



# Hon. Yvette D'Ath

#### MEMBER FOR REDCLIFFE

Record of Proceedings, 24 February 2021

## PUBLIC HEALTH AND OTHER LEGISLATION (EXTENSION OF EXPIRING PROVISIONS) AMEMDMENT BILL

#### Second Reading

Hon. YM D'ATH (Redcliffe—ALP) (Minister for Health and Ambulance Services) (6.43 pm), in reply: I thank all members for their contributions on this very important bill. I recognise and thank the members for acknowledging the great work of our frontline staff, particularly our health workers, our paramedics, our police, those working on the borders, those working in our hospitals but also those working in our retail shops and in other services who kept going to ensure that we had the products, goods and services that we needed while we went through this over the last 12 months. Sadly, some of those people have been treated atrociously. Thankfully, the majority of the community have been very respectful, but some have treated others atrociously.

I remember very early on hearing stories that health service staff had stopped wearing their uniforms home. They were taking their scrubs off because they were being spat at and abused because of the job they did, trying to keep us safe. Retail workers were abused simply for doing their job. It was just shocking. I thank all the members who acknowledged the important contributions of all those workers. It does not stop. There are still people working on those COVID wards today. We may have only seven active cases right now, but on any given day we do not know what we will find after we do the tests and how many positive cases there are.

Those numbers have been higher. At one point we had tens of thousands of people in quarantine—not just in hotel quarantine but also quarantining at home. Think about that. We were asking people to go home and stay home, including people who were positive. If they were well, they were isolating and quarantining at home and were being remotely cared for through the HHSs. They were to not leave home and not go out for any reason whatsoever, not even to get groceries, for the period they were being treated. They did it. They put their trust and confidence in us. Why? Because we had put in place a framework, through this legislation, that ensured every decision we made was based on medical advice. We did not do what New South Wales did and give the power to the minister to decide whether there should be any restrictions, lockdowns or border closures. We put it in the hands of the Chief Health Officer and the clinicians, and so we should. That is what this bill seeks to extend. It is the right thing to do.

I take issue with those members on the other side who said that they support the Chief Health Officer, they think she has done a fantastic job, they support her advice and they would act on that advice but then said, 'But we want to see the evidence.' In other words they are saying, 'We trust your advice, but prove it. We know that you are an expert in your field and we know you have extensive experience, but we do not quite trust what you say. Can you please divulge the confidential information that comes out of the AHPPC? Can you please divulge all the conversations you have with all of your colleagues and the 60-odd staff that we have all around the state feeding in various information around

serology and everything else?' The CHO stands up every single time there is a restriction and explains why we are putting it in place. The CHO makes herself available every single time, answers every single question that the media ask her, has briefed the opposition, has answered questions in parliamentary committees and was available to answer questions in estimates, yet we are being told that we are keeping the community in the dark and we are not communicating. It is just extraordinary.

I thank all of the members who came along for the CHO's briefing today. We thought it was a really positive information session. We really valued the really good questions that people asked today. I thank members very much; we appreciate that. We have been extremely transparent and we have communicated like no government has ever communicated before.

**Mr Watts:** Come to Toowoomba and be transparent. Come on, Minister. You have told them nothing.

**Mrs D'ATH:** I take that interjection. This bill is not about whether we establish a quarantine facility at Toowoomba.

Mr Watts interjected.

**Madam DEPUTY SPEAKER** (Ms Lui): Member for Toowoomba North, cease all interjections, please.

**Mrs D'ATH:** The reality is that no decisions have been made around that, and I would ask that members be more constructive in considering. We in Cairns, Townsville, Brisbane and the Gold Coast have all been managing quarantine from day one, yet we are not complaining. The fact is that we have to be sensible. We do not scaremonger. We should be sensible and have a discussion about whether there needs to be, and there can be, better ways of managing hotel quarantine. No decisions have been made.

I want to focus on the issue of the communication around our decisions and the idea that we should have a criteria—a criteria that everyone apparently wants to see; if we get five cases we will do this and if we get 10 cases we will do that. The member for Currumbin said that that would make it easier for people to book holidays and book flights. No, it would not. Even if it were remotely possible to have black and white criteria, it still would not tell people when there was going to be an outbreak. We cannot plan when there is going to be community transmission. We cannot say, 'On Wednesday every second week we are going to get an outbreak so do not book a holiday around then.'

