



Speech by

Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

Hansard 10 November 1999

ELECTIVE SURGERY WAITING LISTS

Miss SIMPSON (Maroochydore—NPA) (5.59 p.m.): I move—

"That this Parliament condemns the Minister for Health for her callous manipulation of elective surgery waiting list figures that provides shallow self-promotion whilst ignoring the plight and pain of thousands of patients who are waiting for surgery."

There are a number of serious issues which the Health Minister has failed to explain away: her fanatical blocking of so-called public information for release under freedom of information laws; grave discrepancies between her waiting list figures and the hospital figures; the lack of a specialist access plan that she promised to produce 12 months ago; the doubling in long waits for semi-urgent patients at Royal Brisbane Hospital, despite her claims that alternative services were in place; the fact that doctors are speaking out and saying that alternative services are not in place; and the fact that the Health Minister is closing wards and beds at the Royal Brisbane Hospital when she admits that the Royal Children's Hospital also needs to use the RBH's operating facilities at this time because their own facilities have been closed down while being reworked.

Of course, there is also the issue of the Minister's inability to satisfactorily explain why the State Public Service Commissioner's annual report tabled in Parliament yesterday showed that there had been a drop of 1,066 full-time equivalent staffing positions in the Health Department. The Health Minister says that the Public Service Commissioner's figures are wrong but, during the Estimates process, the Health Minister refused to produce the information that I asked for about the number of full-time equivalent positions in the districts. If I was given the choice of trusting the Public Service Commissioner or the Health Minister, I would come down on the side of the commissioner.

I turn to the elective surgery list and why the Minister's information is so hard to believe. Why would a Government that has nothing to hide block the release of waiting list information when I sought it under the freedom of information laws? The veracity of the Health Minister's claims about wait times cannot be trusted when she has refused to release the background information relating to waiting lists. If the Minister has nothing to hide, I suggest that she release all of these documents that she has most cynically refused to make public. These are the documents that she chose to take to Cabinet through the back door after I lodged my FOI requests.

Together with the Minister's fanatical zeal to stop uncensored information being released through FOI, the Health Minister—or "Stealth" Minister—also has to explain why there is a vast discrepancy between the information being released by one local hospital about wait times for elective surgery and the information that the Minister has formally released in the waiting list report. This morning, I referred to the information that has been released to GPs on the Sunshine Coast. To give one example of this information, I refer to the latest elective surgery figures that show only a modest number of people waiting for eye surgery at the Nambour Hospital. The official July 1999 figures at the hospital were fairly similar to the figures for October 1999. However, a different lot of figures distributed by the hospital shows that there is up to a 58-week wait for appointments to even see an eye specialist. These people are not even on the surgery list yet. According to these figures, once they have seen a specialist they can wait up to 82 weeks for surgery.

These figures contradict totally those figures that the Minister promotes in her elective surgery wait list report. In her wait figures for July 1999 and October 1999, there were no apparent long waits for Category 1 and Category 2 eye surgery, and Category 3 non-urgent surgery looked to be close to an

acceptable target of no more than 5% long waits. Yet the published specialist outpatient wait times has people waiting for up to two years for appointments and surgery.

How many other hospitals have a similar story to tell, with the real wait times for surgery not being published? This story has been repeated at hospitals around the State. At a time of record Health funding—an extra \$1.3 billion from the Commonwealth—the funds have gone to fatten up the bureaucracy at the expense of the State's hospitals.

Cataract operations may not be life threatening but they affect people's quality of life. If a person cannot see, that person loses the ability to drive a car and needs greater assistance in the home. Simple pleasures such as reading or watching television become very difficult. To have to wait several years for a cataract operation is just unbelievable. Likewise, with knee or hip operations, a lack of mobility is not always life threatening but it means that a person is extremely dependent upon others and one's quality of life is severely affected. According to the hospital figures, the wait to see an orthopaedic surgeon for an outpatient appointment at Nambour is up to 44 weeks. The wait for surgery is up to 269 weeks.

Increasingly, these types of operations are out of the reach of ordinary Queenslanders. The Beattie Government has no targets to reduce the wait for Category 3 non-urgent surgery, and hundreds more people have not even made the published surgery list.

