

Therefore, the decision should be left to the discretion of the trader because if the Minister will read Subclause (2) of this clause he will appreciate that under paragraph (c) there is an onus of proof thrown on the trader which makes it all the more important that he should have legal advice should he so desire.

We will be discussing this clause for other reasons as well, not the least of which is with reference to the last two lines of the clause which say that the commissioner shall make such decision as he thinks just. We then turn to Clause 39 and find there is no right of appeal. I think it is most important that it should not be left at the discretion of the commissioner as to whether the person concerned has legal advice or not.

Progress reported.

BILL—MUNICIPALITY OF FREMANTLE ACT AMENDMENT.

Returned from the Council without amendment.

House adjourned at 12.33 a.m.

Legislative Council

Wednesday, 3rd October, 1956.

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

QUESTIONS.

KANGAROOS.

Destruction and Royalty Paid.

Hon. L. A. LOGAN asked the Chief Secretary:

(1) In what areas are professional hunters shooting grey kangaroos for the pet food trade?

(2) On what number of skins has royalty been paid in each of the road board areas concerned for—

- (a) 1953;
- (b) 1954;
- (c) 1955?

The CHIEF SECRETARY replied:

(1) Persons licensed under the Fauna Protection Act to take kangaroos for gain or reward may take and kill grey kangaroos outside the boundary of the grey kangaroo reserve and in road board districts where protection is temporarily lifted. The professional hunter is required under his licence to furnish a return of the kangaroos taken during the currency of his licence, without defining the actual area where the kangaroos were taken.

(2) Royalty is payable only on skins of grey kangaroos shot in the South-West Land Division, except where declared vermin. Returns of royalty paid are available only for the State as a whole.

KING EDWARD MEMORIAL HOSPITAL.

Appointment of Administrator.

Hon. J. G. HISLOP asked the Chief Secretary:

(1) Is it true that the Minister has issued an order to the board of management of the King Edward Memorial Hospital, directing them to revoke the appointment of an overseas applicant to the post of administrator of that hospital?

(2) If this is so, what were the grounds for the direction?

The CHIEF SECRETARY replied:

(1) The Minister has asked the board of management to revoke the offer of appointment of an overseas applicant.

(2) It is considered that there are local applicants suitable for the position.

DRIVE-IN THEATRE.

Establishment at Scarborough.

Hon. A. R. JONES (for Hon. J. McI. Thomson) asked the Chief Secretary:

(1) Did the Drive-in Theatre Investigation Committee recommend that the proposed drive-in theatre at the corner of Liege-st. and Scarborough-rd., for Metro-Goldwyn Mayer be not approved?

(2) If so, when was the recommendation made?

(3) Is it a fact that the Minister in charge of town planning now proposes to approve—or has approved—of same?

(4) Is it a fact that an application by one Geneff in Balcatta-rd. was also considered by the committee?

(5) If so, did the committee recommend approval?

(6) Does the Minister not consider that preference should be given to a local individual rather than to a foreign company which is also a distributor of films?

(7) If not, why not?

The CHIEF SECRETARY replied:

(1) and (2) The Drive-In Theatre Advisory Committee informed the Perth Road Board on the 22nd May, 1956, that until such time as the roads in the locality were improved sufficiently to cope with the extra traffic the issue of a permit for a theatre in Liege-st. could not be recommended.

(3) The Governor-in-Executive Council approved of the Perth Road Board's application for an amendment to the board's by-laws to enable the site to be used for business purposes.

(4) and (5) Not in Balcatta-rd. A similar recommendation to that in Nos. (1) and (2) was given to the road board by the advisory committee with respect to an application by Mr. Geneff for a drive-in theatre in Oswald-st.

(6) and (7) The question of preference does not come into the matter, the points at issue being the suitability of the sites and the by-laws of the local authority. Both the areas in Liege and Oswald-sts. were in the Perth Road Board's residential zone, and the board submitted to me an amendment to its by-laws designed to transfer both areas to the business zone. I agreed to the amendment so far as the Liege-st. property was concerned, and it was subsequently approved by Executive Council. That part of the amendment dealing with the Oswald-st. property has been deferred until such time as the route of the proposed northern regional road has been finally decided, as the site might be affected by the road.

WAR SERVICE LAND SETTLEMENT SCHEME.

Allotments to Korean Ex-Servicemen.

Hon. N. E. BAXTER asked the Chief Secretary:

(1) Have any ex-servicemen from the Korean war only, been allotted war service farms?

(2) If the answer to No. (1) is "Yes," why have such applicants been allotted farms in preference to World War II ex-servicemen?

(3) Who were the allottees for the last two groups of farms made available?

The CHIEF SECRETARY replied:

(1) Yes, two.

(2) 1st case—

Norman Harold Jones, an applicant for a dairy farm who applied for war service land settlement on the 4th October, 1954, was allotted dairy farm A587a at Balingup on the 22nd July, 1955, he being deemed by the allotment board the most likely to succeed of only seven applicants who applied for the farm.

