



## Speech By Christopher Whiting

## MEMBER FOR BANCROFT

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## ADJOURNMENT

## **Health Care**

**Mr WHITING** (Bancroft—ALP) (8.53 pm): The LNP has once again been talking down our healthcare workers here in the parliament this week, but what is clear is that it offers no alternative. What policies does it have? What ideas does it have? The answer is none. It has no policies, no ideas. Instead, it has four dot points, so let us dissect what the LNP is offering. Dot point 1—better resources. What could be better than 15,000 new frontline staff since 2015? What could be better than 9,000 new staff in this term of government? What could be better than three new hospitals, 11 new extensions and a new cancer centre as well? What could be better than more than 200 beds at Redcliffe or nearly 200 new beds at Caboolture? Try this: it is certainly better than sacking 4,400 frontline staff as the LNP did. The point is the LNP will never do better than us in supporting our health workers.

What about dot point 2—putting doctors in charge and staff back in charge? No, it will not. Remember this morning we pointed out that doctors are in charge of the birthing and obstetrics wards. They make medical decisions about where to locate patients, but the LNP does not support that. It does not want doctors in charge after all. In fact, I do believe that today it accused these doctors of practising torture on these patients. This dot point just shows its hypocrisy.

Let us look at dot point 3—better triage. I will tell members what this really means: kicking people out of our emergency wards. Let us be honest. It would say to patients, 'You're not too bad. Why don't you go to the private hospital down the road? Exercise your choice as a health consumer in a free market. Go to the private hospital down the road.'

Dot point 4—real-time data. This is one of my favourites. What does it actually mean? How does this actually improve the treatment of Queenslanders? Does the LNP really think putting current waiting times for emergency departments on a website is going to improve treatment? Let us look at this example: a kid in Deception Bay having an asthma attack. His dad goes online and says, 'Let's look and see where there's less waiting time—Caboolture or Redcliffe.' They go to one, but there is a car accident emergency at one and they are thinking, 'Maybe we should go to the other one.' Let me say this: how many staff would it need to put on to maintain a website 24 hours a day to collect that information and update that all of the time? It is plainly ludicrous. This part of its plan is plainly ludicrous. I think it has a secret fifth dot point in its secret plan and one that it does not mention but we see every day here, and that is politicising people's trauma: find cases of human tragedy, squeeze the story out of them and parade it through this parliament.