



# Parliamentary Debates

(HANSARD)

FORTIETH PARLIAMENT  
FIRST SESSION  
2020

LEGISLATIVE ASSEMBLY

Thursday, 19 March 2020

# Legislative Assembly

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THE SPEAKER (Mr P.B. Watson) took the chair at 9.00 am, acknowledged country and read prayers.

## CITY OF GOSNELLS — CHICANES

### *Petition*

MR T.J. HEALY (Southern River) [9.02 am]: I have a petition from 102 petitioners that has been certified by the Clerk and is couched in the following terms —

To the Honourable the Speaker and Members of the Legislative Assembly of the Parliament of Western Australia in Parliament assembled.

**We, the undersigned, support Terry Healy's campaign for Gosnells Council to build chicanes instead of speed bumps in our community (like the successful Gay St chicanes in Huntingdale)**

We now ask the Legislative Assembly to request the City of Gosnells to adopt the construction of chicanes instead of speed bumps to manage speed in our community.

[See petition 173.]

## CITY OF GOSNELLS — SOUTHERN RIVER BUS STOPS — UPGRADE

### *Petition*

MR T.J. HEALY (Southern River) [9.03 am]: I have a petition from 97 petitioners that has been certified by the Clerk and is couched in the following terms —

To the Honourable the Speaker and Members of the Legislative Assembly of the Parliament of Western Australia in Parliament assembled.

**We, the undersigned, support Terry Healy's campaign to upgrade Southern River bus stops as part of Metronet with better seating, lighting and shelter.**

We now ask the Legislative Assembly to request the City of Gosnells to begin upgrading Southern River bus stops as soon as possible.

[See petition 174.]

## PAPERS TABLED

Papers were tabled and ordered to lie upon the table of the house.

## CORONAVIRUS — CORRECTIVE SERVICES — RESPONSE

### *Statement by Minister for Corrective Services*

MR F.M. LOGAN (Cockburn — Minister for Corrective Services) [9.04 am]: In the Department of Justice, Corrective Services is actively monitoring the state and national situation with novel coronavirus, and is responding accordingly to minimise the risk of its spread. Practical and proportionate steps have been put in place to assist in slowing the transmission of COVID-19 in prisons across the state, including the provision of alcohol-based rub and soaps, and posters promoting good hand hygiene, including cough and sneeze etiquette.

The department has established the COVID-19 task force, headed by an assistant commissioner. The role of the task force is to coordinate the Corrective Services' response to the emerging threat and undertake cross-agency liaison, including with the Department of Health and police, and participation in the State Emergency Coordination Group. Prisons, community corrections and youth justice services are updating business continuity plans, including our standard prison pandemic plan. The task force is also coordinating strategies across prisons daily with superintendents, to take into account increasing tiers of response such as significant loss of staff, actions to restrict visitor access and statewide prisoner movements. Ongoing liaison and coordination is occurring with courts and tribunal services. Prison, community corrections and youth justice operations are being monitored on a daily basis. Emergency response plans are being reviewed, including the local and state-based incidents response capability. Overtime controls are being assessed daily by the operations team and will be revised if required.

The COVID-19 task force will be the single source of truth for Corrective Services' communications, with key messages being made available via the intranet. A dedicated coronavirus update landing page providing up-to-date information and links to the WA Department of Health COVID-19 information has been developed. Last week, communications were issued to staff, prisoners and visitors to prisons, which include WA Health advice posters

prompting good hygiene. Prison visitors are also required to complete a questionnaire on overseas travel and personal health prior to the approval of the visit. Updates are being provided this week based on new advice received from WA Health and the Department of the Premier and Cabinet.

Further advice has been provided to staff about self-isolation. In addition, a number of meetings have taken place with the unions. Correctives Services is also now sitting on the State Emergency Coordinating Group for cross-agency coordination for COVID-19. Stocks of personal protective equipment are sufficient, but are under continuing review. Logistics and supply chains are being prioritised to ensure that essential supplies are maintained to ensure business continuity. Staff have been advised to follow the advice of WA Health, and should they fall into the high-risk category, be symptomatic or have returned from overseas since midnight on Sunday, they should self-isolate for 14 days. Industrial relations and human resources have developed a plan to ensure that staff are able to take leave in the event that they fall into this group.

### FORRESTFIELD TRAIN STATION — NAMING

#### *Grievance*

**MR S.J. PRICE (Forrestfield)** [9.07 am]: My grievance is to the Minister for Transport regarding the naming of the Forrestfield train station. As we know, the Forrestfield–Airport Link is a major infrastructure project that is currently underway and nearing the completion of the tunnelling part of the project. It is an incredible project. The technology, effort and everything else that has gone into making this come to fruition are a credit to everyone involved. When we came into government—I think the term was used previously—there was a contract to do the job, but there was no project; therefore, we have pretty much managed the project through its entirety. Along the way, we had to make some changes to what was originally proposed. One of those changes was re-identifying how the land around the station could be used, which resulted in looking to move the ginormous car park that was originally put out the front. We looked at better land use when redeveloping that land, which we were able to do. There was a previous announcement about building a new multi-storey car park so that land could be used as a transport-oriented development. It has recently been identified as one of the Metronet project areas, which is really good for the whole project. One concern with the project has been the working title of the station. It was originally known as Forrestfield train station and has morphed into the Forrestfield–Airport Link, which has become the known reference pretty much throughout the community. The concern raised by my constituents is about the name “Forrestfield”. As we know, the location of the station is near the Forrestfield marshalling yards, but it is a fair way from the Forrestfield suburb. It is very close to the suburbs of High Wycombe and Maida Vale. There are a number of other names that people think should be considered for that station. I have been told that the area used to be referred to as “Newburn” as well; I think that was a family from the area. There is a lot of speculation on whether we are going to continue to call it Forrestfield train station or we are going to undertake a process similar to that undertaken for what was called Belmont station but was renamed Redcliffe station.

Over the years, I have discussed this issue a number of times. I raised a grievance in November 2017 in this place, and I have had multiple conversations with the City of Kalamunda on this issue. I let the city know that at a point in time, the Public Transport Authority would undertake a process similar to that undertaken to rename Redcliffe station. The city undertook its own naming process. I thought that was a little bit unusual, because I had explained that the PTA would do that. The City of Kalamunda undertook a consultation process to rename the area. With the development in the area, there will be a new suburb developed around the station, and there was some consideration at the time that the new suburb might have a new name, which would probably then lead to a new name for the station. The city went through a process of coming up with a new name for the suburb, which was a fairly extensive and lengthy process, which culminated in it conducting a survey of local residents. From that survey, the city short-listed a number of names, and Katadjen, Koorliny, Munday, Quenda Grove and Smokebush were determined as being the most popular names for the area. After that, the City of Kalamunda determined that it would not change the name of the area. Technically, the area has been known as High Wycombe. The recommendation from the City of Kalamunda was not to change the name and to continue to call it High Wycombe. The area has now become predominantly known as the Forrestfield–Airport Link station. I am not sure why the City of Kalamunda went through the naming process and then decided not to pay attention to that and made the decision to call it High Wycombe.

Part of the delay in getting to the point of the PTA running its own naming process and community consultation, as it did with the Belmont or Redcliffe station, was waiting for the City of Kalamunda process to run its course, which took an extraordinarily long time. But the other reason it is important to change the name at the right time is the public knowledge of the project. Everyone knows it as the FAL—the Forrestfield–Airport Link. It has had some challenges; everyone is aware of that. There have been delays and we have put back the opening of it; everyone is aware of that. There is concern that if we were to change the name midstream, so to speak, people might think that we are trying to hide something. Now that we are getting towards the end of the tunnelling, it is the perfect time to look at renaming the station.

Can the minister please provide any details on whether and when the Public Transport Authority will undertake public consultation on the name of the station, and what this consultation might entail?

**MS R. SAFFIOTI (West Swan — Minister for Transport)** [9.13 am]: I thank the member for Forrestfield. I think he outlined the history of this naming situation very well, but I will go through in particular some correspondence between me and the City of Kalamunda on this.

As the member noted, he has raised this with me, and he raised a grievance in this place about the renaming of Forrestfield station. But I want to point out that, as the member outlined, the station is known as Forrestfield–Airport Link, which is a bit different from the situation of Belmont station. “Belmont” was never in the name, so changing it to “Redcliffe” did not necessitate a change to all the signage and everything on that project. The station is known as Forrestfield–Airport Link; however, as the member has rightly pointed out to me on a number of occasions, the station is not in Forrestfield. Although it could be called the Forrestfield–Airport Link, that station is not in Forrestfield. The member has asked that we undertake our own proper public consultation process similar to the one we undertook that resulted in the name change from Belmont to Redcliffe, and I was very keen to make that happen. However, we also talked to the City of Kalamunda.

The City of Kalamunda wrote to me in July 2018 stating that it wanted to look at renaming the area around the station currently known as the Forrestfield North precinct. Again, as the member outlined, there are two areas of redevelopment: the area right around the station, which is part of the Metronet precinct, and the area over which the City of Kalamunda has been running its structure plan process. Although the city is running the structure plan process, it is not dealing with any of the hardships in that area; it leaves that to the state government. As the member outlined, the City of Kalamunda said to us, “Look, before we look at renaming the station, let us do the public consultation on that suburb name.” The area is loosely known as Forrestfield North, and the city asked us to wait until the suburb is renamed before we look at renaming the station. I received a letter from the City of Kalamunda on the naming of the station. It reads —

Consultation with the Public Transport Authority ... has revealed the naming of the station is a task undertaken by the Minister for Transport. It is important to note the geographic location of the future Airport Link station has a significant bearing on the name of the station. It is envisaged should a name change occur for the DSP area and surrounding land then the station name would generally follow.

The city basically said that if the name of the area changes, a station name change should follow. The letter continues —

The City is proposing to recommend to Council an extensive community consultation be undertaken to ascertain ideas for the naming of the DSP area.

The letter then states that the outcome of that consultation would lead to the renaming of that area and that the city would seek our advice or cooperation to rename the station. The City of Kalamunda wrote to me in July 2018. I responded later that year thanking the city for its letter and asking it to please keep me informed on what the City of Kalamunda is doing in naming that area. I wrote —

... please continue to keep me informed as the City of Kalamunda’s planning and community consultation develops.

I was surprised to see local media reporting that a councillor had urged and demanded that I do something straightaway after that November 2018 letter. I never heard back from the city about the renaming process, but we did some investigation. As the member outlined, the city did go through a public consultation process about renaming the area, and Quenda Grove became the most popular name put forward by the community.

**Mr Z.R.F. Kirkup:** Quenda Grove?

**Ms R. SAFFIOTI:** Yes, Quenda Grove. It is interesting. That was the outcome of the community consultation, but then the city went back to 54 respondents and said that the name should not be changed to Quenda Grove and that it should be High Wycombe. That was the public consultation process. I think there was a resolution in February that the city should write to the Premier asking that the name of the Forrestfield train station be changed to High Wycombe.

As I said, I saw this in the media. No-one from the city contacted me about this public consultation process. Meanwhile, we have given a commitment, as we said in this Parliament, to undertake a consultation process similar to that undertaken for Belmont and Redcliffe, and we will do that. But this whole idea that it was somehow one councillor’s idea to have this done is absolutely wrong, misleading and false. When it comes to hardship for individual landowners, the City of Kalamunda says that it is all the state government’s responsibility, but when it comes to consulting on a name, the city believes it has sole responsibility. That is what we have with that city.

We are keen to undertake a public consultation process similar to what we did with Redcliffe and Belmont. We will do it properly; we will try to engage the Forrestfield and High Wycombe community and we will do it very soon as we establish what we believe would be the best way to have people complete that survey. Of course, it will be online. We will not conduct forums at this point. We are keen to engage with the community and work with the member for Forrestfield in a proactive way, with him cooperating with government. As he said, this is a magnificent project. We are nearly at the end of tunnelling. I hope some of the issues in the community do not affect the completion of that tunnelling. It has been a challenging project, but we are nearing the end of tunnelling.

In particular, TBM *Sandy* is not too far away. We are very keen to undertake that consultation in conjunction with the member for Forrestfield to make sure that we get a clear answer. I would really like the City of Kalamunda to work with us on these issues and not just play political stunts and political games.

### **DOG AMENDMENT (STOP PUPPY FARMING) BILL 2020**

#### *Grievance*

**MR T.J. HEALY (Southern River)** [9.21 am]: My grievance is to the Minister for Local Government about the Dog Amendment (Stop Puppy Farming) Bill 2020 before the Parliament. I speak on behalf of the member for Jandakot, Yaz Mubarakai, and I, who are honoured to have kennel districts in our electorates in Southern River and Canning Vale, and in your electorate also, Acting Speaker (Ms S.E. Winton). We also have many responsible animal lovers who are Dogs West members. My grievance is that there is a lot of misinformation in the community that may jeopardise these proposed laws. I proudly stood with the minister and Mark McGowan when we promised to stamp out the cruel practice of keeping dogs in pain and almost permanently pregnant in abhorrent conditions. There is no doubt that these laws will change lives, but there is a risk that these laws may not pass due to the huge amount of misinformation on social media and put forward by some of the opposition parties—crossbreeds in true nature—and I seek the minister's help to ensure that all communities are aware of the correct information.

**Mr R.S. Love:** Bring on the bill.

**Mr T.J. HEALY:** Thank you.

Several members interjected.

**Mr T.J. HEALY:** Keep barking. Thanks.

Several members interjected.

**The ACTING SPEAKER:** Thank you, members.

**Mr T.J. HEALY:** There are currently no laws to stop puppy farms. My office consistently reports dodgy dog owners in my community, not from the kennel zone, and council rangers do their best. However, these tricky backyard breeders know that under current laws a dodgy puppy farmer can keep a dog regularly pregnant as long as it is fed and watered.

Several members interjected.

**Mr T.J. HEALY:** Thank you very much. I know members opposite hate my dogs—they hate my purebred kennels and they hate those who love animals, but please —

Several members interjected.

**Mr T.J. HEALY:** Thank you very much. No, you do not.

**The ACTING SPEAKER:** Thank you, members.

#### *Point of Order*

**Ms A. SANDERSON:** This is a time-limited debate. Generally, the consensus is that members are listened to without interruption. I would appreciate it if the member was given the courtesy that other members in this chamber are given.

Several members interjected.

**The ACTING SPEAKER (Ms S.E. Winton):** Thank you, members.

**Mr R.S. LOVE:** Further to the point of order, I think members are objecting to the fact that a grievance has been brought to this house when we have a bill before the house that could be debated.

**The ACTING SPEAKER:** Thank you, member. That is certainly not a point of order. Member for Southern River, please continue and please do not accept interjections. I agree that there is limited time and we need to hear your grievance.

#### *Grievance Resumed*

**Mr T.J. HEALY:** Certainly. They do not even have a point of order—they are barking up the wrong tree.

The proposed standards and guidelines for the health and welfare of dogs in Western Australia state the minimum requirements and recommended practices to protect and promote the welfare of dogs and they adopt Dogs West guidelines of a maximum of two litters in 18 months and a specified maximum in a lifetime. The working group has been listening to Dogs West, and I commend the minister. The goal of this legislation is to stop dodgy, unethical backyard puppy farmers who harm animals and who keep their dogs in pain and misery and pregnant every few months. The goal of this legislation is not about targeting or shutting down the responsible, caring, ethical breeders. The goal is not to stop the great and responsible Dogs West members who care for and love their animals. There is a perception that responsible purebred breeders will be penalised or will need to stop breeding the animals they love. That is simply not true.

The proposed laws before the Parliament to stop puppy farming will, in fact, have very little effect on residents of the kennel zone. Most are already registered with their council and further aspects, such as exemption from desexing, will be minimal. An exemption from desexing is simple to obtain.

I have met with my kennel district. I have consulted and I have knocked on their doors. I have met with Dogs West. I personally doorknocked over 200 homes in the kennel district in 2018 and 2020. I proudly doorknocked in Ranford Road, Cairn Road, Talbot Road, Corncrake Court, Furley Road, Matison Street, Terrier Place, Cormorant Court, Passmore Street and Tamby Court. I will keep talking with and listening to my kennel zone and my residents. I doorknocked half of my kennel district in 2018 before consultations closed so that I could increase the number of my residents making submissions, which was a great success and it is reflected in the laws before the Parliament. I spent the past three weeks trying to finish doorknocking the other half of the kennel zone to help provide the correct information about what is proposed in those laws and to discuss with my district what is important to them.

Not everyone supports all the proposals, but there are many things that most of us—not all; I do note the Liberals—agree on. We all agree with shutting down dodgy people who keep their dogs in pain. There is consensus on adopting the Dogs West recommendation of the maximum two litters in 18 months. We all agree with the part of this bill that makes it illegal to sell dogs in pet stores. That attacks the puppy farming industry and drives up its market. We will keep chasing them and stamping out their business.

We have some amazing purebred dogs in the kennel districts of Southern River and Canning Vale and around the metropolitan area and around Western Australia. Overall, very little will change for kennel zone residents who are members of Dogs West and members of the Australian National Kennel Council under the proposed laws. Again, exemptions from sterilisation, desexing, will be relatively simple to obtain. Members should remember that there are no registered breeders under this legislation. An approval to breed, which does not mean that someone would need to breed, would be given to kennel zone residents who breed or show dogs or have performance dogs, or live in residential areas with their forever families on breeders' terms just to exempt them from sterilisation. It does not mean that they have to breed, although I acknowledge that some of my residents would prefer some further terms, or clarification on terms—for example, an approval to keep an unsterilised dog. Dogs in their forever homes on breeders' terms or breeders' contracts are also a key part, and they will continue. Wherever the dog lives, its human registers and applies for the exemption from desexing and the existing council rules apply. It will also be simple to obtain an exemption from sterilisation from a vet on health grounds.

As the minister and I know, kennel zone residents and responsible Dogs West members are not the intended target of these laws, and the councils do not intend to expend more resources in the Gosnells kennel zone to stop puppy farming. Existing council bylaws remain for boarding kennels and the registration of dogs and inspections, but for those who buy properties in the kennel zone, to puppy farm or harm animals and pretend to be responsible breeders, their business will not survive under these laws.

The great majority of our kennel zone residents are responsible, ethical dog owners and dog lovers, who have been doing the right thing by their animals for years and we commend their example. Most will already be registered with their council as having kennels and having dogs registered at their properties and those regular council inspections will not be altered. I acknowledge the many kennel zone residents who are Dogs West and ANKC members who have set the example for ethical and responsible care of their animals and who put in some fantastic submissions. I also acknowledge that many Dogs West members would like to get an exemption, but many members also do not want to hand all their details to the central administration.

These laws are important for my residents, in and out of the kennel zone, and they are important for anyone who loves dogs. What can we do to get these laws passed and help stop those who are in favour of this abhorrent practice of puppy farming?

**MR D.A. TEMPLEMAN (Mandurah — Minister for Local Government)** [9.28 am]: I thank the member for Southern River for his grievance. This is an important grievance. I also recognise the good work he has done and continues to do, particularly in speaking to his constituents, Dogs West members and others about the legislation that we intend to progress through the house. As the member is aware, in Western Australia approximately a third of households own a dog and indeed dogs remain a very important provider of companionship for many Western Australians. Of course, ensuring that our dogs are healthy and that their wellbeing is considered is important. As the member knows, dog breeding in Western Australia is not regulated at this point in time; the member has highlighted that. Over the past number of years, the community has raised concerns about the breeding of dogs, including the practice of puppy farming. I think everyone understands the abhorrence of puppy farming. It is an abhorrent practice because, as we know, the practice does not produce healthy pups and dogs and it does not ensure that people know what they are actually buying when they buy a pet. Dogs West breeders have a great advocate in the member. The fact that he has extensively door knocked and continued to have ongoing conversations with his constituents who are Dogs West members and local dog breeders is wonderful.

I want to highlight the history of why the Dog Amendment (Stop Puppy Farming) Bill 2020 is in this place. In 2015 a steering committee was set up and chaired by the member for Maylands. It worked with the various stakeholders on this issue of puppy farming. The recommendations in the 2015 report, which was extensive, helped

to frame the government's stop puppy farming policy in 2016. The focus was on the introduction of mandatory dog sterilisation; standards for breeding, housing, husbandry, transport and sale; and a centralised registration system. It also enabled the transition of pet shops into adoption centres. We took this policy to the election in March 2017. It highlighted the key elements that we wanted to progress to deal with the puppy farming issue.

As the member knows, once we were elected, I established the Stop Puppy Farming Implementation Working Group with the member for Maylands as the chair. I acknowledge the tremendous advocacy that she has continued on this issue. That working group included key stakeholder members including a representative from Dogs West. The first meeting of the working group was held in November 2017. Its meetings progressed through to last year and included an extensive consultation period. In the nearly 5 000 submissions that were received, 77 per cent supported mandatory dog desexing, 87 per cent supported a centralised registration system, 61 per cent supported the transitioning of pet shops into adoption centres and 94 per cent supported having mandatory standards for dog breeding, housing, husbandry, transport and sale. That consultation process was one of the biggest that I have experienced in my 19 years in this place. Dogs West is of course an important stakeholder; I recognise that. It provided input into the consultation process as well as its membership on the working group, and it is valued.

Consideration has been given to some of the issues that Dogs West has raised and they have been addressed in the legislation. For example, concerns were raised about the impact of early sterilisation. As a result, sterilisation will be required only when dogs are two years of age, not six months of age, which was originally under consideration. Strong representation was also made by the Australian Veterinary Association on that issue. Sterilisation will not apply to dogs registered prior to the legislation coming into effect. Again, a concern was raised about that by some of the member's constituents through Dogs West. Approval to breed will be a one-off application that applies to all current and future dogs owned by that person. We do not want this to be an onerous process; it will be a one-off application, not something that is done annually. A person can obtain an approval to breed a dog they wish to keep entire, such as for show or other purposes. We understand where Dogs West representatives are coming from.

These proposals reflect the election commitment that was based on recommendations from a steering committee, which included a number of stakeholder members, including one from Dogs West. The government decided that there should be no exemptions from the requirement for people to obtain approval to breed as this will ensure consistency and transparency of all dog breeders. Dogs West has been included in the consultation process and was invited to be part of the working group. As we know, Dogs West is a private association. Although the Dogs West membership can cancel registration of a member of its organisation, it does not have the power to prevent a person from continuing to breed dogs. That is the essential element of the central registration system. We want to make sure that we can track a dog from birth to death and that we are able to protect that data that should be inclusive of all. I thank the member for his grievance. I acknowledge this issue, and when this bill comes on for debate, of course we will listen closely to the concerns raised.

## MANDURAH — CRIME RATES

### *Grievance*

**MR Z.R.F. KIRKUP (Dawesville)** [9.35 am]: I rise to deliver a grievance to the Minister for Police. I appreciate the minister taking my grievance this morning. This grievance is largely about crime, which comes under the minister's portfolio, and police numbers in my district of Dawesville and across the City of Mandurah more broadly. Unfortunately, I, together with the member for Hillarys as the shadow Minister for Police, had a crime forum scheduled in my district on 2 May. Given everything that is going on with COVID-19, that has been postponed until a date that is yet to be fixed. I am very grateful to the member for Hillarys for his continued support in addressing local crime issues in our community. Although the crime forum has been suspended and a lot of attention is being paid, and rightly so, to the COVID-19 response, that does not mean that crime is not an issue in our community. It is an issue that should still be raised with the minister.

In August last year, members would be aware that together with the Leader of the Opposition and the member for Hillarys, we held a crime rally in Mandurah. More than 400 people turned out to that rally. It was a significant turning point in the attitudes of our community members who went from putting up with the increase in crime in our community, to demanding action from the government. I am pleased to say that at the time we had a response from the government: a surge in police numbers. I know that because police officers out of uniform came to my office and told us that there were more police on the street in Mandurah for a small period. Unusually, crime went down during that time! Who would have thought it? We had more police on the street and the crime rate went down; that is exactly what we are continuing to ask for from this government. Unfortunately, after our very small, time-limited campaign, the additional police numbers were withdrawn and the crime rate went back up again, so much so that it has become more noticeable now. Local businesses and residents continue to complain that crime is still an issue in our community.

I asked some people right across Mandurah what they thought about crime. I have some anecdotes here—I appreciate that they are anecdotes. Nonetheless, they are concerns from residents that I would like to raise in this house because we will not be able to do that at our crime forum that was originally scheduled to occur on 2 May. Karen, who lives in Dudley Park, had a \$90 000 boat stolen from her business and also had her home in Dudley Park broken

into. Sandra, who lives in Pinjarra, said that she no longer goes to Mandurah Forum, the foreshore or Smart Street mall area due to safety and security concerns. Brooke in Meadow Springs said, “The only changes we have seen is that of growth and crime in Mandurah.” Laura, who lives in Silver Sands, said, “My partner and I witnessed someone breaking into our neighbour’s home. It is their holiday home and they were not in residence at the time. This is the fourth or fifth time in roughly four months that that home has been targeted.” Beckie from Dawesville said, “I have lived in the Mandurah area for about five years. In that time, my family has had a home broken into, then my husband was king hit from behind near Smart Street mall. A police report was made but we never heard back about that or had a phone call to let us know what was going on. My oldest daughter moved out into her own place for the first time, only to move back home with us because her home was broken into three times within the first few months.” Colin, who lives in Madora Bay, said, “In central Mandurah the antisocial behaviour is getting worse. We no longer shop at Woolies downtown or anywhere near the Smart Street mall.” Marg from Halls Head said, “We feel unsafe walking around the City of Mandurah.” Tony said that his business was robbed and that \$50 000 of electrical cables were removed and damaged from his construction site in January this year. Barbara in South Yunderup said, “I was a victim of a home invasion in October and was held up with a machete by one young fella. His mate held a knife to my throat. They stole money, jewellery and my confidence.”

These are the stories that we are getting from people from right across Mandurah who remain concerned about the level of crime in the community. When we held the rally in May, we made one simple demand, and that was for more police on our streets. That is all we wanted. The police in Western Australia, and in Mandurah in particular, do an exceptional job, so much so that we just want more of them. That is exactly what we want. It was not just the 400 people on the foreshore in Mandurah and me saying that. I appreciate the minister would argue we are politicising this, but it is not politicising the situation to care for and be concerned about the welfare of the people in my district. It is not just us saying this and it is not just about the anecdotal evidence I have presented to the chamber; the City of Mandurah is also saying this. The City of Mandurah met the Minister for Police at a private forum—not a public one—in, I believe, October 2019. I am very interested to know why the minister would not face up to the people of Mandurah. The City of Mandurah raised five key points at that private forum. The city wanted to see a WA police mental health co-response in Mandurah as a priority, a trial of intensive outreach services for those who are hardest to assist, proactive patrols by police in the city during peak periods for an extended time, increased access to drug treatment services, an improved connection between the police and the city’s security, and a commitment to seek prohibitive behaviour orders for those who commit crimes that display serious antisocial behaviour in our community. That is not just me or the hundreds of residents saying it; it is the City of Mandurah saying it, together with a number of people who were invited to that closed-door meeting. I was not invited to that meeting. Of course, the minister could not have a dissentient voice in the room. Even after the City of Mandurah made those five demands, we still have not seen a response. It is remarkable that, unfortunately, crime continues to be a significant concern for our community as we stand here in March 2020 after those demands were made in October and the rally was held in August last year.

