

# Significant Issues and Strategic Highlights

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Overview of Agency

**Significant issues & Strategic Highlights**

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Key performance indicators

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# Significant Issues

## COVID-19

The COVID-19 pandemic has continued to heavily shape the provision of health care in Western Australia. The Child and Adolescent Health Service (CAHS) has remained agile in responding to the changing COVID-19 environment, with a focus on keeping children, families and staff safe particularly during periods of heightened community transmission. We have continued to provide safe care across all our services, with adaptations to meet infection prevention guidelines and COVID-19 related directions set through the WA Health Framework for System Alert Response.

The CAHS Emergency Command Centre and Executive Oversight Committee has been operating to provide organisational oversight, facilitate rapid decision making and continued monitoring across all service areas, in conjunction with WA Health and the State Incident Command Centre.

### Periods of high community transmission

During periods of high community transmission, all health services were required to reduce face-to-face outpatient appointments to help reduce the risk of transmission. When clinically appropriate, telehealth and virtual appointments were conducted, with essential face-to-face



Staff at Rapid Antigen Testing tents outside Perth Children's Hospital

appointments going ahead across all CAHS services. Visitor restrictions were also adjusted during the year to enable physical distancing and reduce potential COVID-19 exposure at all sites.

As community transmission of COVID-19 increased, significant numbers of CAHS staff and volunteers were required to isolate, for varying lengths depending on the guidelines at the time. A dedicated contact tracing centre was established in March 2022, providing a call centre service

12 hours a day, seven days a week for CAHS staff who were COVID-19 positive, a close contact or symptomatic. Rapid Antigen Testing kits were also distributed to enable regular voluntary testing.

The Emergency Department consistently recorded 12 per cent of presentations as being COVID-19 positive during March, April and May, with two peaks of 21 per cent in late March and 21 per cent in mid-May. This translated into a hospitalisation rate for COVID-19 positive children of approximately one in



four, with the majority of these children having a length of stay between 24 and 48 hours. The main management for COVID-19 positive children was treatment of the symptoms, observation, and administration of fluids.

To ensure COVID-19 suspected or positive children received essential hospital care new arrangements were implemented including strict patient transfer arrangements, the addition of HEPA filters, and a range of other approaches guided by COVID-19 specific policies and guidelines.

Community Health established a dedicated child health clinic in East Perth to facilitate child health checks of positive and suspected COVID-19 positive children, or those whose parents and guardians were COVID-19 positive. A second COVID-19 Safe clinic opened in Duncraig in May 2022.

### COVID-19 Vaccination

The CAHS COVID-19 Vaccination Team made a significant contribution to the delivery of COVID-19 vaccinations in WA as part of the WA COVID-19 Vaccination Program.

Over the past year the program managed eight fixed community vaccination clinics in the Perth metropolitan area, providing high volume vaccinations to the community.

The team was responsive to the evolution of vaccination mandates and recommendations, including workforce mandates, the introduction of booster doses and expanding eligibility.

The CAHS COVID-19 Vaccination Team played a

key role in diversifying vaccination opportunities for the community. To allow for convenient and opportunistic access, pop-up clinics at community events and in shopping centres in both high volume and low uptake local areas were held regularly.

The team also provided in-reach and outreach opportunities for school children to be vaccinated. In terms three and four in 2021, the program attended a number of high schools to vaccinate students from vulnerable cohorts. In 2022, the team led a series of small pop-up clinics in primary schools located in low uptake areas to support primary school aged children (aged five to 11 years) to be vaccinated in a convenient and familiar environment using a parent present model.

The CAHS COVID-19 Vaccination Team supported the WA COVID-19 Vaccination Program strategy in providing equitable access to priority populations and hard to reach cohorts. The team has partnered with trusted service providers to deliver culturally safe and socially secure vaccination opportunities to Aboriginal people, people experiencing homelessness and rough sleepers, culturally and linguistically diverse communities, people in residential care including aged care and disability settings, those in congregate living and social housing, people with medical complexities and people with disability and neurodiversity.

The team also supported vaccination efforts in the regions including bus tours to remote and very remote communities, as well as meeting the demand of large scale vaccination clinics

and bespoke person centred services such as in home vaccination and vaccination under sedation (in partnership with a private provider).

