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MEMBER FOR MAROOCHYDORE

Hansard 6 June 2003

STATE BUDGET 2003-04

Miss SIMPSON (Maroochydore—NPA) (12.32 p.m.): Never has so much been spent to achieve so little. This funny money budget—the tale of a typical Labor budget—means that there has been an increase in taxes, an increase in costs, but the delivery of decreased outcomes. As a simple example, in the last year of the coalition government there were 9,000 more surgical operations performed in public hospitals on public patients than under this government in its last reporting year. There were 9,000 more operations performed on public patients.

How do they do it? As far as this Labor government goes, it has increased the taxes that it is taking out of Queenslander's pockets by 30 per cent and yet it is delivering fewer services in those areas of greatest need. That is 'Mackenomics'. We have seen successive deficits, despite the fact that there has been record taxation revenue. We have seen a government whose priorities are the less important things such as the Premier's self-image and the Community Engagement Division. He will spend \$20 million on his own profile while we will see fewer operations performed in our public hospitals. That is on the public record. They are the facts and figures from the Department of Health. That is my concern.

There has been a lot said by members that this is a record Health budget and that the seven per cent increase in health spending is in keeping with the inflation in health costs. There is another story which has not been outlined in the budget papers—that is, the clawback. Those are figures that have not been included. In other words, the government gives with one hand but with the other hand it will claw back the unpaid, unfunded wage rises that have been awarded and that the hardworking staff in Queensland Health deserve. They have not been fully funded by the government.

We know that under clawback some \$40 million in unfunded wage rises and expenses have be delivered out of savings from Queensland Health. Where is that going to come from? It is going to come from hospitals throughout Queensland. Another true indication of this Labor government is that the real budgets delivered at the district health level will not be finalised for another six months. Perhaps I am being a little cynical and suspicious, but I think we will be well and truly on an election campaign trail or have even seen an election campaign by that time—that is, before the real budgets are delivered at the district health level; the real budgets that will be delivered to the hospitals. This government is not telling us what the extra money is for; it is not revealing the real budgets for district health. We know that about \$40 million alone in unfunded wage increases has to come out of the rural and regional hospitals of this state.

On top of that, we understand that at least another \$30 million has been clawed back through that shared services arrangement. Those opposite talk about a record Health budget. What about a record clawback from Treasury—the second line that is not included in the budget papers! The budget papers mention that the shared service agreement details have not been finalised. They will not report on them until next year, yet they are supposed to be in operation from July of this year. How convenient!

I want to give a very simple idea about some of the interesting and peculiar ways that Queensland Health has been covering up the debt that this government has been accumulating against health services. We already know from the budget papers that the Tablelands will get \$1 million extra in order to upgrade the Atherton Hospital. What they do not clearly say in the budget papers is

that they have to pay that back. It is not a one-off capital grant that goes to that health district. It has already been admitted that that has to be paid back.

How many other times has the capital works budget for Queensland Health and other portfolios not really been what we see? What we see is not what we get. People are being asked to pay it back. The internal debt of Queensland Health is one of the greatest inhibitors to quality outcomes delivered for patients in this state. That is the other figure that we do not see in the budget papers.

We know that the Royal Brisbane Hospital has something like a \$19 million debt. How much is that going to cost patients? What we see is not what we get in these budget papers. Repaying that debt as they are required to do in Queensland Health means that what the government says they are going to give to the Royal Brisbane Hospital is not what they are going to get.

What about regional hospitals? We know that Cairns Base Hospital has a \$7 million budget overrun. Any talk of increased funding for Cairns has to be balanced against the fact that they have a multimillion-dollar debt that they are expected to pay back. Where will the real increase in service be? Where will the real increases in net clinical staff numbers in those areas be? Where will the matching of growth and not just the paying back of debt be?

The real story with Queensland Health is that it is not even treading water; it is doing backstroke. In real terms, when we take growth into account and take away the debt repayments within these major district budgets and take into account the clawback for the unfunded wage rises, we realise that there is nowhere near a seven per cent increase in real terms in the Queensland Health budget. The \$170 million extra in state funds—we are not talking about the Commonwealth funds that make up \$300 million—for Queensland Health will well and truly be eroded by the clawback provisions to Treasury—Treasury asking for its pound of flesh to pay for the wage increases that have not been funded. It will also be well and truly eroded by the existing debt that has accumulated that those districts are being expected to pay back.

