



DESLEY BOYLE

MEMBER FOR CAIRNS

Hansard 15 October 2003

HEALTH LEGISLATION AMENDMENT BILL

Ms BOYLE (Cairns—ALP) (4.36 p.m.): I, too, am pleased to support the Health Legislation Amendment Bill. I particularly want to talk about some issues around changes with regard to core practices, the Health Rights Commission and health practitioner tribunals. Before I do so, I will make some general remarks. I would like to put on the record that I strongly support the changes with regard to dental therapists, particularly in Cairns and for far-north Queensland. With a lot of country and remote areas, this will be a change that will improve accessibility to dental services. I have no doubt that it is a right and proper move. I also recognise that we are making some changes to the disciplinary provisions for nursing staff. While these will hardly ever be required, nonetheless they are the right and proper provisions to put in place.

I take the opportunity to give my sincere thanks to the nursing staff at Cairns Base Hospital. As members would understand, through the long period of the physical redevelopment of the Cairns Base Hospital, they did undergo much in the way of stress with all of the changes going on around them and around their patients. There have been further changes since the redevelopment, but many of these have been positive changes and will contribute to reducing the stress on nursing staff at Cairns Base Hospital.

Most particularly I would like to inform honourable members that we have made a significant change in the management of nursing staff. We have stopped the practice of hiring casuals and agency staff and instead have increased the number of permanent nursing jobs at the hospital. Since May of this year there has been an increase of 78 permanent nursing jobs, which I am pleased to say are organised around the hours of choice of those who have taken the jobs, keeping in mind family friendly policies. It is much better for the nursing staff to have that security and predicability and it is much less stressful. I am also sure that it means that the quality of the service they are able to provide to patients at Cairns Base Hospital has improved.

Cairns is lucky in that, while it still has some recruiting problems of course, it does not have anything like the problems that there can be in rural and remote Australia. I was absolutely dismayed to hear that the new federal Minister for Health, Tony Abbott, has a supposed solution to the nursing recruiting problem, and that is to pay more for nursing staff in cities and less for those in remote areas. I dare suggest to our own Minister for Health that he would undo all the good work that she has done—that is, take away the additional benefits and incentives that are necessary if nursing staff are to serve in remote areas of the state of Queensland or indeed our nation. He would in fact not only take away the incentives and the benefits; he would actually take away some of their base wages and pay them less. What a nonsense! Indeed, we are headed for an even rougher ride with Tony Abbott in charge.

There are important changes in this bill that will affect a wide variety of health practitioners, including those who are normally known as allied health practitioners. I take this opportunity to tell members of the House the good news that we are increasing some allied health practitioners in the new rehabilitation stroke unit at the Cairns Base Hospital, in particular physiotherapists, occupational therapists and an additional position for a speech pathologist. These are indeed welcome. As we worry about the majority of our health professionals who work in hospitals—that is, our doctors and nurses—we too often do not pay enough attention to the important role played by allied health practitioners.

So far as the amendments in this bill are concerned, they build on the practices that we have had in the past through the Health Practitioners (Professional Standards) Act 1999 and the Health Rights Commission Act 1991. The Health Legislation Amendment Bill 2003 contains amendments to health practitioner registration legislation to implement recommendations of the review of restricted core practices which was established in accordance with national competition policy. There has been some confusion about the purpose of practice restrictions contained in the health practitioner registration legislation. The practice restrictions do not regulate the practices of registered health practitioners; rather, they describe practices that people without the necessary training or qualifications cannot undertake.

The review of restricted core practices recommended removing broad statutory definitions restricting practices to particular professions and replacing these with restrictions on practices which pose a high risk of harm to patients. The bill will insert specific practice restrictions to replace the current practice definitions which are used to prohibit non-registrants from practising chiropractic, optometry, physiotherapy and podiatry. It should be noted that practice definitions and restrictions do not currently apply to medicine, occupational therapy, psychology, speech pathology and medical radiation technology.

Spinal manipulation is to be restricted to registered chiropractors, medical practitioners, osteopaths and physiotherapists. Spinal manipulation is a form of treatment that uses body leverage and a physical thrust to the spine to restore joint and related tissue function. It is important, therefore, that we protect patients from those who are not qualified and could cause serious damage. The bill will also restrict the prescription of optical appliances for the correction or relief of visual defects to registered optometrists and medical practitioners—again, a safety provision.

I am pleased to say that we are making some changes to improve the performance of the Health Rights Commission. The Health Rights Commission has been a worthy body which has of course soldiered on since its establishment in 1991 but has been bogged down in terms of the time taken to address some of the complaints placed before it. This bill amends the Health Rights Commission Act 1991 to clarify the commissioner's powers and to streamline the administration of the Health Rights Commission. This will be welcomed. Patients and consumers across society are more likely to complain when they believe that they have had bad service, and it is important for our government to find the mechanisms to make sure that the complaint process is resolved as speedily and yet as thoroughly as possible.

Additionally, the bill changes the Health Practitioners (Professional Standards) Act 1999 to strengthen consumer protection. The Health Practitioners (Professional Standards) Act provides a consistent approach to disciplinary matters involving health practitioners across 13 registered health professions. The act establishes professional conduct review panels to deal with routine disciplinary matters. The Health Practitioners Tribunal is established by the act to deal with serious disciplinary matters. The tribunal is constituted by a District Court judge who is assisted by two professional assessors and one community assessor. It generally deals with matters that, if substantiated, may result in the cancellation or suspension of a practitioner's registration. It is therefore a serious body to deal with matters of great import and requiring, potentially, the cancellation of a practitioner's registration. I am also pleased to note that the amendments will provide that a decision of the Health Practitioners Tribunal will take effect from the date that it is delivered by the tribunal or as otherwise ordered.

This is a fine bill. I am pleased indeed to be part of the health legislation committee and to commend all of those within Queensland Health who have, over the years, prepared us for all of these amendments. Their work often goes unrecognised, and I do thank them for their very many hours over a long period of time. Most importantly, however, I thank the Minister for Health, who is an amazing lady. Her grasp of the detail of her portfolio right around this state is tremendous. I was in fact speaking with her about some positive changes being made at Cairns Base Hospital this morning and she reminded me, the local member, of a couple that I had forgotten about, because she is so well across her portfolio. It is a great pleasure to be on her health legislation committee. I of course support this bill.