# **HOUSE OF ASSEMBLY**

## **Tuesday 8 December 1998**

The SPEAKER (Hon. J.K.G. Oswald) took the Chair at 2 p.m. and read prayers.

### ASSENT TO BILLS

His Excellency the Governor, by message, intimated his assent to the following Bills:

Australian Formula One Grand Prix (South Australian Motor Sport) Amendment,

Non-Metropolitan Railways (Transfer)(National Rail) Amendment,

Stamp Duties (Share Buy-backs) Amendment.

## NOARLUNGA HOSPITAL

A petition signed by 2 811 residents of South Australia requesting that the House urge the Government to fund intensive care facilities at the Noarlunga Hospital was presented by Mr Hill.

Petition received.

### **EUROPEAN WASPS**

A petition signed by 367 residents of South Australia requesting that the House urge the Government to provide ongoing funding for the eradication of the European wasp was presented by the Hon. R.B. Such.

Petition received.

# **OUESTIONS**

The SPEAKER: I direct that written answers to the following questions on the Notice Paper, as detailed in the schedule that I now table, be distributed and printed in Hansard: Nos 1, 8, 12, 18, 19, 24, 33, 34 and 70; and I direct that the following answers to questions without notice be distributed and printed in Hansard.

# OZDOWSKI, Dr S.

In reply to Hon. M.D. RANN (Ramsay) 18 November.

The Hon. J.W. OLSEN: An investigation into this matter was conducted by the Chief Executive of the Department of the Premier and Cabinet

Dr Ozdowski advised that on 19 August 1997 a conversation he had in Poland with a journalist during the Easter period of 1997 was published in *The Republic*. The article dealt with key contemporary issues such as national identity, republican debate, multiculturalism and immigration, Polish diaspora in Australia, the Mabo judgement and the disadvantaged position of Aboriginal Australians.

The original translation is a misleading representation of the interview. It provides a compilation of selected, out of context passages from the article and individual sentences are translated incorrectly.

It should be recognised that a translation from Polish to English can substantially alter the emphasis away from the original intent.

The original article, although abbreviated and unauthorised, is balanced and does not intend racial insensitivities.

This interpretation has been confirmed by an independent translation of the original article.

I am also advised by the Chief Executive of the Department of the Premier and Cabinet that, notwithstanding the above, Dr Sev Ozdowski has apologised to the appropriate interest groups for any offence that has resulted from this misunderstanding.

It is not intended that any further action be taken in relation to this matter.

# FIRE SERVICE LEVY

In reply to Ms RANKINE (Wright) 29 October.

The Hon. R.L. BROKENSHIRE: The member has sought a response on the issue of the current insurance fire levy system as it applies to motor vehicles. In answering this question allow me to provide some background. The existing fire levy system as such is an invention of the insurance industry, created as a simple method for meeting insurer's funding obligations to the fire services. The system has been in place for many years with the insurance council annually recommending levy rates to companies based on the previous years insurance pool, expected fire service budgets and other actuarial factors. The levy rates are not a government charge, these rates are recommended only and are not regulated.

The CFS debt repayment is being borne as part of the annual CFS budget and thus is divided between the state and insurers. Insurers have recommended their obligation be met through a surcharge of around \$6 per policy state wide, attributed to those policies that currently attract a fire service contribution.

Regardless of whether a company chooses to use the recommended levy rate, all insurance companies contribute to the fire service budgets following a set process of annual returns, and this includes comprehensive car insurers.

It is true that some comprehensive vehicle insurers may not have shown a fire levy on their premium notices, being as it may be a small part of the total premium. But they have still been liable for a portion of the fire service budget. Such insurers have been drawing their legislated obligation from other parts of the car insurance premium without informing policy holders.

In the interests of showing policy holders the amounts to be removed following July 1999, most car insurers are now showing the existing recommended fire levy on their notices. This is not a new charge, just evidence of the sort of hidden levies the insured public have been paying for many years.

There are insurance types that do not contribute to the fire service budgets, these include those such as glass breakage, burglary and aircraft hull damage, but apart from a select few, almost all property based insurances have a financial obligation to either or both of the CFS and MFS.

# PAPERS TABLED

The following papers were laid on the table:

By the Premier (Hon. J.W. Olsen)-

Public Employment, Office of the Commissioner for-Public Sector Workforce Information, Erratum, June

By the Minister for Human Services (Hon. Dean Brown)-

Development Act—City of Mount Gambier Heritage Plan,

Report on the Interim Operation of-Amendment Regulations under the following Acts-

Controlled Substances—Fertility Drugs

Road Traffic—Declaration of Hospitals

Minister for Government Enterprises (Hon. M.H. Armitage)-

State Supply Board—Report, 1997-98

Regulations under the following Acts-

Legal Practitioners—Fees

Liquor Licensing—Dry Areas—Long Term—Mount Gambier

Public Trustee-Commission and Fees

Valuation of Land—Various

By the Minister for Education, Children's Services and Training (Hon. M.R. Buckby)-

Flinders University of South Australia—

Report, 1997

Statute Amendments, 1997

Regulations under the following Acts-

Children's Services—Child Care Centre

Senior Secondary Assessment Board of South

Australia—Subjects and Fees

By the Minister for Industry and Trade (Hon.

Regulations under the following Acts-

City of Adelaide—Members Allowances and Benefits Local Government—Expenses not Registered Local Government Finance Authority—Prescribed Bodies.

# ENVIRONMENT, RESOURCES AND DEVELOPMENT COMMITTEE

**Mr VENNING (Schubert):** I bring up the thirtieth report of the committee, on the South Australian rural road strategy, and move:

That the report be received.

Motion carried.

The Hon. R.G. KERIN (Deputy Premier): I move:

That the report be printed.

Motion carried.

#### PUBLIC WORKS COMMITTEE

**Mr LEWIS (Hammond):** I bring up the eighty-fourth report of the committee, on the Playford B Power Station upgrade, and move:

That the report be received.

Motion carried.

The Hon. R.G. KERIN (Deputy Premier): I move:

That the report be printed.

Motion carried.

**Mr LEWIS:** I bring up the eighty-third report of the committee, on the Playford Primary School redevelopment, and move:

That the report be received.

Motion carried.

The Hon. R.G. KERIN: I move:

That the report be printed.

Motion carried.

# **QUESTION TIME**

# **ELECTRICITY, PRIVATISATION**

The Hon. M.D. RANN (Leader of the Opposition): Given the announcement by the Hon. Nick Xenophon that he will not support the Government's Bills on ETSA and Optima, does the Government intend to proceed with the sale or lease process inside or outside of Parliament, or will the Premier now agree to hold a referendum to allow the people of South Australia to decide?

The Hon. J.W. OLSEN: What we have had today with the announcement by the Hon. Nick Xenophon in another place is a sell out of South Australia's future, graphically demonstrated in the weekend media, where some \$6 billion of interest has been paid by taxpayers of South Australia. That is a cost that we ought not to have to bear into the future. The question that Mr Xenophon is now putting before the Parliament and the people of South Australia is: how do we now make up the difference? We indicated in the position that we put forward earlier this year (and the forward budget estimates clearly indicate this) that the shortfall is something of the order of \$100 million to \$150 million. The question is: what is the choice in this policy-free Opposition that we have in this State?

The choice is either further taxes and charges to the tune of \$150 million a year or a cut in the delivery of services of \$150 million a year. And I might ask members opposite what

services they want cut—health services, education services or police services. That is the choice. That is the stark choice that Mr Xenophon has now inflicted upon the Parliament and the people of South Australia. The third choice is simply to run a budget deficit. Having spent five years as a Liberal Government in eliminating the \$300 million annual deficit that we inherited from the Labor Administration, and having for the first time in some 40 or 50 years had a balanced budget on an annual basis, our third choice is simply to add \$150 million to the debt. Is that the choice that Opposition members want?

The decision today by Mr Xenophon is an abdication of responsibility and the removal of a secure and certain future for our young children. What Mr Xenophon has done today is ensure that the shackles of the debt inherited from the Bannon Labor Government will remain on future generations of South Australians. The simple choice is: more taxes, fewer services or increased debt. None of those choices are good choices, realistic choices or the right choices for South Australia's future.

Members interjecting:

**The SPEAKER:** Order! I call the members for Hart and Schubert to order.

### STATE ECONOMY

Mr CONDOUS (Colton): Will the Premier explain the benefits that the South Australian economy receives from the Government's focus on investment by overseas and interstate firms?

The Hon. J.W. OLSEN: This Government is focused on investment attraction. It is a clear strategy and policy of the Government, and the reason being is that it creates jobs. Over the past two years the Government has attracted approximately 149 companies that have invested some \$687 million into the State's economy and created almost 10 000 direct jobs. These are direct and tangible jobs, created as a direct result of this Government's aggressive focus on investment attraction. It has been a single-minded focus—and rightly so—for new private sector capital investment in this State to regrow, rejuvenate and rebuild this economy.

In the past 15 months, a further 9 300 indirect jobs have flowed from these investments. Unlike the ALP of the 1980s, which went for the big bang approach and bankrupted the State through risky deals, we have put tangible runs on the board. We are not putting taxpayers' money into funding hurricane insurance in Florida or goat and cattle farms in South Africa. That is not the investment this Government has sought, unlike the previous Labor Administration. Instead, we have targeted a campaign to attract investment from interstate and overseas companies. We have been successful, and our track record has demonstrated that. Those companies and that investment are in those growth industry sectors of the next millennium, so we are targeting an opportunity and future for our children.

Let us look at some of those companies. They include Westpac, which now employs more than 1 800 people at its facility here in South Australia, in the honourable member's electorate; and Bankers Trust, which now employs 320 people. That is to name but two companies that have invested in South Australia and expanded their employment well beyond that initially agreed.

The ALP clearly has an abysmal track record not only with respect to private sector investment and job creation but also, of course, with respect to bankrupting the State of South Australia. That is the legacy that has been left to us by those opposite. This Government is constructively and deliberately focusing on investment, with 149 companies that have given direct and indirect jobs to this State.

# PREMIER'S SUPPORT

The Hon. M.D. RANN (Leader of the Opposition):

Given that the Premier has staked his leadership on the successful sale or long-term lease of Optima and ETSA, and has repeatedly stated that the privatisation of ETSA and Optima are of fundamental importance to his Government's legislative agenda, and given Mr Xenophon's decision today, is the Premier confident of the support of all his colleagues—on both the front and back benches—to continue as Premier?

Members interjecting:

**The SPEAKER:** Order! The question skirts around the Premier's ministerial responsibility, and it is up to him—

The Hon. M.D. Rann: It is absolutely central.

The SPEAKER: Order!

**The Hon. M.D. Rann:** It's whether Mr Xenophon has sold his future out.

**The SPEAKER:** Order! I warn the Leader of the Opposition for attempting to shout over the Chair. I leave it to the Premier to respond as he sees fit.

**The Hon. J.W. OLSEN:** Well, it is just another inane question from the Leader of the Opposition.

Members interjecting:

**The SPEAKER:** Order! The Minister for Government Enterprises and the Premier will come to order.

## STATE DEVELOPMENT UNIT

Mrs PENFOLD (Flinders): Will the Premier inform the House of the work that the State Development Unit has been undertaking to attract further industry investment in this State?

The Hon. J.W. OLSEN: Once again, evidence of the Government's single-minded focus on creating jobs in this State encourages investment to South Australia, and that means jobs—jobs for young South Australians who need them most. The State Development Unit has already started to get some runs on the board, even though it has been established for only a short period. As the House knows, we have representative officers in Indonesia, Singapore, Hong Kong, China, Japan and Europe, and those overseas representatives are in South Australia this week meeting with a range of industry people, in both small business and peak organisations, to look at opportunities in markets and to put contacts in place for those businesses.

We have had more than 80 business delegations to South Australia in the course of the past year: 80 business delegations have come into this State to look at our goods and services and to look at wholesaling and establishing contacts and contracts with South Australian based firms. That is not front page news, but the fact is that these business delegations lead to business investment in the State and also, importantly, to business migration.

In the 12 months to November this year, we had 95 registrations of interest from people to settle in the State as business migrants, and 104 business migrants have been approved for the State, bringing in some \$66 million.

That is significant if we are to open up South Australia to the export markets.

The export markets are important because, to get economies of scale, we have to go into the export markets and win the business. By natural disadvantage in the past and therefore focus to overcome that natural disadvantage, that is, the economies of scale in South Australia, businesses in this State have tended to focus on export market opportunities. That is why our thrust into those markets is far in excess, in percentage terms of the performance of small and medium businesses, of companies interstate.

In the last 12 months our offices overseas have been instrumental in attracting significant investment in the State's real estate market, gaining an order for processed meat bones, training and consultancy in film making, and the sale of fruit and vegetables into Singapore and Hong Kong. They are tangible runs on the board by a Liberal Government, not an ALP Government, which is clearly in the grip of a policy vacuum. Can the Leader of the Opposition be sure that all his ALP members in the other House will vote against the Bill? We have already seen the defection of one ALP member in the Upper House. When the vote comes on, it will be an interesting test for the Leader in the Upper House.

### **ELECTRICITY, PRIVATISATION**

Mr FOLEY (Hart): Given that the Premier and his Cabinet previously supported the construction of the Riverlink interconnector between South Australia and New South Wales and later dropped support in favour of the Pelican Point Power Station in my electorate, will the Premier now give support to the Riverlink project to gain the support of the Hon. Nick Xenophon in another House to pass his lease or sale legislation?

The Hon. J.W. OLSEN: My understanding of the member for Hart's question is that, if we support Riverlink, the Hon. Mr Xenophon will support the lease legislation. That was the import of the question. That is not how I understand Mr Xenophon's press conference. If that is the case—

**The Hon. R.G. Kerin:** Perhaps he is advising him.

The Hon. J.W. OLSEN: Yes, perhaps he is advising him. Perhaps the member for Hart knows something that the media at the conference are not aware of. I read particularly that part about the ALP being a policy vacuum in South Australia. I read out that part of the press release because that is a very accurate statement.

In relation to Riverlink, once again the member for Hart says that the Government cancelled the Riverlink proposal. I remind the member for Hart that it was the national market company (NEMMCO) that made the decision on Riverlink, not the Government of South Australia. I ask the member for Hart to get his facts straight and not distort the facts as a preamble to his question in the House.

One of the key thrusts in our endeavours to open up the electricity market in South Australia, bearing in mind that it has been announced that 13 December will be the start date of the new national electricity market, is that, if a company in the national electricity market wants to participate and if there is a commercial operator that wants to build a powerline and an interconnector, they can do so. However, I tell the member for Hart that we want to make sure that there are no brownouts and blackouts in the summer of 2000-1.

Members interjecting:

**The Hon. J.W. OLSEN:** Have a look at how you ran down the Playford Power Station at Port Augusta and how you put it in mothballs. We are going to bring the power stations in Port Augusta out of mothballs to meet some of the

demand for generating capacity in the future. We want to get additional generating capacity on line in South Australia by November 2000 so that in the summer period 2000-1 we do not have to have rationing of electricity in South Australia for business or residential purposes, and we do not put businesses at risk by shutting down or having blackouts of power simply because we do not have enough generating capacity. That is why we are pursuing the Pelican Point project, with no financial investment by the taxpayers of South Australia or incentives—

Ms Hurley: There is a seven year contract for that.

The SPEAKER: Order! Interjections are out of order.

**The Hon. J.W. OLSEN:** No financial benefit will go directly from the Government of South Australia to the private companies. It will be on the basis of a commercial operation. We want to forward plan, unlike the previous Labor Administration.

An honourable member interjecting:

The SPEAKER: Order! The member for Hart will cease interiecting.

The Hon. J.W. OLSEN: Whether it is the emergency radio network that has been on the books since 1983 or whether it is power generating and meeting the demands of the future, the fact is that this Opposition has never grasped the policy options for the long-term future of South Australia. And, by their questions today, members opposite demonstrate yet again that they are simply a policy vacuum.

### **BUSINESS CENTRE**

Mr SCALZI (Hartley): Will the Deputy Premier outline what the Government is doing to assist food industries in South Australia and the services that local companies can access from the Business Centre to enhance their export performance?

The Hon. R.G. KERIN: There is absolutely no doubt that this Government has strongly identified the food industry as a major growth opportunity for the State. One of the things we have realised within that is that, as the domestic size of the Australian food and beverage markets is not growing very quickly, we have a heavy reliance on exports. As we go down that track, regional areas can certainly benefit greatly, and they are, as a result of the Government's initiatives on food and as they take effect to complement the terrific growth that is going on within the wine industry. Members who have had a look at what is going on in the Riverland, the Mallee, the Mid South-East, Virginia, Clare or the aquaculture industry on the Eyre Peninsula will see proof of the growth that is occurring.

The Food for the Future program, which sets out some of the what were seen as ambitious goals of going from \$5 billion about 18 months ago to \$15 billion by 2010, is ensuring that we are getting good figures despite what is happening in Asia. Food exports are lifting at a promising rate. The Premier also has his food council, which has brought together a lot of the champions of industry, and they are giving terrific leadership to the smaller companies and creating some great energy. One of the initiatives that has come from the food council—an initiative from around the table—is that a group from industry has gone away and come back with a proposal to Government to set up a food exporters' council. Those who are aware of the history of the wine industry will realise that it was when the wine export council was set up that the terrific acceleration within wine exports really started.

A couple of weeks ago, the Government committed \$2.4 million to this export council over the next four years. Not only are we putting in \$600 000 a year for the next four years but industry is contributing both money and a lot of energy to getting this council together to make sure that it does achieve the goals we are pursuing. Two weeks ago, a further \$300 000 was committed over three years and will be dedicated to quality assurance, which is vital to get into these markets; and \$150 000 was committed to assist with the setting up of SA Food On-line, which is right at the cutting edge of technology, to get information out to our food processors and producers.

In addition, the Premier has committed \$450 000 to appoint two new project managers on three year contracts and, on top of that, there has been a \$270 000 injection to strategic marketing to make sure that our growers and processors have good access to the all important export markets. As well as that, the Business Centre is certainly playing an important role in facilitating export and trade in a whole range of industries but particularly in the food industry. It is assisting with the uptake of quality assurance systems. Up to 40 companies will be assisted this year to help with food safety training workshops and conferences; up to 20 companies will be assisted in the development and implementation of R&D and technology this year; and, through the Business Centre, food industry companies will also be encouraged to attend management development and marketing fast track workshops and to participate in benchmarking studies of the industry.

A couple of weeks ago I had the honour of opening the new freight facilities of Schenker International at Royal Park, which is a terrific new complex, integrating new facilities for both air and sea freight and implementing a different way of doing things. For instance, through Schenker, Harrods of London is now being supplied regularly with a variety of South Australian wines from smaller producers. This type of infrastructure allows those orders to be pulled together in South Australia. Certainly the Government certainly recognises the importance of the food industry and the enormous opportunities for South Australia, and it is terrific to see some of the effects of our initiatives taking a grip, particularly in the regional areas of the State.

## **MOTOROLA**

The Hon. M.D. RANN (Leader of the Opposition): Given that the Opposition has now been joined by the National Party member for Chaffey and the Liberal Party member for Hammond in calling for a genuinely independent inquiry into whether the Premier misled the Parliament on the Motorola deal, will the Premier tell the House the terms of reference and the names of the person or persons nominated to conduct the inquiry that he has referred to the member for Chaffey, and what was that member's response? Yesterday's media carried a report stating that the member for Chaffey had given the Premier an ultimatum to provide terms of reference for an independent inquiry involving a retired judge or QC, while the member for Hammond stated:

If there is no satisfactory resolution of this matter by Tuesday morning. . . then as far as I'm concerned no confidence in the Premier's the way to go.

**The Hon. J.W. OLSEN:** I reject the basis of the honourable member's question and I reject the fact that I have at any stage misled this Parliament. So, let me just state that again in categorical terms: I reject the allegation and the presump-

tion of the Leader of the Opposition's question. In relation to other matters, as I have said, I am having discussions with a number of people, and I look forward to the facts being brought to this House, and I look forward to the apology from no less than the Leader of the Opposition in due course.

# INDUSTRY ASSISTANCE

**The Hon. R.B. SUCH (Fisher):** Will the Minister for Industry and Trade outline what assistance the State Government is providing to local industry to help it expand?

The Hon. I.F. EVANS: That is a similar question to that which small business often asks various Government members and officers when the Government makes an announcement about companies such as EDS, Bankers Trust or Westpac coming to South Australia. The people concerned often ask what support the Government is offering local existing businesses. The Government certainly places a high priority on the expansion of investment, particularly in plant and equipment and research, in already existing South Australian companies. Certainly, support for local companies and existing industry is one of the Government's high priorities and is reflected in the high volume of resources the Government puts into these businesses.

