




Speech by

Steve Davies

MEMBER FOR CAPALABA

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

 **Mr DAVIES** (Capalaba—LNP) (5.05 pm): Firstly, Mr Deputy Speaker Krause, I congratulate you on taking the chair.

A government member: He looks good in it, doesn't he?

Mr DAVIES: He does. He looks fantastic—quite the spiv.

It is with great optimism that I rise to address the House regarding an issue that is close to my heart and one of the most important issues for the people of Queensland, that is, the delivery of health services. I am extremely privileged to sit on the Health and Community Services Committee. This committee encompasses a very broad detail and I am honoured to be joined by members from both sides of the House whom I hold in high esteem. I have no doubt that, together, we can achieve great outcomes for the people of Queensland. I would also like to take this opportunity to thank the member for Redlands, who is the chair of the committee. He has certainly helped me as a newcomer to the House and as a new member of that committee.

Mr Dowling: Solomon like!

Mr DAVIES: Solomon like in his wisdom; I take the interjection. I would also like to thank Sue Cawcutt, the research director. She has certainly helped us—and I speak for many of the newcomers to the House—with her wisdom regarding the committee's work.

I speak today about the government's Health and Hospitals Network and Other Legislation Amendment Bill. I would like to acknowledge the hard work of those who have gone before me and especially the hard work of the Minister for Health, the Hon. Lawrence Springborg MP. He has inherited a broken and unsustainable system that faces significant challenges moving forward. Finding the solutions to the complicated problems that the Queensland health system faces will require both vision and substantial work. I have no doubt that the minister has the capacity to complete this task with the support of this parliament.

Just last week, along with the member for Cleveland, Mark Robinson, and the member for Redlands, Peter Dowling, I had the privilege of having Minister Springborg at Redland Hospital to tour the facility and meet with both executive and clinical staff. The level of professionalism and passion of the staff at Redlands for great health outcomes was obvious and also infectious. The clinicians I met at Redlands were not just there for their fortnightly pay cheque—and thank goodness for that because, if that were the case, many of them probably would have left after the previous regime's payroll debacle. Getting a pay was certainly a lucky dip in those days. They are medical professionals who are working for great health outcomes but have in many ways been terribly let down by an unwieldy, out-of-touch bureaucratic system under which they have been forced to operate. In my conversations with many of the clinicians there, the

enthusiasm for this initiative of the government was displayed quite passionately. Many of them spoke glowingly of the initiative.

Mr Rickuss: You must be pleased to have the sign of democracy outside supporting this.

Mr DAVIES: It certainly is. I wonder why the unions were not out there doing that during the health debacle—

Mr Minnikin: Or supporting nurses when they weren't getting paid.

Mr DAVIES: That is what I am saying. When they were not getting paid the unions should have been out there rattling the can. Today the union is here.

Often we see the failings of the health system on the front pages of our tabloids or in two-minute grabs on the six o'clock news, be it the ramping of ambulances for hours on end or the ludicrous waiting times for surgery. However, each one of these stories represents a patient. Each one of these stories in fact involves a person. It is somebody's child, somebody's spouse or somebody's elderly mother and father. In fact, in the area of health it is actually my mother and father. I would like to share a couple of quick personal stories about how the current health system has certainly let down my family.

My dear mum, who has worked all her life caring for others as a nurse herself, is slowly going blind due to cataracts. She has been waiting for over three years—three long years—to get her eyes fixed. Only a few weeks ago at the parliamentary event on the Speaker's Green my parents came down to witness the celebrations and I was standing less than 10 feet away from my mum and she asked my wife, 'Where's Steve?' She is so visually impaired she could not even recognise me.

Mr Rickuss: You would be hard to miss!

Mr DAVIES: I was only 10 feet away and she could not see me—and there is plenty of me to see! That is how blind she is, yet she still has to wait to get her cataracts removed. You can go to Nepal today and get them removed quicker than you can in the Queensland Health system. She has had to wait for over three years with no surgery on the horizon. It has got so bad that dad has had to sell a couple of his cattle so mum can go into the private sector. It is a disgrace and it needs to change. This is why we are putting forward this legislation.

