



PARLIAMENT OF WESTERN AUSTRALIA

INAUGURAL SPEECH



Hon Helen Morton MLC
(Member for East Metropolitan)

Address-in-Reply Debate

Legislative Council

Wednesday, 25 May 2005

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ADDRESS-IN-REPLY

Motion

HON HELEN MORTON (East Metropolitan) [7.48 pm]: Thank you, Mr President, for the opportunity to make my contribution to the Address-in-Reply motion before the Chair. May I first congratulate you, Mr President, on your election to the Chair of the Council, and Hon George Cash for his re-election to Chair of Committees. I look forward to working with both of you over the next four years. I also thank the parliamentary staff and those people in the Department of the Premier and Cabinet who have helped me through the orientation and induction to Parliament program. I congratulate members who are, like me, in the house for the first time, and thank fellow members from both sides of the house for their welcome and support.

As I stand before you today as one of the Liberal members for the East Metropolitan Region, I have mixed feelings. I feel some trepidation about filling the shoes of such experienced, intelligent, articulate and well-loved parliamentarians as Hon Peter Foss and Hon Derrick Tomlinson. I pay tribute to those two men who preceded me here. They are held in the highest regard by people right across the East Metropolitan Region. I wish to record my respect for those men and their achievements in this place over the past 16 years. I recognise the privilege bestowed on me by the Western Australian division of the Liberal Party, and its faith and trust in endorsing me to its number one position for the East Metropolitan Region. The party can be assured that this privilege will never be taken for granted. I have a strong and enduring connection to the communities throughout the East Metropolitan Region. I intend to repay their election of me to this position through dedication to seeking out opportunities to improve their health, happiness, prosperity and security. I have a mixture of humility and pride that I am a member of this time-honoured establishment, assisting in the robust governance of Western Australia.

I would like to acknowledge some wonderful people who have helped me become a member of this house. Hon Derrick Tomlinson paid me the highest compliment in asking me, following his announcement of his retirement, to consider becoming his successor. His wise counsel and mentoring on what it takes to become a parliamentarian has been unfailing over the past three years.

Equally, since I have been elected, the ongoing assistance and guidance of his electorate officer, Nola Smart, has ensured the smoothest of transitions to my electorate duties. Hon John Day, the

member for Darling Range, has been assisting me in many roles over many years. I thank him for his example of integrity, dignity and humility in a politician.

My immediate family, which comprises my husband Allan, my eldest son Aaron, his wife Michele and their three children Jesmin, Jaxon and Jordyn, my daughter Alexandria and my youngest son Timothy and his partner Misty, have been and always will be the central point of my life. They have provided me with honest support, good humour and a life full of wide-ranging experiences that are free from the harmful feelings of guilt about wanting a career and a family. We belong to a large close-knit family that lives in Western Australia and Queensland. I am one of seven siblings and Allan is one of eight. Our extended family is made up of close friendships and incredibly strong family ties. The closeness of our family has shown me what family traditions of integrity, love and loyalty can achieve. I respect these traditions and the value they add to my life. I thank my parents for their example.

I thank my many friends and family members who campaigned with me throughout the last couple of state and federal elections. I would not be standing here today without their support. Appreciation is also extended to the willing committed members of the Liberal Party's Kalamunda Branch, Hasluck Division, particularly its President, Heather Gilmour, the Hasluck women's division, the State Women's Council, particularly Daphne Bogue, and the Canning and Pearce Divisions of the Liberal Party of Western Australia, for their encouragement and ongoing support.

My life experiences have been my preparation to participate fully in this house. They have helped to shape my values and beliefs. It was when I was a primary school student at Frankland River, which is where I was raised on a war service land settlement farm, I heard of my first politician, Paul Hasluck. I was assigned a project on Papua New Guinea and, although my father had served there during the Second World War almost 20 years previously, my mother suggested that I write to the then federal Minister for Territories, Paul Hasluck. I was overwhelmed by his reply and the subsequent photographs and project material I was sent. I received top marks for that project and would like to think that that event has taught me how to respond to the smallest request or need of a constituent. Little did I think that I would have the honour of representing the East Metropolitan Region, which takes in the federal seat of Hasluck and is currently held by my good friend Stuart Henry. It is also the area in which my family and I have lived for the past 35 years.

While I boarded to attend secondary school in Albany, my parents moved from Frankland to a sheep station north west of Meekatharra. They eventually retired from the land as mobile rangers with the Department of Conservation and Land Management for eight years before compulsory retirement at age 65. Still very fit, my parents went back to a sheep station at Sandstone which, after seven years, my husband and I took over and still operate. My parents again "retired" into voluntary work at Yanchepe. Love of the environment and community service has been instilled in everything we do.

We are a sports-loving family. The three generations of our family have been involved in tennis, netball, basketball, football, athletics and horseracing. On Mother's Day this year, I was watching my grandson's under eights football match. As I walked out onto the ground at quarter time, I was embraced by the team's coach, my 30-year-old son, and then by the umpire, my 24-year-old son. No Mother's Day present could ever match the pleasure of seeing my sons continue our tradition of service to the community.

