



Speech by

Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

Hansard 23 August 2000

APPROPRIATION BILL, ESTIMATES COMMITTEE D

Miss SIMPSON (Maroochydore—NPA) (4.07 p.m.): The critical analysis of the Health budget must increasingly focus on the actuals rather than primarily on Forward Estimates of expenditure, as the actuals should provide a measure of prior performance rather than a wide-ranging statement of intent. However, as has been outlined in my statement of reservations to Estimates Committee D's report, particularly with regard to issues relating to the oral health services, even some of the actuals reported in the portfolio statements are, by the Health Department's own admission, in error. There is simply not enough information supplied in the Budget papers to provide a detailed account of the majority of subprograms such as alcohol and drugs, or acute care services such as funded intensive care beds.

In lieu of that information being provided in the Budget papers, the Health Minister should be prepared to provide the documentation and detailed answers in the Estimates process. This is why it has been so disappointing that the Health Minister has refused to answer questions both on notice and without notice. The process of providing more detailed documentation to provide back-up to the Government's statements has simply not been in place.

There is a conflict of interest inherent in the Health Department between its fiscal responsibilities and delivery of patient care at a high standard. This conflict is heightened by the fact that the work force is bound by a code of conduct. In recent days we have heard debate about this code of conduct and people in the Public Service being disciplined. Certainly, that is a great fear in the Health Department, with people speaking out about their real concerns about cutbacks and also their real concerns about the accuracy of the information that is supplied publicly, certainly through the mouthpiece of the higher bureaucracy and through the Health Minister herself.

We are seeing concerns expressed from within the Health Department about the loss of intensive care beds. I note that the Health Minister responded publicly to this issue with a press release that tried to bolster the apparent number of intensive care respirator capable intensive care beds, or ICU beds, available in Brisbane by including neonatal beds. The fact of the matter is that there has been a net loss of funded and staffed intensive care beds for adults in Brisbane and certainly in the south-east corner as a whole. This is impacting upon the future capability for proper patient care for the surgery program, given that 25% to 50% of those who go through intensive care beds will have been in the elective surgery program, let alone those who are expecting a high level of care after suffering trauma.

In relation to mental health staffing levels, once again the Minister refused to provide the breakdown of the actual categories of staff in the mental health area. Given the fact that there has been a failure to reach the target by 385 full-time equivalent positions and given that the actual number of full-time equivalent positions in mental health services went backwards to 358, the onus is on the Minister to provide the documentation to back up her claims that it is only positions such as gardeners and maintenance positions that have been culled. The difference in these figures between this year and last year do not change the fact that these are the Government's own targets, and the Government is well into the implementation of the 10-year mental health plan. So simply accepting the Minister's word and not seeing the documentation or a detailed breakdown is not good enough. The Opposition does not accept the Minister's verbal response; there needs to be documentation.

It is a similar position with the closure of emergency care acute mental health beds. Psychiatrists still say that the acute mental health bed crisis is continuing. The extended mental health services in the community are not in place and they question why the emergency beds have been taken away from the Barrett Centre when there is still an acute lack of available mental health beds. The result is that people are being inappropriately admitted to general wards or not being admitted. We are talking about people with acute psychoses and people who are potentially suicidal. This really is negligence of the health system, and there was not an adequate answer from the Minister as to why these beds have been taken away at a time when there is still an acute lack of mental health beds.

The issue of dental health services has been mentioned by a member who spoke previously. We saw that the estimated actual figure was out by tens of thousands of procedures. We have to ask: what is the real story with dental health? On the Sunshine Coast it can take years even to get a general appointment. There is a disparity in access to dental health services in this State, yet the estimated actual figures clearly showed that the department had gone backwards in providing general procedure oral health care. When I asked this question during the Estimates they said, "Oh, no, we have actually increased the number of procedures." That was within only a matter of months of printing the Budget papers. It comes down to the fact that there is not an acceptance of the reliability or the credibility—

Time expired.
