

Speaker; Mr Mike Board; Mr Jeremy Edwards; Mr Bernie Masters; Mr Terry Waldron; Mr Kucera; Mr Mark McGowan; Acting Speaker; Dr Janet Woollard; Mr Tony Dean; Mr Kucera

RURAL HOSPITAL BUDGETS

Matter of Public Interest

THE SPEAKER (Mr Riebeling): Today I received a letter from the member for Murdoch seeking to debate as a matter of public interest the following motion -

That this House condemns the Minister for Health for misleading the Parliament and the people of Western Australia over rural hospital budgets and the impact on the delivery of rural health services.

If sufficient members agree to this motion, I will allow it.

[At least five members rose in their places.]

The **SPEAKER**: The matter shall proceed on the usual basis.

MR BOARD (Murdoch) [2.43 pm]: I move the motion.

The Opposition will continue to raise the issue of health budgets, particularly in rural health services, and to our tertiary hospitals. Today, the issue is rural health, because this minister has not informed this Parliament or the people of Western Australia about the true position of the budgets for country hospitals around Western Australia. Day after day, week after week, hospital boards are threatening resignations and services have been closed. This minister has put out many press releases about increases in funding for hospitals in Western Australia, only to find that, as a result of the budget this year, services are declining, people have less money to spend on services, and the situation in rural areas is worse than it has ever been. I will read a letter of resignation that was drawn to my attention yesterday by the member for Vasse. This letter clearly indicates the exact situation on the board.

Mr Kucera: Is the writer of the letter a National Party member?

Mr **BOARD**: I have no idea of this person's politics. It is addressed to the Minister for Health, and reads -

Sir,

Please accept my resignation from the Vasse Leeuwin Health Board, the Busselton Health Management Committee and the South West Health Executive.

In our discussions on Oct 8 I explained the 1.3 million deficit in the VLHS budget and you promised to study the figures and give me a reasonable answer. Your letter dated 31 Oct does nothing to address my concerns. This deficit figure was confirmed to me by the acting commissioner last week. The so called increase we have received is a blatant bit of creative accounting by your Health Department Officers and takes no account of the \$1 M in pay rises granted by your government . . . or the various parcels of money to which we in fact have no access. I do not need to remind you that this is the fastest growing region in the state even without the tourists.

In your letter to me you state that the Board has a responsibility to manage the total budget within the allocation. You and I both know that this is impossible and I for one am not taking the blame for my inability to perform miracles. I am not paid for this, in fact I am not paid at all.

The Health Department have never liked Boards who erode their power and will no doubt use these financial tricks to speed their abolition in accordance with the HARC report.

This is not a political decision as the previous Liberal Minister was equally unable to make the Health Department Officers talk in plain Language. I had hoped for a better outcome with the change in Government.

That is from somebody who supported the minister. I will read also, because it is damning of the minister and the Government, a newsletter to staff from the management of the Busselton District Hospital, bringing staff up to date on the health service budget for this year. The document reads, in part -

However it is evident that we are going to have to significantly limit expenditure for the rest of the financial year.

That was written only two months after the state budget was brought down. The letter goes on -

The following are some of the measures that have been identified as issues that must be seriously considered.

No new services will be considered this financial year . . .

Extract from Hansard

[ASSEMBLY - Thursday, 8 November 2001]

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Staff development to be minimal. Only those workshops that are essential to the services will be considered . . .

No travel to outside venues unless essential

No paid attendance at conferences this year

No new equipment unless it is unavoidable . . .

No additional staffing and a review of all staff on special contracts

A review of all non core services to ascertain the need to continue the service.

Where possible no holiday relief for non essential staff

Reduction of the car fleet. This will mean very tight control of car use

I remind members that this is Busselton, a regional area. Unfortunately, it is not untypical of what is happening in all the rural health services, and it is very typical of the memos going around. We warned this minister and this Government prior to the budget that they needed to adequately fund the health system in Western Australia, that it needed at least a six to seven per cent increase in funding to meet the current demand, which is growing at nine per cent. The Government increased the health budget by less than three per cent, and in fact in real terms it is below one per cent. If that is not enough, next year, even with inflation, it will be one per cent. The hospitals are absolutely distraught. They are cancelling services around the State. I am not making those decisions, they are being made by their own hospital boards, volunteers and communities, which are struggling to deliver the services. The hospital administrations are telling them that they cannot continue those services and they must be cut back. I do not know where the minister has been, but he is either completely ignorant of what is happening in those hospitals or he is misleading the Parliament.

