



Speech by

Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

Hansard 9 March 1999

HEALTH PORTFOLIO

Miss SIMPSON (Maroochydore—NPA) (6 p.m.): I move—

"That this House notes with concern the massive \$50m budget blow-out hitting Queensland's public hospitals which is resulting in severe cuts to patient services, the closure of hospital beds and a blowout in waiting lists, and condemns the Health Minister's gross mismanagement of the health system and her disgraceful attack on the dedicated senior staff who work in our hospitals."

The cracks in the edifice of the do-nothing Beattie Labor Government are widening. Apparently, it is the Premier's decision to do nothing about an unrepentant Health Minister, whom he continues to defend. Something is desperately wrong with a Government that allows a senior Minister—Health Minister Wendy Edmond—to go unchastised for abusing patients and staff for problems within the State's hospitals. Never has a State Government had so much Federal funding for hospitals—a record amount of funding—but already we have seen semi-urgent wait times nearly double under this Government.

I am absolutely appalled that this Minister is so desperate to cover up the problems in the hospitals that she would slander a man who presented for treatment at the Gold Coast Hospital with a slashed arm and had to wait 28 hours for surgery. This is a real person who has suffered because of the breakdown in the health system. The Minister has lost the plot by failing to see the impact on a young man who may not regain the full use of his arm. The Minister fails to acknowledge the unacceptability of such an extremely long delay for surgery in emergency circumstances.

Yesterday at Toowoomba, the Minister sacked the hospital's top executive and announced an "administrative restructure", which is a pseudonym for a massacre. Once again, when a hospital is in trouble, her answer is to look for scapegoats. She sacks the executive team and then does not announce any additional funding for that hospital, which is servicing a major region. I say to the Minister: your Government spent an extra \$8m to run the Premier's Department in one quarter than Premier Borbidge, but you cannot seem to find the money for Toowoomba and other hospitals around the State. I think you and your Government have got your priorities wrong. The Beattie do-nothing Government is all about doing fancy PR rather than the hard yakka in delivering in such key service areas as health. You are simply not up to the task.

After the Toowoomba massacre, there will be a lot of other hospital administrations and their staff who will be shaking in their shoes. Aside from the executive staff, how many other staff at Toowoomba will be sacked, and how many full-time positions will covertly not be advertised, with a growing legion of casuals left wondering about their job security? And what about the other hospitals? The Royal Brisbane Hospital has a \$14m budget overrun. I understand that that hospital also has about 30 closed beds, despite running near capacity, and it is also not filling permanent positions under this Minister. Will Dr John Menzies, the district director, be the next to fall under the poisoned sword of this Government? What about the Prince Charles Hospital, which is \$1.8m over budget? And what about those other highly efficient teams at the Caboolture and Redcliffe Hospitals and the Nambour Hospital which, respectively, are struggling with a \$2m and a \$2.5m budget blow-out? What will they be thinking after the Toowoomba episode?

Then there is the Bundaberg Hospital and its \$1m budget blow-out. I acknowledge that the Minister tripped along to Bundaberg the other day and gave the hospital a million-dollar bail-out

package, but she has not promised the same again next year. The highly respected medical superintendent at that hospital has recently resigned, and that hospital has also seen nearly a doubling of the percentage of semi-urgent long waits for surgery since Health Minister Edmond took the helm. It is another hospital that has had a downgrade in hospital services with the closure of the general outpatients clinic. And in case the Minister had forgotten—the Minister approved this closure, just like the bed closures at the Nambour Hospital. But she could not remember doing so when she visited Bundaberg. I will come back to her memory problems later.

Altogether, there is about \$50m in budget overruns in the Health Department at this moment. I have listed just a few of the hospitals that are struggling because of the cutbacks to elective surgery funding alone. All this is at a time when the State Government has received a record amount of money from the Federal Government for hospitals and surgery. There is an extra \$1.3 billion available to this Government that was not available to the coalition Government. There is also \$103m in windfall funding that came because Queensland signed early. That agreement also meant that Queensland would get a share of any bigger offers if other States subsequently were offered more—as they were. That is the best Medicare deal a State Government in Queensland has seen. Yet this Government, right at the start of a five-year Australian Health Care Agreement, still cannot manage the budget. It still cannot maintain the budget. It still cannot maintain the coalition's trend for falling wait times for elective surgery, nor can it show a bit of compassion for people who are suffering as a result.