This is not the first time that I have raised the issue with the Minister for Police. I hope that the minister will give us a genuine commitment today that the government will actually pay some attention to Mandurah and increase the number of police officers in our community. Future conditions are uncertain and the one thing people are very concerned about is their safety and security. Police are at the forefront of that. Mandurah is already suffering from an increased level of crime and is seeing more police removed from its police station. The minister and the government are unwilling to engage with the community and they want to hold closed-door meetings rather than meet with the community. I hope that we see some action on this and that the minister’s contribution today will be earnest and considered and reflect the concerns of the people of Mandurah who have suffered long enough from a government that continues to ignore us and our concerns about crime and antisocial behaviour in our community.

**MRS M.H. ROBERTS (Midland — Minister for Police)** [9.42 am]: What an entirely political diatribe. The member for Dawesville made a few assertions but without providing any evidence to back up what he was suggesting. He continually suggests that crime is going up in Mandurah and that it is somehow a huge crime hotspot in the metropolitan area. That does nothing at all for the reputation of Mandurah. He does not quote any statistics because he is too embarrassed. If he looked at the long-term statistics and saw what has happened to reported crime in Mandurah from year to year, he would see that crime peaked by a long way back in 2015–16, during the last financial year when the former Liberal–National government was in office. The Liberal–National government split the police force into two and took people away from the frontline duties and, effectively, halved the frontline service by putting people into desk jobs—the local policing teams—and had only half the number of police responding to incidents. When the member for Dawesville’s leader—the Leader of the Opposition, Liza Harvey—was Minister for Police, she took away the Mandurah policing district. It lost district status. Mandurah also lost its traffic unit. What has happened since we came to government? We put more resources into the Mandurah district. In fact, we created the Mandurah district. We have a specific focus on Mandurah. With district status comes all the units that a district gets, including, for example, a family and domestic violence team specifically for the Mandurah district. Mandurah would not and did not get that under the former government when the now Leader of the Opposition, Liza Harvey, was Minister for Police. The Mandurah district now also has its own traffic unit.



What we have heard today is a number of anecdotes from victims of crime. For a long time, year in, year out, I have heard very similar anecdotes from victims of crime from right around this state. Whenever any of us put out a questionnaire to our electorates and ask people whether they have concerns about any issues, anyone who has been a victim of crime will list that because anyone who has been a victim of crime is distressed by that. However, the member for Dawesville seeks to use that for his own political advantage.

**Mr T.J. Healy:** It's very disappointing.

**Mrs M.H. ROBERTS:** It is very disappointing. In these challenging times, I would have thought he could make a more sensible contribution to Parliament today rather than try to whip up fear in his community. He talked about me having a closed meeting with the City of Mandurah. My recollection is that there were 20 people around the table, including traders representing the mall. The member complained that he was not invited, but it is not his electorate or shadow portfolio. Why would I invite that loudmouth troublemaker who does not want to make a sensible contribution? I wanted to talk to people on the ground.

**Mr Z.R.F. Kirkup:** Hold a public forum.

**The ACTING SPEAKER (Ms S.E. Winton):** Member for Dawesville, I call you to order for the first time. You will not interrupt.

**Mrs M.H. ROBERTS:** I did not set the terms for this meeting. I understand that the member for Mandurah, who does a fantastic job, and the mayor and others wanted to have a productive discussion with senior police and me, as the minister. They did not want the meeting to be party political. They did not want someone there who was just trying to whip up a story in the *Mandurah Mail*. They wanted a sensible discussion and proactive strategies.

We restructured the police model so that we have more police able to respond to incidents and we restored the Mandurah district with a focus directly on Mandurah. On Monday this week, I had a meeting with Deputy Commissioner Dreibergs. We talked specifically about a range of policing issues and he told me about the success of Operation Heat Shield. Significant extra money has been put into police overtime and police resourcing over the summer period. We know that a lot of people are out and about in beautiful towns like Mandurah during the summer. Whether they are in the mall or on the foreshore, people are out and about enjoying that lifestyle, and over the summer period, that brings with it issues for police. That occurs worldwide. Unfortunately, sometimes when people drink and enjoy themselves outdoors, they get themselves into conflict, so we need a strong police presence. Deputy Commissioner Dreibergs said that the police kept up the additional policing in Mandurah and had excellent results over the summer period of December, January and February. Things are tracking better in Mandurah. Does that mean no-one will be a victim of crime in Mandurah? No, it does not. However, it does mean that compared with the same time last year, we are seeing some significant reductions in crime. We are also seeing a stronger police presence in Mandurah's CBD. Deputy Commissioner Dreibergs assures me that that presence has been maintained across Mandurah. Although the member for Dawesville may have a very negative view, that view is not shared by others. We have continued to resource Mandurah. I note that the peaks in all crimes were achieved during the former government's term in office. Since then, crime has largely come down. We have made a special effort to focus on a range of crimes in Mandurah.

## CABINET-MAKERS — PROGRESS PAYMENTS

### *Grievance*

**MRS A.K. HAYDEN (Darling Range) [9.49 am]:** I thank the Minister for Commerce for taking my grievance today. My grievance relates to the negative impact of the current restrictions placed on small and family run cabinet-making businesses due to the limitation on the amount they can request as a deposit and the inability to receive progress payments. As the minister is aware, we are entering a critical time for small businesses in the wake of the COVID-19 pandemic. Many sole traders and small business operators were already doing it tough and are now facing more hardship, and I have grave concern for all of them. This week, I was disappointed to learn that the state government's stimulus package has overlooked small and family-run businesses, along with sole traders. In response to my question on Tuesday, the Premier said his government would examine measures to cut red tape to support small businesses, but so far, nothing has been done. To me, there is a clear example of what government could do to support small businesses through the proposed amendment to the Home Building Contracts Regulations 1992. It is a frustrating problem with a simple solution that would go a long way in supporting a struggling sector.

I wrote to the minister about this matter on 24 February; however, I am using this opportunity today to raise it directly with the minister. To refresh his memory, currently cabinet-makers are allowed to charge homeowners only up to 6.5 per cent deposit when dealing directly with them for contracts worth over \$7 500 and are prevented from charging progress payments until materials arrive onsite. Unlike other tradies within the homebuilding industry, cabinet-makers largely complete construction within their factories and the materials can be delivered only prior to installation. For example, as soon as a roof carpenter has materials delivered on site, they can start receiving progress payments, unlike cabinet-makers, who build their fittings on their own property and therefore cannot charge progress payments. The effect of this is that cabinet-makers must shoulder the cost of materials, wages and other overheads until installation is complete. They then risk customers withholding payment or delaying installation,

placing many small cabinet-making businesses under great pressure while they wait for payment. The proposed amendment to the Home Building Contracts Regulations will increase the deposit cabinet-makers can charge from 6.5 per cent to 20 per cent, which is strongly welcomed by the Cabinet Makers Association of Western Australia and me, and I congratulate the minister on that. However, the amendment does not address progress payments, which is of great concern within the industry.

Last month, I heard from a cabinet-maker who said he was nearly forced to close his business over Christmas due to two owner builders delaying their installation date by two months. Despite the kitchen, bathroom and laundry cabinets already being built and all appliances and accessories ordered and paid for by the cabinet-maker, he was unable to receive any payment until the installation. According to my quotes, the cabinet-maker said, and I quote —

We had \$400,000 worth of business booked in for the following year, but we still nearly had to shut the doors through no fault of our own.

I had to personally draw money from our home loan to get through until January/February.

Most of the cabinet making industry closes for around 2-3 weeks at Christmas, so all our staff needed to be paid plus all our suppliers.

If we had a further 20% to 30% progress payment system once all materials were ordered and cabinets are being made this would not have been a problem.

While the delay was due to both houses not being ready for cabinetry, rather than being the fault of any particular party, it was the cabinet-maker who had to bear the cost and shoulder this burden due to the delay. If he had been able to charge progress payments at appropriate times such as when materials were delivered to the factory and again once construction was complete prior to a final payment upon installation, the burden on his business would not have been so great and it would still have been an equitable process for his customers. I have heard from a number of cabinet-makers with similar stories and I share their concerns regarding the effect these restrictions are having on their businesses.

Minister, please note that this was before the escalation of COVID-19 in WA. Just this week, I heard from the Cabinet Makers Association that with the impact of COVID-19, they expect many job losses, early retirements and businesses closing within their sector. It will only get worse if immediate action is not taken. The cabinet-makers who had already faced closures over Christmas must now be on a knife's edge from losing their businesses and having to tell their employees that they no longer have a job. Nearly every sector will suffer during this difficult time and it is up to the state government to do everything it can to support those who are most at risk—that is, our small and family-run businesses and sole traders. Every solution needs to be grabbed with two hands and implemented immediately to ensure that our local businesses and the hardworking people they employ can keep going through this time. More needs to be done across the board, but action can be taken to support individual sectors. I am begging the minister to consider amending the Home Building Contracts Regulations to support our tradies and our small family businesses. I appreciate the proposed increase to the limit on deposits, and, again, thank the minister. However, I ask that he also consider allowing businesses such as cabinet-makers to charge progress payments in line with cabinetmaking operations. Please support our small businesses and please support our tradies now. Thank you.

**MR J.R. QUIGLEY (Butler — Minister for Commerce)** [9.55 am]: I thank the member for raising this in Parliament. It is appropriate that she raise it because it is an issue for the industry and the member for Darling Range has properly brought it to the Parliament. The member for Darling Range, in fact, wrote to me by letter dated 21 February 2020, which hard copy was received in the minister's office on 3 March, but an email copy came through just before that. I pride myself on having a policy in my office that all correspondence will be answered within the month because there had been complaints that heads of jurisdictions would write to the former Attorney General and never ever receive a response. I can only put that down to the fact that my predecessor was prescient in relation to COVID-19 and went into self-isolation about eight years ago! However, a serious issue has been raised and requires balance. I had prepared the response to the member for Darling Range prior to me having notice of this grievance this morning and I will sign it and give it to her.

In the construction area, a whole lot of problems with payment have never been attended to and this government is committed to assisting subcontractors and small businesses in this state and will soon be introducing legislation called the security of payment legislation, which will speed up, generally, the payment of subcontractors in home building contracts. However, it does not apply to the residential sector. The problem raised by the member for Darling Range is complex, and this is it: the member for Darling Range has come in here and advocated on behalf of the Cabinet Makers Association of Western Australia. However, on the other end of the scale of justice sits the consumer. When a contract is entered into for cabinet-making, the Home Building Contracts Act limits the deposit to 6.5 per cent of contract. Problem: when cabinets are being constructed offsite, they are not the property of the homeowner, nor are they on the site of the home under construction. When a house is being built, anything attached to the land becomes part of the land, and, if the builder goes broke, he cannot take down his bricks, take them offsite and reverse the delivery. Cabinet-making, which is crucial to the industry, is done offsite. Until it is delivered onsite, and handed over to the builder of the house, be it—what do you call it, an owner-developer?

**Mrs A.K. Hayden:** An owner-builder.

**Mr J.R. QUIGLEY:** Thank you, member for Darling Range.

If it is an owner–builder or whether it be a building company, it remains the property of the cabinet-maker. The owner–builder or the building company has no claim over that. If progress payments are made and the cabinet-maker becomes insolvent, the home builder cannot go to the cabinet-maker and ask for what they have paid for and what the cabinet-maker has done so far, because it is not their property; it has not left the possession of the cabinet-maker.

There is another problem. In terms of progress payments, what staging is there for progress payments? That can be under the contract, of course, as it is in a home building contract when a progress payment is made when the building hits plate high or at lock-up. But there is no realistic chance that the homeowner can access the cabinet-maker's factory to check on the progress of the cabinets and, therefore, they will not know whether they are genuine progress payments. This is a complex area. As the member would be aware, in July 2019, I signed off on the department conducting a review of the situation concerning cabinet-makers. That was decided upon to bring us into line with other jurisdictions. This is not solely a Western Australian problem; it is throughout the jurisdictions. The review showed that other jurisdictions have lifted the deposit to 20 per cent. I also instructed the department to draw up regulations in accordance with that report to bring us into line with other jurisdictions of Australia. I hope to table those regulations—I hope that they are not disallowed—in May. I am told by the parliamentary draftsman that that it is in the queue, behind the animal trespass regulations.

The Cabinet Makers Association of Western Australia has welcomed that, but, of course, is dissatisfied that it will not encapsulate progress payments. At the moment, we cannot see a way around that situation—that is, to introduce progress payments—because the cabinets are three-quarters finished and still remain the property of the cabinet-maker. If the owner makes a payment when the property is still in the factory in circumstances of insolvency, the consumer will lose everything. Those progress payments shift the risk from the cabinet-maker to the consumer, and that is not a step we are ready to take at this stage.

### **TEMPORARY ORDER**

*Motion, as Altered*

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House)** [10.02 am] — by leave: I move —

That if, following agreement with the party leaders or members deputed, the Premier or one member deputed advises the house that it is necessary to pass urgent legislation or undertake any other immediate business arising from or in connection to COVID-19, the following temporary order shall apply —

- (1) bills to be introduced without notice and to proceed without delay between the stages;
- (2) messages from the Legislative Council to be taken into consideration on the day on which they are received;
- (3) on any sitting day, and after first consulting with the party leaders or their representatives, the Speaker may dispense with —
  - (a) the requirement for giving notice for a motion;
  - (b) private members' business;
  - (c) matters of public interest;
  - (d) grievances; and
  - (e) members' statements;
- (4) after first consulting with the party leaders or their representatives, the Leader of the House or a member deputed may set time limits for debates on bills and motions;
- (5) standing orders are suspended accordingly to the extent necessary to effect these arrangements; and
- (6) this temporary order will expire when the Premier or a member deputed advises the house it is no longer required.

First of all, I thank the Leader of the Nationals WA and the member for Dawesville, who was representing the Leader of the Opposition, for the discussions that took place to prepare this temporary order. I want to go through a couple of things about the order so that members are well aware of the intent and practicalities of such an order if, indeed, it is invoked. However, I think all members understand the challenge that our community is facing, be they businesses or particularly vulnerable people in our community—seniors, people with disability, children and young families. Obviously, all of our community is anxious at this time about the COVID-19 challenge as, indeed, ongoing strategies and plans are being revealed by the national cabinet, chaired by the Prime Minister of Australia.

In relation to the challenge, earlier this week this house passed the Supply Bill 2020, which of course was passed by the other place last night. That bill will sit unproclaimed and will be proclaimed only if the current circumstances

interfere with the government's capacity to pass a budget in May. Of course, the Supply Bill will allow supply to continue for government agencies, government employees et cetera to be paid. Of course, in that respect, we reflect on those members of our community who currently are heavily engaged in ensuring that our community is safe and are responding to the medical challenges that COVID-19 presents to them. I think we all have those people very close to our hearts and minds as this COVID-19 circumstance unfolds.

That process is in place. Again, both houses of this Parliament have essentially ensured that supply will continue if the progress of Parliament is interrupted when the government frames its 2020–21 budget. That is in place. Of course, though, there may be circumstances with regard to the COVID-19 situation in which, for whatever reason, this Parliament and this chamber need to convene. In order for that to happen, we need to have in place a temporary order to allow the house to do that in those unforeseen circumstances. The framing of this temporary order will allow that to happen and, importantly—I refer to seeking leave to move this motion in an amended form—that would be through agreement. If we pass this motion—I am thankful that the Leader of the Opposition and the Leader of the National Party have demonstrated their willingness to do so—it is important that all members understand the implications of such a temporary order. The first is, of course, that through agreement with party leaders or members deputed, the Premier, or whomever the Premier has deputed, will advise the house that it is necessary to pass urgent legislation. That urgent legislation would need to be directly related to a circumstance around COVID-19. That is the reason such a measure would be required.

Members will be aware that under the standing orders of this house and, indeed, underpinned by the Constitution of Western Australia, there are some important elements that we need to understand and consider. The first is the standing orders and the operation of the house. In order for this house to operate, it requires a minimum quorum of 20 members, plus the Speaker. Of course, if a suspension of standing orders is moved, it requires an absolute majority, which of course is 30 members. In the normal operations of the house, an intended suspension of standing orders can be dealt with in two ways. One is to give notice, and the other is to seek an absolute majority, which requires 30 members to be present. If 30 members are not present, there is not an absolute majority.

The purpose of this proposed temporary order is essentially to ensure that if this chamber is required to meet to deal with any issues arising from or in connection with COVID-19, it will have the capacity to meet with a quorum of 20 members, plus the Speaker. That would mean that if, after agreement—as highlighted in the first item of the motion—that was deemed appropriate and important, the chamber would be able to be constituted with 20 members, plus the Speaker or a deputed Speaker.

If that situation were to occur, we would also practise appropriate measures in this place. For example, in an operational sense, we might not necessarily require all 20 members to be in the chamber at the one time. The debate might be relatively short. A matter might be agreed upon and debated, the business dealt with, and an adjournment take place immediately, hence item (2) and item (3) with regard to dispensing with the normal practices within the agenda for the sitting of the house. It would allow for the dispensation of the requirement to give notice of motions, private members' business, matters of public interest, grievances, members' statements, et cetera. It would also allow, if the situation became necessary, for the parties to discuss what the composition of the 20 members would be. That would be discussed in the lead-up to, and/or when, this temporary order was triggered. Item (4) of the motion essentially allows me, as Leader of the House, or someone who has been deputed for me, to set time limits for debates on bills and motions, in consultation with party leaders or their representatives. I envisage that would again be an agreed process.

Item (5) of the proposed temporary order relates to the suspension of standing orders to allow these arrangements to be delivered. Item (6) is about the temporary order expiration. On this point, when a temporary order is invoked or passed and operational, the normal period of that temporary order is 12 months. Because there is an implied agreement to the initial part of this motion, there has been agreement with the leaders of the opposition parties that that is also an appropriate item that should stand.

Members, do I envisage this being used? I do not know. I hope not, but it needs to be in place. I ask that members support this motion. It has been moved to allow for the extreme circumstance that this chamber is required to constitute a quorum to deal with an urgent matter relating to COVID-19. I commend the temporary order to the house and ask that we put this in place as soon as is practicable.

**MR Z.R.F. KIRKUP (Dawesville)** [10.15 am]: Minister, obviously, after negotiations, the opposition is in a position to support the motion for the introduction of this temporary order. I appreciate the work that has been done since in heeding the concerns of the Leader of the Opposition and the Leader of the National Party in changing consultation to agreement. We understand that is consistent with what other Parliaments are doing with moving their own suspension of standing orders. However, I have to say that I am slightly disappointed that more government ministers are not in the chamber at this time. We are about to embark upon a significant moment. We know how much has been put into this. We understand how heavily this weighs on members of the opposition. I appreciate that this is now by agreement, and one of the players in that would be the Premier. We are about to embark upon a significant time, if the chamber does agree to this motion. Although there is no set expiration for this proposed temporary order, and I appreciate that a temporary order will expire after 12 months, that is a long time for

something like this to be instituted. It indicates that the Parliament has never envisaged a situation like this before. The Leader of the Liberal Party will also be speaking on this motion. This is an extraordinary time, and, hopefully, we will get through this. However, given that what we are doing will require the unity of the house, I had hoped to see more ministers present, at the very least. This is significant. I hope there will be a similar situation and we will be able to facilitate other bills that may be required, similar to how we dealt with the Supply Bill. That was a remarkable effort. It was done with the unity of all parties, because we know how important this is for the future of our state. This is one of those measures. I agree with the Leader of the House that hopefully we will not need to implement this temporary order. However, if we do need to do that, consistent with where we have been the whole way through in this unusual and significant situation, the government will have the full support of all parties if it is done in consultation, as it has been in this case.

**MRS L.M. HARVEY (Scarborough — Leader of the Opposition)** [10.17 am]: I rise to speak in favour of the adoption of this temporary order. However, as the member for Dawesville has said, I am very disappointed that the Premier is not in the chamber for this debate. I will give my reasons for saying that. This week we have introduced special legislation to ensure that should this Parliament not be able to sit to scrutinise the budget and go through the estimates process, a Supply Bill is in place that will authorise the government, by way of an appropriation through to 31 December, to continue to manage the affairs of state, pay all our public servants and ensure that it can keep the lights on.

This temporary order contemplates the scenario that the Parliament may not sit for a long period. The responsibility of the opposition is to scrutinise and hold the government to account. The opportunity for the opposition to do that is in this chamber. If we are envisaging a situation in which the Parliament will not sit for an extended time, the opportunity for the opposition to do its job will be significantly hindered. Should this chamber be unable to sit because of COVID-19, I would seek from the Premier an assurance that the leaders of the opposition parties in this Parliament, namely me, the member for Central Wheatbelt, and the leader of the Greens in the other place, Hon Alison Xamon, will have regular briefings and updates so that we can understand exactly what is going on and question the Premier on the decision-making around the management of COVID-19 and the decisions the government is making without having to undergo the scrutiny of this Parliament.

The Premier is not here to give us that assurance, but that is my expectation. It is my strong expectation that if the Supply Bill 2020 needs to be enacted, the Premier will take it upon himself to convene regular meetings with the leaders of the opposition parties to provide us with financial updates. We have taken an extraordinary step to allow the government to continue in somewhat of a caretaker mode and have given it an extension of an appropriation without any scrutiny by Parliament of that spending. I would expect, and in fact it is incumbent on the Premier to assure the opposition parties and the community of Western Australia, that he will be transparent and provide us with financial reports and information about how agencies are managing COVID-19 and other government services at a time when we may have rolling lockdowns of services and public places. But the Premier is not here to give that assurance.

**Mr D.A. Templeman:** He is in a meeting with Senator Reynolds.

**Mrs L.M. HARVEY:** Well —

Several members interjected.

**The ACTING SPEAKER (Ms J.M. Freeman):** Members! We have now had that exchange, the ask and tell. The Leader of the Opposition has the call.

**Mrs L.M. HARVEY:** I have been informed that the Premier is in a meeting and that is fine. I understand that Premiers need to have meetings with people; however, it is 10.30 am. We have an entire day of Parliament ahead of us and had I been made aware that the Premier would not be in the chamber for this debate, I would have requested that this debate be delayed until such a time as he was available. It is appropriate that the Premier is here to give me and the Leader of the Nationals WA an assurance that arrangements will be in place should we find ourselves in times when Parliament cannot sit and the opposition does not have an opportunity to challenge the Premier and his ministers on their decisions, that we would have the opportunity to challenge the Premier face-to-face or via video hook-up or whatever it might be, to ensure that there is some scrutiny of the government's decision-making. I do not think that that is unreasonable; I really do not. I have seen some of the members on the other side nod when I mentioned that there should be some scrutiny of decision-making of government. If members were standing in my place—the Minister for Transport might smirk at me—they would demand exactly the same thing. This is an extraordinary temporary order. It is saying that this Parliament can convene with a limitation on the standing orders and with only 21 members present. That is effectively what it says.

**Mr D.R. Michael:** We can do that now!

**Mrs L.M. HARVEY:** No; the government Whip is incorrect. It cannot convene in that way.

This temporary order basically establishes the extraordinary circumstances in which this Parliament can convene with only 21 members present and can debate and pass legislation with only 21 members present. There are 59 members in this place. This temporary order does not contemplate what the proportionate representation of that

membership would be. Thankfully, we have those words “by agreement”, inserted into this temporary order, because if it had been by consultation only, the government could convene with 21 of its own members, and have no-one from the opposition here. That is why we sought to have this temporary order amended to include the words “agreement with the party leaders”, so that we know and are included when this Parliament convenes.

As I said, these are extraordinary times. I am really disappointed that nobody thought that it would be appropriate and important enough to delay this until the Premier could be here to give us an assurance of his very best intentions, which I am sure he has, to only use this in the appropriate fashion should it be required. It would be very gratifying and reassuring for me if I could have the Premier nodding and perhaps even standing in this place and giving his personal assurance to this chamber and to me that he will take those steps to ensure that there is transparency and accountability around the steps that he and his government will take during a potential period of prolonged non-sitting weeks of this Parliament, during which the opposition parties will not have the opportunity to scrutinise those decisions. I would like to move a motion to defer debate on this temporary order until there is an opportunity for the Premier to be present in the chamber.

*Deferment of Debate*

**Mrs L.M. HARVEY:** I move —

To defer this debate on the temporary order until such a time as the Premier can be present for the debate.

**The ACTING SPEAKER (Ms J.M. Freeman):** Deputy Leader of the Opposition, would you like to stand and move that motion?

**MR W.R. MARMION (Nedlands — Deputy Leader of the Opposition) [10.26 am]:** I move —

To defer this debate on the temporary order until such a time as the Premier can be present for the debate.

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House) [10.27 am]:** I highlight to the Leader of the Opposition that the Premier has been meeting through teleconference with Senator Reynolds. I am not sure exactly the details of that agenda, and, as the Leader of the Opposition is aware, we are seeking information about the availability of the Premier at this point. I want to go through the information for everyone here. Before the house rose last night we had discussions with the Leader of the Nationals WA and the member for Dawesville, as the manager of opposition business in this place, with the purpose of framing a capacity for us to have a temporary order regarding COVID-19. This morning I met with the Leader of the National Party and the manager of opposition business to finesse and accommodate the intention of the agreement, rather than consultation. That allowed us to finesse the preamble, if you like, to this particular motion. I understand that the Premier will be present in the house in the next two minutes or so, so I will continue to speak with the forbearance of the Leader of the Opposition and the Deputy Leader of the Opposition. In the event that the Premier enters the chamber, I understand that the opposition will withdraw the motion that I am now speaking to. I see nods in agreement, which is pleasing.

It is important that we continue to have closed discussions and negotiations with all the parties represented in this chamber. I hope that I have demonstrated that in my record as Leader of the House. These are trying times; indeed, as I speak, the federal government is having discussions with the opposition parties to frame similar temporary orders. With the agreement of those political parties, the number of members required to be present at next week’s sitting has been reduced. Federal Parliament is scheduled to sit next week before it adjourns until the federal May budget. Those processes are taking place in that Parliament. My understanding is that yesterday afternoon, Queensland Parliament determined to suspend its sittings. That decision was made by the Queensland jurisdiction.

**Ms R. Saffioti** interjected.

**Mr D.A. TEMPLEMAN:** That is all right. I can talk!

I assure the house in good faith that in protecting the capacity of government to continue to pay public servants—our policemen and women, our frontline hospital service staff, teachers and assistants and other public servants working in important state government operations—the Supply Bill, which was passed by Parliament, was an important decision. As the Leader of the Opposition highlighted in her contribution earlier—I highlight this, too—that bill, having been passed in the upper house, sits unproclaimed until such time, of course, as it is needed. The intention is that we continue with business until such time that we are unable to continue with the business of this house. The Supply Bill will sit unproclaimed until it is required. As I explained earlier, and with reference to some of the comments that have been made, the intention of the COVID-19 temporary order ensures agreement between the parties. We cannot constitute a quorum of 20 members plus the Speaker or an Acting Speaker without agreement. That is what the temporary order will do. Hopefully, that will allay any fears that the government could seek to force a sitting for any reason. Members need to understand that; it is important and it is implied very clearly in the motion.

