




Speech By  
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**MEMBER FOR GREGORY**

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## **COVID-19 EMERGENCY RESPONSE AND OTHER LEGISLATION AMENDMENT BILL**

 **Mr MILLAR** (Gregory—LNP) (4.05 pm): As with the previous COVID-19 emergency response legislation debated last year, the LNP will support the extensions contained in this bill. Clearly, the COVID-19 pandemic has a long way to play out. While Australia has been fortunate, we look with horror and sympathy on the experiences of friends and neighbours around the world. First to mind is our closest neighbour, Papua New Guinea. It is incumbent on both the state of Queensland and the Australian government to do everything we can to assist them in this health crisis. We must also show care for our Pacific island neighbours and Indonesia, as we are relying on our Pacific island neighbours to harvest our food. There is an argument that we should be vaccinating them when they arrive.

Despite vaccinations, the situation overseas has not vastly improved on a year ago. Today, media is reporting an increase in COVID-19 infections in India, with up to 200,000 cases a day. Curfews have been reinstated and hospital beds and oxygen supplies are running out. Places such as Thailand, Hong Kong and even Japan are seeing surges that, if they continue, could constitute a third wave in Asia. The seat of Gregory has very close trade ties with Japan. For Japan, which is hoping for a delayed Olympics, it must be very challenging.

For all of us this is horrible proof that the pandemic is nowhere near at an end. It puts all governments on notice that the arrangements they are putting in place must be of a calibre to stay in place for some time. At the same time, the opposition will be alert to any attempt to use COVID-19 as a cover for legislation or administrative arrangements that sacrifice the rights of Queenslanders to government convenience. I am receiving complaints from constituents who are experiencing unexpected slowness in having a variety of government forms processed. They are still being told that it is because public servants are working from home, yet we are not under curfew and most private employees are back at the office or at the shop.

I want to congratulate the citizens of Queensland on their willingness to take up the required COVID-19 measures advised by the Chief Health Officer. Queenslanders have complied with a myriad of inconveniences to contain COVID-19, from social distancing to border closures. Even in the most far-flung parts of our state people have been largely uncomplaining. Their care for their fellow Queenslanders has been obvious in their response. In return, the Queensland government must deal with the Queensland public openly and honestly.

The owner of a small cafe who is complying with a two-square-metre rule for her or his customers finds it a little confusing when stadiums are packed out with football fans. They also find it confusing when hospitality businesses—from pubs to tiny takeaway coffee bars—have to operate with patron sign-ins while Bunnings and Woolworths do not. It is also concerning to most people that every Sunday churches have to operate as sites for potential mass spreading events but seven days a week Bunnings, Woolworths and Indooroopilly Shopping Centre present no such risk.

COVID-19 rules should be put in place due to health requirements. Glaring inconsistencies in one rule undermine all rulings, and that undermines everyone's commitment. Queenslanders have shown they are willing and capable of pulling together to contain COVID-19, but they want clear and consistent rules; they want to understand why they are doing it and what they are doing it for. We are a year into this and we should have become better at responding to the situation.

Quite apart from our snap border closures, it is worth remembering that Victorians have been caught out twice by their own state closing borders to Queensland—on New Year's Eve and in the week before Easter. As I said, we are over a year into the pandemic. Border closures were first used whilst states brought their contact-tracing teams up to full strength and full alert. If this has been achieved, the need for snap border closures should be well and truly past.

I urge the government to work productively rather than politically in national cabinet to make these snap closures of state borders, one against the other, a memory for Queenslanders and for all Australians. We are stronger together, and tourism is one of the pillars of the Queensland economy. Surely we are now at a stage when the states can all agree on what constitutes a cluster and what represents a trigger. The public certainly expects that we should be. Any sensible person knows that among our blessings in this crisis have been our warm, dry, sunny climate and our dispersed settlement patterns. This is nowhere more true than in my electorate of Gregory, where over 50 per cent of us are officially classified as living remotely or very remotely. I believe that the people of Gregory deserve particular congratulations for the calm way they have gone about things. Having said that, I do agree with many voices in the Townsville region calling on the government to recognise that Queensland's vast size means that government should try to avoid blanket bans and recognise different situations across Queensland's regions. A good example of that is that what happens in Eagle Street in Brisbane is completely different from what happens in Eagle Street in Longreach. They are so far away from each other—

**Ms Boyd** interjected.

**Madam DEPUTY SPEAKER** (Mrs Gerber): Pause the clock! Member for Pine Rivers, cease your interjections.

**Mr MILLAR:** As I said, we are a big state and there is a big difference between Eagle Street in Brisbane and Eagle Street in Longreach. The PA Hospital cluster saw all Queenslanders having to wear masks, even in Birdsville. Queenslanders were confused and a little bit concerned. They remember when the health advice said that masks were not the best response; then they were being told that wearing a mask in Bedourie would help prevent a cluster spreading in Woolloongabba. It shows no thought for people from Barcaldine to Bamaga.

I am delighted to see national cabinet being brought back on duty. I urge the government to see that it deals with these issues as well as the issues we see arising in relation to vaccinations. I should note that Gregory is in the unusual position of having two different approaches to vaccinations unfolding simultaneously. I urge the Premier to review the experiences and take the learnings to national cabinet.

On the eastern side of Gregory, the Central Highlands, we have the same experience as our fellow Australians with a phased rollout via GP clinics. Our problem is that we have only one participating GP in the Central Highlands, which is an area the size of Tasmania. On the western side of Gregory, the Central West Hospital and Health Service has joined forces with the Royal Flying Doctor Service to roll out mobile vaccination clinics which are open to everyone over the age of 18. There has been no phased rollout; it is open to all. It is working very well for Western Queensland and they are doing a fantastic job. This approach has resulted in a much higher vaccination rate per capita than other parts of Queensland have achieved. I congratulate the board of the Central West Hospital and Health Service and the Royal Flying Doctor Service on their success.

I urge the government to take the Gregory statistics to help inform national cabinet deliberations on the best approach. Vaccination is important, but I believe that it will not be the saving grace many believe it will be, for a number of reasons. There is much we do not know. It seems that a vaccinated person will still be able to spread COVID-19.

Meanwhile, the virus is doing what the virus does: it is mutating. We have seen more strains, such as the South African variant, the UK variant and the Brazilian variant. The current wave in India seems to be the result of a double mutation Indian variant, and countries are closing their international borders to India and Pakistan as a result. Experts say that this means we are facing a yearly COVID vaccination, as we have with the flu. If that turns out to be the case, working out the best approach for mass vaccinations in different parts of Australia is going to be so important. It is going to be an investment in our future. I hope the Queensland government will be approaching this first vaccination rollout in that humble spirit of trial and error, tweak and learn.

I commend the Queensland Department of Health and everybody who has been involved in the vaccination program as well as the COVID-19 situation across Queensland for well over 18 months. They have done a fantastic job. Queensland has shown the way in how to approach this and how to move forward.

I want to again congratulate people in my electorate, particularly the Central Queensland Hospital and Health Service, the Central West Hospital and Health Service and the Royal Flying Doctor Service, for the lengths they have gone to when it comes to getting the vaccinations out.

The problem which we need fixed in the Central Highlands is that we have only one GP clinic to roll out vaccinations over an area equivalent to the size of Tasmania. We need to have some sort of program, like they have in the Central West with the Royal Flying Doctor Service, whereby mobile vaccination units can move around areas to get people vaccinated and vaccinated quickly. I commend this bill to the House.