# STANDING COMMITTEE ON PUBLIC ADMINISTRATION

# INQUIRY INTO THE PATIENT ASSISTED TRAVEL SCHEME

TRANSCRIPT OF EVIDENCE TAKEN AT ALBANY MONDAY, 25 AUGUST 2014

### **SESSION THREE**

#### **Members**

Hon Liz Behjat (Chairman)
Hon Darren West (Deputy Chairman)
Hon Nigel Hallett
Hon Jacqui Boydell
Hon Amber-Jade Sanderson

#### Hearing commenced at 11.30 am

### Mrs GLENYS HOEKSTRA Private citizen, sworn and examined:

The CHAIRMAN: My name is Hon Liz Behjat and I am the Chairman of the Standing Committee on Public Administration. I represent the North Metropolitan Region. We are all members of the Legislative Council, which is the upper house of Parliament. I will introduce the rest of the committee members, starting from this end: we have Hon Jacqui Boydell, who represents the Mining and Pastoral Region; Hon Nigel Hallett, who represents the South West Region; our advisory officer, Felicity Mackie; my deputy chairman, Hon Darren West, who represents the Agricultural Region; and just joining us now is Hon Amber-Jade Sanderson, who represents the East Metropolitan Region. We have a really good cross-section of members across the state here and we make up the Standing Committee on Public Administration. I need to go through some formalities first, and then you can just sit back and have a chat with us, basically. There are some formalities that we need to do. First of all, I must ask you to take an oath or affirmation, whichever you are comfortable doing.

[Witness took the oath.]

**The CHAIRMAN**: The capacity in which you are appearing in front of us today is as a user of the PATS system.

Mrs Hoekstra: Yes, just a private citizen.

**The CHAIRMAN**: You will have signed a document titled "Information for Witnesses". Did you read and understand that document?

Mrs Hoekstra: Yes, I did.

The CHAIRMAN: The proceedings today are being recorded by Hansard. A transcript of your evidence is going to be provided to you. To assist the committee and Hansard, if you have any documents today that you want to refer to during the session, you just need to quote the full title of those documents. Be aware of the microphone in front of you, and do not put any papers near it. I remind you that your transcript will become a matter for the public record. If today for some reason you want to make a confidential statement to the members of the committee, and you do not feel comfortable or you think it is something we should hear in private, you just need to ask us to do that, and we will consider your request. If your request is granted, we will then clear the room of any media or public who are here today. Note that until such time as the transcript of your public evidence is finalised, it should not be made public. I advise you that publication or disclosure of the uncorrected transcript of evidence may constitute a contempt of Parliament and may mean that the material published or disclosed is not subject to parliamentary privilege.

How do you want to run this session? As you are just a user of the PATS system, perhaps you could just in your own words tell us your PATS experiences and what you are finding as a user of the system.

Mrs Hoekstra: Okay. I will be fairly quick. I was diagnosed with a problem with my tongue—a thing called oral lichen planus. I kept going to a dentist, saying that I had a sore tongue, and he ended up referring me to Sir Charles Gairdner Hospital for a biopsy on my tongue, and they then referred me on to my specialist, Dr Frydrych, who is based in Perth. I went to see her, and it was through that that I ended up getting onto the PAT scheme. I am more concerned about the admin side of things. I actually had to go to my own local doctor to get the application form to use the

PAT scheme. My local doctor was not involved in any of the process of me going to the specialist to start with. I got the form filled in. I took it to the PATS people at the hospital, and they said, "Oh, it's in your mouth—it's dental—so we don't cover it." I said it was not dental; it was my tongue. They ended up having to go off and came back a couple of weeks later or something, and said, "Yes, that's okay." That was all right, but then it is a case of—at this stage I am now going to my specialist twice a year. Every year I have to go to my doctor, pay a doctor's fee and get her to fill in a form for approval, and she is not involved in the process at all. That is one thing. I understand, with our new hospital, that—I do not know whether it is PATS or whoever makes the decision—it has now been taken over in Perth. I put in my application in January again for renewal. I went to the doctor, got the thing done, put it in and they said, "I don't know if there's enough information; we'll get it off what's on last year's form. It will be fine; don't worry about it." Then, I was over east with my brother, who is dying of cancer—that is another thing—and I got a phone call from the surgery here saying that I had to see a doctor hear urgently to fill out another form. So I came back from over east, went and paid another doctor's fee to fill out the form to hand it in, and they said, "We'll let you know what's happening." Finally, I got a cheque in the mail; I presume it was approved.

**The CHAIRMAN**: You just got a cheque; there was no letter?

Mrs Hoekstra: Yes, just a cheque. There was no letter—nothing to say "Yes, this is okay." When I did go to my doctor to get the form filled, she said the PATS people are not—I cannot remember exactly what it was now, but the thing that my specialist is registered under is apparently mainly dental, so they originally said it was dental, and that they were not paying. I said it was not dental; it was oral. Someone else could have a very similar type of thing, and they would get sent to a gynaecologist and there would be no query, but because mine happen to attack my tongue—there is no known cause, really; it is fairly rare, and there is no cure, but it can be treated. I am going to have this for the rest of my life, so that means that once a year I am going to have to go and see my doctor just to get the form submitted, and she is not involved in the process.

