



Speech By  
**Hon. Cameron Dick**

**MEMBER FOR WOODRIDGE**

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Record of Proceedings, 15 September 2016

**HEALTH AND OTHER LEGISLATION AMENDMENT BILL**

**Second Reading**

 **Hon. CR DICK** (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services)  
(12.55 pm): I move—

That the bill be now read a second time.

I thank the Legal Affairs and Community Safety Committee for its careful consideration of the bill and its report, tabled 1 September 2016, recommending that the bill be passed without amendment. This bill removes a longstanding source of discrimination from Queensland's Criminal Code. If enacted, it will standardise the age of consent for all lawful sexual intercourse to the age of 16 years, removing the existing disparity between the legal age of consent for anal intercourse and other forms of sexual intercourse. For too long Queensland has been the only jurisdiction to set a different age of consent, and by doing so it has stigmatised particular sexual relationships. As health minister I am proud to progress this amendment, which is one of a number of measures that the Palaszczuk government is taking to improve the sexual health and wellbeing of Queenslanders.

I welcome to the gallery of the Legislative Assembly leaders and members of the Queensland lesbian, gay, bisexual, transgender and intersex community who are here to witness this debate. Many of them, along with so many other gay Queenslanders, have, during their lives, faced fear, intimidation and abuse, threats of violence and actual violence, bullying, exclusion and humiliation, amongst many other things, simply because of their sexuality. They have faced these things simply because of who they are. Many gay men and women in our state have overcome these challenges; many carry scars; and others, I am sad to inform the House, were simply unable to endure what was thrown at them. My hope is that this reform bill will continue to break down barriers of discrimination, to help change the discriminatory attitudes of others and to continue the journey of our state so that it becomes a place where all people are treated justly, fairly, compassionately and, most importantly, equally.

In May this year I released a draft of the Queensland Sexual Health Strategy 2016-2021, which aims to support healthy and safe sexual experiences based on respect and consent. One of the focus areas of the strategy is ensuring that Queenslanders have access to information about sexual health. The panel of health experts that met in May to look at the implications of standardising the age of consent advised me that the current laws may result in young people in same-sex relationships withholding information about their sexual history from their health practitioners. This may prevent young people from receiving appropriate medical advice and discourage them from seeking testing and treatment for sexually transmissible infections. The Queensland AIDS Council and other sexual health experts have echoed these concerns in their submissions to the committee. The amendments to standardise the age of consent will support the final sexual health strategy by ensuring that young

people talk to their health practitioners about safe sexual practices and receive appropriate testing and treatment where needed. I intend to release the strategy later this year after incorporating feedback from the public consultation process.

Another success factor in the draft strategy is reduced stigma and discrimination and an increase in positive mental health and wellbeing in specific population groups, including the Queensland lesbian, gay, bisexual, transgender and intersex community. This bill will contribute to this by removing the pejorative term 'sodomy' from the Criminal Code and instead refer to 'anal intercourse'.

The bill also amends three health portfolio acts to improve health outcomes for Queenslanders. The bill amends the Hospital and Health Boards Act 2011 to facilitate general practitioners having access to the Queensland Health database, known as the Viewer. It will also enable other health practitioners to access information systems and prescribe those information systems in the future where necessary to support patient care or treatment. The Viewer displays patient information consolidated from public sector health systems and is currently available to authorised Queensland Health clinical and support staff.

Queensland Health's *My health, Queensland's future: Advancing health 2026*, the 10-year vision and strategic framework for Queensland Health, recognises the importance of connecting health care both for patients and for healthcare providers. Enabling the public health sector to seamlessly share patient information with GPs means that GPs will have a more comprehensive understanding of a patient's medical history, allowing them to provide more targeted and consistent treatment. The legislation includes safeguards to ensure the protection of patient information. Misuse of the Viewer will, of course, be subject to strict penalties. GPs will have a unique login and their access to the Viewer will be logged and audited. Patients will also have the ability to opt out if they do not want their GP to have access to their information. Giving GPs access to clinical information about their patient's treatment at public sector hospitals is just one of the measures to improve the patient journey outlined in our \$361 million specialist outpatient strategy, which I released on 6 September 2016.

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 **Hon. CR DICK** (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services) (2.59 pm), continuing: To achieve our goal of making Queenslanders among the healthiest people in the world by 2026, we must capitalise on the potential of health technology. Queensland is leading the way in this regard as one of the first jurisdictions in Australia to give GPs this kind of access to public sector health information. It is these innovative solutions that will help to transform Queensland's approach to health care.

Participation rates in our school immunisation and dental programs are not as high as we want them to be. The Palaszczuk government is committed to taking action to ensure these programs do reach as many of our young people as possible. While parents may choose not to participate in these school health programs, I am concerned that too many students are not getting that opportunity because the consent form has been left in the bottom of the schoolbag or has been signed but not returned to the school. The bill seeks to address this by amending the Public Health Act 2005 to enable schools to share student information with school health program providers, supporting the uptake of the school immunisation and school dental programs. The amendments will allow approved school health program providers to follow up with parents. This will enable providers to answer any questions parents may have and address any concerns. Safeguards will be in place. All providers are bound by the privacy principles and will be directed not to follow up with families who have indicated they do not want their child to participate.

Other amendments will support medical research. Queensland is home to some of the best and brightest minds in medical research. This year alone the QIMR Berghofer Medical Research Institute has announced developments in malaria and HIV treatments, the diagnosis of depression and genetic linkages to breast and endometrial cancer. The bill amends the Queensland Institute of Medical Research Act 1945 to enable the QIMR Berghofer to approve the payment of bonuses to its successful discoverers and inventors up to an annual aggregate limit of \$10 million. This will ensure QIMR can continue to attract and retain high-performing researchers to support its goal of translating medical research discoveries into better treatments, diagnoses and health prevention strategies for Queenslanders.

The bill will also amend the Hospital and Health Boards Act 2011 to streamline the process of seeking disclosure of confidential patient information for research purposes. To carry out medical research involving Queensland Health, researches must comply with a rigorous approval process including ethics approval and Queensland Health authorisation of the project. Patients with impaired capacity, such as dementia patients, can only participate in medical research where their substituted

decision-maker has consented to their participation. The researcher must also apply to Queensland Health to access the patient's information. The Australian Medical Association of Queensland has advised this application to Queensland Health is a burdensome and time-consuming step for researchers which may delay important medical research. These amendments, developed in consultation with the AMA Queensland, will streamline the process by removing the unnecessary additional step while maintaining safeguards around the research project.

In conclusion, I again thank the Legal Affairs and Community Safety Committee for its detailed consideration of the bill and the stakeholders who participated in the committee process. I particularly acknowledge those individuals who shared with the committee their firsthand experience of discrimination on the basis of their sexual preference. They have highlighted why the proposed Criminal Code amendment is particularly important. It is, above all, an amendment aimed at improving sexual health and it should be treated as such. Too often the conversation about the age of consent has focused on morality and, worse still, on criminality. By making this amendment in a health bill we change the focus of the debate. More importantly, we remove a discriminatory provision from our statute books and support the sexual health and wellbeing of young Queenslanders. Other amendments in the bill will facilitate stronger connections across the health system, support pioneers in medical research and ensure our children are getting access to vital immunisation and dental services. I commend the bill to the House.