



Speech By Aaron Harper

MEMBER FOR THURINGOWA

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PUBLIC HEALTH AND OTHER LEGISLATION (COVID-19 MANAGEMENT) AMENDMENT BILL

Mr HARPER (Thuringowa—ALP) (4.51 pm): I rise to speak on the Public Health and Other Legislation (COVID-19 Management) Amendment Bill 2022. We are reminded all the time by the member for Mudgeeraba that she was a nurse for 40 years, so I would like to share with the House that I was a paramedic.

Ms Boyd: Were you really? I didn't know this!

Mr HARPER: Yes, members. Indeed I was.

Ms Boyd: What kind of paramedic?

Mr HARPER: In fact, I was a critical care flight paramedic. I share with the House that only last week I received my 30-year service award from the Queensland Ambulance Service. I certainly know what those on the front line have done over the past couple of years. I want to acknowledge the extraordinary work done by all involved, particularly in the health sector, in managing COVID-19 in this state—the thousands of dedicated health staff who not only looked after thousands of patients in very challenging times but also staffed the fever clinics and, importantly, the vaccination clinics. I also want to thank the people of my home town—I am sure I am joined in this by the member for Townsville—who followed the sound COVID advice set by the then chief health officer and now Queensland Governor, Dr Jeannette Young; our interim CHO, Dr Peter Aitken, a personal mentor of mine who once was a senior consultant at the emergency department in Townsville; and Dr John Gerrard.

We kept the borders shut to ensure Queensland was safe, despite the 64 times the former leader of the LNP opposition, the member for Nanango—much like One Nation and Clive Palmer; there are some credible people!—called for them to be opened and put our community at risk. In fact, I recall the 'member for glass jaw'—my apologies, the member for Glass House—

Mrs FRECKLINGTON: Mr Deputy Speaker, I rise to a point of order.

Mr HARPER:---who was on record in this place in March 2020---

Mr DEPUTY SPEAKER (Mr Lister): Member for Thuringowa—

Mr HARPER: I withdraw.

Mr DEPUTY SPEAKER: Would you please resume your seat. What is your point of order, member for Nanango?

Mrs FRECKLINGTON: Obviously the member does not know who he is withdrawing for: Glass House, Nanango—who knows?

Mr DEPUTY SPEAKER: Get to the point, please, member for Nanango.

Mrs FRECKLINGTON: I would ask the member to withdraw. I have taken personal offence and I ask him to withdraw. He is completely making it up.

Mr DEPUTY SPEAKER: Member for Thuringowa, did you withdraw? **Mr HARPER:** I did.

Mr DEPUTY SPEAKER: Thank you. Please continue.

Mr HARPER: I will continue my contribution, thank you very much. I hope the member for Nanango pays attention. The member for Glass House is on record in this place in March 2020 saying that the worst was over. Good grief! Really? Millions of people around the world died, including thousands in this country, particularly in the southern states of New South Wales and Victoria. How dreadfully out of touch those opposite were and still are.

The bulk of the Queensland population followed sound COVID advice from the AHPPC and National Cabinet to our CHOs, who provided that same advice to our Premier and health minister along the way. We kept our economy strong. We kept the people of Queensland safe. Of course, I must acknowledge the Premier for her stewardship in dealing with this awful global pandemic. Who will forget those awful images from around the world of mass graves? Millions of people across the world lost their lives. In a crisis, leadership is our most important tool. Leadership is paramount. All the hard and difficult decisions made were all for one thing: to keep Queenslanders safe. I thank the Premier.

The objective of the bill is to provide for continued management of COVID-19 in Queensland by replacing the temporary emergency framework, which was enacted to manage the response to the pandemic, with: new temporary powers to make and enforce public health directions to manage COVID-19 as a notifiable condition under the Public Health Act 2005 until 31 October 2023, and new procedures and safeguards for issuing public health directions for COVID-19; and an extended expiry date, of up to 12 months, for the temporary COVID-19 emergency measures in the Corrective Services Act. The bill amends the Public Health Act to repeal some provisions of the Public Health Act which provided for additional powers such as enforcement of directions and other matters in relation to the COVID-19 emergency. There was general support for the bill. Submissions from organisations in the healthcare sector all supported the bill, although some specific and separate issues were raised by some submitters.

