




Speech By  
**Lachlan Millar**

**MEMBER FOR GREGORY**

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Record of Proceedings, 19 April 2023


### **HEALTH AND OTHER LEGISLATION AMENDMENT BILL**

 **Mr MILLAR** (Gregory—LNP) (12.57 pm): Like the member for Keppel, I am very proud of the Central Queensland Hospital and Health Service. They do a fantastic job. The staff—the doctors, nurses, the administrators and everybody involved—do a great job to cover a big area from Yeppoon, Rockhampton and Gladstone all the way to Emerald. We need them.

I support this bill which makes some administrative changes to a variety of acts within the health portfolio. Of all the amendments in this bill the ones that have been given the most attention by the government are the ones strengthening the protection of the physical and psychological wellbeing of the public health workforce by requiring hospital and health services to proactively consider the health, safety and wellbeing of staff of the public health service facilities. This is very important.

In the seat of Gregory we also have the Central West Hospital and Health Service which covers from Alpha all the way out to Birdsville and down to Bedourie, Longreach, Blackall, Tambo, Winton and all the other areas. I pay tribute to the staff in the Central West, especially Dr David Walker, a long-time doctor in Longreach. He is currently acting as the health service chief executive. He and his wife, Dr Clare Walker, make a massive contribution to our health services in the Central West. Dr David Walker, Dr Clare Walker and staff go above and beyond what they have to do. They are also major contributors to our social scene in the Central West with Dr David Walker being heavily involved in the Longreach Jockey Club. They are a sensational couple who continue to drive the social calendar around the Longreach area.

Sitting suspended from 1.00 pm to 2.00 pm.

 **Mr MILLAR:** The amendments to the Hospital and Health Boards Act 2011 are designed to strengthen protections for the physical and psychological wellbeing of the public health workforce by requiring hospital and health boards and hospital and health services to proactively consider the health, safety and wellbeing of staff of public sector health service facilities. No-one in this House could deny that. We need to do that. We need to make sure that our health workforce—whether they be doctors, nurses, administrators or security staff—are protected and looked after.

One of the issues we have in Western Queensland is that we have a brand new hospital in Blackall—and I thank the minister for that: \$20 million—but we have not had permanent doctors there to facilitate health prevention or obviously any emergency. The doctors are not there.

**Mr Power:** They keep meeting you, Lachie, and going away.

**Mr MILLAR:** I hope not. The Blackall-Tambo Regional Council has teamed up with Queensland Health and the Central West Hospital and Health Board to create a video promoting the town's lifestyle. This social media campaign started about two weeks ago. There are four permanent senior medical officer positions available that have been vacant since the hospital opened. The salary packages include free accommodation, subsidised utilities, relocation assistance and additional leave. Basically they are prepared to pay a medical practitioner, a doctor, around half a million dollars to come to Blackall and play an important role in providing the health services that we need there.

The state government funded our state-of-the-art new hospital at Blackall—\$20.1 million in 2020: thank you for that—but we need doctors. The Blackall-Tambo Mayor, Andrew Martin, said towns have been relying on locums to service residents and tourists who cause the population to triple each season. We have a fantastic tourism industry in Western Queensland, and we are absolutely proud of that, but we get a lot of what they call ‘grey nomads’ coming out into Western Queensland. I suppose if you look at a health risk chart they would probably be up there more than your 18-year-olds or your 20-year-olds or even your 30-year-olds. The population of Blackall triples in every tourist season. The hospital has to deal with cardiac arrests and illnesses, yet we cannot find local doctors to be able to provide that service to the community.

**Mr Stevens:** It’s like a pub with no beer.

**Mr MILLAR:** I take that interjection from the member for Mermaid Beach. He is a former Richmond boy. He knows what a pub with no beer looks like—or maybe not! He is right. We need to have those doctors there. I am calling on the current government to work with all of us to provide doctors for places like Blackall.

I mentioned earlier that I have a lot of admiration for Dr David Walker and Dr Clare Walker—they have been doctors in our Central West community since they started out. Dr David Walker came up as a young doctor and decided to stay and have a family. He has played an integral role in the Central West community. At the moment in the Central West we are relying on locums. People fly in—they come for four weeks—and then they fly out. We need doctors who are going to come and stay for five or six years and practise as a GP but also work with the Blackwater Hospital. I call on the Labor government to work with us in the west to try to find a solution to this.

The Blackall-Tambo Regional Council and the Central West Hospital and Health Board have created a social media campaign to go right around Australia to try to attract doctors, but we need a little more help than that. We need to look at finding ways to attract four doctors to Blackall. Blackall is a wonderful community, as is Tambo. We need to not rely so heavily on locums coming in, whether they be locum doctors or nurses. We need permanent residents to ensure an adequate health system.

I hope this social media campaign works. I know that Mayor Andrew Martin from Blackall-Tambo is passionate about this. I remember him talking to me about 30 years—he talked to me the other week, but 30 years ago—

**Ms Boyd** interjected.

**Mr MILLAR:** No, I did not talk to him 30 years ago. He talked to me the other week that they were trying to attract doctors to Augathella. They had a \$200,000 package on the table to try to get a doctor and they still could not get a doctor. We need to find more incentives to get practitioners out west because we desperately need them. Why do we desperately need them? It is about preventive health out there. It is about getting to the cause before it becomes a problem so people live longer. You have heard the statistics that people in regional and remote Queensland die younger than they do in the bigger cities. The facts are there. We need to find a way to make sure that that happens.

**Mr Perrett:** Then there are social factors.

**Mr MILLAR:** Exactly. I have a question to the minister. It is an obscure question. I was reading the explanatory notes, which state—

*Clause 11 omits the definition of primary producer, which refers to a person producing or storing agricultural products, and replaces it with a definition that provides that a primary producer ‘in relation to land, means a person using the land to commercially produce agricultural or horticultural products’.*

That is very vague. The explanatory notes go on to state—

Under this amendment, persons who are storing but not producing products on their land, and persons who engage in non-commercial production are not primary producers. They therefore must comply with the requirements of the Act, for example, by seeking necessary approvals from Queensland Health, or complying with the requirements in section 44 regarding use of household pesticides.

This is in regard to fumigation. A lot of grain handlers use fumigation. Now they are required to get an approval under Queensland Health. My question is: have we put that out there to the grain handlers and to the produce enterprises in regional Queensland? Do they know about this? Is this more red tape they have to deal with? I am just asking the question; I am not complaining about it. Is this more red tape for our agricultural production?