




Speech by

Shane Knuth

MEMBER FOR DALRYMPLE

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HEALTH AND HOSPITALS NETWORK AND OTHER LEGISLATION AMENDMENT BILL AND HEALTH LEGISLATION (HEALTH PRACTITIONER REGULATION NATIONAL LAW) AMENDMENT BILL

 **Mr KNUTH** (Dalrymple—KAP) (10.18 pm): I rise to speak to the Health and Hospitals Network and Other Legislation Amendment Bill. I very much support this bill. I think it is long overdue. We have waited for over 20 years for something like this to be put in place. I really believe that the Queensland health system has gone downhill ever since the hospital boards, especially the local hospital boards, were removed from the health system.

In my previous electorate of Charter Towers, which covered 270,000 square kilometres, towns like Aramac, Alpha, Hughenden, Richmond, Clermont and Moranbah used to provide maternity services and they were full-time maternity services. I have seen maternity services removed from those areas. Expectant mums who are about to give birth now have to spend up to two or three weeks in a hospital in a major regional centre, and I feel that that is unacceptable. If we had had hospital boards to ensure that those maternity services were put in place and not removed, we would not be in this situation, especially when you look at towns like Moranbah, which produces over \$6 billion in revenue but does not have a maternity service.

Clermont is another area experiencing a massive expansion and is booming, but it does not have a maternity service, it does not have a surgical unit and it does not have a hospital board. I am very appreciative of the minister for introducing this bill. I spoke to him in relation to district boards and going one better. It is much more important to have local hospital boards with local representation which understand their communities and their hospitals, to have local people having a say in how their hospital is to be run and to have direct communication between local communities and the minister, which is important. District boards are a step in the right direction and no doubt will bring benefits.

Another policy which I believe is a very important extension of this is to ensure nurses are trained in local hospitals and spend less time in universities. I believe a hands-on approach is less of a cost factor for the nurses. Attending university and spending time away is a cost factor which they do not need. I believe a hands-on approach is much more important than spending time in universities. Being a rural and regional Queenslander through and through, the more we support the health services in rural and regional Queensland, the more we can retain people in rural and regional Queensland. That means fewer people on the roads and fewer people having to travel to major regional hospitals or coastal hospitals such as Mackay, Cairns and Rockhampton. Most importantly, it keeps the pressure off regional hospitals such as Cairns, Mackay and Rockhampton. If we look after those services in regional or rural areas and put resources into those services in rural areas, we will keep those people in rural areas, we will keep pressure off major hospitals and keep people at home. That is very important. This is definitely a step in the right direction and I hope we see benefits from this.

I want to mention the Atherton Hospital. I note that the member for Mulgrave, who is in the chamber at the moment, provided support in getting a CT scanner at Atherton Hospital. That has brought great

benefits. It saves about a thousand people a year going from the Tablelands to the Cairns Base Hospital in an emergency. It gives surgeons an opportunity to assess the situation in Atherton, so it saves in transport costs. It costs about \$660 an hour to transport a patient by ambulance to Cairns and I think it is about \$6,000 an hour by helicopter. Having a CT scanner reduces the cost to the taxpayers and the community, and it keeps surgeons and people in major centres. That is a good investment.

We have a chemotherapy service in Atherton. However, for some reason or another people have been forced to go to Cairns to receive chemotherapy treatment even though we have that service in Atherton. It needs to be investigated why people in the Tablelands who need chemotherapy still have to go to Cairns when we have a chemotherapy service there. These people are not well. They are suffering and they have to go down the range, look for a car space, get chemotherapy treatment in Cairns and then travel back to the Tablelands when we already have the service in the Tablelands area. We need to ensure that we keep those patients in the Tablelands.

It is important that we keep the regions and rural areas alive. Hospital boards are a step in the right direction. We need to get back to local hospital boards, but district hospital boards are far greater than what we had in the first place. I support the bill and I wanted to bring these issues to the attention of the House.