About 70 per cent of available business investment funds goes to already existing South Australian businesses, obviously helping them build their business not only for the South Australian market but, importantly, also for the Australian and world markets. The Premier and the Deputy Premier have already outlined some of the services which are available through the Business Centre and also the Centre for Manufacturing and which, obviously, are targeting local South Australian companies to try to assist with their growth. A minute ago the Deputy Premier spent some time talking about the Food for the Future program and some of the programs available through the Business Centre. Indeed, approximately 30 000 to 40 000 contacts are made by South Australian businesses with the Business Centre over any one year, and it is good to see that they are using the services that are available to help them grow.

These services include those provided under the consultancy grant scheme, the mentoring pilot scheme and the business plan development scheme. Over the past year or so, the Business Centre has assisted an average of about 420 companies to expand their particular business and ultimately to enter the export market. In an earlier answer, the Premier quite rightly made the point that this State also needs to concentrate on attracting new business to the State, whether that be from interstate or overseas. That is why he has established the State Development Unit, and he has reported on some of the successes there.

We all appreciate that, in attracting new business to the State, whether from interstate or overseas, we bring not only employment and economic growth but also new skills and technology, new management expertise and know-how, and the opportunity to attract South Australian businesses to a new market. There are certainly plenty of funds, facilities and programs available for existing South Australian businesses, demonstrating that this Government concentrates on both existing South Australian business and attracting new business to the State.

### **MOTOROLA**

The Hon. M.D. RANN (Leader of the Opposition): My question is again directed to the Premier. Will the inquiry into the Motorola contract have wide powers of investigation relating to access to buildings and documents and the power to summons witnesses, and will witnesses before that inquiry be provided with the same protection, immunities and privileges as a witness appearing before the Supreme Court?

**The Hon. J.W. OLSEN:** When the details are finalised, I will be happy to tell the Leader.

**The SPEAKER:** I call the member for MacKillop.

The Hon. M.D. Rann interjecting:

**The SPEAKER:** Order! The Leader will come to order. The member for MacKillop has the call.

# DOG FENCE LEVY

Mr WILLIAMS (MacKillop): As the Minister for Primary Industries has instigated a review into the collection of the dog fence levy, does he admit that the current levy is inequitable and, as such, will he seek a moratorium on the prosecutions against farmers who have refused to pay the existing levy until that review is completed? Currently the dog fence levy is struck upon land holdings in excess of 10 square kilometres, irrespective of land use or carrying capacity. I understand that some 40-odd land-holders have refused to pay the levy this year and are currently facing prosecution.

The Hon. R.G. KERIN: I thank the member for the question, which is certainly a topical one. As Minister for Primary Industries, it is probably one of the more frustrating issues that I have had to deal with. The debate is really about the industry contribution to the maintenance of the dog fence. not about whether the Government has put in its 50 per cent to match what comes from industry. In relation to the summonses issued, that is the responsibility of the Dog Fence Board. From talking with the Chair of that board, I know that the decision the board will take on that matter really needs to be taken in the light that it is unfair on the vast majority who have actually paid the rate to withdraw the summonses on the others. I am also perhaps a bit concerned that some of the land-holders who have been encouraged to not pay have perhaps not heard all the facts on the issue, and that is some area of concern for those who have been sent summonses.

There has been a question involving the equity of the current collection method, and I believe that there is a more equitable way. The current system was actually put in place by industry itself, and this is about industry's part of the collection. I have some definite views on a more equitable method of raising the industry contribution and doing so for a lot less that the current collection costs. We have put that to industry and I hope that it will consider that matter fully. I am hoping that prior to Christmas, or certainly in January, the players involved can come to the table and arrive at some form of agreed settlement. As identified by the honourable member in his question, a review of the Act has been triggered. We also have a select committee in the other place. It is interesting that we are asking politicians to make decisions for industry: I think that industry needs to lead this debate, not be led. I hope that over the next few weeks we might be able to come to a solution that is equitable but also sustainable for the long term.

### **MOTOROLA**

The Hon. M.D. RANN (Leader of the Opposition): Will the Premier agree to appear personally before the Motorola contract inquiry to give evidence, and will other Ministers who were involved in the contractual arrangements with Motorola, including the now Minister for Human Services and the now Minister for Year 2000 Compliance, be invited and encouraged to appear before the inquiry and give evidence?

**The Hon. J.W. OLSEN:** The Leader of the Opposition will get the same answer as he got to the previous questions. I simply pose the question to the Leader: does he not have any substantive questions for today?

### **AUTOMOTIVE INDUSTRY**

Mr VENNING (Schubert): Given the importance of the automotive industry to South Australia, can the Minister for Industry and Trade detail for the House what the Government is doing to secure greater investment in the industry?

The Hon. I.F. EVANS: I thank the member for Schubert for his question. My understanding is that he has recently taken a tour through both automotive plants in this State and found them of great interest. I am sure we are all aware that South Australia is very fortunate to have two automotive manufacturers in our State, and they have certainly shown their capacity to mix it with the best in the world as far as their product and exports go. They have definitely enjoyed bipartisan support from Governments and Oppositions over a long period.

There is no doubt that these manufacturers are at the sharp end of the globalisation trend that is now facing all industrialised countries world wide: they are certainly experiencing significant change, and significant opportunities are being presented to them. General Motors-Holden's has just celebrated its fiftieth year of automotive manufacturing and is enjoying significant success with the VT Commodore. It has also started a second assembly line in relation to the Vectra which we understand should go pretty well into the export markets into Asia.

Mitsubishi likewise has had significant export success, with more than 17 000 vehicles being exported overseas in 1997, totalling some \$520 million, consisting not only of vehicles but also engine components, tooling and engineering services. With respect to engine components alone, the Leader of the Opposition may be interested to know that they have shipped some 296 000 cylinder heads and 155 000 cylinder blocks out of South Australia, which is certainly a good result.

As for the future, Holden's has recently been recognised by its parent, General Motors, as a centre for excellence in the manufacturing of rear wheel drive vehicles. As a consequence, the next model Commodore is likely to be a world car with worldwide production volumes growing significantly indeed, and that certainly provides great opportunities for South Australia, for that company and the work force. With the new models and the expanded vehicle production volumes, through the various offices in the department, we are working with both car companies in an effort to ensure that we attract component suppliers to South Australia from interstate or overseas. They will obviously be able to take advantage of South Australia's excellent infrastructure and its highly skilled work force.

Importantly, we are also working with the companies in relation to forming alliances with those involved in global tendering. Many members would be aware that one of the great challenges facing the automotive industry in the next five years is that many of the companies are going to global tendering contracts, which will put significant pressure on those companies that are not fortunate enough to win global tenders. What we are trying to do is match the South Australian companies with the companies involved in the global tender bids so that South Australian companies and the work force get their fair share of the export market. The Government continues to recognise the importance of the automotive industry and all the component manufacturing industries that surround it, and we are certainly continuing to work with the industry in this respect.

**The Hon. G.A. INGERSON:** On a point of order, Mr Speaker, my understanding is that the people operating television cameras are allowed in the House only under the privilege of filming those who may be asking or answering a question and not others.

**The SPEAKER:** Order! There is no point of order. The television stations and those manning the cameras are aware of the rules set down. I would ask them to observe them by filming only members who are on their feet.

#### **MOTOROLA**

Mr CONLON (Elder): Will the Premier guarantee that all documents, including Cabinet documents, relating to the Motorola contract will be made available to the inquiry into his dealings with Motorola, and can the Premier guarantee that there has been no tampering with those documents in the four months that they have been stored in the Premier's office? A media report of 4 December states that copies of Motorola files held by other agencies were demanded by the Premier's office on 3 August. A source quoted in the report states:

The integrity of these files must now be questioned. It is now not possible to ascertain whether or not key information on those files has been removed or tampered with.

**The Hon. J.W. OLSEN:** What an objectionable accusation. Suffice to say that—

An honourable member interjecting:

**The Hon. J.W. OLSEN:** No. I indicated previously when I made a statement to the House that all documents—all documents—will be made available.

# WATER INDUSTRY

**The Hon. D.C. WOTTON (Heysen):** Will the Minister for Government Enterprises provide details to the House concerning investment and exports that are now being generated by the South Australian water industry?

The Hon. M.H. ARMITAGE: I thank the member for Heysen for his question because this is a matter of extraordinary importance to the people of South Australia, particularly all those people who will now get jobs in what is an internationally focused industry. It is a very important question for that reason. It is also an important question because—and the Opposition should listen carefully to the answer—it is about results in the form of investment and exports. As I have identified on many occasions, one key focus of the water industry and the Government and its role in the water industry is the internationalisation of what was, at one stage, an

inwardly focused water industry, and there have been some significant results.

I am delighted to re-inform the House about some of those results, not the least of which is that, in the first two years of its contract, United Water has generated exports worth \$52.9 million, compared with the actual contractual obligation of \$34.3 million—in other words, nearly \$20 million more than that required by the contract. More than 50 companies have secured interstate and international work through the United Water contract. This contract is creating new jobs and new opportunities for an increasing number of South Australians; and, whilst I know that that is bad news for the Opposition, it is great news for the companies that are now internationalised.

The international consortium Acqua-Gas-AVK Pty Ltd is establishing its Asia Pacific head office in Adelaide, which will eventually create 150 jobs; and 40 jobs will be created in the next three years. Further, this company will invest \$7 million in establishing a manufacturing centre, which will also operate as the Acqua-Gas-AVK Asia Pacific office from where, obviously, it will explore a number of sales opportunities both in Australia and overseas. We have launched the Water Industry Alliance, reflective again of the increasing internationalisation of the water industry, with a primary aim of coordinating industry activities in Australia and overseas.

Through that alliance South Australian expertise is currently being utilised in Indonesia, the Philippines, Malaysia and China. If Opposition members do not like the news let them speak privately to members of the Water Industry Alliance who are now looking internationally. Let members opposite speak to representatives of those firms and ask them whether they think it is a good idea that we are now an externally, rather than internally, focused water industry.

Members interjecting:

**The Hon. M.H. ARMITAGE:** I hear some prattling from the other side of the Chamber. I would not expect some members opposite—

Mr Koutsantonis interjecting:

**The SPEAKER:** The member for Peake will come to order.

The Hon. M.H. ARMITAGE: —to ask questions of the Water Industry Alliance because they would be told the good news, and we all know that the Opposition does not want to hear the facts. A multimillion dollar six year contract has been awarded by SA Water to Schlumberger Resource Management Services which will create almost 200 jobs. Is that good news for South Australia? Yes. The introduction of a new water industry traineeship scheme reflects the fact that there is a growing demand for young people with the correct skills in the form of operations maintenance workers.

South Australia is the first State to introduce such a formal training program in this area, a fact which once again highlights our expertise and capability in water industry training and development. So, is that good news for South Australia? Obviously, yes.

The Hon. D.C. Wotton interjecting:

**The Hon. M.H. ARMITAGE:** I will give you the cue. **The SPEAKER:** Order! The Minister does not need any help from the member for Heysen.

**The Hon. M.H. ARMITAGE:** Absolutely; but nevertheless it was a particularly well focused question from the member for Heysen. The House would be delighted to know that the Gold Coast City Council has joined with the Water Corporation of Western Australia in selecting customer

service technology developed by SA Water. Currently, a delegation of SA Water representatives is exploring further— *Mr Foley interjecting:* 

The Hon. M.H. ARMITAGE: The member for Hart jests that these people are on the Gold Coast. That is clearly the level at which the Opposition addresses what is now an international water industry. The Opposition, and particularly the member for Hart, does not like the fact that we have changed what was a major loss leader under the Labor Government—

Mr Foley interjecting:

**The SPEAKER:** Order! I warn the member for Hart for the second time for continuing to interject when he has been instructed not to.

**The Hon. M.H. ARMITAGE:** —for which the member for Hart was then the chief sticker licker. The member for Hart—

An honourable member interjecting:

The Hon. M.H. ARMITAGE: Indeed; yellow stickers. Clearly, the member for Hart does not like the fact that we have changed the focus. Currently, a delegation of SA Water representatives is exploring further export opportunities to create further jobs and export dollars for South Australia in the Philippines and Indonesia. All this shows that there is really good news in the South Australian water industry. It is news that the Opposition does not like acknowledging, but the people employed in these jobs who have come to South Australia know only too well that this is a great success story.

# KENNEDY, Ms A.

Mr FOLEY (Hart): Given the Premier's statement to the House on 16 June 1998 that Ms Alex Kennedy was contracted by the Treasurer to work on the sale of power utilities, will the Premier confirm whether Ms Alex Kennedy was in the Cabinet room with Motorola documents and, if not, will the Premier tell the House with which freedom of information application Ms Kennedy was dealing? Following a report that Ms Kennedy had spent two days in the office in which the Motorola documents are being kept, a spokeswoman for the Premier was reported as saying that Ms Kennedy had been in the sixteenth floor Cabinet room looking at documents related to a media organisation's freedom of information request on another matter. The Freedom of Information Act requires applications under the Act to be dealt with not by Government PR consultants but by the principal officer of an agency or such other officers as directed by the principal officer.

The Hon. J.W. OLSEN: The freedom of information request relates to a recent overseas trip I undertook. The matter concerns vouchers and expenditure related to that overseas trip. The FOI request was submitted by a television station in South Australia.

# HOUSING TRUST, TENANTS' SATISFACTION

**Mr HAMILTON-SMITH (Waite):** My question is directed to the Minister for Human Services. What are the results of the national customer satisfaction survey for public rental housing?

The Hon. DEAN BROWN: Often enormous pressure is put on the South Australian Housing Trust, and this morning we heard further news of the high level of homeless youth throughout Australia. A customer satisfaction comparison with other States is now made every year. In respect of this

year's national customer satisfaction survey, which assesses the condition and location of houses, treatment by staff, property maintenance, the provision of information and the knowledge and competence of the staff involved, I am delighted to say that the South Australian Housing Trust has emerged as the national leader, with 73 per cent of the 1 731 South Australian people surveyed saying that they were either 'very satisfied' or 'satisfied' with the service provided by the Housing Trust.

I pass on my congratulations to all the staff of the Housing Trust. They have a difficult task, but I am delighted to see that they have emerged with what is by far the highest rating in Australia. In fact, only 11 per cent of people in Housing Trust homes in this State were dissatisfied. In South Australia, 73 per cent of tenants were either satisfied or very satisfied, compared with New South Wales on 69 per cent; Queensland on 67 per cent; Tasmania, 66 per cent; Victoria, 64 per cent; and the ACT 60 per cent. The other interesting feature is the enormous effort that the Housing Trust has been putting into urban renewal in the past couple of years, particularly in places such as Mitchell Park, Elizabeth North and Salisbury North.

In fact, the Housing Trust has just won a Royal Australian Planning Institute planning excellence award for the work that it has done in urban renewal, in particular for the work that it did at Mitchell Park and Rosewood. Again, I congratulate the staff on the work that it has done in that area, as well as the private consultants who have worked with the trust on those renewal programs. This highlights that South Australians can be very proud of the trust as a great South Australian icon which has delivered services to this State for more than 50 years. It has a very proud record, and I am sure that all South Australians would want me to pass on their congratulations to the trust for the service it delivers.

# **MOTOROLA**

Mr CONLON (Elder): Will the Premier guarantee to the House that the Solicitor-General will be at arm's length from any Motorola contract inquiry, that he will act only as the Government's legal representative and that he will not be involved in determining the findings of the inquiry? The Opposition has received advice from Mr Tim Anderson QC—the QC of choice of the Government only recently—that the Solicitor-General's role in the background to the Motorola contract inquiry would make it impossible to say that there was not at least some suspicion of a potential conflict of interest, if not an actual conflict, and therefore a lack of independence. Mr Anderson QC says—

The Hon. D.C. Kotz interjecting:

**Mr CONLON:** Are you moving up there too, Dorothy? Are you a runner too?

**The SPEAKER:** Order! The member will complete his question or I will withdraw leave.

Mr CONLON: Mr Anderson says that the advice from the Solicitor-General to the Opposition, in a letter dated 27 October 1998, is that the Solicitor-General acts only at the request of the Attorney-General, and therefore a significant protection to his independence was written before the Solicitor-General knew his terms of reference or instructions.

**The Hon. J.W. OLSEN:** Even the honourable member was half embarrassed about reading out the question and its explanation. Even he felt a little embarrassed about doing that—and so he should. The response to the honourable

member's question is the same as to the Leader of the Opposition.

# LOCAL GOVERNMENT GRANTS COMMISSION

**Mr MEIER (Goyder):** Will the Minister for Local Government explain to the House the nature of the review being undertaken by the South Australian Local Government Grants Commission, who is conducting the review, how much it will cost, and when it is likely to be completed?

**The Hon. M.K. BRINDAL:** I thank the honourable member for his question and acknowledge his interest in this matter, especially on behalf of the councils he so ably represents. It is a very timely question, as the review—

Members interjecting:

The Hon. M.K. BRINDAL: Do you want me to answer? It is very timely, as the commission is moving into the next stage of the review process, the first stage now being complete. During 1998 the South Australian Local Government Grants Commission embarked on a comprehensive review of the methodology used to calculate financial assistance grants. The commission encouraged input from all interested parties, including councils and the Local Government Association. Over 75 per cent of councils took up the opportunity either to provide a written submission or to participate in the five workshops held throughout the State. This is a very important matter, because about 25 per cent of the money available to local government comes in the form of financial assistance grants.

There are two components, and I think this dates back to the Whitlam era. There is a *per capita* component and a fiscal equalisation component, which is calculated to ensure that no resident of a council area is disadvantaged because he or she lives in a sparsely populated area or, indeed, in an area in which the council does not have a large population base.

**An honourable member:** Like Walkerville.

The Hon. M.K. BRINDAL: I am talking more of councils like Elliston that are so ably represented by the member for Flinders, and councils that have small population bases and large geographical areas to service. It is always difficult to calculate grants in those cases, because local government bodies are largely semi-autonomous and fix a level of service to their ratepayers that they deem to be appropriate to ratepayers living in the area, so there is no such thing as the average council and no such thing as the average basket of services. Nevertheless, in applying the grants the commission is constrained by the Commonwealth to try to work out what the average basket of services would be provided to the average ratepayer in the average council—a very difficult task but one on which the commission has worked, somewhat imperfectly, over more than a decade.

The commission realised that its methodology was flawed, and the flaw in the methodology starts with the application of the grant from the Commonwealth. South Australia has long been denied its fair share of financial assistance grants from Canberra. The grants are skewed, and skewed in a way that means that more money than is fair is applied along the eastern seaboard. This is a matter that I believe the Premier took up some time ago at a Premiers' Conference and a matter of which no member of this House should not be cognisant, whichever side of the House they come from. South Australia is being sold short by not getting enough grant money to start off with.

However, given those constraints, the new methodology is to be applauded. It has received support from the Local

Government Association, other grants commissions and the Office of Local Government at national level. It is being used as a model in other States and Territories of Australia.

**Mr WRIGHT:** I rise on a point of order, Mr Speaker. Surely this should be a ministerial statement.

The SPEAKER: Order! There is no point of order. The honourable member knows that the Chair has no control over a Minister's response unless the Minister starts to debate the issue, and I do not believe that he is debating the issue yet.

**The Hon. M.K. BRINDAL:** In fact, I am told that the new methodology sets national benchmarks for the allocation of grants. The outcome of the methodology, which embraces more squarely the concept of horizontal fiscal equalisation—

Mr Koutsantonis interjecting:

**The SPEAKER:** Order! The member for Peake will come to order.

**The Hon. M.K. BRINDAL:** As the member for Peake's council stands—

**The SPEAKER:** Order! The Minister should not inflame the situation by responding to interjections.

Mr Clarke interjecting:

**The SPEAKER:** I call the member for Ross Smith to order and ask the Minister to start winding up his reply.

The Hon. M.K. BRINDAL: I take your advice, Sir, and thank you for it. The grants are now being more squarely directed to those councils that are perceived by the commission to have either less capacity to raise revenue than the average council or greater expenditure needs than the average council. It is interesting that, prior to the review of the methodology, something like four councils in the whole of South Australia received the minimum per capita grant. It is equally interesting that, when the new methodology is progressively introduced—and it will be introduced over the next five years, because we did not want to skew the expectations—

An honourable member interjecting:

The Hon. M.K. BRINDAL: That is a good thing. We did not want to skew the expectations of councils too badly, so it is being introduced over five years. It is most interesting that the councils that progressively will have their grant decreased are city metropolitan councils—the capital city and the inner metropolitan councils. Indeed, at the end of the five years, the only councils in the metropolitan area that will receive greater than the base grant are those councils in developing areas, such as the Onkaparinga council and the councils of the Cities of Salisbury and Gawler—those councils where the infrastructure need is greatest. Councils such as Charles Sturt and Unley will receive only base grants—

**Mr CLARKE:** Sir, I rise on a point of order. The Minister has been droning on for seven minutes. It is a gross abuse of Question Time.

