




Speech By
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MEMBER FOR MOUNT OMMANEY

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

 **Ms PUGH** (Mount Ommaney—ALP) (6.23 pm): I rise to speak to the COVID bill. In doing so, I echo the sentiments of other members of the House, including the member for Thuringowa, who I today learned for the very first time apparently used to work in the health services—

Mr DEPUTY SPEAKER (Mr Lister): You wouldn't be misleading the House, would you, member for Mount Ommaney?

Ms PUGH: I certainly would not want to reflect on the chair. I understand that apparently the member for Thuringowa used to work in the health services in some capacity at some point in his career. In all seriousness, I thank every single person who has contributed in some way, shape or form to the health response and to the general community's health over the past few years. In addition to COVID, of course, people had to continue to manage their chronic diseases, give birth—Mr Deputy Speaker Lister, you and I both know the joys of going through that particular experience during the COVID pandemic—or face other health challenges.

Over the past few years we have spoken in this place many times about the ongoing impacts of COVID in all of our communities. It has hit differently in all of our communities in different ways. It has been incredibly difficult and challenging for most Queenslanders for many reasons. I mention the Mental Health Select Committee report. Members started making contributions to the debate of that report last week and we will hear some more this week. We know that the mental health impacts of COVID are real and ongoing.

I suspect that few issues have generated more questions or correspondence from our communities than COVID and the accompanying restrictions. Members right across the political spectrum, I am confident, would have received questions, just as I did, about all kinds of things related to COVID—how it might impact their wedding plans or their overseas trip to see family or, in cases of family tragedy, how they can get to funerals. I thank my community and all Queenslanders for their forbearance in what were some incredibly difficult and challenging situations made all the more difficult and challenging by a global pandemic.

In a more general sense, my community were very clear with me in the main that they understood the reasons the restrictions were in place, but they wanted to understand a bit about the process for how the stronger measures would be phased out when the time came. One of the key issues that was raised was what limitations and safeguards will be in place around the scrutiny and human rights aspects of these limitations. When we introduced them we certainly did flag that they were extraordinary measures for the extraordinary time we have all been through over the past few years.

The bill provides the Chief Health Officer with limited and targeted powers to manage the ongoing risks of COVID-19. These powers are much narrower than those exercised during the emergency phases of the pandemic. This reduces the potential impacts on individuals and minimises any potential limitations on human rights. We know that the test for when the Chief Health Officer may issue a public

health direction has been strengthened. A direction may only be issued if it is reasonably necessary to prevent or respond to a serious risk to the health system or the community from COVID-19 or to give effect to the decisions of National Cabinet or advice of a COVID-19 advisory body, and this power rests with the Chief Health Officer and the Chief Health Officer alone. This power cannot be delegated by the Chief Health Officer.

The bill also works to increase scrutiny and transparency of decision-making. The Chief Health Officer will be required now to publish a statement explaining and justifying to the community each direction. The justification statement will set out the reasons for making the direction and it will also include the Chief Health Officer's assessment of whether the direction is compatible with human rights under Queensland's current legislation. Those directions will also be tabled in parliament along with the CHO's statement. If it is not tabled, it will cease to have effect.

Upon tabling, the direction and justification will be referred to the parliamentary committee in the same way as subordinate legislation. Directions may be the subject of a disallowance motion within 14 days, and they do expire after 90 days. They must be revoked as soon as they no longer meet the criteria for being issued. I think what we are seeing here is a really clear scaling down, ensuring that we still have those reserve powers in place but also transparency—we have heard about the real importance of transparency—and that any restrictions are only there for the duration they are strictly required. I think that is really important.

We all know and we have all seen over the past few years that COVID-19 is unpredictable. None of us here in this place has a crystal ball, although I am sure that the CHO would absolutely love one. There is a risk that the pandemic could worsen in the future or that a new threat could be identified, as we have seen the strains mutate at what feels like breakneck speed. If that happened we might need to declare a new public health emergency, but this still will not invoke the COVID-19 emergency powers from previous legislation that we have passed through this House.

If the situation in Queensland were to change so significantly that the targeted powers in this bill were no longer sufficient to manage COVID-19, we can always do as we have done in the past and enact legislation to provide those additional powers that may be required. We all recall that this is exactly what our parliament did in early 2020 at the outset of the pandemic. This would be an extraordinary step and presumably one the parliament would only take if it were necessary to protect the community from a very serious threat to public health. The reason the bill does not propose permanent measures is because at this point the risks and impact and severity of COVID over the long term still remain uncertain, and we believe that it may be premature to enact permanent laws in response to COVID at this time.

In terms of permanent pandemic laws, our experience with COVID has shown that it is really difficult to predict what powers may be needed to respond to a pandemic, and the types of powers we needed to respond to COVID-19 previously are different to the ones we think we will need in the future. I think this very clearly outlines for Queenslanders going forward as we manage this health challenge into the future the clear and transparent steps that we are proposing in this parliament to ensure that COVID-19 is managed in a really clear and very responsible way while also ensuring the CHO is able to clearly outline for Queenslanders any future steps that need to be taken now. I am sure that I speak for everybody in this House when I say that I certainly hope that those powers and those restrictions are never needed.

The point we all keep coming back to is that none of us has a crystal ball. That could not have been truer all the way back in 2020 when our Premier had to make a decision about the way we were going to manage the pandemic going forward. I am really proud to be part of a government that took strong steps really early to manage this pandemic. We all know that it could have been so much worse in Queensland. I am incredibly proud of the strong leadership that our Premier and the leadership team showed in managing the COVID-19 pandemic. It is because of that fantastic work we are in this strong position today, because we know that a strong health response leads to good economic outcomes. I certainly commend the bill to the House.