



## **2020-21 Budget Estimates**

### **Volume of Additional Information**

**Report No. 2, 57th Parliament**  
**Health and Environment Committee**  
**February 2021**

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## List of Members granted leave to attend and ask questions at the hearing

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<b>1.</b>	Ros Bates MP, Member for Mudgeeraba
<b>2.</b>	Michael Berkman MP, Member for Maiwar
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<b>4.</b>	Sandy Bolton MP, Member for Noosa
<b>5.</b>	David Crisafulli MP, Member for Broadwater
<b>6.</b>	Deb Frecklington, Member for Nanango
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<b>8.</b>	Dr Amy MacMahon MP, Member for South Brisbane
<b>9.</b>	Sam O'Connor MP, Member for Bonney
<b>10.</b>	Fiona Simpson MP, Member for Maroochydore

**Pre-hearing questions on notice and responses –**  
***Minister for Health and Ambulance Services***

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**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 1**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

Will the Minister explain the impact of the productivity dividend referred to in the Labor Party's election-costing document on the Queensland Health budget position?

**ANSWER:**

Productivity dividends are not new for Queensland Health. In fact a productivity dividend has been factored into Queensland Health's funding for the past five years.

Queensland Health has been funded by Government under an activity-based funding model since 2015-16, which includes metrics for volume, cost growth and productivity.

This ensures that as much value as possible is derived from the Queensland Health budget, which has now reached \$21.8 billion.

Productivity in the health system improves in a number of ways – including through improving theatre utilisation, taking advantage of economies of scale when it comes to purchasing pharmaceuticals and of course using our world-class health workforce in the smartest way possible.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 2**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to service performance on page 3-76 of SDS, can the Minister please outline why the Queensland Health Laboratory Information System project was discontinued?

**ANSWER:**

I am advised that the capability, support and long-term stability of the existing system (AUSLAB) has improved significantly in the last several years. AUSLAB is being upgraded to AUSLAB Evolution, a more stable version which will improve clinical workflows and increase laboratory productivity.

The Laboratory Information System (LIS) project was initiated in March 2015, at a time when AUSLAB was anticipated to reach its end-of-life in 2020.

The project was discontinued in April 2020 in light of this change to the underlying project driver and, additionally, the critical need to ensure system stability and reliability in the pathology environment and to reprioritise resources in order to respond to the COVID-19 pandemic.

The decision to discontinue the project is consistent with previous Auditor-General advice that project drivers can change over time and, as a result, the best option will sometimes be to stop a project.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 3**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to the financial and performance data of each Hospital and Health Service in the SDS, will the Minister outline the process of releasing annual reports for Queensland Health?

**ANSWER:**

Section 63 of the *Financial Accountability Act 2009* states that accountable officers and statutory bodies must, in the way and within the time stated in a financial and performance management standard, prepare an annual report and give the report to the Minister. It further provides that the Minister must table the annual report in the Legislative Assembly within the time stated in the financial and performance management standard.

Section 46 of the *Financial and Performance Management Standard 2019* ('the Standard') requires that a statutory body must, for each financial year, prepare an annual report in accordance with the annual report requirements document.

In accordance with section 47 of the Standard, annual reports are to be tabled in the Legislative Assembly within three months after the end of the financial year unless the tabling period is extended under subsection (4).

The prioritisation of resources to meet the challenges of COVID-19 meant annual reports could not be finalised to a standard that was compliant and ready for tabling within the three months.

To allow time to settle and finalise all annual reports and to enable a detailed review prior to tabling, on 28 September 2020, the Deputy Premier and former Minister for Health and Minister for Ambulance Services, on the advice of the Department of Health, extended the tabling period for the 2019–20 financial year under section 47(4) and notice was provided to 32 health statutory bodies.

Pursuant to section 47(5) of the Standard, if the Minister extends the tabling period to a period of more than 6 months after the end of the financial year, the Minister must, within 14 days after giving the extension, table in the Legislative Assembly a notice stating the report is being tabled late, and the length of the delay, and the reasons for the delay.

There is no provision under the *Mental Health Act 2016* (MHA) to extend the tabling period for annual reports of agencies established under the MHA. As such the annual reports for the Chief Psychiatrist, Mental Health Court and Mental Health Review Tribunal were tabled on 1 October 2020.

It is intended that all outstanding annual reports will be tabled by the end of 2020.



**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 4**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to the service performance measures on page 3-76 of the SDS, will the Minister provide a list of projects, delivery of which has been delayed by the COVID-19 pandemic, including the (a) revised schedule date of completion, and (b) any impact on the budget and scope of each project occasioned by the delay (reported in table format)?

**ANSWER:**

Travel restrictions to the Far North Queensland region under the *Biosecurity Act 2015* relating to COVID-19 were in place from April 2020 to June 2020. This presented a challenge to projects being delivered in that region.

There have been other project challenges across the portfolio driven by COVID-19. These include additional restricted access to clinical areas for works in a live hospital environment and interruptions to the supply chain, delaying equipment and materials being shipped from outside Australia. For example, large pieces of health technology equipment that are unable to be sourced locally.

Queensland Health has proactively managed potential schedule and cost risks through a collaborative approach with construction contractors and through best practice risk management on each project.

As a result, Queensland Health mitigated substantial delays and costs to its capital infrastructure program in 2019-20, which has resulted in no delays or additional costs incurred for projects completed in 2019-20 due to COVID-19.

Queensland Health reported an actual expenditure of \$845.6 million against the published Budget Paper 3 of \$773.4 million, exceeding the full year target by \$72 million. This includes expenditure for all projects, not just those completed in 2019-20.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 5**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to the service objectives on page 3-60 of the SDS, will the Minister provide an update on implementation of the recommendations of the Rural Maternity Taskforce?

**ANSWER:**

The Rural Maternity Implementation Oversight Committee (Oversight Committee) was formed in September 2019 to develop an overarching plan to implement the Taskforce recommendations and associated Ministerial commitments. The Committee was also responsible for overseeing the implementation of the plan.

The overarching objective of the six recommendations and the implementation plan is to support, and enable the provision of, suitable woman-centred, evidence-informed maternity care as close as possible to where women live, while enabling good outcomes for mothers and babies in rural and remote communities.

A draft implementation plan has been developed and the actions developed to achieve it include the principles of:

- collaboration, co-design, and consumer-led, with an emphasis on women and Aboriginal and Torres Strait Islander consumers
- networked services within the local area, wider HHS, and with tertiary/quaternary services across Queensland
- alignment with state and national initiatives.

The draft implementation plan has been developed based on the premise of building on and utilising existing activities and programs within Queensland Health to avoid duplication and ensure efficient use of resources and funding.

The endorsement process of the implementation plan has been delayed due to the suspension of activities as a result of the impact of COVID-19. The implementation plan has subsequently been reviewed, with activities and timeframes revised.

There have been a number of achievements against the recommendations. These include:

- Establishment of the Office of Rural and Remote Health
- Conversion of 'GLOW', an antenatal education resource on iLearn to web-based antenatal information on Queensland Health website
- Development of a plan to utilise \$500,000 for rural and remote maternity clinician upskilling and training, that is being progressed by the Office of Rural and Remote Health
- Development of a process to seek Ministerial approval for changes to rural maternity services. This is based on, and compatible with, the Clinical Services Capability Framework change notification process

The Rural Maternity Recommendations implementation plan also includes oversight of the piloting and finalisation of the Queensland Rural and Remote Maternity Services Planning Framework (Planning Framework).

The Planning Framework is a decision-support guide developed to assist HHSs with planning, developing and delivery of rural and remote maternity services. It was one of the key deliverables of the Taskforce, developed as a result of consultation with stakeholders through rural forums and an online survey held in early 2019.

I am advised five Hospital and Health Services (HHSs) have commenced a review of maternity services against the Queensland Rural and Remote Maternity Services Planning Framework. A new \$25 million birthing unit will be established at the Weipa Integrated Health Service as a result of this process.

The original review of rural and remote maternity services completion date of 30 June 2021 utilising the planning framework was extended by six months to 31 December 2021, due to the impact of the pandemic on resources within the HHSs.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 6**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to page 3-75 of the SDS, will the Minister advise how many exemptions from mandatory government hotel quarantine have been a) requested, and b) granted?

**ANSWER:**

Hotel quarantine remains one of Queensland's key strategies to prevent the spread of COVID-19. To date, there has not been an outbreak in Queensland associated with a breach of hotel quarantine.

Under section 362B of the *Public Health Act 2005*, the Chief Health Officer may give a public health direction if it is considered reasonably necessary to assist in containing or responding to the spread of COVID-19 in the community.

The Chief Health Officer has required that certain people are required to quarantine in a government-nominated premises.

Generally, hotel quarantine is required for:

- overseas arrivals (under the *Self-quarantine for Persons Arriving in Queensland From Overseas Direction*).
- interstate arrivals from a declared COVID-19 hotspot (under the *Border Restrictions Direction*).
- anyone else issued a quarantine direction by an emergency officer (public health) where this is reasonably necessary to assist in containing, or to respond to, the spread of COVID-19 in the community.

Both the *Self-quarantine for Persons Arriving in Queensland from Overseas Direction* and the *Border Restriction Direction* contain provisions empowering the Chief Health Officer, Deputy Chief Health Officer or their delegate to exempt a person or class of persons from the directions' requirements.

Exemptions are only given in very rare circumstances. Each exemption is unique with different circumstances and different risks. Exemption requests are considered with compassion, balancing public health requirements with the individual's human rights and specific circumstances.

A person must comply with the conditions of an exemption. Failure to comply, without reasonable excuse, can attract a maximum penalty of 100 penalty units or six months imprisonment.

To support questions regarding the Public Health Directions, Queensland Health established a dedicated email enquiry service on 10 April 2020. Since this time, the Health Directions Exemption Service has rapidly expanded with a dedicated workforce managing requests from the public, providing expert advice on COVID-19 restrictions as well as processing complex exemption applications in a rapidly changing environment.

On 18 June 2020, the COVID-19 Services online portal commenced. Since this time, more than 37,000 exemption requests have been received across all Public Health Directions through the portal.

Of the nearly 33,760 processed, around 33,600 have been resolved. The majority did not require a decision as the applicant was either unrestricted, already exempt or required approval from a different jurisdiction (for example, the Australian Government for overseas arrivals).

Of the total, for the period 18 June 2020 to 6 December 2020, 14,773 exemption requests were received on the basis of seeking entry into Queensland and/or exemption from quarantine. 104 approvals to quarantine at home were given. This represents 0.7 per cent of the requests for home quarantine. The majority of these exemptions were issued in cases where complex healthcare needs were the determining factor.

Exact numbers are not possible for the duration of the pandemic as initially most requests were via email, prior to the establishment of the online portal.

The Chief Health Officer has also approved for some cohorts of people to quarantine in locations other than the government hotel quarantine network. These are known as class exemptions.

Class exemptions are only considered where the risk to the community is deemed to be low. Every class exemption is assessed and managed on a case-by-case basis, with controls put in place to ensure that the risk of COVID-19 transmission is managed appropriately.

For some, this may require the development of a COVID-19 management plan in consultation with Queensland Health. Current class exemptions cover both overseas and interstate cohorts. This includes flight crews, maritime workers and Queensland residents attending and returning from interstate boarding schools.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 7**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

Referencing page 3-60 of the SDS, can the Minister please advise how recovery of quarantine fees for people in mandatory government hotel quarantine is being managed?

**ANSWER:**

Quarantine has been one of the most effective measures protecting Australians and Queenslanders from COVID-19.

From 1 July, anyone required to quarantine in government managed accommodation must do so at their own expense. This is a nationally consistent approach agreed by National Cabinet and is a partial cost-recovery solution that reduces the financial burden of COVID-19 on Queensland taxpayers.

Queensland Health understands this is a challenging time for many people and that's why multiple payment options have been made available.

