




Speech By
Hon. Tim Nicholls

MEMBER FOR CLAYFIELD

Record of Proceedings, 12 June 2025

HEALTH LEGISLATION AMENDMENT BILL

 **Hon. TJ NICHOLLS** (Clayfield—LNP) (Minister for Health and Ambulance Services) (8.00 pm), in reply: Let me deal with the two matters raised by the member for Morayfield because they are the two most sensible things that have been said by those on that side of the House, so let me just knock them on the head. I do not just say that because he is also a lawyer. The member asked about the exclusion and the eight hours average per week. That is 0.2 of an FTE, so it is an average of eight hours a week. That is how that calculation is done.

In relation to the show cause matter and the forfeiture matter the member raised, there are a number of additional safeguards included in the legislation. They are only permitted where an authorised officer reasonably believes the goods are evidence of an offence. There is a policy around personal use items that should not be used and you can seek compensation. An individual who may claim that they had items improperly seized and forfeited can claim compensation under section 219 of the act if lawful goods are forfeited in error. Yes, they do have to make an application to the court in order to be able to do so.

I want to thank members for their contribution to the debate on the Health Legislation Amendment Bill. I want to thank some more than others, but that would not be surprising. It is refreshing to hear so many positive contributions on this side of the House. Many members are working hard for their electorates and understand the health needs of their communities and know how important it is to put clinicians back in charge of their local hospitals.

I thank those who participated in the committee process and would especially like to call out the contribution of the Queensland Nurses and Midwives' Union. It is no secret that we are currently in a bargaining process with the union, but nonetheless they made a valuable contribution. This is what they said in their submission to the committee—

The QNMU supports the requirement to have at least one Hospital and Health Board ... member be a registered health practitioner employed by the same Hospital and Health Service ... for which the board is established.

They support a registered health practitioner from the HHS being on the board of that HHS. They go on—

The amendment to the Act will provide local clinicians a greater say in the governance and delivery of public health services in their geographical area.

In fact, all submitters to the bill supported the proposition; not one opposed it. Not one submitter out of the 11 who put in a submission opposed the bill in any way, shape or form. That is both in relation to the hospital and health boards and in relation to the Tobacco and Other Smoking Products Act amendments that are being proposed here.

The members for Miller and Greenslopes and the rest of those opposite raised concerns about conflicts of interest for clinicians appointed to boards. It was disappointing to hear the shadow minister effectively disparage our frontline health professionals by suggesting that a fully qualified professional cannot manage their own conflicts. That is the view that the Labor Party have in relation to frontline health staff.

Mr BAILEY: Madam Deputy Speaker, I rise to a point of order. The minister is clearly misquoting me. I find it personally offensive and I ask for it to be withdrawn. That is not what I said and he knows it.

Mr NICHOLLS: Madam Deputy Speaker, I withdraw. What was being promoted by those opposite was that frontline clinicians cannot be trusted to exercise their professional judgement for the benefit of their HHS and their patients, that they do not know what they are doing and that they will act in their own best interests over and above the interests of those to whom they are professionally obliged to provide services. Madam Deputy Speaker, you yourself are a former medical practitioner and this disparages you and your profession in that you are not able to distinguish between your own personal interest and the interests of your customers, clients and the HHS. That is exactly what the members opposite are promoting when they say it cannot happen. Do they say the same thing, for example, in relation to the member employee of the ABC board? Do they say the same thing in relation to an employee member of the ABC board? No, they do not.

Mr Bailey interjected.

Madam DEPUTY SPEAKER (Dr O'Shea): One moment, Minister. Member for Miller, I ask you not to keep interjecting please.

Mr NICHOLLS: As I say, it is a disgraceful slur on the professionalism of the clinicians who may wish to put up their hand to serve their communities in the communities in which they live and work. It is a disgraceful slur to say that they cannot differentiate between their own private interest and the interests of the HHS in which they wish to serve. It is backed up and supported by the advice of the Integrity Commissioner, who says if this policy is to persist—and this is a matter for government; government has the right to set the policy—she does not see the need for any amendments to the act in order to address conflicts of interest. That is the clear, concluding advice in her submission to the committee: she does not see any need to make any changes.

Any conflicts of interest that may arise from a clinician working on the board in the HHS within which they work can and will be dealt with appropriately. I have confidence in our clinicians and our frontline health workers. The LNP Crisafulli government has confidence in them. Clearly all the submitters to the committee have confidence in them because none of them opposed this proposition, including the QNMU, which actively supported it. The only people who do not believe that frontline clinicians cannot manage their conflicts of interest are the ALP. That tells honourable members everything they need to know about what the ALP think about frontline clinicians. The Integrity Commissioner is confident about it and—

Mr Bailey: Not what was said. Not what I said. Don't be dishonest. Don't be dishonest. You're being dishonest.