The Deputy Leader of the Opposition moved to defer debate on the temporary orders motion until such time that the Premier could be present in the debate. As I speak, the Premier is on his way. This is really important. I commend all those in leadership positions across our community—they are across a range of fields, not just the political field—who are faced with very trying and challenging circumstances. As members would be well aware, the Prime Minister, the Premiers and the Chief Ministers formed a national cabinet, which is an unprecedented move. I know that the

discussions of that cabinet are based on good faith. The commonwealth, the states and the territories will work with their priority being the best interests of Australians, whether they live in rural and remote Western Australia, our country towns, regional cities and centres or the metropolitan areas of the states and territories. I commend them. I commend the leaders from all sides of politics.

In my portfolio area, local government leaders across our state are also now charged with the responsibility of being a locally elected council or shire president or mayor. They have a very difficult role to play because they are dealing with a range of challenges in their community. I acknowledge the tremendous effort of so many of our local government leaders in that respect. We also have community leaders in other fields, not just the political field. I refer to the people who are making decisions in our hospitals and medical centres, the doctors and nursing staff; people who are making decisions in business and small business about the welfare of their workers; and, of course, people making decisions in the community, such as those in not-for-profit organisations and our schools. We all know the pressure that our principals, senior teachers, teachers and education assistants are under to meet the policy of ensuring that our schools stay open, which is an agreed and universal decision.

I commend the leadership across Australia as we face the challenge of COVID-19. I acknowledge that this is a combined and collaborative effort across Australia. I welcome the Premier on his arrival in the chamber. Just so that the Premier is well aware, I moved a temporary order motion, on which there has been some debate. Members opposite have raised queries and sought assurances, which resulted in the Deputy Leader of the Opposition moving to defer the debate on the temporary order until such time as the Premier could be present. I think there is agreement that when I sit down, the opposition will withdraw the deferral motion, which will then allow the debate to continue, to which the Premier can listen and respond.

**MRS L.M. HARVEY (Scarborough — Leader of the Opposition)** [10.38 am]: Thank you very much, Leader of the House, for your consideration of our concerns.

I want to speak briefly on this motion to defer the Leader of the House's motion to adopt a temporary order, and when I sit down, my deputy leader will seek leave of the house to withdraw this motion to defer the debate, and we will go on with the original motion. I appreciate that the Premier changed his plans to be in the chamber for this debate. We are in uncharted waters here in Western Australia. As I was saying earlier, this week we passed legislation to allow for guaranteed supply and appropriation, extended through to 31 December, to ensure that the government can continue its business operations should Parliament not sit for the budget and budget estimates process and therefore be in a position in which it is not guaranteed supply. The opposition parties in this house and in the other place have unanimously agreed to support the Supply Bill in these unusual circumstances that we find ourselves in because, obviously, we need the government and its agencies to continue with their very important work as we battle the issue of COVID-19 in our community and the subsequent disruption to services, businesses and our community as a result of this virus outbreak.

I draw members' attention to the COVID-19 temporary order motion on which we sought to defer the debate. The adoption of such a temporary order in this chamber has, to my knowledge, never occurred in the Parliament of Western Australia. We have never had a situation in which this Parliament has agreed to adopt a temporary order of this nature to allow, by agreement with the two opposition parties, the Parliament to meet with a truncated series of standing orders and a quorum of 21 members, rather than with the full Parliament. It is, effectively, what this temporary order will allow for.

In those circumstances, the reason I wanted the Premier in the chamber for this debate was to seek assurances from him that should we find ourselves in the circumstances in which we are indeed going to convene by agreement under this temporary standing order, we would have proportional representation of all the parties as part of that convening of Parliament. I seek the Premier's assurance that that will be guaranteed. I seek the Premier's assurance that should we go through a period when the government is effectively operating in caretaker mode, under the provisions of the Supply Bill, the opposition parties would be kept informed of the spending decisions of the government. The reason I wanted the Premier in the chamber—what I am seeking from him—is that I am seeking some assurance that should we end up being in the position in which the government is operating under the Supply Bill, under caretaker conventions, the Premier would have regular meetings and updates with me, as the Leader of the Liberal Party in opposition, the member for Central Wheatbelt and the leader of the Greens, Hon Alison Xamon, from the other place. If the government is operating under caretaker provisions for an extended period when this Parliament cannot sit, the opposition will have no other opportunity to scrutinise or challenge the decisions of the government or, indeed, to even inform ourselves of the financial management and spending decisions that the government might make.

I do not know whether the Premier is even listening to what I am saying and whether he understands what I am asking for, because he is not listening to me.

**Mr M. McGowan:** I'm listening.

**Mrs L.M. HARVEY:** I really feel quite offended, Premier. I am just asking a few simple questions, and you are not listening to what I am asking you, which is exactly the reason that I wanted you in the chamber. I think I am wasting my time, members.

Several members interjected.

**The ACTING SPEAKER:** Order!

**Mrs L.M. HARVEY:** As part of this debate, I ask whether the Premier could please stand up and, in his contribution to the motion to adopt this temporary order, inform us of the arrangements for the opposition parties to be informed of the government's decisions and spending decisions during an extended period of the Parliament not sitting, and what opportunities the Premier will provide to the opposition for regular briefings and to challenge those decisions if indeed they need challenging. Will we be provided with financial reporting during an extended period of a caretaker convention if we do not sit for the estimates process and pass the budget? What arrangements does the Premier envisage will be put in place should we find ourselves in the extraordinary circumstance in which Parliament does not sit for an extended period and the opposition is not able to appropriately scrutinise the decisions of the government? I hope that the Premier has some ideas in his head about how this will be managed in the future, given the extraordinary times that we find ourselves in in adopting a temporary order that is unique and has never been contemplated by this Parliament in its history.

**MR W.R. MARMION (Nedlands — Deputy Leader of the Opposition)** [10.45 am]: I moved a motion to defer the debate on the motion to adopt the temporary order because the Premier was not present. He is now present, so I seek leave of the house to withdraw my motion.

Deferment motion, by leave, withdrawn.

*Motion Resumed*

**MS M.J. DAVIES (Central Wheatbelt — Leader of the Nationals WA)** [10.46 am]: I am speaking to the motion to adopt the temporary order, and I rise to add my support and contribute to what we are being asked to consider today.

I think we, on this side of the house, have been very accommodating in a very short time. We completely understand that this is a moving feast and a serious issue that needs to be dealt with by the government, which needs the flexibility to do that. I thank the Leader of the House for engaging us and reaching out last Thursday to the manager of opposition business and me, as the Leader of the Nationals WA, to start the conversation. Indeed, that was when the Supply Bill was mooted in terms of how we manage the functions of this house to ensure that if the government required it, it would be able to continue to pay the people we need to keep the state moving.

At that point, there were discussions around what would happen if Parliament was pared back or there was an inability to pull people in as a result of them needing to self-isolate, or simply if the government and the experts who we are taking advice from made the decision that we can no longer meet. At that point, it was a conversation very early on in the piece—that was last Thursday. Things have clearly escalated from then to now. Last night, we had a discussion with the same group of people about temporary orders, so I do not think that anybody on this side of the house can be accused of not trying to accommodate the government or be of assistance, and we are certainly not trying to take a political view on this. I would point out at the beginning of this debate, which was brought on by the government and the timing of which was chosen by the government, that some of this could have been avoided had there been some thought about the fact that we were being asked to do something unprecedented. This has not been considered by this place before and so it is right that we have a majority of members in the house and the leadership of the government, in particular.

As the Leader of the Nationals WA, I am bombarded by questions—I am sure members sitting on the front bench of that side are getting it as well—on a daily basis: What is going to happen? When is it going to happen? What happens if the government is unable to meet and Parliament is unable to form? How will we be informed and what role do we have? I acknowledge that the government needs to be able to act swiftly and responsibly to anything that is changing on a daily basis. I echo the concerns that have been raised by the Leader of the Opposition. We would like to have that conversation about temporary orders outside of the debate, but there are limited opportunities for us to raise these issues. In the event that there is a pared-back meeting of the Parliament and we see fewer opportunities for us to raise these concerns, we would be looking for an ongoing mechanism to meet with the government to make sure that we are doing our duty and are able to assist. We genuinely want to assist to make sure that we can disseminate information accurately and provide feedback to the communities that are reliant on us. I am sure that all members of this Parliament are in the same position.

I go back to the point that when we started this debate, it was attended by the Leader of the House and the manager of opposition business, a majority of members sitting on this side of the house, and not many others. We understand that there are significant calls on the Premier's time, but this debate was brought on by the government, and it could have controlled its timing. I really do not want to hear that the manager of opposition business or we are trying to be difficult in this, because this is something that the government has control over, and we are at the mercy of the people who set the agenda for this place. That being said, we do not want to stand in the way of this temporary order being passed. We are very happy for it to go through. We acknowledge that the Leader of the House has been accommodating in moving from consultation with the Leader of the Opposition and the Leader of the Nationals WA to agreement, and we thank him very much for that. We look forward to working collaboratively as we move forward.



**MR M. McGOWAN (Rockingham — Premier)** [10.50 am]: I want to make a few comments in my contribution to this debate. This is a temporary order to allow changes to the standing orders of Parliament, meaning that, with agreement from the Leaders of the Liberal Party and the Nationals WA, if it is necessary to pass urgent legislation or undertake any other immediate business arising from or in connection with COVID-19, we can suspend some of the time periods around the introduction of legislation, and we can dispense with matters such as private members' business, matters of public interest and grievances from ordinary business, with agreement from the Liberal and National Parties. This is not something the government would do unilaterally; it would be with the agreement of members opposite. As I understand it, the Leader of the House spoke to the Leaders of the Liberal and National Parties yesterday, and they were in agreement with this approach.

Ordinarily, changes to the standing orders can be a long process, with the agreement of the houses and all the parties—sometimes they work; sometimes they do not—but this is just a temporary order in the circumstance that we need to pass something urgently. That is all it is. I do not personally think it is the most extreme of arrangements, simply because it would be with the agreement of the Liberal and National Parties. If they do not agree, it will not happen. That is all it is.

I have a short anecdote. When I first arrived here, every week there was a temporary order put in that whatever legislation was nominated for that week and on the notice paper would pass on Thursday evening irrespective of whether it was debated. That is what the Liberal government of Richard Court and the like did back in 1996 to 2000. They had a list of legislation at the start of the week; whether or not it was debated, it was passed in the house. I would have thought that was far more extreme than what we are attempting to do in the current circumstances.

Just to let members know, I have been dealing this morning with matters surrounding COVID-19. I have been in a teleconference as a member of the national cabinet whilst members opposite have been demanding my presence here, and I have been dealing with a range of other matters to ensure in particular that our charities and organisations are properly funded and supported during this crisis. They are some of the matters I have been dealing with this morning whilst members opposite have been requesting my presence. Obviously, considering the fact that the Leader of the House had the agreement of the Liberal and National Parties on this measure, we naturally thought that members opposite thought this was a sensible thing to do, because it requires their agreement.

I turn to other matters. The Leader of the Opposition asked that if people have to leave Parliament, it be proportionate. Obviously, the government is of the view that we need to be very generous with pairs if people are unwell or have issues of that nature, and that is obviously the approach we would adopt. In terms of being proportionate with the numbers in the house, we have to retain a quorum in the house, so proportionality could mean we go below a quorum. I just let members know that. Clearly, we have to retain a generous and fair pairing arrangement, which we are more than happy to do. Obviously, the government has a large majority, so it is not a particular issue to do that, but if we are required to be proportionate and we go below a quorum, the Parliament cannot sit, and clearly that is not something we can do.

The Leader of the Opposition asked that the opposition be informed about matters. I rang the Leader of the Opposition on Sunday and offered briefings. Briefings will continue to occur. Obviously, I need to be careful that senior people are not taken away from their day-to-day functions unnecessarily, but I am more than happy to provide briefings to the opposition, the Nationals WA, the Greens and the like if they require briefings. We will do that as required. All they need do is ask. I am aware that the shadow Minister for Health has been offered seven or eight briefings—I am not sure how many, but a whole range—that the Leader of the Opposition is more than welcome to attend. That is something the government has done for the opposition.

On the broader issue, my view is that Parliament needs to continue to sit. We need to sit. We need to lead. We need to set an example for our community. We cannot have everyone leave work in Western Australia. We cannot have government departments shut down. We cannot have essential services stop operating. We cannot have our schools and hospitals stop operating. We, as Parliament, need to lead and set an example for the community. We need to do it. We are elected representatives of the community. We need to keep our electorate offices open. We need to ensure that the Parliament continues to sit and provides that example to the community, because if we do not do it, how can we expect other people in the community to do it?

My view is that Parliament must continue to sit. We need to keep doing our jobs and set that example for the rest of the community. I want our agricultural industries, construction industry, factories, mining industry, government agencies, electricity utilities and water corporations to continue to operate. We need to set the example. I am as one with the Prime Minister on this. We as a country need to continue to operate and to work; and, if we do not, there will be bedlam in our community. I want kids in hospital to continue to receive medical attention. I want people going to hospital to continue to receive medical attention. I want kids to continue to go to school where they are safer than if they are not. That is what we need to do. Let us set the example in this Parliament. Let us make sure that we provide assurance to the people of our state.

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House)** [10.57 am] — in reply: I would like to close the debate by thanking all members for their contributions.

**The ACTING SPEAKER (Ms J.M. Freeman):** Does anyone else want to speak?

**Mr R.S. Love:** I wanted to speak.

**The ACTING SPEAKER:** I gave the Leader of the House the call, but I am told by the Clerk that I should give the member for Moore the opportunity to speak.

**MR R.S. LOVE (Moore — Deputy Leader of the Nationals WA) [10.57 am]:** Thank you, Leader of the House, and Madam Acting Speaker. I want to reiterate the support of the Nationals WA for what has been put forward, but I point out to the Premier that the earlier notice of motion on the notice paper had “consultation” with the Leader of the Nationals WA and the party leaders, and that has now changed to “agreement”. That has changed, and I think it needs to be pointed out.

I refer to the statement the Premier has just made about keeping things open and working. There is no intention by anybody on this side to try to shut things down or to hold anything up. We will be keeping our electorate offices open and continuing to represent our communities and electorates as best we can throughout this very difficult period. It is not just on the Premier’s side of the house that that is the intent. We will certainly be working hard to represent our communities. All that the member for Central Wheatbelt and the Leader of the Opposition have asked for is that the information be disseminated to our people to ensure that they are getting correct, up-to-date information with which we can then assure our communities and take our part as leaders within our community. With that, I thank you very much for the opportunity to speak.

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House) [10.59 am] — in reply:** I simply thank all those who have contributed to the debate. This is an important temporary order that will now be put in place. We hope we do not need to use it, quite frankly, but if in some circumstance it is required, we now have provision for that in our standing orders, and I commend the motion to the Parliament.

Question put and passed.

#### **TRANSPORT LEGISLATION AMENDMENT (IDENTITY MATCHING SERVICES) BILL 2020**

##### *Introduction and First Reading*

Bill introduced, on motion by **Ms R. Saffioti (Minister for Transport)**, and read a first time.

Explanatory memorandum presented by the minister.

##### *Second Reading*

**MS R. SAFFIOTI (West Swan — Minister for Transport) [10.59 am]:** I move —

That the bill be now read a second time.

The Transport Legislation Amendment (Identity Matching Services) Bill 2020 will implement the Intergovernmental Agreement on Identity Matching Services, which was endorsed by the Premier and other first ministers at the special meeting of the Council of Australian Governments on counterterrorism on 5 October 2017.

**The ACTING SPEAKER:** Members, if you have some very important conversations to have, you do not have to do that in the chamber. Please allow the minister to make her speech.

**Ms R. SAFFIOTI:** The agreement establishes the national facial biometric matching capability and the national driver licence facial recognition solution, providing a suite of biometric tools referred to as identity matching services. The national driver licence facial recognition solution will act as a central interoperability hub for a driver’s licence and related information from WA and other states and territories, transmitting matching requests from participants to the facial image database. The solution will not hold identification information. The national facial biometric matching capability, of which the solution is a part, will also connect to passport, visa and citizenship images and information held by the Department of Home Affairs and the Department of Foreign Affairs and Trade.

The bill will amend WA’s road laws—the Road Traffic (Administration) Act 2008 and the Road Traffic (Authorisation to Drive) Act 2008. It will also amend the Western Australian Photo Card Act 2014. This will allow the Department of Transport to contribute Western Australian learner’s permit, driver’s licence and photo card facial images and information along with identifying information, such as name and address, to the national driver licence facial recognition solution.

Identity matching services will allow members of the community, with their consent, to quickly and easily have their identities verified when engaging with government, for example, when applying for a driver’s licence, learner’s permit or photo card, by matching their facial images with images on official records. Identity matching services will also benefit victims of natural disasters who have lost their identity documents.

Western Australia’s ability to access identity matching services, enabled by this bill, will help deter crime, prevent identity theft and provide law enforcement agencies with a powerful investigative tool to identify people who may be associated with criminal activities. Identity crime is one of the most common and costly crimes in Australia, with around one in 20 Australians becoming a victim of identity crime each year, with an estimated annual cost of \$2.2 billion. Identity matching services will also help Western Australians who have become victim to identity theft more easily restore their compromised identities.

Identity matching services will help prevent and detect the use of fake or stolen identities, which can be key enablers of fraud, organised crime and terrorist activity; and protect Western Australians by making it easier for law enforcement agencies to identify people who may be of interest in relation to criminal activities. The identity matching services will use sophisticated, secure facial recognition technology to streamline existing, resource-intensive manual processes for verifying known persons' identities and identifying unknown persons. This will speed up and improve the provision of customer service and law enforcement investigations. The current document verification service, hosted by the commonwealth Department of Home Affairs, cannot detect documents such as a driver's licence that contains a fraudulent photo but a legitimate name and address. Nor can it identify an unknown person from a facial image. The document verification system is currently used by WA law enforcement agencies and the private sector to verify identification information on a driver's licence and other government-issued identity documents.

Identity matching services will also improve road safety by increasing the detection and prosecution of driving offences by making it harder for persons to obtain a driver's licence with false identities to avoid traffic fines, demerit points and licence cancellations.

Existing road laws and photo-card legislation provide strict conditions around how facial images and identifying information are collected, stored, used and disclosed, to ensure the privacy of Western Australians is protected. Current legislation permits release of individual facial images upon request to the WA Police Force, the Australian Security Intelligence Organisation, and, with the prior approval of the Commissioner of Police, prescribed law enforcement officials.

While the bill will expand disclosure provisions, it will provide strict conditions around how facial images and associated personal information will be disclosed via identity matching services. Department of Transport customer information will be subject to strong safeguards through legally binding identity matching services documents called participation agreements, and participation access arrangements. These will be signed by senior representatives of other states and territories before access is granted to Department of Transport customer information.

The national driver licence facial recognition solution has been designed and built with robust privacy safeguards in mind, and has been subject to detailed privacy impact assessments and data security assessments. Information will only be accessible by authorised agencies and by individuals within those agencies who are also appropriately authorised and have undertaken required training, and will be subject to a robust compliance framework and independent oversight.

The identity matching services cannot be used to conduct real-time monitoring or live facial recognition of people in public spaces—sometimes referred to as mass surveillance, or identify people to investigate minor offences, such as jaywalking or littering.

This will enable participating government agencies to verify a known identity with the consent of that customer. Due to strict privacy protections in the Commonwealth Identity-matching Services Bill 2020, only agencies with law enforcement, national security or anti-corruption functions will be able to establish and verify an unknown identity by searching multiple identities on the database. The bill also supports this government's 2017 Public Sector Service Priority Review and ServiceWA (Digital) Program; for example, with customer consent, enabling the use of Department of Transport licensing information for other approved government purposes, such as sharing a person's change of address with approved state government agencies.

I commend this bill to the house.

Debate adjourned, on motion by **Mr A. Krsticevic**.

## FINANCIAL LEGISLATION AMENDMENT BILL 2020

### *Second Reading*

Resumed from 18 March.

Question put and passed.

Bill read a second time.

Leave denied to proceed forthwith to third reading.

### *Consideration in Detail*

**Clauses 1 to 12 put and passed.**

**Clause 13: Part 3 Division 7 inserted —**

**Mr D.C. NALDER:** Clause 13 is about financial difficulty. How will financial difficulty be measured because that does not appear to have been defined at all? Does there need to be some clarification in this space to understand how this will be applied?

**Mr B.S. WYATT:** That is a good question. Financial difficulty, or insolvency, is when an agency is faced with a situation that impacts its ability to meet its financial obligations as and when they become due and payable. I suspect that the member will be familiar with that definition from his previous role. When this occurs, an agency must consider whether there are reasonable grounds to suspect that the agency is insolvent or has become insolvent as

a result of incurring new expenditure debt. Again, the member will be familiar with some of this from his role in the banking sector. Assessing solvency can be a complex task, requiring consideration of the circumstances affecting the agency; the financial strength of the agency, including the level of government funding, the level of own-source income—for example, user charges’ revenue from rendering service, liquidity and projected losses. At common law there are two tests to measure solvency: cashflow assessment, which is the commercial solvency test that involves an assessment of the ratio of current assets to current liabilities; or balance sheet solvency, or financial solvency—that is, the net assets of the agency to the amount owing to the creditors to determine financial sustainability into the future. Insolvent trading provisions of the commonwealth Corporations Act do not apply to statutory supports established under state statute, as they are not corporations for the purpose of that act. Unsurprisingly, the area that I have found in which agencies have perhaps got into difficulty and not understood business is not so much the level of government funding—that is clear at each budget round—but it is usually around projected losses or their own source revenue; to be honest, simply being misguided about how they assume those revenue sources grow.

**Mr D.C. Nalder:** Growth assumptions.

**Mr B.S. WYATT:** That is correct.

**Clause put and passed.**

**Clause 14: Section 53 amended —**

**Mr D.C. NALDER:** I cannot see anything specific on what financial targets need to be met. I seek clarity on that.

**Mr B.S. WYATT:** That, again, is a good question. It is deliberately not defined, because they will effectively fall out from agreement been the minister, Treasurer and agency—the accountable authority.

**Mr D.C. Nalder** interjected.

**Mr B.S. WYATT:** That is correct, but all of them will not be identical; some agencies will have different financial targets than others. However, those targets will be set out and agreed to in the resource agreements between the Treasurer, the minister and the agency. They are not set out in the legislation. It is not stipulated specifically because there has to be flexibility in different agencies.

**Mr D.C. NALDER:** Can I also seek clarity around the definition of “resource agreements” because it is mentioned. Are resource agreements financial agreements or salary agreements or something along those lines? What is the definition of “resource agreements”? That is what is being referred to here and I want to make sure that we are clear on that also.

**Mr B.S. WYATT:** The legislative framework for resource agreements is currently prescribed in sections 41 to 46 of the Financial Management Act. A resource agreement is the extract of the agency information in support of the estimates—otherwise known as budget paper No 2—and is prepared as part of the budget process. A resource agreement is a record of the obligations of the accountable authority, the minister and Treasurer, for the budget year including operating with the approved expense limit and meeting financial targets such as working cash limits, salary expense level and total equity. The amendments tighten up that resource agreement and the obligations. That is the point of it.

**Clause put and passed.**

**Clauses 15 and 16 put and passed.**

**Clause 17: Section 85 amended —**

**Mr D.C. NALDER:** This clause is quite simple. I know that it is a statutory change so a review of the act occurs every 10 years and not every five years. I would like to know the justification behind this change.

**Mr B.S. Wyatt:** Moving from five to 10?

**Mr D.C. NALDER:** Yes. I do not have a problem with this, and it is probably the right thing to do from a statutory perspective. But, in my understanding, it will not stop the minister from undertaking their own ordinary review at any one time. That is my understanding. I just want clarification on that.

**Mr B.S. WYATT:** That is exactly right. The member effectively has answered his own question. However, we also found that the review in 2012 did not lead to legislative change. I made the point yesterday that Parliament has limited time, so these sorts of changes rarely get their time in the sun. Therefore, we have effectively ended up with a 10-year review in any event. That is why the proposal now to move to 10 years is more likely to get parliamentary time once a decade than once every term, which is what we are looking at. Having said that, ministers of the day can conduct their own reviews and, to be honest, can do broader reviews than the FMA stipulates anyway. Section 85 is quite limited in any event, based on two questions: do we still need the act and how can we make it more effective?

**Clause put and passed.**

**Clauses 18 to 23 put and passed.**

**Title put and passed.**

Leave granted to proceed forthwith to third reading.

*Third Reading*

**MR B.S. WYATT (Victoria Park — Treasurer)** [11.19 am]: I move —

That the bill be now read a third time.

I thank all members of the opposition, the member for Bateman in particular, for their support for the passage of this bill. I made the point in the second reading debate that the opportunities to make these amendments are few and far between, mainly when we can find some parliamentary space. I also thank all those members of Treasury and Finance who were part of the work on both the 2012 review and the 2017 review for getting us to this place.

Question put and passed.

Bill read a third time and transmitted to the Council.

**HEALTH SERVICES AMENDMENT BILL 2019***Second Reading*

Resumed from 30 October 2019.

**MR Z.R.F. KIRKUP (Dawesville)** [11.20 am]: I rise to talk to the Health Services Amendment Bill 2019. I appreciate that the Minister for Health is not in the chamber because he has other urgent business and significant issues to attend to, and I put on the record my appreciation for the fact that he has spoken to me about that.

I note that the opposition is in support of this legislation. Therefore, my speech today will be in the context of health issues more broadly. I have very few concerns about the Health Services Amendment Bill. The bill addresses largely operational, legal and accountability issues. That makes a lot of sense and reflects the work that was done in 2016 when the previous government introduced what was a fairly hefty bill that significantly changed the governance models for the running of our hospitals. That was a good piece of legislation. A lot of issues are being fleshed out now, and, for the most part, the Health Services Amendment Bill 2019 seeks to enshrine that.

The bill seeks to amend a range of different acts, namely the Health Services Act 2016, the Mental Health Act 2014, the Motor Vehicle (Catastrophic Injuries) Act 2016, the Queen Elizabeth II Medical Centre Act 1966 and the University Medical School, Teaching Hospitals, Act 1955. I looked at all those acts as part of putting together the opposition's position on this legislation. I found it interesting that the proposed amendment to the University Medical School, Teaching Hospitals, Act 1955 is simply to delete the word "State" and insert "Senate". We see that all the way through this legislation. The theme of this legislation from where I stand is largely technical and administrative in nature. There are also some issues with integrity and accountability, and conflicts of interest. Those changes are very good and will help strengthen and empower our hospital system and those who operate within it, specifically health service providers, to ensure they can continue with their good work with greater certainty and surety.

