

CORONAVIRUS — INTERSTATE BORDER RESTRICTIONS — EASING

Matter of Public Interest

THE SPEAKER (Mr P.B. Watson) informed the Assembly that he was in receipt within the prescribed time of a letter from the Leader of the Nationals WA seeking to debate a matter of public interest.

[In compliance with standing orders, at least five members rose in their places.]

MS M.J. DAVIES (Central Wheatbelt — Leader of the Nationals WA) [2.49 pm]: I move —

That this house calls on the government to assure Western Australians that the state has a robust health preparedness strategy in place in advance of the relaxation of state borders, including plans and resources to manage outbreaks of COVID-19 in regional Western Australia.

Several members interjected.

The SPEAKER: Members!

MS M.J. DAVIES: During question time today, we heard from both the Premier and the Minister for Health about how the state's border will be shifted from what is defined as a hard border, to a controlled border. This will allow people from the low-risk states of Tasmania, Queensland, South Australia, the Australian Capital Territory and the Northern Territory to enter Western Australia, subject to a temperature and health check, from 14 November. There has been a definite shift in support for changing the hard border to a controlled border, but it is also fair to say that the concern —

Several members interjected.

The SPEAKER: Members! Can we just have a bit of quiet?

MS M.J. DAVIES: I am good.

The SPEAKER: Not from you, member.

MS M.J. DAVIES: Can I carry on? I am okay.

The SPEAKER: No, you are okay.

MS M.J. DAVIES: Tone it down, Mr Speaker. It is fair to say that concern about our preparedness for a controlled border still exists in the community. There is some anxiety about the change that is coming. Although some people anticipate the upside to that, it also comes with an increased risk. This is particularly true in regional Western Australia, where isolation has been a blessing in terms of that area's low population and a distance from concentrations of large numbers of people and gathering places, but that isolation and the ability to respond to an emergency also comes with some challenges. Today we are providing the minister with an opportunity to outline —

Several members interjected.

MS M.J. DAVIES: Now I am actually looking for your protection, Mr Speaker. There seems to be a powwow going on in the back corner.

The SPEAKER: Members on the back row! Go outside, please. I want to hear this.

MS M.J. DAVIES: This is a very important issue. We want to provide some assurance to the community about these border changes.

Wowee! It is all go today. Go on through, team!

This is the minister's opportunity to reassure the community that the government has a comprehensive plan. The plan has to withstand a potential COVID-19 outbreak in the biggest and most sparsely populated state in Australia. We have raised this debate due to the growing number of issues compounding in and around our health system that are of significant concern. The system has not yet been tested by a COVID outbreak. It is already under pressure outside of that scenario. An outbreak may be the worst-case scenario, but we assume that the minister is already planning how to manage that. The compounding issue has been made worse by things such as the junior doctor shortage in our tertiary hospitals and the high levels of dissatisfaction with the service provided by those hospitals. In August, the Australian Medical Association (WA) reported that insufficient personal protective equipment was available in our hospitals. Significant ambulance ramping at our Perth hospitals has a flow-on impact from a regional perspective, most definitely in terms of the management of hospital services. The Royal Flying Doctor Service transfer rates are at a record level. I will go through this list and then I will come back and talk about some of these issues. That transfer rate is not likely to go down until we see a relaxation of our international borders. One can assume that those levels will increase at some point.

In September, the state's Auditor General gave a damning assessment of the capacity of the state's hospital system to deal with elderly patients with COVID-19 in the event of an influx of COVID into our residential aged-care system.

Ms Mia Davies; Mr Terry Redman; Mr Zak Kirkup; Mr Shane Love; Mr Mark McGowan; Mr David Templeman; Mr Vincent Catania; Mr Roger Cook

Several members interjected.

The SPEAKER: Members!

Ms M.J. DAVIES: We have doctor shortages across regional Western Australia. We are short by 128 doctors, as the member for Roe raised today. The minister will say that this is a federal issue, but, like it or not, it impacts our ability to run our state hospital systems in regional WA. The minister cannot handball that issue to the feds and say, “That’s not our responsibility.” We are short of 128 doctors, which means that we lack primary healthcare opportunities and robustness in our regional health system—thank you, minister.

Regional Western Australia has a shortage of aged-care workers providing residential and at-home care services. This is an acute problem across Australia, but in regional Western Australia in particular. We have learnt that new contact-tracing processes will not be in place until January, yet, in two weeks’ time, our borders are going to change. When we take all these things together, members can understand why concerns have been raised by the opposition and also by peak bodies like the AMA (WA) and others involved intimately in the health system. We have a low-testing regime compared with other states, and we also have a looming mental health crisis that is already impacting our emergency departments and hospitals. That, along with the fact that we are operating at a very stretched capacity in our hospitals, is why our hospitals are under the pump at the moment, and we do not even have a COVID outbreak in Western Australia. Our health workforce is being stretched beyond its capacity.

We have raised this issue today because these are all critical issues for our health services during a period in which COVID is not present in our community. We understand that there is some joy for people with the anticipation of travel beyond our state borders, but the border change also comes with a level of trepidation, and nowhere more so than in regional WA, where people are already isolated from tertiary hospitals. Anybody who gets to the point of requiring specialist treatment is a long way away from a tertiary hospital. If they live in the Kimberley, Albany, the goldfields or even in a small community in the wheatbelt in my electorate, there are limited opportunities to receive care, as I am sure the minister is aware. People who suffer with COVID can deteriorate rapidly. If they live in regional Western Australia, they are a long way away from a tertiary hospital.

I want to talk about some of those issues that I raised just then. I think that there were 10 issues, and taken together, we really need to be reassured today, ahead of this change to our border, that we have a very robust plan. The doctor shortages and aged-care issue bother us the most. We have been on record again and again in this place, raising our concerns about the state’s doctor shortages and the impact that this has on the state hospital system. We also have a shortage across our metropolitan tertiary hospitals, which compounds that impact. When we already have a critical shortage, we can assume that if we have an outbreak, it will be a serious challenge for us to manage.

