



Speech by  
**Mr DENVER  
BEANLAND**

**MEMBER FOR INDOOROOPIILLY**

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Hansard 18 August 1999

**TRANSPLANTATION AND ANATOMY AMENDMENT BILL**

**Mr BEANLAND** (Indooroopilly—Labor Party) (9.39 p.m.): I join with other members of the Chamber in supporting the concept of increased organ donations. This is a very complex issue, as was highlighted by report No. 16 of the Legal, Constitutional and Administrative Review Committee, released in July this year, which reviewed the Transplantation and Anatomy Amendment Bill 1998.

The report follows an intensive and extensive investigation, as many members of the House would be fully aware. That study took in not only Queensland but other Australian States, New Zealand and a number of other countries. The committee members and the committee staff in particular should be commended. I place on record my thanks to the committee staff who have contributed so much to this very detailed report. I congratulate our research director, Kerryn Newton, principal research officer, David Thannhauser, and executive assistant, Tania Jackman, on a job well done indeed.

The report highlights the fact that the process of organ donation does need a great deal of attention. Of course, we are waiting for the Government to bring forward legislation in relation to this matter, but there has been no indication from the Government or the Minister of when that might be. Legislation would involve not only the Minister for Health, who would be the primary Minister involved in the matter, but would also involve the Minister for Transport and the Minister for Justice.

The Minister for Transport's area of responsibility relates to drivers' licences, a subject which is given good coverage in the report. As the report indicates, a driver's licence is a very useful guide. It certainly gives us an idea of people's attitudes to organ donation. However, a driver's licence cannot indicate whether or not a person has changed their mind about donating their organs since first ticking the box on the licence. Secondly, I impress upon members that it does not indicate whether or not an informed decision-making process was undertaken. We all know how people can make a decision without knowing the full ramifications of that decision. As I introduced the Powers of Attorney Bill which provided for advance health directives, I am very familiar with that difficulty. One must ensure that, when one ticks boxes relating to one's health and other medical matters, one makes an informed decision.

Members would be most surprised to learn that currently the data from a driver's licence is not available to hospital staff. In fact, it simply goes nowhere. It sits up in that magnificent building in Springwood, although I am not sure where the computers and machinery are located these days. The information sits there; it does not go anywhere.

This is not a matter that requires a great deal of legislative attention. I am sure that the Minister for Transport could quickly sit down with the Minister for Health and finalise aspects of the legislation to rectify this problem. However, we have had no indication from those Ministers as to what might occur in this regard. I mention that because I am concerned that it might sit around and sit around and sit around for another 12 months or two years or three years. That is simply not justified and, of course, is totally unnecessary. It might require a Minister to work a night or two and perhaps the parliamentary draftsman would have to put in an extra hour or two, but the issue of drivers' licences is not complex within itself. It is a very straightforward issue.

The Minister for Justice's area of responsibility relates to powers of attorney and advance health directives. Of course, informed decision making already takes place in relation to advance health

directives. A small area simply needs to be set aside on the form so that a person can fill in the necessary details. Of course, organs, tissues and a whole range of matters need to be covered. That can easily be done because an advance health directive must also be signed by a doctor to indicate that the person understands the decision that they are making. In other words, it is an informed decision-making process, which is terribly important.

As a couple of other speakers have mentioned, it is important that we look at where, when, how and why a potential donor died. The death must occur within or near a hospital, preferably in an intensive care unit, to ensure that the appropriate facilities are available for the donation process to occur. One cannot remove a person's organs two or three days after they have died. That simply would not work, as I am sure members are aware. The age of a donor is very important, as is how they died. Most donors tend to be the victims of car accidents, because generally they are young and healthy. That raises another issue, which I think is covered in the report. The lowering of the death toll on our roads has an impact on organ donations. We should not lose sight of the fact that, whilst we are continually going through the very worthwhile process of lowering the road toll, that does effect organ transplants.

Those are all very important issues to be taken into account when considering the matter of organ donations. Those who have taken the time to read the report of the Legal, Constitutional and Administrative Review Committee will know that those problems are highlighted throughout the report.

As I mentioned, the Minister for Health has the prime responsibility for this area, and a number of amendments need to be made to the legislation dealing with organ donations. Those amendments are set out in the summary of recommendations in the front of the report. A recommendation is made for an organ donor advocate to further develop and promote education and awareness strategies regarding organ donation in the Queensland community. That is particularly important, because whatever process we put in place we are going to need an education strategy. Indeed, it is probably one of the most important aspects of the whole report, because one needs a community relations officer who will get across to the public the message of exactly what needs to occur and how the process needs to be implemented. I do not necessarily mean a PR person. The subject is extremely complex and sensitive, and would not benefit from a sales-pitch approach. We need someone who really has a feel for the issue and knows how to relate to it. I think that is a very worthwhile proposal. I strongly commend it to the Minister for Health, together with the other recommendations.

Of course, there is also the recommendation relating to the Queensland Health's attempt to ascertain the viability of the Australians Donate proposal to establish a national donor database. As is highlighted in the report, an exchange of organ parts occurs not only around Australia but also across the Tasman with New Zealand. That occurs where an appropriate organ match can be found. That highlights the need to quickly marry up the organ donor with the recipient of the organ.

The letter to the committee, dated 2 August, which was tabled by its chairman—something for which I thank him—from Australians Donate highlighted the work that has gone into the report. The committee and in particular its staff have put a lot of work into the report. They should be very proud of the report.

We need to keep this issue rolling. It is too easy for matters to fall by the wayside. This week legislation was brought into this Chamber very rapidly. I believe that these changes to the legislation can be made very quickly. The groundwork has been done. A Bill could be put together in a week or two and introduced into and passed by the Parliament. Indeed, as has been proposed, amendments could be made to the Bill we are currently debating so that those changes could be effected.

I note that someone has distributed a newspaper article highlighting an organ donor's plight. I do not know the circumstances surrounding this case. For everyone in this heartbreaking position it is a case of life and death. Our heart goes out to those people. However, there is a whole host of issues. It is not just a case of simply lining up someone for a transplant. Organs have to be married up and someone of the right age and in the right location has to be found before a transplant can take place.

In conclusion, I am looking forward to the three Ministers working rapidly on the amendments to their legislation. I believe that the Minister for Health could have brought in some amendments to the Bill we are debating tonight. I am very fearful that, if this legislation is not amended and passed this evening, we will not hear anything for 12 months or even two years. That would simply not be good enough. I believe the relevant Ministers would hold the committee's work and the Parliament in contempt if they were to take that line. We could introduce legislation very rapidly into the Parliament and move on from there.

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