I also find interesting the ambiguities that have arisen under the Health Services Act, which this amendment bill seeks to tidy up. One of the things that struck me was the Queen Elizabeth II Medical Centre site itself. The minister in his second reading speech referred to the different ownership arrangements at that site. That is empowered by the Queen Elizabeth II Medical Centre Act 1966. One opportunity that has been raised with me recently is whether more centralised planning should take place at that site. One of the issues that the now Minister for Health raised when in opposition with the former Minister for Health was the previous government's decision to establish the multistorey car park and let out its operation to a private operator. A lot of that revenue goes back into the maintenance of the QEII site. Apart from the ambiguities that the legislation seeks to clarify, there is an opportunity for us to look at better planning for car parking. One of the issues that is most often raised with me, and undoubtedly also with the now minister, is that there is never enough car parking at hospitals. That seems to be always an issue. I like the idea of setting up a metropolitan redevelopment authority-type arrangement for the QEII site. There are a lot of different players on that site. I am not sure how many local governments sit over the QEII site and whether they have a role to play. I like the idea of central planning for that site. I like planning as an area anyway —

**Ms R. Saffioti:** You should be the shadow Minister for Planning!

**Mr Z.R.F. KIRKUP:** I am very happy with Health.

There is an opportunity to look at whether the planning at QEII can be better managed. Car parking and transiting through that site is always a challenge. The people who are in charge of that do a great job, but if that was bolstered by the sort of experience that was conferred to the former metropolitan redevelopment authority, now DevelopmentWA, that would be good.

**Mr R.H. Cook:** If you are open to interjections, I am happy to provide them.

**Mr Z.R.F. KIRKUP:** I am open to the conversation, minister.

**Mr R.H. Cook:** Part of the issue around parking is that it is restricted by the Western Australian Planning Commission, which has basically put a limitation on the number of car parks at that hospital, I am sure for a whole

bunch of very important reasons. In terms of local government interaction, one of the outcomes of the local government reform process by the previous government was a minor redrawing of the boundaries of the City of Perth, the City of Subiaco and the City of Nedlands, and there might have been another one, all of which impacted on the QEII site. I think some of that stuff was refined with some minor border changes.

**Mr Z.R.F. KIRKUP:** Although I was not the local government adviser to the former Premier, I remember that one of the examples that he used was the intersecting points at which there was no lack of local government authorities.

We support the government's decision to move the new maternity hospital to the QEII site. However, that will make it a larger site for the provision of health services. An immense number of services are already offered at that site. The reality is that the addition of the new maternity hospital, whatever that model will look like, will create even more demand on that site. If in the future I was given the good grace to be in the minister's chair, I would look at having an agency that had the authority to come in over the top, like a mini MRA model. It is relatively small and technical in nature, but the reality is that if the Minister for Planning changes the alignment of a road or adds a number of car parks, it significantly changes the use of sites such as that. It is not unusual for that to be done. Therefore, I am not surprised that the ambiguity with regard to the ownership arrangements has been clarified as part of this bill. It is a good option to streamline that going forward.

One of the other new powers that this bill seeks to provide is to make sure that health service providers can collaborate on procurement, which makes a lot of sense. Health service providers, from where I stand, have their own individual governance arrangement in the frameworks that exist, and I like that idea, so long as there is the right level of integrity around procurement and what that looks like. There have been issues in other places across the north metropolitan area, as a recent example. We should try to use the size of the system, more broadly speaking, to bring about better procurement options. We have common use arrangements already, but if there is an opportunity for health services to, I suppose, stitch together their procurement requirements, that is a good thing. It is good for this bill to provide the new powers to negotiate and manage whole-of-health contracts like that.

I was particularly pleased to see the new integrity and accountability arrangements, particularly for board members to manage conflicts of interest. We have been dealing with the minister more recently on another piece of legislation that is in the other place—the Western Australian Future Fund Amendment (Future Health Research and Innovation Fund) Bill 2019—and some issues have been identified with conflicts of interest. We have looked at it in strength. There are moves afoot in the upper house by the Greens at this point to move amendments to strengthen the bill's conflicts of interest processes and declarations, in particular for those who administrate the board that administrates the future health fund. Any move we can bring about to help publicly disclose conflicts of interest for board members is a good thing and the ability for the public to scrutinise that, to make them accountable, is a measure that should be invested in by any government. I always get a bit frustrated when conflicts of interest arise for board members. A range of issues have recently been discovered by the media. The minister is held to account for that, and rightly so, but the board member never disclosed it in the first place, or it was never properly dealt with in the public realm. The idea of actively publishing information on conflicts of interest, which was raised in a briefing with the minister, is a good thing, and it should be open to inspection by any member of the public. When we submitted FOI applications about conflicts of interest for board members, we would often get information back that is redacted because it is personal information, either financial or commercial in nature. We do not get any exposure to it at all. Then of course we put the question to the minister and similar issues arise. The ability to have conflicts of interest go perhaps one step further than what the bill anticipates, and allow for perceived conflicts of interest to be publicly available somewhere in a central register or something like that would be a good thing, because it would help ensure the integrity that this bill already seeks to reinforce for board members.

I found the lack of disclosure of gifts for board members interesting. One of the examples that we asked about in our briefing was effectively, "Could a board member get a Jaguar, or a very expensive car, and not have to declare it as a gift?" At the moment, they would not. This bill brings about some important oversight functions.

I would like to recognise the arrival and since departure of the federal member for Canning, Andrew Hastie, who is visiting the Western Australian Parliament. I share his division as a member of the Peel region. I am very pleased to see the member for Canning here. Thank you.

**The ACTING SPEAKER (Mr T.J. Healy):** Hear, hear!

**Mr Z.R.F. KIRKUP:** I find it interesting that the issue of gifts was not anticipated in the 2016 legislation. I am really pleased to see that it has been dealt with and strengthened quite significantly. It is only fair and reasonable that gifts should be disclosed. A threshold exists for that now. I also appreciate that the legislation provides greater clarity for the minister to dismiss a board member. That makes a lot of sense. Perhaps the previous legislation was so comprehensive and substantial in its establishing HSPs, which was such a shift in how we do business across the health system, that it was not looked at at the time, but it is really good that the minister's powers will be clarified in their ability to dismiss members of boards. That makes a lot of sense to me.

We have discussed this bill together with a range of stakeholders, and for all intents and purposes, it seems as though it is very well supported across the broader health community. I did not have a lot of objection from anybody. When

we get there—I do not suspect for a moment that will be today; who knows where we will be in a number of weeks—I intend on going through the consideration in detail stage, probably not as extensively as we did with the future health fund and voluntary assisted dying legislation, but we will go through some clauses that seek some clarity.

**Mr R.H. Cook:** The amount of scrutiny on the previous bill worked for me.

**Mr Z.R.F. KIRKUP:** Is that the future health fund bill?

**Mr R.H. Cook:** No—the Financial Legislation Amendment Bill. That was a little 20-minute job. That'd be good.

**Mr Z.R.F. KIRKUP:** Is that the Financial Legislation Amendment Bill? We went through it very quickly. I will always be conscious of the minister's time.

**Mr R.H. Cook:** Not at all.

**Mr Z.R.F. KIRKUP:** I appreciate that. We will go through the process of consideration in detail.

An issue that was raised with me that we sought some clarity on during the briefing—I appreciate the health officers who are here to assist the opposition with legislation and the briefings that were held—about capital works capabilities. I am always very conscious that we should probably have the best people in government delivering large projects, especially those that might be high risk, such as hospital commissions or anything like that. I will seek some further information during the consideration in detail stage, although it is very well defined here now, to push a little about what that looks like and why the change of different powers that exist for capital works programs was brought about. I expect that strategic projects would still be involved if it was a large hospital commission or something like that.

I will not take particularly long on this contribution otherwise—I note that I have 45 minutes on the clock—and it is a good opportunity to talk about health, which I will take on, but I want to quickly set aside any other concerns that I might have with the Health Services Amendment Bill. This bill makes a lot of sense. I believe that it builds upon the good work of the previous government that brought about significant changes, especially of the health system and how it is governed. I quite like the HSP model, for the moment. I quite like there being north, east and south metropolitan health services. I remember when this idea was first proposed when I was an adviser to the former Premier. I was very keen to see an East Metropolitan Health Service provider established as a jurisdiction. I grew up in Midland, and I was always very concerned that health was initially just north, south and country. I was very keen to see the East Metropolitan Health Service established. I know that the former government was, which is why we now have east metro. Places such as Midland and the eastern suburbs deserved a seat at the table that was not just subsumed within the northern jurisdiction. I really appreciate that and the HSP model that we have now works really well. It can be tightened, and I appreciate that the government has turned its mind to that, and that we are triggering the bill with the sense of priority that it deserves. At a time like this, with COVID-19, I think members would want to make sure that everybody in the system is properly empowered to go about their business as much as possible. We do not want to leave any sense of ambiguity or lack of surety about the operations of the health system. As I said, we will go through to the third reading stage, and I am really pleased that the government is treating this with the seriousness that it deserves in bringing it on today.

We last had a briefing on 10 February or thereabouts with the agency advisers. At the time Hon Nick Goiran and I were pushing on a couple of different areas that were really well clarified by the agency team. I appreciate that. I cannot imagine we will have too many issues going into the consideration in detail stage, but it is really just to articulate any concerns or flesh out any problems. I will probably push slightly harder on the conflict-of-interest issue, trying to create some sort of register or publicly inspected ability for residents to further understand what conflicts might be there and declared, perceived or otherwise. In the interest of good practice going forward, I note that we raised a similar issue for the Infrastructure Western Australia Bill 2019 that was introduced in this place. Not to verbal him, but the Premier, who at the time was the lead minister on that as the Minister for State Development, Jobs and Trade, indicated that that was something that the government is generally open to as an idea. The Premier himself said many times that ministers were held to account for board members' actions, when often the minister was never told about them in the first place. The ability for the onus to be on the board member to have that publicly disclosed will help any integrity arrangements that exist, particularly with health services. The Western Australian Future Fund Amendment (Future Health Research and Innovation Fund) Bill 2019 and any other bill that seeks to allocate large amounts of money or significantly important operations to our state's future should make sure that everyone is acting with integrity and with a high threshold of public disclosure.

Obviously, part of the impact of these changes will be strengthening the operations of health service providers across the board, and with that comes the impact on hospitals in our metropolitan and regional areas. Every hospital and health clinic that I have had the opportunity to visit thus far—I do not know the count I am at currently; I think I am up to having visited 17 hospitals and health clinics in the eight months that I have held the shadow portfolio of Health—has been outstanding, from the frontline workers to the people who run our hospitals. I am incredibly impressed by the willingness of the Minister for Health to facilitate those meetings and the teams of medical and nursing directors on the ground who run the hospitals. Every person I have met has always been very open and honest about what is happening and the constraints in the system. That is a recognition of the fact that we are all

in this together, especially with health. The Minister for Health held the shadow Health portfolio for the entirety of his time in opposition. That continuity is really important because in one and a half or two years, health will account for 40 per cent of the state's budget. It is a large beast and it impacts on all our lives. There is a good argument for that level of openness and accountability to the opposition because the reality is that when the baton passes and the opposition becomes the government, we want to be as informed as possible going into the ministry. The Minister for Health spent eight years in opposition and undoubtedly he was well prepared.

**Ms R. Saffioti:** It was eight and a half.

**Mr Z.R.F. KIRKUP:** Sorry; my apologies.

**Ms R. Saffioti:** You duded us six months of the first term.

**Mr Z.R.F. KIRKUP:** My apologies, Minister for Transport. It was eight and a half years.

**Ms R. Saffioti:** You say that all the time. It still bothers me.

**Mr Z.R.F. KIRKUP:** Eight and a half years, minister. I cannot help but think that it was because the former Premier did not call the election so early.

**Ms R. Saffioti:** Yes, but then you brought in the legislation to create four-and-a-half-year terms and, at the time, we in opposition did not make a big enough point about it.

**Mr Z.R.F. KIRKUP:** The opposition agreed to that legislation.

**Ms R. Saffioti:** We did, but I was a backbencher with no influence.

**Mr Z.R.F. KIRKUP:** I am sure that the Electoral Act 1907 changes were well supported at the time. The elections now have a fixed term, minister.

I think the Minister for Health's eight and a half years as shadow Minister for Health were important. He has facilitated my visits to hospitals and basically any part of the health system and has always been very open. We all recognise that whenever the opposition again finds itself in government and has to deal with health, we want to be up to speed in as little time as possible. We want to be exposed to the portfolio as much as possible. I appreciate what the minister and his team have done and that whenever I go to a hospital, everyone is very open and talks very honestly about the impacts and resourcing issues. The Minister for Health has probably been more generous than a lot of other ministers, from what I understand.

**Mr R.H. Cook** interjected.

**Mr Z.R.F. KIRKUP:** I would hate to think that he would change that now. It is always good to have the opportunity to put on the record how open the Minister for Health has been just in case it changes in the future.

**Mr R.H. Cook:** I remember in the early days of opposition, Kim Hames said to me, "When I was in opposition, Jim McGinty always gave me access to hospitals", so he extended the same courtesy to me and we have continued that tradition.

**Mr Z.R.F. KIRKUP:** That makes a lot of sense because, of course, the portfolio is such a large and significant one. The former Minister for Health, Kim Hames, said that he used to offer more regular briefings on current health issues or long-term health issues or something like that. I do not know.

**Mr R.H. Cook:** Really? Okay.

**Mr Z.R.F. KIRKUP:** I do not know; I am not too sure. I do not want to misrepresent the former Minister for Health if that was not the case.

**Ms R. Saffioti:** He was probably fishing.

**Mr Z.R.F. KIRKUP:** He was a tourism minister as well and, of course, cared deeply about both areas, Minister for Transport. I appreciate that the Minister for Health has always been open to a briefing when we have raised any issue, and that has been demonstrated by COVID-19. The Premier noted during the debate on the temporary orders that I have been involved in seven or eight briefings thus far, and I appreciate that, even though daily it is a very daunting experience. It is something that I appreciate.

I will talk briefly about regional hospitals. In my time, I have had the opportunity to visit a number of regional hospitals. The work that happens in them is amazing, especially in the Kimberley. The tyranny of distance from the capital is a real challenge. Unfortunately, in some of the towns that I have visited, such as Derby and Kununurra, but Derby in particular, the public sector workforce holds the town together. Within the space of a year, Derby lost four mine sites and the detention centre closed, so its economy is largely based on hospital workers, teachers and the provision of services to the Aboriginal community. I met a fantastic person—I cannot remember her name for the life of me, and I apologise dearly—who has been working in the immunisation clinic in the same building at Derby Hospital since the early 1980s.

**Mr W.R. Marmion:** Maybe when I was there.



**Mr Z.R.F. KIRKUP:** Possibly when the member for Nedlands was there.

**Mr W.R. Marmion:** I was in for two nights.

**Mr Z.R.F. KIRKUP:** In Derby Hospital?

**Mr W.R. Marmion:** Yes.

**Mr Z.R.F. KIRKUP:** There we go; the member for Nedlands has spent two nights in Derby Hospital.

**Dr A.D. Buti:** He's been everywhere!

**Mr Z.R.F. KIRKUP:** The thing I love most about the member for Nedlands is that I can refer to any part of Western Australia and he has been there and has an experience from there, if not family history there.

A place like Derby is a really good example. Its immunisation clinic is obviously very important for the vaccination of Aboriginal people who live in and around the town. There is a real sense of commitment to the community by those hospitals. There is a real sense of going above and beyond what I would expect. Health workers already do a great job but their role in those communities is made that much harder because of how far away they are from the capital. Of course, when the Royal Flying Doctor Service retrieves people from the northern part of Western Australia, more often than not, they will fly across to Darwin in the Northern Territory for critical care rather than fly to Perth.

**Mr I.C. Blayney:** There is an agreement for that.

**Mr Z.R.F. KIRKUP:** There is, member for Geraldton.

**Mr I.C. Blayney:** From East Kimberley, in particular, they go across to Darwin.

**Mr Z.R.F. KIRKUP:** Yes. As I understand it, Royal Darwin Hospital was about 50 per cent over capacity, and that was before COVID-19 hit. Member for Geraldton, I suppose what was reinforced for me when I was in the Kimberley more recently was the distance. The reality is that it is closer to go to another capital in another jurisdiction.

**Mr I.C. Blayney:** It is 40 minutes to fly to Darwin.

**Mr Z.R.F. KIRKUP:** It takes 40 minutes to fly to Darwin versus the three and a half hours it takes to fly to Perth. Those are the challenges. We have to have a very agile health system, and the Health Services Amendment Bill 2019 will make sure that the health system is best empowered to continue its operations, which it does so well.

When I think about Kununurra and the Kimberley region, my mind turns to the terrible suicides in the Aboriginal communities there, which have been happening for some time now. More recently, I met with the National Suicide Prevention and Trauma Recovery Project —

**Mr R.H. Cook:** Gerry Georgatos.

**Mr Z.R.F. KIRKUP:** Yes, Gerry Georgatos. I met with him last week or the week before. I have been told since then that as well as the suicide crisis in the Kimberley, the suicide crisis in the midwest is at a peak level and is affecting the Yamatji people. That is a significant concern. We want to make sure that as much as possible is invested in support services, in particular culturally appropriate mental health services, in those communities. I increasingly despair every time I visit communities like that, which many of us have an interest in doing. Every time I visit communities like that, I am confronted with a conversation about suicide—youth suicide in particular. It is terribly disheartening. As I have said in this place, it is not for want of government will or resources. Former Coroner Hope identified, when he made his findings in a coronial inquest, that the situation is not from a lack of any government resources. It was really just about the challenges and complexities that exist in the Kimberley and now, evidently, in the midwest, in trying to respond to what has obviously now been hundreds of years of dispossession. I believe that the impact that it has had on Aboriginal communities has obviously been incredibly detrimental. Whatever effort that we can do to help improve their mental health and the provision of health services for those communities is vitally important.

I look forward to the government's response to the coroner's inquest coming out very soon, if not tomorrow. I hope that it will be comprehensive. Unfortunately, I suspect that it is going to be slightly lost in the media coverage given what is happening with COVID-19. I am certain that that is not by design; it will come out at the most opportune time for the government. For what it is worth, I thought it would have come out today so we could at least scrutinise it and ask some questions about it. That being said, I am sure that the 42 recommendations will be responded to relatively comprehensively by the government. I understand that the government is also going to respond to the Education and Health Standing Committee's report "Learnings From the Message Stick: The Report of the Inquiry into Aboriginal Youth Suicide in Remote Areas". The current Minister for Aboriginal Affairs also indicated more recently in some media that there will be a more comprehensive response to the closure of some Aboriginal communities. Therefore, I look forward to what will undoubtedly be quite a comprehensive response from the government. We will go through that, and I hope that the government steps up to the mark. As I have said in this place before, it has been 57 or 58 weeks since the coroner released that inquest report. It is a very important issue and a watershed moment. In terms of a health system response to that, it is going to be imperative.

A good example of why we want to make sure that everyone is on the same page with how our health system operates is that our teams, hospitals and health service boards are empowered to continue with their great work. Every time I go to any WA Country Health Service facility, I am always really impressed with what it does. All the metropolitan health service providers do a great job, but I get the sense that, in a country environment, WACHS goes above and beyond even more so, and I am really very impressed. Every executive or director that I have ever met within WACHS always knows their business and knows exactly what is going on. They are intimately involved, and that says something. A good example is in Kalgoorlie and Esperance. They are part of the same sub-management area within WACHS, and that is a large area, but they are well aware and well informed of what is going on. When I went out to the member for Kalgoorlie's district and went through Kalgoorlie Health Campus, there was a great sense that the hospital management knew exactly what was going on. When the minister went on hospital visits, while in opposition or maybe in government, perhaps he also had a sense that there were people on the ground who knew what was going on and people who did not know what was going on. I have always found that the further one gets away from the capital, the WA Country Health Service is really informed and does such a great job, as do the regional hospitals in particular. Broome was really impressive for me as well. The money that has been put into Broome Hospital more recently, over the last couple of years—I am not entirely certain how much has come from the government at the moment, and that is because I cannot remember—makes it very well invested in. The member for Nedlands might be interested to know that when I went to Broome Health Campus, it was the only time that I have ever seen a compression chamber for when someone gets the bends and they have to go into a compression tank. Is it called decompression?

**Mr P. Papalia:** Recompression.

**Mr Z.R.F. KIRKUP:** Thank you very much, Minister for Defence Issues. I think there are only two. Is that right, minister?

**Mr P. Papalia:** Are you talking about the one in Fiona Stanley?

**Mr Z.R.F. KIRKUP:** There is one in Fiona Stanley Hospital? The other one that I have seen is in Broome.

**Mr P. Papalia:** Yes. The Fiona Stanley one is a medical facility, so you basically take the bed in and out. It's much more suited to diving. They use it for things other than diving.

**Mr Z.R.F. KIRKUP:** Okay.

**Mr P. Papalia:** Gas gangrene—you treat patients, under pressure, with oxygen. And it's effective at stopping progress of disease and infections.

**Mr Z.R.F. KIRKUP:** That is amazing. I appreciate that; thank you, Minister for Defence Issues. The one that I saw in Broome looked quite old to me, but it was quite impressive to see because I had never seen anything like that before in my life.

**Mr P. Papalia:** The Navy has one for the diving team.

**Mr Z.R.F. KIRKUP:** I expect that it would.

**Mr P. Papalia:** That is actually just for divers, but the Submarine Escape and Rescue Service has a much larger capacity.

**Mr Z.R.F. KIRKUP:** This one was quite cramped, as the minister probably appreciates.

**Mr P. Papalia:** Well, there's always small, mobile ones, so they can treat individual divers.

**Mr Z.R.F. KIRKUP:** There you go—the more you know. Thank you very much, minister. In this case, I think it was for the pearlers in Broome. It shows the diversity by which the hospitals have to be geared to respond to local concerns, so, of course, we are very unlikely to see one at Peel or Joondalup or out in Kalgoorlie.

**Mr W.R. Marmion:** It's not deep enough.

**Mr Z.R.F. KIRKUP:** No, of course not.

**Mr P. Papalia:** There wouldn't be; there's not a need. But they need specialists to operate them.

**Mr Z.R.F. KIRKUP:** Yes, that is right; it is the reality of how unique hospitals have to be to respond to their local concerns, and I was really impressed with Broome. If anyone gets the opportunity to see it—not because they need treatment, member for Nedlands—I have to say that Broome Hospital was particularly impressive to me.

I have taken more time in my discourse than I had anticipated, so I would like to quickly talk about what is happening locally in my community in response to the COVID-19 pandemic. Members might be aware that I put out a call to my district asking for volunteers to—not offer any medical assistance—be there to check-in with people —

**Ms R. Saffioti:** That was an original idea!

**Mr Z.R.F. KIRKUP:** I know! No, I fully claimed, publicly, that it was replication of the leadership of the member for Perth. I did so on 6PR, minister; I will do so here.

**Ms R. Saffioti:** I didn't see that on Channel Nine news.

**Mr Z.R.F. KIRKUP:** It only takes shortcuts, minister. The reality is that it was the member for Perth who came up with this idea and I have transferred some of what he has set up into my own district, which is a call for volunteers to effectively be there acting like a modern version of a Neighbourhood Now. In the old days, I suspect that people would check in with their neighbours during times of crisis, or people might have had a better relationship with their neighbours. Unfortunately, we know that in this modern world, that is not always the case. We had volunteers indicate to us that they would be willing to provide welfare checks, and perhaps check-in by calling up every couple of days to make sure that someone who might be vulnerable during this time is okay and that everything is going okay. As of yesterday at 3.00 pm, 532 individuals from across my community had volunteered to help with that, saying that they were willing to do what I think would be a neighbourly thing to do. Sometimes, due to isolation in my community or something like that, or because there are a lot of holiday homes, people are not too familiar with what is going on in their streets all the time. I think that is probably the case across the state, and so this really connects that and makes sure that less distance exists and people who might be at risk of issues with COVID-19 can be checked in on and know that people are looking out for them.

The team in my office are doing an amazing job in pulling this all together. As is often the case, the member of Parliament often rushes out with something and, having being a staffer in the past, the staffers have to implement a lot of it. Although now with a lot of cancellations and meetings and things like that, all of us in our team will be implementing things, and I would like to recognise the work of my outstanding team members in my office, who are going about implementing this idea and replicating what the member for Perth has done. I now know that the member for Darling Range and the member for Vasse, on the opposition's bench, are doing that, and I am sure other members on the government's benches might be doing the same.

I would like to recognise the following groups that have also offered their help as part of this outreach that we are seeking to do. Vicki Pollard of the Peel Volunteer Resource Centre has been amazing in working with us to put in the correct system to make sure that all the appropriate measures are put in place. Peel Volunteer Resource Centre in Mandurah does an amazing job connecting volunteers with organisations, and we have taken Vicki's help and she has been very helpful in putting that together for us. Falcon "The Island Club" Lions has also been very forthcoming with its offers of assistance. We have 12 people from Falcon Lions thus far who have been willing to come in and help out with this as well. The president, Ian Derrick, does a great job; I am very appreciative of his help in leading the charge on behalf of Falcon "The Island Club" Lions.

Reflecting more modern times, there are also a number of administrators of Facebook pages. Obviously, Facebook is a good opportunity to bring people together in one location. Administrators Skye Robinson for the Deeper Connections Mandurah Facebook page and Judy Drayton for the COVID-19 Updates and Community Care Mandurah Facebook page have been trying to help coordinate some effort locally as well. We are working with them to see what work we can do to leverage their Facebook presence to something on the ground as well. Also, Charmaine Prinz and Janet Roos have been working as part of the Befriend and Chorus group to operate a "ring ring" campaign to connect those in isolation across my community, and probably across Peel more broadly speaking. We have had some outstanding help from Coles in our community. Coles has worked with us to identify and help any persons in need in my district and across Mandurah. I know the member for Darling Range has been working with her local IGA supermarket. If members already have a good existing relationship with large supermarkets or an IGA in their district, it is always good to speak to the manager there so that they can put aside orders for people whom members know are particularly at risk. A week ago, people were already starting to come into my office, such as a gentleman who had run out of toilet paper and did not know where to go. People are already coming in to our team to see whether there is anything we can do to help. The ability for us to work hand in glove with some local supermarkets is really great. Again, it reflects the nature of the community coming together in times of crisis.

