




Speech By
Robert Skelton

MEMBER FOR NICKLIN

Record of Proceedings, 29 March 2022

PUBLIC HEALTH AND OTHER LEGISLATION (EXTENSION OF EXPIRING PROVISIONS) AMENDMENT BILL

 **Mr SKELTON** (Nicklin—ALP) (6.46 pm): I rise to speak in support of the Public Health and Other Legislation (Extension of Expiring Provisions) Amendment Bill 2022. I would like to reply briefly to the last contribution and say that it is not only the state's responsibility; it also falls in the federal realm. There should also be notice of that.

In Queensland we are thankful to have been shielded from some of the worst impacts of the pandemic thanks to the swift actions of our chief health officers, Her Excellency the Honourable Dr Jeanette Young PSM and Dr John Gerrard. We have a long history in this state of taking matters of public health seriously, with records dating back to the establishment of the first Central Board of Health in 1865, the first Health Act 1872 and the appointment of our first commissioner of public health, Dr Bertie Burnett Ham, in 1901.

In response to the arrival of the bubonic plague in Queensland, Dr Ham quickly went about establishing a compulsory notification of diseases system. This system required local authorities to notify the commissioner if patients were found to have any of the infectious diseases listed at the time, which included plague, cholera, smallpox, scarlet fever, diphtheria, membranous croup and various fevers among others. The system continues to this day and has played an important role in helping authorities control outbreaks of infectious diseases right across Queensland. In taking on the task, Dr Ham is reported as saying—

Should I, in the course of my duties have to deal with vested rights and properties, I shall do so with careful consideration, mindful of the interests involved; but, where I find danger to the public health or gross insanitary conditions, I shall take no half-hearted measures, no halting decision as to the means to be adopted to have those defects remedied.

It is in the spirit of Dr Ham's work that we now work to ensure our government and the public health system have the legislative authority to continue keeping our communities safe. In response to a venereal disease outbreak in 1917, the Health Act was amended to ensure patients suffering from the disease were obliged to continue treatment until a cure was affected. Medical practitioners were obliged to notify the commissioner of public health those names of patients who failed to continue treatment and suspected patients could be forced to undergo treatment.

Without the various public health and other legislation amendment bills, our state would have been powerless to stop COVID-19 running amok through our towns and suburbs. Without the legislative powers provided by the public health and other legislation amendment bills, our CHOs would have been unable to act in the manner they did to limit the spread of COVID-19, leaving Queensland vulnerable to the ravages of this insidious disease.

In Queensland we went early and we went hard, ensuring our vulnerable communities and individuals were kept as safe as possible. Our state was first to declare a public health emergency, on 29 January 2020, in response to the global outbreak.

The intention in extending the time of this bill is due to the uncertainty in spread and effect of the COVID-19 virus. As it stands, there are other variants that have been detected in addition to winter looming which increases the risk of this and other viruses like the flu.

The state Labor government has entrusted our lives and our health to our professional health service and they have not let us down. In contrast, it took the federal government an additional two months to recognise the seriousness of this virus and declare an emergency. The inability of this federal government to implement a national strategy and secure appropriate resources has been disappointing and confusing to citizens and to governments in the different states and territories. The COVID pandemic has been challenging for everyone, not only in Queensland but also in the entire world.

I will talk to the bill by providing some comparisons in the management of the pandemic by different jurisdictions. Here are some available stats as of 28 March 2022. In Queensland we have a population of 5.2 million. We have 723,930 cases to date. We have had 716 deaths, or 138 deaths per million population. I could go on, but only one jurisdiction fares better than us in fatalities and that is Western Australia.

With regard to the confusion, too, I have heard people opposite talking about mandatory vaccination and this public health bill in a similar vein, and that is not the case. As I pointed out, historically we have always taken that approach. I draw everyone's attention to the Australian vaccination schedule and the requirement that you comply with that or you are ineligible for Family Tax Benefit or childcare support, to encourage vaccination rates. That was a policy of the then federal government and that was a different type of federal government. However, it has been a resounding success and my kids do not have a chickenpox scar like I do.

There have been different approaches taken in managing the effect of the pandemic. The data that I wanted to share would have painted a brief picture of similar populations, but it is too tragic and does not do anyone justice.

The pandemic is not an inconvenience: it costs lives and livelihoods. The Palaszczuk Labor government has been committed from the start to minimising the impact on Queenslanders. There have also been a lot of opinions that have been masqueraded as fact and this has eroded public confidence. I am disappointed that some in this House and others continue to peddle misinformation and incite antisocial behaviour in our communities. Adherence to the health advice has made a difference in Queensland. It is an example of our sense of community and our resilience. Thankfully it is only a small and vocal minority who continue to misinterpret the intent and outcomes of this bill and the work of our health professionals.

I would like to thank the committee secretariat and Hansard. I thank the members of the Community Support and Services Committee—the chair, the member for Mansfield; my colleague the member for Cook; the deputy chair, the member for Burnett; and the member for Scenic Rim at the time—for considering the considerable volume of submissions. I would also like to thank those who contributed a submission and were available for public hearings.

Historically, the provisions of this bill have been extended for a period of six months each time and if extended again today will allow our health department to manage the difficult period ahead in a responsive and timely manner, as has been the case throughout the COVID pandemic. I commend this bill to the House.