

Health Legislation Amendment Bill (no. 2) 2025

Sandy Bolton, MP for Noosa

Thank you, Mr Speaker.

This Bill originally consisted of some fairly non contentious amendments that went through the appropriate processes.

However, at the last minute, a contentious amendment has been dropped in, that has not gone through the proper processes.

First, to the noncontentious aspects. There are changes so that prescribed medical practitioners are required to notify the Commonwealth of 'notifiable occupational respiratory diseases'. This as part of the transition to a National Occupational Respiratory Disease Registry and will also improve detection and monitoring of mosquitoes for the deadly Japanese Encephalitis Virus by allowing public health officials, in addition to entering public and private places, to also place testing equipment through catching adult mosquitos with light boxes.

Next, the bulk of the bill deals with changes to the Pharmacy Ownership Act 2024 transferring that responsibility from Queensland Health.

That Act is still in the process of replacing the previous pharmacy control legislation and during that time several problems were identified which require the fixes contained in this Bill.

There were five submissions, all supportive, with the committee identifying a couple of key issues.

The first relates to clarifying what businesses are “pharmacies” and which are not, and thus who is regulated.

Under the current Act a pharmacy delivers ‘core pharmacy services’, which is the compounding of medicines for sale, or the dispensing of medicines, by or under the supervision of a practising pharmacist.

Stakeholders raised concerns that this definition could be too narrow, hence the bill expands the definition to ensure it covers the sale of non-prescription medicines.

The Pharmacy Guild supported these changes, though argued it should be broader and include other services such as the provision of clinical advice. Pharmaceutical Society of Australia opposed expanding as clinical advice can be provided in a range of settings, for example aged care homes, that are already regulated under other legislation. The Department advised that it had considered this issue on a number of occasions however it is outside the scope of the bill. Does this mean it will be addressed in a further Bill?

Moving on this bill also makes an amendment so that the definition of ‘compound’ is the one used in a separate piece of legislation - schedule 22 of the Medicines Regulations under the Medicines and Poisons Act.

This was raised as a potential Henry VIII clause because it allows the executive government to directly amend legislation, including the Medicines Regulations themselves, which is concerning. However, having consistency of definition across regulations is also important and the committee concluded on balance it is justified.

Speaker, pharmacy regulations and pharmacies play a vital role in our primary health care system and communities. The legislation controls who may own or hold an interest in a pharmacy business and retain the limits on the number of, and stop pharmacies being taken over by supermarkets as they have in the United States. The Queensland Community Pharmacy Program goes back to 2020 and the report “Unleashing the potential: an open and equitable health system”, drawing on lessons from the beginning of the pandemic on needed improvements to health care.

This led to a 2023 pilot program which finished in June this year and went permanent in July, enabling participating pharmacists to undertake prescribing as part of a chronic disease management program, such as for heart disease, high blood pressure, and asthma. In May our committee visited one in north Queensland to see the benefits from the pilot, including easing the burden on hospitals and GP clinics.

Now to the last-minute amendment – the ban on the testing of pills.

Most would agree with the Deputy Premier when he said as reported in the Courier Mail “There is no safe illicit substance. That’s why they’re illegal”.

However, we also have many legal substances that contribute to the deaths of Queenslanders including alcohol and prescribed opioids, and if this amendment had gone through the appropriate process through our committee, it would probably show they are not safe either. However we work to minimise risks and grab any opportunity to educate or connect users with programs to reduce use or an addiction.

Pill testing is an avenue to minimise risks, connect with users, and opportunity to save lives

To ban this testing without undergoing through an appropriate process with full community consultation and using credible evidence, is disappointing. As MP’s it is not our role to take forward our own personal views, it is to represent the voices of our community. In the 2025 Noosa MP Annual Survey, 65% of respondents supported pill testing, and avoiding a proper consultation process is ignoring both those for, and against.

I had hoped that the start of the trend of our new government of disregarding evidence, bypassing appropriate processes and being selective on what is urgent, was just part of adjusting to being in government. That they would learn from the errors of the previous government, who did similar with the Electoral

Amendment Bill of 2020 which went from a bill I fully supported, to one that I opposed due to last minute amendments.

How can any of us forget the ramifications of those, including enormous signs at polling booths from those ‘third parties’ associated with both sides of Chamber, drowning out everything else? With South Australia now banning many of these, as well political donations, may QLD follow suit.

This would demonstrate to Queenslanders genuine attempts for transparency, accountability and evidence-based decision making.

Thank you to my fellow HEIC members and our Secretariat for their work, and to all of our health care workers including pharmacists for the care you provide every day to our communities.

It is deeply appreciated and I am sorry that this Bill which had so much good, has been overshadowed by inappropriateness.

And I cannot support a Bill that contravenes everything that is needed in Queensland. Effective processes.

Thank you.

(1350 words)

Community-based health is valuable and can be seen in our Primary Health Care Networks, and local hospitals who like our Noosa Private Hospital services our community on public contracts to provide essential access, especially for our vulnerable and disadvantaged residents who lack transport or funds (it is now a \$300 return in a cab) to get to the closest regional hospital. With additional funding provided for health services in the 2025/26 budget, it is important that Sunshine Coast Hospital and Health Service ensure public services through Noosa Hospital continue to grow, as well that the emergency department expansion moves at a quicker rate than what we have seen.