



Speech By Joseph Kelly

MEMBER FOR GREENSLOPES

Record of Proceedings, 6 September 2017

HEALTH PRACTITIONER REGULATION NATIONAL LAW AND OTHER LEGISLATION AMENDMENT BILL

Mr KELLY (Greenslopes—ALP) (5.11 pm): I support this bill. I particularly support the sections of the bill that deal with establishing midwifery as a separate profession. Recently, my union took the step of rebadging as the QNMU and it is good that this bill recognises that midwifery and those who hold a midwifery certificate often do not also hold a nursing certificate and that it is a profession in its own right. It is closely related but it is a separate profession.

Because of the quasquicentennial of the Queensland Ambulance, I refer to a section of this bill that deals with paramedics. Next year, I would have been a nurse for 30 years and I have witnessed significant changes and improvements across all of the health professions. In terms of my colleagues in the paramedic field, their role has expanded and their level of professionalism has increased dramatically. I reflect on the many emergencies that I have dealt with in a hospital context. We deal with those emergencies in situations where we can quickly mobilise more staff to support us. If we do not have the appropriate equipment, we either can bring the equipment to us quickly or can quickly take patients to that equipment. We have a very controlled environment. At times it may seem chaotic, but we have quite good control in a hospital environment.

Then I think about what a paramedic has to deal with. Often they are the first health professional on a scene. If they are talking to another health professional, it is often a nurse, a doctor or an off-duty paramedic who has stopped and has no equipment with them. They can be in very difficult situations where the lighting is poor, the terrain is unknown and they must quickly assess the situation. They must determine if it is safe for themselves, how to make their patients safe and how to keep other members of the community safe. Not terribly long after that, if necessary they have to work towards establishing an airway for a patient and then in many cases restarting circulation for a patient and maintaining that circulation, administering fluids to maintain circulation and administering oxygen to maintain oxygenation.

Quite frequently they will have to administer pain relief, a tricky business indeed, particularly when people are in acute pain caused by a recent trauma. No doubt inevitably on many occasions, there will be loved ones nearby, such as family or friends, so that the person who has had the trauma has people nearby who are deeply concerned for that person's welfare. The paramedic must not only manage all of those clinical decisions in relation to that patient but also communicate with those people nearby and, often times, bring them into the care of that patient. It is a truly confronting and difficult situation to be in.

One of the most difficult things for a paramedic, despite all of their best work and efforts, is being there at the end of life for some people. They would be the last person comforting a person as they die, comforting their family or friends who may be nearby. That must be a very difficult situation. All of those things I have just described—assessing a situation, establishing and maintaining an airway, establishing circulation, relieving pain, communicating with patients and their families—are highly skilled activities that require a high degree of professionalism. Paramedics do not just do that every now and

then: they do that all day, every day and at a very high level. I know from my dealings with many paramedics, from seeing them bring in patients to a hospital situation, that the quality of the handovers and the information that we receive is truly lifesaving. They give us the information so that we can continue the care that they have started under very difficult situations. Fortunately, we have much more managed situations to work in.

I know that many of those paramedics that I have spoken to over the years feel like poor relations in the health profession. Nothing could be further from the truth. They are every bit a part of the health profession as everybody else in the health profession. I certainly view them as very important parts of our team. I know that every nurse, doctor, midwife and allied health professional views them in the same way. This bill takes the appropriate step of establishing that registration process. They will continue to deliver the same high levels of professional care. They will continue to accept the high levels of ethical responsibility that they have, but they now will do so with the protection and benefits that professional registration brings. I am extremely pleased in this quasquicentennial year to support this bill and I commend the bill to the House.