



Speech by

Dianne Reilly

MEMBER FOR MUDGEERABA

Hansard Tuesday, 16 October 2007

ROBINA HOSPITAL; FEDERAL HEALTH AND AGED CARE POLICIES

Mrs REILLY (Mudgeeraba—ALP) (12.12 pm): Recently I was delighted to join the Premier, Anna Bligh, and the Minister for Health, Stephen Robertson, at the official opening of the new accident and emergency department at Robina Hospital. This \$40 million, 40-bed emergency department and 10-bed intensive care and coronary care unit is the first of a two-stage expansion that will see Robina Hospital grow by an extra 180 beds to a 364-bed teaching hospital by 2009.

In its first three weeks the Robina emergency department treated 1,100 patients—it opened on 3 September—with between 60 and 70 patients being treated daily. That number should increase further to up to 100 patients per day over the next two months. The new emergency department is expected to treat more than 30,000 patients in its first year. Its world-class design complements current models of care and provides a refreshing and practical environment for emergency patient care. The new emergency department also includes a special decontamination area equipped for biohazard emergencies or patients suffering from infectious diseases. A special care area will treat patients with minor bumps and bruises and that will reduce waiting times for all patients.

For the first time the Gold Coast has two public hospital emergency departments. The pressure is expected to ease on the other end of the coast at the Southport Hospital emergency department, which saw more than 65,000 patients last year. It is the busiest emergency department in the country.

The 10-bed ICU and coronary care unit at Robina is also providing much-needed intensive care services, complementing the 11 ICU beds at Southport Hospital. The Robina Hospital redevelopment also included a new 14-bed renal unit, which will see 56 patients receive haemodialysis every week and there is also additional training for patients to be able to undertake their own dialysis at home.

Robina Hospital now employs more than 1,000 staff and Queensland Health is the largest employer on the Gold Coast with more than 4,000 staff. The state government is currently spending \$1.2 million each and every day providing health services to the Gold Coast community, and this investment will only increase. The Robina Hospital expansion and continued development represents the very best in health planning and delivery, because it is being done and has been done in close consultation and collaboration with the clinicians and the doctors who use it.

This is in stark contrast to the federal government's ad hoc, knee-jerk reactionary policy which sees opportunistic takeovers of small hospitals in marginal seats for political purposes, such as the takeover of the Mersey Hospital in Tasmania. Just today we have heard confirmed what we always suspected: the federal government ignored advice from independent and objective clinicians and health professionals and jumped in to take control of the Mersey Hospital just to try to win a few votes and save a local Liberal member.

The Abbott and Costello health policy may be slapstick, but it is hardly funny. It is a policy that pits one community against another. It places a higher value on the health needs of people in marginal electorates. It is a policy that ignores the health needs of Australians in safe seats, such as Moncrieff and

McPherson. It is a blame-shifting, cost-shifting, responsibility-shirking approach and, frankly, Australians are sick of it.

It is a very small policy, too, may I add, if the coalition's policy document, which I have just found on the internet, is anything to go by. I have four pages here, but one page is the cover and one page is the contents outlining what is on the other two pages. That is the sum total of the coalition's national policy, dated October 2007, titled 'Australia: strong, prosperous and secure'. The federal government's health and aged care policy takes up a good half-page of this lightweight document that details all of the coalition's policies.

Interestingly, it does not include reference to the coalition's policy cornerstone: the reintroduction of community boards to administer local hospitals. Queensland experimented with local hospital boards during the Bjelke-Petersen era and they were a disaster. Maybe the federal government knows that, because it is not prepared to commit that to paper as a policy. The local hospital boards were financially inept. They borrowed heavily. They racked up a debt of borrowings of \$313 million by the time they were scrapped by the Goss government in 1992. The independent Forster report into the Queensland Health system was scathing of any suggestion that we return to local government hospital boards, saying that they were politically appointed and no longer relevant or appropriate.

I ask members to contrast that to Labor's \$2 billion health and hospitals reform plan. It is a visionary reform plan for the nation and it is for all Australians. It is about working in partnership with the state. It is about focusing on prevention, promotion and early intervention. It is about delivering alternatives to acute hospital admission and it is about delivering primary care and aged care to take pressure off our hospitals.

A Kevin Rudd-led federal government will retain the Medicare safety net and invest \$220 million in GP superclinics where they are most needed, because the Australian Labor Party believes that all Australians deserve access to quality health care, not just those in marginal seats.