

~~involvement in decision making. The chief executive of the service will participate in committee meetings.~~

~~Communities have consistently requested a greater say in the running of their hospitals and health services. To meet this need, I propose to amend the act to enable the minister to establish ancillary boards. These ancillary boards will provide advice to hospital and health boards on the operations of specific hospitals or health services within their region. These ancillary boards will be composed of members of the local community who can provide advice, support and expertise on health related matters. This amendment will mean that there is greater community involvement with our health services.~~

~~The government is of the view that the current health district boundaries are too large and will require reduction in size to further devolve decision making to more local communities of interest. The establishment of ancillary boards will also allow the progressive establishment of new, further devolved hospital and health service areas as capacity, capability and confidence grows in returning decision making and control of hospitals to local communities.~~

~~This bill will also amend the act to support the new national health funding arrangements under the National Health Reform Agreement. All jurisdictions have agreed to introduce legislation to give effect to the agreement. These arrangements will strengthen the accountability and transparency of the funding of public sector hospitals and other health services.~~

~~To achieve this outcome, the bill establishes the position of the administrator of the national health funding pool. The role of the administrator will be to oversee the payment of Commonwealth and state funds into a separate state pool account. This will be a critical first step for Queensland as we move forward with activity based funding which I anticipate will lead to greater efficiency of our health services.~~

~~One of the administrator's roles is to publicly report on payments into and out of the accounts. This reporting will be done on a monthly basis with an annual report to be tabled in parliament. The revised national health funding arrangements will come into place once all jurisdictions have enacted their legislation, an administrator is appointed and the necessary systems are established for the funding arrangements.~~

~~In my time as a member of parliament, the thing that has struck me in my travels around the state is that our health services staff identify with the hospital and health centres in which they work. The amendments that I am proposing in this bill will strengthen this as a consequence of hospitals and health services, firstly, being the employer of our top class, front line services staff who deliver outstanding services, and being the owner of the land and capital infrastructure in which they work, and by enhancing clinical involvement in decision making that impacts on healthcare services provided in our community. I commend the bill to the House.~~

### **First Reading**



**Hon. LJ SPRINGBORG** (Southern Downs—LNP) (Minister for Health) (4.49 pm): I move  
That the bill be now read a first time.

Question put—That the bill be now read a first time.

Motion agreed to.

Bill read a first time.

### **Referral to the Health and Disabilities Committee**

**Madam SPEAKER:** In accordance with standing order 131, the bill is now referred to the Health and Disabilities Committee.

039

## **HEALTH LEGISLATION (HEALTH PRACTITIONER REGULATION NATIONAL LAW) AMENDMENT BILL**

### **Introduction**



**Hon. LJ SPRINGBORG** (Southern Downs—LNP) (Minister for Health) (4.50 pm): I present a bill for an act to amend the Ambulance Service Act 1991, the Child Protection Act 1999, the Commission for Children and Young People and Child Guardian Act 2000, the Dental Technicians Registration Act 2001, the Disability Services Act 2006, the Forensic Disability Act 2011, the Health Act 1937, the Health and Hospitals Network Act 2011, the Health Practitioner Registration Boards (Administration) Act 1999, the Health Practitioners (Professional Standards) Act 1999, the Health Practitioners (Special Events Exemption) Act 1998, the Health Quality and Complaints Commission Act 2006, the Mental Health Act 2000, the Nuclear Facilities Prohibition Act 2007, the Radiation Safety Act 1999, the Speech

Pathologists Registration Act 2001, the Transport Operations (Road Use Management) Act 1995 and the Victims of Crime Assistance Act 2009 for particular purposes, and to repeal the Medical Radiation Technologists Registration Act 2001 and the Occupational Therapists Registration Act 2001. I table the bill and the explanatory notes. I nominate the Health and Disabilities Committee to consider the bill.

*Tabled paper:* Health Legislation (Health Practitioner Regulation National Law) Amendment Bill 2012.

*Tabled paper:* Health Legislation (Health Practitioner Regulation National Law) Amendment Bill 2012, explanatory notes.

In 2009 the parliament passed the Health Practitioner Regulation National Law Act 2009 to establish the national registration and accreditation scheme for health professions. On 1 July 2010 10 registered health professional groups transitioned to the national scheme, leaving four health professions to continue being registered under Queensland registration systems. The health practitioner regulation national law provides for a further four professions to transition to the national scheme on 1 July this year. These four are medical radiation practitioners, occupational therapists, Aboriginal and Torres Strait Islander health practitioners and Chinese medicine practitioners. Of these four, medical radiation practitioners and occupational therapists are currently registered under the Queensland system. Consequently, this bill repeals the two state registration acts to ensure a smooth transition to the national scheme on 1 July.

The bill makes consequential amendments to all acts that reference health practitioners and other related terms to ensure that occupational therapists and medical radiation practitioners are appropriately included in definitions concerning registered health professions. The bill also makes consequential amendments to the Health Practitioners (Professional Standards) Act 1998 to ensure that any investigation or disciplinary action being undertaken with respect to a state registrant before 1 July 2012 can continue to be appropriately dealt with after the registrant has transitioned to the national scheme. The repeal of these two registration acts leaves only two professions registered under state registration systems. These are speech pathologists and dental technicians. Neither of these two professions has been accepted for inclusion into the national scheme.

The bill also amends the Mental Health Act 2000 to correct a definitional anomaly that arose when the national scheme commenced. The amendment updates the definition of 'psychiatrist' to ensure that medical practitioners who are registered to practice in areas of need as psychiatrists are captured. The national law categorises registrants in areas of need differently to the previous Queensland Medical Practitioners Registration Act. This difference has resulted in an anomaly in the definition of 'psychiatrist' that inadvertently meant that many psychiatrists performing functions under the Mental Health Act could no longer do so. This has had the most significant impact in regional and rural services which rely heavily on area-of-need registrants to be able to provide an effective mental health service. The problem has to date been addressed administratively, requiring unaffected psychiatrists to endorse decisions made by area-of-need registrants, but this has proven difficult and can only be an interim measure until the definition is updated. The amendment in this bill simply reverts the status of area-of-need registrants under the Mental Health Act to what it had been prior to the commencement of the national registration and accreditation scheme. This bill makes the necessary changes to Queensland's laws to ensure that the registration of Queensland's health professionals aligns with the rest of Australia. I commend the bill to the House.

### First Reading



**Hon. LJ SPRINGBORG** (Southern Downs—LNP) (Minister for Health) (4.53 pm): I move—

That the bill be now read a first time.

Question put—That the bill be now read a first time.

Motion agreed to.

Bill read a first time.

### Referral to the Health and Disabilities Committee

**Madam SPEAKER:** Order! In accordance with standing order 131, the bill is now referred to the Health and Disabilities Committee.

## ~~QUEENSLAND ART GALLERY AMENDMENT BILL~~

### ~~Introduction~~



~~**Hon. RM BATES** (Mudgeeraba—LNP) (Minister for Science, Information Technology, Innovation and the Arts) (4.54 pm): I present a bill for an act to amend the Queensland Art Gallery Act 1987 for particular purposes. I table the bill and the explanatory notes. I nominate the Finance and Administration Committee to consider the bill.~~

~~*Tabled paper:* Queensland Art Gallery Amendment Bill 2012.~~