Extract from Hansard

[ASSEMBLY — Wednesday, 4 December 2013] p7242a-7242a Mr Ian Britza; Dr Kim Hames

HEALTH PROFESSIONALS — COMMUNITY SERVICE LEAVE

903. Mr I.M. BRITZA to the Minister for Health:

I recall that the minister launched a new community service leave provision for health professionals in the public sector during our first term of government. I understand that this means that health professionals have access to paid leave positions to undertake charity work internationally or in rural or remote areas. Can the minister please update the house on how this wonderful provision has progressed?

Dr K.D. HAMES replied:

I thank the member for the question. Indeed, I spoke about this a few months ago, but I have been so impressed with further briefing notes that I have received on it that I thought I would talk about it again. As I have said before, this provision allows staff to take leave and still be paid their normal wage for up to two weeks each year. We have now had 101 applications from various health professionals. They are doing voluntary work with 38 aid organisations in 18 countries around the world. Of those staff, 21 come from the Global Health Alliance and are doing work in Tanzania to support midwives. Tanzania has the second-highest infant mortality rate in the world. There are 12 staff with Open Heart International, which is an initiative of Sydney Adventist Hospital. The types of staff going are largely nurses and midwives, who make up 68 per cent of the group; allied health and doctors make 14 per cent each; and four per cent come from non-clinical areas. We have had some frequent letters from those who have gone on community service leave. I will read to the house some of the comments made by staff who have gone overseas to give an impression of what they think of the program. There are four of these. I have not been allocated any time limit, so I have plenty of time!

The SPEAKER: You think you have plenty of time, minister!

Dr K.D. HAMES: This is from a medical scientist from Fremantle Hospital —

"The reason why I applied for CSL was to help out at a lab in the developing world, and hopefully pass on some of the knowledge and skills I have learned over the years working as a scientist.

A midwife from King Edward Memorial Hospital for Women said —

"CSL supported me to work in a developing country with minimal financial hardship. It enabled me to impact the lives of health care workers in underprivileged communities by improving their practice and skills.

A senior physiotherapist from Royal Perth Hospital said —

"CSL allowed me to go Mwanza, without CSL I did not have any leave available and couldn't afford to go on Leave Without Pay. It provided me with the chance of a lifetime and a chance to make a real difference to a lot of people!

The last one I will read out is from a data manager from Princess Margaret Hospital for Children —

"CSL made this trip possible! Where it would not have been otherwise—with two children and a working wife, I don't have any extra annual leave to put towards this sort of trip.

I really believe in the two-way benefits gained from this sort of initiative and that the investment by the Health Department in the CSL initiative is money well spent. The support of CSL is truly appreciated, both by us as the recipients and especially by the patients, family and staff of the hospital in which we work."