



Speech By Dale Last

MEMBER FOR BURDEKIN

Record of Proceedings, 23 February 2022

HEALTH AND OTHER LEGISLATION AMENDMENT BILL

Mr LAST (Burdekin—LNP) (6.26 pm): I rise to make a brief contribution to the Health and Other Legislation Amendment Bill 2021. Like many speakers before me I also want to acknowledge the work of our health staff and professionals in my electorate of the Burdekin, who have certainly been challenged over the last couple of years with this COVID pandemic.

By far and away health issues comprise the majority of the workload that comes through my electorate office. When you consider that for four long years we have been battling to get a permanent doctor at Clermont and places like Dysart and Collinsville, you start to appreciate the challenges of providing a health service in rural and regional communities. For four long years Clermont has been serviced by locums, with the Mackay health service having to scramble at times to find locums to go and service that community. That community used its own initiative and formed Clermont4Doctors, and Janelle Otto and her team are currently out there doing a fantastic job. It is an indication of just how difficult it is and the lengths these communities are going to to attract a doctor that they have sought and secured funding from a mining company and the local community to try and put together a package to attract a doctor to that locality.

I have listened to the contributions of those opposite, who have crowed long and loud during the course of this debate about all of the extra doctors in Queensland, how fantastic it is, and the Rural Generalist Pathway, but that does not necessarily apply in places within my electorate. There is no medical superintendent at Clermont, Tieri or Dysart. The one doctor at Dysart starts at 7 in the morning, finishes at 11 at night and works all weekend. There is no second doctor at Collinsville. The doctor there is overworked. It got to the stage where I brought the federal government's National Rural Health Commissioner through my electorate last year. She was mortified at the workload these doctors are subjected to and the fact that after four years we are still calling for permanent doctors in localities across some of these areas.

When you talk to Clermont4Doctors—I know they have been working recently with the Mackay health service to come up with an alternate model—it comes down to putting together a package that will attract doctors to these areas that will meet their needs. It is one thing to get their interest; it is another thing to attract them to move to these localities and stay and work in those localities. It is not as if you can just drive up the road 10 minutes to the next hospital or to the next doctor. If you live in Clermont you have a four-hour drive to Mackay, an hour plus drive to Emerald. When you have elderly residents who do not normally drive being forced onto the highway to drive to those localities, you appreciate just how dangerous that is. It disappoints me that at the last election this government made a commitment to put dialysis chairs in Clermont and then reneged on that commitment. If you need to access dialysis and you are forced to drive to Mackay or heaven forbid Townsville, then that becomes a huge burden on those individuals and their families.

I want to highlight today that we still have a rural doctor crisis. We still have enormous challenges in securing permanent doctors to these localities across Queensland—not only in my electorate but in a lot of rural areas of Queensland. There needs to be a real commitment to address that. As I often say,

just because you live in the bush, it should not mean that you are subjected to a lack of health services when you need them. We are trying to attract people to the bush, and one of the first questions they ask is what are the medical services and what is the schooling. If you cannot put a tick in those two boxes, people will not go there. I am not about to give up that fight. On behalf of Clermont4Doctors, I want to reaffirm here tonight the need for a permanent doctor to be placed in these localities, in particular Clermont, because they have done it so tough for so many years.