

the Committee have rejected. The suggestion of the member for Perth to my mind represents no safeguard whatever.

Mr. Mann: Report progress and submit something else.

The MINISTER FOR HEALTH: We cannot satisfactorily draft here an amendment that will overcome the difficulty. I hope hon. members will give me some suggestions, as the member for Perth has done on this point, to prevent malingering and also to prevent people not entitled to ask for treatment from entering a hospital. I am therefore prepared to report progress at this stage.

Progress reported.

House adjourned at 1.12 a.m. (Thursday).

Legislative Council,

Thursday, 4th April, 1929.

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The DEPUTY PRESIDENT took the Chair at 4.30 p.m., and read prayers.

QUESTION—UNEMPLOYMENT, UNIVERSITY AND HOSPITAL GRANTS.

Hon. Sir EDWARD WITTENOOM asked the Chief Secretary: 1, How much money has been spent on unemployment, including sustenance and providing special work (a) during the last six months from revenue; (b) from loan? 2, How much did the Government grant to the University for the 12 months ended 30th June last? 3, How much was granted, from revenue or loan to the Perth Hospital for the 12 months ended 30th June last?

The CHIEF SECRETARY replied: 1, (a) Sustenance £15,052 1s. 1d. Special work, nil. No work other than those provided for on the Estimates have been put in hand during the last six months. (b) No money has been expended from revenue or loan on special works. 2, £29,000 annual grant. 3, Revenue £40,801; Loan, nil.

MINISTERIAL STATEMENT—NOTICE OF QUESTIONS.

THE CHIEF SECRETARY (Hon. J. M. Drew—Central) [4.33]: I shall be glad of your permission, Sir, to make a brief statement regarding the insufficient time given by some members to the Government to reply to questions asked in the House. Last night Mr. Stewart stated that Sir Edward Wittenoom had asked questions in the House and could not get replies from the Government; and Sir Edward Wittenoom apparently approved of that interjection. Let me state a few facts relative to that matter. No fewer than four Government departments were involved in the questions. The questions were asked on a Tuesday, they were communicated to my department on the following morning, and probably were in the hands of the several departments by 10 a.m. There was only from 10 a.m. to 4 p.m. in which to prepare the replies, if they were to be given on that day. But the questions were very much involved and required considerable investigation. The next day was Thursday, and after that came the Easter holidays, in consequence of which the various offices of the Government departments did not reopen until the following Wednesday morning. As I have said, four departments were involved, and the way in which the questions were put entailed considerable trouble on the departments that had to supply the information. For instance, one question read—

How much money has been spent on unemployment, including sustenance and providing special work during the last six months (a) from revenue; (b) from loan.

It will be noticed that the question deals with the last six months previous to the date on which the question was asked. If the hon. member had asked for the expenditure from January to October of the preceding year it would have simplified matters considerably.

Hon. Sir Edward Wittenoom: But there was no unemployment then.

The CHIEF SECRETARY: The hon. member should not have expected immediate replies to those three questions. I trust that in future members will give me more time. Often I have given replies to questions—the information being furnished to me—when on account of insufficient time allowed I was in some doubt as to their accuracy.

Hon. Sir EDWARD WITTENOOM: May I make a personal explanation? I asked the questions hurriedly because I wanted the figures to use in the debate on the Hospital Fund Bill. Only one of those questions was much involved, the one the Chief Secretary has just read out. Answers to the other two could almost have been got from the Estimates. However, we never know what advances the Government may have made in addition to the Estimates, and I wanted to know exactly what the cost had been. The other question, I admit, was a little involved. The reason why I did not make it cover an earlier and longer period was because I did not think there was much unemployment during that period.

Hon. H. STEWART: I wish to explain to the Chief Secretary that when I made that interjection I had no desire to impute any motives. My object was merely to draw attention to the fact that the questions had not been answered. I quite realise that some questions, even those questions I have on the Notice Paper, do involve considerable time in the preparation of replies. However, in this respect I could not conceive of the Chief Secretary extending anything but the utmost courtesy to members.

BILL—HOSPITAL FUND (CONTRIBUTIONS.)

Second Reading.

THE HONORARY MINISTER (Hon. W. H. Kitson—West) [4.37] in moving the second reading said: This Bill will be necessary, provided the Bill we have recently discussed eventually becomes law. During the Committee stage of the Hospital Fund Bill several members were anxious to get information as to the amount of money that would be raised by the proposed tax. Also members raised several other questions which they desired me to answer, but which

at that time I could answer only from memory. The Bill before us provides for a tax of $1\frac{1}{2}$ d. in the pound on all incomes. It is estimated that the total value of the contributions at that rate to be received will be approximately £217,762.

Hon. H. Stewart: Does that take into account the cost of collection?

The HONORARY MINISTER: No, that is the estimated total income and has nothing to do with the cost of collection.

Hon. H. Stewart: Could you give us an estimate of the cost of collection?

The HONORARY MINISTER: The information supplied to me is that it will cost between £8,000 and £10,000 to collect the tax and administer the scheme. In this regard there is nothing that can be taken absolutely for granted, for it is purely an estimate based on our first experience and on the information supplied by the various departments concerned. There is every possibility that if the Bill becomes an Act it will not be put into operation until, say, the 1st August, in which event there will be only eleven-twelfths of the year available. That, of course, will mean a reduction in the amount to be received from that source. And that eleven-twelfths of the year will be available only in respect of salaries and wages. The contributions that will be received from income other than salaries and wages will not be received for a further 12 months. Consequently, while £217,762 is the estimated amount for 12 months, the whole of that amount cannot possibly be made available until a longer period has elapsed. That accounts for the statement I made during the Committee stage of the previous Bill. It is a difficulty we cannot get over, but one that I believe will remedy itself in the course of time. The department are of opinion that, even in those circumstances, the $1\frac{1}{2}$ d. in the pound will be sufficient to enable them to do what they have promised to do, provided their estimate of the amount of money to be received is reached. It may be interesting if I state that at the first we shall need to build a hospital.

Hon. A. Lovekin: Can you tell us the amount you will receive from wages through stamps?

The HONORARY MINISTER: No, I have not that figure here. When we set about building an intermediate hospital, it

will be necessary in the first place to build a hospital of not fewer than 200 beds. And at a later stage that hospital will need to be increased to, perhaps, 400 beds. More especially will that be necessary if no provision is made in the Bill for payment to patients that enter private hospitals. A hospital of the necessary type will cost probably from £700 to £800 per bed. That will give members some idea of what an intermediate hospital of the type required is likely to cost, and will indicate the reason why, if there is any reduction in the 1½d., there will not be sufficient margin to allow the Government to proceed with the building of an intermediate hospital. It is estimated that a 200-bed hospital will cost £150,000. It must also be remembered that when we have built a hospital of that kind it must be maintained.

Hon. W. T. Glasheen: Is that the building and its equipment?

The HONORARY MINISTER: Yes, for the first 200 beds. Then it will have to be increased to 400 beds. So there will be the increased cost, and all the time there is the question of maintenance. When a start is made, it will be necessary to ensure that the various kitchens, laundries, hot and cold water supplies, etc., are provided to an extent sufficient for a larger establishment than would be built in the first place. I am advised by the department, to meet the present needs of intermediate cases, a hospital containing 200 beds is required. I am sure that by the time the hospital is available the demand will have considerably increased, and that a 400-bed hospital will perhaps not be a large enough institution within the next year or so.

Hon. Sir Edward Wittenoom: Can you tell me why there is so much illness?

Hon. A. Lovekin: It is due to bad government.

The HONORARY MINISTER: Dr. Saw may be able to answer that question. I hardly think Mr. Lovekin can blame the Government for that.

Hon. A. J. H. Saw: Does the 200-bed hospital make provision also for non-paying patients?

The HONORARY MINISTER: I should not say so.

Hon. A. J. H. Saw: Considerable allowance will have to be made for them, as the Perth Hospital is already overcrowded.

The HONORARY MINISTER: I think the estimate I have given is on the conservative side. If the Hospital Bill becomes law, a large sum of money now received by the hospital authorities from patients will not be received in future. This is estimated to amount to £75,000 per annum. We must take into consideration that large sum. Reference has been made to the fact that the Government gave an assurance that they would still continue to contribute the usual amount from revenue for hospital services. It is not intended to make any reduction in the amount provided from revenue for this purpose.

Hon. G. W. Miles: Will not any patient in the Government hospitals pay under this measure?

