



Speech by

DESLEY BOYLE

MEMBER FOR CAIRNS

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NORTH QUEENSLAND CLINICAL SCHOOL

Ms BOYLE (Cairns—ALP) (11.40 p.m.): I rise tonight to talk about some representations that I have received in Cairns from several doctors about an issue which, as it happens, is one that historically I know well. It is about the continuation of the North Queensland Clinical School, which is a shared graduate medical school—shared between Townsville and Cairns—auspiced by the University of Queensland and supported by the Townsville General Hospital, the Cairns Hospital and, to an extent, the James Cook University.

The clinical school commenced some four years ago, and it has brought to the far north certain benefits which are presently at risk. The benefits that it has brought are considerable in terms of medical students—graduate students with degrees in other areas who have, however, a particular interest in rural and remote health, in public health, in women's health and in indigenous health. It has brought to the region highly qualified medical practitioners and professors. It has lifted the possibilities within the region as well as the opportunities for high-level education experiences. As time passes, that will be of considerable economic benefit to Cairns.

I know the story well, as I was chair of the Regional Health Authority when we put the deal together with Townsville and the University of Queensland. It was for Cairns—as it frequently is with new facilities—a battle to make it happen. It was innovative in sharing campuses between the two cities. It was innovative in the way in which students would be encouraged from Brisbane to study further in the north. It was innovative in that the School of Obstetrics and Gynaecology was renamed Women's Health to take account of broader issues, particularly to do with indigenous women in Cape York and the Torres Strait Islands.

It was decided that, in Cairns, we should host three of those professorial units: women's health, children's health and public health. Over the past several years, we have progressed more slowly than we would have liked but progressed nonetheless. From that we have seen a greater willingness not only of residents and medical students to come to the region but also of registrars. That is, of course, a continuing problem for regional cities, let alone remote areas across northern Australia. In that way it is working. We have seen an increase in studies for a masters degree in public health. We have seen recognition across the Pacific, and even into Asia, of the Tropical Public Health Unit and the innovations undertaken with our associate professors in the area of public health.

To that extent I want to recognise those who have worked so hard, though so quietly, to get us to this point. They are the Associate Professors in Public Health, Ernest Hunter and Mary Black, the Associate Professor of Women's Health, Michael Humphry, and Dr Ross Messer, a paediatrician who has filled the still formally vacant post of Director of Paediatrics. It is, however, a time when it may well be an idea of importance for Townsville to consider—and for the James Cook University. Discussions are being held about establishing an undergraduate medical school in Townsville auspiced by the James Cook University.

The representations that have been made to me—and I share their concern—are that there are not the numbers of students to sustain two medical schools in north Queensland and that it will become accidentally a choice between one or the other. It is possible, therefore, if I do not alert this House and all members concerned with health in north Queensland that the clinical school for which we have fought so hard could be downgraded or even closed and that the successes that we have had in

establishing more and better medical services to remote and rural Queensland, to indigenous people and in the area of public health could be lost to us. A graduate medical school such as we have already is the way of the future. To turn back the clock towards an undergraduate medical school would be a mistake—a drain on Queensland Health's precious funds, I dare say, as well as a definite mistake for Cairns.

Time expired.
