



Speech by

Hon. Stephen Robertson

MEMBER FOR STRETTON

Hansard Wednesday, 8 August 2007

MEDICAL POSITIONS

Hon. S ROBERTSON (Stretton—ALP) (Minister for Health) (5.41 pm): I move—

That all words after “calls” are deleted and the following words inserted—

1. on the Federal Government to restore the 50:50 funding arrangement for health care in Queensland under the Australian Health Care Agreement and immediately invest \$2.6 billion in Queensland Hospitals to match the additional funding invested by the Beattie Government in Queensland Health over the past 5 years; and further
2. acknowledges the Beattie Government’s unparalleled initiatives to increase the number of clinicians through state scholarship programs. These include the 235 new medical places at Griffith University through the Queensland Health Bonded Medical Scholarships Program and the Queensland Health Rural Scholarships Scheme which offers 92 scholarships to medical, allied health, dental, and nursing students each year.

While appreciating the motion that the member for Nicklin moved on behalf of the member for Tablelands, we find ourselves not so much in disagreement with it but wanting to further articulate and hold responsible the level of government most responsible for the medical workforce in this country. That lies fairly and squarely at the feet of the federal government. We have talked about this for some time and particularly over the last couple of years. Responsibility for tertiary education in this country rests with the federal government. The result of the narrow sighted planning and the failure to plan by the federal government back in the 1990s—that is, to, in effect, freeze the number of medical student places at universities right throughout this country—is the current chronic shortage of doctors that we are experiencing not just here in Queensland but right throughout Australia.

Members have seen the advertisements we published last year that showed that as Australia’s population increased over the last 10 or 15 years the number of graduates coming out of our medical schools basically flatlined. At the same time as our population was increasing our population was ageing. At the same time that that was happening doctors themselves were retiring in ever-increasing numbers. At the same time as that was happening the medical workforce was making decisions about their work life balance. So much so that the average working hours of GPs has declined over the last number of years. Part of that was due to the increase in the number of female doctors working in our system who did not want to work full time but wanted to work part time, as is their right.

The net effect of all of that is the crisis that we have here in Australia at this point in time and which causes us to rely, not just in Queensland but in other states as well, so heavily on the employment of overseas trained doctors. I have said it before and I will say it again, whilst I am a great supporter of our overseas trained medical workforce in this country there is an ethical position that I think Australia as a rich Western economy should have always adopted and that is that we should be a net exporter of doctors to the world. I think it is ethically reprehensible that we should be recruiting doctors from countries where the doctor to population ratio is far greater than anything we could possibly imagine in Australia. That is not to say we should not welcome them here. We should, but we should be a net exporter of doctors to the world.

So what has Queensland done about it? We have not sat back and simply blamed the federal government, but more so than any other state in this country we have got off our backsides and funded, at

this point in time, 235 bonded places at the new Griffith University medical school. They are bonded to achieve exactly what the member for Tablelands wants to see achieved. Once they graduate they are bonded to work in rural and regional Queensland for five or six years. That is 235 places, which is worth \$60 million. That is a \$60 million investment in those places. That is \$60 million that we could have been investing in hospitals at Mareeba and Atherton as an example. But instead we have to pick up the slack from the federal government's failure to invest in our medical workforce.

So it is right across-the-board—nursing and the allied health professions as well. Queensland recognised its responsibility. We recognised the critical need to get those clinicians out into rural Queensland. We will continue to do so. As I have said in this debate over the last couple of years, what we need to have happen in the first place is the level of government that has the principal responsibility for this area doing its job. That is what it is not doing at this point in time. Hence the amendment that I have moved tonight. I hope members will support it in the spirit in which it has been moved.