CAHS clinics (community vaccination clinics, pop-ups, in-reach and outreach) have delivered 1,365,271 COVID-19 vaccinations in 2021-2022.

Community vaccination clinics in the 2021-22 reporting period were held in Joondalup, Carramar, Ellenbrook, Midland, Mirrabooka, Perth Airport, Perth Convention and Exhibition Centre and Claremont.

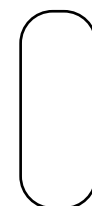
More than 10,000 high school students were transported to vaccinations clinics in 2021; and the CAHS team provided 24 primary school pop-up clinics in term two, 2021.

The CAHS vaccination team delivered 160 long-term and short-term clinics in 2021-22, including large scale vaccination clinics, pop-up clinics, in-reach and outreach clinics, school clinics, shopping centre clinics, door-to-door, in-home, and sedation clinic vaccinations.

### Statewide Paediatric and Adolescent Remote Care COVID-19 service

As a part of preparation for COVID-19, the State-wide Paediatric and Adolescent Remote Care (SPARC) Service was established to help support COVID-19 positive children with chronic conditions and their families across WA, who have an elevated risk of an increased burden of disease.

The SPARC multidisciplinary team consists of nursing, medical, social work, Aboriginal health



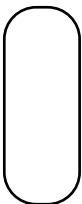




“ The SPARC team provides 24 hours a day, seven days a week access to clinical care, with the purpose of reducing unnecessary Emergency Department presentations and hospital admissions. ”

workers and clerical support to remotely care for families affected by COVID-19. By supporting these families, children can remain in isolation and avoid the stress sometimes associated with visiting a hospital. The remote virtual care service also enables the team to support children from all over the state, and link patients with local treating teams if required. The SPARC team provides 24 hours a

day, seven days a week access to clinical care, with the purpose of reducing unnecessary Emergency Department presentations and hospital admissions. The SPARC service has cared for almost 400 patients since starting in early 2022.





### Child Development Service demand

The Child Development Service (CDS) provides an essential service for children with developmental concerns and their families across the Perth metropolitan area through a range of assessment, diagnostic and early intervention services. Early detection of child development concerns and access to interventions before school entry is paramount to reduce the likelihood of a range of long-term negative outcomes that may impact a child's education and social achievements.

The CDS is a unique service that combines a metropolitan-wide developmental paediatric diagnostic and management service, with a comprehensive allied health service. The service operates in a broader context that intersects with education, disability, mental health and the private sector.

There has been a 59 per cent growth in demand for CDS services over the last 10 years, with an increase in demand of 43 per cent noted in the last 5 years. There has been increasing demand for all CDS services (excluding Audiology) with the highest increases noted for Paediatric services (109 per cent), Occupational Therapy (103 per cent) and Clinical Psychology (85 per cent).

During this time the CDS has undergone significant change to improve service delivery models and standardise clinical care pathways. The service has also adapted to accommodate changes to the broader service delivery landscape, such as the introduction of the National Disability Insurance

Scheme (NDIS) and the impact of COVID-19. The CDS has a wide range of strengths as a service but also operates with significant facility and resource constraints.

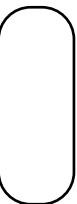
In 2021, CAHS funded an additional 11.5FTE to help address wait times to access a paediatrician and autism diagnostic assessment services. CAHS has also continued to implement a range of strategies to ensure the most efficient use of clinical resources, including reviewing waitlists to identify children no longer needing services, the use of video consultations and online questionnaires, expanding inter-disciplinary work and operating a weekly rapid response medication review clinic to manage referrals for children on medication who no longer have access to their non-CDS specialist prescriber.

### Information, Communication and Technology

Information, Communication and Technology (ICT) asset investment in CAHS has historically been opportunistic and driven by demand for health and for community mental health.

Perth Children's Hospital had significant investment during its opening, however ICT infrastructure, such as computer devices and audio-visual equipment will require significant ongoing investment to ensure continuing digital performance and the ability to deliver an electronic medical record into the future.

ICT community infrastructure across community sites has faced funding challenges for many years.



To assist with informing current and future needs, CAHS is developing an ICT Asset Management Plan which will focus on the management of various ICT assets including End User Computing (EUC), Audio visual (AV) and Network and Server Infrastructure. This will be provided as an addendum to the annual review of the CAHS Strategic Asset Plan. CAHS ICT Server and Network asset replacement is managed by Health Support Services.