**The SPEAKER:** Order! The member for Ross Smith will resume his seat. There is no point of order. I ask the Minister to take heed of a comment that I made two or three minutes ago and start to wind up the reply.

**The Hon. M.K. BRINDAL:** I will do my best, Sir, but this is a complex question and I believe that the honourable member deserves a very full answer.

The next stage of the review process for the Grants Commission will be to conduct a review of local roads—and I believe that this is what the honourable member who asked the question is interested in—since local roads is a most important part of the function of the Grants Commission. The honourable member opposite who has nearly fallen asleep—

**Mr FOLEY:** Sir, I rise on a point of order. The Minister is clearly debating the question and should be ruled out of order

The SPEAKER: Order! I do not yet uphold that point of order. However, I would like the Minister to take heed of comments that the Chair has made over many weeks that there are some subjects which, if important, can be developed in the form of a ministerial statement whereas others need to be developed in the House. I ask the Minister to start to wind up his remarks.

The Hon. M.K. BRINDAL: I will. As an example, if the Ceduna council, which is seeking to expand its boundaries, were to do so under the current methodology, it would, in fact, skew the grant by some—

An honourable member interjecting:

**The Hon. M.K. BRINDAL:** —both—several million dollars

Members interjecting:

**The SPEAKER:** Order! The House will come to order. **The Hon. M.K. BRINDAL:** The review focuses on factors outside councils' control—

Mr Clarke interjecting:

The SPEAKER: Order! The member for Ross Smith.

The Hon. M.K. BRINDAL: —that contribute to the cost of road construction and road maintenance. These may include terrain, availability of road making materials, soil type usage, climate and drainage. The commission has sought (and I am winding up) the assistance of a consultant. It has employed Emcorp Pty Ltd, which is leading a consortium that is undertaking the review. The cost to the commission will be \$47 250, and it is anticipated that the review will be completed by April 1999, in time for the grant calculation for 1999-2000.

# MOTOROLA

**Mr CONLON (Elder):** My question is directed to the Premier. By what date will the inquiry into the Motorola contract report, and will the Premier give an undertaking to table the report in this House on the first sitting day after the report—

The Hon. D.C. Kotz interjecting:

**Mr CONLON:** I want to find out whether the Premier knows anything about his inquiry.

The Hon. D.C. Kotz interjecting:

**The SPEAKER:** Order! The Minister for Environment will come to order.

**Mr CONLON:** Yes. You are disturbing me, Dorothy. *The Hon. D.C. Kotz interjecting:* 

**The SPEAKER:** Order! I warn the Minister for Environment for interjecting after being called to order.

**Mr CONLON:** By what date will the inquiry into the Motorola contract report, and will the Premier give an undertaking to table the report in this House on the first sitting day after the report is handed down, together with all relevant documents?

**The Hon. J.W. OLSEN:** Certainly, in relation to the tabling of the report, yes.

# WETLANDS

Mr LEWIS (Hammond): My question is directed to the Minister for Environment and Heritage. What are the Government and the community doing to promote wetlands retention in this State, in view of the highlighting of the

importance of wetlands in the report entitled State of the Environment?

The Hon. D.C. KOTZ: The State of the Environment report has highlighted that wetlands are, indeed, a very important component of our landscape. I am sure we all realise that wetlands provide important habitats for animals that thrive in environments constantly undergoing the wet-dry cycles. Wetlands are a haven for many bird species, both for feeding and for breeding purposes.

Historically, many wetland systems have been drained and their hydrological foundations permanently altered. Notwithstanding that, much is now being done to conserve, enhance and, in some cases, create wetland areas across the State. At the local government level, Salisbury council has created some 20 artificial wetland environments within its boundaries, totalling 250 hectares in area, the largest being 114 hectares. Such artificial wetlands provide opportunities for localised habitat creation, stormwater pollutant traps, community recreation and, indeed, education. According to the council's own informative web site, research has demonstrated that the Greenfields Wetlands are home to some 150 bird species and are successful in reducing silt loads by some 80 per cent and nutrient levels by between 40 per cent and 60 per cent, which is an excellent initiative of which the community of Salisbury can certainly be justifiably proud.

Additionally, the South Australian Government has formed catchment water management boards to address water quality issues within catchment areas. As a consequence, many of the boards are either establishing or investigating the prospect of establishing artificial wetland environments, primarily to act as pollutant traps. And, of course, there will be additional environmental benefits to be had as a bonus.

To say that nothing has been done in the area of wetlands, as has recently been claimed, is an extremely gross and incorrect statement. The South Australian Government has been progressively surveying our wetland systems and implementing management strategies on a priority basis. The State Government is also undertaking many ongoing projects to improve the condition of our wetland environments. A total of 68 wetlands have been nominated for entry into the nationally significant Directory of Important Wetlands in Australia. The Government is also continuing the task of competently managing our wetland systems, with many management plans in place or being developed, and this includes the Coorong, Lake Alexandrina, Lake Albert and the Coongie Lakes. We are also entering into heads of agreement with other States that feed our wetland areas—most notably, Queensland—to ensure their ongoing viability.

The Natural Heritage Trust is also contributing to providing significant opportunities for South Australians to actively participate in wetlands development activities and, as part of the ongoing Upper South-East Dryland Salinity Project, some \$579 000 is being spent on the Wetlands Waterlink project in order to provide a balance between the retention of waters for environmental needs and protection of agricultural land from excessive water flooding—a major project with the South Australian Government. The Port Willunga Landcare group will be conducting a project that is worth some \$200 000 to undertake substantial revegetation that complements the Port Willunga Creek, expands native vegetation habitat, provides educational opportunities for the local community and establishes a firm foundation for the future natural resource management in the area.

Just north of Berri, Wetland Care Australia is managing a project worth approximately \$1.7 million at the Gurra Gurra

Lakes Wetland Complex, which again will create outcomes that increase the biodiversity, water quality, amenity and tourism potential of the area. The River Murray Catchment Water Management Board has contributed some \$197 000 to this project. In all, the Liberal Government's Natural Heritage Trust will facilitate approximately \$4 million worth of work to further enhance South Australia's wetland environments.

The thrust of the Government in addressing wetlands conservation is that the present condition of our wetlands is a result of past land practices and hydrological impacts. The Government is committed to pursuing a holistic, long-term approach which ensures that the future of our important wetlands systems is secure.

# GRIEVANCE DEBATE

**The SPEAKER:** The question before the Chair is that the House note grievances.

Mrs GERAGHTY (Torrens): Some of my constituents have complained to me recently that State and Federal funding cuts, particularly State funding cuts, which are to apply in the first term of 1999 to TAFE preparatory education courses, will have a severe impact on their lives. These people are distressed and disappointed about this decision. The South Australian Council for Adult Literacy and Community Bridging Services are likewise extremely concerned about these funding cuts as they are likely to disadvantage some of the most intellectually and financially disadvantaged people within our communities.

I am told that the cuts are directed at the access and equity entry level programs for students with disabilities. Evidently, institutions are being directed to cease enrolment of students in the Certificate of Preparatory Education 1 and the recently introduced Certificate 1 in Personal Management, which are specifically designed for students with learning and intellectual disabilities. These cuts are totally socially unjust. There are no other education programs for people with learning and intellectual disabilities, once these TAFE education programs have gone. What will these people do to increase their educational skills when these courses are no longer available? It will be a terrible loss to many people in the community, and I am speaking on behalf of a number of people in my own community.

More than 120 people access the special education programs alone at the Torrens Valley TAFE. Some of these courses include computing, reading, writing and basic selfhelp courses. The skills that people in the community gain from these courses assist them with many of the problems that they face on a day-to-day basis. Being able to communicate effectively and to express oneself is incredibly important, and they are able to achieve that by undertaking these courses. Their self-esteem increases, their confidence levels grow and it is a major benefit to them. Apart from the fact that they have increased their learning skills, it also increases their independence. Cutting these special education programs will effectively condemn anybody with a learning disability to a life lacking in education. They will never have the opportunity to improve their position and they will always be reliant on other people.

I have a very special constituent who is currently attending a special education course at the Torrens Valley TAFE. She is a Housing Trust tenant and a volunteer at NECAP. She is a very shy person and was encouraged to enrol in the special education program by friends within our community. Her confidence and self-esteem have improved enormously, as have her communication and literacy skills. She now answers the telephone at NECAP, which is a major step for her. She recently received a letter informing her that the cuts will end the course that she is enrolled in. It has devastated her, because she looks forward every week to attending her classes. It was her intention to improve her education and then apply the skills that she learnt within the community.

When she spoke to my assistant in my office she said, to use fairly closely her actual words, 'Why has the Government cut funding for these courses when the Government says to us that it is important to improve our education and training? What am I to do now?'

The Hon. G.M. Gunn: You ruined the State—

**Mrs GERAGHTY:** These are very valid questions and perhaps the Minister could answer them for my constituent.

The Hon. G.M. Gunn: You ruined the State—

**Mrs GERAGHTY:** The member for Stuart does not care about what is happening to people in the community at all.

The SPEAKER: Order!

The Hon. G.M. Gunn interjecting:

Mrs GERAGHTY: You don't care at all, and I am happy to tell my constituents that.

**The SPEAKER:** Order! The honourable member's time has expired.

Mr VENNING (Schubert): Today I pay tribute to a man who showed great integrity and strength of character while facing great adversity in his life. The man I speak of is Mr Rod Abel, who passed away on 23 September this year. For members who are not aware, I inform them that Mr Abel was the Managing Director of Tribond Pty Ltd, the company that operated Marineland, as some members opposite would know because they were involved in that fiasco. Mr Abel lived at Palmer and was my valued constituent before he moved to Gumeracha. I visited him at his home several times and I have examined the copious records that he left in relation to this whole sad saga. I spoke to him at great length and we shared social times together. I hope that I am not being presumptuous in calling him a friend.

The Labor Government of the late 1980s basically bankrupted Mr Abel's company through maladministration and failure to honour its promises. Mr Abel was about to sell his business to the Chinese investment company, Zhen Yun, which was to redevelop the whole Marineland site to include a hotel and convention centre as well as the upgraded Marineland. Because the Labor Government reneged on its deal and made a complete mess of the whole thing, the Zhen Yun company was scared off, the final result being that the Chinese Government black-banned South Australia—we have hardly seen them here since—forbidding any further involvement by any Chinese company in South Australia. There was also a large payout to the company.

Mr Abel was a very talented man in many ways. A New Zealander by birth, he was a very talented sportsman and was involved with the All Blacks. He became a world authority on marine life and was sought the world over. He was very active in the Atlantis Aquatic Centre in the United States of America and on one occasion he met Her Majesty the Queen.

He was headhunted to come here and make the existing Marineland a world-class facility.

I hold a full history of the then Labor Government's dealings in this matter. To give people great expectations and encourage them to leave their current position and come here, only to cut them down at the eleventh hour, is cruel and unjust. The Marineland infrastructure was known to be defective before the Government encouraged Mr Abel to come here. The Government got him here, drew attention to the problems and eventually had it condemned. The Government destroyed a man of great drive, ambition and energy, and that arguably affected his health.

If that Government had supported him and honoured its commitments, one can only imagine the confidence that would have shown to overseas investors, in particular. Marineland would still be a valued part of South Australian tourism, the vacant land would have been utilised with a magnificent complex, and the subsequent dolphin saga would never have happened. That is all history, and we can ponder what might have happened, but that does not get away from the fact that Mr Abel and his family were robbed by the then Labor Government.

It is a sad day when men and women of vision and drive who possess the resources to do the job are thwarted by blinkered Governments which cannot see past their own bellybuttons. Self-interest was all it was. Principle gave way to politics: no honour, no honesty and no compassion. What happened is well known, and some members in here know what happened, particularly the member for Hart, who was chief of staff and policy adviser to Minister Lynn Arnold. Many senior public servants are aware of the events. It is a pity that we never staged a forum where all could be revealed. I am sure that former Premier Lynn Arnold would have put the record straight. Many other members, past and present, also know the facts, as I do: Heini Becker, Julie Grieg and many others. Mr Abel left many detailed records, much of it on computer. He was very skilled and he was the first person I saw using the software DragonDictate.

I salute the late Mr Rodney Abel and convey my deepest sympathy to his family, his wife Anne and his children Grant and Sandra. They have lost a wonderful husband and father, and South Australia has lost a gifted and talented businessman.

# want to deal with the water price rises announced yesterday and indicate how they affect my constituents. The Opposition put out a response yesterday pointing out not only that the

Ms HURLEY (Deputy Leader of the Opposition): I

put out a response yesterday pointing out not only that the 20 per cent savings promised by the Premier at the time of privatisation have not been delivered but that the average household is paying 28.44 per cent more for its water. However, in today's grievance, I want to talk about its effect on my constituents. The media release put out by the Hon. Michael Armitage, the Minister responsible, said that average consumers will pay less than 20¢ a week more for water under prices for the 1999-2000 financial year. That is \$10.40 a week, and obviously to the Minister that is scarcely worth bothering about. However, to my constituents, particularly pensioners and those families battling on a very low income, that is a significant price increase. Only last week a pensioner was in my office complaining about the \$7 impost under the Water Catchment Board levy, saying that he would find it difficult to pay that amount.

As it happened, we were able to get some savings in his council and water rates by getting his house revalued downwards, so that offset the \$7 Water Catchment Board levy. However, this very week, we find the Minister now imposing another \$10.40 charge on that pensioner. I want to point out to the Minister how much this affects the poor people of our community. To people like the Minister and his family it is something they can easily afford and something that does not cause them any concern. However, we now have not only water price rises but an existing sewerage levy and an environmental levy, and these fall equally on everyone regardless of their income. Obviously, by their very nature, those levies and charges are a much greater impost on those people with low incomes, and it means that pensioners and the poor are slipping further and further behind.

Only this morning I heard that Australian pensioners fared badly compared to their European OECD counterparts. This is something not acknowledged by the Government as it sniffs away at all the benefits available for pensioners and as it imposes charges such as this. The excuse for this water increase was that inflation would involve a maximum 2.5 per cent increase, when inflation for the last year for South Australia was 1.5 per cent, plus an additional 1 per cent increase to fund vital water quality improvement initiatives, described in due course as filtration plants that have been built in the Riverland. Despite this, the Minister has stood up many times in this House and boasted about—and again he did it today—the profitability of SA Water as compared to some losses made under Labor Governments.

He talks about efficiencies made by this Government. What it all means, of course, is that, year after year, water prices have been increased. It is a matter not of efficiencies but simply of imposing further taxation on the South Australian public—further taxation which impacts worst on people who can least afford it. The Minister should never again stand up in this House and talk about increased profits for SA Water: it is money going straight into the Government's pocket. He has also said, referring to the Riverland plants, that private interests have put them up under a buildown-operate scheme, but on Channel 2 last night he said, 'Despite that, we can't expect those private companies to actually pay for the building.' Here we have a deal where we have a build-own-operate structure in which the Government pays an annual fee to those companies involved, yet they now want extra capital for building those plants.

**The SPEAKER:** Order! The honourable member's time has expired.

Mr SCALZI (Hartley): I would like today to talk about an important occasion—the celebration vesterday, in the Campbelltown Nursing Home, in my electorate, of a resident's 100th birthday. It was really a great occasion in which to be involved, since Mrs Concetta Vitobello was certainly enjoying her 100th birthday, and it was a delight to be there. The Campbelltown Nursing Home is part of the Adelaide Senior Citizens Village Incorporated, looking after the welfare of aged Italian people. The nursing home, which has 35 residents, is part of the Italian Village at St Agnes, with 38 nursing beds, 40 hostel units and 25 dementia care beds. Montrose Nursing Home at Magill has 40 nursing home beds, and both the Italian Village and Montrose are part of the Adelaide Senior Citizens Village Incorporated. I would like to commend the Campbelltown Nursing Home for its care of the aged and for the provision of care in a special way for Australians of Italian background.

Among those who attended the celebration were the Hon. Julian Stefani and my colleague—also from the Upper

House—Carmel Zollo, and various community leaders. Also in attendance were Marcia Fisher, the Chief Executive Officer of the Adelaide Senior Citizens Village; Shirley Constable, Site Manager of Montrose Nursing Home; Baiba Kerrison, Director of Nursing, Italian Village; and, of course, Mass Genovese who is the Director of the Campbelltown Nursing Home. Mrs Vitobello was born in Puglia, Italy, on 7 December 1898. Married at the age of 22, she has three sons and two daughters and has always been a home carer. She has 11 grandchildren and 19 great grandchildren, and it was pleasing to see her family and extended family and friends there yesterday. She became a widow in 1958 and migrated to Australia in 1961. She was admitted to the Campbelltown Nursing Home on 3 September 1991 and, prior to her admission to the nursing home, she was at Furia Rest Home, Prospect.

As I said, her celebration included many family members, and she also had a family function at the Marche Club, Paradise, on Sunday 6 December and, of course, yesterday's birthday celebrations at the nursing home. Apart from the family and friends living here, there were Mrs Vitobello's son and daughter-in-law from Bari, Italy; and there was another son from Queensland. It is a great occasion to celebrate a 100th birthday. I congratulate Mrs Vitobello and her family—her children, grandchildren and great grandchildren.

I especially commend the staff at the nursing home and the volunteers who work there as well. I also commend the Italian village at the Adelaide Senior Citizens Village Incorporated for the care they give to the residents and the way in which they are culturally sensitive to the specific needs of Australians from Italian background. I am very much aware that in the three nursing homes I have visited there are residents from diverse backgrounds—and it is not just Italian background. Those nursing homes, which I have visited on several occasions and at which I have attended functions, have a close association with the church in providing the spiritual needs of the residents. Concerts are held, for example, at St Agnes, and I thank the sisters who play a special part in caring for the aged in that nursing home.

I congratulate Dr Carmine De Pasquale, who has played a very important role in establishing the Italian village at the Adelaide Senior Citizens Village, and thank him for his countless efforts over the years in ensuring that migrants from Italian background have had their needs catered for. As we all know, when people reach a certain age many of them revert to their original language, and it is difficult for many of them to communicate unless their specific needs are catered for.

**The DEPUTY SPEAKER:** Order! The honourable member's time has expired.

Ms BEDFORD (Florey): I rise in the House today to speak about public education in South Australia and to voice the concerns of my constituents who are becoming increasingly distressed at the direction the Government is taking in relation to funding for public schools. As a parent of a child who is currently within the public school system, I have nothing but praise for teachers who have been responsible educators, despite the trying circumstances in which they have been placed. I understand full well the trials of being a teacher, being related to and acquainted with many through my family and in my professional life. I also understand how much harder the job is when the Government is not supportive of their role. I acknowledge the long-standing commitment of the teachers of this State and the parents who support

the system. I also support the work that the Australian Education Union does in representing its members in the ongoing struggle with the Government to recognise the priority of public education and the role that teachers have in our communities.

Parents can never resist telling their children that their school days are the best days of their lives and that they should value the time that they have at school. We tell them it is an opportunity to be almost free of responsibility, to make friends, to learn and to set goals for the future. How can we really expect our children to value their educational experience as much as we want them to if we cannot prove to them that we value it by supporting their schools, their teachers and their curriculum? It is in our best interests to support the teachers as much as we can so that they can provide the learning experiences for our children that we would expect.

We all remember the struggle the teachers had in 1996 to gain additional staffing, better conditions and improved wages. It was hoped that this time around commonsense would prevail upon the Government to enter enthusiastically into negotiations with teachers to ensure a better deal for children. However, looking at the Government's offer and cries of 'This is all we are offering', it seems more likely that teachers will have to resort to other means to further negotiations. The Government's threat to withdraw flexible and special education unless its offer is accepted is nothing less than blackmail. I say that teachers should never be blackmailed by the Government into accepting an offer which sells educators, parents and children short. With breathtaking audacity the Government has asked teachers to accept that cuts totalling \$145 million over the next three years have nothing to do with their conditions and their enterprise

It asks teachers to accept that, in future, all professional development will be done in teachers' own time. It asks them to sign up for nearly four years to an agreement that will erode teachers' conditions and give children less support. It asks them to accept a reduction in relief teaching wages. It asks them to accept the imposition of increased local school management and ignore the fact that the ministerial working party on this very issue is still to report on its findings. Most importantly, the Government has ignored the teachers' union's claims which aim to help our system face a future where quality education for all will be vital. This is an unfair situation which causes massive uncertainty for schools and, ultimately, would impact most greatly on children, especially those with special needs.

