



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



**HOUSE OF REPRESENTATIVES**

**BILLS**

**Dental Benefits Amendment Bill 2012**

**Second Reading**

**SPEECH**

**Wednesday, 10 October 2012**

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

---

## SPEECH

<b>Date</b> Wednesday, 10 October 2012	<b>Source</b> House
<b>Page</b> 11809	<b>Proof</b> No
<b>Questioner</b>	<b>Responder</b>
<b>Speaker</b> Katter, Bob, MP	<b>Question No.</b>

**Mr KATTER** (Kennedy) (13:31): In my electorate we call public meetings, and at every single meeting in the previous round, which was held two years ago or more, dental health was raised as an issue. The latest round of six meetings—to which 200 or 300 people turned up—was held last week, and, to my memory, the issue of dental health was again raised at every meeting. We were quite surprised that, in the previous round of meetings, two people turned up who had reached a point of such desperation that they had extracted their own teeth—one of them did it on Channel 9 for the whole of Australia to see so that he could let the incompetence of the government be known.

We live in an extremely rich nation. If a government cannot fix teeth and instead leaves people in pain, you must wonder whether it is really a government at all. You can cut back on education or you can cut back on the arts—you can cut back on a whole range of services—but I would have thought that one service that you cannot cut back on is dental health. What has prompted the government to do such a remarkably stupid thing? In my 39 years as a member of parliament I have watched governments; when they start making mistakes it is like in football: they catch dropsy and just keep making mistakes. I remember that, in the Whitlam era, every time I would turn on the radio I would think that it was too good to be true—I really did not like Mr Whitlam—each day a new disaster befell the government. It seems that this government—just like the Queensland government—cannot be told. Even though you may say to the government, 'Please don't do this; it's a terrible thing to do,' it will transpire that every aged person in Australia sooner or later will get the message through their dentist—if they get to a dentist—or through their doctor that the dental scheme is gone.

I give the Leader of the Opposition considerable praise for his position on the government's revised dental scheme, because, let's face it, the revision is a bit sneaky. It looked pretty harmless—it looked like there was no money involved, and it got past Treasury—but in the end it was found that there is one hell of a lot of money involved in the revision. As far as I can see, the current government has owned up to the fact that there will be a fall from \$1.2 thousand million a year in outlays for a dental scheme to about \$600 million a year. They are switching a chronic aged-persons' scheme to a young persons' scheme, and that is immediately a diminution—a cutting in half—of the current outlays. Clearly this is being done under pressure from Treasury, but would you cut out fixing people's teeth when they are in pain? I think that everybody would have had toothache at some stage, and really it is the most dreadful pain. If you had to cut, you would cut everything before you cut medical and dental health care, yet the revised scheme involves a very sizeable cut. Why replace a chronic aged-persons' scheme with a young persons' scheme? Young people, by their very nature, do not have old enough teeth for decay to be a serious problem for them. If you say, 'We're going to look after young people rather than old people,' you are looking after people who do not have a problem. You will look after people who do not have a problem, whereas you will not look after people who have very serious problems indeed.

Professor Hans Zoellner had a lot to do with putting the original dental scheme together under the previous government, and I praise him. I also praise the now Leader of the Opposition for his role in the scheme when he was health minister. But I most certainly cannot praise the present government. The new minister, who seems a very capable and able and intelligent person, has been hit with a real big coathanger right at the start of her tenure, and all I can say to the minister is: you have taken a very wrong turn in your first real initiative—they have pulled the wool well and truly over your eyes.

To reiterate, what is being proposed here is very, very simple. Instead of looking after old people, we are going to look after younger people. Quite frankly, if you want to do something for younger people, give them all a toothbrush and toothpaste at school and have them brush their teeth every lunch time. That would cost you about a million dollars a year, and you would halve tooth decay in that cohort of the population, when you are supposed to be giving them some sort of assistance. The assistance that you are going to provide here will be very minimal indeed. I think most of money for the scheme will go towards administration costs—to a lot of people running around the countryside—not to a dentist sitting beside someone in a dental chair and fixing their teeth. I hope I am wrong in foreseeing that.