I turn now to aged care. Today we asked the minister a question about the flying squads that he referred to back in September in an interview with Gareth Parker on 6PR—I am not sure who he was talking to. He said that he would be deploying those flying squads out to residential aged-care facilities. This was part of the minister’s assurance that we would be prepared because it had already been an issue in other states that had had major outbreaks. The minister said that our residential aged-care facilities, no matter where they are in the state, will have the benefit of this training around a structure that will allow them to respond appropriately to an outbreak. I accept that perhaps the minister may not have that information at his fingertips, but I would very much like to know more about this as consequence of the minister providing information back to this house at a future date.

The majority of our concerns come from the very vulnerable and older members of our community. Nobody wants to see what happened in Victoria and New South Wales happen here in Western Australia. I do not fully understand how these flying squads are comprised, what their schedule is or whether there is a schedule. I do not know whether they have been sent to regional Western Australia yet or whether it is anticipated that they will go to regional Western Australia. How will that support be provided to our communities? Again, I would have thought that there is a limited opportunity to shift those people from a facility in a small community to a small regional hospital; and, if that is the case, I hope that plans are in place to manage that situation and isolate it effectively.

What then happens when we need to rely on our emergency services such as St John Ambulance, which is also under pressure, to bring those people to the Perth city centre and our tertiary hospitals? It is a real and serious concern. Our volunteers who work for St John Ambulance are already under pressure. We then have the ramping at our hospitals. If a person lives in the immediate perimeter of the city or those peri-urban areas as the constituents of the members for Moore, Roe, Central Wheatbelt do, that impacts their ambulance service as well. It is very, very concerning.

The Royal Flying Doctor Service transfers are self-explanatory. I heard an RFDS spokesperson say that it was not beyond its capability to manage it but there has certainly been a significant increase in the number of patients, with nearly 350 more patients over the last three months compared with the same period in 2019. Presumably, that is because far more people are travelling around our state, and that will only continue into the future. I hope that there is a very strong and robust plan for the RFDS and St John Ambulance. My understanding from questions that have

been asked by Hon Martin Aldridge in the other place along with questions asked in this house is that the weakest link when we were at the height of the pandemic was our emergency services and the ability to coordinate between our hospitals. That is not saying that they are not doing their jobs properly; rather, it is saying that we rely on volunteers, particularly in regional Western Australia, and that is of serious concern.

I will let somebody else talk about contact tracing, which, we understand, has been very low. Concerns have been raised all day about contact tracing and its effectiveness. Testing rates have been very low. I am not convinced—I am happy to be convinced because I want our state to transition to the next stage—that we have a robust plan and that everything has been done in advance of making the decision to transition to the next stage on 14 November. I have outlined a number of serious concerns in a short period, and I am sure that those concerns are on the minds of those in the health and aged care systems. We want to know from a regional perspective that we have not been left out of the loop because it could all go very badly very quickly if there are outbreaks across the state.

MR D.T. REDMAN (Warren–Blackwood) [3.01 pm]: It is probably stating the obvious but no doubt we are in a very unique situation with COVID-19. The hard border strategy in Western Australia, being largely a biological island, has been very effective in maintaining a relatively COVID-free environment. The government's decisions rightly have been very effective to this point. Now a decision has been made to move to an open or controlled border and that changes the game somewhat. I must say that I was surprised—as were a good few people in my electorate—by the government's decision but, nevertheless, it has been made. To express the view of those in my electorate and where their views sit, they probably want to keep the hard border in place. There have been only a small number of examples in which the government's capacity to respond to COVID-19 internally has been tested. During the very early stage, it was the cruise ships that came to the state. The government took a very “go hard, go early” response. That was the first real test, but that environment was pretty contained and therefore somewhat defined. Other examples include the Port Hedland and Kwinana port terminals, overseas travellers coming in on a regular basis to Perth Airport terminals and the nurses who went to Victoria and who had to be repatriated to Western Australia.

Essentially, Western Australia has had hotspots that have been managed and contained, and that has been relatively easy compared with a broader community-spread challenge. The test now is our capability in responding to a community COVID issue should one arise in Western Australia that does not have the level of containment that I talked about. What is our capacity in contact tracing? What is our capacity in measuring and responding to an infection that goes into our aged-care facilities? There is also the issue of someone breaking ranks from quarantine and how well we are resourced to manage that. What I do not want to hear from the government—I am certain that the community does not want to hear this from the government—is that its only tool in the toolbox is to close the border again. The community expectation is that mechanisms and process are in place to respond to an internal COVID outbreak in WA. That is the narrative and information that we want to hear from the government, and today is the first chance to put that on the table.

I will give a couple of examples from my electorate that give rise to concerns about where we are at right now. Sadly, one constituent had to go to his mother's funeral in Victoria before eventually returning to Western Australia. I will read from an email he sent me. According to my notes, he wrote —

I just returned from Victoria on Monday from Mum's funeral and thought you might be interested in the following:

1. I have downloaded G2G Now App for tracking my quarantine period. It includes submitting a daily health check. Apparently G2G Now falls under WA Police. However yesterday I got a call from WA Health who were asking questions such as did I have a COVID test (yes and would've thought that would be on *their* system including the result was negative!!), what seat was I allocated on the flight (again I would've thought airlines would be providing that detail by now?) and asking for permission to send me a daily text to check if I had COVID symptoms. I told them I was doing it via a feature on the G2G Now App. They said they weren't sure if anyone in Police was actually monitoring that so were doing it themselves via text messages! So now I do it twice every day as I don't want a nasty call from the Police!

That is a signal that perhaps our processes are not that robust. By the way, this person is still in quarantine so this was relatively recent. The email continues by stating that his wife —

contacted COVID hotline to ask if she could come to Perth to drive me home

It is obviously a fairly big trip to travel to his home by car after the flight from Victoria. The email continues —

She as told to send an email to WA Police COVID team and we fully expected her to be directed to quarantine with me which is not issue as we do it as a precaution anyway. Yep no problem

as long as I wear a mask in the car. 5 hours in a confined space ... I don't think a mask would cut it ... Then so long as I stay in a separate bedroom with separate bathroom etc etc then —

He writes his wife's name —

doesn't have to quarantine! Victoria outbreak shows a lot of the community transmission occurred in the home. Infected droplets on surfaces and hanging in the air—impossible to keep on top off. Even hospitals who practise hygiene control 24/7 can't avoid it. I don't want the police officer being reprimanded but clearly Health and Police not aligned.

