic in Wagga with broken shoulder but was told to come back in 5 days. Imagine travelling nearly 3 hours in a car in immense pain only to be told come back. 6 hours in a car ”

“ — MLHD does not value Griffith in its health staff in my opinion. We are overworked and burning out ”

“ Creating another district just creates another level of administration - money & resources would be taken from essential health services ”

“ I am not for or against the split until there is actually a feasibility study ”

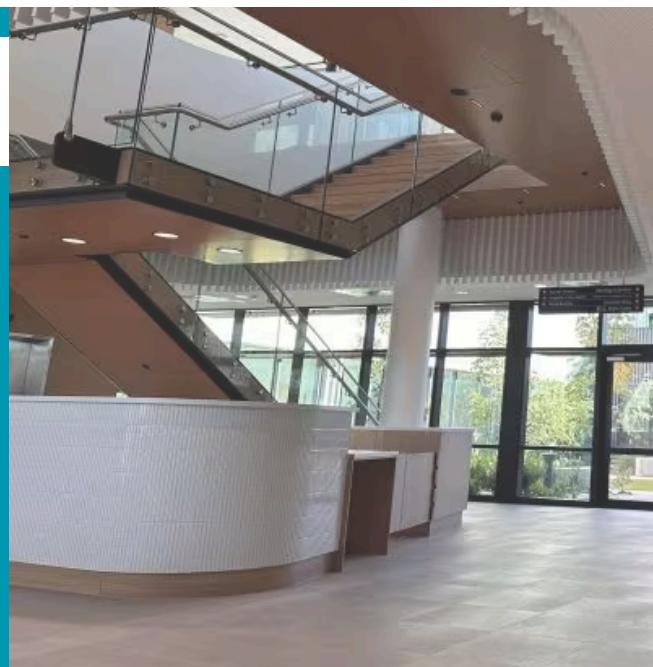
“ When we had local board control, we had a better local hospital ”

“ Resources donated to Griffith Hospital have been transferred to Wagga ”

## In summary

The Health Services Survey provides clear direction: the community demands change.

The community's first preference is complete separation from MLHD (62.3%), with a significant portion (30.5%) preferring a local Hospital Board while remaining within MLHD.



What postcode do you live in?	Do you work in healthcare, including mental health or allied health?		Please choose one option from the following:				Additional comments
Open-Ended Response	Yes	No	The current governance model for Griffith Base Hospital should be retained, under which MLHD manages resourcing and staffing for the Hospital.	The current governance model for Griffith Base Hospital should be changed, by splitting MLHD into two Health Districts, under which a smaller and more locally based Health District would manage resourcing and staffing for the Griffith Base Hospital.	The current governance model for Griffith Base Hospital should be changed, by retaining MLHD, but also establishing a Hospital Board comprised of local clinical and allied health professionals and community members, to provide the Griffith Base Hospital w	Undecided because...	Open-Ended Response2
2680	Yes		✓				
2711	Yes		✓				
2680	Yes		✓				I don't think a split model will result in 'more doctors, nurses and services', which is what the Griffith community want. I'm also unsure of what communities such as Tocumwal, Deniliquin and Balranald want - would they want to travel to Griffith or is it no quicker and easier for them to travel to Shepparton or Melbourne for services? This is simply a political play for attention- The Member for Murray will play the "they never listen to us in the bush card" if it doesn't go through parliament.
2680	Yes		✓				
2650	Yes		✓				
2680	Yes		✓				
2680	Yes		✓				
2680	Yes		✓				
2680	Yes		✓				LHAC already exists which gives the community and opportunity to participate in local decisions that are listened to and acted on by the MLHD board. Duplicating clinical governance and administrative services for such a small population dilutes the importance of these services and pulls money away from frontline clinical services. There is only one health budget across the state. We would still be reliant on tertiary and quaternary facilities, it's simple economics. It's called economies of scale, with supply and demand. I have resigned myself that by moving from a metro to a rural area I will have poorer health outcomes because I can't see a gp easily, and that's a federal/training issue!
2680	Yes		✓				
2680	Yes		✓				I fear especially for residents of other towns who, under the proposed split, will rely on Griffith hospital to provide services and will be devastatingly impacted by the lack of will and capacity for GrBH to provide that. Services provided across the MLHD are carefully networked to support equity of access. Griffith will only looking after themselves and resources will be stretched too thinly when they need to fund such a high degree of duplication. It simply won't be possible. Duplicating resources makes no sense in a global, and increasing, shortage of health professionals.
2680	Yes		✓				
2650	Yes		✓				
2680	Yes		✓				Helen Dalton has a lot to say but no answers to the difficult questions of the nitty gritty of how? How will this be funded? Clearly NSW is in crisis throughout the whole state. All hospitals face the same challenges. Low wages, retention and simply not enough funding for services to be delivered in the way we deserve. It is not MLHD problem. It's a state problem. How and where to find staff? Specialists need colleagues and supports around and choose private practice... got to ask why dr Jaya does not work full time for NSW health.., the answer lies in lucrative private practice? Will the new health district pay more? Don't think so. There is simply not enough to go around. She has zero understanding of collaborative initiatives over many years between MLHD and MPHN. These take years and funding to establish across hospital and community (primary) care. How on earth does she think Griffith hospital will benefit the other towns she is proposing to include in split? Drive to Wagga with a range of specialists and services.., or Griffith with little to guarantee. They are hell bent on this with so much emotion but no real solutions / clear action plan. I don't particularly like Jill Ludford or MLHD , but I know they do the best they can with funds. The fight should be with the minister for health and NSW government. But as always with this politician we have half truths, misinformation and preying on vulnerable people as part of her political games. Griffith Council cannot support this without a whole lot more reliable information. A lot more than just how many people use Wagga Base. Everyone has to travel somewhere at some stage when services are limited. Some Wagga people have to go to Sydney if certain specialised services are better resourced there. It's a fact of life we cannot all have everything all of the time. Good luck... listen to other staff as well. She has the support of a few. Ask what they have to gain. And what she has to gain. Get the facts from those who have it. Do not be bullied by the bullies! Good luck
2680	Yes		✓				
2680	Yes		✓				What is totally absurd is all the sheep following a stupid idea that Helen Dalton has brought forward for political gain. Stop the negative publicity and ask for the business plan including all the financials of a split. Careful what you wish for. A split means less money because government law still requires you to replicate the governance model. Also has anyone even considered all the services you will need to double up on like Asset Management and HealthShare etc. You will spend more money on Non clinical outcomes. MLHD has over 100 positions vacant..see iworkfornsw, medical staff are not coming to Griffith bc because of MLHD or money, they are not coming because Griffith offers Nothing for them. Maybe council needs to focus their attention to bringing transport, universities and multinational companies to grow it to Wagga size and stores and maybe then you have a chance. A split won't attract more if anything it's less productive to be staff in a back water organisation with no opportunity for advancement. Finally please for gods sake get a certain "watermelon" councillor to learn spelling and grammar. I expect my representatives to have a minimum level of education if they are making serious decisions.
2680	Yes		✓				

