




Speech By
Ali King

MEMBER FOR PUMICESTONE

Record of Proceedings, 24 February 2022

HEALTH AND OTHER LEGISLATION AMENDMENT BILL

 **Ms KING** (Pumicestone—ALP) (12.25 pm): I rise to make my contribution on the Health and Other Legislation Amendment Bill. This carefully considered and very necessary legislation supports the delivery of health care, supports small businesses and moves to protect human rights. We have seen as never before the enormous value that our community places on the provision of health care. I have no doubt whatsoever that I stand here as the member for Pumicestone based on my community's value for health care and their appreciation of the enormous investments in their health care that have been made by this Palaszczuk Labor government.

I note the contribution from the member for Currumbin and acknowledge the really fantastic Gold Coast University Hospital that serves her electorate. In my own electorate, I know that my constituents are proud to see the doubling in size of Caboolture Hospital and enthusiastic beyond description to know that they are soon to receive not one but two satellite hospitals to provide more health care closer to home. I contrast that with the record of those opposite, who in their three years in government planned exactly zero new hospitals—a shameful and disgraceful omission of duty. Every Queenslanders, I am sure, would join me in acknowledging our health workers. So much of this bill is about making their jobs easier and smoother.

The member for Hill and others have complained about the introduction of omnibus bills and stated that they would prefer for every change to be individually debated. I can only put this down to those members preferring not to read long explanatory notes and engage in multiple complex issues at one time. These are good, important and carefully considered and consulted amendments, and I support them.

This bill overall has undergone broad consultation with a wide range of stakeholders including representatives from the medical, nursing, pharmaceutical, mental health and Aboriginal and Torres Strait Islander health communities as well as with government agencies and statutory office representatives. Where stakeholders made suggestions during consultation to improve the bill, these were routinely taken on board and incorporated into the legislation. For example, the final bill took on consultation to align the Mental Health Act more closely with the Guardianship and Administration Act to ensure that a mentally ill person's views, wishes and preferences are taken into account, as far as practicable, when decisions are made under the Mental Health Act.

This bill is wideranging. It covers changes to support the treatment and care of forensic patients and it amends the Public Health Act to improve licence processes for businesses and licensing provisions for local government. The parts I want to address more closely are the aspects of the bill that go to donated breastmilk, to the delivery of ECT and to termination of pregnancy services.

Like other members of this House I am a regular blood donor, and I commend the Lifeblood organisation, formerly known as the Red Cross blood bank, for their dedicated care of Queenslanders. Several of my constituents and friends have had reason to access the Lifeblood milk bank in support of their sick and premature babies. We know that access to donated breastmilk for vulnerable babies can make a wonderful difference to their outcomes. Ensuring that breastmilk is not considered tissue under the Transplantation and Anatomy Act guarantees that this important work can continue.

On the matter of electroconvulsive therapy, I want to acknowledge a family who appeared in a recent public hearing before our Mental Health Select Committee, and I believe that the member for Southport made some reference to them in his contribution. That family described their challenges for their son Andy, who lives with severe autism and communication issues. As a young adult, Andy became depressed and ultimately was diagnosed with bipolar disorder. Andy's family's ability to access electroconvulsive therapy for him was quite literally a lifesaver. Smooth processes for delivering ECT to people like Andy remain essential, and that is why I was concerned to hear the member for Mirani's poorly informed comments about consent surrounding ECT. This area is extremely complex and it cannot be allowed to be compromised by the member for Mirani's current vaccination hobbyhorse and to therefore potentially harm our most vulnerable Queenslanders in accessing the health care that they so desperately need.

Turning to extending access to the Viewer to include allied health professionals, I note that our government is very proud of the Viewer and it is working exceptionally well. It has already delivered substantial benefits for patient care, and those benefits are not just benefits in terms of good health outcomes; they are cost savings as well. This powerful tool goes a long way to reduce health system fragmentation, ensures continuity of care and helps Queenslanders have their wishes respected, even when they may not be able to express or recount the complexities of their situation themselves in extremis. The consensus is that there are clear healthcare benefits to extending access to the Viewer that outweigh any potential privacy impacts and there are also strong safeguards to protect vulnerable people. With the current aged-care crisis brought on this state by the neglect of the Morrison government, outlined by the royal commission in its report titled *Neglect*, we see how very important it is in allowing appropriate allied health professionals like social workers and speech pathologists to understand a person's patient journey and know what their care information is at any point in time.

Finally and for me very importantly, I want to look at the amendments around the Termination of Pregnancy Act that enable registered students to assist in a termination of pregnancy. Along with many other members on this side of the House and even a few brave souls in the opposition, I am very proud of the Palaszczuk government's work to modernise Queensland's termination of pregnancy laws and of my own small part in that work prior to my election to this place. This government righted a historic wrong so women in this state can finally make their own decisions about their much needed health care without risking criminal sanction.

Many of the women for whom this essential health care is most important shared absolutely heartbreaking stories through the committee processes—like the women who learned at their 20-week scan that their much wanted babies had fatal health conditions or that they themselves had conditions like pre-eclampsia or severe infections that meant that their pregnancies could not continue. During those inquiries the committees heard over and over that if you live in a regional area and need an urgent termination the stigma for health workers of providing that health care that at that time was illegal was such that you might not be able to access care in the short time frame available.

Workforce shortages in reproductive health care are acute, especially in the regions, and Queensland women across our state will benefit greatly from the amendments in this bill. This parliament must do everything possible to ensure that we continue to grow our regional health workforce and especially in specialties like reproductive health care. By continuing to exclude students from observing and learning about termination of pregnancy, we would put a brake on the development of that much needed regional and rural health workforce and the most severe impacts of that would be on regional communities.

The claims by the member for Hill and others that students might be required to provide abortion care as part of their training or that these provisions constitute any kind of watering down of conscientious objection provisions are reckless, they are untrue and I absolutely condemn them. Their claims were speculative and fact free and once more we saw the KAP going full trump and seeking to promote alternative facts. It is ironic that those same members who claim to stand for freedom in health care seek to interfere in these most intimate and private matters that profoundly impact the lives of women.

Like the member for Keppel, I do have some concerns about the committee's recommendation 5 that the minister outline what measures exist to ensure students feel supported in exercising their conscientious objections. My concern is much more squarely with the woman undergoing a termination of pregnancy procedure for whatever reason and my concern will always be to see that she feels sufficiently supported, and I would be disappointed to see any dilution of that support by a diversion of resources to support conscientiously objecting students. It is women who must always stand front and centre in this process.

I thank the State Development and Regional Industries Committee for its consideration of this bill when our Health and Environment Committee was too busy with other inquiries to examine this bill. In closing, this robust, well-considered and carefully consulted legislation offers great benefits to Queenslanders and I commend it to the House.