This person wants the border opened, but these signals raise concern that perhaps we are not quite ready for that to happen. He also talked about having been in Victoria and the notion of putting the QR code system in place as a strategy of contact tracing. I quote from the latest health advice, which was tabled yesterday, and note that —

A review of the COVID Safe plans and contact registers in other jurisdictions and within WA has highlighted the need to further enhance these requirements, including better mechanisms for contact registers, including the consideration of QR registration systems and the extension of the requirement of COVID Safe plans to additional businesses.

Given that we have been in a COVID situation for six months, I would have thought that such planning was already in place. It is concerning that the WA Chief Health Officer says that this needs to be considered. Why at the point of opening the border are we at the point of considering what seems to be a pretty good system that is operating in Victoria? The constituent who wrote the email also referred to spot lockdowns if there is a COVID outbreak. He wrote —

12. Would you require all people in the household to quarantine until tested if a family member test positive?

He also referred to rapid testing in vulnerable workplaces. A lot of signals from one constituent suggests that things are not as well as they could be in our capacity to respond.

I chose to bring the next example to the attention of the Minister for Health's office. Someone has already mentioned the *Al Messilah* and how one person went off the ship and travelled to Busselton while another jumped on a plane and flew to Sydney. I received a call from a constituent who said that a friend of theirs, with someone else, had the responsibility to go on board that ship. I think the person was a vet and they had to carry out some sort of activity. Of course, they were all in full protective personal equipment. One of the people who went on board took off their PPE and had lunch with those on board, which was the wrong thing to do. When the person came off the ship, his wife—it so happened that she was a healthcare worker—gave him a dressing down because it was the wrong thing to do. They phoned the Department of Health and were advised that it was okay and that they could carry on with their business. I am not sure whether it was known at that point that there were COVID-positive people on board but, nevertheless, they chose to self-isolate, particularly because the wife works in an aged-care centre, as a cautious strategy to make sure that they would not pass on the bug if it happened to be with them. I passed on that information to the Minister for Health's office, as I rightly should have done. I would have liked a more comprehensive response because the only response I got was that the man had been contacted. It would have given me some comfort if the response had gone a little further than that. Those two examples from people in my electorate show that the system is not at a robust enough level, and certainly we are not confident that it is at a robust enough level, to deal with a COVID outbreak in Western Australia, which, as the Premier acknowledged some time ago, is what we will get at some point.

We in the National Party are very concerned about regional Western Australia. Whilst regional Western Australia is a fairly good area to keep relatively COVID free, it is also a difficult area in which to respond should an outbreak occur. We are concerned about the response capacity. We want to be confident that there are resources on the table and processes in place to deal with an outbreak. We know that there are caches of personal protective equipment such as masks that can be moved around, but, again, there has been no feedback to the community, and certainly not to regional communities, that a strategic, robust process is in place to manage what will inevitably be an issue.

I come back to a point I made halfway through my speech: I think the community has an expectation that the only trick the government has in the book is a lockdown. That is not good enough. They want to know that there are processes beyond that. They do not want to go in and out of lockdown—they do not want to go there. That is the Victorian example. I think the government needs to give confidence to people—here is a good place to start—that it has robust processes and planning in place to manage the inevitable response to COVID-19 that will be needed in Western Australia.

MR Z.R.F. KIRKUP (Dawesville) [3.10 pm]: I stand on behalf of the Liberal Party to join with the Nationals WA on the motion today. We are simply seeking from the government an understanding of how prepared it is to respond to any outbreak of COVID-19 that might occur in the future. Every time we have asked questions of the Minister for Health in question time or during estimates, all we have been given is spin and no substance. The minister is

very quick to use the glib line that the government is putting patients first, but he does very little work to ensure that that will be the case if there is a second outbreak of COVID-19 in Western Australia. As members have already alluded to, all we want is to be assured that our state is prepared. Undoubtedly, this government will turn around and tell us to look at its record, and that we can trust it going forward. The problem is that we cannot trust the government going forward, because time and again we have seen inherent issues with the way in which this government will deal with a second outbreak should one occur.

The member for Warren–Blackwood was right; the Chief Health Officer has indicated that we should implement a QR code system in Western Australia to enable citizens to tag in and out of venues as part of an ongoing register. When the Premier was asked about that earlier this week, he said it was under consultation with industry. We should not be consulting with industry; that system should be implemented before we move to a different arrangement with the border.

We know that inconsistent testing regimes are in place. If someone enters Western Australia at a land border, no COVID-19 test referral is possible because this government still has not put those mechanisms in place, yet if a person arrives at the airport, they can be tested for COVID-19. That is two very different ways in which someone might be tested upon entry into Western Australia. We still have not got that right.

In May, the Liberal Party wrote to the Minister for Health to suggest that the government take up the testing of wastewater at sentinel sites across the state. The government still has not done that, albeit that every other state and territory in the country has managed to get to that point. In New South Wales alone, 50 or 60 sites were tested last week for COVID-19. That is a very important sentinel measure that could be undertaken. This government still has not been able to get sewage testing underway in Western Australia.

We still have not seen an education campaign to encourage people in Western Australia to understand their hand hygiene and social distancing obligations. The member for Darling Range alluded to the races yesterday. Clearly, people have not got the message that they must still practice hand hygiene and social distancing. There might be some need for people to take up masks if there is an outbreak.

The government has also not addressed a very clear issue with doctors. Recent reports suggest that 40 per cent of doctors across our major hospitals are facing burnout.

