



QUEENSLAND PARLIAMENT **COMMITTEES**

2025-26 Budget Estimates **Volume of Additional Information**

Health, Environment and Innovation Committee

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**Pre-hearing Questions on notice and
Responses - *Minister for Health and
Ambulance Services***

Pre-hearing Question on Notice

No. 1

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

What are the key challenges facing the health budget in 2025-26?

ANSWER

The Queensland Government is delivering a record investment in health of \$33.1 billion, a 10.2 per cent operating increase from last year.

The key challenge for the Crisafulli Government is restoring the health budget to ensure that Queensland's Hospital and Health Services and Queensland Ambulance Service can deliver essential services, addressing the unfunded announcements of the former government while meeting ongoing increases in demand and costs.

Demand for hospital and health services continues to grow, reflecting factors such as population growth and ageing, increased rates of chronic disease and new technologies.

In addition, service gaps in areas of Commonwealth responsibility such as primary health care, aged care and the National Disability Insurance Scheme place additional demands on the Queensland health budget.

This budget includes funding for the delivery of health services and health infrastructure that the previous Labor Government committed to but did not fund. Examples of this includes the delivery of expanded hospital and public health services at Mater Hospital Springfield, staff entitlements, legislated midwife to patient ratios, new hospitals at Bundaberg, Coomera and Toowoomba, the new Queensland Cancer Centre and other major hospital expansions previously announced by the former government.

In response to the independent review of the Queensland Health capital program and the Queensland Audit Office Health 2024 report, the government has allocated \$3.159 billion over five years from 2024-25 to the Timely Investment Infrastructure Maintenance program, including new funding of \$2.647 billion to maintain current infrastructure and assets, and deliver on unfunded commitments made by the former government under the previous Sustaining Capital Program.

This funding supports stability for the health system and addresses significant funding shortfalls.

Pre-hearing Question on Notice

No. 2

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

What previously unfunded commitments have been funded in the 2025-26 Budget?

ANSWER

I am delighted as Minister for Health and Ambulance Services to welcome a Budget that puts us on track to deliver world class healthcare for every Queensland – no matter where they live.

At \$33.1 billion in operating funding in 2025-26 alone, this is the single greatest investment in healthcare in Queensland's history. It's a full 10.2 per cent higher than last year's health operating budget.

The Crisafulli Government is restoring the health budget to ensure that Queensland's Hospital and Health Services and the Queensland Ambulance Service can deliver essential services.

\$1.752 billion from 2025-26 to 2028-29 has been provided to stabilise the elective surgery wait list, delivering more elective surgeries when and where Queenslanders need them. This funding will provide more than 30,000 surgeries in 2025-26, utilising the public and private hospital sectors.

\$638 million has been provided to operationalise 186 public hospital beds through a previously committed, but unfunded partnership with Mater Hospital Springfield. Services will include an Emergency Department and an intensive care unit and will ensure ongoing capacity in the growing Western Metropolitan Corridor.

\$581.4 million from 2025-26 to 2026-27 is being invested to restore access to bed capacity in partnership with the private sector. This investment will provide continued access to 515 beds over the next two years, to maintain the flow of patients through public hospitals and reduce ambulance ramping.

These beds help address the former government's inability deliver long term investment in health infrastructure across the state.

As part of a record additional \$1 billion uplift to the Queensland Ambulance Service (QAS):

- \$812.9 million over four years to sustainably meet the growing and evolving demand of pre-hospital health care services.
- \$250 million over four years to provide the first multi-year uplift to the QAS base capital program since 2008-09, empowering the ambulance service to appropriately commission essential infrastructure and equipment.

- This funding will also support the government's commitment to increase the number of paramedics.

\$638.4 million over four years will be provided for significantly expanded hospital and public health services at Mater Hospital Springfield. This will deliver on the signed contract that did not have a funding source and opens up critical capacity to meet demand for health services in the western metropolitan corridor. The Mater Hospital Springfield will provide 186 public beds, including an Emergency Department, Intensive Care and maternity services, with services expected to commence in 2026.

The former government's complacency on vape and illicit tobacco allowed the proliferation of these products across Queensland. In addition to nation-leading fines and tough new legislation, the Crisafulli Government is allocating increased funding of \$12.7 million over two years from 2025-26 in this budget to support implementation of new smoking and vaping regulations. This funding will improve capacity and capability within Queensland's enforcement workforce allowing an increase in the pace of action on illicit smoking and vaping products and expedite seizure of products, and closure, or prosecution of non-compliant businesses.

The Crisafulli Government is committed to restoring the health budget and appropriately funding the wages and salaries of Queensland Health's valued frontline staff.

Increased funding of \$192 million over four years has been provided for staff entitlements, including the Workforce Attraction Incentive Scheme, Reproductive Health Leave, and employer superannuation contributions on parental leave. These measures were announced by the former Government but left unfunded.

An additional \$48.7 million is being provided for legislated but previously unfunded midwife-to-patient ratios.

The 2025-26 Budget includes rescuing the State's hospitals through the \$18.5 billion Hospital Rescue Plan with an additional \$8.94 billion to address the cost overruns and program mismanagement of the former government.

Unfunded capital projects include:

- \$5.775 billion new funding was committed to enable the delivery of Major Hospital Infrastructure including new hospitals at Bundaberg, Coomera and Toowoomba, the new Queensland Cancer Centre, and other major hospital expansions previously announced across Queensland.
- In response to the independent review of the Queensland Health capital program and the Queensland Audit Office Health 2024 report, the government has allocated \$3.159 billion over five years from 2024-25 to the Timely Investment Infrastructure Maintenance program, including new funding of \$2.647 billion to maintain current infrastructure and assets. The government also uplifted the ongoing base allocation by \$200 million annually beyond five years.

This will deliver on unfunded commitments made by the former government under the previous Sustaining Capital Program. The current annual base funding was set in 2010 and has remained largely unchanged despite growth in the Queensland Health asset base by 284 per cent (to 2024). The Crisafulli Government is providing a meaningful and unprecedented uplift to the yearly allocation to ensure these assets are appropriately maintained.

- \$355.2 million new funding was provided over three years for the Building Rural and Remote Health Program to enhance ageing rural and regional health facilities and staff accommodation, at sites including Tara, Millmerran, Pormpuraaw, Collinsville, Longreach, and Winton.
- \$146 million new funding was provided across three years to continue the Accelerated Infrastructure Delivery Program including the Ripley Satellite Health Centre Sub-Acute Expansion, associated car park, and the Gold Coast University Hospital Sub-Acute Expansion.

Pre-hearing Question on Notice

No. 3

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

What is the current elective surgery waitlist and how does this compare to previous years?

ANSWER

Under Labor's health crisis, the elective surgery waitlist almost doubled from 35,400 Queenslanders in July 2015 to over 66,000 in December last year.

As of May 2025, that number had already fallen to 61,232. This is 5,400 fewer Queenslanders waiting for surgery compared to the all-time high reached in December last year. This is the largest decrease in a six-month period since July 2015.

The Crisafulli Government's \$100 million Surgery Connect Surge was announced in February and has already over-delivered on its target, with 12,300 Queenslanders accessing the program.

Given the success of the Surgery Connect Surge, the Crisafulli Government's Budget is delivering a record \$1.75 billion over four years for additional surgeries. This will help to deliver 30,000 elective surgeries in this financial year alone.

Pre-hearing Question on Notice

No. 4

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

How many long-stay patients are currently in Queensland hospitals and how does this compare to the past 5 years?

ANSWER

Long-Stay patients are patients who are clinically fit for discharge but remain in hospital.

As at 26 May 2025, there were 1,102 long-stay patients in Queensland Health facilities, consisting of 288 younger, and 814 older, patients. Approximately 77 per cent of long-stay older patients are waiting for residential aged care. Approximately 58 per cent of long-stay younger patients are waiting for appropriate National Disability Insurance Scheme supports.

These supports are unavailable to these patients in a timely manner due to Commonwealth Government underinvestment and inefficient management of these supports. This is evidenced by the significant rise in long-stay patients in Queensland Health facilities since May 2022.

The table below shows the number of long-stay patients, as at the long-stay patient census dates, since 2020. The long-stay patient census has been conducted quarterly from 2021 and was conducted monthly in 2020 in response to COVID-19.

Year	Date	Total Long-Stay Patients
2020	25-Mar-20	487
	29-Apr-20	491
	27-May-20	476
	24-Jun-20	495
	29-Jul-20	477
	26-Aug-20	453
	30-Sep-20	467
	28-Oct-20	421
	25-Nov-20	442
2021	24-Feb-21	575
	26-May-21	549
	25-Aug-21	563
	24-Nov-21	507
2022	23-Feb-22	512
	25-May-22	553
	31-Aug-22	630

Year	Date	Total Long-Stay Patients
	30-Nov-22	706
2023	22-Feb-23	741
	31-May-23	780
	30-Aug-23	877
	29-Nov-23	863
2024	28-Feb-24	964
	27-May-24	1,013
	26-Aug-24	1,076
	25-Nov-24	910
2025	24-Feb-25	1,095
	26-May-25	1,102

Pre-hearing Question on Notice

No. 5

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

What are the main contributors to the rise in long-stay patients in Queensland Hospitals?

ANSWER

Long-Stay patients are patients who are clinically fit for discharge but remain in hospital. The delayed discharge of these patients is a systemic challenge experienced by public hospital services across Australia.

This challenge has grown significantly since May 2022, as a result of Commonwealth Government underinvestment and inefficient provision of NDIS support and aged care.

At as 25 May 2022, there were 553 long-stay patients in Queensland Health facilities. As at 26 May 2025, this number doubled to 1,102 long-stay patients and consists of 288 younger, and 814 older, patients.

Delayed discharge of patients is primarily caused by limited capacity, capability and underinvestment within aged care and disability services.

Of Queensland's long-stay patients, approximately 77 per cent of long-stay older patients are waiting for residential aged care. Approximately 58 per cent of long-stay younger patients are waiting for appropriate National Disability Insurance Scheme supports.

Queensland Health acts as a provider of last resort for many patients seeking disability and aged care support, despite these being Commonwealth Government responsibilities. This occurs when the Commonwealth Government aged care and disability supports are not available in a timely manner for people with ongoing care needs seeking to return to community settings. More Commonwealth programs that support people in their home or facilitate a transition to home from hospital are needed.

Addressing these issues is critical to improving the health and wellbeing of older Queenslanders and ensuring the sustainability and efficiency of the healthcare system.

This is why it is critical to have a government that will fight for our fair share of Commonwealth funding, including holding the Commonwealth Government to their promise to lift the Commonwealth contribution rate for public hospital services to 42.5 per cent by 2030 and 45 per cent by 2035. The Crisafulli Government will always fight for a fair deal for Queensland, and we will continue to hold the Commonwealth to account for their promises.

Pre-hearing Question on Notice

No. 6

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

How is the 2025-6 Budget addressing the cost blowouts experienced on projects under the former government's failed Capacity Expansion Program?

ANSWER

The 2025-26 Budget delivers the foundation for a fresh start with more free healthcare than ever before and funding to deliver the *Hospital Rescue Plan*.

In delivering its election commitment, the government is providing additional funding of \$5.592 billion to address the cost overruns of projects under the former government's failed Capacity Expansion Program.

Capital expenditure on health infrastructure in 2025–26 represents a record \$3.667 billion, with a focus on delivering the *Hospital Rescue Plan* to increase bed capacity across the state and deliver the world-class facilities and health services Queenslanders need.

The Budget also includes an \$18.53 billion spend over five years on the Government's *Hospital Rescue Plan* to deliver 2,600 new beds statewide with three new and 10 expanded hospitals, a Queensland Cancer Centre, as well as new and upgraded health and ambulance facilities across Queensland. In the first year, \$1.783 billion has been allocated to major hospital infrastructure in response to the independent review of the capital program.

The Budget allocates \$3.159 billion over five years (including 2024-25) for the Timely Investment Infrastructure Maintenance Program which provides for the maintenance, replacement, and refurbishment of Queensland Health's existing assets. This includes new funding of \$2.647 billion to address the shortfall of the former government's Sustaining Capital Program due to all funds from the forward estimates being drawn forward for inappropriately funded announcements. This new funding also uplifts the base capital allocation for maintenance for the first time since 2010-11, despite the asset base growing from \$9 billion to more than \$30 billion.

New funding of \$355.2 million for the *Hospital Rescue Plan: Building Rural and Remote Health Program* and \$146 million for the *Hospital Rescue Plan: Accelerated Infrastructure Delivery Program* has been allocated to address projects committed and commenced by the former government that had no funding to finalise delivery.

Pre-hearing Question on Notice

No. 7

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

How is the 2025-26 Budget addressing the more than \$2 billion worth of maintenance and repairs at Queensland's health facilities, as reported by the Auditor-General in Health 2024?

ANSWER

The government has committed \$3.159 billion over five years (including 2024–25) in response to the independent review of the Queensland Health capital program and recommendations in the Queensland Audit Office Health 2024 report, to support the Timely Investment Infrastructure Maintenance Program, which provides for the maintenance, replacement, and refurbishment of Queensland Health's existing assets.

This funding addresses historic unfunded commitments under the former government's Sustaining Capital Program. In 2025–26:

- \$676 million is provided to fund a range of capital maintenance investments, increasing the previous inadequate level of base funding required to efficiently replace and renew Queensland Health's existing asset base, including to fund previously approved investments across the state.
- Additionally, \$671.9 million is provided to balance the shortfall of the former Sustaining Capital Program in 2024–25 for committed but previously unfunded projects.

This funding also uplifts the base capital allocation for maintenance for the first time since 2010-11 despite the Queensland Health asset base growing from approximately \$8 billion to over \$30 billion (to 2024). New funding of \$500 million in 2026-27 and 2027-28 is allocated, due to former government drawing all funds forward from these years for headline announcements, and \$200 million is funded ongoing from 2028-29 uplifting the base allocation.

The Department of Health has also addressed Queensland Audit Office recommendations to improve consistency in the reporting of maintenance and repairs and continues to work with Hospital and Health Services to inform, analyse and prioritise reported maintenance requirements.

Pre-hearing Question on Notice

No. 8

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

How is the 2025-26 Budget investing in capital upgrades for the Queensland Ambulance Service and how does this compare to previous Budgets?

ANSWER

In the 2025-26 financial year, the Queensland Ambulance Service (QAS) will invest \$116.3 million in critical infrastructure to support essential frontline services to provide timely, quality and appropriate patient focused pre-hospital emergency and non-emergency care, and services to the community.

The government has committed an additional \$250 million, across four years, providing a significant uplift to the QAS's base capital program, empowering the ambulance service to appropriately commission essential infrastructure and equipment.

This is the first multi-year uplift to the QAS's base capital funding since the 2008-09 financial year, allowing the appropriate commissioning of critical QAS infrastructure, including ambulance stations, operation centres, fleet, equipment and information and communications technology systems.

Highlights of the QAS's capital program for the 2025-26 financial year include:

- \$45 million to commission 170 new and replacement ambulance vehicles, which includes \$1.5 million for the fit out of emergency response vehicles.
- \$23.7 million investment to deliver ambulance stations and relief accommodation for operational staff in regional and remote locations, and to undertake minor works at various existing ambulance stations to improve functionality, amenities and prolong their useful life.
- \$16.8 million in operational equipment to support frontline services, including \$10 million for the replacement of defibrillators, statewide.
- \$10 million investment in the acquisition of strategically located land to accommodate the future expansion of services, aligned with identified growth areas.
- \$6 million, as part of a total \$7.6 million, for the Clinical Hub upgrade at the Emergency Services Complex, Kedron.
- \$5.4 million investment in information and communications technology for software development projects to enhance patient care and service delivery.

- \$4 million, as part of a total \$30.5 million, to progress the planning, design, and construction phases for the new ambulance stations at Beenleigh Central and Southport East.
- \$3.4 million, as part of a total \$8.1 million, for the planning, design and construction phases for the relocation of the Springwood Ambulance Station.
- \$2.1 million, as part of a total \$34.5 million, for the design, planning and construction phases for the replacement of the Cairns Operations Centre and the planning for the replacement Pimpama Ambulance Station.

Pre-hearing Question on Notice

No. 9

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

How does the 2025-26 Budget invest in the growth of the paramedic and ambulance service workforce?

ANSWER

On 1 July 2025, I announced an additional 900 new Queensland Ambulance Service full-time equivalent (FTE) positions, over four years.

The 2025-26 financial year cohort comprises of 227 FTE positions, being 192 FTE frontline positions and 35 FTE frontline support/corporate support positions. The allocation of these FTE positions throughout the state is as follows:

- Far Northern Region - 14 FTEs
- Northern Region - 12 FTEs
- Central Region - 16 FTEs
- Sunshine Coast and Wide Bay Region - 23 FTEs
- Darling Downs and South West Region - 21 FTEs
- Metro North Region - 33 FTEs
- Metro South Region - 42 FTEs
- Gold Coast Region - 26 FTEs
- Statewide Support - 40 FTEs.

The additional positions will provide enhancements across five broad initiatives:

- Increased operational capacity and staff welfare.
- Better aligned supervisory structure.
- Supporting Interfacility Transfer Project.
- Station upgrades and fatigue risk management.
- Supporting services.

Pre-hearing Question on Notice

No. 10

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

How does the 2025-26 Budget invest in the growth of the health workforce?

ANSWER

The 2025-26 Budget reflects the Crisafulli Government's commitment to attract, retain and grow our health workforce to meet current and future demand.

This includes a commitment to grow the Queensland Health workforce by 46,000 additional healthcare workers, including 34,200 clinicians, by 2032.

The 2025-26 State Budget delivers an uplift of over 4,500 FTE for the 2025-26 financial year alone. This builds on the 4,700 additional staff who have joined Queensland Health since November 2024.

As part of the Easier Access to Health Services Plan, the Queensland Government is delivering a Systemwide Health Workforce Plan. This plan will identify and manage workforce gaps across health, ambulance, and primary care systems in Queensland and will form the foundation for building a sustainable, responsive and skilled workforce that meets the current and future needs of Queensland communities, including our growing and ageing population. The Systemwide Plan will be evidence-based and underpinned by a comprehensive workforce gap analysis.

Unlike previous workforce plans and strategies, this Plan will be fulsome and integrated in its consideration of the different roles that form the Queensland Health workforce – that is, it will not silo certain roles or demographics to alternative workforce plans or strategies.

The 2025-26 State Budget provides funding of \$812.9 million to grow Queensland's ambulance workforce to sustainably meet the growing and evolving demand of pre-hospital health services. Moreover, the Budget delivers \$192 million for staff entitlements that were previously committed but unfunded under the former government, including Reproductive Health Leave and employer super contributions on parental leave. Increased funding of \$8.7 million has been dedicated to ensuring the uplift of the security officer and Ambassador workforce, to support the safety and security of Queensland Health's growing frontline healthcare workforce.

These Budget initiatives accompany the Crisafulli Government's \$24 million investment to financially support Queensland first year GP trainees in 2025 to continue their primary care training. The Queensland Government will also continue to expand the \$6.8 million Single Employer Model Pilot, which focuses on increasing the

attractiveness of pursuing a career in general practice whilst improving the distribution of general practitioners in rural and remote Queensland. In 2026, a further seven FTE GP registrars will join the pilot over across a further six rural sites.

Pre-hearing Question on Notice

No. 11

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With reference to the SDS, including page 6 and the Hospital and Health (HHS) Performance Indicators as outlined in HHS service agreements, will the Minister advise the following, broken down by month and HHS, for the period October 2024 to June 2025:

- a. the number of 'Emergency Department stays greater than 12 hours'; and
- b. the number of 'Emergency Department stays greater than 24 hours'?

ANSWER

I am advised the latest publicly available Emergency Department data, aligned to that published on the Our Performance website ([www.performance.health.qld.gov.au/statewide-performance/trauma-and-illness/emergency-care-performance#section_total-length-of-stay-\(los\)](http://www.performance.health.qld.gov.au/statewide-performance/trauma-and-illness/emergency-care-performance#section_total-length-of-stay-(los))) is to the month of May 2025. However, the website does not report data for patients with length of stay greater than either 12 or 24 hours.

For the benefit of the committee, the below tables provide the number of 'Emergency Department stays greater than 12 hours' (Table 1) and greater than 24 hours' (Table 2).

It is noteworthy that in the first seven months of the Crisafulli Government, Emergency Department stays greater than 12 hours and 24 hours have decreased compared to the prior the last seven months prior to taking office. There are **2,402 fewer** stays that were greater than 12 hours, and **5,819 fewer** stays that were greater than 24 hours.

Table 1: ED the number of 'Emergency Department stays greater than 12 hours'

HHS	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Apr 24 to Oct 24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Nov 24 to May 25
Cairns and Hinterland	450	538	459	452	648	346	383	3276	448	522	615	718	680	647	802	4432
Central Queensland	822	900	875	964	988	876	747	6172	775	878	884	891	937	859	1187	6411
Central West	1	1	0	1	0	0	2	5	1	3	0	0	2	1	2	9
Children's Health Qld	116	120	70	65	121	40	50	582	41	31	27	67	44	52	61	323
Darling Downs	820	859	914	950	1091	863	961	6458	887	878	1020	695	656	612	843	5591
Gold Coast	1311	1254	1434	1378	1516	1209	1156	9258	1029	1144	1316	1211	1194	1291	1646	8831
Mackay	513	500	470	483	577	456	553	3552	538	611	482	571	575	730	508	4015
Mater Health Service	287	307	299	405	389	209	259	2155	265	248	312	228	256	265	390	1964
Metro North	2293	3002	2742	2669	3125	2243	2265	18339	2393	2633	2426	2262	1989	2274	2605	16582
Metro South	2715	2871	3066	3700	3475	2514	2339	20680	2691	2809	2542	2443	2736	2885	3224	19330
North West	118	115	116	176	134	94	95	848	52	81	67	65	63	71	57	456
South West	2	5	4	9	10	5	4	39	2	7	7	6	4	3	4	33
Sunshine Coast	753	714	882	933	1192	994	789	6257	640	976	1227	846	723	660	880	5952
Torres and Cape	3	6	4	15	15	9	10	62	12	10	11	11	10	10	3	67
Townsville	788	673	647	799	925	495	393	4720	455	582	709	825	984	883	730	5168
West Moreton	849	900	932	1033	1164	973	933	6784	851	1052	1058	895	1104	1280	1337	7577
Wide Bay	1245	1452	1440	1501	1531	1290	1450	9909	1400	1360	1535	1369	1498	1332	1459	9953
STATE	13086	14217	14354	15533	16901	12616	12389	99096	12480	13825	14238	13103	13455	13855	15738	96694

Source: Emergency Data Collection

Table 2: ED the number of 'Emergency Department stays greater than 24 hours'

HHS	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Apr 24 to Oct 24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Nov 24 to May 25
Cairns and Hinterland	21	27	20	17	25	9	6	125	6	26	23	41	15	0	4	115
Central Queensland	358	336	374	415	436	358	313	2590	293	302	376	379	437	266	388	2441
Central West	0	0	0	0	0	0	1	1	0	1	0	0	0	1	0	2
Children's Health Qld	2	1	2	0	0	0	0	5	1	0	0	1	2	1	2	7
Darling Downs	155	170	189	225	217	173	198	1327	207	211	273	87	29	3	19	829
Gold Coast	170	181	305	248	353	214	120	1591	81	138	247	80	20	7	16	589
Mackay	201	197	205	215	233	140	179	1370	183	170	120	86	24	24	9	616
Mater Health Service	23	21	30	48	51	14	18	205	14	7	19	13	21	17	41	132
Metro North	77	178	171	183	468	185	72	1334	74	89	69	45	6	14	9	306
Metro South	188	253	373	387	362	156	132	1851	159	186	133	74	78	41	47	718
North West	27	33	31	57	30	18	15	211	10	22	12	8	1	10	13	76
South West	0	0	1	0	1	0	0	2	0	0	0	0	0	0	0	0
Sunshine Coast	37	29	27	48	102	39	23	305	24	30	47	9	7	8	12	137
Torres and Cape	0	0	0	2	3	2	3	10	0	1	1	0	0	0	0	2
Townsville	106	22	39	145	254	31	10	607	16	24	119	270	188	92	10	719
West Moreton	57	106	165	339	347	274	285	1573	162	242	367	301	230	256	212	1770
Wide Bay	403	524	660	575	570	346	426	3504	409	416	493	427	350	110	128	2333
STATEWIDE	1825	2078	2592	2904	3452	1959	1801	16611	1639	1865	2299	1821	1408	850	910	10792

Source: Emergency Data Collection

Pre-hearing Question on Notice

No. 13

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With reference to the SDS, including page 1, will the Minister advise on the number of clinical incidents reported to the clinical incident management reporting system (RiskMan) broken down by severity assessment code (SAC), month and HHS since November 2024?

ANSWER

Queensland has a world-class health system. Our healthcare providers, including Queensland Health staff, take seriously the safety of the patients for whom they care and provide treatment.

Queensland Health has worked hard to develop a patient safety culture that actively encourages staff to report clinical incidents and see these as opportunities to learn about and address issues. The analysis of these incidents helps Queensland Health better understand the factors that contribute to patient incidents, and implement changes aimed at improving safety.

I am advised that there is a degree of clinical subjectivity in deciding whether an adverse outcome is a clinical incident, and this assessment may change on review. For example, a death may not have been reasonably expected and, therefore, met the definition of a SAC 1 incident but is later determined to have been the result of an underlying condition.

I am advised that interpreting numbers of clinical incidents, comparing the number of clinical incidents between hospital and health services, or using the number of clinical incidents as indicators of performance is not advised due to:

- the classification of an adverse patient outcome as a clinical incident does not describe 'negligence' or 'fault' on behalf of staff or systems;
- not all clinical incidents are preventable; and
- higher incident reporting rates are generally accepted as an indicator of a positive and transparent safety culture, rather than a marker of less safe care.

As such, I am advised by the department, that it is not appropriate to provide the specific information sought as to do so would also require a substantial explanation to be provided, per case, to ensure the information is interpreted and understood correctly.

I note that former ministers receive similar advice from the department and have responded as such. See, for example, answers to: QON 1069 of 2022; QON 855 of 2023; QON 1003 of 2023; QON 1075 of 2023; and QON 802 of 2024.

Pre-hearing Question on Notice

No. 14

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With respect of the SDS including page 2, and the commitment to provide 515 new beds across the health system across 2 years, will the Minister provide an itemised breakdown of projects, number of new bed or bed alternatives, total cost, 2025-26 estimated expenditure and timeline to deliver?

ANSWER

Page 2 of the SDS does not refer to “515 new beds”. I refer the Committee to page 2 of the SDS which states:

\$581.4 million over 2 years to stabilise bed capacity to improve patient flow including continued access to 515 beds across the health system, necessitated by the former government’s inability to plan or bring new hospital infrastructure online.

Pre-hearing Question on Notice

No. 15

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With reference to the SDS, including page 2, and Budget Paper 4, will the Minister provide an itemised list of initiatives, including funding allocation, timeline for delivery and, if applicable, additional workforce to deliver initiatives, funded through the Patient Flow Rapid Response Fund in the 2025-26 financial year?

ANSWER

This funding boost is necessitated by record levels of ambulance ramping and reduced patient flow experienced in recent years. It is further exacerbated by the doubling of long-stay patients in Queensland's hospitals since May 2022.

Planning is currently underway with the Hospital and Health Services to identify proposals to help reduce ramping in our busiest hospitals through targeted investments to support improved patient flow which will be funded through the Patient Flow Rapid Response Fund.

Queensland Health is currently reviewing and consulting on proposals and at this time is unable to provide an itemised list of funding allocations.

Pre-hearing Question on Notice

No. 16

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With reference to the SDS including page 1 and the hardworking staff of the health system, will the Minister provide in table format, reported separately by Hospital and Health Service and stream of employment (including Aboriginal and Torres Strait Islander Health Workforce Stream, Administrative Stream, Building and Engineering Stream, Clinical Assistants Stream, Dental Stream, Health Practitioners' Stream, Medical Stream, Nursing Stream, Operational Stream, Professional Stream and Technical Stream):

- a. employees by FTEs
- b. employees by headcount to the closest reportable date
- c. vacancy rate (including both permanent and non-permanent vacancies); and
- d. additional recruits for the 2025-26 financial year, for Queensland Health staff?

ANSWER

I was pleased to recently advise the Member for Miller in my answer to QON 640 of 2025 that following the election of the Crisafulli Government, Queensland Health is experiencing significantly improved workforce attrition rates. For example, Nursing and Midwifery stream attrition is at 3.94 per cent, which is lower than nine of the past 10 years. For Medical stream, attrition is at 2.77 per cent, which is the lowest rate of attrition in the past 10 years.

Table 1 and Table 2 below provide a break down by Hospital and Health Services and stream of employment breakdown by (a) FTE (b) headcount and (c) vacancy rates, as at pay period ending 22 June 2025.

In relation to (d), I am advised that growth projections are being finalised and Queensland Health is working to complete a gap analysis and further planning for the pipeline of health workers.

Table 1: FTE, Headcount and Vacancy Rate by Hospital and Health Services Breakdown

CHHHS: FTE - 6565.27, Headcount - 8005.36, Vacancy Rate - 2.1%. CQHHS: FTE - 3887.8, Headcount - 4892.34, Vacancy Rate - 2%. CWHHS: FTE - 446.85, Headcount - 510.07, Vacancy Rate - 9%. CHQHHS: FTE - 4723.54, Headcount - 5743.2, Vacancy Rate - 1.7%. DDHHS: FTE - 5860.17, Headcount - 7393.07, Vacancy Rate - 1.8%. GCHHS: FTE - 10761, Headcount - 13476.63, Vacancy Rate - 0.7%. MHHS: FTE - 2998.79, Headcount - 3697.01, Vacancy Rate - 3.1%. MNHHS: FTE - 20775.83, Headcount - 25667.36, Vacancy Rate - 1.6%. MSHHS: FTE - 17374.41, Headcount - 21333.16, Vacancy Rate - 1.1%. NWHHS: FTE - 914.83,

Headcount - 997.3, Vacancy Rate - 6.6%. SWHHS: FTE - 915.1, Headcount - 1093.53, Vacancy Rate - 4.1%. SCHHS: FTE - 7703.43, Headcount - 9966.54, Vacancy Rate - 0.8%. TCHHS: FTE - 1250.16, Headcount - 1378.81, Vacancy Rate - 8.6%. THHS: FTE - 6343.09, Headcount - 7698.37, Vacancy Rate - 1.5%. WMHHS: FTE - 5245.99, Headcount - 6306.25, Vacancy Rate - 2.2%. WBHHS: FTE - 4171.74, Headcount - 5234.43, Vacancy Rate - 1.4%. Dept: FTE - 9791.3, Headcount - 10538.56, Vacancy Rate - 2.5%. TOTAL: FTE - 109729.3, Headcount - 133932, Vacancy Rate - 1.8%.

Table 2: FTE, Headcount and Vacancy Rate by Employment Stream Breakdown

Aboriginal and Torres Strait Islander Health Workforce FTE - 627.1, Headcount - 655.56, Vacancy Rate - 0.179. Managerial and Clerical (Administrative Stream) FTE - 23358.55, Headcount - 25876.12, Vacancy Rate - 0.021. Trade and Artisans (Building and Engineering Stream) FTE - 532.48, Headcount - 534, Vacancy Rate - 0.047. Clinical Assistants Stream FTE - 3014.53, Headcount - 3727.2, Vacancy Rate - 0.016. Dental Stream FTE - 292.43, Headcount - 389, Vacancy Rate - 0.041. Health Practitioner's Stream FTE - 14096.33, Headcount - 16436.67, Vacancy Rate - 0.025. Medical Stream FTE - 13131.69, Headcount - 15628.18, Vacancy Rate - 0.026. Nursing Stream FTE - 44318.26, Headcount - 57901.23, Vacancy Rate - 0.009. Operational Stream FTE - 9964.32, Headcount - 12352.97, Vacancy Rate - 0.013. Professional Stream FTE - 359.7, Headcount - 393.4, Vacancy Rate - 0.032. Technical Stream FTE - 33.91, Headcount - 37.67, Vacancy Rate - 0.029. TOTAL FTE - 109729.3, Headcount - 133932, Vacancy Rate - 0.018.

Pre-hearing Question on Notice

No. 17

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With reference to the SDS including pages 1, 2 and 6, can the Minister provide, reported separately by HHS, and severally by calendar month from October 2024:

- a. the percentage of patients transferred off stretcher within 30 minutes; and
- b. the total amount of ambulance 'lost time'?

ANSWER

Patient Off Stretcher Time (POST) and 'Average Lost Minutes per Ambulance' is reported on Our Performance website (www.performance.health.qld.gov.au) for the Top 26 facilities and summary level for State. I am advised that the latest publicly available data is for May 2025.

POST is defined as the percentage of patients transferred into the care of the Emergency Department from QAS staff within 30 minutes or an ambulance arriving at an Emergency Department. Each minute that exceeds the 30-minute transfer of care timeframe is considered a 'lost minute'.

In response to (a), the percentage of patients transferred off stretcher within 30 minutes for all facilities are reported in Table 1. In response to (b), the total amount of ambulance 'lost time' for all facilities are reported in Table 2.

Importantly, ramping has decreased from the same time last year. For the benefit of the Committee, Table 1 and Table 2 highlight the worst performing month for each Hospital and Health Service (HHS) during the seven months since the Crisafulli Government came to office and the last seven months of the former government. Of note:

- POST: 14 of the 17 of the worst performing months for each HHS (incl. Statewide performance) occurred prior to November 2024.
- Lost Minutes: 15 of the 17 of the worst performing months for each HHS (incl. Statewide performance) occurred prior to November 2024, representing 11,135 fewer lost minutes per ambulance over a seven-month period.

The Crisafulli Government's budget invests a record \$33.1 billion into health services and infrastructure to reduce ambulance ramping, stabilise the elective surgery waitlist, and deliver more hospital beds across Queensland.

Table 1: The percentage of patients transferred off stretcher within 30 minutes by Hospital and Health Service – all facilities.

HHS	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Cairns and Hinterland	73.40%	75.20%	75.40%	78.30%	72.50%	80.60%	80.80%	77.50%	76.60%	78.10%	72.60%	74.20%	74.80%	72.80%
Central Queensland	72.20%	69.90%	68.00%	67.40%	69.40%	72.90%	79.00%	77.60%	76.60%	73.70%	74.10%	73.00%	78.80%	73.40%
Central West	92.00%	88.50%	94.20%	89.30%	90.20%	94.00%	94.90%	93.10%	93.50%	93.50%	91.30%	93.70%	97.60%	93.30%
Children's Health Qld	81.60%	80.60%	80.80%	84.60%	78.40%	83.30%	83.00%	80.70%	85.70%	84.30%	82.80%	85.40%	84.30%	80.00%
Darling Downs	69.20%	72.40%	73.30%	74.20%	72.70%	74.00%	72.00%	74.80%	73.20%	69.70%	77.10%	77.10%	77.50%	69.80%
Gold Coast	53.00%	51.80%	50.00%	53.20%	51.30%	55.50%	57.30%	59.70%	55.70%	54.10%	54.40%	56.00%	52.60%	51.10%
Mackay	70.50%	71.10%	74.00%	74.60%	68.10%	75.80%	71.30%	70.80%	69.80%	76.60%	74.50%	73.20%	68.40%	71.80%
Metro North	51.00%	47.60%	57.10%	58.30%	55.60%	62.80%	61.70%	62.00%	58.10%	60.30%	56.40%	62.70%	61.20%	56.60%
Metro South	39.30%	37.00%	39.40%	38.20%	39.50%	45.70%	47.80%	45.90%	44.30%	46.90%	45.20%	43.40%	44.40%	42.20%
North West	98.40%	99.70%	98.10%	99.30%	99.30%	98.80%	99.10%	99.30%	98.30%	99.20%	98.80%	99.00%	99.60%	98.30%
South West	97.20%	98.20%	97.60%	97.90%	96.00%	98.90%	97.80%	95.30%	97.30%	95.90%	98.60%	97.40%	98.70%	95.50%
Sunshine Coast	61.40%	61.80%	70.70%	73.30%	69.20%	72.50%	73.00%	74.50%	66.70%	67.30%	70.60%	73.40%	74.80%	69.70%
Torres and Cape	92.60%	99.20%	97.80%	98.10%	99.30%	97.10%	98.60%	97.10%	97.50%	98.40%	98.50%	96.60%	98.10%	95.90%
Townsville	89.40%	90.40%	90.40%	87.90%	87.60%	89.80%	91.10%	90.10%	87.90%	87.70%	85.10%	83.90%	82.70%	84.30%
West Moreton	39.50%	42.70%	39.40%	39.50%	40.80%	39.90%	41.40%	45.00%	40.70%	38.30%	40.50%	40.30%	39.60%	36.40%
Wide Bay	68.70%	62.80%	65.80%	66.10%	66.30%	69.30%	69.80%	72.00%	72.50%	70.90%	67.80%	69.60%	72.30%	74.00%
STATEWIDE	59.20%	57.90%	60.70%	61.60%	60.20%	64.90%	65.20%	65.20%	63.10%	63.20%	62.40%	63.70%	63.70%	60.80%

Table 2: The total amount of ambulance 'lost time' (in hours) by Hospital and Health Service – all facilities.

