

ROYALTIES FOR REGIONS — REGIONAL HEALTH SERVICES

593. Ms M.J. DAVIES to the Minister for Regional Development:

Can the minister please provide an update on how the Liberal–National government’s royalties for regions program is supporting regional health services?

Mr B.J. GRYLLS replied:

I thank the member for Central Wheatbelt for the question and for her excellent leadership with the Minister for Health in delivering the Southern Inland Health Initiative, which is a major change to the way we deliver health and is certainly improving health services. In recent weeks the opposition has made a lot of commentary about the Liberal–National government’s management of the state, and I think it is important to put on the record exactly what has happened over the past five years in health, particularly in regional Western Australia. No-one can drive around metropolitan Perth without seeing the massive investment in health infrastructure and health service delivery undertaken by the Minister for Health and the Liberal–National government. In regional Western Australia it is just the same. Back in 2008, Albany Hospital was promised at election after election by the member for Albany when he was in government. The Labor Party was never even close to delivering that hospital. I am absolutely sure that if the Labor Party had taken the Treasury bench in 2008, that project in Albany would not have happened. The same applies in Kalgoorlie and Esperance. Again, there were plenty of promises and plenty of talk but no action on pouring some concrete and getting underway to deliver the upgrades that are vitally necessary for those communities.

Mr F.M. Logan: Kind of like Geraldton.

Mr B.J. GRYLLS: Geraldton is one hospital that the opposition did, but it built it too small. Three or four years after doing it, it is already too small. That is another classic case of the opposition’s ineptitude at managing regional health.

Since the Liberal–National government came to power, the \$161 million Albany Hospital was opened in May 2013. As well as that, there are additional mental health beds, improved maternity services, improved day surgery services and a high-dependency unit at the expanded emergency department. The major expansion of the Kalgoorlie health campus is well down the track. In November 2012, the emergency department, the high-dependency unit and the medical imaging department opened. One of my favourite moments in politics was when the local traditional owner did the welcome to country ceremony and he stood in front of the assembled community and said that he felt like he was in Perth when he walked into Kalgoorlie Hospital. That was exactly the intention of the Liberal–National government—to try to replicate in major regional centres the type of service delivery that is delivered in the metropolitan area. We are doing that now in Kalgoorlie. We are doing that now in Albany.

Under the half a billion dollar Southern Inland Health Initiative, regional hospitals in Collie, Katanning, Narrogin, Manjimup, Merredin and Northam are being upgraded, and primary health initiatives such as diabetes educators and mental health programs are being implemented. We have focused on general practitioners. Everyone will remember the massive shortage of GPs across regional Western Australia. People could not get an appointment with their local doctor. Under the Southern Inland Health Initiative, 27 new GPs are operating in regional Western Australia, reducing the waiting time to see a GP and making sure that people can access primary health. We have addressed aged care and community needs with the Albany Community Hospice and the EON Foundation’s Thriving Communities program. We have put funds into the Royal Flying Doctor Service. Who can ever forget Jim McGinty calling the Royal Flying Doctor Service an interest group? Hon Jim McGinty is retired, so we do not have to talk about him, but where was the condemnation by members opposite who sat in the chamber while their then Minister for Health called the Flying Doctor an interest group? There was no condemnation; they simply said, “Bad luck, Flying Doctor; you’re just an interest group.” It was the Liberal–National government that put in millions and millions of dollars, with five new aeroplanes and a narrower aeromedical jet, and funded the doctors and nurses to keep the Flying Doctor and to reduce its response times in regional Western Australia.

The \$160 million North West Health Initiative was announced in this year’s budget. It will focus on Newman, Roebourne, Onslow and Tom Price to make sure that health services in those towns in the inland Pilbara region are upgraded. It is important to understand exactly what we found when we came to government. Christine O’Farrell, an important health bureaucrat in Western Australia, was the boss of the WA Country Health Service. When she retired, she was quoted in *The West Australian* on 26 March—I do not have the year, but I will put it in *Hansard* later—as saying that some parts of rural Western Australia had been left with “blatantly bloody unsafe” health care. The boss of country health was saying that the health system in regional Western Australia was blatantly bloody unsafe. That is why the Minister for Health and the Liberal–National government got on with the important job of rebuilding regional health and service delivery through doctors, telehealth and new

innovations in health delivery. The government understands that blatantly bloody unsafe health care in regional Western Australia is unacceptable. To give an idea of the Labor Party's response to the comment that health care in regional Western Australia was "blatantly bloody unsafe", Hon Jim McGinty said that was a rather intemperate outburst. The former Labor government treated country people who needed to access health services with absolute disdain. That is why the Liberal–National government has made an unprecedented investment in regional health and that is what has made a big difference to regional development.