There are inconsistencies with contact tracing, as the member for Warren–Blackwood spoke about. There has been a failure to test our wastewater system. There is no education campaign. There is no QR code system in place. We have inconsistent border arrangements for the testing for COVID-19. None of this has been done. We will very shortly remove the so-called hard border into Western Australia. Anyone would think that a government that was prepared would have these mechanisms in place. None of us wants to hear what the government thinks it has done in the past; we want to understand the plan to address these severe inadequacies. It is interesting that the government has failed to implement any of these measures. Indeed, it has not followed the advice of the Chief Health Officer on those arrangements. There is also a record level of ambulance ramping, which we know is a severe problem. In October 2019, when ambulance ramping was at 2 128 hours, there were only 56 000 admissions to our hospitals. There have been 3 000 fewer admissions to our hospitals in October 2020, but there have been 955 more hours of ambulance ramping in Western Australia than at the same time last year. Our hospital system is under pressure. This government has failed to undertake any preparation to ensure that we are well-prepared for a second outbreak.

What has this government done? What was its priority? Its priority was to ensure that community sentiment research and polling was undertaken by the Department of the Premier and Cabinet. That is something that it managed to achieve during the COVID-19 pandemic. That is something the government paid a high level of attention to. We wanted to know what was going on with that community research and asked the Premier to table it, but he refused. We are very interested to understand from this government what its plans are to deal with a COVID-19 epidemic. We do not want its response to be informed, once again, only by politics; we want its response to be informed by the health priority to keep all Western Australians safe and secure.

MR R.S. LOVE (Moore — Deputy Leader of the Nationals WA) [3.16 pm]: I rise to call on the Premier and the Minister for Health to provide assurance to Western Australians that regional Western Australians especially will be safe once the changes to the border arrangements occur. The member for Warren–Blackwood spoke about the fact that his communities felt somewhat assured by the hard border closures. At Easter, I remember that our communities called for a lockdown to stop people coming into their areas, because they felt that their health systems were unprepared to meet the needs that might occur should there be an outbreak in their area. They knew that regional health services were inadequate. All Nationals WA members are deeply concerned about what would happen in our individual regions and districts, because we know very well that the health services and ambulance drivers are stretched. We know that the Royal Flying Doctor Service is already stretched in servicing the people who are

wandering out yonder, let alone any people who might wander through with the COVID disease. Many regional areas are in a precarious situation.

The member for Central Wheatbelt spoke about aged care. She asked a very good question today. The answer she got from the Minister for Health was not reassuring. She did not get a clear indication that plans are in place to deal with any outbreaks in aged-care facilities in regional areas. Regional areas are not serviced entirely by WA Country Health Service facilities; regional centres have other facilities as well. We need to have comprehensive plans in place to ensure that those communities are kept safe.

We want to understand what is happening with contact tracing. From what we have been told, we understand that contract tracing probably will not be in place until January. This is the opportunity for the government to lay out exactly what is going to happen to ensure that if there is an outbreak, we can do a better job than Victoria did in those early stages, when it completely dropped the ball and its contact tracing regime was inadequate. We want to be assured that this state is well prepared. We want to understand that testing for COVID-19 is being done at an adequate rate. We understand from the Australian Medical Association that Western Australia is the most complacent state in Australia at the moment and that testing is at the lowest level of any state. This needs to be improved. We have legitimate concerns about the safety of our residents.

We ask that the Premier and the government make good on what they have claimed is their priority—that is, the safeguarding of Western Australians during this health crisis. We want the government to demonstrate what it is doing to put in place proper planning in each of our districts to ensure that people will be kept safe if there is an outbreak. What communication system will be used? We know that during the first small wave of COVID-19 in Western Australia, communities were not informed when there was an outbreak in their area. There was some sort of shame or negative consequences attached to that. People need to be informed if there is an outbreak. They need to be able to take the necessary precautions. We need to get people to take social distancing and hygiene measures seriously. People need to be informed immediately if COVID-19 is in their area. It should not be the case that some sort of alert is given of a case being somewhere in the midwest or the wheatbelt and to not name the town. That is ridiculous. We need clear communication to our people.

Members of Parliament also need to be assured that proper planning is in place to ensure that our health services are not overwhelmed immediately upon there being an outbreak of COVID—that our ambulance services will cope, that the Royal Flying Doctor Service will cope, that the very limited health centres and services will cope, that our already overworked GPs will be able to coordinate properly to ensure that their communities are kept safe, and that our aged people are safe. Many of us represent communities with significant aged populations. My community has one of the oldest demographics in the state and it is especially vulnerable given the paucity of any sort of tertiary services located in the districts within the region. We are especially vulnerable in this situation and my people are calling on the government to lay out its plans.

MR M. MCGOWAN (Rockingham — Premier) [3.20 pm]: Firstly, can I say that Western Australia has done extraordinarily well over the course of the last eight months. Since COVID really became prominent back in February, this state has managed it better than, or as well as, anywhere else in the world. That is a credit to the people of the state who have done the right thing and listened to the advice and followed the rules as well as, or better than, anyone anywhere else in the country or, indeed, the world, and certainly as well as anyone in any democracy in the world. I would like to pass on my thanks to everyone in Western Australia who has listened to the advice and done the right thing. That has meant that, as a community, we have had the best economic outcomes of anywhere in the country. We are the only state that did not go into recession. We now have the equal lowest unemployment rate in the nation, the highest rates of business and consumer confidence, and the best land sales, housing construction, retail sales and hospitality performance of anywhere in the country. Because of the actions of this government, we were able to keep our major exporting industries open, against calls for them to close from some pretty significant voices in the east.

