




Speech By  
**Joseph Kelly**

**MEMBER FOR GREENSLOPES**

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### HEALTH AND OTHER LEGISLATION AMENDMENT BILL

 **Mr KELLY** (Greenslopes—ALP) (4.33 pm): I support the bill. It is another fine example of the Palaszczuk Labor government's outstanding achievements in health, but I will come to that later if I get the time. I did want to rebut or talk about some of the things that the member for Gregory raised in terms of his ongoing concerns with omnibus bills. I would urge the member to go and read any one of the 70 omnibus bills that were introduced into this House during the mercifully short time of the Newman government—

**A government member:** Seventy!

**Mr KELLY:** Seventy omnibus bills. There are many members on that side of the House who raised concerns about omnibus bills, but they seem completely oblivious to the fact that this is a completely normal and standard way of conducting parliamentary business not just in this parliament but in parliaments that use the Westminster system.

I want to spend some time on the contribution of the member for Mirani. He gave a fairly detailed description of the practice of ECT. This bill rightly provides significant improvements in protections for people who are undergoing ECT. Unlike the member for Mirani, I have not garnered my information from 4chan or some other conspiracy website. I have actually been involved as a nurse in the practice of ECT since the 1980s, not on a frequent basis but enough to have somewhat of an understanding of the context of ECT.

It disturbs me greatly when I see depictions of ECT in popular media which are wildly different to what happens in practice. The member cited some documents. I suspect, having looked at some other things that he has said in the past, these documents are of limited evidentiary value from a clinical perspective. The clinical evidence around the use of ECT is quite clear. Yes, it is controversial. Yes, it is certainly confronting for people to consider this concept. If I sat here and gave the House a detailed description of deep brain stimulation, of a knee replacement, of a coronary artery bypass graft or of what we do in a bone marrow transplant, that would also be pretty concerning for people. Most of the things we do in health are pretty unpleasant, and the consent around them is extremely important and is fundamental to healthcare professionals.

When a person is incapable and unable to consent, the protections around that are immense. One of the most important protections is the ethics and the professionalism of the healthcare professionals involved in the practice. It really disturbs me because, when I hear the member for Mirani talking, it is like there is this great conspiracy going on where nurses, doctors and allied health professionals are standing around when a patient comes in who is unable to consent saying, 'Oh great! What can we get away with with this person?'

I have been there when a patient has come in from a road accident unconscious with multi-systems trauma. We cannot seek consent from that person. We probably cannot seek consent from anybody around that person, but we know what that person needs. We are not conspiring against that person. I want to tell the member for Mirani and I want to tell everybody in the community that

clearly there is a conspiracy going on in health care. We have been at it for thousands and thousands of years. We have been conspiring to make people live longer. We have been conspiring to try to stop people living with pain. We have been conspiring to try to cure all forms of maladies that afflict the human. It is a conspiracy I am going to continue to be a part of. Trust me.

**Mr Skelton:** You're the Illuminati now.

**Mr KELLY:** I take that interjection. This notion that ECT is different and should be treated separately to other types of procedures that we do in health care I think is deeply misguided. On the occasions when I have been involved in the practices of ECT—I have been in the theatre as well as caring for patients on both sides of that procedure—the outcomes that I have seen match what I have read in the literature around the effectiveness of the treatment.

I have literally seen people who were completely and utterly catatonic, completely and utterly unable to move their legs, arms or get out of bed, go through one session of ECT and regain full use of their bodies and in two sessions of ECT be well enough to be discharged into the community. If we are going to deny people the opportunity to have treatments that we know work—we may not know how they work, and that is not uncommon in health care either. We do not know how Panadol works, but I am sure you have all taken one—we would fail in our duty of care as healthcare professionals. I think this notion that we need to place ECT in a different category to whatever else we do in health care is wrong. It is ridiculous. We treat every single procedure that we do in health care with the utmost care and attention. It does not mean that procedures cannot damage you. It does not mean that we do not get things wrong. It does not mean that people intentionally set out to do the wrong thing, but more frequently they do the wrong thing through human error. Of course all of that happens. It is terrible and tragic when those things happen, but the vast majority of people who undergo ECT receive good outcomes and it makes a difference to their lives.

Turning to this bill, there are a couple of other things that I want to touch on. Firstly, the provisions around the Transplantation and Anatomy Act are really quite important. I was really pleased to have the Australian Breastfeeding Association based in my electorate for a number of years. It is sad that they moved, but they came to see me very early on in the piece. I am pleased to say that since their visit my office has been a breastfeeding-friendly office. That has only been taken up on a couple of occasions, but I am glad that when those occasions arose people were able to do that. We all know the absolute benefits of breastfeeding, and this provision will make it much easier to ensure that sick and preterm babies have access to breast milk. We also know how difficult it is for some women to breastfeed, and we know that putting other things in place at that time is perfectly acceptable as well.

You know you are charting the right course as a government when you have the member for Moggill calling us communists and the member for South Brisbane calling us crazy right-wingers. That suggests to me that we must be the party of the Sensible Centre. The member for South Brisbane will come in here and talk about a whole range of things they will never be able to deliver, and that is why I am proud to be part of a government that has introduced safe nurse-to-patient ratios and re-opened the health centre down at Wynnum. I want to acknowledge the member for Lytton and the fantastic campaign that she ran in relation to that. I want to acknowledge the satellite hospitals that are underway which are dealt with under the ministerial designation provisions of this bill. I want to acknowledge the introduction of nurse navigators, who have made a huge difference to people right across the state, including my mother. I want to acknowledge all of the great work that we have done in rebuilding the health workforce. I want to acknowledge the great work that the previous chief health officer and our Governor did in terms of rebuilding our capacity to respond to a global pandemic, because that was utterly decimated under the Newman government. If the previous chief health officer had not gotten into the ears of successive health ministers and rebuilt that system we would have been in a much, much more difficult situation. I am proud to be part of this government. We deliver in health care. We are going to continue to deliver in health care.

I was so pleased to hear about the number of new doctors who are in the rural training program. That should be something the member for Gregory celebrates—and I know he will—because it means more doctors where we need them: regional and rural Queensland. I look forward to those doctors. I think he said 56 or something like that. That is amazing. Even if we can get half of them to stay it will be a fantastic outcome and something that I am sure we are all very proud of. I commend the bill to the House.