I would also like to recognise Jo Sinker, the chairperson of the Seascapes Community Association, and Pippa, the senior community development officer at the City of Mandurah. The Seascapes Community Association has been really great at banding together the community in Seascapes, which is where I live. It is always a really good example; the residents' association is always really active. Two weeks ago, together with the Seascapes Community Association, I was out picking up the rubbish on the dunes. There is a real sense of community turnout there. Seascapes is quite a distinct location within my district and the City of Mandurah. I recognise not only Pippa for her help, which I appreciate, but also Mayor Rhys Williams in what has happened more recently with the cancellation of the Mandurah Crab Fest. When Crab Fest was cancelled on 13 March, the Friday before it was meant to occur, the member for Mandurah, myself, Mayor Rhys Williams and the member for Canning, who I recognised earlier, all came together to reinforce the decision that cancelling Crab Fest was the right thing to do. Obviously, it is very regrettable, because an event like Crab Fest has a significant economic impact on my community. The event often helps tide businesses over into the winter. As a tourist town, Mandurah often has fewer people coming through in the winter, so Crab Fest uses the surge to help tide those businesses over. The evolution of COVID-19 and how it has impacted on all of us has meant that Crab Fest had to be cancelled. It was the right decision to make. From conversations with the mayor, the member for Mandurah and the member for Canning I know that it was a difficult decision to make, but it was the right one. That is a good example of bipartisan support, whereby local members of Parliament, local council, state and federal members all turned out to support the decision, and I think it was an important one to make.

From conversations I have already held with the mayor, I know that because of COVID-19, we are starting to see a number of venues in Mandurah close. This is exactly what will start to occur right across our community as restrictions start to be put in place on the number of people who can meet in one location. I think it will have a significant impact. That is why, when we talk about the importance of this legislation, the Health Services Amendment Bill 2019, although the current practice is already happening—I appreciate this really provides the legislative backup to what is already occurring across our health system—we want to make sure that everyone is on the same page and that there is enough legislative empowerment for the people who already do a fantastic job. That is why the opposition is very pleased to support this legislation, notwithstanding it will go through consideration in detail. I am also very appreciative to the minister for bringing this legislation forward to this place at this time. It is an important move. At a time of impending crisis, we want to make sure that everything is working very, very well. If there is an opportunity here to do some maintenance, which is how I would consider this—even though it is 95 clauses, it is maintenance to tighten up things—I think it is a good measure and one that the opposition supports. Thank you.

**MR K.M. O'DONNELL (Kalgoorlie)** [12.04 pm]: I, too, would like to rise and speak about the Health Services Amendment Bill 2019. This legislation aims to refine the act's effectiveness and the department CEO and health service providers to improve the functioning of the Western Australian health system and to overcome operational and administrative burdens that have been encountered since the act commenced.

I want to talk about health in my electorate. Laverton Hospital is in need of repair. It has fallen away in various states of disrepair. I visited the hospital and saw that when an ambulance arrives, there is no cover under which to take patients out. As the patient is wheeled out of the back of the ambulance, if it is 48-degree heat, it is 48 degrees. The heat just hits them. If it is bucketing down with rain, they are in the rain. Once they get in, they have to be wheeled to the other end of the hospital, which is where they treat the patients when they first come in. The ambulance entrance has to be at the other end because it is the only way they can get a patient into the building, which is not good.

I saw the emergency room. In most hospitals, there is anything up to six, 18, 20 or 30 little cubicles. Laverton Hospital just has one room separated by a curtain. If two warring factions have been out fighting and are injured and the police bring them to the hospital, they are both in the same room, and it is verbally on again. It makes for terrible working conditions for the staff. It would be good to know—I am hoping that the minister could possibly say this in his reply speech—when the upgrade to Laverton Hospital will start, and when is it envisaged to be completed. Both the state and federal governments have pledged money to this in election promises.

I want to talk about the lack of general practitioners. I do not know how we are going in the metro area. I am assuming they have an abundance, because there are suburbs all over the place; if there is not a GP in someone's suburb, they can just go to the next one. But people who are regional and remote do not have that luxury. When I first came to Kalgoorlie–Boulder, we had numerous doctors. We had the Lamington Medical Group, with Dr Greg Murphy, which was taken over by Dr Andrew Siegmund. They were royal flying doctors who left the Royal Flying Doctor Service and moved into their own practice. There were several doctors there, and it was very vibrant. There was the Collins Street Surgery, with Dr Phil Reid and his group of doctors. I am talking about the past—we had Dr Dick Austin, part owner of Dorienus, who won the Melbourne Cup, had his surgery at the Plaza Medical Centre, with numerous doctors. There was Dr Barney McCallum, the gynaecologist. These surgeries have all gone backwards, closed, or have only one or two doctors in the surgery.

The Plaza Medical Centre received a big grant from the federal government and expanded to train doctors and nurses, but the problem is that Dr Kylie Sterry, who is based there, is struggling to get doctors to come to Kalgoorlie–Boulder. From an outsider's point of view, I used to think it was money—if we offered more money, they would come—but it is clearly not that. Money is not the bottom line for doctors. The bottom line is that doctors want to come to Kalgoorlie–Boulder if they can learn, upgrade and upskill what they already know. At the moment, that cannot happen. The hospital originally had all doctors and local GPs working there, filling in, rostering, and it had a very good system in place. However, over time, some doctors came to Kalgoorlie–Boulder who were not interested in being trained. They had already upskilled or they did not want to upskill anymore. Unbeknown to them, that changed the dynamic of the hospital and the hospital started recruiting people from outside to fly in. Now doctors want to go to Kalgoorlie, but they cannot go there because they cannot get work at the hospital. I believe that this is a perfect time for the Kalgoorlie Health Campus, as it is called, to be made a campus. I have said before in this place that it should be like a university, where professors and other highly skilled medical people work in the hospital. However, instead of them doing all the hands-on surgery, when a doctor wants to upskill, the professors become the tutor and watch over the doctor. It might cost a little more because it is overlapping, but, how good would it be if very knowledgeable doctors and professors worked at the hospital and taught our future doctors. The Rural Clinical School of Western Australia is in Kalgoorlie–Boulder and the student doctors love it when they go there. However, do they want to come back? They do but they say it would limit them. If they stay in Perth, they are upskilled. When they go back to Kalgoorlie, their friends who graduated at the same time as they did, are upskilled and move ahead. That is something I will push for in the future. I would love to see Kalgoorlie–Boulder regional hospital be the first one to start that and lead the way. Kalgoorlie Health Campus would then be inundated

with doctors. Many times a wife will not move to the country with her husband unless good medical services are guaranteed. At the moment, the queues mean that people can wait weeks before seeing a doctor. That is not good. When some people first go to Kalgoorlie and go to a surgery, they are told that the surgery is not taking on new patients. That too is a problem and we need to overcome that regionally. We need the help and support of the metropolitan area.

I want to comment on the neonatal unit. I had a phone call the other week from a man whose daughter was in hospital giving birth to her baby. He said that he had concerns and his daughter was all upset. She gave birth to a little boy and the hospital said that he had to be flown to Perth. That in itself was stressful. When I was told this, I thought, “Righto, they’ll fly the baby down by the Royal Flying Doctor Service.” However, the grandfather said that the problem was, it had been days since the hospital first said that the baby had to go to Perth; he was still in Kalgoorlie hospital days later. When the hospital told the grandfather that the baby was going to Perth, he was told that he could not go on the plane, so he said he would drive to Perth, and the hospital said, “Yes, you go to Perth.” He was sitting in Perth for days waiting. I made inquiries and found out that Perth sends a neonatal team to Kalgoorlie, of which I was not aware. However, we are still trying to find out why the team did not go to Kalgoorlie straightaway. I know the team attends cases statewide, and I told the grandfather that the team would have prioritised cases. If another baby had something more serious than what the grandson had, we can understand why it went to that baby. We are still trying to find out why it took days. As the grandfather said—I tend to agree—if something happens in the country, people are disadvantaged. In Perth, everything is close and the bulk of people are in Perth but people have the perception that we miss out. As I say, I am aware of the need to prioritise cases. Hospitals, police, ambulance and fire services prioritise. I hope that proves to be the case when we finally get an answer.

St John Ambulance WA does a fantastic job in our region. My first ever contact with St John was when I was a police officer. Back in those days, there was only one ambulance officer per van at night. There were times when we would attend a scene and the ambulance officer would ask us as police to drive the ambulance while the ambulance officer sat in the back with the patient. When the officer yelled out “Go faster”, we would go faster. We had to adapt. It has been brought to my attention that St John Ambulance is writing off tens of thousands, if not hundreds of thousands, of dollars owed in the various regional centres. If one of us calls an ambulance, we are slugged with a bill that can be very expensive, amounting to hundreds of dollars. In the regions, many people are using St John as a taxi service. In one instance, there was a neighbourhood dispute that eventuated in a court case this year. One neighbour said to the other, “See you in court tomorrow.” While the neighbour was getting ready to drive to court, the offending neighbour rang an ambulance to come to his house. The neighbour thought that the offending neighbour would not go to court because he was in an ambulance. Unbeknown to that resident, the neighbour went to the hospital in the ambulance, but got out of the ambulance and walked to court. He turned up at court. Taking an ambulance was his way of getting to court.

St John Ambulance charges people but they do not pay. We are finding out that in Laverton–Leonora, if St John continually writes off these charges, it will not have the funds to operate. It will come to crunch time. St John does not have the funds to replenish the ambulances or pay their officers or for various other things. I asked St John how we can possibly alleviate this and how much money it needed per person. St John said that if it could get \$100 per person in the bush, it would cover a family. I have been making inquiries to see whether we could create a form and take it to the mob and ask them to sign it so that \$2 could come from each unemployment benefit and go towards St John. People would then get a card and utilise the service. That is proving to be very hard. I have touched base with Aboriginal bodies to see whether they would consider paying St John in bulk up-front when they are handing out money from native title settlements. That also is proving difficult. It is ongoing and I am still trying to help St John with that. While speaking of St John, I pay homage to Roy Bergion, a great man in Coolgardie. He has been a St John Ambulance officer for over 40 years. He has also been a Coolgardie Volunteer Fire and Rescue Service member for 53 years. That is a fantastic effort by that man.

I notice that Bunbury got a COVID clinic. Naturally, the first one outside Perth has to go somewhere, and we regional people say, “Pick me, pick me.” The health minister mentioned Albany and Geraldton. I have not caught up with him to ask about Kalgoorlie. I do hope we are on the radar. If it has not been mentioned already, it means we do not look like getting one in the foreseeable future—but I hope we do. It is no good saying that we do not need one because there are no cases out there, because it is only a matter of time before something happens. There are plenty of Aboriginal communities in our region and, according to the experts, Aboriginal people are very susceptible to this virus and it could get a foothold in their communities. Aboriginal people are very close knit and family oriented. I have been to Aboriginal communities searching for an offender at three or four o’clock in the morning to try to catch them and seen four pairs of legs under the one blanket. When I lifted the blanket, there were four blokes huddled together because it was so cold.

As summer ends and winter approaches, there will be no 1.5 metre distancing. I am not being rude or racist when I say that. It is just that I cannot see them changing their ways, and that is not because they do not want to. The bulk of our community does not want this virus to get into Aboriginal communities, and both federal and state governments are doing their best to stop that from happening.

I am also worried about shortages in the provision of health services in the regions. Various offices in the metropolitan area are being closed because the staff are just not there. Just the other week, an offender was in the lock-up and as he came out he said that he had coronavirus. The police had to deal with that prisoner, but the prisons refused to take him. The six officers who were in the lock-up with that prisoner have been taken off the front line and are now in self-quarantine. But they have to be replaced. I foresee offenders going to police officers, ambulance officers, doctors and nurses and saying that they have the virus. The next minute, those officers will be told to self-isolate. What do we say to them? Do we say, “You’ll be right”? People are taking a responsible attitude; they have to come out of the system. I am worried that people will start to use this as leverage, especially in the street, in the hope that the police will not apprehend them. My question is: how are we going to have a backup plan? Where do we get replacements for police, ambulance officers and nurses working in the bush? Am I allowed to read from my phone? I do not know how to print from my phone.

**Dr A.D. Buti:** Yes.

[Member’s time extended.]

**Mr K.M. O’DONNELL:** I apologise; I cannot get this off my phone. I received an email from a lady who said —

The call has gone out for all nurses etc to help out with coronavirus however i am no longer registered as an enrolled nurse so i can’t help. Phoned APNA —

I am not sure who they are; maybe it is a nursing association —

to see if there was a shortcut to being registered again and was told no. No quick pathway to re register, its takes months to organise the paperwork.

As I bring this up, people are probably out there who are not registered but who are ready to go. The government might have to look at how to get them involved in some way so that they can take the place of others. It is a similar story for the police. We have an Army Reserve; we are going to need a nurse reserve, a police reserve and an ambulance reserve. I did tell the Minister for Police that I am ready to be reactivated to duty.

**Mr D.A. Templeman:** We’ll send you to Kalgoorlie for another 30 years.

**Mr K.M. O’DONNELL:** I think she is hoping that I will go back there because it would mean I would not come back here.

There is also a requirement that a person must have five out of five symptoms before they are tested. Staff in my office brought to my attention the case of one person who had four of the five symptoms and presented for a test. They were told that they would not be tested. That is a bit worrying. I know that there are possibly not enough test kits at times, as the Minister for Health said, but that does stress those people who believe they have it and are not being tested.

In Kalgoorlie–Boulder, I am following the Facebook groups set up to be a buddy, for which I congratulate the member for Perth and the member for Dawesville. That is very good and those members are leading the way. We are trying to do our bit to help out.

I have teamed up with Hon Kyle McGinn and Hon Robin Scott from the upper house. We are trying to show that it does not matter what party or team we are in; we are working together to try to show the public that we care and that we want to help the people in our electorate. Our three electorate officers got together this morning, which is good, too, because some electorate officers probably would not even talk to an electorate officer from another party, just as a member of one party in the upper house would not talk to a member of another party. It is good to see that that is being done. Hopefully, it will be positive and we can go from there. Acting Speaker, thank you. I am finished.

**DR A.D. BUTI (Armadale)** [12.25 pm]: I also rise to contribute the to debate on the Health Services Amendment Bill 2019. As the member for Dawesville mentioned, health forms a very large component of the state budget. He said that he thought it will make up about 40 per cent of the next budget. I do not know whether that figure is correct, but I do know that it is a sizeable proportion of the state budget. It can be argued that health and education are the two areas in which the state government can make the most positive input or change for citizens of the state. It is interesting that although the state government is responsible for health and education, education and health funding comes from the federal government. There is a vertical fiscal imbalance, and over time federal Parliaments try to gain greater power and control over the delivery of education and health services in the state, but constitutionally the state government remains the prime provider of health services in Western Australia.

As members mentioned, the bill will amend the Health Services Act 2016 and make consequential changes to other acts, including the Mental Health Act 2014. I remember very well debate on that bill because I was the opposition health spokesperson in this house when Hon Andrea Mitchell had carriage of that bill as the parliamentary secretary for the Minister for Mental Health, Hon Helen Morton, who was in the upper house. The debate on that major piece of legislation went on for a considerable time. This bill will make minor consequential changes to that act, as it will to the Motor Vehicle (Catastrophic Injuries) Act 2016. The member for Riverton was responsible for that bill,

was he not? I had some very nice words to say about the member for Riverton yesterday, but he was not in the chamber. It was remiss of me to not mention that that was a very important piece of legislation. I think that the member can be very proud to have brought that legislation into the house. He should carry that as a badge of honour.

**Dr M.D. Nahan:** I will check *Hansard*.

**Dr A.D. BUTI:** Did I mention that the member for Riverton could have been a better Treasurer had it not been for the Premier at the time? Of course, the member could possibly not comment.

The bill also makes some minor changes to the Queen Elizabeth II Medical Centre Act 1966 and the University Medical School, Teaching Hospitals, Act 1955. Those changes are drafting changes, particularly to the Mental Health Act and the Motor Vehicle (Catastrophic Injuries) Act 2016 due to the time when those bills were passed by this Parliament.

The bill contains a number of amendments to improve efficiency in not only the delivery of health services to the public, but also the administration of health and the lines and delegation of responsibility. Basically, the bill amends the functions and powers of the Minister for Health, the CEO of the Department of Health and health service providers, all with the aim of improving the administration and delivery of health services to the public.

Later in my contribution I will talk a bit more generally about health issues, but I want to mention some of the important issues covered by the bill. One of the issues is the ability of the minister to delegate their powers to other bodies or other people. Just because the minister delegates the power does not mean that they are delegating the duty or responsibility or the liability. Unless the act explicitly delegates that duty or responsibility, the minister will remain responsible. The minister can delegate the power—the operation of the duty—but the duty will remain with the minister unless explicitly or implicitly transferred under the act. That is important. The minister is not abrogating their responsibility, but by delegating the powers, it will hopefully improve the efficiency of the health service and also provide a greater resemblance to reality. The minister is the minister. The minister does not have the expertise to necessarily execute the powers that they have under the act, so they can delegate the powers, but the duties and responsibilities are not necessarily being delegated.

This bill also seeks to allow health service providers to recover charges and fees for patients who obtain compensation due to an injury or illness. People receiving compensation as the result of an injury or illness that requires hospitalisation and the health service provider obtaining some reimbursement is an interesting area. A lot of that will relate to compensation for personal injury, often acquired in the workplace or in motor vehicle accidents. I am sure that the member for Mount Lawley —

**Mr S.A. Millman:** Will you take an interjection?

**Dr A.D. BUTI:** Yes. It is perfect timing

**Mr S.A. Millman:** Member, you raise a very good point. There is a policy reason as well, I think, for why this is a good amendment. The loss should fall with the tortfeasor, should it not? If the insurance company is escaping its liability by putting the burden onto the public health system, that is not a just outcome, is it, member?

**Dr A.D. BUTI:** That is exactly right, member for Mount Lawley. The member's timing is impeccable.

**Ms J.M. Freeman:** I think what he was trying to say was that the insurer, not the worker, should pay the health system.

**Dr A.D. BUTI:** I thought that was what he said.

**Ms J.M. Freeman:** He did, but not for those of us who are laypeople in the jurisdiction.

**Dr A.D. BUTI:** That is a very interesting point, member for Mount Lawley. I wonder whether the member had ever thought of this. I had not thought about it until I read quite recently a book by Guido Calabresi, one of the founders of law and economics in the United States. As the member knows, with personal injury, there are various components to the award of damages or compensation, one of which is for the loss of future earnings. For instance, if a skilled gardener who earns \$800 or \$1 000 a week and the CEO of a corporation who earns \$3 000 a week had a traffic accident and sustained the same injury, the person on the lower income would receive a much lesser amount in compensation for loss of future earnings than would the person on the higher income. Generally, but not always, the person on the higher income has a greater financial reserve and greater support systems, while the person on the lower income does not. It shows the inequality that is often in-built in our legal system. The legal system seeks to provide justice, but many times it does not. The bill introduced by the member for Riverton sought to alleviate some injustice in that area, but, as we know, there were people in that situation who were not covered because the injury happened before the bill was introduced. I thought it was a really interesting analysis by Guido Calabresi about the fact that when compensation for loss of future earnings is awarded, the person who may need it the most receives a smaller amount. I look forward to the member for Mount Lawley's contribution to this debate because of his expertise, especially in the personal injury area, and the work he has done in representing many clients who have sought compensation.

Another area covered by the bill is capital works and the commencement of major infrastructure projects by the Department of Health. As I mentioned yesterday, the member for Mount Lawley and I are members of the

Public Accounts Committee, which handed down two reports—one into Perth Children’s Hospital and one on contract management in the public sector. Overall, we have been delighted with the government’s response to many of our recommendations. Of course, committees make recommendations, but they are not in government, so they may not necessarily know the issues that the executive has to deal with. We often provide our recommendations from a pure perspective, sometimes without knowing the complications that governments of any persuasion have to deal with. However, I believe those reports can be used by the health department and any other department to assist them to manage contracts and deal with major infrastructure projects.

Another area covered by this bill is the boards of the health service providers. The previous government, under Minister Hames, decentralised the administration of health, so health service providers became very important and therefore their boards became really important. I had the experience of being a member of a statutory board, the Armadale Redevelopment Authority board. The Midland Redevelopment Authority, the East Perth Redevelopment Authority, the Subiaco Redevelopment Authority and the Armadale Redevelopment Authority had already been set up. The seven or eight years that I spent on the Armadale Redevelopment Authority board were really stimulating; it was a great training ground for understanding the complexities of development projects. I stayed on that board until it was found out that I had been preselected as the Labor candidate for Armadale. The minister at the time, Hon John Day, a most decent person, did not seek to push me off the board; he just made it known that it might be a bit uncomfortable for him. So I resigned from that position. Hon Alannah MacTiernan set it up, and she was then the local member, so she had a particular interest in the Armadale Redevelopment Authority. The ARA did some outstanding work during that period and had some really good board members. There were six positions and two of them were set aside for councillors. During my time on the board, we were very lucky to have high-calibre council members in Henry Zelones and Linton Reynolds. Unfortunately, two of our board members passed away with cancer in the space of six or seven months: Gerry Gauntlett, and the female’s name escapes me, but I will remember. They were outstanding members of the board.

The point about board member’s duties, conflict of interest and fiduciary duties is very important and it was always drummed into us, particularly by councillors, who, when they become councillors had conflict of interest and their duties drummed into them. Often, the more local someone is in politics, the greater the chance they can be influenced and corrupted. I think that sometimes people do not realise that there is much opportunity for that influence at a local government level. It is important to look at the duties and the conflict of interest of board members and fiduciary duties in the bill before us. Obviously, one of the greatest sins of a person who holds a fiduciary duty to someone else is to have a conflict of interest. Their duty must be to the fiduciary, and they should, of course, avoid any conflict of interest. That is very, very important.

I am interested in clause 18 of the bill. It amends section 35(2) to allow a health service provider to provide a facility under its control and management to a person who engages in community work or conducts a service that has a community or charitable purpose, in addition to being able to provide the facility for the use of a health professional carrying out a health service. That is really important, because people often come into hospitals to provide community and charitable services. The explanatory memorandum mentions the issue of the HSP allowing a not-for-profit community legal service to use its facilities. That is important because some people may be in hospital as a result of an unlawful act or something that may allow them to receive compensation. They may not have the financial means to engage private law representation, so community legal services are very important. Many other charitable services are provided in the hospital domain or are required by patients of hospitals. There is a very large public hospital in my electorate, Armadale–Kelmscott Memorial Hospital, which services a great portion of the south east metropolitan area.

[Member’s time extended.]

**Dr A.D. BUTI:** The next public hospital along that corridor is Bentley Hospital and then Royal Perth Hospital, and west of that is Fiona Stanley Hospital. The Armadale hospital has a very important part to play. I have been a patient there a few different times and my mother worked in the kitchen there many years ago. It is a very important hospital in our region and also a major provider of employment for locals in the area.

I want to make some general comments about health. I have tried not to be political, but there is no doubt that the Labor Party has always been the champion of public health. It is undeniable. I am not saying that when other parties have been in government they have not ensured we have a good public health system, but fundamentally, as part of our DNA the philosophy on the Labor side is that we believe in a very good public health system. We believe that, as much as possible, the quality of health that people receive should not be determined by their postcode. Unfortunately, we cannot alleviate all inequality. If someone has greater financial means they generally receive quality health care at maybe a faster rate than someone who does not necessarily have the economic and financial means. It is more of a federal issue than a state issue, and it is good that the federal major parties believe that Medicare is a very important system. I believe some politicians on the conservative side of politics are ideologically opposed to Medicare, but they know, politically, that they cannot touch it. There is always room to fine-tune these things. Members will remember that the federal government did it once. When Bill Hayden was Treasurer under the Gough Whitlam government—he did not have very long in that role, but he was a good Treasurer—he brought in



Medibank. Then under Malcolm Fraser Medicare was removed, and Bob Hawke brought it back. I think John Howard contemplated removing or making major changes to Medicare, but politically the Australian public are comfortable with a universal health system. There are legitimate arguments around the periphery about co-payment and so forth, but, fundamentally, Medicare is a very important part of our system, no more so than in the current situation we find ourselves in. I think if someone were to come down with COVID-19, they would much prefer to be here than in the United States of America. Hopefully, the USA political system will finally realise the importance of this issue and enough public funding will be delivered to people who do not have the means to ensure that they are properly treated. We all know the horrific stories of the US health system. Of course, profit will be made in health, but the primary issue in health is the delivery of services to people who need it, rather than profit. We will never alleviate that issue, but through the Medicare system, we have a basic universal health system that provides health services to everyone.

Another issue to raise in my few remaining moments is the issue of preventive health. The bill before us looks at trying to improve the functioning of the Western Australian health system. Its explanatory memorandum states —

*The Health Services Amendment Bill 2019 ... amends the Health Services Act ... to improve the functioning of the WA health system and to overcome operational and administrative burdens that have been encountered since the Act commenced.*

That is very important. Of course, as the member for Dawesville mentioned, the health budget is a major component of the overall budget and the majority of that is in the hospital system. If we can reduce the need for people to go to hospital, we will reduce the necessity to drain the budget purely for health. I should mention that when I was elected, not that long ago, there was no bulk-billing doctor in the Armadale region, except for seniors and welfare recipients. That meant people were going to the emergency services department of the local hospital, which of course drains the hospital system. Some of those people should not have been in the emergency department of the health system. There are now have a lot more bulk-billing practitioners in the Armadale region.

I want to talk about preventive health and the need to try to improve the overall health of our population. It is an issue in my area. A report came out about a month ago—I cannot remember the research body—and it was not good for the Armadale region. Parts of Armadale, Brookdale and a couple of other areas of the City of Armadale, had the highest obesity rate in the metropolitan area at 45 or 47 per cent. It was very high. Armadale had the greatest consumption of cigarettes and alcohol, and the life expectancy of the residents of Seville Grove, which is one of the areas in my electorate, was 68 years.

**Dr M.D. Nahan:** Is that an old suburb?

**Dr A.D. BUTI:** Parts of it are old. It is not the newest area; it was established 20 or 30 years ago. It feeds into Cecil Andrews College. It is west of the railway line.

**Mr P. Papalia:** 1970s?

**Dr A.D. BUTI:** It was established in the 1970s, but there was a lot of vacant land there even in the 1990s and 2000s, which is when the rest of the suburb was built. I have always had an interest in preventive health but members can see how important it is to me as the local member.

Debate interrupted, pursuant to standing orders.

[Continued on page 1730.]

## KAZ MALAWSKI

*Statement by Member for Hillarys*

**MR P.A. KATSAMBANIS (Hillarys)** [12.50 pm]: I wish to highlight a significant milestone of one of my constituents, Mr Kaz Malawski, of Kallaroo. Kaz turned 100 years of age on 2 March. He was born in Poland and was 19 when World War II began. As a young Polish army officer, he was taken as a prisoner of war but soon afterwards managed to escape by foot to his hometown in Eastern Poland. However, following the Soviet invasion of Eastern Poland, Kaz fled to the Baltic states, first to Lithuania and then to Estonia, where he became a POW for a second time. He spent time in a Siberian labour camp cutting timber while enduring harsh conditions. Kaz was eventually freed and whilst in Kazakhstan, he volunteered with the Royal Air Force serving in the Middle East, later transferring to the Royal Navy. When the war ended, and with Poland under Soviet occupation, Kaz joined the Merchant Navy. Sadly, in 1946 he learnt that his father had been executed by the Soviet secret police in 1940.

