



# Parliamentary Debates

(HANSARD)

FORTIETH PARLIAMENT  
FIRST SESSION  
2020

LEGISLATIVE ASSEMBLY

Tuesday, 8 September 2020

# Legislative Assembly

Tuesday, 8 September 2020

**THE SPEAKER (Mr P.B. Watson)** took the chair at 2.00 pm, acknowledged country and read prayers.

## **WA MUSEUM BOOLA BARDIP**

*Statement by Minister for Culture and the Arts*

**MR D.A. TEMPLEMAN (Mandurah — Minister for Culture and the Arts)** [2.01 pm]: Yesterday I had the absolute pleasure to attend the announcement of the name of the new Western Australian Museum and officially open the ballot for public tickets. The new Museum has been developed with a people first approach and features the voices of Western Australians, sharing their stories their own way. It is a museum about Western Australia—about our people, our places and our relationship with the world. It will be a gateway to Western Australia, giving visitors a taste of everything the state has to offer.

Yesterday, on 7 September, Hon Ben Wyatt, Minister for Aboriginal Affairs, announced the new name, WA Museum Boola Bardip. Boola Bardip means “many stories” in Noongar language and was chosen in consultation with the WA Museum Aboriginal Advisory Committee and the Whadjuk Content Working Group. It was translated and approved by the Noongar Boodja Aboriginal Language Centre. The name Boola Bardip recognises that the Museum sits on Whadjuk Nyoongar land, and honours the cultural heritage of Australia’s first peoples. It also acknowledges the shared cultural heritage of the nearly 2.9 million people who call Western Australia home.

The Museum is releasing 50 000 free tickets for the opening celebrations and the online ballot for free tickets to the opening of the WA Museum Boola Bardip is ready now on the Museum’s website. The ballot will be open until the end of this month, closing on 30 September. Each successful applicant can request up to six tickets. These timed tickets will be allocated for the first nine days of opening, from Saturday, 21 November—my birthday!—until Sunday, 29 November. At that time, ticket holders will be randomly selected from everyone who registers for the ballot. Anyone without a computer or an email address can call 1300 134 081 to register.

I encourage all Western Australians to register in the ballot, and we look forward to welcoming you all here in November, when WA Museum Boola Bardip officially opens its doors.

## **JESSICA LESLEY JACKSON — CORONER’S REPORT**

*Statement by Minister for Sport and Recreation*

**MR M.P. MURRAY (Collie–Preston — Minister for Sport and Recreation)** [2.04 pm]: The findings and recommendations of the State Coroner on the tragic death of Jessica Lesley Jackson, an 18-year-old Muay Thai contestant, were recently released.

Firstly, I would like to extend my deepest sympathies to the family and friends of Jessica and thank them for their efforts to help improve safety within the combat sports industry. The loss of any young person is deeply regretted, but Jess’s death is not only a tragedy, but a call-out to the entire combat sports community. During the recent inquest, Coroner Linton acknowledged the importance of cultural change to remove the emphasis on extreme weight cutting within the sport. The Combat Sports Commission accepts it has a clear role to play in driving cultural change. It is equally clear, and highlighted in the report, that this will not be achieved unless it is supported through the efforts of all within the industry, including contestants, parents, medical practitioners, trainers, gym owners and promoters. The report and recommendations acknowledge that the commission’s development of a strategy to address rapid weight loss by dehydration has already had some beneficial results, focused on three key pillars: weight assessment, regulation and education.

Over the past 18 months, the commission has worked hard to raise awareness and educate the entire the combat sports community of the dangers of rapid weight loss through dehydration. As part of this work, the commission, led by Bob Kucera, has launched a compulsory online education unit for contestants and industry participants such as trainers, managers, promoters and officials, which must now be completed as part of their registration.

As minister, I accept the recommendations, as well as the comments made by Coroner Linton about the complexity of the issue and the attempts by the commission to develop a comprehensive approach. Firstly, the commission and I will consider what legislative amendments may be required to continue to increase safety aspects for contestants. If not already covered by both local government and/or Department of Mines, Industry Regulation and Safety legislation, giving the commission itself greater powers and the capacity to enforce them will also be explored. Secondly, the commission is already examining a scheme that requires contestants to provide pre-contest weights. This will form part of the intended research programs coupled with the already announced strategy. Once again, I must express the importance of a collaborative approach between the commission and the industry to continue riding this tide of change.

Jess has left a legacy that should be a wake-up call to all throughout the industry in not only Western Australia but also worldwide. I table the strategy.

[See paper [3609](#).]

### SHINJU MATSURI FESTIVAL

*Statement by Minister for Tourism*

**MR P. PAPALIA (Warnbro — Minister for Tourism)** [2.07 pm]: I rise to inform the house that I had the pleasure of attending Broome's Shinju Matsuri festival over the weekend of 29 and 30 August. The year 2020 marks the festival's fiftieth anniversary with a program of more than 50 events showcasing art, music, food, dance, crafts and heritage over nine days from 29 August to 6 September. Approximately 20 000 people were expected to attend this year's milestone occasion. I am pleased to say that from my experience the organisers' estimations may have been exceeded. The events that I attended were well patronised and Broome was noticeably busy. There is little doubt that the festival will have helped boost the local economy and provide valuable support to local businesses.

The first Shinju Matsuri, or Festival of the Pearl, began in 1970 after the local Japanese, Malaysian and Chinese communities united their individual cultural festivals—the Japanese Obon Matsuri, Malaysian Hari Merdeka and the Chinese Hang Seng—to share their heritage, food and traditions with a celebration at the end of the pearl harvest. The festival acknowledges Broome's early days as a world-renowned producer of South Sea pearls when Japanese, Chinese, Malaysian, Koepangers, Filipino and European workers flocked to Broome in the late 1800s. Today it plays an important part in celebrating the town's rich pearling history, multicultural community and extraordinary natural landscapes. It also supports inclusion and building a strong cohesive community. The event is owned by Shinju Matsuri Incorporated, a not-for-profit association and since 2015, a Perth-based company, Project3, has been contracted as the event manager. Events are vital for regional towns because they attract visitors, add vibrancy to the local community and generate media attention, which helps to promote the destination and its amazing attractions.

Over the years there has been a steady increase in the number of visitors to Broome specifically to attend the Shinju Matsuri, up by almost 200 per cent since 2013. The festival is supported by the state government through Tourism Western Australia's regional events program. Funding has also been provided by Lotterywest, the Kimberley Development Commission and the Shire of Broome.

I would like to congratulate Shinju Matsuri Incorporated on reaching such a significant milestone and commend everyone on the work they did to put on such a wonderful golden jubilee festival, especially in these challenging times.

### LOCAL COMMUNITIES COORDINATION INITIATIVE

*Statement by Minister for Housing*

**MR P.C. TINLEY (Willagee — Minister for Housing)** [2.10 pm]: I rise to inform the house of the success the McGowan government is achieving with a prototype initiative designed to help the more vulnerable members of our society. Some nine months ago we launched the local communities coordination trial, which places local community coordinators just a phone call away from those in need. The needs of the clientele are wide and varied. They may be a mother and her children escaping domestic violence, a father struggling with mental health issues, a parent or carer needing support, or homeless and socially isolated people. They are often people who fall between service gaps. Local community coordinators take time to listen and get to know people, and their mission is to provide timely and appropriate connections that enable people to get the assistance they need.

I was recently privileged to meet one of those helped by this outstanding initiative. William Jones, a 92-year-old veteran of the Korean War, was recently allocated a public home unit in Mirrabooka through the efforts of a non-government organisation and the Department of Communities. This amazing man has never lived in his own home and has been effectively homeless for many years. At times he has lived rough. He has lived in vehicles and he has lived in boarding homes, describing that experience as "not beneficial to peace and quiet". Mr Jones is as sharp as a tack and just needed a chance, not only to have a home, but also to become a valued part of his new community. That chance was supplied to him by the Department of Communities under its local communities coordination prototype.

This whole person, whole family, whole community, whole system initiative exemplifies the type of wraparound services that I often talk about when speaking on the issue of social housing. As I have said many times, a home is not just a roof over our heads; it is also all the other issues that need to be handled to successfully transition someone from a state of homelessness to having a home and a community that supports them. It is a Housing First model.

Mr Jones is learning new skills. He has a mobile phone, a microwave oven and a new television. He enjoys gardening in his new backyard and he is looking forward to renewing his passion for woodwork. When I asked him whether he was happy, his reply was, "I've never been happier."

As I said at the start of this statement, this initiative launched approximately nine months ago and in that time has helped almost 900 people, many of whom would have ended up in our crisis system. With its focus on strengthening social bonds and collaborative practical solutions, this work is especially important to community recovery from the devastating effects of COVID-19. It is an initiative that should be supported by all. All those workers involved in delivering these services are to be commended.

**QUESTIONS WITHOUT NOTICE**  
**SENIORS — ASSAULTS AGAINST**

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

Can the Premier confirm that under his government violent attacks against our elderly have increased from 611 in 2018 to 730 a year in 2019, which is two attacks each and every day on our vulnerable seniors, an increase of 20 per cent?

**Mr M. McGOWAN replied:**

Obviously, crime relating to older Western Australians is a terrible thing. We saw the terrible case of the attack on Mr Lombardi that took place a couple of weeks ago. It was a shocking thing for all of us to witness. We all feel deeply sorry for him and his family and friends. I think it shocked the entire community. Obviously, that matter is now before the courts. It is a matter that the courts will deal with, and I expect it will be dealt with very, very seriously.

In relation to these issues around community safety and the like, since we have been in government, we have employed an additional 300 police officers across Western Australia. We have opened 24-hour police stations in Ellenbrook, Armadale and Cockburn. We have extended the hours at a range of other police stations and we have also provided additional resources for our police officers across the state, whether it is a new helicopter, stab-proof vests or personal handheld mobile devices to assist police officers in what they do. On top of that, police funding has gone up by \$400 million over the time that we have been in office, so we have done a great deal around these matters. When the last government was in office, assaults on WA seniors doubled, and the Leader of the Opposition was the police minister when that happened.

**SENIORS — ASSAULTS AGAINST**

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

I have a supplementary question. If the Premier has increased police numbers by 300, why are 11 of our 15 police districts drastically under-resourced and when will he commit to an increase to address the spate of violent assaults against our vulnerable elderly people?

**Mr M. McGOWAN replied:**

I may have said “police officers” before; I meant to say that assaults on Western Australian seniors doubled during the term of the last government. Obviously, we have increased the number of police officers but we have had to deal with a serious pandemic, the greatest shock to the world’s health in 100 years and also the greatest shock to the world’s economy in the last 90 years. That has meant that we have had to use a range of resources to deal with those matters. I think most Western Australians would understand that that has required significant police resources. We had a range of police officers working on COVID, whether it was at the airport, on the border, or in contact tracing teams, monitoring teams and the like. Around 400 police officers have been working on that. That has obviously been a major thing that our police force has had to deal with, and it has dealt with it very well. I think most Western Australians would understand that in extreme times, we need to use the resources of government to deal with these extreme challenges that confront us, and that is what we have been doing.

**CORONAVIRUS — HEALTH ADVICE**

**609. Mr M. HUGHES to the Premier:**

I refer to Western Australia’s success in stopping the spread of COVID-19, which has meant the state has now gone 150 days without a case of community transmission.

- (1) Can the Premier outline to the house what role health advice has played in this government’s response to COVID-19, including its decision to implement a hard border?
- (2) Can the Premier advise the house whether this advice has been made public?

**Mr M. McGOWAN replied:**

(1)–(2) I thank the member for Kalamunda for the question. It is true that we are now at 150 days in Western Australia without a case of community transmission across our state, which is a good position to be in and something that we are obviously very keen to see continue. It is a credit to every Western Australian, especially all those Western Australians who have accepted the rules and sacrifices and pulled together during this very difficult time. We know that it has been difficult for many people, particularly those who wanted to travel to the eastern states, who have family, friends and loved ones there, or those who wanted to come back and for whom there have been some impediments in relation to that. We are doing the right thing by Western Australians when it comes to our border arrangements, in particular the hard border. It has been based on the best of health advice.

I am aware that there have been claims by the Liberal Party that we have not shared the health advice. I saw that on the television on Friday. I want to explain why those claims are false. I will make a few points. Firstly, health briefings have been regularly offered to the opposition. The last health briefing was yesterday. Secondly, on 16 June, the government tabled 149 documents in this house that set out all the

health advice and all the information upon which the government has relied in putting in place the hard border. It was 149 pages of information. It appears that members of the Liberal Party have not noticed that, so I will now give it to them again. I seek to table that information.

[See paper [3610](#).]

**Mr M. McGOWAN:** These documents include specific advice on the closing the border directions to the Commissioner of Police. I will quote one of the many lines of from the Chief Health Officer. He states —

If the Closing the Border Directions were revoked, this would result in an increase in the risk of a re-introduction of the disease and subsequent community transmission.

That was tabled in this Parliament on 16 June.

Thirdly, in the Legislative Council on 18 August, the government tabled the Chief Health Officer's advice on phase 4 restrictions and the cancellation of the Perth Royal Show. In recommending a delay to phase 5, the Chief Health Officer stated, and I quote again —

The implementation of border controls and public health, mass gathering, and physical distancing measures continues to be highly effective in controlling the COVID-19 outbreak in Western Australia ...

I seek to table that again so that the Liberal Party understands the evidence upon which the government relies.

[See paper [3611](#).]

**Mr M. McGOWAN:** Finally, I will table, for the information of the Liberal Party, the judgement of Justice Rangiah in the Federal Court on 25 August. Justice Rangiah of the Federal Court heard the evidence of Clive Palmer's witnesses, the federal Liberal Party's witnesses, and the state government's witnesses. Mr Justice Rangiah concluded, and I quote again —

- The border restrictions have been effective to a very substantial extent to reduce the probability of COVID-19 being imported into Western Australia from interstate.

...

- If the border restrictions were replaced by that suite of measures plus a “hotspot” regime, involving either quarantining or banning persons entering from designated hotspots, they would be less effective than the border measures in preventing the importation of COVID-19.

For the benefit of the opposition, I table the document.

[See paper [3612](#).]

**Mr M. McGOWAN:** It is 91 pages of evidence that backs the state government's position on the border. In total, we have now tabled 242 pages of information so that the state Liberal Party can understand the evidence upon which we have relied in relation to the decisions that we have made. This is the second time that I have done it. Any claims made by the Liberal Party that we have not shared the health advice, as I heard last week, are false. We have tabled the information again in case its members did not know that the information had been tabled or in case they deliberately ignored the fact that we had tabled the information.

#### CITY OF PERTH — LOCAL GOVERNMENT ELECTION

##### **610. Mr P.A. KATSAMBANIS to the Premier:**

I refer to the upcoming City of Perth council election and, in particular, the major election platform of one of the candidates for Lord Mayor, Basil Zempilas, calling for 200 additional police officers, which has been backed by the WA Police Union. Will the government be providing an additional 200 police for Perth city to address out-of-control violent crime in the CBD?

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

We have already provided 300 additional police officers to the Western Australia Police Force. They are distributed for operational purposes by the Commissioner of Police. That is his role. He decides where police are distributed. That has been a longstanding policy of all sides of government, going back at least 100 years; that is, operational requirements of the police are determined by the Commissioner of Police. I do not intend to involve myself in the City of Perth election. I note that the Liberal Party is holding a fundraiser with City of Perth candidates. I think that is highly inappropriate.

#### CITY OF PERTH — LOCAL GOVERNMENT ELECTION

##### **611. Mr P.A. KATSAMBANIS to the Premier:**

I have a supplementary question. Given that increasing police numbers and combating violent crime in the CBD are part of election platforms of all mayoral candidates for the City of Perth council election, does the Premier accept that that is a resounding vote of no confidence in his government's ability to deliver a safe and vibrant environment for our capital city?

**Mr M. McGOWAN replied:**

There are two points I want to make. The first is that I said that the Liberal Party held a fundraiser; it was the 500 Club. The 500 Club raises money that it passes on to the Liberal and National Parties. That is exactly what happens. If members opposite want to talk about politicising —

**Mr Z.R.F. Kirkup** interjected.

**The SPEAKER:** Member for Dawesville, we will start talking about you getting called to order for the first time.

**Mr M. McGOWAN:** When I talk about politicising local government, for the 500 Club to hold a fundraiser for City of Perth council candidates is politicising local government. It is an inappropriate politicisation of local government. Considering what has gone on in the City of Perth over the course of the last 10 years, I would have thought that the Liberal Party and the 500 Club should not have done that.

Several members interjected.

**The SPEAKER:** Members!

**Mrs L.M. Harvey** interjected.

**Mr M. McGOWAN:** Were you there?

**Mrs L.M. Harvey:** No.

**Mr M. McGOWAN:** You were not? Okay. That is interesting as well.

Several members interjected.

**Mr M. McGOWAN:** I just said that it was interesting.

I am aware of election platforms. Prior to the state election, two major parties were running for office in Western Australia. Both had a platform. One put to the people of Western Australia a platform of additional police officers and one did not. Only Labor put forward a policy of additional police officers for Western Australia. The Liberal Party did not. Although the Liberal Party currently has no policies —

**Mrs L.M. Harvey** interjected.

**The SPEAKER:** Leader of the Opposition!

**Mr M. McGOWAN:** Go and check the website. There are no policies. Before the state election, the Liberal Party did release some policies. Of those policies, none involved additional police officers.

**Mrs L.M. Harvey** interjected.

**The SPEAKER:** Leader of the Opposition, it is not a chat-fest.

#### CORONAVIRUS — STATE ECONOMY

#### **612. Mr Y. MUBARAKAI to the Treasurer:**

Can the Treasurer outline to the house what Western Australia's success in stopping the spread of COVID-19 has meant for the Western Australian economy; and outline to the house why a strong Western Australian economy is so important for Australia and the broader national economy?

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

I thank the member for Jandakot for his very good question.

In his answer just a minute ago, the Premier referred to the sacrifice that Western Australians have made over the period that the coronavirus has impacted us. It has had a huge social impact and, of course, there has been a large community wealth impact as well. We saw that with the release of the national accounts last week, which highlighted in the June quarter the largest contraction in WA's recorded history—that is, a contraction of six per cent for that quarter. I want to point out that it highlighted that those states that have adopted what has been referred to as a hard border strategy did better than those that did not; for example, South Australia, Western Australia, Tasmania and Queensland did better than other states in Australia. That is because we have managed to control the virus. I will come back to that in just a minute. It also highlighted that despite a six per cent contraction in the June quarter, in 2019–20 the Western Australian economy grew by 1.1 per cent. It is an extraordinary outcome, which highlights the strength of Western Australia's economy in the lead-up to the impact of the coronavirus. I will give the member for Jandakot some context. That 1.1 per cent growth was the fastest growth in state final demand in Western Australia in seven years. That was able to be delivered in 2019–20. Importantly, it was underpinned by business investment, with our mining sector doing what the mining sector does. As the Premier has said, we went to great lengths to ensure that the mining sector could remain open. Interestingly, some of the states that we had to fight to keep our mining sector going did not close their borders. Now, of course, we are seeing the impact of that on their economies and on the national economy. Business investment grew by 9.3 per cent in 2019–20, which is a very strong growth by any stretch of the imagination.

As data is being released around the world, we are also seeing, unfortunately, some very large contractions. The United Kingdom's economy contracted by an incredible 20 per cent. The Euro area economy contracted by 12 per cent. The United States' economy contracted by just over nine per cent. The Australian economy fared fairly well compared with most places in the world, contracting by seven per cent in the June quarter. Western Australia, on a comparative basis, has done very, very well. We are seeing in today's payroll data the fact that 88 per cent of the jobs that we lost by late April have come back into the system. By way of an aside—I always make this point—this data is volatile, but it highlights a very positive trend. Over the recent break, we saw the retail trade data come in. Incredibly, it grew by 3.8 per cent in July. From memory, member for Jandakot, July was one of the strongest, if not the strongest, months on record. Over the last 12 months, retail trade grew by 6.2 per cent, which is the fastest growth in retail trade in seven years. We are seeing good outcomes in the economy.

I have been somewhat surprised by some of the narrative emerging, particularly on the east coast, and, I think, in some of the untidier commentary around the Victorian response to its second wave outbreak of the coronavirus and this whole idea that the state must open up to protect the economy. An interesting dataset was released by Our World in Data, which is a collaboration of researchers out of the University of Oxford, that examined the issue around coronavirus restrictions to try to limit the health impact and the impact on the economy. It highlighted very, very clearly that when we control the virus, it is the best economic lever we can pull. Indeed, of the countries that were examined—the researchers examined not only countries, but also blocs; the European Union, the Group of Seven, the North American Free Trade Agreement and the Organisation for Economic Cooperation and Development et cetera—Australia did very well. It came ninth, globally. I thought that I would get Treasury to test where Western Australia would sit if it were a country—Premier, I apologise—and found that Western Australia is the fourth-best performing nation on the planet in respect of both health and economic outcomes. That is the reality when we control the virus, because that is the best economic lever we can pull. I want to emphasise to those, perhaps, in that small group within Western Australia—it is a small group within Western Australia—who want restrictions eased immediately and those on the east coast who I think are playing a very bitter political game, that the best thing we can do for Australians and for Western Australia has been proven: control the virus. That means that we get on top of the economy and see the sorts of outcomes that we are seeing here in Western Australia.

#### CORONAVIRUS — STATE ECONOMIC RECOVERY PLAN

##### **613. Ms M.J. DAVIES to the Premier:**

I refer to the Premier's media statement dated 3 September 2020 announcing an advertising campaign to encourage young people to work in regional Western Australia.

- (1) Why did the Premier dismiss the Nationals WA suggestion for housing and travel incentives when answering a question in this house on 11 August 2020, only to announce that exactly three weeks later?
- (2) When will details of the regional worker incentive scheme be released and how much is the government contributing to it?

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

- (1)–(2) We understand that there is a significant issue with getting enough labour out to deal with the agricultural sector and, indeed, some of the tourism sector across Western Australia, particularly in the north of the state. Therefore, as I indicated some weeks ago, we launched a major advertising campaign on the weekend to get Western Australians out there to do this work. This is very important. I feel for those agricultural communities that will have difficulty sourcing enough people to undertake some of the seasonal work, particularly the harvest, over this period. The Work and Wander out Yonder campaign is in full flight now. That is designed to point out the appealing aspects of doing this sort of work in regional Western Australia in those two industries in particular, and hospitality.

We will announce shortly the details of our support measures for people who go into agricultural work in particular. We, of course, want to see the industries themselves, and in particular the industry organisations, work cooperatively to come up with additional arrangements to attract people out there. It cannot all be the role of government. That is what I was saying to the member the last time. It cannot all be the role of government. You cannot take a 1950s view of the world that somehow the government has to do all of this. It has to be also the farming communities, the farmers and the industry associations. They also need to promote the advantages of going out there and working and seeking to attract people. They have to do that. You cannot just say that only government can do this. I do not know why you always fall back on the view that the government should do everything. I do not know what it is about the National Party. That seems to be its way of thinking. We are saying that industry needs to assist.

The other point I make is this: on Friday, I raised with the Prime Minister that the recipients of JobSeeker in particular, but also, potentially, JobKeeper—but especially JobSeeker—should be able to receive their payment and also go out and work in agriculture during the seasonal period and receive their pay on top of the JobSeeker payment. That is a departure from the normal welfare system, if you like, in Australia, but because of the unusual situation of not having backpackers coming in and seasonal labour sourced from the

Pacific Islands or wherever it might be, we need to look at these alternative measures. The Prime Minister said that he would go away and look at that issue again. Obviously, it has been talked about before. I think that the situation we face means that the commonwealth also needs to join the state, industry, local governments and the like, and join the farmers and the agricultural industry itself in coming up with solutions to the extraordinary problem that we face.

#### CORONAVIRUS — STATE ECONOMIC RECOVERY PLAN

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

I have a supplementary question. Premier, harvest is on our doorstep and the grape and fruit and vegetable farmers need workers now to harvest their crops. When will the details of the regional worker incentive scheme be released and how much is the government contributing to it, given that it announced on 30 September that the government will provide an incentive scheme?

**Mr M. McGOWAN replied:**

The minister will announce the details very shortly. I remind you all that this is not a situation of our making. We have not put in place the hard border internationally, but I do agree with it. I will not quibble about the international border. I wish people would stop quibbling about the interstate border; the arguments are exactly the same for both. I support the international border and that means there are difficulties sourcing labour for these sorts of things—there are, and we accept that. A lot of people during this period just point out the problem, and there is a problem—we accept that there is a problem—but the solution proposed by some people to just open the international borders would make the problem far worse. I have heard some industry groups say that. Just understand what would happen if we did that without a vaccine and without a solution. Just think what would happen if the virus came back. As the Treasurer was just saying, the economic consequences would be shocking—catastrophic. The arguments around the interstate and international border are exactly the same. That is why we have been steadfast in supporting and protecting the interstate border. In relation to the international border, we have been steadfast in supporting the commonwealth on that, but it does pose problems, and the member identified one, which is not having enough people out there to do these jobs. I think this is the best solution—I genuinely do: if people can receive JobSeeker and work on a farm and get additional pay on top, that will incentivise people to go out there, and that is what I put to the Prime Minister.

#### CORONAVIRUS — TRANSPORT PROJECTS

**615. Mrs R.M.J. CLARKE to the Minister for Transport:**

I refer to the McGowan Labor government's efforts to drive Western Australia's economic recovery from the impacts of COVID-19 through its \$5.5 billion recovery plan and the delivery of major transport infrastructure. Can the minister update the house on this government's investment in a new multistorey car park at Mandurah train station, and can the minister outline to the house how the investment, along with other major transport projects, is supporting local jobs and local businesses?

**Ms R. SAFFIOTI replied:**

I thank the member for Murray–Wellington for that question. It has been a busy couple of weeks since we last sat in this chamber, with a number of new announcements and commitments to infrastructure throughout Western Australia. This morning, I joined the Premier, the members for Mandurah and Murray–Wellington and the federal member for Canning at Mandurah station to turn the sod for the new Metronet multistorey car park. The sod turning at Mandurah station was significant for several reasons. First, it marks the delivery of yet another Metronet election commitment for Western Australia; secondly, it marks the creation of 120 jobs to be generated through, member for Balcatta, the Balcatta-based contractor PS Structures; and, thirdly, it will see a net increase of 700 car bays for the great Labor success story that is the Mandurah railway line.