HHS	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Cairns and Hinterland	365.2	318.6	287.7	342	564	235.3	272.6	364.4	416.4	282.8	294.2	330.5	306.7	398.7
Central Queensland	326.8	330.8	407.7	472.8	351.8	309.6	200.8	192.1	206.5	279.8	238.4	303.7	175.3	268.5
Central West	3.8	3.7	0.7	2.7	2.2	0.6	1.1	1.3	0.6	1.9	1.9	0.8	0.4	1.1
Children's Health Qld	18	30.7	34.4	35.6	43.7	21.5	19	26.7	11.6	10.9	18.8	14.6	15.5	29.5
Darling Downs	627.5	489.3	290.9	350.2	375.7	296.9	365	282.8	347.4	580.2	277.4	291.6	283.9	445.8
Gold Coast	995.4	1138.1	1281.5	1149.6	1249.4	1036	859.8	730.2	909.9	969.7	745.9	823.9	1199	1022.2
Mackay	221.3	204.9	188.5	198.4	290.9	161.7	200.9	224.9	220.4	140.3	148.4	143.6	213.8	158
Metro North	1813.8	2000.4	1289	1319.9	1594.6	1105.9	1214.9	1157.1	1528.6	1378	1393	1195.2	1237	1411.1
Metro South	3720.1	4562.8	4123.2	4016.2	3996.8	2674.5	2550.9	2787.3	2803.1	2957	2538.8	2785.6	2831.8	3248.7
North West	4.9	1.6	6	2.8	0.5	4.3	0.8	1.4	4.8	3.6	4.1	3.1	0.8	2.5
South West	4	3.2	2.1	3	4.2	1.3	2.6	5	1.6	3.6	0.8	2.7	1.5	3.1
Sunshine Coast	677.8	659.4	478.9	447.2	623.7	432.5	426.7	291	659.2	580.6	379.7	317.7	350.7	499.1
Torres and Cape	5.4	1.2	0.3	2.2	0	1.1	0.7	2.4	0.9	0.3	0.6	1.3	0.6	3.9
Townsville	69	77.3	65.4	92.8	118.4	70.6	59.8	74.8	99.6	125.6	116.7	244.5	249.8	178
West Moreton	1937	1641.2	1665.5	1653.9	1577.3	1510.7	1549.2	1256.8	1523.6	1842.1	1481.1	1628.8	1801.9	1890.6
Wide Bay	396.2	501.2	461.7	456.6	475.7	450.2	427.5	342	343.2	448.6	452.7	448.8	368.9	307
STATEWIDE	11927	12893	11487	11448	12144	8757	8712	8461	9708	10187	8583	9118	9630	10546

Pre-hearing Question on Notice

No. 18

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With reference to the SDS, including pages 1, 2, 30 and 31, will the Minister provide:

- a. the 50th and 90th percentile response time (in minutes) reported separately by region and calendar month since October 2024; and
- b. the five longest ambulance response times (in minutes) reported separately by region and calendar month since October 2024?

ANSWER

- a. The Queensland Ambulance Service (QAS) publicly publishes its response time performance for each QAS Region and District. The latest available quarterly performance reports can be found on the QAS website at www.ambulance.qld.gov.au/about/performance-data/our-performance.
- b. I am advised that providing the data requested by the Committee would represent an unreasonable diversion of resources. I note that former ministers received similar advice from the department and have responded as such. See, for example, answers to: QON 1150 of 2022; QON 1189 of 2022; and QON 730 of 2023.

Pre-hearing Question on Notice

No. 19

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With an additional \$218 million for access to health care (SDS, p. 2), can the Minister provide details of additional health services for the Noosa electorate including expanded mental health services, public contracts and beds for Noosa Hospital, as well timeframes for the delivery of these?

ANSWER

The Crisafulli Government's 2025-26 Budget delivers the foundation for a fresh start with more free healthcare than ever before and funding to deliver the Hospital Rescue Plan.

A record \$33.1 billion is being invested to reduce ambulance ramping, improve services, recruit more health workers and stabilise the elective surgery waitlist, including for people in the electorate of Noosa and the broader Sunshine Coast region.

The budget is investing in more health workers for the Sunshine Coast, with additional funding in 2025-26 to grow the workforce to 7,892 FTE across the Sunshine Coast Hospital and Health Service (SCHHS).

Residents of Noosa will also benefit from the Crisafulli Government's record \$1.75 billion investment to deliver more elective surgeries when and where Queenslanders need them, including partnering with the private sector through the Surgery Connect Program to reduce waitlists and have patients seen sooner. I note the Noosa Hospital is a part of the Surgery Connect program, meaning more access to planned care sooner for residents of Noosa and surrounds.

Ramsay Health Care currently operates the Noosa Hospital under agreement with the SCHHS, which was renewed from 1 July 2020 through to 30 June 2030. SCHHS is working with Ramsay Health to investigate options to expand the Noosa Hospital, including expanding the Emergency Department and possible additional operating theatre capacity.

I note further detail on the Crisafulli Government's health investment in the electorate of Noosa and broader Sunshine Coast region has been provided in my response to pre-hearing QON 20.

Pre-hearing Question on Notice

No. 20

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

With an increase to over \$3 billion for mental health and alcohol and other drug services (SDS, p. 12), can the Minister detail the additional allocations for the Sunshine Coast region and Noosa specifically, including for residential and non-residential eating disorder, alcohol and other drug treatment services for children and young people?

ANSWER

The Crisafulli Government's 2025-26 Budget delivered a record \$33.1 billion investment in health. The Sunshine Coast Hospital and Health Service was allocated \$2.01 billion in 2025-26 – an uplift of 12.3 per cent from 2024-25 – to deliver health services in the region, including a range of mental health, alcohol and other drug services.

Under *Better Care Together*, the Sunshine Coast Hospital and Health Service is allocated funding of more than \$110 million over five years to 2027 to expand and enhance mental health alcohol and other drug (AOD) services in the region.

This includes across both community and inpatient services, as well as enhancements to priority workforces in a number of specialised areas. Further details of planned service enhancements include the following:

- Augmenting and enhancing the existing Eating Disorders Specialist Service, a whole of age service.
- Providing AOD responses in the emergency department and hospital settings as well as to meet demand pressures to provide opioid treatment and harm reduction services in the community.
- Operational funding for 12 acute mental health beds at the Sunshine Coast University Hospital.
- New Early Psychosis teams and youth mental health services delivered in conjunction with Headspace.
- A new mental health team to support people with an intellectual or developmental disability.
- Additional clinicians supporting community mental health and AOD treatment services for adults, older persons, children and young people, and perinatal and infant mental health.
- Enhancements to the peer workforce, multicultural workforce, and indigenous mental health workforce.

Eating disorders

As part of the Queensland Government's election commitments, \$1.9 million is being provided to deliver a new short-term accommodation village at endED in Woombye. Eight 'tiny homes' will be built onsite allowing for intensive eating disorder treatment and mental health support through endED.

- EndED is a Sunshine Coast non-for-profit community organisation that has a focus on eating disorder supports for individuals and their caregivers.
- EndED will establish eight tiny homes in Woombye anticipated to be delivery by early 2026, which will provide temporary crisis and short-term accommodation to provide vital support for Queenslanders with eating disorders or other mental health needs.
- Residents will have access to wrap around support, in-treatment for an eating disorder and mental healthcare to help them on their recovery journey.

Queensland Health currently funds a total of eight public beds at Wandi Nerida, a private residential eating disorder facility on the Sunshine Coast.

Queensland Health also funds Eating Disorder Queensland to provide psychosocial support services including individual recovery support programs and peer to peer and carer to carer support services within each Eating Disorders Service including in the Sunshine Coast. Funding is also provided to Eating Disorders Families Australia to deliver information, support and advice to families and carers of young people experiencing an eating disorder including provision of the Nourish, Nurture and Notice Program.

Alcohol and other drugs

Queensland Health funds two non-government providers located at Nambour, Caloundra, Gympie and Mooloolaba to deliver specialist community-based alcohol and other drug services for young people up to 25 years of age. Young people from the Sunshine Coast region can access Mater Health's specialist AOD services located in South Brisbane which includes a five-bed AOD residential withdrawal management service and a five-bed AOD residential rehabilitation service as well as intensive outreach for youth. An adult alcohol and other drug residential treatment service is also funded in Nambour that accepts young adults aged 18 to 25 years.

**Pre-hearing Questions on notice and
Responses - *Minister for the
Environment and Tourism and Minister
for Science and Innovation***

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 1

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 1 of the Service Delivery Statement, will the Minister outline how the vision articulated in the Crisafulli Government's *Destination 2045: Delivering Queensland's Tourism Future* plan aims to make Queensland Australia's leading tourism destination?

ANSWER:

The Crisafulli Government's *Destination 2045: Delivering Queensland's Tourism Future* (Destination 2045) is a bold and transformative vision.

Built on extensive industry and community input, Destination 2045 maps out how the Crisafulli Government will position Queensland as a global leader in tourism by showcasing our environment, lifestyle, cultures and regions to the world.

Destination 2045 will supercharge Queensland's tourism industry, setting ambitious targets of doubling total visitor expenditure to \$84 billion and increasing direct jobs in the industry to 190,000 by 2045, delivering lasting benefits to Queensland.

To achieve this, the plan focuses on six key pillars:

- Ecotourism: Delivering more experiences in nature and responsibly showcasing our natural assets and connecting people to our environment.
- Events: Transforming Queensland into Australia's event capital by attracting world-class events for locals and visitors.
- Connectivity: Making it easier for people to get here and travel around, and delivering visitors straight to the doorstep of our operators and attractions.
- Experiences: Delivering more to see and do by creating world-class attractions through investment and partnerships.
- Brand Queensland: Bringing in more visitors through world-class marketing and cementing Queensland's reputation as the home of the holiday.
- Industry: Backing our operators through empowering Queensland tourism businesses to modernise and thrive.

Despite the former Labor Government leaving a 95 per cent funding cliff for tourism, the Crisafulli Government is investing more than \$1 billion in tourism over the next four years. This includes \$446 million of new funding over four years to kickstart the delivery of Destination 2045 made up of \$200 million over four years from 2025-26 for product development and aviation attraction; \$100 million over four years from

2025-26 for event attraction; and \$146 million over two years from 2027-28 for Tourism and Events Queensland to continue their vital work.

Significant investments are also being made from 2025-26 to deliver key tourism election commitments:

- \$19.7 million to deliver the next stage of the Wangetti Trail.
- \$15.5 million to upgrade the Smithfield Mountain Bike Trail.
- \$4.4 million to deliver a Palm Island Tourism Development Plan and to build new infrastructure on Palm Island.
- \$5 million to support the proposed Whitsunday Skyway attraction.

Destination 2045 will be delivered through strong partnerships between the Queensland Government, the tourism industry, local governments and key institutions and organisations.

The Destination 2045 vision is not just about growth, it's about creating a tourism industry that is sustainable, inclusive, and resilient. By creating a stronger, more vibrant tourism industry we're also supporting jobs, businesses, and Queenslanders in all corners of our state.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 2

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 1 of the Service Delivery Statement, will the Minister explain how the Crisafulli Government is supporting ecotourism product development in Queensland?

ANSWER:

Destination 2045: Delivering Queensland's Tourism Future (Destination 2045) is the Crisafulli Government's roadmap to supercharge Queensland's tourism industry.

The ecotourism pillar of Destination 2045 focuses on unlocking low-impact, high-value opportunities that allow us to protect Queensland's pristine natural environment whilst responsibly sharing it with the world. It emphasises smart planning, managing visitor interactions, and delivering conservation-focused infrastructure to support exceptional visitor experiences.

The 2023 *Growing ecotourism in Queensland* report from the Queensland Audit Office found that, between 2015 and 2023, the former government approved only two ecotourism projects.

Instead of lagging, the Crisafulli Government has an ambitious agenda to make Queensland a world leader in ecotourism, and Destination 2045 outlines several key actions to achieve this:

- Queensland's ecotourism policy – *45 by 45: Getting Queensland Ecotourism Moving*: This policy provides a clear vision for advancing ecotourism, promoting environmental stewardship, land management, and cultural recognition, with guidance on simplifying approvals, reducing duplication, and tailoring support to proponents.
- Encouraging private investment: By supporting new and revitalised tourism infrastructure, agritourism, and other attractions Destination 2045 ensures there's even more for visitors to see and do.
- Cutting red and green tape: By streamlining approvals, boosting industry capability, and supporting innovation, Destination 2045 creates a supportive environment for tourism operators to thrive.

The Crisafulli Government is already fast-tracking projects to position the state as a global hub for ecotourism. The new *Ecotourism Plan for Queensland's Protected Areas 2025–30* also aligns with Destination 2045 and provides a framework for ecotourism in national parks and other protected areas.

With funding support from the Crisafulli Government, the first of 45 new ecotourism experiences promised by Destination 2045 are underway:

- \$19.7 million to deliver the next stage of the Wangetti Trail;
- \$15.5 million to upgrade the Smithfield Mountain Bike Trail;
- \$4.9 million to deliver a Palm Island Tourism Development Plan and to build new infrastructure on Palm Island; and
- \$5 million to support the proposed Whitsunday Skyway attraction.

The Queensland Tourism Cabinet Committee is driving strategic decisions to ensure sustainable growth in the tourism industry, while the landmark integration of the Environment and Tourism portfolios fosters collaboration between these two important sectors. This approach balances environmental conservation with tourism development, protecting Queensland's natural assets while boosting the economy.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 3

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 1 of the Service Delivery Statement, will the Minister outline how the Crisafulli Government is supporting Tourism and Events Queensland?

ANSWER:

The Crisafulli Government is determined to ensure the 2032 Olympic and Paralympic Games provides a generational tourism legacy for our state, long after the last athletes have left. *Destination 2045: Delivering Queensland's Tourism Future* (Destination 2045) is our ambitious plan to take Queensland tourism to even greater heights and the Crisafulli Government's 2025-26 State Budget has not wasted a moment kicking into action.

Through this Budget, the Crisafulli Government has taken steps to restore funding for Tourism and Events Queensland (TEQ) to ensure it can continue its work to position Queensland as the home of the holiday and the events capital of the nation, delivering sustainable economic growth for the state.

\$146 million of the \$446 million allocated in the 2025-26 State Budget to kickstart delivery of Destination 2045 has been provided to TEQ.

This stands in stark contrast to the previous government's decision to slash TEQ funding to \$52.9 million in 2027–28, nearly \$100 million less than the \$146.6 million allocated in 2024–25. This would have forced TEQ to halve its workforce from 130 to around 65, putting Queensland's international competitiveness at risk.

Under the Crisafulli Government, a fully supported TEQ will play a central role in growing Queensland's events calendar to \$4 billion by 2045, with half of that coming from regional areas; and to increase the value of the business events calendar to \$2 billion.

By ending the previous government's TEQ funding cliff, we are creating a stronger, more vibrant tourism industry, supporting jobs and businesses, and ensuring Queenslanders reap the benefits of the Brisbane 2032 Olympic and Paralympic Games for many years to come.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 4

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 1 of the Service Delivery Statement, will the Minister outline how the Crisafulli Government is supporting Queensland's tourism industry by reducing red tape?

ANSWER:

The Crisafulli Government is committed to supporting Queensland's tourism industry by cutting red and green tape, making it easier for operators to focus on delivering world-class visitor experiences and growing their businesses.

Through *Destination 2045: Delivering Queensland's Tourism Future* (Destination 2045), the Government is streamlining processes, simplifying approvals, and reducing duplication to create a more supportive and efficient environment for tourism operators. Key initiatives that have already started include:

- The introduction of the Tourism Support Hub: We want to make life easier for tourism operators by making it simpler to interact with government. This one-stop shop will cut the number of government touchpoints operators need to engage with, which means less time stuck behind a desk and more time out with customers.
- Streamlined Permitting for Protected Areas: By the end of this year, the Crisafulli Government will introduce legislation into Parliament that enables one single permission for tourism operations on protected areas to streamline the permitting process for businesses. This will ensure that operators can deliver exceptional ecotourism experiences without being bogged down by complex processes.
- Regulatory Reform for Events: The Crisafulli Government has laid the groundwork to review the *Major Events Act 2014* and other relevant legislation to streamline the preparation and delivery of events and support the growth of the Queensland events calendar.

By cutting red tape, the Government is empowering tourism operators to thrive, supporting job creation, and ensuring Queensland remains competitive as a leading tourism destination. This approach is central to the Crisafulli Government's vision for a sustainable, inclusive, and prosperous tourism industry.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 5

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 2 of the Service Delivery Statement, will the Minister advise how the Crisafulli Government's will boost recycling rates in Queensland?

ANSWER:

Under the former government, Queensland sent more waste to landfill than ever before, and had the second worst headline resource recovery rate in the nation – above only the Northern Territory.

The Crisafulli Government is committed to boosting recycling rates and reducing the amount of waste going to landfill in Queensland. That is why the Crisafulli Government has released its draft Queensland Waste Strategy 2025-2030 – *Less Landfill, More Recycling*.

Significant consultation with industry, local governments and community has been undertaken to help ensure the state is implementing practical ways to boost recycling and reduce environmental impacts.

In support of the new push to increase recycling, the Queensland Government has already announced several new programs.

A \$130 million has been announced for the new Resource Recovery Boost Fund, which will help councils invest in infrastructure to reduce their waste levy costs and maximise recycling.

A \$2 million program is underway to support councils to expand collection points for problem batteries like those found in vapes and e-scooters, after more than 200 battery related fires were reported in the last year.

The Crisafulli Government will also support councils to rollout kerbside organics collection services and support innovation and expansion in the resource recovery sector. Other actions addressing priority materials and initiatives will be considered as part of the final Waste Strategy, which will be released in late 2025.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 6

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 2 of the Service Delivery Statement, will the Minister advise how the \$130 million *Resource Recovery Boost Fund* will assist local governments?

ANSWER:

The Crisafulli Government's \$130 million Resource Recovery Boost Fund will deliver funding to local governments to help build the critical waste infrastructure they need to divert waste from landfill and increase recycling.

Since the former Labor Government introduced the waste levy in 2019, household waste sent to landfill has increased, while resource recovery rates have declined.

As a result, Queensland has the second worst resource headline recovery rate in the nation, above only the Northern Territory.

The Crisafulli Government is determined to turn that around, which is why our \$130 million investment in landfill diversion infrastructure will help reduce the cost of Labor's waste levy to councils and deliver better environmental outcomes.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 7

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 2 of the Service Delivery Statement, will the Minister explain how the *More Rangers, Better Neighbours* policy will benefit landholders?

ANSWER:

The Crisafulli Government is determined to manage our protected areas properly and be a better neighbour to landholders than the previous government ever was.

That is why our *More Rangers, Better Neighbours* initiative delivers real outcomes for landholders and communities. The Crisafulli Government recognises that rangers are vital to effective land management by ensuring areas managed by the Queensland Parks and Wildlife Service are well managed and the commitment to being good neighbours is upheld.

Under the *More Rangers, Better Neighbours* initiative ranger numbers will increase by 150 over four years, including 40 specialist fire rangers who were left unfunded by the previous government.

Having more rangers means greater opportunities to engage with neighbours, repair relationships that had previously been allowed to crumble, address priorities across boundaries, and collaboratively deliver management activities that tackle shared challenges such as fire, pest, and weed management.

At the same time, the increase to the number of Indigenous Land and Sea Rangers will support coordinated, landscape-scale management across the State. This includes strengthening on-park and on-country cooperation between the Queensland Parks and Wildlife Service and Indigenous Rangers to share knowledge and jointly deliver activities that maximise outcomes for programs such as fire and pest control, benefiting neighbours and surrounding communities.

The *More Rangers, Better Neighbours* initiative will show landholders the respect they deserve, because that is a fundamental part of the fresh start the Crisafulli Government is delivering.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 8

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 2 of the Service Delivery Statement, will the Minister outline the Crisafulli Government's plan for expanding Queensland's protected area estate?

ANSWER:

The Crisafulli Government is committed to boosting Queensland's protected area estate by working with landholders and the not-for-profit sector.

Despite spending a decade in government and promising to increase Queensland's protected area estate by seventeen per cent, the former government only managed one per cent.

Instead, our commitment is clear: we will add more land to our protected area estate in four years than the previous government did in nearly ten. Importantly, we will do this whilst ensuring that land remains productive and manageable.

Importantly, the Crisafulli Government will ensure that all Queenslanders will still be able to get outdoors and enjoy our natural environment.

The Crisafulli Government will always support farmers and landholders across our state to make informed decisions about the future of their land and be supported in their endeavours.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 9

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 2 of the Service Delivery Statement, will the Minister update the Committee on the status of the Queensland Mine Rehabilitation Commissioner?

ANSWER:

The former Labor Government only provided limited-life funding for the Queensland Mine Rehabilitation Commissioner and its office, due to expire on 31 December 2025.

To enable the continuation of this important role, the Crisafulli Government has committed funding for both the Commissioner and its office from departmental resources.

We are committed to supporting the resource sector in delivering progressive rehabilitation and closure plans, including through industry engagement with the Commissioner to ensure access to leading practice advice.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 10

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 2 of the Service Delivery Statement, will the Minister advise how the Crisafulli Government will support a world-class science and innovation ecosystem?

ANSWER:

The Crisafulli Government is committed to supporting a world-class science and innovation ecosystem through targeted science, technology and innovation investments in partnership with industry to deliver tangible benefits to Queensland.

We will continue to support researchers, innovators, and the private sector to address some of the biggest challenges the world faces. This support helps innovators and innovative businesses to start, scale and stay here in Queensland, where they will strengthen the economy and create new jobs.

Partnerships with the Queensland Innovation Living Lab, the City of Moreton Bay and Urban Utilities will open new opportunities in 2025 for Queensland's innovators and innovative businesses. In 2025, a three-year innovation partnership with the National Rugby League (NRL), including the NRL Magic Round Tech Showcase was launched.

Through continued investment of nearly \$5 million in the Ignite programs, including Ignite Ideas, Ignite Spark and Ignite+, the Government will support innovative businesses to bring new products and services to market, and provide tailored business support to accelerate their growth and global reach.

A world-class ecosystem needs to build new international partnerships to accelerate the development and application of Queensland's science and innovation. In 2025-26, \$1.821 million has been allocated for strategic international science partnerships that leverage external resources from domestic and international research, industry, and government partners.

The Queensland Government is investing \$25.3 million in science-based innovation in 2025-26 for programs in quantum and advanced technologies. Through the Research Infrastructure Co-investment Fund \$5 million will be invested in 2025-26 to progress projects in priority areas including critical minerals, quantum, biomedical and energy.

\$1.5 million will be expended in 2025-26 as part of the \$7 million Regional University Industry Collaboration program, helping to break down barriers to commercialisation in Queensland's regions, through supporting small to medium enterprises to partner with regional universities on joint projects.

The Government is continuing to engage Queenslanders of all ages in science, inspiring young people to study science and supporting talented science educators. The 2025 Engaging Science Grants program awarded \$500,000 across 28 projects, supporting STEM related events and activities.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 11

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to the SDS, including page 1, will the Minister advise the current total land area of Queensland's Protected Area Estate separated into public and private protected area totals, and broken down by tenure type?

ANSWER:

Queensland currently has 14.86 million hectares of protected areas (as at 24 July 2025).

The current area represents 8.59 per cent of Queensland's landmass, the lowest proportion of any state or territory in Australia. The former government committed to protecting 17 per cent of Queensland but, over nearly a decade, delivered only around one per cent growth.

A breakdown of the public and private protected area totals, by tenure types, is provided below:

CATEGORY	AREA (HECTARES)* *Rounded
Protected Area (Public)	
National Park (Scientific)	53,191
National Park	6,858,113
National Park (Aboriginal Land)	79,707
National Park (Cape York Peninsula Aboriginal Land)	2,651,272
Conservation Park	93,553
Resources Reserve	127,512
Total Protected Area (Public)	9,863,348
Protected Area (Private)	
Special Wildlife Reserve	64,407
Nature Refuge	4,930,731
Coordinated Conservation Area	2,121
Total Protected Area (Private)	4,997,259

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 12

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 5 of the SDS and protected areas, on 1 June 2025 the Crisafulli Government announced the addition of more than 8,700 hectares to Queensland's national parks and nature refuges. Will the Minister provide:

- a. breakdown of the “more than 6,550 hectares” (referenced in the media release of 1 June 2025) to be added to the State's national park conservation area by name, tenure and whether these transfers commenced prior to 26 October 2024; and
- b. in respect of the 2,150 hectares/18 new nature refuges, how many of these conservation agreement negotiations commenced prior to 26 October 2024 by overall number and land size?

ANSWER:

- a. A breakdown of the additions to the State's national park conservation area is provided below:

PROTECTED AREA	ADDITION (HECTARES)
Curtis Island National Park	431
Danbulla National Park	25
Girramay National Park	5
Girringun National Park	53
Japoon National Park	1
Maalan National Park	5
Malbon Thompson Range National Park	5,953
Millstream Falls National Park	62
Tully Falls National Park	46
Tully Gorge National Park	2

- b. These 18 new nature refuges were gazetted by the Crisafulli Government.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 13

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 5 of the SDS and protected areas, under the former Miles Labor government, nearly 1 million hectares of land was delivered for future national parks as the Protected Area Strategy. Will the Minister advise on the status of the tenure upgrades to national park on the following major acquisitions, including the dates at which each tenure upgrade occurred or is expected to occur:

- a. Bramwell/Richardson Station
- b. Melrose Station
- c. Tonkoro Station
- d. Vergemont Station; and
- e. Kendall River Station?

ANSWER:

All tenures have been purchased.

The dedication of land at Bramwell/Richardson Stations and Kendall River Station will occur once negotiations on relevant Indigenous Land Use Agreements (ILUA) are complete.

The owner of land at Melrose and Tonkoro Stations was granted a Licence Deed to transition their agribusiness interests away from the property. Dedication as a national park will occur once these arrangements conclude.

Work to progress the dedication of land at Vergemont Station is underway.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 14

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 9 of the SDS and the Science service area within the department, the LNP did not release a Science policy, or platform, prior to the election. Will the Minister outline the Government's priorities, programs and any funding allocations and milestones for this vital service area?

ANSWER:

The Crisafulli Government is committed to backing science in Queensland.

The Crisafulli Government is currently focused on engaging with key stakeholders to shape and better manage science policy going forward. These include universities, research institutes, industry, businesses and place-based organisations.

In 2025-26, the Queensland Government is continuing its substantial support for science to discover solutions and drive prosperity in Queensland.

Programs, funding allocations and milestones include:

- \$5 million in 2025-26 from the \$15 million Research Infrastructure Co-investment Fund to progress projects in priority areas including critical minerals, quantum, biomedical and energy;
- \$1.5 million in 2025-26 from the \$7 million Regional University Industry Collaboration program which aims to increase industry engagement and commercialisation in regional Queensland by connecting Small to Medium Enterprises with regional universities to undertake collaborative projects, supported by business-matched vouchers of up to \$50,000;
- \$1.075 million in 2025-26 for the Science into Industry Co-investment Program including support for the \$238 million Solutions for Manufacturing Advanced Regenerative Therapies Cooperative Research Centre, known as the SMART CRC;
- \$1.821 million in 2025-26 for strategic international science partnerships that leverage external resources from domestic and international research, industry and government partners including the Queensland-Germany Bioeconomy Collaborative Science Program, the Queensland-Bavaria Collaborative Research Program, the Queensland-Chinese Academy of Sciences Collaborative Science Fund and the Queensland-Smithsonian and Queensland-Cooper Hewitt Fellowships (USA);
- \$25.3 million in 2025-26 for programs across quantum and advanced technologies sectors; and

- the 2025 Engaging Science Grants program awarded \$500,000 across 28 projects, receiving grants of up to \$20,000 to support a range of STEM related events and activities that engage students and communities with scientists and provide an opportunity for participation in science-based activities.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 15

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to page 10 of the SDS and Advance Queensland, the LNP did not release an Innovation policy or platform prior to the election. Will the Minister outline:

- a. the Crisafulli Government's priorities for innovation in Queensland; and
- b. whether the Government remains committed to the former Miles Labor Government's Advance Queensland – Innovation for a Future Economy 2022–2032 Roadmap and all its related grant programs and initiatives; and
- c. outline any changes made since 26 October 2024 to Advance Queensland programs, including any changes to funding or milestones.

ANSWER:

- a. The Crisafulli Government is committed to enabling the growth of a world-class, connected and sustainable innovation ecosystem in Queensland. In 2025-26, this will include partnerships that connect customers with Queensland innovations, support for innovative businesses to bring new ideas and products closer to market, and initiatives that deliver a better lifestyle through a stronger economy.
- b. The Crisafulli Government recognises innovation as a driver of productivity, competitiveness and prosperity in the State and the importance of creating the right environment for our innovators to grow their ideas, businesses, and highly skilled workforces here in Queensland. In 2025-26, the Government will spend \$100.186 million on the Innovation service area, including support for new activities and new partnerships, and milestone payments under existing programs and initiatives.

As part of a refresh of support for innovation and science in the State, the Government will consult with stakeholders in the innovation ecosystem to understand their needs, their challenges and the opportunities they see, to ensure investments are being made where it matters most.

- c. In 2025-26, ongoing funding will support new activity under the following innovation initiatives: Corporate Innovation Network including the Private Sector Pathways Program; Ignite programs; Backing Female Founders including the new Female Founders Investment Readiness Pilot; and South East Queensland Innovation Economy Fund which is jointly funded by the Australian Government.

Funding committed to date will also see the First Nations Innovation Acceleration Program and Regional Enablers Program continue to be delivered in 2025-26 under existing contractual commitments.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 16

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to Page 51 of Budget Paper 4 – Budget Measures – will the Minister advise, in relation to the *Connecting Queensland* fund as part of the *Destination 2045* tourism plan:

- a. total fund amount
- b. expected date of Round 1
- c. eligibility criteria; and
- d. list of regional locations to be supported (routes, including carrier)?

ANSWER:

The Crisafulli Government is backing tourism operators by bringing more domestic and international visitors to Queensland and making it easier to get them out into our regions.

The Connecting Queensland Fund (CQF) is a partnership with the private sector to secure more direct international and domestic flights into and around Queensland and to rebuild and grow Queensland's visitor economy with improved domestic connections to regional tourism attractions. This will provide more seats, more visitors, and support more jobs while also providing additional freight capacity for Queensland produce and other exports.

In relation to the specific details requested:

- a. The CQF is a new investment of \$75 million. This builds on the existing Attracting Aviation Investment Fund and takes the Crisafulli Government's total support for aviation to nearly \$130 million over the next four years.
- b. The CQF is a rolling fund, so there are no specified rounds for funding. Proposals are assessed as they are received within the timeframes set out in the funding framework.
- c. Eligibility criteria will be released when applications open.
- d. As this is an application-based program, it is not possible to provide a predetermined list of regional locations and carriers to be supported. Applications for funding support will be developed by Queensland's airports in collaboration with airlines, and submitted to the Department of the Environment, Tourism, Science and Innovation and Tourism and Events Queensland for assessment.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 17

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

Will the Minister provide a full list of all grant programs administered by the Department of the Environment, Tourism, Science and Innovation, including for each grant:

- a. current name of grant
- b. former name of grant (if changed since 1 November 2024)
- c. date of first round
- d. grant amount
- e. eligibility criteria (including noting any changes that have been made since 1 November 2024)
- f. total amount expended to date
- g. total applications for the grant (by financial year since first round)
- h. total successful applications for the grant (by financial year since first round); and
- i. current status/round.

ANSWER:

The information requested by the Committee is broad with no specific timeframe identified. The Department of the Environment, Tourism, Science and Innovation (the department) has several grant programs that span numerous years. In addition, the information requested is not centrally located with grant programs being managed across multiple systems and areas of the department. Gathering the required information would place unreasonable research requirements on the department.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 18

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With reference to Page 21 of the Service Delivery Statement – will the Minister advise total funding in (a) 2025-26 and (b) across the Forward Estimates to be provided directly or indirectly to Regional Tourism Operators and Non-Government Organisations to hold events across Queensland, broken down by fund name/type, region, and administering agency (e.g. Tourism and Events Queensland, Department of Environment, Tourism, Science and Innovation)?

ANSWER:

The Crisafulli Government has an ambitious vision to attract world-class events to Queensland as part of *Destination 2045: Delivering Queensland Tourism Future*. Destination 2045 aims to increase the value of Queensland's events calendar to \$4 billion, including a \$2 billion regional events calendar.

A fundamental part of this increased investment was rectifying the previous government's funding cliffs for the two agencies referenced in the question. Under the previous government, funding for the Tourism division of the department was set to decrease from \$160 million in 2024-25 to just \$7.6 million in 2028-29. Similarly, funding for Tourism and Events Queensland was set to be cut from \$146.6 million in 2024-25 to \$52.9 million in 2027-28.

Through the 2025-26 State Budget, \$100 million over four years has been allocated to support event attraction, including mega and strategic events and additional support for business and regional events.

The Queensland Government cannot share total mega and strategic event funding or major and business event investment funding, as this involves both the disclosure of commercial-in-confidence information and the risk of undermining Queensland's competitiveness. Making information public may inadvertently put Queensland's negotiating position at risk should other organisations or departments become aware of investment levels.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 19

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With additional staffing and funding for the QPWS of \$85 million (SDS, p. 2), can the Minister advise how this will be used to improve Noosa region protected areas, and advise:

- a. the timeline for the release of the Coolooloola Recreation Area (CRA) Management Plan and details of any funding allocated to action recommendations
- b. what additional resourcing, including staffing numbers, are allocated for Noosa National Parks for the identified risks of fire, visitor impacts and invasive flora and fauna
- c. what funding has been allocated to specific strategies designed to manage increased visitor number, including drones for monitoring?

ANSWER:

The Crisafulli Government's first budget lays to the foundations for a fresh start and delivers exactly what we said we would do.

That is why the 2025-26 Budget supports our commitment of \$84.6 million over five years to the *More Rangers, Better Neighbours* program for Queensland's national parks – the largest single additional investment ever into the Queensland Parks and Wildlife Service's ranger workforce.

- a. The Great Sandy National Park (Coolooloola Section) Management Plan is currently being considered. The Management Plan, when gazetted, will be publicly available.
- b. & c. The Crisafulli Government is ensuring that Noosa's National Parks are managed properly and are able to be responsibly shared with all Queenslanders.

FTEs and funding allocations from the new *More Rangers, Better Neighbours* program will also be invested in 2025-26 delivering fire management activities in the Coolooloola and Noosa areas. A positive recent example is a joint planned burn undertaken by the Queensland Parks and Wildlife Service, Queensland Fire Department and Noosa Council in Noosa National Park in preparation for the forthcoming fire season.

HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE

Estimates Pre-Hearing Question on Notice

No. 20

Asked on Friday, 18 July 2025

THE HEALTH, ENVIRONMENT AND INNOVATION COMMITTEE ASKED MINISTER FOR THE ENVIRONMENT AND TOURISM AND MINISTER FOR SCIENCE AND INNOVATION (HON A POWELL)—

QUESTION:

With the Government allocating \$446 million for the Destination 2045 Plan (SDS, p. 2), can the Minister provide details on the 45 ecotourism projects, including allocations of funding for each and how the Plan will mitigate the impacts of increased tourism including what funds have been allocated for this, and what allocations have been made for grant funding to organisations and local governments to develop and promote regenerative tourism?

ANSWER:

The Crisafulli Government has an ambitious vision to make Queensland a world leader in ecotourism under the *Destination 2045: Delivering Queensland's Tourism Future* plan (Destination 2045), ensuring that we continue to protect our natural environment and responsibly share it with the world.

The 2023 *Growing ecotourism in Queensland* report from the Queensland Audit Office found that the previous government had only approved two ecotourism projects between 2015 and 2023.

That is why the Crisafulli Government's *45 by 45: Getting Queensland Ecotourism Moving (45 by 45)* plan will kickstart Queensland's ecotourism future.

All projects to be delivered under *45 by 45* are yet to be fully identified as these are to be delivered over the next 20 years, in close consultation with industry. Funding for the following eco-tourism projects was allocated in the 2025-26 State Budget:

- \$5 million over two years for Whitsundays Skyway;
- \$15.5 million over four years for Smithfield Mountain Biking Trails;
- \$4.9 million over four years for Palm Island Walking Trails;
- \$19.7 million over two years for the Wangetti Trail (bringing the total funding allocated so far to \$59.1 million, including \$8 million from the Australian Government);
- \$1.3 million in 2025-26 for Springbrook National Park visitor facilities (with total overall funding of \$17 million allocated for this project); and
- \$1.1 million in 2025-26 for Crater Lakes National Park – Lake Eacham Day Use area (total overall funding of \$10.3 million allocated to this project).

Consideration of the balance between conservation and tourism development was key to the development of Destination 2045 and Queensland's ecotourism policy *45 by 45*. The policy sets out guiding principles for ecotourism development and a clear definition in accordance with the *Nature Conservation Act 1992*. All ecotourism projects must go through the required environmental assessments.

Correspondence

- 1. Minister for Health and Ambulance Services – Providing correction to information provided in the Estimates hearing held on 1 August 2025**



The Honourable Tim Nicholls MP
Minister for Health and Ambulance Services

1 William Street Brisbane Qld 4000
GPO Box 48 Brisbane
Queensland 4001 Australia
Telephone +61 7 3035 6100

C-ECTF-25/16298

Mr Rob Molhoek MP
Chair
Health, Environment and Innovation Committee
Parliament House
George Street
BRISBANE QLD 4000

06 AUG 2025

Email: HEIC@parliament.qld.gov.au

Dear Chair

I write to you regarding the Estimates Hearing for the Health, Environment and Innovation Committee on 1 August 2025. Upon reviewing the Hansard Proof from the Hearing, I have identified the following error, and I wish to correct the record.

The below clarification relates to the transcript on page six of the Hansard Proof in relation to the question from the Honourable Mark Bailey MP, Member for Miller, regarding patients on the waitlist for specialist outpatient care now compared to last year.

The response by Dr David Rosengren, Director-General, Queensland Health was regarding the number on the waitlist *ready for care*. Dr Rosengren misspoke during the Hearing and the reference to "*The increase in patients on the outpatients list compared to the same time last year was 29,736. I would note that the previous increase on the same time from the previous year was 32,530. The year prior to that was an increase of 47,833, and the year before that was an increase of 87,143*"; should be corrected to:

Attributable to Dr Rosengren:

The increase in patients on the outpatients list compared to the same time last year was 28,087. I would note that the previous increase on the same time from the previous year was 35,364. The year prior to that was an increase of 51,792, and the year before that was an increase of 91,103.

It would be appreciated if the final Hansard transcript could be amended to include the correct reference.

Please do not hesitate to contact my Chief of Staff, Ms Belinda McEniery, on telephone [REDACTED], should you require any further information.

