



THE COUNTRY WOMEN'S ASSOCIATION OF WESTERN AUSTRALIA (INC.)

NON-PARTY POLITICAL NON-SECTARIAN

16 May 2014

Hon Liz Behjat MLC
Chairman
Standing Committee on Public Administration
Inquiry into the Patient Assisted Travel Scheme
Legislative Council
Parliament House
GPO Box A11,
Perth WA 6837



Dear Ms Behjat,

RE: *Inquiry into the Patient Assisted Travel Scheme*

The Country Women's Association of Western Australia (Inc) acknowledges that improvements have occurred within the PATS system, particularly at the start of 2010. The Association is also very aware, however, that obstacles, inconsistencies and inequities remain within PATS and welcomes the opportunity to offer the following examples and comments received from members:

1. *Last November my daughter suffered a serious burn from a motorbike accident. After visiting the Geraldton Hospital and being treated we were sent home. On returning home (an hour from Geraldton) we received a call from the Head Nurse in the Burns Unit at Princess Margaret Hospital (at 7pm) who had received photos of Samantha's burn from the Geraldton Hospital (standard procedure with a burn for advice on treatment). We were told that Samantha needed in Perth ASAP as the burn needed further specialist treatment at the Burns Unit. We left for Perth very early the next morning and spent the next 7 days in hospital. While in hospital I got all of the PATS forms I needed and signed by the specialists. When we got home I took the forms into the Geraldton PATS office to lodge them and was told I needed a 'yellow' form to be filled out by a doctor in Geraldton stating that Samantha needed treatment in Perth. I found this absurd when I had all of the evidence that Samantha was treated in Perth and spent 7 days in the Burns Unit. I took the 'yellow form' around to my Doctor and had to leave the form there. It was inconvenient, time wasting and frustrating.*

This example reflects an ongoing concern of the Association for parents who are advised by their local doctor or hospital to take their child to Perth in an emergency as they cannot be dealt with by the local facility. The parent drives to Perth, has the emergency dealt with and returns home without any offer or mention of PATS.

2. *My husband received PATS when he could not obtain specialist advice for an ongoing medical condition in Geraldton when the only specialist in that field left Geraldton. However he was suddenly refused assistance from PATS two years ago when he was told the specialist advice was now available in Geraldton. Having made an appointment with the said specialist based in Geraldton, the "specialist" informed him he was unable to provide him with 3 monthly appointments to monitor his progress as it was not his role! We went back to PATS to apply for assistance to go to Perth for his 3 monthly visits and were told "too bad there was a specialist in Geraldton now", even though this specialist had made it clear that that he offered one off visits*

only and then referred you on. This type of care was not appropriate for Ashley as he was required to be monitored for his condition which he has had since 2007 and required continuity of relationship. The point I am making here is if the specialist care required by the patient is not being offered in Geraldton then my husband should be entitled to PATS. The PATS office was extremely unhelpful and would not look into our situation at all with regards to contacting the said "specialist" in Geraldton and discussing the best path forward.

3. A Koorda CWA member has travelled to Perth (Mosman Park) since 2012 for injections into her eyes every 6 weeks. Her specialist received a letter from PATS to say this patient had been refused assistance as she should have gone to a specialist in Geraldton as it was closer. Koorda to Mosman Park is 259 kms taking 3hours 25 mins, while Koorda to Geraldton is 450 kms taking just on 6 hours (as per Google Maps). The patient felt it was all too hard and didn't follow up any further.

Even to get the PATS form initially had been a challenge as the local doctor in Koorda had no PATS claim forms and the patient had to obtain a form from Wyalkatchem Hospital 53kms (106kms return) from her home. She has heard of other local Koorda patients having the same experience.

Although it is realised that PATS forms are available online, this member does not have a computer and would not therefore access forms in that way.