**Mr D.A. Templeman:** Yeah, that's right!

**Ms R. SAFFIOTI:** Of course, this car park —

**The SPEAKER:** Minister for Local Government, the minister is doing a very good job. She does not need an echo.

**Mr D.A. Templeman:** I was very excited!

**Ms R. SAFFIOTI:** I like the echo!

**The SPEAKER:** He will be excited outside the chamber.

**Ms R. SAFFIOTI:** This \$32 million project will increase the parking capacity at that station to 1 800 bays. We know that Mandurah and its surrounds are booming. Of course, Mandurah station services not only the good folk of Mandurah, but also the good folk of Dawesville and Murray–Wellington, for example—all around that area. The catchment is wide, and we want to make sure that people have the opportunity to catch that train and get a good car park.



The Premier was this morning not only at Mandurah train station, but also, as I understand it, at a shopping centre in Falcon having a good coffee with our candidate for Dawesville. Unlike the member for Dawesville, our candidate for Dawesville likes being seen with their leader! In relation to that, something struck me when I was searching the internet late at night, as I do—the member for Dawesville’s new advertising for 2021: “Re-Elect Zak”; “Kirkup 2021”. It is a bit of an American presidential sort of campaign! Members, let us spot the missing thing.

*Point of Order*

**Mr Z.R.F. KIRKUP:** As much as I enjoy seeing the minister holding up my re-election material, I would say it does not really correlate to the question asked by the member for Murray–Wellington in relation to transport infrastructure.

**The SPEAKER:** We are talking about Mandurah and Dawesville, too. You are getting a new facility there, so I think I will just allow it!

*Questions without Notice Resumed*

**Ms R. SAFFIOTI:** Members, there are three things missing from this: one, the Leader of the Opposition; two, the Liberal Party emblem; and three, any policies—yet again. Those are the three things missing from electorates around Western Australia: the Leader of the Opposition, the Liberal Party emblem and policies. If anyone can find any of those three things, please go back to the Leader of the Opposition’s office and report their whereabouts.

SENIORS — ASSAULTS AGAINST

**616. Mr S.K. L’ESTRANGE to the Attorney General:**

I refer to recommendation 16 of the September 2018 report of the Select Committee into Elder Abuse —

Circumstances of aggravation for property offences in the Criminal Code should be broadened to include where a victim is aged 60 years or more.

After two years since this report was brought down, why has the Attorney General not made these changes to the Criminal Code to protect elderly Western Australians?

**Mr J.R. QUIGLEY replied:**

It was the Labor government, of course, that introduced circumstances of aggravation for elder abuse, and it was the Labor government that increased the penalties for elder abuse by nearly 50 per cent. We treat all circumstances of elder abuse with the utmost seriousness. There are a range of penalties and amendments currently under investigation for the Criminal Code. As the member knows, we have pursued a very, very aggressive reform agenda, and penalties of the nature that the member is talking about are under active consideration.

SENIORS — ASSAULTS AGAINST

**617. Mr S.K. L’ESTRANGE to the Attorney General:**

I have a supplementary question. I thank the Attorney General for that answer, but he did not commit to passing these important changes to the legislation before Parliament rises. Can he give a commitment that he will make these changes before Parliament rises this year?

**Mr J.R. QUIGLEY replied:**

As I have said, they are under active consideration and penalties for assaults on the elderly are under active consideration. I cannot give an undertaking that they will pass Parliament this year because of the list of bills that are before Parliament. How can we possibly guarantee the public of Western Australia that any bill will pass through Parliament this year whilst the upper house sits on a swathe of legislation and is more concerned with spending three hours debating my suitability to be Attorney General than with passing legislation? It is absolutely absurd. The member has come in here to ask whether I can guarantee the passage of a particular piece of legislation through the Legislative Council, but I cannot, because there is a cabal of Liberal members in the upper house who block legislation and absolutely blocked the reappointment of the Corruption and Crime Commission by engaging in a cover-up of an investigation into its conduct. I cannot guarantee the passage of any particular legislation with the upper house constituted as it currently is. I do note that the Liberal Party is reforming the membership of the upper house by dropping Hon Michael Mischin and Hon Simon O’Brien down to number six. The Liberal Party is engaging in a cleaning-out of some of these dinosaurs from the upper house, but until the upper house is reconstituted, I cannot guarantee the passage of any particular legislation.

CHILDREN’S HOSPICE — SWANBOURNE

**618. Ms A. SANDERSON to the Premier:**

I refer to the McGowan Labor government’s investment in health services and infrastructure that put patients first. Can the Premier outline to the house how this government’s investment in Western Australia’s first children’s hospice will provide care and support for children with life-limiting conditions; and can the Premier advise the house why Swanbourne was chosen as the preferred site for the hospice?

**Mr M. McGOWAN replied:**

I thank the member for Morley for the question.

Last month, with the participation of the Minister for Health, we were very pleased to announce that we would partner with the Perth Children's Hospital Foundation to build Western Australia's first ever children's hospice—a place that can support children and their families through the hardest times they will ever face. The tragic reality in Western Australia is that there are 2 000 children across our state who are living with life-limiting medical conditions. They suffer from a variety of illnesses: cancer, cardiac conditions, severe neurological problems and severe life-limiting disabilities. This places enormous demands on them and their families. You can only imagine the isolation and difficulty involved in dealing with such situations.

Western Australia does not have a hospice for children with palliative care needs. At the moment, the choices of treatment and care are hospital or home; there is nowhere in between. This is a shortcoming that we need to fix. New South Wales has Bear Cottage and other states have various such facilities. I am very pleased that the Perth Children's Hospital Foundation, under the very able leadership of Ian Campbell, is partnering with the Child and Adolescent Health Service to deliver a fantastic new hospice for kids in Western Australia. Members who have seen pictures of the designs will know that it will be absolutely wonderful. It is one of the things that we will do in our term of government that I am most proud of, and I would like to thank the Minister for Health for all his work on it.

The preferred site is the former Swanbourne Bowling Club. A range of sites were looked at by the Perth Children's Hospital Foundation, but only the Swanbourne Bowling Club site at Allen Park met all the criteria. It is close to the Perth Children's Hospital, it is vacant and near to the ocean, and it is close to residential areas and local amenities for families. It has great opportunities for garden and landscape access for kids, and there is a lack of competing alternative uses. It has a wonderful environment, beautiful ocean views, and children can be taken down to the ocean.

This project should be absolutely and completely uncontroversial. Every Western Australian should get behind it. It is something that we should all embrace and say, "Thank God we've got the Perth Children's Hospital Foundation promoting this, getting donations, and working with government to create something so wonderful for families and children." That is why I find the City of Nedlands and its gross display of nimbyism and selfishness so extraordinarily difficult to take. It makes my blood boil that it would act in the way that it has. It has refused to engage with the project control group. It claims it was engaged too late, even though it made Hon Ian Campbell wait months to brief the council. Councillors were making ridiculous claims about the Special Air Service dropping bombs in the area. One line from the council in a letter to me said that when it was offered a briefing, it was "presented a solution to a problem we did not know we had". Terminally ill children are not a problem. They are not something to be handballed away. They are our kids, whom we need to embrace, and we need to help them and their families.

Several members interjected.

**The SPEAKER:** Members!

**Mr M. McGOWAN:** The City of Nedlands should be falling over itself to assist the foundation and the state government to deliver this facility. It should be grabbing it as one of the great things it can do during its time in public office to enhance the state, to enhance its own area, and to help families and children around the state. The City of Nedlands should be ashamed of itself at this point in time. This is a wonderful project. It is long overdue. The state government is absolutely supportive of it, and we will pull out all stops to ensure that this project happens. I urge that council to put its nimbyism behind it and get on board.

#### CORONAVIRUS — REGIONAL FLIGHTS — GERALDTON

**619. Mr I.C. BLAYNEY to the Minister for Transport:**

Ever prior to COVID-19, Geraldton had 16 return flight services a week to Perth. Currently, there are only four a week. Is the minister aware of the negative impact this restricted flight schedule is having on the Geraldton community, including limited visitation by medical specialists, making it difficult for patient assisted travel scheme patients to attend appointments, and reducing business connections and access for workers?

**Ms R. SAFFIOTI replied:**

I thank the member for Geraldton for that question. As we all are aware, the aviation industry has been impacted the most by the COVID pandemic —

Several members interjected.

**The SPEAKER:** Member for Riverton and member for Churchlands, I call you both to order for the first time. I have warned you about three times.

**Ms R. SAFFIOTI:** Whether it has been the major airlines or the regional airlines, and whether it has been the workers, who have also, of course, had a significant impact, the aviation industry has been significantly impacted. We are working with all the airlines and we will continue to work with all the airlines. We are currently in a dialogue with those airlines about what else can be done from both a tourism point of view and a residential community

point of view to support further flights and further accessibility of air travel in Western Australia. We have seen some return to normality in some parts of Western Australia, but we will continue to work on some areas and have discussions with the airlines about how we can improve services. Affordable and accessible air travel in WA has been our priority. We had already achieved a lot before the pandemic, and we are trying to recover to be back where we were and to improve both the accessibility and affordability of air travel in Western Australia.

#### CORONAVIRUS — REGIONAL FLIGHTS — GERALDTON

##### **620. Mr I.C. BLAYNEY to the Minister for Transport:**

I have a supplementary question. Assistance from the minister's government has increased Regional Express services to Esperance and Albany to upwards of a dozen flights a week. When will the minister show the same level of advocacy and support for increasing flight services to Geraldton, a regional city of 38 000 people?

##### **Ms R. SAFFIOTI replied:**

As I said, this is a continually ever-changing environment. We are working with all the airlines, and, for the first time, I think we have—under this government in particular—great cooperation between Transport and Tourism, having joint negotiations with airlines to see the maximum we can deliver for all of our regional ports. We will continue to do that, because we believe accessible and affordable regional air travel is a priority, and, for areas like Geraldton, we will continue to work to achieve better outcomes and do what we can in supporting regional air travel. I note, of course, that the commonwealth has some responsibility in this area, too. We would always seek further support from the commonwealth if it was interested in those types of things like regional air travel. But the WA government is very much keen to support regional destinations, local communities, and regional tourism.

#### NATIONAL CHILD PROTECTION WEEK

##### **621. Ms J.M. FREEMAN to the Minister for Child Protection:**

I refer to National Child Protection Week, which is this week, and its theme of “Putting children first”. Can the minister update the house on the work being undertaken by the McGowan Labor government to support and protect vulnerable children; and, further, can the minister outline to the house what outcomes have been achieved by workers to keep our children safe?

##### **Ms S.F. McGURK replied:**

I thank the member for the question. I am pleased to have an opportunity to address some of the important work being done by the Department of Communities and some of our partners in caring for some of the state's most vulnerable children. Those Department of Communities staff in particular are focused day in and day out on improving outcomes for families and reducing the number of children entering out-of-home care. Every day, the Department of Communities does work on strengthening families and keeping children safe. As at the end of June this year, there were 5 498 children in care. It is a difficult job, and I know that as a state, we should be very grateful for the work that it does.

I want to talk about protecting children. We have put additional new resources as a state government into early intervention and family support. We have put \$97 million into early intervention intensive work for families to reduce the number of children coming into care. We have funded and are trialling an Aboriginal family-led decision-making pilot to ensure greater self-determination and participation for Aboriginal people in child protection matters. We have made one-off payments to carers during the COVID period of \$3.7 million. We have also provided funding of \$5.7 million for the implementation of royal commission work.

The workforce is important, particularly the Department of Communities' workforce. As I said, it is very difficult work that they do. Members might be aware that a cost-and-demand model was negotiated with Treasury, and that has resulted in additional staff on the ground. Therefore, not only were child protection workers shielded from the budget repair efforts that were required when we came to government, but in fact in 2019–20 alone, there were an extra 70 full-time equivalents. In this financial year, 2020–21, the cost-and-demand model is expected to result in 183 more FTE child protection workers. That is an over 18 per cent increase between June 2017 and June 2020 in the number of child protection workers managing caseloads.

Finally, in regard to results, we have provided extra funding, and we are supporting the workforce that is doing this work, and it is starting to pay dividends. For instance, in the early intervention work, a consortium of Aboriginal organisations is doing work in the metropolitan area and providing in-home support for Aboriginal families. Over the last 12 months, 90 per cent of those families who have been supported have not had a child taken into care. That is a significant achievement for some very vulnerable families.

I want to stress that reducing the number of children coming into care is not the only metric. We need to keep children safe. That is our primary concern. But that work of early intervention is starting to see results. Another important metric across this state and across other states in Australia is that we generally see an increase in the number of children in care coming from the out-of-home care system into the child protection system, but for 2019–20, we have seen the lowest rate of growth for almost two decades.

We are starting to see some significant changes, including a change in direction, and I put that down to a committed government that is not only putting some effort into working with our partners in the community services sector, in the community itself with foster carers and the like, but also supporting our workforce. We are putting new resources in and we are starting to see results: keeping children safe and keeping families safe as well.

**CORONAVIRUS — POLICE RESOURCES**

**622. Mr A. KRSTICEVIC to the Premier:**

I refer to the 12 of 15 police districts that are understrength and the 400 police officers being taken off the front line to fight COVID-19. Will the Premier immediately commit to a substantial increase in police numbers to address violence in our communities, including the sickening assaults against our elderly?

**Mr M. McGOWAN replied:**

As I said in answer to an earlier question, obviously the recent assault upon Mr Lombardi and his death was shocking. We all feel sickened by what took place and we feel for his family and friends. Since we have come to government, we put in place 300 additional police officers and significant budget repair efforts to improve the state's budget position. The government will make further decisions about these matters during the course of this term, but I want to make one other point: we have had to use the resources of government to deal with the COVID-19 pandemic. Look at what is happening in Victoria, the United States or other parts of the world. Reports now coming out of Indonesia, India and Papua New Guinea and other parts of the world—parts of Africa—are terrible, so of course we will use the resources of government to ensure that we do everything we can to prevent that from happening here. Police are part of the resources of government. Obviously, the police have done a wonderful job over this period. I have been so impressed by the police commissioner, the acting police commissioner and individual police officers for the job they have done over this period. It is not often a very—how would I put it—glamorous job. Out on the border at Eucla or Kununurra, which I have been to visit, or out at the airport or wherever it might be, it is not a glamorous job. It is a time-consuming, difficult job, often dealing with difficult people. It has not been easy, but I appreciate the efforts of our police. At this point in time we have had a very successful result in now having 150 days without the virus in Western Australia. I attribute it to those sorts of measures that we put in place in conjunction with our police. Rather than bemoaning our police participating in this, I think we should celebrate the fact that our police have done such a great job in conjunction with our community to prevent the spread of a deadly virus throughout our state.

**CORONAVIRUS — POLICE RESOURCES**

**623. Mr A. KRSTICEVIC to the Premier:**

I have a supplementary question. Can the Premier confirm that the lack of police resourcing has contributed to the highest level of violent crime in Western Australia's history, making people feel unsafe in our local communities?

**Mr M. McGOWAN replied:**

We have seen an overall decline in offences in Western Australia over the course of the last year. Where we have seen an increase in offences has been in the area of domestic violence, which has been similarly reflected in other parts of Australia and other parts of the world when lockdown happened.

Several members interjected.

**Mr M. McGOWAN:** It is just a fact. Do members want to listen? I mean, seriously.

It has been reflected in other parts of the world when people have lost their jobs and when people have, in effect, been locked at home. There has been an increase in domestic violence and also the reporting of domestic violence. Obviously, we have brought in a new system that means all these cases are recorded as well. Naturally, when we record everything, there will be an increase in reported offences as opposed to when we do not. In overall terms, there has been at least a 10 per cent decline in reported offences across Western Australia. I just wish the Liberal Party would get on board with our efforts to try to deal with COVID, rather than playing the nitpicking politics it always does.

**The SPEAKER:** Members, that is the end of question time.

**BILLS**

*Appropriations*

Messages from the Governor received and read recommending appropriations for the following bills —

1. National Disability Insurance Scheme (Worker Screening) Bill 2020.
2. Swan Valley Planning Bill 2020.

**PUBLIC HEALTH AMENDMENT (COVID-19 RESPONSE) BILL 2020**

*Assent*

Message from the Governor received and read notifying assent to the bill.

**PAPERS TABLED**

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

**McGOWAN GOVERNMENT — ECONOMIC MANAGEMENT  
COMMUNITY PROTECTION**

*Removal of Order — Statement by Speaker*

**THE SPEAKER (Mr P.B. Watson)** [3.08 pm]: I inform members that in accordance with standing order 144A, private members' business orders of the day, "McGowan Government Policies" and "Safety of the Western Australian Community", which appeared on the last notice paper, have not been debated for more than 12 calendar months and have been removed from the notice paper.

**CITY OF MELVILLE — INQUIRY**

*Notice of Motion*

**Dr M.D. Nahan** gave notice that at the next sitting of the house he would move —

That this house calls on the Minister for Local Government to establish an inquiry into the City of Melville council regarding conflicts of interest and improper leasing and use of council property.

**CORONAVIRUS — G2G PASS APPROVAL PROCESS**

*Notice of Motion*

**Mr P.A. Katsambanis** gave notice that at the next sitting of the house he would move —

That this house notes that the lack of transparency and consistency of the G2G PASS approval process has caused significant stress, anxiety and distress to Western Australians who are trying to legally return home, and calls on the government to create a clearer, simpler and more consistent process to allow local residents to return to Western Australia whilst continuing to protect our state from COVID-19.

**SENIORS — ASSAULTS AGAINST — POLICE RESOURCES**

*Standing Orders Suspension — Motion*

**MR P.A. KATSAMBANIS (Hillarys)** [3.10 pm] — without notice: I move —

That so much of standing orders be suspended as is necessary to enable the following motion to be moved forthwith —

That this house demands the McGowan Labor government immediately commit to a substantial increase in additional police officers to help stop the out-of-control violence, especially against vulnerable seniors.

I believe an agreement has been reached.

*Standing Orders Suspension — Amendment to Motion*

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House)** [3.10 pm]: I move —

To insert after "forthwith" —

, subject to the debate being limited to 15 minutes for government members and 15 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 to succeed. If I hear a dissentient voice, I will be required to divide the Assembly.

Question put and passed with an absolute majority.

*Motion*

**MR P.A. KATSAMBANIS (Hillarys)** [3.11 pm]: I move the motion.

A few weeks ago, we saw the unfortunate incident of the horrific bashing of Mr Emiliano Lombardi. We saw the terrible pictures of the damage caused to Mr Lombardi and we know the ultimate outcome of that incident was the unfortunate death of Mr Lombardi, a man who was doing no harm to anyone and who should have been allowed to enjoy his retirement years in peace. Instead, he was viciously bashed. He eventually succumbed to the injuries from that bashing, denying him the opportunity to live many more years and denying his family and friends the opportunity to enjoy the company of someone who was obviously a well-loved and well-regarded person in our community. It is just not good enough that this is happening. It is not just Mr Lombardi, and I will talk about that in a moment.

We are seeing an increasing level of violence across our community. Yes, part of it is family violence, but all the statistics show that violent crimes of all types have increased significantly over the last few years and offences against the person in Western Australia are at a record level. Not the only solution, but one of the important pieces of the puzzle in keeping our community safe is an increase in police numbers. We have heard so many people crying out for more police. Our hardworking, overworked, underpaid and under-appreciated police officers are doing the best they can. We all thank our police officers for the work they are doing. But if we ask any police officer on the beat what we can do to help them, they say, “Give us some extra numbers. We need more police and we need them now.” The police officers are saying that. The police union is saying that. The chief commissioner of the City of Perth has said that. The mayoral candidates for the City of Perth are saying that. Today, even the Shire of Exmouth has asked for more police to deal with the problems of violence in that community.

The Premier came into this place today and claimed that he has put 300 extra police on our streets. That is what he has claimed, and he wants us to take him at face value. What are the facts around all that? What is the truth around all that? The only reliable figures we have are the figures in the police annual report. Between 2015 and 2017 under the previous government, there was an overall increase of 398 police officers, from 6 395 in 2015—these are financial year figures—to 6 793 in 2017.

**Mrs M.H. Roberts:** Playing catch-up.

**Mr P.A. KATSAMBANIS:** It was playing catch-up, police minister! I will pick you up on that, because what sort of catch-up have you been doing subsequently since you came to power?

At the end of the 2017 financial year, there were 6 793 officers on the beat. At the end of the 2019 financial year—the most immediate available figures—there were 6 768. That is not an increase of 300 at all; it is a decrease of 25. Unless this government has managed to put on an extra 325 police over and above attrition in the last 12 months, what the Premier said today does not stack up. The Premier and the Minister for Police may have committed to more police, but they have not delivered more police, and the results are there for everyone to see. We have found out from the latest figures that the minister has provided us through questions on notice in this place that 11 of the 15 police districts in Western Australia do not have enough police simply to meet their authorised strength. That is not more police officers; that is fewer police officers in every region, including, unfortunately, the region that Mr Lombardi was living in—the Cannington police district. On the minister’s own figures, 11 of the 15 police districts are undermanned.

We can look at the rise in assaults against our seniors. These are annual figures from January to December. Again, we have managed to get these figures from the government through questions on notice. In 2016, there were 611 assaults against seniors; in 2017, 638; in 2018, 661; and in 2019, 730. That is a massive increase on this government’s watch.

We saw in the newspaper in the aftermath of the horrific thing that happened to Mr Lombardi articles about other elderly people who have suffered at the hands of these thugs in our community. In an article headed “Elderly easy prey of thugs” written by Josh Zimmerman and Charlotte Elton, there were a number of stories, including one about Perth Uber driver John Rowe, who tried to take his own life as a result of the post-traumatic stress disorder he suffered after a vicious bashing, and grandfather Sam Baldacchino, 72, who was left with 20 fractures around his eye socket and deep cuts to his right cheek when he was set on by drunk thugs while setting up his fruit and vegetable stall in Mandurah last year. The article states —

Mr Baldacchino said yesterday he was fortunate to escape with his life.

“When I see something like (what happened to Mr Lombardi)—straight away I think of myself ... I was very lucky,” ...

“The law should change; the law should protect old people. It should be heavy, heavy punishment.”

That is what this victim said. Another victim, Cyril Watson, woke up to find two men in his Wembley home brandishing a knife and a screwdriver. When the 70-year-old told them that he had no money, they punched him in his face. Mr Lombardi’s bashing has brought those terrible memories flooding back, with Mr Watson saying that news of his death nearly destroyed him. These people are calling for tougher punishment. They are also calling for police to protect them, and the police are asking for more officers on the ground so that they can protect the community.

We saw in today’s *The West Australian* an exclusive article by Josh Zimmerman headed “Surviving a foreign war only to cop a stabbing in Perth”. It states —

Maria Alimanovic survived the Bosnian War only to be stabbed in the back of the neck and head with a broken beer bottle in the garden of her East Perth apartment.

The 79-year-old was watering plants in the communal area in January—a daily activity for the grandmother who arrived in WA in 1998—when a homeless woman began verbally abusing her.

This victim was hit across the head. She was in agony. The person who hit her was sentenced to only one year and nine months in jail after being charged with unlawful wounding in circumstances of aggravation, despite the maximum penalty being seven years. It is just not good enough. This government should not come into this place and try to spin itself out of a crisis of its own making, because these are real people with real stories who are suffering out there in our community. This government should be protecting them.

I want to close with a very important quote that I found just recently when I was looking at old stories. This quote states —

It is about time the government took responsibility because we can see very clearly its attitude towards policing and government generally. It is interested only in the media angle—what it can get out of it, how it can promote itself and how it can con the public into thinking it is doing a good job. It is all about smoke and mirrors.

Yes, it is. That quote is from today's police minister, the member for Midland, delivered in 2016. Unfortunately, the government she is part of, the Western Australian Labor government, is all about smoke and mirrors. It is about time it took its responsibilities seriously and looked after the most vulnerable elderly people in our community by providing more police on our streets to help protect our public.

**MRS L.M. HARVEY (Scarborough — Leader of the Opposition)** [3.19 pm]: I, too, rise to speak to this motion. I have enlarged photographs from *The West Australian* of horrific scenes of seniors who have been bashed. It is a mosaic of our grandmothers and grandfathers with black eyes and broken arms. One woman whose case I was looking into, Mrs Thorning, was out for an early morning photo shoot and a thug drove past in his car and subjected her to a frenzied assault that lasted over three minutes when he bashed her senseless with a baseball bat. She was saved only because a couple of passers-by stopped and managed to intervene. The person who assaulted her got two years and four months in prison—two years and four months for changing that woman's life forever. On New Year's Eve, Karen Bland, a 60-year-old, and her two daughters were methodically knocked unconscious by thugs before they assaulted a police officer. In that instance, one alleged attacker, who basically gatecrashed a New Year's Eve party and beat these women until they were unconscious has not yet gone to court; he is still awaiting trial.

We contrast some of these sentences with that of the woman who breached the WA coronavirus border by hiding in a truck. She was handed a six-month jail sentence. She got a six-month jail sentence for avoiding the coronavirus quarantine period. Contrast that with someone who bashes a person and leaves them with post-traumatic stress disorder, a metal plate inserted in their cheek for life and too frightened to walk out into their front yard. We hear stories from seniors who have contacted our offices and say, "We can't afford to pay to install the shutters we need on our windows; we can't afford to pay for CCTV; we can't afford to pay for alarm systems. Without those things we don't feel safe anymore. We don't feel safe because we have seen photographs in *The West Australian* of older people." They are the most vulnerable people in the community, bashed, beaten and bloodied and some of them are subsequently losing their life through senseless violence that has happened under the watch of this government. The government cannot shy away from the figures it has published for the Parliament. The rate of assaults against seniors rose from 611 in 2018 by 20 per cent to 730 in 2019. That reflects two seniors being bashed every day—every single day. We should hang our heads in shame at those figures. This government has no answers for them.

We know what the problem is; there are not enough police. We have no quarrel with police officers being involved in the COVID-19 response. That is appropriate, and they are doing a terrific job. I am one who will stand in this chamber every day and talk about how wonderful our police officers are, because they are; they do a great job. However, they contact us and say that they are too frightened to intervene in a brawl or a melee because they know that only two of them will be there and they cannot get backup because officers have been sucked off the front line into the COVID-19 response and this government did not get on with the job of recruiting officers to replace them. The police academy should be full of officers in training to replace the officers who have been sucked off the front line to deal with COVID-19. COVID-19 will not go away until we have a vaccine. What is the government's solution in the interim? The police union has said that the Perth Police Centre has seen its authorised strength drop from 214 in 2014 to 175 this year. There are not enough police. The government needs to resolve it now and recruit officers into the academy now and get those officers onto the front line to protect our community.