A person who is liable to pay quarantine fees is afforded 30 days from the date of the Department of Health invoice to make payment.

The Department of Health offers payment plans to repay over time. Full details of how to apply for a payment plan are provided with the invoice. A payment plan agreement, outlining the full terms and conditions, is issued upon approval of the request for a payment plan.

The Department of Health applies government debt management practices for quarantine fee recovery, that is, 30, 60, 90 and 120 day debt management processes.

A person who is liable to pay quarantine fees may apply for a partial or full waiver within 30 days from the date of the Department of Health invoice via an online portal.

Individuals can apply for a waiver on the grounds of:

- financial hardship
- vulnerability

- producing documentary evidence that their arrival date into Queensland from overseas was confirmed on or before midnight on 17 June 2020
- other extenuating circumstances.

I am advised that as at the 4 December 2020, 12,027 invoices have been issued. Of these 73% have been:

- a. paid,
- b. are not yet due,
- c. are subject to a payment plan or waiver,
- d. subject to an application for a waiver or payment plan.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 8**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ARTH)—

**QUESTION:**

Will the Minister outline in relation to each of the 16 Hospital and Health Services, (a) the financial result for 2019–20, and (b) the forecast financial result for 2020–21?

**ANSWER:**

The 16 Hospital and Health Services ended 2019–20 with a combined deficit of \$82.0 million against a published balanced forecast as shown in the below attachment.

The deficit is equivalent to 0.5% of total funding received by Hospital and Health Services.

Overall, the majority of the deficit is attributable to decreased own source revenue, and higher labour costs associated with reduced annual leave taken. Both factors are as a result of the COVID-19 pandemic and are not covered under the National Partnership Agreement for COVID expenditure.

Hospital and Health Service	Actual <sup>[1]</sup> Financial Position	
	2019-20 \$'000	Notes
Cairns and Hinterland	55	The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.
Children's Health Queensland	1,165	The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.

<sup>1</sup> 2019-20 Actual as per published 2020-21 Service Delivery Statement



Central Queensland	-14,822	<p>The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement. The HHS has also been impacted by higher costs associated with external labour.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
Central West	-1,488	<p>The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement. The position also reflects a decline in the value of land held during 2020.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
Darling Downs	-8,679	<p>The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
Gold Coast	-11,759	<p>The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement. The position also reflects the increasing demand for health services.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
Mackay	-8,778	<p>The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are</p>

<sup>1</sup> 2019-20 Actual as per published 2020-21 Service Delivery Statement

		<p>funded under the National Partnership Agreement. The end of year position also includes the planned use of \$4.4 million of retained earnings resulting in a technical deficit.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
Metro North	31,803	<p>The HHS achieved the end of year position as a result of one off savings and improved efficiencies.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
Metro South	-9,434	<p>The deficit is predominately driven by the impact of COVID-19 on reduced annual leave which is not funded under the National Partnership Agreement.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
North West	-8,355	<p>The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement. In addition, the HHS was impacted by the financial challenges associated with operating remote and rural health services in North West Queensland.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
Sunshine Coast	-27,020	<p>The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement. The position also relates to the increasing demand for health services.</p> <p>The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.</p>
South West	999	<p>The Hospital and Health Service is</p>

<sup>1</sup> 2019-20 Actual as per published 2020-21 Service Delivery Statement

		forecasting* a balanced end of year financial position for 2020-21.
Torres and Cape	-9,801	The end of year position reflects the planned use retained earnings and is a technical deficit. The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.
Townsville	2,025	The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.
West Moreton	-10,356	The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement. The position also reflects the increasing demand for health services. The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.
Wide Bay	-7,563	The deficit is predominately driven by the impact of COVID-19 on reduced own source revenue and reduced annual leave, neither of which are funded under the National Partnership Agreement. The position also reflects the increasing demand for health services. The Hospital and Health Service is forecasting* a balanced end of year financial position for 2020-21.
<b>TOTAL</b>	<b>- 82,008</b>	

\*As per the Service Delivery Statement

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 9**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

Will the Minister advise what steps have been taken to ensure rural doctors are not unfairly disadvantaged by changes to accommodation entitlements?

**ANSWER:**

Queensland Health highly values its rural doctors and is committed to ensuring our industrial arrangements support the attraction and retention of this workforce. Recruiting and retaining a high-quality medical workforce in rural areas across all jurisdictions is difficult and more expensive than metropolitan areas.

Queensland Health recognises the need to balance the fair and reasonable remuneration of our workforce while effectively managing public funds, with the needs of the community and ensuring access to health services.

Queensland Health has undertaken a review of the existing industrial arrangements for medical officers in rural locations.

The review was coordinated by the Office of Rural and Remote Health with input from Hospital and Health Service representation and other areas of the Department of Health. The Rural Doctors Association of Queensland (RDAQ) as a key stakeholder was consulted and supportive of the review.

Improved accommodation entitlements for rural doctors is a priority for the Department with the aim of easing attraction and retention challenges and critical workforce shortages in rural locations.

As a result of this work, improved accommodation arrangements for rural doctors have been approved and are soon to be released.

The newly established Office of Rural and Remote Health will refresh the current Rural and Remote Workforce Strategy for Queensland to address workforce issues and shortages.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 10**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

Will the Minister outline the cost of anticipated hospital maintenance as at 1 November 2020, (reported separately by Hospital and Health Service across Queensland) and explain how funding for building and asset maintenance is reflected in the Queensland Health budget?

**ANSWER:**

All Queensland Government asset owners, including Hospital and Health Services (HHSs), must comply with the Whole of Government Maintenance Management Framework Policy. The policy requires all buildings to be assessed by site inspection at least every three years, depending on the nature of the facility.

The anticipated hospital maintenance values, reported separately by each Hospital and Health Service as at 1 November 2020, are reflected in the table below.

I am advised that the total anticipated maintenance required across all 16 HHSs has decreased from \$893 million as at 30 June 2019, to \$844.8 million as at 1 November 2020.

Cairns and Hinterland HHS	\$40.1 million
Central Queensland HHS	\$9.7 million
Central West HHS	\$3.9 million
Children's Health Queensland HHS	\$4.2 million
Darling Downs HHS	\$162.5 million
Gold Coast HHS	\$41.7 million
Mackay HHS	\$3.3 million
Metro North HHS	\$236.1 million
Metro South HHS	\$144.4 million
North West HHS	\$27.1 million
South West HHS	\$3.5 million
Sunshine Coast HHS	\$14.8 million

Torres and Cape HHS	\$33.9 million
Townsville HHS	\$42.2 million
West Moreton HHS	\$22.9 million
Wide Bay HHS	\$54.5 million

Building and asset maintenance operational funding is reflected in the Queensland Health budget as a component of the activity based and block funding received by Hospital and Health Services.

HHSs determine the appropriate balance for spending on clinical service provision and asset maintenance.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 11**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to page 3-60 of the SDS regarding ventilators and the PPE stockpile, can the Minister advise a) the number of additional ventilators purchased in 2019-20, b) the total number of available ventilators, c) the current PPE stockpile (reported by Hospital and Health Service and each warehouse) and d) the budgeted additional stockpile planned for 2020-21?

**ANSWER:**

Queensland was well-prepared for the pandemic. Queensland Health immediately reviewed stockpile levels and sought to secure extra resources of critical stocks and boost local supply and manufacture.

a) I am advised, that guided by clinical experts from the Statewide Intensive Care Clinical Network (SICCN), Queensland Health has procured an extra 482 ventilators capable of invasive ventilation and 800 ventilators capable of non-invasive ventilation.

An extra 35 anaesthetic machines capable of invasive ventilation have also been purchased.

To further ensure the availability of ventilators, an extra 163 of existing anaesthetic machines have been identified as being suitable for use as an invasive ventilator in an ICU setting.

The SICCN is actively monitoring the situation to enable redeployment of clinical staff and equipment to areas of need if required. Some of the procured ventilators have already been deployed to Hospital and Health Services and some remain in the State's central reserve.

b) I am advised, the total number of available ventilators in Queensland Hospital and Health Services (excluding Queensland's Mater Health Services) and the State's central reserve as at 8 December 2020 is 1,929. This includes intensive care, neonatal intensive care and transport ventilators capable of invasive ventilation as well as anaesthetic machines which may be used for ventilation purposes if required.

In addition to these, there are also 1,200 devices suitable for non-invasive ventilation.

c) I am advised, Queensland Health is serviced by two distribution centres and other offsite storage locations which hold critical supply items necessary to run Hospital and Health Services (HHSs).

Queensland Health distribution centres and offsite locations currently hold more than 200 days' of supply across most key PPE items.

Stock on hand as at 30 November 2020 include:

- 660 days supply of protective eyewear equipment (4,768,122 units)
- 394 days supply of aprons (14,324,420 units)
- 333 days supply of medical gowns (4,878,184 units)
- 395 days supply of surgical masks (21,413,175 units)
- 367 days supply of P2/N95 respirators (1,962,730 units)
- 200 days supply of gloves (126,679,540 units).

HHSs also hold some stock of PPE items, which items are not included in statewide stockpile reporting.

d) On 25 June 2020 Government announced the establishment of a critical supply reserve to protect against future supply chain disruption and to ensure that essential frontline workers have access to critical supplies and equipment.

To support this commitment and Queensland's preparedness for the future, the Queensland Government Critical Supply Reserve (QGCSR) Strategy was launched on 30 September 2020 to safeguard core PPE and other essential supplies.

The QGCSR will hold an estimated 12 months' worth of critical stock at normal business-as-usual usage levels of supply, which will support the immediate continuation of essential services in the event of severe supply disruption or demand.

QGCSR supplies will be procured through five tranches over the next two years with the first tranche having already commenced in late 2020 and focusing on PPE and other items required for the ongoing pandemic response.

For PPE this represents an investment of \$37.5 million (GST exclusive) over the next two years, \$24.2 million (GST exclusive) of which is planned to be expended by the end of FY2020-21.



**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 12**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to page 3-72 of the SDS regarding the integrated electronic Medical Record rollout, can the Minister advise a) the number of unplanned outages in 2019-20, b) the number of planned outages in 2019-20, c) the number of high priority incidents in 2019-20, d) in relation to (c) which hospitals those high priority incidents occurred, and e) the number of partial outages in 2019-20?

**ANSWER:**

Queensland Health manages one of the largest and most resilient ICT networks in Australia with 850+ networked facilities across sparsely populated and remote areas.

The integrated electronic Medical Record (ieMR) is helping save lives and improve healthcare in Queensland. It is reducing medical errors and making it easier and faster for clinicians to access records. It is a complex system with many interdependencies between legacy and modern digital applications and infrastructure. While incidents have occurred within the ieMR, incidents occurring in external systems can also contribute to performance degradation and limited functionality in the ieMR.

The hospitals that are using the ieMR include: Gold Coast Hospital, Robina Hospital, Ipswich Hospital, Beaudesert Hospital, Logan Hospital, Princess Alexandra Hospital, Redlands Hospital, Queensland Children's Hospital, Royal Brisbane and Women's Hospital, Sunshine Coast University Hospital, Nambour Hospital, Mackay Hospital, Townsville University Hospital, Cairns Base Hospital.

In all incidents, eHealth Queensland supports Queensland's digital hospitals with their local decision making in determining whether to activate business continuity plans. All Hospitals have robust processes in place and when appropriate, standard contingency plans are enacted to ensure services continue and that there are no impacts on patient safety.

There has been no patient harm reported because of a digital system outage since the introduction of Queensland Health's ieMR.

(a) Nil unplanned outages for the ieMR.

(b) One planned downtime event in 2019/2020 (*'full system' planned downtime maintenance event of the production system*) for the ieMR.

(c) Four high priority incidents whereby the ieMR experienced reduced system functionality to some of the solution or for some users.

