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The Honourable Pierre Yang MLC Chair, Public Administration Committee Legislative Council Committee Office 18-32 Parliament Place West Perth. Western Australia 6005

Dear Mr. Yang

## Inquiry into the delivery of ambulance services in Western Australia

Thank you for providing Wilson Medic One with the opportunity to contribute to this Inquiry. Our submission is as follows:

- Q1.0 Please describe the ambulance services you are contracted to provide in Western Australia.
- A1.0 Wilson Medic One is a purpose-driven business and provider of world-class patient transport services, health training and education, industrial site staffing, as well as the provision of special event health services to an array of sectors utilising qualified clinicians. The current contractual scope of our ambulance contracts with the WA Department of Health are limited to:

#### i. Non-emergency inter-hospital patient transport services

As part of a panel of providers, Wilson Medic One provides inter hospital care and transport of low, medium, and high medical acuity patients either within or outside of the Perth metropolitan area.

#### ii. Mental health patient transport services

Dedicated and sole provider of care and transport of involuntary mental health patients to and from Perth metropolitan healthcare facilities and community locations 24-hours a day, seven days a week.

- Q1.1 How many transport vehicles do you operate in the provision of these Services?
- A1.1 Excluding the vehicles that we operate around the rest of Australia, our ambulance fleet of eleven vehicles in Western Australia is reflective of the requirements of our current contractual obligations. We are ready to expand the fleet to meet future contractual obligations, especially if the scope of our contracts increases.



- Q1.2 How many frontline staff do you employ?
- A1.2 Our capability and number of staff engaged is based on the scope of our current nonemergency patient transport contracts. To perform these services in Western Australia, we employ 24 Paramedics and 41 Patient Transport Officers. Nationwide, Wilson Group employs in excess of 9,000 professionals with unmatched industry experience and supported by the latest technology, systems, processes, and structured infrastructure consisting of specialised Human Resources, HSEQ, Learning & Development, IT, Finance, Risk Management, and Operations teams to name but a few. Given this depth, we are able to manage redundancy, surge and churn with the changing demands of the health sector.
- Q1.3 What qualifications are required of frontline staff?
- A1.3 These qualifications are as follows:

Role	Qualifications
Paramedic	Bachelor of Science (Paramedical Science) or equivalent
	AHPRA registration
Patient Transport Officer	Certificate III in Non-Emergency Patient Transport or equivalent
Medic	Cert IV Healthcare (Ambulance) or equivalent

These qualifications are typical of the roles throughout the health care sector albeit we have an advantage whereby we are able to recruit the graduates of our registered training organisation. A proportion of our graduates are recruited by St. John Ambulance (WA), attracted by the opportunity to perform 000 emergency ambulance services, a function that we are not currently contracted to deliver in Western Australia.



- Q2.0 How many patients have you responded to in each of the last four years?
- A2.0 This information is classified as being commercial-in-confidence albeit we successfully respond to thousands of requests for patient transportation each year.

We regularly receive feedback from patients and from operators of health care facilities demonstrating that our services work, are consistent and reliable, and are viable in terms of change leadership within the patient transportation sector. Examples include:

"Crew members were extremely professional and understanding of the client's needs and requirements in what was a potentially difficult situation. I have no doubt their manner and professionalism went a long way in ensuring a safe outcome on the day. An outstanding contribution."

"I am thrilled following the service received from your team. They were so gentle and supportive throughout the whole situation. Fantastic."

"Our service has noticed a significant improvement in coordination, flow and transport of patients from the community to hospital since the change to Wilson Medic One. Our clinicians often feedback the positive experience they have, more specifically around the ease of booking and scheduling a transport and the subsequent handover to Wilson Medic One to then take to the emergency department. This is working very well from our point of view."

- Q2.1 Please include a breakdown of your compliance with KPI's for timeliness of service delivery over the past four years.
- A2.1 This information is classified as being commercial-in-confidence albeit is broadly classified as follows to measure professional patient care, timeliness of services, stakeholder satisfaction, as well as the efficiency of patient transportation:
  - Timeliness of service delivery;
  - Professional development and training;
  - Service user satisfaction with Service Provider; and
  - Compliance tracking.



- Q3.0 What are your views on the current model for the provision of ambulance services in Western Australia?
- A3.0 Our contracted ambulance services with the WA Department of Health require the delivery of consistent, high profile, and sensitive pre-hospital care services. These often involve cases whereby we are required to care for members of the public during their most vulnerable times, typically in the mental health or aged care settings. We are not currently contracted to provide emergency 000 ambulance services, a role exclusively contracted to St. John Ambulance (WA). This monopoly arrangement we believe is financially disadvantageous for the State and offers no choice or redundancy for the Government and the residents of Western Australia.

Western Australians expect to receive a consistent level of care and choice no matter their location whether it be in the Perth central business district or in the remote Kimberley town of Balgo for example.

The current long-standing model encourages the use of local volunteers in regional areas. Whilst appropriate in exceptional and remote settings, this should not be the normal mode of care because:

- All Australians expect and deserve the same standard of care, no matter the location; and
- Being unfair on local volunteers to be burdened with this level of responsibility.

We believe that whilst this model may have met past needs, the lack of service, expectations of the general public, the litigious nature of the sector, and socio-political factors are influencing a need for change. This coupled with governments need for greater choice and value for money are also influencing factors.

There are a number of requirements that we believe should be incorporated in the Western Australian framework for these services. These include:

- Privately contracted ambulance services supported and managed by the State;
- A panel of Metropolitan and Regional service providers;
- Understanding the changing patient care needs; and
- Ensuring the ongoing and emerging risks to the State are mitigated.



## Conclusion

Wilson Medic One welcomes this review of ambulance services as we believe it will provide greater overall transparency and will promote greater competition. In their present form, the contractual arrangements are such that they provide no guarantees to the State in terms of the quality or value of the services being provided. We look forward to continuing to work collaboratively with all stakeholders to provide the best possible outcomes for all Western Australians.

Yours sincerely

# **David Chelliah**

CEO Singapore, Malaysia and Medic One