2680	Yes		✓				Perhaps the view needs to be shifted back to local management, we've jumped too far ahead and overlooked the issues being faced at a local level. If we had support from local executive management, perhaps we wouldn't have to rally for a split? A decision is being made by the older generation of our community who do not know how the health system truly works. By splitting the districts, we retain our current workforce issues and skill shortages, and do not get any additional funding - this won't solve our problem.
2680	Yes			✓			Local Place based leadership and Management would provide the community more autonomy and commitment to the needs of this area.
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2681	Yes			✓			It is clear to me that the resources donated to Griffith Hospital have been transferred to Wagga, and limited services are provided to Griffith with clear preference for us all to travel to Wagga, we can't even have a broken bone set locally, much less a colonoscopy, much less mental health, much less drug and alcohol withdrawal, even in physio we are limited. Considering the remoteness of our location, this is FAR from good enough. Consider the further distances people further west have to travel, this is DISGUSTING. Where is our MRI machine? Why do we still rely on the travelling breast screen? Why do we not even have one public health funded GP?
2680	Yes			✓			I am a retired health care worker who worked at both Griffith Base Hospital and (briefly) MLHD, and in two other NSW Local Health Districts for 23 years. Despite Griffith having the second largest facility and population in MLHD, it does not have even one representative on the MLHD Board. Most decisions made are Wagga Wagga (Wagga) centric and have always been in particular deference to the Wagga clinical fraternity (i.e. doctors only, not nursing and allied health staff). An interesting question omitted from the MLHD FAQ relates to the funds allocated to the rebuilt GBH for their MRI. This purpose-built room is currently used for miscellaneous storage and thus patients and their families continue to travel to either Wagga or Sydney for MRI investigation. A statistic which requires investigation is not only the patients from Griffith and other Western Riverina towns that travel to Wagga for their MRI, but those who travel to Sydney or Melbourne, public and private facilities, as they cannot afford to wait for, or do not wish to attend, an appointment in Wagga. The vast majority of these patients would have this investigation undertaken in Griffith if the equipment was available. By the way, this statistic is easily available from NSW Health as they use postcodes to identify cross-border utilisation, etc. The argument that 'duplicating the administrative hierarchy would not be cost-effective' is ill-advised because if the Western Riverina facilities (WRLHD) were removed from MLHD, the 'scaling down' of Wagga administrative positions, and the vast reduction in patient transport and IPTAAS costs, would go towards funding those in the new WRLHD. This is one reason why the Wagga administrative hierarchy fight against the split. It is not in Wagga Wagga's clinical (doctors only) or administrative workforce's favour to reduce their workload due to the subsequent down-grading of their positions. A GHB/Western Riverina Board will also not work, as this Board would only be given minimal power to make autonomous decisions, with important decisions continuing to be made by the existing WLHD personnel. One only needs to revisit the decision why the painful, expensive and lengthy rebuild of WWBH was undertaken on the existing site, and not on the initially proposed and preferred green-field site near the University. Dr Joe McGirr was protecting the value of his colleagues' 'rooms' in and around the existing site by vetoing the green-field site. Woe betides if these doctors were required to sell their highly valued real estate and relocate! One should also ask, how much money would have been saved and how much more efficiently and quickly the new facility would have been built? Many of the same people involved in this costly decision, are influencing the decision about the proposed WRLHDF. MLHD's Director of Operations, Ms Jill Ludford, travelled to GBH the day after the recent rally in Griffith and spoke to staff advising them not to voice their opinion on the controversy, with the strong inference that their positions would be in jeopardy if they did speak out. Shame, shame, shame.
2680	Yes			✓			Change it.
2680	Yes			✓			
2680	Yes			✓			MLHD does not value Griffith in its health staff in my opinion. We are overworked and burning out and that is not good for our patients.
2680	Yes			✓			Griffith urgently needs mental health at hospital. People keep dying due to sub par mex assessments.
2680	Yes			✓			
2680	Yes			✓			We already TOLD you this when we all signed the petition and showed up to a MASSIVE rally in the park, attended by SENIOR griffith hospital staff! Including the late great Professor Max Hopp, who was in SUPPORT of the SPLIT.
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			I have worked under all of the mentioned models for the Health Service and some more. Autonomy is better. I am not concerned that the Minister doesn't want more LHDs. That sort of argument does not consider what the electors and residents actually want. NSW has long been known to rearrange healthcare and hospitals on a regular basis. It is time that instead of rearranging the deckchairs to fool the people we have consultation with the people about what suits them.
2707	Yes			✓			I started working there and left after 11 months due to issues with governance, no one even griffith's executive not listening to staff. I had no desk, no computer etc and just told I have to figure it out because they didn't put in the budget so there was no money. It was a new position, if they can fund a position they can fund a budget for that position to do it job. There are too many manager positions that are advisory within the whole district but they don't have actually any clinical accountability for or to staff. Griffith will keep losing experienced staff until this is fixed
2680	Yes			✓			
2681	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2340	Yes			✓			Worked in Griffith base Hospital for few months as one of the allied health member. I agree Griffith base Hospital should be split with the amount of specialist service can only be access in Wagga Wagga, often wagga Wagga hospital reject patient transfer. The Murrumbidgee LHD is way too big to fit such all service in Wagga, even people living in Griffith needs to travel 2.5hr+ to Wagga for anything.
2680	Yes			✓			MLHD does not satisfactorily manage or meet this communities needs
2680	Yes			✓			

2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2681	Yes			✓			
2680	Yes			✓			Listen to Helen dalton and the staff who work in the hospital! We are run off our feet and quitting because no one is listening to us
2681	Yes			✓			
2680	Yes			✓			It needs to be split. Wagga can't even run their hospital correctly, they advertise as the best but seriously. All the stories you hear working at a Pharmacy.
2680	Yes			✓			
2680	Yes			✓			
2681	Yes			✓			
2706	Yes			✓			
2680	Yes			✓			Wagga think it is ok to travel 2 hours in pain with broken bones from Griffith, let alone further towns like Hay etc. we are tired of waiting. Even after arriving in wagga they cannot manage the workload and you may have to wait days for surgery. cardiac consults have 6 month waiting list in Wagga. If they come from Sydney and go to St Vincent's to consult then they want you to go to Sydney for treatment. We need this here in Griffith now. Surely councillors have experienced some of these problems themselves. Get out and do your survey..... A lot of people won't even see this one to reply.
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			Griffith Base Hospital never has enough staff or specialist skilled staff eg fracture clinic, disgrace having to travel to Wagga.
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2681	Yes			✓			MLHD due to its incompetence, bullying and ignorance have drove local staff away from the hospital. I have recently resigned after almost 30 years. I have no desire to ever work for MLHD again. They need to be held accountable for the culture they have created due to a complete lack of support and for the money they have mismanaged. MLHD GBH is simply a stepping stone for managers who come to Griffith bolster their careers and move on 3 years later. Staff have been left to pick up the pieces. Despite a new hospital nothing has changed except the building we work in. Please seperate from MLHD.
2680	Yes			✓			We truly need a change to our hospital. Travelling two hour is unsustainable.
2681	Yes			✓			
2680	Yes			✓			As a current employee of MLHD I am excited at the possibility of Griffith finally being able to expand and reach it's potential in terms of providing high quality care to its community and those of the surrounding areas. Over the last 15 years I have personally watched Wagga take resources and control over our Pharmacy department as well as countless other departments throughout the hospital eg. Pharmacist Intern positions that were promised and then refinanced to hire extra Wagga staff instead. The argument against the split is that Griffith doesn't have the ability to provide extra services. But it's impossible for Griffith to stand on its own 2 feet and be able to provide these services when we have been held back for so long! I agree it would be a long changeover process for Griffith to be able to provide the extra care but it's exciting to know that the wheels are finally in motion and moving in the right direction. This would be a huge, monumental step for the town!
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			I don't think there is enough information available to make an informed decision. All Griffith really wants is proper funding and healthcare staff. I don't think splitting from MLHD will achieve this, if anything wouldn't it make staffing the hospital harder as we wouldn't have access to MLHD employed specialists? (Genuine question).
2680	Yes			✓			
2680	Yes			✓			We shouldn't be losing funding, positions and services. Our hospital should be growing just like our beautiful town x
2680	Yes			✓			
2680	Yes			✓			More opportunity for locally based decisions rather than specialists and governance from afar who dont live and work in our patch. For too long the needs of the west are being ignored in favour of a Wagga first approach. Ask the specialists if they would like to travel 3.5 hours with broken bones on a bumpy highway late at night to get medical assistance, or wait a few days till they get assistance. Or have to find their way back to their home town using public transport after an operation, cancer treatment, etc. They need to understand there are people involved that they are caring for and it can't all be done from Wagga.
2689	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			WE NEED AN MRI MACHINE IN THE HOSPITAL
2680	Yes			✓			
2680	Yes			✓			
2680	Yes			✓			
2681	Yes			✓			As is usual practice Wagga a larger hospital draws most of the funds down grading Griffith over decades Where is the fairness and commitment to providing more funds for Griffith and smaller hospitals locally!!!!
2680	Yes			✓			I do not think splitting from MLHD is the answer, but something needs to change. We need to have more health services here in Griffith. It is ridiculous that we need to travel to Wagga for some health appointments. I feel for people living in outer rural towns, like Hay who have to travel even further because Griffith does not have the resources.