Western Australia has done extraordinarily well. As a consequence of that, and the fact that other states have done well in addition to Western Australia, we have been able to make some modest changes to our border arrangements. We have been very keen to ensure that we kept our hard border in place as long as it was necessary to protect the health of Western Australians. We have made some changes to go to a controlled border, and that means that if anyone from Victoria or New South Wales comes to Western Australia, they will be required to quarantine, as they do now, and will be required to undertake testing for COVID. That is the requirement for people from those states that have had some community infection. I note that Victoria has now gone five days without a single case under its testing regime. New South Wales is not doing as well as Victoria. New South Wales seems to have a different attitude from Victoria; it seems to think that it is better to have the virus than to not have the virus, whereas our view is that it is best not to have the virus. Therefore, we will continue to have very strong measures in place for people from those states that have had recent infection, particularly New South Wales and Victoria. People from

the other states will still be required to submit forms if they wish to come to Western Australia, verifying certain things to protect the health of Western Australians, combined with some testing facilities that will be available at the airport. They are the arrangements that we are putting in place, but I just want to be absolutely clear: should we need to put in place tougher measures, such as a hard border or a harder border than the current arrangement, we are prepared to do so. That is why it is imperative that we are successful in the High Court against Mr Palmer's actions to try to bring down our border.

The biggest threat to Western Australia now is our international exposure. The virus is now running wild around the world, although it is not running wild in Australia. We are seeing extraordinary scenes in some countries, particularly Great Britain, the United States, France and parts of Asia, South America and Africa. This is a worrying trend. On a weekly basis, around 1 000 Australians are returning home. They all go into hotel quarantine or, depending upon their circumstances, other forms of quarantine. We have to make sure that they are kept secure and are properly tested when they return to Australia. In addition, we have exposure to maritime and flight crews who arrive here. All of them are required to quarantine in secure facilities should they exit their ship or aircraft. Very strict measures are in place to protect ourselves, but there is still a risk. We still need ships to come to our ports. If ships do not come to our ports, we do not have income and we cannot fund our hospitals. If flight crews do not come in, we cannot allow Australians to return home from overseas. These are still risks to the state of Western Australia. If a case does come in, we have put in place a range of measures to protect our state. Our first obligation and aim is to prevent the virus returning, but if the virus does return to Western Australia due to some issue arising, we have to ensure that measures are in place to deal with it, as has happened more recently in Victoria and New South Wales.

The Auditor General of Western Australia has looked at this and she has independently verified what Western Australia has in place. She handed down a report last week or the week before, and I will quote the Auditor General's report tabled in Parliament. It states —

WA Health has stated that it is well prepared for a potential outbreak of COVID-19. In compiling this transparency report, nothing has come to our attention to indicate that, in all material respects, the following status updates provided to us from WA Health as to COVID-19 response preparedness are incorrect.

WA Health has:

- developed surge plans for key areas, including ventilated beds and pathology services
- procured additional ventilators
- worked proactively with a range of sectors, including aged care to develop and test outbreak plans, and continues to review these
- identified essential supplies, including PPE, and is working to acquire more than 40 weeks of stock
- established a recruitment pool of skilled staff across a range of critical areas
- put testing and contact tracing systems in place.

That was from the Auditor General, having analysed the systems that we have in place in Western Australia. That is the most recent independent analysis of what we have available to us should any cases come back to our state.

I might add that when there was community spread of the virus back in March and April this year, the measures we put in place dealt with it. We put in place contact testing. We put in place closure measures. We ensured that we followed every lead to prevent the spread of the virus throughout our state, in both regional and metropolitan WA. It was a very frightening period, but the measures we put in place worked. We did not just crush the curve; we eliminated the curve in Western Australia. We killed the curve. For the last seven months, we have not had a community case because of the actions that were taken. That is the experience here. That was the Auditor General's most recent analysis of what we have put in place, which I quoted to members and was tabled in Parliament and is available to all members to read.

On top of that, we had a further analysis led by the president of the Public Health Association of Australia and a former Chief Health Officer of WA, Professor Tarun Weeramanthri—someone the opposition would be familiar with. He is a very cautious medical professional. When asked about Western Australia's preparedness on ABC radio, he said —

... we've been looking at some of their outbreak planning which has been tested recently with commercial vessels ... and I think WA's done a terrific job. So not only is it planning but it's also been, you know, tested and ... the plans have held up, so all credit to WA.

My reflection is that we've had good leadership, you know, we've had clear command structures and that means ... there's an accountability ...

Professor Weeramanthri, ex-Chief Health Officer of Western Australia, has analysed our systems and that is what he had to say. The Auditor General has analysed our systems. I quoted to members, if they listened, what she had to say. There have been numerous briefings by Dr Robertson and Dr Armstrong, who have analysed these matters and gone over the sorts of measures we have ready and prepared. The opposition has been offered, and had, eight briefings on these matters. It has been advised on these matters before. We have outbreak plans that are held by the Department of Health for high-risk areas such as aged care, remote Aboriginal communities, prisons, hospitals, school and childcare services, mining and offshore facilities, commercial vessels, and areas where people live communally. These are the sorts of things we currently have in place. All these things are in place and we have given the opposition, the Nationals WA and the Greens eight briefings on these matters.

Mr R.S. Love interjected.

Mr M. McGOWAN: I am sorry? What?

Mr R.S. Love: When did these briefings occur?

Mr M. McGOWAN: They occurred between 10 March and 5 October this year with the member for Dawesville, the Leader of the Opposition, Hon Alison Xamon, and Hon Martin Aldridge.

Those briefings all took place with all the major opposition parties. They all happened over that time. It is the case that we live in a world where, outside of Australia, COVID is present. We have to continually be vigilant and we will continue to be vigilant. I am very cautious about this. As I have said repeatedly, I do not want to see Western Australians die. I do not want to see what happened in other countries or other states happen here. We have been very cautious and careful in the measures that we put in place to prevent the virus from coming in. We have copped enormous criticism from the Liberal Party and the National Party due to our cautiousness. For goodness sake, the Liberal Party joined Clive Palmer in trying to pull down the border!

Several members interjected.

Mr M. McGOWAN: They did that!

Several members interjected.

The SPEAKER: Members!

Mr M. McGOWAN: Christian Porter's name was on the affidavit. His name was on the application!

Mr V.A. Catania interjected.

The SPEAKER: Member for North West Central, I call you to order for the second time.

Mr M. McGOWAN: We have had to fight all that over the course of this year. We have had to fight the Liberal Party and all its efforts to tear down the borders and wreck the measures that we have put in place.

