

HOUSE OF ASSEMBLY
Monday, 1 August 2016
ESTIMATES COMMITTEE A

Chair:

Ms F.E. Bedford

Members:

Hon. J.M. Rankine

Ms N.F. Cook

Mr S.K. Knoll

Mr S.S. Marshall

Dr D. McFetridge

Ms D. Wortley

The committee met at 09:00

Estimates Vote

DEPARTMENT FOR HEALTH AND AGEING, \$3,711,780,000

DEPARTMENT OF STATE DEVELOPMENT, \$672,950,000

ADMINISTERED ITEMS FOR THE DEPARTMENT OF STATE DEVELOPMENT, \$10,448,000

Minister:

Hon. J.J. Snelling, Minister for Health, Minister for the Arts, Minister for Health Industries.

Departmental Advisers:

Mr D. Swan, Chief Executive, SA Health.

Mr M. Baccanti, Chief Executive, Health Industries SA.

Mr J. Woolcock, Chief Finance Officer, SA Health.

Mr L. Richards, Deputy Chief Executive, System Performance, SA Health.

Mr D. Frater, Deputy Chief Executive, Finance and Corporate Services, SA Health.

Ms V. Kaminski, Deputy Chief Executive, Transforming Health, SA Health.

Mr M. Hillard, Chief of Staff.

The CHAIR: The estimates committees are a relatively informal procedure and, as such, there is no need to stand to ask or answer questions. I understand the minister and the lead speaker for the opposition have agreed to an approximate time for the consideration of proposed payments which will facilitate a change of departmental advisers. Could the minister and lead speaker for the opposition confirm that the timetable for today's proceedings previously distributed is accurate?

The Hon. J.J. SNELLING: Yes, indeed.

Mr MARSHALL: Yes.

The CHAIR: Changes to the committee membership will be notified as they occur. Members should ensure that the Chair is provided with a completed request to be discharged form. If the

minister undertakes to supply information at a later date, it must be submitted to the committee secretary by no later than Friday 28 October 2016. This year, estimate committee responses will be published during the 15 November sitting week in corrected daily *Hansard* over a three-day period.

I propose to allow both the minister and the lead speaker for the opposition to make an opening statement, should they wish, of about 10 minutes. There will be a flexible approach to giving the call for asking questions based on about three questions per member, alternating each side. Supplementary questions will be the exception rather than the rule.

A member who is not part of the committee may ask a question at the discretion of the Chair. Questions must be based on lines of expenditure in the budget papers and must be identifiable or referenced at the beginning of the question, so we ask members just to let us know where they are. Members unable to complete their questions during the proceedings may submit them as questions on notice for inclusion in the assembly *Notice Paper*.

There is no formal facility for the tabling of documents before the committee; however, documents can be supplied to the Chair for distribution to the committee. The incorporation of material in *Hansard* is permitted on the same basis as applies in the house, that is, that it is purely statistical and limited to one page in length. All questions are to be directed to the minister and not the advisers. The minister may refer to his advisers for a response.

During the committee's examinations, television cameras will be permitted to film from both the northern and southern galleries and we do ask media to try to keep their noise down in the galleries, as last year it was difficult to hear from the desk. I declare the proposed payments open for examination and refer members to the agency statements in Volumes 3 and 4. Does the minister wish to make an opening statement?

The Hon. J.J. SNELLING: Very briefly, Madam Chair. Firstly, obviously the Department for Health and Ageing is undergoing enormous change at the moment. We have a number of reform projects at the moment, chief of which is the new Royal Adelaide Hospital and the work we are doing to be able to commission that new hospital. It is probably the largest piece of work this government or any government in South Australia will ever undertake. Moving from one end of North Terrace to the other is a hugely complex piece of work, and I would like to thank those clinicians and public servants who have been working very hard on that particular project.

Obviously we are waiting for an authoritative cure plan from SAHP, the consortium that is building and operating the hospital on our behalf, in terms of completion dates. We hope to have that soon. I have made it very clear, however, that unless I am satisfied that the completion date they provide us with is one that we can rely on, we will continue to challenge them on that. We should bear in mind that building a new hospital is very, very complex. I am not necessarily surprised that it has taken longer than was originally anticipated because of the complexities of these things, but what we do expect from SAHP is that they are up front and honest with us and provide us with information that we can rely on so we can communicate things to the public and have confidence in what we are communicating to the public.

The other significant reform project, of course, is EPAS. EPAS is more than just an IT project; it is actually expecting people to significantly change the way they go about their work. So far we have rolled it out at Noarlunga and the Repat hospitals, our GP Plus centres, the SA Ambulance Service and the Port Augusta Hospital. Most recently, about a month ago, we rolled EPAS out at The Queen Elizabeth Hospital. I have to say it was an extremely successful rollout to The Queen Elizabeth Hospital. Of course, there have been a few teething issues, but you would expect that; in fact, I would be surprised if there were not any. That is a rollout that has gone very, very well and the feedback I get from clinicians is that if we tried to make them go back to the old paper records there would be a riot, so that has been very successful.

When I went down there a few weeks ago, a week after it had been rolled out, I spoke to the director of the emergency department of The Queen Elizabeth Hospital who related a story that for the first time they had a patient present and they were actually able to access that patient's medical records. He had previously presented at the Repat, and the ability to be able to have at their fingertips those medical records from a different hospital was extremely valuable to them. Of course, as we continue to roll EPAS out, that will continue to be the case. We are now working on its rollout to the

new Royal Adelaide Hospital and are going through those processes now, as well as consolidating the work we are doing at The Queen Elizabeth Hospital.

Finally, of course, is Transforming Health, which is the biggest overhaul of our health system in South Australia in the state's history, with considerable reconfiguration. As I have previously said, if you have a look at any of the indicators, this state spends more on health, we have more doctors, more nurses and more hospital beds, yet we lag on the tables when it comes to emergency department waiting times. There is clearly an issue there that has to be corrected.

We have identified that the issue is the way our hospitals are basically configured. We try, in many cases, to do too many things at too many sites and we do not have proper 24-hour coverage in some key areas where we need to at particular hospitals, so we are going through the process of doing that. Of course, that is a significant upheaval and a significant change to where people work and how they work, so it is no surprise that, with any sort of disruption like that, there would be issues and people for various reasons who are not happy. However, we have been working very closely with our clinicians to work through these issues.

I have to say that the changes or realignment between Modbury Hospital and the Lyell McEwin Hospital have gone very, very well. My son broke his wrist playing soccer about a month ago and I took him to the Modbury Hospital emergency department, where Stuart Smith, a nurse practitioner, looked after him and we were in and out of that emergency department in an hour. That is exactly the sort of work the community in the north-eastern suburbs wants to see in their local emergency department. Those are the sorts of services they are looking for that hospital to be able to provide and it does a very, very good job.

We have seen significant improvement as well in the Lyell McEwin emergency department. Of course, it has been extremely busy this winter and it will only get busier as the population in the northern suburbs grows. I have to say that our doctors and nurses working in the Lyell McEwin Hospital are doing an incredibly good job. As we continue to move additional resources up to the Lyell McEwin Hospital—a second CAT scanner, an additional cath lab—these are the sorts of things which that hospital needs to deal with and cater for an expanding population.

There are a couple of things I will point out. Firstly, we released a report this morning compiled by the Australian Commission on Safety and Quality in Health Care into the PSA issue in SA Pathology. I do not need to go through everything, but that report is damning of the actions taken by the former executive director Ken Barr. I was interested to hear on radio this morning the Leader of the Opposition calling into question that report, suggesting that it had just been done to confirm a decision that the government had already taken.

I think that is a pretty remarkable statement, given the authority that the Australian Commission on Safety and Quality in Health Care has. No doubt others will deal with this issue. I am amazed that their integrity would be called into question by the Leader of the Opposition, but that is a matter for him. Certainly, the report does vindicate the actions taken by the chief executive in terminating the employment of Ken Barr. Obviously, there are other recommendations with regard to an overhaul of SA Pathology and the way it works. Clearly there were systems that should have been in place to deal with these sorts of issues that were not.

In conclusion, I would like to thank Chief Executive of SA Health, David Swan, for his 5½ years of service as chief executive of SA Health. It has been an absolute pleasure working with David over the last 5½ years. There are other chief executives or directors-general of Health in other states who have come and gone in the five and a half years that David has been in the job, and we have been extremely fortunate in this state to be able to hold onto David's services for as long as we did. He obviously takes up a different position—I am somewhat envious—at running St Vincent's Private Hospitals based in the Eastern States. It is an extremely prestigious position that he takes up, and I think is a measure of the esteem in which David is held right around the country.

The CHAIR: Can you introduce your other advisers?

The Hon. J.J. SNELLING: I will happily introduce them. I have Jamin Woolcock, Chief Finance Officer of SA Health, and Len Richards, incoming Deputy Chief Executive of SA Health, System Performance.

The CHAIR: Leader, do you have a statement, or are you going straight to questions?

Mr MARSHALL: Absolutely not. I would like to maximise the amount of time I have for questions because we have a very short time this morning.

The CHAIR: What book do you want me to look at?

Mr MARSHALL: My first question relates to Budget Paper 4, Volume 3, page 26: on what date does the minister expect the new Royal Adelaide Hospital to reach technical completion and also commercial acceptance?

The Hon. J.J. SNELLING: We have a draft cure plan that has been submitted to us. That cure plan has not been confirmed by SAHP; it has been supplied by the builder to SAHP. We hope to have a definitive cure plan in the coming weeks which will tell us when technical completion will be. Commercial acceptance would be three months after technical completion. We do not have that answer at the moment but we hope to in coming weeks.

Mr MARSHALL: How many cure plans have now been presented for this project?

The Hon. J.J. SNELLING: Under the contract, the way it works is that every time we put in a default, the builder or the SAHP are required to admit to us how they intend to rectify that default with a cure plan.

Mr MARSHALL: Will patients—

The CHAIR: He is still going.

The Hon. J.J. SNELLING: I am just getting some advice. Generally what happens is they will put in a cure plan to us. We will make some comments on it and send it back, and they will resubmit it based upon our comments and questions.

Mr MARSHALL: With regard to the technical completion date, how many cure plans have been presented to date?

The Hon. J.J. SNELLING: Two.

Mr MARSHALL: Can you outline to the committee whether or not you believe we will be admitting patients to that site this year?

The Hon. J.J. SNELLING: No, I do not think we will.

Mr MARSHALL: What does the budget provide for in terms of the go-live date for the new Royal Adelaide Hospital?

The Hon. J.J. SNELLING: It is the budget that we had with regard to the transition. I am not sure what the leader is getting at, but the main costs around transition of the project team that are in place, whose job it is to formulate the plans for the move, to formulate how the new models of care work, and so on—

Mr MARSHALL: What does the budget provide for in terms of the date that you are planning to incur the costs of the new Royal Adelaide Hospital? What date does that envisage that the first patient would—

The Hon. J.J. SNELLING: I see. I understand that Treasury have their own assumptions that they have built in to the budget—

Mr MARSHALL: So what had been built in for your numbers?

The Hon. J.J. SNELLING: That would be an issue you would have to raise with the Treasurer.

Mr MARSHALL: But I am asking you about the budget as it relates to Health and Ageing. They are the numbers you are responsible for.

The Hon. J.J. SNELLING: There is the quarterly service payment, and obviously it was the case that the quarterly service payment had been budgeted to begin, I think, in July. Clearly, we are not going to be paying that from July, so there is a benefit to the budget. Treasury will have revised

that to a different date, but that is all Treasury assumptions when they are formulating the budget, what the budget benefit might be. Treasury make their own assumption on that.

Mr MARSHALL: So those payments do not occur in your part of the budget. They are in a completely—

The Hon. J.J. SNELLING: They would obviously do it in consultation with Health, but at the end of the day it would be Treasury's call about what assumptions they make, for the purposes of the budget, about when commercial acceptance will be.

Mr MARSHALL: Yes, but in which quarter in your budget do the numbers for the new Royal Adelaide Hospital cost begin?

The Hon. J.J. SNELLING: December is when Treasury have made the assumption that—

Mr MARSHALL: But you have just told the committee that you will not be accepting—

The CHAIR: Can we just wait for the answer before the next question?

The Hon. J.J. SNELLING: Treasury have made an assumption that December will be the date. I would say that it would be after December that we would begin—

Mr MARSHALL: So there is an error?

The Hon. J.J. SNELLING: No, there is not. Treasury make very conservative assumptions. Given that anything later than December would be to the benefit of the budget, that would be the way that Treasury normally do it.

Mr MARSHALL: Yes, but Treasury have informed—

The Hon. J.J. SNELLING: The other thing is there are two questions you asked. You asked a question about when we would be accepting patients. I would expect we would not be accepting patients this year, that we would start accepting patients in the new year. If you were to take September as technical completion, then three months after that commercial acceptance would bring us to December. Obviously, if commercial acceptance were in December, we would not be moving patients over Christmas. I have already said that. That is quite public.

You asked me two separate questions but, having said that, I imagine Treasury would make a very conservative estimate of December because anything later than December is going to be to the benefit of the budget. Treasury, of their nature, do not normally guess things on the upside. They normally take a very conservative approach.

Mr MARSHALL: On page 38, under Central Adelaide Local Health Network, dot point 1, it says that there will be an annual service payment for the operation of the new Royal Adelaide Hospital, \$131.5 million. You are indicating to this committee that the budget is that that will begin on 1 December, but you have just informed the committee that, despite that being the budget, as per the evidence provided by the Department of Treasury and Finance to the select committee, in fact you are not expecting those payments to begin until well into the new year. You would not be accepting patients in the December-January period, so the earliest would be, what, February, March?

The Hon. J.J. SNELLING: We start paying once we have a hospital that is ready for us to move into. If that were to happen in December, we would not be moving patients over Christmas. It would be later in the year, but we would still start paying the service payments from commercial acceptance.

Mr MARSHALL: I understand now. So commercial acceptance could be 1 December; that is what is provided for in the budget.

The Hon. J.J. SNELLING: As I say, that is entirely for the purposes of the budget. The government does not necessarily accept that commercial acceptance would be in December. We are waiting on receiving the definitive cure plan, and we will not be saying any more until we have that definitive cure plan from SAHP. But Treasury, for its own purposes, for the purposes of budgeting and calculating how much money it has, made an assumption that it would be in December and we would start making the quarterly service payments in December. If it were later than that, that would be to the benefit of the budget.

Mr MARSHALL: Just for clarity, we have no idea at this stage until the cure plan is finally received and accepted by the government as to when the technical completion date will be. For the purposes of the budget, it is from 1 December. If it were on 1 December, though, of course naturally, and I think everybody accepts this, we would not be making the transition over the Christmas period.

The Hon. J.J. SNELLING: That is true, but to say we have no idea are not the words I used; they are your words.. What I would say is what we do not have—

Mr MARSHALL: What idea do you have then?

The Hon. J.J. SNELLING: I listened to you without interrupting you and I would appreciate it if you would provide me with the same courtesy. What I would say is that we are not prepared to, firstly, go public with anything, and we are not prepared to do anything in our planning around a date that we do not have confidence in. Until we receive from SAHP their cure plan, which is going to provide us with a date and, more importantly, tell us how they are actually going to get to that date, and it is something that we have confidence in, then we will be in a position, firstly, to say to the public, 'Well this is when we expect technical completion and this is when we expect to be in the hospital.'

Mr MARSHALL: On Budget Paper 4, Volume 3, page 38, is there any medical equipment at the current Royal Adelaide Hospital site currently unusable either through breakdown or by reaching the end of its safe working life?

The Hon. J.J. SNELLING: We have a sustainment fund for the equipment that is at the hospital and the chief executive of the Central Adelaide Local Health Network uses that to make sure that the equipment is kept in a fit-for-purpose state.

Mr MARSHALL: What additional budget has had to be provided for that sustainment fund for the existing Royal Adelaide Hospital to cover the delay in the opening of that hospital?

The Hon. J.J. SNELLING: It is no additional money. It would just be a normal budgeted provision we make for keeping equipment up to date across all of our hospitals. It does not require any additional funding. It is just money that we would be spending anyway.

Mr MARSHALL: But there could not have been a budget because you were meant to—

The Hon. J.J. SNELLING: Regardless of whether it is the Royal Adelaide Hospital or the new Royal Adelaide Hospital, we have a budget to keep our equipment up to date, and just because the equipment is in the old—

Mr MARSHALL: But the equipment would have all been new at the new Royal Adelaide Hospital.

The Hon. J.J. SNELLING: Sorry?

Mr MARSHALL: You surely did not have a budget to update equipment at the old Royal Adelaide Hospital.

The Hon. J.J. SNELLING: Well, there will be equipment that we will be moving that will need to be updated in time.

Mr MARSHALL: So you are saying unequivocally that there is no medical equipment that is either not being used at the moment or reaching the end of its safe working life?

The Hon. J.J. SNELLING: I do not have that information, but what I would say is that it is our responsibility to make sure that the equipment we have is kept fit for purpose. We do have a budget for that, and we do not have to provide additional money because it is money we would be spending in any case.

Mr MARSHALL: What is the budget for that at the existing Royal Adelaide Hospital?

The Hon. J.J. SNELLING: It is \$18,269,000 across all our SA Health sites. For minor works, it is \$14,345,000, but that is across all SA Health sites.

Mr MARSHALL: Can you provide the detail of what that budget is for the existing hospital?

The Hon. J.J. SNELLING: Sure, we can get that.

Mr MARSHALL: Back to page 26, what is the current total project budget for state-funded works at the new Royal Adelaide Hospital?

The Hon. J.J. SNELLING: It has not changed. The total project cost for state-funded works is \$256,049,000.

Mr MARSHALL: You say it has not changed, but last year it was \$244 million so it has changed. What was the reason for the \$12 million upgrade to that budget? The original budget was \$244 million and it is now \$256 million.

The Hon. J.J. SNELLING: There might have just been a shift of budget allocation between different agencies, but we will find that out and get back to you.

Mr MARSHALL: Can you explain to me page 27, item (c), which relates to that line on the table on page 26. It says:

The total project cost including operating project expenses for new Royal Adelaide Hospital—Site Works is \$463.6 million.

Can you reconcile that \$463 million with the \$256 million? What is the difference?

The Hon. J.J. SNELLING: We can give you a reconciliation of the two and explain what the difference is between those two figures.

Mr MARSHALL: Can you hint towards it now. It is a pretty big number. It is not like a \$2 million rounding error: one says \$463 million, and the other one says \$256 million. It is over \$200 million in difference.

The Hon. J.J. SNELLING: I think that the \$255 million is a capital cost, and the \$463 million is an operating cost. The cost of the state's capital and operating investment in the new RAH project is \$476 million. This amount includes 138—

Mr MARSHALL: Sorry, 476?

The Hon. J.J. SNELLING: Yes. There is a slight difference because of this issue with the other agency, but \$138.8 million—

Mr MARSHALL: Sorry, what was the slight difference?

The Hon. J.J. SNELLING: As I said, we can get back to you but, essentially, we think it is because of a transfer from one agency to another. There was \$138.8 million for equipment purchases, including major clinical equipment installation in the new RAH by SA Health Partnership, including linear accelerator imaging equipment and pathology equipment; \$86.4 million, for information communications technology; and \$40 million for site works and supply of utility infrastructure.

There was approximately \$129 million for implementation of transition programs to ensure operational readiness when the construction is complete, including operational design, policy review and development, commissioning plan development and facility readiness (including equipment procurement and commissioning), and operational commissioning execution, people readiness (including a sense of training and communication program), and system readiness, in particular ICT systems in the supply chain.

There was also \$62.2 million for specific costs, including site remediation, dual running of both hospitals and modifications to the new RAH; and approximately \$20.1 million for further project-related costs, including \$6.7 million centrally held contingency for furniture, fittings and equipment re-use. So, I think the difference between the two is that one is an operating figure and one is a capital figure.

Mr KNOLL: In last year's budget, the total cost, including operating costs, was \$375.8 million. So, we have seen an \$87.8 million increase from last year to this year. In the Mid-Year Budget Review, there was \$34.3 million added to the costs. If we can assume that that is part of that increase, we still have a net increase from the Mid-Year Budget Review, according to the way I look

at it, at \$53.5 million. Between either last year's budget and this year's budget, or the Mid-Year Budget Review and this year's budget, why has there been a blowout of—

The Hon. J.J. SNELLING: Firstly, there has actually been a saving to the budget overall from this project because we will not be making quarterly service payments, but that does mean we have to keep the project team around longer than was originally envisaged, but that is more than offset by the reduction in service payments. There was also the settlement, which we announced last year with SAHP, and I imagine that figure of \$30 million is included. There was, I think, a \$32 million budget impact from the settlement we did with SAHP—\$34 million with SAHP because of the settlement over remediation.

Mr KNOLL: Was that settlement included as part of the Mid-Year Budget Review?

The Hon. J.J. SNELLING: I would need to go back and check, but we announced it in September last year, in 2015.

Mr KNOLL: From the Mid-Year Budget Review to this year's budget, there is another \$53.5 million extra included in that total project figure.

The Hon. J.J. SNELLING: It would include a number of things. I do not have a complete breakdown but, obviously, we suspect it would include the money as part of the remediation settlement, and it would include probably extra money around the timing issue—the fact, we had to keep the project team longer because originally, obviously, we had budgeted to keep that project team there to April, when we expected that we would originally make the move, and we have had to keep the project team around longer because that has been delayed. I point out that all of those things have been more than offset by the reduction in quarterly service payments. In fact, overall, we are paying less.

Mr KNOLL: Except that in the Mid-Year Budget Review it talks about a decrease to the budget of \$18.65 million for delayed service payments, and then—

The Hon. J.J. SNELLING: That was the MYBR, when the expected technical completion was going to be in July—

Mr KNOLL: Well, it says in here April, and then commercial acceptance on 3 July.

The Hon. J.J. SNELLING: —and then April for technical completion. But now—obviously, we are in July—we are not going to have commercial acceptance in July, so there is further savings to the budget because commercial acceptance is not going to happen in July: it will happen later in the year.

Mr KNOLL: I understand that, and I take the point definitely that there is a decrease in operating expenses and a lesser increase in investing in payments, according to the Mid-Year Budget Review. My point, though, is that, if you are suggesting that there is going to be savings from a delay to the hospital, why is it that since the Mid-Year Budget Review we have seen an increase of \$53.5 million to the total operating costs?

The Hon. J.J. SNELLING: Because you are just looking at one part of the question. You are just looking at the expenditure side. You are not looking at the saving side. Globally, we are making a saving because we are not paying the \$394 million a year, or the equivalent thereof, for the lateness of the hospital.

Mr KNOLL: Except that, according to the Mid-Year Budget Review and the comments you just made before, those savings were included as part of part (c) on page 27.

The Hon. J.J. SNELLING: In the Mid-Year Budget Review, that would have been until July. This budget takes in a later commercial acceptance date. Those figures do not include that. Those figures are just looking at the expenditure side. They are not looking at the saving side. That is not a global project cost. That higher figure is offset by the reduction that we are spending in service payments. You are just looking at one part of the question.

Mr KNOLL: Yes, certainly I accept that.

The Hon. J.J. SNELLING: You are looking at the expenditure and, yes, obviously we do have, the hospital being late, some additional expenditure associated with that. It is not all on the

upside. It means that the teams that we have to transition the hospital, and some expenses with continuing to potentially have both hospitals run at the same time, have to keep the Royal Adelaide Hospital running longer than we expected. All those things are taken into account, but they are more than offset, as I said, by the reduction in quarterly service payments. We do not start paying for the hospital until commercial acceptance.

Mr MARSHALL: Can I ask some questions now on the clinical research. I refer to Budget Paper 4, Volume 3, page 40. Who commissioned the report by Michael James and Jenny O'Neill into the relocation project for RAH research?

The Hon. J.J. SNELLING: I imagine it would have been the Central Adelaide Local Health Network, but we can check.

Mr MARSHALL: Have you read this report?

The Hon. J.J. SNELLING: No, it is not something that has been brought to my attention.

Mr MARSHALL: It has not been brought to your attention?

The Hon. J.J. SNELLING: No.

Mr MARSHALL: Why is it that this report was received only after the original go-live date for the new Royal Adelaide Hospital?

The Hon. J.J. SNELLING: Again, I would have to get that for you from the chief executive of the Central Adelaide Local Health Network. Can I say, with regard to clinical trials, obviously I also have a health industries hat, and one of the areas that we have identified, that is incredibly important, is clinical trials. It is a key strength of our health system, and one that we are determined to see continued. Obviously, clinical trials are one area that has to be accommodated within the new hospital, among many other areas, but my bottom line is that if clinical trials need to operate and run in a hospital environment, they will—and that is the bottom line.

The clinical trials that have been going on have varying needs. Not every clinical trial needs to be conducted in a hospital environment. Some of them require infrequent interface with the patient undergoing the trial. They do not require a hospital environment. The person can be given whatever needs to be done, tests and so on, which can operate essentially in a GP clinic-type environment. For those things, that is what will happen but, for those more intense-type trials that do need to happen in hospital environment, they will be accommodated within the new Royal Adelaide Hospital.

Mr MARSHALL: What informs the statement you have just made if you have not read the report?

The Hon. J.J. SNELLING: My advice from Julia Squire, the chief executive of the Central Adelaide Local Health Network?

Mr MARSHALL: What informed the answer you provided in parliament to a Liberal question that suggested that the majority of the existing Royal Adelaide Hospital clinical trials could not be accommodated in the new Royal Adelaide Hospital?

The Hon. J.J. SNELLING: My advice, and I would need to check, is that anything that I have said in the house—

Mr MARSHALL: Well, you said, 'Absolutely not.'

The Hon. J.J. SNELLING: No, I think your question was quite different. I think, in fact, you are misrepresenting what I said to the committee. Your question, like all silly questions you ask, was: can the minister confirm that a majority of clinical trials will not be able to happen in the new Royal Adelaide Hospital? To which my answer was, 'Absolutely not.' That is, absolutely not—I cannot confirm, so you perhaps need to look at the questions you ask and take—

Mr MARSHALL: So it was not that it was not correct; it was just that you could not confirm it.

The Hon. J.J. SNELLING: I was not confirming, I was not suggesting that a majority of clinical trials could not happen at the new Royal Adelaide Hospital. I was doing quite the opposite.

Mr MARSHALL: Can a majority of the existing trials—

The Hon. J.J. SNELLING: All I will say is that we will accommodate those clinical trials that need to happen in a hospital environment. They will be accommodated within the new Royal Adelaide Hospital.

Mr MARSHALL: How many of the existing trials?

The Hon. J.J. SNELLING: Whether that is a majority or not would depend upon the needs of those clinical trials. If those clinical trials require a hospital environment in which to be conducted, then they will be conducted in a hospital environment.

Mr MARSHALL: What proportion?

The Hon. J.J. SNELLING: I do not have that. I think that is something that is still being worked through because we have a number of clinical trials, all of which have varying needs and varying requirements, but that is a piece of work that is being undertaken at the moment within Central Adelaide Local Health Network.

Mr MARSHALL: Yes, in fact it has, and it has been with your department since 7 May. You have not had a chance to read it as yet, but it clearly identifies that there are 358 clinical trials that are currently either underway or envisaged to be underway at the existing Royal Adelaide Hospital, and it goes on to say that 85 per cent of these could not be accommodated within the new Royal Adelaide Hospital. What do you have to say about that?

The Hon. J.J. SNELLING: Of those clinical trials, there would be a variety of needs, as I have said. Some of them will need to be undertaken in a hospital environment, and they would be very intense trials where patients have to be very closely monitored in a hospital environment. Those trials will happen in the new Royal Adelaide Hospital. There will be other trials that do not need to happen in hospital environment, and I would envisaged that not all of those that do not need to operate in a hospital environment will be able to happen elsewhere and be able to be done quite safely and quite effectively off-site.

Mr MARSHALL: Given that this report, which you have not read, has been written—

The Hon. J.J. SNELLING: It is not a report to me. There would be any number of reports that are done through SA Health—

Mr MARSHALL: Can I just ask my question?

The Hon. J.J. SNELLING: I do not normally expect to be given reports that I do not commission. If I commission a report, then yes, I would expect to see it, but if a report is done and it is commissioned by someone else within SA Health, then I would not expect to read it.

Mr MARSHALL: You are answering a question that I have not even posed.

The CHAIR: It is not okay for everybody to talk. You have done it a fair bit this morning.

Mr MARSHALL: That is your only rule against the opposition. So, this is a new ruling that only the opposition will be ruled out.

The CHAIR: No, in fairness, each side—

Mr MARSHALL: Good ruling!

The CHAIR: Just before you speak over me, each of you has spoken over each other despite my requests. Shall we start again now and no-one will do it from on.

Mr MARSHALL: So, my question is—

The CHAIR: Is that a yes?

Mr MARSHALL: My question is that given that the report was written by a current serving SA Health employee, why is it that the minister is dismissing the concerns of the two retired practitioners in this area who stated exactly and precisely what was contained in the report received by your department in May this year?

The Hon. J.J. SNELLING: I am not dismissing anything. Obviously we have to do a body of work to make sure we can accommodate those clinical trials within the hospital that need to be done within the hospital. All I am saying is that the clinical trials have a variety of needs—

Mr MARSHALL: You have completely dismissed what the clinicians said last week.

The CHAIR: Order!

The Hon. J.J. SNELLING: You cannot have it both ways, Steven.

The CHAIR: Order! We have started our new forum now where we do not speak over each other, so the minister has the talking stick at the moment.

The Hon. J.J. SNELLING: I happily give you my undertaking not to interrupt the Leader of the Opposition.

The CHAIR: No, we don't need to recap that. Just answer the question.

The Hon. J.J. SNELLING: All I have said is that I give my undertaking that those clinical trials that need to operate in a hospital environment will be undertaken at the new Royal Adelaide Hospital. That is not the case for all of the clinical trials that we do. Not all of them have that requirement and can be safely done off-site. I do not see a problem with that.

Mr MARSHALL: Do you retract the criticism that you made of doctors Chatterton and Harley last week?

The Hon. J.J. SNELLING: I did not make a criticism of them.

Mr MARSHALL: Sorry?

The Hon. J.J. SNELLING: I did not make a criticism of them; that is incorrect.

Mr MARSHALL: Okay, thank you very much.

The Hon. J.J. SNELLING: A false allegation.

Mr MARSHALL: My next question is Budget Paper 4, Volume 3, page 38, and it relates to inpatient beds at the Royal Adelaide Hospital. What is the current average available overnight inpatient bed number at the Royal Adelaide Hospital?

The Hon. J.J. SNELLING: It would be approximately 650 beds.

Mr MARSHALL: So, this is—

The Hon. J.J. SNELLING: I have not finished. So, 650 beds, but it is important to state that that number does vary considerably. You will have significantly more than that over the winter months because we have higher demand over winter and you would have fewer than that over summer, but that is an approximate figure.

Mr MARSHALL: Can you provide an accurate figure, rather than an approximate figure?

The Hon. J.J. SNELLING: To the extent that you can, our bed numbers are fluid, they are not static, as I have repeatedly said in the parliament before. We do not have a static number of beds. We open and close beds according to what the needs of the system are. Average daily occupied beds is 639 for 2015-16 at the Royal Adelaide Hospital. That is average: 639.

Mr MARSHALL: So, 639 was the average for—

The Hon. J.J. SNELLING: For 2015-16.

Mr MARSHALL: —2015-16, 639. How many overnight inpatient beds will be funded and operational at the new Royal Adelaide Hospital at the conclusion of the ramping up period? So, the transition period. Obviously, it is not going to start with that many.

The Hon. J.J. SNELLING: The physical capacity is 700 beds, in terms of physical capacity of the new hospital, and you have, in addition to that, 100 day beds at the new Royal Adelaide Hospital, so 800 beds in total. We are working, as part of the commissioning process, through how

many of those 700 beds we will commission. Obviously, we are not going to need, with the different requirements and so on, to commission all 700 beds straightaway.

Mr MARSHALL: Just for clarity, there is going to be a transition period as we exit the existing Royal Adelaide Hospital, with the approximate 639 average number of beds. You have a total capacity that you can build up to, eventually, at the new Royal Adelaide Hospital of 700 inpatient beds, plus the 100 day beds, but once you have gone through this transition period, so you close all the beds at the existing Royal Adelaide Hospital, how many do you envisage will be funded of the maximum 800?

The Hon. J.J. SNELLING: As I say, we are working through that at the moment as part of the commissioning work that we are doing with the new hospital. It will depend on how many beds we require. It will largely be driven by the time of the year that we open as well. If we open the new hospital coming in to winter we would have a higher requirement for beds than we would to coming out of winter.

Mr MARSHALL: Do you envisage that the number at the new Royal Adelaide Hospital will be higher than the existing Royal Adelaide Hospital?

The Hon. J.J. SNELLING: I would say so, yes, particularly with service moves and so on, I would expect, yes.

Mr MARSHALL: What is the current average available same day inpatient beds at the existing—

The Hon. J.J. SNELLING: At the existing Royal Adelaide. We need to get the number; we have not got it.

Mr MARSHALL: If you could just check what that average is at the existing hospital, as you are with the—

The Hon. J.J. SNELLING: I think it would be fair to say that there is significantly increased day capacity at the new Royal Adelaide Hospital from what there is at the existing Royal Adelaide Hospital. The 100 day beds would be a significant increase in the day capacity at the Royal Adelaide Hospital. They would not do much day surgery, I would think, at the existing Royal Adelaide at all. As technology changes and the opportunity to do day surgery increases, we would envisage that many procedures that are currently done as multiday procedures would be done as same day procedures, so that is why we have that capacity.

Mr MARSHALL: It would be good to know, if you could take it on notice, what the average same day beds are at the existing hospital and what you envisage will be—

The Hon. J.J. SNELLING: Yes, sure. I can tell the committee that it would be significantly less than the capacity at the new Royal Adelaide Hospital.

Mr MARSHALL: Yes, I would envisage that would be correct. Can you tell us the maximum number of inpatient beds currently at the existing Royal Adelaide? We are going to 700—

The Hon. J.J. SNELLING: In terms of physical capacity?

Mr MARSHALL: Yes. We are going to 700 plus 100 at the new hospital. What is the current maximum capacity—

The Hon. J.J. SNELLING: Are you talking about how many beds we could cram in or are you talking about how many they are funded for?

Mr MARSHALL: Maximum capacity at the moment.

The Hon. J.J. SNELLING: Physical capacity?

Mr MARSHALL: Yes.

The Hon. J.J. SNELLING: I do not know. It would be significant, but the way we treat patients has changed. For example, the bed bays that I think now currently only have six beds in them, in previous times they would have been crammed in. What has happened is that bed numbers

right around Australia have decreased significantly over the years, as the way we have treated patients in hospitals has changed.

There was a time when, if you had a baby, you were kept in confinement I think for a week or so. Now we have women at Lyell McEwin Hospital who are in and out the same day. So things have changed significantly and so bed numbers have reduced. If you wanted to absolutely cram bed numbers into the old Royal Adelaide Hospital, it would be significantly more than the 639 that is the average at the moment, but I do not think that would be a desirable thing to do.

Mr MARSHALL: The question really relates to what the additional capacity is going to be at the new hospital versus the current hospital. On the dashboard, as we speak now there are 690 people occupying inpatient beds at the moment. Does it go above 700?

The Hon. J.J. SNELLING: But bed numbers, despite the fact that we have been treating more and more people in our health system—and this is not just South Australia but right throughout I think the western world—and despite the increasing number of patients going through hospitals and seeking treatment, hospital bed numbers have actually been in decline. We have significantly fewer beds than we would have had in the 1990s, even though presentations to our hospitals have increased exponentially.

We are actually doing things better and differently. We do not keep people in hospital for long periods of time and, as time goes on, we would expect that to be more and more the case. Day surgery as a field has completely expanded all sorts of procedures that previously required lengthy stays in hospital; they are now done as day surgery, and we would expect that to be the case. We would be mad to have designed and built a hospital with the assumption that bed numbers are going to continue to increase because, if you take a look at the last 20 years, that has not been the case.

The cost of the system has increased, there is no doubt about that, but we treat more and more people with a relatively stable number of beds. The fact that we have more hospital beds per head of population than anywhere else in Australia I think is something we can considerably improve on, and there is no reason why South Australia should be so different from any other state or territory in the country.

Mr MARSHALL: But do you accept that the new Royal Adelaide Hospital will have no more inpatient bed capacity than the existing Royal Adelaide?

The Hon. J.J. SNELLING: Firstly, yes, it does have increased inpatient bed capacity, but—

Mr MARSHALL: Well, there are 690 there at the moment and the max at the new one is 700.

The Hon. J.J. SNELLING: —we expect that the growth in the need for beds is not going to be there because we are going to continue to do things better. There is no reason why the last 20 years in history with regard to bed requirements in South Australia should be any different. We are not expecting a sudden increase in the number of beds we require. In fact, we think we can probably do a lot better than we currently are, given what other states around Australia have been able to achieve.

Mr MARSHALL: Currently, your Royal Adelaide Hospital dashboard shows that there are 719 beds occupied at the existing Royal Adelaide Hospital.

The Hon. J.J. SNELLING: That would include same-day beds.

Mr MARSHALL: What is the split between the same-day beds and—

The Hon. J.J. SNELLING: As I said, we do not have that, but it would include same-day beds.

Mr MARSHALL: What is the day-bed capacity at the existing Royal Adelaide Hospital? It is nothing like 100.

The Hon. J.J. SNELLING: 700 would include same day. As to how many there are, I would have to get back to the committee.

Mr MARSHALL: You have said repeatedly that times are changing and that fewer beds are required. You have repeatedly said in the media that we would like to see our number of beds per head of population brought down to the national average. How many beds would we therefore be proposing to cut in South Australia?

