



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



**HOUSE OF REPRESENTATIVES**

**Main Committee**

**PRIVATE MEMBERS' BUSINESS**

**Community Hospitals in South Australia**

**SPEECH**

**Monday, 28 February 2011**

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

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## SPEECH

**Date** Monday, 28 February 2011  
**Page** 1784  
**Questioner**  
**Speaker** Zappia, Tony, MP

**Source** House  
**Proof** No  
**Responder**  
**Question No.**

**Mr ZAPPIA** (Makin) (7.31 pm)—I thank the member for Barker for bringing this motion before the House, because it highlights the need to reform the hospital and health system throughout Australia. The government recognises that. The states recognise that. The Australian people recognise that. The only ones who do not seem to understand that are the coalition members opposite, who oppose every step of the way every reform, every initiative, every commitment and every policy that is put up by this government in order to reform our health and hospitals system. I do agree with the member for Barker that this House certainly does value the important role that community hospitals play across Australia. That goes without dispute from any member on either side of the House. As for the rest of his motion, I will speak about that in the course of my remarks in the time that I have.

Health policy is and always has been a priority for people around the country. When you are in serious need of assistance because of an ailment, little else matters. It is the No. 1 priority for you and most likely for your immediate family members. Nothing comes ahead of health in terms of priority when health is at stake. And yet, after 12 years of being in government, members opposite—and the member for Barker was a member of the government at the time—failed to keep pace with the emerging and changing demands on our health system. What they did was in fact what we are seeing tonight, and I will come back to that in just a moment. They not only failed to keep pace with the emerging changes but in fact cut a billion dollars from hospital funding. They did that and then blamed the states for failing to deliver the required services. It was a clear strategy to cut the funds, blame the states and then come in when it suited the federal government to say, ‘We will assist communities in need by directly intervening,’ which is exactly what this proposal aims to do—in a similar way to what they did in the lead-up to the 2007 election when they were going to directly intervene in the Mersey Community Hospital in Tasmania.

This policy clearly highlights that members opposite do not have a policy when it comes to managing the health system. This is an ad hoc move on the part of the member for Barker and I ask him: has this particular proposal been run by the shadow health minister, the member for Dickson, and does he approve of the Commonwealth intervening in this way?

**Mr Secker**—I’m running it, Tony. Don’t you worry about that. You’ve tried every other way, Tony.

**Mr ZAPPIA**—If he does, is it then the case that every other—

**Mr Secker**—You asked the question and I’ll tell you: I’m running this.

**Mr ZAPPIA**—community hospital around the country will also then be entitled to put up its hand for funding for services that they need as and when the need arises? Will every other community based hospital such as the hospitals in Bordertown, Mount Gambier, Naracoorte, Penola, Kadina, Wallaroo, Port Pirie, Clare and Balaklava in South Australia equally be in a position to say that they would rather the Commonwealth directly fund them rather than going through the state system in South Australia? I put it to members opposite that, if that is their policy, they ought to say so clearly right here and now. I would certainly be interested in the response from their shadow health minister as to whether it is their policy.

I will come to some of the reforms that are required which I referred to earlier. The first thing that comes to my mind when I talk about reforms is the shortage of doctors across Australia. I raise this issue for the specific reason that in my electorate of Makin the North East Division of General Practice, who I assume represents the doctors, have made it clear that we currently have a doctor shortage because they cannot find enough doctors to fill the practices within the division. There is also a real concern that the situation will deteriorate as many doctors are reaching a retirement age and will, quite rightly, retire. That is one of the matters that the previous coalition government neglected. Had they invested in doctors’ training and not capped the amount of training for doctors available in the universities we would not now be facing this shortage.

I will come back to the required health reforms in a moment, but I just want to cover some of the ground that the member for Hindmarsh covered with respect to what the state government has been doing in regard to the

three hospitals that we are dealing with today in this motion. The member for Hindmarsh articulated some of the work that has already been done by the state government. The state minister for health met with the boards of the three hospitals on 27 October and, in doing so, offered the South Australian Department of Health and the Country Health SA chief executive to work with the hospitals to try and identify not only cost savings but a better management plan for the hospitals to ensure that they could remain viable. It is my understanding that the working set up to do that in fact came up with the necessary savings that were required to ensure that the hospitals continue to provide the services.

It is also my understanding that the aged-care housing group in South Australia, which I am familiar with and which I have every confidence in, has been asked to work with the Keith and District Hospital in order to identify any opportunities in the aged-care sector, which will add to the revenue stream of the hospital and, in turn, continue to make it viable. I understand that the chief executive of Country Health SA is still in contact with the chairman and director of the Keith and District Hospital, Mr James DeBarro. If those discussions are ongoing, and I understand that they are, then it would seem to me that it would be appropriate to allow them, at the very least, to come to a conclusion. Then, when they come to a conclusion, to act in respect of the outcomes of those negotiations and positions. It is also my understanding that state health minister John Hill has given a guarantee that a \$300,000 annual subsidy to Keith in recognition of its provision of emergency services will continue. That is important because it will enable the emergency services provided by the hospital—which nobody disputes are good services—to continue for the benefit of the community around Keith.

I have summarised the work that the South Australian state health minister is doing with those three hospitals in particular. I want to come back to the issue of health reforms because, as I said from the outset, this motion highlights the need to implement health reforms right across the sector and right across Australia. You cannot run a health system where you individually cherry-pick when the federal government will intervene and when it will not. You need to have a policy that is consistent so it is well understood by the sector right across the country. That is exactly what the federal government is aiming to do with its recently announced national health reforms.

Under those health reforms we will see \$345 million committed to increasing training for GPs, which is expected to deliver an additional 5,500 new GPs, or GPs undergoing training, over the next 10 years. Another \$390 million will go towards supporting nurses in general practice and \$650 million will go towards establishing 64 GP superclinics. Also \$467 million will go towards putting an electronic health record system into place. This is something which, I might add, will help hospitals right across the country wherever they are, and which members opposite continue to oppose after having initiated the proposal themselves when they were in government.

*Opposition members interjecting—*

**Mr ZAPPIA**—The members opposite say that the reforms will not help Keith. All of these reforms will help Keith because, firstly, we will get a much more efficient health system around the country and, secondly, every one of those hospitals will benefit from the investment measures that I alluded to a moment ago, because that is a direct investment in the provision of health services around the country for all those hospitals. *(Time expired)*