



Speech by

# Hon. Stephen Robertson

## **MEMBER FOR STRETTON**

Hansard Tuesday, 6 February 2007

## HEALTH AND OTHER LEGISLATION AMENDMENT BILL

### Second Reading

Hon. S ROBERTSON (Stretton—ALP) (Minister for Health) (12.50 pm): I move—

That the bill be now read a second time.

I am pleased to introduce the Health and Other Legislation Amendment Bill 2007 into the House. The bill makes three main sets of amendments. Firstly, the bill amends the Mental Health Act 2000 to give effect to a number of recommendations from the final report of the review of the Mental Health Act 2000, *Promoting balance in the forensic mental health system*, and to allow for the appointment of a second judge to the Mental Health Court to address the rising workload of the court. Secondly, the bill amends the Tobacco and Other Smoking Products Act 1998 to prohibit the sale and commercial display and supply of ice pipes and bongs. Thirdly, the bill amends the Ambulance Service Act 1991 and the Health Services Act 1991 to create a regulatory framework for the conduct of a quality improvement technique called 'root cause analysis' in relation to a reportable event that happened during the provision of a health service by a public sector health service, a private health facility or the Queensland Ambulance Service.

I turn first to the Mental Health Act amendments which give effect to 10 of the recommendations made by Brendan Butler in his final report of the review of the Mental Health Act. The review of the Mental Health Act aimed to balance the rights and needs of people with mental illness with the rights of victims of serious violent offences and their families. The purpose of the Mental Health Act is to provide for the appropriate assessment, treatment and protection of people with mental illness. However, it is essential that we address the freedoms and rights of the broader community, particularly victims of serious violent offences committed by persons who are, or later become, forensic patients.

For example, the amendments simplify the process by which victims and their families can have their say in the Mental Health Court and Mental Health Review Tribunal prior to decisions relating to whether or not a person is of unsound mind or is unfit for trial; whether or not to make or revoke a forensic order; whether to order, approve or revoke limited community treatment for a person under forensic order; and any conditions the court or tribunal may impose on an order for limited community treatment.

This legislation will assist victims in preparing submissions for the court or tribunal by providing guidance about the content of their submission. Further, the Mental Health Court will now be required to provide reasons for taking or not taking into account material submitted by victims and others when making decisions. To ensure the protection of victims these reasons may be the subject of a confidentiality order. The amendments also replace non-specific terms with specific victim focused language, while ensuring at the same time that others with particular interest are not inappropriately excluded. To this end, the amendments replace the term 'non-party' with 'victim or concerned person' to address the needs of victims for recognition within the forensic mental health system. The bill also clarifies that the Attorney-General has responsibility for representing the public interest in tribunal hearings.

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The remaining recommendations from Mr Butler's report are being fully considered as part of the 2007-08 budget. The other amendments to the Mental Health Act allow for one or more additional Supreme Court judges to be appointed to the Mental Health Court and for the appointment of the President of the Court. Currently, the act only allows the Mental Health Court to have one judge. The amendments were requested by the Chief Justice of Queensland and will help the Mental Health Court manage its increasing workload.

I now turn to the amendments to the Tobacco and Other Smoking Products Act. The amendments prohibit the sale and commercial display and supply of ice pipes, and are a key part of the government's Icebreaker Strategy announced last December which aims to address the harm caused by the illicit drug crystal methamphetamine or ice.

The definition of 'ice pipe' will specify that it is a device capable of being used for the administration of a dangerous drug by smoking or inhaling the smoke or fumes resulting from the heating or burning of the dangerous drug in its crystal, powder, oil or base form. The form of the drug is specified in order to ensure that pipes which are capable of being used to smoke tobacco are not captured. This is consistent with other provisions of the Tobacco and Other Smoking Products Act which do not prohibit tobacco-smoking implements. The definition is deliberately broad to give effect to the policy intent to remove ice pipes from retail display. The definition of 'ice pipe' will also include devices that are apparently intended to be an ice pipe but cannot be used because they need an adjustment, modification or addition. This is to ensure that partly assembled ice pipes and/or components of an ice pipe are also captured by the prohibition.