The Hon. J.J. SNELLING: We are not proposing at this stage to cut any beds. With regard to what I have said about getting down to the national average, that is something to which we aspire, but it will take a significant period of time for us to get to that. It is not something that is going to happen overnight or even in the next 12 months; it will happen over a period of time. I cannot see why it is particularly controversial that a health minister would want a health system that is as efficient as possible. Other states do quite well with fewer beds than we currently have, relative to our size, and that is something I want to achieve in South Australia. I cannot see that there is anything particularly controversial about that.

With regard to how many beds that might mean, it would change because you are talking about something that will happen over a period of a number of years. The beds that other states have will change; it is not a fixed number. I think there is considerable scope for us to make improvements in health care in South Australia and I cannot see any reason that we should not have it as a goal to be closer to the national average than we currently are.

Mr MARSHALL: According to the Australian Institute of Health and Welfare hospital statistics report which was published in 2015, South Australia has 4,923 available beds. It says that we have 2.9 hospital beds per thousand people in South Australia. If we were to take that down to the national average, which you suggest would not be radically unacceptable, this would cut 509 beds across South Australia.

The Hon. J.J. SNELLING: You are presuming everyone else is standing still for one thing and that is obviously not going to be the case. Other states' bed numbers are going to change. You are talking about a period of a number of years and other states' bed numbers are not going to remain static; they are going to change as well. I am not nominating any figure; I am simply saying that over a period of time I would like to see South Australia get closer to the national average than we are at the moment.

I point out a couple of things: South Australia will always have more beds because we have an older population and we also have about 70 country hospitals, of course, and because of our geography we need to sustain them and we need to have beds available in those country locations. It is always going to be the case that we are going to have probably a higher number of beds than the national average, but I think getting closer to the national average than we currently are is something to which we should aspire.

Mr MARSHALL: Over what period of time? Is there a plan?

The Hon. J.J. SNELLING: No, there is not a specific plan other than what Transforming Health is trying to do. No, we do not have some schedule to get to that point because it is something that would happen over a number of years and I suspect something that will only be achieved long after I have ceased being in this portfolio.

Mr MARSHALL: How many hospital beds were removed from the average availability in South Australia last year? You are using this average availability number rather than potential, so how many did we decrease by last year?

The Hon. J.J. SNELLING: We will have to get that for you. We do not have that.

Mr MARSHALL: Maybe an easier question is: how many fewer beds were funded last year than the year before?

The Hon. J.J. SNELLING: We do not fund on beds, we fund on activity, so that is not actually the way it works. We fund on activity, but we could find that out for you.

Mr MARSHALL: Did we have an increase or a decrease in activity last year?

The Hon. J.J. SNELLING: We had an increase in activity of 4 per cent. They are technically called separations, but for all intents and purposes they are admissions, so basically 4 per cent.

Mr MARSHALL: There was a 4 per cent increase in activity.

The Hon. J.J. SNELLING: A 4 per cent increase in admissions. That does not include presentations to our emergency departments where an admission was not necessary.

Mr MARSHALL: I might come back to that. I would like to move on at this stage to patient records, Budget Paper 4, Volume 3, page 38. Where will patient records be stored when the new Royal Adelaide Hospital opens, particularly during that transition period?

The Hon. J.J. SNELLING: The new Royal Adelaide Hospital have a combination of paper and electronic patient records during the first months of operation. Electronic records will be those already in use at the current RAH, including OACIS and access to the Enterprise Patient Administration System records. The new Royal Adelaide Hospital will have a mixture of paper and electronic during the first months before moving to purely electronic system.

Once EPAS has been fully implemented, the new RAH clinicians will have immediate access to a single electronic record. There will be paper records. I imagine some paper records would be kept onsite for a short period of time. Other paper records will be kept offsite. It is no different from the way our hospitals operate at the moment.

Mr MARSHALL: During the transition period, will you be transferring some paper records?

The Hon. J.J. SNELLING: There would be some paper records that would need to be kept onsite at the new RAH, yes. Obviously the records of those patients that are currently admitted would need to go over. Outpatient records would obviously need to go over to the new RAH as well. If you were to present unexpectedly at the new Royal Adelaide Hospital and you had some previous treatment, they would have to extract your record, but that is something that happens at the moment. Your paper records are not all kept at the patient's fingertips. That is why we are moving to EPAS, so that in the future, that will be the case.

Mr MARSHALL: Where will the existing records be stored during this transition period?

The Hon. J.J. SNELLING: It is still being worked through.

Mr MARSHALL: With respect, we were already meant to be in this new hospital. You do not have a plan?

The Hon. J.J. SNELLING: It is still being worked through. I can get some latest advice, but it will be offsite.

Mr MARSHALL: Do you have a budgeted cost for the storage of these records?

The Hon. J.J. SNELLING: It would be met within the existing budget.

Mr MARSHALL: I presume if it is going to be stored offsite then there would be some sort of transport arrangement?

The Hon. J.J. SNELLING: Yes, and that happens at the moment. We have to move records around metropolitan Adelaide and indeed around South Australia all the time. That is something that we regularly do. People present to different hospitals at different times and we need to get their medical records couriered out, and we have good systems in place to do that. The whole reason we are going to EPAS—we recognise and agree with the opposition. While it is something that we do, we would rather not, and that is why we are moving to EPAS, so that we do have electronic patient health records.

A gentleman presented to The Queen Elizabeth emergency department shortly before I visited there a few weeks ago, and the emergency department was able to have that patient's medical records from previous treatment he had received at the Repat Hospital because of EPAS. This is something we would be seeing more and more of, and the director of the emergency department at The Queen Elizabeth Hospital was saying how useful it was to have that at their fingertips. That is why we are making this move.

Mr MARSHALL: What is the plan with the existing records? Are you going to be digitising those existing—

The Hon. J.J. SNELLING: No.

Mr MARSHALL: —or do you just start from the new date, and all the new information goes into EPAS?

The Hon. J.J. SNELLING: No, we are not, because that would just be a manifest waste of time and money. The vast majority of those records are never going to need to be accessed again so no, we are not going through the process of digitising. Basically, once EPAS is turned on, people presenting are going to have their details entered onto EPAS for the first time. For some specialties, we do keep the records. We do keep the previous system, OACIS, available for clinicians on a read-only basis. They cannot make changes to the records or enter anything new, but they are able to read the record and access the information that is on there.

Mr MARSHALL: But OACIS is an electronic system, and then there is another hard-copy system.

The Hon. J.J. SNELLING: Yes. We are not entering paper record information and making it electronic because that would just be a waste of time and money.

Mr MARSHALL: In 20 years' time, the existing data would be almost useless, but there is going to be a pretty messy period where somebody's relevant information from two years ago is going to have to be manually retrieved from some external storage.

The Hon. J.J. SNELLING: Yes, that is right, but there is no getting around that, and that would be for a relatively small number of patients.

Mr MARSHALL: But there would be millions and millions of records.

The Hon. J.J. SNELLING: Yes, there would, but only a tiny, tiny proportion of those would ever need to be accessed again.

Mr MARSHALL: A tiny, tiny proportion of millions and millions is a hell of a lot of records.

The Hon. J.J. SNELLING: Indeed, and we have systems to extract those.

Mr MARSHALL: Your plan, although not yet determined, is to store these records somewhere and then to have a retrieval methodology for the hospitals.

The Hon. J.J. SNELLING: Yes, indeed, as currently happens.

Mr MARSHALL: But there is no budget that has been determined for this as yet?

The Hon. J.J. SNELLING: There is no additional budget required for it. It would just be part of the normal running expenses of the hospital. It is something we do at the moment, so it does not require any existing budget. It would already be budgeted for because it is something we currently do.

Mr MARSHALL: You currently have an off-site storage facility for electronic patient records—

The Hon. J.J. SNELLING: No, what we do is we have to extract—

Mr MARSHALL: —where a hospital can say to you, 'We would like this piece of information transferred,' and there is some central repository for all state medical records at the moment that somebody can access; is that correct?

The Hon. J.J. SNELLING: No, there is not. We have to extract records and move records around the state on a frequent basis. It is not unusual for us to have to move records from one hospital to another and extract records from our storage. We do not keep, in the emergency department at the Royal Adelaide Hospital, the records of every single person who has ever presented there. Those records have to be extracted, they have to be brought out. That does take some time.

Mr MARSHALL: Just for clarity, at the moment there are hospital-based records, electronic and hard copy, but the plan going forward is for a central state records, Attorney-General controlled, medical record repository that would be accessible—

The Hon. J.J. SNELLING: No, I do not know where you are getting that from.

Mr MARSHALL: So you are going to have separate hospital-based systems remaining? You are not going to centralise those records?

The Hon. J.J. SNELLING: No. There is no suggestion we ever were. Electronic, do you mean? Do you mean on EPAS?

Mr MARSHALL: No.

The Hon. J.J. SNELLING: We are not going to centralise all the paper-based records. Yes, EPAS will be a central record, so Steven Marshall would have an EPAS record that could be accessed by clinicians at any of our metropolitan hospitals. There has never been any suggestion we would centralise all our paper-based records.

Mr MARSHALL: So we are going to maintain the paper-based repository on a hospital by hospital basis. The new Royal Adelaide Hospital paper-based system is not going to be based at the new Royal Adelaide Hospital; it is a place yet to be determined.

The Hon. J.J. SNELLING: We are going to have a mixed system at the new Royal Adelaide Hospital for several months before the complete rollout of EPAS. Yes, that will be a combination of electronic and paper-based records. Some of those paper-based records will be at the new Royal Adelaide Hospital; other paper-based records will be off site and need to be extracted, as currently happens.

Mr MARSHALL: What is the net estimated cost to develop EPAS and operate it for 10 years as per—

The Hon. J.J. SNELLING: \$430 million, was that it?

Mr MARSHALL: \$438 million, did you say?

The Hon. J.J. SNELLING: That sounds about right. I am just checking. Give me a moment and I will check. I do not want to mislead the committee or be accused of misleading the committee.

Mr MARSHALL: I am sure you can update us if that is incorrect. That sounds about right. Previously—

The Hon. J.J. SNELLING: Sorry, I am just getting an answer. It is \$421.5 million, the total cost of ownership over 10 years.

Mr MARSHALL: \$421 million?

The Hon. J.J. SNELLING: Yes, over 10 years.

Mr MARSHALL: When did that 10 years start and when does it finish?

The Hon. J.J. SNELLING: I think it is 2011 to 2021, from the 2011-12 financial year.

Mr MARSHALL: So, to 2021-22. \$421 million is the total estimated cost. Is it the cabinet submission or is it the Auditor-General who does the cost-benefit analysis on these projects?

The Hon. J.J. SNELLING: There is the business case that is done as part of the cabinet submission; is that what you are referring to?

Mr MARSHALL: Yes. We had it presented to us only a few weeks ago, the Auditor-General did a net cost benefit. Who does that determination?

The Hon. J.J. SNELLING: That is our data, and the Auditor-General has formed a view based upon that.

Mr MARSHALL: Do you have an update of the cost versus savings and benefits for the project?

The Hon. J.J. SNELLING: We would have to take that on notice, but it is no secret that it has taken us much longer to roll out EPAS to our hospitals than originally was envisaged. So, what that has meant is that the original business case made assumptions about how long it would take to roll out and, flowing from that, the costs and benefits associated with the rollout. Obviously, the longer

it takes to roll out, the fewer the benefits that are accrued and the higher the cost. Really, all that is saying is that it has taken us longer to roll it out and therefore the benefits have diminished because of the length of rollout, and the costs have increased because of the time taken to roll out. That is what the Auditor-General is getting at.

Mr MARSHALL: You will provide us with that detail?

The Hon. J.J. SNELLING: Yes, sure.

Mr MARSHALL: As at 30 June, what has been the actual spend on the EPAS project of the total \$421 million? You can take this on notice, if you want.

The Hon. J.J. SNELLING: We can get back to the committee with that figure, but I should say, as I have said repeatedly with regard to EPAS—no secret—that we expect that over the next 10 years we will have to go back to budget for supplementary funding. We do not think we are going to be able to do it within the \$421 million envelope that has been provided, so we will have to go back to budget, but to date that has not been necessary; we are still operating within budget.

Having said that, though, given that The Queen Elizabeth Hospital rollout has gone so well, it may well be that we are able now to accelerate the rollout to other hospitals. The Royal Adelaide Hospital obviously is our next biggest project, but I think after that, our next two big hospitals will be Flinders Medical Centre and the Lyell McEwin Hospital, both of which, once we have done The QEH and the Royal Adelaide Hospital, I think would probably go pretty smoothly. This is just a snapshot in time, but we may well find out, if subsequent rollouts go well, we will not have to go back to budget, but at the moment it is a bit of an unknown.

Mr MARSHALL: It is an unknown, but you have said that of the original budget of \$421 million you are still within the \$421 million. It has gone slower, but you envisage that you will be going back to cabinet at some stage. Can you update the committee as to when you are likely to go back?

The Hon. J.J. SNELLING: Over coming years, we will probably have to go—at this stage it looks like we will probably have to go back to budget but, no, at this stage we are within budget. We have not had to go back to cabinet, and we have not had to go back to budget for additional funding but it is no secret, and I have said in this committee previously, that we will probably have to go back to budget for additional funding at some stage. Having said that, at this moment in time, you are talking about a project that goes over 10 years, and it may well turn out that, if the rollouts go as well as they have at The Queen Elizabeth Hospital, it might not be necessary.

Membership:

Mr Duluk substituted for Mr Knoll.

Mr MARSHALL: What is the budget spend for EPAS for this current financial year?

The Hon. J.J. SNELLING: The estimated results for 2015-16 for investing is \$12,107,000 and for operating is \$13,757,000.

Mr MARSHALL: Given that there was no projected expenditure in this line in the 2015-16 budget, how did we come to spend \$12 million in the 2015-16 year and what was it spent on?

The Hon. J.J. SNELLING: The process that we have put in place in regard to EPAS is that Treasury holds a contingency for EPAS and, as we roll EPAS out site by site, I would go to cabinet and take a cabinet submission to draw down on that contingency Treasury holds for the rollout of EPAS to a particular site. We are doing that on a site-by-site basis.

Mr MARSHALL: That would make sense because you say that you are going to roll it out to the new Royal Adelaide Hospital this year, but there is only \$214,000 predicted expenditure.

The Hon. J.J. SNELLING: Yes, that is right because as of yet there has been no approval for us to spend that money. That will not happen until I go back to cabinet. That said, most of the infrastructure has already been done.

Mr MARSHALL: What is the total—

The Hon. J.J. SNELLING: For the 2016-17 budget, the investing expenditure is \$214,000 and the operating budget is \$30,685,000.

Mr MARSHALL: By the end of this, there will be \$214 million worth of capital expenditure?

The Hon. J.J. SNELLING: No, \$214,000 operating.

Mr MARSHALL: Thousand?

The Hon. J.J. SNELLING: Yes, and \$30,685,000 capital expenditure.

Mr MARSHALL: That is not a lot of money.

The Hon. J.J. SNELLING: Just to rephrase it, investing is \$214,000.

Mr MARSHALL: That is a couple of tablets.

The Hon. J.J. SNELLING: That is because most of it has already been done. The operating is \$30,685,000. We are talking about 2016-17.

Mr MARSHALL: That is not a huge amount of money—

The Hon. J.J. SNELLING: No.

Mr MARSHALL: —out of a \$421 million project, so clearly there is not a lot of action.

The Hon. J.J. SNELLING: That is just a ridiculous thing to say.

Mr MARSHALL: It is a couple of computers.

The Hon. J.J. SNELLING: It is \$30 million in operating expenditure.

Mr MARSHALL: Sorry, I thought that you said \$214,000.

The Hon. J.J. SNELLING: No. Do you want me to repeat it? I will go through it again: investing expenditure, which is capital, \$214,000.

Mr MARSHALL: A couple of computers.

The Hon. J.J. SNELLING: Operating expenditure for 2016-17 is \$30,685,000. I think that is a bit of activity.

Mr MARSHALL: No, that is good to hear. It was very difficult because you were leaning back a long way and it sounded like there was \$365,000 worth of operating expenditure for the entire year.

The Hon. J.J. SNELLING: No.

Mr MARSHALL: What is the total size of the contingency that you are accessing for this project?

The Hon. J.J. SNELLING: Over the 10 years, it is the \$421 million. That is the total budget.

Mr MARSHALL: How much of that \$421 million remains in the contingency, and how much is included for this year?

The Hon. J.J. SNELLING: It is \$162,621,000.

Mr MARSHALL: Remaining?

The Hon. J.J. SNELLING: I think it is about \$180 million, but I will just double-check that figure.

Mr MARSHALL: \$185 million remaining?

The Hon. J.J. SNELLING: About \$180 million left, but I will just double-check that figure.

Mr MARSHALL: I am happy for you to double-check. So, \$180 million remaining, and what do you envisage of that \$180 million would be spent this current financial year?

The Hon. J.J. SNELLING: As we said, the \$30 million—roughly \$30 million.

Mr MARSHALL: The \$30,365,000?

The Hon. J.J. SNELLING: It is just under \$31 million.

Mr MARSHALL: According to the original project plan, what IT systems should have been retired by now because let's not forget that it was meant to be rolled out by June 2014.

The Hon. J.J. SNELLING: Under the original plan, it was meant to have been rolled out at all our sites by now. That has been reprofiled, but in the original cabinet submission.

Mr MARSHALL: Yes, but the question was: which of the current IT systems should have been retired?

The Hon. J.J. SNELLING: I imagine pretty much all of them.

Mr MARSHALL: Are we incurring additional licence fees for the continuity of those existing systems?

The Hon. J.J. SNELLING: Yes, we are.

Mr MARSHALL: Can you provide detail of how much we are paying in those?

The Hon. J.J. SNELLING: Yes, we are—

Mr MARSHALL: How much we have and how much we envisage?

The Hon. J.J. SNELLING: We can get that figure for you, but that is part of the benefits realisation that has not been achieved. That is what the Auditor-General is talking about in the report.

Mr MARSHALL: Can you provide us with the detail.

The Hon. J.J. SNELLING: Yes.

Mr MARSHALL: I presume that is funded out of the contingencies; is that correct?

The Hon. J.J. SNELLING: At the moment, that is being funded out of the EPAS budget, but it is essentially savings that we have not achieved.

Mr MARSHALL: Does the EPAS allow the religion of a patient to be recorded?

The Hon. J.J. SNELLING: I am chasing that up. I have heard that, and I am finding out about that, but certainly as minister I think it is very important that that is something people are able to put on their record. If it is not, we will work to see how it can be rectified.

Mr MARSHALL: Does EPAS allow a veteran's status as a patient to be recorded?

The Hon. J.J. SNELLING: Yes, I am almost certain that that is the case. I will double-check, but I am pretty certain that that is the case.

Mr MARSHALL: I refer to Budget Paper 5, page 52. I have some questions regarding country EPAS. I note that the budget provided \$500,000 in the 2016-17 budget for, and I quote, 'the development of an implementation plan for the replacement of the existing Patient Administration System in country hospitals'. Is the government planning to engage an external party to develop this plan?

The Hon. J.J. SNELLING: Half a million dollars has been provided to start the preparatory work for the rollout of EPAS across country South Australia sites. We would expect that that work would either be done by an external consultant or, if done by us, we would at least get quality assurance from an external consultant.

Mr MARSHALL: So the half a million dollars is a payment to a contractor to either do the work or—

The Hon. J.J. SNELLING: It is just the budget for that. Part of it will be for a contractor, but part of it would be for engaging our own staff to do that body of work.

Mr MARSHALL: But at this stage it is the government's position, it is the cabinet's position, that the EPAS system will roll out across Country Health in South Australia?

The Hon. J.J. SNELLING: In the long term, yes, but there has been no budget provided for that. The only budget is provided for the existing scope. Yes, obviously we have an existing legacy system, called CHIRON, and that is going to need to be replaced and, yes, we will be replacing that with EPAS.

Mr MARSHALL: But that is a decision that has been made? Some other people have replaced CHIRON with other—

The Hon. J.J. SNELLING: It is certainly the view, but we do not have any authority yet from cabinet. I have not taken in a submission or anything like that to undertake this work, but we are just doing the preparatory work. I would envisage that, yes, that would be the case. I certainly do not think it would make sense for us to have something different from EPAS across our country hospitals.

Mr MARSHALL: When will that go to cabinet?

The Hon. J.J. SNELLING: Once that body of work is done. We do not have a particular time line at the moment.

Mr MARSHALL: This financial year?

The Hon. J.J. SNELLING: Yes, towards the end of this financial year.

Mr MARSHALL: Do you have any—

The Hon. J.J. SNELLING: It is a big job.

Mr MARSHALL: It is a big job?

The Hon. J.J. SNELLING: Yes.

Mr MARSHALL: How many hospitals are we talking about?

The Hon. J.J. SNELLING: Well, 70-odd.

Mr MARSHALL: Another 70 hospitals?

The Hon. J.J. SNELLING: All of our country hospitals.

Mr MARSHALL: But it has been implemented in some country hospitals already?

The Hon. J.J. SNELLING: Just Port Augusta.

Mr MARSHALL: Is it still operational in Port Augusta?

The Hon. J.J. SNELLING: Yes.

Mr MARSHALL: Do we have an estimated cost for the rollout of EPAS across Country Health?

The Hon. J.J. SNELLING: That is why we are doing this work, to determine what that cost will be.

Mr MARSHALL: Just for clarity, it is not included in the \$421 million?

The Hon. J.J. SNELLING: No, it is not. That is not part of the original scope.

Mr MARSHALL: Was it not the original scope for country hospitals?

The Hon. J.J. SNELLING: No.

Mr MARSHALL: Just for two country hospitals?

The Hon. J.J. SNELLING: Just Port Augusta, that is right.

Mr MARSHALL: So, we do not have an estimated cost, we do not have an estimated time. Currently, the PAS system, if you like, in country hospitals is the CHIRON system?

The Hon. J.J. SNELLING: Yes.

Mr MARSHALL: That is now out of licence?

The Hon. J.J. SNELLING: We are in dispute with the provider. It looks like it is going towards a court case. SA Health and Global Health Limited, the supplier of CHIRON and working system software, have failed to reach agreement on the extension of software licenses beyond 31 March 2015. Global Health has commenced legal proceedings in the Federal Court against the Crown in respect of SA Health's continued use of the software. As this is the subject of legal proceedings currently before the court, no further public comment can be made on SA Health's position regarding Global Health. Sorry, that is all I can say.

Mr MARSHALL: For clarity, it has been out of licence since March 2015?

The Hon. J.J. SNELLING: That is correct, it has been out of licence, yes. We are in dispute.

Mr MARSHALL: No licence payments have been made during that period?

The Hon. J.J. SNELLING: We do not have any agreement, no.

Mr MARSHALL: When do you think that will be—

The Hon. J.J. SNELLING: In the meantime, we are using CHIRON in our country hospitals. There are no issues. We are continuing to use CHIRON in our country hospitals. I am not going to say any more about the dispute between the government. I have advice not to say any more.

Mr MARSHALL: The CHIRON project has been morphed in other states that use CHIRON, because it was a very popular program across Australia, into a new product called MasterCare. Was there any consideration given to, instead of moving to the EPAS system for Country Health SA, just moving to MasterCare?

The Hon. J.J. SNELLING: When EPAS was decided upon, it was long before I became Minister for Health, but there was a procurement process for EPAS, and we had clinical advice as well as any number of advice about what was the best product available. Any company could submit proposals for a patient-wide electronic health record. I do not know whether that company did, but they certainly would have had the opportunity to submit a product. The tender process went through and the EPAS product was the product that was decided upon. I do not think it would be sensible for us to have different products, one for metropolitan Adelaide and one for country South Australia.

Mr MARSHALL: Well, that is what you have at the moment.

The Hon. J.J. SNELLING: Indeed. It is not something you would want to have in the long-term. It would flow on from having chosen EPAS for our metropolitan hospitals, and that is what you would roll out to country hospitals as well.

Mr MARSHALL: For clarity, you have not made a cabinet decision to go with EPAS across country health, so there is still an opportunity for you to look at other systems, and it is quite possible the CHIRON system which they are used to, the extension of that system—

The Hon. J.J. SNELLING: I do not think so.

Mr MARSHALL: So, you rule out that.

The Hon. J.J. SNELLING: I am not going to rule anything out, but I think it would be very unlikely that we would go to a different product for country South Australia.

Mr MARSHALL: How many years could it be that we continue to use the unlicensed CHIRON? I mean, it has to be more than a year.

The Hon. J.J. SNELLING: CHIRON is working fine. There is no compromise or anything like that, but obviously we acknowledge it is going to have to be replaced as a legacy system. My first priority is to make sure that we successfully roll EPAS out to our metropolitan hospitals, so our current scope, to get that completed. In the meantime, we are starting the initial body of work that we

need to do to get ourselves in a position where I can go to cabinet with a proposal to replace CHIRON with EPAS. That is not something cabinet has authorised as of yet, but in the medium to long term I would say it would be something which we would be doing. At this stage, we are working very hard to make sure that EPAS is safely rolled out to our metropolitan hospitals.

Mr MARSHALL: Just for clarity, does the government have any contingency or risk management strategy if, for example, they are precluded from the—

The Hon. J.J. SNELLING: Yes, we do.

Mr MARSHALL: And what is that?

The Hon. J.J. SNELLING: I am not going to go into that, but we certainly have. I specifically asked the question about what would happen, and we have strategies in place to deal with it if, for some reason, we were not able to continue to use the CHIRON product.

Mr MARSHALL: Back to patient activity assumptions, in last year's estimates you told this committee that the department was working on a 2 per cent increase in activity level, but earlier you told this committee that it was significantly higher. Can you run us through how you determine the projections for increased activity and, therefore, presumably increased cost moving forward? Is it this 2 per cent, is it the 4 per cent, is it the 7.8 per cent that is in the Transforming Health? Could you run us through what indices you use and who determines them?

The Hon. J.J. SNELLING: I will let David Swan take that question.

Mr SWAN: Essentially, we have done a lot of work over the last eight or nine years to determine projections, and we bring in a company that assists us to determine trends both here and interstate to forecast, and then we work through Treasury what we believe is a reasonable figure to allocate to an additional funding component of which 2 per cent has been the figure that we have used for past years.

From year to year, it varies. Some years we achieve below the 2 per cent which is different from this year where we are higher, but it fluctuates, and it depends on a lot of things. We can have a bad flu season, which we have had over the past 12 months, and other factors about our activity that we are meeting that influence that number. It is an indicative number we use and it is an agreement with Treasury as part of our budget setting process.

Mr MARSHALL: So, you used 2 per cent last year and you have used it again this year.

Mr SWAN: Yes, 2 per cent is the current policy position that we have had for several years.

Mr MARSHALL: What was the actual last year, then?

Mr SWAN: Our separations, which are admissions, were 4 per cent above our activity, but the acuity of patients was 2 per cent above last year. So, it is not too inconsistent with activity.

Mr MARSHALL: You have put in a factor this year. Is that 2 per cent above last year's performance or 2 per cent above that baseline, which was not achieved last year?

Mr SWAN: No; the 2 per cent in the acuity, volume of activity that we undertake, was based over the previous financial year.

Mr MARSHALL: Can you state that again, sorry?

Mr SWAN: In other words, the 2015-16 acuity of activity for our hospitals was 2 per cent above the 2014-15 result.

Mr MARSHALL: So, 2016-17 will be 2 per cent above the 2015-16 actual?

Mr SWAN: That will be the target that we use in 2016-17.

Mr MARSHALL: Then presumably 2 per cent the year after?

Mr SWAN: That is correct.

Mr MARSHALL: So, you are working on that 2 per cent. How accurate has that 2 per cent been?

Mr SWAN: It has been reliably accurate. As I have mentioned before, some years we have results that are a bit less than the 2 per cent, we have had around 1.5, 1.6 per cent, other years they may be slightly over, but there is influence by both activity and also issues such as flu seasons that we might have from the Northern Hemisphere.

Mr MARSHALL: If you are suggesting that you are planning for increased activity, why is it that in Budget Paper 3, page 24, the budget for the Department for Health and Ageing for next year is lower than this year and the year after that is lower again?

The Hon. J.J. SNELLING: It is because of a range of factors. Those budget numbers are not just driven by anticipated activity, there would be a whole range of things that would be factored into figures. We would have various programs, commonwealth NPAs, that would be wrapping up.

Mr MARSHALL: Commonwealth?

The Hon. J.J. SNELLING: NPAs, national partnership agreements, that would be concluding. Included in that figure would be a significant amount of money that would be coming from the commonwealth government through to Health that we would then be expending. When those programs wrap up we are not able to continue that expenditure. I think there would be a significant number of those national partnership agreements the commonwealth would be wrapping up. So, that figure is not driven just by activity, it is driven by any number of factors.

Mr MARSHALL: But you do not dispute the fact that next year you plan to spend less on health in South Australia than you are spending this year, and the year after you are spending less again?

The Hon. J.J. SNELLING: If we get less money from the commonwealth government for national partnership agreements then, yes, that would be what the cut is. The areas where we would be spending less are any number. I can give you some examples: all the mental health national partnership agreements, the mental health unit in Mount Gambier, the NGO funding that we are not getting anymore from the commonwealth, the dental program from the commonwealth. So, there would be—

Mr MARSHALL: What you are saying is that there is no plan—

The Hon. J.J. SNELLING: There would be tens of millions of dollars less that we are getting from the commonwealth government. If we are not getting that money from the commonwealth government we will not be spending those commonwealth government funds for specific programs.

Mr MARSHALL: I accept that point.

The Hon. J.J. SNELLING: Yes, I agree, it is a disgrace and I invite the Leader of the Opposition to take that up with his federal colleagues.

Mr MARSHALL: What you are suggesting to this committee is that that pretty significant reduction in projected health expenditure in South Australia over the next three—

The Hon. J.J. SNELLING: Can you tell us what you are referring to?

Mr MARSHALL: Yes, Budget Paper 3, page 24. This provides, as you will appreciate, the forward estimates for your own department.

The Hon. J.M. RANKINE: I am sorry, Chair, I cannot see any figures on that page. What exactly are you referring to?

The CHAIR: Budget Paper 4, Volume 3.

Mr MARSHALL: No, it is Budget Paper 3, page 24.

The Hon. J.M. RANKINE: Yes, where?

Mr MARSHALL: You have a schedule.

The Hon. J.M. RANKINE: No, there is no schedule on there.

The Hon. J.J. SNELLING: Commonwealth funding to the state would be having the biggest impact on those reductions.

Mr MARSHALL: The minister is suggesting that there will be no cut in state-based expenditure and in fact the state-based expenditure is, essentially, projected to increase, based upon increased activity of 2 per cent per year, but these very significant cuts in the overall forward estimates for your own department are borne out by cuts in federal government programs.

The Hon. J.J. SNELLING: That figure is a different treatment, but if you look at Budget Paper 4, Agency Statements, Volume 3, page 59, we can tell you how much the state is spending on health. Total expenditure for 2016-17 is \$5.8 billion. That compares to an estimated result for 2015-16 of \$5.5 billion, an increase from around \$5.5 billion to \$5.8 billion.

Mr MARSHALL: Can you explain why the operating expenses in your own state budget have a lower figure on page 24?

The Hon. J.J. SNELLING: I can refer you to the correct figure, the figure you should be talking about. That is a GFS number. If you look at Agency Statements in Budget Paper 4, Volume 3, total expenses for the Department for Health and Ageing, there is an estimated result in 2015-16 of \$5.571 billion. In the 2016-17 budget, total expenses are \$5.8 billion. Last time I checked, that was an increase.

Mr MARSHALL: Correct, and that is why I said the decrease, which is contained within the—

The Hon. J.J. SNELLING: As I said, there would be a number of factors resulting from that, but largely it would be because of the reduction in funding—

Mr MARSHALL: Sorry, can I just finish the question?

The Hon. J.J. SNELLING: Yes, sure.

Mr MARSHALL: The question is—because we are not disputing that there is an increase this year—as I have stated multiple times, the budget provides the decrease next year over this year and the year after again quite significantly.

The Hon. J.J. SNELLING: I have put to the committee one of the significant reasons for why that would be reduction in commonwealth funding—

Mr MARSHALL: But can you rule out that there are—

The Hon. J.J. SNELLING: —and there would be other factors as well. But, as always, we get funded by Treasury for activity, and a large part of what our budget is will depend upon the number of presentations. We get funded by Treasury for the amount of activity, and these are just projections. If we get additional activity through the door and more patients we have to accommodate in our hospitals, we get funded for that accordingly.

Mr MARSHALL: Nevertheless, the plan at this stage is to spend less money in health next year than this year.

The Hon. J.J. SNELLING: The only planned reductions in expenditure are from the commonwealth government because the commonwealth government is not coughing up the national partnership agreements that they previously agreed to.

Mr MARSHALL: So the only budget cut—they are all federal government—

The Hon. J.J. SNELLING: Of course—

The CHAIR: Order! Let's hear the question.

Mr MARSHALL: I am just trying to get some clarity. I am not trying to be overtly political at all.

The Hon. J.J. SNELLING: Never.

Mr MARSHALL: It is just that I am trying to get clarity that your budget provides for a decrease in health expenditure not this year, but next year and the year after. The minister has provided evidence to the committee that those cuts are all derived from federal government program

cuts and that there will be no diminution of services or no budget cuts on state-provided services next year or the year after. It is a pretty simple question.

The Hon. J.J. SNELLING: Largely, yes—

Mr MARSHALL: No, not largely. You said completely.

The CHAIR: Order! It is the minister's turn to hold the talking stick.

The Hon. J.J. SNELLING: Thank you. Largely, these reductions are because of ending of commonwealth national partnership agreements that they have either unilaterally cut—

Mr MARSHALL: Which ones?

The Hon. J.J. SNELLING: —or that they have not renewed. Well, there is any number of them. I went through them before: dental funding, subacute funding, mental health funding—

Mr MARSHALL: What do they add up to?

The CHAIR: Just a second. The minister is answering your question.

The Hon. J.J. SNELLING: We can get that. Can we get those figures for the national partnership agreements? There would also be other things to take into account. For example, obviously we do not need to continue the project team around the new Royal Adelaide Hospital after we have made the transition, and there would be some other discrete projects like that that would no longer be budgeted to go throughout the forward estimates because those programs wrap up. Do we have any information about the size of those commonwealth agreements? We are getting them now if the committee wants to bear with me. I am happy to get the exact dollar figures for that.

Mr MARSHALL: Thank you. Whilst we are on the Transforming Health transition team, how much do you expect to spend on the Transforming Health subprogram for the other three years of the forward estimates, i.e. 2017-18, 2018-19 and 2019-20?

The Hon. J.J. SNELLING: Just under \$42 million for 2016-17. I think the leader was after the other years of the forward estimates.

Mr MARSHALL: Yes.

The Hon. J.J. SNELLING: I do not have that at the moment, but just under \$42 million for 2016-17.

Mr MARSHALL: That is the budget and I have that number, but I am looking for the forward estimates to get a picture.

The Hon. J.J. SNELLING: I do not have that. I am happy to get it for you if it is available; it is probably something we are still working on.

Mr MARSHALL: Can you provide to the committee what the total spend related to Transforming Health is in terms of consultancies, advertising and promotion, and in terms of market research?

The Hon. J.J. SNELLING: Are you talking total or just Transforming Health?

Mr MARSHALL: Transforming Health.

The Hon. J.J. SNELLING: It was \$30 million over the last two financial years in consultants that we have spent.

Mr MARSHALL: That is \$30 million in total over the last two years.

The Hon. J.J. SNELLING: That is right.

Mr MARSHALL: That is the Deloitte report.

The Hon. J.J. SNELLING: That is for engaging Deloitte and McKinsey. There might have been some smaller consultants as well, but they would be the two big ones.

Mr MARSHALL: That reference to an independent project management office—

The Hon. J.J. SNELLING: That would be included in that \$30 million figure.

Mr MARSHALL: Who did that work?

The Hon. J.J. SNELLING: Ernst & Young.

Mr MARSHALL: So it is \$30 million. What do you envisage that it is going to be going forward?

The Hon. J.J. SNELLING: As I said, I do not have that figure at the moment but we have a figure for this financial year, for 2016-17. After that it will depend; I suspect it will be significantly less.

Mr MARSHALL: What about advertising, promotion and market research? Were they included in that \$30 million figure?

The Hon. J.J. SNELLING: My advice is they are included in the \$30 million figure.

Mr MARSHALL: Can you provide details of who did the consulting work in terms of advertising, promotion and market research and how much?

The Hon. J.J. SNELLING: I will get some advice about whether we can provide that, but I make no apologies for advertising when we have people putting out false information to the public: people saying that the Modbury Hospital emergency department is about to close or has closed. I make no apology whatsoever in advertising and making sure people understand that those services are still there. When people go out peddling lies, those lies have to be corrected because it is simply dangerous to allow those sorts of lies to go unanswered. In terms of the money that we have spent on advertising, that is something I make absolutely no apology for.

Mr MARSHALL: Now that you have brought up Modbury, I think it is opportune to take a look at it: Budget Paper 4, Volume 3, page 44. Does the government stand by its commitment and in fact the commitment of the minister that no bed will be removed until the need for the bed has been shown to no longer exist?

The Hon. J.J. SNELLING: Yes.

Mr MARSHALL: Can the minister confirm that this year the number of general base beds at the Modbury Hospital has been cut from 72 to 36?

The Hon. J.J. SNELLING: When we made the shift of services from Modbury Hospital to the Lyell McEwin Hospital, the Lyell McEwin Hospital for those particular services had a demonstrated reduced length of stay and there was no reason that we needed those additional beds. Modbury had more beds because it had a longer length of stay. When you move that cohort of patients from Modbury to the Lyell McEwin Hospital, you would not need as many beds because the Lyell McEwin was able to do exactly the same work with a lower length of stay. So, yes, we did have a small reduction associated with those moves and the number of beds because they were not required.

Mr MARSHALL: For general base beds at Modbury, you agree with the dashboard, that it basically was cut from 72 down to 36 beds?

