Extract from Hansard

[COUNCIL — Tuesday, 12 May 2020] p2484a-2484a

Hon Colin De Grussa; Hon Alanna Clohesy

HEALTH — PAEDIATRIC DIABETIC CLINICAL SERVICES — ESPERANCE

2859. Hon Colin de Grussa to the parliamentary secretary representing the Minister for Health:

I refer to a recent decision by the Perth Children's hospital to withdraw the provision of paediatric diabetic clinical services to the town of Esperance, and I ask:

- (a) when was the Minister made aware that this vital service had been withdrawn;
- (b) on what basis was the cost of providing this service for:
 - (i) the 2018–19 financial year;
 - (ii) the 2019–20 financial year, until the service was withdrawn; and
- (c) how will patients requiring paediatric diabetic clinical services, be provided continued access to this important service;
- (d) what is the estimated total annual cost of providing these services?

Hon Alanna Clohesy replied:

I am advised:

- (a) As this was an operational decision the Minister was not notified by the Department.
- (b) Patient numbers in Esperance had been low in decline over recent years, and no longer met eligibility for regional clinics.
 - (i) \$23,444
 - (ii) \$19,257
- (c) The clinical team met with families at the final clinic where options for ongoing care were discussed. Of the seven families, four elected to receive care at Perth Children's Hospital, two decided to attend the Kalgoorlie clinic and one transitioned to the local general practitioner. A regional paediatric outreach clinic is also available in Albany, should any families elect to have their appointments there instead of Kalgoorlie or PCH. Families who elect to attend Perth Children's Hospital, Kalgoorlie or Albany for care may be eligible to apply for assistance with travel and accommodation with PATS. In addition, all patients and families will continue to have access to the 24 hour, 7 day a week on call triage service based at PCH.

While face to face appointments are the recommended approach, given the current COVID-19 situation, telehealth appointments are being trialled for the multi-disciplinary appointments to alleviate the need to travel. This may be adopted in the longer term for one more of the team appointments pending determination of clinical suitability.

(d) Refer to Question (b)(i)–(ii) for previous years costing information.