Given the time, I seek leave to have the remainder of my second reading speech incorporated in *Hansard*.

#### Leave granted.

In addition, the bill will amend the Tobacco and other Smoking Products Act to address a loophole which allows retailers to display and sell the individual components of cannabis utensils, colloquially known as bongs. The amendments will close this loophole by prohibiting the sale and commercial display and supply of bongs and their components.

Traditional hookahs for smoking flavoured tobacco are excluded from the ban. A hookah is usually used to smoke flavoured tobacco and has significant cultural meaning for some of Queensland's ethnic communities. However, the bill restricts the number of hookahs that can be displayed to a number prescribed by regulation.

It is not intended that the sale, display or supply of innocuous household or industrial items are to be captured by the broad definitions of 'ice pipe' and 'bong'. Therefore, a defence is inserted to ensure that the prohibition does not capture items that are not primarily designed to be used for the purpose of administering a dangerous drug.

The introduction of these bong and ice pipe provisions clearly demonstrates that this Government is committed to the war against dangerous drugs.

Mr Speaker, I now turn to the Health Services Act and the Ambulance Service Act amendments.

These amendments provide a statutory framework to facilitate the conduct of Root Cause Analysis (RCA).

RCA is an internationally recognised incident management technique for identifying and addressing system issues. It is a structured process that involves the establishment of a multidisciplinary team to retrospectively analyse the chain of events responsible for an adverse event. The analysis, which focuses on system issues, is conducted to help find out what happened, why it happened and what must be done to prevent the event from happening again.

The evidence is clear from other high risk industries, such as aviation, that effective incident management techniques which are focused on prevention, rather than punishment, are an essential tool in developing an organisational culture necessary for improving safety and quality.

Mr Speaker, simply looking for someone to blame is unlikely to shed any light on chain of events that lead to an adverse event or how to prevent this chain of events happening again.

For example, if a nurse dispensing medication to patients is continually being interrupted, there is an increased risk that the nurse will become distracted and give a patient the wrong medicine. Blaming the nurse is not going to prevent the next nurse from making the same mistake, because the underlying cause—the interruptions—has not been addressed. If, on the other hand, ward practices are changed to minimise the interruptions, the next nurse is much less likely to make the same mistake.

These amendments are about making the delivery of ambulance and health services safer for all Queenslanders.

Participation in an RCA is voluntary and the bill provides statutory privilege to information and documents created for RCA purposes.

However, the legislation will not prevent pre-existing information being used as evidence in civil, criminal, coronial or disciplinary proceedings.

At the conclusion of their analysis, the RCA Team will be required to prepare an RCA Report that includes:

- a description of the reportable event
- a causal statement of the reasons why the team considers the event occurred
- recommendations for changes or improvements in policies, practices or procedures that may reduce or prevent recurrences
  of the same type of event

The report will be provided to persons with a personal and professional interest in a reportable event as well as:

- the chief health officer of Queensland Health (who has statutory responsibility for the licensing of private health facilities);
- a coroner investigation the death of a person;

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 the newly established Health Quality and Complaints Commission (HQCC) which has responsibility for monitoring, assessing and reporting on the quality of health services provided by or for a provider.

This bill will give effect to a recommendation of the Queensland Health Systems Review Final Report concerning the development of legislation encouraging and protecting good quality and safety assurance analysis within health services. It will also deliver on part of the Government's Action Plan—Building a better health service for Queensland.

Mr Speaker, before I conclude I would like to highlight that the legislation requires that a review of the RCA provisions be conducted within 2 years of the legislation coming into effect and that a report be tabled in this House within 12 months of the review being completed.

The development of a bill such as this involves extensive consultation with stakeholders. I would like to take this opportunity to thank all those who were involved with the development of the bill.

I commend the bill to the House.

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