



Speech By  
**Hon. Yvette D'Ath**


**MEMBER FOR REDCLIFFE**

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Record of Proceedings, 11 May 2022

## MINISTERIAL STATEMENT

### Health System

 **Hon. YM D'ATH** (Redcliffe—ALP) (Minister for Health and Ambulance Services) (9.56 am): The Health and Environment Committee reported to this House on 8 April 2022 its report titled *Inquiry into the provision of primary, allied and private health care, aged care and NDIS care services and its impact on the Queensland public health system*. I want to thank the member for Thuringowa as the chairperson of the committee for his work and all of the committee members, including the member for Lytton and the member for Pumicestone. This body of work is an extremely comprehensive and important body of work in our discussions around the healthcare system. I thank the stakeholders and all of the submitters who came forward and told their stories and gave input and ideas about how we can deal with the constant struggles of the health system across this state.

While the Palaszczuk government is continuing to review the findings of the committee, today, pursuant to section 107 of the Parliament of Queensland Act 2001, I table the Queensland government's interim response to the report in which the Queensland government agrees in principle with all of the report's recommendations.

*Tabled paper:* Health and Environment Committee, Report No. 18, 57th Parliament—Inquiry into the provision of primary, allied and private health care, aged care and NDIS care services and its impact on the Queensland public health system, interim government response [630](#).

Since 2016 Queensland hospitals have seen a 37 per cent increase in emergency department presentations and a 30 per cent increase in ambulance demand. While the state has been grappling with the ongoing impacts of the COVID-19 pandemic, the Queensland government has continued to invest and plan for our hospitals and health system to manage the increasing demand that is increasingly driven by the failings in the primary and allied healthcare sector caused by the underfunding experienced, particularly in aged care and NDIS and including the Medicare benefit scheme and our GPs, over many years by the Commonwealth government.

It is important in investing and planning to reduce pressures on the Queensland government's hospitals and the health system that we understand why we have more triple 0 calls, more emergency department presentations and more chronic and acute patients. The committee's report clearly demonstrates that presentations to Queensland hospitals are and will continue to grow without significant reform in key areas.

Primary and allied health care, particularly in relation to general practitioners, is increasingly becoming inaccessible and unaffordable for Queenslanders. Private insurance is increasingly not delivering value for money and being abandoned by Queenslanders. Aged-care facilities are increasingly relying on the Queensland Ambulance Service or Queensland hospitals to treat category 4 and 5 cases that have historically been best cared for by a GP or a nurse in the community. Implementation of the NDIS continues to be challenging and suitable accommodation options and

funding packages remain a barrier for access to full support. The latest audit of Queensland hospitals indicates 512 long-stay patients, either NDIS or aged care, who should be in a home or aged-care facility.

With the federal election on 21 May, we will provide a copy of the report to the new federal government and provide them an opportunity to work with us to develop a final detailed response and implementation plan in relation to all 40 recommendations for the benefit of the House. Services to Queenslanders are best when federal and state governments work together on their respective responsibilities. We need a federal government that listens, that values and that invests in health care, aged care and the NDIS in this state.