(d)

- Three affecting all ieMR sites
- One affecting all ieMR sites with the exception of Royal Brisbane and Women's Hospital and Cairns Hospital

(e) Twenty-nine partial outages of the ieMR system in 2019-20.

- Four partial outages due to incidents (*moderate to low impact severity*) whereby affected sites were unable to utilise an element within the ieMR,
- Twenty-five planned maintenance activities performed within the ieMR.
  - Twelve were performed as rolling 'uptime' activities. During this activity all users were required to log off the ieMR and then log immediately back on again.
  - Thirteen required scheduled unavailability to a particular area/module/interface or function of the ieMR system however the remainder of the ieMR remained fully available.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 13**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

In relation to page 3-72 of the SDS regarding capital investment, can the Minister provide: a) the amount spent on accommodation upgrades to the 33 Charlotte Street building in 2018-19 and 2019-20 (reported separately by year and project), and b) the budget for accommodation upgrades in 2020-21 (reported by approved project)?

**ANSWER:**

The Department of Health invests wisely in accommodation and other associated fit-outs. This activity means ensuring work spaces and facilities can be better-utilised – especially post the start of the pandemic. For example, many televisions can be used for video conferencing, which has been essential in a year of significantly reduced travel.

a) Budget and expenditure on accommodation upgrades to 33 Charlotte Street, Brisbane building by project for 2018-19 and 2019-20:

Project	2018-19		2019-20	
	Actuals	Budget	Actuals	Budget
Fit-out upgrades*	\$719,008.61	\$962,670.05	\$ -	\$91,446.00
Video Conferencing Units	\$ -	\$200,000.00	\$165,601.00	\$400,000.00
TV Replacements	\$46,505.90	\$18,040.00	\$ -	\$ -
<b>TOTAL</b>	<b>\$765,514.51</b>	<b>\$1,180,710.05</b>	<b>\$165,601.00</b>	<b>\$491,446.00</b>

\*Operational repairs and maintenance are carried out during the year. Given the nature of these repairs they are not classified as Capital Fit-out upgrades and therefore not captured in the Capital Investment amount.

b) Budget for accommodation upgrades to 33 Charlotte Street, Brisbane building by project for 2020-21:

Project	FY 2020-21
	Budget
Fit-out upgrades	\$30,000.00
Video Conferencing Units	\$434,399.00
DOH Office Accommodation Strategy and Business Case	\$195,000.00
<b>TOTAL</b>	<b>\$659,399.00</b>

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 14**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

In relation to page 3-72 of the SDS regarding staffing, can the Minister provide an FTE breakdown on staffing in hospital and health services for a) actual in 2019-20 and b) budgeted for in 2020-21, reported separately by hospital and health service?

**ANSWER:**

I am advised:

<b>Queensland Health and Hospital and Health Services</b>	<b>2019-20 Actual FTE</b>	<b>2020-21 Budget FTE</b>
Cairns and Hinterland Hospital and Health Service	5,311	5,044
Central Queensland Hospital and Health Service	3,292	3,308
Central West Hospital and Health Service	382	386
Children's Health Queensland Hospital and Health Service	3,933	3,844
Darling Downs Hospital and Health Service	4,778	4,904
Gold Coast Hospital and Health Service	8,787	8,555
Mackay Hospital and Health Service	2,525	2,597
Metro North Hospital and Health Service	16,860	18,569
Metro South Hospital and Health Service	14,154	13,968
North West Hospital and Health Service	803	808
South West Hospital and Health Service	801	812
Sunshine Coast Hospital and Health Service	6,168	6,122
Torres and Cape Hospital and Health Service	1,047	1,059
Townsville Hospital and Health Service	5,470	5,602
West Moreton Hospital and Health Service	3,743	3,726
Wide Bay Hospital and Health Service	3,341	3,343
<b>Hospital and Health Services Total</b>	<b>81,396</b>	<b>82,647</b>
Department of Health	7,915	8,183
Queensland Ambulance Service	4,890	4,848

<b>Queensland Health and Hospital and Health Services</b>	<b>2019-20 Actual FTE</b>	<b>2020-21 Budget FTE</b>
Funded unallocated Hospital and Health Services FTE (ELIM)*	-	1,261
<b>Queensland Health Total</b>	<b>94,201</b>	<b>96,939</b>

Source: 2019-20 Actual; Public Service Commission MOHRI submissions for June 2020 (MOHRI Occupied FTE based on 28 June 2020 pay run)

^The Queensland Health 2020-21 Service Delivery Statement notes FTEs at the end of the 2019-20 financial year being 94,117 (as at 14 June 2020).

Over the next four years, Queensland Health will hire an extra 9,475 frontline health staff, including 5,800 nurses and midwives, 1,500 doctors, 475 paramedics and 1,700 new allied health professionals.

\* ELIM FTEs (1,261) is an estimate of funded unallocated FTEs that were not allocated to a specific HHS at the time of publication of the SDS but will be allocated during the financial year.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 15**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With respect to page 3-72 of the SDS in relation to staffing, can the Minister provide the number of a) assaults and b) serious assaults recorded against staff in 2017-18, 2018-19 and 2019-20 reported separately by year and hospital and health service.

**ANSWER:**

I have been advised that while Queensland Health records negative interactions or acts of aggression towards individual staff members, it does not define them in the categories asked, that being “assault” and “serious assault”.

The Queensland Police Service are responsible for investigating and charging alleged criminals in relation to “assaults” and “serious assaults” under the relevant legislation.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 16**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to the Queensland Health capital budget for 2020-21 and page 3-72 of the SDS, will the Minister provide a list of approved projects, including a) the budget and scope of each project and b) the scheduled date of completion (reported in table format)?

**ANSWER:**

The 2020-21 Capital Statement (Budget Paper No. 3) in the budget papers lists the budget for capital projects.

Queensland Health reports detailed information about ICT projects that meet whole-of-government reporting thresholds on the Queensland Government Digital Projects Dashboard.

I am advised the following table provides the additional requested information in relation to non-ICT capital projects.

Approved Project	Scope	Scheduled date of completion
Advancing Queensland Health Infrastructure Program	To meet the functional requirements of the Nambour General Hospital in its new role as a sub-acute facility.	Final stage completion 2022
	Redevelopment of the existing Atherton Hospital facility including a new Clinical Services Building and Community Allied and Mental Health Building.	Final stage completion 2022
	Redevelopment of the Thursday Island Hospital and Primary Health Care Centre.	Final stage completion 2022
	Construction of a health facility in Cairns South Health Precinct for critical care in the event of a natural disaster and general community health services.	Project completed in September 2020
Alcohol and Other Drug Community Treatment Program	For a new 45-bed Alcohol and Other Drug Rehabilitation Service in West Moreton and residential rehabilitation and treatment services for North Queensland.	Projects are currently in business planning phase



Approved Project	Scope	Scheduled date of completion
Caboolture Hospital Redevelopment Stage 1	Redevelopment of the Caboolture Hospital which includes the creation of an additional 130 beds and refurbishment of critical clinical support services.	Practical Completion expected end of 2023
Ipswich Hospital Expansion Stage 1A	Ipswich Hospital Expansion which includes new mental health facilities for adults and older persons, a new 26 inpatient bed ward and an MRI suite to grow clinical capacity.	Main works complete in 2022.
Logan Hospital Expansion	Deliver an additional 206 beds with a vertical expansion of Building 3 and targeted refurbishment of other key locations.	Practical completion expected to be end of 2024
Logan Hospital Maternity Services Upgrade	Refurbishment of maternity services, includes six inpatient beds, five extra birthing suites, 10 extra cots and installation of birthing pools.	Practical completion expected to be end of 2022
Business Case Program	Funding to undertake robust planning and analysis of prioritised healthcare infrastructure initiatives to support a multi-year capital pipeline.	Ongoing
Caboolture Hospital Multi-storey Car Park	Construction of 1080 parking spaces to increase total car parking to 1640 spaces, providing electric vehicle charging bays and motorcycle parking.	Practical completion expected late 2023
Cairns Hospital Emergency Department Expansion	Expansion of the emergency department and reconfiguration of the existing emergency department to create a third endoscopy procedure room.	Currently in planning and design
Dakabin Family and Community Place	Delivery of and support the Dakabin Family and Community Place at Dakabin State School and Dakabin High School.	Project currently developing preliminary business case
Cairns Hybrid Theatre	Delivery of a new Hybrid Theatre, a radiology system located in a theatre environment to support advanced life support and advanced open surgery.	Practical completion expected end of 2021
Community Health and Hospitals	<b>Emerald Hospital</b> - redevelopment of the emergency department and day surgery.	Projects are currently developing preliminary business case
	<b>Townsville Hospital</b> - refurbishment of shell space into a new 33 bed ward, acute medical receiving unit.	Projects are currently developing preliminary business case
	<b>Caboolture Hospital</b> - establishment of an eight-chair Chemotherapy Unit to enable local residents to access cancer treatments closer to home.	Projects are currently developing preliminary business case

Approved Project	Scope	Scheduled date of completion
Community Health and Hospitals	<b>Bowen Hospital</b> - for the refurbishment of the medical imaging facility and the installation of a computed tomography (CT) scanner.	Projects are currently developing preliminary business case
	<b>Redcliffe Hospital</b> - for the re-design of the Redcliffe Hospital Paediatric Emergency Department.	Projects are currently developing preliminary business case
	<b>Logan Hospital</b> - delivery of an Urgent and Specialist Care Centre in the Logan region to relieve pressure on the Logan Hospital.	Projects are currently developing preliminary business case
Gladstone Hospital Emergency Department	Construction of a new emergency department including a new main hospital entrance and bridging link way to existing Block 1.	Project achieved practical completion on 19 May 2020
Roma Hospital Redevelopment	Redevelopment of the facility to support contemporary models of care including expanded outpatient capacity, integration of primary and Telehealth services.	Project achieved practical completion on 8 July 2020
Fraser Coast Mental Health Project	Construction of a new adult acute mental health inpatient unit at Hervey Bay Hospital and sub-acute older persons mental health unit refurbishment at Maryborough Hospital.	Expected practical completion late 2022
Gold Coast Secure Mental Health Rehabilitation Unit	Expansion of the Gold Coast University Hospital to deliver a Secure Mental Health Rehabilitation Unit.	Detailed business case completed. Commencing detailed design phase. Project completion forecast 2023
Kirwan Health Campus	Refurbishment of the Kirwan Health Campus to provide improved women's and children's outpatient clinics and oral health services.	Project currently developing preliminary business case
Logan Hospital Multi-Storey Car Park	Construction of an eight-level carpark on site delivering 1,506 parking bays.	Project expected to achieve practical completion in late 2021
Master Planning Studies	Funding initiative to support long-term planning resulting in a conceptual layout to guide future growth and development.	Ongoing
Princess Alexandra Hospital Cladding Project	The removal of aluminium composite panel cladding on buildings 1, 31 and 57 as identified by the Non-Conforming Building Products Audit Taskforce.	Project expected to achieve practical completion mid 2021
Priority Capital Program	Funding for the sustaining of critical existing infrastructure within the hospital and health services and statewide health services	Ongoing

