




Speech By
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MEMBER FOR WARREGO

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PUBLIC HEALTH AND OTHER LEGISLATION (FURTHER EXTENSION OF EXPIRING PROVISIONS) AMENDMENT BILL

 **Ms LEAHY** (Warrego—LNP) (6.20 pm): I rise to contribute to the debate on the Public Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill. The bill provides an extension of the provisions debated in April this year in relation to local government, providing flexibility to facilitate the holding of COVID-safe local government by-elections and fresh elections, an extension of the operation of the COVID related local government meeting provisions.

The LNP will not oppose this bill; however, the opposition will move amendments that have been outlined earlier by my parliamentary colleagues. I have no doubt the government will cry foul and make it sound like the LNP is trying to defy health advice and that we will not listen to medical advice and experts. That could not be further from the truth. The amendments put forward are an aspirational target for the transition away from restrictions. The position Queensland now finds itself in is very different to when this House debated similar provisions earlier in the year. At that point in time the vaccine rollout here in Queensland had not commenced. I am pleased to say that some of my communities are up around 60 per cent. In the future Queenslanders need the opportunity to transition away from how we have been living for the past 18 months. It is the responsibility of government to provide a step-by-step road map grounded by expert advice that shows Queenslanders the path out of this pandemic. Queenslanders need to have this advice available to them.

There is also a need for the government to provide a road map for border communities that are seriously disrupted. It is not just with New South Wales: there is a need to consider South Australia, which my electorate borders, and the Northern Territory. There is no doubt that border communities need a cross-border commissioner in Queensland who understands the complexities of border communities like Mungindi. A Queensland commissioner could also ensure there is a safe and ongoing framework for boarding school students to provide parents with the certainty of being reunited with their children during school holidays.

The government clearly has a problem with consistency. It has been absolutely galling this week for Mungindi residents to read of the NRL entourage jetting in from Sydney whilst Queensland Health nurses who work at the Mungindi Hospital in Queensland cannot cross the border to come to work. Where is the health advice to downgrade services at the Mungindi Hospital during a pandemic? Where is the health advice to lock the staff out of the hospital during a pandemic and when we are expecting and starting on a large grain harvest? This is a ludicrous decision. Common sense has to prevail. The Mungindi community has not had one COVID case since the start of this pandemic. Mungindi is an example of where a genuine border zone is needed rather than the road map of problems I will table in this House.

Tabled paper: Document, undated, titled 'Mungindi, QLD 2406' [1319](#).

They need to have a genuine border bubble and a genuine zone, not the list of problems they have. I also have constituents who have raised the need for an agricultural border zone with the South Australian border in case of future Queensland border closures with that state. The current class

exemption for agriculture is not practical for South Australia because there is a lack of COVID testing out in that area. In fact, there is no health facility to even provide that testing. These properties are very isolated from other major communities, and I am pleased to say that vaccination rates in some of those properties is 100 per cent. I will take the opportunity in this debate to ask the government for a South Australian agricultural border zone for future border closures.

The LNP want Queenslanders to have better access to the vaccine should they choose to be vaccinated. That is not happening in all regional areas, despite locals actively seeking vaccination. In particular, the Western Downs is reported to have a vaccination rate of only 21 per cent—well below the state average. There is a need for mass vaccination hubs across the Western Downs. These communities are on the north-south freight routes and they are on the frontline. Mass vaccination clinics have shown to be successful in other communities like Goondiwindi, and I take this opportunity to call for mass vaccination clinics in Dalby, Tara, Moonie, Miles and Chinchilla as a matter of urgency. The Western Downs vaccination rate must be increased above 21 per cent. It is way too low for a region that is so near to the border. We only have to look at the exposure sites today to see how important it is to fast-track southern communities' vaccination opportunities.