



Speech By Michael Berkman

MEMBER FOR MAIWAR

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HEALTH TRANSPARENCY BILL

Mr BERKMAN (Maiwar—Grn) (6.37 pm): I rise to make a contribution on the Health Transparency Bill 2019. Like my colleagues on the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee, I want to begin by thanking my fellow committee members for their participation but especially the secretariat for the incredible amount of work that it has done not just on the inquiry into this bill but also the much larger and very closely related inquiry that we are undertaking into aged care, palliative care, end-of-life care and voluntary assisted dying. It is an enormous body of work and in some ways the inquiry into this bill was indistinguishable from what we were doing in that inquiry, but I am eternally grateful for the support that it provides all of us in the work that we do.

I support the bill in what it seeks to achieve, specifically that objective of shining a light on practice in our healthcare facilities and some of the most serious dysfunction that we are seeing now in the aged-care sector. Fundamentally, the Greens support ratios in the provision of residential aged-care services, and I would argue that that should be a fairly uncontentious proposition. We do not dispute in very many other circumstances that ratios are appropriate—for example, in the provision of child care, where we are obviously talking about equally vulnerable members of our community. We do not dispute that class sizes should be capped in our schools with the provision of that essential service and we do not really have any debate anymore that patient-staff ratios in hospitals are appropriate, and it should be no different here.

During the hearing we heard some of the predictable responses that ratios in aged care are unnecessary, that they are a blunt instrument and that they will drive up the cost of care unnecessarily by not taking into account the level of care required—for example, where care requirements are relatively minimal.

To be frank, from what I have seen and heard as a member of the health committee during both the inquiry into this bill and the committee's broader work over the past 12 months, these arguments really just do not wash. Ratios represent a minimum standard. They do not represent a cap on care. They do not and should not prevent more rigorous monitoring and enforcement of broader, more detailed standards of care and required outcomes. There is nothing at all that is mutually exclusive about having staff-patient ratios and safeguards around the quality and safety of care provided to some of our most vulnerable Queenslanders. I support the government's decision to impose ratios in our state-run facilities and, of course, expect that this rollout would be closely monitored to better understand the consequences of implementing ratios in different facilities and to ensure that other standards of care and support for residents are not compromised.

In the broader context of this bill, we need to largely put aside issues that arise with in-home care, but many of the same fundamental problems are evident there as well. We cannot ignore the fact that most people want to age in place and they are being let down by a system that does not facilitate that. At the moment there is just not enough money being put towards home care packages, and the federal government's most recent offering in this space falls far short of what we need to see this problem addressed. Ultimately, we are forcing people into residential aged-care facilities when they do not want

that outcome. We are robbing these people of their dignity and their autonomy. Quite aside from that, in pure dollars and cents terms it is often far more costly an outcome than if they were able to continue to age in place.

Ultimately, all the pushback against ratios and disputes over the costs and benefits of any new reporting requirements all just masks the more fundamental problem that I suggest is at the core of our aged-care system at the moment. The crux of this issue is that governments continue to assume that the needs of our elderly and vulnerable can be met almost exclusively by the market. Over the past year, the stories that the committee has heard, the evidence given to the royal commission and the findings in its interim report lay bare that our aged-care system is deeply dysfunctional. As we have heard from other members, all the indicators are that it is getting worse. The demographic shift that we are seeing at the moment and will see over the coming decades is almost beyond comprehension. In looking forward to 2050, the aged-care sector is desperately ill equipped to care for the number of people who are going to require hands-on residential care.

Dementia is soon going to be the biggest killer of Australians, but it can be a horrifically slow decline. The additional demands on residential aged-care facilities as a consequence of that growing cohort cannot be overstated. I think it is now blindingly obvious that we need a complete paradigm shift in the provision of aged care in Queensland and in Australia. We need to acknowledge the fundamental conflict between the pursuit of profit and the universal provision of high-quality aged care. Aged care has to be treated now as an essential service.

Ensuring that we all have access to high-quality aged care should be considered a fundamental responsibility of governments at all levels. If left to the private sector, high-quality aged care that affords dignity and autonomy to residents will be available to ever fewer of our vulnerable elderly loved ones. For-profit aged-care facilities may provide high-quality services to those who can afford it, but where does that leave everyone else? The cost of decent food, the activities and outings that we would like to think people get to enjoy, individual attention and basic health care will be continually squeezed to fatten profit margins. The chances are that one day most of us will need this kind of care and almost certainly each one of us will have a family member or a loved one who does. I support the bill. I particularly welcome the additional transparency it will allow in the aged-care sector, but it is really just the tip of the iceberg. I trust that the broader issues being exposed in the aged-care sector will be addressed by all levels of government with the urgency that they deserve. I commend the bill to the House.