Yours sincerely

Tim Nicholls MP
Minister for Health and Ambulance Services
Member for Clayfield

Documents tabled at hearing 1 August 2025

Queensland Health and Ambulance Services

1. Queensland Health, Ministerial Briefing Note (December 2024), Subject: Real-time Data 100-Day Project - Open Hospitals Website Concept, tabled by Mr Joe Kelly MP, Member for Greenslopes
2. Media Release, ACEM statement on the Queensland Health 24-hour stay ED Directive, tabled by Hon Tim Nicholls, Minister for Health and Ambulance Services
3. Facebook post by the Hon Tim Nicholls MP (July 2025), tabled by Mr Joe Kelly MP, Member for Greenslopes
4. Document titled, Snapshot of the latest 2025 influenza vaccination coverage* data in Australia, tabled by Mr Joe Kelly MP, Member for Greenslopes
5. Document titled, Cancer by state and territory: Incidence and Mortality, tabled by Mr Joe Kelly MP, Member for Greenslopes
6. Page from Our lifestyle spotlight | Report of the Chief Health Officer Queensland, Sun safety, Investing in skin cancer prevention, tabled by Mr Joe Kelly MP, Member for Greenslopes
7. Social Media post by Hon Mark Bailey MP (July 2025), tabled by Hon Tim Nicholls, Minister for Health and Ambulance Services
8. Letter to Hon Mark Bailey MP from Health Service Chief Executive, Darling Downs Hospital and Health Service (29 July 2025), tabled by Hon Tim Nicholls, Minister for Health and Ambulance Services
9. Photo, tabled by Mr Joe Kelly MP, Member for Greenslopes
10. Emails about Women and Girl's Health Strategy (May 2025), tabled by Mr Joe Kelly MP, Member for Greenslopes
11. Confidential – cabinet in confidence document, extract showing 'Proposed Long Form Budget Outcomes' including funding for flu vaccination in 2024 (2 pages), tabled by Mr Joe Kelly MP, Member for Greenslopes
12. Photo, tabled by Hon Tim Nicholls, Minister for Health and Ambulance Services
13. Pre-hearing Question on Notice 2 (containing corrections), tabled by Hon Tim Nicholls, Minister for Health and Ambulance Services
14. Pre-hearing Question on Notice 12 (containing corrections), tabled by Hon Tim Nicholls, Minister for Health and Ambulance Services

Environment, Tourism, Science and Innovation

1. Letter to the Director-General of UNESCO from the Hon Tanya Plibersek MP, Federal Minister for the Environment and water (May 2023), tabled by Mr Joe Kelly MP, Member for Greenslopes
2. Article titled United Nations representatives urge Queensland parliament to vote down 'adult crime, adult time' laws (May 2025), tabled by Mr Joe Kelly MP, Member for Greenslopes
3. Article titled Tourist tax flagged as potential revenue raiser for tourism industry (June 2022), tabled by Mr Joe Kelly MP, Member for Greenslopes
4. Article titled Qld bed tax push by Brisbane, Gold Coast, Cairns, Whitsunday councils (April 2025), tabled by Mr Joe Kelly MP, Member for Greenslopes

SUBJECT: Real-time Data 100-Day Project - Open Hospitals Website Concept

ACTION REQUIRED BY - 10 December 2024, to allow website platform build to continue and to enable critical project delivery date to be achieved.

RECOMMENDATION

It is recommended the Minister:

1. **Approve** the design concepts for the proposed open hospitals website platform (Attachment 1).

Approved / ~~Not Approved~~

Comments:

Can the "number of treatment spaces" be clearly explained as the ~~number~~ capacity of the ED ~~and~~ I am concerned a consumer will see for eg "No. of patients waiting 12" and reference "No. of treatment spaces" and think there is 12 available treatment spaces when in fact all treatment spaces are occupied. Please refer final design book.

P.S. Is the "Emergency" warning bold/big enough.

Signed.....

Date.....

Hon Tim Nicholls MP, Minister for Health and Ambulance Services

Author Name: Anita Rayner Position: Director Performance Partnerships Unit: System Performance Branch: Tel No: Irrelevant Email address: Irrelevant	Cleared by (Dir/Snr Dir) Name: Brent Knack Position: A/Senior Director Branch: System Performance Branch: Tel No: Irrelevant Email address: Irrelevant	Content verified by (DDG/CE) Name: Naomi Hebson Position: A/Deputy Director-General Division: Healthcare Purchasing and System Performance Tel No: Irrelevant Email address: relevant@health.qld.gov.au Date Verified: 6/12/2024	Director-General Endorsement Name: Dr David Rosengren Signed Date 7/12/2024
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Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber

Tabled Doc No: 1

Tabled by: Mark Barker Joe Kelly

Committee/Inquiry Secretary: Kellie Jones

Date: 11/12/25

BACKGROUND AND ISSUES

1. The Premier of Queensland has made the following commitments relating to Queensland Health's performance reporting:
 - 1.1 unlocking transparent real-time hospital data within 100 days;
 - 1.2 providing Queenslanders with the truth about what's happening in Queensland hospitals, as it happens;
 - 1.3 delivering accountability for wait times, the number of patients waiting at Emergency Departments, and how many hospital beds are available; and
 - 1.4 using real-time data to drive resources and frontline staff to where they are needed.
2. Further detail is provided in Attachment 2 and 3.

SENSITIVITIES/RISKS

3. Condensed project timelines restrict ability to amend proposed design prior to scheduled release date. Non-critical design amendments will require deferment following initial go live.
4. Publishing near real time data can help hospitals monitor and respond to increases in patient flow but can also influence patient behaviour. Patients may make misinformed decisions in emergency situations based on perceived waiting times at local health facilities or may misinterpret their closest facility from those displayed.
5. Further detail is provided in Attachment 2 and 3.

RESOURCE/FINANCIAL IMPLICATIONS

6. Non-recurrent allocation of \$0.77 million from the Corporately Managed Budget in financial year 2024-25 is associated with implementation of real-time hospital data reporting, including planning, project delivery, consumer engagement, and technical development.
7. Recurrent fiscal year allocation to support ongoing management and business-as-usual activities for the reporting of real-time data is still being determined.

RESULTS OF CONSULTATION

8. Health Consumers Queensland have been engaged in the concept design of the Open Hospitals website to ensure the information is relevant to consumers and easy to understand. Consumers will further be involved in user acceptance testing of the staging platform when the build stage is finalised.
9. Strategic Communications Branch have been consulted in the design of the website to ensure consumer-associated risks can be mitigated. An associated media and communications plan is currently being drafted.
10. Queensland Health legal team are engaged to review website and provide guidance regarding appropriate wording and published disclaimers.
11. Consultation is occurring with jurisdictions who publish similar websites to determine lessons learnt.
12. A Public Reporting Governance Committee was established on 15 November 2024. The committee comprises of members and advisors, including:
 - 12.1. Healthcare Purchasing and System Performance Division;
 - 12.2. eHealth Queensland;
 - 12.3. Office of the First Nations Health Officer;
 - 12.4. Statistical Services Branch;
 - 12.5. Corporate Services Division;
 - 12.6. Clinical Excellence Queensland;
 - 12.7. Clinical Planning & Service Strategy Division;
 - 12.8. Strategy, Policy & Reform;
 - 12.9. Office of the Chief First Nations Health Officer;
 - 12.10. Queensland Ambulance Services;
 - 12.11. Health Consumers Queensland; and
 - 12.12. Hospital and Health Service Chief Executive and Chief Operating Officer Representatives.

ATTACHMENTS

13. Attachment 1. Open Hospitals Website Concepts – updated 5 December 2024
- Attachment 2. Additional background and issues

Attachment 3. DRAFT About the Data – Queensland Health Open Hospitals v1 – 20241205.

RTI Release

Queensland
Government

Open Hospitals

Emergency department waiting times in major Queensland facilities

Find wait times for Queensland's major emergency departments
and minor injury and illness clinics

Search by suburb or hospital name



Search

Or



Use my current location



We've listed major emergency departments and treatment centres. Your nearest facility might not be listed.
[Find your nearest hospital or centre.](#)

**In an emergency call Triple Zero (000)**

Don't wait if you have chest pain, difficulty breathing or severe bleeding.



Call 000

Unsure what health service you need?

You can help our emergency department by using other services if you need medical care but it's not life threatening.

When to go to Emergency

If you or someone with you is having a medical emergency, call Triple Zero (000) immediately and ask for an ambulance. View information about how to access emergency services and when to go to Emergency below.

[When to go to Emergency](#)

Symptom checker

Use healthdirect's online symptom checker if you're not feeling well. Answer some questions about your symptoms and get advice on whether to see a doctor, go to hospital or call an ambulance. It is available online at any time.

[Symptom checker](#)

13 HEALTH (13 43 25 84)

If you're not sure if your medical condition requires emergency care, call 13 HEALTH (13 43 25 84). Registered nurses are available 24 hours a day. They will advise you on what to do and if you need to go to a GP, pharmacy or emergency department.

Available 24/7

[Call 13 HEALTH \(13 43 25 84\)](#)

Disclaimer

The information on this website is a general guide only. While it's as accurate and up-to-date as possible, Queensland Health cannot promise that patients will be seen in a specific order or within a particular time frame.

Last Updated: November 2021

Open Hospitals

Contact us

Get in touch for enquiries, feedback, complaints and compliments.

Phone: 13 QGOV (13 74 68)

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Acknowledgement of Country

Queensland Government acknowledges the Traditional Owners of the land and pays respect to Elders past, present and future.

© The State of Queensland 1995-2024 (Organisation)



Open Hospitals

[Back to search](#)

Royal Brisbane and Women's Hospital

Emergency Department

We treat patients in order of urgency on arrival.

- Address: Butterfield Street, Herston Qld 4029
- Updates every 15-30 mins. Last updated 04 February 2025 10:45:34 AM

Median waiting time - all patients

45 minutes

Calculated over the past 2hrs for all patients

In an emergency call Triple Zero (000)

Don't wait if you have chest pain, difficulty breathing or severe bleeding.

Call 000

Number of patients currently waiting

12

Triaged and waiting to receive treatment

Number of treatment spaces

24

Updated monthly. Last updated 01/02/2025

Median waiting time - non critical

30 minutes

Calculated over the past 2hrs for category 4 and 5 patients

Waiting time at nearby facilities

We've listed major emergency departments and treatment centres. Your nearest facility might not be listed. [Find your nearest hospital or centre.](#)

Closest hospitals to Herston 4029

[Change suburb](#)

Virtual Emergency Care Service (statewide)

Online

[Redcliffe Hospital](#)

45 min median wait

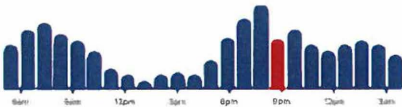
8.5 km away

[Eight Mile Plains Satellite Hospital](#)
Minor Injury and Illness Clinic

15 min median wait

10.5 km away

Patients currently waiting compared to average



Contact information

[Hospital website](#)

Phone 07 3646 8111

13 HEALTH (13 43 25 84)

If you're not sure if your medical condition requires emergency care, call 13 HEALTH (13 43 25 84). Registered nurses are available 24 hours a day. They will advise you on what to do and if you need to go to a GP, pharmacy or emergency department.

Available 24/7

Call 13 HEALTH (13 43 25 84)

Open Hospitals

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Queensland
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Open Hospitals

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Minor Injury and Illness Clinic

Eight Mile Plains Satellite Hospital

We treat patients in order of urgency on arrival.

- 🕒 Open: 8 am to 10 pm, 7 days a week
- 📍 Address: Butterfield Street, Herston Qld 4029
- 🔄 Updates every 15-30 mins. Last updated 04 February 2025 10:45:34 AM

🚨 In an emergency call Triple Zero (000)

Don't wait if you have chest pain, difficulty breathing or severe bleeding.

📞 Call 000

🚑 Satellite hospitals are for urgent (but not life threatening) conditions

Examples of urgent but not life threatening conditions:

- an adult with a high temperature
- eye injuries
- broken bones
- an elderly person or pregnant person with food poisoning
- sudden and severe headache
- severe stomach pains.

Median waiting time - all patients

45 minutes

Calculated over the past 2hrs for all patients

Median waiting time - non critical

30 minutes

Calculated over the past 2hrs for category 4 and 5 patients

Patients currently waiting compared to average

Number of patients currently waiting

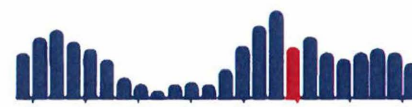
12

Triaged and waiting to receive treatment

Number of treatment spaces

24

Updated monthly. Last updated 01/02/2025



Waiting time at nearby facilities

- 📍 We've listed major emergency departments and treatment centres. Your nearest facility might not be listed. [Find your nearest hospital or centre.](#)

Closest hospitals to **Eight mile plains 4112**

[Change suburb](#) ▾

[Virtual Emergency Care Service \(statewide\)](#)

📺 Online

[Redcliffe Hospital](#)

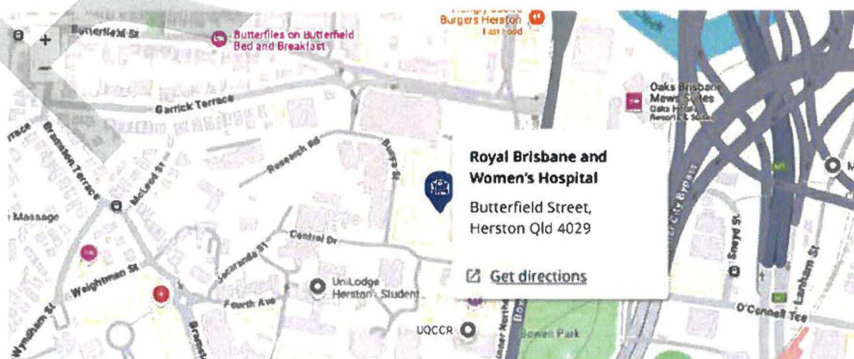
🕒 45 min median wait

📍 8.5 km away

[Eight Mile Plains Satellite Hospital](#)
Minor Injury and Illness Clinic

🕒 15 min median wait

📍 10.5 km away



Contact information

🌐 [Hospital website](#)

📞 Phone **07 3646 8111**

13 HEALTH (13 43 25 84)

If you're not sure if your medical condition requires emergency care, call 13 HEALTH (13 43 25 84). Registered nurses are available 24 hours a day. They will advise you on what to do and if you need to go to a GP, pharmacy or emergency department.

🕒 Available 24/7

📞 [Call 13 HEALTH \(13 43 25 84\)](#)



Open Hospitals

[Back to search](#)

Queensland Children's Hospital

Emergency Department

We treat patients in order of urgency on arrival.

- Address: 501 Stanley Street, South Brisbane Qld 4101
- Updates every 15-30 mins. Last updated 04 February 2025 10:45:34 AM

In an emergency call Triple Zero (000) Don't wait if you have chest pain, difficulty breathing or severe bleeding. [Call 000](#)

Who can use this service?

We provide 24 hour emergency care for infants, children and young people from birth up until their 16th birthday.

We also provide care and support for young people up to 18 years who:

- are currently under the care of a medical team at Queensland Children's Hospital for a pre-existing chronic condition and seeking emergency care for the same condition
- have a mental health condition and need urgent medical attention.

Number of patients currently waiting

12

Triage and waiting to receive treatment

Number of treatment spaces

24

Updated monthly. Last updated 01/02/2025

Waiting time at nearby facilities

We've listed major emergency departments and treatment centres. Your nearest facility might not be listed. [Find your nearest hospital or centre.](#)

Closest hospitals to **Eight mile plains 4112**

[Change suburb](#)

[Virtual Emergency Care Service](#)

Online

[Redcliffe Hospital](#)

45 min median wait

8.5 km away

[Eight Mile Plains Satellite Hospital](#)
Minor Injury and Illness Clinic

15 min median wait

10.5 km away



Median waiting time - all patients

45 minutes

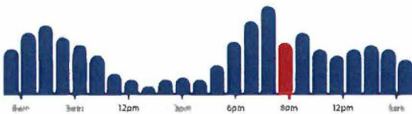
Calculated over the past 2hrs for all patients

Median waiting time - non critical

30 minutes

Calculated over the past 2hrs for category 4 and 5 patients

Patients currently waiting compared to average



[Hospital website](#)

[Phone 07 3646 8111](#)

13 HEALTH (13 43 25 84)

If you're not sure if your medical condition requires emergency care, call 13 HEALTH (13 43 25 84). Registered nurses are available 24 hours a day. They will advise you on what to do and if you need to go to a GP, pharmacy or emergency department.

Available 24/7

[Call 13 HEALTH \(13 43 25 84\)](#)

BACKGROUND AND ISSUES

1. There is currently no platform existing which publishes real-time Queensland hospital data. The Queensland Hospital Performance website (www.performance.health.qld.gov.au) currently publishes quarterly data on 106 health facilities across the state.
2. A Queensland Health project team for the Real Time 100-Day initiative has been established to design and implement a public-facing website platform, called 'Queensland Health Open Hospitals', designed to meet the above commitments.
3. Following subject matter expert and consumer consultation, the website design has now been finalised (Attachment 1).
4. To meet critical project timeframes, website technical development has commenced and the ability to amend the proposed design is restricted until following the proposed go-live date of 3 February 2025, when additional changes can be applied if required.
5. The new website will publish near real-time data for the 25 major Queensland public hospital ED and 7 Minor Injury and Illness Clinics across Queensland for the following measures:
 - 6.1 patients currently waiting: The total number of patients recorded as triaged waiting to be seen. This measure can be refreshed at ~15-minute intervals, with data sourced from Queensland Health ED clinical systems.
 - 6.2 two hour median waiting time – all categories: 50 per cent of all patients seen within the two hours up to the latest data refresh were seen with this timeframe. 50 per cent of patients waited longer than this. This measure can be refreshed ~15-minute intervals, with data sourced from Queensland Health ED clinical systems.
 - 6.3 Two hour median waiting time – non-urgent patients: 50 per cent of non-critical (ATS4 and ATS5) patients seen within two hours up to the latest data refresh were seen within this timeframe. 50 per cent of patients waited longer than this. This measure can be refreshed at ~15-minute intervals, with data sourced from Queensland Health ED clinical systems.
 - 6.4 Total number of treatment spaces: The total number of treatment spaces, which are defined as a location within an ED or a Minor Injury and Illness Clinic where patients receive clinical care, treatment, or monitoring. This number will be validated by applicable Hospital and Health Services (HHS) and is not generally subject to change. Existing processes will be reviewed following go-live to ensure accuracy of the reported number of treatment spaces is maintained ongoing.
 - 6.5 Number of patients currently waiting (Busyness/Activity indicator): The total number of people in all ATS categories waiting in an ED or a Minor Injury and Illness Clinic at the current hour, against the historical average (displayed over a 24 hour period). This measure is able to be refreshed hourly, with data sourced from Queensland Health clinical systems.
6. Further detail regarding the measures to be published will be available to consumers via a link to an 'about the data' information sub-page or document (Attachment 3).
7. The website is not intended to provide guidance on which facility to attend in an emergency and will not display data or information about out-of-scope facilities. To manage consumer risk, the website will provide links to additional health services including:
 - 8.1 Triple Zero (000);
 - 8.2 Queensland Government's 'When to go to Emergency' website;
 - 8.3 Queensland Government's '13 HEALTH' phone service;
 - 8.4 Healthdirect's 'Symptom Checker';
 - 8.5 Healthdirect's 'Service Finder'; and
 - 8.6 Queensland Health's 'Virtual Emergency Care Service' (always appears as second closest search result).

8. The Real Time 100-day project is currently on track for delivery, with an anticipated public launch date of the Open Hospitals website of 3 February 2025.

SENSITIVITIES/RISKS

9. Proposed project timelines are scheduled to conflict with the 2024 festive period. eHealth Queensland imposes an annual three-week moratorium period where ICT resourcing support and technical work is restricted.
10. Quality of data may be lower than currently acceptable standard for performance reporting. Operational data has not undergone validation and, due to operational nature, it is subject to data entry error and potential outages / data feed errors.
11. Data will need to be aggregated to minimise validation concerns – most other jurisdictions currently only report Australasian Triage Scale 4 and 5 for ED information.
12. To maintain anonymity and to ensure the reliability of calculations, business rules will need to be clearly defined, and documented thresholds applied when occupancy and waiting times are not displayed.

About the Data – Further Information to the Open Hospitals Website

Reported Facilities

This website currently publishes near real-time information for 25 Queensland public hospital emergency departments and 7 Minor Injury and Illness Clinics across Queensland.

Facility Type	Facilities
Public Hospital Emergency Departments	<ul style="list-style-type: none"> • Bundaberg Hospital • Caboolture Hospital • Cairns Hospital • Gladstone Hospital • Gold Coast University Hospital • Gympie Hospital • Hervey Bay Hospital • Ipswich Hospital • Logan Hospital • Mackay Base Hospital • Maryborough Hospital • Mount Isa Hospital • Nambour Hospital • Princess Alexandra Hospital • QEII Jubilee Hospital • Queensland Children's Hospital • Redcliffe Hospital • Redland Hospital • Robina Hospital • Rockhampton Hospital • Royal Brisbane and Women's Hospital • Sunshine Coast University Hospital • The Prince Charles Hospital • Toowoomba Hospital • Townsville University Hospital
Minor Injury and Illness Clinics	<ul style="list-style-type: none"> • Bribie Island Satellite Hospital (Yarun) • Caboolture Satellite Hospital (Kabul) • Eight Mile Plains Satellite Hospital (Maroo-goodji-ba) • Kallangur Satellite Hospital (Kalangoor) • Redland Satellite Hospital (Talwalpin Milbul) • Ripley Satellite Hospital (Moodoombar Dabbil) • Tugan Satellite Hospital (Banyahrmabah)

About the Data – Further Information to the Open Hospitals Website

Definitions

Key terms are used within the Open Hospitals website to explain emergency department wait times, capacity, and activity levels.

Term	Definition
Median	The middle value in a sorted list of wait times, where 50% of patients waited less time and 50% waited more time. For these visualisations, it's calculated for patients seen within the 120 minutes prior to the latest data refresh.
Triage	<p>When an individual arrives at an Emergency department (ED) for treatment, a qualified triage nurse assesses how urgent their condition is and assigns a category according to the Australasian Triage Scale (ATS).</p> <p>There are five triage categories (1 to 5), where 1 is most urgent and 5 is least urgent. The triage system ensures people most in need of care are treated first. Patients are seen in order of medical priority and not in order of arrival at the hospital.</p>
Time seen	<p>The time seen refers to the earliest time at which the treating clinician or one of the below mentioned health professionals on duty in an Emergency department provides assessment or treatment, concluding the 'waiting time' for the patient. A treating clinician is classified as one of the following:</p> <ul style="list-style-type: none">• The treating Doctor or Senior Medical Officer (SMO)• The Triage Nurse, Clinical Assessment or Primary Nurse• Allied Health or social worker• Plaster technician.
Australasian Triage Scale (ATS) Categories	<p>Australasian Triage Scale (ATS) Categories:</p> <ul style="list-style-type: none">• ATS 1: Immediately life-threatening conditions requiring immediate attention• ATS 2: Imminently life-threatening conditions requiring attention within 10 minutes• ATS 3: Potentially life-threatening conditions requiring attention within 30 minutes• ATS 4: Potentially serious conditions requiring attention within 60 minutes• ATS 5: Less urgent conditions requiring attention within 120 minutes
Location Search Calculation	Distances are calculated using the haversine formula, which determines the shortest distance between two points on a sphere, accounting for the Earth's curvature. Results are ordered from closest to furthest based on the straight-line distance from your location to each facility.
Treatment Space Count	<p>The number of available ED treatment areas in each facility is counted and reported monthly, with each facility determining what constitutes a treatment space based on their local setup and operations.</p> <p>An ED Treatment Space is generally a location within the ED where patients receive clinical care, treatment, or monitoring. A treatment space may be a room, a trolley, or a chair.</p>

About the Data – Further Information to the Open Hospitals Website

Measures

Each measure applies to both the reported Emergency Departments and Minor Injury and Illness Clinics , with data sourced from Queensland Health Emergency Department clinical systems.

Measure	Definition
Patients Currently Waiting in the Emergency Department	<p>The total number of patients recorded as triaged and waiting to be seen in the Emergency department.</p> <p>Refresh interval: ~15 minutes Data source: Queensland Health Emergency Department clinical systems</p>
2-Hour Median Waiting Time - All Categories	<p>50% of all patients seen within the 2 hours up to the latest data refresh were seen within this timeframe. 50% of patients waited longer than this.</p> <p>Refresh interval: ~15 minutes Data source: Queensland Health Emergency Department clinical systems.</p>
2-Hour Median Waiting Time - Non-Urgent Patients	<p>50% of non-urgent (Category 4 & 5) patients seen within the 2 hours up to the latest data refresh were seen within this timeframe. 50% of non-urgent patients waited longer than this.</p> <p>Refresh interval: ~15 minutes Data source: Queensland Health Emergency Department clinical systems.</p>
Total Number of Emergency Department Treatment Spaces	<p>The total number of Emergency department (ED) treatment spaces. An ED Treatment Space is a location within the ED where patients receive clinical care, treatment, or monitoring. A treatment space may be a room, a trolley, or a chair.</p> <p>Refresh interval: TBC Data source: TBC</p>
Number of patients currently waiting (Busyness/Activity Indicator)	<p>The total number of people in all ATS categories waiting in an Emergency department or Minor Injury and Illness Clinic at the current hour, against the historical average (displayed over a 24 hour period).</p> <p>For the current hour, the graph records the number of people currently waiting, calculated as patients whose presentation time is before the most recently reported time AND their treatment has not started.</p> <p>For the historical average, each of the 24 hours depicted reports the number of people that were triaged and waiting for treatment in that hour, on the same day of week, in the same month, averaged over the past two years. The number of people is determined using triage time and treatment time.</p> <p>Refresh interval: Hourly Data source: TBC</p>

Note: Thresholds on all measures have been implemented during periods of low occupancy to prevent the identification of patients in waiting rooms, and to ensure results derived are statistically meaningful and reflective of the overall dataset. As a result, users may encounter data that is 'unavailable' where thresholds are not met.

About the Data – Further Information to the Open Hospitals Website

Links

Various links have been referenced throughout the Open Hospitals website that point consumers to external websites and other resources. Please refer to screenshots and references located in Appendix A.

Reference	Location on Open Hospitals website	Description	Linked resource
1	Landing page: Open Hospitals website When to go to Emergency	Queensland Government's When to go to Emergency	When to go to Emergency Health and wellbeing Queensland Government (www.qld.gov.au)
2	Landing page: Open Hospitals website Symptom Checker	healthdirect's Symptom Checker	https://www.healthdirect.gov.au/symptom-checker
3	Landing page: Open Hospitals website Facility page: Any Find your nearest hospital or centre	healthdirect's Service Finder	https://www.healthdirect.gov.au/australian-health-services
4	Landing page: Open Hospitals website Facility page: Any 13 HEALTH	Queensland Government's 13 Health Phone Service	https://www.qld.gov.au/health/contacts/advice/13health
5	Facility page: Any Virtual Emergency Care Services	healthdirect's Virtual Emergency Care Service	https://www.healthdirect.gov.au/australian-health-services/healthcare-service/brisbane-city-4000-qld/virtual-emergency-care-service-queensland-virtual-hospital/virtual-care-clinics/a87efc17-8078-4db3-8ba9-480b4a5e3bf9

Data Sources

Clinical information systems and enterprise data platforms that capture, process and provide near real-time hospital data shown on this website.

Source	Definition
Clinical Systems	<ul style="list-style-type: none"> Emergency Department Information System (EDIS) Integrated Electronic Medical Record (ieMR) FirstNet Queensland Health Enterprise Reporting Service (QHERS)
Source Systems Integration	<ul style="list-style-type: none"> Data is initially collected in clinical systems (EDIS, FirstNet) Data flows through QHERS for emergency department data collection Data is consolidated in the SPB data warehouse Data is then fed to the CHDE Open Data platform via an API for public display
Data Refresh Rates	<ul style="list-style-type: none"> Patient numbers and wait times: Updated every ~15 minutes Treatment space numbers: Updated monthly Historical data: Stored and used for busyness/activity trend indicators
Data Classifications	<ul style="list-style-type: none"> Based on the Information Security Classification assessment, this data is classified as non-sensitive for public release Data specifically excludes any personal or confidential patient information

Other Links

Additional resources to help you find the right healthcare service for your needs.

Source	Definition
Disclaimer	This website shows information for Queensland Health public hospital emergency departments and Minor Injury and Illness Clinics only. It does not include private hospital emergency departments, urgent care clinics, GP clinics, or other medical centres. For a complete list of healthcare options in your area, visit Find a health service Queensland Health .

This information was last updated on x month year

Queensland Health
MINISTERIAL BRIEFING NOTE

C-ECTF-24/21152
HPSP

SUBJECT: Real-time Data 100-Day Project - Review of proposed treatment spaces metric and emergency warning banners for the Open Hospitals website design concept

ACTION REQUIRED BY – 6 January 2025, to provide a timely response to the Minister's request for additional information.

RECOMMENDATION
It is recommended the Minister:

1. **Note** the updates to the Open Hospitals website concepts and 'about the data' website sub-page text in relation to treatment spaces metric and emergency warning banners.


Noted / Not Noted

2. **Note** the feedback from the Real Time Data Project Consumer Advisory Group Workshop on 5 December 2024, which was facilitated by Health Consumers Queensland (Attachment 1).

Noted / Not Noted

Comments:

Please confirm system will be able to handle a very high number of views/visits on commencement - in secure against a high level of service attack.

Signed. 

24.12.24.

Hon Tim Nicholls MP, Minister for Health and Ambulance Services

Author Name: Anita Rayner Position: Director, Performance Partnerships Unit: System Performance Branch: Tel No: Irrelevant Email address: Irrelevant@health.qld.gov.au Date Drafted: 23 December 2024	Cleared by (Dir/Snr Dir) Name: Brenton Simpson Position: Senior Director Branch: System Performance Branch: Tel No: Irrelevant Email address: Irrelevant@health.qld.gov.au Date Cleared: 23 December 2024 *Note clearance contact is also key contact for brief queries*	Content verified by (DDG/CE) Name: Karen Bayntun Position: Acting Deputy Director-General Division: Healthcare Purchasing and System Performance Tel No: Irrelevant Email address: Irrelevant@health.qld.gov.au Date Verified: 23 December 2024	Director-General Endorsement Name: Dr David Rosengren Signed  Date 23/12/2024
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BACKGROUND AND ISSUES The Real Time 100-day project is currently on track for delivery, with an anticipated public launch date of the Open Hospitals website of 3 February 2025.

2. The Minister for Health and Ambulance Services approved the Open Hospitals website design concept on 10 December 2024 (Attachment 2), with the following caveats:
 - 2.1 Number of treatment spaces to be clearly explained as the capacity of the ED; and
 - 2.2 Review of the 'emergency warning' text – to be more prominent.
3. Due to limited available space on the website and to conform with Web Accessibility Standards, further explanation regarding the calculation and scope of 'Treatment Spaces' has been included in the 'About the Data' consumer information sub-page (Attachment 3) which consumers will have the ability to link to from the main website.
4. Explanatory text regarding the treatment space metric has been updated as follows:
 - 4.1 A Treatment Space is defined as any space utilised in an Emergency Department or Minor Injury and Illness Clinic for treating a patient. This includes, for example, beds, chairs, and trolleys. Treatment Space data is based on current counts and may be subject to change over time for a variety of reasons, including the availability of staff, admitted and non-admitted patient care requirements, and any other operational factors.
 - 4.2 This measure relates to capacity and does not indicate whether these spaces are currently in use or occupied in real-time.
5. This design update aims to reduce the potential for consumers to interpret the number of Treatment Spaces displayed as a representation of current occupancy when viewed in conjunction with the more frequently refreshed 'near real-time' number of patients waiting.
6. Further to the Minister's feedback, the emergency warning has also been redesigned to appear more prominent to the consumer (Attachment 4).

SENSITIVITIES/RISKS

7. The Statistical Services Branch have advised that Treatment Spaces is not a centrally defined term within Queensland Health. The scope of Treatment Spaces is applied at the discretion of each HHS.
8. The Statistical Services Branch have advised that the underlying data reported for number of Treatment Spaces is based on current counts at the facility level and may change over time due to operational factors including but not limited to the availability of staff and admitted/non-admitted patient care. It is anticipated this information will be documented in the 'About the Data' information sub-page.
9. Queensland Health's Legal Services team are engaged to provide guidance on managing consumer risk, including provision of published disclaimers, and supporting text where relevant.

RESOURCE/FINANCIAL IMPLICATIONS

10. There are no resource (e.g. staffing/MOHR) or financial implications associated with this brief.

RESULTS OF CONSULTATION

11. Health Consumers Queensland was engaged to integrate consumer perspective to ensure the website and its information is relevant and easy to understand for consumers of all levels of health literacy. A consumer engagement workshop was held on 5 December 2024, wherein relevant insights were reflected in the website concept designs, and leveraged to inform service delivery, communication strategies and ongoing planning (Attachment 1).

ATTACHMENTS

12. Attachment 1 - Real Time Data Project Consumer Advisory Group Workshop 5 December 2024
Attachment 2 - MIN BA - Real-time Data 100-Day Project Open Hospitals Website Concept Approval (C-ECTF-24/20509)
Attachment 3 - Open Hospitals 'About the Data' website sub-page DRAFT v2 – updated 23 December 2024
Attachment 4 - Open Hospitals Website Concepts – updated 23 December 2024

Queensland Health

Real-time Data 100-Day Project

Consumer group engagement report

Thursday 05 December 2024



Queensland
Government

Real-time Data 100-Day consumer engagement background

Queensland Health engaged the Health Consumers Queensland (HCQ) for the Real-time Data 100-Day Project. 12 representatives from across Queensland's HHSs were engaged during December 2024 to review the most recent mock-ups of the Real-time Data website (Open Hospitals Portal).

Scope of the session:

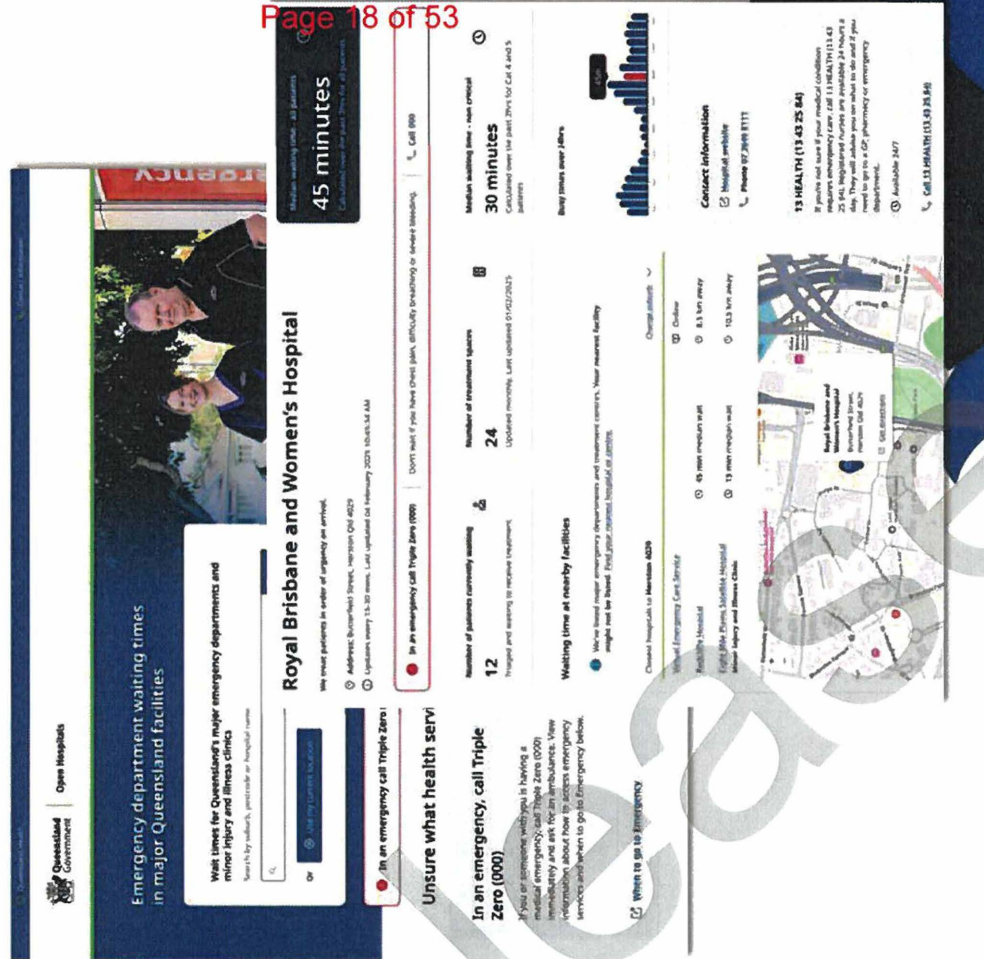
The session was designed to gauge initial feedback of the most recent mock-up design. Our intention in hosting the session is to integrate consumer perspective to:

- Raise any concerns regarding the proposed designs,
- Improve the look and feel of the design following go-live,
- Inform service delivery,
- Inform communication strategies and planning,
- Ensure the designs are health literate for consumers, and
- Create opportunity for information sharing and assessing need.

Scope of the website:

- The website will provide transparency regarding current busyness of major Emergency Departments and alternative treatment centres.
- It is not intended to provide guidance on which facility to attend in an emergency.
- The available list of reportable facilities may not include a consumer's closest emergency department or the most appropriate treatment centre.
- The website will feature appropriate links for consumers seeking medical treatment.

Real Time Data 100 Days Initiative



Real-time Data 100-Day summary of session

Summary of session:

- During the session with the consumer group, the Real-time Data mock-ups received positive feedback.
- The group noted the ease of navigation and clear, organised presentation of information and data on both the landing and facility pages.
- The group highlighted that a website of such content would be regularly used and would improve their experience in accessing emergency healthcare.
- The group provided recommendations and areas for enhancement relating to the website design and information presented. These recommendations have been reflected in the website design where possible.
- The group did not express concern with any metrics reported or any of the additional information presented (e.g. what is a triage category)
- This positive reception underscores a commitment to transparency and accessibility in emergency care reporting, reflecting ongoing efforts to effectively serve the community.

