



Speech by

## John-Paul Langbroek

MEMBER FOR SURFERS PARADISE

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### ADDRESS-IN-REPLY

**Mr LANGBROEK** (Surfers Paradise—Lib) (8.39 pm): Mr Deputy Speaker English, I congratulate you on your promotion in this parliament and I ask you to pass on my congratulations to the Speaker for his elevation as well. Before I begin, may I express my disappointment that Parliament House precinct staff were not invited to the garden party on Tuesday. I understand this is the first time in about 20 years that these staff members were not invited. For all the work these staff members do to make our lives easier in this place, I feel this is a small reward for them and the invitation should be reconsidered.

I intend to speak tonight on the portfolio of Health that I have recently been made responsible for as shadow minister and then move to an analysis of the election campaign that led to 9 September. I would like to thank my Queensland coalition colleagues for having appointed me to be shadow minister for health. I intend to highlight the systemic problems with the health system in the coming term, including keeping a watchful eye on the related portfolios of mental health with the member for Currumbin and Emergency Services with the member for Mirani.

My daughter's soccer team experienced the dire need for better resourcing of our emergency services during the recent election, which prompted me to suggest that an investigation of ambulance response times on the Gold Coast may be appropriate. A 15-year-old girl, a team mate of my daughter, broke her leg in a match and had to wait 1½ hours for an ambulance to arrive on a Monday night. I note the media reported a similar case not two weeks ago when a woman with a brain aneurism waited 80 minutes for an ambulance to arrive at Bellbowrie.

The young team mate of my daughter was screaming and in excruciating pain on what was a cold August night. It is frightening to think about what is going to happen on the Gold Coast when the heat is on in summer and the higher demand from locals for ambulance services is matched by tourist calls. Then there is the follow-up question about whether the Gold Coast Hospital can cope when ambulance officers do get there. I understand that this is an Emergency Services portfolio responsibility but one intimately connected with the Health portfolio, as the new mental health portfolio is.

I would like to put on the record that I have reservations about the decision of the Beattie Labor government to create a stand-alone mental health portfolio. To ensure that that comment is not taken out of context, let me make it resoundingly clear that mental health is worthy of serious attention in this House. There is a crisis in mental health in Queensland and we need to address it, but I think I have been in this place long enough now to know the reason behind the Beattie government's tactic to separate mental health from Health. It is a strategy—for when mental health continues to suffer under this government the minister can stand up in this place and say, 'Mental health is a priority of the Beattie Labor government, so much so we made it a dedicated portfolio.'

But I note that in all other states and territories the responsibility of mental health is part of the general Health portfolio, and I found no evidence that any jurisdiction has experimented with a separate portfolio. Of note are the arrangements in New South Wales and South Australia, where there is a minister responsible for the area of mental health assisting the minister for health. Is that what we have now in

Queensland or is it something different? In February at COAG there was a recommendation that Australian health ministers recognise mental health as a designated ministerial responsibility in state departments of health but there was nothing on separate portfolios.

Clarification from the Beattie government is necessary here, because confusion about who is doing what is only going to be detrimental for our mental health workers and patients in the system. Confusion may lead to our health workers not knowing who to lobby, take instructions from or make complaints to, which will inevitably add to the demand of their already demanding work.

What about the potential for the fragmentation of patient care? Mental health services are provided in hospitals and hospitals fall under the Health portfolio, but mental health now has a dedicated portfolio. How are these added levels of Beattie bureaucracy going to interact? Are they just overlapping and duplicating each other's responsibilities? Will patient records, patient histories et cetera be kept by one department or by both? What I am trying to illustrate here with all these questions is how the separation of mental health from Health has the potential, without proper explanation, to compromise the continuity of care. This is the last thing the mental health crisis in Queensland needs and the reason I believe no other state has been game enough to experiment on its mental health patients by having a separate mental health portfolio. I look forward to hearing from the health minister and the new mental health minister about these concerns, and I hope to hear a clarification of the two portfolios that quashes these concerns.

