



Speech By Ros Bates

MEMBER FOR MUDGEERABA

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PRIVATE MEMBER'S STATEMENT

Health System

Ms BATES (Mudgeeraba—LNP) (2.00 pm): I have said it before in this House, and I will say it again: we owe it to Queenslanders to get health care right. At the moment those opposite are not getting it right. It is worse than that; those opposite are losing control of Queensland's public hospital system. As a nurse I know. I know what good health care means to honest Queenslanders. When arriving at a hospital, people are often at their most vulnerable. Our amazing doctors, nurses, paramedics and other clinicians across the state know that too. Yesterday in this place we heard the Premier, the Treasurer and the Minister for Health stand up and say that they would deliver a record investment for Queensland Health. I look forward to seeing those details in the budget next month.

The Minister for Health jumped up and down and rattled off a list of numbers about increases to the budgets of HHSs across the state but, as clinicians on the front line will tell you, spending money does not necessarily deliver a meaningful outcome. If you want to talk about meaningful outcomes in health care, let us talk about patients. A meaningful outcome is an ambulance being able to respond quickly when someone in need calls triple 0. A meaningful outcome is the prompt and efficient transfer of care between paramedics and hospital staff. A meaningful outcome is a patient being seen in the clinically recommended time frame when they arrive at their local emergency department. When we talk about health care, these are the outcomes that matter to Queenslanders and right now those things have fallen by the wayside under those opposite. The decline of our public health system is not made up. The impact is real. The human faces that we have seen in recent weeks are not fiction, as those opposite have so ungraciously claimed.

With the health minister so eager to talk about the statistics yesterday, let me remind the House of these numbers: ramping at Logan Hospital is at 53 per cent, Royal Brisbane 51 per cent, Redland Hospital 51 per cent, Redcliffe Hospital 50 per cent, Gold Coast University Hospital 50 per cent, Sunshine Coast University Hospital 50 per cent, Gladstone Hospital 49 per cent, Ipswich Hospital 49 per cent, Prince Charles Hospital 48 per cent, Nambour Hospital 43 per cent, Robina Hospital 41 per cent, QEII Hospital 41 per cent and Caboolture Hospital 40 per cent. In real terms, that means that when someone shows up at one of these hospitals via ambulance they are more than likely to wait 30 minutes or more before they are seen by a doctor or a nurse. In some cases, for the first time in a generation, they are actually more likely to stay on an ambulance stretcher longer than the clinically recommended time frame, and that is a fact.

If those opposite cannot manage the system properly, then numbers in the budget papers mean nothing. They mean nothing to the patients waiting hours for an ambulance after calling triple 0. They mean nothing to the patients stuck on a hospital ramp and they mean nothing to the patient in an ED corridor waiting for a bed. I say this to those opposite: get your house in order, because you are losing control of our public hospital system.