**MS M.J. DAVIES (Central Wheatbelt — Leader of the Nationals WA)** [3.24 pm]: I rise on behalf of the Nationals WA to support this motion, and of course we do. We open our newspapers and listen to the radio and hear the terrible stories of violence and harm occurring across our communities. We see it in regional Western Australia. Our police are undermanned and understaffed in covering large jurisdictions. This is exacerbated in regional Western Australia by remoteness, isolation and lack of access to other support services. Last October, the Nationals WA raised serious concerns about the shortage of officers in regional WA. In October 2019 we were 95 FTE short of the authorised numbers of police required in regional Western Australia. At the most recent count in about April, we were 104.77 FTE short, and that number is going up.

We are faced with some headlines similar to those the two previous speakers read out from *The West Australian* such as “Young Pilbara father airlifted to hospital after being ‘attacked by boy outside his house’.” The headline “Detectives investigate serious burglary and assaults in Derby” is followed by —

A Derby man is in a serious but stable condition ... after he was the victim of a serious burglary and assault.

That was a man aged in his seventies who was attacked in his own home. A headline in the *South Western Times* states “Manhunt after teenage girl sexually assaulted while walking in Rangeway, Geraldton”. Also the *South Western Times* contains a headline “Greenfields father accused of carjacking, threatening to kill elderly man in Mandurah”. It goes on and on and on. We need a commitment from this government to increase police numbers in regional Western Australia and across the state.

**MRS M.H. ROBERTS (Midland — Minister for Police)** [3.26 pm]: Further to the hypocrisy we have heard here, I appreciate the quote the member for Hillarys gave in the final part of his speech because that did accurately reflect the former government’s position.

I might just start with countering the figures put forward by the Nationals because if there is any area in which there are more police, it is in regional Western Australia. That member has selectively quoted authorised strength versus actual numbers and so forth and says the figures are down. However, she does not go on to say that we have actually increased the authorised strength in those districts. The reality is that at 30 June 2016 there were 1 332 officers in regional Western Australia. There are now 1 443 officers in actual numbers. The former government had an authorised strength of 1 413 and we have an authorised strength of 1 548, so we have dramatically increased the authorised strength for regional Western Australia and we are substantially up—well over 100 officers—on the number of officers the former government provided in regional WA. It just goes to show that an increase in police numbers is not the key factor here.

I ask people also to look at results. When I made those comments in 2016, it was in the context of double-digit increases in crime each month. We were seeing the rate of various crimes going up by 20 per cent each month when we compared them with the same time the previous year. They were the facts. The opposition introduced the failed policing model, which was an absolute debacle. Only half the number of officers were actually available to respond to crime. The others were put into so-called local policing teams that were not rostered 24/7. It was a complete debacle. Do not take my word for it. How about taking the words of the Liberal candidate for Forrestfield because he is saying that. He did not say it only when he was president of the WA Police Union; he is saying it now. He went to a Liberal Party crime forum in Kalamunda on 1 July this year and said that recently we had seen over the last few years a proposal for a particular model of policing. When the current government came in that changed to make where police were located more localised. We found previously under the old model that police officers were travelling extraordinary distances to attend an incident.

Now he is a Liberal Party candidate, he is being a bit restrained—not as critical as he was when he was union president. George Tilbury told the Kalamunda community that at the forum.

Talking about numbers of districts and being understaffed and so forth, remember what the former government did to numbers of districts? We went down to just four metropolitan districts. That is what George Tilbury was talking about. Midland, east metro and central were all one district. A person could be up in Bullsbrook and beyond, in the hills at Kalamunda and beyond, or in Wembley and they would be in the same district. How disingenuous is the member for Scarborough, the Leader of the Opposition, when she talks about district numbers in Perth now compared with district numbers in Perth then? Perth district used to combine everything in the east metro and central areas. Yes, there was a bigger number than what Perth district has now. It is a nonsense. To look at just districts and not look at all the specialised units is not a fair comparison. The model has changed. We got rid of the former government’s discredited model that saw crime go up month after month and we have implemented a much more localised model that is working much better. Crime is down across the board. Since the opposition was in office, crime is down by 10 per cent. That is not insignificant. Even when we look at the figures quoted today for numbers of assaults on the elderly, if we look back at when the major increase occurred, it was over a select few years. Those few years happen to coincide with the years that the Leader of the Opposition was Minister for Police. In 2012, there were 267 assaults against the elderly. By 2016, there were 611 assaults against the elderly; that is more than double. It is incredulous that the member for Scarborough could come in here and say, “Two assaults a week is terrible!” When she was minister, she did nothing. The numbers of assaults more than doubled in the Leader of the Opposition’s few years as police minister and she did nothing.

Even today, the Leader of the Opposition came here with a simplistic solution. She still does not get it. She said today that we know what the problem is: we do not have enough police. The member for Hillarys suggested that while the Leader of the Opposition was Minister for Police, the number of police went up, so where is the direct correlation between the number of police going up and the more than doubling of the number of assaults against the elderly? If there is a correlation, it is the inverse of what the Leader of the Opposition is suggesting. She came in here today to say the problem is that there are not enough police and that the panacea for all crime is more police—that will fix it. The fact is that we have engaged over 300 more police. The member for Scarborough said the police academy



should be full; the academy is full. At our last graduation, four or five schools all graduated at one time. People were fast-tracked through. An additional 150 police had already been engaged as part of our election commitments. Of the extra 150 who were promised at the start of the COVID pandemic, 120 police are already at the academy and 30 will be in the academy before the end of the month. That is the full 150 police.

The Leader of the Opposition continues to say that the answer is more police. It is a simple argument but it is not the right argument. The right argument looks at the causes of crime and what drives it. That is what she did not do when she was in office. She did not look at the causes or acknowledge the huge and escalating meth problem that was occurring under her watch. That is where there is a direct correlation. If we look at the test results for meth in the water during the former government's time in office, we can see that meth use increased astronomically. The number of assaults doubled at the same time. That is a correlation we needed to do something about. That is why we took a methamphetamine action plan to the last election and we have delivered on it. There are 100 additional police officers and 20 additional specialist staff to deal with and tackle the scourge of methamphetamine in our community. We know there is a direct correlation between meth use and crime. Every police officer will tell us that. They will tell us that the reason people assault the police and others in the community is that so many of them are high on drugs. It is one of the underlying issues we have to deal with. Another issue we have to deal with is mental health and wellbeing. They are the kinds of underlying factors we have to deal with. The Leader of the Opposition would have a point if there were not a strong police presence in Northbridge. She might have a point if crimes were going unsolved, but that is not the case. The rate of crimes being solved has gone up significantly since we have been in office. Police are catching more offenders. The indication is that when these assaults occur, be it in Northbridge or elsewhere, police are on the scene very quickly, if not immediately. Regarding the recent one-punch death in Northbridge, CCTV records show that two police had walked by that location less than a minute before the assault took place. We have to look more broadly.

The fact is that the former government absolutely failed on this. It had no solutions then and it has no solutions or policy now. Its only policy is to say, "If we had more police, suddenly people would not be assaulted." Each assault is incredibly sad, but we acknowledge the problem; we acknowledge that there are certain drivers of crime and that people need to be appropriately punished. We have done that before. It is why, during the Gallop government, the maximum penalty was increased from 10 to 14 years' imprisonment for assault, with the exacerbating factor of someone being elderly. Given the Leader of the Opposition's record on crime, her suggestions are grossly hypocritical.

There has been a significant decrease in the number of crimes. Police officers have been allocated to COVID-related duties. Because of COVID, police duties have also changed. During the period when people were at home, the number of home burglaries reduced by between 40 and 50 per cent. Our Commissioner of Police and police force have responded very strongly. They have protected our community during COVID. Crime, right across the board, is significantly lower now than what it was a few years ago. In this state, we do not ever want a return to the Leader of the Opposition's failed policing model. Police response times blew out and crime went up month after month by double digits.

**MR J.R. QUIGLEY (Butler — Attorney General)** [3.38 pm]: I would like to thank the Minister for Police for so comprehensively dealing with the issue that is before the chamber at the moment. I will take a brief moment to draw attention to the publicity in *The West Australian*, largely under the by-lines of Mr Josh Zimmerman and Charlotte Elton, and also Emily Moulton. A previous Labor government years ago raised the maximum penalty by nearly 50 per cent for assaults on the elderly. The important role that the media plays in reporting on these things, as in the case of Mr Lombardi, is to emphasise to the judiciary the concerns of the community. I am sure that the judiciary hears the facts, the plea and any mitigating factors, but I think the judiciary also needs to have expressed to it from time to time, in the clearest terms, the general concern of the community. The assailant in Mr Lombardi's case is before the court at the moment. The case of Buck, which was mentioned by the member for Hillarys, is before the court at the moment, as is the case involving the victim Baldacchino. Many of these cases are still to be dealt with by the court. It is important that the community's courts, which are part of an independent and separate branch of government, hear from the community through the media and other channels the deep concern that we as a community have about these crimes. It is important that condign punishment is inflicted upon these offenders.

I refer to an article from *The West Australian* of Thursday, 3 September 2020, after the sentencing of Ibraheem Saleh. Mr Saleh was given a penalty of 15 months' imprisonment, which was suspended for 18 months. I have the photo in *The West* here. When he came out of court he flipped the finger at the community. I am sure that he did not do that in front of Her Honour when the sentence was announced. This case is within the appeal period and the suitability or adequacy of the sentence imposed is currently being assessed by the Director of Public Prosecutions. It is by the exposure of this type of behaviour as criminals come out of court that judges and the DPP really get a taste of what these criminals think about the system. If they think they have got away with it, they just flip the bird—if I can use colloquial language—at the system and, more importantly, flip the bird at our community. This is what causes community concern. I thank the media for drawing it to the attention of the judiciary.

*Division*

Question put and a division taken, the Acting Speaker (Ms J.M. Freeman) casting her vote with the noes, with the following result —

## Ayes (16)

Mr I.C. Blayney	Mr P.A. Katsambanis	Mr W.R. Marmion	Mr D.C. Nalder
Ms M.J. Davies	Mr Z.R.F. Kirkup	Mr J.E. McGrath	Mr K.M. O'Donnell
Mrs L.M. Harvey	Mr S.K. L'Estrange	Ms L. Mettam	Mr P.J. Rundle
Dr D.J. Honey	Mr R.S. Love	Dr M.D. Nahan	Mr A. Krsticevic ( <i>Teller</i> )

## Noes (37)

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

## Pairs

Mrs A.K. Hayden	Ms L.L. Baker
Mr D.T. Redman	Mr T.J. Healy

Question thus negatived.

**MUTUAL RECOGNITION (WESTERN AUSTRALIA) BILL 2020***Second Reading*

Resumed from 17 June.

**MRS L.M. HARVEY (Scarborough — Leader of the Opposition)** [3.45 pm]: I rise in support of the Mutual Recognition (Western Australia) Bill 2020 and I will make some short remarks about this legislation. This bill, effectively, will continue for a further 10 years Western Australia's participation in the national mutual recognition scheme under the commonwealth's Mutual Recognition Act 1992, which is adopted under section 51(xxxvii) of the Australian Constitution. An intergovernmental agreement, which has been in place since 1995, adopted the commonwealth Mutual Recognition Act, and the continuation of that is the purpose of this bill.

The current Western Australian act will expire on 28 February 2021. This bill will amend the act so that its effectiveness will continue until 28 February 2031. I do not expect that this is the sort of legislation that will be debated at great length. It has always had bipartisan support because of the benefits that it brings to Western Australian consumers, business owners and, indeed, labourers. The legislation was introduced to reduce the regulatory barriers to the interstate flow of goods and labour between the Australian states and is based on two principles, subject to exceptions.

The first principle is that goods that are produced in one jurisdiction may be lawfully sold into another jurisdiction without meeting additional regulatory requirements. I note that the legislation essentially overrides state laws that regulate the manufacture or sale of goods—for example, packaging or labelling requirements—but the scheme does not affect the operation of any laws to the extent that they regulate the manner of the sale of goods, transportation, storage or handling, or the inspection of goods.

The second principle is about occupations; that is, an individual who is registered to practise in one jurisdiction can practise the equivalent occupation in another jurisdiction. This is based on equivalency. The recognition between the states is that occupations may be practised in another jurisdiction without being subject to any additional requirements if the roles and activities that need to be carried out are substantially equivalent.

My understanding is that in January 2015, the Productivity Commission reviewed the effectiveness of both the Mutual Recognition Act and the Trans-Tasman Mutual Recognition Arrangement. A report was handed down in September 2015, which found that the schemes were generally working very well, made it easier to do business across borders, and were achieving their objectives to give consumers a wider and more competitive range of goods and services. The report also found that there were benefits to workers from these instruments, such as allowing them to move to other jurisdictions, and that there were benefits to businesses through improved access to skilled labour and reduced compliance costs. I note wryly at this point in time in Western Australia that the purpose of part of this legislation is to free up the movement of labour across borders. In these times of COVID-19 and the

restrictions that are in place, labour shortages are becoming a daily issue for many of our regional operators in the agricultural sector, the mining sector and other areas because there are restrictions on people moving across borders for reasons that obviously are not connected to the ability of those workers to work in different jurisdictions with their skill set.

I note the comment in the second reading speech that the commonwealth Mutual Recognition Act 1992 is not attached as a note to the bill, which is consistent with an approach recommended by the Legislative Council's Standing Committee on Uniform Legislation and Statutes Review for the Trans-Tasman Mutual Recognition (Western Australia) Act 2007. I think it is very appropriate, and is one of those things that we do not see with every piece of legislation that is brought to this place, that consideration has been given to the deliberations of a parliamentary committee of the other place and, indeed, the recommendations of that committee have been upheld in regard to the way the government treats amending legislation and other instruments in this place.

With those very few words on the Mutual Recognition (Western Australia) Bill 2020, I will conclude my remarks. As I said, we do not have a conga line of members wanting to speak on this legislation. It is somewhat dry, although it is very useful and is one of those pieces of legislation that has received bipartisan support across many governments because it achieves the purpose of reducing the cost of goods and services, improving access to labour and generally improving the operation of trade and business across borders under not only this piece of legislation.

**MR M. McGOWAN (Rockingham — Premier)** [3.52 pm] — in reply: I thank the opposition for its support for the Mutual Recognition (Western Australia) Bill 2020. The legislation itself is relatively uncontroversial and has been around for the best part of 30 years. We need to get this legislation through both houses of Parliament by the end of this year for the system to continue to operate; otherwise, it will expire in late February. Considering that the election is not until mid-March, it is very important that this legislation is supported in both houses of Parliament expeditiously by the end of this year.

The legislation is uncontroversial. It permits the recognition of goods and occupations between the states. For instance, a plumber whose qualifications are recognised in New South Wales will be recognised in Western Australia. A good in another state is recognised, if you like, by the law in Western Australia. There are exemptions or exceptions to that. For instance, there is a carve-out for a container deposit scheme, which this government will introduce very, very shortly into Western Australia. Container deposit schemes are in place in New South Wales, South Australia, the Northern Territory, the ACT and perhaps Queensland. They have carve-outs as well. That will allow for that carve-out from the legislation.

The other thing that the legislation does is allow carve-outs in relation to certain goods such as firearms, firecrackers and a few controversial goods that the states can legislate to not allow the recognition arrangement between states to be in place. This system has been in place since the Keating government introduced it, and it has worked well across the states to prevent the arbitrary interference with goods or occupations between the states. Someone with the appropriate qualification in one state can be recognised in another state and can practise their trade in that other state. It is an interesting system in today's environment that allows for the recognition of people's qualifications between the states, although not necessarily their free movement, which is a different thing. I am pleased that the opposition supports it.

Question put and passed.

Bill read a second time.

Leave granted to proceed forthwith to third reading.

*Third Reading*

Bill read a third time, on motion by **Mr M. McGowan (Premier)**, and transmitted to the Council.

**NATIONAL DISABILITY INSURANCE SCHEME (WORKER SCREENING) BILL 2020**

*Second Reading*

Resumed from 12 August.

**MR A. KRSTICEVIC (Carine)** [3.56 pm]: It gives me great pleasure to stand here today to say a few words on the National Disability Insurance Scheme (Worker Screening) Bill 2020. Firstly, I put on the record that the opposition is strongly supporting this legislation. I would like to thank the minister for arranging a briefing so that we could get across the finer details of the legislation. I suspect that we will not hold up this legislation for long in this house because I believe it is important for it to go through the Parliament this year. I believe it is meant to be operational by early next year, prior to the next election on 13 March. We will make sure that happens, at least from the point of view of the Legislative Assembly, and I assume that the Council will manage its business accordingly.

The purpose of this legislation is to introduce screening requirements for workers under the National Disability Insurance Scheme. We know that people with disabilities are a vulnerable cohort, and it is important to ensure that people of appropriate character are employed in their service. I will not go through the many examples of abuse

that have occurred in this space over the years, but we are all cognisant of that fact, whether it be through people with disabilities, elder abuse or the abuse of children, which we discussed when debating the working with children checks legislation previously.

This legislation will apply especially to those workers who have close contact with people with disabilities, such as those in support and care roles. The legislation will fulfil several roles, one of which is to deter certain individuals from seeking work in the sector. Others are to exclude certain people from working for NDIS providers in specific roles and to reduce the potential for NDIS providers to employ people who pose an unacceptable risk of harm to people with disabilities. The government is implementing this legislation in line with Western Australia's obligation under the intergovernmental agreement. The intergovernmental agreement seeks to put nationally consistent screening in place. It also provides for portability, so that a person who has a valid screening in one state can carry that screening certification with them when they move interstate or wish to continue to do NDIS work elsewhere. This does not mean that the legislation is identical across the country. In fact, a large degree of discretion is offered to the states in implementing the various elements of the policy, such as penalties, enforcements, physical cards or electronic cards, and the ability for workers to commence work in advance of their applications being determined. The National Disability Insurance Scheme (Worker Screening) Bill 2020 appropriately identifies differences between workers for NDIS providers, noting that those in risk-assessed roles will require a clearance. Risk-assessed roles include key personnel in executive roles and those who provide support or are likely to have more than incidental contact with persons with disabilities.

Clause 6 will establish class 1 and class 2 offences, which are listed in schedules 1 and 2. They are fundamentally for determining whether an applicant is a disqualified or presumptively disqualified person. Clause 8 clarifies that those who are convicted of a class 1 offence as an adult will be automatically disqualified from NDIS work. Presumptively disqualified persons include those with pending charges or with a class 2 or class 3 conviction, with some qualifications in those schedules.

Clause 12 provides for the circumstances in which the chief executive officer will determine an application. Importantly, the CEO will have broad scope to consider all matters linked to risk, not just those matters that relate to triggering events such as a criminal record or a disciplinary outcome. In determining whether a person can have a clearance, the CEO of the department must refuse an application if the applicant is a disqualified person, has committed certain offences, or is shown to pose an unacceptable risk after a risk assessment has been conducted.

Clause 13 will provide the CEO with the power to issue an interim bar on an applicant, if the CEO believes that there is a reasonable likelihood that a risk assessment will result in a finding of unacceptable risk. This appears to be a similar process to that under the working with children screening process, whereby an interim negative order can be issued to prevent a person from working with children until a full risk assessment can be carried out.

A 2019 Auditor General's report noted significant issues with the working with children process, whereby the department was hesitant to issue interim orders, and a number of unsuitable applicants were permitted to work with children for an average of seven months. I hope this provision will be used more willingly and has sufficiently greater scope to protect people with a disability than was found by the Auditor General to be the case with the working with children check process.

Under clause 21, once clearances are in place, they will remain in force for up to five years, subject to ongoing monitoring by the NDIS worker screening team. Five years is a long time; in comparison, working with children cards are valid only for up to three years. However, the parliamentary secretary told me earlier today that at some point in the future the validity of the working with children card will be up to five years. That will be an interesting debate when it comes up, because we know the issues that have been identified recently around working with children cards. I trust the minister will provide some certainty that the department will engage in ongoing, proactive screening of NDIS workers.

Clause 25 will provide the CEO with the power to cancel a certificate if they become aware that the person is disqualified or poses an unacceptable risk. It is important to note that two teams will be set up under this legislation—one team will do working with children checks and the other will deal with the NDIS screening process. It is important that we ensure those people have the right skill set to be able to do the job, and that the department is appropriately funded. I would like the parliamentary secretary to indicate whether there has been any additional funding for the resources that will be required to do these checks. I would also like to know what the process will be for making sure that the checks are managed well on an ongoing basis.

The rollout of NDIS screening will be managed by the Department of Communities. We know from debates in this Parliament and from Auditor General reports some of the deficiencies in the way that the Department of Communities dealt with the working with children card program, including not being able to identify staff who needed a working with children card clearance, and/or whether there were records on its database of who did or did not have a card, or who was or was not working with children.

The working with children card program is extensive. It started back in 2006 and more than a million cards have been issued, including renewals. Roughly one in five Western Australian adults have a working with children card.

As I said, there have been significant delays in processing complex cases, potentially leaving children exposed to risk. This is one of the things I want to put on the record. People with disabilities, depending on their disability, are some of the most vulnerable people in our community, and we need to make sure that we have the right checks and balances in place.

The Department of Communities has a very average track record in some of the things it does. It reports to four different ministers, which makes it a bit difficult for it to know who its master is. The Western Australian Council of Social Service's 2020–21 budget submission identified that the Department of Communities was lacking in its ability to appropriately communicate its roles and responsibilities and seemed to be confused by all the complex machinery-of-government changes. It is of some concern to me that WACOSS, in its 2020–21 budget submission, reveals so little faith in the Department of Communities. I have put that on the record previously, and it has been identified by WACOSS on numerous occasions. It is a significant issue and concern if the department is not capable of meeting its requirements, whether through a lack of training, a lack of an appropriate budget or a lack of direction from ministers in terms of priorities. I am sure the department is doing an outstanding job with the resources it has, but we know from the feedback of various individuals that the machinery-of-government changes have caused mayhem in some departments. It has been a difficult transition, with poor leadership, and that has resulted in things slipping through the cracks.

The first Auditor General's report on working with children checks came out in 2019, and found the department to be lacking. Who could forget that six or seven sex offenders had been allowed to work with children for a time? That was quite concerning at the time. That was in 2019, and the minister at the time promised that those problems would be fixed by, I think, June 2020, which is a long time to fix some serious flaws in that process. The minister then made a statement in this Parliament sometime in June 2020, or thereabouts, that the system had been fixed. But then, of course, another Auditor General's report to do with working with children checks came out in July 2020, which again identified some problems with the way the Department of Education, the Department of Health and the Department of Justice in were dealing with that process. It again comes back to the Department of Communities to make sure that other organisations, individuals, not-for-profits and government departments know their obligations under the legislation for dealing with vulnerable people—in this case vulnerable children.

I would like the parliamentary secretary to provide an ironclad guarantee that we will not see the same level of dysfunction in this process and with these checks and balances as we have seen with the working with children checks process. I also ask the parliamentary secretary for an ironclad guarantee that working with children checks are now being done properly so that future Auditor General reports will not identify problems within the Department of Communities and other government departments. If the government cannot set an acceptable standard, what chance does anyone else in the community have? The important part is to ensure that this new legislation, the National Disability Insurance Scheme (Worker Screening) Bill 2020, is done properly. As I have said previously, it is transportable. People can move between states and if we do not have the right checks and balances in place we may allow people of inappropriate character to participate in the NDIS; things can get lost in the system. Therefore, it is critical that we get these things right. People will remember that even with the working with children checks, perpetrators were allowed to go on overnight camps with children, do babysitting and childminding, and provide coaching and private tuition services. That is concerning. A childcare service was also carried out by a person who was not of good character to be given a working with children card. As I said, in some cases, seven people who had been charged and found guilty of sex offences had had access to children for up to six months. That should be disturbing to everybody in this Parliament, and to the community more broadly. Even though another report has come out indicating that things were not being done properly, the Minister for Disability Services has assured us that things will be done properly in the future. The minister has had eight months to make that happen—from October 2019 when we first discussed this matter in this Parliament until June this year. It is concerning that the processes in three government departments were found be lacking. I would have thought that would have been the first and easiest place in which to fix the problems.

**Mr D.A. Templeman:** What did you do to your hand?

**Mr A. KRSTICEVIC:** Doorknocking.

**Mr D.A. Templeman:** Simply doorknocking?

**Mr A. KRSTICEVIC:** Yes.

**Mr D.A. Templeman:** You're sure it was doorknocking?

**Mr A. KRSTICEVIC:** It was doorknocking. I thank the minister very much for his concern.

**Mr D.A. Templeman:** I am always concerned about you! I have been concerned about you for a long time!

**Mr A. KRSTICEVIC:** The minister is obviously missing me from the local government portfolio, but that is okay.

On a very serious note, this is a critical piece of legislation, and it is supported by the opposition. However, we need to make sure we get it right. We cannot keep letting down the most vulnerable people in our community, on a consistent basis, as we have done until this point. We keep promising that we will deliver better services and that we will do the job properly. I brought a motion to this Parliament on behalf of the Western Australian Council of

Social Service and the not-for-profit sector about the fact that 18 domestic and family violence service providers have had their resources cut from 1 July. The government was not interested in giving them the assistance that they need. I believe there may have been some movement since that debate took place. However, it concerns me that the most vulnerable in our community seem to be neglected more often than not.

This piece of legislation is critical for the future safety of every person who is part of the National Disability Insurance Scheme. It is important that the NDIS ensures the quality of life of people with disability into the future. We need to make sure that we do the best we can for these people. We have an obligation to protect them. We have an obligation to make sure they can be confident that the people who will enact this very good legislation will be provided with the necessary resources and training. We do not want things to be shifted every five years. It is concerning that the validity of the working with children card may be increased from three years to five years to align with the NDIS working with children checks. At this time, we do not necessarily have faith that the system is working properly. We have been told that the minister has made the necessary changes. However, when the Auditor General or others investigate what is taking place, we get a different picture.