Mr V.A. Catania interjected.

The SPEAKER: Member for North West Central, I call you to order for the third time.

Mr M. McGOWAN: We have had to fight that the whole way along over the course of this year. I might add that it has been a tough year, with lots of hard and difficult decisions. For many months every morning for an hour or an hour and a half, the Minister for Health and I met with our Commissioner of Police and various health officials and made important decisions. We had to deal with numerous issues and make what in ordinary circumstances would have been considered outrageous decisions. We did it to protect the health and welfare of Western Australians. All we copped the whole way along was criticism from members opposite. That is all we copped the whole way along. That is all members opposite do. They come in here and undermine and criticise. That is all they do. They pick one side one day and another side another day.

Mr D.T. Redman interjected.

The SPEAKER: Member!

Mr M. McGOWAN: That is exactly what the opposition did on these matters. What we have achieved in Western Australia has been outstanding health and economic outcomes. They have been absolutely outstanding health and economic outcomes.

Yesterday, I was able to go to Ascot Racecourse at the invitation of Perth Racing. People were there enjoying themselves and spending money, and all sorts of people were working there. We have been able to get jobs back that other states cannot even dream of getting. What did I get today? I got criticised for it by the Liberal Party. Its members came in here and criticised us for having functions, events and hospitality operating in Western Australia that they do not have in other states because we are COVID free. They came in here and criticised me.

A member interjected.

Ms Mia Davies; Mr Terry Redman; Mr Zak Kirkup; Mr Shane Love; Mr Mark McGowan; Mr David Templeman; Mr Vincent Catania; Mr Roger Cook

Mr M. McGOWAN: If the member for Vasse did not listen to the question, maybe she needs to clean her ears out.

A member interjected.

The SPEAKER: Member for Vasse!

Mr M. McGOWAN: That is exactly what occurred.

A member interjected.

The SPEAKER: Member for Vasse, go back out of the chamber!

Mr M. McGOWAN: The behaviour of the Liberal Party and the opposition over the course of this year has, frankly, been outrageous. If it was not hard enough to deal with all these issues, we had to deal with the nitpicking, undermining and constant tweeting, radio interviews and TV interviews saying that everything we were doing was wrong. That is exactly what happened.

The Liberal Party backed Clive Palmer and I have the quotations here. That will be to the eternal shame of the Liberal Party in this state. That man is a menace to this state. I wish I could use stronger language. He is a menace to the state and to this country. His behaviour is outrageous. If he had had his way, COVID would have come here and people would potentially have died. That is what would have happened. The fact that the Liberal Party backed him is a disgrace. If they want, I can read the quotes by various members opposite supporting him. He thinks that it is a big game. Mr Palmer, sitting over there in Queensland, thinks that it is a big game. He thinks: "I know what I'll do. I'll cause some trouble for someone else because I get enjoyment out of legal action." He gets enjoyment out of spending the money that Western Australia provides to him to try to damage the health and wealth of the people of the state. He does not care one iota about this state—not one iota! It never enters his head; all he looks for is personal advantage, aggrandisement and attention. That is all Clive Palmer wants. When he was a federal member of Parliament, he was an absolute embarrassment. He promises things to his workforce and does not deliver. He promised support for Aboriginal people in this state and has never delivered.

Ms M.J. Davies interjected.

The SPEAKER: Leader of the National Party! You had no interjections when you spoke.

Mr M. McGOWAN: He undermined the business that provides him the royalties and our international relationships. It is disgusting.

Point of Order

Mr D.T. REDMAN: The point that the Leader of the National Party is trying to make is that the Premier is way off topic. I ask whether you could bring him back to the topic, please.

Mr D.A. TEMPLEMAN: Point of order, Mr Speaker!

The SPEAKER: Please wait. Let me see what the motion says. It is about the borders, and Clive Palmer wants to bring the borders down, so I think this is okay. That is unbiased.

Debate Resumed

Mr M. McGOWAN: Clive Palmer's behaviour in taking the state to court has been disgraceful. Also, he is trying to bankrupt us.

Ms M.J. Davies interjected.

Mr M. McGOWAN: Now the Leader of the National Party is undermining the Speaker's ruling.

Ms M.J. Davies interjected.

The SPEAKER: Leader of the National Party!

Mr M. McGOWAN: I am making a speech, like the National Party members did.

The SPEAKER: Members, when people spoke on this side of the house, no-one interjected. I expect the same on this side.

Mr M. McGOWAN: Mr Palmer is such a narcissist. He does not realise that people in this state have worked him out. They have worked him out here and they have worked him out in Queensland. They have worked him out all over the country. My very strong advice to Mr Palmer is: Do not come to Western Australia. You may find that it is a very unpleasant experience for you because people here know what you are about. You are a selfish person who does not care about the health or the wealth of this state. All you want to do is take, take, take. Do not come here, Mr Palmer, because people here do not want you.

Amendment to Motion

Extract from Hansard

[ASSEMBLY — Wednesday, 4 November 2020]

p7381b-7392a

Ms Mia Davies; Mr Terry Redman; Mr Zak Kirkup; Mr Shane Love; Mr Mark McGowan; Mr David Templeman; Mr Vincent Catania; Mr Roger Cook

Mr M. McGOWAN: Mr Speaker, I move —

That all words after “house” be deleted and the following words be substituted —

acknowledges the hard work undertaken by all Western Australians, including our dedicated public servants, to stop the spread of COVID-19 —

Mr D.T. Redman interjected.

The SPEAKER: Member for Warren–Blackwood

Mr M. McGOWAN: I did not interject on the member for member for Warren–Blackwood. I could have, because his speech was ridiculous. I move —

That all words after “house” be deleted and the following words be substituted —

acknowledges the hard work undertaken by all Western Australians, including our dedicated public servants, to stop the spread of COVID-19 and ensure the state is well prepared to respond to any potential outbreaks, noting this would not have been possible had the WA Liberal Party been successful in bringing down the hard border.

Mr Z.R.F. Kirkup interjected.

