



Speech by

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MEMBER FOR TABLELANDS

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MEDICAL POSITIONS

Ms LEE LONG (Tablelands—ONP) (6.11 pm): Tonight's motion goes to the heart of the health crisis plaguing Queensland and the need for many more locally trained doctors, radiologists, specialists, dentists, nurses and so on. It is an urgent need recognised by all Queenslanders across the state, and Queensland Health has a duty of care to the people of Queensland to provide an acceptable health service.

As it is, services across Queensland continue to close or are affected by the lack of medical professionals. Rolling shutdowns of essential high-tech equipment is occurring due to a lack of staff to operate it. Other services simply disappear. For example, in my electorate four maternity services were dropped from Mareeba Hospital due to the difficulty in finding a properly qualified obstetrician. Fortunately, a highly skilled team of midwives was able to provide an alternative, but not everywhere is so fortunate. Ingham, Mossman and many other hospitals have lost all maternity services. In fact, half of all Queensland maternity wards have been closed over the past 10 years or so.

The Cairns Base Hospital faces seemingly regular battles to maintain heart, cancer, urology and other services that should be a regular part of any major hospital's suite of functions. Even Townsville Hospital, the largest in the north, has faced similar problems as well as the cancellation of surgery due to a lack of qualified staff.

Those shortages extend across the entire range of medical professions and the state. The shortages are so severe that the most recent study of Queensland Health uncovered a list of patient files that included some marked 'never to be seen'. The list was gob-smackingly huge. Reportedly there were 140,000 patient files on the list, all of whom were waiting for specialist outpatient care and some of whom were never going to be seen or treated.

This is absolute proof of the impact of the shortages that have been evident to the Queensland public for many years. The minister's reported response was to say that the situation is unacceptable and is going to change. The people of Queensland are sick and tired of hearing these words over and over again. They want to see some action and some real results for a change.

The report also found that, unless there were changes, Queensland Health in its existing form would be out of control by 2012. There is a clear need for sweeping changes as the Queensland public have legitimate questions about how a Queensland Health department could ever deliberately leave people untreated.

There is only one real way for change and that is for more doctors and other specialists and nurses to be available to our Queensland public hospitals. At present, only 50 per year are being offered scholarships by the Queensland government and clearly that is insufficient and unacceptable while \$60 million per year is spent on walking bridges. That money would be better spent on providing for another 200 Queensland students per year. As our population increases—and we hear about that every sitting week—it is obvious that wards have to be opened, beds made available and staff increased just as the provision of water, housing and other essentials needs to be increased.

There has been a reliance on overseas trained doctors. They have been a vital lifeline under the circumstances, but they are not the long-term solution. This state needs to take control of its own destiny.

Young Queenslanders must be given the opportunity to undertake the relevant university courses and training. The state government has already shown that it has the capacity to act on its own via the very small scholarship program that it is already offering.

This motion tonight is not a radical proposal. It takes something that the government is already doing and builds on it. Tonight's motion focuses on young Queenslanders not only to ensure that it is our youth who have this opportunity but also because it is well understood that a local is more likely to remain local once trained. This motion does aim at addressing needs in those areas of Queensland where the tyranny of distance adds to the difficulty of accessing medical services.

It is important to remember that for very many Queenslanders the private health system is no answer. For many of those on low incomes or pensions, private health cover is simply too expensive to be accessible. If they are able to afford private cover, many will not be able to afford the ever-growing gap payments. Even if they could, in country areas they are faced with at times enormous travel difficulties, especially in rural areas and as they age.

The public hospital system is the only real answer to the health needs of many areas of Queensland. I believe that the Medicare system is becoming so useless for so many that we would be better off with the funds being returned to the states. When health services were entirely state funded and controlled, Queensland had a proud history of having the best public hospital system in the country. Perhaps we need to go back to the future.

A program such as is being suggested will come at a cost, but the alternative is to leave our hospitals undermanned, our existing staff overworked and stressed beyond endurance, and Queenslanders waiting far too long for treatment, that is, provided their files have not been marked 'never'. If it is possible to plan for the multi-million dollar cost of yet more pedestrian bridges in Brisbane, surely it is possible to fund young doctors, radiographers, anaesthetists, nurses and dentists for rural and regional Queensland. Another clear example—

Time expired.