



Speech by

**Hon. WENDY EDMOND**

**MEMBER FOR MOUNT COOT-THA**

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Hansard 27 April 1999

### **RADIATION SAFETY BILL**

**Hon. W. M. EDMOND** (Mount Coot-tha— ALP) (Minister for Health) (5.20 p.m.), in reply: The Opposition spokesperson started off well by saying that the Opposition will support this Bill but soon disintegrated into the usual litany of ill-informed complaints. The Opposition does not seem to understand that this Bill modernises and supports existing practices, that the major players are highly qualified staff skilled in the safe handling of radioactive substances and that, more than anything else, it is in their own best interests to maintain high standards of safe handling.

This legislation is way overdue. It started with a review and public discussion paper on changes to modernise the regulations in 1990. This showed an urgent need to overhaul the entire Act. I made one of my first speeches in this House in 1990 on the need to improve standards of rural radiography by establishing such rare things at that stage as basic training courses for such operators as registered or enrolled nurses where there is no qualified radiographer. I was delighted when these courses were established with supervision and support by regional radiographers instead of the unmaintained equipment used by totally unskilled operators, such as gardeners, for example, as was the case prior to 1990. This was a major step forward.

As someone who has worked with radioactive substances for something like 25 years—both small and large and long and short-lived radioactive substances—I assure the member for Maroochydore that no-one—no supervisor, no enforcer—has a greater interest in maintaining safe working conditions than do the staff at our hospitals who handle, supervise and store radionuclides day in and day out. Their own safety and wellbeing overrides any nonsense of their supposed conflicts of interest as Queensland Health staff, and they are largely Queensland Health staff. They are diagnostic and therapy radiographers, and especially nuclear medicine technologists.

Concern was raised regarding the storage of radionuclides at hospitals—something that has happened for the past 50 years. It is a bit late to be getting concerned about it now. For the benefit of all members, let me explain that the storage of decaying radionuclides in hospitals is, of course, done to meet Australian and international standards. These radionuclides are mostly short-lived ones that would be exhausted before they reached a radioactive store, such as that at Esk. For example, technetium 99m, one of the most commonly used in nuclear medicine, has a half life of six hours; molybdenum, its mother, has a half life of just days; I 131, which is another common one, is seven days; I 123 and I 125 are much shorter; and with new techniques and new equipment, shorter and shorter half life radionuclides are in common use.

But I have to admit that I am getting rusty. I do not know all the latest techniques and what different isotopes are being used today. It is nearly 10 years since I have worked in this area. But I can assure people that they are stored until such time as they have decayed to safe levels, and then they are disposed of, as the member for Chermside detailed. Others, while having long half lives, are only alpha or beta emitters; that is, they are absorbed by the equivalent of a sheet of paper or a cloud of dust or smoke. And the member for Maroochydore wants them treated in the same way as the radioactive bomb!

I repeat that the persons who utilise radioactive substances have a definite and significant vested interest in maintaining high safety standards without constant supervision, because they are the ones who are most at risk of sloppy practice, working day in and day out with radioactivity, and seeking to reduce and maintain the lowest possible personal levels of radiation.

I welcome the support and the explanations of safe practices and workings of the Bill by the members for Kurwongbah, Cairns, Mansfield and Chermside. I also welcome the support of the member for Lockyer. I point out to the member that it is quite normal for detailed procedures to be enacted as subordinate legislation. It does not mean that they escape the scrutiny of the House. If members opposite do not support that subordinate legislation, they can move a disallowance motion against it. So it does get scrutinised; it is just a more practical way of doing it.

The member asked about relocation. Relocation in the Bill is associated with the transfer of radiation sources out of Queensland. It is mainly used for source tracking purposes, so that we know where they have gone. A person who is required to have radiation sources which are transported from place to place as part of their business, such as metering devices or, in the member's case, mobile X-ray equipment, will have a radiation safety and protection plan which deals with this, and no separate approvals are then required to transport the equipment. So that is taken in as part of the modernisation of the whole Act and to make it easier for small businesses to manage within that Act.

This Bill is way overdue. It was expected in this House in 1996. When I became the Minister, I was rather surprised to find that it had not progressed. There has been extensive consultation and, as other members have indicated, it is supported by the peak bodies. It is supported by the professions. Its implementation is positively anticipated, and the only person who has found anything to complain about is the member for Maroochydore.

I will be moving a series of small amendments which are in response to recommendations of the Scrutiny of Legislation Committee. The amendments have been circulated. I do not believe that they are controversial in any way; they just get rid of some tiny anomalies. I urge the House to support the Bill.

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