The Perth Children’s Hospital (PCH) Project procured a significant amount of new medical technology. There was a transfer of 6,953 individual medical devices valued at \$27.94 million from Princess Margaret Hospital. As a result of ongoing procurement (replacement and expansion), CAHS is currently equipped with approximately 23,000 individual medical devices worth a total value of \$102 million. Timely replacement requires a \$10 million annual Medical Equipment Replacement Program (MERP) budget. Post PCH opening, each annual MERP budget has been less than \$2 million. As a result, the current MERP backlog is \$26.7 million and is expected to grow over the next five years to approximately \$75 million as the majority of equipment purchased by the Perth Children’s Hospital Project reaches end of life.

**Ageing community facilities**

CAHS uses a total of 169 community facilities; 154 are leased and 15 owned and operated. A recent CAHS Building Compliance Audit reviewed the community facilities owned by CAHS and made recommendations for rectification works, ongoing

maintenance and other buildings and regulatory compliance considerations.

The audit found that CAHS community facilities need significant refurbishments and upgrades to rectify critical risks and meet service delivery requirements now and into the future. CAHS continues to work within its budget environment to address issues including building and structural issues, accessibility compliance with the Disability Discrimination Act, fire safety compliance, and occupational safety and health issues over the previous decade.

CAHS continues to develop business cases for community facilities, medical and ICT equipment replacement, outlined in a detailed capital investment plan within its Strategic Asset Plan to government for consideration on an annual basis.

**Independent Inquiry into Perth Children’s Hospital conducted by the Australian Commission on Safety and Quality in Health Care**

The WA Health Director General initiated an Independent Inquiry into Perth Children’s Hospital under Part 14, section 183 of the Health Services Act 2016 (WA) (Act), following the tragic death of Aishwarya Aswath in April 2021, and the subsequent internal clinical incident investigation. The Inquiry was undertaken by the Australian Commission on Safety and Quality in Health Care which released its final report in November 2021, outlining 30 recommendations.

The CAHS Board accepted all recommendations. The Chief Executive established an Independent

Inquiry Oversight Committee to build and improve safety and quality at CAHS and to oversee implementation of the recommendations.

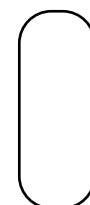
A phased approach has been adopted to progress and implement recommendations, and to ensure ongoing monitoring and evaluation. CAHS are determined that implementation of the recommendations will go beyond a transactional focus, and genuinely build a lasting foundation for cultural, clinical and system-wide changes. Embedding the recommendations will be ongoing, reflecting the genuine and lasting change intended by the Independent Inquiry team.

The Department of Health is overseeing implementation of the recommendations by CAHS and across all health service providers where relevant.

**Supporting children and young people experiencing mental health issues**

Supporting children and young people experiencing mental health issues has remained a critical focus at CAHS with continued high demand across Child and Adolescent Mental Health Services with high acuity and risk associated with a complex and vulnerable group of children and young people.

CAHS has continued to work closely with the Department of Health, Mental Health Commission, Child and Adolescent Mental Health Services staff and consumers to ensure every opportunity is taken to enhance services for children, young people and their families, and has remained intensely focused on this throughout the year.



### **Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents aged 0-18 in Western Australia**

The Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents Aged 0-18-years in Western Australia (Taskforce) was established by the State Government in early 2021 to develop a system-wide plan for public specialist infant, child and adolescent mental health services. The Taskforce was a key recommendation arising from the Chief Psychiatrist's review into the treatment of Ms Kate Savage who died tragically in July 2020, triggering an intense and continued focus on mental health services for children and young people.

The final Taskforce report, delivered in March 2022, provides a comprehensive plan for securing better mental health outcomes for children and young people across WA. The Taskforce's findings, recommendations and vision have all been shaped by extensive engagement with stakeholders throughout WA, including people with lived experience, clinicians, service providers and other system leaders. Its strategy includes eight Key Actions outlining the critical reforms needed to improve outcomes and 32 recommendations to guide implementation.

The WA Government has endorsed all 32 Taskforce recommendations, and has committed to radically reshaping the State's infant, child and adolescent mental health system to deliver significantly better outcomes for them and their families and carers.