2nd case—

William Frederick Willoughby, whose discharge from the Army was obtained at the request of his widowed mother to enable him to operate his late father's war service land settlement farm A959 at Rocky Gully, which was allotted to him on the 22nd August, 1956.

(3) Quota 45—Allotted at interview on the 30th August, 1956.—

Farm No. Allottee
 A.92a—Norman Stanley Paterson Davis.
 A.135D—Charles Arthur Ray.
 A.3D—Victor Vernon Treasurer.
 A.3G—Carlisle Cook.
 A.651E—John Henry Thomas O'Neil.
 A.651K—Alfred Crabb.
 A.651L—Jack Robert Jenkins.
 A.901—Errol Wellstead.
 A.909—Clement Henry Reynolds.
 A.975—Frank Leslie Counsel.
 A.976—Frederick Howard Holt.
 A.977—William George Ovens.
 A.978—Ernest Temple Hofman.
 A.980—Harley Irwin Syred.
 A.1008—Hubert Arthur Tetlow.
 A.1009—Eric Bloxside.
 A.1014—Malcolm Graham McLeod.
 A.1019—Neil Rochester.
 A.1026—George Dagobert Atkinson.
 A.1029—Frederick Charles Turner.

Quota 46—Selected and asked to attend for interview on the 17th and 18th October, 1956, after inspecting the farms.—

Farm No. Allottee
 A.791—A. Thomson.
 A.3a—G. Lanigan.
 A.3c—G. D. Mills.
 A.3h—A. M. Tilly.
 A.974—H. J. Easton.
 A.979—W. D. Horton.
 A.1042—L. E. Ramm.
 A.958—S. L. Payne.
 A.992—R. C. Ladnams.
 A.1000—H. H. Flavel.
 A.1053—P. J. Plant.
 A.1054—W. E. L. Wells.
 A.1056—N. G. Wellstead.

Quota 54, Dairy Farms—Also being interviewed at same time as above.—

Farm No. Allottee
 A.284—George Dudley.
 A.314—A. J. N. Beck.
 A.349—L. C. Head.
 A.394—R. A. Little.
 A.1103—C. A. Thorpe.

LIVESTOCK.*Inability of Railway Department to Transport.*

Hon. A. R. JONES: I would like to ask the Minister for Railways a question without notice.

The PRESIDENT: The hon. member was in the Chamber at the time when questions and notices were presented.

Hon. A. R. JONES: That is so, Mr. President, but I did not have a chance to ask my question.

The PRESIDENT: The hon. member may proceed.

Hon. A. R. JONES: I do not make any apology for asking this question, because I think the position is a serious one, brought about by the dry conditions occurring throughout Western Australia. Would the Minister tell us whether it is a fact that the Railway Department is unable to cope with all calls made upon it for the transport of livestock? If the answer is in the affirmative, will he lift all restrictions for the removal of stock by road for the time being so that such stock may be transported speedily from properties and sale-yards in districts where the sale of stock is forced owing to the abnormal conditions brought about by the severe dry conditions to which I have referred?

The MINISTER FOR RAILWAYS: It has not been brought to my notice that the position is as extreme as the hon. member suggests. I understand that farmers are permitted to transport stock by road at the moment.

Hon. A. R. Jones: Farmers are, but carriers are not.

BILL—ENTERTAINMENTS TAX ACT AMENDMENT.*Third Reading.*

The CHIEF SECRETARY: I move—

That the Bill be now read a third time.

Question put and passed.

Bill read a third time.

The PRESIDENT: The question is—

That this Bill do now pass.

The CHIEF SECRETARY: Before you put the question, Mr. President, I would like to give the House a few figures.

The PRESIDENT: I do not want the Chief Secretary to make a precedent of this; he was in his seat when I put the third reading of the Bill.

The CHIEF SECRETARY: I apologise, Mr. President; but the matter escaped me at the time.

The PRESIDENT: The Chief Secretary may proceed.

The CHIEF SECRETARY: The total amount collected was £255,972; the amount collected from live shows represented

£18,905. I would point out that the measure will reduce this amount to about £6,000.

Question put and passed.

Bill thus passed.

BILLS (2)—REPORT.

1, Evidence Act Amendment.

2, Inspection of Machinery Act Amendment.

Adopted.

BILL—HEALTH ACT AMENDMENT.*Second Reading.*

THE CHIEF SECRETARY (Hon. G. Fraser—West) [4.45] in moving the second reading said: Members will recollect that last session Section 324 of the principal Act was amended to permit local authorities to subsidise any institution or centre, residential or non-residential, for the care of the aged in the same manner as they were already authorised to subsidise district nursing systems, infant health centres, and public and private hospitals.

Experience has proved that this authority is not sufficient to enable local authorities to assist this most deserving cause to the extent which they might wish. Recently the League of Home Help asked the Perth City Council for assistance in the establishment of a home for the care of the aged, particularly so far as the provision of land for the site was concerned.