Then there is the mystery amount as to the shared services arrangement. That is not being reported in these budget papers, but we do know that is a substantial figure, reported to be about \$30 million. What does this actually mean? As I said before, it means fewer surgical operations in the last year when the coalition was in government. With respect to emergency departments, despite some very nice announcements about additional funding, which is very similar to the so-called additional funding last year to be spread around Queensland for emergency departments, we still have a record blow-out in emergency wait times. This is one of the most critical areas of care—people knowing that when they are in an acutely urgent situation they can receive timely care, people knowing that when they are in a painful situation they can receive relief for their pain.

With respect to wait times for emergency treatment, despite the fact that the government said it was addressing this area, wait times for category 2 patients—emergency patients, not GP-type patients—blew out last year. Nearly 30 per cent of emergency patients in category 2 were not seen within the required time frame of 10 minutes. Nearly half of the urgent patients, or category 3—55 per cent—were not seen within the required time of 30 minutes. Nearly a third of semiurgent patients were not seen within the required time frame of one hour. The reasons for the blow-out in emergency time frames are a lot more complex than just blaming it on the bulkbilling issue. In those high urgency areas that require treatment within 10 to 30 minutes there has been a substantial blow-out in long waits. That is extremely serious, because that is putting unfair pressure on staff and it is most unfair on people trying to get access to timely care. There are issues to do with the funding of the hospitals so that the access block issues which see people waiting absurdly long periods are dealt with.

I turn now to dental health. Of all the areas of children's health, this is where there has been the most significant failure of this government. In 2002-03 Queensland Health treated 21,000 fewer children than in the year before. I will repeat that for the benefit of honourable members opposite, who have been very silent on this issue. They treated 21,000 fewer children for completed oral health care than in the year before.

Interestingly, school dental health was not part of the Commonwealth pilot program that they keep bleating about that was finished a few years ago. School oral health care programs have been on a stand-alone basis, yet what we see here is that 21,000 fewer children have been treated than in the year before. In 2001-02, 341,000 children were treated by the school dentist. This year it was just 320,000, which is well below Queensland Health's target of between 330,000 and 350,000.

Next year Queensland Health aims to do between 310,000 and 320,000, so the Beattie government is actually happy to do even less again. Of course, adults fared much worse, with only 115,000 receiving general dental treatment compared to 130,000 the year before. In 2002-03 only 235,000 emergency patients were treated. That is 15,000 fewer than the year before. Dental health must be quarantined. We have given a commitment that we will quarantine oral health dollars. Oral health dollars must be quarantined. The Health Minister has refused to reveal the actual spending in

dental health throughout the various districts because it is not quarantined; it gets siphoned off into other activities.

The other area of major concern has been cancer treatment. I welcome the announcement of some of the funding in cancer treatment but reiterate my concern that there still has not been enough done to address issues of retention. That is coming from those who work in that area. I have talked to radiation therapists and other staff who are critical to delivering these services. There is now a 15-week wait for radiation therapy in Townsville. There has been up to an eight-week wait in south-east Queensland. The government heeded my advice and said, 'You've got to get people in urgently, even if you have to purchase treatment off private providers.' That is obviously only a short-term solution to a long-term problem that has been looming for some time. We are yet to see a real radiation package that addresses this not only in the short term but also in the medium to long term. To date the packages that have been put forward fail to do that. That is coming from those who work in that area. We want to retain those we have and train more but address the issues to do with making sure that we do not lose any more. It should never have reached this point.

I want to address issues to do with Nambour Hospital on the Sunshine Coast. I have raised previously the problems with backlogs in eye appointments and surgery. The government was able several months ago to come up with half a million dollars for the Gold Coast because it recognised that it had a problem. That is welcome and great, but on the Sunshine Coast when they print the outpatient appointment lists for VMOs and specialists at Nambour Hospital they do not even mention eye appointments. Clearly, there has been a shutdown in real access to adequate eye services on the Sunshine Coast. This has been going on for a few years. It worsened under the industrial dispute last year. It has been a significant issue that this Health Minister refuses to address. We have people going blind waiting up to five or six years now to receive cataract eye surgery on the Sunshine Coast. We can get better treatment on Thursday Island. Patients in our rural and regional areas—and this is great—can get flown down for services that are not available in areas where there should be easy access. There is no reason why we cannot attract people to those areas, unless there is a lack of will on the part of the government. That is the problem.

