



Submission to

Health and Environment Committee

Public Health and Other Legislation (Extension of Expiring Provisions) Amendment Bill 2020

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submission

Introduction

The Queensland Nurses and Midwives' Union (QNMU) thanks the Health and Environment Committee (the 'Committee') for the opportunity to comment on the *Public Health and Other Legislation (Extension of Expiring Provisions) Amendment Bill 2020* (the 'Bill').

Nursing and midwifery is the largest occupational group in Queensland Health (QH) and one of the largest across the Queensland government. The QNMU is the principal health union in Queensland covering all classifications of workers that make up the nursing and midwifery workforce including registered nurses (RN), midwives (RM), nurse practitioners (NP) enrolled nurses (EN) and assistants in nursing (AIN) who are employed in the public, private and not-for-profit health sectors including aged care.

Our 64,000 members work across a variety of settings from single person operations to large health and non-health institutions, and in a full range of classifications from entry level trainees to senior management. The vast majority of nurses in Queensland are members of the QNMU.

The QNMU commends the Queensland Government's response to the COVID-19 pandemic and continuing commitment to the wellbeing, health and safety of Queenslanders. The authority and powers of the Chief Health Officer and emergency officers during this state of emergency warrant a comprehensive review to balance the restrictions on freedoms imposed by Public Health Directions related to the COVID-19 response and the benefits to public safety.

The QNMU supports the Bill however would like to raise areas of concern for the Committee's consideration.

Regarding the Public Health Act amendments

1. Staffing resources across border towns and jurisdictions

Healthcare workers working across both public and private sectors (including aged care and disability care workers) who work across border towns and state jurisdictions must be given the same consideration as emergency workers as they move in and out of identified hotspots. Our members have reported difficulties attending their place of work due to restrictions in movement for those not within border bubbles, potentially leading to staffing issues and delays in patient access to healthcare.

Affected healthcare workers who are involved in the provision of healthcare should have special consideration to attend their workplaces. Any restrictions in movement across hotspots as determined by public health directions must therefore have careful regard not to exacerbate staffing issues. Moreover, transport and/or accommodation considerations for healthcare workers may be beneficial in ensuring hotspots are adequately staffed.

2. Early evaluation of the COVID-19 pandemic response

The evaluation processes of the Queensland Government's response to the COVID-19 pandemic must be ongoing throughout the pandemic. This includes incorporating lessons learned across other jurisdictions to inform the current response, future planning and regular testing and evaluation of preparedness and stand-up processes.

A key role of ongoing evaluation should be to review the expiry date of these Amendments once an agreed percentage of community COVID-19 vaccination has been achieved.

3. Rural and remote communities

In the event that a rural or remote community expresses the desire to isolate for the purposes of infection prevention and control, and prevent non-local individuals from entering the community, provisions should be available under the Public Health Act amendments to enable and enforce this.

4. Hotel quarantine

The standard of living and healthcare for individuals in hotel quarantine must be of an appropriately high standard and with regard to maintaining their dignity and human rights. The QNMU has previously voiced concerns regarding the conditions in hotel quarantine to the Chief Health Officer on 6/11/2020 and 10/12/2020, including:

- Ensuring the training and qualification of healthcare staff enables a comparable standard of healthcare is afforded to those in hotel quarantine as would be available in the public health system.
- Access to fresh air, adequate and diverse nutrition, and reasonable access to goods and services outside of hotel quarantine.
- Proactively addressing the mental health and wellbeing of individuals in hotel quarantine by ensuring appropriately training of hotel staff, law enforcement officers, and healthcare staff, on identifying and responding to mental health concerns.
- Cultural safety training for healthcare workers, as distinct from current policies for cultural awareness training.

Regarding the Mental Health Act amendments

The QNMU commends the consideration given to the challenges associated with enforcing social distancing and infection prevention and control measures in mental health wards. Our members report that the measures have been applied to mental health wards with minimal disruption to the provision of care and treatment.

Regarding community-based mental health services, the QNMU suggests the following considerations:

1. Bolstering existing community mental health services

In response to documented and anticipated increases in the demand for mental health services as a consequence of the COVID-19 pandemic, capacity in existing public community mental health services must be urgently addressed. This includes:

- Permanent increases in staffing numbers of community mental health clinicians to meet current and projected demands.
- Reduction of existing clinician caseload numbers to address staff workload concerns.

2. Specialised COVID-19 community mental health response team

The QNMU proposes consideration of establishing specialised COVID-19 community mental health response teams to address the needs of individuals who have tested positive to COVID-19 and/or have been required to self-isolate due to an infection transmission risk, when they otherwise would have met the criteria for admission. This would reduce the risk of infection transmission in mental health inpatient wards while

providing highly specialised mental health care and treatment in an environment that complies with public health directions around infection prevention and control.