



Record of Proceedings, 18 September 2025

HEALTH LEGISLATION AMENDMENT BILL (NO. 2)

Second Reading

Ms JAMES (Barron River—LNP) (5.16 pm): I rise today to speak in support of the Health Legislation Amendment Bill (No. 2), a bill that delivers targeted and timely improvements to our state's health legislation. This bill improves laws around pharmacy ownership, public health data and disease control, mental health leadership and the safe handling of radiation materials.

This bill is about less red tape and more action. It is about building a healthier, stronger Queensland. These amendments reflect our commitment to improving our regulatory levels and protecting the health and safety of Queenslanders. The Health Legislation Amendment Bill (No. 2) 2025 is a bold step towards rebuilding Queensland's healthcare system after 10 years of mismanagement, increased regulatory red tape and broken promises. This bill delivers regulation, reduces risk and provides a real improvement to our overstretched healthcare system.

Far North Queensland is home to a number of wonderful family owned pharmacies. The Calanna Pharmacy family I have worked with for nearly two decades. My dear friend and mentor Mario Calanna, whom I miss terribly, sadly passed away of myeloma nearly three years ago. Mario would be thrilled with this bill. I would also like to congratulate and thank the Leukaemia Foundation on 50 years. It was wonderful to have the Leukaemia Foundation in parliament yesterday and hear about the amazing work that they do in our communities and for helping people like Mario Calanna and his family during one of the toughest times of their lives.

Georgina and Trent Twomey, who are pharmacists and the owners of the Alive Pharmacy Group in Far North Queensland, are also incredible advocates for health in our region. Georgina was one of the first independent prescribers in Australia which enables qualified community pharmacists to prescribe medicines for common conditions such as nausea, vomiting, reflux and mild skin conditions and provide health and wellbeing services including the hormonal contraceptive, oral health screening, weight management and support to quit smoking. This has allowed pharmacists to prescribe medicines as part of structured chronic disease management programs such as for cardiovascular disease, risk reduction, asthma and chronic obstructive pulmonary disease.

Pharmacists like Mario and Matthew Calanna and Georgina and Trent Twomey are not just unfamiliar faces handing out medications; they care about their communities and they operate with integrity. They will step up to do what it takes to relieve the pressure on families who need a script for nausea and vomiting without having to go to a GP to get it or a busy woman who needs a contraceptive script renewed without having to wait two weeks to see her GP to get a script. This bill allows them to continue to support the community in a wider scope, offering \$15 million to support up to 230 more pharmacists to be trained to treat everyday health conditions.

Under this bill community pharmacists will be authorised to treat and prescribe medications for acute health conditions such as ear infections, acne, school scores and eczema. This eliminates the need to go to a doctor first and reduces the pressure on our already stretched GPs. For parents with a

child with an ear infection or vomiting, being able to consult with a local pharmacist rather than having to book an appointment with a doctor is a godsend, especially in Far North Queensland, where tropical ear is a frequent occurrence and always seems to hit in the middle of the afternoon on a Saturday or Sunday when there are no GPs open—but your local pharmacy is. As a mother, I recall numerous times when my boys were younger how stressful it was when one of them came down with an ear infection and high fever and then pain would follow. Taking your child to the hospital as there is no other option on a weekend is really stressful and not what emergency wards are for.

Under these new regulations parents can hop in the car and ensure their children receive the medication they need sooner. In regional communities where doctors are not always available this matters. For parents with a sick infant this matters. For those battling chronic disease and illness this matters. For already stretched GPs and ED department staff this matters. These amendments reflect our commitment to protect the community pharmacy model, ensuring clarity and strengthening the healthcare system. This is what delivering for Queenslanders looks like.

This bill also reduces ambiguity surrounding managing mosquito-borne illnesses, which is a real threat in Far North Queensland. More than 220 species of mosquito can be found in Queensland and many of these are carriers of diseases. Malaria, Ross River fever, dengue fever and Japanese encephalitis virus are all found in Far North Queensland. So far in 2025 Queensland has recorded three JEV cases and, tragically, two deaths from the virus, including a man from Bowen. This bill gives health authorities the tools they need to detect the danger early before another life is lost.

This bill allows environmental health teams to leave specialised mosquito traps out in the field, in back yards, paddocks and remote bushland even after they leave the site. That might sound small, but it is a game changer for detecting where the virus is hiding, especially in our most remote and vulnerable communities. In places like Far North Queensland, where medical help can be hours away, early warning is everything. This bill helps authorities move faster to issue alerts, launch mosquito control operations and roll out vaccinations. We are listening to all of Queensland, including regional Queensland. We understand the unique risks and we are acting.

Another amendment to this bill is to the Mental Health Commission Act, which lets the government appoint an acting mental health commissioner when the previous one's term ends even before a new one is confirmed. Without a commissioner in place, even temporarily, communities in the north risk falling through the cracks when it comes to funding, attention and services.

Under this bill I also welcome technical amendments to the Radiation Safety Act. This amendment clarifies that any person, not just licensed radiation professionals, can apply to dispose of radioactive material safely through Queensland Health.

This bill also supports the shift from Queensland's stand-alone dust lung disease register to the National Occupational Respiratory Disease Registry. Between 2011 and 2020, 1,451 Australians died from lung diseases caused by exposure to dust and 90 per cent of these deaths were men. The most common condition leading to such deaths—responsible for over 80 per cent of deaths—is pneumoconiosis from exposure to asbestos and other mineral fibres. With mining, construction and quarrying active across Far North Queensland, especially in areas like Chillagoe and Mount Garnet, this will ensure early detection and the better national coordination of serious illnesses like silicosis and asbestosis.

These amendments reflect our commitment to improve our regulatory levers and protect the health and safety of Queenslanders. This bill is another example of how we are committed to getting Queensland back on track by improving our processes, reducing wait times and removing red tape so Queenslanders can get on with the job and have access to health care when they need it. This is why I give my full support to this bill.