

~~those anticompetitive actions will restore the monopoly position of mills in the market for sugarcane, with ramifications across the whole industry. All milling companies and their supplying growers will be affected, including those that have elected not to withdraw from the marketing structures.~~

~~The Sugar Industry (Real Choice and Marketing) Amendment Act 2015 acknowledges the need for an amendment to the existing legislation that will provide growers with the ability to proactively be involved in the marketing of their own sugar. The bill recognises that both millers and growers have an economic interest in the sugar produced. It requires millers to provide a transparent platform for sugar marketing that provides growers a choice in who markets their GEI sugar and provides mills with symmetric rights in relation to mill economic interest sugar, or MEI sugar.~~

~~This bill is a collaborative effort of the farmers and industry bodies that are the sugarcane industry. I have consulted extensively with representatives and the KAP has initiated public meetings at Innisfail and Ingham to hear about the concerns of sugar towns and farmers, and the bill addresses those concerns. The bill will result in a stronger, fairer and more stable industry, and also gives confidence and security to Queensland communities that stretch north of Mossman and right through to the Sunshine Coast, which rely on the flow-on support that the sugar industry provides. I commend the bill to the House.~~

First Reading

~~Mr KNUTH (Dalrymple—KAP) (11.38 am): 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 Agriculture and Environment Committee



~~Mr DEPUTY SPEAKER (Mr Furner): Order! In accordance with standing order 131, the bill is now referred to the Agriculture and Environment Committee.~~

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HEALTH LEGISLATION (WAITING LIST INTEGRITY) AMENDMENT BILL

Introduction



Mr McARDLE (Caloundra—LNP) (11.38 am): I present a bill for an act to amend the Health Ombudsman Act 2013 and the Hospital and Health Boards Act 2011 to provide for the auditing and reporting of data relating to waiting times for patients of Hospital and Health Services. I table the bill and the explanatory notes. I nominate the Health and Ambulance Services Committee to consider the bill.

Tabled paper: Health Legislation (Waiting List Integrity) Amendment Bill 2015.

Tabled paper: Health Legislation (Waiting List Integrity) Amendment Bill 2015, explanatory notes.

This bill arises as a result of the previous Queensland government's announcement of its intention to create an independent body to audit clinical waiting times and publish this information in an open and transparent way. Independent auditing and the publishing of waiting times are aimed to provide peace of mind for patients in the Queensland health system. We want Queenslanders to see the full picture of how their hospital is performing, and now they can access more hospital data than ever before.

The objectives of the bill are: one, to establish the Health Ombudsman as the independent reviewer of the clinical waiting times for Queensland patients in the public health system; two, to ensure the Health Ombudsman manages the auditing of wait time matters in a transparent, accountable and public way; and, three, to provide certainty in clinical waiting times for Queensland public hospital patients and allay concerns as a result of being on a waiting list longer than necessary. To achieve its objectives, the bill will establish the Office of the Health Ombudsman as the independent body to review and publish waiting time data and set out its functions and powers.

The bill will also achieve its objective of establishing and monitoring the integrity of the patient clinical waiting time from specialist outpatient appointments through to treatment by: requiring the health and hospital service to provide waiting time data to the Health Ombudsman; and requiring the

Health Ombudsman to analyse and publish the data in a timely manner. I believe this approach of using the Office of the Health Ombudsman, as an existing independent statutory body, reduces the cost and time taken in establishing a new body to provide this information to Queenslanders.

To this day waiting lists and waiting to be seen have been the ultimate problem for overall patient satisfaction within the Queensland healthcare system. Waiting times for treatment continue to be a major concern. Not only does delay for treatment negatively impact upon the dignity, sense of wellbeing and frustration levels for patients, in some instances it contributes to the decreased health outcomes of those who wait longer than clinically recommended. The greatest problem is that patients often require further outpatient care as a result of being stuck on the waiting list and that ends up costing more than the actual procedure would. This does not take into account the emotional turmoil suffered by the patient and their family.

The Australian Medical Association Queensland called upon the incoming government in 2012 to increase community oversight of Queensland Health facilities by taking control of emergency department and surgical wait list reporting away from the department. This bill can achieve some of those goals. In government the LNP had been open and transparent about its performance and this bill continues our commitment in the area, giving the public even greater confidence in our public hospital system.

General practitioners would also benefit from accessing the data. This information will better enable local doctors and patients to make informed decisions on healthcare options. Properly informed, they may choose to refer patients to an appropriate hospital service with a shorter wait or consider a referral to private specialists or alternative providers in the community.

Under the LNP government Queensland Health had come a long way since the days of secrecy and hidden waiting lists under successive Labor governments. We increased the number of reporting hospitals from 27 to 61, demonstrating a wider range of reported data provided. Currently, each of the state's 16 hospital and health service boards collect uniform data for the Ombudsman to audit if he requests. The Ombudsman is empowered by this legislation to undertake inquiries and review health system activities. This bill also provides for the Ombudsman to publish this valuable data.

This bill would enable the performance of Queensland public hospitals in reducing surgical, outpatient and dental waiting lists and treating patients on time to be audited and reported on by the independent Health Ombudsman. This would deliver the guaranteed consistency and independence in wait list reporting sought by the AMAQ in its policy submissions prior to the 2012 Queensland election.

Extending the measurement and reporting of waiting times to include aspects of waiting from the point of referral to treatment for surgery and dental care is designed to better reflect patients' actual experiences and provide transparency into where critical problems exist. The bill removes politicians from the process of reporting waiting time data and places it in the hands of an independent party, the Health Ombudsman. I recommend the bill to the House.

First Reading

Mr McARDLE (Caloundra—LNP) (11.44 am): 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 Ambulance Services Committee

Mr DEPUTY SPEAKER (Mr Furner): Order! In accordance with standing order 131, the bill is now referred to the Health and Ambulance Services Committee.

~~**MATTERS OF PUBLIC INTEREST**~~

~~**Palaszczuk Labor Government**~~