



Speech by

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MEMBER FOR SURFERS PARADISE

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MATER PUBLIC HEALTH SERVICES BILL

Mr LANGBROEK (Surfers Paradise—LNP) (4.45 pm): In rising to speak to the Mater Public Health Services Bill 2008, I acknowledge the contribution of my colleague the member for Caloundra, Deputy Leader of the Opposition and shadow health minister. I acknowledge his support for the bill on behalf of the LNP. I enjoyed the historical elements of his speech, as was also mentioned by the minister in his second reading speech, because I think it is interesting to note that Mater Misericordiae health services—

A government member: You didn't do Latin?

Mr LANGBROEK: No, I did not do Latin. They did not do Latin at Sunnybank State High School in the seventies! When I look back at the history of Queensland, I note that in the era from 1904 to 1906, which the honourable member for Caloundra mentioned, there were 103,000 voters at the election in 1904 across the whole state and there were 2½ million at our last election in September 2006. That shows how Mater health services has grown from a very humble beginning but, nonetheless, a valuable service was provided back then and before then, and both the member for Caloundra and the minister mentioned this history. It is interesting to see how much growth there has been. Of course there has certainly been a major change to the conditions at the Mater near Woollongabba. If one were to drive there now and compare the the traffic and the number of people to what it would have been like in the idyllic days of the early 1900s it really would be a contrast.

I note the objective of the bill is to introduce a statutory framework for the delivery and funding of public health services by the Mater Misericordiae Health Services Brisbane Ltd; that it acknowledges the special relationship that exists between the Mater and Queensland Health; and that it creates a new act, the Mater Public Health Services Act 2008, following previous unsuccessful licensing negotiations. I note that there are amendments to the Private Health Facilities Act 1999 at part 7 of the bill to allow the three Mater public hospitals—the Mater Adults, the Mater Children's and the Mater Mothers'—to be licensed as private facilities for the purposes of providing funding and delivery arrangements between the Mater hospitals and Queensland Health.

Part 5 of the bill amends the Child Protection Act 1999 to include the chief executive officer of the Mater as a prescribed entity for the purposes of authorising the disclosure of information concerning children at risk of harm. Part 6 of the bill amends the Health Services Act 1991 to omit section 65 because of a redundancy. These were all issues that were covered by the shadow minister in his presentation. I note that the confidentiality provisions in part 7 of the Health Services Act 1991 limit the ability of Queensland Health to disclose this information currently to Mater health professionals, and of course with this bill that now becomes redundant.

I note that the Mater private hospitals are licensed under the Private Health Facilities Act 1999 but the Mater public hospitals are not. Although the Mater public hospitals treat public patients, they are not operated by the state and, therefore, are private hospitals under the Private Health Facilities Act 1999. The licensing of the Mater public hospitals will acknowledge their status as private hospitals under the Private Health Facilities Act 1999 and ensure that licensing standards apply to all of the Mater hospitals at South Brisbane.

As I mentioned, the amendments to chapter 5A of the Child Protection Act 1999 promote coordination of service delivery to children and authorise the exchange of relevant information concerning children at risk of harm between prescribed entities, primarily government service providers and other service providers. It also affords protection from liability, for example, for breach of confidentiality to service providers who, acting honestly, give relevant information to a prescribed entity. I acknowledge that those comments come from the explanatory notes.

As I mentioned, the three public hospitals operated by the Mater are funded by the Queensland government and provide services to public patients under a 20-year funding agreement since 2002. Although those three hospitals are operated privately, they are not licensed under the Private Health Facilities Act. The bill provides for the issuing of a new single licence covering the three public hospitals as well as the three private Mater hospitals. The existing funding arrangements under the 20-year agreement, which specify yearly funding levels and specific undertakings for the delivery of public services, will continue after the commencement of this bill.

To enhance patient care services, this bill authorises a designated person to disclose confidential patient information to Queensland Health or Mater professionals if it is for the care or treatment of the patient. Additionally, as I mentioned before, the changes to the Child Protection Act 1999 recognise that, under present arrangements, other health service providers are reluctant to share child safety related information because the Mater hospitals are not prescribed entities under that act. As I say, the act will be amended to include the chief executive officer of the Mater.

I also want to mention something that the minister was concerned about during the presentation by the member for Caloundra, and that was the new children's hospital and any shared facilities. In my shadow portfolio of education I know that there are educational facilities at both the Mater Children's Hospital and the Royal Children's Hospital. These often provide services for children from rural and regional areas of Queensland who are accessing hospital services and sometimes the siblings of those patients if the families have come to Brisbane. I understand that in the new children's hospital there are some space concerns and there is an ongoing debate between the education department and the health department about who is going to fund this educational facility and also as to whether there is a chance that there could be a split campus between the current Mater Hospital and potentially a new education facility in the children's hospital. So as the member for Caloundra mentioned, there could be some funding issues in terms of money that is currently provided under this legislation going to the Mater Hospital which will somehow be then mixed up with funding for the educational facility in the new children's hospital. I seek the minister's clarification, if he would be so kind in his summing-up, as to what may be happening in terms of those educational facilities in the new facility and/or whether there may be a split campus which, obviously, could be difficult in terms of the provision of educational services. With that short contribution, I commend the bill to the House.