The HONORARY MINISTER: Not if people are contributors to the scheme. If they are in a Government hospital, the treatment will be free. Such institutions will be subsidised to the extent of 6s. a day.

Hon. A. J. H. Saw: Patients will pay more than that in certain cases in the intermediate wards.

The HONORARY MINISTER: Yes. More particularly would that apply in private hospitals. In Committee I shall have to move certain formal amendments. These are necessary because the original Hospital Bill was amended, and reference is made to several clauses which do not now appear. It may be necessary to have the Standing Orders suspended in order to deal with the Bill in all its stages to-day. I move—

That the Bill be now read a second time.

Question put and passed.

Bill read a second time.

In Committee.

Hon. J. Cornell in the Chair: the Honorary Minister in charge of the Bill.

Clause 1—Short Title:

The HONORARY MINISTER: I move an amendment—

That in lines 2 and 4 the figures "1928" be struck out, and "1929" inserted in lieu.

Amendment put and passed; the clause, as amended, agreed to.

Clause 2—Contributions to the fund:

The HONORARY MINISTER: I move an amendment—

That in paragraph (a), line 9, the words "ten, eleven, twelve and thirteen" be struck

out, and "five, six, seven and eight" inserted in lieu.

Hon. H. STEWART: If we carry this amendment, we may have to further amend the Bill when the other measure relating to it is disposed of. It would be wise to report progress until we know how the Hospital Fund Bill has been disposed of.

Hon. A. LOVEKIN: We should finish with the Bill and send it to another place, where any amendments that are necessary can be made. If we complete our task it can then be said that we have amended the machinery Bill as we think it ought to be amended, and that we have without hesitation supplied the Government with the necessary money with which to carry out the work. If we provide the money and the work is not carried out, the onus will be upon the Government and not upon us. We shall have done our part.

Amendment put and passed.

The HONORARY MINISTER: I move an amendment—

That in line 5 of paragraph (b) "nine" be struck out, and "four" inserted in lieu.

Amendment put and passed; the clause, as amended, agreed to.

New clause:

Hon. A. LOVEKIN: I move—

That the following new clause be added to the Bill:—"This Act shall continue in force until the 31st December, 1932, and no longer."

This will give the Government a year and some eleven months in which to collect the tax. I made the closing date the 31st December, although the financial year does not end then, so that the Government may, in the session that will close at about that time, bring down a tax Bill for a subsequent period. We should then have the data to show us how the fund is operating. At the same time, the new clause will not harm the Government by cutting off a tax before they have had the opportunity to bring in a new Bill.

Hon. A. J. H. SAW: I intend to support the amendment. The amount of revenue that the Government will receive from this tax is to a certain extent hypothetical, but the amount of expenditure that will be incurred under the Hospital Fund Bill is, I think, even more hypothetical. It is almost impossible for anybody to say what precise increase there will be in the cost of maintaining the hospital services either under the

Government scheme, including the payment to patients in private hospitals, or under the amendments that have been moved and accepted by this House, to exclude private hospitals. Undoubtedly in the opinion of all who have to do with the handling of patients, there will be a considerable increase both in the number of patients treated, under the new legislation, and also in the length of time the patients will remain in hospital. In those circumstances it is impossible to forecast, even approximately, what the exact expenditure will be. There is another unknown factor and that is, provided the Government pursue their policy of establishing intermediate wards, the amount of expenditure will vary according to the vigour with which the Government undertake what I maintain is their obvious duty in that respect—whether the amendments carried by this House will be accepted or whether the Bill will remain very much as the Government hope. Bearing these facts in mind, it is necessary that the time should be limited, and that at the end of a couple of years, Parliament should have the opportunity to review the situation and gauge with some degree of accuracy what amount of money will be required. Then if necessary, Parliament can reduce the amount of the tax imposed on the people.

The HONORARY MINISTER: The building of intermediate hospitals will necessitate the raising of fairly large sums of money and I do not think the amount that will be received under the proposed scheme in the first year or two will provide all that will be required for that purpose. So it will be necessary to raise money by way of loan and I am afraid that if a limit is imposed to the period that the tax will operate, it will render it almost impossible to float even a short-dated loan.

Hon. Sir Edward Wittenoom: What about Treasury Bills?

Hon. A. Lovekin: You surely do not want a permanent tax.

The HONORARY MINISTER: We want some security. We must remember that the hospitals have to be maintained after they have been built and that will mean a very large permanent increase in our hospital expenditure. As Dr. Saw has said, no one can forecast with any certainty the amount that will be raised under the scheme or the total that will require to be spent. If the amendment is carried, I am afraid it will tie the hands of the Government.

Hon. W. T. Glasheen: Will not the security of the State be sufficient for this purpose as for any other?

The HONORARY MINISTER: I should hope so, but this is a scheme that is being introduced with the object of placing the hospitals on a satisfactory basis, a basis that should not necessitate the State doing anything more out of revenue than it is doing at the present time. We cannot get away from the fact that no matter what form this measure takes, there is going to be a very large increase in the permanent expenditure on hospitals, that is, the maintenance of hospitals, and a large sum of money will be needed to do what I believe every hon. member desires the Government to do, namely, build intermediate hospitals where they are required and provide for all the contributors to the scheme. Whilst I am not in a position to give an estimate of the amount that will be required, I am afraid if there is no security beyond a couple of years as suggested by Mr. Lovekin's amendment, we shall be faced with great difficulties which will have the effect of retarding the building of intermediate hospitals. I must oppose the amendment.

Hon. A. LOVEKIN: The Honorary Minister's argument is not tenable. He wants the security of a permanent tax in order that the Government may borrow money. Every year the Government borrow money for various purposes, and there is no security that income tax will be raised. But the tax Bill is submitted to Parliament each year. The hospital tax is on all fours with the income tax and what is good in one instance should be good in the other. If this House does not keep some control over taxation, we shall find ourselves indulging in wasteful expenditure. If we make the hospital tax permanent, as the Minister desires, there will be no guarantee that intermediate wards will be built. If we retain control of the tax, and nothing is done by the Government in the course of a year or two in connection with the intermediate wards, we can then say to the Government, "You have not fulfilled your job and therefore you no longer require this amount of tax."

Hon. Sir EDWARD WITTENOOM: I intend to support the amendment and hope it will be carried. The expenditure on the intermediate wards will be entirely confined to what we can produce from the tax. If that be not so, we do not know what expenditure the Government may incur. Work

might be started to absorb unemployed and then the Government might build elaborate hospitals. There appears to be a kind of race between the different States as to which shall have the finest hospitals.

Hon. E. H. Gray: And a worthy ambition too.

Hon. Sir EDWARD WITTENOOM: Yes, provided we have the money. The Melbourne hospital is a fine institution, but it has had many endowments. In this State we have a solid debt and my idea is that the expenditure should not be beyond the additional taxation we are about to impose on the people. We should live within our means, and as we have agreed to tax ourselves to the extent of raising £225,000—which is a huge sum for a community of 400,000 people—I am justified in supporting the amendment.

Hon. J. NICHOLSON: The argument advanced by the Honorary Minister reminds me of a story. A man went to a banker to raise some money and the banker said, "Yes, what is the security you are prepared to offer?" The reply was that it was personal security.

Hon. Sir Edward Wittenoom: And it is not to be despised sometimes.

Hon. J. NICHOLSON: Probably not. The manager said, "Will you kindly step this way?" The customer stepped forward and was ushered into a big strong-room and the banker shut the door on him. Presently the banker was aroused by a serious knocking on the inside of the door and by the customer's asking why he had been locked in the strong-room. "Only for personal security," was the banker's reply. I think the Honorary Minister is desirous of gaining some personal security, and he may find the means of providing it by going inside a somewhat similar strong-room.

Hon. W. T. Glasheen: We want the security of wise expenditure, too.

Hon. J. NICHOLSON: Yes. Mr. Lovekin has pointed out that the Bill for imposing a land tax and income tax is brought down every year. This measure is nothing else than a tax on income, and I should like to know what security lenders of money have beyond what is given by the Bill introduced annually. I cannot see any justification for the Honorary Minister's argument. The security of the State is ample for all purposes, and it will be our duty to see that the necessary funds are

provided. At the same time we want to exercise some control over the expenditure of those funds. By limiting the duration of the measure we shall be extending the facilities to the Government for raising funds, facilities that are not granted under the Land and Income Tax Act.

Hon. E. H. GRAY: I oppose the amendment. The Government have treated the wealthy people of the community very generously under this measure. If the Bill involved any question of the working class clamouring for something, there might be some argument for inserting a time limit, but when there is a general demand from all sections for a hospital tax and when we know that the Government cannot carry on with a tax of less than $1\frac{1}{2}$ d., why not strike the tax and retain it for all time?