Around the State every hospital board is considering right now how they will terminate a number of services. The hospital boards are so uncertain about their own budgets that they do not know whether they will be operating after the next 12 months or so. I could show the minister the articles that ran through Western Australia prior to the budget when the minister said that the Opposition was just scaremongering. *The Geraldton Guardian* said that a knife would be taken to health in the region; a fair deal on rural health was called for in Narrogin; an article on the mid west health crisis was run by *The Geraldton Guardian*; and the *Kalgoorlie Miner* warned of health cuts prior to the budget. We were told that the Opposition was scaremongering, that the cuts would not eventuate and hospital boards would receive adequate money not only to continue their services but also to increase them. What has happened? As I speak in this place today, every board in Western Australia is considering how they will be able to deal with inadequate funding this year.

Is the minister aware of a meeting in York next Tuesday of all the country health services coming together to decide how they will deal with the budget cuts? I invite the minister to be there, as he may learn about what is happening in those country hospitals.

I believed the minister when he said there would be no cuts and I proceeded to visit some of the hospitals. I visited Wyalkatchem, Dalwallinu, Mukinbudin, Merredin, Bruce Rock, Cunderdin, Corrigin, Quairading and Beverley. I did not talk to Liberal Party members in those places nor to political people. I talked to people who supported the Labor Party leading up to the election; that is, volunteers and people on boards right across the community. They were not political people; they were people who were fighting for services for their town. They were not doctors whom the minister would want to take on and they were not people who have a vested interest in making money out of the health service, as the minister claimed.

This matter is about people who want a fair and just service delivered to the community in Western Australia. What are they saying? The minister should go out and talk to those boards tomorrow to find out what they are saying. They will tell him that he has completely misled them. They are far worse off this year than they were last year. The minister can stand in this place and say that hospitals have had a five per cent, six per cent or seven per cent increase. However, the reality is, as the minister knows, that everything loaded up in the budget plus the additional costs they need to find this year puts them between 10 to 15 per cent worse off than they were last year. Some hospitals are cancelling some services that they delivered last year. The minister should not believe me; he should go and talk to them. He should go right out of this Parliament and sit down with those boards and talk to them about how they will deal with their lack of funding. We warned the minister that this would happen.

It does not give me pleasure to say this: all I want the minister to do is to tell the truth about the budget in this State or give the boards an indication of exactly what is going on. They have no idea whether they will be funded to the same level next year. The minister talks about a further reduction of one per cent in services next

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year to those hospitals. Does the minister know what those boards believe? They believe he wants to get rid of them entirely. They believe that he wants to move all of the services to regional hospitals, as the minister almost admitted yesterday in this debate, and get rid of the boards so that they will not be able to support their towns in the delivery of those services. Instead there will be the demise of quality country health services run by those communities and that will be a tragedy to this State.

I was very upset about some of the things I saw on the ground. I saw people who had raised large amounts of money, for example, \$500 000 in a fundraising effort of more than four to five years to build physical resources that will no longer be utilised because the boards have had their funding cut and are now unable to deliver those services. The people in those rural areas are angry that the work they do as a community in the fundraising and volunteer support they get, particularly around the hospitals, is no longer worth doing. They are talking about walking away from that support because they have been misled on funding by the minister and the Government. They are not asking for huge increases. They are asking for a fair level of funding to continue at least the services they have built up and the pride they have tried to give to their town. However, they are told not to worry, that the Government will remove the services of visiting surgeons and they can receive those services in regional towns. It is not good enough. This minister has not had the courage to tell those hospitals or the people in those country towns exactly what is going on.

I am really saying today that the Opposition will continue to raise this issue. Some members want to talk about specific cuts, for instance in Geraldton and Merredin. A million dollars has been cut from the Merredin budget; that is a significant amount of money that Merredin must now raise. The minister should talk to all the boards that I spoke to. They will give him the exact figure to show that they are worse off than they were last year. The minister is either ignorant of it, is being misled by his health professionals, or is misleading the Parliament. The minister can put a budget line in the *Budget Statements* and say that they are six per cent better off. The reality is that they do not have the money to deliver the services because a great deal of other costs have been heaped onto them which, frankly, is a tragedy for this State.

MR EDWARDS (Greenough) [2.56 pm]: I shall make some brief comments in support of my colleague, the member for Murdoch. Again a Labor Government is failing rural and regional Western Australia by forcing regional health service boards to substantially reduce their budget costs; in Geraldton it was \$1.8 million. A media release of the chairman of the Geraldton Health Service board stated -

As there is considerable speculation in the community over our financial position the Board felt it was important that the community was made aware of our position and the steps we intend taking to come in on budget. While we have received an increase in funds, this is largely due to services and funds transferred to the Geraldton Health Service they are already committed and are not funds that can be used for any other purpose. The bottom line for us is that we have to find \$1.8m to provide our basic services.