The city council was prepared to help in this connection but was informed by its legal advisers that as the Act only referred to "subsidise", the council could not give the league a grant of land. The city council therefore suggested that the Act should be amended to enable local authorities to establish, maintain or subsidise any institution or centre for the care of the aged. The Government was agreeable to this; and so the Bill proposes that every local authority may provide, establish, maintain and grant financial aid towards the establishment and maintenance of any scheme or any institution or centre, whether residential or otherwise, for the care of the aged. I move—

That the Bill be now read a second time.

On motion by Hon. A. F. Griffith, debate adjourned.

BILL—LICENSING ACT AMENDMENT (No. 2).*In Committee.*

Resumed from the previous day, Hon. W. R. Hall in the Chair; Hon. N. E. Baxter in charge of the Bill.

Clause 3—Section 161A added (partly considered):

Hon. N. E. BAXTER: I asked that progress be reported with a view to amending this clause to meet the wishes of members

and to endeavour to make it more justifiable. I propose to move the following amendment:—

That after the word "year" in line 41, page 3, the following proviso be inserted:—

Provided that any person aggrieved by the imposition of an order made by such justices under this section may appeal to the Resident Magistrate exercising jurisdiction under the Local Courts Act in the district in which such order was made.

This will give a person against whom an order is made the opportunity of appealing if he considers an injustice has been done.

The CHAIRMAN: I do not think the hon. member's amendment is in order. The Committee got as far as the word "peace" in the last line of the clause.

Hon. N. E. BAXTER: I wish to move that the Bill be recommitted.

The CHAIRMAN: The Bill cannot be recommitted at this stage.

Clause, as previously amended, put and a division taken with the following result:—

Ayes	14
Noes	12

Majority for	2
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Ayes.

Hon. N. E. Baxter	Hon. G. MacKinnon
Hon. J. Cunningham	Hon. R. C. Mattiske
Hon. L. C. Diver	Hon. J. Murray
Hon. A. F. Griffith	Hon. H. L. Roche
Hon. J. G. Hislop	Hon. H. K. Watson
Hon. A. R. Jones	Hon. P. D. Willmott
Hon. L. A. Logan	Hon. C. H. Simpson

(Teller.)

Noes.

Hon. G. Bennetts	Hon. Sir Chas. Latham
Hon. E. M. Davies	Hon. H. C. Strickland
Hon. G. Fraser	Hon. J. D. Teahan
Hon. J. J. Garrigan	Hon. W. F. Willesee
Hon. E. M. Heenan	Hon. F. J. S. Wise
Hon. G. E. Jeffery	Hon. F. R. H. Lavery

(Teller.)

Clause thus passed.

Title—agreed to.

[The President resumed the Chair.]

Bill reported with amendments.

Hon. N. E. BAXTER: I move—

That the Bill be recommitted for the further consideration of Clause 3.

The CHIEF SECRETARY: I would like to add Clause 2.

Hon. H. K. Watson: Mr. President, can we recommit now?

The PRESIDENT: It will have to be done on consideration of the Committee's report.

BILL—CORNEAL AND TISSUE GRAFTING.

In Committee.

Hon. W. R. Hall in the Chair; the Chief Secretary in charge of the Bill,

Clause 1—agreed to.

Clause 2—Authorisation for use of eyes and other tissues:

Hon. J. G. HISLOP: I have been making some investigations into the reasons why in some of the Acts—particularly the original English Act and, later, the N.S.W. Act—the last illness of the person making the request has been inserted as the date at which the request can be made. I wondered why that was so, and then compared those Acts with our own Bill which says that the request may be made at any time.

Going into this question from the medical point of view, it is quite clear that if the request is made during the last illness, the individual more often than not is in hospital; and in large centres such as England and New South Wales, where there are big hospitals, there would be a large number of people in their last illnesses, some of whom would have made the request for their eyes to be so used. Therefore, it could be controlled from that moment because, if the individuals themselves in that institution obtained two witnesses, possibly from the nursing staff or the resident medical staff, those witnesses could advise that a request had been made.

If an individual makes a request at any time, there is not in our Bill any machinery for such request to be implemented; and he may make it in his private house with two witnesses. If we are to accept our provision that the individual can make a request at any time, we should arrange for that request to be communicated either to the Minister or to an approved institution.

Members may recall that when I spoke on the second reading, I said the Bill should contain some provision for the establishment of a bank of tissues. The amendments I have on the notice paper give the right to the Minister to appoint approved institutions and to give them permission to establish banks. So, when this individual makes a written request, at any time, I suggest it should be sent either to the Minister or to an approved institution. If the request is a verbal one, the two witnesses should confirm it in writing and forward it to the Minister or to an approved institution. In that way the approved institutions would know who had made requests and whether they were verbal or in writing. In order to make our Bill a practical one, I move an amendment—

That after the word "purposes" in line 5, page 2, the following be added:—

All requests made by a person in writing under this section shall be forwarded to the Minister or to an approved institution. All verbal requests made by a person under this

section shall be forwarded, confirmed in writing by and signed by the two witnesses to the Minister or to an approved institution.