The picture of cutbacks at Brisbane hospitals is far more sinister, where even the published waiting list figures for semi-urgent surgery have blown out—all this under the Minister who said that services were not being downgraded and that patients would be shifted elsewhere, but this has not happened. Firstly, I will deal with the issue of the fudge that the Minister has done on specialist outpatient appointments and her broken promise. I table an article outlining the Minister's commitment 12 months ago to address the need for a specialist access plan. This morning, when I asked the Minister about this, at first she said that it was on the Internet. I say to the Minister that it is not on the Internet.

Mrs Edmond interjected.

Miss SIMPSON: I suggest that, if the Minister wants us to believe that she is doing something to address the anomalies in waiting times for specialist consultations, then she has to publish this information publicly. It would certainly help the various regions to check out who has access to services and who does not.

Currently, there are more than 38,000 people in this State waiting for surgery. However, the real figure is far higher because of the fudge job that has been done by the Minister on ward closures.

Mrs Edmond interjected.

Miss SIMPSON: I suggest that the Minister reads Hansard and checks the question that she was asked, because she simply was not listening. The figures published in the Health Minister's elective surgery waiting list report do not reflect the thousands of extra people in the community who are waiting for surgery. This Health Minister has failed to keep a promise to do something about that. Even on the Minister's published data in the Brisbane area, where there have been savage cutbacks with closures of operating theatres, there is no denying that there are more people waiting longer for surgery and semi-urgent surgery.

The move to close hospital beds and operating theatres in Brisbane has had nothing to do with winter ills. That is a Labor Party whopper. The Health Minister, through central office, ordered the hospital to reduce its activity due to budgetary problems, but the alternatives were not in place to take those displaced patients, thus the blow-out in wait times. The latest elective surgery wait figures show that there has been a doubling in the number of people waiting longer than acceptable for semi-urgent surgery at the Royal Brisbane Hospital. Each month, the Royal Brisbane Hospital is doing some fewer 240 operations than it was doing in the previous three months. In that short time, the proportion of people waiting too long for essential surgery has blown out from 5.5% to 13.5%. They are waiting for up to one year or more for their surgery instead of the recommended 90 days. It is unacceptable that 40% of all of those waiting for non-urgent surgery—nearly 3,000 people—are not being treated within 12 months.

This Minister has closed two surgical wards, two operating theatres and 40 outpatient clinics at the Royal Brisbane Hospital, and all this while the hospital has taken on additional surgical workload from the Royal Children's Hospital. The Minister told us that patient care would not be affected, but what a hollow promise that has proven to be. This is appalling mismanagement on her behalf, and patients are suffering.

The latest official elective surgery waiting figures for October show that the number of patients waiting longer than ideal times for essential Category 2 surgery has blown out to 13% of patients at the Royal Brisbane Hospital, 18% of patients at the Princess Alexandra Hospital and the Royal Children's Hospital and a massive 23% of patients at Prince Charles Hospital.

What are the doctors saying? They are saying that the alternative services to take up the axed activity are not in place at the Royal Brisbane Hospital. The Health Minister has provided no evidence that the very rapid closure of services at the RBH has been anything other than a budget-driven objective. Yesterday on ABC radio, the Medical Staff Association President, Dr Roderick Roberts, stated—

"The infrastructure hasn't been established at those small hospitals to deal with those emergencies and we did have the occurrence recently of a vascular emergency that was moved from several hospitals in the periphery and finally to Royal Brisbane."

Doctor Roberts went on to outline an example of a gunshot victim who was sent to Caboolture Hospital and then to Redcliffe Hospital before several hours later being sent on to the Royal Brisbane Hospital because at that time a surgeon was not at Redcliffe. The President of the Queensland AMA, Beres Wenck, in a press statement stated—

"While on paper shifting patients to other areas may appear to address waiting list discrepancies, there is a good possibility that patients could be shifted to hospitals that don't have the level of infrastructure provided by RBH."

In Saturday's Courier-Mail another doctor, Dr Rob Hodge, the Queensland Chairman of the Royal Australasian College of Surgeons, said that the elective surgery figures showed the human cost of cutbacks to Queensland hospitals. With reference to the cutbacks at the RBH, Dr Hodge stated that services had not been introduced elsewhere and that Queensland Health had placed more pressure on RBH by refusing to fill several recently vacated anaesthetist positions. He stated further—

"They"—

meaning Queensland Health—

"have used the lack of anaesthesia services."

Time expired.