It is important that we get a commitment from the minister that this process will be resourced properly. It is also important that we get a guarantee from the minister that there will not be large-scale rorting of this system, and also that people will not be subject to abuse. The government needs to provide the department with the support that it requires. The department should not be distracted by the fact that it reports to a number of ministers who have different priorities. All those priorities and portfolios need to be resourced appropriately. For a long time, the government was not spending money in the community services and not-for-profit sector. There was a lot of talk about that fact. The government is now spending plenty of money on infrastructure projects—billions of dollars, in fact—but only a trickle of money is coming into the community services and not-for-profit sector, and the Department of Communities. We know that at this time, people are struggling and suffering like never before. The pressure on people with disabilities was huge prior to COVID. That pressure has grown exponentially because of COVID. There was not enough funding for this sector prior to COVID. That funding is still being held back. There were areas for improvement in this sector prior to COVID. Those areas of improvement are yet to be met.

The Minister for Disability Services is in the other house. The track record of that minister is not as bad as the track record of some of the other ministers involved with the Department of Communities. I assume that the Minister for Disability Services will not let these people down and will ensure that this legislation is implemented with the appropriate level of resources so that the quality of life of people who receive benefits from the National Disability Insurance Scheme is second to none. With those comments, I commend the bill to the house.

**MR R.S. LOVE (Moore — Deputy Leader of the Nationals WA)** [4.16 pm]: Madam Acting Speaker —

Several members interjected.

**The ACTING SPEAKER (Ms L. Mettam)**: Thank you! Member for Moore.

**Mr R.S. LOVE**: I have not even started yet. Goodness me!

Several members interjected.

**The SPEAKER**: Member, would you like interruptions or interjections?

**Mr R.S. LOVE**: I have not made a contribution yet, so when the member for Mirrabooka has finished, I will commence. Has the member finished? Good.

I would like to make a brief contribution on behalf of the Nationals WA to the National Disability Insurance Scheme (Worker Screening) Bill 2020. I have a couple of questions that I will put to the parliamentary secretary, and hopefully he will be able to outline some answers. I do not know that we will be calling to go into consideration in detail on the bill if it passes the second reading, which I expect it will.

The Nationals support the bill. The National Disability Insurance Scheme Act was passed in 2013. We are now seven years down the track. The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability was established in April of last year. That highlighted the dire need to ensure that people with disability are cared for by people of good character and are not exploited or harmed in any way. The intent of this bill is to introduce screening for persons who are engaged in NDIS work. I would like the parliamentary secretary to address how far this will go for persons who engage in activities that do not relate directly to the care of a person with disability, and to outline the definition or guidelines that will be drawn around that. I point out that we did have a briefing from the department and the minister's office, and some of these matters were explained to us, but if the parliamentary secretary could outline that to the house, that would be instructional.

I am also unsure about what investigations will be undertaken into persons who have committed serious offences in jurisdictions other than Australia, New Zealand and other commonwealth countries, specifically in countries that might have less of an interchange between law enforcement and justice officials. For instance, if a person came from a country in Eastern Europe, South-East Asia or Africa, where there is no established link between the authorities, how could someone go about ascertaining a record of that person when doing due diligence, if you like, on them? We have seen how difficult it is to investigate some of these matters from overseas, and even in this place.

One of the other issues I want some clarity around is when a conviction for a class 1 or class 2 offence has occurred with a person who might not yet be an adult but would no doubt have been convicted of the offence. I assume they would undergo some sort of risk assessment, but I want the parliamentary secretary to outline how that would be triggered and how that would be carried out. Supposing a 17-year-old committed a class 1 offence, how would we ascertain, 15 years down the track, whether that person should in some way be considered less of a risk than an 18-year-old, who presumably would never be able to undertake this work again? Could the parliamentary secretary explain a little about those types of issues? Also, if a person in a regional area needs to have a clearance, what provisions are there for backup care? In areas with a very small number of people who can undertake work, how can we be assured that people will not be disadvantaged by not having appropriate care for an extended period while some of these matters are done? Will priority be given to people when there is no alternative person who could undertake it, or could some other type of interim arrangement be entered into?

I see there will be some streamlining between the working with children checks and the National Disability Insurance Scheme checks, especially when we are talking about dealing with a child. Another example might be that it is not the person who is receiving care, but other children in the house who might be in contact with the carer. How exactly has the government determined to make those processes run together, yet step back from combining the two? I read in the explanatory memorandum that there was a discussion about the offences being different, but why the heinous nature of class 1, for instance, would not necessarily correlate straight to a similar outcome for working with children cards is beyond me. I wonder why there has not been greater consideration about matching the two checks so that we have only the one card and a one-check system instead of two. It would save expense and would also ensure that we can have better screening of all persons, not just in the NDIS system.

With those couple of questions, I will leave it to the parliamentary secretary in his response to give some answers on those issues. I commend the bill to the house.

**MS A. SANDERSON (Morley — Parliamentary Secretary)** [4.23 pm]: I am very pleased to rise to speak in support of the National Disability Insurance Scheme (Worker Screening) Bill 2020, which aims to provide some protection for some of the most vulnerable people in our community who rely on other people for their care, safety and comfort. We have to do everything we can as a government and a community to ensure that we provide a safe environment for people who rely on care workers and support workers, and also people who work in the sector. This bill is obviously part of an intergovernmental agreement reached under the previous government as part of the National Disability Insurance Scheme. I will talk a bit more about that in detail later, but the starting point in Western Australia is that, historically, we have probably some of the weakest safeguards for the sector. Although we have had one of the best disability sectors in the country, possibly the world, and we have led the way with the local area coordinator model with choice and control for supporting families—before the NDIS it had been on a bit of a ration system, which had come out very clearly as a result of a number of inquiries—the move to the NDIS nationally and in WA was absolutely the right move. Western Australia did not have the strongest protections for people with disability and there was a call for the previous government to improve those protections prior to the NDIS rollout. It also looked as though the NDIS was not going to be rolled out in Western Australia. The previous government had determined that it would not sign up, so it left the sector wondering what we were going to do to beef up the protections in Western Australia.

In 2015, we saw the previous federal Disability Discrimination Commissioner, Graeme Innes, come and talk to the sector, which was under the previous minister Hon Helen Morton, MLC. He held a forum and said that Western Australia had the country's weakest safeguards to protect people with disability from abuse and there needed to be mandatory screening of support workers. That seems a pretty straightforward request or requirement for people who rely on other people for their care. We have seen some appalling statistics around people with disability experiencing sexual abuse, harm and neglect. They are very likely to experience particularly sexual abuse more disproportionately than any other vulnerable group and certainly other abuse and neglect. It is not as though the case was not made, but, as usual, that particular disability minister was known for her firm and unmovable positions on things despite rationality and commonsense, at times. We saw that with the rollout and with the financial counselling funding as well.

WA Labor went to the last election in 2017 with a clear commitment to introduce mandatory checks. This was also heavily supported by the disability sector: users of the sector, advocates for people with intellectual disability and the union, at that time United Voice, that represents workers in the disability sector. We will not find many more committed workers than aged care and disability support workers. They want their sector to be known as a safe and quality sector; they do not want it to be beset with the issues that we have seen, particularly in some of the larger organisations in New South Wales. They want that credibility, if you like, across the sector. WA was starting from a pretty low base under this government and we have certainly seen that vulnerable people, over many years, in home settings, family settings, government and non-government accommodation, and residential care have been subject to abuse and neglect.

A number of years ago we saw a Senate inquiry that was probably the precursor to the royal commission. There had been a Senate inquiry, inquiries in New South Wales and Victoria, and parliamentary inquiries, because some of those non-government organisations, which frankly lacked transparency, accountability and proper government

processes, had some of the most horrific instances of abuse and neglect of people with disability. The terms of reference for the Senate inquiry go almost over two pages and its report is very broad ranging, focusing on abuse towards people with disability very broadly in the community. I think the royal commission is honing in more helpfully for government to come up with a policy response and an appropriate response to funded settings, whether it is in the home or in institutions.

I want to run through a few examples of abuse that were provided as submissions to the Senate inquiry. It makes for pretty harrowing reading. They are not necessarily in Western Australia, but certainly organisations representing people with disability in Western Australia made similar submissions. These are examples of neglect of people with disability in government and non-government cared accommodation —

Three young men in their early 20s, all with severe intellectual disability (ID), and non-verbal, left alone overnight in their group home while the only staff member on shift went out on a date.

Elderly man with moderate–severe ID and early dementia became incontinent. Staff attributed this to the dementia and failed to follow advice to have a GP check to rule out infection. Man developed a serious kidney infection.

Staff failure to heed a ‘difficult’ parent’s request to have a mole on her intellectually disabled daughter’s back checked by a doctor. Mole turned out to be a melanoma which resulted in the young woman’s eventual death.

Staff in a high support needs group home spending most of their shifts chatting and drinking coffee while the residents were left to their own devices.

Young woman with severe ID —

People with intellectual disability, especially those who are non-verbal, are particularly vulnerable —

and non-verbal tied to a chair when she became agitated and started to throw objects around in her 24/7 staff-supported individual option.

Woman with mild–moderate ID being given prescribed medications not in accordance with medical directions—medications stopped and started depending on staff opinion. In same group home, staff ‘borrowed’ money from client’s bank accounts to tide themselves over to pay day. Also large amount of prescription sleeping pills (Temazepam) unaccounted for.

I do not outline these to frighten people about the sector, because the vast majority of the sector is very well run. There is no doubt about that, and we are seeing that more with the rollout of the NDIS and better governance of those organisations. Certainly, in Western Australia we need these worker screening checks.

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability continues its work and is due to hand down an interim report at the end of October. The second progress report outlines —

People with disability have told us about their experiences of violence, abuse, neglect and exploitation across a range of settings, including education, homes and living arrangements, the health and justice systems and the NDIS.

...

People with disability say that it can be difficult to report violence, abuse, neglect and exploitation, and that they feel that their complaints are often unheard or do not receive appropriate action.

In a system in which a client depends upon a support worker and has limited access to other people, their ability to make complaints and report abuse is quite limited. Often there is fear in families who are desperate for respite and have finally received funding for support, so they do not want to rock the boat necessarily; they do not want to criticise the organisation that is providing support and respite. It is really important that there is independence of reporting, and that is what the independent body will provide. Victoria has this system. The Victorian Ombudsman has provided a similar role. When we were in opposition, we looked very seriously at this system and how we would implement it in WA and beef up the role of the Ombudsman. As it happened, we signed up to the National Disability Insurance Scheme and we will be shifting to this system.

It is important to understand that abuse and neglect are not always intentional or vindictive in nature. Although this is not appropriate and is no better—it is all completely unacceptable—sometimes it is because of people’s ignorance or a lack of training or employment mechanisms such as staffing ratios and appropriate hours. All those things can lead to a client getting suboptimal care and, at times, being neglected. Training is really important for those who work with people with disability. Before I entered Parliament, I sat on the workforce development working group as part of the development of the NDIS, so I feel I have a strong attachment to the NDIS, as many people do. The workforce issues were flagged early with the previous Labor government and they are consistently flagged with the current federal government. The pricing and reflection of the workforce is an ongoing issue. The federal government has not continued to do the work that it needs to do to ensure that the pricing under the NDIS is appropriate and reflects good pay and conditions and solid continuity for clients. That will continue to be an ongoing challenge.



Choice and control is front and centre of delivery of the NDIS, as it absolutely should be for people with disability— choice and control over their own lives and their own support workers. There is an inherent tension between choice and control and stable, permanent and ongoing employment for people who work in that sector. I think that is well acknowledged. No-one has come up with an answer to that as such. Obviously, larger providers can implement more plans and therefore have the financial means to provide more permanent positions for people. A support worker who is required for one hour in the morning or one hour in the afternoon is left with the rest of the day; there is little flexibility and there are no minimum hours. However, someone who is on a plan, with a finite amount of money to spend, wants to make sure that they get everything they can out of that plan. It is a very difficult tension to resolve. It is one of the reasons the previous WA government did not sign up to the NDIS, apart from the fact that it was a good model, and there were no commitments from Canberra that we would have a localised bureaucracy, if you like, for the NDIS, which was very reasonable. When we came to government in 2017, we looked at how we could bridge that issue with the workforce and provided \$20 million of funding to the sector to help support that workforce issue that we felt was lacking in the NDIS.

It is about having a consistent workforce so that people with disability have good support workers with whom they can build a rapport and a relationship and who understand their individual clients. They quite appropriately should be paid reasonably and have a sense of permanency and security in that employment, because people with permanent disability require ongoing support. There is no reason why they should not have a sense of permanency and the ability for career progression in that employment. It requires training to be a support worker and a social trainer. It is not an easy job, particularly when dealing with people with complex support needs. That is one of the great challenges of what I think is an incredible social reform and one of the greatest things the Labor government has done for this country. Managing that workforce issue to flow through as good quality, consistent care and support for people with disability to improve their social, working and home lives is really going to be challenging.

This is obviously part of an intergovernmental agreement. I note that those people who are on a plan and choose to use unregistered organisations will be going it alone a bit, and I think that that probably could have been resolved a little better nationally to provide more safety, but, again, it is about choice and control, and that was driven by the sector. I think the intergovernmental agreement is very good. It is a national scheme, but there has been a disparate disability sector across the country for a long time. If a person with a National Disability Insurance Scheme plan moves from Western Australia to New South Wales, the level of support should not change despite the jurisdiction they are living in. That is the beauty of the national scheme. Likewise, it should not change for a worker under the scheme, so, nationally, people will be able to move between jurisdictions and their clearance will go with them.

Some really important principles are set out in the IGA that I think are worth reminding ourselves of, for people both working in the scheme and who have plans in the scheme. Essentially, the plan sets out a new nationally consistent approach for regulation, particularly around the workforce and safeguards.

[Member's time extended.]

**Ms A. SANDERSON:** The framework is designed to support the rights of people with disability by ensuring they have access to quality and safe services under the NDIS. A nationally recognised approach to worker screening is an important element of this framework that minimises the risk of harm to people with disability from the people who work closely with them. Although the primary responsibility for recruiting and providing a safe environment for people with disability rests with employers, a worker screening outcome is one source of information that can support employers in fulfilling this responsibility. It also has a preventive effect in deterring individuals who pose a high risk of harm from seeking work in the sector and in reducing the potential for employers to employ workers who pose an unacceptable risk.

It is important to note that this is just one tool in a range of mechanisms needed to lower the risk of harm to people with disability. As we know, this is not a panacea; it will not fix everything. There is a whole range of issues and, as I said, it is around training, appropriate ratios, appropriate staffing and appropriate attitudes towards people with disability. When they are unwell they need access to doctors and health care that other people who are verbal and able to advocate for themselves have.

The objectives and principles are to have nationally consistent worker screening to protect and prevent people with disability from experiencing harm arising from poor quality or unsafe supports or services under the NDIS by the following —

- a) demonstrating that the rights of people with disability to be safe and protected are a high community priority
- b) reducing the potential for providers to employ or engage individuals who pose an unacceptable risk of harm to people with disability
- c) prohibiting individuals who have a history of harm against people with disability from having more than incidental contact with people with disability when working for a registered NDIS provider
- d) deterring individuals who pose a high risk of harm from seeking work in the NDIS sector.

The principles are, essentially, that the NDIS worker screening is human rights based and people with disability are free to live their life free from abuse, violence, neglect and exploitation. The onus for duty of care is on the provider, the people who are rolling out the plan and those who employ those people. The screening is risk based to ensure that decisions are made based on the potential risk of an individual. Another principle is proportionality to ensure that only workers whose role poses a significant opportunity for harm are required to be screened. I think that has been worked through quite well, which I am sure the parliamentary secretary will outline. Those people who come in to do incidental work in a house, for example, would not necessarily be required to be screened unless they were possibly employed by a large provider and that was their sole role.

Another principle is consistency; screenings must be consistent across jurisdictions. There must be privacy and the appropriate use of information. There are data-sharing mechanisms in the agreement, particularly around criminal convictions, which is appropriate for a national scheme. The data is shared among jurisdictions. There must be a sense of national justice, procedural fairness and transparency to ensure that worker screening processes and decisions will be independent and fair. There are appeal processes. For efficiency and effectiveness, there are streamlined simplified screening processes for workers and providers who operate across jurisdictions, with a single screening process for all NDIS worker roles. That obviously provides consistency of quality in those screening processes.

Under the roles and responsibilities of the state and territories in this agreement, Western Australia is fulfilling its obligation under the IGA—that is, to introduce or amend legislation in establishing a scheme for screening NDIS workers. We are debating today the establishment and operation of the NDIS worker screening units, which may include the expansion of existing worker screening units. The states and territories will fund and manage the administrative and system support costs of NDIS worker screening units; take enforcement action in relation to an applicant who provides false or misleading information; and facilitate effective information sharing.

Some of the automatic exclusions around the screening process and clearances have been very well laid out. If an applicant does not have a relevant criminal history, disciplinary or misconduct record, any issues identified through self-disclosure or any other relevant records and has not previously been issued an NDIS worker screening check exclusion will automatically be issued an NDIS worker screening check clearance. An applicant who has a conviction for a specified offence within the following categories will be issued automatic exclusions provided the applicant was at least 18 years of age at the time of the offence. The disqualifying offences include murder and attempted murder; serious assault against a child or vulnerable person; sexual assault of a child or vulnerable person, including incest; child pornography-related offences; abduction or kidnapping offences against a child or vulnerable person involving a sexual or abusive element; bestiality and serious animal cruelty offences. These are all, appropriately, automatically cause for exclusion. An applicant with a conviction or pending charge for specific offences within a number of categories is also excluded, and those include manslaughter, assault and sexual offences not captured in clause 61b; dangerous or negligent acts; abduction or kidnapping; animal cruelty offences; drug trafficking; fraud and deception; offences against a child or vulnerable person; national security offences; and pending charges for offences captured in clause 61b.

It is pretty clear that it is at the very, very serious end. We do not always make the best choices when we are under 18 years of age. We hope that the choices we made then do not limit our choices in the future—certainly those of us with children hope that. Those of us who have made it past 18 years of age and have reasonable prospects are over that fear, but we certainly do not want to limit people from being able to enter this incredibly important sector.

I want to say, finally, that WA's engagement in the NDIS has been, I think, a great development for the sector. There was a lot of anxiety in the sector around movement into the NDIS. However, I think we have shown a willingness to talk to and engage with the sector about how we can manage some of the policy issues. Last week, the minister announced another \$14 million worth of spending to help manage some of the policy issues that are coming out of the rollout. Western Australia has unique geography. It costs a lot more in Western Australia to deliver government services such as health, education, justice, mental health and disability support—all of those things. We are listening. I think the Department of Communities is just about to host, or has just hosted, a forum with key stakeholders to hear their experiences and how the NDIS is rolling out.

From a local member's point of view, I was very excited that we were going to sign up to the NDIS. Many of us will have constituents or relatives—I have a relative with a very significant intellectual disability—who are concerned about the future of their family member with a disability when that person's immediate family passes on. I meet many elderly parents whose adult children—sometimes in their 60s or 70s—are still at home, so they are deeply anxious and concerned about what will happen to them. The National Disability Insurance Scheme will help to provide a kind of certainty, instead of being in the lottery on the ration system under some of the previous funding schemes we have seen. Feedback is that it can be tricky to navigate the NDIS. It is a federal bureaucracy, which is not known to be easy to navigate. However, once they get there and their plan is in place, the feedback to me as a local member of Parliament is that it has been truly life changing for families. It is really incredible for them to have access to that kind of support, which they never could have dreamt of before. I commend the bill to the house. It is an important move for Western Australia's transition into the NDIS. It is great to see it is supported and that generally very legitimate and reasonable questions have been asked by the opposition. I am sure that the parliamentary secretary will answer them ably.

**DR A.D. BUTI (Armadale)** [4.50 pm]: I would also like to make some comments on the National Disability Insurance Scheme (Worker Screening) Bill 2020. My presentation will be divided into three sections: one will be about the bill, but a lot of that has been adequately described by the member for Morley, so I will not spend too long on it; in the second part, I will talk a bit about the National Disability Insurance Scheme; and in the third part, I will talk about the Royal Commission into Aged Care Quality and Safety and people with disability.

As has been mentioned, this bill is all about trying to improve the way governments regulate the protection of people with disabilities against neglect, abuse and exploitation. As we know, people with disabilities can be very vulnerable to such neglect, abuse and exploitation. It is therefore important that the bill before the house becomes law to provide for the implementation of a robust worker screening scheme for the disability sector. This is a state government responsibility. Although the NDIS is set up as a national framework, obviously, it interplays with the various jurisdictions, including Western Australia, and we have the responsibility for the screening process. So it is very important that this bill is debated and passed.

As was mentioned, and I will go into it a bit more shortly, the commonwealth NDIS came into law in March 2013. In December 2016, the Council of Australian Governments Disability Reform Council endorsed the NDIS quality and safeguarding framework. The NDIS Quality and Safeguards Commission was established to implement the commonwealth's obligations under that framework and it set out a nationally consistent approach to regulation of services and supports delivered under the NDIS. A key element of that includes worker screening to minimise the risk of harm to people with disabilities. This is an important piece of legislation before us, which is necessary for the continued development of the NDIS. I see the NDIS as a development because, as was mentioned by the member for Morley, there have been issues and some issues remain. I speak as not purely a member of Parliament, but also a person who currently has experience with the NDIS.

The idea of a nationally consistent screening process includes that it will be portable, so it will have validity between jurisdictions. Obviously, at the moment, transportation around Australia has been affected by the situation that we find ourselves in with the COVID-19 pandemic. It is also important to realise that one of the issues and difficulties in the disability sector is trying to retain staff and carers. It is a reasonably low paid occupation. It is hard to obtain quality staff who will remain and that is a real problem. It can often take a considerable period to build trust between a person with disability and a carer, and also family members and the carer or worker. Parents are often primary carers, but workers also come into play.

The legislation is trying to establish a high standard of screening for people who are engaged in NDIS work. This is incredibly important, as we found out from the situation in Victoria. There is a need for reform of workers in the aged-care sector. We have heard stories of aged-care workers spending two days at one aged-care facility and then moving to another aged-care facility and so forth, which obviously has been ripe for the spread of COVID-19. There are similar issues with NDIS workers—the inability to remain with one service agency or one client for any considerable period. The legislation before us aims to contribute to the protection of people with disabilities from harm by deterring individuals who pose a risk of harm to people with disabilities from applying to work in the sector, reducing the potential for providers to employ workers who pose an unacceptable risk of harm to people with disabilities, and establishing consistent standards for worker screening.

The National Disability Insurance Scheme was a Labor government initiative that came out of a 2011 Productivity Commission inquiry into disability care and support. The inquiry and push in this area was driven by the Parliamentary Secretary for Disabilities and Children's Services at the commonwealth level, who was Bill Shorten. People have different views about Bill Shorten, but I consider this as one of his greatest achievements in politics.

**Ms J.M. Freeman:** A legacy!

**Dr A.D. BUTI:** It is a legacy. There is no doubt that this is a legacy he should be very proud of. He has taken up this issue in opposition, having lost the last federal election. The Productivity Commission, which is not known for its left-wing credentials, seeks to provide rational analysis of various public policy concerns. It recommended that an Australian system of inequitable, fragmented and inefficient disability services be overhauled and replaced by a national scheme of insurance cover for all Australians with a significant disability. It was the first of its kind in the world and it truly is a legacy. At the heart of the NDIS is the principle of choice and control, with the scheme aiming to empower consumers with disability to use funds to purchase services that reflect their lifestyles and aspirations. In itself, that presented some problems for the disability sector industry because some of the providers saw this as usurping their authority or control. Rather than the money going to a provider or a service that then sought out clients, the money goes to the client—although there are some modifications—who then decides how that money should be spent under the plan.

To participate in the scheme, a person's disability has to be significant and enduring. That definition has created debate about who should be included. There is an issue of whether people who have mental illnesses should come within the provisions of the scheme and whether that would then overrun the scheme. There have been blowouts because demands have been underestimated regarding who can access the NDIS. There was an underestimation of the number of children with autism and people with mental illnesses who would apply for NDIS funding. To

fully roll out the NDIS, the government set up the independent National Disability Insurance Agency. It has to be said that the initial feedback from a study of trials around the country was mixed. A study conducted by the Melbourne Social Equity Institute at the University of Melbourne found that —

Participants' expectations and experiences of the NDIS appeared to be strongly influenced by their circumstances. Parents of young children tended to have high expectations and be strongly motivated to obtain comprehensive packages of services and support. Parents of adult children were more likely to note little difference in levels of support for their children since transitioning to the NDIS but significant increases in administrative requirements and hurdles. People living with cognitive disabilities tended to report few changes in their everyday situations, while people living with physical disabilities had a range of views, from positive changes associated with increased independence to deep frustration with ongoing struggles to gain access to crucial resources.

In its ideals, the NDIS is an absolutely brilliant system, but issues and teething problems remain. There needs to be a greater injection of funding. The state government, of course, provides some funding, but the bulk of funding has to be provided at the commonwealth level. I remember a debate some years ago about this. I think a federal conservative government wanted to increase the Medicare levy to help fund an increase, but the position taken by the Labor opposition of the time was initially not to agree with that, which I thought was disappointing. I not sure whether that changed later on, but I know that was the initial view. Although it is a fantastic scheme, unless it is properly funded, it will not achieve its laudable ideals and goals, which are to provide independence to people with disabilities.

[Member's time extended.]

**Dr A.D. BUTI:** The teething problems in the rollout of the NDIS resulted in a \$1.6 billion reduction in NDIS payments for 2019–20 due to people having problems accessing the scheme. I will stand corrected if I am wrong, but I think the federal government used that as part of its way to achieve a so-called budget surplus. It was a very dishonourable calculation to use that reduction in NDIS payments to boost its surplus.

When the NDIS was set up, people who applied initially had to go to Centrelink to obtain NDIS funding. I can tell members that that was soul destroying for many applicants or family members who made applications. Funding the disability sector should not be seen as a welfare payout. That is why the Productivity Commission thought that we should have the NDIS, which it saw as very important to the overall economic benefit of Australian society. It should not be seen as a welfare payment. It is not that welfare payments should necessarily be seen in a negative manner, but people who are seeking NDIS funding should not have to go through a Centrelink process. The conversation that was had between the Centrelink official and the parent and/or the person with disability was often undertaken in full view of other people and issues that should be confidential could be overheard. That is something we should not be proud of.