The latest mental health review raises questions as well relating to the balance between patients' rights and the safety of the community. This is a balance that the opposition believes has been in favour of patients' rights and not properly balanced with the rights of crime victims and their families—not to mention the rights of health workers. As shadow minister for health, I will make a concerted effort to target the government and not the health professionals themselves about the health crisis in this state.

Queenslanders have a right to be upset about health, but we must remember and respect that it is not the fault of the wonderful people who are the health professionals in this state. The continuing crisis in health is the fault of the Beattie Labor government. The Beattie Labor government has invested much time, energy and money in buck-passing the health crisis off to someone else. The Beattie Labor government has told the Queensland people its hands are tied until the federal government allocates more medical places. But it is not the fault of the federal government. Despite the fact the federal government has now allocated more medical places, the Beattie government flounders in planning for when those students graduate.

Queensland Health has stated that it has the capacity for a total of 386 intern positions from 2008, but according to the AMA 625 medical students are expected to graduate in Queensland in 2009. There is an issue that the Beattie Labor government does not care to acknowledge—and it is the pipeline effect of what is going to happen when we have all these medical graduates but no ability to absorb them into the system to train them. That is a responsibility of the Beattie Labor government, not the federal government.

Then there is the issue with entering speciality training. Currently, around 60 per cent specialise and 40 per cent become GPs. If this trend continues, there will be no scope for many of these doctors to enter proper speciality training. There is a health workforce crisis in this state and the Beattie government needs to accept that it has a responsibility to address it.

The minister has often pointed to the Premier's much-hyped UK recruitment drive as a strategy to deal with the health workforce crisis. However, comments from the minister yesterday were evasive to say the least. The minister said that, to date, 257 health staff recruited from the UK had started work or accepted jobs in Queensland. But how many of those 257 have accepted but not yet started was not revealed by the minister. Questions about why these health professionals have not yet started need to be asked.

I would like the minister to advise how many health service districts have been directed to not proceed with appointments of health professionals from the UK because they do not have the funds available despite desperately needing the staff. I would like to know whether Queensland has doctors and other health professionals ready to serve the Queensland people but who cannot because the Beattie Labor government has not provided the necessary funds to pay them.

I am pleased to see the government conducting stringent background screening of overseas professionals being recruited, but we cannot forget that Queensland would not have to be sourcing overseas professionals if 800 doctors per year were not leaving because of the strain put on them by the Beattie Labor government. On the matter of screening health professionals, I would like to see attention paid to the need to ensure appropriate inquiries are made of potential practitioners' employers and nominated referees. It may be appropriate to develop laws relating to negligent misrepresentation of a potential doctor's qualifications by a hospital or referee, as has occurred in the US, but that is a discussion for another day.

To properly deal with the health workplace crisis in Queensland, Queensland needs to have better strategies to encourage people to become health professionals. We need to be looking at enticing visiting medical officers into the public sector with fair pay, particularly in country areas. We need to look at improving morale and working conditions by allowing some autonomy and peeling back the bureaucratic layers. The Beattie government has to cut the bureaucracy in Queensland Health. Only last month we heard the chair of the federal House of Representatives Standing Committee on Health and Ageing stating he suspected in Queensland only 20c in the hospital dollar was actually getting through to patients, with the rest being spent on bureaucracy.

I have suggested that improving work conditions will assist the health workforce crisis. I would like to offer a specific example with respect to improving the safety of our health staff. Recent incidents of reported assaults at the mental health unit in Townsville and in busy emergency departments have put serious question marks over the level of security afforded to our health workers. Emergency departments are stressful environments. When the system is under strain, as it is in Queensland, they are even more stressful. Health workers in our emergency departments do the best they can with the resources and manpower they have, but the safety of these workers is affected by the stress of emergency.

Things are going to happen when sick people have to wait for assistance. They are in pain, they want to be seen to and they are often in the dark about how long it will take to be seen. They get stressed and frustrated. On Friday and Saturday nights, many in the emergency departments are intoxicated. They get mad and on the odd occasion get violent. The safety of our health workers is being compromised in our emergency departments, making it harder for staff to deal with the demand of the environment.