The Hon. J.J. SNELLING: I do not know exactly, but we are moving new services into the Modbury Hospital and those are still happening. A significant number of rehab beds will move to the Modbury Hospital and with further changes as part of Transforming Health we expect more rehab beds to go into the Modbury Hospital. In fact, there are renovations happening at the moment, so what you might be looking at is the fact that we have a ward that is closed for renovations.

The CHAIR: We have a question about Modbury Hospital from the member for Wright.

The Hon. J.M. RANKINE: Just on that line, minister, can you give us an update on the new rehabilitation centre that is being constructed at Modbury Hospital?

The Hon. J.J. SNELLING: I can. The construction has started—I was there not long ago—and that will be a wonderful ambulatory facility which is very badly needed for people living in the north-eastern suburbs. The project is on time and on budget. I am looking forward to opening it and

being there, no doubt with the member for Wright and the member for Florey, at the opening of this fantastic new facility. We will just check, but I think it is probably scheduled for opening in early 2017.

The Hon. J.M. RANKINE: In relation to some of the concerns that had been pedalled around the potential closure of Modbury Hospital, there was also concern about people being able to access the Lyell McEwin. Can the minister update the committee on an initiative that he spoke about at a public meeting—that is, a shuttle bus service to get visitors from Modbury Hospital to the Lyell McEwin Hospital—and the request that I put to him that there might be a stop at the Golden Grove Village shopping centre?

The Hon. J.J. SNELLING: Yes, I can. I will just go back: March 2017 is the completion date for the new ambulatory rehabilitation building at Modbury Hospital. Yes, of course there were some concerns from people, particularly with inpatient admissions being moved from the Modbury Hospital to the Lyell McEwin Hospital. There was concern about access to the Lyell McEwin Hospital and people having to drive a little bit extra to get to the Lyell McEwin Hospital. There is a shuttle bus operating between those two sites. It is very well frequented.

The member for Wright made quite strong representations, as is her wont, that it would be a good idea for this shuttle bus to go through the Golden Grove shopping centre because she had constituents for whom this would be very convenient. Golden Grove of course is very central to the region, and en route to the Lyell McEwin Hospital.

Yes, I can announce that the shuttle service is now going through the Golden Grove shopping centre so that people who need to go between sites—that also includes people from Lyell McEwin who might have to go to the Modbury Hospital; they are able to access that shuttle service. I would like to thank the member for Wright. She does a very good job advocating on behalf of her constituents. It was a very good idea and that shuttle service is now operating and going through Golden Grove Village.

Mr MARSHALL: Can you please take on notice how many of the general base beds have been cut at Modbury? Can you also confirm that the total number of inpatient beds at Modbury has recently been cut from 180 to 120 beds?

The Hon. J.J. SNELLING: From 180 to 120? That does not sound right.

Mr MARSHALL: Well, it is your dashboard.

The Hon. J.J. SNELLING: All I can say is that there would be wards at the moment that are closed while there are renovations being undertaken. I suspect what the Leader of the Opposition might be referring to is simply wards that are shut on a temporary basis while renovations are being undertaken. I am happy to check that, but we certainly do have additional activity going into Modbury Hospital, in particular rehabilitation that is going from Hampstead into the Modbury Hospital as well. To the extent that there has been a reduction, it would only be a temporary reduction while we are doing renovation work in a number of wards.

Mr MARSHALL: Could you perhaps come back to the committee with the total number of beds before Transforming Health and after Transforming Health for the Modbury Hospital so that we can know the net loss, if any?

The Hon. J.J. SNELLING: Yes, I am more than happy to do that.

Mr MARSHALL: Can you also confirm, consistent with the revamped SA Health inpatient dashboard, that Modbury Hospital has lost specialised streams including critical care, emergency surgery and paediatrics?

The Hon. J.J. SNELLING: That is no secret. Yes, we made the decision to move the paediatric inpatient ward a long time ago. That does not mean children are not seen. In fact, I took my 13-year-old son to the Modbury Hospital emergency department only a few weeks ago, and he was very well looked after. We do have a very good system for transferring paediatric patients who do need to be admitted up to the Lyell McEwin Hospital. They bypass the emergency department and are admitted straight into the paediatric ward. That is a system that works very well. It is a very small number of patients who are transferred but, when it does happen, it happens seamlessly.

Emergency surgery, we have been public about. There is nothing new about that. I have put on record many times the reasons for that happening. We do want Modbury Hospital to be able to operate as a specialist elective surgery site. Elective surgery is not something we do as well as we should here in South Australia. People wait too long for elective surgery and there are too many cancellations. Modbury Hospital will be given the freedom to run as an elective surgery specialist site. We are very confident that it will do that very well and really chew through those waiting lists of people waiting for elective surgery. With regard to intensive care, or critical care, that was taken away from Modbury Hospital a long time ago, from memory.

Mr MARSHALL: If we could turn our attention now to The Queen Elizabeth Hospital—

The CHAIR: Before we go on, member for Fisher, are your questions about Modbury, or general?

Mr MARSHALL: Why do you not just ask him privately? Why do you have to waste the time of this committee?

Ms Cook interjecting:

The CHAIR: Order! The leader has the call.

Mr MARSHALL: We have 2¼ hours.

The CHAIR: Order! The leader has the call.

Mr MARSHALL: Less than a half an hour for 54 pages, and we are up to page 10.

The CHAIR: I am on my feet. If the leader cannot observe—I have asked you to ask your question.

Mr MARSHALL: The government wants to ask Dorothy Dixier questions to itself.

The CHAIR: I cannot control—

Ms Cook interjecting:

Mr MARSHALL: Well, ask him yourself in the cabinet room or the—

Ms COOK: You do not need to shout, Steven.

Mr MARSHALL: Why do you waste the time of this committee?

The CHAIR: We are going to have to suspend the committee if you cannot control yourself. Do you want a question about TQEH or not?

Mr MARSHALL: Absolutely.

The CHAIR: Then let's move on.

Mr MARSHALL: I had the call.

The CHAIR: You would not know it, would you?

Mr MARSHALL: I refer to Budget paper 4, Volume 3, page 27. Why has the capital project for TQEH, Transforming Health, been over budget and running nine months late? Can you give an update on that project?

The Hon. J.J. SNELLING: Can you repeat what you are referring to?

Mr MARSHALL: You have The Queen Elizabeth Hospital's Transforming Health capital works project. It has slipped by nine months and it has gone over budget by \$2 million. If you could just provide an update on why the project—

The Hon. J.J. SNELLING: At the moment, we are consulting with clinicians about the shape of that, how that is going to look. It is no secret that there have been issues with that. We are working very closely with the submissions.

Mr MARSHALL: Has the government awarded a contract for the \$15 million of capital works it expects to complete this year?

The Hon. J.J. SNELLING: I am still completing the answer. There was some additional budget approval to address some of the issues that the clinicians had raised with us, so that is why there is the extra \$2 million, but we are still working with our clinicians through those particular issues. What was the next question?

Mr MARSHALL: What issues are they? What issues were those that were raised by the clinicians?

The Hon. J.J. SNELLING: It required a considerable reconfiguration at The Queen Elizabeth Hospital, the moves of a number of inpatient areas from one part of the hospital to the other. Various clinicians had concerns about that, but we are in the process of addressing those issues.

Mr MARSHALL: Why was that consultation not undertaken before the plan was approved?

The Hon. J.J. SNELLING: We actually have not got to consultation yet. These are just the initial discussions we have had with clinicians from a planning perspective.

Mr MARSHALL: Has the government awarded a contract for the \$15 million of capital works it expects to complete this year at The Queen Elizabeth Hospital?

The Hon. J.J. SNELLING: The contractor had been appointed, but that has been basically suspended while we undertake further consultation with clinicians.

Mr MARSHALL: So the contract was awarded, but it has now been suspended?

The Hon. J.J. SNELLING: Pending further consultation with the clinicians.

Mr MARSHALL: Will any services or programs currently provided at The Queen Elizabeth Hospital need to be relocated to other parts of the hospital or other sites in advance of this year's scheduled works?

The Hon. J.J. SNELLING: Yes, I think so; it would be possible. It does depend on what our final landing is with the clinicians, but I suspect that would be the case.

Mr MARSHALL: What steps have been taken to dispose of the Hampstead Rehabilitation Centre and whose responsibility is that?

The Hon. J.J. SNELLING: None that I am aware of. I imagine it would ultimately be Renewal SA's responsibility should we completely vacate that site.

Mr MARSHALL: Does the government have an estimate of the value of the site?

The Hon. J.J. SNELLING: Not that I am aware of. I imagine there would be a Valuer-General's valuation floating around somewhere, but certainly we have not commissioned any specific valuation of the site.

Mr MARSHALL: With regard to The QEH inpatient cardiac services, what healthcare assessment and what cost-benefit assessment was undertaken to determine that The QEH, cardiology and cardiology research should be integrated into the new Royal Adelaide Hospital and who were the officers and/or consultants who undertook this work?

The Hon. J.J. SNELLING: I will take that on notice.

Mr MARSHALL: Why has SA Health refused to consult with clinicians at The QEH cardiology unit over its closure, or even go down and inspect the work of the unit, or explain to clinicians reasons for closing the unit?

The Hon. J.J. SNELLING: That is untrue. I have been down there, I know Julia Squire, the chief executive of Central Adelaide Local Health Network has been down there, and Vickie Kaminski, the Chief Transformation Officer has been down there as well.

Mr MARSHALL: When did you last visit and speak to clinicians about the plan to move cardiology services from that site?

The Hon. J.J. SNELLING: A couple of months ago, I think. I can get the exact date.

Mr MARSHALL: Who did you meet with?

The Hon. J.J. SNELLING: I had a whole morning and I visited with a whole number of areas in The Queen Elizabeth Hospital. I spoke to a number of clinicians who had concerns, and the cardiology area was part of it. In fact, I spoke to Professor Horowitz. He introduced me to a number of his colleagues and we had a discussion. I think it was two or three months ago, but I can get the exact date.

Mr MARSHALL: It was following that meeting that you formed the opinion that it was still correct to move those cardiac services to the—

The Hon. J.J. SNELLING: Yes.

Mr MARSHALL: So you reject the advice and the proposals put forward by that group?

The Hon. J.J. SNELLING: I do not want to put words in their mouth, but they had views and I have taken into account what they had to say. But in terms of our plans and what we need to do, and the plans to move the cath lab up to the Lyell McEwin Hospital, that is a very important piece of work that has to happen. While I would never be dismissive of issues raised by clinicians, I have certainly taken their views into account, as has, I am sure, the Chief Transformation Officer and Julia Squire the chief executive of the Central Adelaide Local Health Network. Taking into account what people say does not mean you necessarily completely change course. It means you listen to what they have to say and acknowledge the points they have raised.

Mr MARSHALL: Does the minister accept that this has to have adverse health outcomes for people living on Lefevre Peninsula?

The Hon. J.J. SNELLING: No, I do not and, in fact, quite the opposite. I know that this will lead to far better health outcomes. Too many people are having to travel from the northern suburbs. They are not able to get coronary care that they need at the Lyell McEwin Hospital because the coronary unit there only has one cath lab. Best practice is for there to be two cath labs when you have two side by side, and this will lead to far better patient outcomes, particularly for the people of the north, people who live on the Lefevre Peninsula who need access to a cath lab will be able to access that cath lab at the Royal Adelaide Hospital.

Mr MARSHALL: Sure, but do you accept that every 15 minutes of delay translates into a definite increase in mortality rates?

The Hon. J.J. SNELLING: That would be the case for people who live in the northern suburbs at the moment who are not able to access coronary care at the Lyell McEwin Hospital, and are having to travel to The Queen Elizabeth Hospital, and for whom delays would be far greater than the little extra distance between The Queen Elizabeth Hospital and the Royal Adelaide Hospital. It is a long way from Elizabeth to Woodville, much farther than it is from Woodville to the city, so we have to make decisions, but it is not safe nor is it practical, nor is it the best use of money to have multiple cath labs at every hospital in the state.

The best practice is to identify key hospitals in particular regions where you have access to that technology and, speaking with clinicians there, their strong advice is the place to have those three cath labs is the Royal Adelaide Hospital for central patients, the Lyell McEwin Hospital for patients in the north, and Flinders Medical Centre for patients in the south. That is the best configuration of cath labs around metropolitan Adelaide that will lead to best health outcomes for the people of South Australia and that is the basis on which we are proceeding.

Mr MARSHALL: Whilst you might be able to claim that overall in South Australia, it is certainly going to be a massive disadvantage—

The Hon. J.J. SNELLING: So, you are prepared to sacrifice the health outcomes of people who live in the northern suburbs—

Mr MARSHALL: I am not.

The Hon. J.J. SNELLING: —for people who live in another part of Adelaide.

Mr MARSHALL: I am not suggesting that at all. But simply—

The Hon. J.J. SNELLING: I am not prepared to do that. My decision is not just for the people who live on Lefevre Peninsula. I have to make decisions about what is best for the entire population of this state, and I am not prepared to any longer compromise the health care of people who live in the northern suburbs.

We have previously shown the statistics that almost half the people who live in the northern suburbs are not able to access the hospital health care that they need. They have to travel outside of the northern area, the Northern Adelaide Local Health Network, to access the hospital care they need, whereas it is only 20 per cent for people living in central and southern Adelaide. We need to redress that balance, and we redress that balance by moving and putting additional services into the Lyell McEwin Hospital, and I do not make an apology for that for a moment.

Mr MARSHALL: Do you accept the VLAD data, which for the past three years unequivocally shows that The QEH mortality rate is consistently 5 to 7 per cent lower than the Royal Adelaide Hospital?

The Hon. J.J. SNELLING: Absolutely, and this is not in any way a criticism of the health care, or the quality of care, at The Queen Elizabeth Hospital, which is excellent. That is not what is driving this, and it is completely—

Mr MARSHALL: Budget related?

The Hon. J.J. SNELLING: It is appalling to suggest that that is in any way a motivation for the changes. This is not a reflection upon the health care that is provided at any of our hospitals.

We are simply moving services to where the population needs them, and the population in the northern suburbs needs a second cath lab. The population of the western suburbs can safely access a cath lab at the Royal Adelaide Hospital. This is in no way—and I am pretty appalled that the Leader of the Opposition would suggest otherwise—a reflection upon the quality of health care that is being provided by doctors and nurses at The Queen Elizabeth Hospital, which is excellent.

Mr MARSHALL: But there will be a massive diminution of services to people living in the western suburbs—

The Hon. J.J. SNELLING: No, there will not.

Mr MARSHALL: —as a result.

The Hon. J.J. SNELLING: No, there will not because people in the western suburbs—

Mr MARSHALL: There is going to be an improvement for the people in the north, but there will be a massive diminution of services to the people living in the western suburbs of South Australia because they have much farther to travel, and the services which are currently provided at The Queen Elizabeth Hospital actually have much lower mortality rates at the hospital to which you are proposing to send them.

The Hon. J.J. SNELLING: No, that is completely untrue. It is not a massive distance, and it is ridiculous to suggest that there is a massive distance between The Queen Elizabeth Hospital and the Royal Adelaide Hospital. They are relatively close together—they are 10 minutes to each other. In contrast, the Lyell McEwin Hospital to The Queen Elizabeth Hospital would probably be about 40 to 45 minutes, depending on traffic. To suggest that this is some massive reduction in services to the people in the western suburbs is completely erroneous and, I would suggest, mischievous.

Mr MARSHALL: Why can we not have both?

The Hon. J.J. SNELLING: Because it is not safe. It is not best practice to have highly specialised areas, such as interventional cardiology, spread across too many sites. Best practice is to have them at a certain number of locations consistent with population needs. What the population requires is a cath lab in the northern suburbs to look after the growing population in the north; a cath lab in the central area, at the Royal Adelaide Hospital; and a cath lab (or cath labs), that facility, in the southern suburbs as well.

Ms COOK: I just want to get a couple of minutes in for the south, minister, and refer to Volume 3, page 26. Are you able to inform the committee about any changes being made to support

access for patients, relatives and staff for car parking at Flinders Medical Centre under Transforming Health?

The Hon. J.J. SNELLING: Thank you very much and, yes, we are. We are doing building works, which have already begun to significantly increase the number of car parks at Flinders Medical Centre. We acknowledge that car parking is an issue, for both patients and staff, at Flinders Medical Centre, and the new car park will provide about 500 additional car parks on the site. I have also given instruction for palliative care that free 24-hour car parking be provided, particularly for the relatives of patients who are in palliative care, so that they have quick and easy access to the site.

Of course, into the future we will have a train link into the Flinders Medical Centre. One of the issues we have is that public transport links are not great into the Flinders Medical Centre, but that will be a significant improvement with that train link coming across. It will also enable enormous connectivity between Tonsley and the Flinders Medical Centre.

We have been working through these issues. Obviously, while site works are being undertaken, it is a bit disruptive. I would like to acknowledge the member for Fisher's advocacy on behalf of nurses, her former colleagues, at the Flinders Medical Centre, in making sure that they have adequate access to safe and convenient car parking. We are confident that with building works being undertaken we will see some significant improvements.

Ms COOK: On the same Volume 3, page 26, are you able to inform the committee about the works also being undertaken to improve the neonatal service at Flinders?

The Hon. J.J. SNELLING: Yes, the government made an election commitment to revamp the neonatal facility in the Flinders Medical Centre. The existing neonatal level 6 intensive care service will undergo a \$17½ million upgrade. FMC remains the major site for maternity services; indeed, I acknowledge that they had their 100,000th birth. I will have a completion date for those works, but, yes, they will happen, and we will make sure that they are certainly completed before the next election.

Mr MARSHALL: How many cardiology beds will there be at the new Royal Adelaide Hospital?

The Hon. J.J. SNELLING: We will have to take that on notice.

Mr MARSHALL: Is it not correct that currently we have 30 beds at The QEH, 48 beds at the existing Royal Adelaide Hospital, and proposed, from the most recent numbers I have seen, for the new Royal Adelaide Hospital there will be only 30 cardiac beds? We are going to go essentially from 78 cardiac bed capacity to only 30 cardiac beds.

The Hon. J.J. SNELLING: Because a significant amount of activity will go to the Lyell McEwin Hospital. At the moment, The Queen Elizabeth Hospital looks after coronary care for a significant number of people from the northern suburbs, and that activity will be moved to the Lyell McEwin Hospital. There will be, in fact, extra capacity at the Lyell McEwin Hospital to deal with that increased activity.

Mr MARSHALL: Well, in fact, when we look at the statistics on that, only 5 per cent of presentations at The Queen Elizabeth Hospital's cardiology department come from the Lyell McEwin Hospital catchment, so there is going to be a reduction from 78 beds down to 30. Yes, there will be a reduction of 5 per cent in The Queen Elizabeth Hospital capacity, and we are ending up with a lot fewer beds.

The Hon. J.J. SNELLING: My advice is that a significant amount of activity at the moment is going from the northern suburbs to The Queen Elizabeth Hospital. I do not have the exact breakdown, but we are significantly increasing the amount of activity that will be going through the Lyell McEwin Hospital. So, while, yes, there might be fewer beds in central Adelaide, that is because the activity no longer will be going to central Adelaide; it will be going to the Lyell McEwin Hospital. The Royal Adelaide Hospital also will be pushing work out north. There are patients at the moment going to the Royal Adelaide Hospital, too, from the northern suburbs. Likewise, the Royal Adelaide Hospital activity will be shifted to the Lyell McEwin.

Mr MARSHALL: How many additional beds will there be at the Lyell McEwin Hospital?

The Hon. J.J. SNELLING: I will take that on notice, but I will say that we have invested significantly in the Lyell McEwin Hospital. It was only several years ago, I think, that the first cath lab was established at the Lyell McEwin Hospital. Previously, the northern suburbs did not have a cath lab at all and, hopefully, very soon we will have a second cath lab. There is already the space provided for it. Like all these things, what we will do is make sure that there are the beds that are required for the activity that presents itself. Beds are never a static number. We increase and decrease beds according to what the activity needs are for the presentations that come to the hospital. We will always make sure we have sufficient beds for the activity.

Mr MARSHALL: Nevertheless, can the minister confirm that there will be more cardiac beds once Transforming Health has been implemented, when you add up the additional beds at the Lyell McEwin Hospital together with the reduction at The Queen Elizabeth Hospital and the new Royal Adelaide Hospital?

The Hon. J.J. SNELLING: That will depend on what the needs are. It depends upon the number of presentations, but what we will do is have enough beds for the presentations that come through the hospital, whether that be at the Royal Adelaide Hospital or the Lyell McEwin Hospital.

Mr MARSHALL: But that will be an increase in bed capacity.

The Hon. J.J. SNELLING: It will certainly—

Mr MARSHALL: The increase is an increase in capacity for the people of South Australia.

The Hon. J.J. SNELLING: It will be what is required. I am not in the business of just having beds for the sake of having beds.

Mr MARSHALL: How many are required?

The Hon. J.J. SNELLING: That will change over time. If we have—

Mr MARSHALL: How many will it be?

The Hon. J.J. SNELLING: He is interrupting me, Madam Chair. We will have enough beds for the activity it presents. That will change over time and, indeed, technology will change over time. I am confident with improvements in care at the Lyell McEwin Hospital that people will be able to be discharged far sooner from hospital because they will be getting the intervention they need, their disabilities and so on, damage done to their heart will be less, and so the requirement for let for beds will be less because we will be treating better than we currently are.

Mr MARSHALL: The minister has repeatedly said we are going to have the number of beds that are required. How many beds are required at the date that the new Royal Adelaide Hospital is open? We do not want to have these continual answers that it varies on a time frame. We are going to be closing beds—30 beds at The Queen Elizabeth Hospital. We are going to be closing the net between the existing Royal Adelaide Hospital, currently 48, down to a predicted 30 when the new Royal Adelaide Hospital opens. There is a very significant cut from 78 beds down to 30; that is 48 beds that are going here. How many bed increases are there going to be at the Lyell McEwin Hospital? Can we get any indication from you? When you say we will have as many as we need, how many is that?

The Hon. J.J. SNELLING: The chief executive is just pointing out to me, while the interventional work is going up to the Royal Adelaide Hospital, there will still be cardiology beds at The Queen Elizabeth Hospital. We are not moving every cardiology bed from The Queen Elizabeth Hospital up to the Royal Adelaide Hospital. It would just be the interventional work that is going. Cardiology is more than just the interventional work that goes through a cath lab, so there will still be cardiology beds at The Queen Elizabeth Hospital.

Mr MARSHALL: When precisely will The QEH cardiology and the cardiology research team be moved to the Royal Adelaide Hospital?

The Hon. J.J. SNELLING: We do not have a date yet. We are working on that. It is something that is still subject to consultation.

Mr MARSHALL: Will the unit have to move twice?

The Hon. J.J. SNELLING: At this stage it will be moved to the existing Royal Adelaide Hospital and then from there, with the rest of the unit, will go to the new Royal Adelaide Hospital where it will be a consolidated unit.

Mr MARSHALL: I refer to Budget Paper 4, Volume 3, page 41. Can the minister advise whether the public hospital fees levied on compensable return-to-work patients are the same as those levied on non-compensable patients?

The Hon. J.J. SNELLING: Could you please repeat the question?

Mr MARSHALL: If you have a look at the table on page 41, it shows a fairly significant increase in the compensable public hospital fees which are paid by return-to-work patients. Can you indicate to the committee whether we charge return-to-work patients the same as non-compensable patients?

The Hon. J.J. SNELLING: When you say 'non-compensable', do you mean patients from overseas? Normal patients who come in, we do not charge at all. They do not get charged. Our public hospitals are free. There are patients from overseas who get charged, obviously through their travel insurance. Compensable patients would be patients who have a motor vehicle accident claim or a WorkCover claim, and there would be different schedules for all of those things. They would be different.

Mr MARSHALL: Sure, but there has been a 14 per cent increase in those fees. The compensable return-to-work patients fees for 2016-17—

The Hon. J.J. SNELLING: Do you mean an increase in fees or an increase in the amount we receive?

Mr MARSHALL: An increase in fees, an annual increase, and then there is a compound increase of 47.9 per cent over the past five years.

The Hon. J.J. SNELLING: What that is referring to is that the government has been very keen to make sure that we maximise revenue from private patients, so we have made a concerted effort that when private patients present we give them an opportunity of being in the hospital as a private patient. I think what that is referring to is the efforts we have made to a concerted campaign, as have other states, to get more from—

Mr MARSHALL: I have read that part as well, but this is really asking the question why there has been a 14 per cent increase in the compensable return-to-work fees for this year and 47 (almost 50) per cent of the last five years.

The Hon. J.J. SNELLING: There has been discussion between SA Health and ReturnToWorkSA about what the fees are that are charged for patients who are under WorkCover. We have now come to a settlement on that that has been agreed to by both parties. It is probably not reflected in the budget because it has been since the budget.

Mr MARSHALL: What is SA Health's annual revenue from return to work?

The Hon. J.J. SNELLING: We would need to get that for you.

Mr MARSHALL: Can you explain the methodology for setting the fee for compensable patients in public hospitals?

The Hon. J.J. SNELLING: On a cost recovery basis?

Mr MARSHALL: Just a straight cost recovery. So, the cost increased by 50 per cent in the last five years.

The Hon. J.J. SNELLING: It is done on a cost recovery basis, so any increase to the fees would reflect the increasing costs of providing these services.

Mr MARSHALL: The opposition has been made aware of a case of a compensable patient who went into a country hospital for observation overnight, they were given morphine injections and X-rays were taken. The fee levied for the overnight stay was over \$9,000. An SA Health document

suggested that the price for the services was a little over \$5,000 but the cost weight of 1.758 was applied. Are compensable patients charged a higher fee?

The Hon. J.J. SNELLING: Without knowing the specifics of the individual it is pretty hard for me to comment. There is a methodology that is in place to work out how much is charged and this patient would have been charged according to that methodology.

Mr MARSHALL: Would a self-funded private patient pay the price plus the cost weight?

The Hon. J.J. SNELLING: No, because the private health funds have their own schedule with regard to what they recompense public hospitals for particular services, and that would be different from that.

Mr MARSHALL: Eye services: what reports has the government commissioned and received on the future of eye services at the new Royal Adelaide Hospital, in particular the plan to establish an eye hospital?

The Hon. J.J. SNELLING: I will give that to the chief executive.

Mr SWAN: A few months ago, we engaged a consulting firm to consult and explore options about the future service provision of ophthalmic surgery. We have received that report and are currently working through the various recommendations of it, but we have not formed a view. We believe there would still be a little bit of work that we need to do to form a position to have discussions with the ophthalmic surgeons about what models would be available to move forward with.

Mr MARSHALL: Who did this work?

Mr SWAN: Ernst & Young, a consulting firm, was engaged to undertake this work and particularly consult with the industry and look at what other options are used around Australia to try to provide us with advice on what innovation we can put into this area that responds to the treating clinicians' needs.

Mr MARSHALL: Is it still the government's position to establish a dedicated eye hospital, now that the Modbury option has fallen through?

Mr SWAN: We are working through that. We have not formed a particular view. We are working out which is the best option for SA Health and the clinicians involved and their patients.

Mr MARSHALL: I have a question regarding breast screening in South Australia, Budget Paper 4, Volume 3, page 41. Why is the target for breast cancer screening not currently being met?

The Hon. J.J. SNELLING: I would just point out that our estimated result for 2015-16 is 65.7 per cent, which exceeds the target of 65.6 per cent. In 2014-15, it was 56.8. Obviously, women present voluntarily. We do everything we can to promote the service. Sorry, the target for 2015-16 was 66.3 per cent, so we are very close to reaching that target. Our estimated result for 2015-16 is 65.7 per cent. Obviously, we will do everything we can. It is a very important service. We advertise extensively. We put information out to GPs and other areas wherever we can to promote it because obviously it is a very important health measure.

Mr MARSHALL: In reality, there were 12,000 fewer breast cancer screenings in South Australia than had been the target. The target was 102,000 and you got to 90,000. Are you suggesting that the reason is that women did not present or that are there other reasons? We have heard that radiologists have been flown in from Sydney. Are we still flying radiologists in from Sydney?

The Hon. J.J. SNELLING: I do not know what the leader is referring to, but I am looking at Budget Paper 4, Agency Statements, Volume 3, page 41, breast screening participation rate for women aged 50 to 74 years. There, the 2015-16 estimated result is 65.7 per cent and the target was 66.3 per cent. So, yes, we have not reached the target, but by 0.6 of a per cent, which I think is not a bad result.

The CHAIR: There being no further questions on this particular line, I declare the examination of proposed payments for the Department for Health and Ageing adjourned and referred to committee B.

Sitting suspended from 11:16 to 11:30.

Membership:

Mr Gardner substituted for Mr Marshall.

Ms Redmond substituted for Dr McFetridge.

Departmental Advisers:

Dr D. Russell, Chief Executive, Department of State Development.

Ms A. Reid, Deputy Chief Executive, Department of State Development.

Mr P. Louca, Executive Director, Arts South Australia, Department of State Development.

Ms H. Schultz, Director, Cultural Heritage and Assets, Arts South Australia, Department of State Development.

Ms J. Layther, Director, Arts Programs, Organisations and Initiatives, Arts South Australia, Department of State Development.

Mr J. Andary, Director, Arts Industry and Finance, Arts South Australia, Department of State Development.

Ms S. McDonnell, Ministerial Adviser.

The CHAIR: We welcome everyone back to committee A. The estimates committees are a relatively informal procedure and, as such, there is no need to stand to ask or answer questions. I understand the minister and the lead speaker for the opposition have agreed an approximate time for the consideration of the proposed payments, which may facilitate a change of advisers. Can the minister and the lead speaker for the opposition confirm that the timetable for today's proceedings on arts, as distributed, is accurate.

Mr GARDNER: Yes.

The Hon. J.J. SNELLING: Yes.

The CHAIR: Changes to the committee membership will be notified as they occur. Members should ensure that the Chair is provided with a completed request to be discharged form. If a minister undertakes to supply information at a later date, it must be submitted to the committee secretary by no later than Friday 28 October 2016. This year, estimate committees responses will be published during the 15 November sitting week in corrected daily *Hansard* over a three-day period.

I propose to allow both the minister and the lead speaker for the opposition to make an opening statement of about 10 minutes each, should they wish. There will be a flexible approach to giving the call for asking questions based on about three questions per member, alternating each side. Supplementary questions will be the exception rather than the rule.

A member who is not part of the committee may ask a question at the discretion of the Chair. Questions must be based on lines of expenditure in the budget papers and must be identifiable and referenced at the beginning of each question. Members unable to complete their questions during the proceedings may submit them as questions on notice for inclusion in the *Assembly Notice Paper*.

There is no formal facility for the tabling of documents before the committee; however, documents can be supplied to the Chair for distribution to the committee. The incorporation of material in *Hansard* is permitted on the same basis as applies in the house, that is, that it is purely statistical and limited to one page in length. All questions are to be directed to the minister and not the minister's advisers. The minister may refer questions should he wish.

During the committee's examinations, television cameras will be permitted to film from both the northern and southern galleries, and we do ask for noise to be kept to a minimum. I call the Minister for the Arts to make an opening statement if he wishes.

The Hon. J.J. SNELLING: Just very briefly, and I will introduce advisers here at the table. The arts, obviously, are very important to our state. Increasingly, we have tried to shift the emphasis in the portfolio towards its potential to build economic activity in our state. A lot of the reason for the shift from where the arts portfolio had traditionally been located, in the Department of the Premier and Cabinet, into the Department of State Development under the leadership of Dr Don Russell, is to give it that sharp economic focus that is so important.

I think if you look at the combined economic impact of the Adelaide Festival, the Fringe and WOMAD, our most recent combined economic impact of those three festivals is \$158 million, so these festivals are bringing people into South Australia, creating economic activity and putting dinner on the table of hundreds, if not thousands, of South Australian families.

We are also keen, obviously, to develop the arts industry in itself and develop new opportunities for our artists to develop their skills and take their skills around the world. We did extremely well, as I said previously in the house, in the Helpmann Awards, with a number of South Australians picking up key awards. WOMAD in particular picked up the award for the best festival in Australia, which we are very proud of. I think that award had historically always gone to Byron Bay, so it was very good to see WOMAD being acknowledged as one of Australia's leading festivals.

The government has made the biggest investment into our arts infrastructure, I think, than at any time since the 1970s, with significant upgrades to the Festival Centre and of course the redevelopment of the Plaza area, and significant investments within the Festival Centre itself. A significant investment at Her Majesty's Theatre will really provide new opportunities to bring shows through Adelaide and take a lot of pressure off the Festival Centre. At the moment, some of our home companies are feeling a little bit squeezed out because the Festival Centre has been so successful in attracting commercial productions, so having that additional expanded capacity at Her Majesty's will make a significant difference.

Of course, in last year's budget we made significant investments to our regional theatres. The government has also provided funding for a business case to begin development of a potential new art gallery in this state under the leadership of Nick Mitzevich, the director of the South Australian Art Gallery. We are very proud of our sector here and I am very keen to promote it. I continue to work with our arts industry to develop it in this state and provide new economic opportunities for our state. That concludes my statement but I will briefly introduce Dr Don Russell, who is the chief executive of the Department of State Development; Alex Reid, who is the deputy chief executive of the Department of State Development; and Mr Peter Louca, who is the executive director of Arts SA.

The CHAIR: So nothing extra for *Parliament: The Musical* then?

The Hon. J.J. SNELLING: No, I am afraid not—put in a grant application.

The CHAIR: I remind the committee that estimates of payments for the Department of State Development and Administered Items for the Department of State Development are still open.

Mr GARDNER: I think Peter Louca is the executive director of Arts South Australia as a result of the government's branding change, not Arts SA any more.

The Hon. J.J. SNELLING: Absolutely. I am corrected. I did get a kick under the table.

Mr GARDNER: I will go to questions. I refer to page 74 of Budget Paper 4, Volume 4. There are significant funds in grants and subsidies and intergovernment transfers, which is the bulk of this budget, which is through grants to the Museum, Art Gallery, Festival and so forth. Can we please have a list, either today or taken on notice, of the total grants for each of those bodies for 2014-15, 2015-16 and 2016-17?

The Hon. J.J. SNELLING: We have it. Do you really want me to read it out?

Mr GARDNER: Can I have the 2016-17 ones?

The Hon. J.J. SNELLING: Yes, sure. For the Adelaide Festival Centre Trust, \$20,566,000; for the Adelaide Festival Corporation, \$8.3 million; for the Adelaide Film Festival, \$1.05 million; for the Adelaide Fringe, \$1.412 million; for the Adelaide Symphony Orchestra, \$2.566 million; for the Art Gallery of South Australia, \$10.605 million; for Artlab Australia, \$2.113 million; for the Australian Dance Theatre, \$1.196 million; for Carclew Youth Arts Board, \$2.518 million; for Carrick Hill, \$907,000; for Country Arts SA, \$4.712 million; for History SA, \$5.308 million; for JamFactory Contemporary Craft and Design, \$1.13 million; for South Australian Film Corporation, \$4.768; for South Australian Museum, \$10.539 million; for the State Library of South Australia, \$33.482 million; for State Opera of South Australia, \$1.571 million; for the State Theatre Company, \$2.5 million; for Tandanya, \$1.099 million; and Windmill, \$1.057 million.

Mr GARDNER: Thank you. On the same page, I am interested in the FTEs. The actual in 2014-15 was 101. It was budgeted for a cut of seven, but the estimated result is an increase of four. Has that estimated result proved to be accurate?

The Hon. J.J. SNELLING: Essentially, the bulk of that 100-odd is an estimate based upon the overall budget allocation. It is an estimate that Treasury comes up with based upon that. The reason for the increase would be because there has been an allocation to Arts SA as part of its management of the Festival Plaza redevelopment project. That would be the reason for the increase. We have not actually employed four extra people as part of that. Treasury plugs the numbers in and it spits out this FTE count, and that would be the reason for the increase.

Mr GARDNER: The FTE count and a number of these figures throughout costs and so forth in last year's corresponding budget paper were significantly less than it is in this year's. In the identification of what as in the 2015-16 budget, for example, was 76.9 FTEs last year but this budget paper identifies it as 94. Can you explain that difference?

The Hon. J.J. SNELLING: It would just reflect the fact that we are spending more in the arts portfolio.

Mr GARDNER: We are not comparing apples with apples, because last year it identified that the 2015-16 budget was 76.9. This year, it identifies that the 2015-16 budget was 94. Is there a restructure within the department that is incorporating extra people?

The Hon. J.J. SNELLING: No, there has been no restructure and no job cuts. We would need to get back to you to account for that difference.

Mr GARDNER: While you are doing that, there are significant changes between last year's budget papers and what this year's budget papers say last year's budgets were down the list. So, if you can fulfil that answer, that would be great.

The Hon. J.J. SNELLING: I just refer the member for Morialta to footnote (a) on that page:

- (a) The 2015-16 Budget amounts contained in the 2016-17 Agency Statements differs from those amounts contained in the 2015-16 Agency Statements to reflect internal resource allocations for each program. The 2015-16 Budget amounts in these statements have been amended for comparative purposes.

Basically, as has been explained to me, what has happened is Treasury, in the way that they allocate these things within Department of State Development, have obviously changed the allocation to provide more to Arts SA. That is why there has been in the change in the numbers. We would have to get back to with the exact reasons for that and why the change in methodology.

Mr GARDNER: The last question just in this fiddly bit. The FTEs are listed as then dropping to 92. Could we have perhaps the actual number of FTEs working in this area in 30 June 2015 and 30 June 2016 as well? Is there going to be a cut, as these papers would suggest?

The Hon. J.J. SNELLING: The 2016-17 cap for the state budget for the Art Centre of South Australia was 30.3, and Artlab, which is included in this number, was 24.5. Then there is a corporate overhead allocation, so that is basically a figure that Treasury come up with across DSD into that division, which is 37.2. That leaves a total of 92.