Approved Project	Scope	Scheduled date of completion
Queensland Children's Hospital Level 12 Fitout	Fit out of level 12 of the Queensland Children's Hospital to provide an additional 29 inpatient beds, enabling the delivery of an additional 6 co-located oncology beds on level 11.	Project expected to achieve practical completion 14 December 2020
Queensland Children's Hospital Resilience Project	Improvement to the resilience of the low voltage electricity supply that serves critical areas and equipment.	Project expected to achieve practical completion mid 2022
Darling Downs - Kingaroy redevelopment	Planning for Stage 2 of Hospital Redevelopment	Will commence business case in 2021
Redcliffe Hospital Carpark	Construction of a four-storey on campus, 604-bay facility including motorcycle bays, ticketing stations, security and CCTV cameras.	Project achieved practical completion on 24 September 2020
Redland Hospital Carpark	Construction of an onsite multi-level car park.	Project expected to achieve practical completion mid 2022
Redland Hospital Expansion Stage 1	Development of a Detailed Business Case for the redevelopment of the site to meet the growing needs of the community and reduce pressure on other facilities in the region.	Project currently in the process of developing a detailed business case
Rockhampton Drug Rehabilitation and Treatment Facility	Construction of a new 42-bed residential alcohol and other drug rehabilitation and treatment facility in Rockhampton. Part of the Action on Ice Strategy.	Project expected to achieve practical completion late 2021
Rockhampton Hospital Cardiac Hybrid Theatre	Delivery of a cardiac hybrid theatre to establish diagnostic and interventional cardiac services to support a wide range of cardiovascular procedures.	Project currently developing detailed business case
Rockhampton Hospital Mental Health Ward Expansion	Undertake detailed planning and establish firm cost estimates for Rockhampton Hospital Mental Health Ward Expansion	Project currently developing detailed business case
Blackall Hospital Redevelopment	Construction of a new community hospital in Blackall to support the delivery of contemporary, flexible models of care.	Project achieved practical completion on 20 October 2020
Cairns Hospital Mental Health Unit	Construction of new bed Mental Health facility to replace the existing facility increasing the number of inpatient unit beds from 48 to 53.	Project expected to achieve practical completion early 2023
Kingaroy Hospital Redevelopment	Redevelopment that will increase patient treatment spaces from 46 to 66, improving the hospital's role as a hub for various services in the region.	Project expected to achieve practical completion late 2021
Mer (Murray) Island Building Replacement	Replacement of the existing Primary Health Care Centre to support the provision of quality and safe services to current and future healthcare needs.	Project expected to achieve practical completion late 2022

Approved Project	Scope	Scheduled date of completion
Sarina Hospital Redevelopment	Redevelopment of services provided at the existing facility or at a new greenfield site, to deliver a purpose-built hospital and staff accommodation.	Project expected to achieve practical completion mid 2023
Staff accommodation program	Construction of staff accommodation across a number of rural and remote sites	Project expected to achieve practical completion early 2021
Rural and Regional Renal Program	Establishment 33 additional haemodialysis treatment spaces to provide access to haemodialysis closer to home in regional, rural and remote areas.	Project expected to be delivered by the end of 2021
Satellite Hospital Program	Across the Program for the delivery of 7 Satellite Hospitals to enable our acute hospitals to continue safely managing patients via alternative models of care.	Service planning underway with the respective hospital and health services.
Sunshine Coast University Hospital	Construction of a University Hospital delivering 450-beds at the completion of Stage 1, growing to 738-beds at completion of Stage 3.	Project completed
Toowoomba Hospital Redevelopment Detailed Business Case	Development of the Detailed Business Case for the proposed redevelopment and Baillie Henderson Hospital Campus master planning.	Project currently developing detailed business case
South East Queensland - Adolescent Mental Health Facilities	Provide a youth mental health day program facility as follows: <ul style="list-style-type: none"> <li>- Funding for a new Adolescent Extended Treatment Facility at The Prince Charles Hospital, two new Adolescent Step-Up Step-Down units in Brisbane, and refurbishment of two adolescent Day Program spaces at Logan and the Gold Coast.</li> <li>- The construction of 342 carparks at The Prince Charles Hospital campus, to support the Adolescent Extended Treatment Facility.</li> </ul>	Project completed
Toowoomba Hospital Redevelopment Detailed Business Case	Development of the Detailed Business Case for the proposed redevelopment and Baillie Henderson Hospital Campus master planning.	Project currently developing detailed business case

Approved Project	Scope	Scheduled date of completion
Townsville University Hospital Hybrid Theatre	Development of a preliminary business case for the delivery of a hybrid theatre to establish interventional Radiology to support delivery of a comprehensive trauma service for North Queensland	Project currently developing preliminary business case
Townsville University Hospital Upgrades	Delivery of an expansion of the outpatient department to reduce wait times, amalgamation of North Queensland's Persistent Pain Management services.	Project currently developing preliminary business case
Yeronga Child and Youth Community Hub	Establishment of a new integrated Child and Youth Community Hub to provide appropriate integrated child, youth and family services.	Project currently developing preliminary business case
Cairns REI Centre land acquisition	Purchase of land for the Cairns South Health Precinct.	Project currently developing preliminary business case
COVID Funding	Minor capital purchases and minor works mainly for hospital clinical equipment as a direct result of COVID-19	Ongoing
Health Technology Equipment Replacement Program	Program for replacement of health technology equipment	Ongoing
Energy Efficiency Program	To support Queensland Health's state-wide energy efficiency projects.	Project currently in detailed design phase
Mater Gladstone	Purchase of the Mater Private Hospital in Gladstone.	Property purchase complete.
QEII Ward Refurbishment	Re-establishment of a 24-bed ward on level 5 of the hospital to meet demand.	Project currently developing preliminary business case
Mareeba Hospital New CT Scanner	purchase and installation of a new Computed Tomography (CT) Scanner	Project achieved practical completion September 2020
Cladding Investigation and Remediation Program (CIRP)	Program of works to assess and mitigate fire risks associated with non-compliant cladding on Queensland Health buildings state-wide.	Project expected to achieve practical completion late 2021
Robina Hospital Second CT Scanner	Delivery of a second Computed Tomography (CT) scanner for the Robina Hospital to address the increased demand for procedures and emergency CT studies.	Project currently developing preliminary business case
State-wide General Chemistry and Immunoassay Replacement and Automation Project	Replacement of Pathology Queensland Laboratory General Chemistry and Immunoassay analysers at thirty-four labs State-wide	Project currently developing detailed business case

Approved Project	Scope	Scheduled date of completion
Townsville Hospital 1.5 Tesla Magnetic Resonance Imaging (MRI) device	Refurbishment and modification works to install a second Digital Subtraction Angiography machine and purchase and install a second MRI machine.	Project expected to achieve practical completion by mid 2021
Mackay - Proserpine Hospital Acute Primary Care Clinic (APCC) Refurbishment	Refurbishment of the clinical assimilation training area, clinical assessment rooms and management office space.	Project currently in developing detailed business case phase
Metro North - Caboolture Hospital Mental Health Short Stay Unit	Construction of a new relocatable and demountable eight bed mental health short stay unit.	Project achieved practical completion in 2020
Metro North - CoPTR Business Case	Planning for Consumables and Prosthetics Tracking initiative	Project currently in developing detailed business case phase
Metro North - Herston Bio-Fabrication Institute	Fit-out of all of Level 12 of Block 7 to create the new Herston Bio-fabrication Institute with advanced manufacturing capabilities.	Project achieved practical completion in mid-2020
Bundaberg Alcohol and Other Drug	Establishment of an Alcohol and Other Drug (AOD) adult treatment facility (20 residential and eight withdrawal beds) to address unmet demand, reduce hospital admissions and avoid escalation of AOD related issues. Current state funded AOD treatment service resources	Project currently developing preliminary business case
Ipswich Hospital Upgrade	Upgrades to Ipswich Hospital to improve utilisation of space in the current hospital and address increased service demands related for the emergency department, maternity and gynaecology services and renal dialysis and nephrology services.	Project currently developing detailed business case
Mackay Community Mental Health	Refurbishment of Mackay Community Mental Health to provide a safe clinical environment for clients that also protects their privacy	Project currently developing preliminary business case
Sunshine Coast University Hospital Patient Access and Coordination Hub	Create a dedicated command centre for utilisation by both the SCHHS and local Queensland Ambulance Service teams to further enhance the Patient Access & Coordination Hub service delivery with fit-for-purpose technology and physical design.	Project currently developing preliminary business case
Varsity Lakes Day Hospital Equipment	Acquisition of additional equipment to enable improved efficiency and capacity of Varsity Lakes Day Hospital.	Project currently developing preliminary business case



Approved Project	Scope	Scheduled date of completion
Metro North - Surgical Treatment and Rehabilitation Service - capital costs	Construction of a new 184-bed specialist rehabilitation and ambulatory care centre comprising 100 rehabilitation beds, special purpose rehabilitation support areas and a surgical and endoscopic centre with 2 X 28-bed surgical inpatient units, 1 x 28-bed generic inpatient unit, 7 operating theatres, 3 endoscopy rooms and recovery spaces.	Project complete and in the operational commissioning phase.
Metro North - Surgical Treatment and Rehabilitation Service - Lease	Lease payments for the Surgical Treatment and Rehabilitation Service	Ongoing – Lease payments

## QUEENSLAND AMBULANCE SERVICE

Approved Project	Scope	Scheduled date of completion
Queensland Ambulance Service - Ambulance vehicle purchases	135 New and replacement ambulance vehicles	30 June 2021
Queensland Ambulance Service - Cairns Station and Operations Centre expansion and refurbishment	Upgrade of the Cairns Ambulance Station and Operations Centre	Mid 2024
Queensland Ambulance Service - Drayton New Station and Local Ambulance Service Networks Office	Construction of a new ambulance station and Local Ambulance Service Networks office at Drayton	Station became operational 5 October 2020
Queensland Ambulance Service – Kirwan replacement ambulance station	Construction of a replacement ambulance station at Kirwan	Station became operational 12 November 2020
Queensland Ambulance Service - Mareeba replacement ambulance station	Planning and construction of a replacement ambulance station at Mareeba	Station was officially opened on 14 September 2020
Queensland Ambulance Service - Munruben new ambulance station	Construction of a new ambulance station at Munruben	Station became operational 14 September 2020

Approved Project	Scope	Scheduled date of completion
Queensland Ambulance Service – Ormeau new ambulance station	Construction of a new ambulance station at Ormeau	Mid 2023
Queensland Ambulance Service - Ripley new ambulance station and Local Ambulance Service Networks Office	Construction of a new ambulance station and office at Ripley	Mid 2023
Queensland Ambulance Service - Rockhampton Ambulance Station and Operations Centre redevelopment	Upgrade of the Rockhampton Ambulance Station and Operations Centre	Mid 2022
Queensland Ambulance Service - Southport Ambulance and Gold Coast Ops Centre redevelopment	Upgrade of the Gold Coast Ambulance Operations Centre and the redevelopment of the Southport Ambulance Station	Mid 2024
Queensland Ambulance Service – Caloundra South new ambulance station	Construction of a new ambulance station at Caloundra South	Mid 2024
Queensland Ambulance Service - Strategic land acquisitions	Program of strategic land acquisition for future Queensland Ambulance Service stations	Mid 2021
Queensland Ambulance Service - Urraween new ambulance station	Construction of a new ambulance station at Hervey Bay	Station expected to be completed in January 2021
Queensland Ambulance Service - Yarrabilba new ambulance station	Planning and construction of a new ambulance station at Yarrabilba	Station became operational 14 September 2020
Queensland Ambulance Service - Minor works	Program of building and upgrading ambulance stations around Queensland	30 June 2021
Queensland Ambulance Service - Operational equipment	Program of procuring operational equipment for the Queensland Ambulance Service	30 June 2021



**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 17**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to page 100 of the SDS, can the Minister explain the reduction in the supplies and services budget for Children's Health Queensland in 2020-21, compared with 2019-20?

**ANSWER:**

Supplies and services expenditure at Children's Health Queensland Hospital and Health Service (HHS) is forecast to reduce by \$16 million from the 2019-20 actual expenditure and the 2020-21 financial year budget.

