



Speech By Hon. Cameron Dick

MEMBER FOR WOODRIDGE

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MINISTERIAL STATEMENT

Outpatient Waiting Lists

Hon. CR DICK (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services) (2.21 pm): Since coming to government, we have announced a number of initial steps to start tackling the significant number of outpatient long waits. On Monday, the government announced that we will provide \$30 million to address the waiting list for an outpatient appointment with an ear, nose and throat specialist. I was pleased to make this announcement at the Logan Hospital with the Premier, the member for Waterford and the member for Logan. The \$30 million funding will allow a large number of long-wait ear, nose and throat patients to receive their outpatient appointment and any required follow-up treatment by 30 June 2017. As at 1 January 2015, there were around 14,000 children and adults who had been waiting longer than clinically recommended for an outpatient appointment with an ear, nose and throat specialist. Of those 14,000 patients, more than 4,500 had waited longer than two years. The \$30 million is being made available for front-line services from existing resources and will ensure that people on the waiting list are seen quicker.

Monday's announcement follows our announcement in March of an extra \$30 million for hospital and health services. This additional funding for front-line services was made available from existing resources and will deliver additional services by 30 June this year. Across Queensland, this funding will deliver more than 10,000 additional specialist outpatient appointments, more than 5,000 additional endoscopies and more than 2,000 additional inpatient procedures. I have been open and honest in saying that this extra funding will not be sufficient to fix the backlog of patients waiting longer than clinically recommended for an outpatient appointment—the people who, for the member for Southern Downs, did not exist. However, it is a start on what is a substantial problem.

When this government came into office we found that waiting lists for hospitals included 100,000 people left in the waiting room by the member for Southern Downs. That is the legacy of the member for Southern Downs as health minister. He left more than 100,000 Queenslanders waiting longer than clinically recommended for a specialist outpatient appointment. Queensland has not only a growing population but also an ageing one, and we can expect more call on the resources of the health system in the future. This is a serious issue that deserves a serious response. It certainly deserves far more than a wait-time gimmick devised by those opposite, which was all talk and no action. As proof of this, that program provided \$77 million for bureaucracy and advertising over three years, but not one cent for hospital and health services. It was a program that employed spin doctors, rather than medical doctors.

In contrast to those members opposite, we will take a genuine and balanced approach to waiting lists. I cannot change what happened in the past, but there is enormous capacity for innovation in our health system and I intend to drive that innovation. I know it is essential that we listen to the dedicated men and women who work in our health system as we put together a genuine

approach to tackling long waits in the system. That is why last week I convened a wait-time summit to bring together around 30 people from our hospitals and the broader health system and from all parts of—

Mr Springborg: Did you read the briefing notes from the department?

Mr SPEAKER: Order, members! We will listen to the minister in silence.

Mr DICK: I can assure the member for Southern Downs that I read a lot of incoming government briefs, and I will be saying more on that later on. The summit allowed me to hear firsthand from health professionals who deal with waiting lists on a daily basis. Participants included chairs and chief executives of hospital and health services, GPs, surgeons, specialist physicians, nurses and allied health workers. This is a government that is not afraid to listen. Over the course of more than three hours of discussions, they raised a broad range of issues in relation to wait times. Those included issues relating to a GP's referral of a patient to a specialist for an outpatient appointment, the processes within hospitals once they receive a referral from a GP and the way the GP and the hospital communicates with the patient and with each other. Those issues will require further exploration and we will continue the discussions with participants over the coming weeks.

Managing specialist outpatient appointments, diagnostic testing and treatment lists in our public hospitals will always remain a challenge, but as I said at the outset it is a serious issue and one that deserves serious consideration. We will not go for gimmicks such as a worthless guarantee. The guarantee that I give to this House is that this government will take a genuine and balanced approach to waiting lists and we will work with health professionals as we put together that approach.