Mr GARDNER: We will go to page 77. The description is:

Provision of museum...and preservation services that enable the state's cultural, heritage and arts assets to be maintained and kept accessible to the community.

Minister, we have previously had some discussions in this chamber about the storage facilities for the Aboriginal cultural collection at the Museum which you have described as unacceptable at the moment. You previously said:

...in the current facility we cannot protect against issues regarding insect infestation, but we are certainly looking at what might be other options, and we certainly recognise that, in the medium term, the continued keeping of that collection at the present site is unacceptable.

We have also identified water damage on at least one occasion. What is the government doing about this?

The Hon. J.J. SNELLING: Within our existing budget allocation, we made about \$200,000 available to the Museum to take some remediation action to protect the collection as far as we can within the current facility. More money, no doubt, is going to need to be spent there. I make no secret of the fact that long-term storage at the Netley facility is not going to be able to continue. The government is going to have to invest or find a new solution to the storage of those cultural artefacts because the Netley facility is just not up to it, but we are spending \$200,000 to take some remediation work and to develop a business case as well around the long-term storage of those cultural artefacts.

Mr GARDNER: When was that \$200,000 allocated, and when was the work carried out or is the work being carried out?

The Hon. J.J. SNELLING: Some maintenance work has been carried out by DPTI. Basically, the works are a continuing program and, as I say, we are also doing the preliminary work so that we might be able to present a case for the budget for long-term storage of those important cultural artefacts. There is work that is happening as we speak and will continue to happen to make sure that we protect those artefacts as much as we possibly can within the confines of the Netley facility.

Mr GARDNER: It is important that we do this, as it is the world's largest collection of Australian Indigenous artefacts. Who owns the building at the moment that it is stored in? Is it a government building, or a privately owned building being rented?

The Hon. J.J. SNELLING: The government sold the building a few years ago, so it is now privately owned and the government rents the building off the private owner.

Mr GARDNER: Minister, can you identify how many incidents there have been where there have been reports to Arts SA, or indeed to the Museum board, of water getting into the area where the collection is stored?

The Hon. J.J. SNELLING: There have been five incidents of water ingress at the Netley storage facility during 2016. One occasion in January and three in July were the result of extremely heavy rain conditions. The remaining incident was the result of a break-in during March, in which the fire sprinklers were tampered with. Artlab Australia reported the damage to the Museum collection's items from the January incident to be in the vicinity of \$50,000. Despite reports to the contrary there has been no damage to collections from the other incidents. This can be attributed to the responsive actions of staff.

Heavy rains increase the risk of further water ingress. The Department of Planning, Transport and Infrastructure's site manager has increased the cleaning of the gutters from seven times per annum to monthly. However, heavy rains continue to reveal roof leaks, and the government is investigating options to address this. So that should answer your question. There have been five, only one of which has resulted in damage to the collection.

Mr GARDNER: How many artefacts were damaged on that one occasion?

The Hon. J.J. SNELLING: I do not have the figure, but Artlab estimated the damage to be \$50,000.

Mr GARDNER: What are the insurance arrangements for the collection?

The Hon. J.J. SNELLING: Through SAICORP.

Mr GARDNER: Can we go to the next page, page 78. I am interested in the History SA Adelaidia app, which I notice was identified last year. Last year, there was a highlight of having doubled the content of the app; this year, the highlight is listed as having expanded the online content in the app. How is this app run? Is it contracted out to a private company? Do you have somebody in History SA whose job it is to manage this piece of tech, and at what cost?

The Hon. J.J. SNELLING: I think it is a combination. They would be engaging some outside expertise, but mainly I think doing it in-house, but I will find out from History SA.

Mr GARDNER: While you are finding out, can we also get some information about how many users have currently downloaded the app and how it has been marketed. Is it advised by Tourism SA?

The Hon. J.J. SNELLING: The app currently showcases 730 sites to explore across the city and has been downloaded 1,960 times. The website continues to see strong usage with a 54 per cent growth in users over the past 12 months.

Mr GARDNER: Some of these tech things will give you the opportunity to find some analytics and identify whether it has been downloaded by people within South Australia or by tourists and people from overseas; if there is any information that can be provided there, it would be good.

The Hon. J.J. SNELLING: Yes, we will be able to provide that.

Mr GARDNER: Is there a policy on data collection by the app? Is there a restriction across government of apps of the use of data collected in those apps?

The Hon. J.J. SNELLING: There would just be the general privacy provisions, but nothing else. We will find out if there is anything specific. There is certainly nothing in the regulations of the History Trust.

Mr GARDNER: No, I would not imagine so. Can we go to page 56, and I imagine that at some stage in this one of my colleagues might also have some interest in this area. Can I start with the Adelaide Festival Centre remediation works. I want to identify that last year's corresponding budget papers also showed some costs in the remediation works from the 2014-15 budget, but I remember that in last year's estimates, minister, you identified that it appeared this part was going to come in under budget because there had been some favourable tender considerations. Can I clarify, given that the 2015-16 estimated result is \$3.1 million (which seems to be \$400,000 more than was expected in the budget), whether this part of the Festival Centre, this remediation works line, is now completed, and has it come in under budget?

The Hon. J.J. SNELLING: Since last year, when we thought the project would come in under budget, we discovered a bit of asbestos which had to be remediated, so we now expect the project to come in on budget. There is a bit of extra cost associated with that, but it is still on budget.

Mr GARDNER: So that \$500,000 fat in the budget, as it was, has come in handy?

The Hon. J.J. SNELLING: There would still be a normal contingency anyway in the budget for these sorts of things but, yes, the estimate is that it would come in on budget.

Mr GARDNER: In the same manner, the Festival Centre Precinct, a \$63 million project—and we are all hoping that it comes up as excellent—is it on time and on budget at the moment?

The Hon. J.J. SNELLING: On our works it is. In the 2015-16 state budget, the government announced that it has committed \$109.6 million to the Festival Plaza Centre Precinct. Of this, \$6 million to \$7 million will be invested to upgrade areas of the Festival Centre. The remaining funding is being delivered by the Department of Planning, Transport and Infrastructure for the redevelopment of the car park, and the Festival Plaza contributes \$200,000 for annual plaza maintenance.

Design and documentation is well underway for the delivery of new entries from the north face of the Festival Centre. Refurbishment of the foyers to the Festival Theatre and Dunstan Playhouse, the upgrade to the Elder Park kiosk and toilets, the new transition area from the Festival Centre to Elder Park on the site of the current amphitheatre, and construction works to the north face

and northern entries are due to commence in late 2016, with the upgrade of the Festival Theatre foyer to follow in 2017.

In addition, \$5.14 million is being committed within this project to complete remediation works around the Adelaide Festival Centre, including the replacement of the membrane to the Festival Theatre roof shells, and repairing all concrete elements across the exterior of the centre. Of the \$11.122 million dedicated to the upgrade of technical equipment within the theatres, \$2.2 million is being contractually committed, which includes a new sound desk, microphones, the upgrade of microphones and radio microphones, follow spots, lighting equipment, lighting control desk, sound desk, headset communications and theatre drapes. It is forecast that the project will be completed in 2017-18, and I think it is all on time.

Mr GARDNER: What is happening to the Hajek sculptures?

The Hon. J.J. SNELLING: I will let the Executive Director of Arts SA take that question. I think the member for Davenport wants them for his front yard.

Mr GARDNER: I think he was thinking for his electorate office.

Mr LOUCA: The engineering reports presented to Arts SA, and to the project management team, have indicated that the concrete degradation also affects the sculptures. The removal of the sculptures commenced last Friday, with the removal of a plinth, one of the rhomboid elements of the Hajek installation. The government has consulted extensively with the Hajek estate, which contrasts with the original intent of Otto Hajek, who wrote to the government while he was still alive stating that if there was any interference or removal or changes to the artwork his preference was that the entire work be decommissioned. The estate took a different view from that after his passing.

After extensive negotiations, which articulated the way the work would be recorded—including 3D laser scans of the environmental sculpture (high definition photography)—the resolution was that an element of the Hajek original installation would be preserved and reinstalled in the redesigned plaza, with a commemorative plaque reflecting that this was the site of Otto Hajek's largest installation.

Ms REDMOND: Before I ask the question I was intending to ask, could I perhaps first of all ask about the car park and the new arrangements. Does the Festival Theatre get the benefit of any of the money generated from parking once the new car park is established, or does that all go to the Walker Corporation?

The Hon. J.J. SNELLING: There is an allocation of car parks, so overall there would be an allocation of a certain number of car parks, and I am just trying to find out what that is. Yes, they would get the revenue from the allocation they have. Treasury are managing that, apparently, at the moment.

Ms REDMOND: So, there will be an allocation for the Festival Theatre.

The Hon. J.J. SNELLING: That is right, yes.

Ms REDMOND: That means that they will get the money from those?

The Hon. J.J. SNELLING: That is my expectation. The bottom line is that they will not be disadvantaged.

Ms REDMOND: How many levels will the new car park have? Does anyone know yet?

The Hon. J.J. SNELLING: It is about five levels. It goes down quite deep.

Ms REDMOND: The question I want to ask on that is still on page 56, new projects, Her Majesty's Theatre redevelopment. I notice the budget for this year is a bit over \$1½ million, and the overall project cost is close to \$35½ million, and I imagine that those costs will blow out. That seems a fairly minimal amount. To what extent is the fundraising that Barry Humphries is heading going to accommodate the costs of that overall redevelopment?

The Hon. J.J. SNELLING: Of the \$35 million, the government has committed \$32 million, and \$3.2 million is expected to be raised through fundraising efforts.

Mr GARDNER: While we are on Her Majesty's, who is in charge of running this project? Is it Arts SA or the Festival Centre?

The Hon. J.J. SNELLING: I will give that to Peter Louca.

Mr LOUCA: Under the cabinet guidelines, this is an Arts South Australia project and the builder is DPTI. Clearly, this is a project that we are working on hand in glove with the Festival Centre Trust. We are still working through the governance arrangements around that project.

Mr GARDNER: When will building work commence?

The Hon. J.J. SNELLING: We expect it to be next financial year, January 2018.

Mr DULUK: I refer to page 77 and the list of targets for 2016-17. In the 2015-16 Agency Statement, you list that the target was to commence planning on the Shandong Provisional Library for implementation by 2020. I just notice that it is not included in the 2015-16 highlights in this year's budget papers or 2015-16 targets. Is this project still ongoing?

The Hon. J.J. SNELLING: On pages 76 and 77, there is a reference to it. One of the highlights 2015-16 is, 'Hosted two interns from the Shandong Provincial Library for 10 weeks.'

Mr DULUK: What is the cost of that one?

The Hon. J.J. SNELLING: It would be pretty minimal.

Mr DULUK: Is hosting those two interns part of the One Card library network program?

The Hon. J.J. SNELLING: No, they are different things. My advice is that the intern is focused on two key projects: one was the proposed development of the One Card system and the other was the State Library and the University of South Australia industry partnership, which provides library archive and record management courses, both on site and online, as well as expertise and lecturers.

Mr DULUK: So we are still going down this One Card path?

The Hon. J.J. SNELLING: It is still ongoing, but it has been slow going because of circumstances in China.

Mr DULUK: Do you see it being completed?

The Hon. J.J. SNELLING: Yes, indeed, I think it will be continued. Certainly, the Library is very keen and the relationship overall is very good.

Mr GARDNER: I refer to page 79. Looking at all these estimated results, can we have the actual results, please—either provided on notice or here, I do not mind.

The Hon. J.J. SNELLING: The actuals get published in MYBR in any case, but, yes, we can make them available as soon as we can, but they are normally published as part of MYBR.

Mr GARDNER: In terms of History SA, I notice that in 2014-15 we went from \$2.4 million actual to \$1.2 million target the following year, which was vastly exceeded. Why are we not optimistic that we will again be over \$2 million next year? Why do we have such a low target? Is there any particular reason? What is the basis behind those fluctuations?

The Hon. J.J. SNELLING: Are you talking about the revenue target?

Mr GARDNER: Yes.

The Hon. J.J. SNELLING: It was a one-off, and the increase in the 2015-16 estimated result compared to the target is mainly due to the amalgamation of separate funds from the History SA foundation into the general ledger in accordance with changes to the Australian Accounting Standards. There were funds off balance sheet held in the History SA foundation and the accounting standards changed and they were brought onto the balance sheet, and that is why there is an increase in revenue. So, that is the reason; it was a one-off increase for that reason.

Mr GARDNER: That is fine. On page 80, in the financial commentary there is reference to the provision of funding to the Hans Heysen Foundation's Heritage Appeal to secure The Cedars for

public access of \$1 million. I understand the commonwealth Catalyst fund put in \$1 million and Mount Barker council \$1.5 million. My understanding is that the next stage of what they are hoping to do at The Cedars will require some further support from the three levels of government, or at least they are asking for the support from the three levels of government. Is the government open to that?

The Hon. J.J. SNELLING: Probably not. I have had discussions with Peter Heysen about that. From the government's point of view, the most important thing was to secure the future of the site and to prevent it being broken up and sold off, so the government and the commonwealth both committed funding to that. I know that the foundation has further plans to develop the site. They have not put a formal proposal to us, but I made very clear to them that from my point of view my first priority was to ensure the security of the site. If they come to us in the future about any further work they want to do or further development they want to do on the site, we will give it due consideration.

Mr GARDNER: I understand your answer. It would have been about \$3.5 million from the three levels of government at this stage, plus funds raised by the foundation. Is it your understanding that that amount has been sufficient to secure the site for the Hans Heysen Foundation rather than have a risk that it be potentially broken up?

The Hon. J.J. SNELLING: I do not think it is. I cannot remember the exact amount of money that they needed to secure it, but the government was prepared to make a significant contribution towards that. I know it is similar, or I think exactly the same, as what the commonwealth has made. I think the balance, if indeed there is a need, will be raised through their financial appeal. They have a structure set up to raise those funds.

Ms REDMOND: Just on that, given that it is in my electorate—and once again thanks to Barry Humphries who is also involved in that particular appeal—has that \$1 million actually been paid over, or is it to be paid over on the occurrence of a certain contingency? What is the arrangement?

The Hon. J.J. SNELLING: We are drawing up the grant agreement at the moment. We expect it to be paid by September.

Ms REDMOND: I have a couple of others on this page, if I may. Firstly, on that same area of financial commentary, the second dot point on page 80 concerns the provision of a grant to the City of Mount Gambier to enable the purchase of the Riddoch Art Gallery collection from Country Arts SA for \$2.1 million. I wanted to get my head around what is actually going on there because it reads to me as though the government is giving the council money to purchase something from the government. Is that correct?

The Hon. J.J. SNELLING: Yes, that is correct. The collection of the Riddoch Gallery is held by Country Arts SA, and we have been in discussions with the Mount Gambier council about the future of that collection. We came to an agreement to transfer that collection from Country Arts SA into the care of the City of Mount Gambier. The collection has a book value of \$1.976 million and is worth \$2,058,855, and the facility for that transfer is to provide a grant to the Mount Gambier council for them to purchase the collection back off the government.

Ms REDMOND: What is the reason for that, rather than simply gifting it?

The Hon. J.J. SNELLING: I think it is just an accounting treatment of it. It is an accounting treatment because we cannot gift a thing. We have to make a transfer of money, apparently; we cannot make a gift of an object. We actually have to provide a grant to purchase whatever it is and that is then paid back to us. They balance each other out.

Ms REDMOND: I just wanted to be sure I was not misreading it, that you were in fact giving the money for them to purchase something from us.

The Hon. J.J. SNELLING: Yes.

Ms REDMOND: The original dot point above that, 'additional funding in 2016-17 to maintain arts activities and sustain jobs growth and economic benefits for the state (\$3.0 million)', which is the largest single figure in that list of the financial commentary. What specifically is that \$3 million going to be spent on, and when you say 'sustain jobs growth' is that to say that there is a trend already apparent that there has been jobs growth in the arts area?

The Hon. J.J. SNELLING: The extra money basically has the effect of offsetting savings that were required of the agency. Otherwise, it would have had to have been allocated to all the institutions. So, it offsets that, so it will go back into the institutions. Obviously, while the whole area of arts will still be expected to make some efficiencies, this does enable us to ensure that we do not make any cuts to any of the programs or anything like that that otherwise would have been necessary.

Ms REDMOND: Sorry, minister, I am dumb, obviously. I do not understand how that explanation fits with spending an additional \$3 million.

The Hon. J.J. SNELLING: It is money that otherwise was not there. It is money that was being taken out and put estimates at a decrease.

Mr DULUK: Staying on that line of questioning of the member for Heysen, has any modelling been done around what \$3 million of new investment will do to sustain jobs growth? Has Treasury done any modelling on behalf of—

The Hon. J.J. SNELLING: We do have a fair idea of what \$3 million worth of savings would have looked like. It would have had a significant impact on our agencies, on the institutions and on our festivals. It would mean, particularly with the festivals, significant reductions in programming across all festivals such as, obviously, the Adelaide Festival, the Guitar Festival, and the Film Festival. Those savings would have had a significant impact across all of those institutions and festivals that we have.

Mr DULUK: Going back to page 76, second to last dot point on the page around the installation of radio frequency. What percentage of this project was completed in 2015-16?

The Hon. J.J. SNELLING: The project is over 75 per cent completed, with three million of the total four million items tagged, and is on track to be completed by January 2017.

Mr DULUK: So, it is four million to be tagged, is it?

The Hon. J.J. SNELLING: Three million out of a total of four million, so it is three-quarters complete.

Mr DULUK: In last year's statement, it was stated that there were two million to be tagged. So, it is four million?

The Hon. J.J. SNELLING: So, they have been able to do more.

Mr GARDNER: If we can go back to page 74. Minister, at the beginning of this session you were kind enough to give us the list of the grants to all of the institutions for the current financial year. Do we have a budget for what we expect those grants to be in the 2017-18 financial year?

The Hon. J.J. SNELLING: We would not set that until next budget.

Mr GARDNER: So, that is for next budget. When are the institutions informed?

The Hon. J.J. SNELLING: Normally, the day after the budget.

Mr GARDNER: As to the institutions that are potentially to receive less funding next year than they do this year, perhaps I will ask you about the ones this year. Is it your intention to let them know in advance if they are to have any haircuts to make?

The Hon. J.J. SNELLING: We are constantly in contact with Arts SA and constantly in contact with the institutions and other agencies about their funding. It is never the case that they are presented with a shock. Obviously, if there is to be a significant cut, we do not leave that until the day after budget day to tell them. We work with them very closely and it goes through the normal budget process and the argy-bargy between Arts SA and Treasury about what might be able to be accommodated and what might not and what the implications might be of certain decisions taken.

We are certainly in constant contact with those institutions about what they anticipate but, with the extra money as part of this year's budget, it does mean that it does give far more certainty to those institutions than there otherwise would have been.

Mr GARDNER: On pages 81 and 82, there are a vast number of estimated results that make for fascinating reading, but last year's estimated results did not always have that much of an association with the actuals, so when you are getting those other actuals, potentially prior to the Mid-Year Budget Review can I ask that we are provided with these actuals as they become available as well?

The Hon. J.J. SNELLING: Sure. We will take that on notice.

Mr GARDNER: Thank you. Just while we are here, in relation to the State Theatre, has legislation been prepared that will set it free from the shackles of being a part of the state government? Is that going to be presented this year? That is the characterisation somebody else used, lest anyone think that was mine.

The Hon. J.J. SNELLING: We are waiting on advice from crown before we can progress that particular matter. I have to also say that the board has been a bit distracted with other issues, such as the transfer of its office from the Railway Station to the Lion Arts Centre, so there have been other issues. Following analysis of the legal governance, financial, operational and compliance issues and risk, Arts South Australia is now awaiting advice from the Office for the Public Sector around the implementation of the proposed changes in structure and ownership.

Mr GARDNER: Can I ask about page 78. You have identified:

Continue the heritage restoration works along the North Terrace cultural precinct including the commencement of stonework restorations on the Mortlock building.

How much is being spent in that area this year and are there any other items apart from the Mortlock building that you will be dealing with?

The Hon. J.J. SNELLING: Are you particularly interested in the Mortlock building or more generally?

Mr GARDNER: The Mortlock is the one you have identified, and I am wondering if there are any others.

The Hon. J.J. SNELLING: The total cost of the precinct is estimated to be over \$5 million, which includes the Department of Planning, Transport and Infrastructure's contribution to the heritage works components. Works are being staged over four or five budget periods. In 2015-16, the capital grant funded heritage restorations, external paning and installation of high-level safe work access on the east wing of the South Australian Museum. The total project cost was \$1.157 million, with Arts South Australia providing \$747,000 and the Department of Planning, Transport and Infrastructure providing the balance of \$410,000.

In 2016-17, the heritage restorations and external paning will commence on the Mortlock building of the State Library of South Australia. Arts South Australia and the Department of Planning, Transport and Infrastructure will contribute \$255,000 and \$300,000 respectively for a total initial investment of \$555,000. It is expected the Mortlock building project will continue into 2017-18 once the initial works identify the full extent of restorations required.

Mr GARDNER: Page 57 identifies a range of investments within the Department of State Development, including small programs, which I think are programs under \$300,000 possibly. I am wondering if any of those small programs are within the arts portfolio, or the small projects on the previous page, page 56?

The Hon. J.J. SNELLING: My advice is that Arts SA would have some component of that. We will have to get advice back to you about what that would be.

Mr GARDNER: I am happy to have that come back and also the ones on page 56, which is the coming year rather than the annual programs.

The Hon. J.J. SNELLING: Yes.

Mr GARDNER: Thank you. Let me jump back to page 82, which talks about the State Opera. It is identified that the number of paid seats at performances has come down. I think the 2016-17 projection is 12,500, which is 2,000 fewer than last year due to the availability of the Festival Theatre, or the non-availability, for State Opera as the case may be. I think this year only one of

State Opera's performances—I stand to be corrected—is at the Festival Theatre. Can the minister provide some advice as to what the government's plan is in relation to how State Opera might be supported in this way, particularly when I would imagine that one key criteria of people who are enthusiastic participants of opera would be the quality of the audio and other facilities may or may not be up to scratch.

The Hon. J.J. SNELLING: My advice is that audience numbers will bounce around quite a bit for State Opera because it will depend on how many productions they do. It will also depend on the type of production they do and the location where they have the production. Obviously, while the redevelopment is happening at the Festival Centre, we expect that will have issues with regard to State Opera's ability to access the Festival Centre and that will have an impact.

However, one of the main reasons I was very supportive of the investment we are making at Her Majesty's is that State Opera and Adelaide Symphony Orchestra are the two cultural organisations that are most affected by ability to gain access to the Festival Centre. By having an alternative venue, that will certainly do a lot to free up access. Over the next couple of years I think it is still going to be a bit difficult for State Opera, but we would expect that once those works are completed at Her Majesty's you will see additional opportunities for State Opera.

Arts South Australia is in discussion with State Opera about what their needs are going to be. The last significant production they did of *Cloudstreet* was at Her Majesty's, which obviously at the moment is a far smaller venue than the Festival Centre. As I say, I expect those numbers will be down for a little while but then, with this investment we are making, they will have far greater opportunities to access the Festival Centre.

Ms REDMOND: Following on from that answer, I have a couple of things. On *Cloudstreet*, which was obviously hugely successful, is there any plan and does the government need to financially support in any way the touring of that particular production around the country or even internationally?

The Hon. J.J. SNELLING: If we did fund it, it would be co-funding with—

Ms REDMOND: Another opera company from interstate?

The Hon. J.J. SNELLING: —probably with the other arts funding bodies. Generally, the opera has access to its own various buckets of money, so I would expect potentially through Catalyst or through Australia Council funding. That might be something they would consider. No approach has been made so far from State Opera for a touring program.

Ms REDMOND: I am just going on the fact that there was an enormously positive reception to it, particularly from interstate people I spoke to on opening night who were thrilled that little South Australia was able to do that production. Opera Australia had announced that day that Julie Andrews was going to direct *The King and I*.

More importantly, on that point, obviously the reason that *Cloudstreet*, being Australian, could be produced in Her Majesty's is that there is no need for surtitles. My recollection is that the surtitles we have in the Festival Theatre were funded by the James and Diana Ramsay Trust, I think. In any event, are the discussions in relation to the redevelopment of Her Majesty's incorporating discussions about the provision of surtitling to enable things—perhaps smaller opera, but nevertheless needing surtitles—to be held there?

The Hon. J.J. SNELLING: I am not sure it is being considered, but I am more than happy to have a look at it and see what considerations are being made. I think it is a good point. Because opera is so expensive, in terms of the orchestra—

Ms REDMOND: Yes, there is an orchestra and lots of singers.

The Hon. J.J. SNELLING: Indeed—and sets and everything like that, for those large-scale operas you do need that large Festival Centre. Of course, operas can only play alternate nights as well, because the singers have to rest their voice, so you do need those big venues to do it. I would expect, once these works are completed and once the Festival Centre works are completed, generally speaking that opera would be there. It might be that there would be a few niche productions perhaps that they might do offsite, but it would generally be at the Festival Centre. I think you raise

a good point about the availability of surtitles at the redeveloped Her Maj. I would be happy to have a look at it.

Ms REDMOND: Given the comment in here about the lack of availability of the Festival Theatre, to what extent because we are being blessed with getting Tim Minchin's *Matilda*?

The Hon. J.J. SNELLING: Not just that production, but any number of productions. The trust have been very successful in making a strong commercial drive to make the centre commercially viable. The flipside of that is access into the centre for our home companies. That is one of the principle drivers for our decision to invest in Her Majesty's. With an increased capacity at Her Majesty's a lot of those big, commercial Disney-type productions will be able to be done there and that will free up time at the Festival Centre for home companies (principally the State Opera and the ASO).

The CHAIR: We have not read in the omnibus questions for Health, so we need to do that now. Member for Davenport.

Mr DULUK: These are the omnibus questions:

1. Will the minister provide a detailed breakdown of expenditure on consultants and contractors above \$10,000 in 2015-16 for all departments and agencies reporting to the minister, listing the name of the consultant, contractor or service supplier, cost, work undertaken and method of appointment?

2. In financial year 2015-16 for all departments and agencies reporting to the minister, what underspending on projects and programs (1) was and (2) was not approved by cabinet for carryover expenditure in 2016-17?

3. For each department and agency reporting to the minister, please provide a breakdown of attraction, retention and performance allowances, as well as non-salary benefits, paid to public servants and contractors in the years 2014-15 and 2015-16.

4. For each year of the forward estimates, please provide the name and budget of all grant programs administered by all departments and agencies reporting to the minister, and for 2015-16 provide a breakdown of expenditure on all grants administered by all departments and agencies reporting to the minister, listing the name of the grant recipient, the amount of the grant, the purpose of the grant and whether the grant was subject to a grant agreement as required by Treasurer's Instruction 15.

5. For each year of the forward estimates, please provide the corporate overhead costs allocated to each individual program and subprogram administered by or on behalf of all departments and agencies reporting to the minister.

6. For each department and agency reporting to the minister, could you detail:

- (a) How much was spent on targeted voluntary separation packages in 2015-16?
- (b) Which department funded these TVSPs?
- (c) What number of TVSPs was funded?
- (d) What is the budget for targeted voluntary separation packages for financial years included in the forward estimates (by year), and how these packages are to be funded?

7. What is the title and total employment cost of each individual staff member in the minister's office as at 30 June 2016, including all departmental employees seconded to ministerial offices and ministerial liaison officers?

The Hon. J.J. SNELLING: I will take that on notice.

The CHAIR: There being no further time for questions, I declare the examination of the proposed payments of adjourned and referred to committee B, the omnibus referred to both Health and Arts.

Sitting suspended from 12:30 to 13:31.

SOUTH AUSTRALIA POLICE, \$790,854,000
ADMINISTERED ITEMS FOR SOUTH AUSTRALIA POLICE, \$189,000

Membership:

Mr van Holst Pellekaan substituted for Mr Gardner.

Mr Goldsworthy substituted for Ms Redmond.

Minister:

Hon. P. Malinauskas, Minister for Police, Minister for Correctional Services, Minister for Emergency Services, Minister for Road Safety.

Departmental Advisers:

Cmmr G. Stevens, Commissioner of Police, South Australia Police.

Mr D. Patriarca, Director, Business Services, South Australia Police.

Mr I. Hartmann, Manager, Financial Management, South Australia Police.

Mr S. Howard, Superintendent, South Australia Police.

Mr C. Andrews, Manager, Business Support Services, South Australia Police.

Mr L. Golding, Chief of Staff.

The CHAIR: Welcome to committee A. The estimates committees are a relatively informal procedure and, as such, there is no need to stand to ask or answer questions. I understand the minister and the lead speaker of the opposition have agreed an approximate time for the consideration of the proposed payments, which will facilitate, or may not in this case as we are only doing police at this point, a change of advisers. You have agreed to two hours for police; is that correct?

Mr VAN HOLST PELLEKAAN: Two hours, ma'am.

The Hon. P. MALINAUSKAS: Two hours, madam, correct.

The CHAIR: Changes to the committee membership will be notified as they occur. Members should ensure that the Chair is provided with a completed request to be discharged form. If the minister undertakes to supply information at a later date, it must be submitted to the committee's secretary by no later than Friday 28 October this year. This year, estimates committees responses will be published during the 15 November sitting week break in corrected *Daily Hansard* over a three-day period. I propose to allow both the minister and the lead speaker of the opposition to make an opening statement of about 10 minutes each should they wish.

There will be a flexible approach to giving the call for asking questions, based on about three questions per member alternating each side. Supplementary questions will be the exception rather than the rule. A member who is not part of the committee may ask a question at the discretion of the Chair. Questions must be based on lines of expenditure in the budget papers and must be identifiable or referenced at the beginning of each question, and we do ask members for cooperation in that matter. Members unable to complete their questions during the proceedings may submit them as questions on notice for inclusion in the assembly *Notice Paper*.

There is no formal facility for the tabling of documents before the committee; however, documents can be supplied to the Chair for distribution to the committee. The incorporation of

material in *Hansard* is permitted on the same basis as applies in the house, that is, that it is purely statistical and limited to one page in length. All questions are to be directed to the minister and not his assistants or advisers. The minister may refer questions to advisers for a response if he wishes. During the committee's examination, television cameras will be permitted to film from both the northern and southern galleries. I do ask for noise to be kept to a minimum. I declare the proposed payments open for examination and refer members to Agency Statements Volume 3, or is that Volume 4?

Mr VAN HOLST PELLEKAAN: Budget Paper 4, Volume 3.

The CHAIR: I call on the minister to make an opening statement, if he wishes, and then to introduce his advisers.

The Hon. P. MALINAUSKAS: Thank you, Madam Chair. Let me start by introducing those people who are here today to be able to advise me and assist. Obviously, on my right we have the Commissioner of Police in South Australia, Mr Grant Stevens; on my left, Mr Denis Patriarca, Director of Business Services from SAPOL; and on his left is Mr Ian Hartmann, Manager, Financial Management, from SAPOL. Behind me on the right is Mr Chris Andrews, Manager, Business Services Support, SAPOL; on his left is Mr Steve Howard, Superintendent from the executive support branch, SAPOL; and on his left is Mr Liam Golding, my Chief of Staff.

It has been almost 200 days since I was presented with the opportunity and, indeed, great honour of serving the South Australian community as cabinet minister for the community safety portfolio. Today is obviously also the first opportunity I have had to have the pleasure of parliamentary estimates, and I have been wholeheartedly looking forward to it. The first six months have been a steep learning curve as I have familiarised myself with a number of agencies and all the great work done by each of them. One of the first challenges I faced upon being entrusted with the police portfolio was the important matter of how changes to the Return to Work Act affect police officers. That matter was dealt with within the first month and only reinforced my understanding of the special and important role played by SAPOL in the service of the South Australian community.

Our police have a critical role in the service of our state. I believe our police force is acutely aware of the importance of the key role they play and the positive influence they can have on the everyday lives of so many people throughout South Australia. The pride our police take in their service to our community has been evident as I have visited officers across the state, from Leigh Creek to Port Adelaide to Mount Gambier. The enthusiasm and expectation of a fulfilling career and life as a sworn police officer have been evident in the 79 cadets that I have had the privilege to witness graduate at the redeveloped police academy since I became minister.

Police work prevents crime. It is the work of our dedicated police officers that makes our community safer. This work has underpinned the continued reductions in the crime rate over the past decade. Victim reported crime is down by more than 38 per cent over the last decade and, as a result, last year there were almost 70,000 fewer crimes against property compared with 2004-05. This equates to 1,342 fewer crimes every week last year compared with a decade ago. That is thousands of fewer victims, and that is what law enforcement is all about—making our community safer and meaning fewer people have to go through the trauma of being the victim of a crime.

The government is committing to maintain our place as one of the safest cities in the world, and one of the safest states in the world, and to continue our work to improve our standing. Our police force is tasked with upholding the law and order and preserving community order. In my short time as minister I have asked myself what the government and I can do to help SAPOL achieve these goals so that all South Australians feel safe and are secure in their communities. I believe that the answer is to provide tangible support that can help front-line officers as they go about their important duty.

It is the provision of support in the form of our continued recruitment of front-line officers so we will have more police on the beat than ever before; it is providing the highest police budget in SAPOL's history, which will continue to grow in real terms over the forward estimates; and it is the provision of better equipment over a number of years. We have worked with SAPOL to deliver high-tech equipment like tasers, tablets, fingerprint scanners and body-worn video. Just this morning, I

joined NEC and SAPOL to announce the latest addition to this list, with facial recognition software to become operational in the very near future.

The government has continued to support in terms of technology and sworn officer positions our police force as one of the most modern, dynamic and effective police forces in the nation. We are working to ensure SAPOL is best positioned to deal with and respond to the challenge of the 21st century and the new crimes and threats of our age. Part of that challenge is the manner in which SAPOL responds to the changes in our society. SAPOL is always striving for continuous improvement and finding new ways to counter the threats to the safety and security we all cherish.

The government will seek to actively work with SAPOL to ensure they have the capacity to respond to emerging threats with swift and accurate countermeasures. This presents a challenge in that it requires the management of change. I will continue to look for ways police can have long-term confidence in the levels of service in the community because of the way this supports long-term confidence in the police.

In closing, I would like to place on the record my thanks to all SAPOL's officers, who are the front-line responders to crime in our state, and to the police commissioner, who two weeks ago celebrated his first anniversary in the job; to SAPOL senior management; and to the Police Association for their service, leadership and advice in my first six months as police minister.

Mr VAN HOLST PELLEKAAN: I am comfortable that SAPOL, from the bottom all the way through to the top of the organisation, understands how supportive and appreciative I am of the work that they do in crime prevention across this state and, of course, the opposition is as well. I thank them for that, and I am happy to get on with some questions.

Minister, my first question relates to page 123. What I am looking for here are some specific numbers with regard to various categories of personnel within SAPOL. The first question is: how many sworn officers (FTEs) were there on 1 July 2015, 1 July 2016, and are predicted to be there on 1 July at the end of each financial year in the forward estimates? I will be asking the same question of a range of different categories as well, if that helps you prepare your notes.

The Hon. P. MALINAUSKAS: Thanks for your question. There are a few numbers I have embedded in my memory, but I just want to take a moment to ensure complete accuracy. I think the first year you referred to was 2015-16. The total number of sworn—

Mr VAN HOLST PELLEKAAN: Sorry, minister, the first year was 1 July 2015, which is actually the 2014-15 year.

The Hon. P. MALINAUSKAS: In 2014-15, the budgeted amount for sworn was 4,445 plus 151 cadets, for a total of 4,596 sworn and cadet FTEs.

Mr VAN HOLST PELLEKAAN: When you say 'budgeted', I am looking for the exact number.

The Hon. P. MALINAUSKAS: I am just about to give you that. In terms of the actual number, at the end of the 2014-15 financial year that number was 4,450.4 sworn plus 113 cadets, for a total of 4,563.4.

For the year 2015-16, which was the following year you asked for, I will give you both the budgeted number and the actual, for the sake of thoroughness. Again, the sworn number was 4,439.1. There were 145 cadets, then the FTE actual, sworn, was 4,437.3 and 155 cadets, for a total of 4,592.3. I think the next year you were talking about was the forecast for 2016-17; is that right?

Mr VAN HOLST PELLEKAAN: Yes, for 1 July 2017, 2018 and 2019.

The Hon. P. MALINAUSKAS: This figure is 2016-17. It is a 30 June figure—

Mr VAN HOLST PELLEKAAN: To complete that year, yes.

The Hon. P. MALINAUSKAS: Yes. Again, the total sworn number, including cadets, is 4,634.1.

Mr VAN HOLST PELLEKAAN: How many of them would be cadets?

The Hon. P. MALINAUSKAS: 154. Did you want the next year as well?

Mr VAN HOLST PELLEKAAN: Yes, please.

The Hon. P. MALINAUSKAS: 4,458 plus 166 cadets, for a total of 4,660.1.

Mr VAN HOLST PELLEKAAN: And then the last year of the forward estimates, thanks.

The Hon. P. MALINAUSKAS: There are two additional years: there is 2018-19 and 2019-20 over the forward estimates. For 2018-19, that number goes up again to 4,685.1 and a total number of 165 cadets. In the final year of forward estimates the number is 4749.1, and that includes 204 cadets.

Mr VAN HOLST PELLEKAAN: In those same years, how many of those sworn officers were non-active?

The Hon. P. MALINAUSKAS: I might just answer that question. Those figures I just provided to you, I am advised, include only actives.

Mr VAN HOLST PELLEKAAN: How many inactive, sworn officers on top of that?

The Hon. P. MALINAUSKAS: On top of that?

Mr VAN HOLST PELLEKAAN: On top of that. If it helps your advisers prepare, I am looking for exactly the same thing for community constables and transit police as well.

The Hon. P. MALINAUSKAS: At 30 June 2016, the number of inactives, I am advised, was 90—that is FTEs. Regarding your question about transit police—

Mr VAN HOLST PELLEKAAN: And the following years?