This Government came in on a heap of promises and platitudes to the people of rural and regional Western Australia. It said it would change the health system. The minister is looking for bipartisan support in the whole of this health issue. I must say to him that very little bipartisan support was given when the coalition Government was in power. The criticism and the mischievous statements made at that time are now coming back to bite the Government. Electors may have put the Government where it is under a false illusion, believing it had the answer; how very disappointing for them.

This Government's answer is selling out rural health by slashing funding to rural communities, which means that patient services are compromised through less provision for elective surgery and specialist services. The member for Murdoch has mentioned that matter already. The Government is punishing health boards that have shown responsible and good financial management of their budgets. The minister must know the people in those health boards. They are not political people. They are people with the best interests in the world for their own communities.

Mr Kucera: Is the head of the Geraldton board not political?

Mr EDWARDS: There must always be one or two, perhaps, but in general they are not political.

I believe that the Labor Government is putting rural and regional Western Australia at risk by showing a lack of commitment that country Western Australia has come to expect from this Government.

MR MASTERS (Vasse) [3.00 pm]: I invite the minister to interject and say again what I thought I heard him say. I want to clarify that he asked whether John Edwards, the former chairman of the Vasse Leeuwin Health Service Board, was a member of the Country Party.

Mr Kucera: I was simply asking the question.

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Mr MASTERS: The Country Party ceased to exist 20 years ago; so, clearly, he is not a member. To the best of my knowledge, he is not a member of any political party. In addition, for the four years that I was a member of the Court Government, he was the biggest pain in the backside visiting my office or telephoning me. For that reason, I am extremely pleased to say that he did a wonderful job as chairman of that board. He had his fair share of problems under the previous Government, but he took his job very seriously and called a spade a spade. I valued his ability, courageousness and determination to ignore the fact that he was talking to a member of the Government. He did not let it cloud his judgment in any way. I hope the minister is not accusing him of any political motive. If he is, he is totally wrong.

I refer to another interjection from the minister. He said something along the lines of, "We gave them eight per cent." He was referring to the Vasse Leeuwin Health Service.

Mr Kucera: It was eight per cent across the rural sector.

Mr MASTERS: We were talking about the Vasse Leeuwin Health Service at the time. He has previously said that the health service's budget has been increased by 8.6 per cent. I cannot accuse the minister of being foolish, stupid or having motives unbecoming a member of Parliament. However, somewhere along the line for some reason he is coming to the wrong conclusion. When looking at these figures, it is crucial to compare apples with apples and not apples with oranges. I surmise that the minister has been told that the health service budget has been increased by 8.6 per cent. If that is true, how can the board possibly complain? The reality is that it has received an 8.6 per cent gross increase. When one takes into account the extra expenditure -

Mr Kucera: If it is getting an increase, how can I be misleading Parliament?

Mr MASTERS: The minister is comparing apples with oranges.

Mr Kucera: An increase is an increase is an increase!

Mr MASTERS: This is very much like the Electoral Amendment Bill. The minister is talking about the process; I am talking about the outcomes. Members on this side are talking about the outcomes we hope to achieve through the health budget.

The reality is that an 8.6 per cent increase in total funding is a sham or a smoke-and-mirrors trick. The budget has been loaded with an extra \$1 million to cover the cost of wage and salary increases, \$300 000-odd to cover the cost of superannuation that was previously in a different part of the budget papers and \$300 000 for the south west health plan. I do not know anything about that health plan. John Edwards tells me that that money cannot be spent at his or the board's discretion. Therefore, it is a false entry on the budget bottom line and it must be removed if we are to compare apples with apples.

The Vasse Leeuwin Health Service has been allocated \$1.3 million less to provide the same level of service that it provided last year. If the minister does not believe me, I challenge him to question people he trusts about this issue. The minister is getting poor advice or he is misleading Parliament. I have previously said in this place that cuts have been made across the board. Members have provided a few examples.

Mr Kucera: How can an increase be a cut?

Mr MASTERS: I am talking about service delivery. The minister should not shake his head. That tells me that he believes the bullsh*t he has been fed by his bureaucrats. If one wishes to compare apples with apples, one must consider the amount of money that has been allocated to the Vasse Leeuwin Health Service to allow it to provide the same level of service this year that it provided last year. Its budget this year is \$1.3 million less than it was last year.

The member for Murdoch quoted the Busselton District Hospital's 5 October newsletter, which pointed out that no new services will be considered this financial year, there will be no travel, no paid attendance at conferences, no new equipment, no holiday relief and so on. The issue that worries me is the statement that the service will be hard pressed to deliver the same level of services this year that it provided last year. That is the point I want the minister to understand. I know the minister is listening, but he is not hearing. There is a significant difference.