The CHIEF SECRETARY: The department has requested me to oppose the amendment because it considers the hospital authorities are responsible people and can be relied upon to do the right thing. The department says, further, that the Bill is exactly the same as the English Act—it is word for word with it—which has been in operation for four years; and it is the same as the New South Wales Act up to about Clause 7. From then on the New South Wales measure provides certain penalties. The main essentials in the Bill are exactly the same as those in the English Act. The department does not consider that any amendment to the measure as introduced is necessary.

Hon. J. G. HISLOP: That is an extraordinary statement from the department. It should give reasons for opposition to the amendment. The subclause does not make sense as it is. If a person makes a request, who is to know about it unless he is in a hospital at the time? To make the provision workable, this amendment is necessary. If we do not include it, the Bill should be recommitted to insert in Subclause (1) "the last illness" rather than "at any time."

I cannot see why a person who desires to leave for use his eyes, or other tissues, cannot do so in writing and send it to the Minister or to an approved institution. The request could then be circulated to the other institutions. If a man makes a verbal request in front of two witnesses, who is to know unless it is sent to some authority? The hospital authorities are, of course, responsible persons; but they would not know of the request if it were made outside of the hospital. I do not mind what the Committee does, but I hope it will make the Bill practicable.

Hon. A. F. Griffith: If the department has the information and the man dies over the week-end, what happens then?

Hon. J. G. HISLOP: That is for the medico who is notified to decide.

Hon. A. F. Griffith: Perhaps he could not be notified at the week-end if the department had the information locked away.

Hon. J. G. HISLOP: How is he going to do it otherwise?

Hon. Sir Charles Latham: I am concerned about your statement that it follows the English law.

Hon. J. G. HISLOP: No. Originally the English law provided that the man could make the request only during his last illness, and that would probably be in an approved institution. The statement made by the Chief Secretary that the Bill follows the New South Wales Act down to Clause 7,

is, of course, untrue. It follows the New South Wales Act to Clause 3. The New South Wales legislation then gives the hospitals the right to form tissue banks.

I do not know whether I am authorised to discuss the remainder of the amendments, because if the Chief Secretary uses them to defeat this amendment, I must go on. The amendment before the Committee has nothing whatever to do with the rest of the Bill.

The CHIEF SECRETARY: Dr. Hislop has disputed my statement that the Bill follows the New South Wales Act to Clause 7. He said it followed that legislation to Clause 3. I have the New South Wales Act here, and I will read it to members.

Hon. J. G. Hislop: My apologies. I am reading the Bill, and the Chief Secretary probably has the Act.

The CHIEF SECRETARY: Yes. Members can examine the two, and they will find that what I have said is correct.

Hon. N. E. Baxter: We do not have to follow New South Wales.

The CHIEF SECRETARY: I did not say that we did. I am saying that our Bill is exactly the same as the New South Wales Act down to Clause 7.

Hon. J. G. Hislop: Do you mean Clause 7 of the Bill?

The CHIEF SECRETARY: Yes; it is exactly the same. It is word for word as far as I can tell from a quick examination of it.

Hon. J. G. Hislop: It is Section 3 of the New South Wales Act.

The CHIEF SECRETARY: I can see we are at cross purposes. I am referring to Subclause (7) of Clause 2 of our Bill, which is the whole of the matter in connection with the eyes. On this clause, Dr. Hislop does not mention anything about the English Act which has been in operation for four years. He said this would not be practicable. If it is not practicable, how has the English Act been practicable for four years?

Hon. J. G. Hislop: Can you produce the English Act?

The CHIEF SECRETARY: No.

Hon. J. G. Hislop: I think it provides for "the last illness."

The CHIEF SECRETARY: I specially questioned the head of the department on this. I said, "Can I with honesty say that this is an exact copy of the English Act?" He said, "Yes, definitely."

Hon. J. G. Hislop: Was it not altered in another place to put this in?

The CHIEF SECRETARY: I could not say. I am only dealing with the Bill as we have it here, and my questioning of the head of the department this morning in connection with the amendment. What

I have told the Committee was the definite question I put to him and the definite answer I received. If it was not suitable in England, surely it would have been amended in less than four years.

Hon. J. G. Hislop: On what grounds are you opposing the amendment?

The CHIEF SECRETARY: Because it is not necessary.

Hon. J. G. Hislop: Well, prove it to me!

The CHIEF SECRETARY: I am proving it to the hon. member by saying that if the English Act has worked for four years and it does not require what is suggested in the hon. member's amendment, then there is no necessity for the amendment here. I think that Dr. Hislop will agree with me that when we are considering new legislation we always go to the countries that have similar legislation and examine what has happened there; and if their Acts are suitable, we take them as a basis, although there may be some alterations to suit local conditions.

Hon. J. Murray: Could you produce the English words here?

The CHIEF SECRETARY: The hon. member knows that I have said I cannot. He is simply trying to nail me down so that he can vote against what I am putting forward.

Hon. G. C. MacKinnon: The hospitals in England would be bigger.

The CHIEF SECRETARY: That does not matter. The conditions are the same.