Schools are rightly sceptical that the flexible special education and early intervention staffing won in the current agreement will not be provided at the beginning of next year. The school year is rapidly coming to a close and over 1 000 people remain uncertain about their futures, let alone the programs they are providing to students. All these so-called reforms have been processed without adequate consultation with teachers, principals and the school community. I support teachers asking questions about the impact of these changes on the requirements for training and development and I support relief teachers questioning the effect the budget reduction strategies will have on their employment prospects. At the very nub of the issue is the fact that teachers are bargaining for the students as well as themselves.

Teachers and other educators are fighting for their jobs, jobs that will provide support programs for students. Their

action is not about wages: it is a desperate last attempt at ensuring the Government does not cut these jobs at the beginning of the 1999 school year. This valuable additional staffing initiative was won by teachers in 1996; why should they let it go? Public education has seen cuts every year in the life of this Government, and the public is sick of it. This bargaining with teachers cannot continue to occur in a climate of threats and blackmail. I call on the Government to release next year's staffing so that educators and students are not forced to suffer in this process. Our teachers are our education system's greatest asset, and I believe that we all have a responsibility to ensure that their jobs are respected and that they are consulted appropriately when changes are introduced that may affect the way in which they work. I urge everyone in this House, for our children's sake, to support teachers of this State in their claims.

Mr MEIER (Goyder): On Sunday 29 November, my wife and I had the pleasure of being present at the official opening of the Wheal Hughes Copper Mine at Moonta. There is quite a history to this mine. It was a commercial mine a few years ago. I will describe it in layperson's terms as a large open cut in a fairly narrow confine, which, at the bottom of that open cut, goes into an underground mine with a shute large enough to take a heavy vehicle. The mine then extends many metres underground. It was a full commercial project in the 1980s, and I think it might have ceased operation in about 1990 or shortly thereafter.

Mines in that area are subject to the problem of water entering them, and the Wheal Hughes mine was no exception. Once the mining company ceased operating, the mine filled up with water and, to all intents and purposes, one would have assumed that it would never be used again. However, thanks to the efforts of the then District Council of Northern Yorke Peninsula (now District Council of the Copper Coast), a decision was made to seek to reopen the mine as a tourist attraction. The council and the Federal Government provided significant money and even the State Government gave a small amount of money to help assess the viability of that occurring.

Things have progressed significantly since that time. In fact, now it will be the only underground mine available for people in South Australia to inspect. I believe that Roxby Downs has limitations for those people who want to go down a mine. If the average tourist turned up at Roxby and said they wanted to go down and look at a mine, they would be told that that was not possible. The Wheal Hughes Mine will be available for inspection throughout the year by any interested person.

The wonderful thing about it is that not only has it received Government support from all levels but also it has received support from the private sector, and particularly Western Mining Corporation. Some time ago I was pleased to take a deputation from the Copper Coast to seek funding in particular for the Visitor Centre. The Visitor Centre was a special project undertaken as a result of a competition run by the Copper Coast council for university students to design a building that would be suitable for visitors to check in, see what copper mining was all about, obtain their equipment, and proceed down into the mine.

I must compliment the winners of that competition, namely students Tom Vinall and David Saunders from the Louis Laybourne-Smith School of Architecture at the University of South Australia. In fact, as the paper recorded, they were responsible for the innovative design of the

building, and the structure was built by students under the direction of university staff. This Visitor Centre is quite an attraction. It was formally opened by Mr Pearce Bowman, Executive General Manager, Copper Uranium Division, Western Mining Corporation Limited, on Sunday 29 November; and, at the same time, Senator Robert Hill, Minister for the Environment, opened the Wheal Hughes Copper Mine.

It is wonderful to see a project like this that has resulted from a combination of people working towards it. Also present on that occasion was the Hon. John Olsen, Premier of South Australia, when he launched Resources Week on that occasion. Many dignitaries and other people were present for this opening. I say to all people of South Australia: here is a mine that can accommodate visitors at any time to see the workings of a mine underground. It will continue to expand. They hope to go down further once they have pumped out more water. It is wonderful for South Australia.

# CRIMINAL LAW CONSOLIDATION (CONTAMINATION OF GOODS) AMENDMENT RILL.

Received from the Legislative Council and read a first time.

# The Hon. M.H. ARMITAGE (Minister for Government Enterprises): I move:

That this Bill be now read a second time.

I seek leave to have the second reading explanation inserted in *Hansard* without my reading it.

Leave granted.

In February 1997, the Standing Committee of Attorneys-General (SCAG) asked the Model Criminal Code Officers Committee (MCCOC) to review the different legal regimes dealing with product contamination across Australia and to develop a model for a consistent approach across the country and its jurisdictions to the problems posed by product contamination. MCCOC was established in June 1990 by SCAG. It consists of one representative from each Australian jurisdiction, usually the principal legal adviser to the Attorney-General on criminal law and related issues. MCCOC released a Discussion Paper including draft legislation in May 1997 and a Final Report to SCAG in February 1998, also including draft legislation. SCAG authorised the release of that Final Report in March 1998

Product contamination is a thankfully rare and regrettably not unknown phenomenon. It has the capacity to be very serious indeed. Some of the more infamous examples of what can occur will show the House the need for this legislation.

In 1983, seven people died in the United States after consuming a mild analgesic called Tylenol. Eventually, a person was convicted of fraud and blackmail offences in relation to making a demand for \$1 million in return for cessation of the poisoning of the product, but it was never clear that that person committed the contamination.

There have been similar events in Australia. In 1991, a person threatened to contaminate toothpaste in Sydney and Perth unless paid \$250 000. There was no evidence that the threat was ever carried out, but the company recalled and withdrew the goods from sale. In 1996, a person in Victoria clipped the heads off pins and put the headless pins in food in supermarkets. He made no demands or threats and the only motivation ever discovered was that the person concerned was seeking retribution against society as a whole because he had earlier been convicted of attempted murder.

In February, 1997, it was reported that letters had been sent to authorities in Queensland and New South Wales threatening to contaminate Arnott's biscuits. A demand was made about police involvement in the conviction of a named person for murder. The threatened contamination was sufficient to kill a child weighing less than 10 kilograms. Arnott's decided to withdraw their product from over 200 stores in the two States. Arnott's share price fell 25¢,

reducing the value of the company by about \$35 million. About 300 casual staff were stood down and Arnott's destroyed 800 truck-loads of biscuits. This year, threats were made to contaminate Sanitarium products in South Australia.

These examples reveal quite clearly the potential damage involved or potentially involved in these incidents. People may suffer harm or death from the contaminants quite indiscriminately; the victim may suffer huge losses, in stock, goodwill and share price; there will be general public anxiety and alarm; people may lose their jobs; and copy cat offences may result.

Social functioning in the modern age turns on interdependence. Most people rely on the integrity of the production and packaging of good and services, particularly medicines, food and drink, by others. Few people now produce all of their own food and water, and other necessities of life. If there is a threat to the integrity of that interdependence, then the structure of modern society is itself under threat. This threat is magnified many-fold when the goods or services are in themselves dangerous, such as mass and individual transportation, chemicals and safety products. This interdependence is the key to the special criminal quality of these incidents.

There can be little doubt that the existing criminal law covers much of the anti-social behaviour which occurs in these incidents. The offences of public nuisance, threats, blackmail/extortion, fraud, conspiracy to defraud, various offences of property damage, endangerment and murder/manslaughter may well apply and usually do apply given the particular facts of the case. But these offences are not sufficient on their own terms in some cases. The reasons are that first, there are documented cases in which none of these offences occur; and second, the application of the existing offences to some incidents do not adequately reflect the gravity or the essence of the offence in its threat to the general public welfare. In the Arnott's case, for example, the demand was not for money or any other financial advantage but the re-investigation of a murder conviction. That may not suffice for extortion in some Australian jurisdictions. The Model Criminal Code Officers Committee has documented similar examples in which the existing criminal law may not apply or may be inadequate.

In general terms, the criminal law covers the protection of the integrity of the individual as well as can be expected. The offences of homicide, threats, fraud, extortion and so on will deal with the personal consequences of this kind of behaviour. However, existing criminal law is not directed at the kinds of general public harm occasioned in such cases—the public alarm and anxiety, the destruction of stock, the damage to the goodwill and share price of the company and so on. MCCOC therefore recommended the creation of offences which are directed to the causing of public alarm and anxiety and/or the causing of economic loss. MCCOC took the view that the criminal law had a gap in focus on such general consequences.

The original statutes aimed at this behaviour were passed in the United States as a result of the Tylenol incident and were then adapted in the United Kingdom. Similar legislation has been passed in Victoria, Queensland and New South Wales. MCCOC noted the development of this legislation over time, consulted widely, and fashioned its recommendations to represent the best modern proposals.

The Bill introduced into the Parliament is in general consistent with the national model within the limits of differing drafting styles. However, the South Australian draft differs from the model in three vital substantive respects.

First, the Model Bill recommended by MCCOC applies in relation to conduct of varying descriptions (acts, threats etc) with the intention either of (a) causing public alarm and anxiety or (b) with the intention of causing economic loss (through public awareness of the contamination). The Bill as introduced applies in relation to conduct of varying descriptions with the intention of (a) causing public alarm or anxiety or (b) causing loss or harm to another (by any means) or (c) gaining a benefit for himself, herself or another. This last is a large extension. It is not in the Model Bill because making a threat (for example) with intention to make a gain is classic extortion and normally should be dealt with by that offence. The problem is that South Australia has an antique extortion/blackmail offence which does not properly cover the situations which may arise. For example, current extortion offences do not appear to cover the person whose gain is simply the venting of a grudge or seeing the victim squirm. The Bill as introduced tries to cover that with an extended definition of 'benefit'.

Second, the MCCOC Model Bill is confined to 'contamination of goods' (albeit widely defined) but the Bill as introduced extends

also to 'acts prejudicing public health or safety'. The definition at the beginning of the Bill shows how broad this is. Put simply, the offence is getting into what would normally be called "sabotage". While South Australian law contains a traditional and modern set of offences against property in the *Criminal Law Consolidation Act*, it does not yet contain an offence, which might be akin to arson, which deals with massive damage to economic interests or property by the sabotage, or threatened sabotage, of public infrastructure and other instances of a similar scale. That being so, the Bill as introduced differs from the Model Bill in extending coverage to that kind of incident.

It is appropriate to fill these gaps, even at the price of overlap, because the possible conduct and its consequences may be so very serious. If and when a law against sabotage can be enacted and reform of the general law of extortion/blackmail can take place, it may be necessary to amend this law so as to reduce any undesirable amount of overlap and clearly delineate the scope of the offence. The need for national consistency in this area is clear and obvious. It will be kept firmly in mind as the law in this and related areas develops.

I commend the Bill to the House.

Explanation of Clauses

Clause 1: Short title

Clause 2: Insertion of new Part

This clause inserts a new Part in the Criminal Law Consolidation Act as follows:

# PART 7A

# CONTAMINATION OF GOODS AND OTHER ACTS PREJUDICING PUBLIC HEALTH OR SAFETY

259. Interpretation

New section 259 inserts definitions relevant to the new Part. 260. Unlawful acts of goods contamination or other acts prejudicing the health or safety of the public

New section 260 creates an offence in certain circumstances where a person—

- contaminates goods or commits some other act prejudicing public health or safety; or
- · makes it appear that-
  - · goods have been, or are about to be, contaminated; or
  - some other act prejudicing public health or safety has been, or is about to be, committed; or
  - makes a threat to contaminate goods or to commit some other act prejudicing public health or safety (a threat includes a threat to be implied from conduct or a conditional threat); or
  - falsely claims that goods have been or are about to be contaminated, or some other act prejudicing public health or safety has been, or is about to be, committed.

Acts prejudicing public health or safety extend (by the definition) to interference with public infrastructure for water, electricity, gas, sewerage etc., public transport or communication systems or other facilities on which the health or safety of the public is dependant. The public is defined to include a section of the public including, for example, consumers of particular goods.

The new offence applies if the person commits such an act intending—

- to cause prejudice, to create a risk of prejudice, or to create an apprehension of a risk of prejudice, to the health or safety of the public; and
- by doing so-
  - to gain a benefit for himself, herself or another (benefit is widely defined); or
  - · to cause loss or harm to another; or
  - to cause public alarm or anxiety.

The maximum penalty provided is imprisonment for 15 years.

**Ms WHITE** secured the adjournment of the debate.

# SUMMARY OFFENCES (OFFENSIVE AND OTHER WEAPONS) AMENDMENT BILL

Received from the Legislative Council and read a first time.

# The Hon. M.H. ARMITAGE (Minister for Government Enterprises): I move:

That this Bill be now read a second time.

I seek leave to have the second reading explanation inserted in *Hansard* without my reading it.

Leave granted.

There has long been considerable community concern about the inappropriate possession and use of weapons in society. Sometimes, the general level of concern is given additional fuel by a spectacular incident. The Australian community will not quickly forget the massacre at Port Arthur. But sometimes the level of community concern is brought about incrementally, as the result of a lot of minor matters which, taken together, are perceived to amount to something about which action should be taken.

I do not want expressions of genuine concern about perceived problems to be confused with the occasional outburst or panic or hysteria, often ill-informed, which can arise. I have been aware over the several years that the Leader of the Opposition has taken every opportunity to try to stir up community fears about the use and prevalence of knives in our community. This reached ridiculous heights recently, when an incident was reported in which a teenager was said to have been attacked by a wooden paper knife in the Festival Plaza. This apparently prompted the Leader of the Opposition to call for a ban on the carrying of all knives, presumably of whatever material they are made.

This Government will not sponsor changes to the law based on knee-jerk reactions to isolated and unrepresentative incidents. It is simply irresponsible to call for legislation banning knives without considering the consequences. Recent legislation in New South Wales about the selling of knives to minors was such a gross overreaction that the Government was forced to exempt from the criminal law plastic knives, commonly provided by fast food outlets, from the ban by passing a regulations saying so.

The realities of criminal knife use are quite different from that which some would have the community and the Parliament believe. For example, in respect of assaults coming to police attention in 1997, 92.5 per cent involved no weapon, 2.9 per cent a knife, 0.1 per cent a firearm and 5.4 per cent were 'other'. In respect of rape, 564 (97.4) involved no weapon, 8 (1.4 per cent) involved a knife, 3 (0.5 per cent) involved a firearm and 4 (0.7 per cent) other. The fact is that the use of any weapon in the committing of offences is small. For example, in 1997, 781 (68.2 per cent) robbery offences involved no weapon, 177 (15.4 per cent) involved a knife, 75 (6.5 per cent) a firearm and 113 (9.9 per cent) other. Of the 25 460 total offences against good order, 25 388 (99.7 per cent) involved no weapon, 6 (0.02 per cent) a knife, 11 (0.04 per cent) a firearm and 55 (0.30 per cent) other.

But the Government is not complacent about the general issue of dangerous weapons. It has been quietly reviewing the current law and consulting with the Commissioner of Police in order to see whether any changes should be made which will improve the safety of the community in a realistic way. This Bill, and the Regulations which will follow it, are a result of that process of review and consultation.

The existing law about dangerous weapons can be found in the *Summary Offences Act* and Regulations. I leave aside offences dealing specifically with firearms, because they clearly form a separate category. Section 15 of the *Summary Offences Act* contains an offence of carrying an offensive weapon without lawful excuse. An offensive weapon is currently defined to include 'a rifle, gun, pistol, sword dagger, knife, club, bludgeon, truncheon or other offensive or lethal weapon or instrument'. 'Carrying' includes 'have on or about one's person'. The applicable maximum penalty is \$2 000 fine or 6 months imprisonment. The onus of proving lawful excuse is on the accused. The offence may be committed anywhere. In general terms it can be said that the law is that some things are offensive weapons in and of themselves—such as a flick knife—and anything at all, any every day object—may become an offensive weapon if it is carried or employed in a way or with an intent that makes it an offensive weapon. So, for example, a bottle, a screw-driver, a cricket bat—all can be offensive weapons depending on the circumstances.

Section 15 of the Summary Offences Act also contains an offence prohibiting the manufacture, sale, distribution, supply, dealing in, possession or use of a 'dangerous article'. Dangerous articles are listed in the Dangerous Articles Regulations. That list is a long one. It includes hunting slings, catapults, pistol cross-bows, blow guns, flick-knives, ballistic knives, knuckle knives, daggers, swordsticks, knuckle dusters, and self-protecting sprays and devices. It follows that only listed kinds of knives can be 'dangerous articles' for the purposes of the section. Other knives can, of course, be offensive weapons. The applicable maximum penalty is \$8 000 fine or 2 years imprisonment. The onus of proving lawful excuse is on the accused. The offence may be committed anywhere.

I want to emphasise that this outline makes it quite clear that the law as it stands in South Australia is *not soft* on people who carry weapons or articles, such as knives or other objects, which can be used as weapons. The penalties noted above are clear enough evidence of that. The inconsistency of the position taken by some critics of the Government's position is shown by the fact that it is not so long since the Government was under attack by people who thought it was too tough and wanted *more exceptions* for people to carry weapons to defend themselves.

In reviewing the structure and content of these offences, the Government began with a submission from the Commissioner of Police noting that, in 1994, the Australian Police Ministers Council agreed upon a list of weapons that they thought should be treated as dangerous articles in every Australian jurisdiction. There are three types of weapon that are on the Commissioner's list, but are not in the South Australian list of dangerous articles. They are:

- nunchakus or kung-fu sticks;
- · shuriken throwing knives, star knives and similar devices; and
- any article which conceals a knife or blade but which disguises the fact that it conceals a knife or blade.

It is sensible for South Australian law to be amended to bring these dangerous weapons into the legal scheme of prohibition.

But since we had to look to amending the law, the Government decided to review the whole scheme of dealing with dangerous weapons. This Bill is the result of a part of that review. Another result of the review will be reformed regulations. What follows is an account of the reforms embodied in the Bill.

Some debate has arisen about the legal meaning of the word 'carry' in the offensive weapon provision (section 15(1)). Although 'carry' has not been defined exhaustively by the statute, (only to include 'to have on or about one's person'), the word seems to connote something less than mere possession, which is a very wide concept indeed. In Holmes v Hatton (1978) 18 SASR 412, the accused was found asleep in his car with a machete stowed in the groove between the driver's seat and the door in a position readily accessible to the accused. In this case the question whether the accused was 'carrying' an offensive weapon was not in dispute. However, in Coleman v Zanker (1991) 58 SASR 7, the police found an ordinary knife in the car of the accused. There was some dispute about the exact location of the knife and the case was decided on other grounds. But Olsson J in passing remarked that, if the knife was on the floor behind the driver's seat, it could not be said that the accused was 'carrying' it. Olsson J said that the notion of 'carrying' the weapon meant having it on or about one's person 'in the sense of being in the immediate vicinity of a person so as to be directly accessible to that person'

The purpose of the offensive weapon offence is to criminalise access to a weapon which is dangerous because it is accessible at any given time to a person with unlawful intentions. The notion of 'possession' is far too wide for this purpose. One may possess an item which is completely inaccessible and which poses no threat to the safety of any person or the public. One may, for example, 'possess' an item held in a bank's safety deposit area. Indeed, the notion of 'possession' was so vague and wide that common law judges refused to employ it in common law offences and so all possession offences are statutory. On the other hand, it is clear that, although like possession, the notion of 'carrying' is one of fact and degree, some statutory guidance would be helpful in determining the scope of the prohibition. For example, it should be the case that a knife within reach in a car is 'carried' by the occupant of the car, even though it is not on or 'about' his or her person. The definition of 'carry' is amended to make this more clear.

It is proposed to amend the scheme of control over dangerous weapons. Examination of the existing list of 'Dangerous Articles' in the *Dangerous Articles Regulations* suffices to show that there are few occasions on which some of them should be tolerated in our community. Many of these devices are things that are designed primarily or exclusively for use against humans. Others are more tolerable, having possible practical utility for some legitimate purposes.

It is proposed to create two different classes of regulated articles. Those articles which are considered to be more tolerable will be kept in the dangerous articles list and will remain subject to section 15(1b) of the Act. The defence of 'lawful excuse' will be retained in relation to these articles. Those which are regarded as less tolerable will be labelled 'Prohibited Weapons' to underline their undoubted status. A new offence will be created to prohibit these. It is proposed that, in relation to these items, there be no defence of 'lawful excuse'. The only defence will be by exemption from the operation of the system.

There will, therefore, be a system of exemptions. It follows that persons who commit an act of manufacture, sale, distribution, supply, dealing in, possession or use of a 'prohibited weapon' will be guilty of an offence unless they can bring themselves within an exemption. The onus will be on the defendant to prove the exemption. The lists of dangerous articles and prohibited weapons will be prescribed by regulations.