Adding to my mother's healthcare woes are those of my stepdad who, for over a year, had been suffering with a terrible hernia. He is a hard worker and the hernia was really affecting his ability to work. It got so bad, in fact, that he made himself a makeshift leather brace to hold his insides inside. He did this so he could continue to work on the farm. Finally, after 14 months of pain and discomfort, late last year my stepdad received an operation. The funny thing about this—if you can see a funny side to it—is that we grew up in Kingaroy just down the road from Joh's Bethany and, despite being neighbours, Bob, my stepdad, was never a huge fan of Joh Bjelke-Petersen during the eighties. Often he would rail and rant about Joh and how terrible he was. So it was much to my surprise at Christmas lunch last year that he was the one bemoaning the current state of Health and reminiscing fondly about the Joh era. 'Joh had his faults,' he said, with a few other adjectives, 'but one thing you can say about him is that he ran a tight ship, could read a ledger and ran the best hospital this—blankety blank—'country has ever seen.' What a change in attitude the incompetence of a Labor-led health bureaucracy can elicit from someone, and I do not think my dad is alone or an island here. The current system is broke and needs fixing.

The passing of the Health and Hospitals Network and Other Legislation Amendment Bill is an important step to achieving this goal. There is no doubt, in speaking to those front-line medical service staff, that the lack of control and the lack of local knowledge are contributing to many of the problems on the ground. We now have a once-in-a-lifetime opportunity to significantly change the landscape of Queensland Health for the better. The decentralisation of Queensland Health will allow for community involvement into how their local hospitals are run. Rather than having George Street dictate to the community about what it needs, the community will soon be an integral part of the planning and facilitating of patient care which will lead to improved outcomes for those who rely on the public system.

The implementation of this longstanding Liberal National Party policy will allow local hospital boards to be established that will be accountable for the performance of the local hospital. I think the word that we really need to highlight is accountability. I recently had the pleasure of meeting Mr Terry White at the Redlands Hospital—a hospital that he is now accountable for as chief of the Metro South Hospital and Health Board. As the well-known founder of the Terry White Chemists group, Mr White's vast knowledge of the industry and commitment to the community will be of great benefit to the metro south community. I have no doubt that the practical real-world experience that Mr White has acquired during his time operating in the private sector, coupled with his experience as the minister for corrective services, family services and migrant and ethnic affairs, leaves him well placed to adequately manage the challenges facing him in his new role and I look forward to working with him in the future. His advice and experience will be drawn upon by me in my role on the Health and Community Services Committee and as the

member for Capalaba. If Terry White is an example of the experience and competency of board chairs appointed by the minister we in Queensland will be well served.

While at Redland Hospital last week and discussing this initiative with the hospital CEO, Brett Bricknell, he enthusiastically highlighted that allowing greater freedom for hospitals to take control of their own destinies is a step in the right direction. In the case of the Redland and Wynnum hospitals, the ability to determine the property and building functions of the hospital was most welcome, he said. The new policy provisions of the legislation will allow for hospitals to employ their own staff. Without this provision it would be foolish to think hospital boards could adequately manage their operations. This is part of the new approach that allows hospitals to work with and not against the system to achieve positive outcomes for their patients.

The policy provisions of the current act prohibit hospitals employing staff other than board members. By not allowing hospitals the power to employ their own staff, their ability to service their own unique needs is severely hampered. On this side of the House we do not believe in taking away the ability of professionals to make their own decisions. Instead, this new LNP government will empower those best placed to make the informed decisions required to deliver the best outcomes for patients while encouraging local decision making and delivering local accountability. The new system will protect existing staff with the appropriate safeguards to ensure that new hospital boards have the capabilities and capacities needed to warrant this new responsibility. Once this has been determined, all staff will be transferred to this new system with the same terms and conditions. This is because the LNP takes seriously the responsibility of our front-line health service men and women and, unlike the previous government, we will work to protect them by placing around them more secure infrastructure that allows them the assurance of local expertise and local knowledge in their everyday work. As the minister has said, equity in pay and conditions across the state will be protected because the legislation will retain a state-wide approach to enterprise bargaining and award arrangements.

This bill is designed to transform the way health services are governed and ultimately delivered. By creating a system that includes the community in the decision-making process, the hospital and health services of Queensland will be able to provide services that meet the needs of their community as well as national standards. I commend the legislation to the House.