Hon. G. C. MacKinnon: The area is bigger.

The CHIEF SECRETARY: That would not matter, either. I can give no better recommendation than to say that the English Act has been in operation for four years; and, so far as my information goes, it has not been amended in that time.

Hon. J. G. HISLOP: I do not like to accuse the Chief Secretary of misleading the Committee, but someone has misled him. I said previously that it was obvious why the original Act of New South Wales included the provision that the request be made during the last illness. This was because the person making the request would most likely be in a hospital which would be an approved institution. I then explained that if the request were made at any time nobody would be aware of it unless it was sent to a central authority or an approved institution. The Chief Secretary then tells the Committee that there is no need for the amendment because the English Act has worked successfully for four years. That is quite true; but the English Act provides that a person can make a request at any time, including during his last illness.

Hon. Sir Charles Latham: What is the year of that statute?

Hon. J. G. HISLOP: It is 1952. So it can be seen that what I am telling the Committee is correct. To make the Bill practicable, my amendments have to be inserted, or we should take the English Act as a pattern and insert the words "during his last illness". It does not make sense to provide that a person can make a statement at any time, either verbally or in writing, of which nobody has any knowledge. Frankly, I think the Bill, with my amendments, would be a better one than a Bill which contains the words "that a request be made during the last illness". I therefore ask the Chief Secretary to review his decision.

Hon. J. M. A. Cunningham: It is conceivable that 50 per cent. of the requests that were unknown could be lost.

The CHIEF SECRETARY: What is the objection to the words "before his last illness"? He could always hand his request on to someone.

Hon. J. G. Hislop: To whom? Who would know about it?

The CHIEF SECRETARY: That is the responsibility of the individual.

Hon. A. F. Griffith: The dead individual?

The CHIEF SECRETARY: The query is now raised in regard to the words "before his last illness".

Hon. Sir Charles Latham: But the request must be lodged somewhere.

The CHIEF SECRETARY: There are a number of Acts that could be performed by a person before his last illness which people would know about.

Hon. A. F. Griffith: Who would know about this?

The CHIEF SECRETARY: His doctor would know.

Hon. A. F. Griffith: Say the doctor was away on a holiday when the man died, what then?

The CHIEF SECRETARY: Suppose there were a bureau that kept records of requests made by persons before their last illnesses. How could hospitals know about them? They are only matters of administration that would have to be attended to. If a person were keen to make a request of this nature, he would take action to make sure that someone knew about his request.

Hon. A. F. Griffith: The last illness of a person may be a motor accident.

The CHIEF SECRETARY: Where is a register of these requests to be kept?

Hon. L. A. Logan: In the hospital, of course.

The CHIEF SECRETARY: What hospital?

Hon. L. A. Logan: In the main hospital.

The CHIEF SECRETARY: What about a person who is taken into the Kalgoorlie hospital or any other hospital in the State?

Hon. L. A. Logan: They would all be main hospitals.

The CHIEF SECRETARY: If it were the Royal Perth Hospital, where would the record be kept? In the ward where a person is lying seriously ill, or in the office, which possibly is locked up from Friday to Monday? The onus is on the individual to ensure that someone knows about the request. I see no reason why we should confine it solely to "his last illness". I cannot see any merit in the amendment, because the bureau will be at one place and the person will be at another; and who would know about the request?

Hon. F. D. Willmott: On that argument, who is going to know in any case?

Hon. J. G. HISLOP: I feel terribly sorry for the Chief Secretary, because he is talking a lot of nonsense and is trying to make himself believe the argument he is putting forward, because his department has submitted it. If he had read the amendments he would find that the Minister can have approved institutions which can form eye and tissue banks. The people in charge of those would have a statistical register and the institutions would be open 24 hours a day, like the blood transfusion centre. The Chief Secretary should not try to delude himself by talking about the workings of a hospital of which he knows nothing. A tissue bank would be organised just as well as the blood transfusion centre, the Royal Perth Hospital or any other large hospital.

The CHIEF SECRETARY: I can sense that the Committee is with Dr. Hislop, and therefore, rather than insert the words relating to the bureau, I would prefer the committee to strike out the words in question and just leave it as "the last illness". I am sure that, in practice, bureaux would be found to be unworkable.

Hon. J. G. HISLOP: This situation becomes more humorous as we continue. The amendments propose to give the right to someone to use these tissues some hours or days after their removal, but the Bill that we have before us does not. In New South Wales, where tissue and eye banks have been conducted with success, such tissue banks are situated in major hospitals. Otherwise, how is any doctor going to use such tissues as arteries, for example, because there must be a stock of arteries of the size that is required at that particular moment?

I have here a copy of "People", and an extract from the issue dated the 5th September, 1956, reads as follows:—

In the past a large number of amputations have become necessary because of arteries crushed or severed. Now arteries can be supplied from a

bank. The first one in Australia was established at the Halstrom Cardiology Institute at R.P.A.H. and arteries from it are available to all surgeons—for grafting to diseased, injured, narrowed or blocked portions of arteries in most parts of the body.

