



Speech by

Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

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APPROPRIATION BILLS [ESTIMATES COMMITTEE E]

Miss SIMPSON (Maroochydore—NPA) (12.37 p.m.): I would also like to thank the chairman of our committee, Jim Pearce, the member for Fitzroy, and express my condolences on the death of his father, which is truly a sad time. With regard to Estimates Committee E and particularly to the health section of this estimates committee, I would like to make a number of comments.

It is very disappointing when a Health Minister who has time to answer questions on notice still refuses to answer those questions on notice, and we saw this time and again. There has been quite a cover-up in terms of what the state government has in fact spent on alcohol and drug services, particularly non-government services, in the last year. This is very disappointing, because it is an issue of grave concern to the community. Once again, the minister has refused to provide this information.

She has also refused to provide information about the full-time equivalent staffing levels of those who work in this area within the state health system. It is important to emphasise here that the specialist detoxification services within hospitals throughout Queensland have been closed and patients have been moved back into general wards. As this lack of accountability and this mixing up in the general wards has occurred, the Health Department and this minister are now refusing to release the information as to the full-time equivalent staffing levels not only in those sections of the hospitals but also in the other services that are provided. I think that is to the detriment of people and it is to the detriment of the community. We must demand accountability and transparency in the way that these funds are spent.

In relation to Commonwealth versus state funding, I note that the Health Minister has been very critical of the Commonwealth, yet the Commonwealth has in fact increased its spending to Queensland for next year by 8.3 per cent. This compares in real terms to the state's increase in its contribution of 4.8 per cent. Anyone who wants to analyse the health budget must also look at not only the state's so-called contribution but also at the increase in expenses added to the Health Department and other departments that they have to return to Treasury.

Leaving aside the equity return and the significant increase in debt borrowings which have to be paid back to Treasury, some 15 per cent of the so-called increase in the health budget goes back to Treasury. It does not go to patient care. It does not employ more nurses, doctors or allied health services. This has consequently resulted in one of the lowest increases in staff numbers in health that we have seen in the last decade. It is something like a 0.3 per cent increase. An extra 32 positions for the acute health sector across Queensland is totally inadequate. I am sure that if all members talked to people in the accident and emergency sections of hospitals and said, 'There's only an extra 32 staff that are actually funded for full-time equivalent positions across Queensland in the acute hospital sector,' they would be most concerned. It fails to deal with the issue.

The Commonwealth's relative contribution has significantly increased. The Commonwealth has also said that it will not exercise its right to claw back funds under the Australian Health Care Agreement which allowed that course of action once there was an increase in private health membership. It is not clawing back funds. Rather, we have seen a falling off in the pace with regard to the state's contribution to funding and the fact that some 15 per cent of extra funding from the state this year has to go straight back to Treasury. Those phantom funds do not go to health and do not go to help patients.

I turn now to the retractable needle issue. I want to touch on this issue because, once again, the Health Minister did not give accurate information to the committee. I am sorry that she is attending a health ministers conference, and I acknowledge that she cannot be here at this time. When the Health Minister stated that there had been no incidences of people in the community contracting HIV or hepatitis C through needlestick injury, she neglected to mention the fact that the Australian Workers Union would say that there has been a number of incidences of gardeners, domestics and hotels workers who have contracted these infectious diseases.

There is concern that there is no transparent way of tracking needlestick injury in the community. The minister was also inaccurate in relation to what she said about the cost of retractables. A fully automatic, one-handed action, self-activated retractable is a totally different product to the one that she stood up and spoke about in this parliament as being unsafe. She has not revealed to the parliament which product she alleged one of her staffers jumped up and down on. That is most deceptive, because the American FDA has given approval and said that one-handed action retractable needles are safe. We should not have to wait another two years. We have waited two years now for these needles to be brought into the system.

Time expired.