We can have the best criteria in the world, but we do not know when we wake up tomorrow whether there is going to be a positive case. We cannot go out and consult and say, 'Would you like us to do something about this? How do you feel about it? What would you like us to do?' We have to act and we have to act decisively. That is what we have to do. The World Health Organization said on 11 March that we must act decisively.

There is complexity around this. If we get a positive case today the issue is what variant they have. Is it the UK variant? Is it the South Africa variant? They are much more contagious. Have they just become sick today? Does that mean they were infectious two days ago? Where have they been in those two days? They may have been nowhere, immediately got tested and isolated until they got their result. That is great; there is very little risk that there has been any spread in the community.

Alternatively, there could be someone who has been sick, coughing and feeling unwell for the last seven days. They went and got tested, but while they were waiting for their results they went shopping, went to a wedding, went to a cafe and went to a restaurant. They could have gone to 30 or 40 sites over the seven days. The contact numbers could be in the thousands.

With the Glen Hotel I think there were around 500 people impacted as a result of one visit by one person. We need to think about that. We just cannot have a rule that if we get 10 cases a day for three days in a row then that is when we should implement restrictions. If we get 30 cases of the South Africa or UK variant in three days and we have not done anything, it is out of the box. The Chief Health Officer has made that very clear. We have been transparent. We have communicated like no other government has ever communicated on an issue before. We thank the Chief Health Officer and the other amazing people who have kept us safe.

I want to go back to the comments of the Director-General of World Health Organization on 11 March when declaring the pandemic. He stated—

There's been so much attention on one word.

#### COVID. He continued-

Let me give you some other words that matter much more, and that are much more actionable.

Prevention.

Preparedness.

Public health.

Political leadership.

And most of all, people.

We're in this together, to do the right things with calm and protect the citizens of the world. It's doable.

It is doable. It is doable. We are doing it. It is because of legislation like this—and I welcome the support for it across the parliament—that we can continue to keep the community safe while we roll out the vaccine and while we work towards what we hope is a better future for everyone and for business as well.

In talking about business, I want to touch on the issue the member for Buderim raised around small businesses and the registration process. We understand that it has been a challenge for everyone to have to register at venues. We know that not everyone has a smartphone. We know some elderly people do not have any sort of digital device that they can register with. We are working with small business to make it easier. We have not hit the end of the road yet. There is still more to do. We want to make it easier and we are working to do that. We want to make it easier for the community and for small business. The Premier has already indicated that we are undertaking that work. I wanted to address that issue raised by the member for Buderim.

The member for Currumbin's comments that we are keeping people in the dark like mushrooms is offensive. It is offensive to all those working in the health area. It is offensive to the Chief Health Officer who has made herself available each and every time these decisions are made. I acknowledge her great work. I acknowledge my director-general, Dr John Wakefield. I acknowledge all people in our health services and in my wonderful department. For the time I have been the Minister for Health and Ambulance Services I have been in awe of the amazing people around me and of their expertise, knowledge and dedication.

When it comes to dedication, I want to talk about Zoe Park—the first person to get the vaccine. She is a registered nurse. She deserves to be safe. That is what the vaccine is about. She goes to work every day to treat positive patients and keeps us safe. I could not be more thrilled that she was the first to get the vaccine. She deserves to feel safe in her job. She said, 'I feel safer for having the vaccine.' Everyone should follow Zoe's lead.

I give a shout-out to Erin, the nurse unit manager, whom I met at the vaccination centre on Monday. Erin donned all the PPE. She was the first person to care for the first positive COVID patient who walked into the Gold Coast University Hospital on 28 January. She was there on Monday as the nurse unit manager to see the first vaccination. She said she was getting texts from her family overnight wishing her all the best for the next day and congratulating her. They were so proud of her. Erin, we are proud of you. Thank you for what you do. I commend the bill to the House.

Question put—That the bill be now read a second time.

Motion agreed to.

Bill read a second time.

#### **Consideration in Detail**

Clauses 1 to 16, as read, agreed to.

#### Third Reading

move—

Hon. YM D'ATH (Redcliffe—ALP) (Minister for Health and Ambulance Services) (6.56 pm): I

That the bill be now read a third time.

Question put—That the bill be now read a third time.

Motion agreed to.

Bill read a third time.

### **Long Title**

Hon. YM D'ATH (Redcliffe—ALP) (Minister for Health and Ambulance Services) (6.56 pm): I move—

That the long title of the bill be agreed to.

Question put—That the long title of the bill be agreed to.

Motion agreed to.