Unless a bank is formed, the Bill is completely useless.

Hon. Sir CHARLES LATHAM: We have a learned professional man in the Chamber giving us information, and we also have the Minister who has been advised by qualified departmental officers giving us information; but we are ordinary laymen. If the Bill is to be of any use, I am anxious that we should not lose any important parts of it before it is placed on the statute book. For that reason I suggest that consideration of the Bill be held over until some understanding has been reached between Dr. Hislop and the Chief Secretary's medical officers. Perhaps we would then have more knowledge of the responsibility we are taking in placing this Bill on the statute book. I presume that these tissues could not be used after they became stale within a certain period. I hope the Chief Secretary will agree to my suggestion.

The CHIEF SECRETARY: In New South Wales there is no record of any bureau of the description mentioned. That is why I suggest that I would rather leave out some of the words in question than accept the amendment.

Hon. A. F. GRIFFITH: Perhaps someone could tell me this: Let us assume that a man desires to leave his eyes to someone, and he notifies his medical adviser in writing of his decision. That doctor would probably take the document to his surgery and file it away. The man then dies either by accident or following an illness. What action is taken from then on?

Hon. Sir Charles Latham: Probably his request would never be heard of.

Hon. E. M. HEENAN: It is hard to deny the reasoning of the Chief Secretary that legislation in New South Wales is operating quite successfully; but, on the other hand, Dr. Hislop's views are worthy of respect. The Chief Secretary, of course, must have been advised by highly qualified medical men in his department. If the Chief Secretary could give us more information on the matter, we might be able to come to a more intelligent conclusion. Dr. Hislop has many amendments to put forward, and my feeling is that we might get too far away from a Bill which is similar to legislation which has proved to be quite successful in New South Wales and in England.

Hon. F. J. S. WISE: I cannot see the connection between the purely technical requirements of this Bill and the need

which is anticipated in the amendment; that is, to have a register available recording the consent of persons who have agreed to the donation of parts of their anatomy for medical use. In my view, that cannot be got over by using the words "prior to his last illness," because no living person will know when his last illness is to be; and if he donates some part of his anatomy at a time when he or others thought that to be his last illness, such consent would be valueless if it transpired that that was not his last illness. Surely what is sought is to have available and accessible the consent of persons to donate parts of their anatomy for medical use!

Unless there is some reason which I cannot discern so far for not having such a record, the amendment could have no other effect but a good one. It surely is necessary to have some idea of whether a suitable part of a person who is ill can be made available for use after death, just as it is very essential to have a properly tabulated record of the types of blood in a blood bank. If a blood donor has a particular type of blood, that is recorded. So in the case of delicate operations to the eyes it is also very important to know that such tissues are available from some person who is living.

Hon. G. C. MACKINNON: The greatest use of such a register would be in a hospital like the Royal Perth Hospital. If we make a very cursory examination of the types of tissues and bones required, it becomes obvious that the younger the bone the better it is for grafting. The only way of getting supplies of those tissues and bones is through fatal motor accidents.

In the metropolitan area all accident cases are taken to the Royal Perth Hospital. Admittedly 90 per cent. of such cases might not be used; but so great are the advantages of getting tissues and bones from young people that even if only a small percentage were obtained by the keeping of the proposed register, it would serve a useful purpose. When a fatal motor accident case was taken to the Royal Perth Hospital a check of the register would be made, and if consent had been recorded, the tissues could be removed and put into storage. That would be the best means of getting the suitable bones and tissues that are required by the medical profession.

Hon. J. G. HISLOP: The Chief Secretary stated that there is no reference to bureaus in the New South Wales Act. I would point out that the wording of my amendments, with the exception of the first two, follows very closely the New South Wales Act which has proved to be so successful and which has enabled a bank to be formed. It was contended by Mr. Heenan that we should not depart from the New South Wales Act because it has worked very well, but I would point out that the authorities in New South Wales found that the English Act on

which the original legislation in this country was based did not provide all that was required, so they went further and inserted the right to form a tissues bank. No bank could function without a register or a bureau. All that is contemplated in the amendments in my name is to make the Bill conform more closely to the New South Wales Act.

The CHIEF SECRETARY: I cannot allow what has just been said to go unchallenged. I was dealing with the Bill up to a certain stage. I realise what will transpire afterwards. The Bill does not make provision for a tissues bank to be formed, but I had not got to that stage in the discussion. All I was dealing with was the authority to donate parts of the anatomy. In New South Wales there is no bureau as is proposed by the hon. member.

Hon. J. G. HISLOP: Because it is not the same as this Bill.

The CHIEF SECRETARY: Up to the stage of forming tissues banks it is the same. There is no bureau.

Hon. J. G. HISLOP: May I correct a wrong impression? The New South Wales legislation only permits a person to make a donation during his last illness.

The CHIEF SECRETARY: The hon. member said that the Bill differed from the New South Wales Act in that reference is made in the Act to the last request of a person. Up to the present, I have been dealing with the suggestion of a bureau of registration, but that has nothing to do with what happens after a person has died and parts of his anatomy have been removed. The amendment should be opposed, because it would be better to conform with the New South Wales Act which merely mentions the past illness of a donor.