The SPEAKER: Member for Dawesville, I call you to order for the second time.

Point of Order

Mr R.S. LOVE: Mr Speaker, I seek your instruction or ruling on this to ensure that this amendment is a suitable amendment to this motion. It seems to be completely at odds to the motion.

The SPEAKER: Most times, when a motion like that is put to the government, it will change it around. If the member looks back, he will see that it has been done over time on both sides of the house. I will get a ruling from the Clerk.

That is okay. You can respond in an alternative way to what the motion states. It is okay; it has been passed.

Mr V.A. CATANIA: I have another point of order. Can you please explain what you said about amending it again?

Mr D.A. Templeman: He has already ruled that the motion is appropriate.

Mr V.A. CATANIA: Yes, but he just said —

The SPEAKER: Excuse me; can you sit down for a minute.

Only the government has time now to debate; opposition time has been used up.

Mr Z.R.F. KIRKUP: I have a point of order. I understand that the original intent of the motion was about preparedness. The motion moved by the Premier inserts a reference to the WA Liberal Party.

The SPEAKER: I have given a ruling on this.

Mr Z.R.F. KIRKUP: I am seeking some clarity, Mr Speaker. I understand that usually amendments have to reflect the original motion that was moved.

Mr B.S. Wyatt: A ruling has been given; move to dissent.

Mr Z.R.F. KIRKUP: I am seeking clarification.

The SPEAKER: The relaxation of state borders —

Mr W.R. Marmion: It refers to the WA Liberal Party.

The SPEAKER: It does not matter. This is politics; this is Parliament. The Clerk and I have given a ruling; accept it.

Debate Resumed

MR R.H. COOK (Kwinana — Minister for Health) [3.41 pm]: I rise to support the amendment. It has not only improved the motion, it has added to it and brought an element of clarity to the discussion today. The changes that we have made to move from a hard border to a controlled border are modest. They are cautious and are based on the public health advice. People need to bear in mind that when anyone from outside the state comes to Western Australia, they will be subject to a health check and will have to make a declaration. If they are from Victoria or New South Wales, they will be subject to home quarantine and testing. Not one person who comes to Western Australia will be able to go to our remote communities. All these measures remain in place. It seems to be forgotten by the member for Central Wheatbelt that vast areas of our state remain protected because we remain vigilant and on guard to ensure that Western Australians, who have now had over 200 days of no new community-based cases, deserve to continue to feel safe.

Ms Mia Davies; Mr Terry Redman; Mr Zak Kirkup; Mr Shane Love; Mr Mark McGowan; Mr David Templeman; Mr Vincent Catania; Mr Roger Cook

Mr F.M. Logan: And there is a state of emergency in place, which they wanted to reduce to three months.

The SPEAKER: Excuse me! What are you called? Minister for prisons or whatever—corrective services, that will do!

Mr R.H. COOK: I think the Minister for Emergency Services was drawing our attention to a live amendment on foot at the moment by the Nationals WA to water down the emergency management powers that are before Parliament. That would in part continue to protect Western Australia.

Mr R.S. Love interjected.

The SPEAKER: Member for Moore, you were heard in silence. I expect you to give the same respect to the other side.

Mr R.H. COOK: I will go through in some detail the issues raised today. Western Australia has been incredibly successful because of the work done by the public health system and the people of Western Australia, which is now being called into question by members of the National Party and their friends in the Liberal Party. All the work that has gone into making sure we could get on top of the disease, making sure we continue to plan for any outbreaks and making sure that we are ready to respond to any issues that arise is now being called into question by the National Party in a way that the member for Warren–Blackwood said, in his sneaky, below-the-breath interjection, was all about smoke and mirrors. This is the respect that they show to the doctors and nurses in our public health system. This is the respect that they provide, or shall I say “disrespect”; they call “smoke and mirrors” the amount of work that is being done to make sure that we continue to keep people in Western Australia safe. The calm, cautious expertise of our frontline workers, the strong leadership of the Premier and the professional public health advice from our Chief Health Officer has kept people safe.

The name of the game has always been about three important elements: test, trace and isolate. For the benefit of members opposite, almost half a million tests have been undertaken in Western Australia. Almost 84 000 tests have taken place in regional Western Australia. Not one part of this state is unprotected by public health officers—doctors and nurses—to ensure that people remain safe. Our testing remains on foot. Last week, we tested over 15 000 Western Australians as part of our ongoing work to ensure that we remain vigilant over everything that is going on. The amount of commentary going on about our contact tracing is extraordinary. Our contact tracing remains outstanding. Western Australia was one of the first states to stand up a digital mechanism for managing the contact tracing processes. I was with the member for Central Wheatbelt a few months ago at Northam Health Service. We were opening important new additions to the hospital, which the McGowan Labor government has brought into being. After we looked at these great new additions to that terrific hospital in Northam —

Ms M.J. Davies: Who paid for them?

Mr R.H. COOK: I could not help it, member for Central Wheatbelt!

Mr B.S. Wyatt: The taxpayers of WA.

Mr R.H. COOK: The taxpayers of WA paid for it!

We toured the hospital afterwards to meet some of the great doctors, nurses and healthcare workers who work in that hospital. I went into the population health area of the hospital where eight or so staff were busily working. I said to them, “What are you guys up to?” I think this was back in about August. They said, “We’re all on the phones at the moment doing contact tracing for Victoria.” At a time when Victoria was at its worst, Western Australian public health workers were on the phone assisting the Victorians. Where were they doing that from? From no other than one of our key regional hospitals in Western Australia. That is how deep the public health system in Western Australia bats. It is extraordinary that the National Party should be here today calling into question the capacity of our public health system in rural and regional communities when they are doing such an outstanding job in keeping Western Australians safe—not only keeping Western Australians safe, but keeping Victorians safe.

Mr B.S. Wyatt: That is how good they are.

Mr R.H. COOK: That is how good they are, Treasurer. That is some of the work that we are rightfully proud of. The amendment moved by the Premier today rightly recognises the terrific work being done in our healthcare system.