Feedback for immediate change:

Landing page:

- Remove the imagery or replace with a picture of an Emergency department
- Increase visual cues to confirm scope of reporting hospitals. This many include editing the Information Box to be more prominent in colour and text.
- Rename the blue referral box for 'Triple Zero' to 'When to go to Emergency' for consistency

Facility Page:

- Add a facility-type subheading (e.g. Emergency department/Satellite Hospital) under facility name
- Highlight that VECS is a statewide service and can be accessed by clicking the link presented
- Update the text for "patients seen by urgency..." to be more prominent (bold, larger font size)

Other relevant feedback:

- Consumers enquired about the marketing campaign for the website, noting that in their experience, many public health and emergency services are not advertised enough.
- Consumers expressed that they would 'change their behaviour' based on figures presented, with many agreeing they would be prepared to 'travel more' to a facility with a low wait time.
- Consumers expressed that they would be guided by the busyness graph to determine the best time to go to an Emergency department for non-critical care.
- Consumers enquired about the VECS, stating that they would like to learn more about the service and its availability. Many expressed they would use VECS before navigating to an Emergency department.

SUBJECT: Real-time Data 100-Day Project - Open Hospitals Website Concept

ACTION REQUIRED BY - 10 December 2024, to allow website platform build to continue and to enable critical project delivery date to be achieved.

RECOMMENDATION

It is recommended the Minister:


1. Approve the design concepts for the proposed open hospitals website platform (Attachment 1).

Approved / Not Approved

Comments:

Can the "number of treatment spaces" be clearly explained as the ~~number~~ capacity of the ED ~~and~~ I am concerned a consumer will see for eg "No. of patients waiting 12" and reference "No. of treatment spaces" and think there is 12 waitable treatment spaces when in fact all treatment spaces are occupied. Please refer final design back.

P.S. Is the "Emergency" wording bold/big enough.

Signed: 

Date: 10/12/24

Hon Tim Nicholls MP, Minister for Health and Ambulance Services

Author Name: Anita Rayner Position: Director Performance Partnerships Unit: System Performance Branch Tel No: Irrelevant Email address: Irrelevant@health.qld.gov.au Date Drafted: 4/12/2024	Cleared by (Dir/Snr Dir) Name: Brent Knack Position: A/Senior Director Branch: System Performance Branch Tel No: Irrelevant Email address: Irrelevant@health.qld.gov.au Date Cleared: 6/12/2024 *Note clearance contact is also key contact for brief queries*	Content verified by (DDG/CE) Name: Naomi Hebson Position: A/Deputy Director-General Division: Healthcare Purchasing and System Performance Tel No: Irrelevant Email address: Irrelevant@health.qld.gov.au Date Verified: 6/12/2024	Director-General Endorsement Name: Dr David Rosengren Signed  Date 7/12/2024
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BACKGROUND AND ISSUES

1. The Premier of Queensland has made the following commitments relating to Queensland Health's performance reporting:
 - 1.1 unlocking transparent real-time hospital data within 100 days;
 - 1.2 providing Queenslanders with the truth about what's happening in Queensland hospitals, as it happens;
 - 1.3 delivering accountability for wait times, the number of patients waiting at Emergency Departments, and how many hospital beds are available; and
 - 1.4 using real-time data to drive resources and frontline staff to where they are needed.
2. Further detail is provided in Attachment 2 and 3.

SENSITIVITIES/RISKS

3. Condensed project timelines restrict ability to amend proposed design prior to scheduled release date. Non-critical design amendments will require deferment following initial go live.
4. Publishing near real time data can help hospitals monitor and respond to increases in patient flow but can also influence patient behaviour. Patients may make misinformed decisions in emergency situations based on perceived waiting times at local health facilities or may misinterpret their closest facility from those displayed.
5. Further detail is provided in Attachment 2 and 3.

RESOURCE/FINANCIAL IMPLICATIONS

6. Non-recurrent allocation of \$0.77 million from the Corporately Managed Budget in financial year 2024-25 is associated with implementation of real-time hospital data reporting, including planning, project delivery, consumer engagement, and technical development.
7. Recurrent fiscal year allocation to support ongoing management and business-as-usual activities for the reporting of real-time data is still being determined.

RESULTS OF CONSULTATION

8. Health Consumers Queensland have been engaged in the concept design of the Open Hospitals website to ensure the information is relevant to consumers and easy to understand. Consumers will further be involved in user acceptance testing of the staging platform when the build stage is finalised.
9. Strategic Communications Branch have been consulted in the design of the website to ensure consumer-associated risks can be mitigated. An associated media and communications plan is currently being drafted.
10. Queensland Health legal team are engaged to review website and provide guidance regarding appropriate wording and published disclaimers.
11. Consultation is occurring with jurisdictions who publish similar websites to determine lessons learnt.
12. A Public Reporting Governance Committee was established on 15 November 2024. The committee comprises of members and advisors, including:
 - 12.1. Healthcare Purchasing and System Performance Division;
 - 12.2. eHealth Queensland;
 - 12.3. Office of the First Nations Health Officer;
 - 12.4. Statistical Services Branch;
 - 12.5. Corporate Services Division;
 - 12.6. Clinical Excellence Queensland;
 - 12.7. Clinical Planning & Service Strategy Division;
 - 12.8. Strategy, Policy & Reform;
 - 12.9. Office of the Chief First Nations Health Officer;
 - 12.10. Queensland Ambulance Services;
 - 12.11. Health Consumers Queensland; and
 - 12.12. Hospital and Health Service Chief Executive and Chief Operating Officer Representatives.

ATTACHMENTS

13. Attachment 1. Open Hospitals Website Concepts – updated 5 December 2024
Attachment 2. Additional background and issues

Attachment 3. DRAFT About the Data – Queensland Health Open Hospitals v1 – 20241205.

RTI Release

About the Data – Further Information to the Open Hospitals Website

Last Updated 24.12.2024

Reported Facilities

This website currently publishes near real-time information for 25 Queensland public hospital emergency departments and 7 Minor Injury and Illness Clinics across Queensland.

Facility Type	Facilities
Public Hospital Emergency Departments	<ul style="list-style-type: none">• Bundaberg Hospital• Caboolture Hospital• Cairns Hospital• Gladstone Hospital• Gold Coast University Hospital• Gympie Hospital• Hervey Bay Hospital• Ipswich Hospital• Logan Hospital• Mackay Base Hospital• Maryborough Hospital• Mount Isa Hospital• Nambour Hospital• Princess Alexandra Hospital• QEII Jubilee Hospital• Queensland Children's Hospital• Redcliffe Hospital• Redland Hospital• Robina Hospital• Rockhampton Hospital• Royal Brisbane and Women's Hospital• Sunshine Coast University Hospital• The Prince Charles Hospital• Toowoomba Hospital• Townsville University Hospital
Minor Injury and Illness Clinics	<ul style="list-style-type: none">• Bribie Island Satellite Hospital (Yarun)• Caboolture Satellite Hospital (Kabul)• Eight Mile Plains Satellite Hospital (Maroo-goodji-ba)• Kallangur Satellite Hospital (Kalangoor)• Redland Satellite Hospital (Talwalpin Milbul)• Ripley Satellite Hospital (Moodoombar Dabbil)• Tugan Satellite Hospital (Banyahrmabah)

About the Data – Further Information to the Open Hospitals Website

Last Updated 24.12.2024

Definitions

Key terms are used within the Open Hospitals website to explain emergency department and Minor Injury and Illness Clinic wait times, capacity, and activity levels.

Term	Definition
Median	The middle value in a sorted list of wait times, where 50% of patients waited less time and 50% waited more time. For these visualisations, it's calculated for patients seen within the 120 minutes prior to the latest data refresh.
Triage	<p>When an individual arrives at an Emergency department (ED) or Minor Injury and Illness Clinic for treatment, a qualified triage nurse assesses how urgent their condition is and assigns a category according to the Australasian Triage Scale (ATS).</p> <p>There are five triage categories (1 to 5), where 1 is most urgent and 5 is least urgent. The triage system ensures people most in need of care are treated first. Patients are seen in order of medical priority and not in order of arrival at the hospital.</p>
Time seen	<p>The time seen refers to the earliest time at which the treating clinician or one of the below mentioned health professionals on duty in an Emergency department or Minor Injury and Illness Clinic provides assessment or treatment, concluding the 'waiting time' for the patient. A treating clinician is classified as one of the following:</p> <ul style="list-style-type: none">• The treating Doctor or Senior Medical Officer (SMO)• The Triage Nurse, Clinical Assessment or Primary Nurse• Allied Health or social worker• Plaster technician.
Australasian Triage Scale (ATS) Categories	<p>Australasian Triage Scale (ATS) Categories:</p> <ul style="list-style-type: none">• ATS 1: Immediately life-threatening conditions requiring immediate attention• ATS 2: Imminently life-threatening conditions requiring attention within 10 minutes• ATS 3: Potentially life-threatening conditions requiring attention within 30 minutes• ATS 4: Potentially serious conditions requiring attention within 60 minutes• ATS 5: Less urgent conditions requiring attention within 120 minutes
Location Search Calculation	Distances are calculated using the haversine formula, which determines the shortest distance between two points on a sphere, accounting for the Earth's curvature. Results are ordered from closest to furthest based on the straight-line distance from your location to each facility.
Treatment Space Count	<p>The number of available Emergency Department or Minor Injury and Illness Clinic treatment areas in each facility is counted and reported monthly, with each facility determining what constitutes a treatment space based on their local setup and operations.</p> <p>A Treatment Space is generally a location within the Emergency Department or Minor Injury and Illness Clinic treatment where patients receive clinical care, treatment, or monitoring. A treatment space may be a room, a trolley, or a chair.</p>

About the Data – Further Information to the Open Hospitals Website

Last Updated 24.12.2024

Measures

Each measure applies to both the reported Emergency Departments and Minor Injury and Illness Clinics , with data sourced from Queensland Health Emergency Department clinical systems.

Measure	Definition
Patients Currently Waiting	<p>The total number of patients recorded as presented and waiting to be seen in the Emergency department (ED) or Minor Injury and Illness Clinic.</p> <p>Refresh interval: ~15 minutes</p> <p>Data source: Queensland Health Emergency Department clinical systems</p>
2-Hour Median Waiting Time - All Categories	<p>50% of all patients seen within the two hours up to the latest data refresh were seen within this timeframe. 50% of patients waited longer than this.</p> <p>Refresh interval: ~15 minutes</p> <p>Data source: Queensland Health Emergency Department clinical systems.</p>
2-Hour Median Waiting Time - Non-Urgent Patients	<p>50% of non-urgent (Category 4 & 5) patients seen within the two hours up to the latest data refresh were seen within this timeframe. 50% of non-urgent patients waited longer than this.</p> <p>Refresh interval: ~15 minutes</p> <p>Data source: Queensland Health Emergency Department clinical systems.</p>
Total Number of Treatment Spaces	<p>The total number of Emergency department (ED) or Minor Injury and Illness Clinic Treatment Spaces. A Treatment Space is defined as any space utilised in an Emergency Department or Minor Injury and Illness Clinic for treating a patient. This includes, for example, beds, chairs, and trolleys. Treatment Space data is based on current counts and may be subject to change over time for a variety of reasons, including the availability of staff, admitted and non-admitted patient care requirements, and any other operational factors.</p> <p>This measure relates to capacity and does not indicate whether these spaces are currently in use or occupied in real-time.</p> <p>Refresh interval: Monthly</p> <p>Data source: Statewide Management Information System with validation from relevant Queensland Health facilities.</p>
Patients currently waiting compared to average (Busyness/Activity Indicator)	<p>The total number of people in all triage categories waiting in an Emergency department or Minor Injury and Illness Clinic at the current hour, against the historical average (displayed over a 24 hour period).</p> <p>For the current hour, the graph records the number of people currently waiting, calculated as patients whose presentation time is before the most recently reported time AND their treatment has not started.</p> <p>For the historical average, each of the 24 hours depicted reports the number of people that had presented and were waiting for treatment in that hour, on the same day of week, in the same month, averaged over the past two years. The number of people is determined using presentation time and treatment time.</p> <p>Refresh interval: Hourly for current data. Annually for historical data.</p> <p>Data source: Queensland Health Emergency Department clinical systems.</p>

About the Data – Further Information to the Open Hospitals Website

Last Updated 24.12.2024

Note: Thresholds on all measures have been implemented during periods of low occupancy to prevent the identification of patients in waiting rooms, and to ensure results derived are statistically meaningful and reflective of the overall dataset. As a result, users may encounter data that is ‘unavailable’ where thresholds are not met.

Links

Various links have been referenced throughout the Open Hospitals website that point consumers to external websites and other resources. Please refer to screenshots and references located in Appendix A.

Reference	Location on Open Hospitals website	Description	Linked resource
1	Landing page: Open Hospitals website When to go to Emergency	Queensland Government's When to go to Emergency	When to go to Emergency Health and wellbeing Queensland Government (www.qld.gov.au)
2	Landing page: Open Hospitals website Symptom Checker	healthdirect's Symptom Checker	https://www.healthdirect.gov.au/symptom-checker
3	Landing page: Open Hospitals website Facility page: Any Find your nearest hospital or centre	healthdirect's Service Finder	https://www.healthdirect.gov.au/australian-health-services
4	Landing page: Open Hospitals website Facility page: Any 13 HEALTH	Queensland Government's 13 Health Phone Service	https://www.qld.gov.au/health/contacts/advice/13health
5	Facility page: Any Virtual Emergency Care Services	healthdirect's Virtual Emergency Care Service	https://www.healthdirect.gov.au/australian-health-services/healthcare-service/brisbane-city-4000-qld/virtual-emergency-care-service-queensland-virtual-hospital/virtual-care-clinics/a87efc17-8078-4db3-8ba9-480b4a5e3bf9

Data Sources

Clinical information systems and enterprise data platforms that capture, process and provide near real-time hospital data shown on this website.

Source	Definition
Clinical Systems	<ul style="list-style-type: none">• Emergency Department Information System (EDIS)• Integrated Electronic Medical Record (ieMR) FirstNet• Queensland Health Enterprise Reporting Service (QHERS)
Source Systems Integration	<ul style="list-style-type: none">• Data is initially collected in clinical systems (EDIS, FirstNet)• Data flows through QHERS for emergency department data collection• Data is consolidated in the System Performance Branch data warehouse• Data is then fed to the Department of Communities, Housing and Digital Economy (CHDE) Open Data platform via an API for public display
Data Refresh Rates	<ul style="list-style-type: none">• Patient numbers and wait times: Updated every ~15 minutes• Treatment space numbers: Updated monthly• Data used for busyness/activity trend indicators:

About the Data – Further Information to the Open Hospitals Website
Last Updated 24.12.2024

Source	Definition
	<ul style="list-style-type: none">• Real time data – every hour• Historical data - annually
Data Classifications	<ul style="list-style-type: none">• Based on the Information Security Classification assessment, this data is classified as non-sensitive for public release• Data specifically excludes any personal or confidential patient information

Other Links

Additional resources to help you find the right healthcare service for your needs.

Source	Definition
Disclaimer	This website shows information for selected Queensland Health public hospital emergency departments and Minor Injury and Illness Clinics only. It does not include private hospital emergency departments, Medicare urgent care clinics, General Practitioner (GP) clinics, or other medical centres. For a complete list of healthcare options in your area, visit Find a health service Queensland Health .

This information was last updated on x month year

OFFICIAL: Sensitive
Real-time Data 100-Day Project - Website Concept
Landing page



NOTE: Data presented is for illustrative purposes only and does not reflect real data.

Emergency department waiting times
in major Queensland facilities

Find wait times for Queensland's major emergency departments and minor injury and illness clinics

Search by suburb or hospital name

Search

Or Use my current location

We've listed major emergency departments and treatment centres. Your nearest facility might not be listed. Find your nearest hospital or centre.

In an emergency call Triple Zero (000) Don't wait if you have chest pain, difficulty breathing or severe bleeding. Call 000

Unsure what health service you need?

You can help our emergency department by using other services if you need medical care but it's not life threatening.

When to go to Emergency

If you or someone with you is having a medical emergency, call Triple Zero (000) immediately and ask for an ambulance. View information about how to access emergency services and when to go to Emergency below.

[When to go to Emergency](#)

Symptom checker

Use healthdirect's online symptom checker if you're not feeling well. Answer some questions about your symptoms and get advice on whether to see a doctor, go to hospital or call an ambulance. It is available online at any time.

[Symptom checker](#)

13 HEALTH (13 43 25 84)

If you're not sure if your medical condition requires emergency care, call 13 HEALTH (13 43 25 84). Registered nurses are available 24 hours a day. They will advise you on what to do and if you need to go to a GP, pharmacy or emergency department.

Available 24/7

[Call 13 HEALTH \(13 43 25 84\)](#)

Disclaimer

Information provided on this website is intended to be used as a general guide only. While it is as accurate and up-to-date as possible, Qld Health does not warrant or represent that any patient will be seen in a particular order or within a particular timeframe.

[About the data](#)

Open Hospitals

Contact us

Get in touch for enquiries, feedback, complaints and compliments.

Phone: 13 QGOV (13 74 68)

Contact us

About us

[Using our website](#)

[Copyright](#)

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[Right to information](#)

[Accessibility](#)

Acknowledgement of Country

Queensland Government acknowledges the Traditional Owners of the land and pays respect to Elders past, present and future.

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OFFICIAL: Sensitive
Real-time Data 100-Day Project - Website Concept
Facility Page Type 1 – Hospital Emergency Department

NOTE: Data presented is for illustrative purposes only and does not reflect real data.

< Back to search

Royal Brisbane and Women’s Hospital
Emergency Department

We treat patients in order of urgency on arrival.

- 📍 Address: Butterfield Street, Herston Qld 4029
- 🕒 Updates every 15-30 mins. Last updated 04 February 2025 10:45:34 AM

Median waiting time - all patients

45 minutes

Calculated over the past 2hrs for all patients

🔴 In an emergency call Triple Zero (000)

Don't wait if you have chest pain, difficulty breathing or severe bleeding.

📞 Call 000

Number of patients currently waiting

12

Triaged and waiting to receive treatment

Number of treatment spaces

24

Updated monthly. Last updated 01/02/2025

Median waiting time - non critical

30 minutes

Calculated over the past 2hrs for category 4 and 5 patients

Waiting time at nearby facilities

📍 We've listed major emergency departments and treatment centres. Your nearest facility might not be listed. Find your nearest hospital or centre.

Closest hospitals to Herston 4029

Virtual Emergency Care Service (statewide)

Online

Redcliffe Hospital

🕒 45 min median wait

📍 8.5 km away

Eight Mile Plains Satellite Hospital

🕒 15 min median wait

📍 10.5 km away

Minor Injury and Illness Clinic

Map showing nearby facilities and streets (e.g., Butterfield Street, Herston Rd, Bowen Bridge Rd).



Disclaimer

Information provided on this website is intended to be used as a general guide only. While it is as accurate and up-to-date as possible, Qld Health does not warrant or represent that any patient will be seen in a particular order or within a particular timeframe.

About the data

Contact information

🌐 Hospital website

📞 Phone 07 3646 8111

13 HEALTH (13 43 25 84)

If you're not sure if your medical condition requires emergency care, call 13 HEALTH (13 43 25 84). Registered nurses are available 24 hours a day. They will advise you on what to do and if you need to go to a GP, pharmacy or emergency department.

🕒 Available 24/7

📞 Call 13 HEALTH (13 43 25 84)

OFFICIAL: Sensitive
Real-time Data 100-Day Project - Website Concept
Facility Page Type 2 – Minor Injury and Illness Clinic

NOTE: Data presented is for illustrative purposes only and does not reflect real data.

< Back to search

Eight Mile Plains Satellite Hospital
Minor illness and injury clinic

We treat patients in order of urgency on arrival.

- 🕒 Open: 8 am to 10 pm, 7 days a week
- 📍 Address: Butterfield Street, Herston Qld 4029
- 🔄 Updates every 15-30 mins. Last updated 04 February 2025 10:45:34 AM

Median waiting time - all patients

45 minutes

Calculated over the past 2hrs for all patients

In an emergency call Triple Zero (000) | Don't wait if you have chest pain, difficulty breathing or severe bleeding. | [Call 000](#)

Satellite hospitals are for urgent (but not life threatening) conditions

Examples of urgent but not life threatening conditions:

- an adult with a high temperature
- broken bones
- sudden and severe headache
- eye injuries
- an elderly person or pregnant person with food poisoning
- severe stomach pains.

Number of patients currently waiting

24

Triaged and waiting to receive treatment

Number of treatment spaces

24

Updated monthly. Last updated 01/02/2025

Median waiting time - non critical

30 minutes

Calculated over the past 2hrs for category 4 and 5 patients

Waiting time at nearby facilities

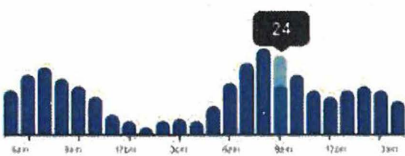
📍 We've listed major emergency departments and treatment centres. Your nearest facility might not be listed. [Find your nearest hospital or centre.](#)

Closest hospitals to **Eight mile plains 4112**

[Change suburb](#) ▼

Virtual Emergency Care Service (statewide)	🕒 Online	
Redcliffe Hospital	🕒 45 min median wait	📍 8.5 km away
Eight Mile Plains Satellite Hospital Minor Injury and Illness Clinic	🕒 15 min median wait	📍 10.5 km away

Patients currently waiting compared to average



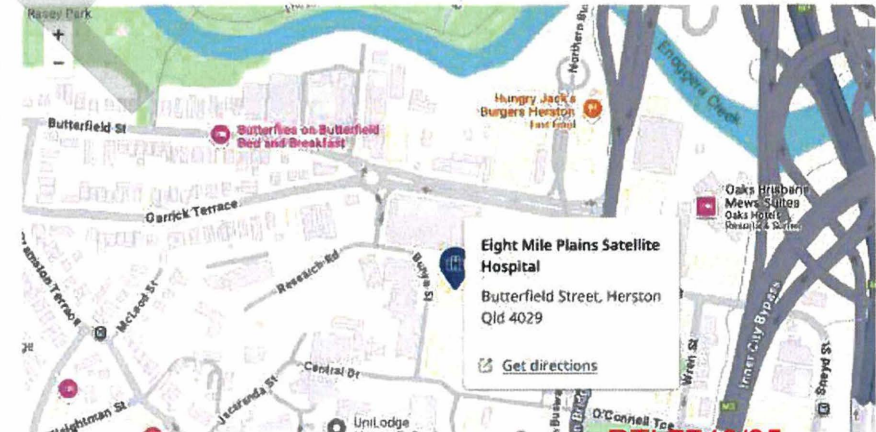
Disclaimer

Information provided on this website is intended to be used as a general guide only. While it is as accurate and up-to-date as possible, Qld Health does not warrant or represent that any patient will be seen in a particular order or within a particular timeframe.

[About the data](#)

Contact information

- [Hospital website](#)
- 📞 Phone **07 3646 8111**



OFFICIAL: Sensitive
Real-time Data 100-Day Project - Website Concept
Facility Page Type 3 – Reduced Scope Facility

NOTE: Data presented is for illustrative purposes only and does not reflect real data.

Children’s Hospital Queensland
Emergency Department



Who can use this service?

We provide 24 hour emergency care for infants, children and young people from birth up until their 16th birthday.

We also provide care and support for young people up to 18 years who:

- are currently under the care of a medical team at Queensland Children's Hospital for a pre-existing chronic condition and seeking emergency care for the same condition
- have a mental health condition and need urgent medical attention.

Queensland Health
MINISTERIAL BRIEFING NOTE

C-ECTF-25/1445
HPSP

**SUBJECT: Real-Time Data 100-Day Project - Queensland Health Open Hospitals
Website Demonstration invitation**

ACTION REQUIRED BY 29 January 2025, prior to the demonstration of the Queensland Health Open Hospitals website on 1 February 2025.

RECOMMENDATION

It is recommended the Minister:

1. **Approve** the use of the Minister's e-signature on letters inviting stakeholders to attend a demonstration of the Queensland Health Open Hospitals Website (Attachment 1). The stakeholder group to be invited are provided in Attachment 2.

Approved / Not Approved

Comments:

Signed.....

Date: 29.1.25

Hon Tim Nicholls MP, Minister for Health and Ambulance Services

Author
Name: Terri Price
Position: Director
Unit: ODDG, HPSP
Tel No: Irrelevant
Email address: Irrelevant@health.qld.gov.au
Date Drafted: 28/01/2025

Content verified by (DDG/CE)
Name: Naomi Hebson
Position: A/DDG
Division: HPSP
Tel No: Irrelevant
Email address: Irrelevant@health.qld.gov.au
Date Verified: 28/01/2025

Director-General Endorsement
Name: Dr David Rosengren

Date 28/01/2025

BACKGROUND AND ISSUES

1. Queensland Health has developed a new website to give Queenslanders the ability to view hospital performance and wait times of major public emergency departments and minor injury and illness clinics in real-time.
2. The new website, called Queensland Health Open Hospitals, was designed to meet the Premier of Queensland's election commitment to unlock transparency in Queensland hospitals and deliver accountability for wait times, the number of patients waiting at emergency departments, and hospital bed counts, within 100 days.
3. It is proposed to demonstrate the website to a stakeholder group on 1 February 2025 at 3 pm, at the Premiers Hall, Parliament House.
4. The proposed stakeholder invitation list is at Attachment 2.
5. The new website is scheduled to be published on 2 February 2025 at 9.30 am. On this date, the Open Hospitals URL (<https://openhospitals.health.qld.gov.au>) will direct traffic to the new website.

SENSITIVITIES/RISKS

6. The Open Hospitals website is a public-facing platform which attracts public and media attention. A Privacy Impact Assessment was performed on 29 November 2024, for which one low rated risk was identified relating to potential variances between figures published on the new website and the actual experiences of consumers waiting at facilities. Controls have been implemented to manage this risk, including the inclusion of Legal Disclaimers and Frequently Asked Questions.
7. There is a risk that the website does not meet user expectations. Multiple rounds of User Acceptance Testing, Performance Testing, and consumer engagement were completed. Website design has been optimised where possible.
8. Human rights were not engaged by this website initiative.

RESOURCE/FINANCIAL IMPLICATIONS

9. Non-recurrent allocation of \$0.77 million from the Corporately Managed Budget in financial year 2024–25 is associated with implementation of real-time hospital data reporting, including planning, project delivery, consumer engagement, and technical development. To date, website development costs are approximately \$0.6 million.
10. Recurrent fiscal year allocation to support ongoing management and business as usual activities for the reporting of real-time data is still being determined.

RESULTS OF CONSULTATION

11. A Project Governance Committee was established on 15 November 2024, holding bi-monthly meetings throughout the initiative. Additionally, a Business Reference Group and Technical Working Group met weekly to manage the business operations and technical development aspects of the initiative, respectively.
12. Internal and external stakeholders including the Strategic Communications Branch, Health Consumers Queensland, Legal Services, and other subject matter experts were engaged to inform design decisions, mitigate risks, and develop strategic plans for the launch and ongoing management of the website.

ATTACHMENTS

13. Attachment 1. MIN LTR - To invite of invite to demonstration of the Queensland Health Open Hospitals Website
Attachment 2. Stakeholders Mail Merge



The Honourable Tim Nicholls MP
Minister for Health and Ambulance Services

1 William Street Brisbane Qld 4000
GPO Box 48 Brisbane
Queensland 4001 Australia
Telephone +61 7 3035 6100

C-ECTF-25/1445

Title First name/initial Last name
Occupational title (if relevant)
Organisation (if relevant)

Email: Include email address if provided

Dear Title Last name

I would like to invite you to a demonstration of the soon to be released Queensland Health Open Hospitals Website from 3 pm on 1 February 2025, at the Premiers Hall, Parliament House. As you would be aware, the development of real time performance data at our hospital's emergency departments was a key election commitment from the Crisafulli Government.

The Queensland Health Open Hospital Website, which will be available for public use, marks a significant step forward for Queensland Health in driving greater transparency and accountability in Queensland hospitals, while supporting increased public awareness of the health system.

The new website directly addresses the need to make hospital performance data easily accessible to the public by reporting patient capacity and occupancy metrics in real-time for the 25 major Queensland public hospital emergency departments and seven minor injury and illness clinics.

The new website will also address the need to assist the public in finding the right care for their condition closer to home, providing information on when to go to emergency and links to additional health services including 13HEALTH, Virtual Emergency Care Services, and the Healthdirect online symptom checker.

The Queensland Health Open Hospitals Website is one part of the Queensland Government's commitment to improving Queensland's health system and will be backed by increased resourcing and other initiatives to ensure patients and healthcare workers receive the support they need. We are excited about the potential this website holds and look forward to its continued impact on Queenslanders.

The Premier's Hall can be accessed via the Parliamentary Annexe, 69 Alice Street, Brisbane, Queensland 4000.

I look forward to sharing the website with you this coming Saturday prior to its public launch. Should you require any further information in relation to this matter, I have arranged for Mr Brenton Simpson, Senior Director, System Performance Branch, Department of Health, via email at **Irrelevant** @health.qld.gov.au, to be available to assist you.

Should you not be able to attend, please contact Mr Simpson to organise a demonstration of the site at a later date.

Yours sincerely

Tim Nicholls MP
Minister for Health and Ambulance Services
Member for Clayfield

Prepared by:

Terri Price
Director
ODDG HPSP
Irrelevant
28 Jan 2025

Cleared by:

Naomi Hebson
A/DDG HPSP
HPSP
Irrelevant
28 Jan 2025

TITLE	FIRST NAME	LAST NAME	POSITION	ORGANISATION	EMAIL
Mr	Keith	Tracey-Patte	Chief Executive Officer	Health Consumers Queensland	Irrelevant
Ms	Marita	Cowie	Chief Executive Officer	Australian College of Rural and Remote Medicine	
Dr	Nick	Yim	President	Australian Medical Association Queensland	
Dr	Brett	Dale DBA	Chief Executive Officer	Australian Medical Association Queensland	
Ms	Georgina	van de Water	Chief Executive Officer	The Royal Australian College of General Practitioners	
Dr	Danielle	Allan	President	Rural Doctors Association of Queensland	
Mr	David	Walker	President - Elect	Rural Doctors Association of Queensland	
Ms	Libby	Dunstan	Chief Executive Officer	Brisbane North PHN	
Mr	Mike	Bosel	Chief Executive Officer	Brisbane South PHN	
Ms	Julie	Sturgess	Chief Executive Officer	Central Queensland, Wide Bay, Sunshine Coast PHN	
Ms	Lucille	Chalmers	Chief Executive Officer	Darling Downs and West Moreton PHN	
Mr	Sean	Rooney	Chief Executive Officer	Northern Queensland PHN	
Mr	Matthew	Carrodus	Chief Executive Officer	Gold Coast PHN	
Ms	Sandy	Gillies	Chief Executive Officer	Western Queensland PHN	
Ms	Sarah	Beaman	Secretary	Queensland Nurses and Midwives' Union	
Ms	Sally-Anne	Jones	President	Queensland Nurses and Midwives' Union	

SUBJECT: Real-Time Data 100-Day Project – Queensland Health Open Hospitals Website – Approval to Publish

ACTION REQUIRED BY – 1 February 2025, prior to proposed publication date of the Queensland Health Open Hospitals website on 2 February 2025.

RECOMMENDATION

It is recommended the Minister:

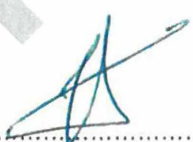
1. Approve the live publication of the new Queensland Health Open Hospitals Website to occur on 2 February 2025 at 5.30 am.

Approved / Not Approved

2. Note the proposed measures to be published via the Open Hospitals Website (Attachment 1) and the inclusion of 'About the Data' supplementary consumer information be published as a separate webpage (Attachment 2)

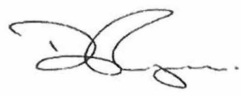
Noted / Not Noted

Comments:

Signed: 

Date: 12/1/25

Hon Tim Nicholls MP, Minister for Health and Ambulance Services

<div>Author</div> <div>Name: Sandhya Furnivall</div> <div>Position: Principal Project Officer</div> <div>Unit: System Performance</div> <div>Branch</div> <div>Tel No: Irrelevant</div> <div>Email: Irrelevant@health.qld.gov.au</div> <div>Date Drafted: 29 January 2025</div>	<div>Cleared by (Dir/Snr Dir)</div> <div>Name: Anita Rayner</div> <div>Position: Director</div> <div>Unit: System Performance</div> <div>Branch</div> <div>Tel No: Irrelevant</div> <div>Email: Irrelevant@health.qld.gov.au</div> <div>Date Cleared: 30 January 2025</div> <div>*Note clearance contact is also key contact for brief queries*</div>	<div>Content verified by (DDG/CE)</div> <div>Name: Naomi Hebson</div> <div>Position: A/Deputy Director-General</div> <div>Division: Healthcare Purchasing and System Performance</div> <div>Tel No: Irrelevant</div> <div>Email: Irrelevant@health.qld.gov.au</div> <div>Date: 31 January 2025</div>	<div>Director-General Endorsement</div> <div>Name: Dr David Rosengren</div> <div>Signed</div> <div></div> <div>Date: 31 January 2025</div>
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BACKGROUND AND ISSUES

1. Queensland Health has developed a new website to give Queenslanders the ability to view hospital performance and wait times of major public emergency departments and minor injury and illness clinics in real-time. The new website, called Queensland Health Open Hospitals, was designed to meet the Government's election commitment to publish transparent real-time hospital data about Queensland hospitals, within 100 days.
2. On 2 February 2025, the Open Hospitals website is scheduled to be published. The URL (<https://openhospitals.health.qld.gov.au>) will direct traffic to the new website from 5.30 am, prior to a public announcement scheduled for 9.30 am.
3. The new website will publish real-time data for the 25 major Queensland public hospital emergency departments and seven minor injury and illness clinics across Queensland for the number of patients waiting and the median waiting time (Attachment 1). Real-time measures are refreshed every 15 to 30 minutes, noting that Permanent Treatment Spaces and 'Historical Average' for Patients Currently Waiting are not 'real-time' measures and are refreshed at longer intervals.
4. Measures on the website have been sourced from Queensland Health emergency departments' clinical systems, with Permanent Treatment Space numbers validated directly with Health Service Chief Executives.
5. Further detail to support the website and measures published, including a list of in-scope facilities, data sources, refresh frequency, and Frequently Asked Questions (FAQs), will be accessible via a link to the 'About the Data' sub-page (Attachment 2).
6. The website is not intended to provide guidance on which facility to attend in an emergency and will not display data for out-of-scope facilities. To manage consumer risk, the website provides information for additional health services and care options, including calling Triple Zero (000), Virtual Emergency Care Services, 13HEALTH, 'When to go to Emergency', and Healthdirect's 'Online Symptom Checker' and 'Service Finder'.
7. Future design enhancements have been documented for consideration post-go live.

SENSITIVITIES/RISKS

8. The Open Hospitals website is a public-facing platform which attracts public and media attention. A Privacy Impact Assessment was performed on 29 November 2024, for which one 'low' rated risk was identified relating to potential variances between figures published on the new website and the actual experiences of consumers waiting at facilities. Controls have been implemented to manage this risk, including the inclusion of Legal Disclaimers and FAQs.
9. There is a risk that the website does not meet user expectations. Multiple rounds of User Acceptance Testing, Performance Testing and consumer engagement were completed, and website design has been optimised where possible. Hypercare arrangements are in place from 2 to 17 February 2025, to support any technical or user-related issues following launch.

RESOURCE/FINANCIAL IMPLICATIONS

10. Non-recurrent allocation of \$0.77 million from the Corporately Managed Budget in financial year 2024-25 is associated with implementation of real-time hospital data reporting, including planning, project delivery, consumer engagement, and technical development. To date, website development costs are approximately \$0.6 million. Recurrent fiscal year allocation to support ongoing management and business-as-usual activities is still being determined.

RESULTS OF CONSULTATION

11. On 15 November 2024, a Project Governance Committee was established, holding bi-monthly meetings throughout the initiative with a final go-live decision meeting on 31 January 2025.
12. A Business Reference Group and Technical Working Group met weekly to manage the business operations and technical development aspects of the initiative, respectively.
13. Internal and external stakeholders including the Strategic Communications Branch, Health Consumers Queensland, Legal Services, and other subject matter experts were engaged to inform design decisions, mitigate risks, and develop strategic plans for the launch and ongoing management of the website (Attachment 3).

ATTACHMENTS

14. Attachment 1. Open Hospitals Measure Descriptions
Attachment 2. Open Hospitals About the Data
Attachment 3. RT 100 Day Data Project Stakeholder Engagement Register

ATTACHMENT 1

Queensland Health Open Hospitals Website - Measures Reported

OFFICIAL: Sensitive

Last Updated 30.01.2025

Measures Reported

The Queensland Health Open Hospitals website will publish near real-time data for the 25 major Queensland public hospital Emergency departments (ED) and 7 minor injury and illness clinics across Queensland for the following measures

1. Number of patients currently waiting

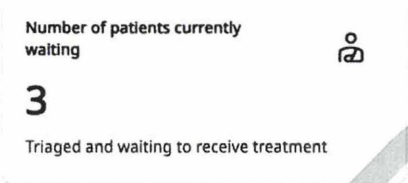
The total number of patients who have been triaged and are waiting to commence treatment in an ED or minor injury and illness clinic.

Patients may be asked to return to the waiting room once their treatment has commenced to wait for the next step of their care. These patients are not included in the total 'number of patients currently waiting.'

Refresh interval: ~15 minutes

Data source: Queensland Health emergency department clinical systems

Sample tile:



2. Median waiting time – all patients

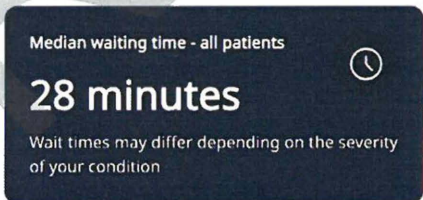
Within the last two hours, 50% of all patients who had been triaged (all triage categories) commenced treatment within this timeframe, and 50% of patients waited longer.

This measure is calculated on the time between triage and when a patient commences treatment. It is not indicative of the total time a patient may spend at the Emergency department or minor injury and illness clinic.