I have previously referred to the budget cuts affecting local drug action committees in the south west. I do not think that comes within the scope of the minister's portfolio responsibilities. Some weeks ago I found out that local drug action groups can no longer apply for annual funding of \$12 000; that figure has been reduced by 75 per cent to \$3 000. That is one example of a basic but very important health service that is losing out.

I cannot quote the source of my information because I fear for the security of the public servant involved, but I have a copy of the minutes of a meeting held just before the budget was handed down. Under the heading "SW Mental Health Service" - which certainly is within the minister's bailiwick - it is stated -

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There is an office in Bunbury and there was an office in Margaret River but this is in the process of being closed. The current waiting list to access this service is 3 to 6 months.

The person who provided me with that information receives between seven and 13 referrals a week.

Significant cuts are occurring in services other than the Vasse Leeuwin Health Service. I am referring to the reality and the ability of these units to provide basic services. The South West Mental Health Service and the local drug action groups are also suffering. I ask the minister to pull the cottonwool out of his ears and stop pretending to listen. If he does, he will hear what is being said to him.

MR WALDRON (Wagin) [3.08 pm]: I support the members who have spoken on this issue. Members have dealt with the reality of budgeting and the different ways one can play with figures. The representatives of health services are telling members on this side that they do not have budgets that will allow them to deliver the services they should deliver.

The Leader of the National Party received a letter from the Eastern Wheatbelt Health Service about the state budget. In essence, the council believes that its budget is \$916 000 short of what is required to provide services this year. Apparently the Department of Health has told the council to develop strategies to save \$900 000 and that there will be no top-ups. If it were possible for the council to find savings of that magnitude in one year, it would be derelict in its duties. That is a real concern. The letter also states that agency nurses cost the service \$420 000 a year. That cost is over and above the costs associated with employing local staff. Supplementary amounts are made available, but they are not guaranteed. That is a realistic cost that is not taken into account. The member for Murdoch mentioned that people were involved in fundraising to build these facilities. The Government has put forward the view that the previous Government left it with this problem. In my area of Wagin we have great facilities. People are saying to me that it is okay to have these great facilities, and they organised the fundraising for many of them. They went through government and worked hard to get these fine facilities. However, the facilities are no good if we do not have the necessary people or equipment. The facilities are good, but some of them do not have the right equipment. Also, the facilities are no good if we do not have the services - especially the specialist services about which we talked yesterday - to ensure that they do what they are meant to do.

I have mentioned agency nurses. Yesterday we talked about the closure of the rural surgical services. I want to dwell on that for a moment because during yesterday's debate and today's question time the Minister for Health repeatedly mentioned regional towns, especially coastal towns such as Bunbury and Geraldton. We cannot properly service all of country Western Australia from these regional coastal towns. There must be enough money for these health services to service the immediate and ongoing needs of people in their local regions. That is the reality of life in the country. What the Government is trying to do in the regional centres is fine, but it will not operate for some time because the staff and funding are not available. These health facilities need sufficient funding to enable them to deliver adequate services. As I have said many times, country people are not looking for extra services - they want adequate services.

There is also the issue of equity. Western Australia is a vast State and that fact, along with the issue of equity, is often mentioned in other debates. The extent to which services have been affected varies. In some areas the health services may have reasonable budgets. However, from what I have been told by people involved in these health services, they do not have what they need. It may look good on paper, but when we examine the net benefit, after taking out the extra costs of wages, salaries, superannuation and the like, it is clear that these services are worse off than they were previously. This is a real concern because no matter where people live, health is a big issue.

MR KUCERA (Yokine - Minister for Health) [3.13 pm]: This debate goes around and around. As I explained at the estimates committee hearings, hospitals are funded for their activities. It is as simple as that. They have all been funded for their activities this year, and rural and regional Western Australia has been given a high priority in this record \$2.3 billion state health budget. This is Western Australia's largest state health budget, and 25 per cent of the state budget is now going into health. The increase to rural and regional Western Australia is \$29.5 million of recurrent funding, which is an across-the-board increase of 8.3 per cent on last year's figure. Over the past three years the allocations to rural health services have increased by 29.2 per cent. The annual increases have been 11.6 per cent, 6.1 per cent and last year's increase was 3.2 per cent. This year's increase is 8.3 per cent. Importantly, the increase for the current year is larger than the average increase for the previous three years.

When the Treasurer delivered the budget he announced that health finances were growing at unsustainable rates and major reforms were vital to ensure that taxpayers' dollars were used in the most effective way to achieve the outcomes expected by the community. The Department of Health is currently working with all health services to

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develop strategies to ensure that a balanced budget is achieved. Today the member for Murdoch mentioned a sensible, managed program that had been put forward by a manager who was expected to manage within the budget with which he was presented. The fundamental difference between this and the previous Government is that this is a financially responsible Government that does not allow people in the community to run the budget. People in the community cannot run the budget, and everybody knows that. They are given a budget and they must work within it. I have met John Edwards on a number of occasions. He is a very passionate person, and he is passionate about his community. He is more than entitled to have his views on these matters. However, as I said to him when I met him in Busselton, the bottom line is the bottom line, and he is expected to work within the budget with which he was presented.