4. *PATS is considered a subsidy scheme so it will never cover the entire cost of a person's trip. PATS is quite complicated for consumers to understand. E.G If you have cancer you can access air travel more readily than if you have other diseases. A doctor can sign off for additional assistance depending on your health and it gets checked off by a Doctor at the hospital. Also when is it that a patient should be PATS or travel as an inter hospital patient transfer (coming back to the country after emergency transfer to Perth).*

PATS is not centrally administered so the process for applying is different from site to site. For example, some sites have PATS clerks, others don't. Southwest has a central phone centre and completely different paperwork requirements. The city hospitals don't have the best understanding of PATS either because they have no role in its administration and because it isn't run centrally they don't easily know who to contact.

PATS only covers Medical Specialists appointments that have eligible medicare numbers. You receive no assistance to travel for Dental, allied health, GP, non specialist hospital services. Considering the lack of dental services in remote areas most people living in those areas would need to travel. Say you live in a remote area with no visiting Occupational Therapy and your child has a disability you will need to travel long distances to the bigger health centre and you will receive no help for this. Sometimes people need to see allied health therapists who are specialised instead of the generalist staff that are mostly employed in regional centres, for example to attend an OT that is a specialist in hand therapy you will not receive assistance. One way around this is by also seeing your medical specialist when you travel, but you generally need more appointments with the allied health professionals, particularly in relation to rehabilitation.

PATS is only provided when you see the nearest eligible medical specialist. This fails to take into account that there are often limited regional transport options and it is sometimes quicker, easier and cheaper (less nights' accommodation required) to travel to Perth than the regional site. For example, there isn't the greatest bus service between Mt Magnet and Geraldton and no flights. Connections to Perth are more regular and flights are available. However if the nearest eligible specialist practices in Geraldton this is the only location for which you will be able to get PATS. There is some wriggle room in this because PATS should consider the cheapest option, but it usually has to get special approval.

PATS never seems to increase in value in line with inflation - \$60 to \$75 per night for accommodation doesn't cover a big percentage of this cost. The fuel subsidy has also stayed pretty constant but fuel prices increase all the time. [13cents/km in 2005; 16cents/km in 2014]

For regional people improved Telehealth services would help reduce the need for regional people to travel for health services. Just because we live in the country shouldn't mean that we shouldn't have equitable access to health services. Telehealth has been around for a very long time but it still isn't a comprehensive services and it isn't well understood and utilised.

That all said it is available and when you understand how it works and what you can achieve it certainly helps with accessing health services.

- 5. PATS does not nearly go to covering accommodation in Perth as Perth accommodation is extremely high. They have been told they could use backpackers but it would depend on the age or the medical condition of the patient for that situation.*

If you fall under the Northampton radius but the convenience of sometimes going to Geraldton against Northampton surely you should be able to get it from your location and not have to accept it from Geraldton.

Sometimes you go to Perth and are under a medical specialist but then if one comes to Geraldton you are expected to move to this specialist rather than stay under the one you have been with for some time and then PATS does not support your claims.

Hospitals in Perth need to be fully aware of a patient's rights to be able to fly home or get a PATS fare home if flown down by the RFDS, and the fact they are entitled to a taxi to the airport.

If a patient is flown in an emergency and under the circumstances does not get a pre-trip form signed in Geraldton/Northampton/country area before the RFDS flight then the Perth medicos should be able to deal with it.

Additional points made in summary by one branch:

- Continuity of care does not appear to be considered important in the consideration of eligibility for PATS*
- The availability of local (ie Regional) specialists changes*
- PATS is available from point of referral – there is no recognition of how far the patient may have had to come to access this.*
- PATS does not make specialist medical services equally available to country people – it does help. Sometimes the help is not worth the delay and effort involved.*

In the 90th year of this Association, an Inquiry such as this is welcomed. Access and equity of rural health coverage remains an issue as relevant today as when the Association commenced in 1924.

In the light of the recent Federal Budget announcements, it is very clear that the State's health system will be under even greater pressure. The Association urges the State Government not to lose focus from the needs of rural and remote patients.

Yours sincerely,



Anne Gething (Mrs)
General Secretary