I am advised that the explanation for the reduction in supplies and services expenditure from the 2019-20 year actual expenditure and the 2020-21 budget are as follows:

- Cessation of non-recurrent strategic information and communication technology (ICT) and capital projects in the 2019-20 financial year totalling \$11.3 million;
- The Department of Health is allocating a further \$17.5 million in operating funds to Children's Health Queensland HHS in the 2020-21 Amendment Window 2 process which are yet to be included in the 2020-21 budget. There is \$8.9 million in Amendment Window 2 funding to be allocated to Supplies and Services expenditure budget in 2020-21;
- Cessation of non-recurrent programs which were completed as planned by 30 June 2020; and
- Full year effect of service efficiencies implemented and realised in part during the 2019-20 financial year as a result of sustainability program initiatives.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 18**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to page 3-60 of the SDS regarding the surgery backlog, can the Minister advise a) how much of that funding has been spent to date, b) how many surgeries have been undertaken, c) how many surgeries are in the backlog, d) how many surgeries were postponed this year (reported separately by hospital and health service)?

**ANSWER:**

I am advised:

- a) All of the \$250 million additional funding for elective surgery has been fully allocated to Hospital and Health Services.
- b) For the period 1 July to 30 September 2020, Hospital and Health Services have delivered 37,884 elective surgeries.
- c) The number of patients waiting beyond the clinically recommended time is 1,548 as at 1 October 2020. This compares to a peak on 1 June 2020 of 5,166 long waits.
- d) It is not possible to determine exactly how many surgeries did not occur as a result of the suspension of non-urgent planned care during the COVID-19 pandemic. However, as an indication, during the period where restrictions were in place it is estimated that there were approximately 11,500 less elective surgical procedures undertaken compared to the same period in the previous financial year – this represents a 31% reduction.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 19**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

In relation to the Intergovernmental Partnership Agreement on Essential Vaccines, would the Minister please provide details on:

- a) Total amount paid to Queensland for “Incentive Payments” under this agreement between 2015 and 2020;
- b) What Vaccine Acquisition (purchase) Agreements are currently in place, or in the process of being formed, between the Government and “a Vaccine Sponsor”, with details of each sponsor and related vaccine?
- c) Are there any “Incentive Payment” provisions included in any of the Vaccine Acquisition agreements, and if so please provide details as to the payments themselves and the targets that triggered them.
- d) What was the total paid for each year since 2015 for all the Government's vaccine purchases (excluding “Essential Vaccines” funded by the Commonwealth).

**ANSWER:**

- a) *Total amount paid to Queensland for “Incentive Payments” under this agreement between 2015 and 2020;*

Between 1 July 2015 and 30 November 2020, Queensland has received approximately \$13.9 million in reward funding under the NPEV.

- b) *What Vaccine Acquisition (purchase) Agreements are currently in place, or in the process of being formed, between the Government and “a Vaccine Sponsor”, with details of each sponsor and related vaccine?*

- A head deed and agreements with GlaxoSmithKline (GSK) are in place for the supply the following NIP funded vaccines:
  - *Infanrix Hexa®*: a childhood vaccine for protection against diphtheria, tetanus, pertussis, hepatitis b, poliomyelitis, and *Haemophilus influenzae* type B;
  - *Infanrix®*: a vaccine to boost a child's protection against diphtheria, tetanus and pertussis;

- Bexsero®: a vaccine to protect against meningococcal B disease;
- Rotarix®: a childhood vaccine to protect against severe gastroenteritis;
- Engerix®: a vaccine to protect against hepatitis B;
- Priorix®: a childhood vaccine for the protection against measles, mumps and rubella;
- Prioritx Tetra®: a vaccine that boosts protection against measles, mumps and rubella as well as providing protection against varicella (chickenpox);
- Boostrix®: a booster vaccine for adolescents/adult to protect against diphtheria, tetanus, pertussis; and,
- Fluarix Tetra®: a vaccine to protect against seasonal influenza.
- A head deed and agreements with Seqirus are in place for the supply of the following NIP funded vaccines:
  - H-B VaxII paediatric®: a childhood vaccine to protect against hepatitis B;
  - MMRII®: a childhood vaccine for the protection against measles, mumps and rubella;
  - Pro Quad®: a vaccine that boosts protection against measles, mumps and rubella as well as providing protection against varicella (chickenpox);
  - Vaxta paediatric®: a childhood vaccine for the protection against hepatitis A;
  - Pneumovax23®: a vaccine to protect against pneumococcal disease;
  - Gardasil9®: a vaccine to protect against human papillomavirus;
  - Zostavax®: a vaccine to protect against herpes-zoster (shingles);
  - Afluria Quad®: a vaccine to protect against seasonal influenza; and
  - Fluad Quad®: a strengthened vaccine to provide protection against seasonal influenza for people aged 65 years and older.
- A head deed and agreements with Sanofi Pasteur (Sanofi) are in place for the supply of the following NIP funded vaccines:
  - ACT-HiB®: a vaccine to protect against *Haemophilus influenzae* type B disease;
  - Adacel®: a vaccine to boost a child's protection against diphtheria, tetanus and pertussis;
  - FluQuadri®: a vaccine to protect against seasonal influenza; and
  - Vaxigrip Tetra®: a vaccine to protect against seasonal influenza.
- A head deed and agreements with Pfizer are in place for the supply of the following NIP funded vaccines:
  - Prevenar13®: a vaccine to protect against pneumococcal disease; and

- Nimenrix®: a vaccine to protect against meningococcal ACWY disease.
- c) *Are there any “Incentive Payment” provisions included in any of the Vaccine Acquisition agreements, and if so, please provide details as to the payments themselves and the targets that triggered them?*
  - As the deeds and agreements are established by the Australian Government, this question is best directed to the Australian Government.
- d) *What was the total paid for each year since 2015 for all the Government’s vaccine purchases (excluding “Essential Vaccines” funded by the Commonwealth)?*
  - Since 1 July 2014 to 30 November 2020, the Queensland Government has spent approximately \$20 million on vaccines for state funded vaccination programs.
  - In the last six years, the state has funded substantial and important vaccination programs such as pertussis vaccine for pregnant women, meningococcal ACWY vaccine for adolescents, and influenza vaccine for children aged 6 months to less than 5 years of age.
  - The Queensland Government continues to fund:
    - hepatitis B vaccine for at-risk people;
    - measles-mumps-rubella (MMR) vaccine for people born during or since 1966 who have not received two doses of MMR vaccine;
    - Japanese Encephalitis vaccine for residents of the outer islands of the Torres Strait;
    - Rabies vaccine and rabies immunoglobulin to manage potential cases of rabies and Australian Bat Lyssavirus; and,
    - certain vaccines to manage outbreaks and/or protect close contacts of a vaccine preventable disease.
  - Vaccine purchases by the Department of Health (excluding “Essential Vaccines” funded by the Commonwealth Government under the NIP) since 1 July 2014 to 30 November 2020 are as follows:
    - 2014-15 Financial Year: \$1,815,392
    - 2015-16 Financial Year: \$2,428,349
    - 2016-17 Financial Year: \$3,074,828
    - 2017-18 Financial Year: \$7,156,456
    - 2018-19 Financial Year: \$3,826,636
    - 2019-20 Financial Year: \$1,230,445
    - 2020-21 Financial Year (to 30 November 2020): \$498,613.

**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**PRE-HEARING QUESTION ON NOTICE**

**No. 20**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

With reference to page 3-60 of the SDS regarding the public health response to COVID-19 to ensure that the virus is identified, contained and suppressed, can the Minister outline the Queensland Government's plan to distribute a vaccine and the economic impacts of delivering such a vaccine to the Queensland community.

**ANSWER:**

Queensland's response to the COVID-19 pandemic has been world-class. The public have been vital partners in helping keep the state safe. We need to continue that work but help in the form of a vaccine is on its way.

On 13 November 2020, the National Cabinet endorsed the *Australian COVID-19 Vaccination Policy*. The national policy describes the framework for implementing a COVID-19 vaccination program and outlines the roles and responsibilities of both the Australian Government and State/Territory Governments.

The Australian Government has responsibility for the selection, procurement and regulatory approval for COVID-19 vaccines.

The Australian Government is also responsible for distributing COVID-19 vaccine to the point-of-administration across the nation.

State and territory governments will be responsible for ensuring an appropriately qualified and trained workforce and identifying suitable vaccination locations and sites.

Queensland is working very closely with the Australian Government to co-design a jurisdictional immunisation plan for Queensland.

Queensland Health has developed a governance framework to oversee the implementation of Queensland's COVID-19 vaccination program. The framework consists of an executive governance group with overall decision-making responsibilities, and a COVID-19 vaccine taskforce comprising eight leadership workstreams which are:

- Vaccination oversight
- Intergovernmental oversight and policy
- Workforce
- Logistics and supply chain solutions

- Data and digital solutions
- Program safety and monitoring
- Communications
- Hospital and Health Service (HHS) planning and implementation

In the initial phases, which are dependent on the supply of the vaccine, Queensland's COVID-19 vaccination program will closely follow the advice of the Australian Technical Advisory Group on Immunisation who have identified the following groups as a priority for receiving COVID-19 vaccination:

- people at increased risk of exposure, such as health and aged care workers
- people with an increased risk of developing severe disease or outcomes such as First Nations people, older people and people with underlying medical conditions
- people working in services critical to societal functioning.

The Australian Government has indicated that vaccines, if deemed safe and effective by the Therapeutic Goods Administration, may be available for distribution from March 2021.

**Pre-hearing questions on notice and responses –  
*Minister for the Environment and the Great Barrier Reef  
and Minister for Science and Youth Affairs***

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## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 1**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

When will the government release the next Statewide Landcover and Trees Study (SLATS)?

#### **ANSWER:**

I thank the Committee for the question.

The Palaszczuk Government continues to take strong action on vegetation management using the best available science to protect Queensland's natural environment for future generations.

The Statewide Landcover and Trees Study, known as SLATS, has monitored vegetation clearing rates in Queensland since 1988.

The 2018-19 SLATS report will be released next year.

The Department of Environment and Science is investing \$2.028 million in 2020-21 to ensure SLATS uses the best available science.

The program of enhancements includes a transition from Landsat to higher resolution Sentinel-2 satellite imagery for the SLATS woody vegetation clearing analysis. In addition, combining higher resolution satellite imagery with computing technologies and machine learning is enabling a detailed baseline woody vegetation extent map for the State. The enhanced SLATS program is also developing a monitoring methodology for vegetation regrowth, and a bio-condition mapping framework.

Enhancements to SLATS will significantly improve Queensland's scientific evidence base and monitoring capacity to underpin vegetation management, and inform a range of environment, natural resource and disaster management applications.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 2**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

How is the government delivering its commitment to improve the future management of Lake Eyre Basin?

#### **ANSWER:**

I thank the Committee for the question.

The Queensland Government remains committed to working with First Nations peoples, industry, local councils, stakeholders and communities to ensure the sustainable management of the Lake Eyre Basin.

In keeping with this commitment, a Lake Eyre Basin stakeholder working group will be established to discuss sustainable management of the area and inform the development of a consultation Regulatory Impact Statement.

Members of the working group will include Traditional Owners, industry bodies, local government, scientific experts and government departments.

Additionally, in December 2019 the Queensland Government endorsed the Department of Environment and Science supporting a Lake Eyre Basin Traditional Owner Alliance to be an active partner in decision-making about, and management of, the area.

Three forums initiated by First Nations peoples of the Lake Eyre Basin have contributed valuable information about aspirations for future management and resulted in the informal establishment of the Lake Eyre Basin Traditional Owner Alliance. A fourth forum is scheduled for early 2021.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 3**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Can the Minister give an update on the review of the Great Sandy Marine Park Zoning Plan?

#### **ANSWER:**

I thank the Committee for the question.

The Great Sandy Marine Park was declared in 2006 and contains areas of high ecological value that support wetlands of international importance; habitats for threatened species such as turtles, dugong, shorebirds and grey nurse sharks; and supports a range of recreational and commercial uses.

The first comprehensive review of the Great Sandy Marine Park zoning plan is currently in progress, with a discussion paper released for public consultation receiving over 3,000 submissions. This high level of response demonstrates the community's interest in the marine park and its future management.

