

Speech by

Mr. R. CONNOR

MEMBER FOR NERANG

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ADDRESS IN REPLY

Mr CONNOR (Nerang—LP) (12.49 p.m.): My speech will be in two parts. The first part relates to what I believe is the worst case of maladministration and incompetence that I have seen in the nearly nine years that I have been in this House. According to hospital records, on 8 January this year a constituent of mine by the name of Mr Willox visited the Gold Coast Hospital. On 14 January he received a letter stating that he had been placed on a Category 3 waiting list, but he had never had any assessment. His GP had given him a referral to go to the Gold Coast Hospital, but he was never assessed. He never saw any of the medical staff; he saw only a receptionist. That in turn put him on a Category 3 waiting list, as I said, without assessment. Shortly afterwards, he was rushed into emergency surgery with a life-threatening condition.

I would like to quote from a letter that Mr Willox sent to me on 19 January, less than a week after he was admitted to hospital as a result of this problem. It states—

"I went to see my G.P. regarding some pain in my lower abdomen ... and gave me a letter to the Surgical Outpatients Dept. at the Gold Coast Hospital.

I telephoned for an appointment and was told that I would have to go to the hospital as the surgeons like to see the letter from the G.P.

I delivered the letter to the department which was empty save the receptionist. She took the letter and ... told that after the surgeons had seen the letter, they would send me a letter, with-in three to five days giving me an appointment.

One week later, I received a letter, copy enclosed, telling me that my operation was not urgent and no appointment could be given at this time.

This is without any examination at all and after a referral from my Doctor who tells me that I need a major operation."

The letter that he had received back from the Gold Coast Hospital was also attached. Upon receipt of his letter, I immediately sent a letter to the then Minister for Health, Mr Horan, and three weeks later I received a reply. Two weeks after I had referred the matter to the then Minister, Mr Willox's condition deteriorated and he underwent surgery after obtaining from his doctor another referral to the Emergency Surgery Department. A couple of weeks later, Mr Willox wrote to me thanking the medical staff. I should put on the record right now that at no stage has either Mr Willox or I been critical in any way, shape or form of the surgical or medical staff at the Gold Coast Hospital—quite the contrary. The way in which he was treated and the courtesy and the professionalism shown by those staff members can only be commended.

The fact of the matter is that, a couple of weeks after Mr Willox underwent emergency surgery, he wrote to me thanking the medical staff at the hospital but also pointing out that the original assessment had been made without an examination. On 11 March, almost a month after I had referred the matter to the Minister, he replied and advised that the categorisation of patients on elective surgery waiting lists is determined by the treating specialist. But that was not the case and it was clearly pointed out that Mr Willox saw only the receptionist.

On 31 March, two weeks or so after I received the Minister's reply, Mr Willox through my electorate office replied again pointing out that he was assessed without being examined by a doctor at

all. On 28 April, about a month later, again the Minister replied that the matter had been investigated by the Gold Coast Hospital and that the referral letter from the GP may not have indicated that his condition was of an urgent nature. All of a sudden that meant that this referral letter from Mr Willox's doctor was the key to the whole issue— whether or not the doctor had made it clear that this was of only a minor nature. We then needed to get hold of this document as the Minister was not aware of its details.

On 5 May my office independently arranged for a freedom of information form for Mr Willox to obtain his records, which he submitted to the hospital. On 29 June—after the election—Mr Willox advised me that he had obtained his records except for his GP's referral letter which could not be found. This is a life threatening issue that is all about maladministration of the first order; but, more than that, it involves a cover-up. This document could not be found and it was the crux of this whole issue. On 30 June I wrote to the new Minister for Health asking for an investigation into what has happened to this document.

In the meantime, as a result of that FOI request, on 16 July we managed to get a copy of the referral letter from the Gold Coast Hospital. That referral from Dr David Caldwell, who is Mr Willox's GP, says—

"Dear Sir,

Kindly assess Fred Willox ... You have his medical history."

That is what it says. Quite clearly, this document does not suggest either way that he was of an urgent or a minor nature; it merely stated that the doctor wanted Mr Willox to be assessed. But, more importantly, it shows quite clearly at the top that this is one of the Gold Coast Hospital's own documents. It clearly shows when it was received. It is on the hospital's letterhead; it is an official Gold Coast Hospital document. I table all the relevant documents related to this matter.

