


~~candidates be left, right or whatever, who they feel are going to operate transparent and accountable local government with the No. 1 priority being the elimination of fraud and corruption in local government in Queensland. Thank you. >~~

~~**Madam DEPUTY SPEAKER** (Ms Linard): The time for consideration of committee reports has expired.~~


~~<MINISTERIAL STATEMENT~~

~~Answer to Question on Notice No. 923~~

~~ **Hon. WS BYRNE** (Rockhampton—ALP) (Minister for Police, Fire and Emergency Services and Minister for Corrective Services) (4.02 pm): I rise to make a ministerial statement. I refer to question on notice 923 asked of me in October last year when I held the portfolio of Agriculture and Fisheries. In that question on notice I was asked the details of the total number of new starters administered in the agriculture and fisheries section of my then portfolio who had commenced employment over the period of June 2015 to September 2015 broken down by industrial agreement. The number of new starters, 53, 4 and 1, were tallied at 58. However, due to a technical error the figure 58 was added to those initial figures so the total was 116 provided in the answer. I wish to set the record straight and advise that the answer to the question on notice should have been 58.>~~

~~<PUBLIC HEALTH (WATER RISK MANAGEMENT) AMENDMENT BILL~~

~~Introduction~~

~~ **Hon. CR DICK** (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services) (4.03 pm <): I present a bill for an act to amend the Public Health Act 2005 for >particular purposes. I table the bill and explanatory notes and I nominate the Transportation and Utilities Committee to consider the bill.~~

~~*Tabled paper:* Public Health (Water Risk Management) Amendment Bill 2016.~~

~~*Tabled paper:* Public Health (Water Risk Management) Amendment Bill 2016, explanatory notes.~~

~~I move—~~

~~That the bill be now read a first time.~~

Outbreaks of legionnaires' disease related to hospital drinking water supplies have been widely reported worldwide. Legionnaires' disease is a severe form of pneumonia caused by legionella bacteria that can be fatal. Legionnaires' disease can be contracted by breathing in water droplets or airborne droplets that are contaminated with legionella bacteria. International consensus is that the proportion of acute infections caused by legionella bacteria that are fatal tends to be much higher for healthcare acquired infections. This may be attributable to the fact that those at highest risk are likely to spend increased time as hospital inpatients or as residents of aged-care facilities and that the complexity of the plumbing in these premises may encourage the multiplication of legionella bacteria. While legionella bacteria detections in hospital water supplies are not unusual, there have been relatively few fatal cases of hospital acquired legionellosis in Queensland hospitals.

In 2013, Queensland's Chief Health Officer, Dr Jeannette Young, investigated two cases of hospital acquired legionnaires' disease at a metropolitan private hospital. Following this investigation, the Chief Health Officer published a report that included recommendations to improve the management and control of legionella risks in hospitals and residential aged-care facilities. These recommendations included interim arrangements requiring Queensland hospitals and public residential aged-care facilities to develop and implement water quality risk management plans to address the risks associated with legionella bacteria. These arrangements have been in place since mid-2014.

The Chief Health Officer also recommended that in the longer term amendments be made to the Public Health Act 2005. In December 2015, there was a further case of legionnaires' disease at the same metropolitan hospital. This case attracted significant media interest, in part due to confusion regarding the number of positive tests for legionella bacteria the hospital had recorded during routine water sampling undertaken since 2013. Unfortunately, the Department of Health was prevented from publicly disclosing information about the hospital's water test results due to restrictions on the disclosure of information under the Private Health Facilities Act 1999.

While most hospitals are vigilant in monitoring their water supplies for legionella bacteria, I undertook to review our existing laws with the view to putting in place a comprehensive legislative framework which is more transparent and gives the public more confidence that hospitals and residential aged-care facilities are managing the risks associated with, and regularly testing their water supplies for, legionella bacteria.

The Public Health (Water Risk Management) Amendment Bill 2016 amends the Public Health Act to establish a legislative framework to improve the management and control of health risks associated with the supply and use of water in hospitals and residential aged-care facilities - in particular health risks associated with legionella bacteria - and provide for greater public transparency of water testing activities being undertaken by these facilities. This framework consolidates and expands on the interim arrangements currently in place. The bill will initially apply to public hospitals, public residential aged-care facilities and private health facilities licensed under the Private Health Facilities Act 1999. These facilities are currently captured under the interim arrangements. Implementation of the legislation in the private residential aged-care sector will be undertaken at a later date through a phased implementation process and we will be consulting closely with stakeholders as part of this process.

Water risk management plans are recognised internationally as the most effective method of managing health risks associated with water related hazards. These hazards are not just confined to microbial hazards such as legionella bacteria. Therefore, the bill requires facilities to have in place water risk management plans that address the risks associated with a range of hazards such as disease-causing micro-organisms, including legionella and chemical contaminants, and other issues such as interruptions in the supply of water. To ensure that the plans are robustly designed and considered, the bill outlines the content that a water risk management plan must contain. This has been informed by world's best practice and aligns closely with the new national guidelines for the control of legionella in health and aged-care facilities that were approved by the Australian Health Protection Principal Committee in late 2015.