2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2681	Yes				✓		The shortage of healthcare professionals and services is unlikely to change because of two separate health districts. But healthcare for people in the western Riverina definitely needs improvement.
2650	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		As an allied health worker there is very little incentive for staff to come to Griffith we need to be discussing with the government how we change this such a scheme they have for teachers. The best way to have more services is to be able to physically staff them which we can't at the moment. Splitting the LHD will also likely to change the funding allocation significantly we will still be facing the same issues whilst also spending a lot more money on administration.
2680	Yes				✓		I do not believe that breaking away from MLHD is the answer to the current issues at GBH. MLHD do need more accountability in delegation of funding, however splitting is not the answer
2680	Yes				✓		
2680	Yes				✓		Splitting only going to cost more. Need more mandated essential services to start at Griffith Base or have strict time frame for transfers for higher care. Currently patient flow is managed from wagga, being a base hospital this service should split and Griffith should have more say in patient movements for transfers.
2680	Yes				✓		
2680	Yes				✓		More consultation needs to be done including other regions associated with split and all health staff. It would cost allot of money to arrange a split so being sure this will 'fix any problems' before jumping into anything.
2681	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		We have a gross imbalance of highly paid office / administration based roles and patient facing direct healthcare giving roles. Funds allocated in wrong places and needs such as Aged care , Rehab , Orthopaedic and Acute MENTAL HEALTH .. This is desperately needed across all of these regions all coming to Griffith Base and referred onto Wagga. Look at the percentage of referrals for acute care coming from GrBH further stretching resources and providing less than adequate care time frames because of Bed management not completed health care needs. Then putting unrealistic work loads onto community health services that are under resourced and then ending up back at GrBH .. Griffith Emergency staff are expected too and do deal with everything that comes through the doors. Unrealistic pressure to sustain = unsafe , burn out and less than desirable outcomes .
2680	Yes				✓		WWBH treat GrBH as a low priority in everything including transport, transfer of patients and consultation.
2680	Yes				✓		
2652	Yes				✓		I feel splitting the health services would be detrimental and many services would be lost. So many community services are based in Wagga and griffith and provide outreach monthly to other communities. We need more OTs, social workers and physios. I would also suggest a discharge planner (a dedicated nurse to work across the medical and surgical wards to aid the discharge in patients ensuring all appointments booked and sorting complicated discharge issues). If you want more services we need to provide the data, eg. How many people do we send to Wagga for Orthopaedic Surgery and the additional cost to send to Wagga. What would the savings be if we had a orthopaedic surgeon in Grffith and a ability to run a fracture clinic. I have been informed there is a Orthopaedic surgeon who has already asked GrBH to work there and was knocked back.
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		The system is definitely broken and our community are not being served appropriately. However splitting from MLHD is not necessary the best economic option.
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		
2680	Yes				✓		If we split it won't help the staffing crisis, it will remain. Staffing crisis is country wide. The current hospital is not big enough to house all the extra services that is being debated to bring to the new proposed model. Funding is reliant on activity based figures. Yes funding will be increased based on increased activity but won't bring everything. The Dalton/Jaya team need to fight to bring the extra services back to our community and to fight for our voices to be heard but I feel the split is not the answer. It will cost the government and us tax payers more money in the long run if the split goes ahead. I am against their fight.
2680	Yes				✓		
2680	Yes				✓		
2681	Yes				✓		I had my two children in Wagga over Griffith due to lack of resources and staffing issues.
2680	Yes				✓		I would prefer more information not just the word of helen Dalton which means nothing to me
2680	Yes				✓		Splitting puts us at severe risk of having less resources. Changing the management structure makes way more sense, with a stronger local voice but still having access to resources not at Griffith. But we need things like a MRI at the hospital. More beds on wards opened so that more surgery can be attended.
2680	Yes				✓		Until NSW Health increases their rates of pay the staffing issues will continue regardless of what happens with the LHD. There are no staff to provide services as you can make 20% more interstate. Why would any staff come to nsw? A mental health until would not be established just because of a split. If current mental health teams are under staffed how will the town staff an inpatient unit?
2680	Yes				✓		
2680	Yes				✓		

2680	Yes				✓		We need a mental health unit, and it needs to cater to adolescents as well as adults. The suicide rate in this area is tragic and is a disgraceful reflection on the mismanagement of community mental health services in this district.
2680	Yes				✓		I think the split is disastrous and we will still be relying on Wagga and other referral hospitals because ultimately we are regional. The number of hospitals to be with GBH is much less than the Wagga side and resources are distributed on numbers. It won't necessarily mean we'll get an MRI machine or any new speciality doctors in line with Wagga currently. Too much unknown too much to risk what we already have. The logistical and administrative costs alone will be huge which could be invested into our current GBH.
2680	Yes				✓		Maternity services need more resources and love, to keep the staff we have and to promote and expand
2680	Yes				✓		Current Messaging out to the community is inaccurate and misleading. Demonstrating lack of understanding of how the health system functions and funding works. Wagga does not control staffing, and Griffith community are not being made aware of the current district services that would be at risk- recruitment is challenging due to geographical issues that won't simply be resolved by splitting. Big risk. We need advocates for improving NSW processes more broadly and ratios - desperately.
2680	Yes				✓		Being a part of MLHD allows us to share resources and bigger teams within each discipline for our regular development opportunities/meetings. I worry that splitting from MLHD would impact these opportunities and not necessary improve issues that this petition is targeting. I also dont think that Griffith is a big enough service to support outlying communities eg. Hay, Finley etc who would probably prefer to access their health care at Wagga. Instead of splitting resources i would petition to increase resources at Griffith to prove that these smaller towns can be supported before splitting entirely.
2680	Yes				✓		Fracture clinic is necessary. As well as a mental health facility and more staff .this can all be achieved by sticking with mlhd . By having better facilities at gbh would take the pressure off wagga base so in short maintain mlhd but with griffith base and surrounding areas have more say in what happens at griffith base .
2681	Yes					I don't have enough information	As a civilian I think it's ridiculous we still have to travel to Wagga for fractures
2680	Yes					I dont know all the information.	Thus could be detrimental or this could be a good thing. Very hard to choose because its not as simple as who makes the decisions
2680	Yes					I need more information of what it would look like for current employees regarding conditions pay etc	
2680	Yes					obviously the current system is not working, but what are the ramifications of splitting. has anyone done a proposed budget of what it will look like? the proposed set up?	
2680	Yes					Pros and cons for both options. Some concern re attracting/retaining AH staff (with small pool here in Griffith and access to supervision/professional support available through Wagga)	
2680	Yes					Unsure of other surrounding communities are for the split, think there is no concrete proposal on what the split would entail (a lot of media saying Griffith would get more services, but is that guaranteed?).	Think wider hospital stats should be available to the community- how many staff at hospital and how many are local. Can Griffith accommodate extra staff housing for more staff, and what would this look like to wider community also looking for housing? What services would community still need to travel to Wagga for, even if there's a split (and what timeframe should the community expect for that service to still not be in Griffith). Would Griffith loose services if a split occurs eg Breast Screen or Aboriginal Health?
2680	No	✓					
2680	No	✓					NSW Health to consider changes to current model to enhance the weighting of funding that deprives Griffith which serves a large slice of Murrumbidgee, of necessary services eg MRI, minimal orthopaedic, paediatric and others. An extensive review of all current clinical services, many of which are unknown to the community, could reveal possible quite reversal gaps. It does seem that there is some inequity in the current distribution of funding in the region, and community needs to have trust that there is fairness in allocation. The duplication of non clinical health services is unnecessary.
2680	No	✓					The numbers don't stack up. Griffith doesn't have more urgent medical cases by population than anywhere else in the state. The state government has a responsibility to put the medical resources to service the most people. It would be a waste of money to put a medical specialist or \$million equipment in Griffith to service half the population it would in a bigger centre.
2680	No	✓					
2700	No	✓					Duplicating the LHD would only reduce the funds available to actually spend on health outcomes. The waste of duplicating the necessary and extensive administrative and governance requirements seems to be misunderstood by many of the public who are at the same time complaining about lack of clinicians, nurses and equipment. Especially when it's being administered from less than 200 away. Sure, ask the MLHD to share more detailed information more frequently so people can hopefully understand the actual constraints of the current NSW health model and global shortage of health professionals.
2680	No	✓					Do not break away from MLHD. It's set up and Wagga has a fantastic provision of Medical services, consultants and Allied Health that has taken years to establish. Large number of consultants live in Wagga. There is a huge shortage of doctors in NSW. Don't kid yourself and believe there are doctors jumping to come to Griffith. It's only two hours from Griffith to Wagga. Same as driving from an outer suburb of Sydney to St Vincent's in Syd. There needs to be a big improvement in communication between Griffith and Wagga hospital. Wagga is too busy to come to you. You need to go to them! A local committee could be set up to help with the organisation of services and also to make requests to MHD for additional services, sharing of services etc. Don't let this happen and it be too late to rectify it. We don't want another Murrumbidgee High School.
2669	No	✓					
2680	No	✓					
2680	No	✓					
2680	No	✓					