While on a holiday cruise between Durban and Mombasa, Kaz met his wife, Yvonne. They initially made South Africa their home, but later migrated to Australia to be close to family. It is a well-worn story of people migrating to Australia to be close to family. They were among the earliest residents of St Ives Northshore Retirement Village in Kallaroo.

It was my privilege to spend part of Kaz's birthday with Kaz and his family, hear stories about his amazing life and learn how Australia has become a wonderful home for him and his family. I wish Kaz and his wife, Yvonne, continued good health and happiness in the years ahead.

**BUSHFIRE FUNDRAISER — EDGEWATER***Statement by Member for Joondalup*

**MS E. HAMILTON (Joondalup)** [12.52 pm]: Connection to community matters, and in Joondalup our community is strong. The McGowan Labor government and I have a vision to establish Joondalup as WA's most liveable coast city, with community at the centre.

This past summer, everyday Western Australians stepped up to support the bushfire efforts, and I see that same determination to support our fellow Australians as we experience some very difficult times.

I thank the following people and groups who organised the recent Edgewater bushfire fundraising community event that was held last month at Emerald Park: Wayne Adams of Edgewater, who brought the community bushfire appeal event to light; Kat Palmer of Edgewater, a dedicated committee member for this event; 13-year-old solo singer Bailey Perrie and 10-year-old solo singer Connor Bailey, both from Edgewater; Edgewater IGA owners, Daren and Lucie Salat; Damion Martin; Steve Murdoch and JV Scaffolding; Alex Rankin and Radio Earth; the owner of Arts Edge Photo and Frame, Terraze Ashfold; the Djinda Falcons mob, Sharon Wood-Kenney, Bella Brown and Derick Pickett; the local fire and police stations, which gave their support; The Spiers Centre; St John first aid; the Lions Club of Whitfords; and, I am told, there is special thanks to Jack Le Cras, OAM.

The event raised almost \$10 000, which was divided into thirds and shared amongst WIRES, which is Australia's largest wildlife rescue organisation, the WA Volunteer Fire and Rescue Service Association and local families in Mallacoota, a small Victorian town. Well done to all involved.

**BUSHFIRES — STIRLING RANGE NATIONAL PARK***Statement by Member for Roe*

**MR P.J. RUNDLE (Roe)** [12.53 pm]: On Boxing Day last year, a fire was sparked by lightning in Stirling Range National Park. More than 200 firefighters worked in dangerous and challenging conditions for a week to contain the fire, which eventually burnt 40 000 hectares. Farms, homes and business were threatened. Business owners and residents were evacuated during the fire and, upon returning, they faced financial uncertainty with business activities dropping up to 80 per cent due to low visitor and tourist numbers. The Department of Biodiversity, Conservation and Attractions is working hard to repair tracks and to ensure visitor safety. DBCA is also bringing in teams from across the state. Thank you to the business owners, shires and department representatives who shared their stories and highlighted this issue when I visited in January. I give special thanks to Bob Jarvis, CEO, and Fiona Gaze at the Shire of Gnowangerup; Peter Hartley and the Stirling Range National Park rangers for allowing us access to sites; Margot and John Byrne from Mt Trio Bush Camp and Caravan Park; Jacqueline and Chris Thomas at the Bluff Knoll Cafe; Virginia Hammer at the Stirling Range Retreat; Carol and Dave Caldwell at the Amelup Roadhouse; and Pleun and Hennie Hitzert at the Lily Dutch Windmill. To Margot Byrne at Mt Trio Bush Camp and Wayne Davis of the Borden Volunteer Bush Fire Brigade, thank you for emphasising the urgency for a heavy-duty fire truck in the area for which I will continue to advocate. I will continue to call on the Minister for Emergency Services to notify the federal government of WA postcodes affected by bushfire, and ask for him to do his job.

**APPRENTICE AND TRAINEESHIP COMPANY — BUNBURY***Statement by Member for Bunbury*

**MR D.T. PUNCH (Bunbury)** [12.55 pm]: I rise to recognise the work of the Apprentice and Traineeship Company in Bunbury, whose key focus is to provide employment and training for youth in all the traditional trades. It is one of the largest employers of youth in our region, with 250 apprentices and trainees, and it is one of the largest group training companies in the state. It is a key registered training organisation in Western Australia. Overall, with its group training, labour hire and regional training organisation operations, the company averages between 400 and 450 employees who are paid weekly. It provides regular courses and support for local youth, Indigenous youth and disadvantaged youth at risk in the community. It is based in Bunbury, and the income that it generates stays in the south west. It is involved in sponsoring and supporting numerous activities, organisations, community events and local education institutions. This is one of the many businesses in my community that is now focused on making sure that it has the resilience to survive the challenges that we face ahead. I would like to pass my thanks to the leadership of the Apprentice and Traineeship Company and all the non-government organisations, business communities, peak bodies and our local government that are all working together to meet the challenge that we face ahead in the interest of our community.

**PROFESSOR KADAMBOT SIDDIQUE — CHINESE GOVERNMENT FRIENDSHIP AWARD***Statement by Member for Cottesloe*

**DR D.J. HONEY (Cottesloe)** [12.56 pm]: It is my great pleasure to recognise the director of the University of Western Australia's Institute of Agriculture and Hackett Professor, Kadambot Siddique, who was awarded a prestigious Chinese Government Friendship Award at a ceremony in Beijing on 1 October last year. The Friendship Award is the highest award established by the Chinese central government, which recognises foreign experts who have made outstanding contributions to China's modernisation and reform. In 2016, the United Nations' Food and Agriculture

Organization appointed Professor Siddique as the special ambassador for the International Year of Pulses. Professor Siddique has received many previous awards, including the 2014 Western Australian of the Year. He is a Member of the Order of Australia; a foreign fellow of the Indian National Academy of Agricultural Sciences; a fellow of the Australian Institute of Agricultural Science and Technology; a fellow of the Australian Academy of Technology and Engineering; a fellow of the African Academy of Sciences; and an Urrbrae Agricultural High School Memorial Scholarship awardee. He is also a recipient of the prestigious Dunhuang Award from China. The Friendship Award is conferred on only 50 winners worldwide each National Day in the People's Republic of China, and it was in recognition of his outstanding contributions to agricultural science and education in China over the past 15 years. I hold Professor Siddique in the highest regard, and on behalf of everyone in this Parliament, I congratulate him and thank him for his contribution to global agricultural science.

### KALAMUNDA SCHOOLS

*Statement by Member for Kalamunda*

**MR M. HUGHES (Kalamunda)** [12.58 pm]: It has been my recent pleasure to host morning teas and to thank school staff across the electorate for their excellent work in educating our children. I extend particular congratulations to a number of schools that have significant anniversaries this year. Walliston Primary School celebrates 50 years of service to the community, Kalamunda Senior High School celebrates its sixtieth anniversary, Lesmurdie Primary School celebrates 100 years of service and Kalamunda Primary School reaches a grand old 125 years. My constituents benchmark the provision of our schools against the schools being built in developing suburbs. Schools built for this century rather than the last century should be the schools to which we send our children. In this regard, the community is thankful for the recent significant upgrades at Kalamunda Primary School. Although Kalamunda Senior High School provides an excellent comprehensive curriculum and specialist performing arts program, it is constrained significantly by the lack of adequate specialist facilities. In addition, the co-located secondary education support centre needs access to modern specialist classrooms and adequate teacher preparation areas. Walliston Primary School copes with ageing infrastructure and an inadequate undercover area. The majority of the buildings at Lesmurdie Primary School are well beyond their use-by date. In the view of its school council, to continue to patch and repair the buildings means throwing good money after bad. I am determined to continue to lobby for the significant rebuild and upgrades of these schools in my community that need and deserve them.

*Sitting suspended from 1.00 to 2.00 pm*

### QUESTIONS WITHOUT NOTICE

#### CORONAVIRUS — PUBLIC SECTOR WORKERS

**186. Mrs L.M. HARVEY to the Premier:**

Now that the Premier has had 24 hours to reflect, can he outline to the house what is the plan for non-frontline public servants with regard to their ability to work from home?

**Mr M. McGOWAN replied:**

My intention is, as I outlined to the house earlier, that everyone remains doing their jobs, including us. If that situation changes based upon health advice, we will advise people.

#### CORONAVIRUS — PUBLIC SECTOR WORKERS

**187. Mrs L.M. HARVEY to the Premier:**

I have a supplementary question. At what point in time will non-frontline public servants be able to work from home, consistent with the lead taken by the private sector to protect staff and the broader community?

**Mr M. McGOWAN replied:**

We have to keep our community functioning. Our community has to keep on functioning. All those people out there doing their jobs I would expect need to keep doing their jobs until we get a health advice otherwise. We have to keep providing essential services. We have to keep providing services to the public. We need the private economy to keep on functioning. This is important. This is important for the survival of businesses and essential services for the community. You do not close down offices, factories, construction sites and mines unless it is an absolute last resort; otherwise, our economy will suffer grievously, thousands upon thousands of people will go bankrupt, our health services will suffer, and our schools and our children will suffer. You do not do it lightly. It has to be on the very best of medical advice, and I do not have that medical advice at this point in time. I urge the opposition to be constructive in this environment. Do not be nitpicking and trying to find ways of creating political advantage. It is the wrong thing to do in this environment.

#### CORONAVIRUS — STATE ECONOMY

**188. Ms J.M. FREEMAN to the Premier:**

I refer to the state government's response to the impact of COVID-19 on our economy. Can the Premier further outline to the house the reasons it is important that Western Australians continue to turn up to work and keep our economy going during these challenging times?

**Mr M. McGOWAN replied:**

I thank the member for Mirrabooka for her question. These are very uncertain times. All Western Australians face a tough road ahead. Our economy is going to be severely tested, and that is a very, very difficult pill for all of us to swallow. Since we came to government, we have been determined to create more jobs for all Western Australians. Today's Australian Bureau of Statistics job figures reflect that. For the month of February, they show that since we came to government, 72 200 jobs have been created, and WA's unemployment rate is at a five-year low at 5.2 per cent—one of the lowest in the country. However, these figures are unfortunately an economic high point. Tragically, I fear this will be the last bit of economic good news we hear for a long time. I just have to be honest and up-front. Job losses are unavoidable. Some businesses will suffer and potentially close. People will be let go. As Premier, that breaks my heart for Western Australians. I assure Western Australians that I care about your jobs and I care about your businesses. My government will be doing everything it can to support you. As the impacts of COVID-19 continue to evolve, we will continue to respond, but it will not be easy. Now, more than ever before, we need to keep calm and we need to act responsibly, but, most of all, we need to work together. These difficult times show us what it means to be part of a community. Shutting our economy does not help get us through this crisis; it makes it immeasurably worse. It breaks us apart. It would create fear and distress. It would leave people isolated and alone.

Mr Speaker, I want to do this. I want to thank every worker out there who continues to turn up to work and do their jobs in these uncertain times. To the doctors, nurses and healthcare staff who continue to care for the sick, thank you. To the teachers and education staff who continue to teach our kids, I thank you. To the paramedics, firefighters and emergency service workers who continue to be there when we need them, I thank you. To the police officers who continue to protect our community, I thank you. To the aged-care and disability workers who continue to look after the elderly and the vulnerable, I thank you. To the corrective services workers who continue to keep order in our prisons, I thank you. To the public transport staff who continue to help Western Australians get to where they need to be, I thank you. To the retail staff who are working hard to keep our shelves stocked, I very much thank you. To the truck drivers and freight operators who are delivering the things we need, I thank you from the bottom of our hearts. To those pharmacies who continue to ensure that Western Australians have the medicines they need, I thank you. To those staff in the cafes and the restaurants, the bars and the retail outlets who continue to serve us during this difficult time, I thank you.

**Mr S.K. L'Estrange** interjected.

**The SPEAKER:** Member for Churchlands, I call you to order for the first time.

**Mr M. McGOWAN:** To all those who keep our economy going by turning up to work on mine sites and farms, factories and construction sites, water and electricity and other utilities, I thank you, and to every other Western Australian who continues to keep our community together, thank you very much.

#### CORONAVIRUS — SCHOOLS

**189. Mr Z.R.F. KIRKUP to the Premier:**

I have had many concerns raised with me by parents of schoolchildren asking how the government is protecting teachers and parents —

**The SPEAKER:** Speak up a bit, member.

**Mr Z.R.F. KIRKUP:** I have had many concerns raised with me by parents of schoolchildren asking how the government is protecting teachers and parents at high risk of coronavirus due to their age or medical conditions considering that they are at increased risk while schools remain open.

**Mr M. McGowan:** I could not hear your question; I did not understand it.

**Mr Z.R.F. KIRKUP:** Sure; shall I start again?

**The SPEAKER:** Yes, start again, please.

**Mr Z.R.F. KIRKUP:** Sure; thank you. I appreciate that.

I have had many concerns raised with me by parents of schoolchildren asking how the government is protecting teachers and parents at high risk of coronavirus due to their age or medical conditions considering they are at increased risk while schools remain open.

**Mr M. McGOWAN replied:**

I would urge everyone in our community not to scaremonger. I would urge everyone in our community not to scaremonger. The advice we have is that keeping schools open is the right thing to do. Kids need to go to school. I want to thank especially those teaching staff out there who are providing education and support for children at school. Obviously, if there are teaching staff who are unwell, I would urge them to take sick leave. Obviously, if there are parents who are unwell, I would urge them to stay away from the school environment. Obviously, if there is anyone who is particularly susceptible who may have an autoimmune illness, I would request that they seek

medical advice in this environment. I just want to repeat to all members: the advice that we received and the advice the Prime Minister and I agree on 100 per cent is that if we take kids out of school, we are going to endanger their grandparents. If we take kids out of school, we are going to have them wandering around the streets or the malls where we cannot trace who they may have been in contact with. If we take kids out of schools, we will potentially lose a large part of the workforce, in particular our health workforce. That is a very, very, very bad idea. I urge the opposition member to stop promoting it.

#### CORONAVIRUS — SCHOOLS

**190. Mr Z.R.F. KIRKUP to the Premier:**

I appreciate that. I am not promoting it; I am just asking the question, Premier.

I have a supplementary question. I repeat: how are we protecting teachers and parents of school-age children —  
Several members interjected.

**The SPEAKER:** Members! Say it again.

**Mr Z.R.F. KIRKUP:** How are we protecting teachers and parents of school-age children who are at high risk due to their age or other comorbidities, given the coronavirus crisis?

**Mr M. McGOWAN replied:**

If anyone has any concerns due to age or a medical condition, making them particularly susceptible, I urge them to seek medical advice.

#### POLICE — WAGES POLICY

**191. Mr C.J. TALLENTIRE to the Premier:**

Can the Premier outline to the house why the state government has taken the decision to immediately grant police officers the \$1 000-a-year pay rise that they are owed?

**Mr M. McGOWAN replied:**

Thank you, member for Thornlie. We confront an unprecedented challenge. The job of police officers is very important, and it has never been more important than it is now.

Several members interjected.

**The SPEAKER:** Members!

**Mr M. McGOWAN:** They provide calm amid chaos. They provide reassurance for the anxious. The work that they do is invaluable. As we know, the government has been in negotiations with the WA Police Union for some time. It is disappointing that there has been no agreement at this point in time, but as a government we cannot let this drag on. The uncertainty hanging over the heads of thousands of hardworking police officers out there today, protecting our community, needed to end. That is why today we have decided that police officers will get the pay rise they are owed: a \$1 000 pay rise, per annum. This pay offer was supported by 62 per cent of those police officers who voted. The pay rise will be delivered immediately. They will also be back paid to the date the last agreement expired on 1 July. That means that police officers will get the back pay they are owed in one lump sum straight into their bank accounts. There is no doubt that for many officers this will provide some relief during these difficult times. Hopefully it will ensure that officers can remain focused on their job of responding to the crisis.

As Premier, I could not in good conscience allow this to drag on and deny the vast majority of police officers who voted for this offer the pay rise that they are owed and they requested. Meanwhile, the government will continue work with the police union to resolve the broader industrial agreement. We are committed to working respectfully and constructively with the police union. However, today's decision to immediately give a pay rise to the police had to be made. It is a recognition of the crucial work that they do and it aims to provide certainty for those officers and their families. I want to once again thank police officers for continuing to come to work and protect our community. They are doing a great job and I am very grateful for their service.

#### CORONAVIRUS — GOVERNMENT RESPONSE — BANKS

**192. Ms M.J. DAVIES to the Premier:**

Before I ask my question, I will put on the record my thanks to the Premier for his response just before question time to the questions we raised about 417 “backpacker” visas, and for raising that matter at the national cabinet meeting; we appreciate it.

I refer to statements that the Premier has made in this place and in the media calling on banks to be responsible when it comes to loan repayment arrangements for businesses and individuals in these trying times. Can the Premier advise the house whether he or his cabinet ministers have convened a meeting with heads of banks here in Western Australia to discuss the current COVID-19 situation and how they will be responding in the short to medium term?

**Mr M. McGOWAN replied:**

As I have outlined in the house now for the best part of a week, I am very concerned that banks and landlords do the right thing by their customers and their tenants. I have expressed that publicly. If action is required, I urge the commonwealth government, which regulates the banks, to do the right thing. I expect that banks are coming under a great deal of pressure currently from not only customers, but also the commonwealth government—I certainly hope so. I have communicated my views on this matter to the Prime Minister and the commonwealth government, which regulates the banks. This is a time for economic nationalism on the part of the banks. It is a time for them to act as Australians first, and I urge them to do so. I will continue to raise this matter at the national cabinet meetings. It is incredibly important that the banks—we have four large ones—which, in effect, receive some protection because of the law of the nation, do the right thing by the nation.

**CORONAVIRUS — GOVERNMENT RESPONSE — BANKS****193. Ms M.J. DAVIES to the Premier:**

I have a supplementary question. There is precedent for state governments to convene meetings with banks to discuss emergency responses—for instance, in times of drought. Does the Premier not agree that it is appropriate to meet here in person with the Western Australian heads of banks at the earliest opportunity to discuss the short and medium-term responses?

**Mr M. McGOWAN replied:**

It is a reasonable idea. The banks are regulated nationally and I have raised the matter with the Prime Minister. I will just have the member know that my diary is booked around the clock to deal with various issues to ensure that we have a functioning economy, a functioning public sector and a great health response. I am currently making lots of decisions and engaging with lots of people on all those matters.

In terms of the business community, of which the banks are a part, I have had numerous engagements and contacts in recent months to deal with this matter and to do the best I can by the business community in Western Australia. I will consider what the member has said about a formal meeting with banks, but I am confident that they are very aware of my views.

**CORONAVIRUS — HEALTH SYSTEM RESPONSE****194. Ms J.J. SHAW to the Minister for Health:**

Can the minister update the house on the response to COVID-19 by Western Australia's health services and the action that continues to be taken to manage the impacts of this virus?

**Mr R.H. COOK replied:**

I thank the member for the question. This is a good opportunity to update the house on a range of activities that are taking place across the health system. Just this morning we came from a briefing of all Western Australian federal members of Parliament, who joined us both in person and online to be provided with details about what we are doing around the COVID-19 response. All those members of Parliament from both sides of the political fence appreciated the information that was made available.

One of the things we said to them is that it is inevitable that we will soon have community-based spread of the virus. In some respect, we will then be in a position to move towards our treatment phase of the response as we transition out of the containment and isolation phase. It will be an important step when our health services start face-to-face engagement, if you like, with many of the presenting patients. We are doing a lot of work around ensuring that the workforce is supported so that it can deal with this issue. Members will have heard me talk about the need to boost our workforce through work pools. Online today we set up a dedicated call centre that has been developed for all WA health staff to manage COVID-19 screening and testing in line with the set criteria. If it is required after the initial screening, those staff will be referred to the COVID clinics. WA health staff working in other regional areas will be able to access COVID testing through their local hospitals and health services. This is all part of an important process to make sure that those people who work on the frontline have our back.

As we get ready to leave Parliament this week, I present everyone with some homework. As members go back to their electorate offices, they should take the opportunity to look up the doctors and nurses and those people who work in the hospital environment. Members need to let them know that they support them and thank them for their dedication. They are going to be in the fight of our lives over the coming months. It is important that they know that every one of us is behind them in terms of this fight. It will be a tough one. We know that we have some of the best doctors, nurses, allied health staff and support workers in the world who can support us in this fight.

We have also announced that we will be extending our free influenza jabs for school-age children. Many members will be aware that Western Australia was the first government in Australia to offer a free flu vaccine for children from six months to five years of age. It is an important first step that other states have since followed. Today, we have announced that we are extending those free flu jabs—try saying that after a hard day at the office—for all school-age children from five to 11 years of age. This is a really important step. We know that kids are pretty resilient

and, by and large, will be able to cope with the colds and flus that come each year. However, we also know that they are the best transmitters of influenza and therefore it is really important that we target them. Modelling suggests that if we can increase the vaccination rate of school-aged children to 20 per cent, we will reduce the number of hospitalisations from influenza by 30 per cent across all age groups. That is because these little mites pass it on to their parents, grandparents and others in the community. This is an important next step. We will make sure that we roll out the influenza program at speed. Many members will remember that last year we lost 79 Western Australians to the flu virus. This year we have an even bigger threat, and that is the overlay of COVID-19. We must do even more to make sure we can suppress the amount of influenza in the community because it impacts on the elderly and the most vulnerable.

In other news that members may not be familiar with yet, as a result of a meeting with the Australian Health Protection Principal Committee today, the commonwealth Deputy Chief Health Officer has announced restrictions around medication supplies. I provide this information not because it is our doing but because many members have said that they are concerned about members of the public buying medications for long periods, and that certainly has been a concern that the pharmacy industry has expressed to us. From today, the dispensing of certain drugs will be limited to one month's supply, which members will appreciate is a perfectly reasonable amount of time, or one unit per purchase. There will also be controls on over-the-counter medication such as ventolin and other medications used by people with a lung condition. They will be placed below the counter—not below the counter; that is for other stuff! They will now be placed behind the counter and customers will have to demonstrate, via various forms of documentation from their doctor, that they require those medications so that we can continue to provide those sorts of drugs to the people who most need it.

This is a fast-moving situation. We know there will be changes. That is inevitable. The Prime Minister has made further announcements today and I know that the Premier will meet with the national cabinet tomorrow, so we can expect further announcements to come out of that meeting. I stress to members that we will soon be experiencing the beginnings of the community-based transmission of the virus. We are ready for it and we will have measures in place to make sure we can take the Western Australian community through that next phase.

#### KEYSTART — INTEREST RATES

##### **195. Mr D.C. NALDER to the Premier:**

I refer to the Premier's comments calling on all banks and landlords to be kind to people who are experiencing financial difficulty. Will the Premier outline to the house any discussions he has had with Keystart to reduce the suffering of its customers who are experiencing financial difficulty?

##### **Mr M. McGOWAN replied:**

Obviously, we are currently considering those matters. Cabinet will be considering those matters along with some of the matters the member raised yesterday.

#### KEYSTART — INTEREST RATES

##### **196. Mr D.C. NALDER to the Premier:**

I have a supplementary question. Is this not the time to show leadership when Keystart is continuing to charge some of the highest interest rates in the country, we are facing the worst economic crisis in memory and the Reserve Bank of Australia is slashing interest rates?

##### **Mr M. McGOWAN replied:**

It is not an interest rate matter; it is a matter of foreclosures.

**Mr D.C. Nalder:** No, it is an interest rate matter.

**Mr M. McGOWAN:** It is a matter of foreclosures.

**Mr D.C. Nalder:** You're charging the highest interest rates in the country.

**The SPEAKER:** Member for Bateman, I call you to order for the first time.

**Mr F.M. Logan:** That's wrong. That's not true.

**The SPEAKER:** Excuse me. Minister, I call you to order for the first time.

**Mr M. McGOWAN:** The shadow Treasurer is factually inaccurate, once again.

**Mr D.C. Nalder:** Ask the customers.

**Mr M. McGOWAN:** He is always factually wrong. Here he is, in the midst of this crisis, once again acting inappropriately.

We will deal with this matter at a cabinet level and seek the very best advice. It really is a matter of banks and landlords not foreclosing or evicting. That is the issue here. We currently have a very serious situation whereby people may not be able to meet the mortgage payments on their houses and/or small businesses, which will be a very difficult situation for many people. That is an area that the banks need to join forces on. Obviously, over

time, Keystart has been one of the most benevolent of lenders in the broader community and it has very, very low levels of foreclosures on householders across the community. I would obviously expect that to continue. We will have further announcements around Keystart and other matters that we will be considering to ensure that we do the best we can to protect people. I once again implore banks and landlords to be kind to people in this situation. I hate the thought of landlords in major shopping centres evicting tenants in large numbers, the shopping centres becoming empty and the remaining tenants therefore having empty shops next to them. It is not a productive thing to do and I urge every single landlord to consider that over the coming months. I will continually raise these matters with the federal government to ensure that we have a nationally consistent approach to protect people as best we can.

#### CORONAVIRUS — REMOTE COMMUNITIES

##### **197. Mr D.T. PUNCH to the Minister for Aboriginal Affairs:**

I refer to the state government's response to COVID-19 and its potential impact on Western Australia's remote communities. Can the minister outline to the house what advice has been given to residents in Western Australia's remote communities in working to stop the spread of this virus?

##### **Mr B.S. WYATT replied:**

I thank the member for Bunbury for that question. As I have said in this place this week, remote Aboriginal communities are potentially quite vulnerable to COVID-19 if there is an outbreak of infection. Aboriginal people have higher rates of respiratory illnesses and are a vulnerable group. I have made comments about large gatherings at funerals. As a result, we have, just today, evoked powers under the Emergency Management Act 2005 and issued a direction that deals with two groups of people. A person who is outside the boundaries of a remote Aboriginal community must not enter upon any land within the boundaries of a remote Aboriginal community, and a person who is within the boundaries of a remote Aboriginal community must not move outside those boundaries except for specific circumstances, such as for medical care or obtaining essential services. We also made it clear that this does not apply to roads within those communities so that people can still get around individual communities. Heads of government agencies, community corporations, native title entities and land councils are being informed of this direction. Importantly, we are now working with remote Aboriginal communities to develop their community pandemic plans that are applicable to each one. This is a very important thing to do because, as I have said, Aboriginal communities are vulnerable. Yesterday, the Minister for Health said in a debate during private members' business that remote Aboriginal communities are quite safe if we can keep COVID-19 out of those communities. We will continue to work very hard to ensure that our Aboriginal citizens across Western Australia have the protection that we can give them. I do not take this step lightly. I emphasise again to those Aboriginal people who are considering moving vast distances between communities that this is not the time to do that. Large funerals should not be conducted, certainly over the coming six months. I will continue to emphasise that point because, ultimately, all that would do is expose many people—Aboriginal and non-Aboriginal people—to the potential spread of COVID-19.

#### CORONAVIRUS — GROCERY SUPPLIES — REGIONAL AREAS

##### **198. Mr D.T. REDMAN to the Premier:**

I refer to reports of legal looters travelling from the metropolitan area to raid regional grocery stores for goods that are in short supply at the expense of local communities.