What is being proposed is that we look after people who do not need looking after and that we not look after people who need looking after. One of the great benefits of that for the government is that they can spend a hell of a lot less money. If you are going to make cutbacks, make them everywhere else in your budget but do not make them on Medicare, on the health and welfare of people, and do not cut back on dental health.

In the first round of meetings we had in the electorate I represent, we met two people—one in Richmond, a western town a long way from anywhere and one in Babinda, on the outskirts of Cairns, a suburb of Cairns, if you like—who had to pull their own teeth out. Everyone in Australia could watch one of them do that, because it was done on Channel 9. The person had been told, 'You have to wait for three months,' and when the wait finished they were told, 'We have had to put you to the back of the list because you are not a very important patient; your problem is not a very serious one.' So he was put back another three months, then another three months. He was in continuous pain and eventually realised that he was never going to get in, so he pulled his tooth out himself. In the recent round of our meetings, a lady got up and said, 'There is a four-year wait to have a tooth fixed in North Queensland.' She was told, 'When you do get in you will get one tooth fixed each year.' So, after you wait four years, you can only get one tooth fixed in the next year. The magnitude of the problem is huge and some serious money has to be put into it.

In my political career I have never proposed that we should put extra money somewhere without suggesting where that money can come from. In the Queensland health department I fought tenaciously against the upgrading of nurses because I could see that a massive blowout in costs was going to occur. We had nurses doing on-the-job training who were suddenly lifted up to university training, and of course all the work they had done in their traditional roles was pushed down to another rung of nurses. A whole layer of employment was created in the state of Queensland under the Ahern government, which I regret to say I was part of. It most certainly did not occur up until the election of Mike Ahern. Under the Bjelke-Petersen government, we steadfastly resisted the push to put that extra structure in. That extra structure has come at an absolutely colossal cost to the people of Australia in terms of both services, because there was not enough money to do the job anymore, and benefit. And maybe the horse has bolted there.

The second area of savings is in agency nurses and agency doctors. I am reliably informed that there are agency nurses getting \$1,500 a day. They watch their poor old colleagues earn much less pay than that—they are flat out getting \$1,500 a week. The doctors are on a considerably higher amount. Even if that figure is exaggerated, there is no doubt, no question in anyone's mind, that it is close to the action. Agency nurses and doctors are costing 10 times more than ordinary nurses and doctors working in the system. What sort of incompetent government in Queensland would get to a stage where something like one in 10 nurses is an agency nurse? What level of incompetence is this? Clearly that is a problem that could be solved in the space of three or four months by anyone with intelligence and ability. You simply employ a cadre of nurses that agree to be transferred around—a lot of nurses are young people who like being transferred around; it is exciting to go from place to place. Of course, they get paid a hell of a lot more than existing nurses. But they do not get paid the absolutely outrageous agency fees that are being paid presently.

In respect of the other area of savings, I am simply quoting the AMA. I went to 12 doctors that I knew very well that had been practising for over 15 years. I put it to them that the AMA was saying that, in Queensland Health, there are now three non-touch people for every person who actually has patient contact. I asked them whether that was the other way around 15 years ago and all 12 of them said, 'Yes, I would say that is pretty much the way it was 15 years ago.' So we have three people who do not have anything to do with patients for every one person who has patient contact, whereas 15 years ago it was the other way around. So clearly there are supernumeraries on a colossal scale inside this department that need to be wiped out. There are two huge areas of wastage in the public service.

Finally, in the time that I have left, my home country is North Queensland's mid-west, those little towns between Townsville and Mount Isa. I can never remember a period—until 17 or 18 years ago—when we did not have four dentists servicing those four towns: Cloncurry, Richmond, Julia Creek and Hughenden. It seems to me that, when I ring up, most of the time they have no dentists at all. So some 10,000 people—

The DEPUTY SPEAKER (Hon. BC Scott): Order! The debate is interrupted in accordance with standing order 43. The debate may be resumed at a later hour. The member for Kennedy has leave to continue speaking when the debate is resumed.