




Speech By
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MEMBER FOR FERNY GROVE

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HEALTH LEGISLATION (WAITING LIST INTEGRITY) AMENDMENT BILL

 **Mr FURNER** (Ferry Grove—ALP) (8.31 pm): I rise to contribute to the debate this evening on the Health Legislation (Waiting List Integrity) Amendment Bill 2015. In doing so, I commend the chair of the Health and Ambulance Services Committee and all the other committee members for their deliberations on their report on this bill. I turn to some of the outcomes in the bill. I look at the objectives initially to establish the Health Ombudsman as the independent reviewer of the clinical waiting times for Queensland public patients in the public health system—hopefully, I will have time to get to that in a moment in the report—ensuring the Health Ombudsman manages auditing for wait-time matters in a transparent, accountable and public way; to provide certainty in clinical waiting times for Queensland public hospital patients; and allay concerns as a result of being on a waiting list longer than necessary.

Interestingly—and it has been canvassed in the contributions of other speakers this evening—there were only four submissions provided to the committee. Of those, three opposed the bill. They were the Queensland Nurses' Union—a very professional organisation that my wife is a member of—the Together union; and the Director-General of the Department of Health. I also note that the member for Caloundra referenced support by the Australian Medical Association in 2012, yet the AMA made no submissions in support of it so I am not certain where that evidence came from.

I note, however, in the contributions and the appearance by the Health Ombudsman before the committee, that he gave testimony to the committee. He was asked by the member for Thuringowa whether he considers the functions align with the existing functions under the act. He responded by saying—

I do not see it sitting comfortably with existing functions, because the existing functions are around managing health complaints and, fundamentally, protecting the health and safety of the public.

He also indicated that he did not have the resources to fill that part of a function should the bill be accepted.

I recently had the opportunity to attend a hospital with my wife, who was injured a few weeks ago and had to have five stitches in the tip of her index finger. We went to the local hospital—the Prince Charles Hospital public emergency department—and I was overwhelmed by the attendance and the professionalism. As we all should do in this chamber, we should recognise the professionalism and the support that our doctors, nurses and healthcare workers right across the jurisdiction of the wonderful state of Queensland provide people at the time of emergency. She was only there approximately 10 to 15 minutes before she was attended to and within about an hour to two hours we were out of the hospital. It gives you an indication firsthand when I was there, as her husband and comforting her, working through the process of making sure she got home in a reasonable time and with her finger bandaged up and repaired.

Mr Ryan: Good Labor public hospitals.

Mr FURNER: Absolutely. I will take that interjection: good Labor public hospitals. There has been, however, steady improvement in elective surgery wait times over recent years. That has been delivered by increased federal funding. That increase in federal funding has been through federal Labor governments. In my time down there, we had an initiative dealing with GP super clinics. That was an initiative of the Rudd Labor government. That reduced the strain on and visitations to public hospitals, but actually—

Mr Ryan: It made a huge difference.

Mr FURNER: It absolutely made a wonderful difference. It made opportunities for people to be treated immediately in many cases, and I draw on my experience based on a GP super clinic not far from where I reside, the GP super clinic at Strathpine.

Mr Ryan: Which they opposed.

Mr FURNER: I will get to that in a minute. I refer to that GP super clinic at Strathpine. It was the first in Queensland and the second in Australia. You go there and you get treated just about immediately. I go there to get acupuncture on my back—as I have a bad back—and they do an amazing job as they do in other locations. I have been to Gladstone and seen the member for Gladstone's GP's super clinic. I am sure he would attest to the fact that the assistance—

Mr Butcher interjected.

Mr FURNER: I am sure you go there by yourself. Other people in Gladstone no doubt will get amazing assistance as a result of the treatment in the Gladstone Super Clinic. The member for Mackay and I were talking about this this evening, and she relayed her experiences and the satisfaction of the constituents in Mackay and the treatment they get from their super clinic. It was a real shame to see the incumbent coalition federal government cut resources to that initiative.

We came in and it was the policy that was going to commit \$650 million and earmarked 60 clinics. Overnight they cut \$90 million from that meaning people were lacking access in places like Brisbane, Rocky and Darwin. No doubt that has put strain and pressure back onto the public hospital system as a result of the way a coalition government handles health for people in our country.

Another example is when we came to government we discovered more than 100,000 Queenslanders had been waiting longer than clinically recommended to see a specialist at an outpatient facility. This is the legacy of the member for Southern Downs, who left Queenslanders in waiting rooms. The wait-time gimmick has a number of flaws and we know that. First, it failed to take account of the entire patient journey, relegating about 100,000 people to waiting longer than clinically recommended for a specialist outpatient appointment. Secondly, the expectations provided under the wait-time gimmick made the program effectively meaningless for many Queenslanders. Thirdly, the program provided \$77 million over three years for advertising, consultants and bureaucracy but did not provide a single cent for the provision of additional services to any Queensland hospital.

It had nothing to do with the wait-time gimmick which was announced on 23 November and which was due to commence on 1 February last year. The Palaszczuk Labor government is working with health professionals to develop a genuine and realistic approach to wait times at all points in the patient's journey. In our first budget we provided additional funding of \$361.2 million over four years to tackle the significant number of specialist outpatient long waits.

I referred earlier to what I experienced at the Prince Charles Hospital emergency department only a few weeks ago. There is no doubt that anyone who presents themselves to a hospital will get the same professional level of experience and assistance that we see from our doctors and nurses. Patients can now experience those amazing Labor initiatives that we have brought into the state of Queensland.

The number of patients waiting longer than clinically recommended for a specialist outpatient appointment had fallen to 85,795 as of 1 January 2016. On coming to office, the Palaszczuk government discovered that more than 100,000 Queenslanders had been waiting longer than clinically recommended. What a disgraceful time to be waiting that long for a specialist outpatient appointment as of 1 January 2015.

On 10 March 2015 the government announced that an extra \$30 million funding would be made available to hospital and health services from existing resources to deliver additional activity by 30 June 2015. This was to fund more than 10,000 additional specialist outpatient appointments. On 29 April and 7 October 2015 the Minister for Health convened wait-times summits which brought together health professionals from all parts of the state who deal with waiting lists on a daily basis to discuss and build consensus on how to address the challenge of wait times at all points in the patient journey.

In conclusion, I think we on this side understand the gimmicks and the rhetoric behind the nature of this bill. We recognise the lack of interest from the submitters who appeared before the committee. I do not think I have ever seen an inquiry in this House having fewer submitters, with only four in this case. It clearly demonstrates the lack of interest in this particular bill. In conclusion, I am proud to stand here this evening and oppose this bill in this chamber.