Amendment put and passed.

Hon. J. G. HISLOP: I move an amendment—

That the word "any" in line 15, page 2, be struck out and the words "if there is no surviving spouse the nearest" inserted in lieu.

The wording in the New South Wales Act is very much better than the wording in this Bill. If the person in charge of a body has to make certain that no surviving relative of the deceased objects, he will have a very difficult job; the possibility also arises that one surviving relative of the many generations to be consulted may refuse the removal of tissues. The wording in the New South Wales Act is "Unless the party has reason to believe that the surviving spouse, or if there is no surviving spouse, the nearest surviving relative objects;" whereas the wording in the Bill is "the surviving spouse or any surviving relative of the deceased objects." The scope for objection in New South Wales Act is very limited; but under the Bill before us, any surviving relative of a deceased person may object.

Amendment put and passed.

Hon. J. G. HISLOP: I move an amendment—

That the words "consents to the authority being given by that party" in lines 33 and 34, page 2, be struck out and the words "has signified in writing that such removal may be undertaken and the requirements of Sub-section (1) or (2) of this section have been complied with" inserted in lieu.

Under the New South Wales Act, the coroner has to signify his consent in writing, and to ensure that the provisions in the Act relating to surviving spouse and nearest relative, and to any objection having been cancelled, have been complied with. That is a much safer method than the method contained in the Bill which says only that the coroner need give his consent. On some occasions the coroner may delegate his authority to another, and the hospital may make a request for the removal of the tissues of a deceased person; in that event there could arise a difference of opinion as to whether or not consent had been obtained.

In most instances, a period of four hours after death is available during which tissues may be successfully removed; and in that time there is ample opportunity to notify the coroner and obtain his consent. If the request is granted, the consent in writing can be sent to the hospital very quickly afterwards. The amendment attempts to satisfy the needs of the medical profession, and at the same time to indicate to the public that every precaution in the public interest has been taken. I think that this provision in the New South Wales Act is much safer than the wording of our provision.

The CHIEF SECRETARY: I hope the Committee will not agree to this amendment because, if it is passed, it will make things very awkward. If the coroner had to certify in writing that the parts might be removed, it would often mean that they could not be removed, because it would not be possible to contact the coroner in time to obtain written authorisation. A request for the removal of tissues is likely to occur at any time. Are we going to put the coroner in the position that at all hours of the day and night he may be contacted to give consent in writing? I think that in today's paper there was a reference to the fact that the coroner will be going to the country and will be away for a couple of days. How would he be able to give the required authority in writing in those circumstances, when an operation might have to be performed within four hours? With regard to post-mortem examinations, a written authorisation is not necessary. That has proved satisfactory, and I think the same would apply here.

Hon. J. G. HISLOP: May I be a little profound, and tell the Chief Secretary that when one is dealing with new legislation, one always goes to an Act that has worked

well and in respect of which no difficulty has been experienced? When one is in such a position one always bases one's legislation on something that has worked satisfactorily.

The CHIEF SECRETARY: May I say that that is exactly what I want the Committee to do in this instance—to adopt this Bill, which is word for word comparable with the English measure which has worked satisfactorily?

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

Ayes	11
Noes	17

Majority against	6
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Ayes.

Hon. N. E. Baxter	Hon. R. O. Mattlake
Hon. J. Cunningham	Hon. J. Murray
Hon. A. F. Griffith	Hon. H. K. Watson
Hon. J. G. Hislop	Hon. F. D. Willmott
Hon. Sir Chas. Latham	Hon. C. H. Simpson
Hon. G. MacKinnon	(Teller.)

Noes.

Hon. G. Bennetts	Hon. F. R. H. Lavery
Hon. E. M. Davies	Hon. L. A. Logan
Hon. L. C. Diver	Hon. H. L. Roche
Hon. G. Fraser	Hon. H. C. Strickland
Hon. J. J. Garrigan	Hon. J. D. Teahan
Hon. E. M. Heenan	Hon. J. M. Thomson
Hon. R. F. Hutchison	Hon. F. J. S. Wise
Hon. G. E. Jeffery	Hon. W. F. Willesee
Hon. A. R. Jones	(Teller.)

Amendment thus negatived.

Clause, as previously amended, put and passed.

New clauses:

Hon. J. G. HISLOP: I move—

That the following be added to stand as Clause 3:

- (1) Where authority for the removal of any eyes or other parts of the body of a deceased person has been given under this Act, such eyes or other parts may be used for immediate grafting into the body of a living person or may be retained and used for such purpose at some later time.
- (2) No person other than a legally qualified medical practitioner shall undertake the carrying out of any such grafting.

My suggestion is that we should now adopt the New South Wales provisions and empower the Minister to authorise institutions like the Royal Perth Hospital, and even the Red Cross Society, to maintain banks of tissues in order that this work may be satisfactorily carried out. In the original English Act, and in our Bill, all that has been done is to give permission to the individual to say "you can have my tissue." There is no authority for the use

of that tissue. In the New South Wales legislation, sections have been added for that purpose.