Refresh interval: ~15 minutes

Data source: Queensland Health emergency department clinical systems

Sample tile:



ATTACHMENT 1

Queensland Health Open Hospitals Website - Measures Reported

OFFICIAL: Sensitive

Last Updated 30.01.2025

3. Permanent treatment spaces

The total number of permanent treatment spaces in an ED or minor injury and illness clinic. Data is based on current counts and may be subject to change over time for a variety of reasons, including the availability of staff, admitted and non-admitted patient care requirements, and any other operational factors.

This measure captures the permanent capacity of the facility and does not indicate whether these spaces are currently in use or not in real-time.

Data source: Statewide Management Information System with validation from Queensland Health Hospital and Health Services (HHS)

Sample tile:



4. Patients currently waiting compared to average

‘Currently waiting’ displays the number of patients who have been triaged and are waiting to commence treatment in an ED or minor injury and illness clinic, at the current hour.

Patients may be asked to return to the waiting room once their treatment has commenced, and whilst they are waiting for the next step of their care. These patients are not included in the total ‘number of patients currently waiting.’

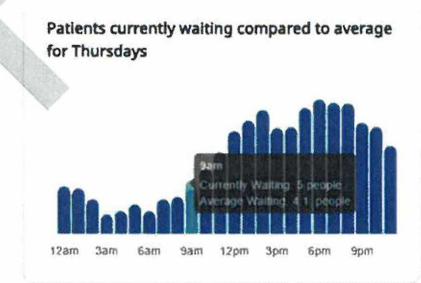
‘Average waiting’ displays the number of patients who were triaged and were waiting to commence treatment in the same hour, on the same day of the week, in the same month, in the same facility, averaged over the past 2 years.

The number of patients is determined using triage time and treatment commencement time.

Refresh interval: Hourly for current data. Annually for historical data.

Data source: Queensland Health emergency department clinical systems

Sample tile:



ABOUT THE DATA

TO BE PUBLISHED TO PRODUCTION ENVIRONMENT OF QUEENSLAND HEALTH OPEN HOSPITALS WEBSITE ON 28-JAN-2025, IN PREPARATION FOR FEB-25 GO-LIVE
UPDATED 30.01 FOLLOWING PREMIER DESIGN RECOMMENDATIONS

Open Hospitals - About the data

This Open Hospitals website currently publishes real-time information for 25 Queensland Health hospital emergency departments (EDs) and 7 minor injury and illness clinics.

Data is collected at each point of a patient's journey in these facilities, including:

- the time they 'check-in',
- when they are assessed by a triage nurse,
- when they are treated, and
- when they leave to return home or are admitted to a hospital ward to receive further care.

The data from a patient's steps through the ED or minor injury and illness clinic is then able to be collated, analysed and published to the Open Hospitals website. Data is currently refreshed every 15 to 30 minutes.

The real-time data metrics reported on the Open Hospitals website are calculated using the time of patient triage, and the time at which treatment is commenced.

Important: *The information on this website, particularly wait times, is provided for use as a general guide only and should not be relied upon, especially in emergency or life-threatening situations. Queensland Health aims to provide information that is accurate and up-to-date but cannot, and does not, warrant that information is accurate or current or that any individual will be seen within a particular time frame. Individuals are treated in order of the seriousness of the health condition they present with on arrival at the facility.*

If you or someone with you is having a medical emergency, call Triple Zero (000) immediately and ask for an ambulance.

ABOUT THE DATA

TO BE PUBLISHED TO PRODUCTION ENVIRONMENT OF QUEENSLAND HEALTH OPEN HOSPITALS WEBSITE ON 28-JAN-2025, IN PREPARATION FOR FEB-25 GO-LIVE
UPDATED 30.01 FOLLOWING PREMIER DESIGN RECOMMENDATIONS

Included facilities

Emergency departments

- Bundaberg Hospital
- Caboolture Hospital
- Cairns Hospital
- Gladstone Hospital
- Gold Coast University Hospital
- Gympie Hospital
- Hervey Bay Hospital
- Ipswich Hospital
- Logan Hospital
- Mackay Base Hospital
- Maryborough Hospital
- Mount Isa Hospital
- Nambour Hospital
- Princess Alexandra Hospital
- Queen Elizabeth II Jubilee Hospital
- Queensland Children's Hospital
- Redcliffe Hospital
- Redland Hospital
- Robina Hospital
- Rockhampton Hospital
- Royal Brisbane and Women's Hospital
- Sunshine Coast University Hospital
- The Prince Charles Hospital
- Toowoomba Hospital
- Townsville University Hospital

Minor injury and illness clinics

- Bribie Island Satellite Hospital (Yarun)
- Caboolture Satellite Hospital (Kabul)
- Eight Mile Plains Satellite Hospital (Maroo-goodji-ba)
- Kallangur Satellite Hospital (Kalangoor)
- Redland Satellite Hospital (Talwalpin Milbul)
- Ripley Satellite Hospital (Moodoombar Dabbil)
- Tugun Satellite Hospital (Banyahrmabah)

ABOUT THE DATA

TO BE PUBLISHED TO PRODUCTION ENVIRONMENT OF QUEENSLAND HEALTH OPEN HOSPITALS WEBSITE ON 28-JAN-2025, IN PREPARATION FOR FEB-25 GO-LIVE
UPDATED 30.01 FOLLOWING PREMIER DESIGN RECOMMENDATIONS

Definitions

Median waiting time

The median waiting time for treatment to commence following triage at a hospital ED or minor injury and illness clinic is defined as the time, in minutes, within which 50% of patients commenced treatment. The median waiting time is based on those patients commencing treatment in the last two hours.

This is a standard measure which is used to report the performance of Queensland's public emergency departments. This was previously only reported every quarter via the [Queensland Health Our Performance website](#).

Triage

When an individual arrives at an ED or minor injury and illness clinic for treatment, a qualified triage nurse assesses how urgent their condition is and assigns a category according to the Australasian Triage Scale (ATS). There are five triage categories (1 to 5), where 1 is most urgent and 5 is least urgent. The triage system ensures people most in need of care are treated first. Patients are seen in order of medical priority and not in order of arrival at the hospital.

Time at which treatment is commenced

The time at which treatment is commenced refers to the earliest time at which a treating clinician or specified health professional on duty provides 'meaningful treatment' to a patient, concluding the patients waiting time.

Meaningful treatment relates to the active management of a patient following the completion of the initial Triage process (e.g. when a patient is given pain medication to relieve their symptoms).

Treatment space

A treatment space is generally a location within an ED or minor injury and illness clinic where patients receive clinical care, treatment or monitoring. A treatment space may be a room, a trolley, or a chair. Each facility determines what a treatment space is based on their local setup and operations.

ABOUT THE DATA

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UPDATED 30.01 FOLLOWING PREMIER DESIGN RECOMMENDATIONS

Measures

Number of patients currently waiting

The total number of patients who have been triaged and are waiting to commence treatment in an ED or minor injury and illness clinic.

Patients may be asked to return to the waiting room once their treatment has commenced to wait for the next step of their care. These patients are not included in the total 'number of patients currently waiting.'

Refresh interval: ~15 minutes

Data source: Queensland Health emergency department clinical systems

Median waiting time – all patients

Within the last two hours, 50% of all patients who had been triaged (all triage categories) commenced treatment within this timeframe, and 50% of patients waited longer.

This measure is calculated on the time between triage and when a patient commences treatment. It is not indicative of the total time a patient may spend at the Emergency department or minor injury and illness clinic.

Refresh interval: ~15 minutes

Data source: Queensland Health emergency department clinical systems

Permanent treatment spaces

The total number of permanent treatment spaces in an ED or minor injury and illness clinic. Data is based on current counts and may be subject to change over time for a variety of reasons, including the availability of staff, admitted and non-admitted patient care requirements, and any other operational factors.

This measure captures the permanent capacity of the facility and does not indicate whether these spaces are currently in use or not in real-time.

ABOUT THE DATA

TO BE PUBLISHED TO PRODUCTION ENVIRONMENT OF QUEENSLAND HEALTH OPEN HOSPITALS WEBSITE ON 28-JAN-2025, IN PREPARATION FOR FEB-25 GO-LIVE
UPDATED 30.01 FOLLOWING PREMIER DESIGN RECOMMENDATIONS

Data source: Statewide Management Information System with validation from Queensland Health Hospital and Health Services (HHS)

Patients currently waiting compared to average

"Currently waiting" displays the number of patients who have been triaged and are waiting to commence treatment in an ED or minor injury and illness clinic, at the current hour.

Patients may be asked to return to the waiting room once their treatment has commenced, and whilst they are waiting for the next step of their care. These patients are not included in the total 'number of patients currently waiting.'

"Average waiting" displays the number of patients who were triaged and were waiting to commence treatment in the same hour, on the same day of the week, in the same month, in the same facility, averaged over the past 2 years. For those facilities which have been open less than 12 months, an annual average has been applied.

The number of patients is determined using triage time and treatment commencement time.

Refresh interval: Hourly for current data. Annually for historical data.

Data source: Queensland Health emergency department clinical systems

ABOUT THE DATA

TO BE PUBLISHED TO PRODUCTION ENVIRONMENT OF QUEENSLAND HEALTH OPEN HOSPITALS WEBSITE ON 28-JAN-2025, IN PREPARATION FOR FEB-25 GO-LIVE
UPDATED 30.01 FOLLOWING PREMIER DESIGN RECOMMENDATIONS

Errors and Warnings

"Real time data is currently unavailable" alert

The Open Hospitals website pulls data from the clinical systems of each facility, processes it, and displays it on the website. While every effort is made to ensure data is retrieved in real time, delays may occur. If data has not been refreshed for more than 4 hours, the displayed metrics will appear as "unavailable" until normal service is fully restored.

Blank or "-" values

Thresholds on all measures have been implemented during periods of low occupancy to prevent the identification of patients in waiting rooms, and to ensure results derived are statistically meaningful and reflective of the overall dataset. As a result, users may encounter data that is noted as "-" where thresholds are not met.

ABOUT THE DATA

TO BE PUBLISHED TO PRODUCTION ENVIRONMENT OF QUEENSLAND HEALTH OPEN HOSPITALS WEBSITE ON 28-JAN-2025, IN PREPARATION FOR FEB-25 GO-LIVE
UPDATED 30.01 FOLLOWING PREMIER DESIGN RECOMMENDATIONS

Frequently Asked Questions

Why are there more/less people physically in the Emergency department than stated on the website?

There could be several reasons why the number of people physically present in an emergency department or minor injury and illness clinic is different to data reported on the website:

- Some individuals in the waiting room may not be waiting for care. In some cases, patients in the waiting room could have commenced meaningful treatment (e.g. wound dressing, pain relief) or could be waiting to receive the results from a diagnostic test.
- During busy periods, temporary waiting areas or overflow sections may be used to accommodate higher volumes of patients.
- Some hospitals have a separate waiting room for patients who arrive by Queensland Ambulance Service (QAS) on stretchers. These patients may not be visible to those in the general waiting room.
- Some patients may be moved from the waiting room to a treatment space but are still waiting for their treatment to commence.
- Some individuals in the waiting room may not be patients. Family members, friends or loved ones can accompany and offer support to patients who are seeking care.

Why have I been waiting longer than the median waiting time shown on the website?

The median waiting time displayed on the website is calculated based on the patients who presented and commenced treatment within the preceding 120 minutes.

Emergency departments and minor injury and illness clinics are fast-paced, dynamic environments where conditions can change rapidly. The number of incoming patients and the complexity and severity of their conditions can impact the order in which existing patients are seen, and the waiting time they experience.

Our goal is to provide the best possible care to each patient. While efforts are made to ensure all patients receive quality care within the clinically

ABOUT THE DATA

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recommended time frame, patients with life-threatening conditions and/or critical needs are seen and treated with priority.

The website stated that the median wait time at my local facility was 50 minutes. Why did it take 3 hours from arrival at the facility to the time I was sent home?

The median wait time calculates the time between a patient being triaged to the time the patient commences treatment. It does not mean the total time a patient may spend at the Emergency department or minor injury and illness clinic.

Why isn't my local facility listed?

This website only reports data for Queensland's largest public emergency departments and minor injury and illness clinics. Location searches for other facilities, such as other public hospitals, urgent care clinics, private hospitals, GPs, pharmacies and other treatment centres can be accessed via the [Health Direct website](#).

ATTACHMENT 3

Queensland Health Open Hospitals Website – Stakeholders

OFFICIAL: Sensitive

Last Updated 23.01.2025

Stakeholders engaged

The Real Time 100 Day Project required engagement with a range of Queensland Health and external stakeholders to provide input and feedback for the RT 100 Day Data Project and the resulting Open Hospitals website.

1. Project Governance Committee

The Public Reporting Governance Committee (the ‘Governance Committee’) was established in November 2024, tasked with providing the overall direction and management of the Queensland Health Open Hospitals website and the Real-Time Data Project in terms of business, user and supplier interests and decision making to support the accountability of the Project Executive within the constraints set out by other departmental governance committees.

The committee met on the following dates for a duration of one (1) hour.

- 15 November 2024
- 29 November 2024
- 13 December 2024
- 10 January 2025
- 24 January 2025

The committee comprises of members and advisors, including:

- Healthcare Purchasing and System Performance Division;
- eHealth Queensland;
- Office of the First Nations Health Officer;
- Statistical Services Branch;
- Corporate Services Division
- Clinical Excellence Queensland;
- Clinical Planning & Service Strategy Division
- Strategy, Policy & Reform;
- Office of the Chief First Nations Health Officer;
- Queensland Ambulance Services;
- Health Consumers Queensland; and
- HHS Chief Executive and Chief Operating Officer Representatives.

Members

Member	Role / Department
Naomi Hebson (Chair) ¹²	A/Deputy Director-General, Healthcare Purchasing and System Performance (Chair and SRO)
Brenton Simpson (BS)	Senior Director, System Performance Branch (Project Executive)
Tanya Kelly (TK)	Acting Deputy Director General, eHQ

¹ The Governance committee was initially established with Chair Mel Carter, former Deputy Director-General, Healthcare Purchasing and System Performance. Mel attended the meeting held 15 November 2025 only.

² Karen Bayntun was proxy for Naomi during the meeting held 10 January 2025.

ATTACHMENT 3

Queensland Health Open Hospitals Website – Stakeholders

OFFICIAL: Sensitive

Last Updated 23.01.2025

Mark Richards (MR)	Senior Director Digital Innovation & Strategy, SAISB
Tracey Walker (TW)	Executive Director Strategic Comm, Strategic Communications Branch
Helen Brown (HB)	DDG Clinical Excellence Division
Haylene Grogan (HG)	Chief First Nations Health Officer, First Nations Health Office
Colleen Jen (CJ)	DDG Clinical Planning & Service Strategy, Clinical Planning & Service Strategy Division
Peter Gillies (PG)	Health Service Chief Executive, SC HHS
Damian Green (DG)	DDG Corporate Services Division
Peta Bryant (PB)	Deputy Director General, Strategy Policy & Reform
Joanne Shaw (JS)	Chief Operating Officer, SC HHS
Jackie Hanson (JH)	Health Service Chief Executive, Metro North Hospital and Health Service
Joanne Johnson (JJ)	Executive Director Clinical Services, COO Division
Megan Kronk (MK)	Senior Director, Statistical Services Branch

Advisors

Advisor / Observer	Role / Department
Sally Wuerschling (SW)	Deputy Commissioner, Queensland Ambulance Services (proxy for)
Keith Tracey-Patte (KTP)	CEO, Health Consumers Queensland (HCQ)
Anita Rayner (AR)	Director Performance Partnerships, System Performance Branch (Project Lead)
Solmaz Daryani (SD)	eHQ Clinical Program (Project Manager Technical)
Paul de Waard (PdW)	Director, SPR Online and Data Integrity, System Performance Branch
Sandhya Furnivall (SF)	Project Support, System Performance Branch
Graham Hall (GH)	Director Analytics and Systems, Patient Safety and Quality CEQ
Toni Cash (TC)	Director CBI, SAISB Leads
Anand Veeramallu (AV)	Director, Clinical Program eHealth Queensland
Stephen Wernicke (SW)	Director Online, Strategic Communications Branch
Colleen Smyth (CS)	Director, FNHO Strategy & Policy Branch

ATTACHMENT 3

Queensland Health Open Hospitals Website – Stakeholders

OFFICIAL: Sensitive

Last Updated 23.01.2025

2. Technical Working Group

The Technical Working Group (the 'TWG') was established in November 2024, tasked with overseeing the operational management of the Queensland Health Open Hospitals website and the Real-Time Data Project in terms of technical architecture, design and build.

The committee first met on 20 November 2024 and held weekly meetings for a duration of one (1) hour. The technical working group also met for daily stand-ups (status update meetings) from December 2024 onwards.

Representatives from the following Queensland Health teams were included in these meetings on as as-needed basis.

- Healthcare Purchasing and System Performance Division
- Strategic Services Branch
- eHealth Queensland
- Clinical Excellence Queensland;
- Clinical and Business Intelligence
- Cloud Services
- CHDE

3. Business Reference Group

The Business Reference Group (the 'BRG') was established in November 2024, tasked with overseeing the operational management of the Queensland Health Open Hospitals website and the Real-Time Data Project in terms of business and consumer-related design and project management.

The committee first met on 22 November 2024 and held weekly meetings for a duration of one (1) hour. Key participants including Directors and Project Managers from the BRG also met for weekly stand-ups (status update meetings) from November 2024 onwards.

Representatives from the following Queensland Health teams were included in these meetings on as as-needed basis.

- System Performance Branch
- Strategic Communications Branch
- Strategic Services Branch
- Clinical Program eHealth Queensland
- Health Contact Centre
- Clinical Excellence Queensland
- MN Virtual Services
- ODDG
- Queensland Virtual Hospitals

4. External Engagement

External stakeholders were engaged throughout the RT 100 Day Data Project to provide subject matter expertise and consumer testing to assist in the refinement of design, strategic communication plans and media enquiries.

ATTACHMENT 3

Queensland Health Open Hospitals Website – Stakeholders

OFFICIAL: Sensitive

Last Updated 23.01.2025

The following representatives were consulted;

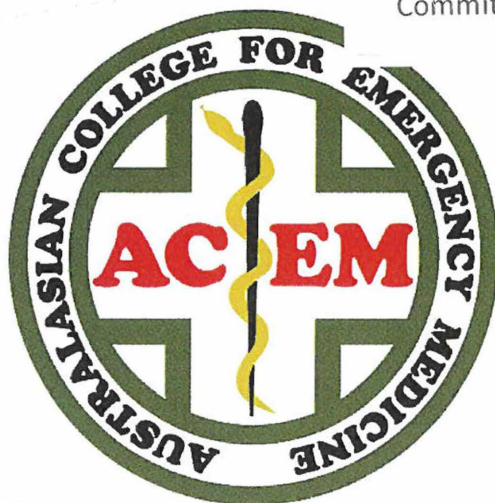
- 12 consumers from the Consumer Advisory Group (CAG) were engaged to participate in two workshops, arranged by Health Consumers Queensland. The group tested the prototypes of the Open Hospitals website on 5 December 2024, with two consumers selected for a final round of testing on the Production website on 16 January 2025.
- The Director for System Performance Support from NSW Health was consulted on 10 January 2025 to understand media enquiries, functionality, and usefulness of the NSW Health Emergency Department Wait Times website.



Australasian College
for Emergency Medicine

Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber
Tabled Doc No: 2
Tabled by: Minister Niddolls
Committee/Inquiry Secretary: Kellie Jones



MEDIA RELEASE

ACEM statement on the Queensland Health 24-hour stay ED Directive

The Australasian College for Emergency Medicine (ACEM; the College) supports time-based targets and evidence shows they can be effective with sufficient support and appropriate resourcing.

ACEM particularly supports measures aimed at reducing the length of time patients spend in emergency departments (EDs) by encouraging whole-of-hospital ownership of the issue, as the drivers of access block largely lie outside of the ED.

The Queensland Government should also consider initiatives to better support hospitals that regularly report extended lengths of stays in their ED. ACEM has developed the [Hospital Access Targets](#) (HAT) and has recommended that they be adopted and publicly reported on by Queensland Health. This nuanced set of targets – which are less likely to be ‘gamed’ than single point-of-time targets – recognise the different patient journeys and identify where further support and investment is needed.

ACEM recommends that no patient spends more than 12 hours in an ED and strongly believes that 24-hour stays should be a never event.

Attributable to ACEM Queensland Faculty Chair Dr Shantha Raghwan

Background:

ACEM is the peak body for emergency medicine in Australia and Aotearoa New Zealand, responsible for training emergency physicians and advancement of professional standards. www.acem.org.au

Media Contact:

Helen Johnson, Manager, Media and Publications helen.johnson@acem.org.au +61 427 621 857



Tim Nicholls MP · Follow

July 2 at 8:17 PM · 🌐

Our Surgery Connect Plan is working.

We've seen the biggest reduction in elective surgery wait lists in a decade.

Under Labor, the number of Queenslanders left waiting for elective surgery doubled.

We're investing \$1.8 billion over four years to stabilise the elective surgery waiting list – and continue the positive results we've already seen.

We're restoring health services when you need them.

**We're delivering
more surgeries
sooner.**

To help people
like Russell



Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber

Tabled Doc No: 3

Tabled by: Joe Kelly / Member for Marumba & Pine

Committee/Inquiry Secretary: Kellie Jones

Snapshot of the latest 2025 influenza vaccination coverage* data in Australia

All persons

	ACT	NSW	Vic	Qld	SA	WA	Tas	NT	AUS
6 mo-<5 yrs	44.9	22.7	28.3	18.3	25.4	21.2	26.7	30.2	23.8
5-<15 yrs	23.6	12.9	15.6	12.6	14.9	14.8	14.3	11.3	14.1
15-<50 yrs	32.0	19.0	23.0	17.5	22.9	18.2	22.8	19.9	20.2
50-<65 yrs	43.6	29.5	33.5	30.5	35.4	30.3	38.5	24.1	31.6
≥65 yrs	65.6	57.7	61.4	59.8	66.1	59.5	67.3	33.9	60.0

* Year-to-date (YTD) coverage calculated using vaccinations given 1 March–26 July 2025 (inclusive).
AIR data as at 27 July 2025.

Coverage data in these tables may differ slightly from estimates published elsewhere due to differences in calculation methodologies and/or the AIR data being used in the calculation having been downloaded on different dates.

Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber
 Tabled Doc No: 4
 Tabled by: Jojo Kelly
 Committee/Inquiry Secretary: Kellie Jones
 Date:



Cancer by state and territory: Incidence and Mortality

by sex and state and territory from 1982 to 2020

Place mouse pointer here for more information about this page

Place the mouse pointer here for more information about age-standardised rates

Place mouse pointer here for more information about the selected cancer

Place mouse pointer here for data sources and cancer coding

Select cancer site/type:
Melanoma of the skin

Select rate type:
Age-standardised (2024 Australian popul...

Select year:
2020

Select sex:
Persons

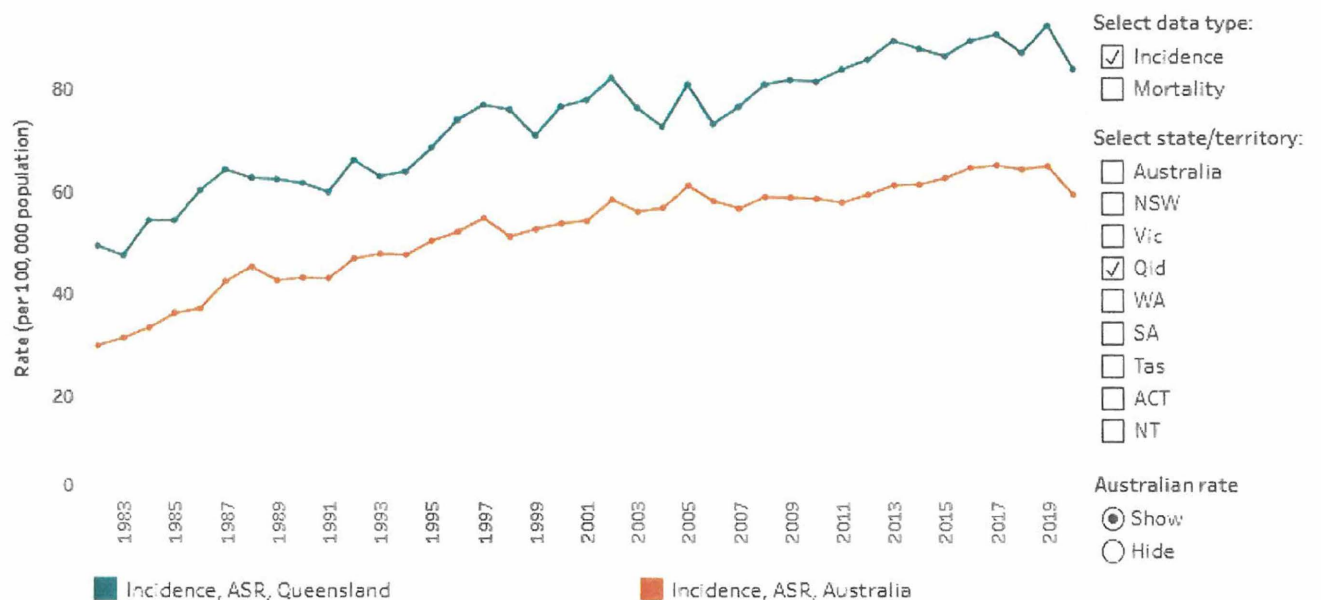
Figure 1: Age-standardised incidence and mortality rates for melanoma of the skin

By state and territory, persons, 2020



Figure 2: Trend in age-standardised incidence and mortality rates for melanoma of the skin in Queensland

Persons, 1982 to 2020



Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber

Tabled Doc No: 5

Tabled by: Joe Kelly

Committee/Inquiry Secretary: Kellie Jones

Date: _____

empower people to get moving—whether through active commuting, access to outdoor fitness facilities and green spaces, school sports, or workplace wellness programs—to embed daily physical activity into everyday life.

The GenQ Community Grants Program supports local projects that break down barriers for children and youth to increase movement. Through recreational and creative movement programs, to accessible exercise spaces in rural areas, HWQld’s grants are helping to create a culture of health and physical activity across Queensland. These local initiatives not only promote individual health but also foster social connections, enhance community cohesion, and improve overall wellbeing in communities throughout Queensland.

[← Back to Physical activity](#)

Sun safety

Health, Environment and Innovation Committee:	
Location:	Brisbane, Leg Council Chamber
Tabled Doc No:	6
Tabled by:	Joe Kelly
Committee/Inquiry Secretary:	Kellie Jones
Date:	1/8/25

Investing in skin cancer prevention

The Queensland Government has invested \$8.4 million in skin cancer prevention and early detection over four years from July 2022 to June 2026. Advice from a panel of experts emphasised prevention, and the resulting project has three separate but interconnected elements.

Element one is a social marketing strategy that includes winter and summer sun safety campaigns focused on young people 18 to 34 years. The campaigns emphasise the importance of sun safety and received high ratings from the target audience. Sponsorships magnified the messaging and supporting communication aim to normalise sun-safe behaviours.

Element two is skin cancer early detection clinics in communities without access to a GP with skin cancer expertise. In the first full year of operation, 62 clinics were provided in 17 communities. In total, 1,325 people received a whole-body skin check with 263 cancers detected and treated, including 12 melanomas.

Element three aims to develop community leadership for sun safety, policy and shade creation. In Rockhampton, a health promotion professional was funded to drive local engagement. By developing relationships with local governments, Livingstone Shire Council and Gladstone Regional Council have supported youth-led sun safety events. Another achievement was Beef Australia’s support for the week-long Beef2024 to be sun-safe. Lastly, a grant of \$5,000 was awarded to 16 rural and remote local governments to boost their sun safety leadership.

Improving natural and built shade infrastructure

Improving the quality and quantity of built and natural shade infrastructure significantly reduces Queenslanders’ UV exposure and future skin cancer risk, especially in high use and long stay public areas such as:

- playgrounds

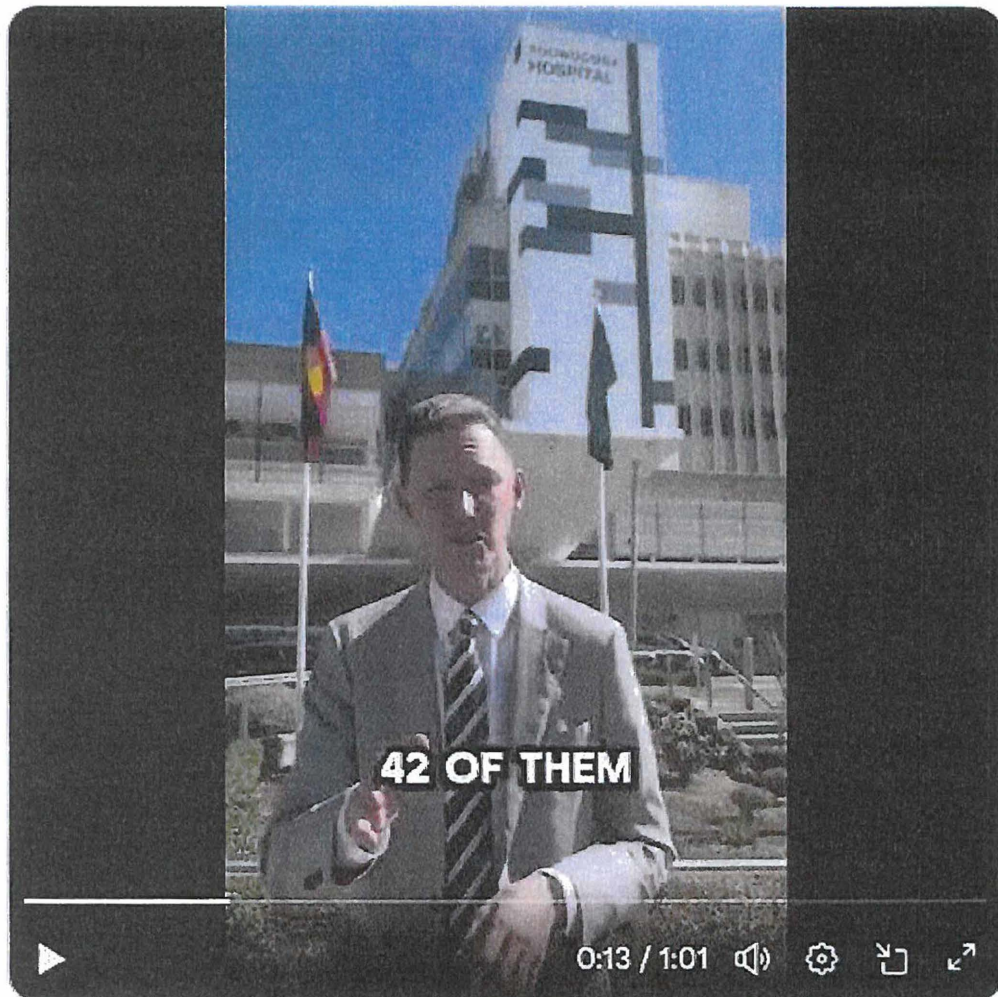


Mark Bailey MP @MarkBaileyMP · Jul 24



Why are Toowoomba residents treated like second class citizens by Health Minister @TimNichollsMP who kept them in the dark about the suspension of elective surgery this week?

Brisbane residents were told promptly when four Northside hospitals were overwhelmed by flu & COVID.



2

6

306



Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber

Tabled Doc No: 7

Tabled by: Minister Nicholls

Committee/Inquiry Secretary: Kelie Jones

Date: 11



Enquiries to: Annette Scott
Telephone: (61 7) 4699 8412
Our Ref: HSCE-033-025

Office of Chief Executive

**Darling Downs Hospital
and Health Service**

The Honourable Mark Bailey MP
Yeerongpilly Green Shopping Centre
Shop T2, Cnr King Arthur Terrace & Queens Way
YEERONGPILLY QLD 4105

Cnr Hogg and Tor Streets
PO Box 405 Toowoomba
Queensland 4350 Australia
Telephone +61 7 4699 8412
Facsimile +61 7 4699 8400
www.health.qld.gov.au/darlingdowns
ABN 64 109 516 141

Email: miller@parliament.qld.gov.au

Dear Mr Bailey,

Thank you for your recent visit to Toowoomba Hospital and Oakey Hospital on Thursday 24 July 2025.

We are very proud of the services that we deliver to our community and appreciated the opportunity to showcase the hard work of our people.

As a regional health service, our people are embedded members of our community and as such, honour the relationship and open communication we have with our community.

To that end, I would like to take the opportunity to respectfully clarify some of the information you shared publicly to media and social media following your visit to the Toowoomba Hospital which was not fully reflective of the facts.

During your visit, information was shared with you regarding the management of the high level of demand on services at Toowoomba Hospital and the management of elective surgeries during the period Tuesday 22 July to Wednesday 23 July. Specifically, that on 22 July, when Toowoomba Hospital experienced over 190 Emergency Department presentations and performed 39 surgeries, 3 non-urgent (Category 2 and 3) elective surgeries were rescheduled. Similarly, due to high Emergency Department demand on 23 July (159 presentations), Toowoomba Hospital performed 32 surgeries and rescheduled 5 non-urgent (Category 2 and 3) elective surgeries to facilitate timely access to care for the most clinically unwell.

Regrettably, your incorrect reference to 42 cancelled surgeries reflects poorly on us as a health service and undermines the trust the community has in us. Additionally, it impacts negatively on our workforce who turn up every day to ensure that patients receive exemplary and compassionate care and are, in themselves, rightfully proud of what they achieve.

We respectfully request a correction of the detail you share publicly. To confirm, the information provided to you by the Executive Director Toowoomba Hospital on 24 July, was as previously stated ie. 8 total non-urgent elective surgery patients were rescheduled for their respective procedures. These 8 patients had direct contact with us as a health service to organise the rescheduling, were not urgent cases, and were not day of surgery cancellations ie. they were planned rescheduled procedures.

Health, Environment and Innovation Committee:

Location: Brisbane Leg council chamber

Tabled Doc No: 8

Tabled by: Minister Nichols

Committee/Inquiry Secretary: Kellie Jones

Date: 11/8/25

Page



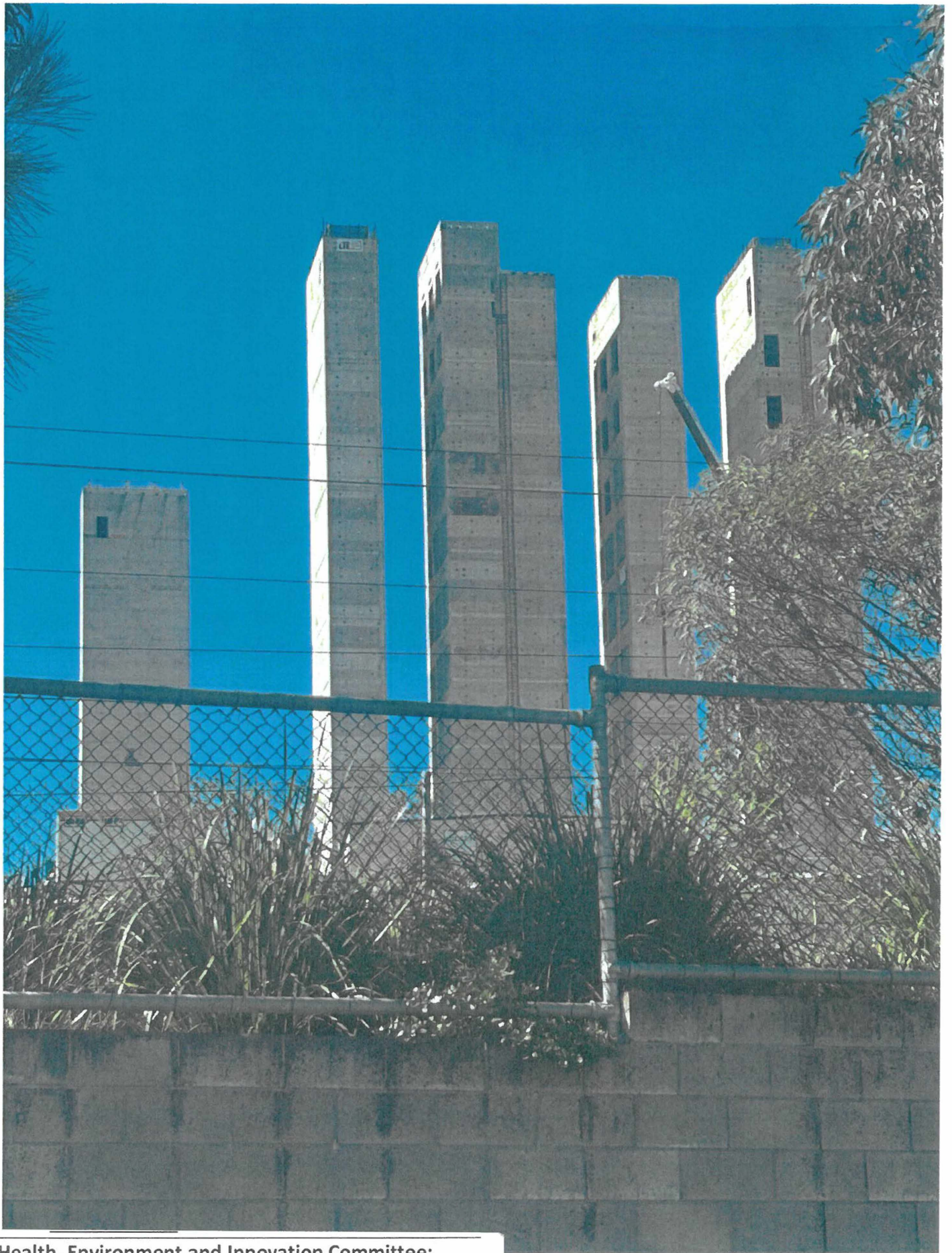
Darling Downs Health staff work tirelessly to care for our communities and to build trust and confidence in the services we deliver. We trust you appreciate our need to clarify and communicate accurate information to our community.

Yours sincerely

A handwritten signature in black ink, appearing to read 'A Scott', with a stylized, cursive script.