There will be two kinds of exemption: general exemptions and specific Ministerial exemptions. The general exemptions are to be prescribed in the Act. They largely speak for themselves. The power of Ministerial exemption is also contained in the Act. Although some attempt has been made to specify in advance the conditions under which these generally prohibited weapons may be used lawfully in our society, it is simply impossible to do so by legislating general categories without so opening up the opportunities for evasion of the law as to render the strength of the prohibition otiose. It is therefore proposed that the list of general exemptions be supplemented by a power of Ministerial exemption exercised on application for individual cases or for a class of cases.

The exemptions are intended to be interpreted in the light of the avowed policy of the changes proposed: that is, in light of the avowed intention of the Bill to restrict the use and existence of these dangerous weapons to a status of prohibition and to be tolerated only in the clearest of socially acceptable circumstances. These lines are very hard to draw and impossible to draw with exactness by even the closest attention to the words of the statute. For example, it is quite clear that the law should not prohibit the use of even prohibited weapons where they are used in good faith and for, example, for the purposes of a genuine public performance of skill and in the ordinary course of the arts. For example, should the magician David Copperfield have a part of his performance which requires the use of an implement which comes within the technical definition of a dagger, it should not be the law in this State that he, or someone on his behalf, should have to apply to the Minister for an exemption in order to do what he does all over the world. On the other hand, the exemption ought not to be interpreted so that any member of the public can claim his or her possession of a dagger is exempt merely because he or she claims to be training to emulate David Copperfield or for some other similar tenuous reason. The point of having a prohibited weapons list is to make it clear that the weapons listed in it are absolutely prohibited except for the best of reasons.

It should be noted that the Act provides that these general types of exemption may be supplemented by regulation.

The Act also gives the Minister power to grant specific exemptions individually or as a class on application. This will be done by declaration. It should also be noted that the Minister may delegate this power to exempt.

It is also proposed to create a new offence of possession or use of a dangerous article, or a prohibited weapon in any place, or carrying or having control of a loaded firearm or, in essence, a firearm together with a loaded magazine, in a public place, unless it is done in a safe and secure manner. This will give the Police an alternative charge where a person puts forward a lawful excuse that is credible, but the item is being carried in a manner inconsistent with that excuse. The Victorian Act contains a similar provision.

In summary, it is proposed that the new law will be structured as follows. There will be four gradations of offences according to seriousness, from the least to the most serious as follows:

*First*, the offence of possession or use of a dangerous article or prohibited weapon in a manner that is not safe and secure.

Second, carrying an offensive weapon without lawful excuse.

*Third*, manufacturing, selling, distributing, supplying or otherwise dealing in or possessing or using a dangerous article without lawful excuse.

*Fourth*, manufacturing, selling, distributing, supplying or otherwise dealing in or possessing or using a prohibited weapon unless exempted, there being no defence of lawful excuse.

It must be noted that the Bill does not extend the powers of police. They are already adequate to enforce the law. Changes to powers of police should only be made if there is a demonstrated deficiency and a compelling public policy argument to change the delicate balance of those powers within our society. There is no such argument in respect of weapons.

Lastly, a matter of detail. The opportunity has been taken to convert all of the penalties expressed as divisional penalties in the Act to penalties by fixed amounts. This has been a continuing program for several years and the divisional penalties are replaced by the terms of imprisonment and financial equivalents which have been in use as determined by Cabinet for a number of years.

I commend the Bill to the House. Explanation of Clauses

Clauses 1 and 2:

These clauses are formal.

Clause 3: Amendment of s. 15—Offensive weapons, etc.

This clause amends section 15 of the principal Act. Paragraphs (a), (c) and (d) update penalty provisions. Paragraph (d) reduces the penalty for an offence relating to a dangerous article to reflect the fact that the old category of dangerous articles is now divided into 'dangerous articles' (regarded as being less dangerous) and 'prohibited weapons' (regarded as being more dangerous). Paragraph (b) makes an amendment that is consequential on the new definition of 'carry' inserted by paragraph (m).

Paragraph (e) inserts the new offence of manufacturing etc. or possessing or using a prohibited weapon. New subsections (1d) and (1e) provide defences for an exempt person in relation to the new offence. The categories of exempt person referred to in subsection (1d) are set out in new subsection (2a) inserted by paragraph (g). An exempt person in one of these categories has a defence against possession or use of a prohibited weapon but not against manufacture etc. of such a weapon. The categories of exempt persons referred to in subsection (1e) (see new subsection (2b)) are declared by the Minister or by regulation and may provide a defence to the offence of manufacturing etc. a prohibited weapon.

New subsection (1f) makes it an offence to carry or have control of a firearm or magazine or to have possession of or use a dangerous article or prohibited weapon in an insecure or unsafe manner. New subsections (2e) and (2f) provide for delegation of the Minister's power to declare persons to be exempt persons.

The remaining paragraphs of the clause make amendments of a consequential or supporting nature. The term 'dagger' is removed from the definition of 'offensive weapon' because it is proposed to declare daggers to be prohibited weapons by regulation.

Clause 4: Amendment of s. 85—Regulations

This clause amends the regulation making power of the principal Act to provide regulation making powers required by section 15 as amended.

#### SCHEDULE

Further Amendment of Principal Act

The Schedule updates the penalty provisions of the principal Act. The Schedule also repeals section 84 which is redundant because section 5 of the *Summary Procedure Act 1921* now determines what constitutes a summary offence.

Ms WHITE secured the adjournment of the debate.

# TRANSADELAIDE (CORPORATE STRUCTURE) BILL

Second reading.

# The Hon. DEAN BROWN (Minister for Human Services): I move:

That this Bill be now read a second time.

I seek leave to have the second reading explanation inserted in *Hansard* without my reading it.

Leave granted.

This Bill progresses the Government's bold plans to achieve the highest standards of public transport service and safety for South Australians into the 21st Century.

Over the past five years our single minded goal has been to provide more South Australians with greater access to more transport services for every dollar spent by passengers and tax payers. Savings have been realised without compromising existing services, new services have been introduced such as the free City Loop and accessible buses and we have arrested the decline in patronage that has plagued public transport since 1982.

The Passenger Transport Act 1994 has been the vehicle for the major changes that the Government has implemented in the delivery of public transport services. The Act created the Passenger Transport Board, which is responsible for policy development, service design and the contracting of service delivery.

The Act also repealed the State Transport Authority (a monopoly operation) and created TransAdelaide, a Government owned public transport service provider, pursuant to Schedule 2 of the Act.

TransAdelaide has secured 75 per cent of the total bus market, as well as the train and tram operations, through participating in the

tendering process and by direct negotiations with the Passenger Transport Board.

The process of competitive tendering for service delivery will recommence early in 1999. As a business owned by the Government, it is now most important that the Government and TransAdelaide employees generally are confident that the business is so structured to be in the best position to present competitive bids for future contracts, as and when called by the Passenger Transport Board.

To this end, the Government recently reconfirmed the continued public ownership of TransAdelaide as an operator of public transport. The Government also supported the appointment of an Advisory Board, reporting to the Minister, to oversee the implementation of TransAdelaide's Strategic Plan and to prepare for the next round of competitive tendering.

The Bill seeks to maximise TransAdelaide's business opportunities by providing a commercial framework for its future. The Bill establishes TransAdelaide as a public corporation under its own legislation, separate from the Passenger Transport Act 1994. The move is designed:

- to ensure TransAdelaide is seen as an independent operator in a competitive market;
- to reinforce the separation between the policy development and contracting role of the PTB and the service delivery role of TransAdelaide; and
- to assist in developing a more commercially focussed, robust performance culture within TransAdelaide.

The Bill extends the current functions of TransAdelaide to include the capacity: 'to initiate or develop business opportunities associated with the provision of passenger transport and other services within its fields of expertise, and to undertake other activities that may contribute to the economic benefit of the State or otherwise involve an appropriate use of its resources.'

The Bill also complements all the work that TransAdelaide has undertaken in the past year to prepare and implement a Strategic Plan which provides for TransAdelaide;

- to develop a commercial business framework and approach for bus, train, tram and infrastructure management;
- to improve the delivery of public transport services to better meet the needs of customers;
- to pursue business alliances which enhance TransAdelaide's position in the market;
- to create an organisational culture in which employees believe in and actively contribute to TransAdelaide's success; and
- to reduce overheads.

In conclusion, I acknowledge the energy, enthusiasm and contributions of all TransAdelaide staff to the future of TransAdelaide as a robust operator committed to customer service. The Government, in line with TransAdelaide's Strategic Plan, firmly believes that the corporatisation of TransAdelaide is an essential next step in the progressive path that TransAdelaide has taken in recent years to be a best practice provider of public transport services—and ultimately will give TransAdelaide the best opportunity to compete successfully for business in the future.

I commend the Bill to all Honourable Members.

Explanation of Clauses

Clause 1: Short title

This clause is formal.

Clause 2: Commencement

The measure will be brought into operation by proclamation.

Clause 3: Interpretation

This clause sets out the definitions required for the purposes of the measure

Clause 4: Continuation of TransAdelaide

TransAdelaide is to continue in existence as a body corporate with perpetual succession and a common seal.

Clause 5: Application of Public Corporations Act 1993

TransAdelaide is now to be a statutory corporation to which the provisions of the *Public Corporations Act 1993* will apply.

Clause 6: Ministerial control

This clause restates that TransAdelaide is subject to control and direction by the Minister.

Clause 7: Functions

This clause sets out the functions of TransAdelaide, which include to operate passenger transport services, to engage in related activities, and to initiate or develop appropriate business opportunities.

Clause 8: Powers

As is now normally the case, it will be stated that TransAdelaide has all the powers of a natural person together with any powers conferred by statute. Various powers currently contained in schedule 2 of the *Passenger Transport Act 1994* are to be restated.

Clause 9: Common seal and execution of documents Specific provision will be made for the affixing of TransAdelaide's common seal in a manner consistent with the proposal to establish a board for TransAdelaide.

Clause 10: Establishment of board

It is intended to establish a board of directors of not more than five persons as the governing body of TransAdelaide. Directors will be appointed by the Governor. The Governor will be able to appoint deputies.

Clause 11: Conditions of membership

A director will be appointed for a term not exceeding three years.

Clause 12: Vacancies or defects in appointment of directors An act of the board will not be invalid by reason only of a vacancy in its membership or a defect in the appointment of a director.

Clause 13: Remuneration

A director will be entitled to remuneration, allowances and expenses determined by the Minister and payable from the funds of TransAdelaide.

Clause 14: Board proceedings

A majority number of directors will form a quorum of the board. A decision carried by a majority of votes cast by directors present at a meeting of the board will be a decision of the board. The directors will be able to conduct telephone conferences. The board will be required to ensure that accurate minutes are kept of its proceedings.

Clause 15: Staffing and operational arrangements

TransAdelaide will continue to have a chief executive known as the "General Manager". As is currently the case, a member of the staff of TransAdelaide will not be a public service employee.

Clause 16: Acquisition of land

TransAdelaide will be able to acquire land under the *Land Acquisition Act 1969*, with the approval of the Minister, in order to secure or manage infrastructure reasonably required or warranted for the provision of passenger transport services.

Clause 17: Use and protection of name

The board may conduct its operations under various names after consultation with the Minister. The Crown will continue to have a proprietary interest in the name TransAdelaide, and will also have such an interest in any name adopted by the board. It will be an offence to use these names in the course of any trade or business without the consent of the Minister.

Clause 18: Limitation on disposal of undertaking of TransAdelaide

This clause will require Parliamentary approval to enter into certain agreements relating to the sale, lease or management of the undertaking of TransAdelaide.

Clause 19: Regulations

The Governor will have the power to make regulations for the purposes of the Act.

Schedule

TransAdelaide will no longer be constituted under schedule 2 of the *Passenger Transport Act 1994*, and will no longer be a corporation sole.

Ms WHITE secured the adjournment of the debate.

### **NURSES BILL**

Adjourned debate on second reading. (Continued from 18 November. Page 283.)

Ms STEVENS (Elizabeth): I rise with pleasure to give the Opposition's lead address on this very important piece of legislation. There are some 23 000 registered and enrolled nurses in South Australia, nurses who constitute the single largest group of health professionals in this State and nation. The Bill has raised a great deal of public interest and concerns. I know that I, and certainly my parliamentary colleagues, have received many letters, phone calls and comments from individual constituents as well as community groups and other organisations in relation to this Bill. As well as that, the issues in relation to the Bill and the consultations and discussions about an update and review of the present Act have been going on for a number of years.

In the previous term of this Government, there were considerable meetings, conferences, rallies and letters. I also received a petition signed by over 5 000 nurses raising concerns in respect of some of the core aspects of the then draft Bill. I note that many of those core issues that the 5 000 signatories addressed in that petition still remain in the current Bill, and the Opposition will be seeking to amend those core issues of concern that are held by so many nurses. We have also received quite a number of letters containing information, suggestions and concerns from midwives who have particular concerns about the Bill and particular issues which they wish us to address. I will be referring to those as I move through my speech.

We all know that nursing is a very important profession. We all know that nurses are held in very high esteem by the public. All of us who are politicians would be envious that, whenever there is a survey of the general public in relation to which professions they hold in greatest esteem, in all of the ones I have seen nurses are either first or second, whereas politicians are generally either first or second from the bottom! We all know that nursing is a very important profession. The public considers it a very important profession, so this Bill, because it regulates this profession and issues in relation to nursing and nursing care, is also very important.

The care provided by nurses is critical to the health and well-being of our community. Their work is very intimate and they often care for us when we are most vulnerable. There would not be one of us here today whose life has not been touched by a nurse, either when we have needed the care ourselves or when it has been required by a family member or friend. Nurses also often work with the most vulnerable in our community, or during a time of their life which makes them vulnerable. This includes the old, the frail, those with mental illness, the very young, and those subjected to great trauma or duress.

Nurses provide not only 24 hour care but are also the patient advocate. So, nursing work must be regulated to ensure that we can effect the highest standard of care and the greatest public protection. The Opposition acknowledges that the current Act, which dates from 1984, does need updating and is not adequate to ensure that the community's needs for high standard nursing care today are met. In looking at some of the main features of the Nurses Bill, as discussed in the information pack, as well as in the Minister's second reading explanation, I will mention a few areas about which we are pleased.

We are pleased to see the provision of positions to the board that can be held by people who represent the interests of consumers. We agree with the Minister's comment that this increases transparency and accountability. We agree that this should lead to enhanced public confidence in the system. We believe that all boards should recognise that there is a place for consumer interests and that all professions need to embrace that. We are also pleased that professional standards developed by the board will be provided to all registered enrolled nurses, and that those standards will be available for perusal at the board's office and also published in the Government *Gazette*.

We have some problems in the area of registration and enrolment, but I will address those concerns later. We are pleased to see that stringent controls will be placed on the use of title and holding out, although we will be moving an amendment in the particular case of holding out with restricted registration. We are pleased to see the board empowered to approve or recognise courses of education and training—this change recognising the shift of nursing education from hospital-based examinations to the higher education sector where nurses are now prepared from contemporary practice.

We also note that the document talks about the provision being broad enough to enable the board to approve a training course which would, for example, support the direct entry of midwives into the profession. I certainly know from speaking with midwives that, in their view, there is a need for direct entry qualifications. I understand that Flinders University and the University of South Australia intend to provide courses to allow for direct entry, and I also note that the board will be able to consider those courses. Later in my speech I will raise areas of concern, but I would now like to talk about the stakeholders with whom we have spoken.

We have spent a lot of time talking with nurses and their representatives. They are the people who have approached us. They have sent us many letters, made many telephone calls and had meetings with us. We have responded to those approaches and drafted our amendments around the concerns expressed. I will go into them in detail later but, in brief, the concerns relate to enrolled nurse supervision, specialist qualifications, proceedings and disciplinary processes, the composition of the board and the regulation of unqualified workers who perform nursing work. Other issues concern separate registers, holding out provisions in relation to restrictions on regulation and five year recency of practice.

As I said, we received many letters and telephone calls from midwives. Just today I received a very large bundle of petitions to put before the House, which I will do today. Essentially, as a group, midwives have particular concerns. I have received many different letters from midwives but one letter, which really encapsulates their issues, states:

I am writing to you regarding the revised Nurses Bill that was recently tabled in Parliament. I am a midwife currently employed in the public sector and have grave concerns for the ramifications for childbirth in this State if this new Nurses Bill is passed. As you would be aware, the Nurses Board are endeavouring to have a single register for nurses eliminating separate requirements and qualifications for midwifery. In effect this would mean that nurses and not midwives necessarily could be employed and legally attend to women during the childbirth phases of their lives. This indeed would be a tragedy to both the women of this State and to a profession that has survived thousands of years.

We in South Australia have one of the highest caesarean section rates in the world. The World Health Organisation recommends a rate of 10 to 15 per cent, and our State rate is around 23 to 25 per cent, being higher in the private sector. Research throughout the world identifies that midwife care is safe for women and their families and their intervention rates are less, leading to less surgical requirements for women. Midwives and obstetricians working in a collaborative relationship provide appropriate cost effective care, with midwives the lead carer in normal pregnancy and obstetricians in high risk situations.

In this era of cost cutting and strained budgets new options of care need to be considered and implemented. A conference was held recently here in Adelaide titled 'Midwifery Models of Care: An Australian Perspective', convened jointly by the Women's and Children's Hospital and Flinders University and supported by the Health Commission. Many speakers from around the country discussed different models of maternity care involving midwives in caseload programs and in collaboration with their medical peers. These methods of health provision are cost effective and safe and require further investigation and implementation. If we are to view childbirth as a normal process in a woman's health perspective, direct entry midwifery is a natural progression to free midwifery from the sickness model of nursing not bury and lose midwifery in the medicalisation of childbirth. There are many countries that have direct entry midwives, for example, Britain, Canada, the Netherlands and New Zealand who with a single nurses register would be unable

to practise here in Australia. There are many other arguments for the opposition of this new Nurses Act, including . . .

I will not read the arguments because I have already mentioned them: they are the same as those I mentioned in respect of nurses. I make the point that some issues relating to midwives who are acting as a group and who have approached us in relation to the Bill differ from nurses in general. However, I believe that there are enough areas of overlap in terms of their concerns that we can address them in this Bill. Upon completion of the debate I would be very happy to talk with both groups to see where we are at in relation to what they hope to achieve and whether we can go further.

I now return to the major issues, and certainly those issues that have been brought to our attention by nurses in general. Given that the Nurses Board is answerable to the Minister, it is therefore also answerable to the Government of the day. It should come as no surprise that the flavour of the Bill is in line with Government policy and is essentially about the deregulation of nursing. While flexibility and different practice settings are important, it can collide with the protection of the public interest in ensuring standards of care. This is a major theme of our amendments. We are saying very strongly that the public interest must be protected. I was very pleased to see that the first function of the board relates to protecting the public interest.

The Hon. Dean Brown interjecting:

Ms STEVENS: The Minister is saying that it is paramount. I agree, and nurses agree that it is paramount; but if it is paramount we believe that the Bill needs amendment along the lines that we suggest. The Opposition believes that the Bill appears to be contradictory. On the one hand, it indicates that the board will allow inexperienced or untrained care workers to practise on the public with no control but, on the other hand, a qualified registered or enrolled nurse will be placed under even greater scrutiny than at present. The Bill seems to be more about administrative expediency than a vehicle to ensure that the public interest is protected. This is why we are convinced that a number of areas need to be amended before the Bill is passed.

Before discussing the detail of the Opposition's concern, I must comment on the application of national competition policy to this issue. It has been stated that the review of the Nurses Act was conducted in compliance with national competition policy. That principle requires that an Act or regulation should not restrict competition unless (a) the benefits of any restriction to the community outweigh the costs and (b) the objectives of the legislation can be achieved only by restricting competition. Any legislative review arising from competition policy, particularly in an area such as registration of health professionals such as nurses, therefore requires extensive consideration of matters of community or public interest, and I cannot emphasise that enough.

It is not evident on the publicly available materials what balance of consideration or weight was given to various interests and components of the review, other than the consideration of the competition principles agreement. In particular, the basis upon which many aspects of the Nurses Act 1984 have been retained and various aspects removed is unstated in the second reading explanation. It is therefore difficult to identify changes to the current Act that arise directly from consideration of competition policy as opposed to changes proposed for other reasons.

I now turn to areas of the Bill that cause the Opposition concern, following our consultation with stakeholders.

Members will see that these are represented in the amendments that have been tabled. First, we are concerned that there are no definitions of the terms 'midwife', 'psychiatric or mental health nursing', 'nursing', or 'nursing practice'. The Bill seeks to protect titles from use by unqualified persons but does not define them. I noted that the competition review recommendations suggested that some of these definitions be included in the regulations. We believe that they should be defined in the legislation, up front in the Act, so that they are not open to misinterpretation and are there for all to see. What is the point of protecting the title of 'midwife' as the Bill seeks to do if there is no definition of what a midwife does? That also applies to a mental health nurse, nursing or nursing practice, and we will move an amendment defining those aspects.