CAMHS is actively working with the Department of Health and Mental Health Commission who are responsible for the delivery of the Taskforce recommendations.

As part of the Taskforce reform, CAMHS will be reimagined to provide early intervention, prevention and a responsiveness to changing needs with accessible, more local, consistent, and integrated care.

The CAMHS Reform Program was established in August 2021 to prepare for the recommendations of the Taskforce. The Reform Program provides coordination, oversight and reporting support for the delivery of CAMHS initiatives and projects aligned to the Taskforce's vision. The CAMHS Reform Program will continue, aligned closely with the Mental Health Commission Implementation Steering Group, CAHS stakeholders and the WA Country Health Service.

During 2022-23, the CAMHS Reform Program will focus on designing a range of new, integrated models of care in partnership with system stakeholders.

#### **CAMHS Workforce**

Recruiting additional staff for CAMHS has been and continues to be an area of intense focus in response to increased demand for services. As part of the 2021-22 budget CAMHS received funding for an additional 101.3 full time equivalent (FTE) to meet the increased demand for services, with the Mental Health Commission funding 50.1 FTE of this across 2021-22 and 2022-23 budget.

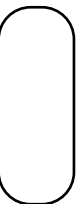
Significant workforce shortages in Western Australia, across Australia, and internationally are impacting on the availability of qualified health professionals to fill positions. CAHS has commenced international recruitment to fill the additional and vacant Child Psychiatry positions.

CAHS is also leveraging off WA Health's international nursing recruitment and the Belong recruitment campaign. Active local, interstate and international recruitment, marketing, monitoring and evaluation to fill all CAMHS positions will continue to be a priority for CAHS.

As of 12 August 2022, CAMHS has successfully appointed to 36 FTE of the 101.3 FTE.

The increase in staffing has been allocated to the areas of highest need and includes an increase in psychiatrists, nurses, clinical psychologists, social workers, occupational therapists, and Aboriginal mental health workers. A number of new positions have also been created including graduate nurse and entry level allied health positions, allied health and nursing professional leads, and a National Disability Insurance Scheme Coordinator.

CAMHS has also expanded its Peer and Family Support Workers (Lived Experience) workforce. An additional four full time equivalent positions have been created with recruitment commencing across the five sites of PCH Ward 5A, Armadale and Rockingham Community CAMHS, Pathways and Touchstone day programs.







Developer's render of Murdoch Square as the location for the Murdoch Community Hub

**Midland and Murdoch Community Hubs**

In alignment with our Strategic Asset Plan, CAHS is establishing purpose built facilities that will offer integrated and coordinated community-based health services for children and families in both the Midland and Murdoch regions.

These hubs will offer families the convenience of accessing multiple CAHS services from a single, contemporary, safe and fit-for-purpose site, whilst some existing service sites (named spokes) will remain open and that provide care closer to home.

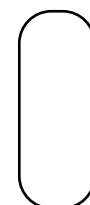
Midland and Murdoch are the initial two CAHS hub sites that have been selected, based on consumer demand for CAHS community-based services and population growth.

CAHS initiated the Midland Community Hub Project as the first hub project due to \$7.2m funding being provided by the Department of Health from the Sustainable Health Review (recommendation 8) in 2019.

Total capital funding approved through Treasury for the Murdoch hub project is \$10.94M. Following a period of negotiations and due diligence

assessments, CAHS executed a lease with Hesperia in December 2021 for an approximate 2,871m<sup>2</sup> footprint within a new build located at Lot 1 at the intersection of Fiona Wood Road and Barry Marshall Parade in Murdoch.

CAHS has developed a new service delivery framework that underpins the delivery of integrated community based services to deliver long-term economic, social and health benefits across the community. To support the new service delivery framework, CAHS is seeking to transform their community-based assets and service delivery





approach via the Hub and Spoke Model - investing in physical infrastructure to respond to increasingly inadequate current facilities while enabling a more integrated community-based service model.

The strategic shift towards an integrated service model, focusing on effectively managing health care in the community where appropriate, is considered a critical part of the solution to ever-increasing demand for health care and the associated financial pressures. Hub and spokes will deliver contemporary, purpose built, community-based facilities that will provide integrated universal health, immunisation, developmental and mental health services for children and families that are responsive to local community need.

### Children's Hospice

CAHS is partnering with Perth Children's Hospital Foundation to build Western Australia's first children's hospice, which is expected to open in late 2024.