The Hon. P. MALINAUSKAS: I am advised that we do not have those numbers for that period.

Mr VAN HOLST PELLEKAAN: You do not have them?

The Hon. P. MALINAUSKAS: Correct; that is what I am advised.

Mr VAN HOLST PELLEKAAN: So you do not have it for 30 June 2016?

The Hon. P. MALINAUSKAS: That is 30 June 2016, that figure.

Mr VAN HOLST PELLEKAAN: So there are no budgets or estimates for those for the forward years?

The Hon. P. MALINAUSKAS: I am advised that SAPOL make substantial efforts to make reasonable predictions about attrition. They are able to make forecasts with some confidence about retirement and attrition but not in respect of inactives.

Mr VAN HOLST PELLEKAAN: Community constables and transit police, please.

The Hon. P. MALINAUSKAS: What about them?

Mr VAN HOLST PELLEKAAN: It is the same question—the same figures for the same times.

The Hon. P. MALINAUSKAS: To get some clarity about your question, transit police are part of those ordinary police numbers. They form a component of that. Are you trying to ascertain the number of people within the normal SAPOL contingent who are transit police?

The Hon. P. MALINAUSKAS: Correct, yes.

The Hon. P. MALINAUSKAS: I think the best way to answer your question, I am advised, is by making clear exactly what the current commitment and structure are within SAPOL regarding transit police. I am happy to step you through those numbers. They are not necessarily specifically forecast into the future, but this more or less reflects the commitment.

Currently, there is one chief inspector, one senior sergeant first class, one sergeant, an ASO3. The intelligence section is allocated to the area of one sergeant, three field intelligence officers, seven sergeants in the response team, along with 79 other ranks. In the crime prevention

section, there is also one sergeant and two constables, so that brings it to a total of 96 sworn plus an ASO3.

Mr VAN HOLST PELLEKAAN: You are saying that that would be your intention to keep that model running into years into the future.

The Hon. P. MALINAUSKAS: I might ask the police commissioner to answer that. It is up to the police commissioner to determine how he allocates it.

Cmmr STEVENS: At this point in time, there are no proposed reviews of the structure or establishment of the passenger transport safety branch, so for the foreseeable future we would imagine it would remain the same.

Mr VAN HOLST PELLEKAAN: On the same page, minister, this is a far more general question. I just needed to get some of those numbers for future reference. Under the broader heading of workforce summary, minister, do you agree with former commissioner Burns who told parliament's Budget and Finance Committee that judging the number of police officers per capita of state population, and using that as of comparison between states, is not an effective way to judge the value of the police force or the effectiveness of the police force because different police forces have different tasks in different states?

The Hon. P. MALINAUSKAS: I am not familiar with the former commissioner's remarks to which you refer. That said, inevitably when you are comparing across jurisdictions, there are complexities. The best efforts, though, are made through the RoGS process. On that accepted measure, South Australia performs incredibly well in comparison to other jurisdictions on the number of sworn active police officers on a per capita basis, and that is certainly something the government is very proud of.

Mr VAN HOLST PELLEKAAN: On the same page, how many roles are proposed under the government's organisational review that is currently being undertaken by sworn officers, will be undertaken by non-sworn officers or other staff?

The Hon. P. MALINAUSKAS: I just point out one remark that you made in the context of your question in terms of this being the government's organisational review, I do not think that is quite an accurate reflection of what is the case. It is important to remember that the organisational review, which SAPOL is undertaking at the moment, is very much an effort led by the police commissioner. He does that, of course, with the government's complete support. I think it is important that all agencies within government are reviewing themselves to ensure that they are delivering their service as efficiently as possible, notwithstanding the fact that resources going to SAPOL are increasing.

I applaud the police commissioner's efforts to make sure that despite increasing resources he is ensuring that those are applied as efficiently and effectively as possible. Having said that, what I can say is that the organisational review effort is ongoing that the police commissioner is taking up. I am advised that there have been a number of roles that have been identified as best being performed by civilians so as to free more resources for officers to perform duties on the front line. The two best examples of that are in the custody management section, where 42 people fit into that category, and seven in the intelligence section.

Mr VAN HOLST PELLEKAAN: When will the review be complete, and when do you plan for it to be implemented?

The Hon. P. MALINAUSKAS: In light of the fact that the review is very much an organisational operational effort on behalf of the police commissioner, I might invite the police commissioner to respond to that.

Cmmr STEVENS: As to the organisational review, the main body of work has essentially concluded in terms of developing of concepts and consultation both internally and externally to SAPOL. I am confident that we will be making announcements about the final model to be implemented in the coming days or weeks. It is also my intention that implementation of that model would start almost immediately, but it will be a staged implementation based on a range of activities that need to occur so we can properly implement what is being proposed.

Mr VAN HOLST PELLEKAAN: What would be the time line to finish that staged implementation?

Cmmr STEVENS: The significant part of the reform program is known as the district policing model, where we are proposing to transition from local service areas to districts. It is my anticipation that we would aim to transition from one model to another, in that sense, around about September/October 2017. There is substantial work to be done between now and then in terms of IT, HR systems, human resource movements that need to occur to make that move as effective as possible.

Mr VAN HOLST PELLEKAAN: Thanks, Commissioner. Minister, there has been significant public debate, as you would be aware, with regard to this review and whether the questions that are discussed within SAPOL, within the media, within government and within opposition around whether it is budgetary constraint that is leading to the review, whether the review is being done to meet a budgetary target or whether, if there was no fiscal constraint, this review would be undertaken anyway to provide the best policing possible. Can you comment on that, please?

The Hon. P. MALINAUSKAS: The first thing is, obviously that is a fair question and entirely appropriate. I think the best way to answer it is by pointing out exactly what is occurring to SAPOL's budget, and has for some time. The state government's commitment to SAPOL's budget, I think, is evidenced by the numbers within themselves. We have seen almost a doubling of SAPOL's budget since coming to office.

As I mentioned earlier, in this particular state budget SAPOL's budget is the highest number in the state's history and, of course, is forecast to grow over the life of the forward estimates, not just in nominal terms but, I think importantly, in real terms. So, I do not think there can be any doubt that, in light of increasing resources going towards SAPOL, it is difficult to see how this is a budget issue.

Regarding the police commissioner's effort, I am very much persuaded by the police commissioner's comments and briefs to me that at the heart of this organisational reform effort is a desire for SAPOL to be looking to ways that it can continue to improve the level of service delivery to the state in terms of both preventing crime in the first place but also ensuring that those people who do commit crimes are held to account accordingly.

Mr VAN HOLST PELLEKAAN: Moving to a different book, Budget Paper 5, Budget Measures Statement, page 68, referring to the Recruit 300 target. What was the total number of sworn officers when the original Recruit 300 promise was made back in 2010?

The Hon. P. MALINAUSKAS: Sorry, could you say that again?

Mr VAN HOLST PELLEKAAN: What was the total number of sworn officers when the original Recruit 300 (or Recruit 313, as it was then) promise was made back in 2010?

The Hon. P. MALINAUSKAS: I am advised that the budgeted number was: total police, including cadets, 4,486 in June 2010

Mr VAN HOLST PELLEKAAN: A budgeted number or an actual number from 2010?

The Hon. P. MALINAUSKAS: I am advised it is the budgeted number.

Mr VAN HOLST PELLEKAAN: What was the actual number? Again, if that helps, the next thing I will ask is: how many without cadets, or how many cadets are included in the total, whichever—

The Hon. P. MALINAUSKAS: I am afraid that in both those instances those questions will have to be taken on notice.

Mr VAN HOLST PELLEKAAN: I am happy for you to do that. How many sworn officers, excluding cadets, have been recruited above attrition each year since then? You might need to take that on notice, too, if the first number is not available, unless you have a recruitment paper there.

The Hon. P. MALINAUSKAS: We do have some numbers here which may be of assistance. In the year 2011-12, the number I am advised that were recruited over and above attrition was 129. In 2013-14, it was 50; in 2014-15, it was 20; and then, in 2015-16, it was 20. I can also outline what

is forecast to occur, for the sake of clarity, over the forward estimates if that is of use: 10 in this financial year, 10 in the next, 10 in 2018-19 and then 64 in 2019-20.

Mr VAN HOLST PELLEKAAN: When did you first become aware that the Recruit 300 commitment would not be achieved on time?

The Hon. P. MALINAUSKAS: I was never, to the best of my recollection, advised that the Recruit 313 was not going to be met. On the contrary, I have been consistently advised that SAPOL did have strategies available to it to see that it could be met and, of course, if you would like me to go into a bit more detail about that, I am happy to.

Mr VAN HOLST PELLEKAAN: Are you saying it was SAPOL's or the commissioner's decision not to fulfil the government's promise?

The Hon. P. MALINAUSKAS: No. If I can step you through the decision, I assume you are leading up to the question regarding the government's recent policy announcement in respect of how it would arrive at 313. I am happy to get straight into it, if you like. Upon taking over as Minister for Police, it will not surprise you that I sought as much information from the police commissioner as I possibly could regarding a whole range of issues, and of course 313 being a key commitment of the government that was high on the priority list.

I was advised that SAPOL were in a position to honour the revised government commitment of 313 in the 2018 calendar year but, in order to do that, SAPOL would have to employ a strategy of active recruitment overseas, most likely to be in the form of recruitment from the United Kingdom that SAPOL had engaged in previously in order to be able to boost numbers. Then, of course, as has been discussed publicly, that led to a discussion between both the police commissioner and me.

The police commissioner, in his wisdom, in conjunction with me, arrived at the conclusion that it would be better to avoid that strategy, particularly in the context of the current employment environment in South Australia, and instead delay the time line by two years in order to facilitate or maximise the opportunity for South Australians to have the first opportunity to serve in the South Australian police force.

Mr VAN HOLST PELLEKAAN: Given that, why was it that the commissioner told the Budget and Finance Committee approximately six months ago that he would require an additional \$8 million to his budget to fulfil the revised recruiting promise on time, as it was then?

The Hon. P. MALINAUSKAS: I am familiar with the commissioner's remarks in Budget and Finance. What I would say is that quite simply the commissioner was doing his duty in answering the question as accurately as he could about what the cost was of recruitment. That does not in any way suggest that the government was not on track to honour the policy, as I mentioned. Rather, I think the recent budget's decision to allocate those funds accordingly in order to meet our target demonstrates the government's commitment to it.

Mr VAN HOLST PELLEKAAN: How many police officers have been recruited from overseas since 2010-11?

The Hon. P. MALINAUSKAS: In terms of specific numbers, we do not have those at hand, but I am advised by the police commissioner that to the best of his recollection the last time active overseas recruitment occurred was three to four years ago in 2012.

Mr VAN HOLST PELLEKAAN: Would you take that on notice to provide those figures?

The Hon. P. MALINAUSKAS: Sure.

Mr VAN HOLST PELLEKAAN: Thank you. Out of all of that, it seems that approximately six months ago the commissioner said—and I do not doubt that he meant it—that he would require an additional \$8 million in his budget to fulfil the promise by 2018. As it has turned out, the government has put an extra \$20 million into the budget to fulfil the promise by 2020, so spending more money to recruit later, given the supporting reason that the government did not want to recruit from overseas, but the government has not been recruiting from overseas anyway. The other supporting reason was that the government wants to support and hire South Australians, which of course I fully support, but why wasn't that happening anyway? I just cannot see the logic in this delay.

The Hon. P. MALINAUSKAS: Let me explain a few things to you regarding your remarks. The first thing is that the allocation of the additional funds to which you refer are not entirely about 313. Of course, a significant component of it refers to the cost of recruitment, consistent with the police commissioner's remarks in Budget and Finance. The reason for the increase in SAPOL's budget announced in the budget is because some of those costs speak to other investments that the government is making in SAPOL, including the organisational reform effort around civilianisation.

Paying SAPOL additional funds in order to be able to employ civilians to perform functions within SAPOL that were otherwise done by sworn officers gives the police commissioner the flexibility and the ability to redeploy those sworn officers to front-line roles, which of course enhances community safety. Regarding your remarks around overseas recruitment, of course I can test the fact that there has not been overseas recruitment because of course there has.

Mr VAN HOLST PELLEKAAN: In the last three years?

The Hon. P. MALINAUSKAS: We would acknowledge as a government that there are a not insignificant number of people employed within SAPOL who are sworn officers who have been recruited overseas doing an outstanding job. They are committed employees of SAPOL serving South Australia well, so active recruitment from overseas has occurred in the past in order to be able to meet demand. In order to be able to reach the target by 2018, that tactic would have to be redeployed and re-engaged by SAPOL in order to be able to meet that commitment.

A conscious policy decision was made, one that of course the government wholeheartedly supports, that it is better to delay a time line by two years in order to maximise the chance of South Australians getting a job within SAPOL. I would contend that any committed South Australian who has the capacity to influence decision-making so as to maximise the chance of a South Australian getting a job—a good job, a well-paid job like those that exist within SAPOL—is an absolute no-brainer.

Mr VAN HOLST PELLEKAAN: It is. What is not a no-brainer is why it was delayed. You said that there had been no overseas recruiting for the last three years. Three years ago is also when recruitment in general—which presumably was overwhelmingly South Australians, and there would have been a few interstaters as well—slowed down significantly, based on the numbers that you provided before. Why did the government (or SAPOL) slow down their recruiting effort so significantly three years ago and yet keep saying that the promise was going to be fulfilled?

The Hon. P. MALINAUSKAS: I have to say I am not too sure about the language of 'slowing down' recruiting. You have to remember that it is not as though SAPOL paused recruitment during that period. There were very significant numbers of cadets that were coming through the academy. In fact, I may have referred to some of those numbers earlier, or taken a question on notice to that effect. The suggestion that SAPOL was not actively recruiting during that period would not be a reflection of the facts.

To come back to your point generally, I think I have outlined rather thoroughly and transparently one of the questions that was before myself and the police commissioner. I genuinely believe the police commissioner and I have made the right decision to maximise the chances of South Australians getting a job within SAPOL.

Mr VAN HOLST PELLEKAAN: Just to make it really clear why I asked you that, and to repeat the numbers you gave to me, four years ago recruitment of sworn officers above attrition was 129; three years ago, 50; two years ago, 20; and one year ago, 20. So, there is a significant decline in recruitment of non-overseas sworn officers.

The Hon. P. MALINAUSKAS: I do not have at hand the numbers in respect to the number of people that were occurring through attrition that year. You need to look at these recruitment numbers in the context of a whole range of variables, attrition being one of them. You also have to look at it in the context of applicants. I think one of the things that is very important in respect to SAPOL, and a policy position which I wholeheartedly applaud, is SAPOL's undying commitment to making sure that people who are coming into the organisation meet the relevant standards.

SAPOL can presumably do everything they can to maximise the chances of the number of people coming in the door, but we always want to make sure that SAPOL is preserving its standards

by ensuring that all people it employs cut the mustard. To look at figures in isolation without looking at their broader context can be somewhat misleading.

Mr VAN HOLST PELLEKAAN: I am not misleading anybody, minister. I am not looking at them in isolation. They are the—

The Hon. P. MALINAUSKAS: No, I am not suggesting you are; I am just saying that sometimes the figures—

Mr VAN HOLST PELLEKAAN: They are the figures that you provided, and attrition and the range of other issues that you mentioned were also all wrapped up in the Recruit 300 target. It was very clearly a commitment to recruit 300 officers plus the 13 transit officers over and above attrition, so I cannot accept that differing levels of attrition and a whole range of other things out of control are a reason for not having fulfilled the commitment. Why does PASA so strongly object to the revised commitment?

The Hon. P. MALINAUSKAS: You will have to ask PASA that.

Mr VAN HOLST PELLEKAAN: You do not know? They have not told you?

The Hon. P. MALINAUSKAS: You are asking me what PASA thinks. I am not here to speak on behalf of PASA. PASA are an independent organisation of government. They are very ably led by committed trade union officials. If you want to ask what they think, I would encourage you to ask them.

Mr VAN HOLST PELLEKAAN: Do you have a view on the PASA survey that was done which indicated that 90 per cent of serving officers—and I assume this would be serving officers who were surveyed—believe that the restructure that is happening at the moment is being done for budgetary purposes rather than for policing improvement purposes?

The Hon. P. MALINAUSKAS: I would simply encourage police officers—fine men and women and committed South Australians—to take heed of the remarks that have been made by the police commissioner in terms of his commitment to improving service to the community being a motivating factor for the reform effort.

Mr VAN HOLST PELLEKAAN: Minister, will any civilian roles be rolled into the Recruit 300 target? The reason for asking is because initially, in the commitment made in 2010 that by 2014 the additional 300 officers over and above attrition would be recruited, it was very clear at the time that the number excluded cadets. In addition to the time line being pushed out, I think about two years ago it was changed so that it included cadets. Can you give the committee a guarantee that civilians or non-sworn officers will not become part of the recruiting target?

The Hon. P. MALINAUSKAS: I am advised that there is no intention for that to be the case, and that is certainly not the intention of government. In fact, one of the reasons the government committed the additional funds in the way we did in the state budget was very much to honour the original intent of the Recruit 313 election commitment. I am not aware of any intent to depart from that.

Mr VAN HOLST PELLEKAAN: There would be an increase in the number of civilians working within SAPOL plus this fulfilment of the Recruit 300 sworn officers on top of that?

The Hon. P. MALINAUSKAS: That is a good question, and I am glad you asked it. Yes, as mentioned earlier, the additional funds that were committed to SAPOL do more than just seek to give the commissioner the ability to honour the 313 target. It also was about giving additional funds to SAPOL so that they could employ civilians in addition to what was already the case so that they can then redeploy sworn police officers who are otherwise performing those roles into other more traditional policing duties. This speaks to more than just additional resources. It speaks to making sure that we are using resources as efficiently and productively as we reasonably can be.

Mr VAN HOLST PELLEKAAN: With regard to the use of resources, it was foreshadowed that a youth and culturally diverse recruitment program of 80 officers would take place. Has that occurred? It was a government/SAPOL commitment.

The Hon. P. MALINAUSKAS: Regarding the internal operations in order to be able to meet those objectives, I might invite the police commissioner to respond.

Cmmr STEVENS: Thank you. We introduced a culturally and linguistically diverse and youth recruitment strategy about 18 months ago, I believe—18 months to two years ago—which saw us extend our recruit training program from about six months to 12 months. The purpose of that was to ensure that we could provide the level of training required to those two particular groups to satisfy the standards we have at graduation. We do have a program in place where we are actively recruiting in those two sectors to ensure that we honour that commitment.

Mr VAN HOLST PELLEKAAN: Have the 80 officers of that description been recruited?

The Hon. P. MALINAUSKAS: Again, I might invite the police commissioner to report on that.

Cmmr STEVENS: Whilst we have a target of 80, we are currently sitting at 64 youth and culturally and linguistically diverse applicants for the financial year. There are some challenges in identifying suitable applicants in these two cohorts, but we are working aggressively to achieve that target.

Mr VAN HOLST PELLEKAAN: Thanks, commissioner. My next question is with regard to some new areas. There was to be a new internet child exploitation team, a boost to the Australian national child officer register, a new neighbourhood police team for Holden Hill, and a new vulnerable victims unit to help those with communication and intellectual disabilities. All those very positive and worthy new areas of work were going to be entered into at the same time as the recruitment of the additional net 300 officers was to take place. Given that the 300 has not happened, has that impacted on those new areas of work? Have those new areas happened and officers have had to be moved out of other areas, or have those things been delayed also?

The Hon. P. MALINAUSKAS: I am advised that all those areas you refer to have been established and resources allocated towards them.

Mr VAN HOLST PELLEKAAN: In 2013-14, SAPOL was considering trialling a process to use law graduates instead of police prosecutors. Was this ever implemented?

The Hon. P. MALINAUSKAS: I believe it has been, yes, and with some success I have been informed.

Mr VAN HOLST PELLEKAAN: And likely to continue?

The Hon. P. MALINAUSKAS: The trial is still ongoing, I understand.

Mr VAN HOLST PELLEKAAN: When will the trial be finished?

The Hon. P. MALINAUSKAS: There is a review underway but, as I foreshadowed, I am advised that thus far it looks like it has been a successful strategy, but it would be unwise to comment without awaiting the outcome of that review SAPOL is conducting internally.

Mr VAN HOLST PELLEKAAN: That was the question: when will that happen? When does the trial finish and when is the assessment?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to answer that.

Cmmr STEVENS: The trial is currently still underway, but we are evaluating it at this point, so I am hopeful that we will have some specifics around the outcomes of that trial within the next month or so. I do not have a specific time frame.

Mr VAN HOLST PELLEKAAN: Similarly, there was to be a trial in regional areas, which I think actually did happen, where civilians were being used as police prosecutors. How is that going and is there any intention to expand that into the metro areas?

The Hon. P. MALINAUSKAS: Again, being an operational question, I might invite the police commissioner to answer.

Cmmr STEVENS: The use of civilian prosecutors in regional areas has been quite successful. Those people have been employed to fill long-term vacancies or extended absences of

sworn officers. At this point, I would suggest it has proven to be a strategy that we would look to take advantage of going forward to ensure that we maintain the level of service delivery in regional areas that are expected of SAPOL. Those positions are also being evaluated as part of the overall evaluation of the use of civilian prosecutors.

Mr VAN HOLST PELLEKAAN: I notice that I have swapped back to the original book and the original page.

The CHAIR: We noticed that and we thought we would let you go.

Mr VAN HOLST PELLEKAAN: It will not really change anything. Moving on to cadets, what is the success rate of cadets becoming sworn officers? Has that improved or changed at all with the program going from 29 to 52 weeks?

The Hon. P. MALINAUSKAS: I am advised that through a very thorough recruitment process the level of attrition from the cadets is very low so, by and large, once cadets enter the cadet course they have a high level of probability of completing that cadet course.

Mr VAN HOLST PELLEKAAN: High as in 80 or nearly 100 per cent?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to answer.

Cmmr STEVENS: We do not have the exact numbers of attrition for cadets, but anecdotally I suggest it would be in the high 90 per cent that would be completing our program. We have a very low attrition rate.

Mr VAN HOLST PELLEKAAN: Thanks, commissioner. Minister, my next question is in regard to the 50 per cent female recruitment target. Have more women been applying to become police officers and enter the academy?

The Hon. P. MALINAUSKAS: Yes.

Mr VAN HOLST PELLEKAAN: Significant numbers, or just a little bit?

The Hon. P. MALINAUSKAS: I have asked SAPOL, through the police commissioner, for a briefing in respect of these numbers because I think it is an area in which the government takes an interest. It is a significant reform going on within SAPOL, and I think it has a lot of policy merit. Without giving you a specific number, I can certainly say that the last brief I read on this (which was a few weeks ago) advised that there was a significant increase in the number of female applicants to SAPOL. I think that very much can be attributed to the policy decision taken by the police commissioner.

Mr VAN HOLST PELLEKAAN: That is great. Could you take it on notice just to confirm—

The Hon. P. MALINAUSKAS: If you are after specific numbers, I am certainly happy to take that on notice. I think you will see that those numbers will reflect the remarks I have just made.

Mr VAN HOLST PELLEKAAN: When you provide those figures, would you please make it very clear whether they are first-time applicants, or second or third-time applicants, because I know a lot of people, men and women—

The Hon. P. MALINAUSKAS: Again, we will take that on notice. Obviously, I have to look at whether or not that is possible. I am happy to take it on notice.

Mr VAN HOLST PELLEKAAN: That would be good. The reason I am asking for that is that I know it happens a lot that some people who apply to get into the academy, to get into SAPOL, who are unsuccessful might apply once, twice, or three times. Some people go through the police security service and find that a useful pathway. I have a good friend who did exactly that. I would like to have that separated out in the numbers, as you have said you will do.

The reason for pursuing this is that it has also been put to me that women who applied before, unsuccessfully, and are now reapplying post the announcement of the fifty-fifty recruit program are finding it easier to get in. I am not placing a judgement on that at all, but it has been put to me that women who were rejected—presumably for all the right reasons before—are now being accepted. That is the reason for asking whether or not there is substance to that.

The Hon. P. MALINAUSKAS: I might start by answering that and then let the commissioner go into a bit more detail. At a ministerial level, on more than one occasion I have asked questions of the police commissioner regarding methodology and standards in terms of intake, not so much in the context of the gender recruitment issue but just as a recruitment strategy generally, particularly considering that the government has a policy of increasing the number of people coming into SAPOL.

I have to say that the commissioner has reassured me, and certainly satisfied me, that the only people who are getting into SAPOL are those people who meet the standards. I think that is an important principle and one that the community at large can have a lot of confidence in, but I might invite the police commissioner to add to that.

Cmmr STEVENS: Thank you minister, and can I just clarify that, in regard to the commitment to take away a question on notice about the number of applicants, or the increase in the number, I can say that the ratio of female applicants has increased from 70 per cent male and 30 per cent female to 58 per cent male and 42 per cent female as a result of the strategy that has been put in place. I can also say with absolute certainty that there has been no reduction in standards that are applicable to women or any particular gender. We have introduced a range of different strategies, which includes recontacting female applicants who have shown an interest in SAPOL previously but who have not been successful.

We have introduced a policy decision where a person who has tertiary qualifications is no longer required to submit to our numeracy and literacy testing, which makes it easier for people to move into SAPOL as a recruit. We have reviewed our fitness testing regime and adopted a methodology which has been endorsed by the Australian and New Zealand Police Advisory Agency, which looks at functional fitness that is related to the activities of a general duties police officer.

This testing regime probably provides a perception that more accurately identifies with the physical requirements of joining the police service. Can I also stress that there has been no reduction in standards and that only those people who meet SAPOL's standards through the recruit application process are offered a position on a recruit course.

The Hon. P. MALINAUSKAS: I might just add one thing to that. I am not suggesting that this has occurred here at all, and I preface my remarks by saying that this is in no way a criticism, but I think it is important that as a community we think very carefully about suggestions that that may be the case. We know for a fact that women who are working within SAPOL are doing an outstanding job. I think it is important to remind ourselves that women are more than capable, often in many, many instances even more capable than men at performing these duties. That is why I think this policy can be implemented by SAPOL in such a way that South Australians can be confident that its implementation will only enhance SAPOL's capacity, rather than the opposite.

Mr VAN HOLST PELLEKAAN: I want to go back to something in the commissioner's answer. Why would having to undergo a literacy and numeracy test deter tertiary-qualified applicants from applying?

The Hon. P. MALINAUSKAS: The police commissioner might respond to that.

Cmmr STEVENS: The decision was taken to allow people with a tertiary qualification to bypass the literacy and numeracy testing process simply to make it as easy as possible for people with the appropriate skills and attributes to participate in that application process and remove one barrier that does not need to be there, as far as we are able to see. History has shown us that people who have tertiary qualifications are readily able to meet that academic threshold that we set for a police applicant or recruit. The decision was taken simply to step away from one barrier, one obstacle, that each person who was seeking to join SAPOL had to complete.

The Hon. P. MALINAUSKAS: I might add that I think it is a fair assumption that if someone has a tertiary-level qualification they are both literate and numerate.

Mr VAN HOLST PELLEKAAN: I agree, and that is why I could not see why it would be a deterrent to them to have to do it. The next question, minister, is: does that create a deterrent for the person without a tertiary qualification, who then might feel that they have to take an extra test to prove that they can read and write and have numeracy skills?

Cmmr STEVENS: Historically, we have conducted the literacy and numeracy test, and this provides an avenue for people who are not able to demonstrate through any other qualification that they have the necessary skills to demonstrate those skills as a part of the selection process. That is why we continue to offer it.

Mr VAN HOLST PELLEKAAN: Would completing secondary school be adequate?

Cmmr STEVENS: We have actually examined whether a person's ATAR score would be evidence of sufficient achievement to demonstrate that capability. We have not fallen on a position in relation to that yet. We considered that we would take it one step at a time with tertiary qualifications. We are still doing some further work on whether or not we would consider a person's ATAR score.

Mr VAN HOLST PELLEKAAN: For the Chair, I am moving to page 127, with regard to police station operating hours and that sort of stuff. Minister, given that the number of operational stations is the same for 2015-16 and 2016-17 (at 129, according to the Budget Papers), are there stations that are predicted, expected or planned to close post 2016-17? The budget figures show only those two years.

The Hon. P. MALINAUSKAS: Decisions regarding police station hours and the operation of police stations, as you probably well know, is a decision that is entirely within the purview of the police commissioner. The police commissioner has announced that he is undertaking a review of the police station front desk administrative hours currently. That review is not completely finalised as yet, so I am not in a position to be able to answer that at the minute.

Mr VAN HOLST PELLEKAAN: When will it be finalised?

The Hon. P. MALINAUSKAS: I am advised that SAPOL intends to make an announcement publicly in the coming weeks.

Mr VAN HOLST PELLEKAAN: The discussion so far about this review has been about metropolitan Adelaide only. Is the review that would be announced in coming weeks for metropolitan areas only or does it include the country as well?

The Hon. P. MALINAUSKAS: I have been advised it is specifically with respect to metropolitan police stations and not regional police stations.

Mr VAN HOLST PELLEKAAN: Will there be a regional review after the metro one is finished?

The Hon. P. MALINAUSKAS: The police commissioner has foreshadowed in respect of his organisational review that the first step is to concentrate on policing generally within metropolitan areas. That is not just in respect of police station hours, but it also refers to the review regarding the district police model and the like. The police commissioner has advised the government that once the whole look has been completed in respect of metropolitan areas, then it is likely that he will undertake a similar exercise in regional South Australia.

Mr VAN HOLST PELLEKAAN: How is SAPOL and/or the government going about getting feedback from the public included in this review process?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to answer this. You are talking about the police station hours review?

Mr VAN HOLST PELLEKAAN: Yes.

The Hon. P. MALINAUSKAS: Yes, sure. I might invite the police commissioner to answer this in light of the fact that it is the police commissioner's decision and his review. What I would just say from my perspective as the Minister for Police is that I have been obviously actively engaged with the police commissioner regarding this subject to ensure and satisfy myself that the police commissioner is taking into account the views of the South Australian public. I might allow him to speak to what he has done to ensure that there is a process for that to occur.

Cmmr STEVENS: As part of our consultation process, we sought feedback from interested stakeholders which included local government associations and local MPs, and we have also placed

in *The Advertiser* and the *Messenger* newspapers an invitation for members of the community to make contact directly with SAPOL to provide their feedback or views in relation to police station front counter opening hours.

Mr VAN HOLST PELLEKAAN: Once the review is completed and the changes are made, how will success or failure be judged? How will it be evaluated post-implementation?

The Hon. P. MALINAUSKAS: Again, being part of the police commissioner's review, I might invite the police commissioner to respond to that.

Cmmr STEVENS: As with any review that is undertaken in SAPOL, we will follow up with an evaluation of the impact of the changes that we make. We will be monitoring activity in and around those police stations that are impacted by change and also monitoring community feedback and concern in relation to those changes.

Mr VAN HOLST PELLEKAAN: Community feedback, the public will have an opportunity to share their views again?

Cmmr STEVENS: It may not be the case that we would actually specifically seek responses in an advertised way, but we will certainly be monitoring stakeholder views and issues and also people who have a need to contact or interact with police station services.

Mr VAN HOLST PELLEKAAN: Minister, when will the new Henley Beach Police Station be completed and fully operational?

The Hon. P. MALINAUSKAS: I am advised that it will be during September.

Mr VAN HOLST PELLEKAAN: With regard to the proposed reduction in operating hours, what was the community feedback on that change?

The Hon. P. MALINAUSKAS: I do not think we quite have to hand the specific number of applications. I know the local MP, the member for Colton, made a submission to that review. What I would say is that, regardless, I think it is important to keep in mind that the Henley Beach Police Station, I am advised, as will most police stations, be remaining a 24-hour a day, seven-day a week operation, 365 days of the year, with police moving to and from the police station as a patrol base.

It is important for the committee to understand that the police commissioner's review of police station hours is specifically and only looking at front desk administrative hours, as distinct from the functioning of the police station; they will remain 24/7 operations. I am advised, (just to give you a bit of an insight) by the police commissioner that in total there were 38 responses received from the community at large to SAPOL's call for submissions.

Mr VAN HOLST PELLEKAAN: Specifically for Henley Beach?

The Hon. P. MALINAUSKAS: No, that is in total.

Mr VAN HOLST PELLEKAAN: Given that you do not have it to hand, would you take on notice and come back with the community feedback about the reduction in hours at the new Henley Beach station?

The Hon. P. MALINAUSKAS: You are specifically interested in Henley Beach?

Mr VAN HOLST PELLEKAAN: Yes, minister.

The Hon. P. MALINAUSKAS: Yes, we can take that on notice.

Mr VAN HOLST PELLEKAAN: The member for Kavel would like to ask a question.

Mr GOLDSWORTHY: Going along the same line of questions from the member for Stuart. I wonder, minister, have you received any community feedback concerning the reduction of hours of the Golden Grove Police Station?

The Hon. P. MALINAUSKAS: I am advised that that number of 38—

Mr VAN HOLST PELLEKAAN: Is this about Henley Beach?

The Hon. P. MALINAUSKAS: Yes, back to the answer to the Henley Beach question. I want to come back to that and correct the record. I have been advised by the police commissioner that that number of 38 refers to a previous review of police station hours conducted by the former commissioner. The number of submissions from members of the public, I am advised, was three.

Mr VAN HOLST PELLEKAAN: For the current review?

The Hon. P. MALINAUSKAS: For the current review. In respect to—

Mr VAN HOLST PELLEKAAN: So, the member for Colton?

The Hon. P. MALINAUSKAS: No, that is members of the public. Your question was regarding Golden Grove. Golden Grove fits in the category of all other police stations. The review process and the call for submissions was consistent with what the police commissioner outlined earlier.

Mr GOLDSWORTHY: I understand that, minister, but I asked specifically: had you received any feedback about the reduction of the hours of the Golden Grove Police Station? Can you be specific in relation to any feedback you received?

The Hon. P. MALINAUSKAS: Are you talking about from the public or are you talking about from passionate local MPs who serve their constituency incredibly well?

Mr GOLDSWORTHY: Anyone, minister.

The Hon. P. MALINAUSKAS: Sorry, but I do not have a breakdown of which stations received which submissions, particularly in regard to the ones from members of the public.

Mr DULUK: On this topic, what about from passionate local MPs in regard to the Golden Grove Police Station?

The CHAIR: What is your interest in Golden Grove?

Mr DULUK: No, the minister did not answer it.

The Hon. P. MALINAUSKAS: I just do not have to hand every single submission that was made. I can assure the member that a number of MPs made submissions. I am certainly aware of the passions of the local MP regarding Golden Grove, and she regularly makes representations to me, rest assured.

An honourable member interjecting:

The Hon. P. MALINAUSKAS: And the member for Florey and every other Labor MP in parliament.

The CHAIR: Yes, do not start naming people.

The Hon. P. MALINAUSKAS: I should just mention, in respect of Golden Grove, if I may, since there have been a couple of lines of inquiry, that Golden Grove fits into the same category as Henley Beach and, indeed, basically every other police station. Golden Grove will be remaining, I am advised, as a 24-hour-a day, seven-day-a week, 365-day-a-year patrol base.

Mr VAN HOLST PELLEKAAN: Thank you, minister. I want to move on to page 132 and pursue the topic of drug diversions. Can you explain why drug diversions have increased by 28 per cent from last year to this year?

The Hon. P. MALINAUSKAS: I might just give the police commissioner a moment to familiarise himself with those references.

Mr VAN HOLST PELLEKAAN: About seven lines from the bottom of that page.

An honourable member interjecting:

Mr VAN HOLST PELLEKAAN: Do not let her distract you, minister.

Members interjecting:

The CHAIR: Order! The minister has the call.

The Hon. P. MALINAUSKAS: As it is an operational question, I might invite the police commissioner to answer.

Cmmr STEVENS: Thank you, minister. The indicator that has been referred to is a proactive measure of police activity, so it is dictated in part by the number of interactions police have with people who are found in possession of drugs, but it is also an indicator of the increase of a prevention-first approach in dealing with the issue of illicit drugs and allocating resources that are charged with the responsibility of patrolling in areas where we believe there may be relevant activity and taking action as appropriate.

Mr VAN HOLST PELLEKAAN: Thank you, commissioner. Minister, of the 7,132 people who participated in the program in the 2015-16 year, how many participated for the first time?

The Hon. P. MALINAUSKAS: I am advised that that information is not to hand and would need to be taken on notice.

Mr VAN HOLST PELLEKAAN: I will ask you some more questions then, just get them on the record, and you might be able to take them on notice as well.

The Hon. P. MALINAUSKAS: To the extent that we have the information on hand, I am sure the police commissioner would be happy to advise you of it; if it gets quite specific, I think—

Mr VAN HOLST PELLEKAAN: The first question is: how many of those 7,132 participated for the first time? Secondly, how many participants had been referred to the program one or more previous times, two or more previous times, three or more previous times, or four or more previous times? The last question is: what was the most number of times that a person had been referred to that diversion program? I am happy if you want to take all those on notice.

The Hon. P. MALINAUSKAS: Yes, I think some of those questions are rather specific in nature and, for the sake of accuracy, it is best to take them on notice.

Mr VAN HOLST PELLEKAAN: Yes, that would be good. Minister, has SAPOL made any recommendations to the government about improving the diversion program; if so, what were they? What was the government's response to those suggestions?

The Hon. P. MALINAUSKAS: Neither the police commissioner nor I can recall any specific examples of where that is the case. Should that not be an accurate reflection of what is the case, the police commissioner has advised that he will inform me accordingly.

Mr VAN HOLST PELLEKAAN: So you have not discussed together the proposal from the opposition to limit the number of diversions to a maximum of three before the person must face a court?

The Hon. P. MALINAUSKAS: No, we have not discussed that.

Mr VAN HOLST PELLEKAAN: The member for Davenport has some questions.