Madam DEPUTY SPEAKER: Member for Miller, if you interject again I am going to have to put you on a warning.

Mr NICHOLLS: It is a pity that the Leader of the Opposition was not able to persuade the member for Miller in respect of this, because the Leader of the Opposition was also confident of it when he was the health minister. I have had a look at some of the history of the appointments of board members. In 2020 when the Leader of the Opposition was health minister as he fumbled and giggled his way through the COVID response he appointed and reappointed a total of nine board members who were also clinicians working in the same hospital and health service as the board. The Leader of the Opposition appointed nine of them. In 2022 there were a total of seven board members who had been appointed or reappointed by those opposite who were also clinicians in the same hospital and health service. As I said in my second reading speech earlier today, there are currently five clinician board members who work for the same hospital and health service, all appointed by those opposite.

As the member for Algester says, the First Nations officer who works at the Mackay Hospital and Health Service, who is the deputy chair of the Mackay Hospital and Health Service, should not be on the board of that hospital and health service. Yes, she does because that is what she came into this place and said. She came into this place and said, 'You cannot and should not be on that board because you will not be able to manage your conflict of interest.' The member for Miller says it; all those over there say that because their argument is—

Mr BAILEY: Madam Deputy Speaker, I rise to a point of order. That is an inaccurate comment and I find it offensive. You are continuing to repeat something that was not said. I find the comment by the minister, which he keeps repeating, offensive because it is inaccurate. These are comments that were not said in the debate and I ask that he withdraw and that he cease repeating a falsehood in this chamber.

Madam DEPUTY SPEAKER: Health minister, may I ask you not to repeat comments that you have had to withdraw previously. Thank you.

Mr NICHOLLS: I withdraw. All of those opposite in their arguments to this place have clearly indicated that they do not believe that clinicians can manage their conflicts. The member for Algester said it in her contribution in relation to the inability to manage conflicts and it seems that, having been hauled up and been exposed for the sham that they are, they are now taking exception to the argument that they have raised for cheap and base political purposes. That is the problem with the inconsistency of the argument that those opposite make. It is clear that these conflicts of interest can be managed. They have been managed in the past. They continue to be managed with the assistance and guidance of the Integrity Commissioner, together with the valued contributions and determinations of those clinicians who have been appointed and those who will be appointed to deliver this service. It is shameful that those opposite do not trust those clinicians to be able to identify and manage their own conflicts of interest when clearly when they were in government they thought it could happen, not once, not twice but on three occasions, as I have already pointed out—on three occasions—including the current chair of the Central West Hospital and Health Service who is a hardworking clinician from Barcaldine who worked during the recent floods, as the member for Gregory knows, and who continues to make a valuable contribution to the HHS as chair.

With regard to tobacco issues, I turn to the amendments that target the illegal vaping trade. I thank members across the chamber and I acknowledge those concerns that were expressed by many across the chamber, including yourself, Madam Deputy Speaker O'Shea, in relation to vaping and smoking. We have heard members opposite raise concerns about inaction on vape related waste and battery disposal despite it not being part of the bill, but I want to remind the House that, despite holding office for a decade, Labor failed to deliver a meaningful response to these growing challenges. What did it do over 10 years? Why did it not do any of what those opposite are talking about tonight as part of its term in government? It did not do anything about it.

In February of this year the Minister for the Environment and Tourism and Minister for Science and Innovation announced a three-point plan to improve battery disposal and reduce fire risks in Queensland and he announced a \$2 million funding program in grants to support local councils in expanding battery collection points throughout Queensland's regions and committing to work closely with the waste industry to reduce the fire risks. We are taking action in the first eight months—something that those opposite were unable to do in 10 years. This clearly contradicts the claim by the member for Pine Rivers that we are ignoring local councils. As I said, the government is supporting councils facilitating the safe disposal of batteries, including those found in vapes.

The bill delivers practical and meaningful reforms that strengthen our health system and protect our communities and particularly our young people. By embedding clinicians on hospital and health boards, we are fulfilling our commitment to the people of Queensland made at the last election, we are elevating frontline voices and ensuring those making strategic decisions are aware of impacts on delivery of care. These changes will lead to a more informed, locally responsive governance service with a clear focus on improving patient outcomes. At the same time the bill confronts the growing threat posed by illicit vaping products and delivers stronger enforcement powers and these measures protect public health, support our enforcement officers and disrupt the illegal trade that is undermining honest business. I commend the bill to the House.