I trained as an occupational therapist and worked throughout Western Australia and interstate. The best clinical application of my skills was in the field of mental health rehabilitation. Despite increased spending on mental health, strengthened community treatment and support services, reduced isolation of mental health from mainstream health systems and the expansion of psychiatric disability support services, mental health still represents a major public challenge in Western Australia, and that is an area to which I remain strongly committed.

With the establishment of a private contractual occupational therapy service to nursing homes, hostels and day care centres throughout the metropolitan area, I moved into health management. This eventually led to 13 years as a senior executive in government health services, originally as the regional director for health in the wheatbelt, and then with the mid-west and Gascoyne regions. I represented Western Australia in developing the inaugural national multipurpose service strategy for country health and aged care services, and I remain supportive of multipurpose roles across government services, especially in country areas. The important role that such services play in the east region in sustaining country services was clearly demonstrated throughout those years.

Working as the director of the South Metropolitan Health Authority and then the general manager of finance and resources within the Department of Health, I became appalled at the obstacles and waste of resources created by bureaucratic inflexibility between local, state and federal responsibilities in health. As general manager of the Armadale Health Service, this was again apparent. In cooperation with local general practitioners, a low-cost antenatal service was established in the hospital grounds. The only other options for those mums to access a free service required them to travel for all antenatal care to, and to have their babies at, King Edward Memorial Hospital for Women. Everyone agreed that a free service at Armadale was in the best interests of the mothers, their babies and their families, but the commonwealth officers were not supportive because of the fear of cost shifting between levels of government. They preferred to see these mums, mostly on low incomes, travel to King Edward Memorial Hospital in Subiaco rather than have the GPs involved charge Medicare for services at Armadale. It took 12 months to get a special approval from the federal minister for health for the GPs to charge their services to Medicare in a shared state-commonwealth arrangement. Commonsense must prevail in finding new approaches to local, federal and state responsibilities in health.

While speaking about obstetrics, I mention that at one stage the government was prepared to let obstetrics close down at Armadale. It was too hard to find specialist obstetricians and guaranteed anaesthetic cover for the declining services there. I did not accept the closure of the service at Armadale. I became somewhat notorious for flying in obstetricians from South Australia for four days every three weeks to give the sole obstetrics specialist at Armadale a break until enough specialists were recruited. This government gave me a hard time in the press for paying anaesthetists to ensure that the hospital was covered 24 hours a day, seven days a week. I note that the practice has proved to be necessary in the eastern suburbs, and the practice continues today nearly three years after I left the hospital. That hospital now delivers more than 1 000 babies a year.

Is it just easier to let obstetrics services close at Kalamunda District Community Hospital rather than develop satisfactory protocols for a GP and midwife obstetrics service? I believe it is sheer laziness to adopt a close-it-down approach and to hide behind centralist clinicians who argue clinical or resource appropriateness. Recent research has shown that volume is not associated with adverse outcomes for low-risk births in Australian hospitals delivering between 100 and 500 births a year. Serious implications arise for Western Australian communities if volume is accepted as a determinant for clinical or resource appropriateness in obstetrics. All hospitals north of Perth, with the exception of Geraldton, deliver fewer babies a year than Kalamunda hospital. Only four out of 57 country hospitals delivered more babies annually than has been the case at Kalamunda hospital over the past couple of years. It takes more work, but there are successful alternatives to the close-it-down approach. I intend to pursue those alternatives on behalf of the families around Kalamunda, the GPs and the midwives.

My interest in health reform is well known. I have been involved in the state and commonwealth health agreement negotiations. I have managed the negotiations and accountability for the health budget of the state, which accounts for 25 per cent of the total state budget. I have managed the state's health capital works program and the state's health litigation and legislation program. It was

not easy. Annual health expenditure in Western Australia is approximately \$6 billion, and is growing at an average rate of eight per cent annually. This cannot and need not continue.

“Health 2020: A Discussion Paper”, which was written in 1998, and the subsequent plan for health in the metropolitan area, written in 2000, had most of the answers. There are more answers in the Reid report of March 2004. Whichever report one reads, the solution lies partly in the expansion of services in peripheral hospitals such as Swan District and Armadale-Kelmscott Memorial Hospitals.

These types of hospitals should undertake the majority of the work in the metropolitan health system, and the number of more expensive tertiary beds in tertiary hospitals should be reduced. Each time a tertiary bed is used for a non-tertiary case, it wastes the state approximately \$380 per bed per day. More than 80 per cent of cases in tertiary hospitals are non-tertiary cases. This wastes the state upwards of \$100 million a year. This government wants to increase the number of tertiary beds at the new hospital to be built south of the river to nearly double the number recommended in the Reid report. I fully support the development of a tertiary hospital at Murdoch. The north-south imbalance in population-based funding in health services is absolutely staggering. However, the unnecessary centralising of services in the south, to reach 1 000 tertiary beds, will merely replicate the waste in the current tertiary hospitals, and will come at the expense of fully developing and maintaining a cheaper option for providing exactly the same clinical services at Armadale-Kelmscott Memorial Hospital and Rockingham-Kwinana District Hospital.

