



Speech by

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PRIVATE HEALTH FACILITIES BILL

Dr PRENZLER (Lockyer—ONP) (9.36 p.m.): I stand here tonight to offer my support and the support of my colleagues to the Private Health Facilities Bill 1999. I will only take up a few moments of the House's time tonight, but I want to make a few general observations about this new Bill. I cannot stress enough the need to ensure the protection and safety of the public when it comes to health matters. The public is very trusting of health professionals and they place their lives in their hands. The public generally have limited medical knowledge and have no choice but to put their faith and trust in their medical professional to diagnose their problem and to hopefully cure it, if they can.

It is because of this trust placed in health professionals today that legislation does become necessary to protect the public and to ensure their safety. The licensing arrangements that this Bill improves upon will enhance public safety in general. The reclassification of day surgery hospitals is an important issue, as it has become somewhat of a concern in the community that more and more medical procedures once requiring overnight visits in hospitals can now be performed at day facilities. These procedures must be regulated to ensure the continued safety of patients and to ensure that these procedures are conducted by licensed health practitioners and according to specific standards. This change of definition of day hospitals amounts to a broadening of the areas that this Bill covers, hence broadening the protection to the community.

I agree with the removal of building related requirements. Building requirements for health facilities should be covered by the Building Code of Australia and the development process of the Integrated Planning Act. The Integrated Planning Act in itself is a comprehensive piece of legislation. I believe that the inclusion of the building standards for private health facilities will be better served under the Building Code and under the Integrated Planning At where consistency and high standards will be better ensured.

Many stories always seem to circulate within the community of visits to health practitioners that have gone horribly wrong. Many of these stories turn out to be simple occurrences that have resulted in little or no harm to the patients. But some certainly do cause more serious harm. There have been cases where a patient in genuine need of care has attended a doctor's surgery or hospital and, as a result of inappropriate treatment, has suffered far more problems than the one originally diagnosed. Many think that the problems these people face are fine because they have a legal fall-back position to gain compensation for their medical misadventures. Regardless of these facts, these patients can quite often never regain the quality of life they had prior to the mishaps happening. These people are not comforted by compensation after the fact. The issue needs to be avoided in the first place.

Stricter licensing and high standards are necessary to prevent these types of problems, as are the systems for corrective action should a patient suffer mishap as a result of a visit to a health practitioner. Patients should be able to expect systems that are not based upon the amount of money or patience one has to continue the fight, nor on the strength of the connections one has, but on what is right. The increased licensing requirements of those running private health facilities is a must and I sincerely hope that the improvement of these licence requirements with the Act will provide the community with more protection and increased quality of care in the medical system. I commend the Bill to the House and thank the Minister for bringing it to the House.