



Speech By Jessica Pugh

MEMBER FOR MOUNT OMMANEY

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HEALTH AND OTHER LEGISLATION AMENDMENT BILL

Ms PUGH (Mount Ommaney—ALP) (12.10 pm): I rise to speak in support of the Health and Other Legislation Amendment Bill and want to speak mainly to the provisions that are very close to my heart and the hearts of many other Queenslanders, and that is organ donation. I have spoken before in the parliament about organ donation in 2019 when my father's best friend 'Perfect Pete', as we called him, passed away shortly before receiving a transplant that may have saved his life. In that same speech I spoke about a beautiful local teacher at Centenary State High who passed away at a young age but made it very clear that she wanted to donate her corneas. She is a wonderful example for us all.

Many Queenslanders are likely not aware that, when it comes to organ donation, where they pass away can have a significant impact on whether or not they can donate their organs and that currently the hospital in which they pass away in can similarly have a significant impact, and that is exactly what this legislation seeks to address. Under the Transplantation and Anatomy Act 1979, a next of kin is required to consent to the removal of tissue from a deceased person, even if that person had registered for organ donation in their lifetime, as many Queenslanders and Australians rightly have. This bill makes the change so that private hospitals have the same consent processes around tissue removal and organ donation as public hospitals. Currently, a different process has to be followed depending on whether a person dies in a public or a private hospital and the private hospital process is more onerous. This has resulted in potential missed opportunities and it is obviously something that we need to fix and is within our remit to do so, and I am sure that that is exactly what Queenslanders would want.

The most important element of this amendment is that family members whose loved one passes away in a private hospital will, just like public hospital patients and family members, be able to provide that verbal consent for the donation, confirmed later by written consent. Currently only written consent can be accepted in private hospitals for those donations to proceed. This will obviously have two main major benefits: firstly, reducing the stress and distress for the families involved; and, secondly, making the consent process more efficient and, I would argue, more trauma informed, therefore increasing the chances of the family agreeing to the successful tissue and organ donation. I am sure that most members of the House would be aware that, for organ donation or tissue donation to be successful, speed and efficiency are absolutely vital. Only a very small number of organs are even suitable to be donated in the first place, and I will expand a little on that later and why these changes are so important.

Most people do not pass away in circumstances or in the kind of bodily condition that allow them to donate their organs, so most of us in this House will never even have the opportunity to donate our organs. According to QUT's end-of-life information fact sheet, the DonateLife network has identified that only two per cent to three per cent of people who die in hospitals are medically suitable to be deceased donors. This is because of the particular circumstances that need to exist in order to donate. For example, generally the death must occur in an intensive care unit or a hospital emergency department. In rare cases where people are able to donate—when they do sit within that two per cent to three per cent grouping—those who pass away in a private hospital then face that additional barrier for their loved

ones immediately after they have passed away who have to consent in writing while also dealing with what can be a really sudden death. This may not be something that they were anticipating having to deal with and now in addition to dealing with the grief that they are experiencing as a family they have to make really huge decisions about what that person would have wanted. If they have not had that discussion with that family member, it can be incredibly tricky to decide when it is now not possible to ask them.

As I said—and I think it is clear—I am really passionate about organ donation. When I spoke on the topic in 2019, the statistic at the time was that 41 per cent of people do not tell their family or discuss with their family whether or not they would want to donate their organs. That means that, when it comes time for the family to make that decision, they often have no idea what to do. I understand from the DonateLife website that in the whole of Australia last year just 454 deceased people were able to donate organs. However, because multiple organs can come from a single donor, that has helped more than 1,000 Australians waiting for an organ. I am also excited to share with the House that the donation rate according to the DonateLife website is increasing year on year Australia-wide. National consent rates have increased from 52 per cent the previous year to 54 per cent in 2022. It is interesting to look at those two numbers—the 41 per cent who are not having that discussion and the 54 per cent. Without saying that those two figures line up, it is interesting to note that obviously those 54 per cent were having those discussions and it was something that was being discussed within those families, just as it certainly has been discussed within mine.

In 2022 around 1,400 people of the 80,000 people who died in Australian hospitals died in a way where organ donation could be considered. The families were requested to donate those organs in 1,300 cases and, of these cases, 701 Australian families said yes to a donation in a hospital, representing that national consent rate of 54 per cent, with 454 becoming organ donors. As members can see, we have a very small number Australia-wide of potential organ donors, so increasing our consent rate and the ability for families to easily consent is absolutely critical to increasing our donation rate. That is why this legislation is so important, because it is trauma informed and it is supporting those families at what is just a truly awful time and at what can also be a really shocking time. As I said, they may not have been anticipating this person passing away and it might have been quite sudden.

We have around 1,800 Australians waitlisted for a transplant and around 14,000 additional people on dialysis, some of whom may also need a kidney transplant. As I have said repeatedly, studies show that the best way to lift our organ donation rate in Queensland and in Australia is to have a discussion with your family as they have the final say in donating your organs and they are very likely to respect your wishes as long as they know what they are. This is where having that discussion is absolutely vital. Like the member for Bonney, I implore all Queenslanders to make sure they make their wishes known so that this legislation change can have the maximum benefit and those families being asked to make that decision in the hospitals can make the decision that is in line with their love one's wishes. I will finish with a final plea: please sign up as an organ donor. Go to the DonateLife website and sign up—it will take five minutes—and then send that screenshot to your family so that they know what your wishes are. I commend the bill to the House.