Hon. C. F. BAXTER: Parliament would be wanting in its duty if it permitted the imposition of a special tax of this kind to be made permanent. If no period were stipulated, Parliament would lose all control. I commend the amendment and hope it will be carried by a big majority, thus showing to the people that the interests of the country have been safeguarded and that they have a guarantee that the money raised will be judiciously expended.

Hon. A. LOVEKIN: The fallacy of Mr. Gray's argument is that no one knows how much will be derived from the tax or what the cost will be. We ought not to make permanent a tax to cover an uncertain position. Therefore I hope the hon. member will vote in favour of reviewing it year by year so that we can determine just what is required. If the Government had committed themselves to loan expenditure for hospitals, this House would stand up to its obligations, so there need be no fear on that score. It may be found that the Government can manage with considerably less money, or it may be that more will be required, but two years will show how we stand and enable us to form an opinion of what is required.

The HONORARY MINISTER: Mr. Nicholson compared this measure with the Land Tax and Income Tax Act. That is not a fair comparison.

Hon. J. Nicholson: Is not this an income tax?

The HONORARY MINISTER: I prefer to call it a benefit scheme. The money is to be raised for a special purpose and it is desired that the scheme should be self-

supporting. What position would the Government be in if, two years hence when the measure came up for review, members expressed themselves dissatisfied with what had been done and refused permission to carry on, notwithstanding that considerable sums had been spent on the building of hospitals that would still have to be maintained? I do not anticipate that anything of the kind will occur. I am satisfied that our department can hold its own with any similar department in the Commonwealth. It has been suggested that there might be wasteful expenditure. The member who made that suggestion should compare the records of hospital expenditure here and elsewhere.

Hon. A. J. H. SAW: But at present the department can control the expenditure. Under the Bill it will not be able to do so.

The HONORARY MINISTER: Under the Bill the expenditure will be efficiently controlled, but it will be much larger than it has been to date. I hope that as a result of this measure we shall obtain sufficient money to put the hospitals on a sound basis. For the first few years we shall be faced with extraordinarily high expenditure for the building of hospitals and intermediate wards, but after that the expenditure should not be so great. Any limitation of the measure must tend to retard the building of hospitals and intermediate wards.

Hon. A. J. H. SAW: The Honorary Minister anticipates a very large expenditure during the next few years and that thereafter the rate of expenditure will fall. If so, the rate of tax can be reduced after those few years.

Hon. E. H. Gray: Not necessarily.

Hon. A. J. H. SAW: If the hon. member were in charge, probably the rate of expenditure would not be reduced, because the Government would continue the orgy of extravagance contemplated under this Bill. If we fix the tax permanently at $1\frac{1}{2}$ d., what control shall we have, especially if the Government get their way and pay two guineas per week to patients in private hospitals? It would lead to an orgy of extravagance that would overwhelm the scheme. Unless we can secure some control by limiting the period of this tax to the next few years, so that we may see how the expenditure is going, in what manner will this Chamber be able to exercise any control whatever over future expenditure?

Hon. Sir EDWARD WITTENOOM: As regards taxation under the Bill, the expen-

diture should be limited to the proceeds. Numerous people who will not be exempt from taxation under the Bill, already have to pay to the Commonwealth and the State about 7s. in the pound of income. Mr. Gray's argument was most illogical. He said, "Here you have all the people agreed to this tax, and now we will impose it for ever." However, I do not suppose the hon. member actually meant that.

Hon. G. FRASER: I am largely in agreement with the amendment, but I fail to see that two years is sufficient time.

Hon. Sir Edward Wittenoom: It is nearly three years.

Hon. G. FRASER: It will hardly be possible to catch up the requirements of hospital accommodation in less than five years. Why not allow a fair period at the outset?

Hon. C. F. BAXTER: Because we are experimenting.

Hon. G. FRASER: The risk involved in the limitation is great. If only the metropolitan area were concerned, three years would be sufficient; but in view of the requirements of country districts I wonder at country members expressing agreement with that term.

Amendment put, and a division taken with the following result:—

Ayes	..	..	..	18
Noes	..	..	..	4
				—
Majority for	..	..	..	14
				—

AYES.

Hon. C. F. Baxter	Hon. G. W. Miles
Hon. J. Ewing	Hon. J. Nicholson
Hon. J. T. Franklin	Hon. A. J. H. Saw
Hon. W. T. Glasheen	Hon. H. Seddon
Hon. V. Hamersley	Hon. H. A. Stephenson
Hon. E. H. Harris	Hon. H. Stewart
Hon. J. J. Holmes	Hon. C. H. Wittenoom
Hon. G. A. Kempton	Hon. Sir E. Wittenoom
Hon. A. Lovekin	Hon. J. R. Brown

(Teller.)

NOES.

Hon. J. M. Drew	Hon. W. H. Kitson
Hon. G. Fraser	Hon. E. H. Gray

(Teller.)

New clause thus passed

Title—agreed to.

Bill reported with amendments.

Standing Orders Suspension.

The HONORARY MINISTER: I move—

That so much of the Standing Orders be suspended as is necessary to enable the Bill to pass through its remaining stages at this sitting.

Question put, and passed on the voices.

The DEPUTY PRESIDENT: There being no dissentient voice, I declare the motion carried by the requisite majority.

Remaining Stages.

Report of Committee adopted.

The DEPUTY PRESIDENT: During the course of the Committee discussion some doubt was expressed as to the wisdom of dealing with this Bill before the fate of another Bill had been decided. The present Bill originated in another place, and it is quite competent for this Chamber, in turn, to pass the measure through all its stages. Any amendments necessary to it as the result of the fate of another Bill, can be made by the House in which this measure originated, and it can then be returned to this Chamber for confirmation or otherwise.

Bill read a third time, and returned to the Assembly with amendments.

RETURN—LIGHT LAND, APPLICATIONS.

Debate resumed from the previous day on the following motion by Hon. H. Stewart:—

That a return be laid on the Table showing—1, Number of applications, each of more than 2,500 acres, for light land that have been received each year since 30/6/24. 2, Number of such applications that have been approved in each year. 3, Number of such approved applications that have been accepted. 4, If land tax has been imposed on any of the accepted approved applications.

THE CHIEF SECRETARY (Hon. J. M. Drew—Central) [5.41]: In moving for this return Mr. Stewart did not give one solitary reason in justification. When I first entered Parliament, and for many years afterwards, the President would not even submit a motion unless the mover gave some reason, where exceptional labour or expenditure was involved; and quite right, too, as a member, from motives

of curiosity or in order to indulge a whim, might put the State to considerable expense. I do not even suggest that it is so in the case of Mr. Stewart; but hon. members will realise, if they read the terms of the motion, that to prepare the information desired by the hon. member would occupy a good deal of the time of the officers of various departments. For instance, Mr. Stewart requires the number of applications, each of more than 2,500 acres, for light land that have been received in each year since the 30th June, 1924; also the number of such applications that have been approved in each year, the number of such approved applications that have been accepted, and what land tax has been imposed on any of the accepted approved applications. I got in touch with the Under Secretary for Lands, and he informed me that it would take the department two or three weeks to supply the information. How much time it would take the Taxation Department I do not know. The Taxation Department are not under the control of the State Government, but under that of the Federal authorities, and must be paid in hard cash for any work of this kind. Such work is regarded as overtime, and the State must foot the bill. So far as the Lands Department are concerned, there will be ample time in which to prepare the return. We are going into recess, and I suppose we shall be in recess for three months, and the Lands Department will be able to pick up the work in slack time. That will relieve the expenditure very considerably. At the same time, it will not affect the expenditure that will be incurred in connection with the Taxation Department. I would not like to oppose a motion for the preparation of a return, but I ask hon. members to exercise great care in the submission of such motions so as to keep down expenditure as much as possible. Had the hon. member stated that he wanted the return for a specified year, it would not have cost much to prepare the return. He could have conferred with the Commissioner of Taxation or the Under Secretary for Lands. I believe he did communicate with the latter officer.

Hon. H. Stewart: No; I was rung up by the department.

The CHIEF SECRETARY: If the hon. member would do what other members have done at my suggestion, and interview the officers concerned, it would make the work

much easier. If specific information were asked for, it could be made available in a brief period. In the circumstances, I do not propose to oppose the motion.