In December 2019, the Butchulla People were granted a Native Title Determination for a large portion of the Marine Park. As such, the Butchulla People's Native Title rights over the sea country, and the rights and interest of other First Nations peoples with country that is within and adjoining the Marine Park, need to be fully considered and incorporated in the zoning plan review.

To ensure the zoning plan review is based on the best available science an independent scientific reference group (SRG) has been formed to provide scientific input to the process and advise on potential management changes.

During 2020, progress on the zoning plan review has been impacted by the COVID-19 pandemic, particularly in relation to the delivery of targeted stakeholder consultation.

With input from the SRG and First Nations peoples, the Department of Environment and Science is developing a range of draft enhancements to the zoning plan which will be the subject of further public consultation.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 4**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Will the Minister advise how many crocodile sightings were reported to the Department in 2019-20 and the average time taken to remove problem crocodiles?

#### **ANSWER:**

I thank the Committee for the question.

In 2019-20, 536 estuarine crocodile sightings were reported to the Department of Environment and Science.

The Service Delivery Standard performance measure for estuarine crocodile management in 2019-20 is the median time taken to resolve declared problem crocodiles was not to exceed seven business days. The actual median of the time taken to resolve problem crocodiles in 2019-20 was less than 1 business day.

## HEALTH AND ENVIRONMENT COMMITTEE

### Estimates Pre-Hearing Question on Notice

No. 5

Asked on Friday, 4 December 2020

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Can the Minister please detail how the Government is partnering with Traditional Owners in joint management arrangements in national parks?

#### **ANSWER:**

I thank the Committee for the question.

The Queensland Government is committed to partnership with Traditional Owners in joint management arrangements across the State's national parks. The Department of Environment and Science partners with Traditional Owners to jointly manage the natural and cultural values and the visitor facilities within these national parks with resources to manage the land, and camping revenue for economic and governance activities.

The department has partnered with the Quandamooka Yoolooburrabee Aboriginal Corporation (QYAC) for joint management arrangements for Naree Budjong Djara National Park on Minjerribah (North Stradbroke Island) and Teerk Roo Ra (Peel Island). Those arrangements were enabled by legislative changes to the *Nature Conservation Act 1992*, which were debated in Parliament and subject to public scrutiny and oversight.

The development of the Management Plan for Naree Budjong Djara National Park on Minjerribah (North Stradbroke Island) involved public consultation. Engagement with the commercial tour operators and community on Mulgumpin (Moreton Island) ahead of future joint management of that national park will be taking place early in the new year.

This partnership has had many achievements including QYAC, through a whale watching permit, undertaking whale watching tours in the Moreton Bay Marine Park, and the collaborative development of the Minjerribah Protected Area Expansion Strategy.

The Cape York Peninsula Tenure Resolution Program has returned over 3.7 million hectares of land to Traditional Owners as either national park (Cape York Peninsula Aboriginal Land), nature refuges on Aboriginal freehold or Aboriginal freehold land. In relation to park management on Cape York, the Government is partnering with Traditional Owners to jointly manage 28 Cape York Peninsula Aboriginal land national parks. This protects 2.17 million hectares of land with outstanding natural and cultural values.

While these are specific statutory joint management arrangements, a broad range of other collaborative management arrangements exist across the State. For example, the department collaborates with the registered Prescribed Body Corporates for Butchulla land and sea country. This co-stewardship arrangement sees employment opportunities as Queensland Parks and Wildlife Service Rangers for Butchulla peoples and input into the management of fire, pest, Wongari (dingo) and visitor management programs to guide land and sea management on K'gari (Fraser Island) and within the Great Sandy Marine Park.

## HEALTH AND ENVIRONMENT COMMITTEE

### Estimates Pre-Hearing Question on Notice

No. 6

Asked on Friday, 4 December 2020

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Will the Minister detail how the Government is growing Queensland's protected areas?

#### **ANSWER:**

I thank the Committee for the question.

The Queensland Government released its 10-year roadmap, *Queensland's Protected Area Strategy 2020-2030* (the Strategy), to establish the future strategic direction for the State's protected areas, both public and private.

An initial investment of \$60 million over four years has been allocated to implement the Strategy, which includes \$28 million for strategic land acquisitions and \$8 million to expand and support management of private protected areas.

In 2020-21, a total budget of \$15.8 million has been allocated to the strategic acquisition of properties for dedication as public protected areas, including:

- \$7.3 million for land acquisitions;
- \$6.5 million for strategic acquisitions and tenure dealings in far north Queensland; and
- \$2 million for the Great Barrier Reef Island Arks project.

Negotiations will also continue in 2020-21 for high priority acquisitions. Funding of \$1.2 million has been allocated to the expansion and management of private protected areas in 2020-21.

This is in addition to the Queensland Government's strong record, with protected areas in Queensland increasing by over 1.2 million hectares since 2015. Queensland's protected area system now covers an area more than twice the size of Tasmania and includes the largest private protected area network in Australia.

Queensland is also the first State to create Special Wildlife Reserves to provide national park-level protection for private land of exceptional natural and cultural value. Pullen Pullen Reserve in western Queensland was dedicated Australia's first Special Wildlife Reserve in September 2020.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 7**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Will the Minister give an update on the Palaszczuk Government's initiatives to combat climate change?

#### **ANSWER:**

I thank the Committee for the question.

The Queensland Government is taking strong action to address the impacts of climate change and ensure the long-term economic security and resilience of our economy, communities and industries.

The Palaszczuk Government has committed to developing a 10-year Climate Action Plan in consultation with stakeholders. The Action Plan will map the pathway forward for the next decade, build on actions already taken under the Queensland Climate Transition Strategy and Queensland Climate Adaptation Strategy.

Key initiatives and commitments that support climate action across the Queensland Government include:

- establishing a State-owned clean electricity generator, CleanCo;
- investing \$145 million to support three Renewable Energy Zones across Queensland;
- investing \$500 million in a Renewable Energy Fund to increase public ownership of commercial renewable projects and supporting infrastructure; and
- investing through the \$500 million Land Restoration Fund to reduce emissions and generate new job and revenue sources for Queensland's rural, regional and First Nations communities, while also delivering environmental benefits such as improved water quality and enhanced biodiversity.

Other key initiatives include:

- facilitating the development of a sustainable hydrogen industry in Queensland through the Queensland Hydrogen Industry Strategy;
- delivery of the Queensland Electric Vehicle Strategy and the completion of Queensland's Electric Superhighway, the longest electric superhighway in a single State; and
- reducing energy costs across Queensland State schools through the Advancing Clean Energy Schools and Cooler Cleaner Schools Programs.



The Queensland Climate Adaptation Strategy is addressing the risks of climate change through:

- the Queensland Climate Resilient Councils program (41 councils participating) and the QCoast2100 program (31 councils participating);
- supporting the Queensland Government to manage its climate risks through the Queensland Climate Ready program;
- providing high-resolution climate projection data and resources via the online Queensland Future Climate Dashboard; and
- supporting sector action through a co-investment program to implement priority actions identified in Sector Adaptation Plans.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 8**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Will the Minister detail the expenditure of the 70% of waste levy revenue that is being reinvested?

#### **ANSWER:**

I thank the Committee for the question.

Prior to the introduction of the Queensland waste disposal levy on 1 July 2019, the Palaszczuk Government committed to reinvesting 70 per cent of revenue generated through the waste levy over the first three years back into waste management and resource recovery programs. The revenue generated from the levy has been allocated to annual payments to councils, scheme start-up and operational costs, industry programs and other environmental priorities.

Annual payments of \$143.5 million were made to councils for 2019-20, prior to the start of the levy year from the 2018-19 budget.

During 2019-20, the Department of Environment and Science spent \$21.86 million on levy implementation and compliance, including funding allocated to programs such as the:

- industry based, \$6 million Regional Recycling Transport Assistance Package;
- introduction of the Tackling Plastic Waste: Queensland's Plastic Pollution Reduction Plan; and
- development of environmental initiatives under the \$6 million Community Sustainability Action Grant Program.

The Queensland Government is also rolling out the \$100 million Resource Recovery Industry Development Program over three years. This Program supports projects and initiatives that, for example, divert waste from landfill and reduce stockpiling to revolutionise our State's resource recovery industries and importantly create jobs.

There are significant opportunities within the waste sector for jobs generation, given that recycling creates three times more jobs than landfill. Our government is leveraging these opportunities with the recent announcement of almost \$27 million in recycling projects under the Resource Recovery Industry Development Program including projects addressing organic waste, construction and demolition waste and other priority waste streams including tyres, plastics, glass and textiles.

The department was allocated \$178.65 million of waste levy funds for the 2020-21 financial year. This funding will:

- provide annual payments to councils of an estimated \$143.7 million in 2020-21;
- allow a continuation of existing programs including the Regional Recycling Transport Assistance Package, and the development of further strategies and action plans under the Waste Strategy; and
- allow commencement of additional industry programs including the \$3 million Charitable Recyclers Rebate Program, and the \$1 million Local Government Levy Ready Grant Program Round 2.

The waste levy underpins the Queensland Waste Management and Resource Recovery Strategy which outlines the pathway for our state to significantly improve resource recovery in an effort to become a zero waste society.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 9**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Will the Minister provide details of fire management work undertaken by QPWS, including how many hectares of planned burns were carried out in 2019-20?

#### **ANSWER:**

I thank the Committee for the question.

The Queensland Government has demonstrated a strong commitment to support bushfire management in our national parks and State forests, to reduce the risk of bushfire to the neighbouring communities. The Queensland Parks and Wildlife Service (QPWS) is responsible for approximately 13 million hectares across Queensland.

Public safety is the highest consideration in all fire management activities while balancing fire management obligations. Managing Queensland's bushfire risk is a shared responsibility and collaboration occurs with land holders, emergency services, First Nations peoples, communities and neighbours.

QPWS has exceeded its annual target of completing planned burns on over 600,000 hectares – more than 5 per cent of the QPWS-managed estate, every year since 2009. In preparation for the 2020 bushfire season, QPWS completed over 700,000 hectares of planned burns on the QPWS-managed estate exceeding its annual target. It has also exceeded its target to treat 90 per cent of the scheduled Protection Zones each year since the target was introduced.

QPWS has around 750 trained fire staff and about 360 light attack and 33 medium attack fire appliances.

QPWS undertakes annual bushfire risk mitigation activities as part of the Queensland Fire and Emergency Services Operation Cool Burn and actively participates in all relevant Bushfire Management Groups.

In response to increased bushfire risk, the Palaszczuk Government allocated an additional \$16 million over four years commencing in 2019-20, and \$2.6 million per year ongoing to provide improved capability for bushfire management in Queensland's parks and forests.

In 2019-20, less than 2 per cent of Queensland wildfires started on National Parks, and 76 per cent of these were contained within the National Park boundaries.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 10**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

Will the Minister outline what fire management preparations were undertaken on K'gari (Fraser Island)?

#### **ANSWER:**

I thank the Committee for the question.

Queensland Parks and Wildlife Service (QPWS) management of fire is guided by a comprehensive fire management system. Fire management strategies are developed for each protected area and are underpinned by nationally recognised Bioregional Planned Burn Guidelines. The Guidelines incorporate scientific methodologies with traditional burning approaches to inform fire management activities undertaken by QPWS.

Protection of life and property is the highest consideration in all QPWS fire management activities, followed by the conservation of natural ecological systems.

Fire management is always a joint effort with QPWS firefighters working alongside the Queensland Fire and Emergency Services, rural fire brigades, First Nations peoples, neighbours, and members of the community.

Since 2016, QPWS has treated in excess of 60,000 hectares through planned burning on K'gari (Fraser Island). This equates to a treated area of just under 13,000 hectares or roughly 8 per cent of the Island each year.

