



Speech by

**LINDA LAVARCH**

**STATE MEMBER FOR KURWONGBAH**

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Hansard 16 September 1998

### **CENSURE OF MINISTER FOR HEALTH**

**Mrs LAVARCH** (Kurwongbah—ALP) (6.29 p.m.): I oppose the motion that was moved by the honourable member for Maroochydore and I support the amendment that was moved by the Honourable Minister. The last thing we should be considering is censuring the Minister. We should all be celebrating and commending her for her open and honest approach to the Health portfolio—a most refreshing change.

This Labor Government is about delivering quality health services to people no matter where they live. That is what this whole issue has been about. I refer to intensive care, which is one of the key services that is at the heart of this issue and a service that has always been guaranteed by this Minister and by this Government. Let us put aside the hysteria and look at the facts. Queensland Health has a number of expert clinical advisory panels, made up of representatives of the medicine, nursing and related professions, which have been established to pursue planning and the definition of services in specialised areas such as cancer services, advanced kidney disease and emergency services. The recommendations of these panels are taken into consideration when delineating the various levels of care, either primary, secondary or tertiary, to be provided at Queensland hospitals.

Such a specialist advisory panel has been established for intensive care services. This panel works with the Australian and New Zealand College of Anaesthetists, which has published a set of minimum standards for intensive care units to determine their applicability in the various hospitals in Queensland, such as in the Fraser Coast district. These standards include such important issues as the level of training of staff needed to work in intensive care units and the number of patients treated in the units of various levels of complexity. These numbers are needed to maintain the critical mass of staff and backup equipment and resources to ensure clinical efficiency. That means quality medical care—the sort of quality that those opposite would want for themselves and their families and for their constituents and their families. To date, all of those matters have been taken into consideration when decisions have been made in relation to intensive care and other hospital services in the Maryborough and Hervey Bay districts.

An intensive care unit—an ICU—is an especially staffed and equipped, separate and self-contained section of a hospital for the management of patients with life-threatening or potentially life-threatening conditions. Such conditions should be compatible with recovery and have the potential for an acceptable future quality of life. An ICU provides special expertise and facilities for the support of vital functions and utilises the skills of medical, nursing and other staff experienced in the management of these problems.

Levels of intensive care range from Level 2 to Level 6. Level 2 can be just a recovery area for post-operative patients or a high-dependency area for general ward patients. Level 6 provides the highest level of care, including complex multisystem life support for an indefinite period. A Level 6 unit should have more than 350 mechanically ventilated patients per annum.

I refer members to an article in Tuesday's Courier-Mail which referred to a report from this panel about intensive care services. This 18-member independent committee of experts has recommended that intensive care services at Bundaberg, Maryborough and Hervey Bay be rationalised. Why? According to the Courier-Mail source, it was "clearly ridiculous" and "not realistic" for three small intensive care units to operate in the region. The Courier-Mail's source said that "by joining forces" the

region could have a superior intensive care unit with a full-time specialist within a year. The report highlights the Fraser Coast as the most obvious area in need of rationalisation.

This report, nearing completion, was not initiated by Minister Edmond but former Minister Horan. Was he planning to take the panel's advice? This panel includes most of the senior specialist intensivists and representatives from senior intensive care nursing circles. This advice is consistent with the medical and technical advice that this Government received and initially followed.

However, the people of Maryborough spoke and we listened. This Government will not be taking the panel's advice. Tonight, the Minister has advised us that, thanks to the ongoing talks with staff, their unions and Queensland Health, the safety and quality standards are being addressed. In fact, the staff are ready to work across the district to maintain their skills and the level of patient care that the people of Maryborough and Hervey Bay deserve. The Minister has advised that the staff have agreed to more flexible working arrangements.

Time expired.

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