Specialist paediatric palliative care is known to improve the quality of life for a child with a life-limiting condition, and their family and carers from the time of diagnosis and over the course of the illness. The Children's Hospice will provide the care of a hospital and the feel of a home for children living with life-limiting conditions. Respite care and support will also be provided for the families. The hospice will provide an opportunity for families to come together, to celebrate life and to connect with others in similar circumstances, while being supported by a clinical team.

The services provided by the hospice will also include support for the physical, emotional, social and spiritual support of the child and their family during their palliative care journey. The state-wide paediatric palliative care service will support the hospice, by providing holistic care to children, young people and their families across Western Australia.

The hospice will be designed to have a welcoming home-like environment. It will have

seven beds and a bereavement suite as well as three family accommodation units.

The hospice project is currently in design development phase. There has been significant progress to develop the hospice design and associated model of care with construction expected to commence in 2023.

Following approval by Parliament, the Children's Hospice site has been excised from the Allen Park A Class Reserve in Swanbourne and registered with Landgate on 21 May 2021.

The construction and fit-out costs of the Children's Hospice will be funded by Perth Children's Hospital Foundation, with CAHS to provide ongoing operational funding, along with funding and operational support from the Foundation for some non-clinical areas.

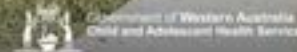
WA Treasury approved funding for \$3.2 million of additional expenditure and funding for WA Health over the period 2021-22 to 2023-24 for planning, equipment, public art, and preparatory site works for the new Children's Hospice as well as support an immediate uplift to the current service capacity of the WA Paediatric Palliative Care Service.

“ The services provided by the hospice will also include support for the physical, emotional, social and spiritual support of the child and their family during their palliative care journey. ”



Architect Concepts by Hassell / Children's Hospice Project

In proud partnership with







# Strategic Highlights

## Care for children, young people and families

### Community Pharmacy

In February 2021, a CAHS Community Pharmacy Pilot Project commenced, which involved the PCH Pharmacy Department working collaboratively with Community Health and CAMHS to optimise the delivery of medicine services for CAHS' community patients and families. This has seen the establishment of two new pharmacist positions which will enable the PCH Pharmacy Department to continue to work closely with community-based CAHS doctors, nurses and families to ensure safe, appropriate and timely access to medications.

### CAHS Disability Access and Inclusion Plan 2022-2026

People with disability often experience a significant health disparity gap when compared to those without a disability. CAHS is committed to ensuring that people with a disability, their families and carers are able to fully access the range of services, information and facilities by being responsive and innovative in continual improvement opportunities, and by encouraging all employees, contractors and volunteers to drive an inclusive health environment

To guide this work, CAHS has developed a new Disability Access and Inclusion Plan for the 2022 to 2026 period.

### Environmental Sustainability

Working alongside the State Government and the Department of Health Sustainable Development Unit, CAHS is actively pursuing a greener future.

CAHS is a member of the Global Green and Healthy Hospitals Network – the framework of which paves the way for the industry to address and promote greater sustainability and environmental health.

Greenhouse gas reduction initiatives are being implemented across CAHS to achieve net zero emissions in accordance with State Government targets. Key environmental projects include:

- PCH Surgical Theatres have eliminated the use of the potent greenhouse gas desflurane used in anaesthetic procedures, and the use of nitrous oxide has also been reduced by 73 percent.
- PVC and single use metal instrument recycling was introduced across PCH.
- CAHS is also working with the Department of Health to develop a whole of health emissions data reporting system.



## Value and respect our people

### Accreditation

The National Safety and Quality Health Service (NSQHS) Standards define the level and consistency of healthcare that consumers should expect. The Standards help to ensure that robust systems and processes are in place to minimise the risk of harm to patients and clients, and improvements are continually made to the quality of health service provision.

In November 2021, CAHS was assessed against the Standards by the Australian Council on Healthcare Standards (ACHS) and in February 2022, was successful in obtaining accreditation for a further three-year period. This is a credit to the hard work of all staff and our ongoing commitment to providing safe and high-quality care.

### Stars of CAHS

The Stars of CAHS Awards recognise individual employees or teams who provide exceptional care and service in line with the CAHS values of compassion, collaboration, equity, respect, excellence and accountability.