A review of the NDIS undertaken by the former secretary of the commonwealth Department of Finance, David Tune, which was released in January 2020, found that many of the intended benefits of the NDIS are yet to be consistently realised. Many participants found the scheme overly complex and difficult to understand, and they experienced lengthy delays in being able to access the scheme. The time factor is of particular concern, with it being reported that more than 1 200 Australians had died while waiting to receive the NDIS package between July 2016 and September 2019, with wait times ranging from four to seven months. Of those who died waiting for support, 65 were children. The federal Minister for the National Disability Insurance Scheme, which was and I think still is Stuart Robert, has to ensure that he puts his full energies into addressing those shortcomings. As I said, the NDIS is a brilliant scheme, but it has not been properly funded at the federal level, which has resulted in problems that should not be taking place.

Those who were in the house at the time will remember that when it came to Western Australia, there was debate because the previous Premier, Colin Barnett, was not prepared to join the NDIS at the time. There were arguments on both sides that that was meritorious. It was generally the view that Western Australia had one of the best state structures for the provision of funding for disability services, and there was concern that that might be lost if we went to a commonwealth scheme. However, there is no doubt that the Western Australian scheme could not match the potential of the NDIS. Members will remember that we had trials. I cannot remember the name, but we had a state-run system, a state-run NDIS trial and a federal-run NDIS trial in various geographical areas of the metropolitan region and one or two country regions.

In the lead-up to the last election, I am sure that many of us were lobbied by people who wanted to remain in the state system or wanted to remain in the federal system. That lobbying was interesting. I found it quite difficult and stressful. As I said, I had some personal experience with it. I am only generalising here, but the majority of people who came to see me who wanted to remain in the state scheme were parents of adult children who had severe intellectual disability. They thought that the Western Australian scheme was better placed to help them. I think that was because some of those children were residing in care facilities that were directly funded. Those parents were concerned that if the funding was removed from the places where their children were being attended to, the ability of those facilities to properly service their adult children would be compromised. However, there is no doubt that the federal NDIS had many potential attractions. We have had experience with both the state and federal schemes—that is, the current NDIS scheme.

The member for Morley, I think, mentioned the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability. When Prime Minister Scott Morrison launched the royal commission in April 2019, he stated —

... people living with disability have faced the most difficult of circumstances. Because of their own condition, but worse than that, it's the lack of a culture of respect towards people with disability. That leads to abuse and mistreatment.

I could not agree with him more on that. It is interesting that we are debating this bill before the house today, which I think is fantastic because we do not debate issues around disabilities enough in this chamber. We had a major bill that took up most of the second half of last year on which very few people talked about the disability sector, which I found incredibly surprising. When the Prime Minister said those words back in April 2019 as he announced the royal commission, he was choking back tears when he spoke about his brother-in-law, Gary, who had multiple sclerosis. The Prime Minister added —

“We have to establish a culture of respect for people living with disabilities and the families who support, love and care for them” ...

But just a week later, the Minister for Home Affairs, Peter Dutton, showed little respect for his leader's call and even less respect for his Labor Party opponent for the seat of Dixon in Queensland, Ali France, who is an amputee. He criticised France for not living in the electorate, telling the media that there were plenty of people with a disability living in Dixon. Seeking to excuse this, he added —

“A lot of people have raised this with me. I think they are quite angered that Ms France is using her disability as an excuse for not moving into our electorate.”

Ms France lives just outside the electorate and her house had to be modified to take into consideration her disability. To expect her to move and live in the electorate when she was just a candidate was pretty rough, and it was a terrible comment by Mr Dutton, particularly when his Prime Minister said only a week earlier that we should have a greater culture of respect for people with disabilities. Unfortunately, the Prime Minister did not rebuke Dutton for his comments, but I will leave that be.

The royal commission that was announced by Prime Minister Morrison was expected to provide an interim report no later than 30 October 2020, and a final report was due no later than 29 April 2022. However, obviously COVID-19 has resulted in delaying the public hearings, which had commenced but were postponed. I think they started recently by video. I am pretty sure they have. Former Federal Court judge Ronald Sackville is leading the royal commission, which includes five other commissioners. They are to examine the conditions and experiences in all settings, including schools, institutions, workplaces and the National Disability Insurance Scheme. The public hearings of the royal commission that commenced in Townsville in the first week of November 2020 had an initial focus on education. Across the four days of hearings in Townsville, the commissioners heard harrowing stories from two parents of students with disabilities. As reported in *The Guardian* —

The Queensland mother of a 13-year-old girl with Down's syndrome was the first witness. Known as witness AAA, she described her daughter as a “great learner” who was “happy” and “independent”. She does have vision and intellectual impairments but she can also cook half a dozen meals from a recipe and do her own washing.

When her daughter reached year two at school, things changed. Witness AAA became emotional as she told how her daughter became “petrified” of her teacher. The teacher regularly yelled at the child, forced her to sit on a bathmat, and once dragged her down a flight of stairs.

After three years the family was left with no choice but to withdraw her from the school.

The royal commission heard more harrowing and sad stories with regard to education and health and also the workplace and other activities.

Western Australian Greens senator Jordon Steele-John basically had been the political and public face of calling for the royal commission. Members may know that the senator has cerebral palsy.

**The ACTING SPEAKER (Mr I.C. Blayney):** Members are getting a bit loud and are starting to distract the member and the Acting Speaker.

**Dr A.D. BUTI:** In an emotional speech to the Senate on the night of 18 September 2018, he said —

Tonight, I'd like to read a passage from a speech given by my fellow disability activist and advocate Craig Wallace, who, in 2015, as part of the White Flower Memorial to commemorate all those who died in institutional and residential care, spoke to the sorrow and pain of our community. In concluding, he said, ‘I call for those who have left us to be remembered, for their names and stories to be said out loud in the sunlight and amongst the people who love them.’ Tonight, I seek to speak their names, and though the sun does not shine in this place I hope that their stories will move the hearts of those who have it within their power to see justice done. The following names are those who have died in the lead-up or subsequent to the Senate inquiry which called for a royal commission.

The senator then read out the names of 34 Australians with disabilities who had recently died. He said —

These are the names that don't get spoken. These are the reasons. These are the human beings. These are the loved ones, the mothers, the fathers, the sons and the partners who need justice, who demand justice, whose lives were worth living, in whose memory I tonight wear a white flower and whose passing fills me with an ironclad determination. I will not stop and I will not rest until they find the justice that is so desperately owed them.

Previously, the senator had criticised the Morrison government for not calling for a royal commission into the abuse of people with disabilities when the Prime Minister announced in September 2018 a royal commission into aged care. The Prime Minister, in announcing a royal commission into aged care, said that although the focus would be on residential and in-home aged care for seniors, the inquiry would also cover care for young people with disabilities who live in aged-care homes. Just think about that, members. Young people with disabilities have been forced to live in aged-care facilities. That should not be happening. That actually brought me back to an inquiry that I was part of in 2013–14 when I was a member of the Community Development and Justice Standing Committee, which was chaired by the member for Girrawheen. Our inquiry examined family support funding for people with disabilities, which at the time was the responsibility of the state government prior to the NDIS.

I will relay just one of the stories that is chronicled in our report—the story of Kell. The report is called “Client Driven? Or Driven to Despair?” Kell had an accident as an 18-year-old that rendered him disabled. At age 21, he moved into a nursing home. He could not do anything for himself. He was able to open his mouth slightly to indicate “yes” and to say “no”, he would cry. That was the only control that he had over his body. One of the female residents of the nursing home, who had dementia, developed a soft spot for Kell. Kell could not chew because he had no chewing muscles. He could only swallow food that had been pureed to almost a thick liquid, and so he existed on a diet of slop. Because the woman was fond of Kell, she thought that he would enjoy some chips from the canteen so she would buy potato crisps and give them to him. She would crush the crisps into pieces and place them in his mouth. However, because he could not chew, pieces would end up in his lungs, which contributed to him developing pneumonia. Nursing home staff decided that the only way to keep him safe from the caring woman was to lock Kell in his bedroom. He could not unlock the door, call for attention to go to the bathroom or ask for the television to be turned on or for the channel to be changed. Kell stayed locked in his bedroom between meals, and only then would someone go in and feed him his slops. Sometimes someone would remember to turn the television on but not usually take the time to find out what he wanted to watch. That was Kell's existence. Because there was no funding to relocate him to an age-appropriate nursing home, he remained trapped in his bedroom with the door locked.

We heard other gloomy stories of distress and desperation from people seeking to find adequate accommodation for their children. The member for Morley talked about the fact that one of the greatest fears and concerns of parents of children with disabilities is what will happen as they get older and will one day no longer be around. That is an incredibly important issue.

The National Disability Insurance Scheme (Worker Screening) Bill 2020 is important, but we must remember that although it is very important to have a more rigorous national scheme to reduce the possibility of exploitation, neglect and abuse of people with disabilities, we have to do a lot more in this space—a lot, lot more. The Prime Minister talked about the need to change the culture; that culture should also change in this house, and it might be a good idea to pay a bit more attention and give greater priority to the issue of disability and providing proper services and care. As other speakers have said, this issue affects the most vulnerable sector in our population. Thank you.

**MS J.M. FREEMAN (Mirrabooka)** [5.20 pm]: I rise to speak to the National Disability Insurance Scheme (Worker Screening) Bill 2020 and about the nationally consistent worker screening process that it will introduce. At its core, this legislation is not about treating people as victims or treating people with disabilities as people who are necessarily always under threat. Instead of looking at people with other abilities, disabilities and impairments in our society as people needing our help, this is primarily about addressing the interaction between people living with a physical or mental impairment and their carers. This legislation will ensure that those interactions will be appropriately accommodated and that a safety net for people will be provided.

This legislation simply constitutes an acceptable workplace reform. It will ensure that workers are fit to do the work they are required to do for the people who are, effectively, their employers. It will ensure that people seeking to be employed by people with impairments or disabilities will have appropriate background checks to show that they are able to meet care needs and that the people they care for will not be exploited, abused or undermined in their care. This is not an institutional or paternalistic response; it is an industrial response. The NDIS provides a payment to a person with a disability so that they can get the care they need in an appropriate manner. This is an industrial solution that is based on the philosophy that these people are effectively procuring a service under contract. In that situation they are basically saying, “I am contracting you to meet my impairments and provide care for me so that I can meet my day-to-day living requirements and live in the community in a manner that gives me accessibility and acknowledges my other abilities.”

At its core, this legislation was brought about through a campaign by workers in the industry. I remember being in this place some years ago when workers from what was then United Voice but is now United Workers came here

to demand that quality of care for people with disabilities be ensured by these sorts of security checks and screens. As workers, they effectively were saying, “We value the work we do. We value the people we work for. We understand that we, effectively, have a contract of employment to care for them in a manner that ensures they have the capacity to live their lives in the best possible way, and we want to make sure that that quality of care is protected. We want to make sure that that capacity is not undermined by unscrupulous people in the industry.”

That has become more of an issue under the NDIS, because people can procure services from different and much smaller organisations. The capacity to ensure that workers have adequate training and knowledge and appropriate backgrounds to be able to deliver appropriate care to people with disabilities is at risk. Therefore, this legislation is a risk-based response to an issue confronting people with disabilities in our community. The screening provisions will strengthen identity requirements and the framework for disqualifying workers. Therefore, it will actually make sure that workers are capable and qualified to come in and take up these positions, and to deliver for people with disabilities.

It is completely anathema to me that we currently disqualify security workers for offences that make them unsuitable for security work, yet we do not have similar provisions in place for people working in the disability sector. Primarily, people with disabilities are vulnerable. Again, this is not about treating vulnerable people as victims; it is simply acknowledging that vulnerability and putting in place proper safety nets and screening procedures to ensure that they can make good choices about who they employ to deliver their services. The legislation will establish a framework for considering a broad range of information to ensure quality of care, and it is only one part of what is necessary to ensure that people are safe.

We all know about the recent case of the death of Ann Marie Smith in South Australia; it was a terrible situation, and really a travesty. She was 54 and had cerebral palsy. She had for many years been very sociable and active in the community, but suddenly in 2018 she became isolated. I am not fully aware of the circumstances, but I know investigations are currently being carried out. In becoming isolated, her carer basically left her to rot in her chair. She died on 6 April 2020 of severe septic shock, multiple organ failure, severe pressure sores, malnutrition, and issues connected with her cerebral palsy. She lived in an upmarket area in Kensington Park. There is a complex web of reasons for abuse. We usually think of the abuse of people with disability as being a socioeconomic issue. That is because we tend to have biases and make assumptions. This was not the case in her situation. Would the security screening proposed in this legislation have assisted her? That will obviously come out in the current investigation into her death. However, what is clear—I have said this in this Parliament about the working with children checks—is that just because a person holds a working with children card that says they do not have a prior conviction does not mean they may not offend subsequently. It does not mean that we do not have a responsibility, as people who regulate the system, and we do not have to worry about that person anymore, because we have checked them, and off they can go. It is just one tool, of many, to ensure that people in our community with disability can live the life that they should expect, and that their life is not one of abuse, lack of care and degradation, as Ann Marie Smith had to suffer. That is very important.

One of the recommendations from the federal investigation into Ann Marie Smith’s death was that participants in the National Disability Insurance Scheme should be given more than one careworker. That makes sense. It is a bit like the childcare system. A childcare worker may have a working with children card, but if they are the only worker who is looking after a child, that places the child at risk. We reduce the risk for vulnerable people if we ensure that workers are accompanied by other workers who are able to report inappropriate behaviour or abuse. There is often a failure of oversight when governments believe that services can be provided by just one person in an organisation. The regulator needs to be aware that this legislation will not provide a panacea for these issues. This is simply one of the tools to address criminal behaviour in our community.

The NDIS also needs to identify care recipients who are vulnerable. The situation of Ann Marie Smith took place over two years. For all intents and purposes, she had been quite social until that point. How was it that the company that provided the service—I think it is called Integrity Care—did not have some sort of understanding of its client’s social setting? One would hope that part of the process of preparing an NDIS service plan would be to collect the person’s social history and how the person operates in the broader world, so that when that changes, some sort of flag is raised. How do we see those flags? Is a flag for people with disability not important to us? Is part of the issue that we see people with disability not as part of our society, but as part of an institutional model under which we are the healthcare providers to these “poor people”, and we are simply providing them with a necessary service so that they can live their lives in the best way possible? That model has gone. We should not do that any longer. This legislation should be part of the flag. But it is a flag to prevent. It is not a flag to see. We still need the methods and capacity to see when people are at risk.

I also want to talk about how this legislation may impact on people with disability and workers in culturally and linguistically diverse communities. There is not a lot of research in Australia about the life experiences of people with disability who come from non-English speaking and culturally diverse backgrounds, about their capacity to obtain services, and about the expectations of their community about their capabilities. That is very important. The NDIS needs to focus on that. I acknowledge that I see only a small part of the culturally and linguistically diverse community, but I am seeing a lot of very small and niche NDIS providers popping up all over the place. I have a couple of concerns about that. One of my concerns is based on the history of the family day care system, under which people acted, not in a manipulative manner, because I do not think they did it to manipulate —

**The ACTING SPEAKER (Mr I.C. Blayney):** Members, the conversations seem pretty loud and distracting.

**Ms J.M. FREEMAN:** That is because the opposition spokesperson for disability services should be listening to me, on the basis that I could give him some extremely good policy ideas.

**Mr A. Krsticevic:** You should be facing this way, then.

**Ms J.M. FREEMAN:** Sorry. I take that back. I thought he was the spokesperson.

**Mr Z.R.F. Kirkup:** We should all be listening to you, nonetheless.

**Ms J.M. FREEMAN:** I thank the manager of opposition business. I often think that myself.

[Member's time extended.]

**Ms J.M. FREEMAN:** This may be a bad analogy, and I am willing to be told that it is, but what happened in the family day care sector is that some people in the culturally and linguistically diverse community saw an opportunity to work and gain an income, which of course is very important to be able to operate in Australian society, by caring for the children of other people who were also working in the family day care sector. They would just swap their children, so they were effectively looking after each other's children. My concern with the NDIS system is that it is a source of income for people who are in need of establishing themselves in Australia. Sometimes their language skills mean that they are not equipped to work in retail or other areas where they feel confident or that employers feel confident about their capacities and abilities, so they start working as careworkers for other people in the community who have a disability, without proper qualifications and training in this area. I do not want them excluded, because it is a really important thing. If someone with a disability is from a culturally and linguistically diverse community and they can have a carer who can make sure they get to live life as they want and that person speaks their language, all the better. This should not be an exclusion. This needs to be an improvement, so that their capacity to gain education and training through the regulators and the system is improved so that people get the quality care that they need, but culturally appropriate. The other thing that often happens with some culturally and linguistically diverse communities is that, frankly, they have trouble with the police. Let us be honest: there are cultural biases in our community. Someone who looks different from me might be driving a battered old car or something happens when they are out, they can suddenly find themselves in trouble with police. They could talk back, because they might question how they are being treated by the police, and suddenly find that they have been charged with resisting arrest. They would then head into our court system and the duty lawyer who is given to them says, "Look, this isn't much, just plead guilty; you'll probably get away with community service or a warning." But I know that they would not get told to ask for a spent conviction and they will end up with a conviction on their record that they have agreed to. When they then seek work, they cannot get work because an employer will do a police check on them, which will then disqualify them. We have to be really mindful of how we do this screening and there has to be capacity for review and appeal so that there is some sort of procedural justice.

I want to thank the careworkers who worked during the uncertainty of COVID-19, particularly in Western Australia through the phase 2 measures. People were ringing my office about the lack of masks, but, generally, people with disabilities and careworkers were probably quite neglected in the overall plan of how we would deal with that. That has certainly been the evidence to the disability royal commission, as reported in *The Guardian* in a recent news report of 18 August 2020 titled "COVID-19 terrifies Australians with disabilities, who feel they are 'expendable'". In it, a New South Wales woman talked about her fears. One of the people in the article talked about how the pandemic was taking away access to support services and a client's access to a supermarket. Our office had a phone call from someone with a disability who previously had deliveries from Coles. Suddenly, deliveries stopped, because Coles got overwhelmed and decided to stop its delivery service. This person who always got their food in this way suddenly did not have food. That was easily fixed; she rang us and we did the shopping for her at that point in time and then Coles clicked over again. But if I were someone with a disability in that fearful time—because no-one is thinking about the impact on people with disabilities—and suddenly my food stopped coming, I would feel vulnerable. The article states —

Tammy Milne, an educational interpreter who lives with arthrogryposis multiplex congenita, spoke about the hard lockdown in north-western Tasmania earlier in the year.

Milne told the commission about a time when her support worker did not appear for an appointment, with no explanation. She said that later that night, she received a call that her support worker had suddenly "been put in a situation where she may have been exposed to Covid".

People were vulnerable and fearful. I want to thank them and the carers for the work they did. I want to point out to the house how disgraceful the federal government's response has been. An ABC news article from 21 August 2020 revealed that people with disabilities were not mentioned in the coronavirus plan, they were just put in the summary of vulnerable people. Simon Cotterell, the assistant secretary from the Department of Health, told the commission that there was no plan, the department had admitted it and that it probably should have taken that into account. He also said that there has been no exact data on the number of people with disabilities who have contracted COVID-19 or who have died from the virus; however, the commission heard evidence that 76 people with disabilities have contracted the virus and eight have died.



My thanks go to people with disabilities and their carers for their good work in this area. I am fully assured by the fact that we have such a competent and capable Minister for Health that should Western Australia have COVID cases in the community again —

**Dr A.D. Buti:** We have a very good disability minister as well.

**Ms J.M. FREEMAN:** We have a very good disability minister as well, that is true.

I am assured that we will be able to ensure that these people feel safe, secure and not neglected in the response. The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability illustrates the requirements for these screening changes. It absolutely illustrates the abuse of people living with disabilities and points out that it is a major risk. Issues coming out of its reports include that 90 per cent of women with a disability have been sexually assaulted—I find that enormous—and that the disability watchdog for New South Wales and South Australia received almost 1 500 reports of serious incidents such as sexual assault against participants in the six months that it obtained figures until 10 April 2019, and many of those were sexual abuse allegations. We have to wonder why there is this abuse. One theory leans towards victim blaming. These people are dependent on their carers, and there is often stress in aspects of that, but in an article published on The Conversation website on 22 February, Margaret Nixon states —

More compelling is the idea that increased risk of victimisation is a combination of factors in the environment ... the motives of the offender ... and characteristics of the victim ...

This legislation will increase reporting capacity, but we also need police awareness about how to address these things, because many reports show, for example, if someone with an intellectual disability reports theft, they are less likely to have their crime reported. The royal commission is doing a great job to identify many of these things. I want to talk about why this happens. On 27 September 2017, the then Australian Disability Discrimination Commissioner, Alastair McEwin, said that as a society we often view crimes against people with disabilities as less serious. They are very serious and this legislation is about ensuring that people know that we take them very seriously.

The royal commission is releasing discussion papers, and one asks why the community thinks this violence, abuse and neglect happens and what changes could make people safer. In supporting this bill, we do so with the conviction that people will be safer. But I call on the disability community and the broader community to make sure that this bill has the effective outcome that we, as legislators, are trying to achieve. It is no good legislating for something like this if the result is not something we want to achieve. I congratulate the National Disability Insurance Agency for recently making changes to the scheme to allow for one contact person and for draft plans to be assessed. These things need to be inclusive. We want people with disability to feel that they belong and that they are valued in our community. We know that they have other abilities that we will never have.

**MR Z.R.F. KIRKUP (Dawesville)** [5.51 pm]: I, too, rise to speak to the National Disability Insurance Scheme (Worker Screening) Bill 2020. A couple of much more positive things are worth noting. I commend the parliamentary secretary on his second reading speech in this place in the last sitting week, and the members for Armadale and Mirrabooka and, of course, the member for Carine for their contributions. I am always particularly interested to hear from those who have had lived experiences in a sector that, to be perfectly frank, I am not that familiar with. It is not something that I have had a whole lot to do with to this point in time. It is only since becoming an elected member of this place that the issue has become more front of mind for me.

When I was in my early 20s, my best friend —

**Dr A.D. Buti** interjected.

**Mr Z.R.F. KIRKUP:** Sadly, not last year.

My best friend, whom I grew up with and went to primary school with in Forrestfield, was hit by a car and went from being otherwise able bodied to having an acquired brain injury. He was severely disabled. The strain that that has had on his family has been significant and immense emotionally and physically. They continue to make what I think is a valiant effort to ensure that this person has a very full life. From what I experienced, the support from the government at the time was remarkable. One of the greatest benefits of our country is that a family that I care a great deal about was supported by impeccable health services through the Disability Services Commission at the time. There was a process by which a package was put together to support that family.

**Dr A.D. Buti:** How long ago was that, roughly?

**Mr Z.R.F. KIRKUP:** I was in high school, so I think it was in 2005 or 2006.

**Dr A.D. Buti:** Of course, someone was held responsible and he would have got the insurance from the state insurance commission, unlike the Proudloves. He was driving down to Albany and the horse came out. That is why the member for Riverton brought in that no-fault legislation.

**Mr Z.R.F. KIRKUP:** The member for Armadale is quite right. I think they had to go through a civil litigation process to get that support, which was obviously not ideal, but it was a situation that existed so at least some mechanism could be in place. I remember being in the then Premier's office at the time it was debated and moves were made to put in place the no fault insurance. I think it was funded through adding costs to car registration.

**The ACTING SPEAKER (Mr I.C. Blayney):** It is \$99.

**Mr Z.R.F. KIRKUP:** Indeed, Acting Speaker; you remember it well. There was debate at the time about the impact it would have on families. The cost of living was a concern. It was universally recognised that it was an important measure. If no fault insurance could be funded through a vehicle registration cost, everyone would be willing to effectively share the collective burden. It was a really good reflection of Australian and Western Australian societal values of trying to look after those who are vulnerable and at risk and, in this case, those who most need support.

Turning to the National Disability Insurance Scheme (Worker Screening) Bill, the Gillard government should be praised for its work on bringing on the NDIS. I do not want to verbal the former Premier, but the only criticism that was laid at the time was about the terminology—the National Disability Insurance Scheme. It was not a traditional insurance scheme that the state would otherwise run in the form of SGIO or something like that. Obviously, in this case, the insurance was a safety net to ensure that there was ongoing funding for support services for those who need them.

I was really pleased with the 2012 incarnation of the My Way model. The member for Armadale may have touched on it briefly. I think it was really important to have a state-based system. As you know, Acting Speaker, we are some thousands of kilometres away from our capital and Geelong on the east coast, where this scheme is now administered. I really liked the idea that a person who needed support could go into the local office on Anstruther Road in Mandurah, go through the process and get a package put together. I understand that the government has made a decision to move it across as part of the national model, but I quite liked the idea of having local contact. From what I can recall from my early days in this place, a concern was raised by the Liberal Party's spokesperson for disability, Hon Peter Collier, in the other place about this government's delay and not being sure about what model it would proceed with—whether it would continue to run the state-based service or hive it off to the federal system, noting of course the complex bureaucracy that we have to deal with. Most people have reflected on that. Ultimately, I think we all would prefer a system whereby the NDIS in the Peel region could have been administered from Anstruther Road in Mandurah rather than in Geelong. That would have been preferable. But, to their credit, the governments have worked earnestly to put together something to work with the NDIS. Legislation like the NDIS worker screening bill shows that there is a need to constantly improve and for governments on both sides to make a commitment to a very important scheme that will help a lot of people put together packages so that they can get the support and services they need.

I have not had the same experiences that other members in this place have had, which makes their contributions much more valuable than mine, but more recently, I have had occasion to go to dwellings and facilities through my work as a volunteer ambulance officer and see high-dependency care services being provided. Those environments were completely foreign to me. On some occasions, they were quite confronting in the sense that I realised it involves a very complex effort. So much effort is put in to ensure that those who are vulnerable and need support get the right level of service and care. Unfortunately, there are situations like those that the member for Mirrabooka spoke about in which that care can be severely lacking in some instances and somebody can be left for days or weeks—I do not know the exact circumstances—and then go into septic shock or toxic shock. Obviously, they had been left for some days without any care or concern. That is an unfortunate situation that can arise in these types of environments, but, on the whole, it is amazing to see how many people go all in to make sure that the most vulnerable are helped.