HON. H. STEWART (South-East—in reply) [5.47]: By way of personal explanation, I would like to point out that I thought from the tone of the Chief Secretary's remarks, he intended to oppose the motion. I do not desire to cause any inconvenience to the Government or to the Department.

Hon. J. J. Holmes: The Chief Secretary wanted to save hard cash.

Hon. H. STEWART: I should say it would cost some officer in the Taxation Department five minutes' work to say whether land tax had been imposed on any of the accepted approved applications.

The Honorary Minister: It would take considerable time to get out that information.

The Chief Secretary: Transfers have taken place from time to time and that sort of thing makes for complications.

Hon. H. STEWART: I do not think the matter could be more simple.

Hon. J. J. Holmes: That part of the question could be answered by "yes" or "no."

Hon. H. STEWART: Yes. I did not ask for a return dealing with that phase. As a matter of fact, I expected to receive an answer in the negative, and, of course, that part of the question would have been followed up by other questions. I have not brought this matter forward idly; the information that will be available will be valuable to the House. I gathered from the attitude of the Under Secretary for Lands, who rang me up voluntarily, that there was nothing objectionable to the request for a return except that a reply could not be given off-hand. That being so, I think the Chief Secretary should consider me justified in not taking up the time of the House in urging reasons at length why the motion should be agreed to. On previous occasions I have, at the suggestion of the Minister, moved motions pro forma in similar circumstances, and he did not raise any objections to that course. However, I think both the Chief Secretary and I understand the real position.

Question put and passed.

Sitting suspended from 5.50 to 7.30 p.m.

BILL—HOSPITAL FUND*Assembly's Message.*

Message from the Assembly received and read notifying that it had agreed to the Council's amendments Nos. 1 to 6 and 11 to 18, had disagreed to Nos. 9 and 10 and had further amended Nos. 1a, 7 and 8 and made amendments consequential on its amendments to Nos. 1a and 8, in which further amendments the Assembly desired the concurrence of the Council.

Standing Orders Suspension.

On motion by the Honorary Minister, resolved: "That so much of the Standing Orders be suspended as is necessary to enable the Assembly's message to be dealt with forthwith."

In Committee.

Hon. J. Cornell in the Chair; the Honorary Minister in charge of the Bill.

Council's amendment—No. 1a. Clause 2.—Delete the words "or the person in control of a private hospital," in lines 24 and 25.

Assembly's modification—Strike out the word "delete" and substitute the word "amend," and add after the word "hospital" the words "to which this Act applies."

The CHAIRMAN: The Assembly's reason for disagreeing to amendment No. 1a is—"Because it is against the principle of the Bill."

The HONORARY MINISTER: I move—

That the amendment made by the Assembly to the Council's amendment be agreed to.

Hon. A. J. H. SAW: It is difficult to follow exactly the effect of the Assembly's amendment. If I interpret it rightly it means that the amendment made at my instigation shall no longer stand, but that the words, "or the person in control of a private hospital" shall be restored to the definition of "hospital authority" as in the original print of the Bill. Is not that so?

Hon. A. Lovekin: The Assembly wants to put in the words "to which this Act applies."

Hon. A. J. H. SAW: Does it not mean that the amendment I moved goes by the board in favour of something else?

The Honorary Minister: That is as I understand the amendment, when read from the Chair. Further amendments have been made which provide for other than public hospitals.

Hon. H. Seddon: Cannot we have these amendments put before us in typewritten form?

Hon. A. Lovekin: The principle is vital and we should be quite clear as to what we are doing.

Hon. A. J. H. SAW: This aims at the most vital principle of the Bill. We should disagree with the motion of the Honorary Minister and restore the amendment as it was made by this Chamber.

Hon. Sir Edward Wittenoom: Progress should be reported until we have had an opportunity to go through these amendments.

The HONORARY MINISTER: If the Chairman were to leave the Chair for half an hour or so, I think arrangements could be made to supply every member with a complete copy of the amendments made by the Assembly. That would be more satisfactory to all concerned.

The CHAIRMAN: In deference to the wishes of the Committee I will leave the Chair for a short while.

Sitting suspended from 7.52 to 8.15 p.m.

Hon. A. J. H. SAW: We have now to deal with the vital principle that there shall be no subsidy of two guineas per week to patients entering private hospitals. Perhaps it would facilitate the business of the Chamber if we agreed to take the vote on this particular motion of the Honorary Minister as a test vote, because the same principle enters into various amendments which will come on later, amendments which I moved, which were agreed to by this Chamber, and to which the Assembly has disagreed. We might debate this particular amendment, and then need not thrash out the matter ad nauseam on subsequent amendments. I do not know whether that course would suit the Honorary Minister.

The HONORARY MINISTER: The whole of the argument, I assume, will turn upon this question of private hospitals. Another place has made an amendment to an amendment agreed to by this Chamber with reference to Clause 10. If it is permissible for the other amendments made by another place to be debated at the same time, so that the whole of the information may be placed before the Committee, I

would be agreeable to Dr. Saw's suggestion; but if the discussion is to be limited to amendment No. 1a, without reference to the further amendments, I am afraid I cannot agree to the suggestion.

Hon. A. J. H. SAW: Do the forms of the House permit us to discuss Clause 10 at the same time as this motion? I am not sure whether they do. I have no desire to burke discussion at all, or to withhold any information which the Committee ought to possess.

The CHAIRMAN: Amendment No. 8, referring to Clause 10, is identical with amendment No. 1a. Therefore a general discussion can ensue.

Hon. A. LOVEKIN: The whole barrier between the two Houses is on the question of private hospitals, and at the present moment the barrier seems insurmountable from either side. I would suggest that the only means of solution which may, to some extent, satisfy both Houses is by a conference between them. I think Dr. Saw's suggestion an admirable one, because we do not want to go over this ground many times on exactly the same point. If the Honorary Minister will accept that a division on this amendment is a decision of the Committee with regard to private hospitals, is it of any use for him to put up the amendment to Clause 10, which is a repetition of this amendment? Perhaps we may take a quick test vote on amendment No. 1a, if the Honorary Minister wants it; and in the event of our insisting on our amendment, then, if we reverse our decision on Clause 10, we can come back and adjust the previous decision, though I do not think there is much chance of that.

Hon. A. J. H. SAW: I moved previously the deletion of the words "or person in control of a private hospital," and the House carried my amendment. I moved it not out of any antagonism to private hospitals either in general or in particular, but because I thought the proposal in the Bill would lead to a great waste of public money, money which the contributors to the fund will supply. I did not elaborate that argument, because I read some of the evidence taken by the select committee, which seemed to me conclusive. May I inform the Committee why I think that the proposal to pay two guineas per week towards patients in their own private hospitals will lead to great extravagance and inflict serious injury on

the funds to be accumulated under the measure? In the first place, patients who go into private hospitals have now to pay their own fees, and are naturally anxious to leave the hospital as soon as they are sufficiently well to return to their own homes; but once we start paying such patients a subsidy of two guineas per week so long as they stay in the hospital, they will be inclined to stay there for a longer period than is really necessary, because so long as they are there they will be saving their board and lodging, for which they would have to pay if they were outside. So that undoubtedly the tendency will be for patients to stay in hospitals for longer periods. Taking cases in the mass, the average period patients remain in a private hospital is at present between two and three weeks—in some cases longer, and in some cases considerably shorter. Take the case of a man who should be at work if he were well, who is well enough to leave the private hospital and return home; he is not fit to work, and if he goes home, or if he goes, as many who enter private hospitals will do, back into lodgings or into a hotel, he will naturally have to pay for his board and lodging there, whereas if he stayed in a private hospital he would receive a considerable contribution towards his upkeep through the subsidy of two guineas per week. It has to be realised that in some private hospitals a patient can remain for two guineas per week, and in other cases for three guineas per week. As a result there will undoubtedly be a tendency for patients to prolong their stay in hospital beyond what is necessary. That is not only my opinion, but the opinion of the three ex-C.R.M.O.'s, and the present C.R.M.O. of the Perth Hospital, who gave evidence before the select committee. It is also the opinion of every medical man whom I have talked on the subject. From a long experience of patients I am firmly convinced that that is so. And not only will they stay longer in a private hospital but they will enter private hospitals for much more trivial reasons than at present—because they are unable to go to work and because it will be cheaper to enter a private hospital than to stay in their own homes or in lodgings. We know the great scandal which has arisen in connection with the Workers' Compensation Act, and I am sorry that some of the provisions of that Act were so readily agreed to by this Chamber. Of one in particular I was not in

