



Aaron Harper

MEMBER FOR THURINGOWA

Record of Proceedings, 12 May 2022

HEALTH AND ENVIRONMENT COMMITTEE

Report, Motion to Take Note



Mr HARPER (Thuringowa—ALP) (3.01 pm): I move—

That the House take note of the Health and Environment Committee Report No. 18, 57th Parliament, *Inquiry into the provision of primary, allied and private health care, aged care and NDIS care services and its impact on the Queensland public health system,* tabled on 8 April 2022.

I am proud to speak to this report, and speak slowly for the Leader of the Opposition in regard to the terms of reference. Yesterday he again demonstrated gutter level politics when he said it was a sham report. That is an insult to every member of the committee, including those on his side. Those members stood with us when we were in Longreach and said the many causes need to be fixed, such as Medicare rebate cuts in relation to GPs in the bush reading ECGs. I urge him to rise above that type of politics.

I experienced ambulance ramping in my former career when the LNP was in power. To fix something you need to first identify and address the problem. I call on the Leader of the Opposition to man up. If he wants to demonstrate leadership, pick up the phone to Scott Morrison, agree with the AMA national president who appeared on *The Project* last night, and ask for fifty-fifty funding.

Ms Bates: What did the AMAQ president say?

Mr HARPER: I will take the interjection.

Ms Bates: Did he say more beds? 1,500 beds is what the AMAQ says.

Mr HARPER: I will tell the member for Mudgeeraba right now that they sacked 4,000 nurses. To fix this you need to identify the causes. I thank the Minister for Health for the excellent interim response to the recommendations. That is in stark contrast to the Australian government, which cannot be bothered responding to our calls to fix funding. The No. 1 recommendation is fifty-fifty funding and removal of the 6.5 per cent cap. I ask the member for Moggill, the previous AMA Queensland president: do you agree, and does the LNP agree, with what was said by the AMA last night on *The Project* that ambulance ramping is nationwide? Their critique of it was that the federal government had failed for a decade to keep the funding up to the states. They called for fifty-fifty funding.

Let us talk about aged care and the 250 people a day who walk into the Townsville emergency department. Seventy per cent walk in because they cannot get access to a GP. We heard in Far North Queensland that people drive an hour and a half to see a GP in Cairns. This is simply not good enough. The member for Redlands talked about codes 1 and 2 numbering 38,000. That number is almost 50,000 when one looks at the codes 1 to 4 of Queensland ambulance transports out of the state's 459 aged-care facilities, of which we run 16.

Yesterday I met a paramedic who told me that she had transported a low-acuity patient to the Gold Coast hospital for a catheter change and the nurse said to her, 'I am trained to do this, but the private provider will not purchase the \$60 pack to do it.' It is a shame for that person to be moved not

once but twice for a simple procedure. We need to fix aged care. The federal government has dropped the ball on primary care. The federal government has dropped the ball on aged care. A royal commission has called for improvements. People are dying at home waiting for a home care package. For goodness sake, fix that up. If the right models of care are in place it will address the issue. You need to identify the issues. You need to fix the issues.

Ms Bates: In their loved one's arms!

Mr HARPER: Member for Mudgeeraba, it is not even worth going there. There are 500 beds taken up by aged-care and NDIS participants. The NDIA is more interested in contesting assessments than getting people out of those hospitals. That is the size of Townsville University Hospital. Funnelling everything into the front door does not work. We need to start moving those patients to proper models of care in residential aged care or home care. We need to do the same with NDIS patients. Primary care is the cornerstone of care. Getting that right will reduce the impact on our emergency departments across the state. We made 40 recommendations. I thank the Minister for Health for her excellent response. Let us fix this. The LNP need to join us and fix it.