



## Speech By Michael Berkman

## **MEMBER FOR MAIWAR**

Record of Proceedings, 10 June 2025

## MATTERS OF PUBLIC INTEREST

## **Toowong Private Hospital; Children, Hormone Therapy**

Mr BERKMAN (Maiwar—Grn) (3.00 pm): The Toowong Private Hospital is a specialist mental health hospital that has been operating in Toowong since the 1970s. The hospital sees, I understand, more than 3,000 patients a year, providing treatment for various mental illnesses including post-traumatic stress disorder, alcohol recovery programs and specialist care for ADF personnel, veterans and emergency services workers. The hospital went into administration in May, and it is set to close this week. I understand the last of the patients are being moved out today.

This closure is not the fault of the healthcare staff at the hospital who, from all accounts, are some of the best practitioners in the country. Rather, the closure is down to a systemic failure in our private health system. The hospital has seen mounting debt as the cost of hospital treatment has gone up but the payouts by health insurance companies have not kept pace. This is the failure of a private healthcare system where health insurance companies are able to make growing profits while failing to cover the cost of care. It is the patients at the Toowong Private Hospital who are now paying the price for that failure.

This sits alongside the failure of our public mental health system—an underfunded system with long emergency room wait times, limited services on weekends and out of hours, mental health wards that are dated and unfit for appropriate care, and numerous reports of people being discharged from public hospitals while they are still in need of care. I am worried, as are many past patients, that this hospital closure will put even more pressure on an already strained public mental health system.

Organisations like the AMAQ are calling for an expanded psychiatric and mental health workforce, additional psychiatric beds and an additional \$330 million of government investment in our mental health system. Instead, we are seeing 58 beds at the Toowong Private Hospital at risk of being lost. I have written to the state health minister and the federal health minister calling on the federal and state governments to step in now to ensure the Toowong Private Hospital stays open. The state government should step in now and acquire the hospital, as the former government did for the Gladstone Mater Hospital in 2020.

Over the past fortnight, I have heard from dozens of past patients and friends and family of people who have been treated there, all of whom are absolutely devastated that the hospital is on the brink of closure. I would like to take the opportunity to share some of their words which make clear the huge hole in our mental health system that this closure will leave. I will add that I am, frankly, astounded to hear the health minister's claim just yesterday, as I understand it, that the Toowong Private Hospital does not provide acute services. Yesterday, I met past patient Kerrie who has been running a petition calling for government support, which now has over 1,700 signatures. Kerrie wrote—

In 2023, I found myself in a dark place with no local support options. It was then that I was admitted to Toowong Private Hospital. I was struggling with severe mental health issues, contemplating the unthinkable. Yet, thanks to Toowong's comprehensive care, I rediscovered the joy in life ... Its closure would mean the loss of a vital resource that countless individuals in Toowong and beyond rely upon.

Another patient talked about receiving ketamine infusions at the Toowong Private Hospital to help with treatment resistant depression. They wrote that 'no other hospital provides this in an inpatient maintenance format'. This patient explained how the closure will mean that they will lose their access to that healthcare team, including the psychiatrist who has been treating them for 21 years. The following is another patient's account—

The services provided at Toowong Private Hospital are undoubtedly life-saving and unfortunately relatively unique. Supportive mental health recovery hospitals should not be the healthcare equivalent of hen's teeth. My life would most certainly have ended over a decade ago if not for the treatment I received at a time when I had completely given up hope.

The sad reality here, however, is that the availability of public mental health beds is so limited that the vast majority of patients are not likely to be deemed "sick enough" to be admitted to a public ward and will therefore face ongoing suffering and psychological decline without the help and support of trained professionals. This will result in death.

The government can choose to act on the warning signs now and step in to save lives or it can wait on the sidelines for the next news article where important figures can sadly shake their heads and announce "if only we had known".

I am also going to take this opportunity to table a statement of reasons for the health director-general's decision to ban hormone treatments for young people in Queensland. I table that document now.

Tabled paper: Document, dated 31 March 2025, titled 'Statement of Reasons: Decision to issue health service directive QH-HSD-058' 606.

The LNP government did its best to dodge scrutiny and hide reasons for this disgraceful, harmful and discriminatory decision, but Queenslanders deserve to see the supposed justification, no matter how flimsy and baseless the reasons might be.

(Time expired)