- (1) Has the government engaged directly with wholesale and retail groups to gauge their ideas on how supply chain security can be ensured for regional traders and customers?
- (2) Will the Premier consider allocating additional police resources to protect essential supplies in regional towns, as has been done in the metropolitan area?

##### **Mr M. McGOWAN replied:**

- (1)–(2) The Freight and Logistics Council of Western Australia, which met a couple of days ago, is working to coordinate and ensure that there are appropriate supplies of goods and fresh products into every part of Western Australia. That work is currently being undertaken by the Minister for Transport and the Freight and Logistics Council under Nicole Lockwood, Cam Dumesny and the other members of that council. I think the same question was asked yesterday by the Deputy Leader of the Nationals WA, and I said that I am appalled by all the panic buying going on in Western Australia across the city and across the regions. I am appalled by all of it; it is shocking. I urge everyone engaged in that sort of conduct to stop. The Commissioner of Police has already indicated that police will be placed in shopping centres as a calming initiative and to arrest and charge people who break the law.

#### CORONAVIRUS — GROCERY SUPPLIES — REGIONAL AREAS

##### **199. Mr D.T. REDMAN to the Premier:**

I have a supplementary question. Will the Premier consider fast-tracking police recruitment in the regions to fill the current gap in officers on the ground in regional locations?



**Mr M. McGOWAN replied:**

There is an ongoing recruitment program for police officers. Obviously, that takes some time. From memory, it is six months. Obviously this is an issue right now, so police are putting resources into dealing with this as we speak.

## CORONAVIRUS — AGED-CARE SECTOR

**200. Mr M. HUGHES to the Minister for Seniors and Ageing:**

I refer to the state government's response to COVID-19 and its impact on the aged-care sector. Can the minister update the house on the measures being taken to help protect residents in Western Australia's aged-care facilities?

**Mr M.P. MURRAY replied:**

I thank the member for the question. Based on what we know about COVID-19, seniors form one of the groups most at risk of serious infection, and we must take this very, very seriously. Following the Prime Minister's advice, a number of restrictions have been placed on visits to aged-care facilities. I can confirm that anyone who has been overseas or in contact with a confirmed case of COVID-19 within a fortnight will be banned from visiting aged-care centres and facilities. Anyone with a fever or symptoms such as respiratory infection, cough, sore throat, runny nose or shortness of breath will also come under the ban. After 1 May 2020, those who have not been vaccinated against influenza will also be prohibited from entering any of those facilities. Aged-care residents will be able to receive only one visit per day, with a maximum of two people visiting. Children under 17 years are advised to visit only by exception—sometimes there might be a moment in life that is the last chance for people to say something to someone; that would be the exception. Although I understand this can be distressing to some, commonsense must prevail. Visits should also be conducted in a resident's room, specifically designated area or outdoors to reduce any risk of potential transmission, and people should practice social distancing measures when possible. Measures such as phone and video calls may be made accessible to residents in those facilities to enable regular contact with family members and to prevent feelings of loneliness and isolation.

We will be using powers under the Public Health and Emergency Management Acts to enforce these new rules to protect Western Australia seniors. As the Premier said previously, penalties of up to \$50 000 will apply. Some aged-care providers have also taken additional precautions, with Regis Aged Care, for example, entering a lockdown and prohibiting any visitors for the next two weeks in all its facilities. However, allowance will be made in exceptional circumstances. I recommend visitors call ahead to check whether any further restrictions are in place in such facilities. Every Australian needs to be conscious of minimising the risk of transmission of COVID-19 to older Australians, who we know are in the group most at risk in this area. I urge community members to take some responsibility for the safety of seniors in their lives by strictly self-isolating if required in accordance with directives from the Department of Health and by adhering to the restrictions I read out earlier.

These timely and sensible measures are important mechanisms to protect our most vulnerable, and I thank everyone for their cooperation. As has been said, when we go back to our communities today, we need to emphasise to people that things are not normal and we have to take extreme measures to try to control the problem we have.

In finishing, I congratulate my local butcher, Spry's Meat Market, which has taken steps in my community to make sure seniors are able to buy meat without fear of missing out due to panic buying. I ask that similar businesses do the same.

## CORONAVIRUS — POLICE

**201. Mr P.A. KATSAMBANIS to the Premier:**

I refer to the fact that our hardworking police officers have stepped up with extra duties in this time of need, including helping to police self-isolation requirements and additional patrols in shopping centres. How many additional police officers does the government intend to recruit to assist our hardworking police officers to maintain law and order in these difficult times?

**Mr M. McGOWAN replied:**

I would like to thank our police officers for all the work they are doing. This is the third time during this question time that I have done that. I would like to repeat that. I would like to thank them during this difficult time, as I would like to thank all other public sector workers for all the work they are doing, and, indeed, the private sector as well. This is a difficult time, and it is time for everyone across the community to step up and show their metal.

It is a matter of record that prior to coming to government we committed to recruiting for the meth border force and also the regional enforcement unit. We are the only major party that made a commitment towards additional police officers, and we have delivered that. Obviously, in the budget deliberations that are going on we will make further decisions about additional police officers.

## CORONAVIRUS — POLICE

**202. Mr P.A. KATSAMBANIS to the Premier:**

I have a supplementary question. Given the added burden on our police officers and the risk that that poses to them, is the Premier able to update the house on the current availability of personal protective equipment for police officers, and, specifically, the type of protective equipment required to protect them from the virus?

**Mr M. McGOWAN replied:**

I urge that if the member has a specific question on the availability personal protective equipment to police officers, he should ask the Minister for Police.

**The SPEAKER:** That is the end of question time.

**HEALTH SERVICES AMENDMENT BILL 2019***Second Reading*

Resumed from an earlier stage of the sitting.

**DR A.D. BUTI (Armadale)** [2.36 pm]: Prior to the lunch suspension, I was concluding my contribution. I made some remarks about the health profile of my electorate, which, on the basis of recent figures, is not very good. That led to some comments about preventive health, which I see as incredibly important not just for the health of the population, but also to try to reduce demands on our public health system and the private health system as well. When we look at preventive health, we need to look at various issues such as nutrition, fitness and general lifestyle. Unfortunately, there is a link between socioeconomic status and health and fitness. This is of course generalising—I am not referring to any particular person—but statistics tell us that communities in lower socioeconomic areas have the worst health and fitness outcomes. As I mentioned, certain parts of the Armadale electorate have the highest obesity and alcohol and tobacco consumption rates in the metropolitan area. Seville Grove in the City of Armadale has the lowest mean life expectancy in the metropolitan area of 68 years. Interestingly, Collie has the highest obesity rate in the rural area. Did the member for Collie–Preston know that?

**Mr M.P. Murray:** I knew that. I think they took my measurements twice.

**Dr A.D. BUTI:** They took the member's measurements twice! It is interesting because, as I mentioned yesterday, Collie is my birthplace. I lived there for nine years, but I have lived most of my life in the Armadale region.

**Mr W.R. Marmion:** You need to go back to lower the figures again!

**Dr A.D. BUTI:** Yes, lower the figures—exactly right!

This is really, really important, and governments of all persuasions, federal and state, need to put more time and effort into preventive health measures. A few years ago I ran a fitness training program in my electorate for free. We had human movement students from Curtin University. We had about 15 people two mornings a week in one of the local parks, and on the Saturday morning they did a park run. It was very beneficial and successful for those who participated. Their various fitness measurements improved over that time. I would love to do that on a wider scale, but would obviously face a range of issues in perhaps not being able to use local parks for free and whether it would interfere with commercial operations and so forth.

**Mr W.R. Marmion:** Are you suggesting that member for Collie–Preston should be taking a leaf out of your book and start running the same program?

**Dr A.D. BUTI:** The member for Collie–Preston is pretty fit, so I do not need to worry about him! I am more concerned about the general fitness of the population of Western Australia and Australia. Australia is showing signs of moving down the American route when it comes to fitness and health statistics, and we definitely do not want to get to that scenario. The United States sometimes feels like a country that is eating itself to death, with the amount that people eat without engaging in physical fitness. I take preventive health incredibly seriously, and we as leaders and legislators have to look at preventive health measures more than we do. Not only would it benefit the community, it would reduce demands on our hospital system, and we know that the major outlay of the health budget is the hospital system. On that note, this bill takes important measures to administer the health system in WA, and hopefully it should improve the delivery of health services, but we need to look at other measures to reduce the demand on a hospital system.

**MS J.M. FREEMAN (Mirrabooka)** [2.42 pm]: I, too, rise to speak on the Health Services Amendment Bill 2019. I was in the house when the original Health Services Bill was introduced in 2016. I will talk about that process later on and how we went into a separate chamber. Before I start, I want to join the Premier, the Minister for Health and all members in this house in congratulating the efforts of all health workers at this critical time in managing COVID-19 and testing for and treating it. My sister is one of those workers. We feel somewhat concerned about their health and the risk they put themselves in when they do what they do on the front line. We really respect and regard the work they are doing to ensure our community is safe.

I am going to summarise some of the things in the bill before us. The bill has amendments to recover fees and charges from patients, in particular, recovery of compensation payments. It is really important that there is transparency for the patient and they know that this is the case when they embark on the treatment. People who have compensation payments are often approached by the insurer to wrap up their workers' compensation claims, with a view to finishing them. Sometimes that is not done formally, as I am sure the member for Mount Lawley will outline. It is often done on a without-prejudice basis before they can pick up the claim because they do not want to accept liability and are willing to pay part of the claim. A patient might have an operation or get treatment in the public health system and find the public health system telling them that they owe associated fees because they have received compensation. It is a big concern. It also happens with Centrelink. People often end up not realising that while

they have spent time on health benefits, after a limited payment for the purposes of an insurer taking them off the books, they end up with even less money or indebted. When someone has suffered a workplace injury and cannot return to work, it is really detrimental to their wellbeing and continued capacity to function in our community. It can put people into injury psychology, by which they are caught up in their injuries and how they have limited their life. That is a real consideration for this bill, and I am interested to hear from the minister how he will ensure that any recovery in that context will ensure procedural justice for workers who get compensation payments. I understand that the intention of the provision is primarily to get away from the insurer before they pay, but that could lead to the insurer reducing the payout to the worker, and that can also be detrimental.

My biggest concern is how the recovery of payments will affect people seeking asylum and whether there will be any changes that impact those people, such as the fees associated with accessing hospital and other health services. The minister is aware that the Parliamentary Friends of Refugees has been seeking that the government follow the Australian Capital Territory's lead and exempt asylum seekers and bridging visa holders from medical fees. Some bridging visa holders get covered by Medicare, but some do not. Pretty much all asylum seekers in that difficult time do not. A certain number of temporary visa holders also do not get payment. A number of people hold a visa that allows them to work in the regions. Many people have them so they can get permanent residency at the end of that time. They also find themselves not covered by Medicare and they are left with the cost of medical services when they go into the public or any other health system, which effectively leads them not to seek medical treatment.

There is an example of a situation like this in my office at the moment. I will talk about Ms N. I know her refugee story. She has really struggled. She basically suffered religious persecution in a community in Uganda. She arrived in Western Australia on a tourist visa. She was encouraged to come here on a tourist visa to visit a man, and on arriving found that his intentions were not honourable. She felt that he was going to afford her some protection as she was at real risk in Uganda. She took the opportunity, and when she arrived in Australia, she applied for refugee status. She was granted a bridging visa, so although her refugee status has not yet been determined, it is certainly being given due consideration. Thousands of people in Western Australia and Australia are on bridging visas. The government has really slowed the processing of humanitarian refugee applications for those seeking protection visas. This woman was pregnant when she arrived here. She has a husband back in Uganda. She came to Western Australia with her adopted daughter. The Whip might be interested in this story. She went to the Australian Red Cross as she was seeking refugee status, and the Red Cross assisted her. Because she was pregnant, the Red Cross referred her to King Edward Memorial Hospital for Women for prenatal checks. The Red Cross processed her refugee application so that she could get a bridging visa. She arrived in September and was granted a bridging visa in October. Between that September arrival date and getting her bridging visa in October, she had a series of prenatal checks, for which she incurred costs. Her baby was duly born on 25 October at King Edward Memorial Hospital for Women. She says that at the time that she went for the prenatal checks, she told King Edward staff that she did not have a Medicare card and was in financial hardship—she was not working at that time—and the hospital said that it would contact the Red Cross about any expenses. Clearly, it must have done that but the Red Cross may not have made good for those expenses.

Ms N had her baby daughter on 25 October 2016. There was no cost for that delivery because, by that stage, she had been granted a bridging visa and had become eligible for Medicare. However, she received a text message from the hospital on 22 January 2020—she says that she had not received notification before then—stating that she owed \$1 890 relating to prenatal tests that were done prior to her Medicare coverage. I have spoken to Ms N and she told me that when she spoke to the hospital, she was told that she had to pay the amount in full, and that if she did not, it could jeopardise her refugee status. She was terrified, for her children and herself, that she would have to return to the country that she had fled because of persecution. She was offered a repayment plan of about \$300 a month, but she is unable to pay that money. She works as a part-time education assistant, but it is a marginal income. The first payment of \$300 was due on 2 February but she could not meet that payment. She went in good faith to the hospital. She came to Australia in the September and was sent for prenatal tests, and rightly so, because she was pregnant, by what is effectively a government authority. The Red Cross has a really strange relationship with the Australian government in that we cannot get a proper annual report from it; it is almost a quasi-government organisation. She has now ended up with a large, unfair debt.

When we have approached the minister about these sorts of debts, his response has been that it is basically a responsibility of the federal government—that it should cover these people with Medicare. That is the whole issue with these people, as they are covered once they get a bridging visa. While that may be true, this case and other cases like it—there are a small handful of them, not a large number—would not have a massive impact on our health budget. These people effectively remain disadvantaged. The ACT manages to pay these amounts. In response to the Centre for Asylum Seekers, Refugees and Detainees, the Minister for Health said —

In Western Australia, hospitals are required to recover the costs of providing health care to Medicare ineligible patients. With regards to asylum seekers this may involve recovering payments from the Department of Home Affairs. Additionally, according to the WA Health Financial Management Manual, Health Service Providers have the ability to waiver fees and charges, on an individual basis, but only in justified and reasonable circumstances.

Each case has to be put forward separately. It should be a case of asking people about the type of visa they hold, what is happening with their visa and whether they are on a visa that makes them ineligible to access Medicare. These people's costs should be covered, as happens in the ACT. It really is a small handful of people. We understand that the Western Australian Department of Health has begun discussions with the commonwealth Department of Home Affairs on reaching an understanding on the care of asylum seekers in our community. Frankly, this is about showing compassion. We are now advocating for Ms N. She is a resident in the area. She has had to go through a lot of pain to establish herself in Australia and she suddenly now finds herself with a really large debt. That just seems completely unfair. As one of the co-conveners of the Parliamentary Friends of Refugees, I ask the government to follow the lead of the ACT and exempt asylum seekers and other visa holders who are ineligible for Medicare.

This bill also rectifies land ownership issues. I would like to announce here that the Mirrabooka land that was previously owned by the Department of Health has, after many years of lobbying and raising this issue in this place—I think members got really used to me talking about lot 401 Milldale Way, but not since this government was elected —

**Mr I.C. Blayney:** I listened to it for 11 years, member!

**Ms J.M. FREEMAN:** Yes, the member did! I raised this issue for many years. Guess what? We are about to open an aged-care centre on that site. The land was sold to MYVISTA, which will open a retirement and residential aged-care facility there. That will happen, unfortunately, in May 2020. That may not be the best timing in the world, but I wish MYVISTA the best success. It looks fantastic. There is still land around it that needs to be developed, and I look forward to those large vacant tracts of land in Mirrabooka being built upon.

**Mr D.R. Michael:** Lot 60 and lot 61.

**Ms J.M. FREEMAN:** Yes, lot 60 and lot 61; I thank the member. It is not lot 401 anymore; it changed when it was split.

I was very proud to hear about that and I take this opportunity, while we are talking about a bill that rectifies land ownership, to say how hard it was to get the Department of Health and the Department of Housing to finally resolve those land issues. Thankfully, once they did, the issues resolved quickly, because the Department of Health had impetus to move on it. Dr Kim Hames, the Minister for Health of the previous government, should be absolutely applauded for working with me to deliver a really good outcome for the Mirrabooka area.

I also note that this bill validates the Health Services (Conduct and Traffic) Regulations, which I assume relate to parking fees and fines. I ask the minister: what flexibility will this give to the boards and government on the charging of fees, given the current public health challenges that we face? Parking fees are a major issue for many people who attend hospitals either for treatment or to visit patients. I understand that people with ongoing treatments can apply for some sort of voucher system. However, during this period, when we expect that many people will be hospitalised, we hope that there will be some flexibility around the costs of parking at our hospitals.

[Member's time extended.]

**Ms J.M. FREEMAN:** I would appreciate the minister expanding on that. This bill also confirms the employing authority for all employees other than the CEO as the government health service provider boards. Being employed in the public health system is critical to delivering an effective, efficient and cohesive service. I know that, because I was a member of the Education and Health Standing Committee when it wrote the report titled "Managing the Transition? The Report of the Inquiry into the Transition and Operation of Services at Fiona Stanley Hospital". We also wrote the report titled "More Than Bricks and Mortar: The Report of the Inquiry into the Organisational Response within the Department of Health to the Challenges Associated with Commissioning the Fiona Stanley Hospital". The "Bricks and Mortar" report was about Fiona Stanley Hospital wanting to be a paperless hospital, but "Managing the Transition" was about the contract with Serco and the delineation that occurred. In the course of writing the report it became clear that the central sterilisation supply department workers that Serco was providing were not up to the task. During the course of the inquiry, the government took those workers back in-house, which at that time was to be applauded. What is to be applauded now is this government's commitment to bringing other health service workers back into permanent public health employment, which I think this government can be proud of delivering.

In conclusion, I want to talk about a couple of other things. The member for Armadale talked about the impact of COVID-19 on fitness. I note that in the Mirrabooka community there has recently been the closure of our park programs. That is disappointing because those programs kept a lot of kids active and interested. Kids from non-English-speaking backgrounds came and did a variety of different sporting activities. It was funded by the Department of Local Government, Sport and Cultural Industries and run through the Edmund Rice Learning Centre and a few other organisations. It was decided to close that because of COVID-19. I agree with the Premier that we need to continue to do things that ensure that our kids are safe, but also active and engaged. The park program did that and it is a bit of a disappointment. I hope to see it up and running again after the school holidays.

When we look at health services one thing that is important is budgeting. While I am talking about fitness, I want to remind people that the Education and Health Standing Committee report titled "The Food Fix: the Role of Diet

in Type 2 Diabetes Prevention and Management”, which dealt with treatment options for type 2 diabetes, clearly illustrated that type 2 diabetes is the fastest growing chronic disease in Australia and costs \$1 billion per year, which is 10 per cent of the health budget. People with type 2 diabetes are at greater risk of COVID-19. There is something like a 22 per cent greater risk of fatality if people have type 2 diabetes. Those are figures that have come out of some studies and that is really concerning. There is the capacity in our community to front-load that preventive action to help curtail this chronic disease in our community by giving people really good dietary advice through the primary health system in the early stages of their diagnosis, such as very low-calorie diets or low-carb diets or a range of others. Despite the government not accepting the report’s recommendations, I urge the government to at least trial a couple of those programs in the review process, which obviously might not happen quickly now, as has been done in the National Health System in Britain. That could ascertain the efficacy and efficiency of doing that to deal with a chronic disease that has a massive cost impact on our health system.

One thing I want to talk about is that when the original Health Service Bill was dealt with along with the Public Health Bill in 2016, the opposition agreed to refer the bill to a legislative committee. We went into the committee room next door and the legislative committee operated like a Federation chamber in the commonwealth Parliament. That process had not been used since 2004 and 2002. I have spoken about it in this place before. The creation of the legislative committee allows the Legislative Assembly to occur in two places concurrently. The committee has a number of benefits over the Assembly. It requires a lower quota of only three members to proceed. Senior public servants can participate in the committee to provide detail and share their knowledge of the drafting process. It allows a deliberative process of questioning, answering and clarification with reference to both ministers and advisers. The possibility and desirability of amendments may be discussed prior to their being drafted and tabled.

The reason I raise it at this time is that today we moved a special motion to be able to reconvene this house if we need to for urgency reasons. We will all be taxed by the situation that confronts us with COVID-19 over the next, hopefully, six months, but probably 12 months. The opposition and the government could consider taking things into the legislative committee for the purposes of consideration in detail. It is a smaller, more concise, more capable process, which led to some great outcomes in the Public Health Bill. There were good outcomes in the Health Services Bill, but particularly in the Public Health Bill. We should consider that as a flexible option. We can have a quorum of 21 members and a second reading debate going on in here, but we can get on with other business. I am loath to call this situation a crisis, because we have not had any community contagion, but when this health situation no longer confronts us, we will have legislation that will be ready to be brought to the house and dealt with. I suggest that that be given due consideration by both the government and the opposition in the coming months.

**MR D.T. PUNCH (Bunbury)** [3.07 pm]: I am delighted to stand and make a contribution on the Health Services Amendment Bill 2019. I am delighted because it is a review, an amendment, and an improvement on the effectiveness of the Health Services Act 2016 which, of course, is the act that provides a governance framework for what is probably the most substantial portfolio within the government. It is certainly one that goes to the heart of every community in Western Australia.

The original intent of the 2016 act was to create a contemporary and decentralised government model for the health system. Essentially, it tried to find the right balance between local decision-making, which I hold very dear, and a framework that provides for a broader strategic direction for what the outcomes and performance parameters of the health system should be. It clarifies the roles and responsibilities of each level of the WA health system. Under that act, the Minister for Health is responsible for establishing a series of statutory entities, referred to as health service providers, and determining their governance arrangements. Those health service providers are responsible for governing their areas of interest with oversight from both the minister and the chief executive officer of the Department of Health. From a regional point of view, that is a really interesting model because it provides for a framework for governance and supporting local decision-making and the identification of local health outcomes that are important. At the same time, it recognises the importance of maintaining the integrity of the health service across the whole of Western Australia.

What a challenge health service providers in our state have, given its scale and geographic size, the number of communities that we have, the dispersal of communities and the ability to get a quality health response that is adaptable and nimble enough to meet the needs of those communities. It is a very dynamic system that has to be nimble and responsive, yet at the same time to be charged with the requirements of Western Australia’s health service outcomes is a major responsibility.

The amendment bill identifies a number of issues that could be improved. Members have spoken about those. They are important. I want to go over a number of those that are particularly close to my heart. One of the key amendments in the bill is the establishment of a new framework for the delivery of capital works and maintenance. It will clarify the roles and responsibilities of the delivery of capital works at each level. From my point of view in a regional area, that highlights two things: first, the potential to be far nimbler and responsive in the construction of capital works programs, identification of capital works requirements and injecting them into the budgetary process; and second, and importantly, the opportunities for the delivery of capital works for local content. If we get flexibility as well as accountability in the delivery of the capital works agenda for the health network, that will be a very good outcome for regional WA.

The next item that I wanted to look at was the notion that the bill will provide and establish a comprehensive way of recovering fees and charges from patients who receive treatment for compensable injuries. The member for Armadale touched on this, and I am sure that the member for Mount Lawley will be touching on this in greater depth. Our health system has to be sustainable in the future. This government commissioned the health services review very much with sustainability at heart and a recognition that the cost of providing health to the state is increasing rapidly, as it is in every jurisdiction. We need to make sure that the costs are apportioned appropriately. This provision goes to the heart of helping to support sustainability in our healthcare services by ensuring that charges are reflected appropriately by insurance or other bodies that might be responsible for the provision of treatment. It is especially important in the sense of alerting and making sure that patients who receive treatment at a public hospital as public patients who have not disclosed that they have received compensation or who have received compensation after the treatment is provided are looked after. The provisions in the amendment bill allow for a more secure framework around that in terms of cost recovery.

In my community, as is the case with many communities, we have a very large multicultural population. For many of them, English is a second language and for many of them, people are still learning English. When communicating this change and the importance of disclosure in compensation actions, it is important that appropriate attention is given to making sure it is explained in a way that is consistent with the cultural requirements of not only Indigenous people, but also people from all over the world. Appropriate language and explanation will be a critical part of ensuring that there is not an unintended consequence around that provision of placing vulnerable people in a very difficult circumstance down the track.

The bill also rectifies WA's system of complex land management and ownership issues. The transitional provisions in the Health Services Act were designed to transfer land and property held by or under the care and management of the old hospital boards to the health ministerial body. Some difficulties have been associated with that. It was subsequently determined that a number of properties were held in the Minister for Health's name. These provisions will effectively remedy that oversight by allowing the minister to make appropriate orders for the transition of all freehold property and crown reserves used for the purpose of providing health care to the ministerial body. Again, from a regional point of view, that is incredibly important because it means that the health service provider and the WA Country Health Service can look at their asset base and maximise their potential to get the best outcome from a health point of view from performing assets, look at those areas that are underperforming and look at where there are better uses for that. That relates to the amendment to section 35 under clause 18 of the bill. Again, the member for Armadale touched on that. Clause 18(2) states —

- (2) A health service provider may provide any facility under its control or management for the use of —
- (a) a health professional to carry out a health service or other service; or
  - (b) a person that engages in community work or conducts a service that has a community or charitable purpose.

As a result of my previous career in social work many years ago and also in the work that I did within regional development, I am aware that that provides enormous flexibility in the use of assets in regional WA and enables communities that have a health service link and an important role to play, particularly in primary health care, to work in partnership with health service providers and maximise the utilisation of assets, potentially take advantage of buildings that may be unused and come to an agreement on the provision of services to support those outcomes. It is important because in regional WA, I tend to think of things very much on a place-making model. We have a range of assets across community in many of our country locations. The ability of those assets and those organisations and people to work together effectively builds up a network of services that often overcomes some of the disadvantages of isolation and distance from major regional centres or indeed the metropolitan area. Looking at ways that we have flexibility for health service providers, community organisations, local government and other providers to actually work together and identify the health needs of a particular location and how best to use the resources available to meet those health needs is a very good outcome from my point of view.

The bill will also work towards improving the duties and responsibilities of board members under the act by clearly setting out board members' duties in the management of conflict of interest fiduciary duties to the health service provider and to the state more broadly.

I want to not so much comment on the bill itself but acknowledge the work of Wendy Newman, the deputy chair of the WA Country Health Service board. She has an enormous knowledge of regional Western Australia and understands implicitly that notion of place making and connecting community resources to achieve a good outcome. If our boards within the health service system have people of the calibre of Wendy, we will be very well served.

A number of provisions in the amendment bill substantially address some vulnerabilities in the existing act, which was very good at striking that balance of contemporary thinking between local decision-making and keeping an overview of the role of the minister and the CEO.