Then the new Minister, Wendy Edmond, replied to my letters. That letter says—

"As Mr Willox was waiting to attend the Specialist Outpatient Clinic, the referral letter from his general practitioner was not incorporated into his medical record at the time of the Administrative Access request."

There it is. That quite clearly shows that the referral letter was there. It was attached to his documents. Unbeknown to the Minister or the senior ministerial staff, it was attached to his file at the time. Quite clearly, this Minister and the previous Minister have been misled by administrative staff. I might add that that has caused the Minister in question to mislead me in an official ministerial response. The Minister's letter further states—

"The Specialist Outpatient Clinic has been asked to forward a copy of the referral letter from Mr Willox's general practitioner directly to him."

That is the second referral letter, not the first one. It goes on-

"All referral letters are assessed by the Senior Medical Staff of the appropriate Specialist Outpatient Clinic."

If that was the case, why was Mr Willox not assessed when the referral quite clearly says that he should be assessed and that the hospital holds the records? The letter goes on—

"Based on the clinical information provided by the general practitioner, the Senior Medical Staff triage the referral letters into a clinical priority order."

But they did not even see him. The only person whom Mr Willox saw was the receptionist. The letter further states—

"Based on the clinical information outlined in Mr Willox's referral letter, he was classified as a Specialist Outpatient Category 3, indicating a condition of a non urgent nature."

Clearly, that could not have been the case because his GP had asked for an assessment. The letter continues—

"Both the patient and referring general practitioner are advised of this process and the available options."

That is also not true. It goes on—

"Mr Willox was advised to return to his general practitioner should his condition deteriorate."

That is also not true. The letter that was sent says nothing of the type. It purely says that Mr Willox has been put on the Category 3 waiting list and that he will be contacted at some time in the future.

Mr Willox's GP asked the Gold Coast Hospital that he be assessed. He was put on the Category 3 waiting list without being examined. When he tried to obtain a copy of the referral, he was notified that it had been lost. Unbeknown to the new Minister, that letter was produced on an FOI request and it

showed quite clearly that he was treated abominably. He was put on a waiting list without being assessed. On top of that, the Minister has misled me in her reply. She has been misled, although I am not suggesting for one moment that she actively went about trying to mislead me. I have tabled the documents. Both Ministers have been misled. As far as I am concerned, there needs to be a proper inquiry into this matter. I now move on to my second matter.

Sitting suspended from 1 p.m. to 2.30 p.m.

Mr CONNOR: Before I move onto the second matter that I wish to raise, I would like to summarise some of the points that I made earlier. Mr Willox was sent to the Gold Coast Hospital for assessment. He was not diagnosed. The documents that I tabled earlier show that quite clearly. However, no assessment occurred at the Gold Coast. Mr Willox simply saw the receptionist. The administration staff, without any involvement of the medical staff, categorised him as a 3. No doctor saw him. He was then informed in writing that he should simply wait. Shortly afterwards, as a result of his surgery being postponed, he was admitted to emergency surgery.

The previous Minister was asked to investigate this matter. Mr Willox's referral letter, the key point to this whole matter, was lost. Unbeknown to the administration staff in Brisbane, the referral letter showed quite clearly that Mr Willox was not assessed. This letter forms part of the official documentation.

The Minister was misled into believing that the referral letter was not with his file. In turn, the Minister misled me in a ministerial letter. Clearly, there was a major stuff-up which could have cost Mr Willox his life. There was an active attempt to cover up the loss of the referral letter and then there was the denial of its existence in the file. All of the documents quite clearly prove this. Mr Willox lived. What would have happened had Mr Willox not lived? What long-term or short-term damage has been occasioned to Mr Willox? Not only has there been massive maladministration, there has also been an active attempt at a cover-up. Who was responsible?

I am not suggesting for a moment that the current Minister is responsible. However, she is the Minister, and it is up to her to order an investigation to get to the bottom of this matter. A full inquiry is required to ensure that this does not happen again and that official records are not falsified. We must ensure that Ministers are not misled and that they, in turn, do not mislead Parliament. If I do not receive an indication that this matter has been properly investigated and appropriate action taken, I will take it further

I would like to put on record my thanks to the people of the Nerang electorate for electing me to this Parliament for the fourth time. It is a great honour to represent the best electorate in Queensland. I record also my great regard for the Governor.

