



Speech By Leanne Linard

MEMBER FOR NUDGEE

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HEALTH AND OTHER LEGISLATION AMENDMENT BILL

Ms LINARD (Nudgee—ALP) (5.23 pm): I rise to speak in support of the Health and Other Legislation Amendment Bill 2016. The many speakers before me have spoken passionately about the bill in its entirety, and I endorse those comments. I will keep my contribution brief regarding the bill, as there are two key amendments contained in the bill that I specifically wish to speak to. These are the amendments to the Hospital and Health Boards Act 2011 to facilitate general practitioners having access to the Queensland Health database, the Viewer, and the Public Health Act 2005 to enable schools to share student information with school immunisation health service providers to improve the uptake of the School Immunisation Program. I am passionate about these two elements. They are elements that have come through my committee, the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee.

The School Immunisation Program ensures that students can access publicly funded immunisation services. Participation in these programs, as any parents in the House would be aware, requires parental consent forms to be signed and returned to school. As busy parents in the House also know, some consent forms do not always make their way back to school. I am guilty of this myself on occasion, but when it relates to vaccination I certainly return my forms.

The amendments before the House as they relate to disclosure of student information will allow school principals and their delegates to disclose student information to an immunisation health service provider to allow follow-up with parents of students who have not returned their consent form to occur, will allow for the reconciliation of returned consent forms against eligible students and will inform future strategies to improve consent form return rates. The amendments are about promoting immunisation to protect young Queenslanders.

Vaccination is an important public health strategy and a key health priority of the government. Immunisation has long been recognised as one of the most successful public health interventions introduced in Australia, enabling community health to be maintained and protected by reducing and eradicating vaccine preventable diseases. The majority of people support immunisation and have their children vaccinated, which is validated by the high childhood immunisation rates in Queensland of approximately 92 per cent. Within my electorate of Nudgee, the immunisation rate is closer to 93 per cent.

These rates are high and are the product of long-term and concerted public education campaigns and are reflective of a broad acceptance in our community of the merit and importance of immunisation against preventable disease. Commonwealth government research indicates that, since the introduction of vaccination for children in Australia in 1932, death from vaccine-preventable diseases has fallen by 99 per cent, despite a threefold increase in the Australian population over that period. The second element of the bill I would like to speak to briefly is the amendments to the Hospital and Health Boards Act 2011 to facilitate general practitioners having access to the Queensland Health database, the Viewer. The Viewer displays patient information consolidated from public sector health systems and is currently available to authorised Queensland Health clinical and support staff. This is a wonderful amendment. What it means in practice is better and more timely patient care. Enabling the public health sector to seamlessly share patient information with GPs means that GPs will have a more comprehensive understanding of the patient's medical history, allowing them to provide more targeted and consistent treatment. I understand that 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.

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 this government's \$361 million Specialist Outpatient Strategy, released by the Minister for Health on 6 September 2016. This strategy is an investment over four years to provide more specialist outpatient appointments but also to fix known problems in key parts of the patient journey by 2020. This strategy identifies key improvements that can be made to that patient journey and is a key element of our commitment to setting the strategic direction for the Queensland public health system under *My health, Queensland's future: Advancing health 2026.*

Importantly, journey improvement 10 in this document, which is the strategy document I am referring to, is about sharing information about patients' hospital experience with their GPs which is so important to ensure that any adverse reactions and readmissions are avoided. GPs do not always immediately know that a specialist is recommending changes to your medication or if you have been referred for further diagnostic procedures or on to surgery. That is why this government is investing in a web based application to give GPs real-time access to medical information such as pathology and radiology reports. Data available will also complement the information more traditionally included in patient discharge summaries.

People who come into my electorate office often talk about the need for a more seamless patient journey. I am very pleased to see these amendments. I look forward to seeing them in practice and the changes that they will make to patient journeys in Queensland. I commend the minister for bringing these amendments before the House.