We also saw in the Parliament this morning another example of the Minister's lack of compassion and grasp of her portfolio. I am happy to give the Minister the details of the young couple who wrote to me about the tragic loss of their unborn child and the compounding of their grief through the treatment they received at the Royal Women's Hospital. The mother had suffered the grief of losing a baby, but she was forced to endure five hours of bleeding and severe pain while waiting for a medical specialist to remove the placenta. This couple very strongly wished this issue to be brought to the attention of the Minister and gave me their approval for the matter to be raised in the Parliament. They also wanted to clearly make it known that they were not criticising the staff; they only had praise for the hospital staff who, despite the work pressures they were under, treated them compassionately. The problem, this couple said, was a lack of staff. Once again, the Minister, in her answer to a question on this issue, showed her complete lack of compassion or ability to understand that these are the real concerns of real people.

If there is any doubt that this Minister has made a habit of attacking staff when the going gets tough, do not forget the incident with Dr Matthew Scott-Young on the Gold Coast—a well-respected surgeon who resigned because of the difficulties that the Gold Coast Hospital was having in getting adequate funding. The people were marching in the streets over the Gold Coast dilemma. Perhaps the Minister wishes to abuse those people as well.

Then there is the Nambour Hospital. Like the Gold Coast, that hospital is experiencing tremendous growth but, contrary to the Minister's claims of an increased budget, the documentation shows that it has, in fact, experienced a reduced budget. What is the Minister going to do? Is she going to abuse the staff for being some of the most efficient in the State? At Christmas time, the Minister approved the closure of 36 beds at the Nambour Hospital, but today in question time she seemed to have forgotten that. There are also some 25 full-time permanent positions at the hospital that have been deliberately left unfilled because of the budget problems. The Minister has a convenient memory because, despite her district manager's report confirming her involvement in the bed closures, in the House this morning the Minister said that she did not get involved in operational matters. Well, it is about time that the Minister did get involved in managing the department, rather than having her bureaucrats manage her. I renew my challenge to the Minister: why does she not allow Sunshine Coast media to inspect the 36 beds which are still closed well after the Christmas break? The Health Minister should hang her head in shame for her lack of compassion that was shown this morning, when she slandered a patient who had had the misfortune to wait so long for surgery.

Then there are the mental health issues. I would like to quote the Minister, who thinks there is not a problem with acute mental health beds in south-east Queensland. The Minister stated—

"There is no indication of a shortage of mental health beds in south-east Queensland."

The Minister also went on to talk about how emergency beds were available and that, according to the mental health services, those beds had been accessed only about twice in the last six months. I think that the Minister had better stop listening to her close circle of bureaucrats and start talking to the doctors and psychiatrists who are dealing with this issue at the coalface. When I talked to Dr Eileen Burkett, who last week issued a press release from the AMA, she said that she and staff members spent hours ringing around looking for beds for mental health patients. That is hardly the best use of time for treating psychiatrists.

The College of Psychiatrists has also been calling for some months for a review of the current number of acute mental health beds. In light of the Minister's answer this morning, it is obvious that she

has not realised that there are problems with access to mental health beds. Even when there is a suicidal man who threatens to kill himself and his wife, he is unable to get a mental health bed for more than a week. If the Minister does not think that something is wrong, there is obviously something wrong with her management. Furthermore, it is also wrong to have psychiatrists who are being paid, say, \$100 an hour, or their registrars, having to spend hours ringing around looking for where these beds are supposed to be.

The Minister has to undertake that review, and she must put in the coordinators who can do that work instead to access these beds which are supposed to be available. But this Minister cannot do anything, because she is a Minister in a do-nothing Government, and they continue to ignore the problems and the reductions. This is a do-nothing Government, a can't do Government, which continues to reduce services. It has not delivered in this key area of health.

Time expired.
