



Speech By
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MEMBER FOR LOGAN

Record of Proceedings, 25 May 2016

PUBLIC HEALTH (WATER RISK MANAGEMENT) AMENDMENT BILL

 **Mr POWER** (Logan—ALP) (5.32 pm): One of the key functions of government is to ensure that a risk that an ordinary citizen does not normally consider or cannot quantify can be managed. We know that not all risks can be effectively calculated by the user of a service or a product in all cases. This does not, as some on the other side suggest, mean that any individual is ignorant, rather that no individual could have the specialist knowledge of all the risks involved in modern life.

The right wing market the individual as the only determinant of individual risk. This extreme ideology, as pursued by some on the new opposition frontbench such as the member for Clayfield, is dangerous in the extreme. There are cases where it is clear that the risk to the individual cannot be determined without expert information. In these cases it is vital that government make it clear that we protect the individual and their families through appropriate regulation.

The Public Health (Water Risk Management) Amendment Bill is a piece of legislation where we collectively as a government—as Queenslanders—assess the risk for those who cannot and ensure that those who are vulnerable have the risk of death or serious illness minimised. We know that the legionella bacteria can lurk and multiply in water cooling systems, piped water supplies, spa and hydrotherapy pools, ice machines, chilled water dispensers, humidifiers, nebulisers and even decorative fountains. In this case the bill assesses the risk of legionnaire's disease across our state and mandates that those institutions that present the greatest risk improve their management and control of the health risks associated with the legionella bacteria. We recognise that, although varieties of the legionella bacteria can be found in a variety of places, including soil and mud, it is in man-made environments of manufactured water and air conditioning systems that they are most dangerous.

Through the advice of health professionals we recognise that those who are already weakened through sickness, have compromised breathing or damage to their lungs, are elderly or have a combination of these factors are at a greater risk. A healthy person, in contrast, is relatively unlikely to contract the disease as a healthy person's immune system is better able to fight off the infection. That is why prudently this government is ensuring that those institutions such as hospitals and aged-care homes improve their practices to ensure the safety of those who are vulnerable through the creation and implementation of water quality risk management plans in public hospitals, public residential aged-care facilities and licensed private health facilities.

Those who are most vulnerable include those who are severely immunocompromised: patients on high doses of immunosuppressive medication, people with chronic underlying disease such as diabetes, chronic liver failure, chronic renal failure, congestive heart failure, HIV/AIDS and some forms of cancer, smokers, people with excessive alcohol intake, people over 50 years of age, people who have undergone recent surgery, intubation and those on mechanical ventilation, people who have aspirated foreign matter into respiratory passages and people who have used respiratory therapy equipment such as nebulisers.

To further support those who are in no position to assess the risk they face, the bill has further provisions that there be clear public notifications of tests that are positive for legionella bacteria. The bill ensures that the person in charge of a prescribed facility notify the health department within one business day. Further, that there be increased transparency through the department, there be periodic reporting of the presence of legionella and any further information that the chief executive considers relevant to the safety of the public.

I thank the committee, especially the committee chair, the member for Kallangur, and the deputy chair, the member for Redlands. I note that the minister in his speech noted some of the suggestions and recommendations and has undertaken to put into regulation a clarification that a water risk management plan clearly identify the person directly as the person in charge for the purposes of this act. This was a bipartisan concern of the committee. The member for Whitsunday also shared this concern. I am pleased that our work will provide hospitals and other institutions with clear guidelines of responsibility.

The committee undertook hearings on the bill on Wednesday, 20 April 2016. We heard from the Chief Health Officer, Dr Jeannette Young, who informed the committee that the bill implements measures to improve the management of health risks that were highlighted by Dr Young's report in 2013 that was commissioned by the government after a concerning outbreak in our health system. Further, that without this bill the Department of Health was prevented from publicly disclosing information under the Private Health Facilities Act 1999. The committee also heard from plumbers, representatives from the Master Plumbers' Association of Queensland and the union representing plumbers who have an active role in ensuring that plumbing systems are maintained and built in a way that reduces the chance of a legionella build-up.

Mr Slade from the Master Plumbers' Association told the committee that there are many factors that affect the build-up of legionella bacteria: the quality of the water entering the pipes, the age of the pipes, the material of the pipes, the temperatures of the ceilings and the flow rate through pipes. For this reason, Mr Slade asserted that each premise needs to be looked at individually when considering a water risk management plan. Mr Slade also explained that in his opinion the adoption of a water quality management plan is not a great impost on the facility owners and managers. To be clear, there is a cost to a risk management plan, but the cost of losing a loved one to a disease that is entirely preventable is so much greater. I acknowledge the member for Surfers Paradise who noted that the role of licensed plumbers and high industry standards were vital in maintaining this infrastructure to protect our health.

This bill deals with a limited part of the risk of legionella. We note the hotel outbreaks that the member for Surfers Paradise mentioned, but we can look to a more recent tragic case in Melbourne at a Liberal Party function where 35 people contracted legionnaire's disease. Some members of the Liberal Party contracted the disease and suffered very badly. At the time there were concerns for John Howard, the former prime minister, and the then Liberal leader in Victoria. We know that with good plumbing standards and maintenance the disease is entirely preventable. This incident was a sharp wake-up call for any who thought that high standards were not required in the plumbing industry, especially in the duct work that pumps damp air around buildings.

I know that all those on this side of the House and, unfortunately through bitter experience, the Liberal Party in Victoria, understand the need for trained plumbers to keep our buildings safe. We in this place sometimes need to regulate where the calculation of the true risk is impossible. As a government we must make decisions to keep the vulnerable safe. This legislation goes a long way to minimising the risk of serious infection from the legionella bacteria. I commend the bill to the House.