Mr DULUK: Minister, just sticking with this drug diversion, has there been any work done on why we have seen such a big increase in diversions? Is it because there is greater police enforcement in this matter? Are we seeing an increasing number of offenders and more people using drugs in the community? What is behind such an increase that we have seen this year?

The Hon. P. MALINAUSKAS: Being an operational-oriented question, I might invite the police commissioner to answer that.

Cmmr STEVENS: Thank you, minister. As I pointed out before, we dedicate resources to illicit drug enforcement, and that resource is deployed based on intelligence to ensure we are operating in the correct areas. I think it is also fair to say that there is an increased incidence of the presence of illicit substances within the community, and those numbers would reflect those occasions when police officers are detecting individuals who are in possession of small quantities of illicit substances.

Mr DULUK: Can we move to page 137, please, the driver screening tests. This is in regard to the activity statement table, the number of detections of drink driving. Does a driver screening test involve a test to detect both alcohol and drug use?

The Hon. P. MALINAUSKAS: I believe it does.

Mr DULUK: Looking at the numbers, does that mean we have seen a reduction in the screening tests from 2014-15 to 2015-16? We have seen an increase—

The Hon. P. MALINAUSKAS: Just give us a moment because I am trying to understand exactly what you are asking.

Mr DULUK: I am looking at the drug screening tests that have been done and then obviously linking it to the previous matter we have just been talking about, in regard to offences and people who are offending, and trying to get some science around—

Cmmr STEVENS: The variation from 2014-15 to 2015-16 can be attributed to a different approach, whereby our resources are allocated on an intelligence basis. We undertake targeted alcohol testing, as opposed to what would be recognised as volume testing that does not necessarily rely on intelligence in terms of where and when we deploy.

Mr DULUK: So you are saying that previously it would be a blanket Hackney Road type approach?

Cmmr STEVENS: Hackney Road, Sunday morning, 10 o'clock, yes, as opposed to targeting venues or locations where we know that the incidence of drink driving may be higher.

Mr VAN HOLST PELLEKAAN: Minister, I refer to pages 133 and 134. Has SAPOL raised any concerns to either the Department for Correctional Services or the minister about the number of prisoners held in police cells; if so, what was the nature of those concerns?

The Hon. P. MALINAUSKAS: I just want to confirm what my recollection was, and that is that I have not received any formal advice from SAPOL, neither to my nor the police commissioner's recollection, regarding that question. That said, as you would be well aware, DCS does use police cells as surge beds for prisoners. I might invite the police commissioner to make a few remarks about the collaborative working relationship that exists between SAPOL and DCS in this area.

Cmmr STEVENS: Corrections does use police custody facilities, and I work closely with the chief executive of the Department for Correctional Services in relation to ensuring that our capacity to assist with his peak demands does not impact on operational policing responsibilities, and to date we have been able to do that successfully. There is capacity within police custody facilities to accommodate short-term corrections prisoners, and the chief executive of Corrections clearly understands that my obligations to operational policing come first and my capacity to assist and support him is a secondary priority, but one I am able to accommodate at this point.

Mr VAN HOLST PELLEKAAN: I am mindful of the protocol of asking the minister the question, not the commissioner, but has the commissioner never ever raised with you, minister, concerns within SAPOL about the extra burden of work to SAPOL associated with managing a higher number than ever of DCS custodians?

The Hon. P. MALINAUSKAS: I have been briefed and advised that that work takes place, that SAPOL does assist DCS in the way that you described, but again, neither to the recollection of the police commissioner nor I has he advised me of any specific concerns that he has regarding that.

Mr VAN HOLST PELLEKAAN: Are additional police resources required to manage this workload?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to answer that.

Cmmr STEVENS: No, it does not impact on police resources directly.

Mr VAN HOLST PELLEKAAN: Does or does not?

Cmmr STEVENS: Does not. Department for Correctional Services personnel come in and manage Corrections prisoners. It is not a responsibility for SAPOL to manage those people.

Mr VAN HOLST PELLEKAAN: In police cells—so Holden Hill, Port Adelaide or somewhere like that—DCS staff come in and they manage those detainees in your cells?

Cmmr STEVENS: That is correct. Some time ago we handed over Holden Hill custody facility to Corrections, and we actually do not use that particular facility for police prisoners at this point in time. When Corrections prisoners are required to be accommodated within police facilities, an appropriate number of Corrections staff come in to manage those prisoners. They are not managed by police.

Mr VAN HOLST PELLEKAAN: Does that put extra pressure on the other police cells then? Police have, presumably, about the right number of cells for their own purposes. If some of them are set aside for Corrections purposes, does that put additional pressure on the remaining police cells?

The Hon. P. MALINAUSKAS: I think the person best placed to answer that again is the police commissioner.

Cmmr STEVENS: We limit the number of cells we make available to Corrections, based on our estimations of workload demand for police. Where we are able to forecast significant events or occasions when we anticipate that our demand will be higher, we accordingly limit the number of cells that are available to Corrections prisoners. At this point, it does not include Holden Hill because we have stepped away from the use of that as a custody facility for police prisoners.

Mr VAN HOLST PELLEKAAN: Minister, would you please outline the circumstances surrounding the four instances in the last year when someone has escaped from a police holding cell?

The Hon. P. MALINAUSKAS: I can give a bit of detail there: on 15 November 2015 from the Whyalla Police Station, 8 April 2016 from the Port Lincoln Police Station, 6 July last year from the Port Augusta Court and then 14 July last year from the Mimili Police Station.

Mr VAN HOLST PELLEKAAN: This happened once in the previous year, the 2014-15 year, and it has happened four times in the 2015-16 year. Can you explain why there is an increase like that?

The Hon. P. MALINAUSKAS: I am happy to pass that question on to the police commissioner regarding an operational matter.

Cmmr STEVENS: The reality is that these circumstances occur as a result of the actions of police officers and the actions of individual prisoners. In some cases the escape from custody is relatively minor or short lived and, where we identify deficiencies in performance by police officers, they receive guidance in relation to that, whether it be through discipline, additional training or counselling.

Mr VAN HOLST PELLEKAAN: Were any of those escapees considered dangerous to the public?

Cmmr STEVENS: I do not have the specifics about the antecedence of the individuals concerned. I can say that, from the information I have, at least two of those were apprehended almost immediately.

Mr VAN HOLST PELLEKAAN: Minister, would you take that on notice?

The Hon. P. MALINAUSKAS: Sure, bearing in mind that questions around confidentiality of prisoners will have to be taken into account, but I am happy to take it on notice and if it is appropriate to share that information I am sure it will be.

Mr VAN HOLST PELLEKAAN: I think if they were dangerous to the public it would not be a matter of confidentiality, so that would be good. What actions have been taken to try to improve that performance since the quadrupling in the last 12 months?

The Hon. P. MALINAUSKAS: Again, I might invite the police commissioner to answer.

Cmmr STEVENS: As I indicated, where we are able to attribute an escape to the performance or conduct of a police officer, we take action as appropriate through our disciplinary or training program to ensure that the individuals involved receive the support they require so that we do not have repeated incidents.

Mr VAN HOLST PELLEKAAN: Minister, is Mr Robert Rigney still at large?

The Hon. P. MALINAUSKAS: Being an operational matter, I will invite the police commissioner to answer that.

Cmmr STEVENS: I can say that Mr Rigney is currently still at large and there is significant police effort being directed towards locating and apprehending him.

Mr VAN HOLST PELLEKAAN: I am very pleased to hear that, particularly in light of the minister's ministerial statement, where he said, and I quote, 'I can only hope that Mr Rigney turns himself in soon.' Minister, what has changed since offering that personal perspective a few days ago, saying that you hope he returns, and SAPOL now saying that a significant amount of effort is being put into actually finding him?

The Hon. P. MALINAUSKAS: I think you would be aware that, since Mr Rigney has been at large, SAPOL has had an ongoing operation to address the issue. Of course, as the police commissioner just mentioned, SAPOL is putting in place a number of measures to try to maximise the likelihood of his capture.

Mr VAN HOLST PELLEKAAN: Is Mr Rigney considered dangerous?

The CHAIR: Are these specific questions about Mr Rigney really related to the budget? You have asked about escapes and so forth; I am just not sure that specifically Mr Rigney's case per se is the one we need to be talking about.

Mr VAN HOLST PELLEKAAN: Budget Paper 4, Volume 3, page 134, third line from the bottom talks about escapes.

The CHAIR: Yes, but it does not say 'Mr Rigney', and you have certainly asked as many questions as you could possibly ask about escapes from police holding facilities. I would like to know whether any police were hurt in those escapes, but that is another thing.

Mr VAN HOLST PELLEKAAN: Is he dangerous to the public?

The CHAIR: Is this back on Mr Rigney again? I do not think we need to ask about Mr Rigney. You have asked a couple already; you have asked several in question time. I am just not certain that Mr Rigney needs that much attention.

Mr DULUK: Absolutely he does. He handed himself in and he is still at large.

The CHAIR: That is a different thing altogether. You can have some time on that this afternoon, no doubt.

Mr VAN HOLST PELLEKAAN: I think it is quite reasonable for everybody in South Australia to know whether or not he is dangerous to the public, but I will accept your decision. Minister, has the recent change of practice, whereby SAPOL must deliver remandees or arrestees or prisoners, or whatever category they fall into at the time, to DCS facilities by noon each day (whereas it was previously 4pm each day), put additional pressure on police holding cells and police operations?

The Hon. P. MALINAUSKAS: I am advised that there is no information to hand regarding any impacts as a consequence of what you refer to.

Mr VAN HOLST PELLEKAAN: Does that mean that there are none or that there is no information at hand and you will take the question on notice?

The Hon. P. MALINAUSKAS: Neither the police commissioner nor I have been advised of any major impacts.

Mr VAN HOLST PELLEKAAN: No police officers have raised this with you?

The Hon. P. MALINAUSKAS: No police officers have raised it with me, to the best of my knowledge. I would say that I would not expect them to. The appropriate chain of communication between SAPOL and myself is through the police commissioner.

Mr VAN HOLST PELLEKAAN: I refer to page 123, firearms. Minister, how many FTEs were in the Firearms Branch as at 30 June 2015 and 30 June 2016?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to answer that. The allocation of resources within SAPOL is a question best answered by the police commissioner.

Cmmr STEVENS: In terms of the breakdown over financial years I do not have that information available, but I can say that at this point, the establishment for Firearms Branch as at 30 June 2016 is 25 sworn and 22.03 nonsworn.

Mr VAN HOLST PELLEKAAN: Thanks, commissioner. Minister, how many registered firearms owners are there in SA as of 30 June 2016?

The Hon. P. MALINAUSKAS: Just for the sake of clarity, what was the question again?

Mr VAN HOLST PELLEKAAN: How many registered firearms owners in South Australia as of 30 June 2016?

The Hon. P. MALINAUSKAS: This may not specifically answer your question but I think it will give you a pretty good indication. To 1 May 2016, I am advised there were 65,559 firearm licences and 300,510 total firearm registrations.

Mr VAN HOLST PELLEKAAN: Was the last number 300,510?

The Hon. P. MALINAUSKAS: Correct, as at 1 May 2016.

Mr VAN HOLST PELLEKAAN: What is the average amount of time that it takes to process a new firearms application at the moment?

The Hon. P. MALINAUSKAS: I am aware of the fact that the Firearms Branch have undertaken a significant effort to try to expedite the process that the firearms community goes through when then they make applications. I am aware of the fact and have been advised that there has been substantial improvement as a result of that effort, but I might handball to the police commissioner for more specific detail if there is somewhere.

Cmmr STEVENS: Thank you, minister. I do not have specific detail on the time frames of processing, but I can say that we are working with an antiquated paper-based system, and that there are steps in place to replace that with an automated system. The volumes that we are dealing with are as follows: applications for a firearms licence are averaging about 5,000 a year; applications to vary a licence are 2,000 a year; renewal of firearms licences are 25,000 a year; applications for a permit to acquire is 14,000; and intervention order assessments are 12,000.

The volumes that we are confronted with and the fact that we do not have an automated system does create challenges. We address those, at times when we identify failures in meeting time frames, by injecting additional resources for a short period of time to bring back those time frames within acceptable limits.

Mr VAN HOLST PELLEKAAN: Minister, is there any funding in the budget over the forward estimates for the upgrade of the firearms register IT system database? The commissioner just referred to challenges in that area and it is certainly something that has been discussed with regard to the Firearms Bill.

The Hon. P. MALINAUSKAS: I have been advised that there are ongoing efforts within SAPOL to assess whether or not there is any capacity for SAPOL to fund the investment from their current budget allocation.

Mr VAN HOLST PELLEKAAN: Is that with regard to new firearms systems or the requirement for new IT systems throughout SAPOL?

The Hon. P. MALINAUSKAS: Both, I am advised.

Mr VAN HOLST PELLEKAAN: So, any upgrade to existing legacy systems to improve IT throughout SAPOL will have to come from SAPOL's existing—

The Hon. P. MALINAUSKAS: No, what I have been advised is that SAPOL is actively looking to see whether or not those investments can be funded internally from the existing budget allocation.

Mr VAN HOLST PELLEKAAN: When will that determination be made?

The Hon. P. MALINAUSKAS: It is an active piece of work, so there is not a specific time frame in place.

Mr VAN HOLST PELLEKAAN: But there comes a time where, if the work is not completed, the answer must be no. It cannot be that they are asked to look to see if they can take it out of their existing budget year after year after year. Eventually, the answer must be, actually, that it is not possible.

The Hon. P. MALINAUSKAS: That may well be the case, but it may well be the case that the opposite occurs.

Mr VAN HOLST PELLEKAAN: So it is completely wide open? There is no intention from the government to try to support SAPOL with additional funding?

The Hon. P. MALINAUSKAS: No, the government is of course very supportive of the effort that is being undertaken to see if there are mechanisms for this to be funded. I think it is a piece of work that needs to be contemplated in due course.

Mr VAN HOLST PELLEKAAN: Minister, this has been going on for a decade at least that I know of. One of the impediments to SAPOL performing as well as they could is the fact that their legacy IT systems are not up to scratch.

The Hon. P. MALINAUSKAS: Of course, it is important to remember that the parliament has gone through a very substantial process of introducing and passing a completely new Firearms Act, as you are well aware. Of course, there is an ongoing effort at the moment—to which I am grateful for the member for Stuart's contribution thus far—to update the regulations that accompany that act.

Once that process is complete, I am advised that SAPOL's capacity to make a thorough assessment of the business case for a new system will be more readily able to be completed and, thus, provide a more accurate assessment of what the potential costs are in terms of (a) what is necessary and (b) what the cost implications of that would be.

Mr VAN HOLST PELLEKAAN: How many legacy IT systems are there within SAPOL that require updating or replacement?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to answer that.

Cmmr STEVENS: Thanks, minister. I do not have an exact number of the legacy systems we have, but the Shield program, which I am sure you are aware of, is a comprehensive upgrade of SAPOL IT systems. That is an ongoing project that will capture virtually all of the legacy systems that we are dealing with and provide that IT functionality to the front line.

Mr VAN HOLST PELLEKAAN: When will that body of work be completed?

Cmmr STEVENS: I do not have an exact date, but we have four or five years of continuing work to roll out different components of the Shield program, and we have already rolled out several. I think the overall cost of the program is about \$42 million over the life of the project.

Mr VAN HOLST PELLEKAAN: Minister, would you update the committee on how the government is progressing with bulk purchase of police vehicles with other jurisdictions, assuming that is still the government's plan?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to respond to that.

Cmmr STEVENS: Thanks, minister. SAPOL led a project through the Australia New Zealand Policing Advisory Agency developing a specification for patrol, fleet and traffic patrol fleet, I think. That work has been completed and put to the industry for feedback. However, there is no likelihood that there will be a singular contract or arrangement that incorporates all jurisdictions within Australia in the acquisition of the next iteration of patrol vehicle. Different jurisdictions have different methodologies for how they stack their fleet. It will be the case that each jurisdiction will utilise those specifications to pursue their own arrangements to ensure they have an appropriate fleet.

Mr VAN HOLST PELLEKAAN: Minister, as well as dealing with other jurisdictions, are you working with other government departments to try to streamline procurement of vehicles where

SAPOL and other South Australian government departments might have the same requirement for a vehicle?

The Hon. P. MALINAUSKAS: Could you repeat the question?

Mr VAN HOLST PELLEKAAN: The first question was about working with other police jurisdictions with regard to procurement. The second question was about working with other South Australian government departments with regard to procurement, where SAPOL and other government departments have need of the same type of vehicle.

The Hon. P. MALINAUSKAS: I think with these particular questions I might get the police commissioner to respond.

Cmmr STEVENS: The responsibility for identifying the appropriate vehicle for general fleet use for passenger vehicles rests with state fleet. The specifications that we are referring to relate specifically to general duties, patrol vehicles and traffic fleets, which have some particular requirements that need to be factored in to how a supplier would provide a fleet which is appropriate for patrol use.

Mr VAN HOLST PELLEKAAN: I refer to page 124, minor capital works, vehicles and equipment. I want to ask you about the long range acoustic devices which, you have explained to me, were funded by the federal government. What was the market value of those devices when they were received?

The Hon. P. MALINAUSKAS: I have to take that on notice. I note your ongoing and continued interest in the long range acoustic devices.

Mr VAN HOLST PELLEKAAN: And police efficiency in general, minister. Has one ever been used in South Australia?

The Hon. P. MALINAUSKAS: As that is an operational question, I might invite the police commissioner to answer that.

Cmmr STEVENS: Yes, they have been used. We have used them for searches of people who are missing in outback or scrub land areas, because it gives us the capacity to emit an audible noise that a person can identify and follow, and also for the communication of instructions over large areas in a similar searching environment.

Mr VAN HOLST PELLEKAAN: Have they ever been used for any sort of crowd control?

Cmmr STEVENS: They have not been used in crowd control arrangements or riot or public order related activities.

The Hon. P. MALINAUSKAS: Since you asked a question about the use of these devices in a public context, I have received briefings from SAPOL regarding this subject. I took some assurance from the fact that those people who would be using such devices are highly trained and understand how to use them when it is appropriate to do so, which satisfied me, as the minister, that it is entirely appropriate for SAPOL to have these devices to be deployed in a way that is appropriate.

Mr VAN HOLST PELLEKAAN: On page 126, how many body-worn video cameras have been purchased? Are they operational yet; if not, when will they be operational?

The Hon. P. MALINAUSKAS: I am advised that the acquisition of body-worn videos or a solution to body-worn videos is in its final stages. I am also advised that things are on track for their deployment commencing late this year.

Mr VAN HOLST PELLEKAAN: That must mean that the policies and procedures for how they would be used and how the recordings would be stored and all of that sort of thing have been resolved?

The Hon. P. MALINAUSKAS: I am advised that it is an ongoing piece of work but that the bulk of that work has been undertaken by SAPOL. They have achieved the target of having most policies and procedures in place and ready to be implemented, but the police commissioner has advised that, as the commencement of the deployment takes place, naturally there will be a trial and review process put in place by the police commissioner.

Mr VAN HOLST PELLEKAAN: With regard to personal data entry devices, how many of those have been purchased?

The Hon. P. MALINAUSKAS: SAPOL commenced a trial of personal issue tablet devices at the Elizabeth LSA. The aim of the trial was to determine the viability and operational benefits resulting from officers being able to perform administration and operational tasks in the field, thereby reducing the need to return to base to utilise a desktop computer. I have been informed that, following that trial, a decision has been taken by SAPOL to go with a ruggedised tablet, which will be based in the vehicle but mobile in nature to achieve SAPOL's objectives, and that they have identified and procured 350 data entry terminals.

Mr VAN HOLST PELLEKAAN: Is SAPOL moving towards vehicle-based data entry terminals as well?

The Hon. P. MALINAUSKAS: I might invite the police commissioner to answer that.

Cmmr STEVENS: We trialed the personal issue data entry terminals at the Elizabeth Local Service Area, where officers in that local service area were issued a device for their own use. The outcomes of that trial have shown us that there are greater opportunities for a more functional and useful resource by having ruggedised tablets which are also mounted in the vehicle and removable from the vehicle by officers, therefore replacing our mobile data terminals, which are currently situated in the vehicle. The trial of the DETs has resulted in an alternative strategy, which is ruggedised tablets which can be put in the vehicle and used as their principal data terminal or removed for portable use as well.

Mr VAN HOLST PELLEKAAN: So, hand held or in vehicle, it will work both ways?

Cmmr STEVENS: Yes, that is right.

Mr VAN HOLST PELLEKAAN: I refer to page 124. What is the total number of CCTV cameras monitored by SAPOL as at 30 June 2015 and 30 June 2016 and what are the projections moving forward? You can take that on notice, if you would like to.

The Hon. P. MALINAUSKAS: I think that might be a question that is best taken on notice. I am happy to get that number. Before things conclude, I have a clarifying statement I would like to make, to go back to an earlier question asked by the member for Stuart. I am just racking my brain as we have been sitting here going through things. You asked a question earlier about DCS's relationship with SAPOL regarding custody management and a specific question around transfers, the time line of transfers during the course of the day, and an operational decision taken earlier. Do you recall that question?

Mr VAN HOLST PELLEKAAN: I do.

The Hon. P. MALINAUSKAS: I just want to be clear. I do not have the rush of *Hansard* available, but you asked a question along the lines of whether any representations had been made by me, and I responded by saying that representations from police officers are made through the police commissioner. I just want to be clear. I have been getting around, as I foreshadowed earlier in my opening statements, and making every effort, with the police commissioner's guidance and, of course, authority, to visit police stations and talk to people working on the front line to familiarise myself with the organisation and how it operates.

To the best of my recollection, no officer has said that to me on the ground, but I can recall a time when I visited the City Watchhouse and had the opportunity to meet a number of SAPOL officers and talk about their day-to-day operations.

Again, just to be clear, in response to your question, in my remarks about not receiving any advice that that change had been of consequence I was making a remark that I had not received any formal representations from police through the police commissioner to the best of my recollection.

The CHAIR: The time for questions having elapsed, I declare the examination of proposed payments completed.

Sitting suspended from 15:32 to 15:45.

DEPARTMENT FOR CORRECTIONAL SERVICES, \$358,031,000**Minister:**

Hon. P. Malinauskas, Minister for Police, Minister for Correctional Services, Minister for Emergency Services, Minister for Road Safety.

Departmental Advisers:

Mr D. Brown, Chief Executive, Department for Correctional Services.

Mr C. Sexton, Executive Director, Business and Information Services, Department for Correctional Services.

Ms K. Connolly, Acting Director, Governance and Executive Support, Department for Correctional Services.

Ms C. Arthur, Senior Executive Services Consultant, Department for Correctional Services.

Mr L. Golding, Chief of Staff.

The CHAIR: Welcome back to committee A. Are you all satisfied that you know the preamble without my reading it to you again? Minister and lead questioner on the opposition side, you have agreed on your format?

Mr VAN HOLST PELLEKAAN: Yes.

The Hon. P. MALINAUSKAS: Yes.

The CHAIR: We have no membership changes to the committee. I declare the proposed payments open for examination and refer members to the agency statements in Budget Paper 4, Volume 1. Minister, please introduce your advisers, and then proceed with your opening statement.

The Hon. P. MALINAUSKAS: Thank you, Madam Chair. I have Mr David Brown, who is Chief Executive of the Department for Correctional Services, on my right. On my left is Mr Chris Sexton, Executive Director, Business and Information Services. Behind me on my right is Ms Cindy Arthur, Senior Executive Services Consultant, and on her left is Kama Connolly, Acting Director, Governance and Executive Support. Also on her left is Mr Liam Golding, my Chief of Staff.

Correctional Services is a complex portfolio and one for which I am excited to be the responsible minister. Having only been the Minister for Correctional Services since January this year, I can assure you it has been a steep learning curve, but I have genuinely enjoyed and embraced every minute of it. 2015-16 has been a challenging and exciting year for the Department for Correctional Services, with continued pressure on the prison system and the realisation of a number of key projects.

As members would be aware, there continues to be a sustained growth in the South Australian prison population, but the government and the department continue to meet these demands. During 2015-16, an additional 230 beds were commissioned across the prison system, along with a state-of-the-art visitor reception centre at Mount Gambier Prison and a new health centre and high-dependency unit at Yatala Labour Prison.

I have made no secret of my commitment to exploring alternative options to imprisonment, and indeed this is an undertaking of the current government. The Criminal Justice Sector Reform Council, of which I am a member, is working to improve service delivery across the criminal justice sector, including Corrections.

Contemporary research shows that expanding the use of community-based supervision and rehabilitation with better sentencing and sanction options will help slow the rate of prisoner growth. In addition to reducing the costs associated with imprisonment, community sentencing options are

shown to have better outcomes for the community. This can lead to further cost savings through a reduced propensity to reoffend.

In 2016, the Statutes Amendment (Home Detention) Bill 2015 passed through the parliament, resulting in an expanded use of home detention by the department. It will also enable the courts to use home detention as a sentencing option and as a key alternative to custody strategy. These strategies are supported by a number of NGOs that also provide support services. The government's commitment to reducing reoffending and increasing rehabilitation is reflected in this year's budget announcement, providing an additional \$9.9 million for rehabilitation programs including domestic violence programs.

In 2015-16, the department continued to deliver a range of intensive programs to prisoners and offenders who have engaged in violent, sexual, substance-related or chronic general offending. To complement this, the department expanded education and training opportunities for prisoners and offenders by forming a partnership with TAFE SA for delivery of a range of new programs.

The department has maintained its commitment to the needs of female prisoners and offenders by launching The Strong Foundations & Clear Pathways: Women Offender Framework and Action Plan in December last year. As further evidence of the commitment to women, in particular ending violence against women, the department has successfully achieved White Ribbon workplace accreditation, and I congratulate David and his team on this important achievement.

I would like to quickly mention the partnership that the department entered into with SAHMRI's Wellbeing and Resilience Centre to improve the wellbeing of staff and prisoners. The department was fortunate to have a series of workshops delivered by two senior staff, Brigadier General Dr Rhonda Cornum and Chris Poe from TechWerks, both of whom are experts in the delivery of wellbeing and resilience skills to the United States of America military.

Despite Corrections being a difficult area of public administration, I am committed to working with the department to ensure it continues to fulfil its obligations to effectively manage the state's prisoners and offenders. I want to highlight that in terms of community safety, the department's obligations do not just end with prisoners and offenders. The department must maintain an ever-present duty of care to victims of crime. We will also keep exploring new pathways and implementing changes to benefit the system and ultimately the community at large.

Mr VAN HOLST PELLEKAAN: I will make a very short comment; that is, for the time that I have been the shadow minister for correctional services, I have thoroughly enjoyed it, and I find it a fascinating portfolio. The more time I spend in it, the more I learn about it. As the minister said, it is a very complex and very interesting portfolio, and the people who work in DCS do extremely valuable work on behalf of South Australians, and I join with the minister in congratulating David Brown and his department for achieving White Ribbon accreditation status.

I refer to page 144. As I did at the beginning of Police, I will go through and get some numbers that I need to have on the record. How many prisoners were in custody at 30 June 2016?

The Hon. P. MALINAUSKAS: I am advised that number as at 30 June was 2,954.

Mr VAN HOLST PELLEKAAN: Just to confirm, does that include remandees in that total prisoner population?

The Hon. P. MALINAUSKAS: That is correct, yes.

Mr VAN HOLST PELLEKAAN: What was the average and what was the peak number of prisoners in 2015-16?

The Hon. P. MALINAUSKAS: The average daily prisoner number in the last financial year, I am advised, was 2,870, which is, I might point out, below the projected number of 2,876.

Mr VAN HOLST PELLEKAAN: What was the peak? That was the average. What was the peak?

The Hon. P. MALINAUSKAS: I should say that that was lower than what the estimated result was. I am advised that that number was 3,025 and I am also advised that was on 21 June.

Mr VAN HOLST PELLEKAAN: What is the approved bed capacity of the prison system as of 30 June 2016?

The Hon. P. MALINAUSKAS: As at 30 June this year, DCS's funding capacity was 2,861 beds.

Mr VAN HOLST PELLEKAAN: What is the surge bed capacity, and where are those extra beds located?

The Hon. P. MALINAUSKAS: I am advised that number is 114. I am also in a position to provide a breakdown: six at Cadell Training Centre, 12 at Mount Gambier Prison, 14 at Port Augusta Prison, 24 at Port Lincoln Prison, eight at Yatala Labour Prison, 31 at the City Watchhouse and 19 at Holden Hill police cells.

Mr VAN HOLST PELLEKAAN: Minister, if I am not mistaken, during police estimates the commissioner said that Holden Hill was not fulfilling that process any longer.

The Hon. P. MALINAUSKAS: I think the police commissioner made those remarks, but I think you might find, and I am happy to double-check this, that he was making those remarks in the context of SAPOL's use of Holden Hill police cells, as distinct from DCS's use of Holden Hill police cells.

Mr VAN HOLST PELLEKAAN: I think he was saying that SAPOL does not hold DCS custodians at Holden Hill.

The Hon. P. MALINAUSKAS: No, but DCS might hold DCS custodians at Holden Hill.

Mr VAN HOLST PELLEKAAN: As part of the surge capacity?

The Hon. P. MALINAUSKAS: Correct. I think that is right. I am advised by DCS that they do use Holden Hill Police Station for people that are in DCS's custody, and of course DCS then staff it accordingly. Does that make sense? Am I being clear?

Mr VAN HOLST PELLEKAAN: Yes.

The Hon. P. MALINAUSKAS: I think you will find that the police commissioner's remarks—and again, as I said, I am happy to double-check this—about police using Holden Hill for the purpose of custody, were that SAPOL does not use Holden Hill Police Station for the purpose of keeping people in SAPOL's custody, which is quite distinct from the Department for Correctional Services using Holden Hill Police Station for people they have in their custody.

Mr VAN HOLST PELLEKAAN: Thank you, minister, and I guess we will both check those things. Is there a greater risk to holding prisoners in surge capacity versus holding them in the approved cells?

The Hon. P. MALINAUSKAS: When you say 'risk', risk in what respect?

Mr VAN HOLST PELLEKAAN: Risk to prisoners, risk to DCS staff, risk of escape, risk of suicide—a whole range of risks.

The Hon. P. MALINAUSKAS: I am advised that DCS has not identified any substantial increase in risks associated with using surge accommodation.

Mr VAN HOLST PELLEKAAN: When was the last time that DCS did not need to use any of the surge capacity?

The Hon. P. MALINAUSKAS: I think we will have to take that one on notice.

Mr VAN HOLST PELLEKAAN: I now refer to page 136. Of the FTEs that are shown there on the bottom of that page, can you please advise how many of them are in rehabilitation reparation, how many of them are in custodial services, and how many of them are in community-based services?

The Hon. P. MALINAUSKAS: What area are you particularly interested in? Are you interested in the 2015-16 year estimated result, or the budget?

Mr VAN HOLST PELLEKAAN: Yes, the estimated result for the financial year just finished.

The Hon. P. MALINAUSKAS: I am advised that the estimated result for the 2015-16 year is that the number in custodial services is 1,360.4; in community-based services it is 287.5; and in rehabilitation reparation it is 216.5.

Mr VAN HOLST PELLEKAAN: Chair, the member for Hammond would like to ask two questions, please.

The CHAIR: My favourite member—member for Hammond—or you may be until you ask your question.

Mr PEDERICK: Thank you Madam Chair, I hope I remain in good stead. I have a couple of questions in regard to Mobilong. I refer to Budget Paper 4, Volume 1, page 137, Existing projects. I refer to this section, specifically, additional modular accommodation of 72 beds, as well as the additional 26 announced within this budget. With the extra beds, the prison will be housing at least 460 inmates. Can the minister advise what future measures will be put in place to assist the prison, which was originally built for 160 inmates?

The Hon. P. MALINAUSKAS: Sorry, what additional—

Mr PEDERICK: What future measures will be put in place to assist the management and running of a prison which was originally built for 160 inmates and is going to be over at least 460 with these new beds?

The Hon. P. MALINAUSKAS: I am advised that a number of enhancements have been made to Mobilong in light of the additional prisoner capacity that it will have; for example, enhancements to the education centre to increase the number of prisoner programs delivered, enhancement of the offender development unit, additional AVL facilities as well, and I have been advised that the visitor facilities have been increased and enhanced. Naturally, with additional prisoners, so too there will be increased demand on human resources, and that work is being undertaken as well to determine what that may look like.

Mr PEDERICK: What are AVL facilities?

The Hon. P. MALINAUSKAS: AVL stands for audiovisual link facilities, so for the purposes of being in contact with courts. AVL has proven to be a useful tool used by the department, which reduces costs and also risks associated with the transportation of prisoners. It also allows for a more efficient communication with the courts.

Mr PEDERICK: In regard to the same budget line, under Existing Projects, it acknowledges that the prison at Mobilong recently underwent a security system upgrade. However, with the expected increase in prison numbers, can the minister advise as to whether he has received any requests for further security measures to be implemented by staff working for the department of corrections?

The Hon. P. MALINAUSKAS: I am not aware of any requests that have been made from the department through to me. I am not aware of any representations that have been made to me as the minister by the department of corrections regarding any security issues at the site.

Mr PEDERICK: The minister believes that with these extra beds security will be able to manage these extra numbers without any problems?

The Hon. P. MALINAUSKAS: DCS places a very high priority on security. Security is always paramount within the Department for Correctional Services, and I have not received any advice that security would be compromised as a result of this expansion. I have just been advised that there are no additional risks that the department is aware of currently.

Mr VAN HOLST PELLEKAAN: Minister, I refer to page 144, and I come back to some of those prisoner numbers. You advised that the approved capacity was 2,861, the surge capacity was 114 and the total—if my quick sums are right—is 2,975. On 21 June there were 3,025 prisoners. Where were the surplus prisoners housed who were over and above approved and surge capacity?

The Hon. P. MALINAUSKAS: Being a question that is operational in nature, I might refer it to Mr Brown, chief executive of the department.

Mr BROWN: Could you just repeat the question?

Mr VAN HOLST PELLEKAAN: Yes, certainly, Mr Brown. If I have these numbers right—which I think I have, but tell me if not—the approved bed capacity as at 30 June I was told was 2,861 and the surge bed capacity was 114, which comes to a total of 2,975. I was also advised that on 21 June—nine days earlier, so presumably the numbers would not have changed too much—there were 3,025 prisoners in custody, which is 50 over the maximum capacity of the prison for approved beds plus surge beds. The question is: where were those 50 prisoners housed?

Mr BROWN: It would be my preference to take that question on notice so we can provide you with specific details. All those prisoners were accommodated within the department's correctional facilities, and there were some additional beds utilised within some of those facilities. I will get that breakdown for you and take that on notice.

Mr VAN HOLST PELLEKAAN: Thanks, Mr Brown, I appreciate that. Minister, when that happened, just six or so weeks ago, were you aware at the time that there were 50 prisoners in the system over and above the maximum capacity, including surge capacity?

The Hon. P. MALINAUSKAS: My office receives regular updates around what the daily prisoner population is. I expect that the department would advise me if any of those numbers presented a severe risk. I have been regularly advised by the Department for Correctional Services, upon requests made by me and indeed voluntary briefings provided by them, that there is capacity within the Department for Correctional Services to accommodate surges of the nature you refer to.

Mr VAN HOLST PELLEKAAN: What is that third category called? If there is a category of space that is approved bed capacity, and there is a category of space called 'surge bed' capacity, what is the category called for housing prisoners over and above those first two categories?

The Hon. P. MALINAUSKAS: Those beds fall into the category of the one I referred to earlier, surge beds. I am not aware of any particular unique term applied to the beds you refer to. Surge beds are surge beds.

Mr VAN HOLST PELLEKAAN: And there are 114 of them. That is what you told me. When capacity is greater than 114, over and above approved capacity, what category is that, given that you have just said that you are comfortable that the system has the ability to cope in those circumstances?

The Hon. P. MALINAUSKAS: I might invite the chief executive of the department to answer the question about how he deals operationally with the circumstances to which you refer.

Mr BROWN: Again, I mentioned earlier that I would like to provide a detailed breakdown by taking that question on notice. To cite a couple of examples of some flexibility we have within the system, we plan for 31 surge beds at the Adelaide City Watchhouse. We do have the capacity, subject to SAPOL's operational requirements, and that generally is driven by the day of the week that the surge arises, to take that to 38. In fact, we have the ability, through direct consultation between myself and the commissioner, to take it a little bit higher than 38 as well.

The other area we have been able to utilise is where we have prisoners in long-term hospital stays, where they are admitted to hospital. We have the ability and flexibility for a short term to backfill those beds to provide for surge. They are two examples of how we accommodate days such as the day we had 3,025 in the system. We can provide a detailed breakdown of that day for you by taking that question on notice.

Mr VAN HOLST PELLEKAAN: That would be great, Mr Brown. Essentially, through the minister, you are confirming that in these cases, where the prison population exceeds approved beds plus surge beds, there are other beds found for them in other places?

The Hon. P. MALINAUSKAS: That is my advice, yes.

Mr VAN HOLST PELLEKAAN: What would have been happening the day I visited one of the prisons, when there were three people in a two-person cell and one of them was sleeping on the floor with his head very close to the door? He was on the floor just inside the door, and it was not possible to enter the cell. I was there under the supervision of DCS staff. I would have had to step on his head. He had to get up. That prisoner on that day had no extra bed. He was actually lying on

the floor. You have explained approved capacity, you have explained surge capacity, and you have explained capacity in excess of surge capacity, where all prisons have another bed in another place somehow. What is going on when there are prisoners lying on the floor?

The Hon. P. MALINAUSKAS: I have been regularly advised by the department that no one sleeps on the floor in prison cells. Rather, other measures are taken to ensure that does not take place, including, for instance, using stretcher beds and the like.

Mr VAN HOLST PELLEKAAN: Minister, I can assure you that it was the middle of the day, so it depends on what your definition of 'sleep' is, but he was lying on the floor.