Our committee made one recommendation—I thank all members of the committee—that is, that the bill be passed. The House should note that, subsequent to the introduction of the bill, on 30 September 2022 National Cabinet agreed to end the requirement for mandatory isolation for COVID-19 cases from 14 October 2022, and this may affect some elements of this bill. Most of the submissions opposing the bill in its entirety considered that the emergency powers were not required for various reasons including that the emergency situation no longer exists, that previous measures deployed through the use of emergency powers were ineffective, and that the rules about mandatory isolation, quarantine and mask wearing were a breach of human rights. We considered all of that.

In relation to the need for special powers, some submitters objected to the ongoing use of emergency or extended powers. The Chief Health Officer—member for Nanango, pay attention— Dr John Gerrard, told the committee that at this time he did not expect that the powers will be used often, or possibly at all, but that it was important that Queensland has the ability to respond immediately if required—if something unexpected happens or the cumulative effects of successive waves of COVID-19 create a serious risk in the community. It is a real shame that the opposition is not supporting this bill, because no-one has a crystal ball. We have just dealt with a global pandemic in this state, and we did it well. Dr Gerrard further advised—

There would have to be a very significant change in the virus ... for us to consider implementing measures such as lockdowns or gathering restrictions—

like that again.

If there was some unexpected major change or shift in the virus such that it became much more contagious and/or much deadlier, which is unlikely, then that would need parliament's involvement, and I think that's appropriate.

Some submitters were concerned about serious risks not being defined in the bill. Empowering the Chief Health Officer to give a public health direction, rather than a minister or an elected representative, was a concern for some submitters. There were also some concerns about the extension of emergency powers under the Corrective Services Act which would have an impact on prisoners' wellbeing and access to legal and health services. As the member for Caloundra has aptly demonstrated in this House, correctional facilities are already very difficult establishments in which to maintain good order. They already have their challenges, with close confinement of prisoners. In saying that, the Queensland Corrective Services response to those issues was—

... COVID-19 is more sustainable, a new Custodial Operations Pandemic Response Planning Tool has been implemented.

This approach has utilised targeted strategies, in consultation with Queensland Health, to reduce the need for centre-wide lockdowns and other restrictions that have previously impacted visits and service delivery.

The Palaszczuk government has led the nation in its measured response to COVID-19. Before vaccines became widely available, we ensured there was minimal community transmission. This ensured we kept our economy open and prevented the extended lockdowns that we saw in places like Victoria and New South Wales. It also meant we were able to save many people's lives.

Our vaccine rollout ensured we were able to open our borders in a safe and considered way. The vaccine plan to unite families meant that we could reunite families and manage the first COVID-19 wave in a way that did not overwhelm our hospital system. A strong level of vaccination coverage in Queensland has ensured that we could withstand not just the first wave but the second and third Omicron waves. Not only has it supported our health system, but our strong management of the pandemic has laid the basis for Queensland to be Australia's strongest mainland economy.

This bill marks the next phase of our plan. It recognises that we are in a new phase of the pandemic which requires a different response to the one we have historically adopted. We know that we cannot just do away with the pandemic framework. No matter how fatigued by the pandemic we may be, it would be irresponsible to adopt the LNP's suggestion to remove the pandemic management framework. But of course the LNP knows all about being irresponsible when it comes to managing the pandemic: they called for the borders to be opened 64 times.

Honourable members interjected.

Mr HARPER: Worse, the member for Broadwater does not support our frontline health workers. He was at the front line when it came to attacking Dr Jeannette Young. Who could ever forget the moment he referred to her as a 'punch-drunk bureaucrat'. He should unreservedly apologise in this House and speak on this bill. That is not the making of a parliamentarian. It is certainly not the making of the leader he purports to be. He should apologise to the Chief Health Officer; he should apologise to the Governor of Queensland. The LNP does not want to support this framework because they do not want to acknowledge the continued existence of COVID-19. I believe this is a sound bill and I commend the bill to the House.