**The CHAIRMAN**: When you say that your GP is not involved in the process, there is a specialist that sees you, so I am assuming there needs to be a GP referral to a specialist.

**Mrs Hoekstra**: As I said, my dentist referred me to Charlie Gairdner hospital, and after they did my biopsy there, the doctors there referred me to the specialist. I have had no more dealings with the hospital.

**The CHAIRMAN**: My understanding is that if you see specialists each year, or I think it is every year, you need to have some sort of referral back to that specialist. Is that is something that is done by your dental surgeon each year?

**Mrs Hoekstra**: No. When I go and see my specialist, I go in for my appointment, and then she will say, "I'll see you in six months." So I make another appointment with the specialist.

**The CHAIRMAN**: Is there no requirement from the specialist to keep providing a referral?.

**Mrs Hoekstra**: No. If there is anything, she has provided reports back to the dentist, where she has also seen where I have had a problem here, and he is looking at that, but that is not her issue. She will just say to him that this is happening, or say to me, "This is happening. Go and see your dentist", and there is nothing about that. Really, I am dealing just with Dr Frydrych in relation to my tongue.

**Hon DARREN WEST**: Sorry; just so that I have it clear, you need to go and see your doctor to get the form to put in the PATS application, or the referral to the specialist? Is it just for the PATS application?

Mrs Hoekstra: Just that pink form for the PATS application, and that is the only reason I see my doctor. I am not on any other medication; I do not go to the doctor. And she has to see me—I have to have an appointment with her. Because it is a legal form, she cannot just sign it; I actually have to

go in and see her, which I understand, but she does not bulk-bill or anything, so I am paying the full doctor's fee.

**The CHAIRMAN**: Presumably, you drive to Perth for your appointments.

Mrs Hoekstra: Yes.

**The CHAIRMAN**: And do you use commercial accommodation?

**Mrs Hoekstra**: No. We are lucky enough to have friends in Perth, so I stay privately. I have no problem with what I am paid; that is not an issue. It is just the admin. Every alternate piece of paper in my file is going to be a pink form, and this is going to go on until the day I die, and I am not dying very soon.

**The CHAIRMAN**: We are very glad to hear that!

**Mrs Hoekstra**: It will be another 20 or 30 years' worth. Every second appointment, basically I have got to —

**The CHAIRMAN**: So it is really just the frustration of this continual form filling out and this unnecessary visit to your GP where you are out of pocket—expenses with that.

**Mrs Hoekstra**: Yes. I mean, she has other people to see who are sick, rather than just seeing me to fill in a form.

**Hon JACQUI BOYDELL**: Can I just expand on your thought process there, that you are suggesting that maybe particular diagnoses, where your ongoing management of your health issue needs to be recognised under the PAT scheme?

Mrs Hoekstra: Yes.

**Hon JACQUI BOYDELL**: So, not cancer patients, but actual diagnoses of conditions where your ongoing medical is completely in a relationship with your specialist, and you do not need the GP, because you are getting treatment from your specialist.

**Mrs Hoekstra**: Yes. She is giving me medication, but I need to control it, and she is also checking closely to make sure that it does not turn into cancer, so I have to go every six months.

Hon JACQUI BOYDELL: So there is no GP step in your treatment, apart from needing to get the form.

Mrs Hoekstra: Yes.

[11.40 am]

The CHAIRMAN: So, for instance, if there was perhaps a part of the scheme for a situation like yours, it could be done under, say, a five-year review. So they would say, "Glenys, for the next five years we know you're going to have to come to Perth for your treatment at least once or twice a year. That's fine. For the next five years you're covered." Then, obviously, after five years, you might have to go and just ensure that—who knows? They might come up with a miracle cure. You can only hope! But you would feel comfortable in that sort of situation if it was done over—

**Mrs Hoekstra**: Yes, rather than every year. It is not as though I am trying to rort the system or anything. I get my blue forms signed by the specialist. It is not as though I am just going out for a free trip to Perth.

**Hon DARREN WEST**: I was thinking along similar lines. I wonder whether it would be possible to have a system that the specialist can end, and say, "Well, you're fine until the specialist says that you do not need the service anymore."

Mrs Hoekstra: That would be even better and it would save the five-year bit.

**Hon DARREN WEST**: So it would be sort of a concluding form or something that they finish on your last visit, which would end that service.

Hon JACQUI BOYDELL: It seems logical.

The CHAIRMAN: That is a very interesting story and something we have not heard. For your information, we are gathering information from people all this week. We are in Albany today, Kalgoorlie tomorrow, Carnarvon on Friday and Port Hedland and Broome on Monday and Tuesday of next week. We are taking evidence from people all around the state. We are grateful to people like you who have gone through the daunting process of appearing in front of a parliamentary inquiry to tell this type of story. I hope it has been painless for you. Good luck with all your future treatment.

Mrs Hoekstra: Thank you.

Hearing concluded at 11.42 am