



Speech By

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HEALTH LEGISLATION AMENDMENT BILL (NO. 2)

Second Reading

 **Mr WATTS** (Toowoomba North—LNP) (5.56 pm): I rise to make my contribution to the debate of the Health Legislation Amendment Bill (No. 2) 2025. I would like to thank the minister for bringing this very important bill to the House. As we know, it is an omnibus bill, but one of the key areas is something I am very passionate about—that is, pharmacy business ownership. In Toowoomba we have a number of great pharmacists. My local pharmacist is Sam, who is at Moreton & Coote Pharmacy in East Toowoomba. Over the years I have used the one out at Highfields which is also great. What I really appreciate about the local pharmacy, and what I think is important in this bill in empowering local pharmacists, is having somebody whom you know who has the ability to get to know the different medications that you take and can offer advice at different times. I got my flu shot with Sam this year. If his wife had got the camera right we would have had a photograph to put online but, unfortunately, I could not get a second shot and we missed the opportunity. We will try again next year. I have had a flu shot every year for a number of years and it seems to be serving me pretty well, so I am happy to do it.

Family pharmacies, small pharmacies and pharmacies that service the people of Queensland become particularly important as you move out of the capital city, start to head west and go into smaller towns where medical services and GPs are harder to find and more difficult to get into. If you need to seek a small amount of medical advice for minor ailments, what medication you should take or what you should do if your particular medication happens to not be available, the pharmacist is well qualified. They have done the majority of a medical degree before they can become a pharmacist and, in terms of knowing what the interactions are, they do an excellent job.

I support local pharmacists. Sam and his family are Coptic Christians who came to Toowoomba. They are Arabic speaking. In our community we have a very large Yazidi population, which also has many parts to it. Although they speak Kurdish Kurmanji they are also Arabic speaking, and for them to go and see a local pharmacist who has the language skills across a couple of generations to communicate with them what is happening with their medication and what they are doing has been particularly helpful. For that traumatised cohort in Toowoomba—they are now numbering in their many thousands—to have a local pharmacist who has met all of the regulatory requirements and has been serving the community of East Toowoomba very well for a long period of time and who also has those language skills to help those people as they are settling into our community has been invaluable. I know that many of the Yazidi like going to see Sam because of the language. If Sam had one complaint it would be that as their English skills get better they come and see him less as they pick a pharmacist closer to their house. He is one who does not want them to learn the English language too quickly because it is much better for business for him! I digress.

It is important that we have these pharmacists in our communities in the western parts of Queensland and that they have various prescriptions on hand. If you go to the same pharmacist on a regular basis, they can make sure they have stock. They can offer cheaper options when they are

available rather than always the branded products, for those people who are feeling the pressure in terms of the cost of living. I very much support that part of the bill. I give a shout-out to Moreton & Coote Pharmacy, who have been looking after me for a long time. As you can see, I am fit and healthy so he does a pretty good job.

It is important to ensure that any loopholes are closed to make sure that trust is there. I think it is really important that when someone goes and gets that kind of advice about their prescriptions, what they are going to consume or things that might change the chemical balance in their body, they get it from someone who has that level of education, has that expertise and has served appropriately in developing those skills. It is really important for that well-licensed model to continue. I think the minister needs to be commended for that, and long may it last.

In relation to occupational respiratory disease, we all know about the reports that came along on black lung and how that leads to silicosis and dust lung disease. I think it is good for us to be now transitioning a state register into the National Occupational Respiratory Disease Registry. This is something that crept up on us and was investigated heavily. Reports were released and we put a program in place. To make that now work across all borders can only be a good thing. We want good data. We want early intervention. We want the ability to ensure that both Queenslanders and people as they move interstate are not suffering from this disease. Whether it be someone who was cutting stone—and I have Wagner in my electorate. I do not mean the concrete Wagners but the stonemasons, who are cousins of the Wagners. They have a lot of stonemasonry and have done a lot of stonework there for a long time. They have great occupational workplace health and safety standards in place. Making sure anybody who finds themselves exposed has access to a national register is a really good outcome, so it is something that is easy for me to support in this place.

When it comes to Japanese encephalitis, the mosquito itself and the diseases it can carry is one of the biggest killers on planet earth. In Queensland we range from the tropics in the north and we have various different climatic opportunities for mosquitoes and mosquito-borne diseases to spread. Japanese encephalitis is one that needs particularly close monitoring because at the point it gets into the human population it can have very devastating effects. Anything we can do that allows that monitoring and capacity of government officials and others to collect the information and data they need—I am no scientist when it comes to these subjects, so whatever they need, I am happy to empower them to do it. If there is an outbreak I want to make sure it is reported and we have processes in place to identify it, control it and then prevent it from spreading. I think that is a really good outcome.

Mental health has become such a big issue in recent years. Making sure we do not have any gaps in the governance of mental health is critically important. To have the ability to appoint an acting commissioner if there is a vacancy is really important. We want to ensure that in this critical health area we have the right people working in that space, no matter the set of circumstances that arise. We have some great services in mental health in Toowoomba working in this space, but ensuring there is no gap in the governance is very important.

With the limited time I have remaining I will talk briefly about the Radiation Safety Act. In my patch there is a lot of old machinery and a lot of different things on farms. Those things may not always have been taken care of or by the book if people arrive at something that has unknown contents. Having this amendment and disposal capacity at someone's fingertips should they need it when they recognise a danger is important. I appreciate those amendments for an area like ours where over the years lots of old equipment and old things have been left lying around. When they were built, they may not have been built to today's standards and they may contain unknown materials. If there is any fear of radiation, being able to treat that appropriately and dispose of those items safely is a really good amendment.