Annette Scott PSM
Adj Prof (UQ) BPhy (UQ), GCM, GAICD
Health Service Chief Executive
Darling Downs Hospital and Health Service

29 / 07 / 2025



Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council chamber
Tabled Doc No: 9
Tabled by: Joe Kelly
Committee/Inquiry Secretary: Kenne Jones
Date: 11/8/25

Belinda McEniery

From: Emma Morton
Sent: Wednesday, 21 May 2025 10:53 AM
To: Mel Wightman; Response.Media
Cc: David McLachlan; Torny Miller; Toby Crockford; Phoebe Powell; Kate Rogers; Belinda McEniery
Subject: RE: Draft lines on 'Ready, Set, Grow' trial.

Additional on Women and Girl's Health Strategy:

- Our Government is committed to ensuring women and girls can access the health services they need no matter their postcode.
- As I have said since taking this role, all funds allocated to the Women and Girls' Health Strategy will be spent.
- This includes the \$2.96M allocated to the Ready, Set, Grow campaign.
- I understand the trial is due to commence in six schools across Cairns and South Brisbane. All funds provided to the trial will be continued.
- The Queensland Government has unequivocally guaranteed funding for the Women and Girls Health Strategy and anything to the contrary is incorrect.

Emma Morton
Senior Media Advisor
Office of the Honourable Tim Nicholls MP
Minister for Health and Ambulance Services

M **Irrelevant** E **Irrelevant** @ministerial.qld.gov.au
1 William Street, Brisbane QLD 4000



Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber
Tabled Doc No: 10
Tabled by: Joe Kelly
Committee/Inquiry Secretary: Kelme Jones
Date: 11/8/25

From: Emma Morton
Sent: Wednesday, May 21, 2025 9:42 AM
To: Toby Crockford **Irrelevant** @ministerial.qld.gov.au>; Kate Rogers **Irrelevant** @ministerial.qld.gov.au>; Phoebe Powell **Irrelevant** @ministerial.qld.gov.au>
Cc: David McLachlan **Irrelevant** @ministerial.qld.gov.au>; Torny Miller **Irrelevant** @ministerial.qld.gov.au>; Mel Wightman **Irrelevant** @ministerial.qld.gov.au>; Response.Media **Irrelevant** @ministerial.qld.gov.au>
Subject: Draft lines on 'Ready, Set, Grow' trial.
Importance: High

Hi All

Draft lines on 'Ready, Set, Grow' trial.

- The Minister for Health has never made a decision to cease or reduce funding the 'Ready, Set, Grow' trial.
- All funds provided to the trial will be continued.

- The Queensland Government has unequivocally guaranteed funding the Women and Girls' Health Strategy.
- Any correspondence that indicates the cessation of programs within the Women and Girls' Health Strategy is not correct and does not reflect any decision taken by the Minister or the Government.

On Background:

The trial is due to commence in six schools across Cairns and South Brisbane.

Emma Morton

Senior Media Advisor

Office of the Honourable Tim Nicholls MP
Minister for Health and Ambulance Services

M **Irrelevant** E **Irrelevant** @ministerial.qld.gov.au
1 William Street, Brisbane QLD 4000

DELIVERING
FOR QUEENSLAND



Queensland
Government

Belinda McEniery

From: Belinda McEniery
Sent: Wednesday, 21 May 2025 9:24 AM
To: Jason Tibbits
Cc: Rob Morrison; David McLachlan; Emma Morton
Subject: RE: UPDATE RE: Draft Lines

Minor changes suggested, otherwise, good to issue.

From: Jason Tibbits **Irrelevant** @ministerial.qld.gov.au>
Sent: Wednesday, May 21, 2025 8:59 AM
To: Belinda McEniery **Irrelevant** @ministerial.qld.gov.au>
Cc: Rob Morrison **Irrelevant** @ministerial.qld.gov.au>
Subject: UPDATE RE: Draft Lines

The Minister for Health has never made a decision to cease or reduce funding the 'Ready, Set, Grow' **trial**.

All funds provided to the **trial** will be continued.

The Queensland Government has unequivocally guaranteed funding the Women and Girls' Health Strategy.

Any correspondence that indicates the **cessation of programs within** the Women and Girls' Health Strategy is not correct and does not reflect any decision taken by the Minister or the Government.

On Background:

The trial is due to commence in six schools across Cairns and South Brisbane.

From: Jason Tibbits
Sent: Wednesday, May 21, 2025 8:52 AM
To: Belinda McEniery **Irrelevant** @ministerial.qld.gov.au>
Cc: Rob Morrison **Irrelevant** @ministerial.qld.gov.au>
Subject: Draft Lines

The Minister for Health has never made a decision to cease or reduce funding the 'Ready, Set, Grow' program.

All funds provided to the program will be continued.

The Queensland Government has unequivocally guaranteed funding the Women and Girls' Health Strategy.

Any correspondence that indicates a reduction in funding for the Women and Girls' Health Strategy is not correct and does not reflect any decision taken by the Minister or the Government.

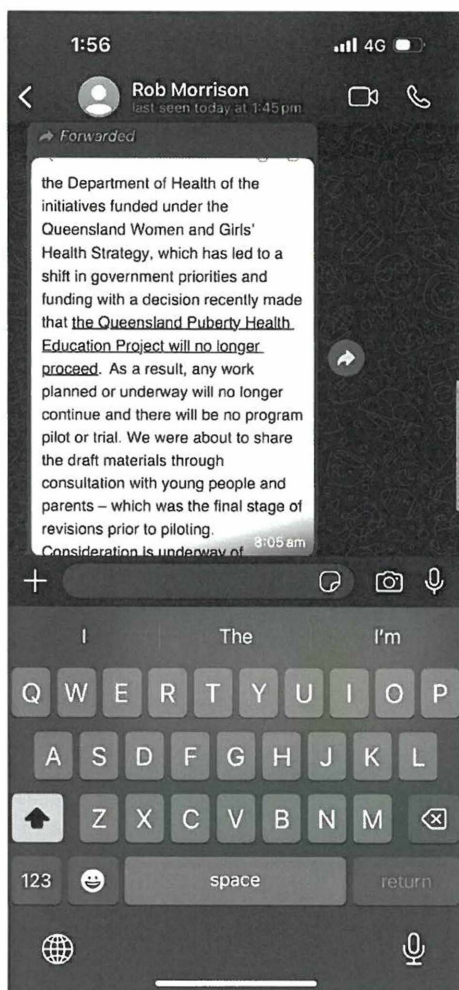
Jason Tibbits

Deputy Chief of Staff

Office of the Honourable David Crisafulli MP
Premier and Minister for Veterans

M **Irrelevant** E **Irrelevant** @ministerial.qld.gov.au
1 William Street, Brisbane QLD 4000



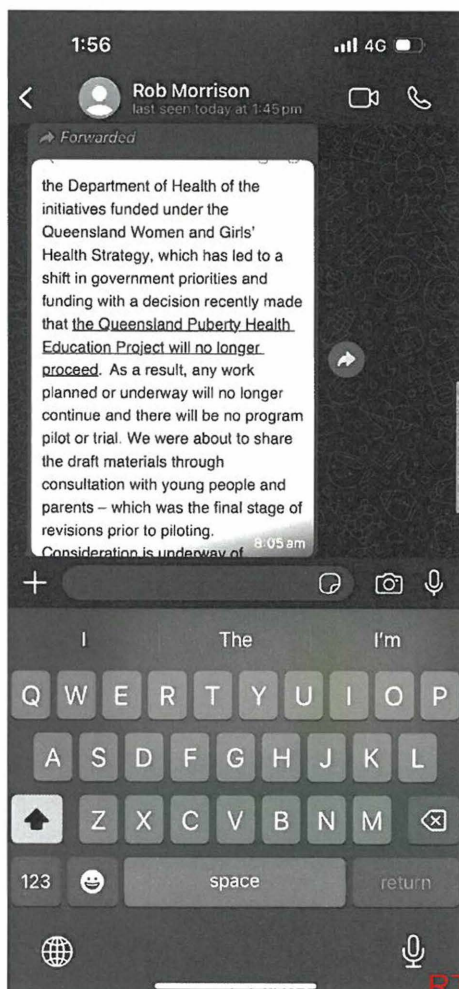


7:00

We want to share an important update with you regarding the Queensland Puberty Health Education Program trial for students in Years 5 and 6. As you are aware, this trial was a joint initiative of Department of Health and Department of Education under the *Queensland Women and Girls' Health Strategy 2032*.

There has been an internal review by the Department of Health of the initiatives funded under the Queensland Women and Girls' Health Strategy, which has led to a shift in government priorities and funding with a decision recently made that the Queensland Puberty Health

Reply All



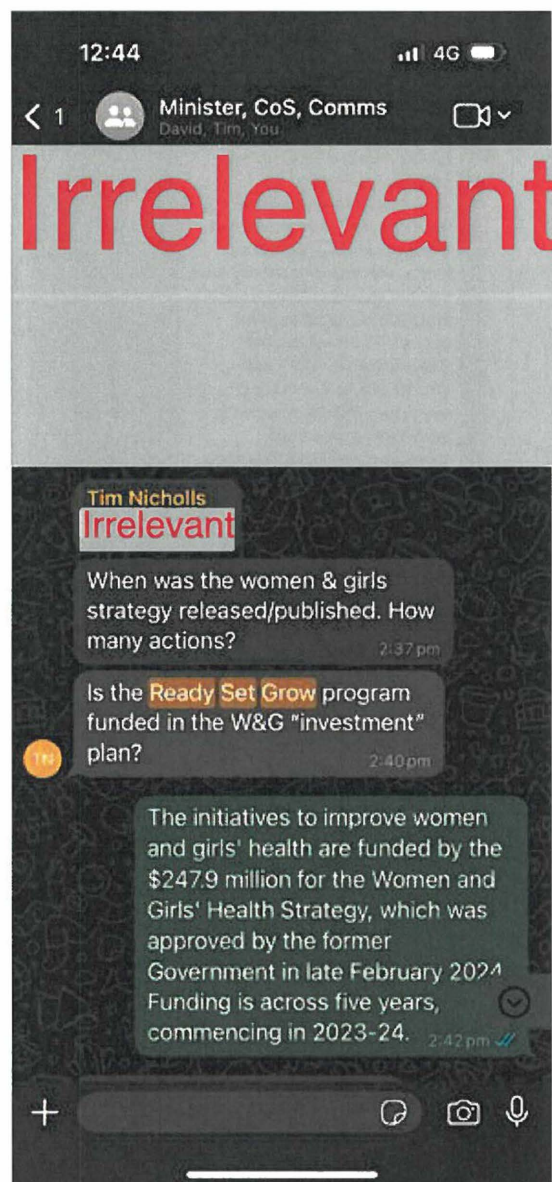
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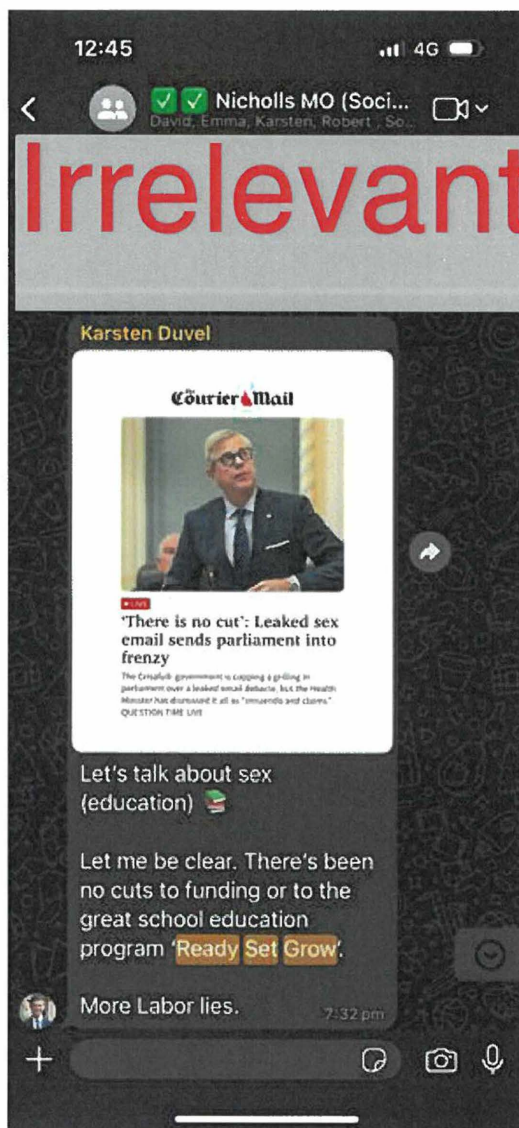
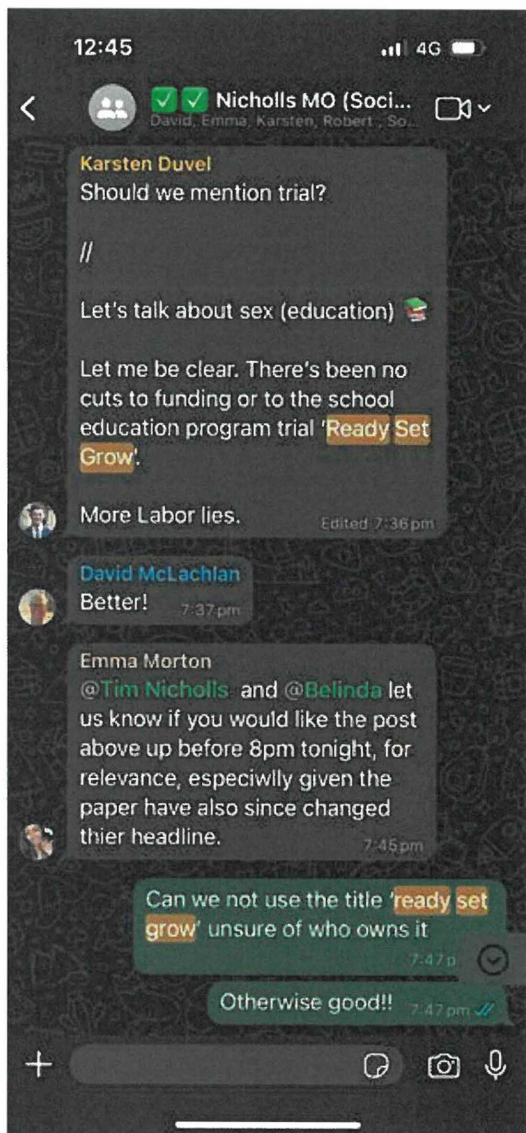
the Department of Health of the initiatives funded under the Queensland Women and Girls' Health Strategy, which has led to a shift in government priorities and funding with a decision recently made that the Queensland Puberty Health Education Project will no longer proceed. As a result, any work planned or underway will no longer continue and there will be no program pilot or trial. We were about to share the draft materials through consultation with young people and parents – which was the final stage of revisions prior to piloting. Consideration is underway of potential next steps in relation to the draft materials.

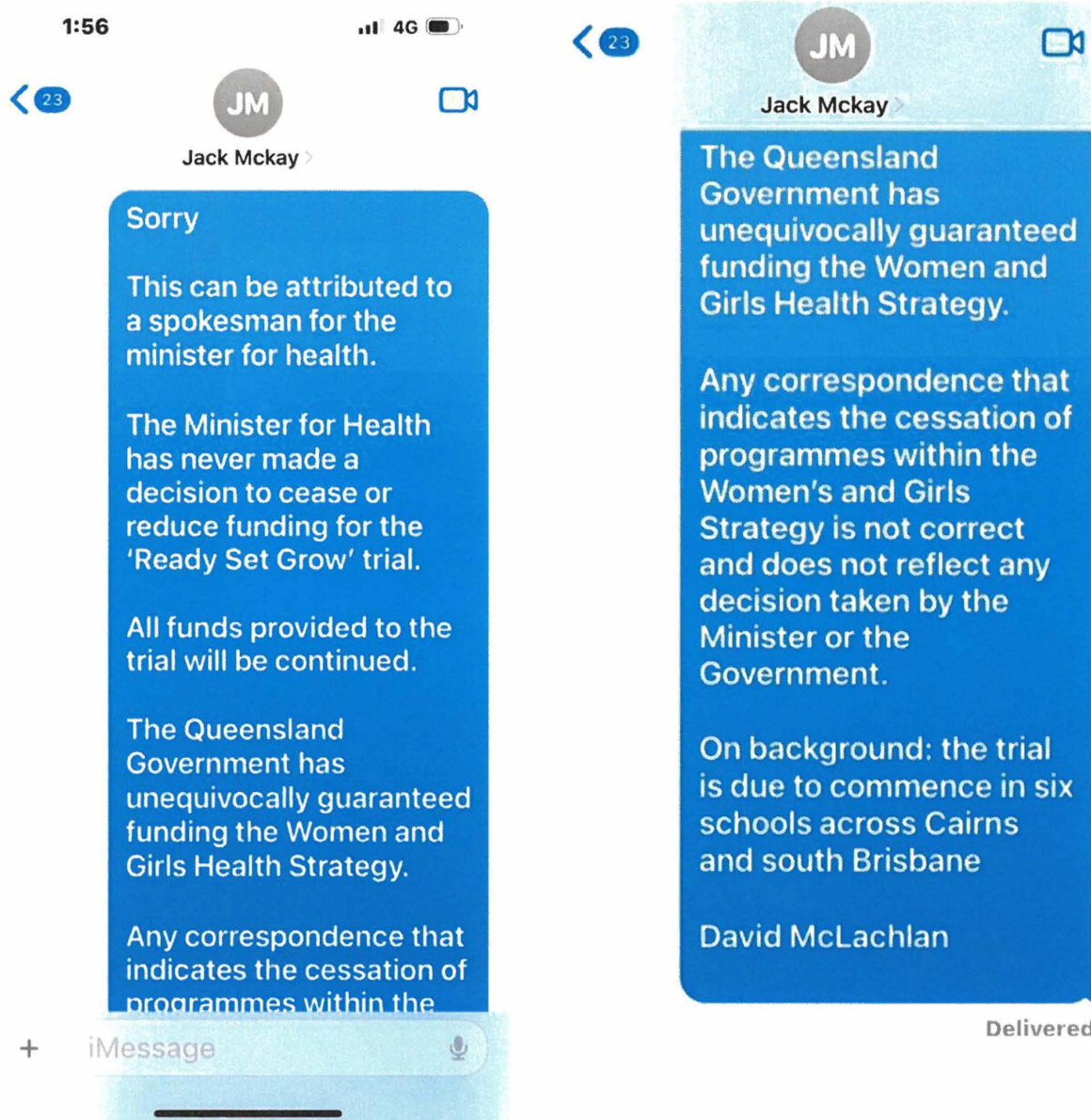
Reply All

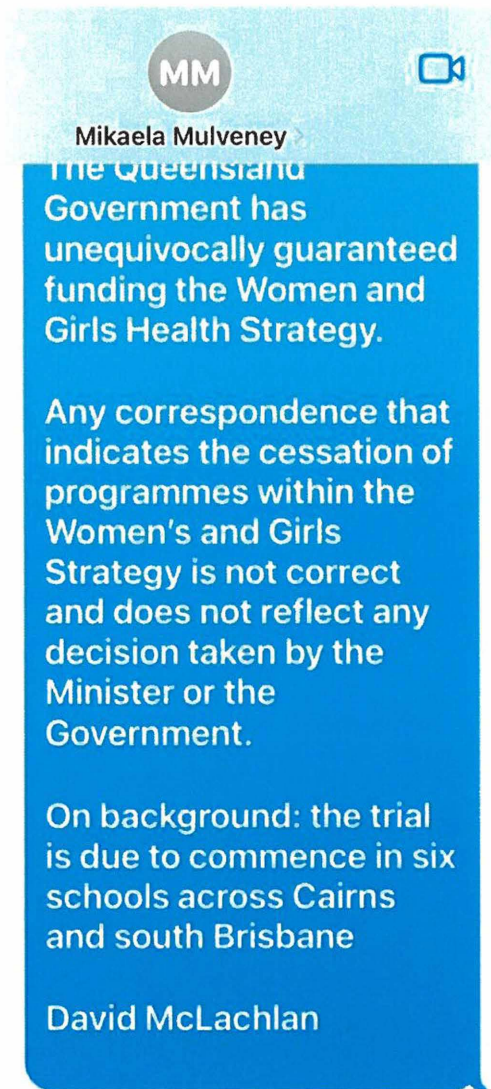
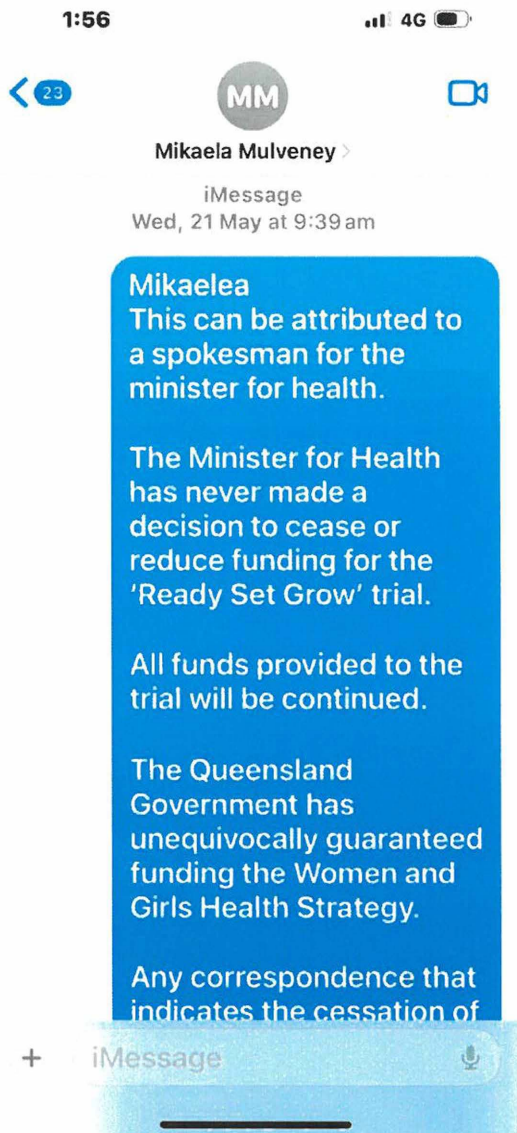


Whatsapp:









Read 21/5/2025

CONFIDENTIAL - CABINET IN CONFIDENCE

QAS - operational distribution centres: G2-BC							New
Stronger Health System							
Cancer							New
Health and Wellbeing Cld							New
Health Ombudsman - additional budget request							CMB
Health Ombudsman - CBRC sub							New
Pharmacy Council							CMB
Vaping							CMB
Aero medical Retrieval Contracts							New
NGO							New
Other							
IEMR							New
Cyber security							New
Riskman							New
Radiology Information System							New
Health Pathways - GP Referral							New
PTSS							New
Pandemic Leave							CMB
Total							
New							
CMB							
Total							

Health, Environment and Innovation Committee:

Location: Brisbane, Leg Council Chamber

Tabled Doc No: 11

Tabled by: beckellu

Committee/Inquiry Secretary: Kene Jones
Date: 1/8/25

CONFIDENTIAL - CABINET IN CONFIDENCE

CONFIDENTIAL - CABINET IN CONFIDENCE

Proposed Long-Form Budget Outcomes	28-May-24	v12							
Initiative	2024-25 (\$m)	2025-26 (\$m)	2026-27 (\$m)	2027-28 (\$m)	Total (\$m)	Source			
First Nations									
First Nations First						New			
Workforce Strategy - First Nations						New			
Torres and Cape Health Care (TORCH) Commissioning Fund						New			
EB2 above wages policy						CMB			
Queensland Aboriginal and Islander Health Council (QAIHC)						New			
Aboriginal Community Controlled Health (ACCHOs)						New			
Institute for Urban Indigenous Health (IUIH)						New			
ATSIChS Brisbane - Station Rd						New			
Workforce									
Workforce Strategy						New			
iWFM - Electronic Rostering						New			
Student Placement						CMB			
Reproductive Leave						CMB			
Workforce Attraction Incentive Scheme						CMB			
Putting Patients First 2.0									
SPACE									
Patient Flow 5pt plan						New			
Patient Flow 5pt plan enhancement						CMB			
Voluntary Assisted Dying						New			
Long Stay Patients						CMB			
Planned Care						CMB			
Pharmacist Prescribing Trial						New			
Menningococcal B vaccine						New			
RSV vaccine						New			
Free Flu	\$ 40.0	\$ -	\$ -	\$ -	\$ 40.0	CMB			
Women's and Girls Strategy									
Sexual Assault services						New			
Child Sexual Assistance						New			
Women's and Girls						New			
Assisted Reproductive Technology									
Putting Qld Kids First									
Putting Qld Kids First						New			
QAS									
QAS innovation - pre hospital care						New			
QAS - achieve additional 200 paramedics						New			

CONFIDENTIAL - CABINET IN CONFIDENCE



Health, Environment and Innovation Committee:

Location: Brisbane

Tabled Doc No: 12

Tabled by: Minister Nicholls

Committee/Inquiry Secretary: Kennel Jones

Date: 11/8/25

Location: Leg Council Chamber Brisbane

Tabled Doc No: 13

Tabled by: Minister Nicolls

Committee/Inquiry Secretary: Kellie Jones

Date: 1 AUG 25

Pre-hearing Q

No. 2

**THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED
MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—**

QUESTION

What previously unfunded commitments have been funded in the 2025-26 Budget?

ANSWER

I am delighted as Minister for Health and Ambulance Services to welcome a Budget that puts us on track to deliver world class healthcare for every Queenslanders – no matter where they live.

At \$33.1 billion in capital and operating funding in 2025-26 alone, this is the single greatest investment in healthcare in Queensland's history. It's a full 10.2 per cent higher than last year's health operating budget.

The Crisafulli Government is restoring the health budget to ensure that Queensland's Hospital and Health Services and the Queensland Ambulance Service can deliver essential services.

\$1.752 billion from 2025-26 to 2028-29 has been provided to stabilise the elective surgery wait list, delivering more elective surgeries when and where Queenslanders need them. This funding will provide more than 30,000 surgeries in 2025-26, utilising the public and private hospital sectors.

\$638 million has been provided to operationalise 186 public hospital beds through a previously committed, but unfunded partnership with Mater Hospital Springfield. Services will include an Emergency Department and an intensive care unit and will ensure ongoing capacity in the growing Western Metropolitan Corridor.

\$581.4 million from 2025-26 to 2026-27 is being invested to restore access to bed capacity in partnership with the private sector. This investment will provide continued access to 515 beds over the next two years, to maintain the flow of patients through public hospitals and reduce ambulance ramping.

These beds help address the former government's inability deliver long term investment in health infrastructure across the state.

As part of a record additional \$1 billion uplift to the Queensland Ambulance Service (QAS):

- \$812.9 million over four years to sustainably meet the growing and evolving demand of pre-hospital health care services.
- \$250 million over four years to provide the first multi-year uplift to the QAS base capital program since 2008-09, empowering the ambulance service to appropriately commission essential infrastructure and equipment.

- This funding will also support the government's commitment to increase the number of paramedics.

\$638.4 million over four years will be provided for significantly expanded hospital and public health services at Mater Hospital Springfield. This will deliver on the signed contract that did not have a funding source and opens up critical capacity to meet demand for health services in the western metropolitan corridor. The Mater Hospital Springfield will provide 186 public beds, including an Emergency Department, Intensive Care and maternity services, with services expected to commence in 2026.

The former government's complacency on vape and illicit tobacco allowed the proliferation of these products across Queensland. In addition to nation-leading fines and tough new legislation, the Crisafulli Government is allocating increased funding of \$12.7 million over two years from 2025-26 in this budget to support implementation of new smoking and vaping regulations. This funding will improve capacity and capability within Queensland's enforcement workforce allowing an increase in the pace of action on illicit smoking and vaping products and expedite seizure of products, and closure, or prosecution of non-compliant businesses.

The Crisafulli Government is committed to restoring the health budget and appropriately funding the wages and salaries of Queensland Health's valued frontline staff.

Increased funding of \$192 million over four years has been provided for staff entitlements, including the Workforce Attraction Incentive Scheme, Reproductive Health Leave, and employer superannuation contributions on parental leave. These measures were announced by the former Government but left unfunded.

An additional \$48.7 million is being provided for legislated but previously unfunded midwife-to-patient ratios.

The 2025-26 Budget includes rescuing the State's hospitals through the \$18.5 billion Hospital Rescue Plan with an additional \$8.94 billion to address the cost overruns and program mismanagement of the former government.

Unfunded capital projects include:

- \$5.775 billion new funding was committed to enable the delivery of Major Hospital Infrastructure including new hospitals at Bundaberg, Coomera and Toowoomba, the new Queensland Cancer Centre, and other major hospital expansions previously announced across Queensland.
- In response to the independent review of the Queensland Health capital program and the Queensland Audit Office Health 2024 report, the government has allocated \$3.159 billion over five years from 2024-25 to the Timely Investment Infrastructure Maintenance program, including new funding of \$2.647 billion to maintain current infrastructure and assets. The government also uplifted the ongoing base allocation by \$200 million annually beyond five years.

This will deliver on unfunded commitments made by the former government under the previous Sustaining Capital Program. The current annual base funding was set in 2010 and has remained largely unchanged despite growth in the Queensland Health asset base by 284 per cent (to 2024). The Crisafulli Government is providing a meaningful and unprecedented uplift to the yearly allocation to ensure these assets are appropriately maintained.

- \$355.2 million new funding was provided over three years for the Building Rural and Remote Health Program to enhance ageing rural and regional health facilities and staff accommodation, at sites including Tara, Millmerran, Pormpuraaw, Collinsville, Longreach, and Winton.
- \$146 million new funding was provided across three years to continue the Accelerated Infrastructure Delivery Program including the Ripley Satellite Health Centre Sub-Acute Expansion, associated car park, and the Gold Coast University Hospital Sub-Acute Expansion.

Location: Leg Council Chamber BrisbaneTabled Doc No: 14Tabled by: Minister NichollsCommittee/Inquiry Secretary: Kellie Jones

Pre-hearing Question

No. 14Date: 1 AUG 25

THE HEALTH, INNOVATION AND ENVIRONMENT COMMITTEE ASKED MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON T NICHOLLS)—

QUESTION

With reference to the SDS, including page 6, for each of Queensland's 26 reporting hospitals and for each calendar month from October 2024 to the closest reportable date, will the Minister advise:

- the five longest Patient Off Stretcher Times
- the five longest wait times a patient faces who was not seen within clinically recommended times
- the five longest stays in emergency departments for care not completed within four hours; and
- the greatest ambulance 'lost time' value?

ANSWER

Any patient presenting to an Emergency Department (ED) will be assessed and appropriately triaged, depending on their clinical condition.

I am advised that the below data reports for each of Queensland's 26 reporting hospitals in each month from October 2024 to May 2025:

(a) The five longest Patient Off Stretcher Times, by facility, Oct-24 to May-25 (expressed in minutes)

May 2025

Bundaberg - 207 , 163 , 158 , 143 , 138.
 Caboolture - 119 , 116 , 115 , 115 , 110.
 Cairns - 334 , 286 , 249 , 200 , 199.
 Gladstone - 206 , 180 , 164 , 161 , 155.
 Gold Coast University - 315 , 271 , 236 , 212 ; 206.
 Gympie - 156 , 142 , 140 , 108 , 105.
 Hervey Bay - 158 , 110 , 100 ; 100 , 99.
 Ipswich - 432 , 424 , 422 , 384 , 383.
 Logan - 324 , 297 , 281 , 272 , 245.
 Mackay - 171 , 157 , 150 , 146 , 127.
 Maryborough --107 , 97 , 96 , 78 , 72.
 Mater Adults - 421 , 361 , 347 , 341 ; 326.
 Mount Isa - 36 , 31 , 31 , 31 , 31.
 Nambour - 156 , 156 , 153 , 146 , 144.
 Princess Alexandra - 377 , 370 , 360 , 327 , 314.
 Queen Elizabeth II - 327 , 292 , 274 , 241 , 222.
 Queensland Children's - 104 , 102 , 97 , 95 , 89.

Redcliffe - 112 , 111 , 110 , 108 , 107.
Redland - 394 , 390 , 350 , 297 , 276.
Robina - 224 ; 216 ; 178 , 165 , 146.
Rockhampton - 164 , 137 , 129 , 129 , 126.
Royal Brisbane & Women's - 121 , 112 , 112 , 112 , 111.
Sunshine Coast University - 197 , 177 , 172 , 168 , 152.
The Prince Charles - 99 , 99 , 99 , 99 , 98.
Toowoomba - 294 , 230 , 203 , 200 , 195.
Townsville University - 256 , 248 , 194 , 192 , 135.

April 2025

Mount Isa - 37 , 29 , 29 , 27 , 26.
Queensland Children's - 84 , 57 , 55 , 52 , 51.
Caboolture - 118 , 113 , 104 , 92 , 91.
Maryborough - 363 , 153 , 119 , 106 , 92.
The Prince Charles - 111 , 99 , 98 ; 98 ; 96.
Hervey Bay - 138 , 110 , 102 , 102 , 101.
Gladstone - 174 ; 138 , 131 , 127 , 106.
Rockhampton - 153 , 120 , 116 , 107 , 106.
Redcliffe - 114 , 112 , 111 , 109 , 108.
Royal Brisbane & Women's - 164 , 114 , 112 , 112 , 111.
Nambour --148 , 133 , 132 , 127 , 114.
Sunshine Coast University - 159 , 149 , 142 ; 138 ; 131.
Mackay - 163 , 159 , 142 , 141 , 136.
Robina - 178 , 174 , 151 , 149 , 143.
Cairns - 242 , 160 , 148 , 145 , 144.
Gympie - 161 , 156 , 152 , 146 , 144.
Toowoomba - 210 , 179 , 174 , 168 , 155.
Bundaberg - 324 , 213 , 212 , 200 , 195.
Townsville University - 224 , 222 , 215 , 211 , 196.
Redland - 285 , 247 ; 238 , 230 , 217.
Queen Elizabeth II - 356 , 297 , 238 , 222 , 220.
Logan - 329 , 292 , 286 , 276 , 258.
Princess Alexandra - 359 , 351 , 336 , 312 , 294.
Mater Adults - 348 , 343 , 343 , 333 , 302.
Gold Coast University - 429 , 414 , 399 , 328 , 311.
Ipswich - 477 , 412 , 392 , 384 , 362.

March 2025

Bundaberg - 231 , 183 , 172 , 164 , 163.
Caboolture - 114 , 96 , 88 , 84 , 82.
Cairns - 222 , 198 , 179 , 168 , 159.
Gladstone - 261 , 218 , 216 , 213 , 191.
Gold Coast University - 215 , 205 , 194 , 179 , 172.
Gympie - 150 , 142 . 97 , 91 , 89.
Hervey Bay - 219 , 183 , 174 , 158 . 151.
Ipswich - 426 , 419 , 412 , 405 , 349.
Logan - 271 . 239 , 229 . 227 , 222.
Mackay - 133 , 131 , 129 , 125 , 123.

Maryborough --166 , 152, 139 , 110, 102.
Mater Adults - 380 , 330, 303 , 294 ,290.
Mount Isa - 74 , 69, 31 , 30, 30.
Nambour - 138 , 126, 126 , 114 ,112.
Princess Alexandra - 401 , 312; 267 , 259. 252.
Queen Elizabeth II - 352 , 231, 229 , 226, 215.
Queensland Children's - 116 , 93. 68 , 66. 63.
Redcliffe - 137 , 131, 114 , 113, 112.
Redland - 340 , 313, 297 , 268, 241.
Robina - 236 ; 172, 135 ; 127, 124.
Rockhampton - 144 , 138, 128 , 125, 123.
Royal Brisbane & Women's - 184 , 146, 146 , 133, 132.
Sunshine Coast University - 244 , 151, 149 , 125, 120.
The Prince Charles - 104 , 98. 98 , 98, 98.
Toowoomba - 245 , 191, 175 , 170, 151.
Townsville University - 335 .309, 240 , 205, 203.

February 2025

Mount Isa – 123, 85 , 63 , 38 , 31.
Robina – 102, 94 , 93 , 93 , 93.
Queensland Children's – 97, 96 , 93 , 87 , 59.
The Prince Charles – 114, 99 , 99 , 99 , 99.
Redcliffe – 114, 113 . 113 , 111 . 110.
Royal Brisbane & Women's – 124, 113 , 112 , 112 , 112.
Cairns – 141, 115 , 114 , 113 , 103.
Gladstone – 129, 115 , 109 , 104 , 103.
Gympie – 129, 116 . 115 . 107 . 105.
Caboolture – 122, 122 , 120 , 119 , 119.
Maryborough – 157, 138 , 126 , 120 , 120.
Mackay – 164, 146 , 143 , 134 , 131.
Rockhampton – 170, 157 , 149 , 148 , 126.
Nambour – 171, 163 , 140 , 136 , 133.
Townsville University – 166, 165 , 163 , 159 , 154.
Bundaberg – 173, 168 , 154 , 153 , 146.
Toowoomba –197, 190 , 179 , 159 , 154.
Hervey Bay – 235, 197 , 177 , 169 , 168.
Sunshine Coast University – 212, 199 , 163 , 134 , 134.
Gold Coast University – 255; 223 ; 211 ; 190 ; 187.
Princess Alexandra – 275. 238 , 233 , 230 , 229.
Logan – 254. 245 , 242 , 236 , 230.
Queen Elizabeth II – 279, 258 , 248 , 247 , 246.
Mater Adults – 296, 276 , 276 , 258 , 252.
Redland – 324, 288 , 217 , 210 , 205.
Ipswich – 420, 418 .412 , 409 .369.

January 2025

Ipswich - 469 , 445 , 442 , 432 , 426.
Logan - 448 , 345 , 322 , 286 , 281.
Princess Alexandra - 373 , 270 , 251 , 238 , 237.