There are three categories of awards:

1. Stars of CAHS Award – nominated by staff
2. Stars of CAHS Consumer Award – nominated by consumers
3. Stars of CAHS Chief Executive’s Award – selected by the Chief Executive from all nominations

In 2021-22 there were 14 winners from 181 nominations.



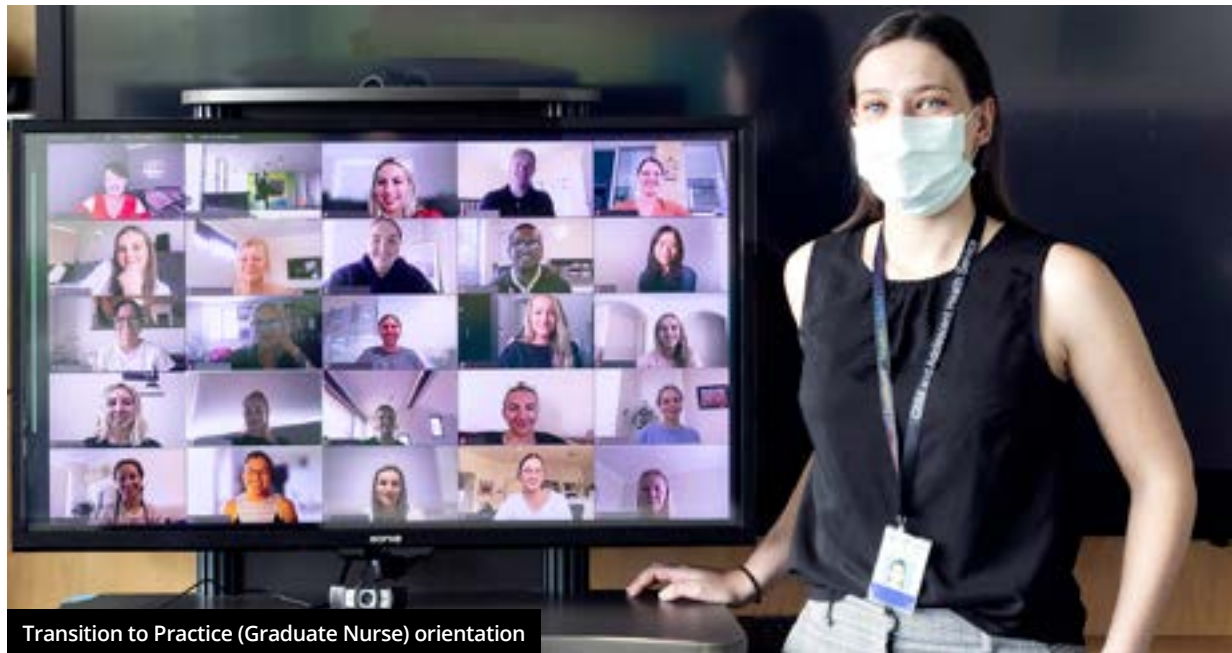
CAHS gratefully acknowledges the ongoing support of award sponsors HESTA and the Perth Children’s Hospital Foundation.

### Volunteers

CAHS is privileged to be supported by a team of over 400 volunteers who provide approximately 800 hours a week. During 2021-22 CAHS recruited

150 new volunteers. Our volunteer group is increasingly diverse, with more than 55 languages spoken collectively.





Transition to Practice (Graduate Nurse) orientation

## Promote teaching, training and research

### Postgraduate Nursing Education

In collaboration with the Chief Nursing and Midwifery Office and Edith Cowan University, CAHS Paediatric Nursing Education facilitated an opportunity for 27 registered nurses to complete a Graduate Certificate in Children and Young People's Nursing. This course provides an opportunity to advance knowledge in theoretical principles of children and young people's nursing, enabling nurses to develop skills towards becoming a specialist paediatric nurse.

### Simulation Education

Simulation Education at PCH has continued to develop across many areas of the hospital, with a year-on-year increase in CAHS employees attending training sessions.

Over the past three years, several new high-fidelity simulation courses have been designed and delivered, including crisis resource management, adolescent medicine, and paediatric cardiology to CAHS staff, WA Health staff, and interstate participants. Some of these courses have been the first of their kind in Australia.