2680		No		✓			Griffith CAN handle a SPLIT from MLHD with the right resources & leadership. We need this split if we're going to service the town & district properly - now & in the future. Wagga Hospital say they're struggling now & with the expected population growth in our region, its time to establish another hub .... one for the western area. We have the opportunity to create a Western Riverina Hospital Service with our new building .... lets just DO IT! No more procrastination! Griffith has historically supported its local hospital with community & financial aid & it will do it again once they're satisfied the contributions aren't shifted to Wagga, as they have been to date. The town WILL back its own service . Also, Griffith as a local area medical centre will be a positive for our growth, our productivity, & community well being. The current system is not equal handed & we're all simply sick of MLHD's broken promises & manipulation of resources. Our medical needs don't rank as important. Story after story is told of inadequate treatment & life threatening experiences caused by the stupidity & inequality of the current system. This will not change unless we take this opportunity & stand up against it NOW. Get behind this please Council ..... you are our elected voice & you need to listen to the community. The mayors comments at the recent town meeting were extremely disappointing & paramount to sabotage. If a local council does not support a government funded project in its area, then its doomed. Its time to show some leadership & promote this project with enthusiasm, rather than 2nd guessing it.
2680		No		✓			
2680		No		✓			
2680		No		✓			We need a hospital that can cater to our needs. A basic one such as setting a bone is not possible in Griffith. Why.
2680		No		✓			
2680		No		✓			Amalgamation doesn't work
2680		No		✓			We need local control
2680		No		✓			
2680		No		✓			Not enough staff, no MRI machine, no orthopaedic and we are living in an ageing society. Do something about it.
2680		No		✓			Why the hell do you think you have any say in this anyway? Local councils have no jurisdiction in this. Vote yourselves if you want to, but we don't care for your opinion other than that of your status as a local resident!
2680		No		✓			
2680		No		✓			
2680		No		✓			
2652		No		✓			
2680		No		✓			
2681		No		✓			
2680		No		✓			The fact that children cannot get broken jones attended to in Griffith is a disgrace. MLHD has had over 20 years to fix this. For this reason alone MLHD should be told to go away.
2680		No		✓			
2680		No		✓			we need our own hospital, doctors, specialists and faculties and equipment in our Griffith hospital and not have to go to Wagga, very inconvenient.
2680		No		✓			
2681		No		✓			Griffith hospital is more than just for the residents of Griffith it provides a closer hub for isolated communities like Hay Rankin Springs & Hilton, and while these communities may mean nothing to Griffith City Council, access to facilities at Griffith Hospital mean a hell of a lot to them.
2680		No		✓			They have built a beautiful new hospital, but still we haven't got the essentials like a fracture clinic, MRI etc. Has Griffith Base Hospital been set up to fail ??
2680		No		✓			
2680		No		✓			
2681		No		✓			
2680		No		✓			We don't have the funding for basic services as Wagga takes the chunk. City of this size shouldn't be without basic services and funding. Needs to be run by those in the community not hours away
2680		No		✓			We should have all of our own machine MRI etc. we shouldn't have to travel to Wagga when we have a brand new hospital here.
2680		No		✓			
2680		No		✓			Driving 4 hours round trip to a fracture clinic is ridiculous not to mention the discomfort of the patient. And why on earth was the blood bank closed, they are always calling out for blood donations, and you can't say that the mobile Red Cross van is more viable??
2680		No		✓			
2680		No		✓			Im not sure if setting up a board with community members is common practice, if it is I would opt for option 3 as long as it doesn't become a political issue amongst sections of the community. We definitely need more resources and services here in Griffith and not have to rely on Wagga for basic services.
2680		No		✓			
2652		No		✓			Get the decision makers to try living 3/4hrs from Wagga and need medical help..
2680		No		✓			
2680		No		✓			I believe local control and resourcing will give better health service to Griffith and surrounding towns.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2681		No		✓			Council support should be with people they are voted by and vote to have a hospital in local control and encourage more visiting specialists to this hospital
2680		No		✓			
2680		No		✓			
2680		No		✓			By. Coming a local governance the Health services and resources for our hospital will be balanced. We will attract more doctors because we can have the work they require to make a living. At the moment we don't have a say in what is provided in our hospital. It is an unfair and biased system that is starving out town of its rightful health services by directing money to Wagga. We don't even make our own meals here in Griffith. That is ridiculous. Change is needed and the split is the way forward.
2680		No		✓			
2680		No		✓			MDLH Have had long enough. Things are getting worse not better time for change.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			It's about time health was not in the hands of wagga but Griffith where we live

2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			I feel Griffith & surrounding areas don't get enough input into what we need and don't receive a fair share of funding to improve local services. Example - we have a new hospital, fantastic, but it is essentially what we had and does not cater for future needs. We also need to have input into how funds to run our healthcare are best used. If we remain under MLHD I don't think we will ever achieve this.
2680		No		✓			Doing the same is not going to get the services we need. Think of the people who live further from Griffith or Wagga. How much less do they deserve! We are a large enough city to expect a decent level of medical support. It's absolutely ridiculous to expect people to drive 2 hrs+++ for medical support. It's a fundamental human right
2680		No		✓			AS long as we receive adequate funding to fully service all health areas.
2680		No		✓			I believe it is our best interest to have some say in our hospital for everyone's benefit.
2680		No		✓			
2680		No		✓			No local input as it stands. Limited services eg fracture clinic. Basic surgery. Long trips to Wagga or Albury for basic needs that we used to have
2680		No		✓			
2680		No		✓			
2680		No		✓			Of some one that has spent an eternity in and out of GBH it is run by authoritarian unliked wanna be political figures full of their own self importance. Staff are fed up, Drs more so, out dated equipment the list goes on. Griffith deserves better!
2680		No		✓			We will always be neglected until we split. You only have to look at how the hospital has gone downhill since the board was dismantled by Mr Moody back all those years ago
2680		No		✓			
2680		No		✓			It's 200kms to Wagga. Too far away to run our health system and staffing. 65
2680		No		✓			Griffith needs its own services not travelling to Wagga. Griffith needs to rely on local ambulances not Wagga.
2680		No		✓			I love yoogali
2681		No		✓			
2681		No		✓			
2680		No		✓			Griffith city council need to support the people of Griffith and demand that we take control of our hospital. We need and deserve better equipment services and specialist staff to support Griffith and surrounding areas with the best professional health care. We need staff dedicated and loyal to this great area. St Vinc private should take over the running of our Base. The equipment and services provided with the staff training and patient care would improve dramatically. St Vincent's could compliment and enhance the standard of healthcare that we all deserve. Council need to look back in history. We once had the best hospital and great surgeons wanting to live here and the government downgraded us so that more patients would go to Wagga and Albury. That is what is happening again. Wake up Council. Show us you are not going to play the political game and put the people and Town first. And back on the Map as a Town that makes a difference and stands out.
2680		No		✓			
2680		No		✓			
2680		No		✓			Im in Middle of going back N forward to Wagga for Brain MRI, CT scans, all which can't be done here at IMED cos IMED Griffith has no Dr to process, plus no MRI machine in huge empty allocated room at Base... so it's back n forth to Wagga at 81 y.o. and relying on others to drive me... I AM FURIOUS and let me tell you, Wagga couldn't give a shit about Griffith!!
2680		No		✓			
2680		No		✓			I was born in Griffith as we're my parents, I moved away 25 years ago for work, I recently moved back with my family only to find in those subsequent decades that there is in fact fewer medical services than when I originally left. Having parents now in their eighties I am compelled to take days away from my own workplace to ensure that my elderly parents can safely access specialist appointments. Often these appointments are early in the morning or later in the afternoon so I do not wish for my parents to drive back and forth by themselves during those dangerous times particularly with their current medical issues over four hundred kilometres back and forth in one day is too much.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2711		No		✓			My 12yr old daughter was sent to fracture clinic in Wagga with broken shoulder but was told to come back in 5 days. Imagine travelling nearly 3 hours in a car in immense pain only to be told come back. 6 hours in a car.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Something needs to change. The current situation is putting lives at risk.
2680		No		✓			
2680		No		✓			My family have had to travel to Wagga for broken bones, surgeries, appointments with specialists, pet scans, elderly parents hip fractures and strokes. It puts so much pressure on patients and their carers. We need to push for these services for our city and our surrounding towns. It costs us so much more to do all these trips to Wagga. We have had to travel early mornings and late nights which is and has been really dangerous. We all deserve better.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			

