



Speech by

Hon. Stephen Robertson

MEMBER FOR STRETTON

Hansard Wednesday, 8 August 2007

APPROPRIATION (PARLIAMENT) BILL AND APPROPRIATION BILL: ESTIMATES COMMITTEE B

Hon. S ROBERTSON (Stretton—ALP) (Minister for Health) (2.51 pm): This year's estimates committee hearing for the Health portfolio exposed two things—one, an ill-prepared and ill-informed opposition which displayed a disturbing lack of understanding about how the health system works and, two, an alternative health minister who cannot even read a budget.

A number of points raised by the member for Surfers Paradise in his dissenting report are incorrect and expose his complete lack of understanding about the Health portfolio. For example, he criticises Queensland Health for its alleged tardiness in reviewing the department's massive capital works program. Following the Forster review, Queensland Health gave an undertaking to conduct a thorough review of the capital program including extensive research and consultation with health service districts. Any review of a capital program spanning over 120 projects with a budget in excess of \$550 million in 2006-07 alone is a significant feat. The fact that this review has now been completed clearly shows the department's commitment to ensuring the capital program will support the delivery of high-quality and accessible health services for the people of Queensland. In fact, significant progress has been achieved with improved governance, management and reporting of capital works. That means taxpayers can have confidence that future Queensland Health capital works initiatives are the result of robust service planning and capital planning. For these reasons, the tardiness comment by the member for Surfers Paradise demonstrates his lack of awareness of the enormity of the task that has been undertaken or its benefits.

The member also criticised the department's new performance budget framework. This new funding model brings Queensland into line with all other states and is an important step towards the reform of the Queensland health system. The model is a positive for hospitals because it will devolve funding decisions closer to the patient, increase transparency by linking funding to populations and activity, support health service planning and provide increased funding certainty for health service districts. If the member thinks incentives for performance are a bad idea, then he should tell his coalition colleagues in Canberra. The Australian government uses incentive payments administered by Medicare to improve the health of Australians through quality provision of general practice. These include service incentive payments, the general practice immunisation incentive and the Practice Incentives Program.

Finally, I turn to elective surgery, an area where the member for Surfers Paradise really put his foot in it. He says in his dissenting report that initiatives to address elective surgery waiting lists 'have not translated into any significant improvement to elective surgery waiting lists'. Clearly he has not read the quarterly public hospital performance report for the June quarter 2007, as was demonstrated graphically in the chamber this morning. That report shows that our hospitals are performing significantly more elective surgery and that during the 12 months to 1 July 2007 provided surgery for 140,509 elective patients. The performance report also shows that we are successfully targeting those patients waiting longer than nationally recommended for surgery. Particularly pleasing is the fact that the percentage of long-wait elective surgery patients continues to fall. The percentage of urgent category 1 patients waiting longer than

is nationally recommended—30 days—fell to 6.4 per cent compared to 11 per cent of patients for the same quarter last year.

The 2007-08 health budget estimates were notable for the obvious inability of the alternative health minister of this state to read and interpret budget papers. This is a real concern given that the budget for health, now worth over \$7.15 billion annually, represents approximately 25 per cent of the overall state budget. What the estimates committee hearing exposed was that the opposition health spokesperson had no idea about the impact of the well-known machinery of government changes on the budget despite at least eight specific references to those changes in the Ministerial Portfolio Statement. Whilst the opposition health spokesperson has tried to make something of a misplaced decimal point in his dissenting report, a more telling performance measure is the four press releases from the member which spectacularly blew up in his face and exposed the opposition for the fiscal amateurs so many Queenslanders understand them to be.