PCH is now delivering simulation training onsite in wards and outpatient departments on a weekly



basis, as well as supporting the weekly sessions in the Paediatric Intensive Care Unit and the Emergency Department. During the pandemic, the team developed COVID-19-based scenarios for clinical areas, which have proven critical to support clinical practice in the context of increased COVID-19 positive inpatient admissions to PCH.

### Neonatology

In collaboration with colleagues from health services across the State, the Neonatology education team designed, developed, and launched a new hospital-based neonatal care course for nurses and midwives who work in hospitals across the State caring for newborns.



The program, which commenced in February 2022, takes a blended learning approach with 28 hours theory, learning through tutorials, interactive workshops, and case studies. This is followed by 80 hours clinical practice placement at the KEMH Neonatal Unit to consolidate skills before returning to metropolitan, rural, and remote locations with enhanced skills and knowledge.

**Appointment of the inaugural Associate Professor Community Child Health**



Dr Yvonne Anderson

In January 2022, Dr Yvonne Anderson was appointed to the newly established role of Associate Professor Community Child Health. This is a joint appointment between CAHS and Curtin University, in partnership with the Telethon Kids Institute.

This position will drive the research program in community child health, and foster collaboration with Community Health teams, Curtin University and families, with a focus on research that can be translated into Community Health service delivery and improvements.

**Collaborate with our key support partners**

**Rare Care Centre**

Western Australia is taking a global, leading role in establishing a Rare Care Centre that will provide a holistic model of care for children with rare and undiagnosed diseases. Its aim is to improve the lives of children and young people living with a rare disease and their families by providing an integrated, coordinated and globally connected model of care. The Centre has secured funding from leading WA philanthropists – the Angela Wright Bennett Foundation, the McCusker Charitable Foundation via the Channel 7 Telethon Trust, the Stan Perron Charitable Foundation and Perth Children’s Hospital Foundation via a significant contribution from Mineral Resources Limited. Together they have provided a total commitment of \$10 million over five years, and we thank them for their generous support.

The Centre, with staff based at PCH, will improve awareness and support in the early identification of children with potential rare diseases while also providing improved support, care coordination and access to community resources, clinical trials, and research. With a statewide clinical service, the Centre will develop an education centre, digital platform, and global partnerships. It will champion research collaborations, increase workforce capacity, raise awareness, create peer support programs, and advocate for disease recognition.



The Rare Care clinical lead and patient



**New ‘Fun on Four’ Family Room in partnership with Ronald McDonald House Charities WA.**

A new Ronald McDonald Family Room opened in August 2021 within the PCH ‘Fun on Four’ precinct.

The newly refurbished space provides quality play and learning experiences for young patients and siblings, while offering a comforting and uplifting environment for parents and carers and is managed as part of a new partnership between CAHS and Ronald McDonald House Charities WA.

It features a parent’s retreat with tea and coffee facilities, arts and crafts zone, teen den fully equipped with the latest video and arcade games, cinema room, reading retreat with enjoyable lounge area, soft play and toddler zone, and an explorer’s zone with sensory, construction and imaginative play areas.

**Early Phase Clinical Trials Program**

The Oncology and Haematology Department expanded its early phase clinical trials capabilities to ensure that all children with cancer in WA have an opportunity to access the latest cutting-edge therapies, such as molecularly targeted therapy and immunotherapy using precision medicine testing.

The Department established an Early Phase Clinical Trials Unit in 2017. Since inception, a total of 33 new early phase clinical trials have been opened, with 67 patients enrolled, some of which have participated from other countries.

In collaboration with the Telethon Kids Institute



The new ‘Fun on Four’ Ronald McDonald Family Room

Cancer Centre, the Oncology and Haematology Department has translated home grown research into an international clinical trial called SJ-ELIOT, in partnership with the world-renowned St Jude Clinical Research Hospital in Memphis, United States of America, for patients with relapsed medulloblastoma (a common type of cancerous brain tumour in children).

In 2019, PCH joined several international clinical trials consortia including the COLlaborative Network

for NEuro-oncology Clinical Trials (CONNECT), Pacific Pediatric Neuro-Oncology Consortium (PNOC) and the Innovative Therapies for Children with Cancer (ITCC)-Brain. The Oncology and Haematology Department have built strong collaborations with numerous pharmaceutical companies, allowing us to offer families access to novel treatments not otherwise available.