The lack of vision shown by this government in not re-leasing Galliers Private Hospital and Specialist Centre as a private hospital on the Armadale site is stunning. The failure of the government to honour the lease agreement with the private operator, and the subsequent penalty - an out of court settlement of more than \$15 million of taxpayer funds - is a scandal. That \$15 million makes up part of the \$97 million for the health sector under the Treasurer’s Advance Authorisation Bill 2005, which was debated in the house last night. What a waste! These wasted taxpayer dollars would have paid for hundreds of additional cases that are waiting for elective surgery. The implication of the government’s action will be the gradual decline of specialist services at Armadale, as specialists move from the site and seek an alternative mixture of public and privately-run hospitals at which to base their rooms. Three general hospitals - Joondalup Health Campus, Peel Health Campus and Armadale-Kelmscott Memorial Hospital - stand out in terms of their ability to attract the mix of specialists who could provide the services most needed by their local communities, rather than those patients having to go to alternative hospitals. Why? It is because they have private hospitals co-located on site. Co-locating a private hospital on a public hospital site enhances the recruitment of specialists necessary to work in the public hospital. This is especially so in the East Metropolitan Region.

Having worked for the past 12 months as the chief executive officer of a home and community care service, I am certain that we can do more to help older people to continue to live independently and safely in their own homes. We cannot afford to wait for the inevitable crisis brought about by the enormous population growth in the number of people over the age of 85. Only 20 per cent of people over the age of 65 ever access an aged care service. Less than 10 per cent of that 20 per cent need nursing home or hostel care; the other 90 per cent receive home and community based care, which is provided mostly by untrained or non-clinical staff. The huge majority of elderly people continue to live at home with no or minimal support. Broader home-based support services can go a long way to meeting the future needs of this worldwide phenomenon and keep aged people out of acute and long-term institutional care. Apart from basic help to live at home, elderly people most want personal safety and security. The home and community care program needs to be broadened to include programs to promote personal safety and security.

Having worked as a senior executive in the public sector for 13 years, I can assure members that the majority of public servants are dedicated and hardworking. They take seriously the ongoing requirements to improve service quality, contain costs and be accountable. However, their ability to

produce sustained excellent performance is thwarted by a sector that mostly pays lip-service to employee performance management. I am grateful to the Leader of the Opposition for the opportunity to be the opposition spokesperson for public sector management. In that role I will seek improvement across the sector in public sector standards of human resource management and especially in how agencies evaluate and manage employee performance.

I applaud the initiative of the four public sector watchdogs, the Commissioner for Public Sector Standards, the Auditor General, the Ombudsman and the Corruption and Crime Commissioner, in seeking to work closer together to streamline their efforts and those of public sector agencies in ensuring integrity within the public sector. We know that we have a cultural problem in the public sector when more than 50 per cent of the employees who responded to a survey sent out by the Commissioner for Public Sector Standards in 2004 felt that they would not be protected from victimisation, harassment or some other form of retribution if they reported wrongdoing. This sort of punitive culture permeates from the top, and I will do everything possible to hold ministers and chief executive officers accountable for changing it.

The other portfolio area that I represent in opposition is that of women's interests. The "Women's Report Card" put out by the Office for Women's Policy in March 2004 provides some very interesting baseline information about women in business, education and elected positions in government; women remain significantly under-represented in elected positions across all tiers of government. Still less than one-third of all members of government boards are women. The electors of the East Metropolitan Region have set a new standard in electing to the Council four women out of five members. The report card goes on to show that Western Australia has the largest gender pay gap of any state or territory in Australia; that less than one-third of all legislative positions in WA are held by women; that WA has the lowest proportion of sworn and unsworn women police officers of all states and territories; that women carers will meet the bulk of the demand for increased caring across most aged groups; that the lack of alternative care options for the disabled, aged and children impacts greatly on women's capacity to participate fully in society; that seven per cent of adult women have experienced violence in the home, workplace or community, and that the fear that most women have of violence restricts their freedom; that family, friends and social networks are very important for women as they age and have less financial security than men; and, finally, that improved health outcomes for women will be better achieved through accessible, culturally appropriate community and home-based care that can better deal with physical, mental and social wellbeing. Yet people still ask why we need policies and portfolios specific to women's interests. I thank the Leader of the Opposition for the opportunity to pursue better outcomes for women in WA.

In conclusion, I again pledge my commitment to serve the people of the East Metropolitan Region to the best of my ability without fear or favour and, as charged by His Excellency the Governor, to use my imagination and creativity to contribute to the health, happiness, security and optimism of all Western Australians.

[Applause.]