I return to where I began. The NDIS reflects the best of Western Australian and Australian values. We are very lucky. As I said, it is not something that I have any particular familiarity with, except for my experiences with my friend and through my work as a member of Parliament when advocating for individuals. In my volunteer capacity working with St John Ambulance, I have become more familiar with health-related concerns and I have come across people from all walks of life. As a young able-bodied person in this place, I find it of great comfort to know that these schemes exist. More importantly, I do not disagree with the member for Armadale. Although I think things could be done better by the commonwealth from time to time, such as by bringing forward the expenditure in the federal budget, there is, on the whole, a genuine bipartisan effort to make sure that we provide the best services for those who need them the most.

I commend the bill to this place. I commend the work of the state and federal governments, which continue to do their best to improve the situation.

*Sitting suspended from 6.00 to 7.00 pm*

**MRS J.M.C. STOJKOVSKI (Kingsley)** [7.00 pm]: I rise tonight to make a short contribution on the National Disability Insurance Scheme (Worker Screening) Bill 2020. Having listened to all the remarks made by various members, I think everybody in this chamber will agree that people with a disability are some of the most vulnerable people in our society. That is due mainly to their dependence on others for care and the support they need because of social isolation, their place of residence or the nature of their disability. I will take a moment to pause here and observe that not everybody with a disability falls into this “vulnerable” category. My husband, for example, has, luckily, a very mild case of cerebral palsy, and I would not say that he falls into the category of being a vulnerable person, because he is quite able to advocate for himself and fight his own fights and be a person to stand up for his own rights. However, there are lots and lots of people inside this category of people with a disability who are vulnerable and, as a society and community, we need to put things in place to protect them. I think we all

agree that safeguarding the rights of vulnerable people—whether those with a disability, young people or the elderly—are the responsibility of an entire community, and this is a great step towards safeguarding the rights of people with a disability.

I would like to refer to an article written in 2015 by Nicolas Perpitch which states that Western Australia has the country's weakest safeguards for protecting people with a disability from abuse. Nicolas Perpitch highlighted a claim made by Graeme Innes, a former Disability Discrimination Commissioner, that there should be mandatory screening for support workers. Unfortunately, at the time, the then disability services minister, Hon Helen Morton, rejected this criticism saying that we already had a robust system in place in Western Australia for protecting people with a disability. I personally found this to be a really disappointing response that undermined the importance of and necessity for us to protect some of the most vulnerable people in our community. The Victim Support Service has a little blurb on its website that states —

According to a 2018 study by the Australian Bureau of Statistics, 1 in 5 Australians or 4.4 million people, are living with some form of disability. A disproportionate amount of people with disability, as compared to those living without disability, will experience some sort of crime. While only 10% of people without disability report experiencing physical or threatened violence, 18% of those living with disability do.

I highlight “report” because a lot of the time people with a disability do not actually report. I will get to that a little bit later.

The website goes on to say —

People with disability are also more likely to experience crimes like assault, sexual assault, robbery, and bullying. Up to 90% of women with disability have been sexually assaulted.

Ninety per cent is a horrific statistic and one that we should be ashamed of. I think that, in part, this bill takes some steps towards helping with this issue.

Fear of reporting crime is not a new revelation. On its website, the WA Police Force actually acknowledges that there are issues that may prevent people with a disability from engaging with police, including fear that their disability will be used against them and fear of retribution. I know that a lot of women feel strongly that they will probably not be believed when they report a crime committed against them. They also fear going to court and being cross-examined and are afraid that their disability will be on display for everybody to see and will be used against them. They also lack confidence in the justice system. I know that in the past, people with a cognitive disability have been reluctant to report crimes of theft committed against them for fear that they would not be believed because maybe they just misplaced it or it was an accident. They have a fear of their disability being used against them. This has obviously resulted in a significant reluctance by people with a disability to report crimes perpetrated against them. I feel that if society makes it uncomfortable for our most vulnerable people to stand up and say, “Something is being done against me and I am not happy about it”, we need to look at changing that.

We are very fortunate in my electorate of Kingsley because there are a number of disability service providers—Community Vision is one and Kira Community Services is another. These two community disability service providers are amazing in the way they deal with the people in my electorate and surrounding electorates. Their whole ethos around how they deal with people is not just about supporting them to live; they are supporting them to experience life. I know that both of these community service providers take pride in what they do and are very strict about who they employ to look after their clients, as they say. They are very supportive of this step towards professionalising and regulating this sector because although they have very high standards, they acknowledge that that is not the case across the entire sector, and safeguarding individuals who are vulnerable should not be optional. We should have stringent safeguards around them. I spoke to both providers today and they both agree that the steps in this bill are good steps towards making sure that their industry is professional and the people who work in that industry, who have pride in what they do, can be out in the community and reflect the values and ethos of not only supporting somebody to live but also supporting somebody to live their best life. As I said, many organisations already have these good practices in place to ensure their workers are vetted and are suitable for the job they are being employed to do and that they have the capacity to provide assistance safely to people with a disability.

I am very fortunate also to have a number of education support centres in my electorate, including Creaney Education Support Centre for the primary school years and West Coast Secondary Education Support Centre for the high school years. I am lucky because over the last few years since West Coast moved into my electorate, I have had a lot of interactions with the students and teachers there, so I know just how engaged, clever and enthusiastic these young people are about life. They never let their disability get in the way of achieving their dreams. They have hopes and dreams just like the rest of us have hopes and dreams. The reality is that they need somebody to assist them to achieve them. This step towards screening people to become those support people is great, but it is just one step in many strategies that we need to employ to make sure that the most vulnerable people in our communities have the capacity to thrive. This is not about giving people a handout; it is about giving them a hand up to make sure that they can achieve at their highest level. Although I absolutely support this bill, I think it is one of a number of steps that needs to be taken to ensure that we provide the best level playing field we can in our society. I commend the bill to the house.

**MR R.R. WHITBY (Baldvis — Parliamentary Secretary)** [7.10 pm] — in reply: First of all, I want to acknowledge all who spoke on the very important National Disability Insurance Scheme (Worker Screening) Bill 2020. It is fair and accurate to say that all members who spoke did so strongly in support of this legislation. I really appreciate the bipartisan support on this important bill. The support has been strong and across the board. The house has a united position on this legislation. It is one of those times when we can, all together, do a good thing for the community. We all want to be part of this Parliament to contribute to the state. Rightly, we can walk away this evening knowing that we have done a good thing for the people of Western Australia.

This legislation, of course, is about protecting the most vulnerable in our community. It is so important that those people who otherwise may not be able to protect themselves have the protection of the system that is there to support them and that they are protected from carers whose job it is to care for them. I will start by saying that the vast majority of people involved in caring for people with a disability in Western Australia are overwhelmingly passionate and professional. They do it for the love of the job and they do an extraordinarily good job. However, as we all know, occasionally things go wrong in life, and sometimes very badly. As a Parliament, we have to do as much as we can to guard against that. A number of questions and issues were raised, as well as strong support given by all speakers. I want to commend the members for Carine, Moore, Morley, Armadale, Mirrabooka, Kingsley and Dawesville, who all spoke very passionately in support of this legislation. During the comments, some very good and reasonable questions were asked and I have some good and reasonable answers. I will go through and pick out those questions as we go along, but feel free to remind me if I miss any. I think we will cover the bill very adequately tonight.

The member for Carine offered the Liberal Party's strong support for the legislation, for which we are very grateful. He acknowledged there was a timeliness requirement for Western Australia to sign up for the legislation to begin in February next year. The member said this was about the vulnerable cohort and protecting people with a disability from abuse. Of course, we know that abuse takes many forms, including physical, sexual, psychological and financial, which is sometimes overlooked. This legislation is about deterring certain people from applying in the first place and protecting clients from people who may be in the system. The intergovernmental agreement was signed by all states, including Western Australia earlier this year. It is about a couple of key issues. Portability was mentioned and how important it is to have one system for the country and people moving between jurisdictions, of course after the COVID restrictions are lifted, to be able to take clearance to other states to make things simpler and cheaper for people in the sector. It was pointed out that there was some discretion between how jurisdictions implement this legislation concerning whether a physical card or electronic clearance is involved, and the amount of fees or penalties et cetera.

One issue raised by both the member for Carine and the member for Moore was about who needs to apply. What is the definition that would require someone to apply for a card? The member for Moore raised the example of a gardener at a facility.

**Mr R.S. Love:** The other aspect of that is about who needs to supply a working with children card. They may be in contact with children in their homes—not the client, but children may be present in the care environment.

**Mr R.R. WHITBY:** Sure. I think a comment was made about why we cannot combine this system to be one process and one application. Both clearance systems perform separate jobs and there are separate cohorts. People will often be required to pass both assessments, obviously if there are disabled children, but not always. It is important to maintain the differentiation of process. I will get back to that eventually.

Regarding who needs to apply for a card, it would be wrong to provide a list of occupations because it is not about the role someone has, but the amount of contact they may have with a person with a disability. The risk assessed roles include key personnel such as those holding executive and senior management positions in an organisation and those roles for whom normal duties include the direct delivery of specified supports or services, or are likely to require more than incidental contact with a person with a disability. I think the key line is “more than incidental contact”. In some organisations—for instance, in the member for Moore's example of a gardener—they really have no more than incidental contact because they are doing the lawn or looking after the garden beds in a particular establishment. If there was a program at that facility in which residents got involved in the gardening or came into “more than incidental contact” with the gardener, there would be a requirement for that person to apply for a clearance. I can also give some more information on that. The other point to remember is that if a gardener or a handyman, for instance, is funded by the NDIS and engaged by a registered NDIS provider, it is very likely that they would require a clearance if they had more than incidental contact with people with a disability. It will depend on whether the handyman met the definition of risk assessed role provided in the national legislation contained within this bill.

**Mr R.S. Love:** There are two aspects to that. One aspect is what a person does with a particular individual. But if a person is providing a range of services to a number of individuals, even though that contact may still be quite incidental, does the fact that most of their business is in providing services to people with disability mean that they then fall under that definition?

**Mr R.R. WHITBY:** Is the member talking about an individual within an organisation?

**Mr R.S. Love:** Yes.

**Mr R.R. WHITBY:** I guess one would have to take each individual and work out whether their contact is more than incidental. It would depend. I imagine that the vast majority of people, especially direct carers, would certainly have “more than incidental contact” and would obviously have to apply, but employees at the periphery who might walk past someone and have no more than that sort of brief contact would not be required to. I guess the other option would be that people would be able to apply to remove any doubt, and some organisations may encourage all employees to be part of the process.

I will continue. The member for Carine noted that, in the past, vulnerable people have been exposed to incidents of abuse. Before I go on, the member for Carine also mentioned the working with children card. He rightly observed that that card currently lasts for three years, and the proposal for this new screening clearance is five years. The question was how we will align those two systems—that is, separate, but held by people at the same time. On that issue, the member drew my attention to clause 2, which states that parts of this legislation will come into operation at different times, depending on movements in other legislation, in order to coincide. At this stage, once it is gazetted, it does not all come into force, because we are waiting for some other things to happen to align with this legislation. This bill does not amend the Working with Children (Criminal Record Checking) Act 2004 to extend the duration of the working with children check. Clause 23 is not intended to commence until such time as relevant amendments to the working with children act may be enacted. But the Royal Commission into Institutional Responses to Child Sexual Abuse recommended that a five-year duration for working with children checks come into force, subject to continuous monitoring. The government has accepted this recommendation in principle and the matter is currently being put under active consideration.

We want to make it simpler and easier for people in the sector who are required to have both clearances. There will be a period when the working with children card is increased from three to five years, and everyone will apply at a different time. We are trying to make those times line up with each other so that an individual is not faced with a situation in which one card falls due to be renewed two and a half years into the period of the other card, meaning that they have to face the application process every two and a half years. We think that it is better to let both of those clearance applications or renewals happen at the same time. To do that, there will be a transition period. When we start the process set out in this bill, there is the facility to allow an earlier conclusion so that the disability worker screening clearance is ended earlier and a new one issued that can align with the start of the working with children card. That shortening of some applicants’ screening clearance would apply only until we can align them both up; then, going forward, each card would fall due for renewal at the same time for that individual, with a five-year duration. It would simplify the system and make it easier on those involved in the sector.

**Mr A. Krsticevic:** How far have you got down the track of doing that at the moment?

**Mr R.R. WHITBY:** With the working with children card? I do not have that information, but I think we are actively pursuing that. It is under consideration with the Minister for Community Services and the intent is for that to happen. That is why clause 23 exists in this bill.

**Mr A. Krsticevic:** Thank you.

**Mr R.R. WHITBY:** I think I was also asked why both the working with children and NDIS worker screening checks are required.

**Mr R.S. Love:** It is more about why it could not be aligned to defence categories because, basically, they are all horrible offences. I would have thought that murder would have wiped somebody out from working with children as well as working in the NDIS.

**Mr R.R. WHITBY:** Can I get back to the member on that? I will find my place on that one.

I think that the member for Carine asked about the additional funding requirements and was seeking an assurance that there would be enough funding for this process to occur. That is why the scheme is largely one of cost recovery through the fees of \$145 for self-employed applicants and \$11 for volunteers. That is forecast to recover almost 80 per cent of the cost. That is a significant portion. The rest would be met out of the normal budgets of the organisations involved. The process is largely self-funding to that degree.

**Mr A. Krsticevic:** How many applications are processed each year?

**Mr R.R. WHITBY:** I am not aware of that. It would not be everyone at once; I think there is a requirement for people to apply in a staggered approach, but I do not have that information in front of me, I am sorry.

The member for Moore also spoke in support of the bill, which we appreciate. He said that this would be an important piece of legislation. He also raised the question of who needs to apply, and I think we have covered that.

I will go back to the member for Carine, because he also mentioned his concerns that if the clearance periods were extended to five years, that is a long period between checks. I just want to make it very clear to the member that both processes—the working with children card and the new approval system we are implementing under this legislation—involve ongoing checks all the time. There is a live, updated feed of offences that the Western Australia Police Force record; not only prosecutions, but also charges are considered under this legislation. That is something that happens all the time with the WA police criminal information data. At the national level, the NDIS commission

has a national database that is updated every few days, and it covers not only criminal information from the national police databases, but also other issues that may be reported to the commission. If someone is part of this system, it is not the case that they are checked at the beginning of the process and then checked five years hence when they want to renew; it is ongoing and updated virtually daily.

**Mr A. Krsticevic:** The issue there was really about working with children checks. We know from Auditor General reports and other advice that things were slipping through the cracks. How do we make sure that that does not also happen with this?

**Mr R.R. WHITBY:** The working with children checks are also linked to the Western Australia Police Force criminal database, so that is an ongoing, almost daily, live feed.

**Mr A. Krsticevic:** The issue was that the Department of Communities and other government departments were not actually doing the checks and balances that they needed to do. Now that we know that has happened in the past, how are we going to fix that?

**Mr R.R. WHITBY:** As I say, there is live information coming into the system now. That is the situation today. I cannot detail issues in the past for the member, but I am talking about the process that exists now and that will exist with this new workers' screening legislation. It will be live and the national information feeding into the system will be updated every couple of days. I think it is a very effective tool to keep up to date. It is not just about waiting for someone to have gone through a court case and be convicted of an offence; a charge that may be brought is also listed and available to the CEO to look at and consider. That is very important.

**Mr A. Krsticevic:** So you are saying that we will not have the same problems in the future that we had in the past?

**Mr R.R. WHITBY:** I think the member is asking for an ironclad guarantee that there will never be a problem in the future.

**Mr A. Krsticevic:** A systemic problem.

**Mr R.R. WHITBY:** I do not think anyone in any jurisdiction with any piece of legislation could ever do that, but this is a significant step forward and has significant safeguards. It is part of the recommendation that all Australian states have agreed to. It will represent a real advance in protection for people with a disability. I would love to be able to give the member an ironclad guarantee, but I do not think anyone in this place could ever do that.

**Mr A. Krsticevic:** I think the legislation is good, but it is a question of whether the department is funded appropriately to make sure it happens.

**Mr R.R. WHITBY:** Yes. The processes of and the information available under this legislation will make the job a lot easier for people to check the credibility and the legitimacy of applicants and people in the system. It also gives extra powers to the CEO to act against those people. It is a big improvement.

The member for Morley spoke about her experiences in the sector, how it was important to have training and qualifications and that this represented a crucial social reform. She also spoke about how important it was to have good-quality and consistent care. The intergovernmental agreement calls for people to have self-funding choice under the National Disability Insurance Scheme, which this system also provides. She also talked about national consistency and portability and the safeguards that that brings to the rights of people with a disability. Screening national workers protects people with a disability. She said the bill was not a panacea and would not solve every problem or remove every risk, but it would and does represent a lowering of the risk—a substantial reduction of the risk. She spoke in detail about aspects of the legislation, including the schedule 1 and 2 offences, and how some offences were automatic exclusions from consideration and others in schedule 2 were presumptive exclusions. The member for Morley said that the NDIS was overwhelmingly seen as positive for Western Australia, notwithstanding the fact that Western Australia's special geography in delivering services and the need to cope with the distances involved means that we need some special consideration under the NDIS to recognise that. She also spoke from a personal perspective, as many members did this evening, of being impacted by disability and the concern, which many people would recognise, about ageing parents who are seniors with children with a disability. They wonder what their future protection will look like after they are gone.

The member for Armadale talked about the legislation protecting the vulnerable. He said it was an important law and he also detailed the background of the NDIS being established. He admitted, as a number of people did, that there have been issues in transition, but that was inevitable with such a fundamental change that had such a deep impact on so many Western Australian and Australian lives. He said that high standards of screening were important. He likened the reforms to those in the aged care sector in terms of the workforce and the issues that were still being worked through. The NDIS has shortcomings at the federal level because of a lack of adequate funding, and I think every member here has had some contact with someone dealing with changes to this system. Often for many people they are big changes to a way of life, and when big changes occur, there is a certain amount of anxiety.

The member for Mirrabooka talked about not treating people as victims or as always facing a threat. Rather, it is about addressing a person who has an interaction with their carer. It was not about being paternalistic, but really dealing with an industrial provision to ensure that the carer was tested. It was not about vulnerability, but acknowledging

the situation and putting up a very good screening program to protect those people. She spoke about the tragic death of Ann Marie Smith in South Australia. It was a shocking case that serves as such a sobering reminder of why we are here tonight. Thankfully, that was a very rare incident, but it is not non-existent, and we need to be mindful that in a system that is overwhelmingly positive and has great contributions from many hardworking carers, we occasionally see very tragic and outrageous situations. That is another reason that this legislation is so necessary. The member also talked about the possible scenario of having the protection of not just one carer, but multiple workers; that is, there is a built-in protection of having more than one carer for a person. I guess those issues of staffing have been and are being looked at by recent and current royal commissions into this issue. I imagine that also applies for the aged care sector as well. Of course, extra challenges are being faced in the sector during the time of COVID-19.

The member for Dawesville spoke about a personal experience, as many others did, of a school friend who was very seriously injured and disabled after he was hit by a car. When we think of those personal experiences and about how loved ones or friends are impacted, it brings home how important this legislation is. The member for Dawesville observed that the Parliament was united on this legislation, as we were for the no-fault insurance bill that was introduced by the previous government, which required a \$99 levy on car registration. It was a similarly good thing to do for the community that we knew was needed and would deliver a very positive outcome for people who are either born in a very vulnerable position or find themselves through accidents or incidents in a very vulnerable position. The member mentions the concern about the NDIS having its administration centre in Geelong. Many of us have that concern about a federal bureaucracy always being a distance from Western Australia and there perhaps being a lack of understanding about the differences we have here in Western Australia, especially with geography.

I can point out to the member for Dawesville the good news. Similar to the previous state-based system, the NDIS has a system of local area coordinators. Once someone signs up to a package, they have that one link, that one same person and one point of contact. I think that has brought a lot of relief to people who are transitioning to the NDIS from the old system, because it is similar to the operation of the old system. People really valued and got to know their local area coordinator. They were a very important link and it meant that people did not have to deal with organisations like Centrelink, which often meant having to be on the phone for extended periods. It may put the member's mind at rest knowing that people will not have to deal with big bureaucracies; it will be done through a single person.

The member for Kingsley talked about the community supporting vulnerable people in WA and about the high proportion of people with a disability in Australia and Western Australia. She also talked about the crimes that are committed against people with a disability, including the fact that 90 per cent of women with a disability have reported a sexual crime against them. I think the member for Morley also mentioned that pretty disturbing figure.

Members, this is important legislation. It is being introduced right around Australia and we in Western Australia have a responsibility to do this. The bill caters for our local conditions. It will provide certainty for people who are working and being cared for in the sector. They will be protected and there will be a level of investigation in caring for them.

I also point out that part of the central ideal of the NDIS is to put control in the hands of the client. Quite often people with disability want to run their own lives and those who are able to make decisions for themselves have the right to do so. The screening process will protect the vast majority of people with a disability in Western Australia, but people who are self-funded will have the option to run their own NDIS package and be cared for by someone without a worker clearance. The member for Moore talked about regional issues and the difficulty in more remote localities of finding people to provide a service. This is always an issue in Western Australia in almost every area. Whenever either the state or federal government tries to provide a service, it is often difficult to find people who can provide that service. Under this bill, a self-funded client will have the option to not use a registered provider. They can opt to use someone who does not have the worker screening clearance to provide care for them. Although that would happen on a minority of occasions, I think it will give people the opportunity to get someone who can provide a service. I am not saying that they would knowingly choose a person who is not suitable, but that due to certain circumstances they may not want to be part of the system that requires them to apply for a clearance and they could still get that service provided to them.

With that, I remind members that 30 000 Western Australians now use the NDIS. The worker screening requirements under this bill will serve to protect those people and prevent people with disability from experiencing harm from unsafe supports or services under the NDIS. I commend the bill to the house.

Question put and passed.

Bill read a second time.

Leave granted to proceed forthwith to the third reading.

*Third Reading*

Bill read a third time, on motion by **Mr R.R. Whitby (Parliamentary Secretary)**, and transmitted to the Council.

**HEALTH SERVICES AMENDMENT BILL 2019***Consideration in Detail*

**Clauses 1 to 3 put and passed.**

**Clause 4: Section 6 amended —**

**Mr Z.R.F. KIRKUP:** Clause 4 deals with a range of definitions that have now been inserted as part of the amendments to the Health Services Act 2016. I am curious about one of the definitions that was flagged during the briefings that we had much earlier in my time as shadow Minister for Health.

**Mr R.H. Cook:** Before you had a beard; right?

**Mr Z.R.F. KIRKUP:** That is exactly right; I think even before the pandemic.

I am curious about whether we can get a definition of “financial difficulty”. I know we can deal with it later in the legislation, but perhaps the minister can explain under the definitions why it was included in this case and then we can go from there.

**Mr R.H. COOK:** I am advised it is to simplify the overall structure of the act. “Financial difficulty” is referred to throughout the act. This will simply bring it forward to be dealt with in one hit. “Financial difficulty” means —

... the health service provider is unable to, or will be unlikely to be able to, satisfy any of its financial obligations from the financial resources available, ... to it when the financial obligation is due;

The definition of financial difficulty has been included to clarify the intent and operation of section 66 of the act, which sets out a process that must be followed when a health service provider is in financial difficulty.

We have an amendment in relation to this. I move —

Page 5, lines 15 to 20 —

To delete the lines.

**Mr Z.R.F. KIRKUP:** If I read the amendment right, we are removing the definition of “contracted health entity”. Is that correct?

**Mr R.H. COOK:** Yes. Member, this amendment deletes the definition of “Minister for Works”, which was to be inserted by clause 4. The definition is to be deleted because the term “Minister for Works” will no longer be used in the act.

**Mr Z.R.F. KIRKUP:** My apologies, minister. I was on the wrong page. In that case, given the definition of “financial difficulty” is in this clause and is referred to later, is the minister willing to discuss financial difficulty now or does he want to work through it when we get to a later clause?

**The ACTING SPEAKER (Ms M.M. Quirk):** The amendment relates to something else, member, and the minister has moved it.

**Mr Z.R.F. KIRKUP:** In that case, I am comfortable that the amendment is put.

**Amendment put and passed.**

**Clause, as amended, put and passed.**

**Clauses 5 to 11 put and passed.**

**Clause 12: Section 20 amended —**

**Mr R.H. COOK — by leave: I move —**

Page 11, lines 7 and 8 — To delete “*State Supply Commission Act 1991* and the *Public Works Act 1902.*”  
and substitute —

*Procurement Act 2020.*”

Page 11, line 13 — To delete the line.

**Mr Z.R.F. KIRKUP:** I would appreciate some clarification on why the amendments, which have been accepted by this house, were moved in the first instance. I would like more information on why the State Supply Commission and the Public Works Acts are being deleted and replaced with the Procurement Act.

**Mr R.H. COOK:** I thank the member for the question because it deserves some clarification. When the bill was originally drafted, it was anticipated that it would pass before the Procurement Act 2020. That did not come to pass, so we have to take out those references to provisions that have been made redundant by the passing of the Procurement Act and put in arrangements in the Procurement Act, essentially. This particular amendment deletes a reference to the State Supply Commission Act 1991 and the Public Works Act 1902 and substitutes it with the Procurement Act 2020. The subsequent amendment refers to the fact that the Procurement Act has amended



section 20(2) of the principal act to replace references to the State Supply Commission Act 1991 and the Public Works Act 1902 with a reference to the Procurement Act 2020. This change is being made to reflect that the commissioning and delivery of capital works under the act must be performed in accordance with the requirements of the Procurement Act 2020.

**Mr Z.R.F. KIRKUP:** I therefore assume that all the amendments for this bill standing on the notice paper are in relation to that wrinkle, I suppose, from the Procurement Act. We will undoubtedly get to clause 80 this evening, which the government intends to oppose rather than just delete. Is there some rationale for why that might be the case?

**Mr R.H. COOK:** That is a really good question. I asked it myself. I understand that is the wording we use when we are completely extracting a clause from the bill. It is parliamentary counsel's words—those wizards.