2680		No		✓			
2680		No		✓			
2680		No		✓			You need to fix the healthcare system here. It's embarrassing.
2680		No		✓			
2680		No		✓			I don't have faith in the current system and choose to have testing completed in Sydney
2680		No		✓			In December 2024 I had prostate surgery in Wagga base. Expecting a one week stay in hospital I was discharged after 3 days. A painful trip home 200 k
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			If dr jaya and dr hopp wanted change then im all for it
2680		No		✓			GBH has severe staffing issues that almost cost the life of my son. I am all for the change and reform that allows the hospital to grow and properly service the region.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Need more services in Griffith
2680		No		✓			Since Griffith was included in the MLHD we have lost services, the council who represent Griffith citizens should support the split, I am quite frankly sick and tired of having to travel to Wagga for basic services which once existed here before the merger. Dr Jaya has been vocal about the de-merger, so support him!
2680		No		✓			
2680		No		✓			It's time for a change to better ourselves.
2680		No		✓			
3754		No		✓			Almost all of my family still lives in Griffith and I lived there most of my life. For a location the size of Griffith the hospital offers next to nothing. It is astonishing that someone who fall over and breaks a bone can not have it fixed in Griffith. It is bad enough that Griffith residents must travel all the way to Wagga. Anyone living further west has it even worse. I have family members that need to take a day off work just to have a 15 min consultation with a dr in Wagga... that is unacceptable. 2 hours drive there, 2 hours back. For a 15 minute appointment. Our new "base" hospital needs to be acting like one and the only way for that to happen is to have local control.
2680		No		✓			
2680		No		✓			
2680		No		✓			Griffith & regional residents should not be required to travel to Wagga for so many basic medical treatments. Eg fracture clinics, MRI.. especially when state funding for MRI machine was part of the initial funding. A purpose built MRI is available in Griffith but no machine. Why is this regions people seen as being not as important as those from the 2650 postcode
2680		No		✓			
2681		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2669		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2706		No		✓			
2681		No		✓			I'm not thoroughly informed, though that's partially by choice. It's not too hard to fathom that MLHD is very Wagga centric and while that's not always a problem for Griffith and surrounds, it results in limited choice and poorer outcomes for those in shires like Hay, Murrumbidgee, etc. Residents in those communities should feel confident in maternity services within Griffith and that just isn't the case at present under MLHD. It's just too big a bureaucracy to adequately manage Western Riverina/Murray communities.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			I have previously worked for MLHD for 6yrs. I can confirm Wagga is the central hub that calls all the shots. The current model is for all residents of the Greater community to funnel to WWBH for all items that cannot be solved locally. Griffith is the Western hub of the Riverina however the MLHD doesn't appreciate or respect this. Our local health system needs a major shake up. I would love for council to get behind this initiative because without Councils support it will not be possible.
2680		No		✓			
2680		No		✓			GBH should have their own funding for labor and equipment maintenance purchase so we can have our own orthopedic department so we will not go to WWBH anymore. we can employ more specialists and surgeons.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			For our community to move forward we need to split from MLHD, otherwise people will start to move out of Griffith closer to better medical services, myself included!
2680		No		✓			Get it up and running properly. The way it is going no one will get any use out of it

2680		No		✓			
2680		No		✓			
2680		No		✓			WE NEED CHANGE!!!!!! I recently looked for somewhere to work under mental health, there is a very small part of Griffith that has any kind of services offered. We need more. This town has grown out of such a small delegation.
2705		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Have watched the decline of basic services eg fractures decline since our local input was removed. Currently out of touch with Griffith and surrounding areas.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			I think the MLHD have been detrimental in their management of the Griffith Hospital. They show an obvious neglect of our hospital with all preferences going to Wagga. This affects us as a population.. Horrendous stories of badly injured patients , being transferred to Wagga, are common. Nobody wants to witness their loved ones being treated like this. Bring us back the old days, when Ray Gamble and a board of committed, interested locals, had the interest of the community at heart. Equipment, donated by locals didn't get taken to Wagga but was kept here. We had a high caliber of Dr's like Dr Binks , who could perform any sort of operation. There was far less need to travel to a major city because it could all be performed here in town. Our present quality of health care is SADLY LACKING compared to our past. Shouldn't health services continue to improve? Griffith is badly failing in our level of acceptable health care.
2680		No		✓			Council should not have got involved
2680		No		✓			don't think wagga wagga should be the boss of Griffith
2680		No		✓			
2680		No		✓			Sick of seeing our staff/services stripped away by Wagga! Why should our money be siphoned off by fat cat managers in Wagga??
2680		No		✓			
2680		No		✓			Has to happen or we'll suffer
2680		No		✓			Why do parents have to travel to Wagga 4 hours return for sport injuries like one broken finger that happened to my grandchild, Griffith had a fracture clinic once why do people even further away have to do the same, it's not fair to our district population, Do something Griffith City Council for ONCE
2680		No		✓			we need to have all pertinent services located in our hospital.
2680		No		✓			I've lived here for most of my life, I'm 64 & in the day of the local hospital board things weren't difficult like now.
2680		No		✓			
2680		No		✓			I worked at Gth Base Hospital 38 years ago, when we had a kitchen, cleaning crews, a laundry (servicing the area not just the hospital), maintenance staff, gardeners. It was a great source of employment for many in Griffith who took pride in our hospital, it was a great place to work. Now it is an embarrassment thanks to MLHD. It may be a shiny new hospital but the moral of Drs and staff is low and it is not nor ever going to run at its full potential (of beds, staff, operations) while MLHD is in control. Time to split.
2680		No		✓			Patients are required to travel several hundred kilometres currently to access specialist appointments along with basic medical services. Many of these individuals are elderly with serious health issues only to be driving in remote regions early in the morning or after nightfall. Surely any critical thinker would realise this is a recipe for disaster with the amount of kangaroos and assorted wildlife that is prevalent during these times.
2680		No		✓			
2680		No		✓			If we continue with MLHD things will get worse!
2680		No		✓			MLHD has been purposely holding back services from Griffith so Wagga gets more patients giving Wagga priority over Griffith for beds and nurses and funding
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Perhaps Saint Vincent could administer both private and public hospital
2680		No		✓			
2680		No		✓			
2680		No		✓			
2706		No		✓			
2680		No		✓			Have travelled to Wagga for medical procedures for my children and myself on so many occasions that once we were able to receive in Griffith. Not only were we of pocket for accommodation, travel etc but also the stress of travelling early or late at night is very dangerous.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			This survey will not reach a lot of people, not a good way to do it as I came across it by accident and most people will not see it. The hospital was run much better years ago. Since Wagga took over we have lost so much and it is difficult for elderly especially to have to travel to get what was once available locally. We have been going backwards, needs to change, we need to be independent. Council should listen to the people who work there like Dr Jaya and the late Dr Hopp, shame on Councillors who do not.
2707		No		✓			
2680		No		✓			It is 215 kms to Wagga Wagga. Too far to be governed by the MLHD.

2680		No		✓			
2680		No		✓			Griffith hospital has suffered greatly since the first split having lost several money making services eg. laundry cars meals were better and generally all downhill since. Wagga doesn't care about us only themselves and having worked in the system I am aware of things that go on behind closed doors and having had my own issues with the hierarchy I have no faith in Wagga to care or look after our needs
2680		No		✓			
2680		No		✓			
2680		No		✓			The Government policy of "bigger is best" is often proved to be so wrong because the detrimental effects it has on a local community's specific issues and needs are huge. eg. Regional Council amalgamations, Regional School amalgamations, Regional Hospital amalgamations, Regional Primary Industry amalgamations, etc, etc.
2680		No		✓			we need our own hospital and specialists not have to go to wagga.
2681		No		✓			
2680		No		✓			
2675		No		✓			
2680		No		✓			
2675		No		✓			I live in Hillston and already travel a long way, but having to go to Wagga makes it that much harder and I'm getting older and have some fairly major health issues.
2680		No		✓			
2680		No		✓			The current MLHD model is not working and is far to Wagga centric. A Western Riverina health district with Griffith Base as the centre piece makes far more sense as long as it is appropriately funded under NSW Health.
2680		No		✓			Please ask MLHD to clarify if donations to Griffith Base Hospital, and equipment bought by fund raising for GBH have been taken to Wagga Wagga Hospital.
		No		✓			
2680		No		✓			We are required to travel to Wagga for X Rays and other procedures, but we have an X Ray department here in Griffith.
2680		No		✓			We need change
2680		No		✓			
2680		No		✓			There may be duplication in some admin services, but I believe the benefits will more than make up for this. It is currently very costly, both financially and in lost time, for people in the Western Riverina to travel hours to Wagga for services which could easily be provided at the Griffith hospital. The opening up of the currently closed new rehab ward will result in more beds becoming available in the General Ward, which will prevent elective surgeries from being cancelled due to lack of nursing staff. Having orthopaedic services available at Griffith Hospital will remove the need to travel to Wagga for fracture surgeries and the required often simple follow ups. Money that has been donated to Griffith Hospital will stay in Griffith and won't be reassigned to Wagga.
2680		No		✓			MLHD have had SEVEN, that's right, SEVEN years to staff our new hospital & they have not. We need to maintain & staff our own Griffith Base hospital.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2675		No		✓			
2680		No		✓			Our town needs to split from MLHD we need services here, not in Wagga
2675		No		✓			We need the split!! Hillston is too far to travel to Wagga for medical services. It is nearly 4 hours away.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			I don't care what model is used so long as Griffith gets better health care and that would seem very unlikely while MLHD controls the budget
2681		No		✓			Griffith and surrounding areas deserve a orthopaedic theatre and fracture clinic plus drs to go with it. Also a ear nose and throat visiting specialist these are basic services that a city deserved. Age care also important .
2680		No		✓			We can't trust MLHD to be transparent and they only listen when they are put in the spotlight of the media and then go back to lies after the news dies down
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			For children with badly broken limbs, ambulance trips to Wagga are unnecessarily cruel. Surely we can do better than this.
2680		No		✓			
2680		No		✓			
2681		No		✓			We need these services in Griffith, we have the hospital now and it needs to be used to its fullest potential, not everyone can travel to Wagga for special services so some health issues are not resolved.
2680		No		✓			
2680		No		✓			
2675		No		✓			I'm from Hillston. Any Specialist we don't have in Griffith makes it even harder for us. 3 hour drive to get to Wagga and have to stay over night because appointments are early morning or late afternoon. You might have a lot of money but I don't. No I'm not on benefits
2680		No		✓			The system is broken
2680		No		✓			
2680		No		✓			
2680		No		✓			

