



Speech by

Lawrence Springborg

MEMBER FOR SOUTHERN DOWNS

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FINANCIAL ADMINISTRATION AND AUDIT (PERFORMANCE AUDIT OF HEALTH DEPARTMENT) AMENDMENT BILL

Mr SPRINGBORG (Southern Downs—NPA) (Leader of the Opposition) (9.42 p.m.): I rise to support the legislation before the parliament introduced by the shadow minister for health. It has been introduced because I gave a commitment on behalf of the then coalition during the election campaign period that this is something we needed to do in Queensland to ensure that we had a proper understanding of the real situation in regard to the operation of Queensland Health. As the shadow minister so eloquently said when he introduced this legislation in the parliament, there is nothing wrong whatsoever with transparency and there is nothing wrong whatsoever with ensuring at least a decent semblance of independence in regard to auditing the operation of Queensland Health.

Health is an issue which concerns all Queenslanders. The operation of the Department of Health in this state concerns all Queenslanders. It is probably the greatest issue which we come across in our electorates on a day-to-day basis. That is not to say that there are not other issues which are very important, but people are concerned about their health. They are concerned about the health of their families, including their children, parents and grandparents. Not only that, they become more and more concerned about the state of their health as they age because it is the one thing which affects their quality of life more than anything else. It stands to reason that we must have a system in this state that ensures transparency, ensures openness and ensures accountability in the way that this very vital department operates.

It was interesting to note that when we suggested that there should be this capacity for the Auditor-General to be able to review the performance of the Department of Health on an ongoing basis, the government turned around and said that it did not have a problem with having this independent audit but only on a one-off basis. What this legislation proposes is that there be audits at least annually but that they must be ongoing. It has to be at least annual, but there should be an ongoing role for the Auditor-General in ensuring that the efficiency and the effectiveness of Queensland Health is properly ascertained. What better way of ensuring the efficiency and the effectiveness of Queensland Health and the independence of it than to have the Auditor-General oversee that process?

What has the government got to be concerned about with regard to the Auditor-General? We know that this government has already attacked the Auditor-General in the past when he made some findings about government advertising in this state. We know that this government does not like the operation of the Information Commissioner in this state and has openly moved to repudiate some of the recent findings of the Information Commissioner, particularly in relation to grants. This government is more scared of accountability than any other government in the history of Queensland. If there is no problem with the way that Queensland Health is auditing itself, if there is no problem with regard to the way that Queensland Health is expending public moneys and if there is no problem with the way that Queensland Health is guaranteeing the effectiveness or efficiency of its operation, then what does this government have to fear by providing the Auditor-General the tools to be able to go in and conduct ongoing audits of Queensland Health? What does this government have to fear other than its fear of accountability, other than a fear that

it may expose something that it does not want to be exposed? That is maybe a certain moribund nature of Queensland Health in some areas. Maybe the government is concerned that the data which it is releasing in the area of hospital waiting lists has been in some way doctored or corrupted. Maybe it is concerned about all those sorts of things because, as we have seen in recent times, government departments and ministers have a way of sanitising things before they are released to the public. We want to make sure that the information which has been made available to the parliament, to the media, to the people of Queensland and to the opposition is indeed very, very correct, and we are not convinced at the moment that that is the case.

Again I simply ask: what does the government have to be scared of with regard to giving the Auditor-General—the independent umpire—the capacity to review, on an ongoing basis, the efficiency and effectiveness of Queensland Health, including such things as the waiting lists? The only thing it has to fear is if it has been doctoring or corrupting the data in some way.

What we have here is a department which has a larger budget than any other government department in Queensland, and probably rightly so because of what it deals with. The people of Queensland demand certain standards of performance and efficiency in the administration of that money, and the administration of that department and all of its various arms. Whether it is the administration—that is, the paperwork—side of it or whether it is the clinical side of it or whatever, they demand efficiency, effectiveness and honesty from that department.

We put a lot of money into Queensland Health, and the people of Queensland are concerned that the money that gets put into Queensland Health in ever increasing amounts does not necessarily guarantee better outcomes. We want better outcomes guaranteed for the money that is being expended on Queensland Health. People are also very concerned that we tend to see a growth of bureaucracy in Queensland Health. We tend to see a growth of administration in Queensland Health. We do not necessarily see it out there where it matters with regard to front line clinical and nursing staff. That is a problem in a lot of areas across Queensland. It has certainly been a problem in Cairns. When I go to Cairns people talk to me about the Cairns Base Hospital. There is some indication that some aspects of the situation at that hospital may have improved in more recent times, but we will have to wait and see. When there is a situation where the administration goes in and takes over half a new medical floor to service their needs—as they did up there—is that effectiveness and efficiency in Queensland Health? What is Queensland Health all about? It is about servicing the primary health care needs and the other ancillary health care needs of Queenslanders, and there is no guarantee that we are getting that service as efficiently and effectively as we should be.

I also have some very grave concerns, as do the National Party members of this parliament have in general, about the way in which performance benchmarks are established in Queensland. In the past, through the parliamentary estimates process, I have raised the matter of performance benchmarks and how—surprise, surprise—when the government sets itself certain benchmarks of 85 per cent client satisfaction, as they say, or 95 per cent client satisfaction with the service provided or with the timeliness of the service provided, surprise, surprise, generally the next year in the budget estimates process there is a situation where the government has met its benchmarks. But a lot of the time when I talk to people on the ground who are accessing the service, their level of satisfaction does not accord with the level of satisfaction that the government praises itself for or which is written up in the Ministerial Portfolio Statements. There is a vast difference between what the government says the level of satisfaction and performance is and what we actually hear from people in the community—the clients, to use the modern jargon—who access the services.

Health services is a classic example. In recent times the minister has said that he will fix a lot of these problems. I wish him all the very best because he has a lot to fix, particularly after the reign of his predecessor. Certainly in recent times the minister has said that the waiting list in this area has been fixed and it has been fixed somewhere else. I have a continuous stream of people coming into my office saying that they are still having a great degree of difficulty in accessing an operation when they are in great pain. They continue to be told that it will take 12 months, 18 months, two years, three years or four years.

Members should make no mistake about it, this legislation will ensure accountability, openness and compliance with the benchmarks that the government sets itself. Last year, we brought in here a whole range of actual letters from the Health Department to patients basically stating it is five years before they can see a gastroenterologist. The department wrote to patients and asked them if they were even interested any more in being on the list. The waiting list to get on the waiting list! That is the notorious way in which that department operates. If the government wants to ensure public confidence in this process and if it wants to ensure independently that the benchmarks that it is setting are being complied with and exceeded, then what is wrong with supporting the accountability mechanisms of this bill?

Time expired.