favour, and I tried to get the amount reduced, but was unsuccessful. However, every medical man, and every insurance company, and the Government—because they have their own insurance company—know of the great waste of money that is occurring through certain sections of the Workers' Compensation Act. A friend of mine who stayed in his own home—who did not enter a private hospital as a patient—had a poisoned finger. It was necessary for him to have that poisoned finger dressed and therefore, after the acute stage had passed, he went daily to a private hospital to have the advantage of getting his finger dressed there. Whilst he was doing that, he saw several other patients there who were inmates of the private hospital and were suffering from poisoned fingers. Having a clinical eye, he noticed that the condition of their fingers was not so bad as that of his own. He said to the doctor who was attending him, "How is it that these people, who appear to be working men, can afford to enter a private hospital and stay there as patients in order to have their fingers treated, whereas I come down here every day to have my finger dressed?" The doctor replied, "Oh, they are workers' compensation cases, and the insurance companies pay." Exactly the same thing will happen if this present proposal of the Government is agreed to. We will have all kinds of trivial cases taken into private hospitals, and the patients will stay there until they consider themselves fit to return to work. The Government, in deference, I suppose, to certain comments I made in this Chamber, gave notice of an amendment to deal with this phase of the question. The Honorary Minister, in replying to some remarks I made a few days ago, went on to enumerate the amendments, of which the Government had given notice, and I at once answered that the Government's scheme would not work. Under their proposal, no one would be able to secure the benefits provided by this legislation and be admitted into a private hospital unless he first went to the chief resident medical officer of a public hospital, or some other medical officer appointed by the Minister for the purpose, and secured from him an order for admission. When the Minister outlined the scheme, I interjected that in acute cases the patients would probably die before the necessary permission could be secured. The Government promptly dropped

that proposal, and submitted another that we have before us this evening. I intend to deal with the latest proposal and to point out why I do not think that the provisions of the amendments will obviate the particular objections I have to the Government scheme. In the first place, the amendment to Clause 10 seeks to differentiate between the various private hospitals, and in order to do that, it is proposed to set up an advisory board which will consist of five persons to be appointed by the Governor, two of whom shall be appointed on the recommendation of the British Medical Association. The members of the advisory board are to advise the Minister in making regulations dealing with private hospitals and dividing them into various classes. They will make fish of this one, fowl of that one, and good red herring of a sort of others. Then the Government amendment reads—

For the purposes of this Act, standards for hospital equipment, nursing, or other services in private hospitals shall be prescribed by regulation; and only such hospitals as comply with such standards and receive the certificate of the principal medical officer to that effect shall be recognised as private hospitals to which this Act applies.

That is not a workable provision by any means! Under it the Government will purport to differentiate between this private hospital and that private hospital, although both have been registered and have received the permission of the Health Department to carry on. Certain of the private hospitals are to be entitled to take patients who will receive the benefit of the payment of £2 2s. per week from the hospital fund, whilst others are not to be placed in the same position. I do not think that a proposal like that should have emanated from what purports to be a democratic Government. It cannot be workable: it will give rise to too much outcry on the part of those who will be mostly affected. The man who is sick and wishes to go into a private hospital will be intensely annoyed when he finds out that the private hospital of his choice has not received recognition from the Minister who has acted on the advice of the advisory board. We do not all have the same standards regarding what we consider to be the requirements of a private hospital any more than we have the same standards regarding our pleasures or our work. Fortunately, all of

us do not like the same girl; and, similarly, all of us do not like the same variety of private hospital. The Government's proposal seeks to take away from an individual certain of his rights and to provide power to say to him, "You cannot go into 'X' hospital; you must go into 'A' hospital." That scheme will not work at all. Then the Government's proposal reads—

The person in control of any recognised private hospital shall, within 48 hours of the admission of any patient, notify the department thereof in the prescribed form. If the principal medical officer is of the opinion, then or subsequently, that the physical condition of any patient, or the disease from which he is suffering, is such as not to warrant hospital care or the continuance of hospital care, then he shall notify the patient and the person in control of the hospital accordingly, and no payment of benefit shall accrue thereafter.

Let us consider what that means. First of all, the patient goes into the private hospital thinking he will receive the bonus of £2 2s. a week from the hospital fund. Then the principal medical officer tells him that he cannot be brought within that category. He will say to the patient, "You are here. That is an accomplished fact, but you cannot derive any benefits from the hospital fund." The Government's proposal does not say how the principal medical officer is to get his information that will give him the necessary particulars on which he can base his judgment as to whether the condition of the patient is such as to warrant his sojourn in the private hospital.

Hon. A. Lovekin: They can go to arbitration!

Hon. A. J. H. SAW: The only particulars that it will be possible for the principal medical officer to have will be those that will be supplied on the prescribed form by the person in control of the recognised private hospital. Thus the particulars available will not be those supplied by the doctor attending a patient but by the matron of the hospital. A matron is not competent to fill up particulars, even if they are in a prescribed form such as will enable the principal medical officer to judge whether the patient comes within the four corners of this legislation. Even if the particulars on the prescribed form were filled up by a medical man, the principal medical officer would have to exercise a considerable amount of discretion in reading between the lines of the particulars made available to him. Then,

again, we do not know what the prescribed form will contain. There may be provision in the form for a diagnosis, but the diagnosis may not be sufficient. So far as I can see, the only way to give effect to this proposal will be for the principal medical officer, or some highly qualified medical man, to visit the patient and report upon his condition. I do not see any other way.

Hon. Sir Edward Wittnoom: Will the payment for that come from the £2 2s. a week?

Hon. A. J. H. SAW: I do not know.

Hon. J. J. Holmes: Who will be responsible while all this is going on?

Hon. A. J. H. SAW: We will deal with that later on when we come to the question of an appeal. The only way to remedy the difficulty will be to have a reputable medical man to personally inquire into each case. I do not say that course is desirable; I believe it is not desirable. Every medical man and every patient resents any interference with the relationship that exists between a medical practitioner and his patient—and rightly so. If another medical man is to be deputed under a system of espionage, so to speak, to carry out this task, there will be endless trouble. These so-called safeguards will not work any more than would have the proposal that the Government formerly advanced but dropped as the result of one solitary interjection from me. The principal medical officer, on absolutely insufficient evidence, will have the right to say whether a patient shall, or shall not, remain in a private hospital, and under the Government's proposal, any patient dissatisfied with the decision of the principal medical officer may appeal to the Minister. I do not know what the Minister will know about it. I do not know whether the Honorary Minister will administer this legislation.

The Honorary Minister: I hope not.

Hon. A. J. H. SAW: I hope not, too, because with this proposal of the Government's included in the measure, the task of administration will be no bed of roses. Fancy the political pressure that will be brought to bear on the Minister administering the Act by his constituents or others who wish to become patients in a private hospital and receive the benefit of the payment of £2 2s. per week while they are there, and who may resent the action of the principal medical officer who, on insufficient evidence, has said that they can-

not remain there! Then the Government scheme provides—

Any patient dissatisfied with a notification of the principal medical officer may appeal to the Minister. Such an appeal shall be referred to the Minister and determined by a medical practitioner to be agreed upon between the principal medical officer and the medical attendant of the patient concerned, or in the event of disagreement, to be appointed by the Minister.

Here there is additional expense. Unless the appeal is meant to be a sort of rubber stamp affair, a man who is a highly qualified medical practitioner will have to be nominated to finally decide the point. Probably one medical practitioner will not be able to cope with all appeals and possibly two such men will be required to deal with them. Then the scheme provides that the decision of the medical practitioner, who will be the medical referee, is to be final; and if the appeal fails, the patient is to be liable to pay to the department the cost of the appeal or such portion thereof as the Minister may think fit. Just fancy the position! Here we have a patient who is sick and unable to work. He enters a private hospital, but as the result of the decision of the principal medical officer he is refused permission to stay there and he is turned out. He appeals and the matter is dealt with by the appeal board. I presume the patient will require to secure medical evidence to support his claim. Unless he does that he will not have much chance of securing consideration and satisfaction from the medical referee. In these circumstances I presume such a course will be necessary, and the patient will have to see to it that he has medical evidence.

Hon. G. W. Miles: That is, if he is still alive!

Hon. A. J. H. SAW: All this goes to show that the alleged safeguards the Honorary Minister is so anxious we shall debate, have no value, but, on the other hand, will do harm by creating friction between the private practitioner and his patients, between the Medical Department and the private practitioner, and between the private practitioner and the medical referee. The whole scheme is unworkable, yet the decision of the medical referee is to be final. When the Workers' Compensation Act was under consideration and I wished to make the decision of the medical referee final, the Government would not agree and they

secured instead the insertion of a medical board, whose decision should be final. But the Government have never appointed that medical board, preferring to flout the decision of Parliament. So I do not know how far they will respect the decisions of Parliament on the Bill before us.