2680		No		✓			
2680		No		✓			Given the current model has so many flaws I can't see Wagga MLHD actually being of any assistance in providing a more balanced health precinct for griffith and regional areas fairly moving forward. Under the current model everything is centred around Wagga base with no intention of improving standards here in Griffith in particular. Since the new griffith base hospital opening Wagga has taken over more of the administration areas of the hospital taking away the responsibility from staff that are capable of their current positions. The amount of wastage of locum doctors and nurses is absurd that fly in and fly out at a huge expense to the rate payer.
2680		No		✓			Lets take a look at GRP's (Gross Regional Product) of the local areas including Wagga. Now Griffith and Leeton have industry and wagga really has none. But there GRP is \$5.65 Billion dollars a year.. How much much is being kept there and not being spread out to the other local hospitals. Wake up. This survey is a waste of time, Split it and move on. And the other thing that pisses me off is the local charities that donate to the Griffith Base Hospital. That money goes back to Wagga, and who knows what they actually do with it. Beds that have been donated to Griffith has been seen in other towns. Griffith is a generous town but seemed to be screwed is the ass all the time. Split it and move on.
2680		No		✓			
2681		No		✓			
2680		No		✓			
2680		No		✓			We do not want to travel to Wagga for broken bones, when we have a new beautiful hospital, we want to be able to have it all done in Griffith. We have new facilities here let's use them.I had to go to Wagga for a broken wrist.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			We have built a beautiful new hospital and still can't attract staff to operate the new facilities.
2680		No		✓			
2680		No		✓			Goodluck whatever is decided stronger representation will benefit griffith and the new hospital they need staff we shouldn't have to travel for treatment of fracture clinics
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			I have elected to split, but if the Government won't do this, Griffith should have its own Board
2680		No		✓			
2680		No		✓			Our hospital system is broken and no new hospital will fix it.
2680		No		✓			
2711		No		✓			A hospital needs the best staff it can have! Griffith has a huge catchment and it is very hard to get to Wagga for people from Booligal and Hillston
2680		No		✓			It is extremely difficult without having all the information to make this call. A split will not help our hospital if funding is not increased. A split will also bring more admin costs. A split will only help if it comes with a bigger budget, all of this is unknown.
2680		No		✓			
2680		No		✓			I feel Wagga Wagga has controlled the residents of Griffith to long. When you have sick family member and told you need to drive them to Wagga Wagga for specialist when we could have more specialist here. Over the years I have sat with my husband in the ED department in WaggaWagga hospital all night only to be told there's no beds for him and to drive him home. We need the split, Griffith is a city not a third world hospital.
2680		No		✓			It needs to split we have gone backwards for 20 years and it's about time we go back forward for our health
2680		No		✓			
2680		No		✓			
2681		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			We need more services here in Griffith but we also need more beds and more staff. We have a brand new hospital without a mri machine, they cant fix broken bones and theres no mental health help, we need those things here in Griffith!
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			We have gone without for to long. Now its our time to get our fair share for our hospitals and doctors and nurses and especially the community.
2680		No		✓			
2680		No		✓			
2680		No		✓			Our hard earned dollars should be spent in our city and we deserve the best options for health for our city without the need to travel.
2680		No		✓			
2681		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2706		No		✓			
2710		No		✓			How about sharing this survey to outlying towns and not restrict to Griffith council Facebook site
2680		No		✓			

2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Since having breast cancer I have had to travel to Wagga annually for my ultrasound and scans even though Griffith has the equipment- it doesn't have the staff to operate.
2680		No		✓			Splitting sounds like the best option knowing that wagga has blocked orthopedic surgeons from Griffith. Griffiths population is growing, and wagga struggles with the referrals of the large health district, splitting them would ease the load on wagga, and provide griffith the ability to assist smaller towns who already travel into griffith for treatment. If splitting isn't an option than a hospital board to provide Griffith Base Hospital more financial delegation and autonomy to manage resources and staffing.
2680		No		✓			Make the split!
2680		No		✓			
2680		No		✓			- Griffith NEEDS change!! We need too be thinking about the ones who don't have a voice , who are in the shadows , who are quiet and pretend their okay! To many people are suffering in this town and surrounds!! - MENTAL HEALTH - CHRONIC PAIN - CANCER HEALTH - CHILDRENS SERVICES AND COGNITIVE DEVELOPMENT!!! - PREGNANCY AND GYNAECOLOGY !! - MALE HEALTH AND WELL-BEING - TRAVEL COSTS AND BEING AWAY FROM LOVED ONES. I really hope we see a split and better healthcare. To many are suffering in silence. Our new hospital is just a more flashy one of the old, we need too upgrade the services as well as the infrastructure!!!! Get it done council!!!!
2680		No		✓			
2680		No		✓			I agree with a split from MLHD as I worked as a nurse at GBH when we where run by a board and it worked well all staff where happy and resources where plenty we worked in a aged building I am sceptical how much funding the goverment will allocate if the split goes ahead
2689		No		✓			
2680		No		✓			It is ridiculous that we have to travel 2 hours to Wagga for treatment of basic specialist medical needs. I am travelling there on Friday because there is no neurologist in Griffith.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Go back to the old ways . When Griffith base hospital was thriving
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Since we lost our board of directors & MLHD have taken over our hospital we have lost a lot of services and staff jobs... kitchen, laundry & more. It has been down graded till we have only very basic services. The city is growing & our hospital services are shrinking! It's not good enough!
2680		No		✓			It's ridiculous that a person has to travel 3 and half hours to Wagga with a broken bone in a car on the rough and potholed roads, or to get a finger stitched.
2680		No		✓			
2680		No		✓			
2665		No		✓			
2680		No		✓			The hospital has really gone down with their services, and every year it is getting worst. We should be able to get a broken bone fixed, need more staff as the staff are run off their feet. There has been time I phone the Xray section and the phone is not even answered. Not sure what has happened but it is about the people anymore, it is the cuts
2680		No		✓			Can't believe you are even putting out a survey , read the community sentiment
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Needs to be split, the council, which represents the Griffith community, should be supporting it.
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			
2680		No		✓			Listen to Jaya!!
2680		No		✓			I would love to not have to travel 2 hours away from my home for my kids to see a specialist
2680		No		✓			
2680		No		✓			

We have had our tv station removed, our newspaper essentially removed (what's out now is not a newspaper but ads(not local) and little else, and a lot of our medical services and needs pulled back to Wagga so that Wagga expands and others pay for it. Banks, govt medical insurance companies and other essential services are centralised meaning many here cannot even claim their rebates or question processes



