



Speech By  
**Joseph Kelly**


**MEMBER FOR GREENSLOPES**

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Record of Proceedings, 26 May 2022

**HEALTH AND ENVIRONMENT COMMITTEE**

**Report, Motion to Take Note**

 **Mr KELLY** (Greenslopes—ALP) (3.16 pm): I think like all health professionals around Australia I breathed a sigh of relief on Saturday night with the election of the Albanese Labor government. I can tell members that it is going to be easy under Albanese, that is for sure. It was like you had been lying there gasping for breath and finally someone worked out how to turn the oxygen on and put it through your nasal prongs. It was like you were lying there thinking, 'Why am I feeling so flat and so low?', and finally there is someone in the office who can take your blood level and realise they just need to give you a little lolly to give you the pep up that you need. That is what happened on Saturday night.

I congratulate the chair and the members of this committee. It is an absolutely fine report; one of the best that I have ever read. I am sad that I am only going to get five minutes to talk about this report because there is so much important material that needs highlighting and debating in this chamber. It will probably not be debated that much in the new Albanese government. They will see the sense of it. It is a great report. The committee did a thorough job and pointed out some of the gaping holes in our system—problems that have been plaguing our system for quite a while, if you talk to any nurse or doctor.

Turning to recommendation 2, the Australian government to pay fair share of cost of lower acuity emergency department presentations, that is an excellent suggestion. Recently my wife had a condition, which was quite a serious condition. People talk about the shortage of GPs and doctors in the bush, and they are absolutely correct, but in Greenslopes on a Saturday morning we could not find a GP that was open and was taking appointments. We seriously considered going to the PA emergency department. We went to the GP super clinic next door opened by Kevin Rudd all those years ago. I am so glad that we did because my wife was about to give up and if she had not gotten treatment for that particular condition it would have escalated and been much more difficult to treat. The problem is that people front up to the emergency department with conditions that could be easily, quickly and efficiently dealt with in the GP network. This is not a slur on GPs. They do a fantastic job. If we had a federal government that would listen to GPs—not just the people who own GP clinics, but actual GPs who work on the ground—we would reform the system in a way that is good for patients and good for GPs.

I want to turn now to the recommendations around allied health professionals, because they are such an important part of our primary health network: recommendation 10, increasing the number of Medicare Benefits Scheme funded allied health visits; and recommendation 11, improving accessing to allied health services. The reality is if we have better integration between GPs and allied health professionals we will keep people from progressing in their illnesses. We will keep them well, which is actually the goal of every health professional that I know.

I hear many of the members talking about shortages of doctors in their areas. That is a significant and serious issue. It is why from a regional perspective recommendation 16 is so important. I was so pleased to see the new training program opening up at CQU. If we train doctors in the regions, doctors will stay in the regions. If we train nurses and allied health professionals in the regions, they will stay in the regions.

I bring to the attention of the House an issue in relation to recommendation 17, which is about reviewing and replacing the distribution priority areas classification system. Generally, this issue will affect regional and remote areas but there are certain areas where we could use reclassification in specialist health services in metropolitan areas. I am thinking of groups such as the World Wellness Group in Stones Corner.

The World Wellness Group is a specialist refugee and multicultural health service. They assess all refugees within 24 hours of their arrival in South-East Queensland. For several years now they have been asking the federal government, particularly former minister Hunt—they have been writing to him but have had zero response—for the opportunity to be reclassified because they want to use overseas trained doctors because, guess what? When you are a multicultural health service that looks after refugees, a doctor from Pakistan or Kenya who can speak the language and deliver culturally appropriate care is actually a really good thing. I hope the Albanese government looks at that and reconsiders it.

There is so much I would like to talk about in this report but I will jump to recommendation 40 and talk about the scope of practice and nurse-led models of care. There are so many opportunities if we use all health practitioners to their full scope of care. We really need to do that. We will solve so many problems just by letting people work to their full scope of practice. Great work, committee. I support the report.