Hon. J. Nicholson: Will there be sufficient in the fund to pay for all this?

Hon. A. J. H. SAW: It will not all come out of the fund; much of it will come out of the unfortunate appellant. Where he is to get the money from, the Bill does not say. Those, really, are the main objections I had when I first saw in the Bill this reference to private hospitals. But there is another objection I can see, namely that so much money will be required under this provision for the payment to patients in private hospitals that there will be no money left for the establishment of community hospitals. The Government, by insisting upon this payment to patients in private hospitals, are doing a most extraordinary thing. For I understood that one of the principles of a Labour Government was to support State enterprise. Instead of that, in this instance they are proposing to do something which will take away any chance of their starting community hospitals, and they are going to bolster up subsidies to private hospitals. I do not know where their political principles have gone to. It remains for this House to uphold the standard of what is really legitimate State enterprise, that is to say, the State enterprise of looking after the welfare of the sick. That is what we propose to do. We have no objection to State enterprise when it is properly directed, in this line, as in other lines such as telegraphs, railways and so on. I have always maintained that it is the duty of the State, through the Government, to look after the sick. Certainly it is the duty of the Government to look after the sick poor and to do what they can for those who may be able to pay something towards their maintenance in hospital, but are not able to pay the whole of the charges of the higher class of private hospitals. The establishment of intermediate wards will supply that want and enable those who cannot afford to pay to go in free: and those above that class, who like to pay something, will be able to go into the wards and pay what they can, while those better off will be able to get every hospital advantage and pay full

rates for it. As I said before, this idea of community hospitals is not new. The only thing that is new are the proposals contained in this Bill to subsidise patients going into private hospitals which, so far as I know, does not obtain in any other part of the world. The reason why it does not obtain in any other part of the world is because elsewhere than in Western Australia it has been seen to be not practicable.

Hon. E. H. Gray: Do the people in any other part of the world pay a hospital tax?

Hon. A. J. H. SAW: If not, they must do the same as we have been doing all these years, during which we have been keeping the hospitals by means of general taxation. As I say, it is no new thing. The only new thing is that payment has to be made by a certain class that in the past has reaped all the advantages without paying anything. Now that class is to pay something, but is to receive a benefit in the form of free hospital treatment. Let me say a word about the British Medical Association. It was in the financial interests of the medical profession that this Bill should have gone through in the precise form in which the Government brought it down. Members of the medical profession were approached by the department and asked to give their blessing to the Bill. They refused. They have condemned the principle of subsidies to patients in private hospitals, and they strongly advocate that the Government shall at once take steps to provide community hospitals.

Hon. J. Nicholson: Notwithstanding that the original Bill would have been of material advantage to them.

Hon. A. J. H. SAW: It would have been very much to their financial interests if the Bill had gone through in its original form. I do not wish the public to misunderstand my attitude in opposing the provisions contained in the Bill, which have been brought in by this democratic Government.

The HONORARY MINISTER: I cannot agree with the contention put forward by Dr. Saw, and I should like to deal with one or two of his arguments. Almost his first remark was that if this proposal were agreed to it would mean a waste of public money. I cannot understand anybody considering it a waste of public money to return to the taxpayer something for contributions paid over a period of years in order that he might receive hospital attention

when he required it. Surely that is not a waste of public money.

Hon. A. J. H. SAW: It involves a waste of public money in the way I indicated.

The HONORARY MINISTER: One might find that here and there a person would endeavour to take advantage of the situation created by the passage of such a Bill. But it does not matter what scheme we might bring forward, we should still find some people prepared to take advantage of it, in some cases not in a legitimate fashion. It is not the sick poor that are to be blamed on every occasion. Dr. Saw's remarks this evening constitute a very grave reflection upon many members of the medical profession of this State.

Hon. A. Lovekin: Oh, I think you are wrong.

The HONORARY MINISTER: The doctor dealt with the Workers' Compensation Act and told us of a friend of his who, suffering from a poisoned finger, visited a private hospital to have the finger dressed. There he saw two or three other patients with poisoned fingers, but whose fingers were not quite so bad as his own. On making inquiries he found they were workers' compensation cases and that the insurance companies were paying for the hospital treatment. Knowing the doctor as I do, I must accept his statement.

Hon. A. J. H. SAW: It is perfectly true.

The HONORARY MINISTER: Who was responsible for those men being in that hospital?

Hon. A. J. H. SAW: The doctor and the patients.

The HONORARY MINISTER: When a man is advised by his doctor to go into a hospital, naturally he will go. Who is going to reap the benefit, if not the patient?

Hon. G. W. Miles: You know there are doctors that have done this.

The HONORARY MINISTER: The suggestion is that the doctor seeks to detain the patient in hospital, receiving his fees all the time. That, together with other remarks by Dr. Saw, constitute the greatest reflection I have ever heard on some of the medical profession in this State. The hon. member seriously puts it forward that we should take that into consideration in dealing with this Bill.

Hon. A. J. H. SAW: Under this Bill you will get much worse than that.

The HONORARY MINISTER: It is suggested that we should refuse to give to contributors under the scheme the 6s. per day while they are inmates of a private hospital—which, by the way, will be of a special standard—where there is at least a sufficient safeguard to prevent the Act being abused. All that the Government ask is that we should be fair. If we are going to compel a person to pay in accordance with his income, and that for an indefinite period, then we have to be prepared to give to him that which he has paid for, namely, hospital treatment when he requires it. At the present time, we have not in Government hospitals sufficient accommodation to cater for all those requiring attention. We all know the position at the Perth Hospital and at the Children's Hospital and other hospitals. From time to time public appeals are made with a view to raising the necessary funds.

Hon. A. J. H. Saw: The amendments made by this House will help those appeals.

The HONORARY MINISTER: Here is an effort that will meet the situation, at all events until such time as intermediate wards can be built. I do not say that nobody will abuse the provisions of the Bill. It would be a wonderful measure and a wonderful administration if it were made impossible for anybody to take advantage of a scheme of this kind. What does Subclause 4 of Clause 10 really stand for? Dr. Saw has put forward his side of the question. He says there will be a tendency to stay in hospital. I again ask, who will be responsible for that tendency?

Hon. A. J. H. Saw: Human nature.

The HONORARY MINISTER: Not the patient, but the doctor who is responsible for his being there. We contend it is quite possible for the Principal Medical Officer to have sufficient knowledge of the case to say whether it is right that the patient should continue to stay in hospital or not.

Hon. H. A. Stephenson: How could that be done?

The HONORARY MINISTER: There is already provision in the Health Act for the appointment of a medical inspector who could make the inspection in cases where there was suspicion that the measure was being abused. I hope members do not hold that every person who goes into a private hospital is going to be a fit subject for investigation of

that kind. Many medical men, and quite a few in the metropolitan area, are keenly interested in some of our private hospitals.

Hon. A. J. H. Saw: Interested financially?

The HONORARY MINISTER: Yes.

Hon. A. J. H. Saw: That is news to me.

The HONORARY MINISTER: It is so.

Hon. A. J. H. Saw: Are they going to be recognised by your advisory board?

The HONORARY MINISTER: Not unless they can comply with the standards. I am not going to suggest that those medical men would keep their patients in hospital longer than is necessary, but the experience of Dr. Saw regarding the Workers' Compensation Act leads us to believe it is possible that sort of thing would be done. The clause is framed to defeat any such attempt.

Hon. J. J. Holmes: This measure will apply to the whole State.

The HONORARY MINISTER: Yes.

Hon. J. J. Holmes: Then how many hundreds of inspectors will you want?

The HONORARY MINISTER: Hundreds will not be required. Dr. Saw also said that patients would enter private hospitals for trivial reasons. If they do, that will be the fault not of the patients, but of the medical men.

Hon. A. J. H. Saw: I do not care whose fault it is; the fact remains and the patients will have to be paid for out of these funds.

The HONORARY MINISTER: There is a big division of opinion on the principle of the Bill. We say we must give a return for the money we compel people to contribute to the fund.

Hon. Sir Edward Wittenoom: Then why do not you give us a return for the income tax?