The idea of police in emergency departments should not be ignored. If it is good enough for football spectators it is good enough for our health workers. I understand that the PA Hospital has a police beat liaison office for the mental health unit but not in emergency. In recognition of the increased stress the Labor government has placed on these places there is a strong argument in my mind that the Beattie Labor government is obliged to trial new safety measures in our emergency departments. Trialling police officers in the larger departments on the busy Friday and Saturday nights is something I would like to see happen. Certainly a review of the security levels at our mental health units is required.

I realise more than most just how much an increased police presence can assist in the keeping of order in adrenaline-high environments. It may seem bizarre to draw parallels between Indy and an emergency department but when Surfers Paradise is allocated more police during Indy problems are kept well in check as a result. More police during Indy ensures the safety of patrons and that undesirable behaviour and displays of violence or drunkenness are dealt with quickly. If it is good enough for Indy it is good enough for our health workers on Friday and Saturday nights.

Health services belong to the community, albeit provided and managed by the government. Consequently, the community should be fully informed about their health service. The government does make daily status reports of emergency department bypasses but these status reports are made available at 10 am each weekday morning, conveniently missing the busy night hours, the weekends and the demanding Friday and Saturday nights. If the health minister is as serious as he claims about being transparent with the communities that health services belong to this should be looked at. Furthermore, I would like to see the minister have each health service and/or hospital provide a detailed annual report for the community record. Such a move would be a recognition that health services belong to the community. These reports should include activity statistics such as waiting lists, budgets, new initiatives, staffing issues and others.

On another matter of transparency, from what I can gather health districts have not had their budgets handed down yet so they do not know what they have to spend, but I understand that draft budgets would be available now. I think the real reason for calling the election early may be uncovered in the budgets of health districts in the coming months. I suspect health budgets may indicate that the plan that the Beattie government was telling Queensland it had in place for dealing with health before the state budget was handed down and before the election was called is in need of serious revision.

I have been reading a lot since being given this role and to date this quote from the AMA president has resonated the most with me—

A health system without the necessary requirement of beds and the funding provision for service outside of salary allocation will not produce quality patient care, nor will it make way for good training for junior staff and students, be they doctors, nurses or allied health professionals, and it will not be an environment that fosters research.

I would like to conclude this section on the Health portfolio with a headline in the October edition of the *Doctor Q* magazine—'Making health promises—that's the easy part, now the Labor Government has to deliver'.

Turning back to the election campaign on the Gold Coast, first and foremost I would like to thank the people of the Surfers Paradise electorate for returning me to this House to represent them. It is very

humbling to retain the confidence of the community that first elected me in 2004 and with a 12 per cent increase in the primary vote.

Thanks must also go to my fantastic campaign team and volunteers, led by John Lander, Sonja and Les Howson, as well as my office staff, Josie Stinson, Cathy Ermer and Michael Zissis. I also want to thank Liberal Party members, booth captains, my friends and neighbours, my wife, Stacey, and my children. I want to thank them for their support, encouragement and loyalty throughout this campaign.

The people of Surfers Paradise have made it resoundingly clear that they want a Queensland coalition voice in this parliament representing their priorities. Change does not phase the people of the Gold Coast. We are an ever-changing, dynamic community. We are used to change and know the benefits change can bring. The people of Surfers Paradise are not afraid of change. In fact, they were seeking a change of government this year because the people of the Gold Coast have suffered at the hands of this Beattie Labor government for too long now and we have had enough.

The people of Surfers Paradise, like the rest of Queensland, watch and wait. The people of Surfers Paradise have watched Brisbane receive a 17-point safety action plan for the Brisbane CBD to cut down on street violence, including more police resources and late-night public transport services. The people of Surfers Paradise wait for its CBD to get the same treatment, treatment it should already have when one accepts that it has the highest concentration of night venues in the country.

We watch and we wait. The people of Surfers Paradise have watched and continue to watch the Gold Coast Hospital being put on bypass week after week and we have watched ambulances queuing in the emergency department's driveway. The people of Surfers Paradise watched the Labor government condemn the coalition's plan to redevelop the Southport Hospital to accommodate 200 new beds and open new patient services and condemn the coalition's plan for a hospital in the Coomera region. The people of Surfers Paradise wait for a day when the Gold Coast Hospital can in fact handle the health needs of our city.

