



Speech By Rob Molhoek

MEMBER FOR SOUTHPORT

Record of Proceedings, 12 May 2022

HEALTH AND ENVIRONMENT COMMITTEE

Report, Motion to Take Note

Mr MOLHOEK (Southport—LNP) (3.17 pm): This was a very important inquiry. Unfortunately, it did not go far enough or deep enough. Nonetheless, it was an important inquiry as it is important that we put the health system, the aged-care system and disability services under the microscope. At the outset I want to thank the hundreds if not thousands of Queensland Health employees, private practitioners, allied health workers and federal government health workers and employees who took the time to make submissions, meet with us and appear at the various hearings held throughout the length and breadth of Queensland. It is appropriate to thank them for their ongoing work and acknowledge the duress that many of them have faced over the past few years, particularly with the pandemic but also with many of the other challenges that we see within our aged-care sector, the health sector and disability services.

I am annoyed that so much has been made about long-stay beds because during the course of the hearings we actually heard evidence from some Queensland Health employees and the AMAQ who spoke about the fact that over time the dependence on long-stay beds has improved. I think it is disgraceful that, of 10,000 beds across the state, we would begrudge 500 of those being used for people who are there for good reason. Many of those people—

Government members interjected.

Mr MOLHOEK: Madam Deputy Speaker, I am not taking interjections.

Madam DEPUTY SPEAKER (Ms Bush): Order, members!

Mr MOLHOEK: Many of those people have chronic health conditions. Many of them are there for good reason. May I remind the government and those members currently sitting on the other side of the House that that is why we have public hospitals and that is why we have a public health system. That is why we have a public health system: to support the vulnerable, to support those who cannot afford private health insurance.

Ms King interjected.

Madam DEPUTY SPEAKER: The member for Pumicestone will cease her interjections.

Mr MOLHOEK: It is to support those who deserve world-class health care. From some of the dialogue we heard throughout the course of the hearings, we could be forgiven for believing that the aged, those with disability and those with chronic health conditions are not welcome in our hospitals.

Government members interjected.

Mr MOLHOEK: I am not taking the interjections. Over the past few years we have seen many inquiries into aged care, disability services and health care.

Mr Harper: The Australian government did not respond.

Mr MOLHOEK: Member for Thuringowa, if you allow me to speak I will get to the point on that particular issue. I draw attention to recommendation 26 of the report. I am glad it is there. I fought particularly hard to have this recommendation included. Over the years we have seen one report after another, one review or inquiry after another, by both federal and state governments all around the nation, but there has never been any real accountability or follow-up. One question I would ask is: how hard have we gone in terms of our advocacy on some of these issues? Where is the trail of meetings and discussions in COAG and meetings with our federal colleagues to come together, be collaborative and work a lot harder on these issues? Members will notice that a number of the recommendations in the report talk about the need for greater collaboration. I emphasise that point in this House. We will not fix the health, aged-care or disability services systems without greater collaboration from all of us on all sides of politics. That is such an important to point to make.

In closing, I draw members' attention to submission No. 75, a 28-page response from the federal Minister for Health. Throughout the hearings we heard that the aged-care and disability systems have never had so much cash poured into them but that with the challenges we face of significant labour force shortages and significant shortages of facilities in some cases we are not even spending the amounts budgeted. We all need to do better. We need better services and better facilities and we need people to provide the support right across the health system.