2680					✓		Griffith needs services that are lacking, we as a community need to have the best services such as fracture clinic, xrays, MRI equipment, cancer/ or ecology services, mental.health services.. It is too far to travel to Wagga Wagga for a lot of people travel as every minute counts and this can help them to be around family and friend is a much better option.
2680		No			✓		
2680		No			✓		
2680		No			✓		The management chosen should be unbiased, free from political interference, and train locals to recruit staff, rather than relying on overseas sponsorship. This is a widespread practice, and the majority of low skill levels and interpersonal skills are seen at the hospital.
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		I just want the best health care in Griffith, at our local hospital and not have to travel distances to access that health care
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2681		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2681		No			✓		MLHD say they are providing sufficient resources for Griffith & District, untrue, numerous patients sent to Wagga Base Hospital from Griffith district, only to be sent back, because they can't even manage their own hospital, leave alone Griffith patients as well, We think splitting the health district is something the State Government won't contemplate, we need a local hospital board!!
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2681		No			✓		
2680		No			✓		
2680		No			✓		Infrastructure other than the hospital needs to improve to attract health professionals to Griffith. We are out of the way of major thoroughfares ie highways etc so more needs to be done in attracting anyone generally off the major routes.
2680		No			✓		
2680		No			✓		
2680		No			✓		A Hospital Board was a huge importance in the early years of our hospital as it consisted of interested caring citizens who gave their time to organise and oversee management of a very complex institution such as a hospital for the benefit of the community and surrounding district. The hospital in 1995 had its last Board meeting and so went from an institution relying on the intuitive ability of "ordinary citizens" to broader management of a Government Department....That personal input was lost....
2680		No			✓		
2680		No			✓		
2680		No			✓		I feel our hospital would not benefit from going it alone, but a local hospital board may be able to advocate for us when needed.
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2650		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		I believe it's important to have so local say and oversight in how our hospital functions
2680		No			✓		I think before a rash and expensive decision is made to split the district completely, the option to establish a Hospital Board should be explored first. This will be more cost effective than a permanent split from MLHD.
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		Where is the funding coming from to pay for another bureaucracy. Will the NSW Govt provide the funding for another Health District or will the cost need to be recovered via other means. Are we guaranteed we will receive extra services if Griffith separates from MLHD?
2680		No			✓		
2680		No			✓		It worries me to loose the services of Wagga Base when there is no evidence that shows Griffith will get the funding and staff needed to operate alone.
2680		No			✓		
2680		No			✓		I know MLHD are against the split but surely they are listening to the community frustration and want to listen and understand.
2680		No			✓		
2680		No			✓		Having two health districts means that more money would be needed just to duplicate the needed bureaucracy to run two health districts instead of spent on staff or facilities
2680		No			✓		

2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2707		No			✓		
2680		No			✓		Griffith need more health services in the hospital, so locals do not have to travel!
2680		No			✓		
2680		No			✓		
2680		No			✓		Great work by current hospital staff!
2680		No			✓		
2680		No			✓		The existing health model will always struggle across larger distances due to not enough Dr's & nurses and support staff. Specialists will always need to be based in larger centres.
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2707		No			✓		
2680		No			✓		
2680		No			✓		Local Community Health service providers should be made aware to patients before, during and after admission.
2680		No			✓		
2680		No			✓		
2681		No			✓		
2680		No			✓		Splitting MIA health services off MLHD because a few Griffith personalities want it is good politics but bad policy. Moving away from MLHD doesn't increase the funding the NSW Gov is going to provide.
2680		No			✓		third option keeping MLHD and having local Board of Griffith voices thus not everything depends on Wagga maybe a starting point for equality
2680		No			✓		
2680		No			✓		Don't believe will guarantee better funding & support to the GBH. Has anyone contemplated that it could have an advert effect. Everyone is quick to believe the media especially so called free local news pages. Need to know all the facts first. Not everything the media says is true about MLHD & especially the new GBH
2680		No			✓		
2681		No			✓		It is unclear what the split would mean, and more details is required in regard to how funding will be split, how resources and equipment will be split, how priority will be decided. It sounds like a great idea, but it could mean less money goes towards Griffith Base Hospital.
2680		No			✓		More information is needed about the budgeting and financial implications of any change. Also, How will any change help with recruiting professional staff?
2680		No			✓		I worry if a complete occurs there no guarantee a fairer share of funding will occur. State/Federal may still provide the majority of funding to Wagga area and Griffith area will struggle with a small fund
2680		No			✓		
2711		No			✓		I'm all for improved services but I'm not convinced a split from MLHD will achieve this. Staffing issues and attraction of specialised services will still exist under a new health district.
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		
2680		No			✓		Need better factually correct information to understand the benefits and disadvantages of the current structure. Requires an independent analysis of financial and HR to have confidence in any changes. I'm a bit over people on soapboxes
2680		No			✓		
2680		No			✓		Why are the people's opinions relevant, when our opinions are uneducated and probably bias depending on the marketing.
2682		No			✓		What is the recruitment solution if this split was to go ahead? We struggle to attract and retain employees across all industries to leave metro areas and come to Griffith. How would a new health district attract all of these employees to cover these services in Griffith and surrounds? Would this split not mean doubling a workforce in a lot of allied health services? We can't fill these roles as it is.
2680		No			✓		
2680		No			✓		There needs to be a fracture clinic in Griffith
2680		No			✓		
2680		No			✓		
2680		No			✓		Thanks for consulting
2675		No			✓		
2680		No			✓		Concerned that the pro-split people and media are bullying people into signing the petition and not giving a balanced view from both sides. I would like to see more information, not just propaganda.
2680		No			✓		
2680		No			✓		I agree with the decision made by Griffith City Council. I attended the rally on Saturday and felt that the presentation was completely Griffith centric, the main agenda was how Griffith Base was being greatly disadvantaged by being part of the current Health district but importantly it was also devoid of any ideas, plans or visions on how the rest of the areas outside Griffith would be administered and funded. This lack of a overall plan for the whole area I feel is a great failure because the talk is how the split will advantage all areas and all facilities. This does not instill confidence.
2680		No			✓		
2716		No			✓		The risk is that the budget doesn't meet proponents expectation and nothing changes
2680		No			✓		I think we need to here from the people in the medical field working in our hospital & local area who disagree with the split & their reasons why things should stay as they are!
2680		No			✓		

2680		No			✓		Wagga only ever care about Wagga no body else. Do they ever travel for health care
2680		No			✓		
2680		No			✓		
2680		No			✓		
2681		No			✓		
2680		No			✓		
2680		No			✓		
2681		No			✓		Recruiting of staff needs to happen quickly in under a month not 6 months like now incentives are needed to encourage staff to work in rural remote areas
2680		No			✓		
2680		No			✓		
2680		No			✓		I would like to see costing on maintaining MLHD WITH LOCAL BOARD as opposed to leaving LHAC and being independent
2680		No			✓		
2680		No			✓		
2680		No			✓		It is difficult to know which approach is best as there is no data that explains the current or proposed position. It doesn't make sense changing something for change's sake, we might end up with a worse situation. In any case Griffith needs greater local health services and support.
2680		No			✓		I have been against signing any petitions due to the narrow focused view that a split will result in improved decision making and outcomes. Whilst there may be perceived benefit of this, the broader governance impacts and benefits of scale due to MLHD leadership have not been considered. I strongly believe given the ongoing skills shortages in the sector, that a split will not result in more services but rather a duplication of management resourcing that will not transpire into improved outcomes or workforce in health for Griffith. A hybrid approach where GBH remains part of the MLHD with an additional local level governance board with powers for decision making and resource management will deliver the operational and strategic effectiveness desired by GBH, whilst still maintaining the broad health service pathways offered by the scale of the MLHD.
2680		No			✓		I think it is important to examine all the possible outcomes to achieve the best results for our community.
2680		No			✓		We need more services and health professionals in Griffith.
2680		No			✓		
2681		No			Access to available staff and resources not clear.		Advocacy for the services needed locally needs to be stronger.
2680		No			All models will impact funding in some way. Energies should be directed to increases the health budget for the MLHD so that Wards and services required are fully funded.		
2680		No			As I don't work in the industry I can't say which of the last two points would be better. I would side with what our health professionals working at the hospital would prefer. But definitely not the first/ current model		Following Dr Jaya concerns about the current governance model not working, I think council and community need to listen to these professionals working in the industry and what's best for our hospitals and Griffith community
2680		No			Don't understand all implications		
2680		No			I do not believe that there is enough information readily available either for or against the proposal		
2680		No			I do not have the expertise to know which model would work best for the people of our district. to have to travel 2 hours each way to Wagga for a 10 minute consultation at the fracture clinic. This service was one provided in Griffith so we have in fact gone backward. This is only one example of the lack of services in Griffith.		Something drastic needs to be done to provide better services. It is quite unacceptable to have to travel 2 hours each way to Wagga for a 10 minute consultation at the fracture clinic. This service was one provided in Griffith so we have in fact gone backwards. This is only one example of lack of services in Griffith. I do believe that the management and medical practitioners in Wagga have too much power and self interest to ever consider more services for Griffith.
2680		No			I don't have enough information about all the details and what would exactly happen. It seems to me at the moment this is all about Griffith. What about all the smaller towns like Finley and Deniliquin. If MLHD was split with Griffith due to the smaller towns what they are now accusing Wagga of doing to Griffith. If there was a split would there be less money for services because there would obviously have to be two lots of operating systems etc. How long would this all take to set up and get services involved? And would people miss out in this meantime when services weren't available? What would happen if Griffith was unable to secure the services of various doctors? Would they then not be able to use the services that are available in Wagga Wagga? At the moment there are far too many unanswered questions to make a choice. Whatever happens needs to be the best option for everybody in the MLHD not just Griffith residents.		While I have written the above. I do agree that Griffith does need their own services. Maybe the third option of establishing a hospital board is well worth exploring. Whatever happens, it needs to be in the best interest of everybody in the MLHD and not just a Griffith. (I am especially referring to the smaller towns that are a long way from Griffith. Travelling to Griffith is not the usual place to access services for many of them. Often medical services that I'm not available in their hospitals are closer in Victoria.