Mr Board interjected.

Mr KUCERA: I remind the member for Murdoch that we are not at a public rally; we are in the House. We are not at a union meeting, something that the member for Murdoch has suddenly taken to attending.

Mr Board: I was there to support the doctors.

Mr KUCERA: The member for Murdoch was there to support the doctors' union that has done a lot for his colleague. After yesterday's revelations I wonder whether the member for Murdoch should still be talking to his colleague from Darling Range.

The Department of Health is currently working on all health services, and in addition to the recurrent increase identified above, \$103 million is being allocated for capital works, including the specific amount of \$15.4 million.

I refer to the health service in Geraldton, which was mentioned by you, Mr Acting Speaker (Mr Edwards), as the member for Greenough. This year Geraldton received a 20.2 per cent increase in funding, and a \$35 million commitment to a new hospital. If you, sir, can turn that into a bad news story, I will be concerned. We are absolutely supporting the Geraldton community. I hope that when you, Mr Acting Speaker, return to your seat you will take the time and trouble to read the letter that I tabled yesterday, which deals with the types of pressures that are being placed on the services in Geraldton. If the Government were able to institute the reforms that are needed within the clinical processes outlined in this letter, with the cost drivers in rural services, these hospitals would be able to come in on budget, and, in fact, make a surplus. We need to do that, instead of sitting here and constantly carping and denigrating the health system in this State.

I will list the budget increases for the rural health services: Avon is up 20 per cent to \$12.8 million; Bunbury is up 4.9 per cent to \$37 million; central great southern is up 18.2 per cent to \$9.6 million; central wheatbelt is up 13.7 per cent to \$7.6 million - last year the figure was three per cent; east Pilbara is up 1.3 per cent to \$27.2 million; Gascoyne is up 11 per cent to \$16.1 million; Geraldton is up 20.6 per cent to \$27 million; Harvey-Yarloop is up 11.4 per cent to \$4.1 million; Kimberley is up 5.8 per cent to \$53.3 million; lower great southern is up 11.6 per cent to \$32.8 million; mid west is up 11.8 per cent after allowing for transfers to Geraldton; northern goldfields is up 9.3 per cent to \$37.3 million; and Peel is up 56.9 per cent to \$8.6 million.

Mr Board interjected.

Mr KUCERA: Obviously the member for Murdoch had a drive in the country - he should get out there as often as I do.

I will continue with the budgets: south east coastal is up 9.2 per cent to \$11.1 million; upper great southern is up seven per cent to \$16.2 million; and Vasse Leeuwin is up 8.6 per cent to \$16.9 million - included in that was the additional money for superannuation -

Mr Masters interjected.

Mr KUCERA: We have already had that joke in this House; that is enough of that.

Health funding in the Murray-Wellington electorate has increased by 2.8 per cent to \$8 million. The member for Murdoch was at the estimates hearings. What did the member for Murray-Wellington say about the administration of hospitals in his electorate? He said that three people were doing the same job. Surely they can cut administration costs. Today the member for Murdoch read out the kinds of things that need to be done to bring hospitals in on budget. I will put something on the record: I have no truck with the members of hospital boards in this State. They do some great work and there are some magnificent volunteers on those boards. I have made an effort to get out to every part of this State in the eight months I have been in office. I am out there talking and listening to people. I am also asking them to manage responsibly and ensure that their budgets come in on time. It is interesting: the polls must be running well for Wilson Tuckey in this general election week; or

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maybe he is in trouble, because out of the swamp comes the member for Murdoch again talking about some issues that perhaps he thinks will get poor old Iron Bar over the line. Is he looking over his shoulder? Maybe Bomber Beazley is catching up with him.

We talked about individual issues with hospitals. Some \$35 million was allocated for a brand new hospital at Geraldton.

Mr Board: We put that in.

Mr Kucera: The member for Murdoch did not put that up; he is not in government. The Labor Government did that. An amount of \$11 million has been allocated for the start of a new development at Port Hedland; \$7.7 million for the completion of works and the redevelopment of three major hospitals in the wheatbelt; \$3.9 million for Moora District Hospital; \$1.4 million to develop the Goomalling District Hospital, \$2.4 million to redevelop Narrogin Hospital; \$350 000 for rooming-in at Narrogin Regional Hospital and so on. The Government has allocated \$15.4 million in capital works for new and existing projects in the country this year. The current financial year's capital works program includes 38 works in progress: \$9.5 million to upgrade hospital buildings and equipment, \$5 million for new accommodation for doctors and nurses; upgrading of rural surgical theatres and \$13 million to upgrade the communications infrastructure. Yet members opposite say we are letting the country down. Out of \$30 million of recurrent funding this year, \$6 million goes to the country. For the first time we have a Treasurer who has delivered an accountable and sensible budget, and I intend to keep to it. All I am asking is that hospitals and boards in this State start to work to a sensible budget. The boards run their hospitals; they do not run the state budget.