**Mr Z.R.F. Kirkup:** Long may they reign.

**Mr R.H. COOK:** Yes.

**Amendments put and passed.**

**Clause, as amended, put and passed.**

**Mr Z.R.F. KIRKUP:** Madam Acting Speaker.

**The ACTING SPEAKER:** Member for Dawesville.

**Mr Z.R.F. KIRKUP:** Sorry; I spoke in anticipation that we were on clause 13. I apologise; I was a little too keen.

**The ACTING SPEAKER:** Thank you very much. Just sit down so that I can get my thoughts back in order.

**Clause 13: Section 20A inserted —**

**Mr Z.R.F. KIRKUP:** Thank you, Madam Acting Speaker. I appreciate your ever valiant stewardship of this chamber.

**The ACTING SPEAKER:** It was what we call a premature interjection, member for Dawesville.

**Mr Z.R.F. KIRKUP:** I will take Madam Acting Speaker's word for it.

A range of provisions in this bill seek to charge the department CEO and health service providers with the capacity to undertake their own capital works projects. I assume that proposed section 20A, "Works and clinical commissioning", is one of those provisions that seek to ensure that the department CEO and, in this case, the health service providers can deliver those capital works projects. Notwithstanding that there is an amendment to this clause, can the minister provide the house with some insight on why this is considered necessary and give examples of where this might be implemented?

**Mr R.H. COOK:** I acknowledge that the member raised this issue in his contribution to the second reading debate, but, because of time limitations, I could not address it in my response. The roles and responsibility for the commissioning and delivery of capital works and maintenance works currently under the act provides that commissioning and delivery of capital works and maintenance works is a function that only the department CEO can perform. This does not reflect the actual performance of this function by the WA health system and overlooks the accountabilities and responsibilities of the health service providers in delivering capital works projects. In practice, the department CEO takes responsibility only for managing the commissioning and delivery of capital works for high-risk facility projects, and more routine capital works projects are managed by the health service provider. For instance, we understand that the director general would take a very keen interest in the commissioning of a new hospital, like Perth Children's Hospital, but we would not expect the director general to oversee maintenance programs and other small capital works programs. However, the delegations to personnel within the health service providers does not allow the department CEO—the director general—to impose performance standards on the health service providers for the delivery of the works and to ensure health service providers are held accountable for the delivery of the works within budget. The amendments to sections 20A, 34 and 46 of the principal act are to ensure that the service agreement between the department CEO and the health service providers can set out the capital works projects that the health service provider is responsible for managing and the budget constraints that they must meet.

Essentially, at the moment, the CEO is delegating those tasks to the health service providers because obviously it is a complex system and one person cannot oversee it all. In the current act, we lack the mechanisms that we would expect the CEO could take advantage of to keep health service providers accountable for those minor capital works and things of that nature. The health service providers will have responsibility for managing the project budget and for ensuring the delivery of the project within the scope and providing the Department of Finance with the specifications required for the commissioning of the facility. The amendments will ensure that oversight by the Department of Finance and the Minister for Finance is retained under the Procurement Act 2020.

**The ACTING SPEAKER:** I note that the minister explained the amendment but he has not moved it yet.

**Mr Z.R.F. KIRKUP:** I appreciate the minister's extensive response. Is there a value threshold for a minor project that a HSP would undertake? How would that otherwise be determined?

**Mr R.H. COOK:** There is no value proposition or specific amount. It is more about the risk profile of the particular capital works. Obviously, something like the development of a new ground-level car park would not be something

the director general or CEO would take a key interest in. They may pay closer attention to a major redevelopment or minor capital works in situ in an operational phase of a hospital that is assessed as a high-risk profile. It is about making sure that the CEO has delegation capability while retaining accountability mechanisms.

**Mr Z.R.F. KIRKUP:** Is there any capability in the bill for the minister to instruct the director general to take an interest in a project that a health service provider is overseeing? I will use the WA Country Health Service and a regional hospital as an example. The director general there may not have a keen interest because it is not a high-value project. I would imagine that WACHS would have a better understanding of more disparate project developments, but then the project overruns and becomes a contentious issue for the government. Can the health minister, who is responsible for the delivery of that project, instruct the director general to then take an interest in it? I think it is a good move to devolve this power to the HSPs, but I am trying to understand whether the minister has the capability to instruct the director general to take a keen interest if the director general has not otherwise done so.

**Mr R.H. COOK:** I will provide some more colour and movement to my previous explanation. This all comes down to the interaction of the Procurement Act 2020. Under the Procurement Act 2020, the Minister for Finance can issue an agency-specific direction to the Department of Health that provides that the director general may undertake works up to the value of \$2 million without the involvement of the Department of Finance. The director general may undertake works above the value of \$2 million with the approval of the Department of Finance's CEO. In the absence of approval from the Department of Finance's CEO, the director general must engage the Department of Finance to undertake the procurement of the works. Under section 20(1)(g), the director general may delegate his power to the health service provider to commission and deliver works when the value of the works is under \$2 million, and, for works over \$2 million, when he has received approval from the Department of Finance to undertake the works.

The oversight that the member refers to comes from both the Minister for Health and the Minister for Finance. If the Minister for Finance takes a particular view, it will obviously inform the approach by the department CEO. But, ultimately, under the Health Services Act 2016, the Minister for Health could direct the director general or the department CEO to take carriage of the particular bill.

The Health Services Act, part 3, section 18, "Administration of this Act", reads —

Subject to the general control of the Minister and any directions or instructions given under the PSM Act section 32 by the Minister to the Department CEO, the Department CEO must carry out the administration of this Act.

The member asks: does the minister have that power? Yes, he or she does have that power, but, potentially, in terms of that oversight, that power would rest with the Minister for Finance.

**Mr Z.R.F. KIRKUP:** Minister, I appreciate the response. Unless I misunderstood, and to clarify, is there a value threshold of \$2 million? In the previous question we were trying to ascertain whether that was the case.

**Mr R.H. COOK:** This is more about the interaction with the Procurement Act 2020, not so much about the functioning of the Health Services Act.

**Mr Z.R.F. Kirkup:** Right. Thank you very much.

I move on to proposed sections 20A(2) and (3) in which the department CEO and the Minister for Works have to agree in writing on works commissioned and delivered under the act. The minister can exempt certain works that can be undertaken. I assume this is to ensure, as part of procurement arrangements, that the Minister for Works has appropriate oversight into projects. Why does the Minister for Works need to provide approval to the health department CEO?

**Mr R.H. COOK:** Thank you, member. I am perhaps remiss, Mr Acting Speaker, in not moving the amendments that we had lined up for this clause earlier. The proposed subsections that the member refers to will be deleted under amendments that exist in my name. By leave, I move —

Page 12, lines 12 to 27 — To delete the lines.

Page 12, lines 29 and 30 — To delete the lines and substitute —

(a) the *Procurement Act 2020*; and

**Amendments put and passed.**

**Clause, as amended, put and passed.**

**Clauses 14 to 19 put and passed.**

**Clause 20: Sections 36A to 36E inserted —**

**Mr Z.R.F. KIRKUP:** Proposed section 36A, "Joint arrangements", states —

(1) A health service provider may enter into a joint arrangement with the Minister or Ministerial Body in relation to health property.

Can the minister provide some background on what a joint arrangement might look like and how the ministerial body will interact with the HSP?

**Mr R.H. COOK:** The joint arrangements referred to in this proposed section provide for arrangements to be entered into between a health service provider and the minister or the health minister or body in relation to health property. It is intended that this proposed section will allow the minister to give health service providers the power to deal with land and property, which is subject to a joint arrangement on behalf of the minister or health ministerial body; for example, the terms of the joint arrangement may permit a health service provider to grant and terminate leases or licences up to a maximum term of 21 years on behalf of the health ministerial body or minister.

The health service provider will not require the approval of the minister or the health ministerial body prior to granting the lease or licence. However, the extent of the power to deal with the property will be subject to the terms of the joint arrangement. Under this proposed section, actions taken by the health service provider are taken to be done by, and are binding upon, either the minister or the health ministerial body. For example, the East Metropolitan Health Service was given control and management of the Royal Perth Hospital site, so the intention was that the health service providers would control the management of the sites for the purposes of performing their broader function.

I will go out on a limb here and say that I think this comes down to the leasing of a shop or a childcare centre or a cafe space. At the moment, I am required to sign off on all those and the member would understand that some of these are quite small, but there are obviously multiple things to sign off. Therefore, the idea is to give the health service providers, within the scope of the leasing arrangements, the ability to manage that lease.

**Mr Z.R.F. KIRKUP:** As part of his response, the minister said that although the health minister would not be routinely included in the arrangements—for example, in the lease arrangements—they would ultimately be responsible for them. I can easily imagine a situation in which a health service provider enters into some sort of arrangement for a health property without the minister of the day necessarily being a participant in that process. But if something goes awry, the Minister for Health is held accountable. Why has the government decided not to include the health minister as an ongoing interest in the level of responsibility that would be taken into account when entering into a financial arrangement on a health property?

**Mr R.H. COOK:** I thank the member for the question. Ultimately, member, this would come down to a range of factors not yet articulated and certainly not articulated within the bill. What we are talking about is multiple small value leases that health service providers enter into and the threshold or nature of that joint arrangement of them entering into those arrangements on the government's behalf would really depend on its risk appetite but it would also depend on the health service provider involved. One could anticipate in the future a health service provider that does not have the maturity or a track record so the minister and the department may want to take a different view about that particular HSP as opposed to an HSP that has been managing a complex building and set of leasing arrangements over a long period. It really just comes down to what is considered good policy in the management of those arrangements.

**Mr Z.R.F. KIRKUP:** In that case there is in-built flexibility in that the director general could take an interest in any arrangement that an HSP enters into. There is the capacity for the minister to determine that ahead of time according to a range of factors that the minister stated, such as risk and the like. If a health service provider was not particularly mature and did not have a track record, could the minister instruct them? What is the formal instrument used to grant north, for example, more leeway than east?

**Mr R.H. COOK:** The government would enter into that joint arrangement with them whereby the chief executive officer and the minister are happy to delegate up to a certain threshold, a certain range or a certain intent in those leasing arrangements. From that perspective, it is really about just the policy framework in which it decides to work. It is about accepting the reality of the situation that hospitals are now very complex buildings and operations and, from that perspective, government cannot oversight every single small commercial arrangement that exists within those buildings. A level of delegation goes on but it really depends on the policy framework that sits over that.

**Mr Z.R.F. KIRKUP:** I will extrapolate the minister's point about the property use that an HSP might enter into as part of this arrangement. An incoming health minister may not appreciate the intent of an operating property, or a health property might not appreciate the clinical services that might be offered. I can think of any number that might exist. Ultimately, does the minister have the capacity to terminate those leases and stop a clinical provider from providing services that the minister might consider contentious?

**Mr R.H. COOK:** The short answer is no; they could not do that. What the HSP is doing is entering into a binding contract on behalf of the minister so the minister would be bound by the leasing arrangements and transfer of rights that go with those leasing arrangements. In the event that a lease expires or something to that extent, maybe that would represent an opportunity to intervene. We would hope that a minister would respect the health service providers and what they are doing but obviously the minister is bound by the usual arrangements of procurement and appropriate financial administration.

**Mr Z.R.F. KIRKUP:** In the course of the time that the member has been the Minister for Health and has had to sign off on these arrangements, as a matter of curiosity, has he come across any lease arrangements or arrangements for a health property that he has found incongruent with what he would expect to operate in a health facility?

**Mr R.H. COOK:** No is definitely the answer. The one that is perhaps the furthest away from the provision of clinical services is childcare centres, but most of the time it is things like cafes, gift shops and snack shops. Occasionally, we anticipate that we would be leasing a professional space to a private clinical provider but by and large they are usually fairly small leases and from that perspective their execution is fairly straightforward. The idea is that the minister should not execute such small and multiple matters.

**Mr Z.R.F. KIRKUP:** I refer to the public–private partnership at St John of God with Ramsay. If, for example, the government of the day sought to remove a private operator south of the river, is this where this type of relationship comes into account—when joint arrangements are decided on by an HSP on a health property? In the case of St John of God at Midland, which was obviously done by the former government, we provided them access to the hospital and the existing arrangements remit and St John of God operates its own lease arrangements on that property and any other ancillary services that might be provided.

**Mr R.H. COOK:** I might answer that in the generality rather than the specifics because I do not necessarily have a working knowledge of the details of that arrangement. Under a classic PPP model, the private operator operates all the facilities. For instance, at Joondalup, Ramsay runs the leases for all the outlets that exist, such as the cafe and chemist. That is not a function of government. Obviously, the PPP is not a leasing arrangement. That is a very complex government contract that would blow these provisions out of the water. That is a major exercise of procurement.

**Mr Z.R.F. KIRKUP:** I refer to the medihotel at Joondalup, which exists on Ramsay’s area of operation. I assume that it does not operate the lease or the arrangements for the medihotel and that that would be the responsibility of the HSP. In that case, going to the point about a private operator having entire control over the facility and hospital—this does not really fall into this—if a third party, such as a medihotel, is added into these joint arrangements causing an overlap, does the private operator have any role to play and could they determine whether a facility such as that can go ahead? If it is the government’s intent to put a medihotel in every public hospital, for example, and that is extended to Peel, Joondalup and Midland, can they veto that entirely? Could they go against the HSP in that case?

**Mr R.H. COOK:** It really depends on the rights and interests of the private operator. For instance, in the case of Joondalup, Ramsay has control of that site as part of the contract with the government so we certainly could not walk in there and say, “By the way, we’re going to build a medihotel in the area that you’ve got set up as a crèche and someone else is going to run it.”

The contracts are simply much more complex than that. From that perspective, these provisions would not relate to a public–private partnership environment. Whether it is Peel, Midland or Joondalup, the private operator runs not only the clinical services but also the ancillary services. Obviously, they usually exercise those through subcontracts or leasing arrangements.

**Mr Z.R.F. KIRKUP:** I will refer to the same clause, but a different area of interest in this case. I move to proposed section 36B, “Power to borrow”, still under clause 20 on page 17. In this case, the HSPs are being empowered to borrow money. I assume the money will be borrowed from the state, or will it be some other financial arrangement? Does that not exist at the moment? Why will the Treasurer have a role to play in this, rather than solely the minister?

**Mr R.H. COOK:** The member will forgive me for providing this lengthy information, but it goes something like this: generally, health service providers do not need to borrow money to operate—I asked this question myself. However, a recent change in Australian accounting standards has led to certain leasing arrangements being treated as a form of borrowing—for example, the leasing of medical equipment used in public hospitals. Because these leasing arrangements sometimes involve very expensive equipment, they are now treated as borrowing arrangements. There are over 2 000 of these leasing arrangements in place within the WA health system. The amendment was initially sought to allow health service providers to continue with their leasing arrangements. The Treasurer’s Instructions were amended in June to address this issue, but the amendments are still useful. It is also possible that a health service provider might need the ability to overdraw their bank account if a supply bill is delayed—for example, when a new government is elected—or needs more funds to operate than the advances authorised under section 24 of the Financial Management Act 2006. Under the Western Australian Treasury Corporation Act, the Western Australian Treasury Corporation can provide its services only to agencies that have the power to borrow in their enabling legislation. Health service providers do not currently have the power to borrow—they must go through a complex arrangement through the Department of Health to manage their foreign exchange risks.

**Mr Z.R.F. KIRKUP:** I thank the minister for his response. I assume that this has to be done in concert with the health minister. Proposed section 36B(1) states —

A health service provider may, with the approval of the Treasurer —

- (a) borrow or re-borrow money; or
- (b) otherwise arrange for financial accommodation to be extended to the health service provider.

There is a separate proposed subsection about the minister making an order, with the consent of the Treasurer and published in the *Government Gazette*, to exempt a transaction or a class of transactions. Going back to proposed subsection (1), is the interaction solely with the Treasurer? I assume there is a requirement for the HSP to come to

the minister to say that it is about to run out of money and needs to get some more. Unless I am reading it wrongly, it will not have to do that entirely or exclusively in concert with the health minister—it can go straight to the Treasurer. I just want to understand the logistics of how that might work.

**Mr R.H. COOK:** Obviously, at the end of the day, no level of borrowing can occur without the consent of the Treasurer. Some arrangements might be under the delegation or the authority of the Treasurer, but, ultimately, it has to be the Treasurer. Under normal protocols within government, the health service provider will be required to go through the minister and the department CEO. This proposed section clarifies the transactional relationship and not the communication or accountability relationship. The member is right: ultimately, the Treasurer has to be able to say yea or nay to these things, but it will be managed by the minister. In addition, there is a specific requirement for HSPs to be able to exercise provisions under the financial difficulty arrangements through the Minister for Health. At all stages, the Minister for Health will remain in the loop. I think this just recognises the primacy of the Treasurer. I can imagine the Department of Treasury going, “We want you to insert the Treasurer in this particular section.” Any aspect of government that involves an agency borrowing money or going into debt has to be with the consent of the Treasurer.

**Mr Z.R.F. KIRKUP:** I assume that this will become a cabinet decision or a cabinet submission. If it was a significant amount of money, under the previous government it would probably have gone to the Economic and Expenditure Reform Committee and then on to cabinet for a final decision. I assume that it will be a similar process.

**Mr R.H. COOK:** That is right. The Treasurer has certain delegated authority under the Expenditure Review Committee, but for significant amounts, they all have to go through those processes.

**Mr Z.R.F. KIRKUP:** My final question on this part concerns the transparency of arrangements like this. When an HSP has got into so much debt that it needs an advance or something like that from the government, how will that be published? If it is a cabinet decision, it will be exempt from any freedom of information requests. The answering of parliamentary questions will be at the behest of the minister. Is there any formal publication of them? My reading of proposed section 36B(2) is that if the Treasurer does approve an order, it has to be published in the *Government Gazette*. Is that for all transactions? I am seeking some clarification. I apologise if I have misread this, minister. Does every transaction for money that is borrowed have to be published in the *Government Gazette*; and, if not, what is the method by which there might be public exposure so that people would know that, for example, the North Metropolitan Health Service got \$100 million in advance because it was financially unsound?

**Mr R.H. COOK:** Issues of financial difficulty are dealt with under another clause; I am sure we will come to that shortly. Ultimately, this is about a specific transaction or a group of transactions that the Treasurer believes do not need to be approved in the normal manner. It is those classes of transaction that need to be listed in the *Government Gazette* to provide a level of transparency. In general terms, though, obviously every health service provider is required to provide an annual report, which will specify all the details in relation to the financial health or otherwise of an HSP—whether they are running a deficit or a surplus; and, if they are running a deficit, the extent to which it had to be topped up and any other arrangements that were entered into.

**Mr Z.R.F. KIRKUP:** I appreciate that we will get to that under clause 33, with the insertion of the proposed section on the notice of financial difficulty and the like. We raised a concern during the second reading debate and, I think, during the briefing that if that is the case, there will be no public articulation of those financial difficulty notices; that is, there will be no external exposure of that. There will be exposure within the agency—the CEO and, I assume, the minister will be notified that there is some financial difficulty—but the public will not be informed of that. I appreciate that it might be in an annual report, but the opposition might not be told until the end of the financial year that an HSP is haemorrhaging for some reason. Does the minister not consider that there should be some up-front arrangement if there has been a significant class of transactions to ensure that a health service provider can meet its lease arrangements, for example, or whatever it might be? Should there not be greater public oversight of something like that?

**Mr R.H. COOK:** I think I get what the member is saying: basically, if an HSP is under significant financial stress, ultimately the public has a right to know. Of course, that is the nature of budgets, estimates hearings and things of that nature. It has always been thus. I certainly acknowledge and respect the principles that the member is talking about in that context. These specific arrangements do not actually go to the heart of what we could call financial mismanagement or grave financial difficulty. Again, we will come to those sorts of discussions. Ultimately, there may be times when an HSP legitimately has to enter into a borrowing arrangement, maybe because of lack of supply or something like that. People still need to get paid and patients still need to be seen. This is to ensure that there is proper oversight by Treasury in that context.

**Mr Z.R.F. KIRKUP:** I am still on clause 20, but moving to proposed section 36E, “Health service providers may provide services to each other”. This insertion effectively allows for a number of HSPs to enter into commercial operations or combine contracts with another. Why is this amendment considered necessary?

**Mr R.H. COOK:** This proposed section will give health service providers the power to enter into contractual arrangements with one another to, firstly, provide health services to or receive health services from one another;

secondly, provide health services on behalf of the first provider; or thirdly, provide services other than health services to or receive other services from the second provider. For instance, in the first example, if health support services provide support services like ICT or human resource services to health service providers, this proposed section will provide them with the explicit power to enter into an arrangement for those matters. For the second case, PathWest, for example, provides pathology services on behalf of other health service providers for their patients. For the third case, an example would be when a health provider provides facilities management services, gardening services or clinical incident review services to another health service provider. For instance, traditionally the North Metropolitan Health Service has been the home of big, statewide services like PathWest. That is now set up as a separate health service provider, but it is an example of the sorts of things that a health service provider might provide on behalf of other HSPs, either for reasons of efficiency or ease of delivery. In the future, I think we could also have a situation in which an HSP might develop a particular specialty or efficiency. For example, it could be gastric banding operations. It is a really good idea to do that in high volumes in a single space so that they become really good at it. An HSP may provide that service on behalf of other HSPs and things of that nature. We are not necessarily talking about things of a clinical nature, but it is to provide the opportunity for HSPs to really cross-examine themselves and work out the best way to deliver both clinical and nonclinical services.

**Mr Z.R.F. KIRKUP:** That seems quite straightforward from my perspective. In that case, using PathWest as an example, how will it operate if this is considered a necessary insertion? How does it otherwise operate at this moment?

**Mr R.H. COOK:** Member, I will answer that in two sections. Firstly, I will provide a little bit more context around the agreements. There are limitations to preserve the overarching framework of the act. The limitations placed on the health service providers' power to enter into contracts and arrangements with one another is to preserve the overarching governance framework established by the Health Services Act. Firstly, health service providers must comply with the requirements of sections 37 and 38 of the act when disposing of land or entering into transactions. Secondly, the provision of any medical, nursing or allied health services, or public health programs, must not be inconsistent with the health providers' health service area as determined by the minister. Thirdly, the provision or receipt of any kind of service must be consistent with the terms of both health service provider service agreements. Currently, the way they do that is by the chief executive officer altering the service agreement that exists between different HSPs, rather than the HSPs undertaking a bilateral arrangement. Every time an HSP wants to move into this sort of arrangement with another HSP, they currently have to have their service agreement altered by the chief executive officer, rather than providing them with greater capacity to reach agreements with each other.

**Mr Z.R.F. KIRKUP:** Thank you, minister, for that response —

**Mr R.H. Cook:** Do you want me to clarify it?

**Mr Z.R.F. KIRKUP:** No, it was great! I have just noticed that I stood up when I have no further questions on this clause!

**Mr R.H. COOK:** I have no further comments!

**Clause put and passed.**

**Clause 21: Section 37 amended —**

**Mr Z.R.F. KIRKUP:** This clause seeks to insert proposed section 37(3), which states —

A health service provider may only dispose of health service land if —

- (a) the health service provider has the Minister's written agreement to dispose of the land;

There is also a gazettal requirement. How does a health service provider dispose of land at the moment?

**Mr R.H. COOK:** This proposed section further clarifies the rights and capacity of health service providers to enter into leasing arrangements. The disposal of land is essentially captured in a leasing arrangement. This is to clarify what they have to go to the minister for, which is around the disposal of land or any interest in land vested in or held or required by the health service provider. The term "dispose of" refers to leasing, subleasing and licensing of land. As a result, a significant volume of licences, leases and subleases that currently require the minister's written approval, many of which are low risk, are entered into by health service providers. Essentially, this is to streamline the process by clarifying what health service providers can do.

**Mr Z.R.F. KIRKUP:** I have undoubtedly misunderstood, so I seek some clarification. In this case, disposal means leasing, subleasing et cetera; and, if that is the case, how will this streamline that process if the continued written agreement of the minister is needed to dispose of land? In my mind, of course, disposal means they are getting rid of it, out of the custody of the HSP.

**Mr R.H. COOK:** The member is quite right. This requires the minister's written agreement. However, the amendments give the minister the power to exempt certain types of disposal from the agreements made under proposed section 37(3) by way of order published in the *Government Gazette*. Essentially, this is the mechanism by which the minister can set the limitations and parameters around those powers for lease and disposal.

**Mr Z.R.F. KIRKUP:** In that case, of course, if the health service provider were to enter into a leasing arrangement, the minister would not have to provide written consent or agreement, and then the HSP could go about its business without the need to get the minister's support in writing. Is that right?

**Mr R.H. COOK:** A good example is housing for staff in a country context. This simply provides the HSP the opportunity to get on and do these things without having to have reference to the minister all the time.

**Mr Z.R.F. KIRKUP:** In that case, I am assuming there is the capacity for the Minister for Health to bring about a class of disposals that could mean the sell-off of health department land. For example, if the minister wanted to get rid of swathes of Royal Perth Hospital and the heritage precinct, he could effectively just say, "This is now the responsibility of the HSP rather than mine", and he could just exempt it, writ large, and the land sale process and title could just be offloaded to each HSP, if that is what the minister of the day intended to do.

**Mr R.H. COOK:** The member is entering into some extreme scenarios tonight. I now have grave fears were the member ever given the reins of the portfolio! No; that would be captured under other government arrangements under the responsibility of the Minister for Lands. For example, with the Princess Margaret Hospital for Children site, we do not get the opportunity to enter into an arrangement with someone else around the disposal of that land; that is the role of the Minister for Lands. The land is transferred to the minister and the minister then disposes of it in the usual manner.

**Clause put and passed.**

**Clauses 22 to 30 put and passed.**

**Clause 31: Section 58 replaced —**

**Mr Z.R.F. KIRKUP:** Minister, I obviously refute that; I am not advocating large swathes of land sales or anything like that!

**Mr R.H. Cook:** By way of interjection, I am sure the member would never do that!

**Mr Z.R.F. KIRKUP:** Every government seems to get a report every term on what to do with places like RPH. Everyone just waits for the land to be worth a little bit more before they make a decision, I suspect. Just on the liability for, and right to recover, compensable charges for health services, I am assuming this process can be undertaken at the moment. Is that the case? If so, to what does this proposed section give effect?

**Mr R.H. COOK:** Member, it is good that we discuss this. This is a particularly tricky part of the legislation, but a very important part, for reasons that I am sure the member will come to appreciate greatly in just a jiffy. Essentially, at the moment, when someone comes into a hospital setting and receives healthcare services, we do not necessarily know whether that person is a compensable patient or a patient who is non-compensable. As a result, they may claim for compensation later. The process for the hospital to then be able to retrieve the cost of those services through the compensation system is very complicated and sometimes impossible. This proposed section is establishing the primary right of a health service provider to claim those compensable moneys in the event that the patient at that point does not know that they are compensable, but later finds that they are compensable. It simply provides an opportunity for the health service provider to claim those moneys from, primarily, the insurance company involved.