Mater Adults - 355 , 344 , 330 , 328 , 321.
 Hervey Bay - 316 , 241 . 208 . 183 , 182.
 Queen Elizabeth II - 284 , 254 , 253 , 231 , 213.
 Toowoomba - 271 , 268 , 268 , 263 , 258.
 Redland - 264 , 244 , 221 , 217 , 203.
 Townsville University - 263 . 227 . 205 . 204 . 202.
 Gold Coast University - 262 , 261 , 259 , 240 , 238.
 Bundaberg --250 , 232 , 183 , 178 , 165.
 Gympie - 236 , 234 , 230 , 184 , 165.
 Sunshine Coast University - 211 , 188 , 182 , 166 , 166.
 Gladstone - 209 , 191 , 154 , 150 , 134.
 Nambour - 204 , 150 , 144 , 141 , 128.
 Robina - 196 , 169 , 163 , 154 , 152.
 Mackay - 187 , 148 , 147 , 126 , 120.
 Cairns - 171 , 156 , 136 , 128 , 127.
 Rockhampton - 139 , 137 , 131 , 124 , 123.
 Royal Brisbane & Women's - 126 ; 112 ; 112 ; 111 ; 111.
 Caboolture - 125 , 124 , 122 , 122 , 121.
 The Prince Charles - 125 , 98 , 98 , 97 , 97.
 Maryborough - 117 , 116 , 101 , 96 , 91.
 Redcliffe - 113 , 113 , 113 , 112 , 110.
 Queensland Children's - 64 , 56 , 56 , 55 , 54.
 Mount Isa - 30 .29 .27 .26 , 25.

December 2024

Bundaberg - 148 , 142 , 120 , 116 , 114.
 Caboolture - 136 , 125 , 125 , 123 , 122.
 Cairns - 306 , 220 , 220 , 198 , 192.
 Gladstone - 195 , 166 , 155 , 151 , 148.
 Gold Coast University --301 , 276 . 274 , 267 . 257.
 Gympie - 241 , 205 , 196 , 192 , 164.
 Hervey Bay - 190 , 177 , 160 , 147 , 136.
 Ipswich - 399 , 393 , 386 , 374 , 366.
 Logan - 363 . 343 . 287 . 275 . 270.
 Mackay - 294 , 264 , 216 , 171 , 163.
 Maryborough - 142 , 137 , 123 , 121 , 121.
 Mater Adults - 427 , 404 , 391 , 378 , 358.
 Mount Isa - 77 , 70 , 69 , 45 , 38.
 Nambour - 321 , 233 , 184 , 177 , 167.
 Princess Alexandra - 304 , 286 , 285 , 276 , 269.
 Queen Elizabeth II - 355 , 237 , 225 , 225 , 215.
 Queensland Children's --67 , 61 , 56 , 54 , 51.
 Redcliffe - 114 , 114 , 114 , 113 , 113.
 Redland - 284 , 233 , 228 , 204 , 203.
 Robina - 218 ; 209 ; 194 ; 189 ; 180.
 Rockhampton - 131 , 116 , 113 , 111 , 109.
 Royal Brisbane & Women's - 156 , 112 , 111 , 111 , 111.
 Sunshine Coast University - 211 , 180 , 179 , 171 , 168.
 The Prince Charles - 173 , 105 , 98 , 98 , 98.
 Toowoomba - 235 , 215 , 202 , 201 , 196.

Townsville University - 142 , 141 .139 .111 .108.

November 2024

Mount Isa - 43 , 33 , 31 , 29 , 29.
Mater Adults - 364 , 340 , 335 , 334 , 333.
Maryborough - 137 , 130 , 120 , 117 , 107.
Mackay - 452 , 184 , 174 , 172 , 168.
Logan --373 , 297 , 290 , 272 , 265.
Ipswich - 384 , 376 , 366 , 337 , 289.
Hervey Bay - 238 , 141 , 140 , 125 , 116.
Gympie - 89 , 76 , 76 , 75 , 75.
Gold Coast University - 249 . 189 . 175 . 167 . 163.
Gladstone - 134 , 129 , 108 , 107 , 104.
Cairns - 459 , 207 , 201 , 187 , 181.
Caboolture - 119 , 117 , 110 , 109 , 109.
Bundaberg --291 , 227 , 177 , 154 , 148.
Robina - 154 , 139 , 138 , 134 , 121.
Rockhampton - 178 , 135 , 120 , 116 , 115.
Royal Brisbane & Women's - 119 , 112 , 112 , 111 , 111.
Sunshine Coast University - 149 , 136 , 135 , 119 , 117.
The Prince Charles - 129 , 117 , 97 , 97 , 96.
Toowoomba - 416 , 261 , 182 , 166 , 155.
Townsville University - 164 ; 113 ; 106 ; 106 ; 102.
Nambour - 117 , 112 , 107 , 104 , 103.
Princess Alexandra - 466 , 350 , 284 , 264 , 252.
Queen Elizabeth II - 367 , 293 , 268 , 258 , 236.
Queensland Children's - 179 , 121 , 102 , 98 , 95.
Redcliffe - 114 , 112 , 111 , 111 , 111.
Redland - 261 , 220 .220 .207 .185.

October 2024

Townsville University - 197 , 183 , 135 , 127 , 121.
Toowoomba - 305 , 250 , 244 , 228 , 213.
The Prince Charles - 99 , 98 , 97 , 97 , 97.
Sunshine Coast University - 202 , 189 , 174 , 164 , 159.
Royal Brisbane & Women's - 217 , 112 , 111 , 110 , 110.
Rockhampton - 262 , 173 , 145 , 136 , 134.
Robina - 256 , 236 , 160 , 143 , 141.
Redland - 242 , 233 , 220 , 214 , 194.
Redcliffe - 112 . 112 . 111 . 111 . 110.
Queensland Children's - 80 , 80 , 75 , 75 , 64.
Queen Elizabeth II - 233 , 227 , 210 , 197 , 197.
Princess Alexandra - 230 , 228 , 228 , 209 , 199.
Nambour - 153 , 139 , 132 , 125 , 121.
Mount Isa - 40 , 31 , 30 , 30 , 29.
Mater Adults - 351 , 345 , 340 , 291 , 286.
Maryborough - 120 , 117 , 103 , 95 , 86.
Mackay - 205 , 195 , 178 , 174 , 167.
Logan - 456 , 325 , 318 , 273 , 270.

Ipswich --469 , 446 , 425 , 385 , 384.
 Hervey Bay - 152 ; 143 ; 140 ; 135 ; 131.
 Gympie - 161 , 156 , 141 , 139 , 139.
 Gold Coast University - 257 , 209 , 193 , 175 , 165.
 Gladstone - 144 , 123 , 109 , 108 , 104.
 Cairns - 226 , 192 , 182 , 179 , 178.
 Caboolture - 131 , 123 , 122 , 120 , 119.
 Bundaberg - 262 .189 .179 .177 .176.

(b) The five longest wait times a patient faced who was not seen within clinically recommended time for their urgency category, by facility, Oct-24 to May-25 (expressed in minutes)

Bundaberg: May 25: 867, 574, 408, 381, 357 , Apr 25: 555, 519, 463, 453, 436 , Mar 25: 578, 533, 483, 387, 374 , Feb 25: 533, 493, 459, 447, 440 , Jan 25: 546, 440, 417, 369, 368 , Dec 24: 915, 868, 776, 728, 445 , Nov 24 - 544, 466, 390, 362, 357 , Oct 24:560, 483, 477, 451, 424.

Caboolture: May 25: 667, 509, 508, 494, 478 , Apr 25: 352, 330, 292, 284, 283 , Mar 25: 309, 281, 269, 263, 241 , Feb 25: 329, 313, 289, 257, 235 , Jan 25: 342, 325, 320, 320, 286 , Dec 24: 728, 662, 404, 374, 358 , Nov 24 - 663, 557, 419, 398, 387 , Oct 24: 526, 356, 345, 345, 306.

Cairns: May 25: 465, 341, 336, 308, 287 , Apr 25: 332, 316, 260, 251, 234 , Mar 25: 315, 227, 213, 208, 205 , Feb 25: 219, 213, 209, 199, 195 , Jan 25: 306, 258, 252, 248, 240 , Dec 24: 327, 288, 286, 283, 280 , Nov 24 - 354, 342, 279, 267, 236 , Oct 24:328, 321, 306, 295, 244.

Gladstone: May 25: 291, 238, 223, 223, 213 , Apr 25: 222, 218, 206, 187, 183 , Mar 25: 226, 217, 216, 212, 208 , Feb 25: 363, 275, 271, 240, 240 , Jan 25: 713, 390, 308, 307, 277 , Dec 24: 530, 386, 346, 303, 290 , Nov 24 - 378, 242, 238, 233, 208 , Oct 24: 338, 290, 237, 229, 229.

Gold Coast University: May 25: 380, 347, 329, 323, 320 , Apr 25: 449, 416, 378, 366, 352 , Mar 25: 467, 378, 375, 346, 335 , Feb 25: 418, 367, 325, 324, 317 , Jan 25: 384, 306, 291, 289, 283 , Dec 24: 474, 380, 371, 346, 336 , Nov 24 - 426, 370, 358, 349, 310 , Oct 24:449, 361, 346, 325, 317.

Gympie: May 25: 229, 218, 200, 196, 190 , Apr 25: 245, 243, 231, 204, 197 , Mar 25: 204, 203, 196, 186, 186 , Feb 25: 270, 197, 190, 187, 184 , Jan 25: 218, 205, 186, 173, 171 , Dec 24: 244, 241, 211, 210, 204 , Nov 24 - 257, 226, 208, 204, 203 , Oct 24: 350, 314, 299, 298, 292.

Hervey Bay: May 25: 590, 428, 392, 378, 368 , Apr 25: 617, 474, 472, 437, 432 , Mar 25: 418, 394, 376, 363, 361 , Feb 25: 473, 466, 463, 449, 430 , Jan 25: 468, 437, 414, 383, 369 , Dec 24: 422, 404, 364, 353, 352 , Nov 24 - 552, 460, 438, 422, 408 , Oct 24:429, 420, 392, 372, 366.

Ipswich: May 25: 563, 561, 512, 480, 442 , Apr 25: 844, 447, 443, 436, 418 , Mar 25: 593, 437, 382, 369, 361 , Feb 25: 559, 536, 484, 450, 448 , Jan 25: 647, 589, 477,

431, 375 , Dec 24: 620, 607, 581, 567, 562 , Nov 24 - 366, 346, 316, 315, 313 , Oct 24: 666, 524, 507, 422, 419.

Logan: May 25: 555, 483, 480, 479, 477 , Apr 25: 476, 424, 414, 392, 388 , Mar 25: 404, 346, 342, 320, 317 , Feb 25: 695, 432, 429, 420, 402 , Jan 25; 515, 431, 385, 380, 360 , Dec 24: 470, 411, 393, 392, 388 , Nov 24 - 641, 570, 467, 430, 427 , Oct 24:460, 374, 371, 362, 362.

Mackay: May 25: 349, 264, 257, 242, 238 , Apr 25: 373, 346, 316, 313, 290 , Mar 25: 329, 292, 292, 281, 263 , Feb 25: 668, 346, 244, 238, 223 , Jan 25; 257, 255, 227, 226, 206 , Dec 24: 259, 232, 226, 218, 182 , Nov 24 - 342, 186, 183, 180, 176 , Oct 24: 424, 373, 305, 271, 227.

Maryborough: May 25: 320, 313, 298, 297, 287 , Apr 25: 424, 361, 360, 360, 347 , Mar 25: 352, 333, 333, 331, 312 , Feb 25: 433, 412, 410, 400, 372 , Jan 25; 559, 393, 330, 310, 301 , Dec 24: 312, 301, 263, 262, 261 , Nov 24 - 460, 410, 371, 369, 358 , Oct 24:339, 326, 306, 303, 300.

Mater Adults: May 25: 368, 352, 318, 308, 295 , Apr 25: 317, 281, 261, 260, 223 , Mar 25: 235, 211, 211, 207, 204 , Feb 25: 466, 253, 245, 245, 217 , Jan 25; 411, 403, 304, 251, 237 , Dec 24: 368, 366, 351, 324, 282 , Nov 24 - 356, 330, 323, 258, 251 , Oct 24: 381, 325, 261, 239, 236.

Mount Isa: May 25: 244, 233, 231, 230, 218 , Apr 25: 276, 259, 249, 240, 237 , Mar 25: 416, 230, 202, 193, 190 , Feb 25: 209, 192, 185, 181, 177 , Jan 25; 284, 257, 225, 223, 203 , Dec 24: 360, 249, 244, 232, 232 , Nov 24 - 277, 247, 220, 212, 188 , Oct 24:533, 278, 244, 222, 213.

Nambour: May 25:297, 270, 230, 208, 201 , Apr 25: 240, 178, 178, 174, 151 , Mar 25: 224, 202, 198, 164, 162 , Feb 25: 214, 194, 192, 189, 170 , Jan 25; 361, 217, 211, 195, 194 , Dec 24: 211, 196, 184, 181, 175 , Nov 24 - 251, 207, 184, 172, 165 , Oct 24: 213, 192, 185, 177, 176.

Princess Alexandra: May 25:694, 610, 591, 517, 449 , Apr 25: 492, 383, 377, 367, 362 , Mar 25: 387, 281, 264, 264, 258 , Feb 25: 433, 402, 386, 374, 360 , Jan 25; 521, 504, 404, 376, 369 , Dec 24: 577, 556, 545, 472, 460 , Nov 24 - 557, 525, 511, 486, 445 , Oct 24:477, 363, 359, 353, 324.

Queen Elizabeth II: May 25:326, 277, 274, 272, 268 , Apr 25: 419, 387, 378, 362, 357 , Mar 25: 354, 349, 288, 278, 278 , Feb 25: 334, 303, 281, 267, 262 , Jan 25; 340, 280, 276, 271, 270 , Dec 24: 500, 434, 388, 362, 320 , Nov 24 - 394, 362, 344, 343, 341 , Oct 24: 387, 289, 288, 287, 286.

Queensland Children's: May 25: 234, 207, 203, 196, 189 , Apr 25: 192, 191, 181, 167, 167 , Mar 25: 237, 232, 231, 216, 216 , Feb 25: 226, 218, 202, 201, 200 , Jan 25; 261, 253, 240, 221, 206 , Dec 24: 214, 202, 192, 176, 168 , Nov 24 - 311, 305, 285, 256, 232 , Oct 24:226, 222, 213, 210, 203.

Redcliffe: May 25: 359, 322, 253, 246, 231 , Apr 25: 337, 213, 205, 203, 203 , Mar 25: 226, 198, 194, 178, 171 , Feb 25: 303, 285, 260, 227, 177 , Jan 25; 440, 320,

272, 240, 229 , Dec 24: 356, 279, 236, 215, 215 , Nov 24 - 270, 262, 188, 166, 166 , Oct 24: 320, 309, 233, 219, 196.

Redland: May 25:391, 293, 255, 243, 230 , Apr 25: 337, 316, 254, 250, 245 , Mar 25: 221, 215, 214, 213, 203 , Feb 25: 270, 265, 259, 258, 257 , Jan 25: 424, 390, 301, 277, 267 , Dec 24: 376, 313, 282, 262, 243 , Nov 24 - 288, 272, 263, 252, 250 , Oct 24:295, 261, 247, 243, 239.

Robina: May 25: 305, 292, 225, 218, 201 , Apr 25: 211, 183, 153, 153, 142 , Mar 25: 197, 183, 167, 159, 156 , Feb 25: 241, 210, 210, 207, 188 , Jan 25: 205, 189, 188, 176, 173 , Dec 24: 206, 195, 178, 176, 171 , Nov 24 - 332, 248, 238, 232, 206 , Oct 24: 395, 277, 213, 155, 153.

Rockhampton: May 25: 480, 430, 305, 305, 298 , Apr 25: 413, 367, 336, 330, 292 , Mar 25: 319, 308, 291, 289, 288 , Feb 25: 447, 370, 351, 340, 320 , Jan 25: 459, 330, 308, 307, 306 , Dec 24: 435, 382, 355, 315, 314 , Nov 24 - 353, 290, 249, 246, 242 , Oct 24:363, 354, 311, 287, 284.

Royal Brisbane & Women's: May 25: 488, 432, 365, 341, 335 , Apr 25: 472, 436, 430, 396, 393 , Mar 25: 444, 341, 277, 274, 270 , Feb 25: 615, 446, 343, 342, 339 , Jan 25: 287, 285, 282, 277, 263 , Dec 24: 471, 301, 299, 287, 267 , Nov 24 - 377, 330, 287, 276, 264 , Oct 24: 303, 268, 245, 239, 227.

Sunshine Coast University: May 25: 369, 334, 265, 261, 252 , Apr 25: 324, 261, 254, 247, 227 , Mar 25: 289, 258, 248, 246, 241 , Feb 25: 332, 304, 304, 302, 289 , Jan 25: 400, 318, 311, 306, 305 , Dec 24: 402, 396, 361, 277, 275 , Nov 24 - 282, 220, 206, 205, 198 , Oct 24:343, 303, 285, 276, 270.

The Prince Charles: May 25: 284, 266, 239, 237, 225 , Apr 25: 332, 326, 311, 296, 266 , Mar 25: 323, 305, 228, 221, 213 , Feb 25: 442, 276, 267, 263, 209 , Jan 25: 231, 196, 178, 173, 158 , Dec 24: 287, 203, 174, 161, 159 , Nov 24 - 267, 175, 170, 131, 126 , Oct 24: 212, 198, 186, 184, 154.

Toowoomba: May 25: 750, 495, 447, 444, 433 , Apr 25: 555, 528, 495, 489, 470 , Mar 25: 497, 475, 458, 454, 447 , Feb 25: 484, 461, 459, 443, 398 , Jan 25: 486, 478, 463, 456, 450 , Dec 24: 492, 491, 482, 481, 470 , Nov 24 - 491, 484, 480, 474, 473 , Oct 24:665, 539, 443, 442, 439.

Townsville University: May 25:722, 690, 510, 368, 358 , Apr 25: 604, 473, 392, 365, 363 , Mar 25: 464, 456, 423, 419, 377 , Feb 25: 602, 501, 499, 424, 390 , Jan 25: 598, 350, 327, 321, 318 , Dec 24: 567, 359, 355, 344, 320 , Nov 24 - 412, 359, 338, 337, 323 , Oct 24: 444, 433, 372, 362, 362.

(c) The five longest stays in emergency departments, by facility, Oct-24 to May-25 (expressed in hours to the nearest hour)

Townsville University: May 25: 34, 33, 31, 31, 30 , Apr 25: 63, 58, 40, 40, 39 , Mar 25: 55, 54, 52, 50, 50 , Feb 25: 75, 55, 55, 52, 51 , Jan 25: 69, 65, 60, 58, 57 , Dec 24: 62, 48, 48, 40, 35 , Nov 24 - 39, 32, 31, 29, 29 , Oct 24:41, 41, 40, 36, 30.

Toowoomba: May 25: 25, 25, 25, 24, 24 , Apr 25: 24, 24, 24, 24, 24 , Mar 25: 27, 24, 24, 24, 24 , Feb 25: 73, 69, 56, 50, 48 , Jan 25: 116, 115, 109, 88, 86 , Dec 24: 87, 69, 68, 65, 65 , Nov 24 - 91, 89, 80, 73, 71 , Oct 24: 122, 90, 81, 74, 74.

The Prince Charles: May 25: 24, 24, 24, 24, 24 , Apr 25: 43, 32, 29, 28, 24 , Mar 25: 40, 23, 23, 23, 23 , Feb 25: 36, 35, 35, 30, 28 , Jan 25: 23, 23, 23, 23, 23 , Dec 24: 28, 28, 25, 23, 23 , Nov 24 - 27, 27, 24, 23, 23 , Oct 24: 44, 27, 26, 25, 24.

Sunshine Coast University: May 25: 24, 23, 23, 23, 23 , Apr 25: 24, 23, 22, 22, 22 , Mar 25: 25, 24, 24, 24, 24 , Feb 25: 24, 24, 24, 24, 24 , Jan 25: 29, 26, 25, 24, 24 , Dec 24: 37, 24, 24, 24, 24 , Nov 24 - 25, 24, 23, 23, 23 , Oct 24: 30, 30, 29, 24, 24.

Royal Brisbane & Women's: May 25: 24, 24, 24, 24, 24 , Apr 25: 24, 24, 24, 24, 23 , Mar 25: 31, 26, 23, 23, 23 , Feb 25: 35, 31, 29, 25, 24 , Jan 25: 52, 41, 34, 32, 30 , Dec 24: 42, 35, 35, 34, 33 , Nov 24 - 49, 49, 42, 39, 32 , Oct 24: 33, 32, 30, 30, 29.

Rockhampton: May 25: 140, 124, 116, 88, 70 , Apr 25: 73, 69, 68, 56, 53 , Mar 25: 107, 100, 96, 95, 94 , Feb 25: 99, 89, 88, 80, 80 , Jan 25: 114, 111, 104, 99, 97 , Dec 24: 98, 89, 87, 81, 78 , Nov 24 - 92, 92, 88, 70, 69 , Oct 24: 117, 111, 84, 72, 71.

Robina: May 25: 32, 30, 29, 27, 25 , Apr 25: 25, 24, 24, 24, 24 , Mar 25: 24, 24, 24, 24, 24 , Feb 25: 57, 42, 41, 38, 37 , Jan 25: 46, 43, 39, 39, 38 , Dec 24: 38, 32, 31, 31, 28 , Nov 24 - 26, 26, 26, 25, 24 , Oct 24: 38, 34, 32, 30, 30.

Redland: May 25: 45, 43, 34, 34, 32 , Apr 25: 72, 48, 37, 31, 30 , Mar 25: 51, 42, 32, 31, 29 , Feb 25: 45, 42, 38, 37, 34 , Jan 25: 47, 39, 36, 35, 34 , Dec 24: 48, 45, 41, 40, 39 , Nov 24 - 53, 49, 37, 33, 33 , Oct 24: 41, 40, 38, 37, 35.

Redcliffe: May 25: 41, 29, 27, 26, 26 , Apr 25: 48, 29, 28, 25, 24 , Mar 25: 48, 28, 26, 24, 24 , Feb 25: 65, 35, 28, 27, 27 , Jan 25: 46, 42, 41, 38, 38 , Dec 24: 57, 57, 48, 46, 44 , Nov 24 - 50, 46, 44, 42, 41 , Oct 24: 73, 40, 39, 39, 33.

Queensland Children's: May 25: 30, 25, 22, 22, 21 , Apr 25: 24, 20, 19, 19, 19 , Mar 25: 40, 28, 20, 18, 17 , Feb 25: 27, 20, 19, 19, 18 , Jan 25: 19, 18, 17, 16, 16 , Dec 24: 18, 17, 15, 15, 15 , Nov 24 - 25, 21, 20, 19, 18 , Oct 24: 24, 24, 20, 20, 19.

Queen Elizabeth II: May 25: 24, 23, 23, 23, 23 , Apr 25: 25, 24, 24, 24, 24 , Mar 25: 38, 26, 24, 24, 24 , Feb 25: 27, 23, 23, 23, 22 , Jan 25: 25, 23, 23, 22, 21 , Dec 24: 27, 25, 25, 24, 23 , Nov 24 - 24, 24, 23, 22, 22 , Oct 24: 32, 25, 24, 24, 23.

Princess Alexandra: May 25: 24, 24, 24, 24, 24 , Apr 25: 24, 24, 24, 24, 23 , Mar 25: 24, 24, 24, 24, 24 , Feb 25: 28, 24, 24, 24, 23 , Jan 25: 28, 28, 27, 27, 26 , Dec 24: 40, 32, 32, 30, 30 , Nov 24 - 35, 33, 29, 28, 28 , Oct 24: 40, 30, 29, 28, 26.

Nambour: May 25: 28, 28, 24, 23, 23 , Apr 25: 22, 22, 21, 21, 21 , Mar 25: 24, 23, 23, 23, 23 , Feb 25: 29, 26, 26, 25, 24 , Jan 25: 45, 40, 32, 32, 31 , Dec 24: 28, 28, 27, 27, 24 , Nov 24 - 28, 26, 25, 24, 24 , Oct 24: 24, 24, 24, 23, 23.

Mount Isa: May 25: 52, 48, 45, 44, 43 , Apr 25: 45, 32, 28, 28, 24 , Mar 25: 26, 22, 22, 22, 20 , Feb 25: 73, 44, 42, 30, 22 , Jan 25: 59, 46, 44, 40, 28 , Dec 24: 72, 65, 52, 43, 42 , Nov 24 - 70, 61, 51, 37, 30 , Oct 24: 55, 46, 39, 36, 33.

Mater Adults: May 25:72, 55, 37, 30, 30 , Apr 25: 44, 30, 28, 27, 27 , Mar 25: 30, 30, 28, 28, 27 , Feb 25: 34, 31, 29, 28, 27 , Jan 25: 50, 34, 30, 30, 28 , Dec 24: 31, 30, 29, 28, 28 , Nov 24 - 50, 31, 30, 29, 28 , Oct 24:53, 30, 30, 29, 29.

Maryborough: May 25:58, 58, 30, 30, 24 , Apr 25: 54, 39, 35, 29, 28 , Mar 25: 43, 41, 34, 28, 28 , Feb 25: 69, 51, 45, 43, 40 , Jan 25: 80, 76, 51, 50, 40 , Dec 24: 48, 32, 30, 28, 25 , Nov 24 - 74, 64, 54, 48, 48 , Oct 24: 52, 42, 39, 35, 33.

Mackay: May 25: 30, 27, 27, 25, 25 , Apr 25: 54, 48, 47, 40, 39 , Mar 25: 57, 48, 44, 44, 43 , Feb 25: 59, 53, 51, 50, 49 , Jan 25: 63, 61, 50, 49, 49 , Dec 24: 75, 70, 66, 57, 56 , Nov 24 - 76, 72, 61, 57, 54 , Oct 24:76, 74, 66, 66, 65.

Logan: May 25: 45, 43, 34, 34, 32 , Apr 25: 72, 48, 37, 31, 30 , Mar 25: 51, 42, 32, 31, 29 , Feb 25: 45, 42, 38, 37, 34 , Jan 25: 47, 39, 36, 35, 34 , Dec 24: 48, 45, 41, 40, 39 , Nov 24 - 53, 49, 37, 33, 33 , Oct 24: 41, 40, 38, 37, 35.

Ipswich: May 25:57, 50, 49, 49, 49 , Apr 25: 57, 54, 54, 52, 52 , Mar 25: 80, 75, 75, 73, 71 , Feb 25: 75, 73, 73, 72, 71 , Jan 25: 78, 76, 74, 73, 73 , Dec 24: 58, 58, 56, 50, 49 , Nov 24 - 53, 52, 50, 50, 48 , Oct 24:79, 78, 73, 71, 71.

Hervey Bay: May 25: 65, 49, 48, 48, 47 , Apr 25: 50, 48, 43, 42, 37 , Mar 25: 69, 66, 62, 58, 55 , Feb 25: 70, 69, 68, 67, 65 , Jan 25: 95, 81, 81, 79, 77 , Dec 24: 79, 72, 68, 64, 62 , Nov 24 - 97, 88, 74, 73, 73 , Oct 24: 113, 103, 95, 88, 76.

Gympie: May 25: 29, 24, 23, 23, 23 , Apr 25: 24, 23, 23, 23, 23 , Mar 25: 28, 26, 24, 24, 23 , Feb 25: 26, 25, 24, 24, 22 , Jan 25: 52, 51, 50, 48, 48 , Dec 24: 49, 46, 39, 39, 38 , Nov 24 - 28, 27, 27, 26, 25 , Oct 24:42, 32, 30, 28, 26.

Gold Coast University: May 25: 29, 26, 25, 25, 25 , Apr 25: 27, 26, 26, 25, 25 , Mar 25: 38, 35, 35, 34, 31 , Feb 25: 38, 36, 35, 35, 33 , Jan 25: 50, 48, 41, 41, 39 , Dec 24: 41, 40, 39, 39, 39 , Nov 24 - 50, 41, 39, 38, 37 , Oct 24: 63, 38, 33, 32, 32.

Gladstone: May 25: 149, 123, 120, 93, 86 , Apr 25: 120, 88, 77, 70, 68 , Mar 25: 96, 89, 52, 49, 47 , Feb 25: 114, 113, 101, 81, 76 , Jan 25: 139, 114, 112, 110, 90 , Dec 24: 101, 95, 74, 74, 71 , Nov 24 - 90, 75, 70, 66, 55 , Oct 24:175, 90, 68, 64, 54.

Cairns: May 25: 34, 27, 23, 23, 23 , Apr 25: 24, 24, 23, 23, 23 , Mar 25: 27, 26, 26, 26, 25 , Feb 25: 39, 36, 34, 33, 30 , Jan 25: 33, 29, 26, 26, 25 , Dec 24: 35, 28, 27, 27, 26 , Nov 24 - 32, 28, 26, 26, 24 , Oct 24: 25, 24, 24, 24, 24.

Caboolture: May 25: 28, 26, 26, 26, 24 , Apr 25: 42, 29, 29, 28, 24 , Mar 25: 27, 24, 24, 24, 24 , Feb 25: 49, 43, 42, 42, 40 , Jan 25: 68, 56, 54, 50, 49 , Dec 24: 66, 55, 52, 44, 44 , Nov 24 - 53, 43, 39, 33, 31 , Oct 24:55, 50, 49, 45, 36.

Bundaberg: May 25:60, 59, 56, 55, 55 , Apr 25: 49, 48, 48, 47, 45 , Mar 25: 66, 50, 50, 49, 48 , Feb 25: 63, 62, 62, 55, 52 , Jan 25: 56, 51, 51, 49, 48 , Dec 24: 71, 62, 53, 51, 50 , Nov 24 - 40, 38, 35, 34, 34 , Oct 24: 63, 43, 37, 34, 33.

(d) Greatest ambulance 'lost time' value is the same number as the longest POST time provided in (a) less 30 mins.



THE HON TANYA PLIBERSEK MP
MINISTER FOR THE ENVIRONMENT AND WATER

MS23-001796

Ms Audrey Azoulay
Director-General
UNESCO
7, place de Fontenoy
75352 Paris 07 SP
FRANCE

dg.secretariat@unesco.org

Health, Environment and Innovation Committee:

Location: Brisbane - L/C Chamber

Tabled Doc No: 1

Tabled by: Joe Kelly

Committee/Inquiry Secretary: Kellie Jones

Date: 11/8/25

Dear Director-General

I would like to thank UNESCO and the World Heritage Centre for your positive engagement with the Australian and Queensland Governments to maintain the Outstanding Universal Value of the Great Barrier Reef (the Reef). Australia's active progress towards the Reactive Monitoring Mission (Mission) report's recommendations and continued dialogue demonstrates our shared interest and urgency to protect and restore the Reef, and better manage it for the future as one of Australia's most precious and unique places.

Our Governments are pleased to further commit substantial actions to secure the future of the Reef. These measures include substantial fisheries reforms; accelerated action to improve water quality; and strong, legislated climate action. We have worked closely with the World Heritage Centre to ensure these actions meet your expectations and address the recommendations of the Mission report. Our detailed commitments are enclosed, and I would appreciate your confirmation that these, together with our other actions under the Reef 2050 Long-Term Sustainability Plan, address the concerns of UNESCO and the recommendations of the Mission report.

Australian and Queensland Governments' combined investment of A\$4.4 billion underpins the delivery of the Reef 2050 Long-Term Sustainability and confirms our resolve to secure the future of the Reef.

These new measures are an outstanding outcome and will lead to a stronger Reef. They underscore our Governments' commitment to work collaboratively and deliver on our commitment both to protect the Reef and to demonstrate international environmental leadership. The measures will be successful because of the important contributions and efforts of Australia's First Nations communities, Australian industry and the broader community working together for a common cause to safeguard the future of one of Australia and the World's most iconic places.

I also want to acknowledge the expertise and advice provided by UNESCO and the World Heritage advisory bodies and thank you for the constructive engagement that has informed these significant commitments.

Yours sincerely

A handwritten signature in blue ink, reading 'Tanya Plibersek', with a stylized, flowing script.

TANYA PLIBERSEK

Enc Australian commitments document – May 2023

cc: Senator Nita Green – Envoy to the Great Barrier Reef
Mr Ernesto Ottone Ramirez – Assistant Director-General for Culture, UNESCO
Mr Lazare Eloundou Assomo – Director, UNESCO World Heritage Centre

25.5.2023

State of conservation of the Great Barrier Reef World Heritage property

Australian and Queensland government commitments for the protection of the Great Barrier Reef – May 2023

Water quality

Australia commits to enact, with immediate effect, a major shift in its water quality programs, alongside an AUD\$ 1 billion water quality investment through to 2030, with the aim to achieve the 2025 water quality targets and commence a drastic reduction in overall pollutant discharge into the property by 2030, in particular for fine sediment and dissolved inorganic nitrogen. This will put the property on a solid pathway to reach its full ecosystem health by 2050, consistent with the Reef 2050 Long-Term Sustainability Plan.

1. By 31 December 2023: Deliver a complete mapping of all priority areas of grazing land for gully repairs and associated restoration and remediation activities, the identification of the priority gullies where the repair, restoration and remediation action will have the greatest impact on sediment reduction, and a detailed timeline for the completion of the repair of the areas of highest priority.
2. By 31 December 2023: Initiate the delivery of a joint federal-state program that will start repairing and restoring the gullies of the highest priority with immediate effect and deliver significant and meaningful sediment reduction necessary to protect the ecology of the Great Barrier Reef including the most polluting catchment areas (e.g. Burdekin, Fitzroy and Burnett Mary catchments).
3. By 30 June 2025: Finalise the independent water quality science review and the Scientific Consensus Statement as the foundational scientific understanding to underpin the revision of the Reef Water Quality Improvement Plan and the establishment of new water quality targets for the period 2025-2030, to ensure consistency with the management frameworks adopted in the Reef 2050 Plan
4. By July 2024: expand the implementation of 2018 land clearing legislation and further strengthen protection to remnant and high value conservation areas, including, through an accelerated and enhanced compliance program to secure the protection of remnant native vegetation in areas of high conservation value in the Reef catchments.
5. By February 2025: accelerate progress to achieve all water quality targets through a program of sediment, nutrient and pesticide reduction through combined efforts in regulation, incentives, and accelerated landscape restoration programs, e.g. 60% reduction in dissolved inorganic nitrogen loads (remaining to target: 32.3%), 25% reduction in sediment loads (remaining to target: 9.8%), 20% reduction in particulate nitrogen loads (remaining to target: 5.6%), 20% in particulate phosphorous loads (remaining to target: 2.6%), and pesticides target of 99% of aquatic species protected at end of catchments (remaining to target: 2.3%).
6. By January 2024: Double compliance activity being undertaken across the regulated reef catchment areas comparative to what was being achieved in 2021 in order to enforce landholder compliance with reef protection regulated standards and respond to any non-compliance. Concurrently secure improved water quality outcomes by supporting increased industry participation in best management practice projects and programs, with

50% of sugarcane and banana areas operating above minimum practice standards by June 2026.

Fisheries

Australia commits to delivering a \$100 million fisheries structural adjustment package to significantly reduce net fishing and other high risk fishing activities impacting the Reef. A further \$62 million will support the implementation independent data validation and bycatch reduction to reduce risks to protected species from fishing gear. The package will:

1. Phase out all destructive gillnet fisheries to ensure the property as a whole will be gill-net free by 30 June 2027.
2. Establish a complete net free zone in the Northern third of the property (Cape Bedford to the tip of Cape York) and establish additional net-free-zones that expand net restrictions in the Gulf of Carpentaria (e.g., Mornington Island, rivers/foreshores adjacent to Weipa, Karumba and Mapoon), to further strengthen protections for threatened species that move between Great Barrier Reef and the Gulf, and ensure displaced fishing effort does not intensify threats to those species, as well as in other high value habitats of protected species identified through consultation, by 31 December 2023.
3. By 31 December 2023, complete implementation of the Sustainable Fisheries Strategy, including finalising all harvest strategies with defined quotas for all key species, and by 31 December 2027, working to achieve the target maximum economic yield (60% biomass)
4. By 1 December 2023, introduce legislation to mandate the use of Independent Data Validation on all commercial fishing vessels.
5. Immediately make threatened hammerhead sharks 'no take' for commercial fishers.

Climate Change

1. The Australian Government commits to set successively more ambitious emissions reduction targets, reflecting highest possible ambition, consistent with achieving net zero by 2050, and in alignment with efforts to limit global temperature increase to 1.5°C. These targets will be informed by advice from the independent Climate Change Authority. The Government will set a 2035 target and communicate it to the UNFCCC as Australia's second Nationally Determined Contribution under the Paris Agreement in advance of the Conference of the Parties serving as the meeting of the Parties to the Paris Agreement in 2025.
2. The Australian Government commits to update the Reef 2050 Plan (in consultation with the Queensland Government) to reflect (a) the new commitments taken under the *Climate Change Act 2022* and (b) Australia's overall commitment to work alongside global partners to tackle the climate crisis, achieve the goals of the Paris Agreement and pursue ambitious emissions reductions to limit the global temperature increase to 1.5° C above pre-industrial levels.

In support of these commitments:

- a. The Australian Government has legislated emissions reductions of 43 per cent by 2030 and net zero emissions by 2050.
- b. The Australian Government is required by law to prepare annual statements to Parliament under the *Climate Change Act 2022* - on progress towards national emissions reduction targets, international developments, climate risks, impacts and

policy. These statements must be informed by advice from the independent Climate Change Authority.

- c. The Australian Government commits to continually increasing its climate ambition, including by working urgently to implement its substantial and rigorous suite of new policies across the economy to maximize their emissions impact and drive Australia's transition to net zero. Australia's States, Territories and local governments are also implementing significant policies and programs to reduce emissions. The cumulative impact of action by governments at different levels, and industry, businesses, land managers and Australians, seek to deliver the greatest possible emissions reductions in this critical decade.
- d. The Australian Government commits to increase renewable electricity generation to 82 per cent by 2030.
- e. The Queensland Government has released its Energy and Jobs Plan to achieve, 70 per cent renewable energy by 2032 and 80 per cent by 2035. The plan will achieve a 50 per cent reduction in electricity emissions on 2005 levels by 2030 and a 90 per cent reduction in electricity emissions by 2035-36. It includes delivery of a 2 gigawatt 24 hour Borumba pumped hydro energy storage project and the world's largest 5 gigawatt Pioneer-Burdekin pumped hydro energy storage dam.
- f. By 2035 Queensland will have no regular reliance on coal for power production and will have more pumped hydro energy storage for renewable energy than the rest of Australia combined. Queensland's pumped hydro energy storage for renewable energy will be more than Europe, China or the US as a share of energy demand. This will provide Queensland with reliable, firmed renewable energy combined with a SuperGrid to transmit renewable energy including a connection to Australia's largest renewable energy zone and the world class North West Minerals Province with over \$500 billion in new economy minerals needed to manufacture renewable energy technologies. That means Queensland will not only transition to renewable energy but will also play a key role in the global supply of new economy minerals and in the manufacturing of renewable technologies.