The HONORARY MINISTER: If the position is going to be as bad as that indicated by Dr. Saw there is certainly every argument for building intermediate hospitals as early as possible, but it is just as strong an argument why we should be in a position to provide facilities for people to receive treatment for which they have paid and to which they are entitled. Dr. Saw criticised the Department of Health and its attitude to private hospitals. He said the Health Department was responsible for the registration of private hospitals, some of which, on his own showing, are not suitable hospitals for the reception of patients under this scheme.

Hon. A. J. H. Saw: I did not say so.

The HONORARY MINISTER: Right through the piece that argument has been used.

Hon. A. J. H. Saw: You have never heard me use the argument. I had to remind you the other night that some argument you attributed to me had not been used by me.

Hon. J. J. Holmes: That is a common occurrence with him.

The HONORARY MINISTER: If the hon. member did not say it, he inferred it. Otherwise what does his argument mean? He said the Health Department was responsible for the registration of private hospitals. I thought he knew better than that. The local authorities are responsible, and their ideas are entirely different from those of the Health Department. I do not think the hon. member desired to criticise the Health Department because on other occasions I have heard him speak differently of its activities.

Hon. J. J. Holmes: Is not a local authority a health authority?

The HONORARY MINISTER: It is not the Health Department, and Dr. Saw referred to the Health Department.

Hon. A. J. H. Saw: I do not know whether the innuendo is that I was trying to mislead the Committee. What I said about the registration of private hospitals was a slip. I know they are registered by the local authorities. That, however, does not affect my argument in the least.

The HONORARY MINISTER: The hon. member was definite in stating that a single interjection had resulted in the Government's withdrawing their previous proposal and substituting this one. When the Bill was returned to another place it was subjected to criticism, and the Government were prepared to accept what they considered was an improvement on the original suggestion. One portion of the proposal sets forth that only such hospitals as can comply with certain standards shall be recognised. I cannot see anything wrong with that. Members desire that private hospitals should be efficient, and the Government say they should comply with the standards set by a medical board, two of whom shall be nominated by the British Medical Association. The other three, I assume, will probably be members of the B.M.A., so the medical profession can hardly complain at that. Dr. Saw said the Government had approached the B.M.A. and asked for their blessing on the Bill.

Hon. A. J. H. Saw: I said the department had approached them and assumed it was with the consent of the Minister.

The HONORARY MINISTER: I wish to give as strong a denial as possible to that statement. It is not true.

The CHAIRMAN: The Honorary Minister had better say it is not correct, not that it is not true.

The HONORARY MINISTER: Very well, I shall substitute the word "incorrect." The British Medical Association are naturally interested in the subject, and the department out of courtesy referred the proposal to them, but never asked for their blessing. I believe that interviews have taken place from time to time between representatives of the British Medical Association and the Minister for Health.

Hon. J. Nicholson: With regard to the provisions of the Bill?

The HONORARY MINISTER: Yes. The clause provides also that a person in control of any recognised private hospital shall, within 48 hours of the admission of any patient, notify the department thereof in the prescribed form. I see nothing wrong with that. I assume the form would contain particulars of the medical or surgical condition of the patient and the probable duration of the case.

Hon. A. J. H. Saw: Would the matron of the hospital fill in those particulars? Extraordinary!

The HONORARY MINISTER: The hon. member said the provisions would be unworkable. Quite a lot of things are unworkable until we try to make them work. It would be a wonderful piece of legislation with which no fault at all could be found. When a fault is discovered, it can be remedied. I would not let any consideration of that kind stand in the way of providing hospital treatment for people who are entitled to it.

Hon. G. Fraser: In other words, you do not want to take money from them under false pretences.

The HONORARY MINISTER: No, I would not be a party to that. There may come a time within the next year or two when, owing to the operation of the measure we shall have sufficient accommodation in intermediate hospitals to be able to cater for all the people entitled to receive attention. The clause provides that the Principal Medical Officer may terminate the payment of any benefit under this scheme. When de-

termining that, he would have before him the notice of admission, and the report of the medical inspector, and would also be guided by his knowledge of the disease and of hospital usage. Only isolated cases would need to be investigated.

Hon. A. J. H. Saw: How would you find the isolated cases?

The HONORARY MINISTER: The small percentage would be discovered by the medical inspector and it would be comparatively easy. Even if it were not easy, are we to say that because one or two people would take advantage of the position, we should deny to thousands of other people the right of hospital treatment after they have been compelled for years to pay into the fund?

Hon. A. J. H. Saw: Evidently you are not going to put intermediate hospitals into effect for years and years.

The HONORARY MINISTER: I assure members they will be erected as early as possible, provided the money is available. This scheme will make sufficient money available.

Hon. H. Seddon: After providing for private hospitals?

The HONORARY MINISTER: Yes.

Hon. G. W. Miles: That is news.

The HONORARY MINISTER: It is not news; I have made a similar statement before.

Hon. G. W. Miles: You argued the other way. Last night you said you wanted the extra money for intermediate wards.

Hon. A. Lovekin: And now you are arguing another way.

The HONORARY MINISTER: I am not arguing any differently now. Right through the piece I have maintained that if the Bill is passed, there will be a surplus over and above the expenditure on hospitals.

Hon. G. W. Miles: And pay interest on £150,000 on a new hospital?

The HONORARY MINISTER: Yes.

Hon. G. W. Miles: And what about the private hospitals?

The HONORARY MINISTER: This includes the payment for patients entering private hospitals. I make that statement on the advice of the Committee that went into the financial aspect of the question.

Hon. E. H. Harris: You are contradicting what you said last night.

The HONORARY MINISTER: No. If the Bill becomes law, the revenue will be approximately £217,000 a year. After pro-

vision is made for all hospital services, including payments to patients in private hospitals, there will be a surplus which the Government have undertaken to devote to the building of intermediate hospitals and wards.

Hon. G. W. Miles: After losing £75,000 from patients.

The HONORARY MINISTER: Yes.

Hon. A. Lovekin: How much do you propose for private hospitals and how much for public hospitals?

The HONORARY MINISTER: The estimated revenue from contributions is £217,762. The cost of administration will be approximately £5,000.

Hon. A. J. H. Saw: You said £10,000 this afternoon.

The HONORARY MINISTER: There is a difference between the cost of administration and the cost of administration and collection. Public hospitals will absorb £130,000 and private hospitals £29,000. The 10 per cent. increase on the present bed average will be £15,000 and the surplus available for hospital services generally will be approximately £32,000. If the Chamber persists in its attitude, many years will elapse before the essential intermediate hospitals are built. It would be necessary to raise a loan for the building of such hospitals. Without security we cannot do that under this scheme, and it might be necessary to draw upon general revenue to meet the situation.

Hon. A. Lovekin: You have accounted for a total expenditure of £259,000, for which you propose to get £217,000. What becomes of the £75,000 from patients?

The HONORARY MINISTER: That comes into the £217,000. The revenue we now have is £75,000 from the patients plus the money contributed by the Government, plus that which comes from appeals. We must prevent abuses of the Act, and the clause is designed to do that.

Hon. A. J. H. Saw: It looks very well on paper.

The HONORARY MINISTER: Yes, and it is a good clause. Members can, of course, make the Bill appear unworkable. I admit there are some phases of it which may not work as smoothly as we would like. We should, however, give them a trial. I will not be a party to inflicting taxation upon individuals without giving them something in return for it.

Hon. A. J. H. Saw: You have been doing that all your political life.

The HONORARY MINISTER: Not at all. Out of the contributions made by the people the Government will be prepared to subsidise them for hospital treatment. I cannot agree to the amendment.

Hon. A. LOVEKIN: After the stonewalling we have witnessed, I do not want to impose further delay upon the Committee. I would point out, however, that the bulk of the money we have all been paying in taxation has been going to hospitals, and yet it is impossible for most of us here to enter one of those institutions as a patient.

Hon. A. J. H. Saw: And under the Bill it will be equally impossible for us to do so.

Hon. A. LOVEKIN: The practice is going on every day. It is therefore nothing new.

Hon. E. H. GRAY: Evidently most members have made up their minds to vote against the Government's clause.

Hon. J. J. Holmes: Then why go on talking about it?