Mr Board: You have a new calculator - the Labor calculator on which two plus two equals eight.

Mr KUCERA: Let us talk about the Labor calculator. On Saturday the people of this country will calculate to put in power a Labor Government led by Kim Beazley. I will talk about what the Australian Labor Party wants to do for the people of this State. Labor's health priorities include an emergency department at Rockingham-Kwinana District Hospital worth \$7.5 million - that is desperately needed; and an emergency department at Swan District Hospital worth \$1.5 million. These are the things that Kim Beazley is specifically focused on in this State. Further priorities are hospital equipment for rural hospitals, \$5 million; cancer treatment re-equipment, \$6 million; and \$12 million to reduce our waiting lists for elective surgery. They are the waiting lists that the coalition Government left me with. Bentley Hospital would receive \$4 million for a 30-bed convalescent care unit. Why did Jenny Macklin say that Western Australia desperately needs that 30-bed unit at Bentley? It was because she looked across the river at those wonderful houses that now occupy the site that the Mt Henry Nursing Home used to occupy, and where our people were looked after. Jenny Macklin made that promise because the coalition Government did not put back one rehabilitative care bed. Convalescent care will receive \$8 million; maternity care, \$3.8 million; palliative care, \$3 million; and mental health will receive \$6 million. Aged care - does the Opposition want to talk about aged care and the pressures that have been brought to bear on country hospitals right across this State? Western Australia will also receive \$9 million extra for public dental health services as part of Labor's new national dental health program.

Mr Johnson: That is all hypothetical.

Mr KUCERA: It is as hypothetical as the former Government's promise to rebuild Denmark District Hospital. I went through the forward estimates to see what was there for Denmark hospital. There was absolutely zilch for that hospital - not a penny.

The member for Wagin will be interested in this: Kim Beazley has said categorically that Western Australia will also share in the \$43 million allocated for additional postgraduate nursing training places and higher education contribution scheme scholarships for nurses working in areas of need. At the end of the day a true alliance between a federal Beazley Government and a Gallop State Government will deliver the health services this State needs.

I do not resile from the fact that I have asked that this year the boards and management of the hospitals in this State, their general managers and their staff, take on board the twin pillars of clinical accountability and fiscal accountability. We have heard enough about fiscal accountability in the health system in the past week. This Government will ensure that we have an open, transparent, accountable and well managed health system in this State.

MR McGOWAN (Rockingham - Parliamentary Secretary) [3.27 pm]: I will make a few remarks on this motion. The strategy that the Opposition has adopted this week is amazing. Yesterday during private members' business the Opposition moved a motion on law and order and policing in Western Australia. The Opposition

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moved that motion in the same week that the Government introduced four new Bills, which are the most aggressive pieces of legislation to address serious law and order issues -

Mr Barron-Sullivan: Are you speaking on the motion because you are the next Minister for Health?

Mr McGOWAN: Shut up! I am speaking on the motion.

This week the Government introduced four of the most serious pieces of legislation on law and order in the history of this State, so it strikes me as a very unusual strategy for the Opposition to bring in a law and order motion. Today the Opposition's motion relates to health, when the evidence given to the Public Accounts Committee on what the previous Government did is all over the front page of *The West Australian*.

Mr Day: Will you elaborate?

Mr McGOWAN: There is more to come on that.

People can draw their own conclusions from the evidence on the activities of the last Government in relation to health. However, in my opinion, that evidence is very serious and damaging. I would not have come in here addressing the issue of health with the coalition's record in health that came out yesterday.

Mr Day: What evidence are you referring to?

Mr McGOWAN: I do not hold the member for Darling Range in low regard; he comes out of this matter with some credit, although his colleagues do not. The Opposition has introduced a motion on health care even though the Minister for Health has just outlined the increases in health spending, the vast bulk of which will be spent in rural Western Australia.

The member for Greenough criticised the Government's handling of the health issue at the same time that it is building a \$35 million hospital to service his community. What is the Opposition's strategy? The Opposition introduced a motion on law and order, yet this Government has introduced the most comprehensive legislation on law and order. A day after the most damning evidence of the former Government's behaviour was presented to this House, the Opposition has introduced a motion on health issues in rural Western Australia, yet we are addressing those issues.