United Nations representatives urge Queensland parliament to vote down 'adult crime, adult time' laws

By state political reporter **Alex Brewster**

Crime

Tue 20 May 2025 at 9:40am

Health, Environment and Innovation Committee:

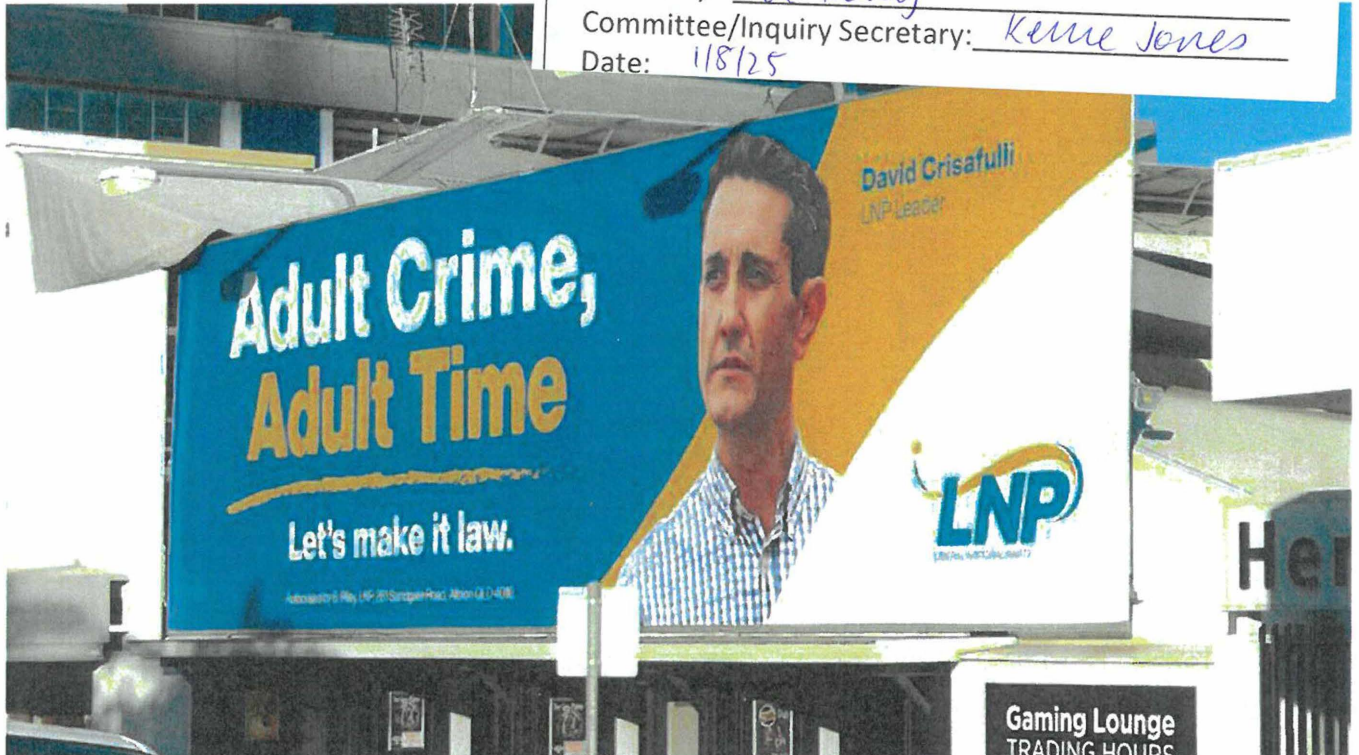
Location: Brisbane - UIC chamber

Tabled Doc No: 2

Tabled by: Joe Kelly

Committee/Inquiry Secretary: Kenne Jones

Date: 11/8/25



The Making Queensland Safer laws were the LNP's main policy during last year's state election. (ABC News: Cameron Simmons)

Two human rights experts have penned a scathing assessment of the Queensland government's latest youth crime measures, labelling them "incompatible with basic child rights".

State parliament is expected to pass the second tranche of the LNP's flagship "adult crime, adult time" laws this week.

The first lot of crimes where juveniles are tried as adults and face heavier penalties — headlined by murder and manslaughter — were passed in December.

If the amendment to the Making Queensland Safer laws is passed, young people found guilty of 20 further crimes will be tried as adults and face heavier penalties.

The offences include rape, attempted murder, arson, torture, and sexual assault.

In an open letter to Australian authorities, United Nations (UN) special rapporteur on torture, Alice Edwards, and UN special rapporteur on the rights of Indigenous peoples, Albert Barume, said they had significant concerns about the next round of changes.

"Many new or proposed state laws, including Queensland's Making Queensland Safer (Adult Crime, Adult Time) Amendment Bill, are incompatible with basic child rights.

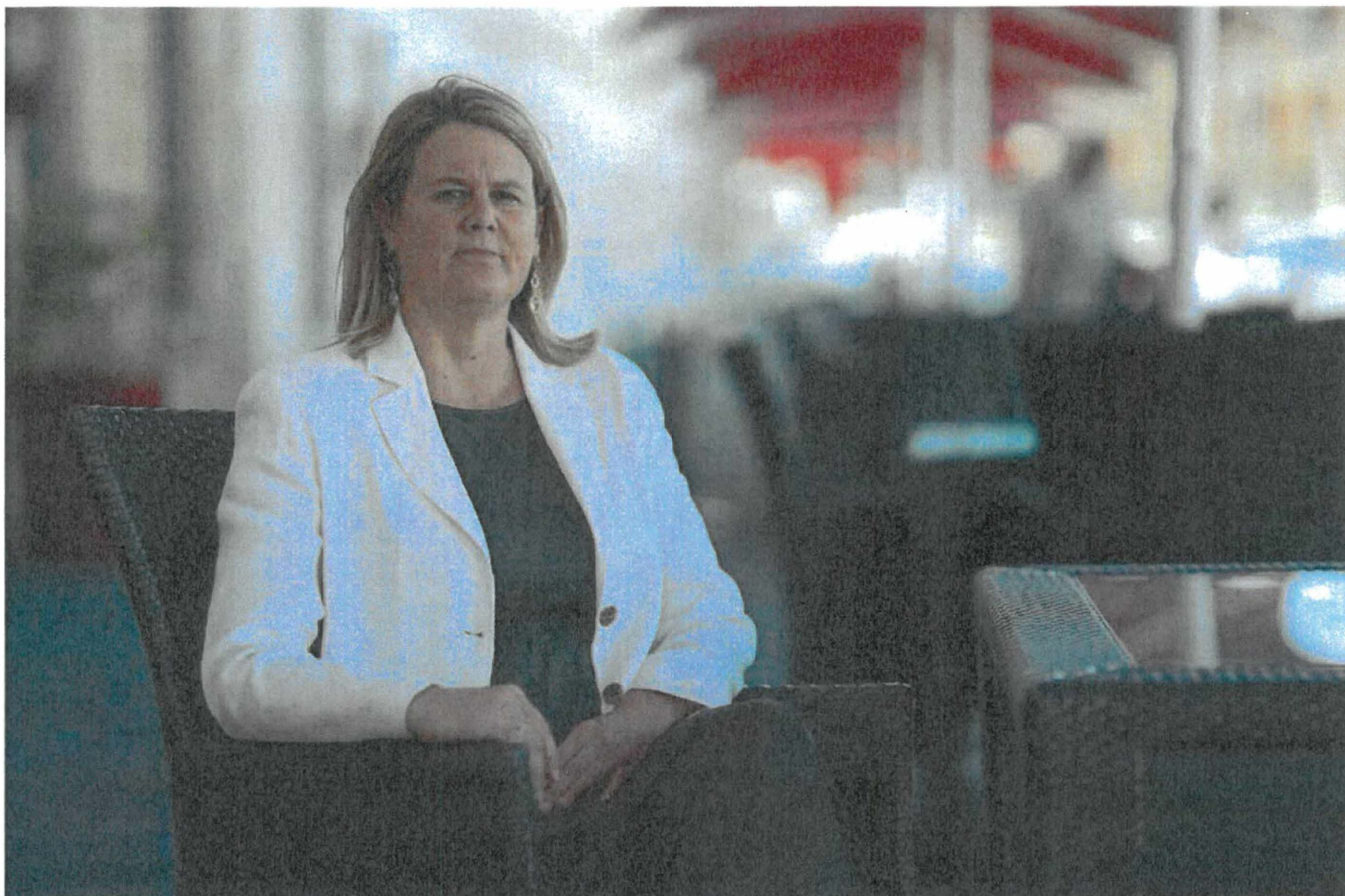
"If passed, the Queensland bill would result in additional adult penalties being applied to children for a wide range of offences.



Listen: UN report delivers scathing assessment of Australia's youth justice system

"This would have an especially negative impact on the lives of Indigenous children, who are already disproportionately represented in the criminal legal system."

The pair said the approach to youth crime was in "crisis nationwide".



Alice Edwards, the United Nations special rapporteur on torture, has criticised the law changes. (ABC News: Maren Preuss)

"Children are suffering undue harm to their safety and wellbeing, as well as to their educational and life prospects as a result of short-sighted approaches to youth criminality and detention," the open letter said.

The experts urged a "child-centred approach" to the issue, noting the age of criminal responsibility in Queensland and many states and territories was 10, younger than "most other industrialised countries".

"The first goal should always be keeping children out of prison," they wrote.

"We are extremely concerned that the system is creating a future underclass of Australians."

'United Nations boffins'

The UN has repeatedly criticised the Queensland government's laws, with Ann Skelton — the chair of the Committee on the Rights of the Child — noting in

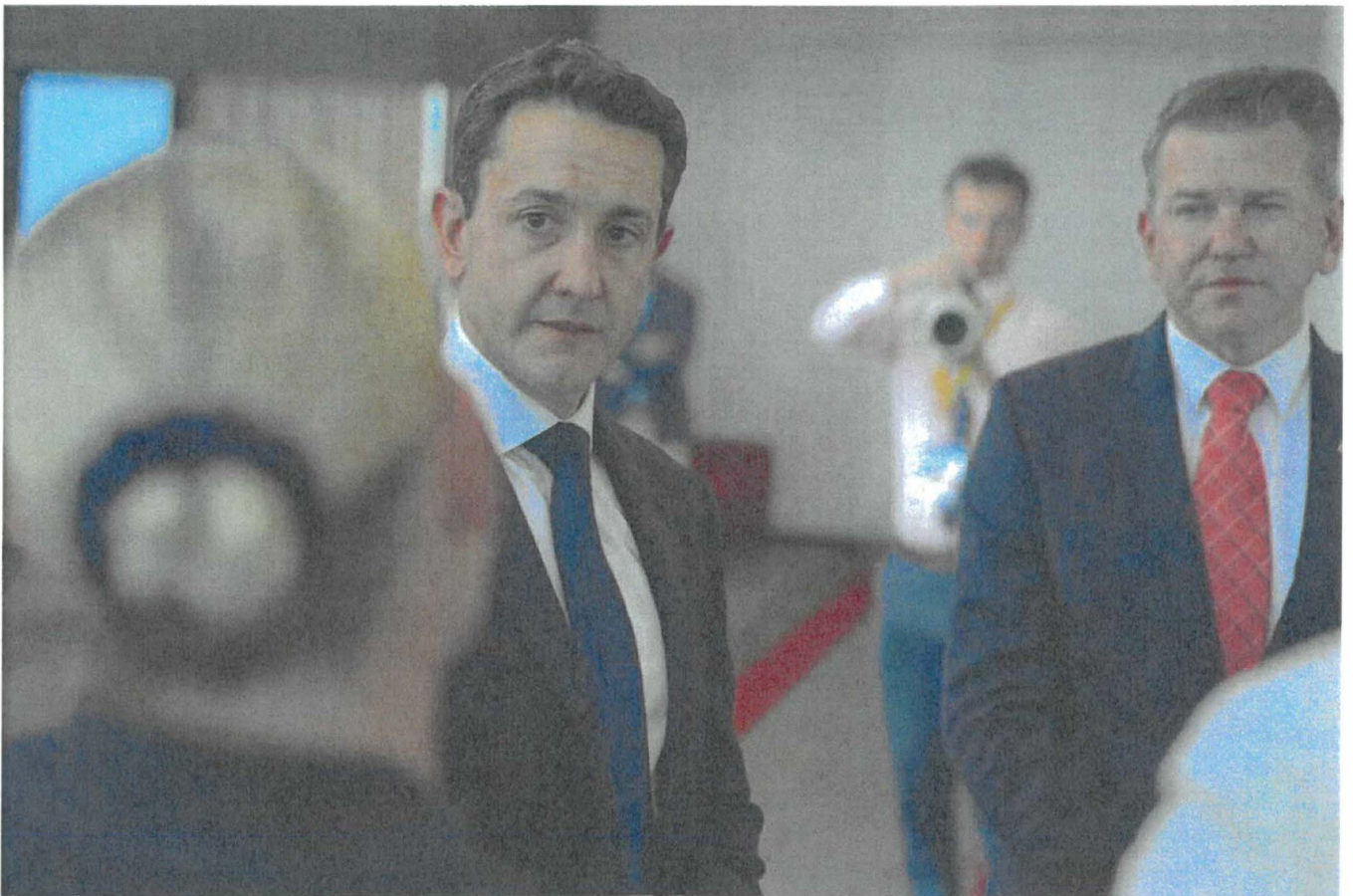
December that they showed a "flagrant disregard" for children's rights.

In response to further criticism from the organisation last month, Premier David Crisafulli issued a stinging rebuke in parliament.

"I say to the United Nations with the greatest respect that this place will govern its laws, this place will determine how we keep Queenslanders safe, and this place will be accountable to Queenslanders, not United Nations boffins," he said.

"We stand up for Queenslanders, not unelected officials who are a long way from this place."

The Labor opposition voted in support of the initial changes and said it would support the new inclusions.



Premier David Crisafulli previously said Queensland would not be governed by "United Nations boffins". (ABC News: Marton Dobras)

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Posted Tue 20 May 2025 at 9:40am, updated Tue 20 May 2025 at 10:35am

Tourist tax flagged as potential revenue raiser for tourism industry

Travellers could be taxed to visit some of Queensland's most iconic attractions under a bold plan to generate revenue for the state's tourism sector, but a leading Queensland travel agent has hit out at the plan. VOTE IN THE POLL

[Greg Stolz](#) and [Jeremy Pierce](#)

3 min read

June 23, 2022 - 11:41AM

124 Comments

AA

Health, Environment and Innovation Committee:

Location: Brisbane - VIC Chamber

Tabled Doc No: 3

Tabled by: Joe Kelly

Committee/Inquiry Secretary: Kelley Jones

Date: 1/8/25

Queensland 'back open for business'



QLD News

Don't miss out on the headlines from QLD News. Followed categories will be added to My News. follow

A leading Queensland travel agent has slammed plans for a new tourist tax, warning the proposal risks stifling the state's tentative tourism recovery.

Under the bold plan to generate revenue for the state's tourism sector, travellers would pay taxes on visits to some of Queensland's most iconic attractions.

A proposal from the Queensland Tourism Industry Reference Panel would see local councils or tourism bodies introduce visitor taxes or levies to create additional funding streams.

It also suggests “user pays” systems to generate revenue for our prized natural assets such as national parks.

But the boss of Brisbane-based Travello, Ryan Hanly, said even raising the idea could drive tourists away from Queensland.

“We’re all for new ideas but this is simply not the right message for now,” he said.

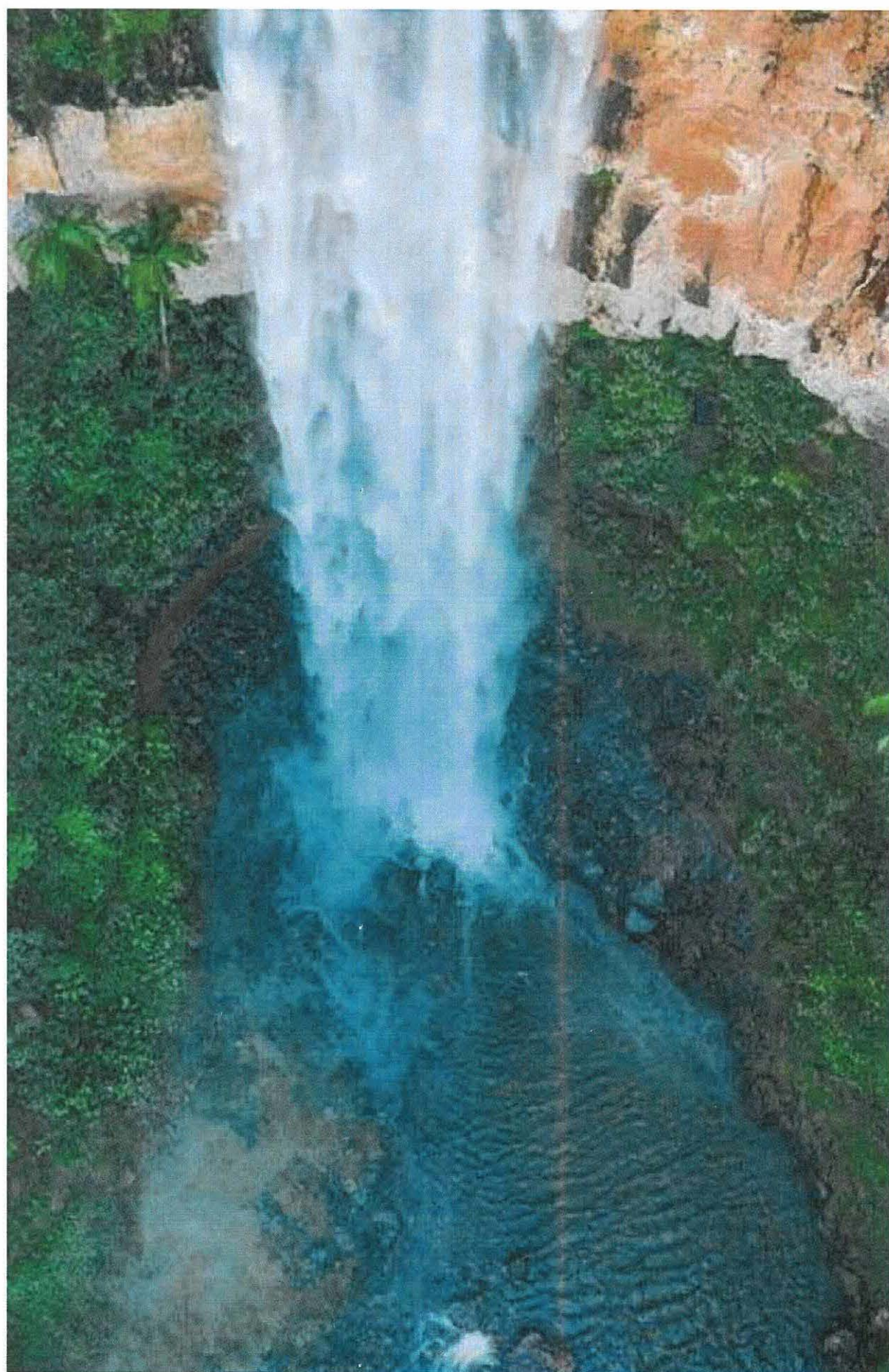
“At a time when every state is battling for the tourist dollar, this won’t help a still ailing market.

“Turning around and putting a tax on visitation seems a bit counterintuitive. If it’s a choice between going on holidays to somewhere you do get taxed and going somewhere where you don’t get taxed, the decision will be pretty clear.”

Mr Hanly, whose company sells holiday experiences in Queensland’s top tourism hot spots including the Gold Coast, Cairns and Whitsundays, said international tourists especially were sensitive to new or increased taxes and charges.

“There’s still not strong sentiment around coming to Australia and we have to do whatever we can to incentivise travel rather than disincentivise it,” he said.

“We have to be really careful about the Queensland brand and what sort of signals we’re sending the market.”



Visitors could be asked to pay to visit attractions such as Springbrook National Park. Picture: Mitch Dann

The controversial calls are among 75 recommendations included in the QTIRP report aiming “to position Queensland as Australia’s destination of choice for domestic and global visitors seeking the world’s best tourism experiences by 2032”.

The report’s release coincided with the announcement in the State budget of \$66 million set aside over the next three years to respond to recommendations raised in the report.

Tourist taxes and levies already exist in many parts of the world and even in other states in Australia, but despite several proposals over the years, a user-pays model has never been introduced in Queensland.

Visitors to the Great Barrier Reef already pay a levy, but that goes to park authorities rather than tourism organisations, while bed taxes have been previously mooted for Cairns and the Gold Coast.

The QTIRP report says the industry can’t expect the State government to “do all the heavy lifting as we grow the visitor economy.”

“We need to seriously consider new mechanisms to garner additional funding,” the report says.

“If we give destinations, or local governments, the option to apply a focused tourism

enhancement levy, they can raise money to support and grow the visitor economy.”

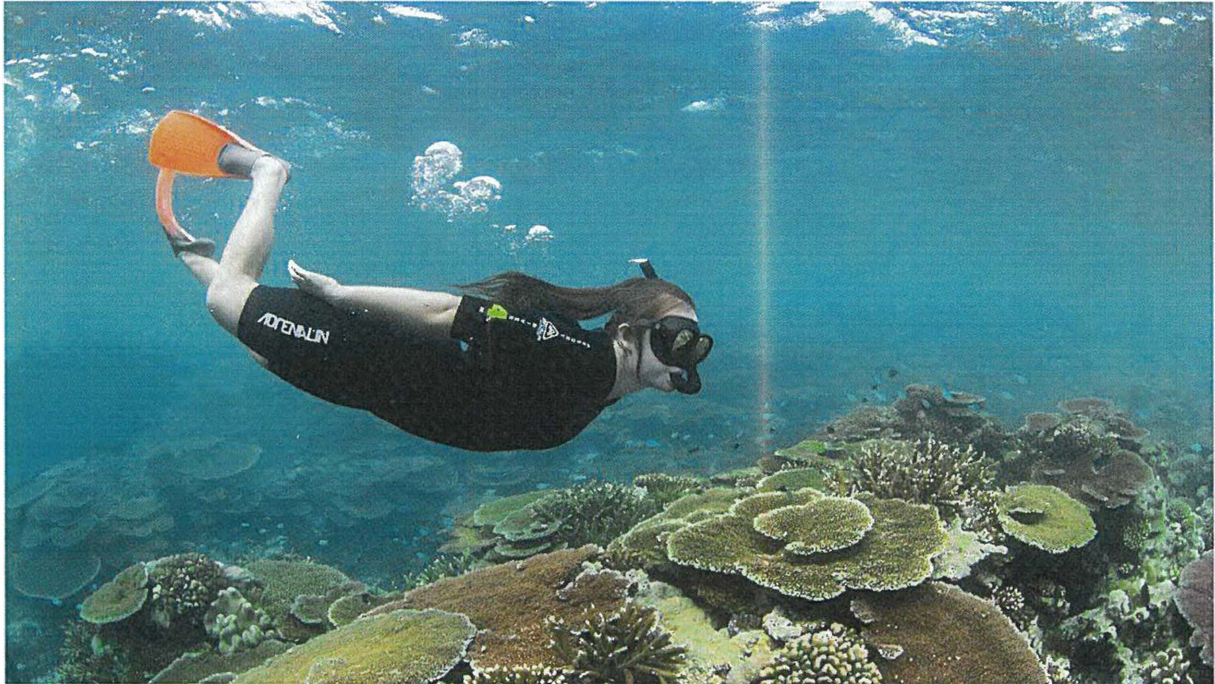
The report also suggests consideration of user pays fees or charges “in circumstances where funds raised can contribute directly to the management of visitor impacts, maintenance and regeneration of natural assets.”

The report does not detail exactly how any levies or taxes would be imposed and Queensland Tourism Industry Council CEO Brett Fraser said that would be the challenge.

“A consumer-pays principle is not that uncommon around the world and it has been shown that people are prepared to pay, if they can see that the fee is going to improve the visitor experience,” he said.

“What would be a travesty would be if this type of system was implemented and just replaces funding that is already there.

“It’s a bit of a chicken-and-egg scenario, so the big question is what the appropriate mechanism should be.”



Visitors to the Great Barrier Reef already pay a levy to help preserve the World Heritage site. Picture Lachie Millard

Queensland Tourism Minister Stirling Hinchliffe said the proposal would need careful consideration before any formal move was adopted.

“Some of the recommendations are ambitious and will need further consideration and consultation with the tourism industry,” he said.

“(But) the panel has said, “Queensland needs to be bold to achieve long-term success — or run the risk of being left behind”.

Destination Gold Coast CEO Patricia O’Callaghan said the idea of a tourism levy was “not a new concept” but was worth further exploration.

“We welcome further discussion around this with government, the city and our industry,” she said.



Layla Subritzky and Jarrod Ross enjoy Burleigh Headland National Park but would be concerned at a visitor fee. Picture: Nigel Hallett

Burleigh Head National Park is enjoyed by thousands of walkers, hikers and picnickers every week and could generate significant revenue with a user-pays system, but not everyone would be thrilled at the prospect.

Layla Subritzky took a hike at Burleigh on Wednesday and said locals should be exempt from any fees imposed at national parks or other natural attractions.

“We should never have to pay for something you get to enjoy for free,” she said.

Tourism Tropical North Queensland Chair Ken Chapman said the need to boost funding for destination marketing was vital for the industry.

“We need to increase destination-specific marketing to get the tourism economic powerhouse firing on all cylinders,” he said.

“Increasing destination funding will require a different funding model.”

Qld bed tax push by Brisbane, Gold Coast, Cairns, Whitsunday councils

The mayors of four Queensland councils are urging the state government to introduce a bed tax to help them pay for surging infrastructure costs. VOTE IN OUR POLL

[Crystal Fox](#) and Christopher Burns

2 min read

April 4, 2025 - 1:04PM

Gold Coast Bulletin

182 Comments

Health, Environment and Innovation Committee:

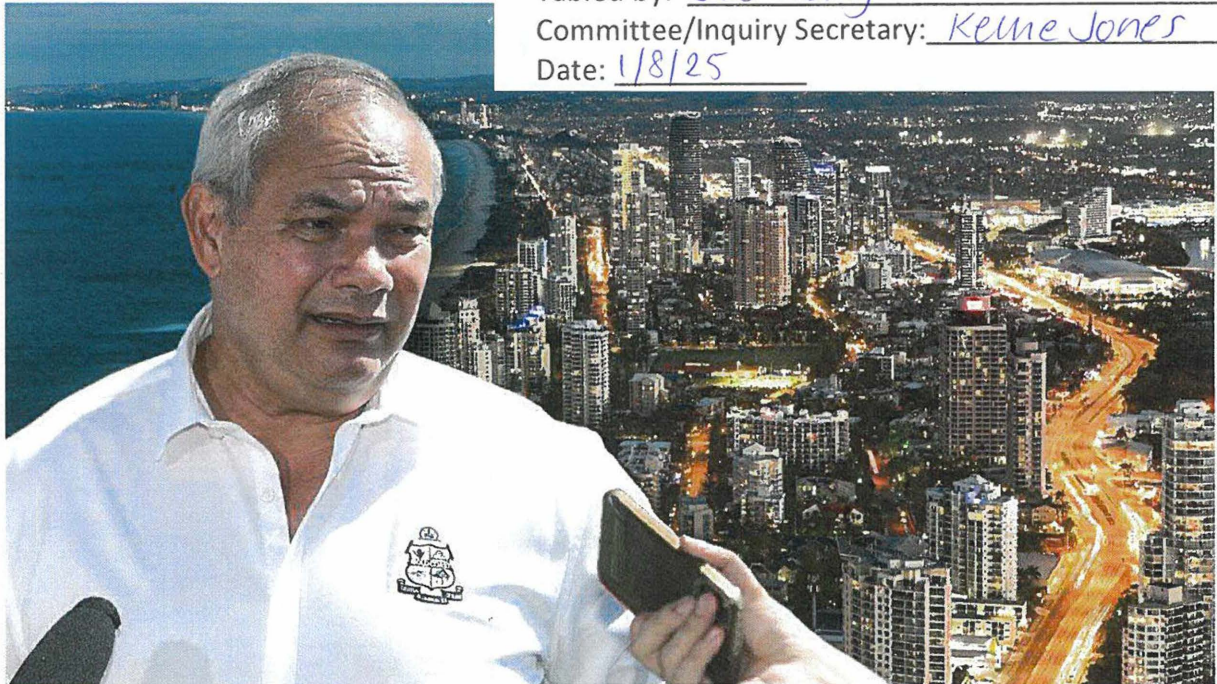
Location: Brisbane - L/C Chamber

Tabled Doc No: 4

Tabled by: Joe Kelly

Committee/Inquiry Secretary: Kelme Jones

Date: 1/8/25



Mayor Tom Tate is considering to introduce 'bed tax' for Gold Coast tourists.

QLD News

Don't miss out on the headlines from QLD News. Followed categories will be added to My News. follow

• Editor's view: Securing our future

The mayors of four Queensland councils have written to Premier David Crisafulli urging him to introduce a bed tax to help them pay for surging infrastructure costs caused by the state's booming tourist sector.

A "modest", opt-in visitor levy was a fairer way to distribute the costs of the tourism industry, Adrian Schinner (Brisbane), Tom Tate (Gold Coast), Amy Eden (Cairns) and Ry Collins (Whitsundays) argued in the letter.

But a response by Whitsundays MP Amanda Camm on Friday suggests the move is unlikely.

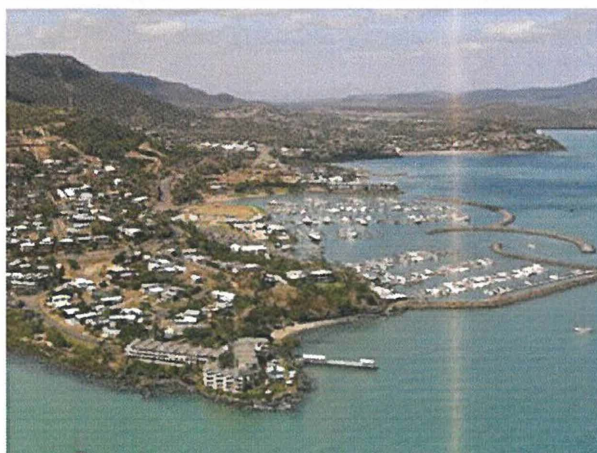
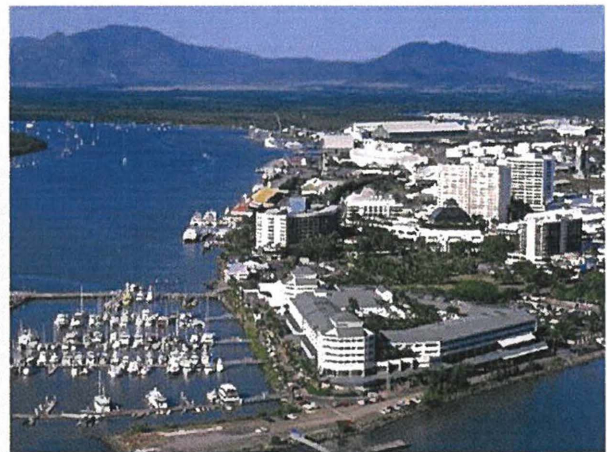
The mayors stressed it would not be a blanket charge but rather a flexible, community-driven revenue tool such as those used successfully in more than 100 other countries with large visitor numbers.

“A visitor levy is simple, transparent and targeted,” they said.

“Tourism is part of Queensland’s DNA. It fuels our local economies, sustains thousands of jobs and drives investment right across the state.

“However, as visitation grows so too does the cost of maintaining the infrastructure, the natural assets, services and experiences that make our destinations world-class.”

[Read our editorial and join in the discussion in the comments below.](#)



Should Qld introduce a bed tax?

Yes, tourists can afford it

No, it will cost visitors

I'm not sure
Cast your vote

The mayors said those costs were increasingly borne by local governments and in turn our ratepayers, many of whom were already experiencing cost-of-living pressures.

They acknowledged there would be criticism, with the Queensland Hotels Association on record as being opposed to bed taxes.



Brisbane Lord Mayor Adrian Schrinner has also written to the government.
Picture: Josh Woning

But the mayors offered to implement a levy and do all the public consultation – and also cop any flak, although the state government needs to amend legislation in order for them to go ahead with the move.

“With Queensland set to host the 2032 Olympic and Paralympic Games, now is the time to ensure we are globally competitive and ready to capitalise on the worldwide attention this event will bring,” they said.

“Increased investment in tourism infrastructure and promotion via the levy will be critical to ensuring Queensland is competitive and captures long-term benefits from hosting the Games.”

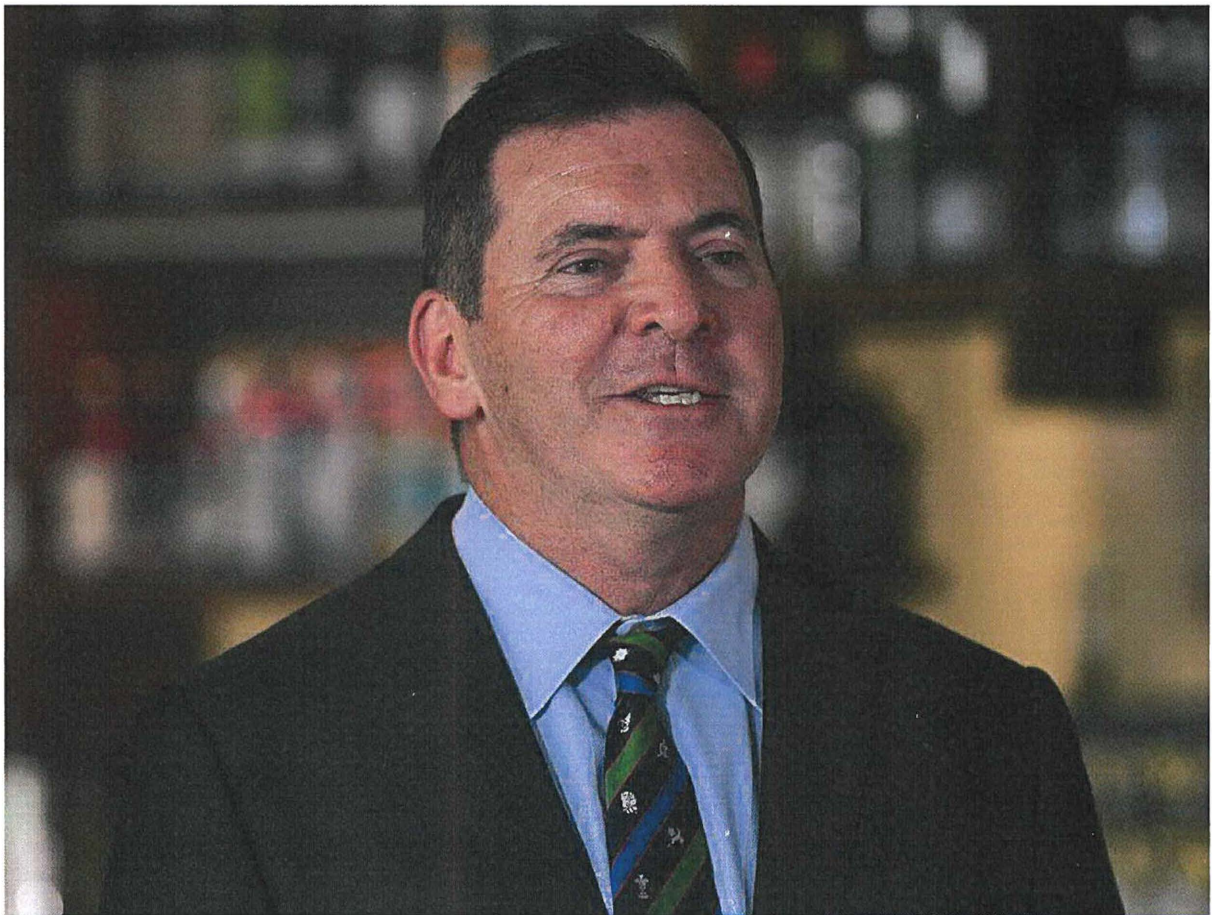
Mr Tate on Thursday conceded a bed tax could cost up to 5 per cent of the room rate.

“You go to Vegas, Singapore, Dubai and you get additional room tax,” he said.

Tourism Minister Andrew Powell said he and Mr Crisafulli had repeatedly ruled out a statewide tourism tax.

However he said requests from councils for local bed taxes were being considered.

“As part of our community consultation, a number of councils have sought the ability to apply their own levy,” Mr Powell said.



Queensland Hotels Association CEO Bernie Hogan is against the tax.

“These requests are being considered through the finalisation of the Crisafulli government’s 20 Year Tourism Plan.”

Ms Camm on Friday said the government would not legislate a statewide bed tax.

“Local governments already have the ability through the Local Government Act to introduce a levy if they so wish to, and that will be a matter for local government,” Ms Camm said.

Tourism Minister Andrew Powell said early this week a proposed bed tax would be unnecessary to fund Olympic infrastructure as had previously been proposed.

“We’ve made it pretty clear, no statewide taxes or levies and we stand by that,” Mr Powell said.

Mr Powell stopped short of rejecting the four councils’ proposal, saying “that’s what’s currently being considered.”

Queensland Hotels Association CEO Bernie Hogan said he did not support the move to introduce a “self-defeating tariff”.

“Three to 5 per cent can be the difference between a tour group staying at one place to another,” he said.

Sunshine Coast Mayor Rosanna Natoli said a bed tax was “not something I’m entertaining right at this moment”.