



## Mrs D. PRATT

## MEMBER FOR NANANGO

Hansard 20 August 2003

## APPROPRIATION BILLS—ESTIMATES COMMITTEE D

Mrs PRATT (Nanango—Ind) (5.26 p.m.): I would like to address the report of budget Estimates Committee D, which was concerned with transport and main roads. I would firstly like to thank the minister for the roadworks which have been under construction throughout my electorate and which are finally, after many years, resolving some of the concerns of the many shires in the area. I would also like to acknowledge the various shire projects which the government has partly assisted.

One of the major concerns which I have continually sought to have addressed in this parliament is the condition of what is locally called the Blackbutt Range road. The dangerous condition of this road is very evident by the number of vehicles which come to grief whilst trying to negotiate it. Only recently two semitrailers overturned on the range whilst fully laden with oranges. In the RIP a few years ago it was stated that an overtaking lane would be constructed on the range itself and one above the range between the top of the range and the small township of Blackbutt. Both these overtaking lanes are essential. The one on top of the range is currently under construction. If members had travelled the road they would appreciate why it has been so eagerly awaited.

It has been brought to my notice that because of budgetary concerns a question mark now hangs over the overtaking lane on the actual range itself. I would hope that the question mark will be removed as the range, which has only in the last couple of months had new rails erected which were destroyed within weeks, needs to be attended to urgently. I ask the minister to ensure that it is attended to urgently. It is only luck that these last accidents did not claim lives.

I still have concerns with regard to pedestrian crossings—which was raised at the estimates—no longer being permitted in towns such as Woodford where many of the children must cross a major highway to get to their homes. I can understand the minister's reasoning about this particular road being a highway, but I would still like it recorded that a walkway above the road may be necessary in the future to protect these children. I have concerns that, whereas the pedestrian once had the right of way on the roads, it would appear that keeping the flow of traffic moving has taken away that right. It is my most fervent hope that a life is not the price to be paid.

I note that the shadow minister, Vaughan Johnson, submitted a dissenting report which addressed the revelations of internal audit reports and that, on legal advice, the minister had reported to the committee that he is not obliged to produce the reports requested. I know that I might be viewed as cynical, but the red light comes on immediately when such statements are made by departments while the Premier continues to state that this is an open and accountable government.

I will now address the section of Estimates Committee D dealing with health. There is no doubt that, in the mind of the general public, Queensland Health is failing them badly. More and more we are hearing the Premier and the minister making statements along the lines that hospitals are primarily there for emergency cases only and that private GPs should be picking up some of the other non-urgent cases. I believe in the last couple of days it was suggested that general practitioners should be willing to attend hospitals by having a room there to take over some of these cases.

It was not too long ago that public hospitals were just that—for the public—and people who could afford to go to private practices did. Now those who find it difficult to raise the finances to seek a private practitioner's help are being discouraged by various techniques—perhaps not intentional but still discouraged. We continue to hear about long waiting times for attention, and it is often the case that there is no doctor on duty or simple understaffing. Patients have reportedly been left to find their own

way home and often in the middle of the night. These have not been isolated cases but appear to be occurring at regular intervals. Now we hear of ambulances being told during the flu season to go to other hospitals because the hospital cannot cope. These are events that should never occur. Once can be forgiven. Twice is unfortunate, but after that it must reflect on poor management or lack of funds. Perhaps in this case it is both. I am not discounting that procedures have changed over the years and expenses have risen, but so have people's taxes, and they deserve to be treated in a timely manner.

I want to put on the record that I still oppose very strongly the removal of the Farr Home aged care nursing facility from the town of Kingaroy. Limiting the poorer members of our community to where they will spend their declining years is a sad reflection on our society and those who govern it. I also oppose this move on the grounds that no regular commuter transport is available to those needing access to the people put in these premises. I know that the nurses in the hospitals who I deal with are pushed to the limits and understaffing has now become very obvious. I congratulate them on the enormous efforts they put in to a system which is letting not only the public down but them, too.

During the estimates committee hearing the minister described waiting times for non-urgent dental work as being 'unfortunate'. At the time the minister confirmed that the Kingaroy Hospital, the public dental clinic for the region, has four dentists and that the clinic completed 2,249 general courses of care in the 2002-03 financial year. If that is the case—and I am not doubting the minister on that information—how does she explain that four dentists can average only two dental procedures a day each? Many people in the South Burnett use the services of dentists in private practice, and as one local private dentist happily told me, 'If these dentists were out in the public domain they would fail miserably.' It is no wonder that people in the South Burnett have a 180-week waiting time for non-urgent dental work compared to the average waiting time of 64 weeks.

Time expired.