




Speech By  
**Aaron Harper**

**MEMBER FOR THURINGOWA**

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Record of Proceedings, 6 March 2024

### **HEALTH AND OTHER LEGISLATION AMENDMENT BILL (NO. 2)**

 **Mr HARPER** (Thuringowa—ALP) (3.55 pm): I have been called a lot of things in my time, but I am not sure how I am going to take being referred to as a saint by the member for Mudgeeraba. I do not know if it is a compliment. What an interesting observation she has made. I rise to give my contribution to the Health and Other Legislation Amendment Bill (No. 2) 2023. It does not surprise me that the previous speaker has come out and said that the LNP will oppose anything around termination of pregnancy. We know it was opposed, except by three LNP members, to that in 2018 when that historic change was introduced in a bill and passed.

I want to respond to the member for Mudgeeraba's comments around parliamentary committee procedures. It is at the discretion of the committee to table a report at any point in time. It is the difference between 6 March and 8 March—she is talking about 48 hours. I think it is relevant that we do talk to this this week. I am very proud of our committee. I want to thank all members of the committee, including past members. There have been some changes. With the indulgence of the chair, I want to give a shout-out to the member for Southport, Rob Molhoek. We wish him well in his recovery. Our best thoughts are with him.

This bill amends the Hospital and Health Boards Act 2011 to: clarify that, for purposes of nurse-to-patient and midwife-to-patient ratios, a newborn baby should be counted as a patient when they are staying in a room on a maternity ward with their birthing parent; require a Quality Assurance Committee to disclose information about a health professional to the chief executive where they reasonably believe the health professional's health, conduct or performance poses a serious risk of harm to a person; and clarify that the chief executive of Queensland Health may, after considering a report from a clinical review or health service investigation conducted in a Hospital and Health Service, take the action the chief executive considers appropriate in relation to the matters identified in the report. It also ensures key findings, recommendations and lessons learnt from root cause analysis of serious clinical incidents can be shared with relevant staff across Queensland Health. It amends the Termination of Pregnancy Act, Criminal Code and Powers of Attorney Act 1998 to allow additional health practitioners to perform early medical terminations of pregnancy through the use of termination drugs and provide more inclusive language by replacing references to 'woman' with 'person' in termination-of-pregnancy provisions, one I note other states and jurisdictions have agreed to. It also amends the Mental Health Act to clarify that Mental Health Court expert reports and transcripts may be released and used and, finally, it amends the Public Health Act around duplicate reporting requirements of dust lung diseases in Queensland.

Whilst I have listed all important elements of the bill, I will restrict my remaining comments to two particular elements, the first one regarding nurse-to-patient ratios or, more specifically, midwife-to-patient ratios. In the 55th Parliament, 56th Parliament and now the 57th Parliament as either a member of or chair of former iterations of the health committee, we have undertaken important work resulting in the passing of previous bills in relation to nurse-patient ratios in both acute wards and the state's residential aged-care facilities. This is something our Labor government should be very proud

of. We were backing our health workforce and ensuring patient care and safety is paramount. I want to make special mention and commend the QNMU for their strong advocacy in this area. Let us never forget that it was the LNP who opposed those ratios. I will never forget in 2016, sitting in this House at about 1 am, when the gallery was filled with nurses and the LNP opposed the nurse-to-patient ratios.

Of course, that was about the LNP saying how much it would cost. They demonstrated their complete disregard for our hardworking nurses and showed how out of touch they were with nurses in our state's health system. How those nurses applauded when that finally came through to the House! Therefore, I am very pleased to speak to the bill's amendment to the Hospital and Health Boards Act, as recommended in our report, to introduce minimum midwife to patient and baby ratios in maternity wards so that all babies will be counted, including stillborn babies requiring services from a midwife.

On another important aspect of this bill, as a regional member of parliament and having a background of 30 years serving as a paramedic in North Queensland—

**Government members** interjected.

**Mr HARPER:** That may come as a surprise to many members—I fully appreciate that anyone living in rural, remote and Indigenous communities should have equality of access to health care. We rightly recognise Women's Week—well, some of us do. I am pleased to see that this bill includes amendments, in line with other state and territory legislation, to address barriers to accessing medical termination of pregnancy, including by allowing registered midwives and nurse practitioners to provide MS-2 Step. I fully appreciate that anyone living in rural and remote communities should have access to health care. I am pleased to see that the bill's amendments will address those barriers.

I listened to the contribution of the member for Mudgeeraba. They can make all the excuses they want, but I know that they will oppose this legislation because they have fundamentally opposed termination of pregnancy in this House. That is something that the Labor government can be incredibly proud of passing, recognising that it is a woman's right to choose.

On behalf the committee, I thank all the submitters who provided contributions to the bill. I thank the minister and our secretariat and every hardworking health professional in Queensland Health. We value what they do every single day.

I turn to the statement of reservation. I note that the statement of reservation talks about women who face challenges in regional and remote communities but then tries to blame the state government for accessing care. Our government has done an incredible job through the work of the health committee, which has recommended changes so that pharmacists can deliver more care to people who cannot access a GP. It was the health committee's primary care report that recommended that we find alternative models of care for a growing and ageing population where access to GPs is becoming incredibly difficult. In fact, one of the first places we went in Far North Queensland had 97 GP vacancies. How do people in those communities access care? They do it through nurse-led clinics. I applaud the minister for listening and taking note of those recommendations. We also have the urgent care clinics funded by the federal government and a range of other things that take the impact off EDs. Registered nurses told us that through their extended practice authorities they will be able to deliver this safely. That is what the committee heard. We are allowing that to happen because we think it is an important step to provide equality of access to health care for people in the community.

I say to the opposition: when you stand up and oppose this, be real about it. It is because fundamentally you do not believe in termination of pregnancy. But what are their alternatives? What have we heard from the LNP with regard to providing equality of access to quality health care in Queensland?

**Ms Richards:** Crickets.

**Mr HARPER:** Absolute crickets; the member for Redlands is correct. The LNP have not introduced into this House one policy that would tell us how they would improve access to care in regional, remote and Indigenous communities. The Labor government is doing that. We have a proud record of doing that. We will continue to listen to our health workforce and Queenslanders to provide the very best care we can for all Queenslanders.