In advance of the 2020 fire season, QPWS undertook planned protection burns at Happy Valley, Orchid Beach West and Platypus Bay Ocean Lake; with \$400,000 allocated for undertaking fire break and track maintenance on the southern network firebreaks and Northern Road. In addition, the Rural Fire Service undertook a planned burn at Kingfisher Bay Resort. Additional fire preparedness works were completed at Cathedral Beach, Waddy Point, Woralie, Platypus Bay, Orchid Beach and the mulching of Northern Road.

In response to increased bushfire risk, the Queensland Government allocated an additional \$16 million over four years commencing in 2019-20, and \$2.6 million per year ongoing to provide improved capability for bushfire management in Queensland's parks and forests.

QPWS works in a close partnership with the Butchulla Aboriginal Corporation in the management of K'gari, including conducting pre and post burn cultural assessments of targeted planned burn areas, jointly contributing to burn tactics and parameters of each burn, and trained Butchulla Aboriginal Corporation firefighters participate in the burns.

As the recent Royal Commission identified, the impacts of climate change, such as weather events that caused the 2018 and 2019 bushfires, are forecast to become increasingly common and more severe.

QPWS is continually adapting to the changing fire landscape, burning earlier in the planned burn season and moving to an approach of conducting planned burns when conditions are suitable rather than locking into seasons.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 11**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS—

Will the Minister provide a detailed breakdown of budgeted and actual investment in the Queensland Reef Water Quality Program (in table format per financial year) for 2017-18, 2018-19, 2019-20 and 2020-21?)

#### **ANSWER:**

I thank the Committee for the question.

The Queensland Reef Water Quality is a five year program between 2017-18 to 2021-22.

Financial investment in the Program is presented in Annual Investment Plans and Annual Investment Reports which are publically available on the Queensland Government website at: <https://www.qld.gov.au/environment/coasts-waterways/reef/reef-program>.

The Annual Investment Plan outlines the anticipated spend for the current financial year. The Annual Investment Report publishes the actual spend that occurred during the previous financial year.

For the 2017-18 financial year, the budgeted expenditure was \$63.99 million and the actual expenditure was \$43.37 million.

For the 2018-19 financial year, the budgeted expenditure was \$69.36 million and the actual expenditure was \$68.92 million.

For the 2019-20 financial year, the budgeted expenditure was \$78.22 million and the actual expenditure was \$58.21 million. The respective Annual Investment Report in will be published in early 2021.

For the 2020-21 financial year, the budgeted expenditure is \$64.28 million and the actual expenditure will be finalised at the end of the financial year.

Budget allocations are not always able to be fully expended in the year allocated. Reasons for this vary, for example, project start up time usually results in a project running for only part of a financial year due to procurement, contracting and recruitment processes.

Additionally, the Reef catchments are subject to extreme weather events and contracted milestones may be delayed due to cyclones, flooding and other events.

Funds that have not been expended have generally been reprofiled to future financial years so that the overall five year program commitment is achieved.



## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 12**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS-

Will the Minister advise in relation to the Land Restoration Fund (by financial year in table format) the amount of: a) government funds expended, b) private sector funds expended, and c) the amount of Australian Carbon Credits Units issued for 2018-19 and 2019-20 and budgeted for 2020-21?

#### **ANSWER:**

I thank the Committee for the question.

The Land Restoration Fund is a flagship program, which is the first of its kind in Australia. As such, significant effort is being put into its initial establishment.

Approximately \$13.96 million has been expended in establishing the Land Restoration Fund including \$1.3 million for pilot projects in the 2019-20 financial year, market development activities, rebates for landholders and project proponents, set up of the Land Restoration Fund Trust (LRF Trust) and administration.

In 2020, the first investments have been made by the LRF Trust, with contracts of nearly \$93 million being established. Approximately \$7.9 million is expected to be paid out of the LRF Trust to proponents in the 2020-21 financial year.

The initial investment through the LRF Trust is estimated to be leveraging \$5.8 million of private sector expenditure in the 2020-21 financial year.

Carbon farming projects are usually credited with Australian Carbon Credit Units (ACCUs) over a 25-year period. The Land Restoration Fund only funds new projects, therefore the majority of projects are not mature enough to have ACCUs credited. Round 1 projects will result in the purchase of over 1.86 million ACCUs.

162 ACCUs have been issued in the 2020-21 financial year.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 13**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS -

Will the Minister advise the total annual expenditure relating to conferences, workshops, catering and other hospitality expenses by departments and agencies under the administration of the Minister for 2019-20 and the budgeted amount of 2020-21?

#### **ANSWER:**

I thank the Committee for the question.

The total annual expenditure relating to conferences, workshops, catering and other hospitality expenses by departments and agencies under the administration of the Minister for 2019-20 was \$822,576. This includes \$8,294 relating to Arts Queensland, and the Corporate Administration Agency.

This expenditure facilitates the department's engagement with the community and key delivery partners including local governments, First Nations groups and landholders. It also supports longstanding programs, such as the Young Tall Poppies Science Award hosted by the Queensland Chief Scientist.

The revised budget for 2020-21 is \$490,000 and this includes \$2,220 for Arts Queensland for the five-month period to 30 November 2020. This represents a savings contribution of 40%.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 14**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS-

Will the Minister detail the percentage of problem crocodiles that are resolved within (a) 1 business day, (b) 5 business days, (c) 10 business days, (e) 20 business days and (f) more than 20 business days?

#### **ANSWER:**

I thank the Committee for the question.

During the 2019-20 financial year, the Department of Environment and Science resolved problem crocodiles within the following timelines:

- 60% resolved within 1 business day;
- 70% resolved within 5 business days;
- 71% resolved within 10 business days;
- 78% resolved within 20 business days; and
- 22% resolved in more than 20 business days.

It is important to keep in mind with these percentages that the figures increase because the total numbers accumulate across each time bracket (i.e. the same crocodiles that are counted as part of the 60% that are resolved within 1 business day are also counted as part of the 78% that are resolved within 20 business days).

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 15**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS-

Will the Minister provide a detailed breakdown of budgeted and actual expenditure on IT per financial year for 2018–19, and 2019–20?

#### **ANSWER:**

I thank the Committee for the question.

The Department of Environment and Science's oversight, prioritisation and monitoring of delivery and performance of the department's digital and IT portfolio is actively managed by the Digital Investment Sub-Committee reporting to the Director-General.

In 2018-19, the department had 17 digital and IT initiatives which had either commenced or were being continued with a total budget of \$17.96 million. The total actual expenditure in 2018-19 for projects in flight was \$15.58 million.

In 2019-20, the department had 24 digital and IT initiatives which had either commenced or were being continued with a total budget of \$22.99 million. The total actual expenditure in 2019-20 for projects in flight was \$22.31 million.

## HEALTH AND ENVIRONMENT COMMITTEE

### Estimates Pre-Hearing Question on Notice

No. 16

Asked on Friday, 4 December 2020

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS-

Will the Minister outline the number of fraud and/or misconduct investigations currently being undertaken either by the department or the Crime and Corruption Commission, regarding the employees or contractors with specific reference to the overall types of complaints and the number of staff currently on suspension as a result of these investigations?

#### **ANSWER:**

I thank the Committee for the question.

It is not appropriate to comment on investigations currently being undertaken by either the Department of Environment and Science or the Crime and Corruption Commission (CCC).

The Public Service Commission meets its legislative requirement under section 88N of the *Public Service Act 2008* to publish annual conduct and performance data by 30 September each year.

A link to this report is below:

<https://www.forgov.qld.gov.au/2019-20-conduct-and-performance-data>.

The Public Service Commission data does not include matters involving corrupt conduct.

Corrupt conduct matters fall under the jurisdiction of the CCC and a corruption allegations data dashboard is published at [Corruption allegations data dashboard | CCC - Crime and Corruption Commission Queensland](#).

## HEALTH AND ENVIRONMENT COMMITTEE

### Estimates Pre-Hearing Question on Notice

No. 17

Asked on Friday, 4 December 2020

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS-

Will the Minister advise for the 2019-20 actual financial year and 2020-21 budgeted financial year (in table format by individual financial year) (a) the headcount number of contractors and labour hire staff in the department, (b) all expenses associated with contractors and labour hire staff in the department and (c) headcount number of staff seconded to the department from any other State Government entity?

#### **ANSWER:**

I thank the Committee for the question.

	<b>Headcount of Contractors/Labour Hire staff</b>	<b>Expense amount of Contractors/Labour Hire staff</b>	<b># Staff seconded from other government agencies</b>
<b>2019-20 Actual</b>	36	\$2.15 million	31
<b>2020-21 Budget</b>	13	\$0.96 million	11

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 18**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS

(a) how much is currently held in the environmental offsets account, (b) how many financial settlement offset payments have been made in this financial year, (c) how many hectares of environmental offsets have been purchased with funds since the environmental offset account was established?

#### **ANSWER:**

I thank the Committee for the question.

The environmental offsets account holds \$42,071,011 as at 7 December 2020, including 27 settlements totalling \$1.64 million received since 1 July 2020.

Payments totalling \$509,470 have been made from the Offsets Fund since 1 July 2020. Two new contracts have been established for the delivery of offsets in this financial year with a total value of \$1.8 million. Further offsets to the value of approximately \$14 million are currently in the procurement phase with the expectation that contracts will be signed in the current financial year.

Since establishment of the Offsets Fund, 84 hectares of land have been secured for offsets including sites for mangroves and seagrass, aquatic offsets in south east Queensland, and endangered ecosystems and species, with an additional nine projects currently in different stages of delivery.

On 2 October 2020, the Queensland Government released *A review of Queensland Environmental Offsets Framework Consultation and Response Report* (the report). The framework was introduced by the former LNP Government in 2014 and our Government undertook a review following significant concerns raised by stakeholders.

The report summarises key issues raised during the review including a need for improved transparency, reduced complexity, reduced barriers to landholder participation and offset delivery, and greater alignment with the Commonwealth offset policy.

The report also outlines a two phased response to information received during the review:

- Phase 1 will enhance offset delivery partnerships with local government and landholders, improve guidance, and increase the supply of potential offset areas with no increased cost to government or business.
- Phase 2 will commence in early 2021. This phase will identify and assess potential legislative reforms in partnership with other government agencies, a multisector reference group and the community.

With the outcomes of this review into the LNP's framework now underway, Queensland is in a position to improve offset delivery into the future.



## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 19**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-42 of the SDS-

Can the Minister outline whether the funding available for the Great Barrier Reef includes any independent assessments relating to the harvesting of coral species in the Great Barrier Reef including for commercial, research and biotechnology purposes?

#### **ANSWER:**

I thank the Committee for the question.

The funding for the Great Barrier Reef outlined in the Service Delivery Statement does not include funding for independent assessments relating to the harvesting of coral species in the Great Barrier Reef. The Department of Agriculture and Fisheries is responsible for ecological risk assessments of fisheries, including the coral fishery.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Pre-Hearing Question on Notice**

**No. 20**

**Asked on Friday, 4 December 2020**

**THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—**

#### **QUESTION:**

With reference to page 2-46 of the SDS regarding the \$10.2 million over four years ending in 2023-24 for projects supporting ecotourism including upgrades to our National Parks and World Heritage Areas-

Can the Minister provide details on funding for each National Park and World Heritage Area in Queensland over the four years?

#### **ANSWER:**

I thank the Committee for the question.

The Queensland Government is committed to fostering ecotourism opportunities that support the sustainable growth of the ecotourism industry; provide a positive contribution back to Queensland's natural environment, culture and community; and strengthen the economy.

As part of the \$40 million Healthy Reef, Healthy Environment, Healthy Economy election commitment, the Queensland Government is investing significantly in new ecotourism facilities across regional Queensland.

Ecotourism projects in national parks are required to be in accordance with the Ecotourism Best Practice Development Guidelines. This means they must be in the public interest; ecologically sustainable; and to the greatest possible extent, preserve the land's natural condition and protect its cultural values and resources.

