




Speech By
Dr Christian Rowan

MEMBER FOR MOGGILL

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HEALTH LEGISLATION AMENDMENT BILL

 **Dr ROWAN** (Moggill—LNP) (12.38 pm): I rise to address the Health Legislation Amendment Bill 2015, which seeks to amend the Food Act 2006, the Health Ombudsman Act 2013, the Pest Management Act 2001, the Public Health Act 2005, the Transplantation and Anatomy Act 1979 and the Hospital and Health Boards Act 2011. I intend to primarily address what I regard as the most important amendments in this proposed legislation.

Obesity or excessive weight is a major risk factor for a number of health disorders including cardiovascular disease, type 2 diabetes and a number of malignancies. There is a direct correlation between the level of weight gain of an individual and their subsequent risk of developing the aforementioned medical conditions. Almost two-thirds of Australian adults are overweight or obese. Disturbingly, one in four children is overweight or obese. There are high rates of obesity in regional, rural and remote Queensland. Similarly, such geographical areas, as revealed by local government data, also often have high rates of tobacco and alcohol consumption.

For most people, excessive weight is an imbalance between energy intake via one's diet and energy expenditure via physical activity and exercise. Some reports via a cost-benefit analysis have revealed that the total costs of obesity in Australia could be \$8.6 billion, with \$3.8 billion in direct costs and \$4.8 billion in indirect costs. To this end, ensuring nutritional information and the average content is displayed by certain food businesses and outlets as proposed by amendments to the Food Act 2006 is an important part of tackling obesity within Queensland. Informed consumers are more likely to make informed choices with respect to choosing healthy types of food that they consume. This, along with appropriate portion sizes and age appropriate exercise, will lead to better health outcomes across our population with an associated reduction in overall health system costs, and general practitioners are certainly a great source of quality health information for patients within Queensland. Any food menu labelling scheme requires a strong and robust implementation plan with good communication and coordination of various entities involved in putting into place endorsed strategies. Allowing impacted businesses a 12-month transitional period is prudent and wise.

The amendments to the Public Health Act 2005 which allow for registered midwives to access the Queensland Pap Smear Register are positive and will be welcomed by clinicians and patients in our state. Also, amending the Transplantation and Anatomy Act 1979 to make clear that the definition of blood products under section 42AB does not include cord blood is sensible and will assist the Australian Bone Marrow Donor Registry to discharge its functions as well as assisting those clinicians who are treating haematological malignancies.

I now wish to address some other important matters. I do hope that the ministerial code of conduct and other governance mechanisms will potentially mitigate any inappropriate usage of the health minister's powers under amendments to the Hospital and Health Boards Act 2011. There is no doubt

the establishment of hospital and health services and associated boards has allowed for strengthened local decision-making and greater community, consumer and clinician engagement along with enhanced accountability. Like other LNP members of the former Health and Ambulance Services Committee, I do have significant concerns and reservations about clause 18 of the bill which proposes to insert a new section 24A into the Hospital and Health Boards Act which will enable the health minister of Queensland to temporarily appoint an individual to a hospital and health board for a period of up to six months and to extend a temporary appointment for up to a further six months providing for a maximum temporary appointment of 12 months. Such appointments may be made if the minister reasonably believes it is necessary to urgently appoint a person as a member of a board for the following reasons: firstly, the board does not have at least five members; secondly, the minister considers the board does not have the skills, knowledge or experience to perform the board's functions effectively or efficiently; or, thirdly, none of the board members are clinicians. There is the real risk of inappropriate exploitation of these provisions by the relevant health minister of the day despite moves or amendments to publish notices of appointment in the *Government Gazette*.

Similar concerns relate to temporary appointments that can be made to the public panel of assessors and the 16 professional panels of assessors under the Health Ombudsman Act 2013. Although no-one would want a delay in matters or proceedings pertaining to health practitioners to occur within QCAT, an abuse of temporary appointment processes could occur, particularly if union representatives are provided preferential access to such roles. There is no doubt that the Palaszczuk Labor government has rewarded health unions such as ASMOFQ and the Together union for their support at the January 2015 state election by giving unions unfettered access to Queensland Health employees and the resources of government. The return of inefficiency and reduced productivity via longer public hospital waiting lists and the return of ambulance emergency department ramping is also inevitable. I want to take this opportunity to acknowledge the chair of the former Health and Ambulance Services Committee, the member for Nudgee, Leanne Linard MP, my fellow committee members, our secretariat staff and technical scrutiny staff in the preparation of this committee report with respect to the Health Legislation Amendment Bill 2015.

In conclusion, I want to acknowledge the outstanding staff of our public hospital system who work within our individual hospital and health services. Our doctors, nurses and other health professionals do a fantastic job on behalf of all Queenslanders, including the residents of my electorate of Moggill. Following the House adjourning on the Wednesday night of the last sitting week, my wife, Jane, and I found ourselves urgently seeking emergency care for our eight-year-old son, Angus, via the Wesley Hospital's Emergency Centre. Private hospitals and associated facilities also play a vital role in our healthcare system and I would like to publicly thank emergency medicine specialist Dr Adam Wilson and the nursing staff of the Wesley Emergency Centre including Declan Curtin and Lucy Halliday for the empathy, compassion and clinical care that they provided. I also want to acknowledge the care provided to Elisabetta Jannello Rowan by Dr Nigel Dunglison, the ICU team and the staff of 7E given her life-threatening infection and subsequent urgent nephrectomy in the last few weeks.

Such facilities and their clinical and administrative staff would not operate without strong values based leadership and good management, so with that in mind I thank the Wesley Hospital executive including Ann Maguire, Dr Luis Prado, Callan Battley, Fergus Pollock and Judy Gentle. I also thank the director of emergency medicine, Dr Sean Rothwell, and director of intensive care medicine, Professor Bala Venkatesh, for such an excellent facility which services not only patients from the suburbs of my electorate of Moggill but also many people from right across Queensland.