The Opposition has some concerns about the composition of the board. We believe that the Chairperson of the Nurses Board should be a nurse. We also believe that the nurse who holds this position should be a nurse currently practising, a nurse who would have this Act applied to him or her. We note that a nurse holds the position of Chairperson under the current Act, and we believe that it is entirely appropriate that the Chairperson of the new board be a nurse. Under the Bill before us only five of the 11 members of the board are to be nurses; that is, the professionals to whom this Bill applies will not hold a majority on their own board.

I was interested in that aspect and I looked up the memberships of some of the other boards, such as the Medical Board and the Dental Board. In both those cases, where both those boards have eight members, six of the eight are doctors or dentists. It is interesting that on this board only five of the 11 members are to be nurses. So, we will move an amendment to change that situation. The Opposition believes that there should be at least six, that is, a majority of nurses, on their own board.

The purpose of registration boards has been to allow for self-regulation of the professions. How can we argue that this principle is maintained when the proposed board could vote in favour of a professional practice matter with every single nurse opposed to it? I think that is clear. We note that there is a provision for a doctor on the board, and we received very strong opposition to this proposal.

The Hon. G.A. Ingerson interjecting:

Ms STEVENS: I will tell you. This proposal received very strong opposition. There is such a wide range of areas that no one doctor could possibly represent the range of specialities or breadth of current medical knowledge. There is already provision for the board to co-opt additional members with relevant expertise if needed. Furthermore, there is a range of health professionals involved in contemporary health care delivery, so it is not appropriate to limit only to doctors the representation of other health professionals with overlapping scopes of practice. It is interesting to see that there is to be a doctor on the Nurses Board but there is not a nurse on the Medical Board, and it will be very interesting to see, when we have the Medical Practitioners Act before us, whether the Government will be insisting on the inclusion of a nurse on the Medical Board as it has insisted the other way around. The Opposition has an amendment to remove that provision, and we propose to increase the consumer interest component from three to four. As I said before, we believe that this gives greater scope for the board to do the job that it is required to do. In the event that it needs specialist medical practitioner input, it can call for it.

Clause 12 refers to the staff of the board. The requirement that persons employed by the board be under industrial conditions not less favourable than those applying to public servants or persons employed in the South Australian Health Commission has been removed by this Bill, and we believe that it should be retained. We understand that the intent of the proposed clause is to allow the board to enter into agreements with its staff that may be more generous than those in place in the public health sector. Such outcomes are possible with the current provisions in the Act. However, the proposed clause in the Bill does not ensure that the conditions of employment must be not less favourable than those in the public health sector, and we will move an amendment that seeks to do this.

We have quite a range of concerns in relation to clauses 18 and 46 (proceedings before the board and investigatory powers), and I note that there are also some changes to these clauses in the Minister's amendments. We understand that the proposed changes relating to these clauses have been introduced in an attempt to assist the board and the Registrar to expedite the processing of matters that are of a particularly serious nature, given that it can take considerable time before a quorum of the board can be constituted. However, the proposed increase in the powers of the Registrar are clearly at the expense of nurses' access to natural justice.

The current Act provides for the board to conduct inquiries, hearings and other proceedings and to exercise various powers associated with the gathering of information and evidence. The effect of the Bill as it now stands is to increase powers for the Registrar, who will act as the investigator and prosecutor, but who will also be given powers to determine whether or not a nurse should be suspended from the register if they fail to comply with the Registrar's directions in relation to their powers of investigation: that is, a nurse can be deprived of the ability to work, and this can occur at the pre-inquiry stage, without any hearing. We believe that this is completely unacceptable. The Registrar is an employee of the board, not a member of the board. The Registrar is the person who lays complaints before the board: that is, the Registrar is the prosecutor. Yet this Bill would give the Registrar the power to be prosecutor as well as judge and jury. Such an outcome would be a gross denial of natural justice and at odds with the practice of other areas of law

Clause 18(4) increases the powers of the Registrar to summons a person, require their appearance, require them to produce to the Registrar any relevant records or equipment and require them to answer any relevant question. Under section 16 of the current Act, this power resides in the board. The provisions in the Bill are most unfair, in our view. The Registrar is a party to proceedings involving nurses. The Registrar is the party who makes the application for an inquiry as to incapacity, incompetence or unprofessional conduct, and acts as the prosecutor in such proceedings. If this provision remained as it is now, it would allow the Registrar to require nurses to provide a range of evidence, including answering any relevant questions, and then to utilise their answers and any other evidence that was obtained for the purposes of subsequently proving any incapacity, incompetence or unprofessional conduct in the later inquiry.

This is particularly inappropriate, given that it is clear from the parameters of clause 18(4) that these powers exist in relation to pre-inquiry investigations, that is, before a nurse knows the nature of the charges against them. The legal effect of the provisions in clause 18(4) to 18(6) is that, if a nurse

failed to comply with the Registrar's directive as outlined, the Registrar could file a certificate signed by him or her indicating the failure or refusal and seek an order from the Supreme Court under clause 18(7), without having any legal requirement to refer the matter to the board for discussion. That is where our concern lies.

Furthermore, compliance is enforced through clause 46(2), which allows the Registrar to suspend the registration or enrolment of a nurse who fails to comply with any orders under the section. The suspension is to remain in force until compliance occurs. This represents an enormous investigatory power for the Registrar. These powers previously existed only in relation to the board—in particular, the power to compel compliance that resides with the board under section 40(2) of the current Act. It is entirely unfair for one party to such proceedings to be empowered under the Act to compel a person who may subsequently be the subject of an inquiry to comply with such broad investigatory powers.

This power is not even given to the police in the context of criminal prosecutions. It is inappropriate and unnecessary for the Registrar to have such powers. These powers should be retained as powers of the board, as is the case under the current Act. This is consistent with the nature of criminal proceedings and upholds the principles of natural justice. The Opposition seeks amendments to clauses 18 and 46 in relation to those matters. I will not go into the details, as the clauses will be before us in the Committee stage. I am pleased to see that, to a large degree, the Minister has concurred with those concerns.

As I said, the issue that was raised in relation to the increased powers of the Registrar was the need to expedite proceedings. We believe that there is plenty of power in the Act, with any amendments that we might make, to enable a quorum of only three people and the holding of meetings by means other than all members being present in the same room at the same time.

Clause 4, in relation to enrolment, is a big issue and a very serious matter for the Opposition and for the nurses and midwives who approached us. This clause provides for an exemption from the requirement for enrolled nurses to be supervised by registered nurses under certain circumstances. Parliament is being asked by the Government to make a fundamental change to the structure of nursing in this State, which has national implications, and without any of the detail having been worked out.

The provisions of clause 24(2)(b) enable the board to allow an enrolled nurse to practise without the supervision of a registered nurse under certain specified conditions. The nursing profession is overwhelmingly opposed to this amendment at this time. This opposition came through constantly in our letters from and contacts with nurses: in fact, as the shadow Minister, I did not hear any nurse say that they approved this proposal. All the contacts—and there were many of them—were against it. There are no models currently available anywhere else in Australia for this at this time: this is a first for the country. Changes in South Australia will influence other States, and it is our responsibility to ensure that any changes we make are for the benefit of the Australian community as a whole.

It is important for members to understand the different and complementary roles of registered and enrolled nurses. A registered nurse undertakes a three year university degree and is licensed to practise without supervision. An enrolled nurse undertakes a one or two year course through TAFE or private vocational training providers, and is licensed to nurse under

the supervision of a registered nurse. The Australian Nursing Council sets national competency standards for both registered and enrolled nurses, and these are the national standards that a nurse must meet in order to become licensed. These standards for licensing of nurses are based on the requirement for enrolled nurses to be supervised by registered nurses.

The requirement for supervision of enrolled nurses is common to most nursing Acts in Australia and recently has been retained in Queensland legislation, following the undertaking of a national competition policy review. The retention of such a provision in Queensland, and its current consideration in other States, raises the issue of how the proposed provision—removing the requirement for supervision—facilitates that object referred to in the report to the 1998 Bill of providing for national consistency in regulation and registration. The South Australian Competition Policy Consultation Draft describes the supervision requirement as a significant restriction upon the employment of enrolled nurses and the employment decisions of health units. Save for a reference to the Nurses Board of South Australia Final Issues Paper 1998 re the supervision of enrolled nurses, there is no discussion in either the consultation draft or the report to the Nurses Bill 1998 as to the basis for this conclusion.

Nor has any community cost benefit analysis been undertaken, in either the review or the report, identifying that the factors enshrined in the key principle relating to legislation restricting competition have been considered and given due weight in such analysis. That principle requires that an Act or regulation should not restrict competition unless (a) the benefits of any restriction to the community outweigh the costs; and (b) the objectives of the legislation can be achieved only by restricting competition. Furthermore, the Bill fails to provide any details of how exemption might operate or under which circumstances.

It is relevant to consider the actual number of enrolled nurses as part of the group who would be affected. In fact, only a small number of persons are employed in the home, doctors' rooms, day surgeries and industry who are currently employed where there are no registered nurses also employed. That does not appear to be a factor that has been taken into account in removing the supervision requirement. The failure of the Nurses Bill 1998 to limit the manner in which the board may impose conditions on practice leaves open the possibility that anti-competitive conditions may be imposed in the exercise of the discretion to approve practice without supervision.

In the longer term, the Opposition is also concerned that, given competition policy requirements, the board would not be able to sustain restrictions on the exemption from supervision to only certain practice settings. That raises the possibility that enrolled nurses would be under pressure to work without adequate support from registered nurses in a wide range of practice settings, such as acute hospitals, for which their basic education does not prepare them.

The Hon. Dean Brown: That is an outrageous assumption.

Ms STEVENS: The Minister can respond. I am just putting a point of view. It is part of the role and function of a registered nurse to assess and plan the care needs of the patient or client. Enrolled nurses participate in and contribute to that process but they do not have primary responsibility for assessing or planning care. There would be an increased risk to public safety if enrolled nurses were forced to work without adequate support from registered nurses, for example, in domiciliary care, hostels, day surgeries and doctors' rooms.

Furthermore, it is inappropriate for nurses to be supervised by doctors or any other health care professionals apart from nurses. It would be like an oral surgeon telling a dentist what to do. Medical practice and nursing practice are two separate, autonomous professions in their own right, although there are areas of overlap and they clearly work in collaboration. If it is permitted for doctors to supervise enrolled nurses, that raises the issue of accountability to the relevant statutory authority. Is the supervising medical practitioner accountable to the Nurses Board in any disciplinary proceedings for errors made by the enrolled nurse, or is the enrolled nurse accountable to the Medical Board?

We believe that the real drive behind this change is by a small group of employers who want to reduce costs by using cheaper classifications of nurses. There have been messages of new opportunities for enrolled nurses at the expense of currently unlicensed workers, but not much has been said about the loss of registered nurse positions as cheaper enrolled nurses replace them. I would like to hear the Minister's response to that, because what I have said has been said to me by many nurses. Clearly it is an issue of concern. This is ultimately a step towards greater deregulation of the nursing work force. Many nurses believe that the real aim is the deregulation of enrolled nurse practice at some point in the near future. That is a step that the Opposition will not support.

**The Hon. Dean Brown:** Have you read the Act?

Ms STEVENS: I have read the Act. Another area of concern for the Opposition relates to clause 29, which provides that the board's approval is required where a person has not practised for five years. The Bill retains the requirement that a registered or enrolled nurse who has not practised nursing for five or more years must not practise nursing without first obtaining the approval of the board. Nurses have been lobbying for the removal of this provision from the current Act.

Each and every nurse should undertake ongoing staff development and continuing education in order to maintain and update their nursing skills. One of the obligations of being accepted into a profession is the personal and individual commitment to ongoing staff development. In addition, the requirement for every nurse to maintain their own level of competence is enshrined in the national nursing competency standards and in the national code of conduct. The Nurses Board can and does use these standards to remove a nurse's licence to practise or to refuse to grant a licence to a nurse when there is evidence that a nurse cannot meet the standards.

It is more likely that a nurse who has not practised for a number of years will need further education to update their skills and more than a nurse who has been out of an area for a shorter time, for example, when on holiday. However, there is no magic number or length of time whereby anyone can say definitively that after that time a nurse is not safe. No-one knows. It is a range of factors, including the area of practice, how much has changed during the nurse's absence, the skills of the nurse, and the quality of ongoing staff development that the nurse has access to, that determines competence, not length of time. The issue is the arbitrary time of five years, which has no evidence to support it.

It is not in line with current standards, which require all workers to be able to demonstrate the ability to meet competency standards, irrespective of length of training or amount of time in practice. The five-year requirement is an unnecessary hurdle. Neither doctors nor lawyers have such a requirement. An amount of time in practice bears no relation to

competency to practise. It is interesting that in researching this clause we noted that not all States in Australia have this requirement for nurses. There is no evidence that in New South Wales, for example, which does not have this requirement, there are hordes of incompetent and dangerous nurses causing harm to the hapless New South Wales community and who do not comply with the national competency standards and the national code of conduct in relation to their own competence.

Furthermore, as the Minister would know, nationally the nurses boards have recognised that provisions such as the five-year rule are inadequate and obsolete to ensure nurses' competence. During 1998 a national project has been conducted by the Australian Nursing Council, which has been developing indicators of continuing competence. It is expected to deliver recommendations on alternatives to the five-year recency of practice within the next few months. The Opposition has an amendment which removes that clause, but we hope that, before this Bill proceeds through the other place, the information from that national project is put into the Bill to bring it up to date.

The Opposition has some concerns about clause 38, which provides for the illegal holding out concerning restrictions or conditions. Neither the current Act nor the Bill addresses the issue of the format required for the certificate of registration. In the past, nurses who were subject by the board to conditions in relation to their registration—for example, a disability or any other limitation which affects their ability to practise—simply had a notation to that effect on their registration card. However, the format for registration for persons with conditions is now an A4 document setting out the entirety of their conditions. That can be severely embarrassing for a nurse, particularly in relation to mental health problems, for example, from which the nurse has largely recovered but simply needs an annual check-up by her doctor and where given the okay is deemed well enough to practise.

We seek an amendment to specify that the registration certificate does not set out in detail conditions applying to the nurse's practice but refers to the fact that conditions exist. The requisite level of regulatory requirement could then be obtained through ensuring that nurses are required to disclose, if required by the board, the details of conditions applying to their registration.

We have an amendment along those lines for consideration in Committee. We believe that our amendment is a fairer solution in that it ensures that people are not holding out inappropriately, and it is fairer as it makes quite clear both to the nurse and to the board precisely what that nurse has to disclose and to whom that nurse needs to disclose that information. This would ensure that the board, considering all the factual material on the specific case, puts in place appropriate and transparent disclosure requirements so that the nurse knows precisely what she or he is required to do.

As I mentioned before, we have some concerns in relation to clause 47—provisions as to inquiries. The Bill provides for the board to undertake inquiries in relation to a nurse's conduct or competence. A quorum of only three members, including any specially appointed member, is required, when under the current Act the quorum is six members. However, there is no requirement in the Bill for any of the three persons to be a nurse. The current arrangements are acknowledged as being cumbersome and time consuming. However, they have ensured the participation of nurses in all inquiries. So, while we support the thrust of clause 47, we certainly seek, through an amendment, the inclusion of at least one nurse to be

present on board inquiries into nurses' conduct and competence

We have very great concerns in relation to the removal of requirements for nurses to hold specialist qualifications or to be supervised by nurses holding specialist qualifications to work in midwifery or mental health. These requirements are in section 25 of the current Nurses Act. One of the principles for the review of the Nurses Act was that of protection of the public good and the facilitation of information and education to the public to enable consumers to make informed choices as to their health service providers. The current Act requires nurses working in areas of midwifery and mental health to hold specialist qualifications or to be supervised by a nurse with those specialist qualifications. The Bill removes this requirement and the safeguard it provides for patients with these health care needs. The Bill removes the requirement for specialist qualifications while maintaining what are identifiably illusory protections such as restrictions upon the use of the specialist titles of 'midwife' and 'mental health nurse'. In our view, this is likely to result in confusion and misunderstanding by consumers and reduction in the capacity of consumers to make informed choices as to health providers.

A woman in labour is rarely in a position to be able to question or negotiate over the qualifications of the staff caring for her. She has a right to assume or expect that the person assisting with the delivery of her baby is a qualified midwife or at least a nurse supervised by a qualified midwife. Similarly, a person admitted to a mental health service should also be able to assume that the nurses are qualified in their area of care. The Opposition believes that there is the potential for harm to the public if expert trained nurses are not required in midwifery and mental health areas. It is not enough to rely on employers alone to meet their duty of care. Unfortunately, there are already too many examples where efforts to cut costs and not to provide suitably qualified staff occur. Employers are under increasing pressure to meet increased demand with diminishing resources. Patient care and patient safety are at risk in these situations without this provision. It is not enough to rely on an employer's duty of care or individual nurse's compliance with codes of conduct and the like.

Nurses are too often directed to work in areas in which they do not feel competent. They are sometimes pressured into acceptance to work in such areas through appeals to their concern for patients' welfare or for colleagues who work in areas that are grossly understaffed. They are also lured into acceptance by promises of support and assistance that are in many cases illusory as a consequence of other nurses' heavy workloads. If anyone has been in our public hospitals in recent years, they would know just how hard nurses work and how much under pressure they are. Rather than reduce the regulation around specialist areas of nursing practice, there is a strong argument for the extension of this protection to other areas of specialist practice; for instance, intensive care nurses or coronary care nurses, and nurses who also have to work in particular areas. After all, it seems to me a very important tenet that, as a person wanting health care, we can be absolutely assured that the person providing it to us is qualified to do so.

The areas of midwifery and mental health nursing are two of the longest standing and most distinct areas of nursing speciality, and we acknowledge that they are not the only areas of speciality, as I have just mentioned. However, as well as historical differences and reasons for regulations, there are in addition contemporary practice issues that support

a continuing need for regulation. Midwifery and mental health are the two largest areas of nursing in private practice or on a fee for service arrangement.

Many other specialities such as intensive care, nursing, coronary care and so on require practice within a hospital environment due to the needs of the patient. Growth in midwife-only deliveries, home births, family therapy and counselling programs mean that a growing number of mental health nurses and midwives practise outside of health services as sole practitioners. The community—their clients—should be assured that any nurse working in these areas is qualified and competent to do so. In addition, we believe that the board should be required to examine whether additional areas of nursing speciality should be similarly protected. The Opposition will, therefore, move an amendment that will require the board to undertake such an examination and make appropriate recommendations.

The next area of concern relates to a change in the Bill which leaves it with no capacity to regulate unlicensed workers providing nursing care. Section 23 of the current Act allows the Nurses Board to regulate unlicensed workers providing nursing care. The Bill removes this provision.

The Hon. Dean Brown interjecting:

Ms STEVENS: I will not debate it with you now; we will talk about it later.

The Hon. Dean Brown interjecting:

Ms STEVENS: All right.

The Hon. Dean Brown interjecting:

Ms STEVENS: I don't think so. Section 23 of the current Act allows the board to regulate the practice of nursing by persons other than registered or enrolled nurses. The Bill removes that capacity from the board. However, clause 16(1) of the Bill stipulates that the board's functions are, among other things, to regulate the practice of nursing in the public interest and to determine the scope of nursing practice. It is the Opposition's view that refusal to regulate such workers is not a progressive step to take. It is the easy way out in response to the enormous pressures of our economic climate.

Training of unlicensed workers in specific, limited tasks is potentially very dangerous, both for the consumer and for the supervising nurse who may be placed in a difficult situation if resources are limited. This does not necessarily lead to a need to license a third level of worker but rather a recognition that nursing work needs to be regulated regardless of who performs it. Why should a patient receiving nursing care from someone other than an enrolled or registered nurse be left without access to the board when the behaviour of the individual was unprofessional or constituted misconduct? How is it reasonable to impose restrictions or obligations on one person delivering nursing care and not on another providing the same service to a patient?

The Opposition believes that it is in the public interest for the Nurses Board to regulate all nursing work. Therefore, the intent of section 23 of the current Act should be retained in any new Act. In reading the Minister's information in relation to this, I know it is considered that these workers do not perform nursing work. I guess this is where we differ, because we say that aspects of their work, or the entirety of their work, is nursing work and therefore should be regulated by this legislation. Alternatively, the Opposition believes that regulation of the realm of nursing work could be achieved by the licensing of employers who employ persons who are not nurses to deliver nursing care. Such licensing could be subject to conditions and review by the board.