I want to return to the particular challenges of the WA Country Health Service itself. Health service provision in Western Australia is probably one of the most unique of any area in the world. It covers a catchment of

531 500 people, 11 per cent of whom identify as Aboriginal, and services an area of 2.5 million square kilometres from the Kimberley in the north to Albany in the great southern. When we look at the variety of geography of those areas and the remoteness of those communities within WA, it is an enormous challenge, and one that WACHS takes on board. The WA Country Health Service provides a range of services, primarily including not only emergency hospital services, but also population and public health care, Aboriginal health services, mental health services, drug and alcohol services, child community and school health care, the emergency telehealth service, and residential and community aged-care services. Those are all delivered across 2.5 million square kilometres. What a challenge this organisation has! WACHS has six large regional hospitals, 15 medium-sized district hospitals, 48 small hospitals, 31 health centres, 24 community-based mental health services, four dedicated inpatient mental health services, 178 facilities in which population health teams are based and over 600 residential aged-care beds. This is a significant organisation. As I mentioned earlier, it cannot work alone. It needs to work in conjunction with a variety of non-government organisations that provide a range of services, including accommodation, health and information services and primary health care services. It is a dynamic system and each locality needs a local solution. That is what WACHS sets out to achieve.

The WA Country Health Service has had a number of achievements over that period, and I do not intend to go into those in detail here, but I think the fact that it has a very broad range of achievements across a very large regional area highlights that the intent of the original act has worked reasonably well. I think that the amendments that we are making are not substantial amendments to the core functioning of the act; they are designed for improvements. There is a whole range of infrastructure developments underway. I come back to my own electorate. A range of activities are now in the planning for Bunbury, including provision to improve the flow in the emergency department and enable it to increase its capacity as a consequence; increasing the number of theatres; increasing the number of observation rooms; and, importantly, one that comes up quite frequently in my electorate is improvements to the car parking facilities. It is quite a major issue. We have found that there are quite a few people who use that car park as a general car park for non-health-related issues; they park their car there all day and maybe go to Edith Cowan University or around to the TAFE, which is all part of the same campus, or use it as a base to carpool to some other location. Those drivers are taking up car parking spaces that are important for local people. We find that people with health needs are having to drop people off at the front entrance, go and try to find a car parking spot to park their car, and then make their way back to the front entrance to accompany the patient into the hospital. Car parking is quite a critical issue in the provision of healthcare services. It never really occurred to me until I went into the South West Development Commission and started to see that firsthand. It tends to be something that is left behind in the advancement of other improvements to the hospital. This government is making a sweep of changes and is supporting the hospital to plan effectively, and has provided \$23 million to achieve that.

WACHS is also progressing the Collie Hospital upgrade, an MRI unit at the Kalgoorlie Health Campus, upgrades to the renal dialysis unit at Newman Hospital and the renal dialysis services at Kimberley Hospital, and the redevelopment at Laverton Hospital. It is funding culturally appropriate housing and looking at enhanced palliative care services, which is clearly something that came out of our debates in this place on voluntary assisted dying. WACHS itself has an enormous role across regional WA. It is an enormous employer and an enormous purchaser of services, and it has some immense challenges with that geographic spread of delivery.

I want to mention some of the key health issues for residents in regional WA and the challenges that WACHS has identified and is working towards addressing. For example, there is a gap in life expectancy for people who live in regional WA compared with metropolitan residents. For babies born in 2013 to 2015, that gap is 2.1 years for men and 1.6 years for women. The gap in life expectancy for Aboriginal and non-Aboriginal people is significant, at 15.1 years for men and 13.5 years for women. In the Kimberley alone, there were 85 346 hospitalisations of Aboriginal people due to dialysis, and 38.4 per cent of WA Aboriginal people in 2012–13 were obese compared with 33.5 per cent of country residents.

[Member's time extended]

**Mr D.T. PUNCH:** The member for Mirrabooka also mentioned the issue of obesity and its relationship to diabetes, and the importance of addressing it as a primary healthcare matter. There were 11 800 hospitalisations due to motor vehicle accidents. That is a pretty significant statistic. I commend the Minister for Police; Road Safety for all the work that she is doing to improve regional road safety, and I certainly support the push by this government to develop a partnership with our commonwealth counterparts and to direct funding into the regional road safety program. That would provide immediate outcomes of improved safety, immediately impact the pressure on regional hospitals of hospitalisation due to road trauma and have an enormous community benefit, as well as creating new jobs. That is very important.

There are 47.9 per cent of Aboriginal people compared with 16 per cent of non-Aboriginal people smoking daily. Those figures are back from 2014 to 2016, but they are significant. There are 5.2 times all-cause notification rates for Aboriginal people compared with non-Aboriginal people. In the regions, 35 per cent of people drink at high-risk levels for long-term harm. Again, that is a major issue that is driving demand on our acute hospital services. There are 4.4 times the rates of hospitalisation for Aboriginal people than non-Aboriginal people, and 82 per cent of people were able to receive hospital inpatient care in the country in 2015–16. When we think about those stats

and the challenges faced by the WA Country Health Service and what it is able to achieve, it goes to the heart of what a well-organised, well-managed service provides. There is an interesting statistic on avoidable deaths in the zero to 74 age bracket. For Aboriginal people, it is 1 685; for non-Aboriginal people, it is 5 194 avoidable deaths. Those figures are pretty significant.

Those are pretty significant statistics that are essentially challenges in primary health and the response to health services provision in regional WA, and they highlight to me the fact that many of those issues need to be accompanied by support from other sectors that exist within the local community. It is not only health service provision on its own, but also how we mobilise the resources that exist within a community that can help to collectively improve health outcomes. That is a range of people. It is the police in relation to road trauma. It is local government in relation to public health. It is community services in relation to housing provision and care of children. It is a raft of services and non-government organisations that provide all sorts of support, from mental health service provision right the way through to emergency food provision.

I want to briefly touch on mental health services in my own electorate, because I was again delighted to be present when the Minister for Health opened our step-up, step-down facility. I want to draw attention to that, because this government has committed to building a network of step-up, step-down facilities that will not only serve to dramatically improve the quality of service available to people with a mental health issue in regional WA, but also help to take pressure off our hospital system, which has become an acute response for many people who may well need a community and a community residential response. The service that is being built in Bunbury is a fantastic facility. Its design and the way it is built incorporates the need for people not only to have communal space, but also to have time and space for themselves. It includes provision for areas for counselling either one on one or on a group basis, and it includes places for quiet reflection and retreat. It is within a community setting and it is meshed with a local community, and it has a policy of being a good neighbour. Its engagement with the local community, which again goes to the heart of what we stand for in regional Western Australia, is pretty terrific.

In finishing, I want to add my thanks to the thanks already expressed in this place to our health professionals—our regional nurses, doctors and primary healthcare providers. I want to not only thank them for the work that they have done to date in responding to the impact of COVID-19 arriving on our shores, but also acknowledge the challenge in front of them. In my electorate a lot of work has taken place within the Department of Health, the WA Country Health Service, the Bunbury Regional Hospital at the South West Health Campus and the general practitioner network to look at how they can make sure that resources are available to help support those who become seriously ill as a consequence of COVID-19. The work that they have done means that we are very well prepared. I would like those people to know that they are supported by everyone in my community. I have spoken with non-government organisations and local government. We have worked collectively to put in place the community-based support needed to help people at home. All of us who are not part of the professional health service network have looked on with a sense of awe and admiration at how the health professionals in my electorate have responded and with a collective recognition of the challenge that lies ahead.

The best thing that we can do to support those health professionals is to not only practise the principles of good hygiene—hand washing, covering up a sneeze or a cough and maintaining a social distance—but also make sure that as far as possible within that framework, if we are not exhibiting symptoms, we go about our daily jobs to keep our community functioning at a level that enables us to rise out of the crisis that we face and be a stronger community for it. Every one of us in this place will be working hard within our electorates to achieve that same outcome.

I commend the Health Services Amendment Bill 2019 to the house. It is a good bill and it reinforces many of the principles that I hold dear around working and living in regional Western Australia. I give my thanks to the WA Country Health Service. It is doing a terrific job and it has my full support in the months ahead.

**MR S.A. MILLMAN (Mount Lawley)** [3.32 pm]: I rise to make a very brief contribution to the Health Services Amendment Bill 2019. This bill is too important to go unremarked upon. Now is the time in which we need a Minister for Health who can steer the ship of state through the choppy waters of these troubled times. I have great confidence in this Minister for Health and in the contribution that he will make to the effective delivery of the Western Australian health system. He is responsible, compassionate, thoughtful and kind. This bill is yet another example of a mature government doing the hard work necessary to facilitate the operation of a world-class sustainable health system that puts patients first. One of the great privileges of following on from speakers such as the members for Bunbury and Armadale, is that they list in clear detail all the great attributes of this legislation, which I do not need to traverse in my contribution. This gives me an opportunity to talk about health sector reform more generally because this is sensible reform that drives an efficient health sector.

My dad was a tradesperson; he was a plasterer. When I was growing up, I used to travel around with him to residential property developments to see new houses being built. I liken the reform of our health system to building a house: when building a house, one needs to make sure that it is built on a solid foundation and it has a strong frame and a good roof. A well-built house provides shelter for its residents. Our health system is now being called upon to provide shelter for our community from the scourge of COVID-19. We know that this minister has already done extraordinary work to make sure that our WA health system is a well-built house with a solid foundation. This



minister has taken a responsible and mature leadership role in dealing with the issue of COVID-19. This minister has provided a reliable and trustworthy source of information for our community to make sure that people have the confidence and understanding of the dilemma we face and to go forward with their daily business. Now, more than ever, it is important that people look to a reliable and trustworthy source of information about how prevention can be prioritised and how patients can enjoy orderly and effective access to health services. It is those health services that I want to touch on briefly this afternoon, as other members have done. They have commended the work done by health professionals in their local communities. I want to add my voice to that chorus and place on the record my gratitude and admiration for the health professionals in my community of Mt Lawley. I say that because this legislation promotes, encourages and facilitates the environment in which our public and private hospitals and allied health systems can operate efficiently and effectively for the benefit of all patients in Western Australia.

I turn my mind to those medical providers who I mentioned previously. On Beaufort Street we have a number of GP clinics providing frontline services to people who are anxious about their health conditions. We have a number of pharmacies dispensing the necessary medications. These are the people at the frontline of the challenge posed to the whole community of Western Australia by COVID-19. Day after day, hour after hour they go into work and do their job to make sure that Western Australians and the people of Mt Lawley are reassured and comfortable in knowing that they can go about their lives with the necessary medical treatment that they need. In addition to that, these people are active citizens. I want to commend and thank them for getting in contact with my office and saying, “These are the imperatives. These are the issues that people need to take into account. These are the issues that people need to have regard to when making decisions around the safety and security of our community.” What could be more important than the health, wellbeing, safety and security of our community? As representatives, we need active constituents to come to us with their ideas, solutions and concerns. They need to let us know how we can act as their advocates and representatives in this place. This is my message this afternoon to all those GPs, pharmacists and allied health professionals who have taken the time to get in contact with me and my office and express their concerns about COVID-19 and what it means for our community: thank you; it is a great privilege and a great pleasure to be their representative in Parliament. They can rest assured that the issues they have raised with me have been raised at the highest levels of state government. They have been taken to the Minister for Health and the Premier and we are acting on the best medical advice that we have to ensure the safety and security of our entire community.

Let me reiterate my admiration and gratitude for the health practitioners who work in Mt Lawley. Let me also add to that by expressing my admiration and gratitude for those who work in Royal Perth Hospital and Sir Charles Gairdner Hospital. They are imperative tertiary institutions that provide frontline services to the residents of the electorate of Mount Lawley and the people who live in Yokine, Dianella and Coolbinia. These facilities are being given licence to be effective and efficient operators by virtue of this legislation. This is exactly the sort of reformist, hardworking government that we need in this time of uncertainty. This is a time when we need a stable hand on the tiller to steer us through the choppy waters of uncertainty. That is why I am grateful that we have this Minister for Health, who has provided the necessary leadership to provide certainty and confidence to the community. This minister and this government are best placed to deliver a world-class health system. This minister, very shortly after he was sworn into office, understood the need to put our world-class health system on a sustainable financial footing, and initiated the sustainable health review. This minister understands the need for investment in research and innovation. This is the minister with whom I had the great privilege of travelling to Israel to look at just how well a country can do research and innovation —

**Mr Z.R.F. Kirkup:** Who was the deputy minister you met with over there?

**Mr S.A. MILLMAN:** We met with a number of people, including a number of fantastic startups and technology innovators.

**Mr J.E. McGrath** interjected.

**Mr S.A. MILLMAN:** Yes, member for South Perth.

The minister, subsequent to that trip, introduced into Parliament the Western Australian Future Fund Amendment (Future Health Research and Innovation Fund) Bill 2019 to put innovation in Western Australia on a sure footing. This minister had the ability to carry through this Parliament the voluntary assisted dying legislation. This minister was more than capable of helping steer the ship of government through those choppy waters.

We live in uncertain times and face an unprecedented challenge. During the debate on the temporary orders, I listened to the member for Dawesville who said that these are extraordinary times, and I agree with that sentiment. These are extraordinary times. Thank goodness that when faced with the challenge of extraordinary times we have a minister as capable as Minister Cook. When I listen to the conversations at the Second Avenue IGA, at the drop-off and pick-up point at Mt Lawley Primary School playground and at Mid-Century Cafe in Yokine, I hear everyone talking about coronavirus and its consequences. Now is the time we need a responsible minister who has the capacity and capability to carry through the necessary reforms and who can manage our health system and who can provide the people of Western Australia with certainty, security and confidence. Now is the time we need a minister and a mature government that can do the hard work necessary to facilitate the operation of a world-class

sustainable health system that puts patients first and that can face the challenges no matter what they might be and no matter what is thrown at us. Once again, this is a fantastic example of the importance of having a Labor government that can deliver the necessary reforms to put our health system on a proper footing for the benefit of all Western Australians. I commend this reform to the house.

Debate adjourned, on motion by **Mr D.A. Templeman (Leader of the House)**.

### QUESTIONS ON NOTICE

#### *Standing Orders Suspension — Motion*

**MR D.T. REDMAN (Warren–Blackwood)** [3.43 pm] — without notice: I move —

That the standing orders be suspended so far as to enable the following motion to be moved forthwith —

That, in the event that a scheduled sitting day of the house does not take place, the usual process for questions on notice that would have occurred on that day, still occurs.

I want to quickly put on the record that the Leader of the Nationals WA was not happy to suspend standing orders unless the government supported the motion. I understand there have been discussions about that, which is pleasing, and no doubt we will have a very quick debate on this.

#### *Standing Orders Suspension — Amendment to Motion*

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House)** [3.45 pm]: I move —

To insert after “forthwith” —

, subject to the debate being limited to five minutes for government members and five minutes for non-government members

Amendment put and passed.

#### *Standing Orders Suspension — Motion, as Amended*

**The SPEAKER:** Members, as this is a motion without notice to suspend standing orders, it will need the support of an absolute majority for it to proceed. If I hear a dissentient voice, I will be required to divide the Assembly.

Question put and passed with an absolute majority.

#### *Motion*

**MR D.T. REDMAN (Warren–Blackwood)** [3.45 pm]: I move the motion. This has been a most extraordinary week in this place. There have been a couple of significant debates. The first was on the Supply Bill 2020 that the government brought on for the circumstances that we find ourselves in. With strong support from the opposition, the Treasurer committed to provide the opposition with budget information, should that provision be triggered. Today, we passed the special provisions for the standing orders. That motion was also supported by the opposition, and the government supported two or three amendments to that, which is pleasing. We find ourselves in a unique circumstance in which we must, quite rightly, consider the best interests of Western Australia.

Several members interjected.

**The DEPUTY SPEAKER:** I remind members to keep their conversations down.

**Mr D.T. REDMAN:** Although the opposition supports the provisions that have been made, the challenge for the opposition is that some of the tools the opposition has at its disposal to hold the government to account get lost. We have been able to get government support for a small amendment that will keep the questions on notice process available to the opposition, which is one of those tools. I am sure that everyone in here is aware of that but people outside Parliament may not know that when Parliament is not sitting, we do not have the opportunity to put questions on notice and therefore get responses from government. However, with the support of this motion, in the event that the house does not sit for whatever reason—we certainly hope that does not happen, but in the event that it does—the questions on notice process will be available to the opposition to ask questions and get factual answers to a range of issues across a range of portfolios. We think that is important given the circumstances Western Australia finds itself in. Although I am absolutely certain that every member of Parliament will do their absolute best to support their communities and Western Australia at this challenging time, it is important that we get factual information on government agencies. The government’s support for that is appreciated. I think it will help support the accountability of this place, which is something that we should all protect.

**MR Z.R.F. KIRKUP (Dawesville)** [3.48 pm]: I will not speak for long. I understand the Nationals WA initiated this motion and negotiated it with the government’s support. Obviously, the Liberal Party supports any measure that we can that will help provide some sense of accountability during these extraordinary times. We appreciate that the government has agreed to it at this point.

**The DEPUTY SPEAKER:** The Leader of the Opposition.

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House)** [3.48 pm]: I do not want that job! I may covet many jobs. I might covet the Treasurer's job, but I cannot count; I only did maths 4 at Northam Senior High School.

**The DEPUTY SPEAKER:** Leader of the House!

**Mr D.A. TEMPLEMAN:** I always tell people that I was runner-up dux for maths 4 at Northam Senior High School—and there were only four in the class! It is a true story. I was hoping for a plaque at Northam Senior High School. I recently visited Northam Senior High School to check and see whether there was in fact a plaque that recognises me. The Premier actually visited Northam Senior High School, I think last year, and he was searching feverishly around for any evidence that I had actually attended the school. Let me put on the record that I did attend Northam Senior High School and that I do not want to be Treasurer or Leader of the Opposition, because I love what I doing now.

The government is happy to support this motion. Of course, as the previous member said in the previous debate, these are difficult times, but we need to demonstrate to Western Australians that we are up for it and we are supporting them and doing everything that we need to do to ensure that good government continues despite what we may face in the coming weeks and months. This motion is simply a justification of the processes that are important, and we are very happy to have received it.

Question put and passed.

#### **PAPER TABLED**

A paper was tabled and ordered to lie upon the table of the house.

#### **ADJOURNMENT OF THE HOUSE**

*Special*

On motion without notice by **Mr D.A. Templeman (Leader of the House)**, resolved —

That the house at its rising adjourn until Tuesday, 31 March 2020, at 2.00 pm.

*House adjourned at 3.50 pm*

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### QUESTIONS ON NOTICE

Questions and answers are as supplied to Hansard.

#### WATER CORPORATION — AROONA CONSORTIUM CONTRACT

**5816. Dr D.J. Honey to the Minister for Water:**

- (1) What was the business case for Water Corporation cancelling the contract with Aroona Consortium and when will it be published?
- (2) How much will Water Corporation's annual operation and maintenance costs change across the forward estimates when work carried out by the Aroona Consortium is completely in-sourced?
- (3) What was the expected cost for work being carried out by Aroona Consortium across the forward estimates?
- (4) How much money is expected to be saved annually by Water Corporation across the forward estimates by in-sourcing the work from the Aroona Consortium?
- (5) Who provided advice to Water Corporation on the decision to cancel the contract with the Aroona Consortium:
  - (a) When was this advice provided to Water Corporation?
- (6) What was the nature of the external advice given to Water Corporation on this matter? Was the advice about how the contract could be terminated or was it about the business case for terminating the contract?
- (7) When were the Aroona Consortium partners informed that their contract with Water Corporation was going to be terminated?
- (8) What was the contractual basis for Water Corporation terminating the contract with the Aroona Consortium partners?
- (9) Will the work transferred from the Aroona Consortium to Water Corporation be subject to the same key performance indicators as were applied to the Aroona Consortium?
- (10) Will the work transferred from the Aroona Consortium to Water Corporation be subject to the same annual efficiency dividend that was applied to the Aroona Consortium?
- (11) What annual efficiency dividend will be applied to the work in-sourced to Water Corporation from the Aroona Consortium?
- (12) How much compensation will be paid to the external partners of the Aroona Consortium for the cancellation of their contract with Water Corporation?
- (13) How much will it cost Water Corporation to transfer staff from the Aroona Consortium to the Water Corporation?
- (14) Will Aroona Consortium personnel transferred to Water Corporation be paid at the same rate as that before they were transferred?
- (15) If the staff transferred to Water Corporation are being paid at different rates, what are the differences in the rates?
- (16) If the staff transferred to Water Corporation are being paid at different rates, what is the difference in total pay (as a total amount) for those staff?
- (17) Did the Minister provide any direction to Water Corporation to re-examine and/or cancel their contract with the Aroona Consortium?
- (18) If the Minister did not provide direction to Water Corporation on this matter, what was the commercial basis given by Water Corporation for cancelling the contract with the Aroona Consortium across the forward estimates?
- (19) If the Minister did not provide direction to Water Corporation on this matter, what is the net financial benefit to the state across the forward estimates gained by cancelling the contract with the Aroona Consortium?

**Mr D.J. Kelly replied:**

- (1) The Water Corporation Business Case identified the preferred option for the future would be to bring in-house the operation and maintenance of water, wastewater and recycling plants, dams, groundwater bores and trunk mains in Perth. The business case contains sensitive commercial information and as such it has been redacted.  
[See tabled paper no [3289](#).]
- (2) The annual operation and maintenance cost varies on an annual basis depending on the work demand.

- (3) This work will no longer be done by Aroona and the cost of the work varies on an annual basis.
- (4) The decision wasn't made on the basis that there would be savings. However, the Water Corporation Board estimates annual savings of approximately \$2 million.
- (5) The business case was developed by the Water Corporation between April and June 2019, with input from a range of sources.
- (6) Advice was provided from a range of sources about options available for the future provision of metropolitan production and treatment services and the process through which they would be best implemented.
- (7) Suez and Broadspectrum were informed of the Water Corporation's decision in November 2019.
- (8) The Water Corporation, Suez and Broadspectrum have agreed to end the contract through an orderly transition approach.
- (9) Yes.
- (10) Yes.
- (11) The operations and maintenance activities will be subject to ongoing efficiency targets consistent with those set for the full scope of Water Corporation operations.
- (12) Nil. The Water Corporation, Suez and Broadspectrum have agreed to end the contract through an orderly transition approach.
- (13) Final employment contracts have not yet been issued and negotiated with employees.
- (14) Final employment contracts have not yet been issued and negotiated with employees.
- (15) Final employment contracts have not yet been issued and negotiated with employees.
- (16) Final employment contracts have not yet been issued and negotiated with employees.
- (17) No.
- (18) The Water Corporation, Suez and Broadspectrum have agreed to end the contract through an orderly transition approach. The Water Corporation's Business Case identified the preferred option for the future would be to bring in-house the operation and maintenance of water, wastewater and recycling plants, dams, groundwater bores and trunk mains in Perth. This is expected to result in a more holistic approach to water services across the entire water cycle, building our people capability to create a fully integrated, state wide centre of expertise.
- (19) The benefits to the State are detailed in the Business Case summarised in (18).

WATER CORPORATION — PERTH REGION ALLIANCE

**5872. Mr D.T. Redman to the Minister for Water:**

- (1) I refer to recent Freedom of Information (FOI) released by Water Corporation including a redacted copy of "PRA Business Case" arguing the value of "insourcing the Perth Region Alliance", and ask?
- (2) Given Page 25 (7.1.2) of this document referring to mitigation of industrial action risk, suggests the conditions of Water Corporation employees is better than current PRA employees, can the Minister confirm the extra ongoing costs to Water Corporation of the insourcing model, assuming all existing staff come across to Water Corporation?
- (3) Can the Minister outline the differences in the industrial relations profiles referenced on page 20 of the business case?
- (4) If indeed there are higher operating costs to Water Corporation as a product of existing PRA staff coming onto Water Corporation's EA's, has this cost been accounted in the \$2-3m savings expected from the in-sourcing model?
- (5) If indeed as mentioned on page 20 of the business case that savings of \$2-3m per annum come from contractor margins, how is it, that an expected higher cost of employees from better EA conditions will not impact the suggested \$2-3m of savings to government?
- (6) Will the Minister table a copy of the "Alliance Agreement" referenced on page 10 of the business case?
- (7) Can the Minister confirm the status of the approximate 100 contracts of which the PRA is party to, supporting the delivery of services under the Alliance, as the Water Corporation progresses to an in-sourced model?
- (8) Can the Minister confirm the quantum of savings and benefits delivered to Water Corporation as referenced on page 4 of the business case (Section 1.2)?

**Mr D.J. Kelly replied:**

- (1) Not applicable. Preamble to question.
- (2) Water Corporation has conducted a thorough review of the PRA Enterprise Agreements which has enabled the effective mapping of PRA employees over to a like for like position within the Water Corporation's structure. This will ensure pay parity between Water Corporation employees and the PRA employees transitioning across to the Water Corporation. Additional favourable employee benefits include early access to Long Service Leave, more generous Long Service Leave terms, and the opportunity for employees to increase their Super Contributions. Any increased labour costs are fully accounted for in the estimated net ongoing saving to the Water Corporation of \$2–3m a year.
- (3) The principal difference is that PRA operates with multiple Enterprise Agreements whereas Water Corporation operates with a single Enterprise Agreement.
- (4) Yes. Please refer to (2)
- (5) The forecast net cost benefit of \$2–3m is principally achieved through the avoidance of margin payments to Programmed Facilities Management. Any increase in costs is accounted for in this net position.
- (6) The Alliance Agreement is a commercial contract arrangement between the Water Corporation and Programmed Facilities Management.
- (7) The Water Corporation will arrange new contracts with any subcontractors currently engaged by PRA that are needed to support ongoing delivery of services. Existing minor capital works contracts that have been established by PRA, which are forecast to run beyond the 9 March 2020 transition date, will be novated to the Water Corporation.
- (8) PRA realised savings in the order of 2% a year through the delivery of the services set out in the Alliance Agreement, consistent with the 2% efficiency dividend delivered by the Water Corporation as a whole.

## LITHIUM MINING — GREENBUSHES

**5986. Mr D.T. Redman to the Premier; Minister for Public Sector Management; State Development, Jobs and Trade; Federal–State Relations:**

I refer to consideration given by your government to fund a bus for transferring workers from Collie to the Greenbushes lithium mine, and ask:

- (a) Can the Premier outline any other transport services that are funded by government of a similar nature transferring a private workforce from one community to another:
  - (i) If so, what is the nature of the support and how much does it cost;
- (b) When is a decision likely to be made on the support or otherwise given by state government to transferring a Collie based workforce from Collie to Greenbushes;
- (c) Is the proposed bus service a daily bus service, or intended to transfer employees to the Talison Greenbushes work camp on a longer work roster; and
- (d) Has consideration been given to funding a bus from any other communities for the transfer of a private workforce to the Greenbushes Lithium mine;
- (e) Would the Premier consider funding a bus service from other communities within the catchment of the Greenbushes mine?

**Mr M. McGowan replied:**

The community of Collie is facing a range of issues with the declining demand for coal.

Collie has powered Western Australia for 120-plus years and has a workforce experienced in mining that would be suitable to work there.

Facilitating the transport of workers would be a good and appropriate use of the Collie Future Fund.

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