In Australia we do not recognise many of the skills that already exist in society. We do not recognise skills that have been gained in the workplace. Often these skills are considerably more valuable and practical than those that are learnt behind a desk in a classroom. People do not have the badge, the document or the certificate that verifies that they have this particular skill or understanding. Unlike many countries with much greater populations, Australia has a greater need for skills development in a workplace environment. Necessity is the mother of invention in this regard because often there is no school to go to and one cannot become specialised, especially in regional parts of Australia.

American or European counterparts may be experienced in doing only one small activity in a workplace environment. However, often in Australia, with smaller business sizes and more diversified requirements, a much greater scope of skills is required. These, however, are not recognised. Workers have no certificate or other documentation in many cases. Often in the past, people have been recognised by where they have worked and what they have done in that particular workplace rather than for their trade or professional qualifications. Many of these same people feel that it would be a waste of time to gain further education because they would have to start from scratch. They do not have any accreditation for what they already know. They do not understand the academic system and so they do not embark on further education at all.

Often the classroom is so foreign and so poorly remembered as a result of bad experiences in their youth that most of the Australian population will not go near an educational institution. This brings me to the thought that perhaps we should bring the educational institution to the worker. It also brings me to the conclusion that we should look very closely at having a comprehensive way of recognising the skills and capabilities of workers who have gained their skills and capabilities experientially in the workplace or from personal readings and the like. This should also be closely looked at in the current environment of globalisation and competition reform—the so-called economic rationalism approach.

As the workplace must become more competitive and flexible, so too does the worker have to move around more and have less stability and security in his employment. Australian tradition recognises the experience of a worker within a particular workplace, but often that experience is not recognised between workplaces. In his existing workplace one intrinsically knows that Joe, for instance,

is capable of doing X, Y and Z, but we find that when Joe moves to another workplace in a slightly different industry he will have nothing to prove that he is capable of doing X, Y and Z. Further, when he looks for employment in the new workplace, Joe will have no proof that he is capable of doing X, Y and Z. He has no certificate, diploma or degree and no security of qualification or capability. He has nothing to prove to the employer that he is capable of doing whatever is required.

This reminds me of an old mate who, through years of working for himself in commercial refrigeration, became a virtual encyclopaedia of the commercial refrigeration industry. At age 50, he had 25 years or more of vast experience in a diversity of different areas within the commercial refrigeration industry, yet he would not have been employable within many workplaces, and especially not Government workplaces, because he did not have any formal qualifications. Having been brought up during the Depression, he left school early and did not have the formal schooling that one would have normally expected. Even so, he was so well regarded in his knowledge of the industry that many long-term qualified refrigeration experts would contact him regularly for advice on particularly difficult situations.

If one suggested to him that he should go to a classroom to get a ticket in commercial refrigeration, he would recoil in fear of his previous experiences in school 35 years earlier. However, if some form of accreditation was designed where a simple oral test could be devised and implemented in the workplace and where a set of competencies could be judged, I have no doubt that he would have easily shown his superior competence. Once he had a certificate which was widely recognised, he would be able to move freely around different workplaces and would become far more employable.

This brings us to the question of how many people in Australia have these skills but do not have the credentials to prove their skills. How many people fear economic restructuring because it will displace them from the place where their skills are recognised and move them to areas where they are not? This brings us to the question of whether or not there should be a comprehensive skills audit throughout the Australian economy and whether an appropriate accreditation can be granted to those who have these skills. When that accreditation is granted, a comprehensive analysis of the potential career paths of those individuals could be established and provided to the individual who could take advantage of further education—preferably in the workplace and at a level that they have already attained, and not going back to scratch and not without recognition of their current capabilities and skills.

Workers would be more interested in industry competition and flexibility if they had a diploma, degree or certificate of recognition of their skills and capabilities and if it was readily recognised from workplace to workplace and industry to industry. Workers would have much to gain from this new-found flexibility within the economy, because there is then an opportunity for their particular skills to be cranked up. How often do we see this massive lack of tradesmen and lack of skills that are stifling industry?