We believe that the inability of the board to investigate areas of complaint in relation to these workers renders the board unable to fulfil its prime purpose, that is, to protect the public. The fact is that, if those workers are not regulated by this legislation in this way, we believe that we will have a whole realm of workers for whom there is no regulation and, therefore, public care, public safety and public interest would be placed at risk.

The Opposition wants to raise the issue of the abolition of separate registers for midwives and mental health nurses. Midwifery and mental health nursing have long and proud histories. The maintenance of separate registers acknowledges the valuable contribution of these practice areas and their associated historical developments which indicate that these were the earliest specialty practice areas to be recorded. One of the main reasons for the early development of these registers separate to that of general nursing is that up until a couple of decades ago nurses could enter the fields of midwifery and mental health nursing (then known as psychiatric nursing) directly and without first having to become a general registered nurse. This is commonly known as 'direct entry'.

Over recent decades, a move away from direct entry has occurred in favour of a generalist approach to the training and education of nurses. In these circumstances, separate registers were important to be able to distinguish readily between nurses who had achieved the generalist qualification of registered nurse and nurses who had direct entry qualifications for the areas of midwifery and mental health, and therefore were qualified to work only in those specialty areas of practice and not in general practice areas.

As I mentioned previously, from the representations that we received from midwives this is a very critical issue. They hope that direct entry courses and qualifications will occur again; and, as I mentioned previously, it seems that at least two of our universities will start to run courses for direct entry midwifery. What midwives say is that they expect that more people will undertake those courses and therefore we will have more people who are simply midwives only. Those people wish to remain on a separate register, as they are now.

It seems to me that the issue of the registers is not really worth worrying about to the extent of removing it and bringing it down to a single register. I have mentioned the issue of the midwives and their strong concerns. This issue is also constantly raised by nurses in that they want the current system to be retained. In terms of administrative advantages—which people claim would be vast if there were a single register—in this era of technological and computer advancement I believe that we are able to cope just as easily with one, two or 22 registers. Therefore, the Opposition will move amendments for separate registers to be maintained, as they are in the current Act.

The Hon. Dean Brown interjecting:

**Ms STEVENS:** I am sure that we can argue this again at the Committee stage, but certainly we will proceed with our amendments.

The Hon. Dean Brown interjecting:

Ms STEVENS: I do not think we should have this debate right now. We can have it during the Committee stage, when I will be delighted to be involved. Having raised all the issues that I wish to address, I return to my first issue. This a very important Bill. In South Australia we have 23 000 registered or enrolled nurses who come under this legislation. They are the single largest group of health professionals in this State, and they provide a critical service to us all. The Bill deserves

our very best endeavours to obtain the best result. We need to have a result that balances out the public interest, the needs of nurses, the needs of the Government and those of the Nurses Board in providing efficient and effective services. It is very important that we get that balance.

I believe it is extremely important that the nurses—the 23 000 workers in this area—need to feel happy and comfortable with the outcome. With those words, I conclude my second reading contribution. I look forward to hearing what other members have to say, and I certainly look forward to the Committee stage.

The Hon. R.B. SUCH (Fisher): I will make a brief contribution. First, I pay tribute to the nurses in our community. It is an outstanding profession, typified by a high degree of care but, as we all know in this day and age, care in itself is not sufficient, and these days nurses require very high levels of clinical skill and a whole range of other attributes. Having a warm heart is not sufficient for the nursing profession today. We need to recognise that fact because much of the debate about nurses and medicos relates to various aspects of power play. An element of sexism still lingers on but, hopefully, that is dying out. I believe that the younger, progressive medicos see nurses as complementary. They have important roles; equal in terms of their own respective role but different in what they do.

As we know, the nursing profession has changed significantly in recent times with regard to training. The entry requirements and the type of training, in the main, are now conducted within the university sector—and I know there are considerable arguments for and against that. However, I believe that, in terms of care and a high commitment to skill, the essential elements of the nursing profession are retained, and I trust that that will always be the case. Many nurses have contacted me as their local member to express concerns about some aspects of the Bill as originally proposed. I am delighted that the Minister has seen fit to propose a range of amendments which I think to a large extent encompass and deal with the concerns raised by nurses.

Without canvassing the ground that has just been covered by the member for Elizabeth, I will just touch briefly on some of the issues that she raised. One of the concerns was that the Chairperson of the Nurses Board does not have to be a nurse. The Minister has addressed that by way of amendment, and the Chairperson will be required to have nursing qualifications. That is a very positive amendment. Other matters relating to the composition of the board have also been addressed by way of amendment indicated by the Minister, and I welcome those.

As to the question of midwives, we know that midwives have a special place in our community, and deservedly so. It is a specialist area of nursing. Midwives are regarded with particular affection within the community. As I understand it, this Bill will allow midwives to not only in effect put up their brass plaque to indicate that they have the proper qualifications but for the first time they will be able to advertise. That heralds a new era in terms of the way in which midwives will be able to relate to the wider community and provide a level of care that is often sought by expectant mothers.

Other issues canvassed earlier which I will briefly touch on include the concern about regulating unlicensed workers involved in nursing care. The member for Elizabeth mentioned the question of supervision and also the issue in respect of five year recency of practice. From my understanding of the amendments circulated by the Minister, most of the 10 or so concerns put to me have been addressed. We always need to recognise that no professional or other group in the community will ever get all they necessarily seek from Parliament by way of legislative change. We are basically in the business of coming up with a compromise which not only meets as far as possible the expectations of the profession—

Mr Conlon interjecting:

The Hon. R.B. SUCH: —but which also encompasses the needs of the community. The member for Elder interjects about lawyers. I could take up many hours talking about lawyers, because that is one profession that does need more than a bit of polish in terms of their behaviour. Compared to the money that nurses receive, lawyers are streets ahead. I have yet to find a nurse who retired rich as a result of nursing, but I am sure that there are a few lawyers who became quite well off and were able to retire part way through their career.

We are not here to get into the business of attacking lawyers or medicos. Instead, we need to recognise that the professional groups of today, whether it is the AMA, the lawyers association or whoever, are very powerful bodies, and they make some of the traditional trade unions look very soft and amateurish in the way they carry out their activities. So, there is a responsibility for Parliament to weigh up the pros and cons and come down with a reasonable approach. I believe that what the Minister has proposed here, after very detailed consultation, is a reasonable approach and a genuine attempt to satisfy some of the concerns expressed by the nurses and, in so doing, gives the community protection by way of proper regulation and also enhances the dignity of what is a great profession.

# The Hon. M.D. RANN (Leader of the Opposition): I

want to make a brief contribution and also put on the record some of the information sent to me by nurses and midwives fighting to protect their profession. I will also place on record the community's respect for nurses. The simple fact is that we have seen this Government, during the five years it has been in office, work steadfastly to diminish the role of nurses and their professionalism in our community. I believe that the current Minister has acted with considerably more professionalism than did his predecessor who was forced to drop the previous legislation before the last State election because of community reaction to its iniquitous provisions.

In trying to either diminish or patronise nurses, this Government seems locked in a Florence Nightingale view of the nursing profession. That is long gone. It has been replaced by highly qualified and competent members of a medical team who work alongside other medical professionals. Any move to provide better recognition and accountability through legislation is to be applauded, but we have to take care as a Parliament to ensure that, in attempting to move forward, we do not leave behind the many good things about nursing and the regulation of the profession as we currently know it.

The member for Elizabeth (Labor's shadow Minister for Health) has spoken eloquently on this Bill and has foreshadowed a series of amendments that have the unanimous support of the Labor Caucus and which, I believe, will substantially improve and strengthen the Bill. I am particularly concerned that the control of the profession by nurses is being reduced significantly through decreased representation on the board, because it now seems that the Government's view is that it is necessary for a doctor to hold a position.

I would like to know the view of the AMA if we came in here and said that we wanted to have a nurse on the Medical Board. I think that would be a great idea, by the way, but it is a classic example of what the Minister's predecessor was about in all that he did in terms of the health portfolio, which was 'Doctor knows best'. The consumers' views were not considered. 'We will privatise the hospital and make sure it is run from the United States' or whatever, but it was always 'Doctor knows best'. I believe that the patronising nature of this Bill can be seen for what it is. It is interesting that the AMA has not made any representations to me or, I believe, to other members of the Opposition about the Bill, but I can imagine the screams of terror if they thought they had to have one nurse on the Medical Board.

I am also concerned that the defined and highly specialised roles of midwife and mental health nurse will become blurred. It also seems strange that, after a long battle to increase the professionalism of registered nurses, through a three year degree—and I pay tribute to Labor's former Minister for Health, John Cornwall, who took on a barrage of abuse from members opposite when, as Minister for Health, he moved to increase and recognise the professionalism of the nursing profession—it now seems that the Government wants to turn the wheel back by allowing enrolled nurses to be supervised by people other than registered nurses.

My concerns about the proposed legislation have been very much reinforced by the letters I have received, and I want to congratulate the ANF and other groups for the decent and progressive way that they have handled their lobbying on this Bill. Included in their concerns are no requirement for the Chairperson of the Nurses Board to be a nurse; only five of the 11 members of the board to be nurses—in other words, a minority; a doctor on the board (which I have already mentioned); no requirement for a nurse to be on board inquiries into a nurse's conduct or competence; the abolition of separate registers for midwives and mental health nurses; the removal of requirements for nurses to hold specialist qualifications or to be supervised by nurses holding specialist qualifications to work in midwifery or mental health; and no capacity to regulate unlicensed workers providing nursing care. I have received a number of letters, but one letter from a midwife and health consumer, Jan Prider of North Adelaide,

As a midwife and health consumer I am horrified by the potential effects on midwifery and the safe and effective care of women and babies. The Bill fails to define the scope of practice of midwifery, makes no real provision for direct entry midwifery and designates midwifery as a mere sub-speciality of nursing and not as a profession in its own right. There is evidence from overseas that countries where midwifery is a distinct profession, governed by midwives, that intervention rates are lower and outcomes better for women and their babies; for example, Holland, the United Kingdom and Sweden. Countries where midwifery is almost non-existent have worse outcomes and higher intervention rates, for example, the United States of America. It is essential that midwifery is regulated by midwives to ensure safe care for women.

Midwives need supervision and regulation by expert midwives, the Nurses Board in its new format is not capable of undertaking this role, nor of assessing the appropriateness of education and training of midwives. It is essential that a separate register is maintained for midwives. There will be no specific legislation to determine the education and practice of midwifery which means that there is no regulation of what is safe practice for midwives and no guarantee that women will be cared for by appropriately skilled midwives and not by unqualified staff. This Bill removes the requirement for nurses to hold specialist qualifications or be supervised by these specialists to work in midwifery. This is dangerous.

That is just a segment from one of the letters I have received. Another letter I received a couple of days ago states:

My sincere apologies for the brevity of the enclosed but I am sending it off as I would like you to read it even in its brainstorming form. The enclosed is a 15 month collection of midwives and consumer ideas and thoughts with a brief literature review on the formulation of a Midwives Act for South Australia . . .

The clear message to us is that there must be separate registers for psychiatric nurses and for midwives. We support that. We also support the fact that nurses must be in control of their own destiny as a profession, and not somehow be seen as not being able to regulate their own profession. Various provisions have been included in this Bill. Just imagine if similar provisions were included for doctors and lawyers. We are prepared to support many parts of the legislation: in many respects we endorse direct entry but we certainly want to see separate registers and we want to see a majority of nurses on the Medical Board.

We believe that this Government has not learned from its folly prior to the last election, when the former Minister, Dr Knows Best incarnate, was forced to drop his planned legislation because of community outrage against an assault on a valued and valuable profession.

Ms WHITE (Taylor): Much of the Opposition's point of view has been put very well by my colleague the member for Elizabeth. I will not repeat it but I will make a few comments on the very important amendments that the Opposition will be moving in this place. It is quite a while since the Nurses Act has been reviewed: 1984 was the last time that substantial revisions were made to the Act. This review is timely taking into account the increased use of sophisticated technology in the nursing and health care professions, new practices and the higher educational standards which are now expected by the community and which are part of a nurse's life.

It is appropriate that we now revise the Act, and the Bill before us does that. More is being expected of nurses. They are taking on greater responsibilities than they have previously and, these days, they are dealing with more complex patient care matters. The profession recognises and accepts that. One reason put forward by the Minister to explain some of the changes to this Act is that it must be brought into line with competition principles. I have a few questions to ask the Minister, but he has stepped out of the Chamber for a moment. Perhaps I will repeat them—

Mr Wright interjecting.

Ms WHITE: Maybe so. I will repeat those questions in Committee; they relate to the relationship between competition principles and this Bill. The Bill ostensibly reforms and updates registration and enrolment procedures for nurses. That is quite appropriate, but the Opposition and I have concerns about some of the methods the Minister intends to use to go about this, particularly with regard to the registration issue. I am pleased to see that the new board will have greater consumer representation. That is important. Increasingly, the public expects participation in regulation of the health industry. That is appropriate so that the people of South Australia can have better confidence in our health system.

The criterion for the board to act in the public interest, or to regulate and monitor in the public interest, is a good thing. That is required so that we achieve the ultimate aim espoused by this Bill, namely, to achieve the highest standards possible, both in competence and conduct, in this very important profession. The Minister's second reading explanation referred to nursing excellence, and that is what we are striving to achieve. The Minister also says that one of the

main aims of the Bill is to provide greater flexibility for the board so that it can respond to changing nursing practices, and that does seem to be a desirable aim.

However, I believe that some of the measures instilled in this Bill under the guise of greater flexibility pose somewhat of a threat to the standards of nursing care. My colleague the member for Elizabeth has already talked about some of those measures in terms of supervision of enrolled nurses and other practices, on which I will elaborate later. I have been subjected to an enormous amount of lobbying on this Bill, all of it from nurses and midwives. I have received a very large amount of correspondence from midwives, all of whom are concerned about the measures that the Opposition has highlighted as potential problems in this Bill.

One issue of concern to me is the abolition of separate registers for midwives and mental health nurses. Other categories may deserve a separate register but I am not briefed well enough to comment in that regard. Aspects of the Bill that instil more stringent registration controls are welcomed but the bringing together of the separate registers into a single register raises some issues.

One of the things that midwives, particularly, have put to me is the assertion that separate registers ensure that only those with the relevant qualification practise in these areas. I heard the Minister interjecting while my colleague was speaking to say that a single register can achieve that. However, I see some problems with a single register, which I will go into later.

Another issue that I wanted to raise, which is a quite serious matter that we should address, is the removal under this Bill of the requirement for nurses to hold specialist qualifications or to be supervised by nurses holding qualifications in specialist areas. This was an issue on which the midwives, particularly, and some mental health nurses lobbied quite strongly.

My understanding of the Bill is that it allows for anyone to provide care, and in the case of midwifery to provide care to a pregnant woman and during the childbirth stages, even if they have not received any formal qualification in midwifery, as long as the care provider does not present as a midwife. That is the issue of not being able to hold oneself out as having a qualification. I have to ask the Minister how that ability under this Bill protects the public. There was also an interesting issue raised about nurses registering in South Australia from other countries.

The Hon. G.A. Ingerson: Mutual recognition.

Ms WHITE: It is, but I understand that in New Zealand and most European countries midwives—and although I have been given examples in other areas I will take the midwifery example—are not required to have nursing qualifications in order to practise midwifery. Under this Bill, single registered midwives (and that is the direct entry issue we were talking about) coming from other countries are registered in each State of Australia as midwives and nurses. It seems to me that this Bill would allow those nurses to practise as unqualified nurses, and that would be a problem. I ask the Minister to qualify that.

Regarding qualifications and supervision, I noted from an article in the *Advertiser* of, I think, 23 November (late last month, in any case) that the Human Services Minister said that under the Bill enrolled nurses would be able to work in midwifery, for example, under a doctor's supervision. Several midwives wrote to me to say that nurses have never been supervised by doctors, so I would like the Minister to clarify that point. Do doctors currently supervise enrolled nurses or

is the intention under this Bill that doctors will supervise enrolled nurses? Even though he is not in the Chamber at the moment, I ask the Minister to address that issue. I have a particular interest in midwifery, because it has always—

Members interjecting:

# The DEPUTY SPEAKER: Order!

Ms WHITE: I am speaking now on the issue of a single register for nurses and what appears in this Bill to be the elimination, in effect, of separate requirements and qualifications for midwifery. I have been told that in South Australia we have one of the highest caesarean section rates in the world. Correspondence to me has shown that the World Health Organisation states that the appropriate rate is between 10 and 15 per cent but that in South Australia the rate of caesarean sections is around 23 to 25 per cent, and that it is higher in the private sector. It has always astonished me and I am very much aware, both anecdotally and from statistics that I have seen over the years, that many caesarean sections, particularly, are performed between the hours of nine and five, Monday to Friday.

There is not an overwhelming grouping in the statistics of the rate of women going into labour at those times, but it does seem that in this State we have a very high level of interventions in childbirth. That is of great concern to me, because it is a reflection on the quality of care in this State. I have a couple of other questions for the Minister on the supervision of enrolled nurses. It has been stated that the reason why this is being weakened is to allow flexibility for certain circumstances, and the circumstances listed were such things as domiciliary care, day surgeries, doctors' rooms and hostels, 'after due consideration has been given to competence and circumstances', to quote the Minister's second reading explanation. I would like the Minister to explain how this flexibility would work. I can understand the reference to doctors' rooms in country areas and country hospitals: sometimes it is very difficult to find staff in the first place. But I am also aware that the quality of health standards needs to be maintained in all regions.

The Hon. Dean Brown interjecting:

Ms WHITE: No. The question I asked the Minister, in his absence—

The Hon. Dean Brown interjecting:

**Ms WHITE:** The question—

The Hon. Dean Brown interjecting:

The DEPUTY SPEAKER: Order! The discussion across the Chamber will cease.

Ms WHITE: The Minister was quoted in the *Advertiser* as saying that the Bill allows enrolled nurses to work in midwifery under a doctor's supervision. I have received correspondence from many midwives and nurses saying that nurses have never been supervised by doctors. So, the question I asked was: if that is the case and there is a change under the Bill, are nurses now supervised by doctors; and, if they are not, does the Bill now change that? My other question relates to direct entry into midwifery. I have been given the impression in correspondence from midwives that that will happen in Australian States by the year 2000. Will the Minister clarify whether that is the case and, if so, how that fits into what is being provided in this legislation?

I want to canvass a number of issues in more detail when we reach the Committee stage. Of course, the overriding aim is that, in the end, we enact legislation that guarantees the highest possible standards in the professional health care sector and, in this case, the nursing profession. I have another question. Where does the regulation of unlicensed workers in the health care area fit into this Bill—or does it, in fact? Is there any provision for those unlicensed people working in a nursing care role in health—

The Hon. Dean Brown interjecting:

**Ms WHITE:** They do. There are a number of unlicensed people who work in nursing care environments, and that is what I—

The Hon. Dean Brown interjecting:

**The SPEAKER:** Order! For the sake of *Hansard*, I suggest that the honourable member wait until the Committee stage of the Bill to put her questions.

Ms WHITE: Is there an agenda to deregulate or eliminate enrolled nurses in all of that? That is certainly the suspicion that has been voiced in much of the correspondence I have received. I would like the Minister to address that issue also.

Ms BREUER (Giles): I particularly want to pay tribute to nurses today in those remote and isolated areas of South Australia, for example, those people in the Pitjantjatjara lands in the north of our State. I have spent time travelling through those lands, and the work that those nurses do is absolutely incredible. Very often they are the only white people in a particular community, and there are some major health problems in those areas. They continue to work day after day, year after year, and many of them stay in those areas for many years. I believe that the work they do in those communities is absolutely incredible.

In my electorate there are a number of smaller hospitals in white communities where, similarly, the isolation is a major problem for nurses. They do not have the peer support that is available in the major cities and in the major hospitals in this State. They really are very isolated. They may have one or two colleagues to whom they can talk but they also struggle under incredible odds, and yet they work year after year in those areas.

I believe that our nursing staff have been undervalued for many years, and I am pleased to see that what was once perhaps a job that you did when there was nothing else available has now become such a highly valued profession. I believe that these amendments that we have proposed today can encourage that and give nurses the credit they deserve.

