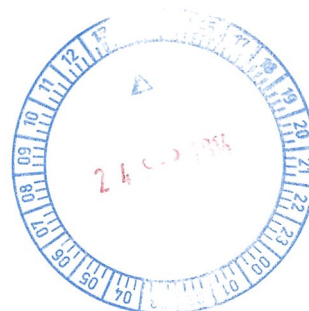




Government of **Western Australia**
WA Country Health Service



Your Ref :
Our Ref : ED-CO-14-60037
Enquiries to : Susan Powe, Manager COAG Implementation 6145 4119

Hon. Liz Behjat MLC
Chairperson
Standing Committee on Public Administration
Parliamentary Inquiry into the Patient Assisted Travel Scheme
Parliament House
PERTH WA 6000

Dear Ms Behjat

Inquiry into the Patient Assisted Travel Scheme (PATS)

Thank you for your letter dated 8 September 2014 requesting information about the Country Health Connection (CHC) Unit. The WA Country Health Service (WACHS) Aboriginal Health Improvement Unit (AHIU) is grateful for the opportunity to provide information to the Inquiry and respond to the specific queries posed in your correspondence.

The CHC Unit was first established in the 1970s under the title of the *Aboriginal Hospital Liaison Unit* with the specific aim of:

- Supporting and advocating for Aboriginal patients in tertiary care settings.
- Coordinate the safe transition of Aboriginal people to and from country Western Australia (WA).
- Participate in discharge planning and assist in the coordination of follow-up care.
- Arrange transfer for Aboriginal cadavers to their homeland for burial.
- Convey information to the patient and relatives as to their health condition, treatment and medical needs.
- Cultural brokerage between the patient and clinical staff.

As the role of the Unit expanded and the numbers of Aboriginal people travelling to the metropolitan region for health care increased, the *Aboriginal Hospital Liaison Unit* became the CHC Unit. In January 2012 the CHC transitioned across to the AHIU under the leadership of the Area Director, AHIU. This transition was as a result of the implementation of the *Closing the Gap* National Partnership Agreement which funded the creation of over 40 Aboriginal Liaison Officer across WA.

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1. Funding and Budget

The CHC is entirely funded from a base recurrent budget by WACHS. For 2014/15 the CHC budget is \$556,908.91.

2. Number of PATS Patients seen by CHC

There has been a steady and significant increase in the number of Aboriginal patients requiring travel to the metropolitan region for health care since the 1970s. Data recorded by the CHC shows an increased demand for the 'Meet and Assist' Program (*please refer to Attachment 1*).

3. CHC Staffing and FTE

The CHC has a total of 4.0 Full Time Equivalent (FTE) positions, as well as one 0.8 and one 0.6 FTE. Please refer to table below.

Position	FTE	Status
Patient Journey Coordinator (HSU G6)	1	Filled
Business Support Officer (HSU G4)	0.8	Filled
Aboriginal Health Worker (LHMU Level 1:3)	1	Vacant
Aboriginal Health Worker (LHMU Level 3:3)	0.6	Filled
Aboriginal Health Driver (HWGA L5)	2	Filled

4. Service Outline

The CHC operates between the hours of 8.30am and 4.30pm Monday to Friday 52 weeks of the year. Hours of operation are currently determined by the available budget and FTE. Patients requiring transport outside of these hours are provided with cab charge vouchers.

Services provided by the CHC include:

- Meet and Assist (meet and provide transport to vulnerable clients who arrive via flight, train or bus).
- Coordination of daily transport to and from medical appointments to all metropolitan hospitals and/or medical facilities.
- Assist the PATS clerks from the regions locate suitable accommodation.
- Assist in the return of deceased person/s.
- Provide an 'Advocacy' role on behalf of the client when necessary.
- Link between client and hospital staff, PATS clerks, Aboriginal Hostels and other relevant key stakeholders.
- Support and link to the metropolitan and regional Aboriginal Liaison Officers.
- Cultural brokerage in cross-cultural situations.
- Liaise with all metropolitan hospitals to confirm admission and appointment times.

5. Staff Roles

- The CHC Patient Journey Coordinator provides coordination and oversight for the CHC Unit and works closely with the Program Manager Statewide Aboriginal Liaison Program.
- The CHC employs two (2) Aboriginal Health Drivers who are the only staff who have face-to-face contact with clients during the 'meet and assist' and daily transport of clients to their medical specialist appointments.
- The CHC Aboriginal Health Workers (AHW)s are located in the main office in Osborne Park and act as a 'referral' service by coordinating accommodation and transport. The service is currently delivered as a 'call-centre', providing advice on cross-cultural issues, confirming appointment times and coordinating transport. The CHC team works closely with the Aboriginal Hostels Limited, Hospitals and the PATS clerks to assist in clients returning home. When required CHC provides cab vouchers on a needs only basis to patients.
- The CHC Business Support Manager assists the AHWs with telephone consults, general office administration and recording of data.

A number of issues relating to the CHC service model, the Statewide Aboriginal Liaison Program and improving the Aboriginal patient's journey have been identified for further review. A large group of key stakeholders have been invited to participate in a working group to develop strategies to address and improve the Aboriginal patient journey.

Yours sincerely



Jeffrey Moffet
CHIEF EXECUTIVE OFFICER

23rd September 2014

ATTACHMENT 1

**WACHS Country Health Connection
TRANSPORT STATISTICS
(2006 till June 2014)**

A trial for Meet & Assist commenced in 2006. This service was officially launched in July 2007.
All Meet & Assist services now come under CHC Transport.