To assist in ensuring the suitability and quality of water risk management plans, the bill enables the chief executive of the Department to Health to request a copy of a facility's plan and to direct the responsible person to amend the plan if required. Currently, the Public Health Act does not require persons to notify the Department of Health if legionella bacteria are detected in water samples. To address this, the bill requires the person in charge of a facility to notify the Department of Health within one business day after being notified of a test result confirming the presence of legionella bacteria. The rapid notification of legionella detections in water samples will enable the Department of Health to check that the facility has activated its water risk management plan and that it is responding to the detection of legionella. Repeated positive detections will also highlight those facilities that may be facing challenges in managing their water supplies.

032 The bill also requires facilities to provide periodic reports to the Department of Health regarding water tests undertaken for legionella in accordance with their water risk management plan, including test results. It is intended that these reports will be provided by facilities on a quarterly basis. The bill enables the data provided by facilities to be published by the Department of Health. This will give greater public transparency to the water testing for legionella being undertaken by these facilities and will give the community confidence that facilities are regularly testing their water supplies for legionella bacteria. It is intended that the department will publish the data quarterly, although circumstances may arise that necessitate more frequent reporting, for example, in response to hospital acquired cases of legionnaire's disease.

Hospitals and residential aged care facilities care for some of our most vulnerable Queenslanders. The bill provides for a range of offences relating to noncompliance with bill provisions and associated penalties ranging from \$23,560 to up to \$117,800 for the two most serious offences. The community rightly has an expectation that those facilities should proactively manage and control risks to the health of their patients and residents, and the penalties reflect the significant responsibility that hospitals and residential aged care facilities have in this regard.

The proposed amendments contained in the bill are the most stringent in Australia with regard to water risk management in hospitals and residential aged care facilities. These amendments build on current international best practice in legionella risk management in hospitals and residential aged care facilities. I commend the bill to the House. 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 Transportation and Utilities Committee

Madam DEPUTY SPEAKER (Ms Linard): Order! In accordance with standing order 131, the bill is now referred to the Transportation and Utilities Committee.

Portfolio Committee, Reporting Date

 **Hon. CR DICK** (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services) (4.11 pm), by leave, without notice: I move—

That under the provisions of standing order 136, the Transportation and Utilities Committee reports to the House on the Public Health (Water Risk Management) Amendment Bill by 12 May 2016.

Question put—That the motion be agreed to.


Motion agreed to. >

~~PLUMBING AND DRAINAGE AND OTHER LEGISLATION AMENDMENT BILL~~

~~Second Reading~~

~~Resumed from 17 March (see p. 808), on motion of Mr de Brenni—~~

~~That the bill be now read a second time.~~

 ~~<Hon. SJ HINCHLIFFE~~ (Sandgate—ALP) (Minister for Transport and the Commonwealth Games) (4.12 pm), continuing: ~~<As I was saying before the debate was adjourned yesterday evening>, the position of assistant commissioner is simply a re-creation of the previous position, which was then known as the plumbing industry council registrar. I understand that, in his letter to the chair of the Transportation and Utilities Committee, the member for Redlands expressed some concerns around this matter. I believe that those issues have been addressed as the costs will be met within the Queensland Building and Construction Commission. The creation of this position recognises the fact that in Queensland the building and construction industry is worth billions of dollars and supports tens of thousands of jobs. That means that the unique role and identity of plumbing is not lost. Indeed, as recently as yesterday the Master Plumbers Association of Queensland reiterated its support for this position. The committee received no submissions supporting the view that there is a concern or problem with the creation of the position of an assistant commissioner. I note that, in March last year when consultation began on the establishment of the council, nine submissions were received and all of those submissions supported a dedicated plumbing regulatory body.~~

~~This bill highlights the Palaszczuk government's commitment to the service trades of plumbing, fire protection, and air heating and cooling. The government recognises that the plumbing licensing system must stay strong. I applaud the government's work to ensure that representatives from local government are included on the council, one representative from the Local Government Association of Queensland and one from the Institute for Plumbing Inspectors. That will ensure that local government is given a strong voice.~~

~~Maximising policy outcomes that benefit Queenslanders and industry would not be possible without stakeholders. I know that a number of stakeholders provided a lot of assistance, advice and input into the creation of this bill, such as Penny Cornagh, the Executive Director of the Master Plumbers Association; Gary O'Halloran, the State Secretary of the Plumbers Unions; Wayne Smith, the Executive Director of the National Fire Industry Association; Graham MacKrill, the Executive Director of the Air Conditioning & Mechanical Contractors' Association; and Glen Chatterton, the Operations Manager of Services Trades Queensland.~~

~~I thank those stakeholders for their willingness to put in time and effort to work on the creation of the council and lend their expertise to assist in the assessment of technical and complex licensing applications, such as those from overseas, to ensure that the standards that Queenslanders expect are maintained. That is what they are doing by making sure that this council is in place. As I was alluding to late yesterday, when I was the minister responsible for plumbing in Queensland I had the opportunity to work with some of those people. It is great to see that they remain consistently connected and committed to ensuring that there is proper and appropriate regulation in the plumbing and drainage industry in this state.~~