




Speech By
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MEMBER FOR MOGGILL

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HOSPITAL FOUNDATIONS BILL

 **Dr ROWAN** (Moggill—LNP) (3.04 pm): I rise today to contribute to the debate on the Hospitals Foundations Bill 2018. This bill aims to modernise how Queensland's hospital foundations operate. This bill has two main objectives—the first objective being to repeal and replace the Hospitals Foundations Act 1982 to provide a more streamlined and cohesive legislative framework which will ultimately support and improve the public health system in Queensland. This aim is primarily achieved by providing for, firstly, the objects for which foundations may hold and manage property; secondly, the establishment of foundations and boards for foundations; and, thirdly, matters relating to the administration and oversight of foundations and boards for foundation purposes.

The second objective of this legislation before us is to amend the Drugs Misuse Act 1986 to further enable the development of an industrial cannabis industry here in Queensland. This follows a national decision to allow low-dose tetrahydrocannabinol hempseed and seed products to be sold as food. The bill before us is similar to the Hospitals Foundations Bill 2017, which was introduced by the former minister for health and ambulance services in August 2017. That bill lapsed with the dissolution of the 55th Parliament. The differences between the 2017 and 2018 bills are minor, with only several technical amendments, as outlined to the relevant parliamentary committee by Queensland Health. The parliamentary committee recommended that the bill be passed. There were no recommendations or a statement of reservation.

The Hospitals Foundations Act 1982 provides for the establishment and regulation of hospital foundations. Such foundations, as we have heard via a number of speakers today, help their hospital and health services and support the Queensland public health system more generally. Hospital foundations do this by raising funds to improve facilities and by supporting education and training opportunities for staff. They also fund research and support and promote the health of communities. There are currently 13 foundations in Queensland.

Having previously worked clinically in a number of hospitals associated with these foundations, including in Brisbane, at the Sunshine Coast and in Toowoomba, I know how important they are to patients, staff and the broader community. Over the past 35 years, hospital foundations across Queensland have undertaken initiatives to support their local health services and improve health outcomes for the communities they serve. This includes providing grants and in-kind support for additional medical equipment and life-saving research and the provision of facilities to support patients, staff and the community.

In health care, as we all know, there are technological advances, there are innovations and there are changing clinical service models and types of workforce that deliver care. It is very important that our foundations are provided with the necessary legislative support and enabling framework to continue to support that vital work. I know the member for Mudgeeraba, the shadow minister, the member for Surfers Paradise and many other members in the House support that. The member for Stretton was talking about Harmony Day before. I know that the member for Stafford, the Hon. Dr Anthony Lynham, also understands the importance of hospital foundations to our public health system.

In 2016-17, hospital foundations reported collectively income of over \$74 million. Having also worked in hospital administration and the public health system, I know firsthand the significant contribution such foundations make to strengthening governance arrangements. Foundations are an important part of the fabric of our local health networks. The work undertaken by foundations is largely driven by volunteers and local community members. In 2016-17, hospital foundations reported a total full-time-equivalent staff of over 180 people and a volunteer workforce of over 4,000 people. Foundations and their staff and volunteers work closely with their local communities to deliver better public health outcomes.

In repealing and replacing the Hospitals Foundations Act 1982, this bill provides that the board must comprise at least seven members, consisting of at least six persons recommended by the minister and one person who is either the chairperson of the hospital and health service board for the foundation's associated hospital and health service or a hospital and health service board member nominated by the chairperson, known as the HHS member. The current Hospitals Foundations Act prescribes specific membership requirements for foundations, including a requirement for the body corporate to include an employee of a university or other educational institution and employees of a hospital within the HHS. To improve flexibility, the current bill before us removes these requirements.

As I mentioned previously, this bill also amends the Drugs Misuse Act 1986. Commercial industrial cannabis production for fibre and seed production in Queensland is licensed under the Drugs Misuse Act. The act does not currently allow the production of industrial cannabis seeds for the purpose of human consumption. An amendment to the Australia New Zealand Food Standards Code, which came into effect on 12 November 2017, allows the sale of low-dose tetrahydrocannabinol hempseed food in Queensland. Industrial cannabis has low concentrations of the psychoactive component of THC and therefore has little value as a recreational drug.

The amendments to the Drugs Misuse Act will enable commercially led industrial cannabis development here in Queensland. I also noted the amendments the minister has foreshadowed with respect to the Mental Health Act 2016, the Justice and Other Information Disclosure Act 2008, the Penalties and Sentences Act 1992 and the Hospital and Health Boards Act 2011. I would simply offer my view that the re-establishment of the Queensland Drug and Alcohol Court is in the interests of Queensland, and the proposed amendments to strengthen representation with respect to review teams and the capacity to share information more extensively is a positive development. This is contained within the amendments.

I conclude by offering my congratulations to all hospital foundations across Queensland, the volunteers that work with those and the clinicians that contribute to part of that. I again acknowledge the benefits of those foundations to individual hospital and health services and to patients right across Queensland.