

Media Release

Patient Travel and Accommodation Assistance Schemes a National Disgrace

Oncology Social Work Australia (OSWA) has described the current mish-mash of Patient Travel and Accommodation schemes run by the various Australian state and territory governments as a national disgrace which amounts to blatant healthcare discrimination against people living in remote, rural and regional Australia.

OSWA National President, Jane Whelan, says most of the schemes now in place in the states and territories are under-funded, overly bureaucratic and unfairly restrictive. The schemes appear to be process driven and centre on bureaucratic control and management rather than being patient care focused. She said the current shambles needs national reform to ensure that those Australians living in rural, remote and regional areas have the same access to quality health treatment services as their metropolitan cousins.

Ms Whelan said, "Currently patients are being subsidised in substantially dissimilar amounts as they travel to health treatment centres around different parts of the country. The amount of assistance patients receive for the travel and accommodation costs they incur depends very much on which state or territory they happen to live in.

Australians seeking health care treatment away from home should not be funded at different levels depending on their postcode through a scheme which is basically a Commonwealth responsibility but currently delivered in a discriminatory and bureaucratic fashion by the various state and territory governments.

The NSW Health Department's recent move to increase its accommodation allowance by a mere \$10 to a miserly \$43 for singles and \$14 to \$60 for couples (when basic overnight accommodation is priced at \$90 and up) does not remove the significant barrier for many NSW country people in receiving optimal and timely medical treatment in the major cities.

The absence of a national minimum standard and a national framework for an Australia wide Patient Travel and Accommodation Assistance Scheme has led to an inequitable, fragmented, and inefficiently administered collection of systems that operate to the great detriment of tens of thousands of rural and remote Australians with health problems.

Ultimately, it simply means that many patients with limited funds often cannot afford to travel to receive health care away from home thus leading significantly to the higher mortality rates experienced in rural and remote areas".

"Rural Australians live significantly shorter lives than metropolitan Australians and this disgraceful state of affairs occurs as our nation anguishes over how to encourage more people to move out of our capital cities into less populated areas of the country," Ms Whelan said.

"In my own state of Queensland for example, patients who need to travel a distance and stay away from home to receive medical treatment are currently subsidised at the miserable rate of \$33 per night by Queensland Health for accommodation for a single person. Would it be too much to ask that Queensland singles get at least the \$43 a night that their NSW counterparts now receive? Modest motel style accommodation in the suburbs adjacent to any of Australia's major hospitals cannot be had for much less than \$100 per night at the absolute minimum, a discrepancy that soon mounts up for a patient undergoing extended health treatments such as oncology which can typically run for months.

“Meanwhile, our well cosseted federal politicians receive \$220 per night accommodation allowance when they stay in Canberra after flying there and back in business class,” she said.

A well resourced patient travel and accommodation scheme must never be regarded by politicians and health bureaucrats as some kind of discretionary extra service when it is in fact the only means by which people in our less populated areas can obtain access to the specialist medical services that are not available to them locally.

A quality patient accommodation and travel assistance scheme will never fully compensate for the absence of face-to-face local health services in the bush. Instead, our politicians and bureaucrats must recognise this support for what it is, an essential service for our fellow Australians that must be responsive, affordable, well-promoted and widely available.

“When our nation is currently willing to invest over \$50 Billion into the National Broadband Network, touted as a means of bringing metropolitan communication standards to the bush, surely there can be no argument in upgrading the current plethora of second rate, state run patient travel and accommodation schemes into one well funded, quality national scheme run and paid for by the Federal government” she said.

Ms Whelan called on the Federal Health Minister Nicola Roxon to urgently commit to introducing a national assistance scheme with standard criteria of eligibility and support levels for patients’ accommodation and travel costs and which was based on the principle that no patient should be unable to access medical treatment because of the expense incurred by that patient no matter where they live in Australia.

Ends:

For further information and interview opportunities contact:

Jane Whelan, National President, Oncology Social Work Australia (OSWA) on 0406 121 004

About OSWA: Oncology Social Work Australia is a non-profit organisation dedicated to the enhancement of psychosocial services to people with cancer as well as their families and carers. OSWA’s goal is to work with people who have cancer and those affected by cancer to optimise their social, emotional, spiritual, physical and psychological well-being. For more information about OSWA, go to www.oswa.net.au

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