



Speech by

Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

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QUEENSLAND HEALTH

Miss SIMPSON (Maroochydore—NPA) (6.43 p.m.): What a farce—the Health Minister has moved an amending motion commending herself! I am surprised that she does not have RSI from patting herself on the back! It might make her feel better, but it is literally making others sick. I note with some concern that the Labor Health Minister opposite, in her constant ramblings, always has an excuse or is always ready to blame somebody else, particularly about the long waits Queenslanders experience at public hospital emergency departments. According to the emergency department benchmarking report for the September quarter 2002-03, one in five Queenslanders wait eight hours for treatment within the public health sector. I will table this document.

The minister keeps arguing that the extent of the problem is due to the decline in bulk-billing. Really, Minister? That excuse is getting tired. But, more importantly, these figures knock that argument out of the water. Category 1 patients or urgent patients must be treated immediately, yet seven of Queensland's major hospitals are unable to do this. Category 2 patients who are also classified as 'urgent' are supposed to be treated within 10 minutes, yet nearly one-third of Queensland patients are not, and more than half of category 3 patients are not treated within the 30-minute benchmark. Minister, these people do not need to go to a GP—they need to go to the emergency department.

A government member: Rubbish.

Miss SIMPSON: The member opposite has no idea what is happening in emergency departments in regard to the most critical area of service delivery, emergency care. Emergency care has categories according to clinical standards where people need to be seen within, as I have outlined, categories 1, 2, and 3. These are acute care patients not receiving timely treatment, yet this has been glossed over by this government. I have some evidence, too, with regard to hospitals where the beds have closed and the issue of bed block occurring in hospitals is compounding such issues in emergency departments. I am alarmed that these figures in some areas are so bad. At Nambour Hospital, for example, more than half of category 2 and nearly two-thirds of category 3 patients are not treated in time. In Cairns, nearly half of the category 2 and 3 patients are not treated in time. The situation is considerably worse at Townsville, Logan, Ipswich and the Gold Coast.

In respect of Townsville General Hospital, under this Health Minister's administration it has closed six short stay beds. This area allows the emergency department to monitor people and to ensure that people get a bed. They have closed the beds. Of course that will have an impact on the emergency department. Of course it will have an impact on all the services within a hospital. It is a backward step for people who do not need a bed in the back of a GP surgery but who need one within a hospital. We want to see the hard working health professionals supported in the fight for better management and better resourcing of these critical areas.

As this motion has highlighted, unless the government is honest about addressing the problems they will not be fixed. There are significant issues of management and resources in these critical areas of care. It is time that there was honesty and accountability. The Beattie PR machine can find millions of dollars to promote the Premier and to build infrastructure within Brisbane. We have talked about the range of major projects within Brisbane, yet when it comes to the most critical areas of care—we are not talking about elective care—such as acute care, this government and this minister have failed

miserably. It is time that those books were opened. It is time for no more obstruction in relation to revealing the real funding figures in such areas. It is time for money to be put into the critical areas of care for the sake of patients who need that care, for the sake of—

Time expired.