




Speech By
Joseph Kelly

MEMBER FOR GREENSLOPES

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HEALTH LEGISLATION AMENDMENT BILL

 **Mr J KELLY** (Greenslopes—ALP) (12.32 pm): At the core of this bill is the objective of giving nurses, doctors and other health professionals a greater say in the running of hospitals and health services. Apparently, it is all about listening to health professionals. This objective seems to fly in stark contrast to the actions of this government. They have ignored the advice of professionals and shut down pill testing and gender clinics, ignoring health professionals and endangering the lives of young Queenslanders. Of course, we have seen through the current enterprise bargaining agreement negotiations with the Queensland Nurses and Midwives' Union that listening to nurses and midwives is certainly not on the agenda of this government.

I want to categorically reject this notion that nurses and doctors are not in charge of hospitals. It is a cheap political statement. A quick scan of any HHS leadership team will show they are all filled with experienced clinicians and health administrators. I do want to give a plug to health administrators. To suggest that somebody who has devoted their life to hospital administration is incapable of making a contribution to the leadership of a hospital and health service is, frankly, quite insulting and is completely derogatory and false in respect of the great people who do that work.

Let us just look at a couple of HHSs. Let us look at Metro North. The CEO is Adjunct Professor Jackie Hanson, a registered nurse. The Chief Digital Health Officer, Dr Jason Brown, is a burns specialist who is still practicing as a burns specialist. The Clinical Governance Safety, Quality and Risk Grant Executive Director is Mr Grant Carey-Ide who is also a registered nurse. There is a chief medical, nursing and allied health officer and director. Those who know Chief Nursing and Midwifery Officer Adjunct Professor Alanna Geary's story will know what an incredible and inspiring person she is. I would love to be in the meeting where it is suggested that she is not in charge of her hospital. The Aboriginal and Torres Strait Islander Executive Director Adjunct Professor Sherry Holzapfel is a registered nurse and midwife with 25 years of clinical experience in Indigenous health. These are the people who are in charge of Metro North HHS.

Let us look at South West HHS. Dr Anthony Brown is a rural generalist with over 30 years of experience in general rural practice. The Executive Director of Nursing and Midwifery Services, Mr Chris Small, is a registered nurse who holds four graduate certificates and an MBA. The Executive Director of Primary and Community Care, Rebecca Greenway, is an Augathella local with over 20 years of experience in rural and remote nursing. The Executive Director of Allied Health, Helen Wassman, has 30 years of experience as an occupational therapist. I could go on and on through every one of the HHSs, but I hope this demonstrates that our hospital and health services are led by teams of highly qualified, skilled and dedicated health professionals who work collaboratively with non-clinical administrators to deliver health services across our entire state. This demonstrates that the statement that this bill is about putting nurses and doctors back in charge of hospitals is completely false—they are already in charge. I think the real problem here is not that doctors, nurses and health professionals are not in charge of hospital and health services; I think the real problem is that those opposite do not listen to health professionals—not on pill testing, not on gender services and not on enterprise bargaining agreements.

How does this bill propose to fix this fictitious problem? By putting a HHS employee on the board. I want to note that of the 16 HHS boards—and it took me all of about five minutes of research during the committee hearing to work this out—13 have a clinician in either the chair, the deputy chair or the CEO role. They are senior leadership positions and all require at least one clinician to be a member of the board. As I said, this government demonstrates again and again that they do not listen to health professionals. I can tell you who else they did not listen to—that is, the Integrity Commissioner. We consulted with the Integrity Commission about this bill because myself and opposition members were deeply concerned about governance issues in this bill. The reality is: placing a practising clinician from within the HHS on the board creates a significant potential for conflicts of interest. The Australian College of Nurse Practitioners suggested that getting a clinician from a neighbouring HHS might be a better approach. The Integrity Commissioner advised the committee when balancing the complexity and cost of this proposal against the public interest whether a less complex arrangement could achieve the same end. The Integrity Commissioner suggested that appointments of clinicians from outside the HHS was an example of an alternative model worthy of consideration.

One of the roles of the board will be to review risk registers, which will involve reviewing critical incidents. A clinician from a HHS could possibly become aware of an incident that they themselves were involved in; be called on to provide expert advice on, including expert witness advice in courts; or they might even have a related supervisory role. This puts that clinician in a very difficult situation that could possibly jeopardise their ability to participate in future investigative processes. The Labor opposition has suggested an alternative approach, as has the Integrity Commissioner and the Australian College of Nurse Practitioners, yet this government ignores this issue and pushes ahead with the change based on a falsehood that they are putting nurses and doctors back in charge of hospitals. Labor supports clinicians having a greater way in their workplace but we want it done in a way that protects clinicians, the organisation and, most importantly, patients. Perhaps a better start for this government would be to start listening to health professionals, starting with, say, listening to people about pill testing, gender clinic services and perhaps even the nurses and midwives EB.

I want to turn to the part of the bill that deals with vaping. Labor will support any measure to promote health and limit the impacts of smoking and vaping. We have seen action on this issue for many years by governments of every persuasion at every level. I am particularly proud of the work that we did when we were in government of passing tobacco and vaping laws that carried the harshest penalties in the country.

I do want to note the changes made by the Albanese Labor government that have paved the way for the more effective enforcement actions now being undertaken. The provisions in this bill should not be controversial as they simply allow authorities to destroy confiscated vapes. The problem is that these provisions demonstrate, once again, the short-sightedness of the Crisafulli LNP government. While we pass laws to destroy vapes, as we learnt from the Waste Management and Resource Recovery Association of Australia, we have no environmentally safe way to do this. The explanatory notes to this bill acknowledge that the presence of lithium ion batteries, which can overheat, leak or explode under certain conditions, in addition to hazardous materials such as liquid nicotine, heavy metals and carcinogens complicates the handling and disposal of vaping goods. There is limited availability of safe disposal options existing in Queensland, with a growing financial and safety burden of managing vapes within the community and waste management sector. Although vapes include a battery, they are outside the scope of existing battery stewardship schemes. In the last 12 months 12,000 fires were caused due to the incorrect disposal of batteries and battery powered products, with 200 battery related fires here in Queensland alone.

Under the current designation as pharmaceutical waste, Department of Environment, Tourism, Science and Innovation guidelines require vaping products to be incinerated before disposing to landfill. At the moment these vapes will be burned, a wasteful and environmentally unfriendly practice. We put forward recommendations to deal with these, but of course the government would rather charge ahead with its flawed plans than listen to experts like the Waste Management and Resource Recovery Association of Australia.

While the objectives of this bill are supported and commendable, because this government does not want to listen to health professionals, the Integrity Commissioner or waste management experts, these provisions could have been so much better. We will certainly be opposing the sections of this bill that ignore the advice of the Integrity Commissioner and health professionals, and we call on the minister to work to ensure vapes can be disposed of safely and in an environmentally sound manner. This bill again just demonstrates worrying patterns with this government. They do not listen, they are arrogant and they would rather play politics than get sound policy outcomes.