



Speech By
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APPROPRIATION (PARLIAMENT) BILL

APPROPRIATION BILL

Consideration in Detail (Cognate Debate)

Appropriation Bill

Health and Environment Committee, Report

 **Dr MacMAHON** (South Brisbane—Grn) (11.32 am): In my contribution to the debate on the Health and Environment Committee report, I want to start by reminding everyone about a really important number that the Treasurer has been talking about in relation to this budget, 12.3 billion—a \$12.3 billion surplus. After Labor finally took the Greens advice and raised mining royalties, the Queensland Treasury is booming. After years of us calling for you to raise royalties—

Madam DEPUTY SPEAKER (Ms Bush): Direct your comments through the chair.

Dr MacMAHON:—now we have a \$12.3 billion surplus that could be spent on our public hospitals, on our schools, on our struggling mental health services and on our packed emergency rooms. Instead the government is just sitting on it and gloating about this surplus while everyday Queenslanders are suffering—suffering with the housing crisis, suffering with a healthcare system that is under stress. Emergency department doctors and nurses have been raising the alarm about how overworked and understaffed they are. I want to say a huge thank you to the health staff and patients who have reached out to my office to share stories about long wait times, about chronic understaffing, about the overuse of agency staff, about paramedics spending their whole shift on a ramp with a patient because the hospital is unable to accept them.

This is borne out in the government's own data. With regard to Metro South and the percentage of emergency department attendances who depart within four hours of their arrival, the target is 80 per cent. In Metro South the figure is 52 per cent, and this has gotten steadily worse, down from about 68 per cent in 2019. With regard to category 2 time frames, only 58 per cent of people are seen within the recommended 10 minutes, down from 70 per cent in 2019. With regard to category 3 time frames, only 63 per cent of people are seen within the recommended 30 minutes, down from 71 per cent in 2019. Why not put some of this \$12 billion surplus into our emergency departments and into more staff, as the current staff are crying out for more support? Why not put that money into free TAFE and education so we can boost the health workforce?

Ms Boyd: We do.

Dr MacMAHON: Why do we have a \$12 billion surplus then? There is no excuse for having spare money in a state that is struggling. I asked the Minister for Health about the abortion access plan that we have been waiting for now for over a year since it was announced in July 2022. Maybe some of this

\$12 billion surplus could be put into making sure every Queenslanders has access to termination services. We learnt that there are only an additional eight mental health beds that have been added across the state. We are at least 500 beds short of where we should be. We are well behind the OECD average for mental health beds. Why not put some of that \$12 billion surplus into properly funding accessible public mental health services in Queensland, eating disorder services, public access to psychologists and psychiatrists and ADHD services? But we do not have to stop there.

I asked the Treasurer what will happen when coal prices return to normal, because the increased royalties are only on the super profits. Once those prices drop Queenslanders will be getting hardly any benefit from the sale of our minerals, with no plans to increase the base rate of royalties. He said that there is no plan to increase the royalties any further. Queenslanders do not have to put up with chronically underfunded services with a lack of housing. Permanently raising the base rate of royalties would ensure that our public hospitals are permanently fully funded and would give Queenslanders the healthcare system that they deserve. Sitting on a \$12 billion surplus in the middle of a housing crisis and a cost-of-living crisis is unethical and unjustifiable and Queenslanders are looking at this government and wondering where its priorities are.

The issues with the estimates process have been well covered so far, but suffice to say the process is a sham. The government is not interested in transparency or accountability or consultation or actually answering questions. I, and the rest of the crossbench, will continue to push for a process that might actually introduce some accountability into the way the estimates process is done. I give the example of the consultation that the government ran around East Brisbane State School. The consultation came back and clearly said that the community wanted a school within that catchment. The government has ignored its own consultation and is treating this community like second-class citizens. The government has ignored its own consultation and has made a decision that the majority of the community do not want. This government is not—

Madam DEPUTY SPEAKER: Member, I ask you to pause there. I am not finding this particular contribution relevant to the health estimates debate. Can you come back to that debate thank you?

Dr MacMAHON: Suffice it to say, this government is not interested in accountability. The process is a sham.