2680		No				I don't understand what a split means, what happens to community health, maternity and post natal stuff? What does it mean for cancer treatment appointments and procedures?	There doesn't seem to be enough information out there about what it actually means and seems like we're being expected to take the word of a politician, one doctor, and a real estate agent? I'm so confused - why does a split mean things will be better? What is literally happening right now that will be different with a new health district here? Will things be busier for people in Griffith because Leeton and Narrandera will also come here for services or not? Aside from the hospital what other services does MLHD manage that would be affected?
2680		No				I don't know enough about the current financial allocation or what this would look like under other models.	I believe that more open discussion with State Health department and financial management needs to be explored. While I want to believe that medical treatment would be better managed at local level I am concerned that MLHD won't discuss finances. We cannot risk losing more funding.
2680		No				I don't know enough about this. e.g. creating a new HD won't make it any easier to attract staff. I think it would make staffing an even more critical aspect of running the Griffith Hospital. If there is another HD established it would mean another bureaucracy which has to be paid. Does that mean there would be less money available to fund the new HD? I know the Minister isn't keen on the idea. I would like his reasons and a lot more information before I could say it would be a good idea to have another HD or not.	
2680		No				I have not learnt the benefits of a Western Riverina HD	I would like to know the problems with the current system and the benefits of adding a new health division with actual evidence.
2680		No				I have previously worked under both systems. There are flaws in both but we can't lose staff and services to Wagga. The Griffith and surrounding community deserves better. There needs to be an investigation in how and why we got to the state of the health system, staffing and services in Griffith and what the MLHD has done or not done.	
2680		No				I haven't seen any information as to what will happen after the split. Will the current have guaranteed secured jobs? I would hate to be the reason that someone has lost their job and can't provide for their family!	
2705		No				I want to see costing and ability to staff GBH if we split	
2680		No				I would like more information on how this will affect Griffith & surrounding areas	I believe Griffith needs more essential services such as orthopaedic, mental health & Gynaecologist.... I'm not convinced that breaking from Wagga will help us. I also believe that any donations - monetary and equipment donated to GBH needs to stay with GBH and not sent to Wagga.
2680		No				Inadequate information and understanding on the proposed structure on the facts to make an informed decision	
2680		No				It can	
2680		No				Lack of information available to make an informed decision	Does the proposed split limit our opportunity to access healthcare from the mlhd? Does it guarantee that staff will come here to work?
2680		No				More information needs to be provided before a decision is made. Both sides need to be heard.	
		No				need to do more research	
2680		No				Need more information on how this would work. I do think we should stand alone and hope this gives Griffith better health services	More information needs to be shared. I think having a split is the better option
2680		No				Needs much more investigation, will the govt. Fund the agenda	A monumental proposal for now, would need ten years planning. Would Government continue to fund the proposed hospital.
2680		No				Not enough understanding?	Duplicate administration costs.
2680		No				Not informed enough	
2675		No				Not too sure. I would like to see the two entities divided	I keep the public updated
						Our hospital is a disaster we need MRI machine and a helipad and a fractures clinic and decent staff the whole making it pretty was a complete waste of money. Why bother asking when the community and surrounds are never heard. This town is a disgrace.	
2680		No				So much mixed information out there. Something needs to change. What we currently have is not good enough for a town of our size.	
2680		No				staffing major issue, not going to change because of change of district.	
2681		No				the current model needs to change but splitting it is not cost effective funds and staff need to be shared more equitably across the health district	staff and services need to be addressed a new hospital is useless without staff and services it is unacceptable that people have to travel to Wagga to have a broken bone set these types of services need to be in Griffith.
2680		No				The financial implications for both Griffith Base and Wagga Base have not been fully modelled?	

2680		No				The MLHD to be properly reviewed to see where the problems are. I believe most of the community including me have no idea what it takes to manage health care through a hospital.	What we have is broken. People say things can't get worse but I think they are mistaken. We need to push in the right direction as a community with proper planning and objectives otherwise we could be history repeating itself.
2680		No				There is currently insufficient information from either side to make an informed decision. While we have heard about the potential benefits of a split, we have not been presented with any possible drawbacks. We are realistic enough to know there will be challenges and to make a balanced decision we need to understand both the positives and the negatives.	
2680		No				there is not sufficient available information on any of the proposed models as yet to make a considered decision	
2680		No				This is not a decision that should be made by community members without any knowledge of how funding in public health works and with no current plan being given on how staffing and resourcing will be improved through splitting the health district. It will be extremely challenging to split although long term benefit may be better, but consideration needs to be given to managing the initial fallout. Maybe a hospital board is a good first step but it needs to have diverse representation (old/young, different cultures, people with disabilities, indigenous, rich/poor)	Data on how Griffith uses Wagga hospital is not enough because many residents instead go to Sydney and other areas or use private but would prefer public (Why is there not a survey on resident's hospital experiences/needs to better gauge what is needed?) Also, how will this affect other areas of the Riverina? No clarification has been given on what areas will be included in the "Western Riverina" or how those communities feel about it. This isn't just going to affect Griffith and if we only consider Griffith than we are just doing the same thing we criticise Wagga for. Evidence needs to include an actual strategy for how Griffith plans to improve resourcing and staffing through the split or by establishing a hospital board. Getting increased delegation/funding will not automatically benefit the community or fix the problem with staffing and resourcing without effective research having been done to determine why and how to fix those issues. Perfect example: the increased monetary boost to GBH and the Private hospital has NOT fixed resource/staffing problems for either. Research needs to consider the systemic socioeconomic factors which also affect resourcing/staffing (like housing, FIFO incentivisation, privatisation, competition, poor investment/management practices etc). Combining data on the factors affecting staffing and resourcing with analysis of the current system will ensure that future funding/delegation options actually address the issues. Then there needs to be a comprehensive plan developed based on this that will ensure any changes are implemented effectively and sustainably - a 5-10 year plan maybe. It is so important that this is not brushed over and quickly fixed to appease public or private pressure/interests because this will affect decades of hospital care.
2680		No				We haven't been advised of the repercussions if we split.	Will there be added funding to allow Griffith Base to operate without Wagga? How will we fund a kitchen & laundry? If we are able to fund it how will we staff the hospital? Is there a possibility of ending up worse than we already are? Both sides need to be debated. How can we take a stance without all of the information needed?
2680		No				we need a change - whether that is leaving the MLHD but we need to be able to access all medical resources & treatments locally. Having to go off to Wagga for a broken bone or MRI scans is a stress on the patient and family members	we have a brand new hospital why not use it and make it more attractive for doctors and nurses to move to Griffith so we can the top quality care we all deserve.
2680		No				We need much more information from both sides of the discussion	This cannot be a short fix to medical services within the area. As our population grows all medical services, current and expanding are going to be needed.
2680		No				When we had local board control, we had a better local hospital. unsure which of the two last options is better. best to ask our local doctors and nurses.	private has not benefited locals, only people who can afford it. why is the smaller hospital doing the sterilization for the public hospital. shouldn't it be the other way around. plus local jobs were lost. just like the food service.
2680		No				Where did option 3 become a choice? There is already a Kowtow mob who only endorses MLHD practices	Rubbish survey...the community has spoken, where is the Mayor's communication made public from MLHD shame GCC
2680		No				Where is the research and evidence to support a split that ensures health services are improved and not actually worsened	
2669		No				Would like more transparency of & in the models; & in general more transparency, leaning to the split.	I believe we should not be controlled managed or advised by MLHD. Our health system should be a stand-alone with Government funding and Community & Health professionals running a board where public can attend & voice concerns & ideas.