I will address the origin of these motions and ideas from the Opposition. It strikes me that, in many ways, the Opposition is behaving as the mouthpiece for the Australian Medical Association for the campaign it is running in the lead-up to the federal election. The AMA is running a campaign against the State Government. As part of that campaign it is trying to target the federal Government. That is an unusual strategy, considering that the Labor Party is trying to replace the current federal Government and increase spending on health. In many ways, the Opposition is acting as the mouthpiece of the AMA on these matters.

Several members interjected.

Mr McGOWAN: I am glad the member raised that issue, because they do.

The ACTING SPEAKER (Mrs Hodson-Thomas) : Order! There are far too many conversations across the Chamber.

Mr McGOWAN: I will reveal to Parliament some of the activities in which the Opposition's fellow travellers are engaged with regard to health issues. One of those fellow travellers is Dr Keith Woollard. He is running as a candidate in my area, which he is entitled to do.

Several members interjected.

The ACTING SPEAKER: Order!

Mr McGOWAN: Dr Woollard is a candidate in the electorate of Brand, which overlaps into rural Western Australia, according to the definition under the electoral boundaries. He is giving his preferences to the Liberal Party. Barry Thornton runs his media campaign and he also runs the media campaign for the AMA. Dr Wooldridge's former chief of staff is also involved with the running of Dr Woollard's campaign. I am putting this on the record because it is disgraceful and it is a discredit to those people associated with the campaign.

The ACTING SPEAKER: I remind the member for Rockingham that we are dealing with a matter of public interest that refers to rural health services. I ask the member to return to that motion.

Mr McGOWAN: I am addressing a range of health issues, one of which is the relationship between rural health in my community and the broader community, with which I am involved, and the federal election. All members

Speaker; Mr Mike Board; Mr Jeremy Edwards; Mr Bernie Masters; Mr Terry Waldron; Mr Kucera; Mr Mark McGowan; Acting Speaker; Dr Janet Woollard; Mr Tony Dean; Mr Kucera

are aware that various federal election issues have been raised in this House in recent days. Dr Woollard is using his position as a doctor - his letterheads indicate that he is a cardiologist - to write to his former heart patients inviting them to work for him on the election campaign. He is also calling former elderly patients of his and asking them to work on his campaign. Some of those people were his patients as long as 20 years ago. He is upsetting those people greatly. About a dozen of his former patients have told me that they may well require medical treatment in the future, and that that type of questioning is causing them distress. Whether they work for Dr Woollard again raises the question of -

The ACTING SPEAKER: The member for Rockingham has drawn a long bow in this address thus far, and I remind him that he must address the motion before the House.

Mr McGOWAN: The point I make to the Opposition is that it is wrong to introduce motions that do the work of the AMA.

Mr Board: Is the member saying that as the shadow health spokesman, I cannot raise country health issues at a critical time when board members are resigning? The member for Rockingham is trying to politicise this issue. The Government has chosen to hold a Public Accounts Committee inquiry into something prior to the federal election. The health minister says that he does not want to politicise the issue, yet, on the other hand, he politicises everything; and that is a disgrace. It has never been politicised before.

The ACTING SPEAKER: Order!

Mr McGOWAN: The Opposition is doing the work of external bodies that appear to be running a political campaign on the issue of health in the lead-up to the federal election. In doing that, members opposite bring no credit to themselves. The member for Murdoch should examine closely who his friends are.

The Minister for Health outlined substantial increases in the health budget. He also outlined why we must bring that expenditure under control. The Treasurer said that expenditure on health care is continuing to increase as a proportion of the state budget, and that measures must be put in place to limit that expenditure. The Government is attempting to keep the expenditure on doctors' salaries under control so that it can spend more money on other services, including rural health services. Salaries are a big issue for doctors. If doctors were paid the types of salaries that they have requested, less money would be available to spend on health care in country Western Australia.

Mr Day: Will a rural member of the Labor Party have the guts to speak on this motion?

Mr McGOWAN: The member for Darling Range is not a rural member.

Mr Johnson: We thought the member for Rockingham should have been a minister, but we take it back.

Mr Kucera: We thought you were going to become a leader.

Mr McGOWAN: I recall the push for the member for Hillarys to become the leader of the Liberal Party. When it had a choice between the member for Hillarys and the member for Ningaloo, it decided to push for the member for Ningaloo, who nearly beat the current Leader of the Opposition for the position.

Members opposite can twist and turn things as much as they like, but the figures are here; expenditure on health is increasing. The simple fact of the matter is that every request for funding by every community cannot be met. It is not possible in this budgetary climate - in fact, in any budgetary climate - to meet every request for every hospital throughout Western Australia. We have increased expenditure and we are targeting it around the State. We are trying to save money in relation to the industrial campaign of the Australian Medical Association and put it back into health expenditure and the communities that we represent as well as those that members opposite represent.