I will be watching two plans very carefully—*The First 100 Days* and *Investing in the Future of the Gold Coast*. I will watch and I will wait and I will be jumping up and down if those opposite do not follow through.

The Gold Coast was slapped in the face when Premier Beattie announced his new-look cabinet—one minister out of 18 and not one of the 11 new parliamentary secretaries. That means that one out of the 29 cabinet and parliamentary secretary positions in the Beattie Labor government is held by a Gold Coast Labor MP. In the days after the election result the Premier defiantly said that the Gold Coast would get its fair share of representation. After the announcement of the cabinet the Premier said—

The Gold Coast has been favoured again. The Gold Coast has been given priority.

The Premier obviously thinks that giving the Gold Coast priority treatment comes in the form of granting one ministry. It is frightening to contemplate what priority treatment with regard to health, policing and infrastructure the Gold Coast has to look forward to in this Labor term.

The statement that the Gold Coast is adequately represented in the Labor government's cabinet is as ill-conceived as the decision to no longer have an Aboriginal and Torres Strait Islander policy minister, a move that I was surprised at and I will tell you why. The Queensland Labor Party should be congratulated on choosing an Indigenous candidate for the seat of Surfers Paradise, Guy Jones. But I can only imagine that Mr Jones would have been appalled at the deletion of the Aboriginal and Torres Strait Islander policy ministry from the Beattie cabinet. Only this year the Legal, Constitutional and Administrative Review Committee released a paper regarding the need for increased participation by Indigenous people in all levels of government and the various processes which feed into those levels.

The report's recommendations included acknowledgement that strategies and a plan were needed to encourage political parties to support Indigenous people in various aspects of party processes. If there is anything this government loves it is a plan. I sometimes feel like I am in an episode of *Get Smart* with the Premier playing Maxwell Smart telling the Chief—the people of Queensland—'It's ok, Chief, I have a plan.' Despite this and the review committee's report, it seems the recommendations have been disregarded by the Beattie government, just as the Premier disregarded a meeting with Indigenous elder Sam Watson after he led a protest on the steps of parliament after Labor dumped the Indigenous affairs portfolio. That same day Sam Watson praised former ATSI ministers but totally omitted John Mickel, who will have to live with the stain of a community betrayed by his carriage of the portfolio and just how vigorously he prioritised Indigenous issues in Beattie government cabinet meetings.

I would like to return to the campaign in Surfers Paradise for a moment. Whilst for the most part the campaign was conducted in good spirits whenever I met Guy Jones, I have to express my disappointment at the Labor candidate's lack of vigour in the electorate and his attempts to slyly attack the man, not the issues. There was no mention of the health crisis, no mention of the water crisis, no mention of the

transport crisis, or indeed the credibility crisis of this Beattie Labor government. This was just another smokescreen tactic employed by a Labor candidate, an attempt to send up a smokescreen to mask the fact that ward 14 of the Gold Coast Hospital remains closed and a convenient place for storage, an attempt to send up a smokescreen to mask the fact that today approximately 800 patients of the Gold Coast Hospital are expected to wait 10 weeks for diagnostic scans—double the waiting time of 12 months ago.

A more sinister smokescreen tactic in the election was the misuse of the pecuniary interests' register. This became a stick to beat politicians over the head with during the campaign. Mr Speaker, I hope that you advised the Clerk to tell all new parliamentary members at future inductions to divest themselves of their shares, because nobody told me that I should. But during the campaign, the Premier, in an attempt to keep this political diversion working, said politicians should only own shares in managed funds. Who died and made him God? The *Code of Ethical Standards* for this place says nothing of managed funds or advises anything similar. I think we need to look at this register issue. We need to examine whether the information contained within the register is used appropriately. I was dumbfounded by the smokescreens, which I saw as ludicrous and offensive to the electorate but were so appealing to the media.

I will be watching and waiting for the people of Surfers Paradise this term. I will be watching and waiting on whether the delivery of health promises is followed through by those opposite and whether the crisis is any less as a result. I look forward to a very observant term in this place.