I notice there has been a lot of silence from the Health Minister about the issue of equitable access to health care throughout this state. Equitable access and looking at the difference in health outcomes for people throughout the state is a major issue that we in the coalition are concerned about and believe needs to be addressed. We have significant differences in rural areas and regional Queensland, even the Sunshine Coast, which is only an hour away from Brisbane, in people being able to access basic levels of care.

I wish to address some other infrastructure needs that are of concern in my electorate. Obviously, some of the health issues we will be able to pursue further during the estimates process. On the Sunshine Coast road infrastructure is one of the major issues. But under this government there has been a fall-off in the pace as to the amount of infrastructure funding that has been available in the budgets year after year. Now we see a situation where there is \$200 million less being spent on roads than during the time of the coalition government. That is of major concern in growth areas. A number of major arterial roads—two-lane roads—are well and truly over their capacity. The Sunshine Motorway is a classic example.

I welcome the fact that we have about \$4 million, while not included in the budget papers, committed to the duplication of the first section of the Sunshine Motorway. That is needed. This is where the highest death rate is. It is carrying about 10,000 vehicles a day more than it is capable of carrying. However, the rest of the motorway needs that urgent upgrade brought forward, as well as interchanges north and south of the river.

In terms of Maroochydore road and the missing link, during my time here we have seen about \$30 million spent on the upgrade of Maroochydore road. The missing link is a section which goes under floodwaters and is now subject to heavy traffic congestion and desperately needs to be upgraded. This is where the capital works funding needs to be spent. Putting cars into the capital works budget of the government does not really make us terribly happy when we know there needs to be real capital works infrastructure spending. Growth areas like the Sunshine Coast are being dudded by a lack of real attention to what is a job creating infrastructure.

I turn now to policing. The police need proper operational budgets. We want the men and women in blue out on our streets, but they need to be funded to operate at all times of the day or night with rosters that reflect the real needs in the community.

Once again we know that there has not been a full funding of some of the increases in wages. Those costs are going to have to be absorbed by an already very, very strapped service. That impacts on areas such as ours where we have a growing population as well as a huge transient population with the tourist industry.

Water quality and the environment is something that we are also waiting to see significant assistance on in this area. In addition to water police, the main people who look after the waterways are in fact boating and fisheries officers who are tasked with implementing the transport regulations. There is going to be almost a doubling of the number of vessels in our waterways in the south-east of Queensland in the next 15 years. Unless we have real people out there on the waterways implementing those regulations—not people sitting in offices—those rules as well as the water quality will be truly under threat.

I have raised with the Transport Minister the problem with Mooloolaba Harbour. There is an \$80 million seafood industry operating out of Mooloolaba Harbour and there is currently a sandbar which is impeding access across the harbour mouth. The government's response to date has been, 'Well, there's an emergency buoy there and people see it. They can find their way around it. It is a natural event. It will go away.' It has not gone away. It has meant that almost daily people are coming aground there with their boats. It is a dangerous situation where we are seeing recreational users and a multimillion-dollar industry saying that they have a problem and may go elsewhere. This should be a 24 hour, seven day a week, 12 month of the year access point without the danger of people being unable to see the emergency buoy because of the white water that is rolling across the mouth of that harbour. It is extremely dangerous. I have asked the Transport Minister to receive a deputation on that issue and I will be pursuing that further because we are concerned. It is a safety issue, but it is also an issue for all those industries that make up a significant job creating body on the Sunshine Coast.

We are still awaiting funding for CAMCOS and future rail upgrades to take it to a point where rail transport can go faster than 50 kilometres per hour. We would love the tilt trains to go at full speed but they do not because we have an 1880s railway alignment.

I know that my time is running out. There are a lot of other issues I would like to touch on. I will say that I welcome the \$1.5 million for the Maroochydore CBD upgrade and, while I do not think it is mentioned in the budget papers, the \$900,000 grant towards our Fishermans Road sporting complex will be very well utilised and is being matched by the council. That is a positive which we welcome and has been in addition to a number of other sporting facilities.

Time expired.