The other element of this relates to isolating and making sure we have the capacity to isolate the cases that need to be isolated so that they do not represent a threat to our community. Our hotel quarantining system has been outstanding in continuing to make sure we can identify the risks in our community and get on top of them.

The development of the G2G Now app has provided an outstanding capacity for police and healthcare workers to ensure people are in their homes and do not represent a risk to anyone else in the community. That G2G Now app continues to be looked at by other health jurisdictions around Australia as an opportunity to utilise the same system to ensure that they too can benefit from the great innovations taking place inside Western Australia.

Ms Mia Davies; Mr Terry Redman; Mr Zak Kirkup; Mr Shane Love; Mr Mark McGowan; Mr David Templeman; Mr Vincent Catania; Mr Roger Cook

The member for Warren–Blackwood raised issues around the *Al Messilah*. We were aware of all those issues relating to that vessel. We were aware of all the movements of the two Australian crew members who got off that vessel. We were aware of all their close contacts. We were able to contact trace and ensure that we were on top of the issues.

Mr D.T. Redman: I rang your office to tell you about one. How did that go?

Mr R.H. COOK: It went very well. We have spoken to that person. We identified them, and I think we got them tested. I do not know that for a fact. All the issues relating to the *Al Messilah* were taken care of. There are now eight vessels—nine if we include the vessel that docked in Geraldton today—that have all been carefully and expertly managed by the public health system.

We have made sure that we have kept Western Australians safe, but members opposite continue to criticise and ensure that they weave fear and concern in the community while at the same time calling for the border to come down. They are the ones who sided with Clive Palmer and who wanted to smash our border arrangements. Now they come forward, wringing their hands and saying, “We’re not quite sure if you’re ready.” We are ready. We have always been ready and we have continued to do that work. However, we will not rest on our laurels. We will not simply say that we are ready and not further review and continue to improve our systems and programs to ensure that we keep people safe.

We are doing a lot of work with aged-care homes in particular to make sure that they stay safe. We have developed guidelines around the interface between hospitals and community and residential care facilities, facilitating engagement and sharing information across the primary health and aged-care sectors in a WA health context, including state border forums and provision of key information. We have communicated with the aged-care sector about resources and care supports and enhanced the residential care line to support the care of older people in WA residential aged-care facilities, with secondary triage by a geriatrician. Specific outbreak plans and information packs for RACFs have been developed and the Department of Health is in regular contact with the WA aged-care providers to provide support as needed. I have had a number of meetings with the aged-care sector, regardless of where they are. We continue to make sure that everyone in Western Australia remains safe, not with the support of the commonwealth government, I might add, which has overseen the most significant failure in our healthcare system in Australia through its mismanagement and neglect of residential aged care. We do not hear criticism from those opposite about the commonwealth. All we hear from the opposition is “pull down the border” when we are keeping Western Australians safe. The opposition is saying, “We’re with Clive” when we are saying that Clive Palmer represents a significant threat to our public health. The opposition is with Christian Porter, who is backing Clive. The opposition is all the way with Clive. We are not, nor is the WA community.

The Nationals WA had an opportunity today to acknowledge the great work going on in our country health service. It had an opportunity to acknowledge the great doctors, nurses and healthcare workers everywhere who have ensured that we constrained the outbreaks in Broome, that we looked after the people in Halls Creek and that we ensured that those people coming across the border from Kununurra did not represent a risk to the community. We ensured that some respect was paid to the public health officials who have kept Western Australians safe. It has been over 200 days since the last community spread of this disease. That is an outstanding result from the modest changes that the Premier and I have announced. Moving from a hard border to a controlled border, we will continue to keep Western Australians safe with the help of the great public health officials and the great guidance of the Chief Health Officer and the Commissioner of Police, but without the assistance of those opposite because they have shown that they are simply not capable of making a helpful contribution to this debate.

Division

Amendment put and a division taken with the following result —

Ayes (36)

Ms L.L. Baker	Mr M. Hughes	Mrs L.M. O’Malley	Ms A. Sanderson
Dr A.D. Buti	Mr W.J. Johnston	Mr P. Papalia	Ms J.J. Shaw
Mr J.N. Carey	Mr D.J. Kelly	Mr S.J. Price	Mr C.J. Tallentire
Mrs R.M.J. Clarke	Mr F.M. Logan	Mr D.T. Punch	Mr D.A. Templeman
Mr R.H. Cook	Mr M. McGowan	Mr J.R. Quigley	Mr P.C. Tinley
Ms J. Farrer	Ms S.F. McGurk	Ms M.M. Quirk	Mr R.R. Whitby
Mr M.J. Folkard	Mr K.J.J. Michel	Mrs M.H. Roberts	Ms S.E. Winton
Ms J.M. Freeman	Mr S.A. Millman	Ms C.M. Rowe	Mr B.S. Wyatt
Mr T.J. Healy	Mr M.P. Murray	Ms R. Saffioti	Mr D.R. Michael (<i>Teller</i>)

Extract from *Hansard*

[ASSEMBLY — Wednesday, 4 November 2020]

p7381b-7392a

Ms Mia Davies; Mr Terry Redman; Mr Zak Kirkup; Mr Shane Love; Mr Mark McGowan; Mr David Templeman; Mr Vincent Catania; Mr Roger Cook

Noes (18)

Mr I.C. Blayney
Mr V.A. Catania
Ms M.J. Davies
Mrs L.M. Harvey
Mrs A.K. Hayden

Dr D.J. Honey
Mr P.A. Katsambanis
Mr Z.R.F. Kirkup
Mr S.K. L'Estrange
Mr R.S. Love

Mr W.R. Marmion
Ms L. Mettam
Dr M.D. Nahan
Mr D.C. Nalder
Mr K.M. O'Donnell

Mr D.T. Redman
Mr P.J. Rundle
Mr A. Krsticevic (*Teller*)

Pair

Mrs J.M.C. Stojkovski

Mr J.E. McGrath

Amendment thus passed.

Motion, as Amended

Question put and passed.