




Speech By
Lachlan Millar

MEMBER FOR GREGORY

Record of Proceedings, 23 February 2022

HEALTH AND OTHER LEGISLATION AMENDMENT BILL

 **Mr MILLAR** (Gregory—LNP) (3.50 pm): Firstly, with your indulgence, Madam Deputy Speaker, I would like to congratulate and thank all our health professionals across Queensland, especially regional Queensland, for their work over the last two years. The last two years will be something we will remember for a very long time. Regional, rural and remote health professionals and allied health professionals have done a wonderful job in keeping our community safe. They have done more than they probably thought they had to, but they have certainly got through this and I thank every health professional for what they have achieved over the last two years.

While the LNP will not be opposing this bill, before addressing specific amendments I must voice my protest against the constant use of these omnibus bills by the Labor government. It makes it very difficult for Queenslanders to follow the myriad of administrative changes being put in place during this golden age of bureaucracy. The bill amends nine separate pieces of legislation. We need to find a better way of doing this. Having said that, the amendments to the Ambulance Service Act 1991 to align the requirements of the management of confidential patient information with those in the Hospital and Health Boards Act is timely and will hopefully assist with patient handovers at a time when ambulance ramping is becoming an issue.

The amendment comes in the same bill as the amendments to the Hospital and Health Boards Act 2011 to enable more allied health professionals to access Queensland Health's digital patient information systems. At face value this is an important recognition of the way modern health care is increasingly being delivered in a team based manner. As we move forward, many of the team members delivering such care in rural and remote settings will be doing some or even all of this patient care via telehealth. This offers great potential to decrease the gap in health service availability to my constituents.

Timely access to patient and digital records will help all team members deliver the best patient-centred care possible. I welcome this amendment, but I have one little caveat. In this digital age we are our data. In a technical sense Queensland Health may hold the data and see it as something it controls, but Queensland Health patients must be able to opt out at any stage or have some control over their own health records. It is one thing to sign up when you have a sporting injury and get an x-ray, but the stakes are somewhat higher when some years later you may suffer from a period of depression which goes on your record for all to see in the future. Patients should be able to opt out at any point or exercise control over parts of their record they want to keep private.

In stating this reservation, I do see that making comprehensive health records more widely available has been welcomed by such groups as the Services for Australian Rural and Remote Allied Health. They value this as a way of delivering more patient-centred care, particularly in rural and regional settings. It is also important in delivering patient-centred care to an aging population, which is where we find ourselves. We must never put patient confidentiality at risk simply for the convenience of a health IT system. To date, IT systems have not had a particularly good record in protecting citizens' privacy.

For these reasons I welcome the committee's recommendation that Queensland Health deliver a comprehensive and accessible engagement campaign to inform the public about what health information is available on the Queensland Health Viewer, who will be able to see it and what options they have control of. This is absolutely vital and I ask the Minister for Health to ensure this happens effectively. In doing so, the minister should pay particular attention to the joint submission to the committee by the office of the Integrity Commissioner and the Privacy Commissioner which identifies the need to strengthen privacy and security safeguards in our existing health information technology systems, let alone ones with expanded access.

Finally, I make a comment on the changes to the Termination of Pregnancy Act 2018 and the Criminal Code Act 1899. These will enable medical students to register under the Health Practitioner Regulation National Law to assist in a termination of pregnancy procedure whilst undertaking a clinical placement with a health service.

The Central Queensland Health and Hospital Service provides hospital and health services to my constituents on the Central Highlands too, so I have been aware of the excellent response of the Central Queensland Health and Hospital Service when it comes to COVID-19. As I said at the start of my contribution, I thank all the health professionals and what they have been able to do over the last two years. It has not been easy for them. There has been a lot of overtime needed, a lot of people on board to achieve what they have achieved. I thank them.

It would be remiss of me, when we are talking about health infrastructure and what we need in rural and remote and regional Queensland, not to raise the issue of the Blackwater Hospital. In the budget we were aware that we were looking to start the planning and the building process of a new hospital for Blackwater. The hospital that is there at the moment is over 45 years old. It started when Utah Construction and Mining came out to the Bowen Basin. We need a hospital to cater for the Blackwater people and I call on the Minister for Health, the Treasurer, the Premier and the Labor government to deliver what they promised the Queensland Resources Council and other people in the community in Blackwater, and that is a hospital. I call on the minister and everybody to come together, let us work on a plan, let us put a new hospital in Blackwater. They deserve it.