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Caring Together: Overhaul of patient transport and extra rural doctors

NSW Minister for Health, John Della Bosca, today announced that eligible pensioners and health care cardholders would no longer need to personally contribute to travel costs to get specialist treatment.

“The improvements are part of the NSW Government’s *Caring Together: The Health Action Plan for NSW* developed in response to the Garling Report,” the Minister said.

“The changes apply to people who have to travel 100 kilometres or more for specialist treatment and have access to the Isolated Patients' Travel and Accommodation Assistance Scheme (IPTAAS). This means they will no longer have to pay a co-contribution and administration charge.

“Clearly, in remote areas of the State, there will always be a need to travel to receive specialised services, such as dialysis, and this can present financial challenges for some communities.

“For someone needing dialysis treatment three times a week, this can add up to \$3000 a year – so these changes represent a significant saving.

“The need for greater support with transport costs was one of the key themes that emerged from consultations in regional communities about the Garling Report recommendations.

“An independent study is now underway to look at better ways to provide non-urgent transport for people needing specialist services.

“Various organisations provide the current transport network across NSW, often duplicating services,” Mr Della Bosca said.

The NSW Government is also:

- Looking at the availability of dialysis services and transport solutions for disadvantaged patients;
- Reviewing Non-Emergency Patient Transport provided by the Ambulance Service of NSW;
- Working with the national Patient Assisted Travel Scheme (PATS) Taskforce to draft agreed principles for providing patient transport.

Mr Della Bosca said through *Caring Together* the NSW Government would also improve the supply of skilled doctors to rural areas and ensure regional, rural and remote hospitals received a fair allocation of new starters and specialist trainees.

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The Minister said \$28.9 million would be committed over the next four years to:

- Create 45 extra medical positions in rural areas to support progression towards compulsory rural training of all second and third year doctors.
- Permanently allocate a country careers officer in each of the four rural Area Health Services to support recruitment of doctors, nurses and other clinical staff.

“NSW Health has been working with a cross government taskforce to review recruitment strategies including incentives, accommodation and smarter service delivery models to enable young people to build careers in regional areas and work with Indigenous communities,” the Minister said.

“Research indicates that a doctor’s early experience has a significant influence on where they want to work and what type of specialty they practice, with rural-based medical students 2.5 times more likely to be retained in a rural area.

“The focus of the *Caring Together* action plan is to promote a culture in hospitals where the care and treatment of the patient is at the centre of everything we do,” Mr Della Bosca said.

“As the Garling Report points out, NSW has one of the better public health care systems in the developed world but we need to meet the challenges of the future, including a growing and ageing population.

“The strategies being announced today are the result of extensive consultation across the State and from working closely with doctors, nurses and other health staff.

“These initiatives are only the beginning of important changes to continue to deliver the best possible health care and to ensure on-going patient care and safety.

“The full details of the *Caring Together* initiative will be announced next week,” the Minister added.

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