Specifically, \$10.2 million of the funding is being invested in the following five ecotourism related projects on National Parks and World Heritage:

- \$2.8 million to upgrade and build new nature-based visitor experiences of the campground and walking track upgrades at Conondale National Park;
- \$4.5 million to upgrade and build new nature-based visitor experiences of the next stage of the Ngaro Walking Track on Whitsunday Island;
- \$1.25 million to develop Central Station as a cultural tourism centre with camping and bush tucker tour on K'gari (Fraser Island);
- \$1.34 million to develop a tourism hub and visitor centre in the Daintree National Park; and
- \$275,000 to provide new cultural offerings in the Gondwana Rainforest with the Traditional Owners.

## Documents tabled at the hearing – 10 December 2020

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1.	Document tabled by Minister for Health and Ambulance Services outlining Queensland Health and Queensland Ambulance Service reported occupational violence incidents
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Queensland Health, reported occupational violence incidents (by primary incident classification breakdown) 2019-20

<b>Hospital and Health Services and Department of Health</b>	<b>Physical aggression (actual)</b>	<b>Physical aggression (threatened)</b>	<b>Verbal aggression</b>	<b>Other</b>	<b>2019-20 Total</b>
Cairns and Hinterland	467	116	196	3	782
Central Queensland	253	95	144		492
Central West	2	3	20		25
Children's Health Queensland	170	18	75	1	264
Darling Downs	437	126	288		851
Gold Coast	452	132	238	3	825
Mackay	239	67	152		458
Metro North	868	213	571	5	1657
Metro South	1737	565	939	2	3243
North West	20	30	64		114
South West	36	16	46		98
Sunshine Coast	375	84	133		592
Torres and Cape	30	22	27		79
Townsville	590	251	691		1532
West Moreton	422	170	357		949
Wide Bay	219	71	147		437
Department of Health	15	1	5	0	21
<b>Queensland Health (excl Queensland Ambulance Service)</b>	<b>6332</b>	<b>1980</b>	<b>4093</b>	<b>14</b>	<b>12,419</b>

Source: SPR; Work Health & Safety (WHS) Dashboard

Table 2: Queensland Health, reported occupational violence incidents (by primary incident classification breakdown) 2018-19

Hospital and Health Services and Department of Health	Physical aggression (actual)	Physical aggression (threatened)	Verbal aggression	Other	2018-19 Total
Cairns and Hinterland	321	86	191	0	598
Central Queensland	146	36	112		294
Central West	3	1	28		32
Children's Health Queensland	165	16	61	1	243
Darling Downs	356	113	236		705
Gold Coast	406	137	170	3	716
Mackay	215	58	160		433
Metro North	710	221	454	6	1391
Metro South	1159	384	838	1	2382
North West	44	18	70	0	132
South West	47	9	29		85
Sunshine Coast	260	58	119	2	439
Torres and Cape	44	27	39		110
Townsville	496	151	260		907
West Moreton	355	114	239		708
Wide Bay	124	28	101	1	254
Department of Health	11	4	16	0	31
<b>Queensland Health (excl Queensland Ambulance Service)</b>	<b>4862</b>	<b>1461</b>	<b>3123</b>	<b>14</b>	<b>9460</b>

Source: SPR; Work Health & Safety (WHS) Dashboard

Table 3: Queensland Health, reported occupational violence incidents (by primary incident classification breakdown) 2017-18

<b>Hospital and Health Services and Department of Health</b>	<b>Physical aggression (actual)</b>	<b>Physical aggression (threatened)</b>	<b>Verbal aggression</b>	<b>Other</b>	<b>2017-18 Total</b>
Cairns and Hinterland	368	42	224	6	640
Central Queensland	191	10	138		339
Central West	6	1	25		32
Children's Health Queensland	87	11	33		131
Darling Downs	420	97	232		749
Gold Coast	391	117	169	1	678
Mackay	190	54	134	1	379
Metro North	688	61	301	1	1051
Metro South	790	145	363		1298
North West	25	16	54		95
South West	58	10	53		121
Sunshine Coast	310	30	189		529
Torres and Cape	52	19	53		124
Townsville	563	182	233		978
West Moreton	244	51	123		418
Wide Bay	211	41	124		376
Department of Health	10	5	20	0	35
<b>Queensland Health (excl Queensland Ambulance Service)</b>	<b>4 604</b>	<b>892</b>	<b>2 468</b>	<b>9</b>	<b>7 973</b>

Source: SPR; Work Health & Safety (WHS) Dashboard

Table 4: Queensland Ambulance Service (QAS), reported occupational violence incidents.

<b>Queensland Ambulance Service</b>	<b>Deliberate Physical Attack</b>	<b>Verbal Threat</b>	<b>Accidental Contact</b>	<b>Total</b>
<b>2017 - 18</b>	185	95	21	301
<b>2018 - 19</b>	236	120	28	384
<b>2019 - 20</b>	269	88	21	378

Source: QAS Safety Health Environment (SHE) system – as at 1 July 2020

**Answers to questions taken on notice at the hearing –  
10 December 2020**

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**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**QUESTION TAKEN ON NOTICE**

**No. 1**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

From the IT dashboard, it appears that the rollout of the ieMR stages 3 and 4 has blown out in the budget throughout this year. Can the director-general advise the initial rollout budget for stages 3 and 4 and what the current budget is for those stages?

**ANSWER:**

Actuals costs and budget costs are reported in the Queensland Government Digital Projects Dashboard.

I am advised for integrated electronic Medical Record (ieMR) Funding Package 3 and 4:

- Current spend is \$315.5 million (as at October 2020)
- Approved expenditure is \$326.6 million

Following the decision to focus on ieMR optimisation and benefits realisation for the remainder of 2019 and 2020, the remainder of Funding Package 3 and 4 was reprioritised.



**HEALTH AND ENVIRONMENT COMMITTEE  
2020 ESTIMATES**

**QUESTION TAKEN ON NOTICE**

**No. 2**

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THE HEALTH AND ENVIRONMENT COMMITTEE ASKED THE MINISTER FOR HEALTH AND AMBULANCE SERVICES (HON Y D'ATH)—

**QUESTION:**

How many invoices currently managed by the system have passed their due date—30 days, 60 days, 90 days?

**ANSWER:**

I am advised that the below is the breakdown of overdue invoices in the system for processing, as at 5pm, 8 December 2020:

	<b>Count</b>
1-30 days overdue	4,355
31-60 days overdue	1,606
Over 61 days overdue	3,028
<b>Grand Total</b>	<b>8,989</b>

For the purposes of this data 30 days has been set as the payment terms.

## **HEALTH AND ENVIRONMENT COMMITTEE**

### **Estimates Question taken on Notice at the Hearing**

**No. 1**

**Asked on Thursday, 10 December 2020**

**MR O'CONNOR** ASKED THE MINISTER FOR THE ENVIRONMENT AND THE GREAT BARRIER REEF AND MINISTER FOR SCIENCE AND YOUTH AFFAIRS (HON M SCANLON)—

#### **QUESTION:**

**Hansard Page Reference: Page 61**

How much carbon does Queensland emit, the most recent figure available, and how much has that changed in the past five years?

#### **ANSWER:**

I thank the Honourable Member for the question.

State and territory greenhouse gas data is drawn from the National Greenhouse Accounts prepared and published by the Australian Government Department of Industry, Science, Energy and Resources.

The most recent figure available is from 2018, when Queensland's greenhouse gas emissions were 171.7 million tonnes of carbon dioxide equivalent, which is 8 per cent below 2005 levels. As the Australian Government's data is only available until 2018, a comprehensive outline for the last five years is not yet available.

The 2018 emissions data do not yet reflect the impact of an increase in renewable energy generation, as most of the growth in large scale wind and solar capacity occurred from 2018 onwards.

## Supplementary material provided by the Ministers

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<b>1.</b>	14 December 2020 – Hon Yvette D'Ath, Minister for Health and Ambulance Services – Correcting responses to a pre-hearing question on notice
<b>2.</b>	18 December 2020 – Hon Meaghan Scanlon MP, Minister for the Environment and the Great Barrier Reef and Minister for Science and Youth Affairs – Clarifying comments provided in relation to evidence given at the public hearing for the consideration of the 2020-21 portfolio budget estimates held on 10 December 2020



Hon Yvette D'Ath MP  
Minister for Health and Ambulance Services  
Leader of the House

1 William Street Brisbane Qld 4000  
GPO Box 48 Brisbane  
Queensland 4001 Australia  
Telephone [REDACTED]

14 December 2020

Mr Aaron Harper MP  
Chair  
Health and Environment Committee  
Parliament House  
George Street  
BRISBANE QLD 4000

Email: [hec@parliament.qld.gov.au](mailto:hec@parliament.qld.gov.au)

Dear Mr Harper

I write in relation to the Estimates hearing of the health and ambulance services portfolio by the Health and Environment Committee on Thursday, 10 December 2020.

As you would recall, I corrected the record in relation to three of the 20 pre-hearing questions on notice during the hearing to ensure all Members were apprised of the updated information at the earliest opportunity. While the correction is in Hansard, I provide the below information to the Committee for publication with the pre-hearing Questions on Notice.

Pre-hearing question on notice no. 7

In relation to this question and the recovery of quarantine fees, the last paragraph says:  
'I am advised that, as at 4 December 2020, 12,027 invoices have been issued. Of these, 73% have been:

- a. paid,
- b. are not yet due,
- c. are subject to a payment plan or waiver,
- d. subject to an application for a waiver or payment plan'.

The figure should be **84 per cent**, not 73 per cent.

Pre-hearing question on notice no. 14

In relation to this question, I wish to advise that the 2020–21 Budget FTE figure for Cairns and Hinterland Hospital and Health Service should be **5,414**, not 5044.

The figure for Wide Bay Hospital and Health Service's 2019–20 Actual FTE should be **3,342**, not 3341.


These changes do not impact the Queensland Health total which remains the same, however, the 'Funded unallocated Hospital and Health Services FTE (ELIM)' 2020-21 Budget FTE figure now becomes **891**.

Pre-hearing question on notice no. 16

In relation to this question, I wish to advise that, on page 5 of my response, under the Sunshine Coast University Hospital and in the column entitled 'Scheduled date of completion', it should state **'Stages 1 and 2 completed. Stage 3 due for completion 2021'** and not 'Project completed.'

I hope this information clarifies the matters for the committee. Should you require any further information in relation to this matter, I have arranged for Ms Mary Weaver, Director, System Governance Strategy, Office of the Director-General and System Strategy Division, Department of Health on telephone [REDACTED] to be available to assist you.

Yours sincerely

  
**YVETTE D'ATH MP**  
**Minister for Health and Ambulance Services**  
**Leader of the House**



Minister for the Environment and the Great Barrier Reef and  
Minister for Science and Youth Affairs

Our Ref: CTS 26332/20

18/12/2020

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Mr Aaron Harper MP  
Chair  
Health and Environment Committee  
Parliament House  
George Street  
BRISBANE QLD 4000

Dear Mr Harper

*Aaron*

I write to you regarding the Estimates Hearing for the Environment and the Great Barrier Reef, Science and Youth Affairs portfolio on 10 December 2020, by the Health and Environment Committee. 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 57 of the Hansard Proof in relation to a question from **Mr ANDREW** regarding how much is being spent on reef health in terms of the crown of thorns starfish.

Attributable to myself (**MS SCANLON**):

*"I might ask the executive director of the Office of the Great Barrier Reef to talk in more detail about that. I should add that we have **spent \$500 million** on the reef. There has been significant investment to answer that part of your question."*

I misspoke during the hearing and the reference to "**spent \$500 million**" should be corrected to "**allocated over \$400 million**".

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

If you require any further information, please contact my Chief of Staff, Ms Hannah Jackson, on telephone [REDACTED] or by email at [REDACTED]

Yours sincerely

Meaghan Scanlon MP  
Minister for the Environment and the Great Barrier Reef  
Minister for Science and Youth Affairs