This amendment gives authority to the person who receives the tissue of a deceased person to graft it either immediately or at a later date. That means that the tissue can be stored. There is no authority in our Bill at the moment for tissues to be stored. If we are to follow the lead which has been given to us in Australia and elsewhere of having tissue banks, we must give authority to some institution to maintain such banks, just as we have transfusion services maintaining blood banks.

It is all right to have a small bank for corneas because they do not keep very long and are more or less suitable in all sizes. But arteries and other tissues must be stored in fair number and quality in order that correct sizes will be available—particularly of arteries—to insert into limbs or other portions of a body. We must allow institutions to be approved by the Minister; and following approval, they will have to maintain banks according to conditions laid down by the Minister. It will be a matter for discussion between the department and the hospitals as to the manner in which the tissues are stored.

The CHIEF SECRETARY: I do not think it matters whether the clause is inserted or not. But at all events the department says that it is not considered that the statutory power to retain these tissues in a bank is necessary, because any hospital which would require the use of these tissues in the treatment of its patients must be regarded as a responsible organisation. If a hospital has the power and authority to remove these tissues for the purpose of grafting, it clearly should and would automatically possess the power to retain them in a bank and presumably would do so under proper conditions. Further, this clause is not included in the English Act and is considered to be unnecessary.

New clause put and passed.

Hon. J. G. HISLOP: I move—

That the following be added to stand as Clause 4:—

Any eyes or other parts of the bodies of deceased persons removed in accordance with the provisions of this Act and which are to be retained and used for grafting into the body of a living person at some later time, shall be retained only by such persons, institutions or organisations as may be approved by the Minister.

If tissue is to be removed from the body of a deceased person, it will be retained only in such institutions as are capable of caring for it. Tissue certainly could not be taken from a body and retained in a doctor's own rooms unless he was prepared to set up the organisation necessary

for the care of it; and therefore I think that before anybody is given the right to retain tissue for future use, he—or the institution—should be willing to conform to very strict conditions.

As I have said, arteries, for instance, must be kept within a definite temperature range. If the temperature goes above or below that range, it is more than likely that the whole of the artery bank must be thrown away and a new one started. That is why the thermal conditions under which the arteries are kept must be so rigidly adhered to, because to introduce into a living body any tissue which was not likely to take would only endanger the life or limb of the patient by setting up abscesses and suppuration within the wound. Therefore we cannot allow any person or organisation—even a registered medical practitioner—unless willing to conform to the conditions, to retain tissues. Once we have given authority to establish the bank, I would like to see the conditions as rigid as possible.

New clause put and passed.

Hon. J. G. HISLOP: I move—

That the following be added to stand as Clause 5:—

(1) Any person who—

(a) otherwise than in accordance with the provisions of this Act authorises the removal from the body of a deceased person of any eye or other part of the body for therapeutic purposes; or

(b) not being a legally qualified medical practitioner—

(i) removes from the body of any deceased person any eye or other part of the body the removal of which has been authorised under this Act, or

(ii) undertakes the carrying out of any grafting of any eye or other part of the body of a deceased person into the body of a living person; or

(c) uses for purposes other than therapeutic purposes any eye or other part of the body removed from the body of any deceased person pursuant to the provisions of this Act,

shall be guilty of an offence against this Act.

- (2) Any person, institution or organisation, not being a person, institution or organisation approved by the Minister pursuant to section four of this Act, retaining any eyes or or other parts of the bodies of deceased persons for grafting into the bodies of living persons shall be guilty of an offence against this Act.
- (3) Any person, institution or organisation guilty of an offence against this Act shall be liable to a penalty not exceeding one hundred pounds.

Again I think the conditions should be as rigid as possible, and that nobody except a legally qualified medical practitioner or an institution approved by the Minister should attempt to store tissues. Any other person or institution doing so should be liable to a penalty under the Act.

The CHIEF SECRETARY: The departmental comment again is that this clause is unnecessary, as the illegal actions outlined would be an offence under the Police Act and/or the Criminal Code.

Hon. J. G. HISLOP: There was once in this Chamber a member who said that it did no harm to make things abundantly clear.

New clause put and passed.

Hon. J. G. HISLOP: I have not included the final paragraph of this provision from the New South Wales Act, because firstly I did not understand its meaning; and, secondly, I did not know whether it was necessary.

The CHIEF SECRETARY: Now that we have accepted these amendments, the department thinks that certain other words should be added, but that will be dealt with on recommittal.

Title—agreed to.

Bill reported with amendments.

House adjourned at 6.15 p.m.

Legislative Assembly

Wednesday, 3rd October, 1956.

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

QUESTIONS.

HOSPITALS.

Contributions by Local Authorities, Government and Lotteries Commission.

Hon. A. F. WATTS asked the Minister for Health:

(1) Regarding question No. (1) on the 26th September, will he advise the amounts contributed by district boards and local authorities in the country areas towards