The Hon. P. MALINAUSKAS: If a prisoner decides to voluntarily lie on the floor in the middle of the day, then that of course is an option presumably available to him. What I am telling you is that I am advised that no prisoners are not provided with a mechanism to avoid sleeping on the floor, presumably at night-time.

Mr VAN HOLST PELLEKAAN: Minister, he was on the floor because the other two prisoners were in the only two beds, so I am just trying to find out—

The Hon. P. MALINAUSKAS: At what time of the day were you there?

Mr VAN HOLST PELLEKAAN: Midmorning.

The Hon. P. MALINAUSKAS: Most people sleep at night.

Mr VAN HOLST PELLEKAAN: So, that is not beyond surge capacity? When I asked you if, when the prisoner population is in excess of approved capacity, in excess of surge capacity, everybody has a bed found somewhere, you answered yes.

The Hon. P. MALINAUSKAS: That is what I am advised; that is correct.

Mr VAN HOLST PELLEKAAN: So there was something else happening in this situation?

The Hon. P. MALINAUSKAS: You are talking about something that was happening in the middle of the day. I cannot speak with any authority on what prisoners elect to do in their own time. What I have been advised by the Department for Correctional Services is that they undertake a range of different measures to ensure that no prisoner is compelled to sleep on the floor.

Mr VAN HOLST PELLEKAAN: Recently, there was a procedural change, and we touched on this before, so that SAPOL deliver prisoners or arrestees or remandees, depending on what the situation is, to DCS. It used to be they had to get them to DCS by 4pm on any day, and I am told that now it is by noon on any day. If they cannot get the person into DCS custody by noon, then SAPOL have to keep the person until the next day and get them there before noon the next day. Is that something that is operating all over the state?

The Hon. P. MALINAUSKAS: This being a question that is operational in nature, I might invite the chief executive to answer it.

Mr BROWN: I can advise that the Correctional Services Regulations provide for the admission of prisoners to occur between the hours of 9am and 6pm. It is certainly 6pm. It could be a bit earlier than 9am, working on my memory, but I am pretty sure it is 9am to 6pm. We ordinarily take admissions up to 6pm every working day of the week, and there is also the flexibility for the chief executive to accept admissions after 6pm if good reason exists to do so.

We do routinely, especially on a high court day for first appearances, face a situation where we need to receive some people after 6pm. I am not aware of any requirement for SAPOL to deliver prisoners to us before 12pm. For most of the metropolitan courts, the in-court custody management services are provided by G4S custodial services. They ordinarily deliver prisoners to DCS facilities but, in a regional context, that function is often performed by SAPOL themselves.

Mr VAN HOLST PELLEKAAN: Thanks, Mr Brown. Through the minister, just to be sure, to the best of your knowledge, that requirement to deliver them before noon does not exist?

The Hon. P. MALINAUSKAS: That is what I am being advised by the department.

Ms WORTLEY: I am referring to Budget Paper 4, Volume 1, page 140. I just want to know a little bit more about the increase in funding for rehabilitation programs, including domestic violence.

The Hon. P. MALINAUSKAS: As Minister for Correctional Services, of course I am committed to increasing the focus on reducing reoffending and increasing rehabilitation. This government recently made a budget investment of an additional \$9.9 million for these important programs. This means more rehabilitation for offenders, ultimately reducing the rate with which prisoners reoffend and increasing community safety.

Programs are vital. They are central to rehabilitation and reducing reoffending. The department's programs are currently delivered across a range of locations, both in prisons and community corrections. Departmental initiatives are focused jointly on rehabilitation processes, as well as targeting resources towards those offenders who present the highest threat to public safety. In 2015-16, the department delivered 5,418 program hours. This resulted in higher than the target of 5,200 and, with the additional funding provided in the state budget, it is forecast that 6,555 program hours will be delivered in 2016-17.

Since the additional funding was approved, 19 new positions have been created comprising 16 clinical staff and three support staff; nine of these new positions have already been filled. These important extra resources will allow a projected 19 extra group programs to be run during 2016-17, meaning that 228 extra participant places can be provided. This significant investment includes an ongoing focus on the current program suite but also includes new programs targeting domestic violence, as well as a new pilot trialling a prisoner-based drugs and therapeutic community at Cadell Training Centre. These programs will be run in both prisons and within community corrections and include a program called Domestic and Family Violence Intervention Program.

Domestic violence is a scourge within our community. It has taken too long and too many victims before we started to realise the depth of this scourge, but now that it is coming to light it deserves every effort possible to be able to take it on. Domestic violence in all forms is not acceptable, and sadly an increasing number of those within our corrections system are there for domestic violence related offences.

The domestic and family violence program, delivered in partnership with the department and Central Domestic Violence Service, is designed for male offenders and prisoners who have an identified history of committing domestic and family violence against a female partner in the context of an intimate relationship. The partners of the program participants, or men who refuse to participate, are offered counselling and support for the duration of the program, or longer, if required. The program is delivered over 10 weeks and consists of 55 treatment hours. The content of the program is designed to challenge the abuse-supportive attitudes and behaviours of participants but also seeks to simultaneously ensure the safety of women and children through its supporting structures.

The Living without Violence program is another new program that is being delivered within prisons and community corrections. It is a moderate intensity therapeutic group program delivered by psychologists and social workers from the Rehabilitation programs branch with specialist experience and knowledge in working with violent offenders. The Living without Violence program is delivered over approximately 16 weeks and consists of approximately 145 hours of criminogenic treatment. In line with the risk, needs, responsivity model of criminogenic treatment, as the program is a moderate intensity program it is specifically designed for prisoners and offenders identified as being at moderate risk of violent reoffending who have a moderate level of rehabilitative need.

The pilot program, Therapeutic Community, currently trialling at Cadell Training Centre, is a structured environment in which residents work together to understand their past substance abuse issues and to develop ways to change their thinking and behaviour to work towards a goal of developing a healthy and fulfilling life without drugs or alcohol. It incorporates a wellbeing and resilience framework in line with the vision to build South Australia as a state of wellbeing.

A new moderate intensity sexual offender rehabilitation program is currently under development. This program will target sentenced prisoners who have been convicted of sexual abuse, or who have a significant history of concerning sexual behaviours, and have been assessed at as a moderate low risk of sexual reoffending. This new, moderate intensity program will be run over a four month duration and will be delivered within a custodial setting. It is planned that the first

program of this nature will begin in January/February 2017. Offenders assessed as high risk of sexual reoffending will still be provided the existing, high intensity Sexual Behaviour Clinic program.

An important existing program created in 2007, addressing Indigenous domestic violence, is the Cross Border Indigenous Family Violence Program. This program is a family violence perpetrator program that operates primarily within the NPY lands and is delivered over a four-week period. The central tenet of the program concerns the criminality of family violence, and the content aims to challenge abuse-supportive attitude in a non-threatening manner to encourage participants to take responsibility for their thoughts, feelings and behaviour. In 2015-16, the Cross Borders program was also delivered to the Port Augusta Prison to Indigenous men who have engaged in domestic violence and are planning to return to the lands.

Another Aboriginal offender program run by the department is the Our Way My Choice program which is a cultural and wellness program for Aboriginal men within correctional centres. The program aims to increase self-awareness and engagement of its participants. The program serves as a preparatory program for other criminogenic programs such as the VPP, the Sexual Behaviours Clinic, the Sexual Behaviours Me Clinic and the Making Changes program. This program is run over eight weeks for approximately 96 hours.

The Respect Sista Girls 2 program is a cultural and wellness program for Aboriginal women within correctional centres. The program aims to increase the self-awareness and engagement of its participants. The program is still in a pilot phase but it is intended to be used as a preparatory program for other criminogenic programs like the Our Way My Choice program. The program is designed to run over 12 weeks for approximately 72 hours.

The ultimate objective of the department is to improve outcomes for the community through efforts to reduce offender recidivism and provide for successful reintegration back into the community. This includes the use of meaningful and targeted rehabilitation and education programs in addition to effective partnerships with other government departments, community-based organisations, volunteers and the private sector.

In closing, no matter what the crime, rehabilitation is critical to the positive reintegration of a prisoner back into the community. The more we invest in rehabilitation the less we will see repeat offenders, and the safer our communities will be.

The CHAIR: The member for Stuart.

Mr VAN HOLST PELLEKAAN: Minister, in the budget there is \$9.7 million for additional resources to manage prisoners outside of the prison system. Where will those beds be located, how will they be managed and how many of them will there be?

The Hon. P. MALINAUSKAS: Which budget line are you referring to?

Mr VAN HOLST PELLEKAAN: I refer to Budget Paper 5, page 26, in the middle of the page there. It is the \$10 million that you have to house prisoners until your extended capacity catches up with prisoner growth.

The Hon. P. MALINAUSKAS: Yes. My advice is that those funds are being used to pay for the costs associated with that additional surge accommodation, much in line with those beds that I referred to earlier in the more thorough breakdown that I provided.

Mr VAN HOLST PELLEKAAN: Is that towards the 114 surge beds or is this additional capacity over and above them?

The Hon. P. MALINAUSKAS: Yes, it is towards the 114.

Mr VAN HOLST PELLEKAAN: What operational cost is in the budget for that additional surge capacity or is that incorporated?

The Hon. P. MALINAUSKAS: The figure that you referred to on page 26 incorporates the operational cost attached to those surge beds.

Mr VAN HOLST PELLEKAAN: I refer to Budget Paper 4, Volume 1, the main book, back to page 142 right at the top where it says:

- increased funding for the operational costs associated with temporary beds implemented to meet expected demand across a number of sites (\$2.8 million).

Based on what you just said, that is not to do with the \$10 million expenditure contribution towards surge capacity, so what is that \$2.8 million for, please?

The Hon. P. MALINAUSKAS: I am advised that that figure to which you refer, the \$2.8 million figure on page 142, falls within the \$9.7 million figure to which you earlier referred.

The Hon. J.M. RANKINE: I refer to Budget Paper 4, Volume 1, page 139. One of the areas that I was particularly interested in when I was minister for correctional services is what we are actually doing to help women offenders, both in prison and in their rehabilitation. Minister, could you give us an update regarding the department's Women Offender Framework that has been developed, which is very pleasing to see?

The Hon. P. MALINAUSKAS: I would like to thank the member for this very important question regarding a pretty important subject. I would like to acknowledge the parliament's ongoing commitment to bringing greater attention to the unique needs of female prisoners within South Australian prisons. As of 30 June this year, female prisoners represented 6.7 per cent of the South Australian prison population. Although the percentage of female prisoners may look insignificant in comparison with the overall prison population, there has been an increase in the female daily average prison population of 76.2 per cent over the past decade.

The female remand population has for the first time in 2015 overtaken the sentenced population. An across government women on remand work group has been established to investigate the trend and short and long-term problem-solving strategies, and report to the Criminal Justice Sector Reform Council. Of further concern is that Aboriginal women remain represented in both prison and community correction populations.

Female prisoners are more likely to present with serious mental health concerns, including post-traumatic stress disorder, personality disorder and depression and anxiety disorders. They often have limited education, poor employment history, poor coping skills and experiences of childhood and adult abuse. Additionally, female prisoners are often mothers and sole carers of the children prior to their imprisonment.

The department has taken positive steps to improve its service delivery to female prisoners and offenders, and I am pleased to provide an update in relation to this important work. Based on government and community stakeholder consultation, the Strong Foundations & Clear Pathways: Women Offender Framework and Action Plan was developed and officially launched in December last year. The framework and action plan strategies address a variety of areas, ranging from assessment and case management, programming, training and employment strategies through to resettlement services and infrastructure development.

A ministerial work group, which I look forward to being part of, has been publicly announced, and is a joint work group between the Minister for the Status of Women and me. The work group will oversee the implementation of the strategy and is comprised of government, business and community sector representatives, including victim and offender advocates. I am pleased to say that the first meeting of the work group will take place on 23 August this year. The purpose of the work group is to oversee implementation and problem-solve barriers to the advancement of initiatives, especially across-government initiatives. It is also intended to open up new opportunity, especially in the areas of higher education, training and work and women offenders community resettlement.

You may have heard about a number of cases in which pregnant women and new mothers have argued against a prison sentence to ensure they maintain contact with their young children. I can assure you that every effort is currently made for a primary caregiver to complete their sentence in the community—for example, through release on home detention—when an appropriate environment can be identified and safety requirements can be put in place.

Given release on home detention is not always possible, a range of strategies and programs are being progressed to facilitate contact between mothers and their children, which reaches a greater cross-section of incarcerated mothers and incorporates approaches that are responsive to a range of child requirements and age groups, in keeping with current prisoner demand. These

strategies seek to enable women offenders to maintain family ties and ultimately reunify them with their children, while also equipping them with skills to increase their confidence as parents.

Women located at the Adelaide Pre-release Centre now have access to a six-day-a-week visit schedule. The number of weekend visits available to women at the Adelaide Women's Prison has increased from five visits at one time to 12 visits, significantly expanding the number of women able to have contact with their children each week. There is also a new children's play area at the AWP visitor centre, which allows for a more comfortable and child-friendly environment.

In the community, the department has entered into a partnership with the Women's and Children's Health Network. From their Port Adelaide site, women are now able to undertake correctional supervision and gain access to needed women's health services and counselling. I commend the wonderful work being undertaken to address the needs of female prisoners and offenders. These combined strategies will provide a strong foundation for rehabilitation and provide women with the opportunity to improve their ability to successfully reintegrate into the community and maintain offence-free lifestyles.

Mr VAN HOLST PELLEKAAN: Thank you, minister. Referring back to Budget Paper 5, page 26, what is the expected increase in the number of offenders on home detention from 2015 to 2016-17 and over the forward estimates?

The Hon. P. MALINAUSKAS: To be sure I am about to read out an accurate answer to your question, would you mind repeating the question?

Mr VAN HOLST PELLEKAAN: With regard to the expected increase in the number of offenders on home detention, for a couple of reasons but including the bill that has gone through parliament, from 2015-16 to 2016-17 and over the forward estimates.

The Hon. P. MALINAUSKAS: I have a number that relates to what we expect the benefits to be. I am advised that we are expecting prisoner numbers to be reduced by 129 than would otherwise be the case by 2018. Regarding the specific number of people going on home detention, for the sake of brevity I think we might take that one on notice and get you an answer as soon as possible.

Mr VAN HOLST PELLEKAAN: Is that 129 reduction as a result of the bill and of the extra ability to offer home detention?

The Hon. P. MALINAUSKAS: My advice is that the number of 129 reflects the additional numbers that would not otherwise have been achieved without the passing of the home detention legislation to which you refer.

Mr VAN HOLST PELLEKAAN: Minister, would you provide a breakdown on how the \$2 million to implement the home detention bill in 2016-17 and the \$4.5 million in every year after that is going to be spent?

The Hon. P. MALINAUSKAS: In simple terms, it goes to the employment of 8.4 FTEs to operationalise the bill by implementing the supervision and management of offenders subject to court ordered home detention and by continuing to expand the use of the home detention program. A significant amount of that money, I am advised, also goes towards the engagement of NGOs to provide wraparound services to accompany home detention.

Mr VAN HOLST PELLEKAAN: But there are no extra monitors or GPS tracking? It is not going to rent or facilities or anything like that; it is purely wages, people and skills to oversee that?

The Hon. P. MALINAUSKAS: No. I am advised that a portion of that funding does go to the physical infrastructure that is required, the bracelets themselves for instance.

Mr VAN HOLST PELLEKAAN: I refer to page 147 of the main book that we have been looking at. What has been done to increase the successful completion of intensive bail supervision from 52 per cent 70 per cent? You will see there that the estimated result for intensive bail supervision for the year just finished is 52 but the target for the financial year we have just started is 70.

The Hon. P. MALINAUSKAS: Being a question that is partly operational in nature, I might ask the chief executive to answer that.

Mr BROWN: Thank you, minister. The intensive bail supervision program is very closely supervised by our staff. A 52 per cent successful completion rate also highlights and reflects how vigilant the department is in ensuring that offenders comply with the conditions of their bail agreement, including activities like drug and alcohol testing. The successful completions are recorded very conservatively, such that the individual order may have to still be completed to the court's satisfaction but it is only counted as successful if they do not include any breach reports being submitted for the offender subject to that bail supervision.

If we submit a breach report for an offender subject to intensive bail supervision, it does not automatically result in that offender necessarily being returned to custody by the court, but we would still count that as a breach. In terms of improving the performance of the order, our focus is on ensuring that offenders comply with the conditions of their bail agreement, and the rigorous supervision that is in place means that we are bringing technical breaches of that order to the attention of the court through SAPOL on a regular basis.

Mr VAN HOLST PELLEKAAN: Referring to page 146, what is the total operating cost of the Bail Accommodation Support Program in 2016-17—that is the dot point right at the bottom of page 146—and is any capital investment included in that program?

The Hon. P. MALINAUSKAS: My advice is that there will be a cost associated with the operation of the Bail Accommodation Support Program, and that would be in the order of \$1.9 million per annum. However, we do not expect the program to be fully operational until next financial year. In respect of the current financial year, it appears as though the program is starting to ramp up and come into effect in the last quarter of this financial year. In terms of a specific figure for this financial year in respect to that last quarter, I am happy to take it on notice if you like.

Mr VAN HOLST PELLEKAAN: How many offenders are expected to participate in this program?

The Hon. P. MALINAUSKAS: I am advised it is a 30-bed facility.

The CHAIR: The time having elapsed for questions in this area, I declare the examination of the proposed payments completed.

DEPARTMENT OF TREASURY AND FINANCE, \$55,641,000
ADMINISTERED ITEMS FOR THE DEPARTMENT OF TREASURY AND FINANCE,
\$1,582,470,000

Membership:

Dr McFetridge substituted for Mr van Holst Pellekaan.

Minister:

Hon. P. Malinauskas, Minister for Police, Minister for Correctional Services, Minister for Emergency Services, Minister for Road Safety.

Departmental Advisers:

Mr G. Nettleton, Chief Officer, South Australian Country Fire Service.

Mr G. Crossman, Chief Officer, South Australian Metropolitan Fire Service.

Mr C. Beattie, Chief Officer, South Australian State Emergency Service.

Mr M. Jackman, Chief Executive, South Australian Fire and Emergency Services Commission.

Ms I. Calabrese, Manager, Financial Services, South Australian Fire and Emergency Services Commission.

Ms J. Best, Business Manager, State Emergency Service, South Australian Fire and Emergency Services Commission.

Ms L. Lew, Business Manager, Metropolitan Fire Service, South Australian Fire and Emergency Services Commission.

Mr J. Schirmer, Business Manager, South Australian Country Fire Service.

Mr L. Golding, Chief of Staff.

The CHAIR: I declare the proposed payments open for examination and refer members to the Agency Statements in Volume 4. I understand there is a changeover in advisers. Member for Davenport, would you like to read in your omnibus questions now while there is a changeover to save us a bit of time? Does that work for you?

Mr DULUK: Yes, Chair. The questions are:

1. Will the minister provide a detailed breakdown of expenditure on consultants and contractors above \$10,000 in 2015-16 for all departments and agencies reporting to the minister, listing the name of the consultant, contractor or service supplier, cost, work undertaken and method of appointment?

2. In financial year 2015-16 for all departments and agencies reporting to the minister, what underspending on projects and programs (1) was and (2) was not approved by cabinet for carryover expenditure in 2016-17?

3. For each department and agency reporting to the minister, please provide a breakdown of attraction, retention and performance allowances, as well as non-salary benefits, paid to public servants and contractors in the years 2014-15 and 2015-16.

4. For each year of the forward estimates, please provide the name and budget of all grant programs administered by all departments and agencies reporting to the minister, and for 2015-16 provide a breakdown of expenditure on all grants administered by all departments and agencies reporting to the minister, listing the name of the grant recipient, the amount of the grant, the purpose of the grant and whether the grant was subject to a grant agreement as required by Treasurer's Instruction 15.

5. For each year of the forward estimates, please provide the corporate overhead costs allocated to each individual program and subprogram administered by or on behalf of all departments and agencies reporting to the minister.

6. For each department and agency reporting to the minister, could you detail:

- (a) How much was spent on targeted voluntary separation packages in 2015-16?
- (b) Which department funded these TVSPs?
- (c) What number of TVSPs was funded?
- (d) What is the budget for targeted voluntary separation packages for financial years included in the forward estimates (by year), and how these packages are to be funded?

7. What is the title and total employment cost of each individual staff member in the minister's office as at 30 June 2016, including all departmental employees seconded to ministerial offices and ministerial liaison officers?

The CHAIR: I call on the minister to introduce his advisers and then make his opening statement should he have one.

The Hon. P. MALINAUSKAS: Thank you, Chair. On my right is Mr Greg Nettleton, Chief Officer of the CFS. Behind me on my right is Chief Officer of the SES, Mr Chris Beattie. Sitting next to him is Chief Officer of the MFS, Mr Greg Crossman. On my left is Mr Joel Schirmer from the CFS.

Next to Mr Crossman is Mr Liam Golding. Directly behind Mr Crossman is Mr Malcolm Jackman, CEO of SAFECOM.

Let me just start by putting on the record an acknowledgment for the outstanding work of our emergency services sector. I think it is fair to say that most people in our state share this sentiment, and I have to say that since becoming Minister for Emergency Services, this sincere appreciation has been both reinforced and strengthened. We only have to look back to the Pinery fire event of late last year to realise how fortunate we are as a state to be able to rely on the professional, highly skilled and coordinated efforts of our emergency services volunteers in the CFS and SES, as well as paid professionals from the MFS and the support received from across government.

More recently, I was also heartened to see our sector performing exceptionally, working shoulder to shoulder through thousands of callouts across a couple of particularly windy, wet and extreme weather events recently. I would also like to recognise the valuable ongoing support SAFECOM provides to our emergency services agencies, enabling and allowing them to focus their efforts on the front line. The important work of Surf Life Saving SA and our Volunteer Marine Rescue unit should also not be forgotten for the significant contribution they make to the safety of South Australians along our coastlines.

I believe it is particularly important to reflect upon the fact that our emergency services sector is funded both solely and entirely by the emergency services levy. While every household makes a contribution to the ESL, thankfully, very few will count themselves as beneficiaries of the services provided. In this sense, it is recognised that although many households will never call upon our emergency services sector, in the unfortunate event that they need to, they will be blind to the badge on the truck or the colour of the uniform of those who come to help. They can safely and reasonably expect the nearest, fastest and most appropriate response at their doorstep.

As part of this budget, it was my pleasure to announce, with the Treasurer, a range of additional measures to both support and strengthen our sector. Some of these measures include:

- new trucks for the CFS, as well as an acceleration of the retrofit of vital safety systems for both the CFS and MFS trucks;
- increased training and support for our emergency services volunteers;
- enhanced flood response and incident management for the SES;
- additional funds for SAFECOM to provide functional support to the emergency services agencies;
- funds for the continuation of the Zone Emergency Risk Management System project; and
- specialised training for operators of the government radio network.

Another recent highlight was delivering \$470,000 in grants to individuals and organisations in rural, regional and remote areas for resources and upgraded equipment used in front-line emergency response as part of this year's round of Regional Capability Community Fund grants.

I consider myself fortunate that the sector is in the very capable hands of our chief officers and the CE of SAFECOM as they work collaboratively to ensure that principles of public value are reinforced, alongside a strong commitment to continuous improvement. Finally, I look forward to continuing to work together with the sector to build upon the successes we have achieved in the modernisation, harmonisation and innovation of the sector as a whole.

Dr McFETRIDGE: Obviously, there is not a member in this place who does not value our emergency services. As I have said many times, when people are running away from the emergency, our emergency services workers are running into those emergencies and doing a great job for us. Particularly, the wild and wet weather we have had lately has shown the efforts they will go to to make sure we are kept safe.

Unfortunately, despite their best efforts, sometimes there are tragic events. That does take a toll on our emergency service workers and, certainly, our hearts go out to them because they do

their very best. This is where this government, I think, has done itself a disservice by undervaluing our emergency service workers, and you will find out in the next 47 minutes why that is so.

Minister, you said in your opening statement 'closest, fastest and most appropriate resource'. I will come back to that a little bit later in my questioning. Chief Nettleton is in the chair so, in that case, I might as well start with the CFS. I refer to Budget Paper 3, pages 18 and 20. In relation to the \$9.4 million to retrofit safety systems to existing fire trucks, can you tell the committee when that retrofitting will start? How many trucks will be retrofitted? Will it include such things as halo water sprays, in-cab breathing systems and in-cab pump starting?

The CHAIR: Something easy to start with.

The Hon. P. MALINAUSKAS: I am advised that over the next three years, a total of 195 trucks will be retrofitted. In respect of the specific technologies to which you refer, cabin deluge water sprays will be included, along with in-cabin breathing systems and cabin window curtains. They reflect, as I understand it, best practice when it comes to burn-over technology. Having the opportunity to talk to CFS volunteers, as I know you do regularly as well, this was something that I certainly identified as a priority since becoming minister, particularly in light of the Pinery fire.

The fact that burn-overs did occur in that particular instance was identified as a priority by the government. We were very glad that, through the ESL, we were able to fund this program, which I think will go a long way to enhancing the safety of those people serving in the CFS on the front line.

Dr McFETRIDGE: One hundred and ninety-five trucks. How many crews will still be going out on old, open back two fours and three fours trucks to fires, where all they have is a fire blanket to protect them and a sideline, if they are lucky?

The Hon. P. MALINAUSKAS: I think the best way to answer that question is to share the advice that I have received with you, and that is that, consistent with our decision, by the end of the 2018-19 year, through the additional funds that this state Labor government has provided, all CFS trucks will be fitted with the burn-over technology.

Dr McFETRIDGE: But is that just a fire blanket, or is it a halo system? Is it in-cab breathing? What is it? It is a big difference.

The Hon. P. MALINAUSKAS: I am advised that wherever it is practically possible, the installation will include the full system. There might be circumstances where that is not logistically possible, but it is certainly the objective of the government and the CFS, I have been advised, that where reasonable and practically possible the systems will be the burn-over technology systems to which I referred previously.

Dr McFETRIDGE: I think it is going to be too little. Let's hope it is not too late. Six years ago, a bloke you know quite well, Mike Rann—I think you are the sixth minister I have had to deal with in emergency services—and Michael Wright, the then minister for emergency services, made an announcement on 7 February 2010:

The State Government will introduce Automatic Vehicle Location (AVL) on emergency service vehicles when the State's new Computer Aided Dispatch System is fully operational.

I understand SACAD is still being upgraded to different versions, but when will the AVL—which are not audiovisual links as you said (it may be in Corrections) but an automatic vehicle location system—be fitted to our fire appliances and to SES vehicles? There was a funding program put out for people to develop this, but I understand stage 2 of that funding program is being cut.

The Hon. P. MALINAUSKAS: You are right, this is a Labor government that has been in office for a substantial period of time, so it would not be unusual, I would have thought, to have some changeover in the ministry, but a point nevertheless noted.

I am aware of the government's commitment and remarks on AVL, and it is certainly something that I have been making inquiries about in the time that I have been minister. I am advised that, and I have familiarised myself with this project, in late 2014, the SES collaborated with the Department of State Development on a project to develop resource tracking and checking capability, including AVL, and this was done through the Small Business Innovation Research challenge.

I understand three proposals were received in late June this year to develop and deploy an electronic resource responder tracking and checking system for the sector and to sustain and support it over five years. These proposals are in the process of being evaluated by the sector and I have to say that, as minister, I very much look forward to what the sector comes back to me with regarding a more detailed proposal or proposition around the capacity for the technology to be introduced and any sort of cost that would be associated with it.

It might be worth pointing out that we are, as I understand it, a national leader in this respect. There is only one other very small jurisdiction in the ACT, as I understand it, that has AVL technology in their equivalent of CFS trucks and, of course, they are operating in an entirely different landscape—a very small geographical environment with access to different types of technologies as a consequence.

In that respect, I am advised that South Australia at the moment is very much at the cutting edge in the pursuit of this technology and a national leader, and that is something that we are obviously pretty proud of. There remains a lot of work to be continued to be undertaken, but work is in progress and I am looking forward to hearing back from my relevant agencies once that evaluation of those proposals is complete.

Dr McFETRIDGE: I have visited the five groups that were given the initial grants. I do not want to name them, but they are certainly very disappointed that the second round of grants is not available to develop what I understand is world-leading technology for AVL for South Australia, so much so that people overseas are looking at what they have done already. I think if we could get it going, it would be really good for those particular groups but, more particularly, for our hardworking emergency services workers.

The Hon. P. MALINAUSKAS: Since you have made that remark, I might just respond. I have to say that I share the interest. Ultimately, the objective of government when it comes to AVL, going back to Premier Rann's remarks, and where AVL can be of particular use is in respect of the Country Fire Service. They have a particularly unique need or purpose for which AVL would be quite helpful which is why, as minister, I have been making inquiries to ensure that we actively pursue the development of this technology to see if there is not an option available to the government for its provision in a South Australian context.

Dr McFETRIDGE: I refer to Budget Paper 3, page 18, '\$16.2 million to improve the state's capacity to respond to bushfire threats.' Minister, can you tell the committee—

The Hon. P. MALINAUSKAS: Sorry, what page was it?

Dr McFETRIDGE: It was page 18 of Budget Paper 3. The topic is, '\$16.2 million to improve the state's capacity to respond to bushfire threats.' Can you tell the committee if that is for more fire trucks and, if so, how many? More importantly, will those fire trucks be built in South Australia? I visited Tasmania not long ago and the Tasmania Fire Service are building fire trucks down there, yet we do not seem to be able to produce them here, other than some of those at Moore Engineering.

The Hon. P. MALINAUSKAS: I am advised that, not surprisingly, the CFS follows State Procurement Board requirements when selecting suppliers of fire trucks. Current CFS fire trucks are constructed in New Zealand and Murray Bridge, with components sourced from a number of suppliers. The CFS will be undertaking a procurement process for new contracts commencing in 2017-18, and I understand and I am advised that routine maintenance of CFS fire trucks is performed by local service providers across South Australia.

Dr McFETRIDGE: Minister, it really amazes me that if the Tasmanians can do the wonderful work that they are, why we cannot. We can build ships and submarines here, but we cannot build fire trucks which then could be exported to the rest of the world as well. The bottom line is that we have a company in South Australia buying the trucks direct in Japan, shipping them to New Zealand, where they are put together by Fraser Engineering, and I understand that Fraser Engineering would like to come to South Australia.

The member for Wright and I have had this discussion, and I am still on about it because I think we should be building fire trucks in South Australia. They would like to come here so perhaps that is something you could work on. With building fire trucks, let's go to the other end of the scale

and the very valuable farm firefighting units. How many registered farm firefighting units do we have in South Australia and what is the government doing to assist the operators of those in covering their costs with the emergency services levy?

I have asked the Treasurer about taking that off and he is not letting that happen. I see recently that a group in the Mid North got together and provided a set of PPC to the owners of the fire trucks. What is the government doing to assist farm firefighting units because without them we would be stuck in a lot of cases.

The Hon. P. MALINAUSKAS: Firstly, I am not aware of and I am advised that there is no specific registration in terms of numbers, but what I can obviously refer to is the substantial effort and investment that this state government has made in regard to allowing farmers and community members alike to be able to invest in things like farm firefighting units. The best and I think the key program that the government puts in place to facilitate that is the Regional Capability Community Fund.

The Regional Capability Community Fund (of which I would have thought you would be aware) is a \$2 million fund being administered over four years by SAFECOM to building community capability to respond safely to emergency incidents such as rural fire, flood and extreme weather. In 2016, grants were offered on a cost-share basis; 550 applicants were submitted and 273 applicants will receive up to \$2,500 towards the purchase of approved items. Of course, such approved items could include farm firefighting units.

I have had the pleasure to talk with quite a number of people who have been associated with this program and I know that the grants, by and large, are very well received, and I think that is evidenced by the fact that we have such a large number of applications for the grants. I agree with your sentiments that farm firefighting units provide important additional capability to those people who are living in our region, farmers in particular, hence the government's commitment to them through a substantial investment along the lines to which I have just referred.

Dr McFETRIDGE: I refer to Budget Paper 4, Volume 2, page 63, Investing expenditure summary, Annual programs, Capital works, vehicles and equipment. Is the current trial of having MFS appliances at Mount Barker complete? What are the results of that trial, and is Mount Barker CFS now receiving a CFS appliance? If so, when and what type?

The Hon. P. MALINAUSKAS: I have been advised and have been keeping abreast of this issue because it presents a significant challenge and a potential model going forward, but the trial is complete and the assessment of that trial remains ongoing. I certainly look forward to hearing the outcomes of it which will form decision-making going forward. I think you had a more specific question around a CFS truck. Is that right, sorry?

Dr McFETRIDGE: Yes, there were two MFS pumpers and there is one now I think from the reserve fleet, which is another issue I will ask about in the MFS section. Can we have some details about the new pumper they are getting and when they are getting it?

The Hon. P. MALINAUSKAS: Is that the MFS?

Dr McFETRIDGE: It is a CFS-supplied pumper, I understand.

The Hon. P. MALINAUSKAS: There is still work being undertaken, I am advised, regarding that particular pumper, but it will be a CFS truck. It will largely reflect the type of pumper that is used by the MFS, but there is still work being undertaken on the development of the specifications before we will be calling for people to put up their hand to tender for the pump.

Dr McFETRIDGE: Why do we not just buy the same sort of equipment right across the services? I think the most obvious, glowing example of where there has not been coordination was breathing apparatus, where we spent millions of dollars to get two different types of breathing apparatus—completely incompatible, from my understanding, between MFS and CFS—and now we have different trucks and different pumps. I think we really need to look at this, and perhaps later Mr Jackman might talk to us about harmonisation, integration and modernisation.

We will move on in that case. The Mount Barker guys will have to wait. I refer to Budget Paper 4, Volume 2, page 62, net cost of services summary. How many new CFS stations will

be built this financial year, where are they and what are the issues holding up the new build, such as that at Rockleigh?

The Hon. P. MALINAUSKAS: I will go into a bit of detail here and deal with both the CFS and SES projects, if you are comfortable with that, and specify which are which. In the 2015-16 financial year, there are a number of things that were completed—namely, the Eastern suburbs SES, Coonalpyn CFS, Corny Point CFS—and also in the same financial year a number of projects have begun construction, including Salisbury SES, Sturt SES, Mount Gambier SES, Gawler River CFS, Farrell Flat CFS. For this financial year, the targets that are in place, ready either to be completed or ready for construction to commence, include the Port Pirie SES, Delamere CFS, Port Victoria CFS, Mundulla CFS, Lock CFS, Stuart Range CFS and Terowie CFS.

Dr McFETRIDGE: Why is it taking so long to provide a second set of rural PPC (personal protective clothing) to CFS volunteers? The schedule is out to 2018-19 for the last 6,000 sets; some of the first lot will be worn out by then. You might want to answer, too, why we lobbied hard to build submarines and ships here, yet poor little Remlap, up at Palmer, who used to make all their uniforms, has been duded and now they are being made by multinational Stewart and Heaton, and I think they get most of the stuff from China.

Members interjecting:

The CHAIR: Order on both sides, thank you!

The Hon. P. MALINAUSKAS: I am advised that a second set of protective clothing for CFS volunteer firefighters was announced in last year's budget, at \$9 million over four years. The rollout of a second set of structural protective clothing commenced in June and will be completed in 2018-19. The rollout of the second set of rural protective clothing will commence in 2016, with the bulk of the rollout occurring in 2017-18 and 2018-19.

Dr McFETRIDGE: Going back to the CFS stations that will be upgraded this financial year, how many CFS stations do not have proper toilets or change rooms?

The Hon. P. MALINAUSKAS: A question like that, which is specific in nature, and particularly in the context of the large number of CFS stations and their varying capacities and sizes and locations, I am happy to take on notice and, if the information is available, to share it with you accordingly.

Dr McFETRIDGE: I am just watching the time, so we might make this the last couple of questions on the CFS and then go across to the MFS. I refer to Budget Paper 4, Volume 2, page 62, net cost of services summary. What is the cost of moving the air operations from Woodside to Brukunga, and why is it happening?

The Hon. P. MALINAUSKAS: That is a question that is somewhat operational in nature, so I might invite Mr Nettleton, Chief Officer of the CFS, to answer it for you.

Mr NETTLETON: The aviation contract we have is with Aerotech, who provide the fixed-wing water bombers and two observation helicopters at Woodside. They have elected to move their notional operating base from a leased airstrip at Woodside, which is shared by other operators, to an airstrip they have built on their property. The cost of the relocation of the service from Woodside to the strip just out of Brukunga is borne by the contractor. The only interest we have there is a small transportable hut our crews use while they are on stand-by at the base, but the bulk of the costs associated with that airstrip rests with the contractor.

Dr McFETRIDGE: Thank you, Chief Nettleton. On the same budget reference, minister, can you tell the committee if the CFS has entered into an MOU with the RAAF to use the Edinburgh air base as a site for refilling large air tankers? Who will be trained to fill the air tankers, and has the minister had any discussions with the federal government regarding the RAAF C-130 Hercules being used to act as water bombers, as happened in the Ash Wednesday fires in Victoria? I pass a photograph of that to you.

The CHAIR: Is that of a plane? I do not know that we need it.

The Hon. P. MALINAUSKAS: I thank the member for Morphett for his question. Again, I put this in the category of being somewhat operational in nature, so I might invite Chief Officer Nettleton to provide you with a response.

Mr NETTLETON: The National Aerial Firefighting Centre has made arrangements with defence for access to a number of defence bases around Australia: RAAF Base Pearce, RAAF Base Edinburgh, RAAF Base Richmond and, I understand, RAAF Base Sale, for the use of RAAF facilities for the operation of the large air tanker, which is the C-130 referred to, and for the DC-10 New South Wales contracted last summer.