DR WOOLLARD (Alfred Cove) [3.40 pm]: I will respond to a few comments that have been made in this debate, particularly about the Rockingham-Kwinana District Hospital. The Minister for Health told us what wonderful things a federal Labor Government will do for that hospital and for other areas if it is elected this Saturday. The Minister for Health was given the Dunn report in July this year, which was a review of the Rockingham-Kwinana District Hospital emergency department. The review stated that the facilities at Rockingham hospital were the worst in Western Australia, if not in Australia.

I attended the estimates hearing on health. How much has this State Government allocated to the Rockingham hospital? I think it was possibly \$50 000, but in association with two other hospitals. That will not pay for bedpans for the hospital. It is all very well to state what a federal Labor Government will do for health if it gets

Speaker; Mr Mike Board; Mr Jeremy Edwards; Mr Bernie Masters; Mr Terry Waldron; Mr Kucera; Mr Mark McGowan; Acting Speaker; Dr Janet Woollard; Mr Tony Dean; Mr Kucera

across the line on Saturday; however, what about the responsibilities of the State Government? What will it do for Rockingham-Kwinana District Hospital? Why is it that Fremantle Hospital, which is in my electorate -

Point of Order

Mr DEAN: I refer to the ruling of the previous Acting Speaker when she directed the member for Rockingham towards rural issues rather than city issues. I seek your ruling on this Mr Acting Speaker (Mr Edwards).

The ACTING SPEAKER (Mr Edwards): I will not take the point of order, but I remind the member for Alfred Cove to keep to the subject of the motion.

Debate Resumed

Dr WOOLLARD: Please let me know whether I am out of order, Mr Acting Speaker, but the comment was made by the Minister for Health in this debate, and I believe I am able to respond to any statements that he has made. He made statements about what a federal Labor Government would do for health. I ask him what the State Government will do for health in Rockingham-Kwinana. Why was it that just last week Fremantle Hospital, which is in my electorate, was short-changed by \$25 million? When the Government came to power, it said that there would be equal funding for the teaching hospitals.

Point of Order

Mr KUCERA: This debate is about rural health, not about Fremantle Hospital.

The ACTING SPEAKER: I remind the member for Alfred Cove that the motion is about rural matters and rural hospitals. I understand that the previous Acting Speaker gave the member for Rockingham some latitude, so I am prepared to give the member for Alfred Cove some latitude in her remarks.

Debate Resumed

Dr WOOLLARD: I think I have -

Mr Carpenter: Fremantle Hospital is not in your electorate.

The ACTING SPEAKER: Order, members! The member for Alfred Cove has the floor.

Dr WOOLLARD: I will take that interjection, because, as the Minister for Sport and Recreation has just stated, Fremantle Hospital is not in my electorate. However, Fremantle Hospital services my electorate. It is the hospital to which I have taken my children when they have been sick. I have sat by their bedside at Fremantle Hospital, so I will support Fremantle Hospital.

Returning to the debate, I will be very interested in the response of the Minister for Health on the commitments that he has stated will be honoured if the federal Labor Party wins on Saturday. What commitments will the State Government give if the federal Labor Party does not win on Saturday?

Question put and a division taken with the following result -

Extract from *Hansard*

[ASSEMBLY - Thursday, 8 November 2001]

p5322c-5331a

Speaker; Mr Mike Board; Mr Jeremy Edwards; Mr Bernie Masters; Mr Terry Waldron; Mr Kucera; Mr Mark McGowan; Acting Speaker; Dr Janet Woollard; Mr Tony Dean; Mr Kucera

Ayes (16)

Mr Barnett	Mr Day	Mr McNee	Mr Waldron
Mr Barron-Sullivan	Mrs Edwardes	Mr Marshall	Ms Sue Walker
Mr Board	Mrs Hodson-Thomas	Mr Masters	Dr Woollard
Dr Constable	Mr Johnson	Mr Pandal	Mr Bradshaw (<i>Teller</i>)

Noes (27)

Mr Andrews	Ms Guise	Ms McHale	Ms Radisich
Mr Brown	Mr Hill	Mr McRae	Mr Ripper
Mr Carpenter	Mr Hyde	Mr Marlborough	Mrs Roberts
Mr Dean	Mr Kobelke	Ms Martin	Mr Templeman
Mr D'Orazio	Mr Kucera	Mr Murray	Mr Whitely
Dr Edwards	Mr Logan	Mr O'Gorman	Ms Quirk (<i>Teller</i>)
Dr Gallop	Mr McGowan	Mr Quigley	

Pairs

Mr Trenorden	Mr Bowler
Mr Ainsworth	Mr McGinty

Question thus negatived.