




Speech By
Dr Christian Rowan

MEMBER FOR MOGGILL

Record of Proceedings, 23 February 2022

HEALTH AND OTHER LEGISLATION AMENDMENT BILL

 **Dr ROWAN** (Moggill—LNP) (3.32 pm): I rise to address the Health and Other Legislation Amendment Bill 2021. This legislation was introduced by the Minister for Health and Ambulance Services on 1 December 2021. It is legislation which seeks to amend nine separate acts across both the health and environment portfolios. This bill was ultimately referred to the State Development and Regional Industries Committee for its consideration. At the outset, I thank all who contributed to the examination of this legislation, including Services for Australian Rural and Remote Allied Health, the Queensland Human Rights Commission, the Office of the Information Commissioner, the Queensland Law Society and the Royal Australian and New Zealand College of Psychiatrists. They all provided submissions to the committee.

On 11 February 2022, the State Development and Regional Industries Committee tabled its report with five recommendations, including that the legislation be passed. As indicated by my colleague the LNP shadow minister for health and ambulance services, the Liberal National Party will not be opposing this legislation. However, in my contribution today I would like to reflect on a few matters pertaining to this legislation.

As articulated in the bill's explanatory notes, the Hospital and Health Boards Act 2011 will be amended to enable allied health professionals to access the Viewer program in order to achieve improved health outcomes for patients and to allow designated persons and prescribed health professionals to disclose confidential information to a person performing functions under the Mental Health Act 2016. Under the remit of Queensland Health's e-health initiatives, the Viewer collates data from multiple Queensland Health systems and sources and enables access by healthcare professionals, including general practitioners, to patients' information in a timely manner, thereby avoiding them having to log into separate information systems. This will certainly enhance clinical care and operational efficiency.

In considering those amendments that would extend access to the Viewer, it is worth noting that multiple stakeholders provided the committee with their views on the right to privacy of patients and the extent of control over their individual private information. To that end, the committee did recommend that Queensland Health investigate enhancing the functionality of the Viewer in order to provide patients with greater control over the type of information that can be seen by health providers and ensure that any changes relating to the Viewer be complemented by a comprehensive community engagement program. This is certainly a sensible recommendation.

The Liberal National Party provides its in-principle support for initiatives that provide patient access to health care, including digital health initiatives. Throughout the COVID-19 health pandemic, we have seen the innovative use of modern technology, including telehealth and videoconferencing, to support improved clinical care. These have been important advances, but at all times it has been imperative that improved clinical outcomes be balanced against the protection of patients' private information. I certainly hope that the Labor state government comprehensively takes note of stakeholder views and committee comments on the protection of privacy and related appropriate safeguards.

Queenslanders also know that Labor has had a number of issues when it comes to the implementation of information technology projects within the Queensland hospital and health system. Labor's track record on IT projects has been at times absolutely abysmal, with an obscene amount of taxpayers' dollars wasted over many years. This includes the problematic rollout of the electronic medical record, known as ieMR, with a cost blowout of close to \$300 million. It has effectively been shelved. There was the failure of the \$135 million purchasing system, which on day one was unable to function; the \$70 million that was spent on a pathology system which was ultimately mothballed; and the incredible \$1.25 billion disaster that was the Queensland Health payroll debacle under the then Bligh Labor government. Therefore, any move that the state Labor government makes to expand this e-health initiative, the Viewer, must proceed with absolute care and due diligence and with increased attention given to the protection of patient privacy and safeguards around such patient information technology systems.

I would also briefly like to note that the legislation before the House seeks to make amendments to the Mental Health Act 2016. These amendments pertain to the Mental Health Court and Mental Health Review Tribunal, specifically the transfer of patients, as well as other amendments to improve the operation of the Mental Health Act. As identified by the State Development and Regional Industries Committee—

The recently established Mental Health Select Committee is conducting an inquiry into mental health services to understand the needs and pressures on Queensland's mental health system. It is expected to report by 31 May 2022.

In the interim, the Bill proposes a series of amendments to improve processes for patients and enhance the rights-based approaches to mental health care in Queensland.

As the state member for Moggill and as an appointed member of the Queensland parliament's Mental Health Select Committee, I acknowledge the broad support of these recommendations by various stakeholders and the State Development and Regional Industries Committee comment—

The committee is satisfied that the proposed amendments to the Mental Health Act are reasonable and appropriate.

I also take this opportunity to briefly acknowledge the important work of the Mental Health Select Committee that has already been progressed to date. There are many members in this House including the chair, the member for Greenslopes; the deputy chair, the member for Southport; the member for Pumicestone; and many other members of both sides of the House who are progressing some very important work on that committee. I acknowledge and thank those submitters who have provided information and have appeared before the committee to date. There is certainly plenty more work to do, with a number of public hearings to be held, but certainly there are many important matters which are being raised there with respect to funding, workforce, and collaboration and coordination which will be addressed in due course.

In returning to the bill, I again note that this legislation broadly offers sensible amendments and changes which are common sense and necessary. There are also amendments with respect to electroconvulsive therapy. I know that they have been canvassed by a number of contributors to the debate so far, including the member for Bundaberg and others. Without relitigating all of those comments, these amendments are sensible. They strengthen informed consent and they certainly ensure best practice with respect to clinical care. Therefore, I support those.

That all being said, there is substantially more work that needs to be done to fix the current government's health and hospital crisis in Queensland and certainly the Liberal National Party has offered positive solutions to address those matters, including real-time data reporting for our hospitals, improved triaging and investment in additional inpatient beds as well as empowering frontline clinicians to make local decisions to ensure our public hospitals operate efficiently and effectively and in the best interests of patients.

Earlier the member for Mackay also highlighted the important work that our frontline clinicians—our doctors, nurses and allied health professionals—have been undertaking throughout the COVID-19 pandemic. I also want to take this opportunity to acknowledge all of the work that they have done. Whether that is those working in primary care and hospitals, those who have been vaccinating Queenslanders, those undertaking COVID-19 screening—our pathology providers—and those who have contributed to many of the services that have been provided in communities right across Queensland, it has been a tremendous effort by those health professionals over the last two years and there will be a lot more work to be done in relation to those who have had delays in surgical procedures or other care that has not been able to be provided for a variety of reasons over the last two years to ensure that they now get the optimal care that they need and getting those other health conditions back on track.

In closing, I thank all members of the State Development and Regional Industries Committee for their consideration of the legislation. I know that the LNP members—the deputy chair, the member for Lockyer, and the member for Burleigh—as well as other members of the committee have all done an immense amount of work, as have the committee secretariat and staff. They also do a huge amount of work on behalf of democracy here in Queensland in preparing a final report and contributing to scrutiny and oversight of the legislation, and I take this opportunity to thank them for all of the work that they do.