In South Australia, the agreement is with RAAF Base Edinburgh, and we are able to operate those aircraft out of Edinburgh, that is again access, and they have done over the last two seasons. The RJ-85 that came out of Victoria and the C-130 that came out of Victoria for Sampson Flat operated out of RAAF Base Edinburgh for a number of days before it returned to their home state. For the Pinery fire, of the two aircraft that came across from New South Wales, one of those refuelled at RAAF Edinburgh before returning to New South Wales.

As far as the refilling of those aircraft is concerned, we do not have the capability in South Australia and neither do some other states. The capability to refill those aircraft can be achieved, though, by the hiring of a piece of equipment that is based in Albury. It is based in Albury, so it concerns both New South Wales, Victoria and South Australia. It takes about 12 hours to get across here.

Dr McFETRIDGE: That was a civilian RAAF C-130. The photograph I can show the committee is of a RAAF C-130, and I understand they had 10 of them that could be fitted out with modules and dump 15,000 litres at a time. Perhaps that is something we should keep working on. Thank you, minister, and I will move on to the MFS if I can.

Departmental Advisers:

Mr G. Crossman, Chief Officer, South Australian Metropolitan Fire Service.

Mr G. Nettleton, Chief Officer, South Australian Country Fire Service.

Mr C. Beattie, Chief Officer, South Australian State Emergency Service.

Mr M. Jackman, Chief Executive, South Australian Fire and Emergency Services Commission.

Ms I. Calabrese, Manager, Financial Services, South Australian Fire and Emergency Services Commission.

Mr J. Schirmer, Business Manager, South Australian Country Fire Service.

Ms L. Lew, Business Manager, Metropolitan Fire Service, South Australian Fire and Emergency Services Commission.

Ms J. Best, Business Manager, State Emergency Service, South Australian Fire and Emergency Services Commission.

Mr L. Golding, Chief of Staff.

The CHAIR: Would you like to introduce your advisers?

The Hon. P. MALINAUSKAS: To my right, we have Chief Officer Greg Grossman, from the MFS, and also Lisa Lew from the MFS.

Dr McFETRIDGE: I refer to Budget Paper 4, Volume 2, page 79, program net costs of services summary. The minister might be an estimates virgin, but he has well and truly made his mark as a union organiser representing the workers. Minister, does the 2016-17 budget allow for changes to workers compensation to bring firefighters in line with SAPOL officers; if not, why not?

The Hon. P. MALINAUSKAS: I do have a degree of familiarity with these negotiations, having played a significant role in the development of the provisions regarding SAPOL. Having been party to that, this is something that I remain very much interested in. I think the government has stated publicly that it is of the view that emergency services workers, such as those within the MFS, should be assessed to determine whether or not they should get a similar entitlement to those people within SAPOL, notwithstanding the fact that they are operationally different organisations.

As those negotiations remain ongoing—and I am advised that they are ongoing with the Deputy Premier as the responsible minister for workers' rehabilitation—with the interested parties, including the UFU, and they have not completed, there is not a specific figure that has been attached to it.

Dr McFETRIDGE: I am not sure whether it was one of the UFU reps, but I think they were saying that it was unfair that SAPOL could get this offer and that MFS firefighters were second-class employees. From what you have said, minister, you are making sure that the MFS, CFS and SES, who have the same presumptive cover for cancer, and so we would assume the same with the rest of WorkCover, are going to get this? I look forward, as I imagine they do, to your positive response.

The Hon. P. MALINAUSKAS: Can I just respond to that. I should make clear that the responsible minister in this particular instance is—

Dr McFETRIDGE: You would be going into bat, though, wouldn't you, surely?

The CHAIR: How about we just wait for the answer before we start the next question?

The Hon. P. MALINAUSKAS: The responsible minister is the Deputy Premier, but naturally, being the Minister for Emergency Services and, as I said, having played a rather significant role in the development of the provisions regarding SAPOL, that is something I have an ongoing interest in. There is a regular dialogue between my office and the Deputy Premier's regarding this subject. I am advised that he is in active negotiations with our emergency services on this subject. I think all parties are looking forward to a resolution of this issue in due course.

The government has stated publicly that it is of the mind and of the view to actively contemplate similar arrangements being put in place for our emergency services workers, paid and unpaid, as is the case with SAPOL, notwithstanding the fact that, naturally, operational differences need to be taken into account.

Dr McFETRIDGE: 'Of the mind to contemplate this', can you just put on the record: are you lobbying on behalf of the MFS, CFS and SES to have that same—

The Hon. P. MALINAUSKAS: I can assure the member for Morphett that the respective VAs and employer-employee associations—in the MFS context, that is the UFU—is actively lobbying on behalf of their members and of course—

Dr McFETRIDGE: You are the minister.

The CHAIR: Order, member for Morphett!

Dr McFETRIDGE: You are the minister.

The CHAIR: Order, member for Morphett!

The Hon. P. MALINAUSKAS: I am very conscious of the fact that I am the minister, but thank you. As I said earlier, the government has publicly stated a commitment to assess the application of a similar arrangement with SAPOL to other relevant organisations. Those negotiations are ongoing; in fact, I understand that they are actively underway. I think all parties would reasonably be looking forward to those being concluded in due course.

Dr McFETRIDGE: On the same reference, minister, do you agree with the United Firefighters Union secretary, Greg Northcott, that capping wage rises to 1.5 per cent is, and this is a quote, 'unfair, because the budgeted rise in government charges and taxes exceeded the wage cap'? Do you agree with that statement?

The Hon. P. MALINAUSKAS: It will not surprise you, Dr McFetridge, that I support government policy, and the government policy is to cap wage increases to 1.5 per cent.

Dr McFETRIDGE: So there is a 1.5 per cent cap on wages for MFS firefighters?

The Hon. P. MALINAUSKAS: Questions regarding wages policy are best directed to the responsible minister, the Minister for the Public Sector, or indeed the Treasurer. Like I said, I do not think it would come as much of a shock that I support government policy.

Dr McFETRIDGE: Is the MFS EB being discussed now and being settled soon?

The Hon. P. MALINAUSKAS: Questions regarding EB negotiations I think are best addressed to the Minister for the Public Sector.

Dr McFETRIDGE: But you would know.

The CHAIR: Order, member for Morphet!

The Hon. P. MALINAUSKAS: But I am under—

The Hon. J.M. Rankine interjecting:

Dr McFETRIDGE: He'd know, though. Come on, he's the minister!

The CHAIR: Order!

Members interjecting:

The CHAIR: I just need to remind you all that my role here is to prevent quarrels, and I am seeing quarrels.

Dr McFETRIDGE: Love is in the air.

The CHAIR: Order!

Members interjecting:

The CHAIR: I am trying to give you the floor, minister.

The Hon. P. MALINAUSKAS: Consistent with my recollection, I have just had it confirmed that the MFS enterprise agreement expires in the middle of next year, at the end of the next financial year. I think all parties expect negotiations to start in due course sometime this year, but, again, the timing of those negotiations is ultimately up to the relevant parties, and the responsible minister in this particular instance is the Minister for the Public Sector.

Dr McFETRIDGE: So, Northcott will be nailing 1.5 per cent.

The CHAIR: Oh, member for Morphet!

Dr McFETRIDGE: Minister, same—

The Hon. P. MALINAUSKAS: What I would say is, having—

The CHAIR: Order!

Dr McFETRIDGE: —budget reference, and this is the only reference that I will make to the article in the media today about alleged bullying in the MFS. I will leave others to draw their own conclusions about that. Does the MFS use section 56 of the Public Sector Act to remove employees who are deemed unfit for service?

The Hon. J.M. Rankine interjecting:

The CHAIR: Yes, what line are you referring to?

Dr McFETRIDGE: The omnibus line, program net cost of services, Budget Paper 4, Volume 2, page 79.

The CHAIR: His comment at the beginning is the bit that has thrown everybody—a bit of carry on.

Mr Goldsworthy interjecting:

The CHAIR: Order, member for Kavel!

Members interjecting:

The CHAIR: I am going to have to stand up, which is going to make me pretty aggravated because I am really comfortable at the moment. You are all going to waste time. Member for Morphett, you have a vested interest in this not happening. You are a seasoned operator, and I should not have to remind you.

Dr McFETRIDGE: My humble apologies, ma'am.

The CHAIR: I think you are misleading the house, you're not humble at all.

Dr McFETRIDGE: Trust me.

The CHAIR: That is right, you are a humble backbencher—no, you are not.

The Hon. J.M. RANKINE: A humble veterinarian.

Dr McFETRIDGE: A humble veterinarian, that's me, just doing my darnedest here, waiting with bated breath.

The CHAIR: The minister is actually waiting very patiently for you all to be quiet.

Dr McFETRIDGE: Section 56.

The Hon. P. MALINAUSKAS: The story in today's paper I think is worthy of your questions. I have received questions from the Hon. Mr Brokenshire in the other place regarding this particular issue in question time. I have to say that I have sought to satisfy myself that there is not a culture of bullying within the MFS, and I am certainly comfortable on the advice that I have received thus far that that is not the case.

Regarding options, clearly the MFS is subject to other public sector protocols when it comes to the way it disciplines staff. I am advised that there is no age time limit that applies to MFS officers. Of course, when it comes to workers compensation generally, there is a whole range of avenues that are available to employees where they believe they have not been treated fairly under the law or are not getting the entitlements to which they are entitled under the Return to Work Act.

There are avenues through the South Australian Employment Tribunal, which has assumed the responsibilities of the former workers compensation tribunal, and, of course, the Ombudsman has assumed the responsibilities of the WorkCover ombudsman, so I would reasonably expect that the MFS complies with the law in respect to every section.

Dr McFETRIDGE: They do use section 56 of the Public Sector Act to move people on?

The Hon. P. MALINAUSKAS: I am happy to take that question on notice. I am advised by chief Crossman that he is happy to take that question on notice, just confirm section 56 and come back with a response in due course. Is there a specific inference or a particular issue you are trying to establish by asking that particular question? When you say 'moving people on', are you talking about redemption—

Dr McFETRIDGE: I am happy to take the answer on notice, and there will be follow-up questions perhaps some other time, but that is the information I have been given. I would like to quickly move on in the time we have left to Budget Paper 4, Volume 2, page 85, under Performance indicators, maintenance of fleet reserve capability. Two spare appliances were placed at Mount Barker CFS at the direction of the former minister. I know the former minister disputes that. I did not bring the letter with me. I should have brought the letter with me. The question, minister, is: what is the future of the Mount Barker CFS brigade? Is the MFS planning to have a full-time station there or a retained station? If so, when?

The Hon. P. MALINAUSKAS: As mentioned earlier regarding the Mount Barker program, there was a substantial trial undertaken, as you are well aware. That trial concluded only a few weeks ago. We wait upon the outcomes of that trial. Regarding the MFS more specifically, of course the MFS are actively considering the outcome of that trial and what its plans will be in the long term.

As it stands right now, the MFS has not made any strategic acquisition of land regarding a permanent station in the future but, of course, in the emergency services sector, this is an issue that

is top of mind and actively being looked at, and the MFS is continuously assessing its risk and opportunities that may present themselves for such a land acquisition should it be appropriate to do so.

Dr McFETRIDGE: On the same topic, have CFS members at Mount Barker been told they are very unlikely to transition into the MFS either as retained or full-time firefighters?

The Hon. P. MALINAUSKAS: I am advised that the MFS has not made that communication to CFS volunteers.

Dr McFETRIDGE: Well, that is what a lot of them understand.

The CHAIR: He has answered the question.

Dr McFETRIDGE: I am just helping him out.

The CHAIR: It is a comment.

The Hon. P. MALINAUSKAS: Very, very grateful.

The Hon. J.M. Rankine interjecting:

The CHAIR: Order! Is there another question, member for Morphett?

Dr McFETRIDGE: There is, very quickly. This is the last question; otherwise, we will run out of time. The new Salisbury command station is a wonderful facility, and my question is one for the member for Fisher perhaps: when are the southern suburbs getting a similar southern command station?

The Hon. P. MALINAUSKAS: Given this is a question that is somewhat operational in nature in terms of existing allocation of resources and need, I might invite MFS chief Crossman to answer that.

Mr CROSSMAN: In the southern part of Adelaide, we have a strategic asset interest in a location to replace the Christies Beach station asset, which is coming nearer to the end of its life, and that is going to give us an opportunity to develop a command station to suit the growth and growing needs of the southern district.

Dr McFETRIDGE: Christies Beach, not O'Halloran Hill?

Mr CROSSMAN: The Christies Beach station. The O'Halloran Hill station is still being looked at as a strategic landholding and a strategic asset holding, but the growth corridor down past Seaford is our interest, so we are looking at replacing the Christies Beach station to a station closer to Noarlunga.

Dr McFETRIDGE: My very last question on the MFS is about the Mawson Lakes station. When is that going to be opened, and where will it be located?

The Hon. P. MALINAUSKAS: Again, being a question that is somewhat operational in nature, I invite chief Crossman to answer.

Mr CROSSMAN: Mawson Lakes has been on the strategic horizon for the Metropolitan Fire Service for some time. It was looked at as an addition to the Salisbury complex, but because the Salisbury asset is in place and is now functioning, we are watching very closely the call rates and response times being provided from Salisbury station. There is a strategic understanding or a strategic impetus to look at the position of the Oakden station, so at this stage we are looking within a five-year operational time frame to come to a closer landing on the Mawson Lakes. At this stage, the call response times from the new Salisbury asset are providing us significant coverage.

Dr McFETRIDGE: I think we had better move on to the SES now in the few minutes that are left. I think Mr Jackman might get off lightly this afternoon.

The Hon. P. MALINAUSKAS: On my right, I have Mr Chris Beattie who is the chief officer of the SES, and on my left is Ms Julie Best, also from the SES.

Dr McFETRIDGE: Can I just say to all the chiefs, I have thoroughly enjoyed my relationship with them in the past and I just hope it continues. I refer to Budget Paper 4, Volume 2, page 118 on dot point 5 under Objective, stating:

deal with any emergency caused by flood or storm damage, or where there is no other body...

The SES has 1,650 volunteers—and I note that 425 of those are also in the CFS—and 50 paid staff, while the CFS has 13,899 volunteers and only 144 staff. The SES is 1 to 33, the CFS is 1 to 96, why is that so?

The Hon. P. MALINAUSKAS: I think it will not come as a surprise to those present that naturally whenever there is an organisation, there are critical needs that must be met to start up services are required. They are very different organisations in their nature and thus have different needs. The statistic that you refer to in terms of the idea of an FTE per volunteer, while it might seem like a logical question to ask, naturally there is a logical answer, and that is that they are very different needs. The SES obviously also takes undertakes different services that the CFS does not, including emergency management roles, planning and the like.

Dr McFETRIDGE: I refer to Budget Paper 4, Volume 2, page 122, SES performance and activity indicators. When people phone 132 500 for flood or storm assistance, who answers that call and how is the call processed?

The Hon. P. MALINAUSKAS: I just want to confirm that I was going to give the right answer. Those calls are taken by people in the communications centre. The communications centre is located within the MFS, staffed by MFS personnel. If you are interested in more operational detail as to how that works I am more than happy to invite Chief Beattie to answer it for you, if that would be of assistance.

Dr McFETRIDGE: I will perhaps ask my next question and then Chief Beattie might be the appropriate person to come in. My concern is that those calls answered by MFS comms operators, and some former CFS comms operators, then seem to disappear into a parallel universe and we are getting continual responses—and Chief Beattie will know about this because I have spoken to him about it many times, but back to your opening statement, minister, about closest, fastest, most appropriate response—where SES volunteers (God bless them, working so hard) are going past three or four CFS stations to do a job.

Even today at 15:45, a couple of hours ago now, there was a priority 2 (P2) tree down, tree blocking entire road, Shady Grove Road near Para Street. I know this road well because I have cut up trees on it with the Meadows CFS. That was a P2. At the same time Meadows CFS has turned out as a P1, same location, same caller, and then the poor sods down at SES had to call for more crew. They are so overworked, these guys. Closest, fastest, most appropriate, P1, P2—can we please sort it out because it is causing a real issue.

The Hon. P. MALINAUSKAS: Was there a question there?

Dr McFETRIDGE: Yes, there was. When is a P1 a P1? When is a P2 a P2? When do you stop stacking jobs? When do you stop SES volunteers going past from Strathalbyn CFS, past Macclesfield CFS, Meadows CFS, Kangarilla CFS, to cut up a tree on Cut Hill Road, Kangarilla?

The CHAIR: That is seven questions.

Dr McFETRIDGE: When they could have done the same thing. It is ridiculous. It is a ridiculous situation.

The CHAIR: Order! That is seven questions. I think they have the drift.

The Hon. P. MALINAUSKAS: Let me say from the outset that I think SES crews and CFS crews work incredibly hard in dealing with—

Dr McFETRIDGE: Absolutely, no doubt.

The Hon. P. MALINAUSKAS: —these issues. I know you share your support of them. I know some people are very quick to rush to judgement on this issue, and you raise a number of questions on a regular basis in various forums that draws attention from volunteers in various ways,

but the fastest, nearest, most appropriate response means a multitude of factors. They are not always simple answers. I have made a number of inquiries about this issue formally through SAFECOM.

A piece of work is currently being undertaken at an operational level to satisfy myself that the systems that are in place do represent the most efficient and appropriate means to be able to deal with these issues, particularly around the question of trees down. I have taken the time myself to meet with volunteers on this issue, including volunteers at Onkaparinga. Sometimes members refer to trucks driving past other stations and so forth and there may be very good operational reasons for that. I am more than happy to invite Chief Beattie to be able to answer a question that is operational in nature.

Members interjecting:

The CHAIR: Order! The answer is not finished.

Members interjecting:

The CHAIR: Order! Everybody, we are running out of time.

Dr McFETRIDGE: We are, you are right.

Members interjecting:

The CHAIR: Order! Do we have an answer from you, sir.

Mr BEATTIE: I think the minister has articulated the complexities of these issues well. The member for Morphett, Dr McFetridge, would be aware that the P1 and P2 response arrangements within the SES apply to a triaging system that is utilised within the MFS communications centre that services both the Country Fire Service and the State Emergency Service as well as the MFS. That triaging system, when a call is taken, seeks to identify whether a particular call is for a life-threat emergency and where it is not a fire-specific response they will allocate those tasks to response assets in accordance with agreed response plans between the three agencies.

A P1 incident is characterised by an immediate threat to life whereas a P2 or a priority 2 incident is characterised as a non-urgent response where request for assistance has been received from a member of the community.

An honourable member interjecting:

The CHAIR: Order!

Mr BEATTIE: During multi-incident events and large-scale flooding events, as you would well appreciate, the communications centre can be inundated with hundreds, if not thousands, of calls in a very short space of time. Under those circumstances, it is important that we do not place the community at risk by having automated responses that could potentially see thousands of trucks travelling in all manner of directions in an uncoordinated way to respond to multiple incidents as they are called in. For that very reason, jobs are stacked at a local level so that they can be dealt with by units and groups of SES, CFS and MFS responders as appropriate to the situation.

Dr McFetridge interjecting:

The CHAIR: Order!

The Hon. P. MALINAUSKAS: I am conscious that time has now expired, but I might just quickly add to that that the recent event that resulted in a lot of trees down due to almost unprecedented circumstances, or certainly very unusual circumstances, in terms of high winds, where the winds were coming from and the fact that we have incredibly wet soils that resulted in a large number of trees down, particularly in the Adelaide Hills region, I think elicited a phenomenal response and provided a great example of exactly how well the SES and CFS in particular—also the MFS—were coordinating with each other to ensure that volunteers from across both agencies were addressing a very large number of callouts, particularly around trees down in a very short period of time.

Of course, there will always be room for improvement. Every incident invites a review. The way SACAT operates is always subject to review and is constantly being improved, as I have already

mentioned. I can assure Dr McFetridge, who I know has a particular interest in this as a volunteer himself, that this is something that is constantly being worked on. I am undertaking every endeavour I can at a ministerial level to satisfy myself that the agencies are working well together and that the appropriate triaging processes are in place to ensure that we do have the fastest, nearest and most appropriate response.

I would encourage Dr McFetridge in his public remarks and tweeting and Facebooking to take into account the most appropriate response because sometimes that seems to have been neglected in some of the comments that have been made.

The CHAIR: The time for questions—

Dr McFETRIDGE: That is not true. Those gratuitous remarks—

The CHAIR: Order! The member for Morphett, the time for questions has expired. Everybody needs to be quiet. I declare the examination of proposed payments adjourned and referred to committee B. We need to have a change of personnel so that we can go on to our next section, please.

DEPARTMENT OF PLANNING, TRANSPORT AND INFRASTRUCTURE, \$806,024,000
ADMINISTERED ITEMS FOR THE DEPARTMENT OF PLANNING, TRANSPORT AND
INFRASTRUCTURE, \$9,719,000

Membership:

Mr Pisoni substituted for Mr Goldsworthy.

Minister:

Hon. P. Malinauskas, Minister for Police, Minister for Correctional Services, Minister for Emergency Services, Minister for Road Safety.

Departmental Advisers:

Cmmr G. Stevens, Commissioner of Police, South Australia Police.

Mr I. Hartmann, Manager, Financial Management Services, South Australia Police.

Mr B. Cagialis, Chief Finance Officer, Department of Planning, Transport and Infrastructure.

Mr P. Gelston, Chief Operating Officer, Department of Planning, Transport and Infrastructure.

Ms F. Cartwright, Acting Safety Policy Unit Manager, Strategic and Corporate Communications, Department of Planning, Transport and Infrastructure.

Mr L. Golding, Chief of Staff.

The CHAIR: We are going to open the portfolio, Planning, Transport and Infrastructure. We are going to have the Minister for Road Safety appear before us. I declare the proposed payments open for examination and refer members to the Agency Statements in Volume 3 of Budget Paper 4. I call upon the minister to make an opening statement if he wishes to do so, after he has introduced his advisers.

The Hon. P. MALINAUSKAS: Let me just start by introducing those people who are here. On my right we have again the Commissioner of Police, Mr Grant Stevens. On my left is Fiona Cartwright, who is the manager for Safety Strategy, Safety and Policy Programs from DPTI. On her left is Mr Paul Gelston, the Chief Operating Officer at DPTI. Behind me on my left I have Mr Bill Cagialis, the chief finance officer of DPTI, and on his right is Mr Ian Hartmann, who is the manager

of Financial Management Services at SAPOL. Again, on the far left behind me is Mr Liam Golding, who is my chief of staff.

The CHAIR: Do you have an opening statement?

The Hon. P. MALINAUSKAS: South Australia's road safety strategy 2020, Towards Zero Together, has set a target to reduce road fatalities and serious injuries by at least 30 per cent by 2020. South Australia has achieved substantial reductions in the fatality rate over the last decade from 7.5 fatalities per 100,000 population in 2006 to a rate of six in 2015.

In 2015, 102 people were killed in road crashes on South Australian roads. This is six less than the 108 fatalities recorded in 2014, but is 22 fatalities more than South Australia's road safety target of less than 80 fatalities by 2020. The main decrease in fatalities was seen in rural areas, which were nine less in 2015 compared to 2014. A further 759 people incurred serious injuries as a result of road crashes on South Australian roads in 2015, an increase from the 711 serious injuries recorded in 2014.

In the last four years (2012-15), the number of serious injuries has remained below South Australia's target of less than 800 serious injuries by 2020. A large number of casualty crashes continue to occur at intersections in both urban and rural areas and single vehicle crashes, such as a vehicle rolling over or leaving the road and hitting trees, still account for the majority of fatal crashes in rural areas. But all these numbers remain too high, as a single fatality or serious injury takes an incredible toll on families and whole communities.

In 2016-17, the Community Road Safety Fund will provide \$84.14 million to reduce fatalities and serious injuries on our roads. This will include \$32.85 million of projects under the asset improvement program to prevent or mitigate crashes and improve safety for all road users. Two-thirds of the asset improvement projects funded by the Community Road Safety Fund will improve safety on rural roads.

Shoulder sealing and audio tactile line marking will continue on rural roads, with \$10 million allocated in 2016-17 and \$40 million to be spent over the four-year period 2015-16 to 2018-19. Works to improve safety for motorcyclists in the outer metropolitan area will continue, with \$400,000 allocated in 2016-17. Other infrastructure works include safety improvements at rail level crossings and safety improvements at road junctions and sections where there has been a history of casualty crashes.

Working with and alongside the community to engage in road safety improvements is vital. An example of this is the Residents Win program, which provides communities with direct access to funding (\$500,000 a year over four years), enabling them to be involved in creating people friendly streets and safer roads. This program has received more than 150 expressions of interest and funded a diverse range of projects in metropolitan Adelaide and regional South Australia.

On the Right Track Remote, a driver licensing program for Aboriginal people in the APY and Maralinga lands continues to deliver positive outcomes, with almost 40 per cent of age-eligible people as clients and the number of full licence holders expected to more than triple within 12 months since the program commenced in February 2015. Importantly, I am advised the program is well regarded and appreciated by the communities it is serving.

In addition to redressing the imbalance between licensing rates for Aboriginal people in remote communities and those of non-Aboriginal South Australians, there is a strong focus on safety as drivers and passengers. As we move forward and work towards reducing the road toll even further, we will continue to work closely with the South Australian community. Every one of us has to play a role in improving road safety. We must continue to strive for the best possible results and this requires a concerted effort from every road user.

Mr PISONI: I have a few questions about the Description/objective on page 100 of Budget Paper 4, volume 3. Picking up on your comments in your introductory remarks in relation to the number of deaths per 100,000, are you able to give us a breakdown as to regional versus metropolitan?

The Hon. P. MALINAUSKAS: Yes. For the 2015 calendar year, I am advised that there were 43—this is total numbers—metro fatalities and 59 rural fatalities. In terms of breaking that down on a per capita basis around residents, I do not have that figure at hand, but I am happy to take it on notice.

Mr PISONI: The maths is there, so that is okay. I refer you to the table of expenses, income and FTEs. Obviously the financial commentary explains that there has been some transfer in expenses:

- the transfer of functions reported under program 6 Infrastructure Planning and Management in 2015-16 budget to program 7 Road Safety...

Can you explain what the program delivers and the reasons for the transfer?

The Hon. P. MALINAUSKAS: I am advised that the \$1.6 million was towards the state and national Black Spot funding.

Mr PISONI: That is an infrastructure spend that has been transferred from DPTI to a road safety program; is that right?

The Hon. P. MALINAUSKAS: Yes, I think that is correct.

Mr PISONI: And the reason for that?

The Hon. P. MALINAUSKAS: I seek to avoid this whenever I can, but I think this is best taken on notice to ensure that we can give you the most accurate answer.

Mr PISONI: Then:

- the transfer of functions reported under program 4 Roads and Marine in 2015-16 budget to program 7 Road Safety (\$1.1 million).

Can you explain the functions of that program? I suspect that is also Black Spot, is it?

The Hon. P. MALINAUSKAS: For the sake of not chewing up your time, I think in this particular instance I would be happy to take that on notice to ensure that you get the precise answer you are looking for.

Mr PISONI: Can we do that for the next lot of dot points? There is another one at point 6. I do not know whether they are the same figures. Are they just a repeat of the same thing on the next page?

The Hon. P. MALINAUSKAS: I am advised that the answer to that is yes.

Mr PISONI: Alright, can we have those back?

The Hon. P. MALINAUSKAS: Sure.

Mr PISONI: There was a total cost of providing road safety services in the 2014-15 year of just over \$47 million. Is there a percentage of that money that comes from the emergency services levy?

The Hon. P. MALINAUSKAS: I am advised no.

Mr PISONI: Is the 2016-17 financial year the same? Does that have any emergency services levy money in it?

The Hon. P. MALINAUSKAS: I am advised that is the same again, that no money from the ESL is allocated in that 2016-17 year either.

Mr PISONI: I will take you to Targets 2016-17 on page 101, Introduce legislation to strengthen drug driving penalties. Are you able to advise when that is likely to happen, and what changes are we expected to see?

The Hon. P. MALINAUSKAS: I am happy to provide a brief update on that. As I have stated publicly, upon taking on the responsibility, something that I have found rather alarming, in both a road safety context and in a policing context, is the volume of people who are delivering positive drug

testing results. These numbers seem to be on the increase and it is a source of community concern, and certainly concern from my perspective, particularly in light of the risks attached to drug driving.

I have seen figures that in the order of 24 per cent of people who have died on our roads in recent times have delivered a positive drug result. In light of that, I have undertaken an effort to see if we cannot enhance or improve the way we deal with drug driving in terms of the penalty regime, but also around the services that we attach to that. I have asked the department, in conjunction with SAPOL, to undertake a significant piece of work on that. It remains ongoing, and I certainly hope within coming weeks to be taking a proposition to cabinet.

The cabinet process not having ensued, obviously I am not at liberty to speak about this authoritatively as government policy, but what I can and am happy to reiterate is what I have stated publicly, that is, a substantial piece of work is being undertaken. To be frank, I would have liked to have already introduced that to cabinet, but it is important that we get this right. I am looking forward to taking something to cabinet in coming weeks.

Mr PISONI: On drug driving, there were a number of road safety ads that I saw, earlier in the year I think, that were talking about drug driving. They are still on the MAC site, but I have not seen them elsewhere for quite some time. They were talking about drug testing and that the THC in cannabis is detectable for at least five hours. I had some feedback through my office that people found that confusing. It was particularly difficult for a constituent of Mr Pengilly's in Finnis, who was obviously a regular user of marijuana who always waited 24 hours before he drove, and after seeing that ad, drove after five hours. I have not seen that ad very often since then. Of course, he was done for drug driving. Are you able to explain where the five hours came from, and what level of impairment somebody will have five hours after THC use?

The Hon. P. MALINAUSKAS: With drug testing, as distinct from testing for alcohol, there is no impairment-based test in respect of drug driving. It is simply a presence-based test in respect of drug driving. I understand that MAC did receive substantial research that underpinned that advertising campaign, as one would reasonably suspect. I am happy to take that on notice and provide more information around the research that underpinned that campaign and the arguments behind it.

I am happy to provide that information after taking it on notice, but I would just say, generally speaking, regarding the individual concerned who was a regular user, that, at the expense of sounding simplistic, it is important to remember that marijuana remains a prohibited substance in the state of South Australia and, indeed, Australia at large, and my strong advice to the community would be to do everything they can to stop the use of marijuana so as to mitigate their risk of breaking the law.

Mr PISONI: I could not agree more, minister, but your MAC ads do not actually point out that it is illegal to use either amphetamines or marijuana.

The Hon. P. MALINAUSKAS: MAC's advertising is undertaken with a very specific objective of trying to improve road safety and I think, by and large, MAC has an outstanding record in delivering sophisticated well-researched public campaigns that have, undoubtedly, made a substantial contribution to road safety in South Australia. I do not see it as MAC's responsibility to be advising the public around drug policy. It is very much SAPOL's task to deal with policing. MAC's objectives are very different, but I would have thought that it was a statement of the obvious that substances such as cannabis and amphetamines remain illegal in South Australia.

Mr PISONI: Was there any advice sought by police or your department in using the five-hour claim in that advertising campaign?

The Hon. P. MALINAUSKAS: As before, in respect to the research that sits behind that campaign, which I am advised was well thought through and thorough, I am happy to take on notice information regarding that research and share it accordingly.

Mr PISONI: You will provide the research?

The Hon. P. MALINAUSKAS: What I have said I have taken on notice are the questions around the research that sits behind the campaign. I cannot think of any reason why the research

that underpinned that campaign, in terms of the conclusions that it resulted in, if it is appropriate to raise them publicly, should not be shared. I do not see any objection to that.

Mr PISONI: Has your department received any complaints about the information given in that campaign?

The Hon. P. MALINAUSKAS: When you say department, is that SAPOL or DPTI?

Mr PISONI: Your portfolio of road safety goes over two—

The Hon. P. MALINAUSKAS: I certainly do not recall receiving anything from either agency, and I have just been advised by each of them that they do not recall receiving any complaints along those lines either.

Mr PISONI: Did the media campaign with that ad run its full booked course?

The Hon. P. MALINAUSKAS: I believe that was the case. I have just been advised by MAC.

Mr PISONI: Are there plans to run it again?

The Hon. P. MALINAUSKAS: I am advised that there are currently plans or schedules for those campaigns to be run twice again this financial year.

Mr PISONI: Will they be run without changes?

The Hon. P. MALINAUSKAS: I am advised that there are not currently any plans to change the advertising campaign but, of course, MAC, like any good organisation, is constantly reviewing itself and its campaigns and if any evidence were to be presented that caused that to be changed, then that option remains available to them. MAC has in the past adjusted campaigns depending on need and advice that they receive in due course, but, as it stands, the existing campaign in its current format is scheduled to run twice again this financial year.

Mr PISONI: Are you comfortable, minister, with advice that states that at least five hours before driving after smoking marijuana?

The Hon. P. MALINAUSKAS: I would refer again to that question being taken on notice regarding any research that underpins the campaign.

Mr PISONI: I am happy to say I am not comfortable with that. Are you comfortable with it?

The CHAIR: Order! We have a habit here of listening to the answer before we have the next question, and that is a comment in any case, member for Unley. Would the minister like to finish his answer?

The Hon. P. MALINAUSKAS: The member for Unley is entitled to his opinion. What is incumbent upon me as Minister for Road Safety is to satisfy myself that there has been research that has underpinned a campaign and it has not just been plucked out of thin air or is a thought bubble, and I have been advised that such research has been undertaken.

Again, notwithstanding the fact that I acknowledge the concerns of the member for Unley, I think we all share concerns about drug use in the community and there is always a variety of views about how best to address such an issue but, as I stated earlier, it is incumbent on someone in my position to satisfy themselves that research has underpinned the campaign. Of course, if information comes to light that should question that, it would be my expectation that the respective agency, MAC, would adjust their plans accordingly if it was appropriate to do so.

Mr PISONI: Minister, I take you to page 136, Description/objective. You are saying that there is a focus on recidivist dangerous road users. Are you referring to banned drivers in that—

The Hon. P. MALINAUSKAS: Referring to what, sorry?

Mr PISONI: Banned drivers, people who are banned from driving, and people who have had their licences taken away from them? What is the definition of a recidivist dangerous road user and does it extend beyond motor vehicles?

The Hon. P. MALINAUSKAS: Again, remind me, whereabouts are you referring to?

Mr PISONI: This is on the top of Sub-program 3.1: Road Use Regulation.

The CHAIR: It is back into Police, but we thought we would give you latitude because it is about road safety in a roundabout sort of way.

Mr PISONI: The portfolio itself is split over two areas.

The CHAIR: There is no need to argue with me; we are giving you the latitude.

The Hon. P. MALINAUSKAS: I have just been advised by the police commissioner and neither he nor I am aware of a technical definition underpinning the term 'recidivist' in this particular context, rather that with recidivist dangerous road users it is self-evident who those people are. That being said, I am happy to take on notice whether or not there is a technical definition that underpins the word 'recidivist' in this particular context.

Mr PISONI: Can you count them?

The Hon. P. MALINAUSKAS: Can you count recidivists?

Mr PISONI: Are there a number of them? Are they people you are aware of?

The Hon. P. MALINAUSKAS: Being a somewhat operational question in nature, I might invite the police commissioner to answer that.

Cmmr STEVENS: Recidivist road traffic offenders are, by definition, people who have a history of driving offences or behaviours on the road that would present a risk to the wider community and it is probably the case that we can count those but it would be somewhat of a moving feast in terms of the number in each local service area at any given time. These would be the sort of people who attract the attention of police in a proactive sense ensuring that they are complying with their obligations in terms of licence disqualification or suspension, or if we have a reason to suspect that they are likely to commit other offences, we would be targeting them in that regard as well.

Mr PISONI: Can you give us an average number?

The Hon. P. MALINAUSKAS: When you say an average—

Mr PISONI: I am not asking you the number as of today, but can you give us an average number as to how many would fall into that category, or how many last year for example?

The CHAIR: Lots or a few?

Mr PISONI: No, I actually want to try to get a number.

The CHAIR: Well, it is a bit hard. You just admitted that yourself.

Mr PISONI: With all due respect, Chair, I am asking the question.

The Hon. P. MALINAUSKAS: Again, I am happy for the police commissioner to attempt to answer that.

Cmmr STEVENS: I think we could provide you some information that would give an indication as to the number of people that we would consider fit that category across the metropolitan and regional areas.

The CHAIR: We will let him have one more question and then I think we have been as fair as we could possibly be all day.

Mr PISONI: Are you going to bring that back? You do not have that now, is that what you are saying, the figure?

The Hon. P. MALINAUSKAS: Yes.

Mr PISONI: This is on the same page, page 136. I noticed that you scored some free speed cameras, I think, from the federal government—\$1.3 million. There was some media I think I found that they were surplus at a federal situation and they have now been installed in South Australia. Can you give us some more information about those, whether there was any calibration required, whether it is a new system we have introduced, whether we got them because we are using the same system? Page 135 describes 'Resources received free of charge'.

The CHAIR: You said it was the same page.

Mr PISONI: Yes, and that is a description of what the resource free of charge is, Chair, on page 136.

The Hon. P. MALINAUSKAS: There is an important premise within your question regarding a reference to federal funding for this, I am advised that there does not appear to be any gifting of cameras from federal agencies. I think the thing you may be referring to on page 136 talks about safety cameras from DPTI. I am happy to take that on notice to double-check that, but I am advised by DPTI that there is no suggestion that DPTI has been in receipt of—

Mr PISONI: It says here—

The CHAIR: Hang on, he is taking it on notice. The time has expired.

Mr PISONI: Page 135 says, 'Resources received free of charge.'

The Hon. P. MALINAUSKAS: I am happy to take that on notice and ensure that DPTI gets you the information.

The CHAIR: The time for questions having expired, I declare the examination of the proposed payments adjourned until tomorrow. I thank the minister and his advisers for their attendance.

At 18:18 the committee adjourned to Tuesday 2 August 2016 at 09:00.