



Speech by

## Dr Alex Douglas

MEMBER FOR GAVEN

Hansard Wednesday, 4 August 2010

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

**Dr DOUGLAS** (Gaven—LNP) (4.15 pm): I have serious concerns about the veracity of the reports regarding patient lists for elective surgery at Queensland hospitals. I have significant concerns about both the Gold Coast and Robina hospitals. I also wish to raise an issue about the response of the minister to the vexed issue of mental health and suicide. Obviously, the health payroll issue is the dominant issue and remains unexplained. I appreciate the video streaming provided to me by the parliament's IT service during the week whilst I was severely hampered as a result of my wife's illness.

The shadow minister has detailed our mutual concerns. It is my belief that the minister has spent far too much time personally criticising the shadow spokesperson and the LNP and far too little time on the crucial portfolio that he administers. As has been said, in this state the budget for Health is very significant. In Health, the message that is sent when one diverges into the penchant for personal criticism, particularly about senior health staff, is that you are hiding something. I know some of the senior medical people who attended with the minister, and personally I believe they have nothing to hide. This is totally unprofessional. In health we share information freely. That is how medical progress is made. The minister still has quite a bit to learn about his portfolio.

I wish to start with the minister's response to questions about the waiting lists. The minister seems to have a standard reply to waiting list questions and his assessment of his own reporting mechanism and its timeliness. Waiting list reporting has become unintelligible to any medical or nonmedical person. On the Gold Coast the reports are generally not believed at all. That is not a random statement, but represents a general view. The former director of a senior hospital surgical department on the Gold Coast has informed me of other measures taken under the stewardship of this current Minister for Health to underreport or report falsely. There is the waiting list to get on the waiting list, which is unpublished. There is the method to routinely take all patients off the list when the surgeons take scheduled holidays or study leave. There is the use of random telephone calls to check so-called details of patients and if there is no response they are taken off the list. Another much-used technique is to put the patients through all manner of check-up clinics before they are deemed acceptable to be added to the list.

In an area like the Gold Coast, with a large aged population and a mobile and somewhat transient population, the waiting list can look very different to the actual numbers, especially when the region hosts 10 million tourists a year. This was highlighted in the latest release from Queensland Health South Coast. It was dubious at best and nonsense at worst. If the minister is unable to prepare a correct report that passes the acid test of veracity, we can provide ample examples of how best to do it.

Irrespective of any explanation given by the health minister at estimates, the impact on the Gold Coast Hospital of the Health payroll debacle really was proportionately the worst in the state. Long after all the crazy things—after every reason in the world was given and irrespective of what was said at the time about earlier lists of zero payments—the pay system subsequently has paid out a staff member \$106,000 whose payroll number was 106,000, long after he told us the worst was behind us. At the Gold Coast

Hospital there is a far greater problem with the payroll than the minister is willing to concede. The issue is not dead yet. It will go on for quite a deal of time.

In response to the minister's comments regarding mental health and suicide, there is far too much emphasis on questions of stigma and not enough on the serious problems of youth and adult suicide. Similarly, questions on mental health sounded like broken record replies with the denouncement of volunteers in this area. I urge the minister to seek advice and have another look at this area very closely. Without volunteers we will never collectively climb the mental health mountain. John Mendoza was right when he said that Labor has no real commitment for action and progress in mental health. He correctly said that Labor wants to talk about it but do nothing. Mental health is hard, it is expensive and it affects far too many in the community. I call on the minister today to join with the federal LNP's \$1.5 billion health initiative for this very deserving group in society who include many people who are currently excluded or are fringe dwellers.

I am not convinced that there is an ongoing process internally within Queensland Health that is doing enough to ensure that staff clearly understand coalface medical issues. Not enough information can be gleaned from any reports or questions raised at estimates that reflected an ongoing process of renewal in this very, very large department. I was left wondering whether there was any real commitment to 'doing money'—that is, funding for patients, not capital expenditure or staff wages/salaries. I urge the minister to consider this matter, and I think he needs to report on that appropriately. This was missing in the estimates process.