

SWINE FLU — DEATH IN KIWIRRKURRA COMMUNITY

694. Hon MATT BENSON-LIDHOLM to the Leader of the House representing the Premier:

I refer to the recent death of a man from the Kiwirrkurra community who had swine flu symptoms.

- (1) Why was a team from the Department of Health not immediately dispatched to the community to test and inoculate residents against the virus?
- (2) Does the government have a rapid response program for dealing with outbreaks such as this?
- (3) If yes to (2), what is the response time?
- (4) If no to (2), why not?

Hon NORMAN MOORE replied:

The following response was provided by the Department of Health.

- (1) Health services to Kiwirrkurra are jointly funded by WA Health and the Australian Government, and are provided by Ngaanyatjarra Health Service. WA Health was informed of the status of the patient by the South Australian Department of Health on Friday, 19 June 2009, which was the same day that the patient died at Royal Adelaide Hospital. Immediate contact was made with nursing staff at Kiwirrkurra, who stated that there was no increase in influenza-like illnesses in the community. WA Health then consulted with the chief executive officer of Ngaanyatjarra Health Service and they jointly arranged for a visit on Tuesday, 23 June 2009 of a public health team lead by Dr Charles Douglas, who is a public health physician based in Kalgoorlie. During the visit, the public health team confirmed that there was no increase in influenza-like illnesses in the community, held a series of meetings with the community, talked with health staff and provided further backup stocks of Tamiflu and masks. Three people were put on Tamiflu as a precautionary measure. The public health response has at all times been measured, proportionate and professional, and was planned in partnership with the local health service.
- (2) A WA surveillance and management plan for human swine influenza in Aboriginal communities has been finalised in conjunction with Aboriginal health services and consists of three main parts: clinical surveillance, allowing for early detection of influenza-like illnesses; communication with Aboriginal organisations and communities; and the deployment of Tamiflu, masks and other protective equipment in primary care centres and regional centres.

WA Health is working with other jurisdictions, in particular the Northern Territory, South Australian and Australian governments, to develop a specific Indigenous annex to the new “protect” phase of the national pandemic plan.
- (3) The basis of the plan is to provide support to the existing primary care services on the ground so as to identify and treat those at high risk within 48 hours of the onset of the symptom.
- (4) Not applicable.