The current section 58 was intended to achieve this result through regulations. However, the regulation-making power in section 58 is considered unclear and insufficient. It is intended that the new scheme will allow for a more effective recovery of treatment costs by health service providers from insurers and other compensation payers and will give greater certainty for compensable patients regarding the fees that will be charged for health services received. Obviously, this is an important point, because, at times, there are situations in which the taxpayers of Western Australia are paying for someone's health care that would otherwise be naturally picked up by an insurance company. As the member knows, a lot of the amendments that we are considering in the Health Services Amendment Bill 2019 are very technical in nature to clarify, tighten up and otherwise make more workable the original act, and this is a great example of that.

**Mr Z.R.F. KIRKUP:** I thank the minister; I appreciate his clarification. The only part that was of particular interest to me in this case was the relationship between a patient's estate if that person dies and the opportunity for their charges to be recovered. Is there the facility for that to occur at the moment? That would undoubtedly be quite a contentious aspect, especially if the person died in medical care. I am just curious whether that is an option that is available at the moment, before these amendments are brought about?

**Mr R.H. COOK:** That is not provided for explicitly in these changes. Obviously, I think it will ultimately come down to the health service provider and the management in the usual course of events with claims that may be appropriate or inappropriate to claim against an estate. If a Western Australian comes in and receives health care, they get that free of charge. I guess I can think of some situations such as an international traveller who has travel insurance and then goes into a hospital environment and passes away. Maybe that is a scenario whereby one could contemplate that sort of thing, but, ordinarily, no.

**Mr Z.R.F. KIRKUP:** Just to clarify, I am sure the minister did not mean it when he said that that is not provided for in the changes; it is provided for in these changes. I am assuming that the minister means it is not provided for in the act as it stands at the moment and is being provided for in these changes.

**Mr R.H. COOK:** Yes.

**Mr Z.R.F. KIRKUP:** Further to that, I imagine a scenario would be the international passengers who contracted COVID-19, went into the state's care and then died. They were international arrivals. Is that a situation in which the state would seek to recover charges from their estate? Sorry; is that the capacity for which this amendment is being proposed? If that is not the case, I would appreciate the clarification.

**Mr R.H. COOK:** These particular provisions do not address the issues around international patients. This comes down to those people who come in, receive a service free of charge as a Western Australian or an Australian taxpayer and then are later compensated as though they had paid fees to the health service provider. The essential elements of the scheme for the recovery of fees and charges for the treatment of compensable injuries are as follows. A patient who has already received compensation, or established their entitlement to receive compensation, for the injury for which hospital treatment is proposed to be provided will be classified as a compensable patient and charged pursuant to proposed section 55 of the act. When a patient is treated as a public or private patient at the time of admission and the patient subsequently receives compensation or establishes an entitlement to receive compensation for treatment of the injury, or the patient already has received compensation or established an entitlement to receive compensation for the treatment of the injury but the health service provider was not aware of this at the time the health service was provided, the fee or charge that a health service provider or a form of public hospital could have charged for a service at the time it was provided is a compensable charge from the compensation. In the scenario that the member talked about of someone dying and the state receiving a fee for treating them before their death and them receiving compensation as if they had paid that fee, it would be claimable against that person's estate. This is only in the scenarios in which someone has either established or later received compensation for health care that they have otherwise not paid for.

**Clause put and passed.**

**Clauses 32 to 34 put and passed.**

**Clause 35: Section 66 replaced —**

**Mr Z.R.F. KIRKUP:** Pursuant to the conversation we had earlier in the evening about financial difficulties, to be perfectly frank, I do not have much more to explore on this, because I think we have already covered it. The only aspect I am keen to get a greater understanding of is the previous refrain about the level of public disclosure that exists when a notice is provided. The notice of financial difficulty is issued, and I understand it goes from the HSP to the department to the CEO, and it provides reasons that the HSP is in financial difficulty. I imagine that it is quite a significant undertaking. I do not know how common the minister thinks it might be, but I imagine it is relatively rare. I am stepping through the process. There is then an obligation for the CEO to provide the minister with the notice that the HSP is in financial difficulty and the action that should be taken, so effectively the director general says to the minister that something must be done about the situation, otherwise the HSP will collapse, for example, or whatever. The minister then has a requirement to respond to that—that is, to provide the notice and information to the Treasurer and initiate the advised action or any other action that the minister thinks is important to undertake. I appreciate there might be commercial sensibilities as part of that process and I appreciate this might have to happen relatively quickly, but as far as I am aware there is no gazettal and there is no tabling in Parliament. I could be wrong, and I look forward to the minister disabusing me of that notion if I am incorrect. There is no gazettal, no public information is provided and nothing is tabled in the house. I imagine it is probably canvassed in the annual report, which could be 12 months or 11 and a half months from when the notice of financial difficulty was issued. I suspect it would be impossible to secure information under the Freedom of Information Act, if it is commercially sensitive—maybe, I do not know. I guess the only other avenue would be through parliamentary questioning. Is there any reason that the government has taken a measure not to provide information publicly that financial difficulty has been encountered by a HSP? Why was it not considered important that the public or the Parliament be informed of that?

**Mr R.H. COOK:** There is nothing deeply untoward or extreme about these provisions. They are standard provisions to allow an agency to continue to operate, even though they might be under some financial stress, particularly towards the end of the financial year when push is coming to shove. From that perspective, both at the time the bill was drafted and today, these things would be managed in the normal course of events. It is not so much about commerciality, although obviously it might make people think twice about entering into a contract with a HSP if there is particular publicity around it. For the member's information, two notices of financial difficulty have been raised by a health service provider under section 66 since July 2016. In each instance, the notice was triggered mainly due to a forecasted budget deficit position at the end of the financial year rather than an imminent cash shortfall, and it was effectively managed within the WA health system. The amendments will allow the policy frameworks to provide more detailed guidance to health service providers on when it is appropriate to issue a notice of financial difficulty. For instance, at the end of the third quarter I usually have meetings with the department that go to which health service provider is looking like running over or under and how they are managing their budgets as they



come to the end of the financial year. It is not unusual for some to run a slight deficit; however, it is more usual that they run slight surpluses, and we want to get as close to that as possible. I take the point the member is making that this potentially could be a serious breach of financial management, but the provision is not in the bill as that element. It is simply there to facilitate the end of financial year balance that HSPs have. I understand the point that the member is making that there should be a declaration, tabling, gazettal or something like that, but this is no different from any other aspect of government in which we manage agency budgets on a year-to-year basis.

**Mr Z.R.F. KIRKUP:** I thank the minister; I appreciate the response. To the best of my knowledge, during the time I was policy adviser to the former Premier —

**Mr R.H. Cook:** He has blamed you for everything!

**Mr Z.R.F. KIRKUP:** For all the sins of government!

If an agency looked at getting over, it was quite a significant trigger for the cabinet from what I recall.

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

**Mr Z.R.F. KIRKUP:** Yes. If there was a prospect, it was not considered to be a routine situation. It was quite a significant event to have an agency looking like it would have a significant shortfall—that it might come a cropper, especially in a third quarter, for example. Largely, my concern is not necessarily that we will be running a bit close to the wind come April or May; it is more if there is a significant decline and there is some massive blowout in a HSP, the people of Western Australia would not otherwise be informed. Effectively, from what I can establish, if there was a blowout in a HSP, it would confer with the DG, who would provide recommendations to the minister who would consult the Treasurer and things would be tidied up, and that is effectively it. We would not know whether there was mismanagement within an entity, let us say. The people of Western Australia would not have any understanding about the level of impairment if that only comes out in an annual report. As the minister expects from the opposition, I am probably thinking of the worst. I appreciate that the minister is undoubtedly thinking it will not get that bad and not to worry about it. He feels quite comfortable with it, otherwise he would not have brought legislation before this place. I am just flagging that that is an area in which there could perhaps be some improvement. It is just providing that notice. If there have only been two instances since 2016, it is not such a big deal to provide that information to Parliament, but it is up to the minister. I appreciate his response thus far.

**Mr R.H. COOK:** Again, I understand the principle that the member is talking about. He is talking about the time he was working in government. I know the history of some of the health service providers. I know, for instance, that the North Metropolitan Health Service would have been in deficit for pretty much all the years the member was a staff member in government. These things are managed appropriately within the holistic nature of the Department of Health's budget. These are issues that would arise principally in April–May each year. Probably the earliest they would be clarified would be in the annual report, once the full accounts have been settled at the end of the financial year. I understand and agree with the principle that the member talks about, but in terms of application, we are not talking here about wholesale funding shortfalls; we are simply talking about the management of the end-of-financial-year cash flows.

**Clause put and passed.**

**Clause 36: Section 76A inserted —**

**Mr Z.R.F. KIRKUP:** Thank you very much, Acting Speaker. It is very good to see you this evening.

**The ACTING SPEAKER (Ms S.E. Winton):** Nice to see you, too.

**Mr Z.R.F. KIRKUP:** Is there no capacity for a board member to be removed from office at this point in time? What is the necessity for the insertion of the misconduct considerations?

**Mr R.H. COOK:** Acting Speaker, at this point we are moving to a different section of the bill, so with your indulgence I will switch out a couple of advisers.

This clause moves the minister's power to remove individual board members from section 77 of the act into a standalone section. This change has been made because section 77 deals with administrative matters relating to board members, whereas the minister's power to remove a board member is not an administrative matter. The clause expands the definition of misconduct to cover a board member's breach of duty under section 79 of the act under the Statutory Corporations (Liability of Directors) Act 1996 or a breach of a duty found in the common law and equity. It sounds as though it is a bit of housekeeping, member.

**Mr Z.R.F. KIRKUP:** Is there no capacity at this time for a board member to be removed if there are concerns about misconduct?

**Mr R.H. COOK:** Yes, there is currently, but it is covered under section 77 of the act, which is under administrative matters relating to board members, whereas the minister's power to remove a board member is not considered to be an administrative matter. It will now come under its own section.

**Mr Z.R.F. Kirkup:** So formatting; we are doing it like it is just a hiving off?

**Mr R.H. COOK:** I think the member would admire the elegance of it and from that perspective would respect and usher it through with great speed.

**Clause put and passed.**

**Clauses 37 and 38 put and passed.**

**Clause 39: Part 8 Division 2 Subdivision 2 heading replaced —**

**Mr Z.R.F. KIRKUP:** We can see the difference between a government backbencher and an opposition backbencher at this point, can we not?

During the second reading stage we raised concern about the lack of publication of conflict of interest and in this case as it is captured under a duties and personal interests section. I think we raised this matter when we debated the Infrastructure Western Australia Bill 2019 and other legislation that the government brought to this place in which boards that have quite significant functions in the role of the state were being created. I appreciate the intent in clauses 39 and 40—that is, specifically the duties and personal interests—and would like to deal with these two clauses pushed together, if I can. I understand the intent. I think it is very important and quite relevant. I am curious how conflict of interest might be identified in a board member. The minister knows far better than I that the skillset of an HSP board member would involve a lot of cross-contamination across the very small Western Australian community and that people might very well be qualified, but they might have a lot of conflicts of interest. Although those conflicts, perceived or actual, might properly be articulated amongst the minister and the department and into the Parliament itself, I would like a better understanding of the means that people will have to interrogate conflicts of interest of board members as they arise.

**Mr R.H. COOK:** I have with me a bit of information that has been put forward. I appreciate the member wants to dig into this section, so we will take our time. By way of generality, the clause amends section 79 to replace a number of express obligations on board members and committee members, some of which are additional obligations that are not covered by the general law obligations that are imposed on board members under the Statutory Corporations (Liability of Directors) Act 1996 or common law or equity. The amendments are intended to make sure that board and committee members are aware of the duties that they owe to the health service provider and to the state, with particular emphasis on the management of personal interests. The new provisions create a high level of transparency and integrity with respect to personal interests held by board members by enshrining in the legislation, under proposed section 79(3)(b), that board members are required to notify their board of any personal interest conflicts with the interests of the health service provider. This will allow the board to assess the personal interest and to determine whether it is a matter that will affect the board member's ability to perform their duties to the health service provider and to act in the public interest. The purpose of paragraph (c) is to make clear that the board member is responsible for avoiding and appropriately managing their conflicts of interests. Due to the nature of the health service providers' operations, the significance of the services that are delivered to the public and the relative size of the budgets that they manage, a high level of transparency and accountability by the board over board members' personal interests is required beyond that already provided in section 80 of the act. This will tighten and heighten the role that conflicts of interest might play.

Under this policy the board must ensure that it implements appropriate strategies and practices for the identification of reporting and management of actual perceived and potential conflicts of interest; have in place a conflict of interest register to ensure all declarations of actual perceived and potential conflicts of interest are recorded and managed appropriately; and ensure that they have adequate escalation procedures in place to ensure that actual perceived and potential conflicts of interest are managed appropriately by the relevant body when the conflict of interest cannot be managed by the board. This is obviously a very important aspect of a board member's duties and it is appropriate that a penalty of \$25 000 applies for breaching these provisions. Such disclosures are also required to be recorded in the minutes of the board and committee meetings.

We do not believe it is necessary to include a statutory requirement for HSP boards to make public a register of conflicts of interests held by members. This is not necessary because amendments to the act, along with provisions already included in the act, provide stringent conflict-of-interest reporting requirements. This includes the provisions in section 80 of the act whereby declarations of material personal interest are to be made in relation to matters considered at board and committee meetings; a penalty of \$25 000, as I mentioned earlier; when members have a material or personal interest in a matter, they are not permitted to vote on these matters or be present when the matter is being discussed; and the amendments provide even greater clarity on the duties of board members on managing conflicts of interest. Obviously, the conflict of interest register will be subject to freedom of information applications, as members would anticipate in these sorts of things. Additionally, the current provisions in the "Health Service Provider Board Governance Policy" requires that boards ensure that they implement appropriate strategies and practices for the identification, reporting and management of actual, perceived and potential conflicts of interest for board members, and that these strategies and practices are documented. In essence, member, this provision clarifies and heightens the role regarding conflicts of interest and puts in other provisions consistent across government around how they are managed.

**Mr Z.R.F. KIRKUP:** I appreciate the minister's extensive response. Will the minister be furnished with a copy of the conflict of interest register when one is made or updated?

**Mr R.H. COOK:** No.

**Mr Z.R.F. KIRKUP:** The minister in his contribution said that the conflict of interest register will be subject to FOI applications. As best as I understand, a board member is not considered to be a public officer under the act and therefore their information is considered to be personal and private, so I am curious about the minister's comment about it being subject to FOI applications. What does the minister envisage would be captured as part of a successful FOI application for information on the conflict of interest register of a health service provider? What would that encapsulate?

**Mr R.H. COOK:** The member is right; it would be considered under the usual nature of freedom of information applications. It would obviously consider those issues that go to kernel of the nature of the freedom of information inquiry, but would be captured in the normal manner that one would expect under that act.

**Mr Z.R.F. KIRKUP:** In that case, I flag my suspicion that very little would be captured if an FOI application were lodged because, undoubtedly, it would list the individual and the conflict that they had notified the board about in that register format. It is likely, I imagine, in Western Australia, that that would be a commercial interest, a property interest or perhaps a personal financial interest, and those details would not be released. Effectively, if a person were to put in an FOI application on the COI register for an HSP for an individual or the entire register, it would come back fairly blank, because most of the information would not be applicable as the FOI act currently stands—that is, to look at decisions of government officers and agencies. I think that is a significant shortcoming in that respect. If we are going to rely on the board being subject to FOI applications, I suspect there will be a shortcoming there. In fact, it is more likely that information would not be provided publicly. I assume, therefore, similarly, that if an opposition member were to ask the minister a question on notice to table the conflict of interest register, the minister of the day's response would likely be, "I don't discuss the financial arrangements of any particular individual", which, again, shows the limitation of the amendment to the act. I appreciate all the work that has gone into this amendment to the act and, otherwise, the requirement for integrity that the minister has provided to this place is very thorough and strong, but I still have concerns that the register cannot be inspected. Given that HSPs have wide and varied work—particularly agencies like the WA Country Health Service, which covers anything outside of metropolitan Perth, for example—a lot of financial arrangements will allow the HSP to be entirely autonomous with not much ministerial oversight if it is under a certain value, threshold or risk matrix.

It is good that a lot of commercial operations and maintenance and commercial contracts can be entered into, and I appreciate the devolved government model, which I think works very well, but the public accountability of HSP board members is important. I think, for whatever it is worth, that the COI register is an important part of that. We raised this issue with the Premier; Minister for State Development, Jobs and Trade about Infrastructure Western Australia. For example, we noted that Infrastructure New South Wales has a register that can be inspected. It is not public—as in, it is not online—to the best of my recollection, but a member of the public, a member of Parliament or a journalist can inspect it at any given time. If we look at health service providers' financial decisions, we see an unfortunate history. The minister is well versed in some of the financial issues that have come up. To be perfectly frank, I appreciate the government's response, but it would be prudent to provide the information publicly. If the government is not willing to look at that, I think there should be a greater mechanism by which the register could be inspected. I suspect that is not what the government will go ahead with, but I am flagging that concern. The minister and I both know that the Minister for Health will be ultimately accountable which, as I said at the time to the Premier; Minister for State Development, Jobs and Trade, would leave him exposed. We have seen plenty of times when boards have made decisions that blow back on the minister or the Premier because they otherwise allowed it to occur. I think there is some risk for the minister as an elected member in this place and for executive government. Ultimately, perhaps, concerns could be raised about misconduct or unethical behaviour if a COI register cannot be scrutinised by the public. I think that leads to some areas of concern, but I appreciate the government's amendment to the act.

**Clause put and passed.**

**Clauses 40 to 51 put and passed.**

**Clause 52: Section 123A inserted —**

**Mr Z.R.F. KIRKUP:** This clause seeks to insert new section 123A, "Acting health executives". How does this arrangement work at the moment, if this is considered a necessary amendment to the act?

**Mr R.H. COOK:** This provision reflects current practice on the appointment of acting health executives. There is nothing wrong with what we are doing at the moment. This bill deals with the role of the chief executive officer and explicitly deals with the acting chief executive officer, so it was thought for completeness that we should incorporate those changes into the Health Services Act to reflect current practice.

**Clause put and passed.**

**Clauses 53 to 62 put and passed.****Clause 63: Section 187 amended —**

**Mr Z.R.F. KIRKUP:** I am mainly interested in the provision in proposed new section 187(1AA) that empowers the inquirer to enter the premises of a health service provider and any other hospital or facility controlled or managed by an HSP for the purposes of an inquiry. This is a bit of an extrapolation. This provision will ensure that an inquiry can take place in a private hospital as well. That is effectively where I am going. I am trying to understand —

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

**Mr Z.R.F. KIRKUP:** Even though they have a service agreement or something like that in place, it does not have anything to do with the private arrangement.

**Mr R.H. Cook:** No.

**Mr Z.R.F. KIRKUP:** Okay. That is great.

**Clause put and passed.****Clauses 64 to 79 put and passed.****Clause 80: Part 20 Division 3 inserted —**

**Mr R.H. COOK:** This is a dreadful clause. Clause 80 was to insert part 20, division 3, which preserves orders made by the Minister for Works under section 20(4) of the act, which will be repealed by the bill by providing that these orders are taken to be an order made by the Minister for Works under the new section 20A(3). Due to the changes brought by the Procurement Act 2020, it is no longer necessary for the amendment bill to preserve the orders made by the Minister for Works under section 20(4), because the orders no longer have effect. In essence, we will be obliterating clause 80 and voting against it.

**Clause put and negatived.****Clauses 81 to 86 put and passed.****Clause 87: Act amended —**

**Mr Z.R.F. KIRKUP:** I will deal with clauses 87, 88 and 89 altogether. I am sure the Acting Speaker will give me that leniency at this late hour?

**The ACTING SPEAKER:** I will indeed!

**Mr Z.R.F. KIRKUP:** Clause 88 simply inserts the word “private” as part of the Motor Vehicle (Catastrophic Injuries) Act 2016. What effect will this have?

**Mr R.H. COOK:** When we were initially legislating for this bill, there was a bit of a dance in terms of timing with the Motor Vehicle (Catastrophic Injuries) Act 2016. As a result of that, the MVCI act makes reference to the Hospitals and Health Services Act 1927, and so that simply changes the reference to refer to the Private Hospitals and Health Services Act.

**Clause put and passed.****Clauses 88 to 90 put and passed.****Clause 91: Section 13 amended —**

**Mr Z.R.F. KIRKUP:** Why is the amendment being made to the Queen Elizabeth II Medical Centre Act 1966 necessary?

**Mr R.H. COOK:** Clause 90 explains that part 5 of the bill amends the Queen Elizabeth II Medical Centre Act 1966. The consequential amendments made by this part were previously included in the act; however, the amendments did not commence due to a drafting error, which would have caused the QEII act to become inoperable, and have been corrected in this bill. The purpose of the amendments is to replace a by-law-making power held by the Queen Elizabeth II Medical Centre trust, under the QEII act, with a regulation-making power to be held by the Governor to make the QEII act consistent with other health legislation, which has moved away from the use of by-laws.

Clause 91 deletes and replaces section 13(2e) of the QEII act. The new section 13(2e) has been amended to remove paragraph (b), which provided for the delegate to make regulations or by-laws in respect of the site. Importantly, new section 13(2e) continues to permit the delegate of the trust to exercise the powers of the trust in respect of the portion of the QEII site that has been set aside under subsection (2a). The clause also replaces section 13(2g)(b)(i) with a new subparagraph (i) that clarifies that the delegate of the QEII trust is to pay money collected from the fees paid pursuant to the regulations made under the QEII act, into the designated count.

I cannot really provide any more clarity than that. It seems to be absolutely straightforward! As long as the member for Nedlands, who is an engineer, can understand that particular flow, I think we are on safe ground.

**Clause put and passed.****Clause 92 put and passed.**

**Clause 93: Sections 22 and 23 inserted —**

**Mr Z.R.F. KIRKUP:** My question relates to the transitional provisions for the Health Services Amendment Act 2019, as defined in this insertion. The member for Balcatta will appreciate that it is fantastic to see a medical facility named after our Queen. It is great to see the sovereign represented, albeit on a complex site.

Under new section 22, transitional arrangements are being repealed. I appreciate that this is perhaps a relatively complex amendment that the minister is moving in this place. Do the transitional arrangements cover any by-laws currently in place? Are those by-laws still activated even though they might be referenced under a part of the act in which the head of power no longer exists? Is that correct?

**Mr R.H. COOK:** Yes, it is a bit like that. What it is essentially doing is providing transitional provisions. It repeals the by-laws so that they can be replaced with regulations. References to the by-laws made under the QEII act, in written law or in other documents, such as parking infringement notices and things of that nature, are taken as a reference to the regulations made under the act rather than what were previously by-laws.

**Clause put and passed.**

**Clauses 94 and 95 put and passed.**

**Title put and passed.**

*House adjourned at 9.30 pm*

---

**QUESTIONS ON NOTICE**

Questions and answers are as supplied to Hansard.

**POLICE — TRAFFIC PATROL**

**6160. Mr P.A. Katsambanis to the Minister for Police; Road Safety:**

I refer to the Western Australian Police Force traffic patrol, and ask:

- (a) how many hours of traffic patrol were undertaken by the Western Australian Police Force in each of the following years:
- (i) 2015;
  - (ii) 2016;
  - (iii) 2017;
  - (iv) 2018; and
  - (v) 2019?

**Mrs M.H. Roberts replied:**

- (a) The Western Australian Police Force advise in 2017 the agency decided not to record traffic hours and that this decision was informed by recommendations made by the Australian Bureau of Statistics: 2015, 505 135; 2016, 456 379; and 2017, 446 878.

Key performance indicator 9 in the Western Australia Police Force Annual Report 2019 provides details of the percentage of traffic law enforcement contacts made by police officers that target Category A offences.

**INNOVATION AND ICT — NEW INDUSTRIES FUND**

**6247. Mr W.R. Marmion to the Minister for Water; Forestry; Innovation and ICT; Science; Youth:**

I refer to the government's New Industries Fund (NIF) which was announced in November 2017 with funding allocated of \$16.7 million over four years, and ask:

- (a) Can the Minister advise the end of financial year balance of the NIF for the years 2017–18, 2018–19 and the year to date balance of the fund as at 31 March 2020;
- (b) Can the Minister provide an estimate of the remaining balance of the fund at 30 June 2020;
- (c) Can the Minister provide an expenditure break-down for each year that the fund has been operating for the allocation of funds for the following categories:
- (i) Innovation Vouchers Program;
  - (ii) WA Innovator of the Year Program;
  - (iii) Regional Innovator Program;
  - (iv) Science Industry PhD Fellowship Program; and
  - (v) Other programs; and
- (d) For (v) above, can the Minister advise where this expenditure or funding was allocated?

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

- (a) End of financial year balance of New Industries Fund
- |                                  |              |
|----------------------------------|--------------|
| 2017–18:                         | \$14,426,024 |
| 2018–19:                         | \$9,860,958  |
| YTD balance as at 31 March 2020: | \$7,915,717  |
- (b) Estimate of remaining balance of NIF at 30 June 2020: \$5,759,588
- (c) Expenditure break down

	2017–18 (\$)	2018–19 (\$)	2019–20 (\$)
(i) Innovation Vouchers Program	368,583	363,424	252,227
(ii) WA Innovator of the Year Program	-30,109	201,005	282,041
(iii) Regional Innovator Program (RNIF – administered by DPIRD)	500,000	2,000,000	0

(iv) Science Industry PhD Fellowship Program	40,000	191,662	275,952
(v) Other programs	967,727	1,477,737	2,858,117

(d) Expenditure breakdown for (v) above:

	2017–18 (\$)	2018–19 (\$)	2019–20 (\$)
Start it up Challenge	13,636	0	0
Sponsorship	39,091	22,500	44,500
Innovation hubs	700,000	1,030,000	1,230,000
Unsolicited Bids	215,000	150,390	65,000
Games Industry Growth Pilot	0	80,230	37,617
X-TEND Program	0	194,617	481,000
Renewable Hydrogen	0	0	1,000,000
TOTAL	967,727	1,477,737	2,858,117

