



Speech By  
**David Lee**


**MEMBER FOR HERVEY BAY**

---

Record of Proceedings, 9 December 2025

## **HEALTH LEGISLATION AMENDMENT BILL (NO. 3)**

### **Second Reading**

 **Mr LEE** (Hervey Bay—LNP) (4.40 pm): I rise to speak to the Health Legislation Amendment Bill (No. 3) 2025. This is an omnibus bill to amend eight health portfolio acts. Hervey Bay welcomes the Crisafulli government's measured, calm and methodical approach to health legislative reform. These substantive changes come after a decade of decline in our healthcare system. This bill proposes to amend the Hospital and Health Boards Act, the Health and Wellbeing Queensland Act, the Pharmacy Business Ownership Act and the Hospital Foundations Act to provide for without-cause removal of certain office bearers for any reason or no reason. These amendments are necessary to ensure that the public, including my community in Hervey Bay, has confidence and trust that office holders appointed under the relevant legislation are held to the highest standards of performance, integrity and effectiveness.

This bill provides for the Governor in Council to remove office holders with or without grounds. Minor amendments will also allow for the appointment of acting members in the event of a vacancy and clarify the criteria for disqualification from becoming or remaining an office holder under the acts. These proposed amendments will have retrospective application to board members appointed before commencement of the legislation.

I note the breathtaking hypocrisy from the opposition as they sanctimoniously lecture us about these proposed changes. Indeed, it was Labor that passed 11 of the 21 pieces of legislation with no-cause provisions in appendix E to the Health, Environment and Innovation Committee's report—an inconvenient truth for Labor. The member for Miller had no problem supporting the Public Sector Act 2022 that gets rid of community representatives. Section 242(6) of the act provides for the termination of community representatives on the Public Sector Governance Council without specifying any grounds for termination.

I turn to the amendments to the Assisted Reproductive Technology Act 2024. We are proposing targeted and methodical amendments to remedy Labor's botched and ultimately rushed drafting of the 2024 ART legislation. This bill amends the ART Act to assist in the implementation of the regulatory framework governing Queensland ART services. Firstly, the bill provides for less prescriptive requirements for collecting of contact information of gamete donors—eggs or sperm donors—for use in the ART procedure. This provides greater flexibility whilst also ensuring that relevant contact information is obtained on all gamete donors. The donor conception information register will be a staged implementation commencing in 2026.

Furthermore, this bill expands the discretion for the director-general to approve the use of gametes or embryos on a case-by-case basis where a strict application of legislative requirements would cause undue hardship. This includes circumstances like exceeding the 15-year time limit on using gamete material or where the use of the donated gamete or embryo would mean the 10-family limit was exceeded. This bill also proposes to rectify issues with the previous industry-led self-regulation of

providers under the Reproductive Technology Accreditation Committee. The bill will require from 2027 an independent accreditation of providers under the Australian Commission on Safety and Quality in Health Care. The proposed amendment also provides for counselling services to be provided to a spouse of a person undergoing an ART procedure but not where the person is separated. This bill delegates wide legislative power to the executive to make transitional regulations pursuant to a Henry VIII clause. A Henry VIII clause is an act of parliament that enables the act to be amended by subordinate or delegated legislation.

I now turn to the amendments to the Private Health Facilities Act 1999. These amendments will ensure that private health facilities that provide cosmetic surgery are required to comply with the national standards of accreditation—being the National Safety and Quality Cosmetic Surgery Standards—and support the safe delivery of cosmetic surgery in private health facilities. To avoid any confusion, this bill does not relate to cosmetic injectables. The bill furthermore amends the Private Health Facilities Act to provide information to be shared with the Queensland government under prescribed information-sharing requirements.

I turn to the proposed amendments to the Transplantation and Anatomy Act 1979. In 2024, 527 organ donors throughout Australia saved or transformed the lives of 1,328 people. There are currently 1,800 people on the transplant waiting list, including a veteran friend of mine. Indeed, many in my community of Hervey Bay are the beneficiaries of organ transplants. There are two legal definitions of death for the purposes of the act: brain death and circulatory death. This bill will clarify opportunities for organ donation in relation to cases of circulatory death. It provides a framework for consent for certain ante-mortem procedures to be conducted to determine the suitability for donation because organ quality can deteriorate rapidly following circulatory death.

The act currently provides for a next-of-kin consent to organ removal following death but is unclear as to consent in relation to ante-mortem interventions in identified cases of circulatory death. This amendment bill proposes that, once a lawful decision is made to withdraw or withhold life-sustaining measures, a person's next of kin can consent to such interventions. The hospital's designated officer must then separately authorise the interventions following next-of-kin consent. The designated officer is independent of the treating team and not included in any discussions regarding withdrawal of life-sustaining measures or organ donation.

Finally, the Public Health Act 2005 requires minor and consequential amendments following the Commonwealth's National Occupational Respiratory Disease Registry Act 2023, which now provides for notifications of occupational respiratory diseases to the national registry, and the Australian Centre for Disease Control Bill 2025, which establishes a new, independent disease control entity.

In closing, this omnibus bill is a well-considered and methodical approach to health legislative reform. After a decade of decline in our healthcare system, we desperately need a contemporary and fit-for-purpose healthcare system. I commend the Health Legislation Amendment Bill (No. 3) 2025 to the House.