Hon. E. H. GRAY: Because I resent Dr. Saw's insinuations against the workers, more particularly when he referred to the alleged compensation for poisoned fingers. If I were not so kindhearted, I could flay him alive. He says the B.M.A. refuses to take advantage of the money they could make under this Bill. He then proceeds to point out cases of abuses under the Workers' Compensation Act. Who caused those abuses? The same doctors, the same association. Who diverted cases from public hospitals to private hospitals under the Workers' Compensation Act? The members of the British Medical Association. Dr. Saw's argument, if it can be maintained, applies against the hospitals at the present time. If the argument is sound, every country hospital will be full when this measure has come into force. The Perth Hospital will then be filled with unemployed. Dr. Saw is blaming human nature for supposed abuses. The moral standard of the working class is much higher than that of the class Dr. Saw represents in this Chamber. There are more rooks and crooks among people with money than among the workers. How is it the Fremantle hospital is not full of unemployed? Because the workers there have a higher standard. Even now the Perth Hospital cannot cope with the claim-

ants for admission. I cannot imagine the worker in receipt of the daily subsidy of 6s.—for which, by the way, he first has to pay—malingering in a public hospital. It would be far cheaper for him to go home. No private hospital of standing charges less than four guineas per week.

Hon. A. J. H. Saw: There are some charging two guineas per week.

Hon. E. H. GRAY: Possibly hospitals run by members of Dr. Saw's profession. Members of this Chamber cannot shield themselves behind Dr. Saw's speech as a reason for defeating the Bill; the responsibility for such a defeat will rest on members generally. The proposal has been before the public for many months, through the Press, and Dr. Saw's proposition is only put forward when the measure reaches this Chamber.

Hon. H. SEDDON: This is really a question between the Legislative Council and the Government. I contend that the real reason for the introduction of the hospital tax is to put the hospitals on a sound foundation, and to see that the women who give their lives to the nursing profession shall receive adequate pay and work reasonable hours. A further reason is that the hospitals shall be properly equipped. The Government, however, have gone further than that. They have endeavoured to make the scheme wider by giving to every contributor to the fund a right to hospital treatment. That is the great difference between this Chamber and the Government.

Hon. J. Nicholson: And the Government do that before they are ready with their institutions.

Hon. H. SEDDON: They should have had in hand plans for the accommodation offered to the public, instead of going outside the scope of reasonable parliamentary finance and giving assistance to private commercial institutions. Such a step could not be taken by any Chamber without the most serious consideration, and I am in full accord with the attitude adopted by the Council in declining to accept such a principle. I asked the Honorary Minister the other evening what steps the Government had taken to establish intermediate hospitals. He said that they had given the matter their most serious consideration. Beyond that I could get no definite answer. I hope a definite answer will be forthcoming before this discussion closes. If the provision referring

to private hospitals is deleted from the Bill, the position of the person who now contributes to hospital funds and who is to contribute under the Bill, will be no different from what it is to-day. If he is desirous of receiving hospital treatment, there is no reason why during the period that elapses between the present time and the establishment of intermediate hospitals he should not continue to contribute to existing hospital funds.

Hon. E. H. Gray: Then he will be contributing twice.

Hon. H. SEDDON: Yes, because of the failure of the Government to provide what they promise to supply under the Bill.

Question put, and a division taken with the following result:—

Ayes	..	..	..	6
Noes	..	..	..	16
Majority against				10

AYES.

Hon. J. M. Drew	Hon. E. H. Gray
Hon. J. Ewing	Hon. W. H. Kitson
Hon. G. Fraser	Hon. C. H. Wittenoom
	(Teller.)

NOES.

Hon. J. R. Brown	Hon. G. W. Miles
Hon. J. T. Franklin	Hon. J. Nicholson
Hon. W. T. Glasheen	Hon. A. J. H. Saw
Hon. V. Hamersley	Hon. H. Seddon
Hon. E. H. Harris	Hon. H. A. Stephenson
Hon. J. J. Holmes	Hon. H. Stewart
Hon. G. A. Kempton	Hon. H. J. Yelland
Hon. A. Lovekin	Hon. Sir E. Wittenoom
	(Teller.)

Question thus negatived; the Assembly's modification of the Council's amendment not agreed to.

Hon. A. J. H. SAW: Is it necessary to insist on our amendment now, Mr. Chairman?

The CHAIRMAN: No.

No. 7 (first part); Clause 9, subparagraph (i) of paragraph (e):

Assembly's modification—Strike out the words "all matters pertaining to such deduction of contributions and payment to the Commissioner shall be subject to regulations under this Act."

The CHAIRMAN: The Assembly's reason for amending the council's amendment is:—"Because provision is made in Clause 15."

The HONORARY MINISTER: I move—

That the amendment made by the Assembly to the Council's amendment be agreed to.

Clause 15 provides that the Governor may make regulations, not inconsistent with the measure, prescribing all matters which by the measure are required or permitted, or which are necessary or convenient to be prescribed for giving effect to the Bill. It is considered that Clause 15 provides sufficient power, and that therefore the Council's amendment is not necessary.

Hon. A. LOVEKIN: At the outset I was inclined to agree to the Assembly's modification, but now that the Bill will have to go to a conference of managers, we should insist upon our amendment with a view to securing the inclusion of some definite provision dealing with the collection of the tax on behalf of the Commissioner. Unless something definite is included, difficulty may be experienced regarding the provisions of the Truck Act, which set out that no deductions shall be made from wages. We cannot impliedly repeal the provisions of the Truck Act by way of regulations, but we can do so by way of statutory enactments. If we leave the matter to be dealt with by regulations only, difficulty may arise under that head. I suggest that we negative the Honorary Minister's motion in order to have the matter dealt with definitely.

Question put and negatived; the Assembly's amendment on the Council's amendment not agreed to.

No. 7 (second part). Clause 9.—Subclause 4. Assembly's modification—strike out the sub-clause.

The CHAIRMAN: The Assembly's reason for amending the Council's Amendment is:—"Because the money concerned is on loan which has to be repaid."

Hon. A. LOVEKIN: I think we should agree to the Assembly's amendment. The person who borrows money from the Agricultural Bank should not be placed in a different position to the person who borrows from another bank.

The HONORARY MINISTER: I move—

That the amendment made by the Assembly to the Council's amendment be agreed to.

Question put and passed; the Assembly's amendment to the Council's amendment agreed to.

No. 8. Clause 10, Subclause (3).—Delete the words "in a private hospital or," in lines 6 and 7.

Assembly's modification.—Strike out the word "delete" and insert the word "amend," and insert the words "to which this Act applies" after the word "hospital" in line 7.

The CHAIRMAN: The Assembly's reason for amending the Council's amendment is:—"Because it is against the principle of the Bill."

The HONORARY MINISTER: I move—

That the amendment made by the Assembly to the Council's amendment be agreed to.

Hon. A. J. H. Saw: We have already decided against the principle, so we must negative the Honorary Minister's motion.

Question put and negatived; the Assembly's amendment to the Council's amendment not agreed to.

No. 9. Clause 10, Subclause 3.—Delete the second paragraph.

No. 10. Clause 10—Delete Subclause 4.

The CHAIRMAN: The Assembly's reason for disagreeing to Nos. 9 and 10 is:—"Consequential on disagreement with No. 8."

The HONORARY MINISTER: I move—

That the Council's amendments be not insisted on.

Question put and negatived; the Council's amendments insisted on.

Resolutions reported, the report adopted and a Message accordingly returned to the Assembly.

Sitting suspended from 9.55 to 11.10 p.m.

Assembly's Request for Conference.

Message from the Assembly received and read requesting the Council to grant a conference on the amendments insisted upon by the Council, and intimating that the Assembly would be represented by three managers.

The HONORARY MINISTER: I move—

That a message be transmitted to the Assembly agreeing to a conference as requested; that the conference be held forthwith in the President's room, and that the Council be represented by the Hon. A. J. H. Saw, the Hon. H. Seddon, and the mover as managers.

Question put and passed.

Sitting suspended from 11.12 p.m. to 12.35 a.m.

Conference Managers' Report.

The HONORARY MINISTER (Hon. W. H. Kitson—West) [12.36]: I have to report that the managers have met and have failed to come to an agreement.

BILL—WORKERS' HOMES ACT AMENDMENT.

Returned from the Assembly without amendment.

ADJOURNMENT—CLOSE OF SESSION.

THE CHIEF SECRETARY (Hon. J. M. Drew—Central) [12.37]: I move—

That the House at its rising adjourn until Thursday, the 18th April.

Question put and passed.

House adjourned at 12.38 a.m. (Friday).

Legislative Assembly.

Thursday, 4th April, 1929.

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The SPEAKER took the Chair at 4.30 p.m., and read prayers.

QUESTION—AGRICULTURAL MACHINERY PURCHASES.

Mr. GRIFFITHS asked the Minister for Justice: 1, Is he aware of the injustice suffered by those who purchase machinery under hire purchase agreements? 2, Are such