My feeling is that the legislation proposed by the Government is really treating the nurses as though they do not quite know what is best for them—as someone else said, 'Doctor knows best.' Nowadays, nurses are highly trained individuals. Nursing is now a degree course: a registered nurse does a three year degree course (and often a four year course, if they have come in at a mature age) and are highly trained, efficient and specialised people. I thought that one of the great things that came out of this legislation was the incredible campaign that was mounted by the nurses (the ANF) in this State. My colleagues and members opposite probably received as many letters as I received. I thought it was an incredible campaign because, when one is lobbied in that manner, one sits up and takes notice of what the legislation is about. Some 20 or 30 years ago nurses certainly were not empowered enough to do something like that, and I believe it is a great credit to the nursing staff and the training they receive nowadays that we came to this position whereby we could not just let this legislation go through without taking any notice of it. Surely these nurses know better than anyone what is best for them and for their profession. And yet this legislation is implying that someone else should supervise and manage their welfare.

With respect to the issue of the board having 11 members, with only five to be nurses, I ask members: would the Chamber of Commerce allow its governing body to be filled with social workers, school teachers and perhaps the odd parent or two? I believe that there would be a major uproar if that were to happen. The same situation would apply with respect to so many other organisations: if other people who do not know what they are talking about are appointed to the board, the best outcome for that profession certainly will not be achieved. I believe it is essential that we have a majority of nurses on the board: it is commonsense. It also recognises the value of those nurses. I believe also that the person in charge should be a nurse. Certainly, they understand the issues and the pressures involved. Once again, if a social worker who worked for a major hospital were put in charge of the Chamber of Commerce, and that person had very little to do with what the Chamber of Commerce was all about, there would be a major uproar. So, we should have that

An honourable member interjecting:

**Ms BREUER:** Yes, it might be an improvement. With respect to having a medical practitioner on the board, we have long known the issues there. I know from the times that I have spent in hospital, which I must admit are very limited— *Members interjecting:* 

Ms BREUER: Go back to sleep. I have been in hospital only a couple of times, when I had my children, but I spent quite a considerable amount of time in hospital before having them and for the week afterwards, and one of the feelings that I and many of the other women had—

An honourable member interjecting:

The SPEAKER: Order!

**Ms BREUER:** —was that I would perhaps trust my life to some of the nurses more so than to the doctors, because of their understanding of my situation.

With respect to legal practitioners—and this is one of the issues that we have to be very careful of nowadays—I believe that the board needs legal protection and that there should be someone who understands these issues, because litigation is now becoming much more common. If one watches the hospital soap operas on television—which one cannot help watching, because there is not much else to watch, unless one wants to watch the police dramas—

Mr Conlon: What about South Park?

Ms BREUER: South Park—a great show. The situation in America seems to be chronic, and I would hate to see that situation ever developing here. But I believe that we have to be able to provide that sort of protection for our nurses here in South Australia, and in Australia.

As for consumer representatives, it is important to note that the major stakeholders are the people in the community. At least four of those people should be on the board to have an active say and to protect the rights of the people working in the profession. We should give the board the opportunity to empower nurses, and how better to do that than to make the changes suggested in our amendments?

The second area of concern is that of enrolled nurses working without supervision, and that is particularly relevant to country hospitals and health facilities, especially in the isolated, remote areas of South Australia. What a wonderful opportunity this legislation gives for the employment of the cheapest and least skilled nurses, so the employer does not have to worry too much about it! This legislation encourages that practice, and I do not want to see that. Hospitals can be staffed with unqualified people under this legislation.

In my electorate, it is very difficult to attract nurses to country hospitals and country health facilities. I know this because I have spoken to people in Coober Pedy and Roxby Downs, and I know the situation in Whyalla and in some of the smaller areas in the Pitjantjatjara lands where it is very difficult to attract nurses. I was appalled to learn that there are no country incentives for nurses. Doctors get country incentives. Doctors working in Whyalla hospitals are paid more than doctors working in Adelaide hospitals, not overall but in individual cases. Why are there no incentives for nurses? I believe that \$200 a year is paid per nurse for training. What a ridiculous figure that is. It costs about \$540 for a return ticket from Coober Pedy to Adelaide, yet a nurse gets \$200 a year.

Let me give a classic example of the ridiculous attitude of city-based bureaucracies towards country professionals and how little they are appreciated. In Coober Pedy, under a program the name of which I cannot remember, teachers are trained in literacy areas. This also occurs in Ceduna and other schools, because I have spoken to a number of people about this. These teachers have been told that no-one can be sent from Adelaide to train them, so they have to come down to Adelaide for 21/2 hours per fortnight over a number of fortnights for training. For a person living in Coober Pedy or Ceduna, 21/2 hours a fortnight in Adelaide is two days out of their time. It is just impossible. Those teachers also do not get relief while they are away. It is ridiculous, because the teachers cannot get the sort of training they need. Because 10 people in the area wanted to do the training, the department was asked to send someone to the country, but the response was that it could not afford to do so.

Similar things happen in health. Country incentives like this are just ridiculous. In many country places, there is a shortage of nursing staff due to the frenetic budget cuts that are going on all over the State. At the moment, Whyalla Hospital is under review and cuts to that hospital are being considered once again. I believe that there may be some cuts in nursing there. I have spoken to the nurses and to a number of professionals at the hospital and they do not see how that can be done: they are so short staffed now that it is impossible. The stress and pressure that they are under is ridiculous. There is a shortage of nurses, and I believe country incentives for these people should be considered.

An enrolled nurse can give maximum care and they can give life-saving care, but they should not have to take the responsibility. If you are 750 kilometres from Adelaide, you should not have that sort of responsibility thrust upon you when there is no-one else around to assist. There must be adequate supervision. In this age of technology, such supervision can be provided, although it may not be on the job. With our amendments, such supervision will have to be provided. If the legislation states that supervision has to be provided, the money will have to be found. It cannot be written off with people saying, 'We will just cope the way we are.' Money will have to be found and ways of providing supervision will have to be found, so that the nurses are not being left to carry the burden and get into the sorts of problems that can occur.

On the issue of competency and the five-year test barrier, I want to relate to country areas. In Roxby Downs one day I was talking to a woman who was a nurse for 20 years in Whyalla and who had moved to Roxby Downs. She had been out of the profession for a number of years. They are trying to attract registered nurses to the Roxby Downs Hospital and, when I started talking about nursing, she got quite excited

about the possibility of getting back into the nursing profession. At the time, representatives of the University of South Australia and the Whyalla School of Nursing spoke to her about that. Because of the time that she had been out of the profession, she had to start from scratch, which was an impossibility for her. It would have meant leaving Roxby for much of the year and restarting her training. That is where competency based tests are very important. I worked for TAFE for many years and recognition of prior learning became a big part of the training that we provided. If the nursing profession can come up with some competency standards so that people do not have to start from scratch that would be wonderful for that profession.

In conclusion, I believe that nurses are members of one of our most valued professions, if not the most valued profession. It has improved its perception in the community and people now value and appreciate the worth of our nurses. The amendments that we are proposing may be able to satisfy the major stakeholders, who have been ignored by the Government in the legislation that it has presented.

Mr CONLON (Elder): I am keen to speak to this Bill, although members will be pleased to note that I do not have a prepared speech, which will limit me to no more than 20 minutes, as the clock will, anyway.

The Hon. G.A. Ingerson interjecting:

Mr CONLON: As we hear from the member for Bragg, I note that he can speak about nurses with the same lack of understanding and knowledge as he speaks on nearly everything in this House. I forecast that, like night follows day, every member who speaks into the microphone on this Bill will say how much they like nurses, respect the job they do, and how valued they are by the community. The trouble is that one side of the House will bash nurses as they do so, while members on this side of the House will seek to defend the interests of nurses. I have some concern about the attitude of this Government to people who provide important services in our community, and I refer to well respected people who do difficult jobs. The reason that the Government sets out to change and undermine these people usually has something to do, as in this case, with competition principles, principles of management, or more efficient and better administration. Usually it involves bashing the people who provide the service and, in my view, this Bill does it again.

We have seen it in this House with the Police Bill, yet the police provide a very valuable community service and we are fortunate to have the most highly regarded police force in Australia. This mob came in with a Bill to change that, to try to expose the police department to more discipline, more control, more command and a more authoritarian regime. We now find the same thing happening with the nurses. I have no doubt that very soon this mob will be back with another Bill to bash the firefighters and the volunteers who hold the 'Stop' signs at children's crossings because they are also performing a valuable community service.

An honourable member: And ambulance employees.

Mr CONLON: Yes, and anyone else who does a good job. I will say this about nursing and the control of nursing: I am particularly concerned about those elements of the Bill that deal with the Nurses Board and the undermining of nurses' influence in running their own profession. There is no-one in this place whose life is not touched by nursing at some point, whether it be by a midwife at the start of their life, by geriatric nursing at the end of their life (provided you look after yourself better than I do) or by general nursing for

all of life's little misfortunes in between. Everyone's life is touched by nursing. Everyone in this State knows that, for very good reason, nurses are held in extremely high regard.

Being a somewhat clumsy person, I have had a couple of accidents in my life, and I have had to spend time in hospital. I know this about nursing—and I will talk about this when we get to the matter of including a doctor on the board—when you lie in a hospital bed for a few weeks, nurses take good care of you. They wake you up gently once every few hours and take your blood pressure and your pulse. That is the job of a nurse, and they do it with care and compassion. We should also remember that they will be going to work when we are going home tonight. Then some gruff bloke, who is paid six times as much as they are paid, will go into the wards and read off the chart the information a nurse has written down.

The Government wants to remove nurses from the Nurses Board and replace them with this gruff bloke who reads the charts and has that sort of bedside manner. Frankly, I will not sign up to that, and I certainly hope this Chamber does not, either. If this Chamber permits that to occur, I certainly hope the other place will do something about it, because it is a mockery. I wonder what sort of doctor is envisaged. Will it be a foot, nose or throat doctor, or a gynaecologist? What sort of doctor has such a special skill that he or she needs to have this influence in respect of nursing?

The Hon. Dean Brown interjecting:

Mr CONLON: I had nothing to do with that, as you well know, Dean. We will hear many mealy-mouthed statements in this place tonight about the high regard in which nurses are held. Indeed, we heard from the member for Fisher earlier, and no doubt the Minister will make the same mouthings, as will the member for Bragg, if he can remember his lines. We will all hear that—

Mr Scalzi interjecting:

Mr CONLON: Joe, you are not in your seat. I can see you, so I know that you are not in your seat.

Members interjecting:

**The SPEAKER:** Order! Let us get back to the Bill.

The Hon. G.A. Ingerson interjecting:

Mr CONLON: What's it like back there, Graham?
The SPEAKER: Order! The member for Bragg will come to order.

An honourable member interjecting:

Mr CONLON: You're right there, mate. That is why people have voiced their concerns—the shadow Minister in particular—involving a range of issues, including enrolled nurses working without supervision, and the roles of midwives and mental health nurses. I will confine myself to commenting on the changes to the Nurses Board. I have had some small dealings with the Nurses Board in the past and, meaning no disrespect to it, it seems the changes make it easier to deal with miscreant nurses or nurses who do not do the right thing.

I have dealt with the Nurses Board in the past, and it strikes me that we do not have anything to worry about with regard to its enthusiasm for disciplining nurses who do the wrong thing, it is sufficient to say. In my view, it seems to approach that task with an enthusiasm that borders on zealotry. Therefore, I have some concerns about some of the new powers, particularly those to be given to the Registrar.

As members would know, I have a background in law, and I was astounded to hear of some of the powers that are supposed to be exercised by the Registrar. It has been pointed out to me that we would be able to find those powers of

interrogation and production that will be given to the Registrar with the threat of suspension of a nurse in only one other place, that is, the NCA. However, that is wrong because, when the NCA wants to get a search warrant, at least it has to convince a judge that that is necessary. I want to know what is behind the Minister's reasoning. What is all this stuff that nurses are doing wrong in South Australia such that we need stronger investigative powers and a more authoritarian regime? In particular, what is wrong with the nursing profession in South Australia such that it cannot run itself?

If the Minister came into this place and said that the various boards that deal with lawyers—their training, their qualifications and their discipline—were to be run by clients instead of lawyers, I can tell you what the lawyers would say, because lawyers' clients do not like lawyers very much. I will make a wild and wacky estimation here: nurses are probably better regarded in the community than lawyers—although not sufficiently so to control their own destiny. I have touched briefly on those matters, but I do not want to make a joke of it. As I said, I have dealt with the Nurses Board in the past, and I believe it already has a tendency towards authoritarianism. I say that it does that with the best of intentions. However, there is a tendency towards that, and I certainly do not encourage arming it with greater powers.

Nursing is an extremely high trust profession. If you cannot trust nurses, you can trust very few people in life. Therefore, in my view, it is difficult to understand why we would try to frame the legislation so that we put little trust in nurses, particularly by not even trusting them to run their own board and saying that there should be a Registrar with quite draconian powers to deal with them in case they do something wrong. I have made my point on that, so I will not labour it.

For the sake of completeness, I indicate support for all the amendments forecast by the shadow Minister. No good argument has been made out other than this terribly frightening, usual explanation of competition for the changes proposed about the supervision of enrolled nurses. I can see absolutely no reason whatever to suggest that midwives or mental health nurses do not need any qualifications to perform those roles or be supervised by anyone with qualifications to play that role. I will close by saying that, in terms of the application of competition principles to nurses, nurses are there to care and not to compete.

Mrs GERAGHTY (Torrens): It certainly is acknowledged that the current Nurses Act is out of date, and I commend all the individuals and organisations involved in renewing it. It is obvious that a great deal of work has been done over many years, and clearly a number of the changes are in the public interest.

The Hon. G.M. Gunn interjecting:

Mrs GERAGHTY: Not again; not twice in one day, please. However, clearly some areas in the Bill are at odds with what I believe are the three key foundations upon which the legislation should be based. First, it should be in the public interest; secondly, it should be in line with competition policy, as we have heard from the member for Elizabeth; and, thirdly, it must take into account both the need to remove unnecessary restriction while, at the same time, protecting the public interest, and that nurses and anyone else delivering nursing care must be clearly answerable to the community for their actions. The first area where the Bill does not uphold these three principles is in the proposed composition of the board, in that the chairperson does not have to be a nurse. I

will not canvass that again because it has been strongly canvassed in this House.

Also, there will be only a minority of nurses on the board. There does not have to be a nurse on the board's panel inquiring into nurses' conduct and competence. There is provision for a doctor to be on the Nurses Board which, as we have already heard, is an outdated requirement. We have to accept that nurses are professionals in their own right and surely should be treated as such. I find the idea of having a doctor on the board rather extraordinary. Of great concern is the removal of the requirement for enrolled nurses to be supervised by registered nurses under certain circumstances which have not been made clear. I have not heard any evidence from the Government concerning how this meets the public interest, only that it will be easier for employers to increase their profits by employing cheaper workers.

Another area of concern is the removal of the requirement for nurses to hold specialist qualifications or to be supervised by nurses holding specialist qualifications to work in midwifery or mental health areas. The recognition that nurses must be properly qualified or be supervised by nurses with specialist qualifications to work in the areas of mental health and midwifery is provided in section 25 of the current Nurses Act and recognises that clearly there are areas of nursing practice which require highly qualified nurses. There is no evidence to suggest that the community's need for highly qualified nurses in these areas has diminished over the past 15 years, which was when the current Nurses Act was established. In fact, as has been said, if anything, the community's needs have increased.

We have a responsibility to ensure that members of our community such as new mothers giving birth to the next generation are guaranteed that they will have a qualified midwife. Also, that members of our community needing support to deal with traumatic experiences in their lives or with serious or, sadly, even life threatening mental illnesses are guaranteed qualified mental health care nurses to care for them. We literally have our community's lives in our hands with this Bill. Nowhere is this more poignant than in relation to the removal of the requirement for unlicensed workers giving nursing care to be supervised by registered nurses.

I want to talk about the issue of unlicensed workers. When Norman Hamilton was placed in a nursing home there was good reason to believe that he would receive more than adequate care in sickness and in health. His home was staffed by a team which included nurses who were skilled in caring for people with profound physical and mental disabilities. Tragically, the care environment changed, the nurses were made redundant, but Norman's care needs remained the same. Norman Hamilton was a man of 26 years of age. He had cerebral palsy and he had not developed intellectually beyond the infant stage. He died from acute bowel obstruction while in a residential care facility. This young man's death was a result of the residential care facility retrenching nurses and replacing them with care workers.

A coronial inquiry found that, while this residential care facility had care workers who were admirable and well meaning people, nonetheless management had given them a level of responsibility for which their training was inadequate. While these care workers kept bowel charts for this young man, none of them had any understanding of why bowel charts were kept or any comprehension of what conditions abnormal bowel signs may indicate. This incident occurred in Victoria. It is up to us to ensure that this does not occur in this State. I might say that a similar situation has

occurred in South Australia to the son of one of my constituents, and the effect on that family was devastating. It sent the family almost to the point of despair, and they are still seeking answers today why their son, who was in care, died.

Many years ago I worked in a nursing home, so I have a genuine interest in that area. My fellow untrained workers and I were always supervised by a fully qualified registered nurse. And so we should have been, because at that time we did not have the skills by ourselves to be responsible enough to care for patients. In fact, because we did not have that training—although we were very well intentioned, and I must say that the staff in the nursing home were very caring people—we could have caused harm even though we had the best of intentions. It is obvious that any nursing care undertaken by non-nurses in a residential care setting (hostel or nursing home) must be under the direct or indirect supervision of a registered nurse.

[Sitting suspended from 6 to 7.30 p.m.]

Mrs GERAGHTY: Prior to the dinner break, I had related to the House the very sad tale of a young man who died. In the case of care workers, it is essential that they also be provided with some training. Having worked untrained in that area, I think that is a very vital point. Obviously, they would not get the training that would skill them to the level of our nurses, but it would certainly assist them in their duties.

If any of us needed nursing care at any stage of our life, we would want to feel safe. I would certainly want to know that, even if my faculties were gone and my mind did not recognise it, I was being cared for by people who really wanted to care for me. I would want carers who were qualified to work with older people because it is the sort of job that does require specialist nursing skills and knowledge. I certainly would want it recognised that, as a person, I have dimensions that are not just physical but also spiritual. I would want to know that double incontinence and dementia would not deprive me of my right to be cared for in a way that preserved my dignity and recognised me as a human being.

I want to know all of this now because the people I love and the families of members in this Chamber are ageing, and we want to know that their humanity will be recognised and that they will not be afraid, they will not feel hunger and their rights will not be diminished simply because their mind is not aware of the events around them. I know that I am not alone in these concerns. We are a very caring community and we do care for all people who need it. It does not matter whether we are aged or physically or intellectually disabled, we in the community care for those people and, in times of illness or unfortunately when they need to be placed in a nursing home, we want them to be well cared for.

Unfortunately, it is a fact that our society tends to value high tech work at the expense of work focused on caring. It is quite true to say that there is clear evidence that replacing nursing positions with unlicensed workers can have a devastating effect on both the standards of care and, particularly, patient safety. In the Norman Hamilton case, the Coroner recommended that qualified nurses be employed.

How can unqualified carers review and assess the health status of patients and residents; how can they respond to the spiritual and psychological needs of patients and residents; and how can they ensure that a life to be lived in care is maximised and protected, and that ageing is not just a sedentary process but a time to live? I know that people who suffer dementia may not enjoy life as we do but, nonetheless, they do enjoy their life and have a right to do that in dignity.

Therefore, our concerns are: how can unqualified and unlicensed workers review the effectiveness of medicines, recognise the side effects or even be aware that elderly people are at a significantly increased risk of side effects, more so than the rest of the population? It is our responsibility to recognise that the giving of medicines is not just a task in that the risks are minimal and qualified nurses do not have to be properly supervised.

In respect of unlicensed workers, where is the duty of care? Who is finally accountable if the worker is unqualified, and are relatives and patients aware that the workers are unlicensed? In many cases I suggest that relatives are not aware of that fact: mostly they assume that people who work in any care facility carry the proper qualifications. If a vulnerable resident or patient is unable to give themselves their medicines, who makes the decision that the medicines can be given by a person who has little training or understanding, if any, about the drugs that they are given? In the case of elderly people we know that, if their pills are provided in a cup, they tend to hide them away, sometimes thinking that they are sweets and saving them for later. That can lead to a disastrous situation.

We recognise the need to contain costs in the health care system but it must not be at the expense of the best interests of the patient or the resident. Even in the current climate of deregulation, the work place abounds with regulation. Forklift drivers, tram conductors and electricians are all, as an example, subject to licensing and, therefore, regulation. I am very familiar with the situation as it relates to electricians. More and more we find that people are doing this type of work without the proper qualifications. In the case of either electrical or plumbing work, people can be doing unsafe work which puts not just their fellow workers at risk but also the public. If we allow that situation to continue, we are saying that we do not care and that the dollar is more valuable than the welfare of people.

In terms of improper work practices, we should also be asking ourselves about the value we place on our sick, elderly and disabled people. Perhaps it is, as the expression goes, that a person can walk in off the street and get a job performing nursing work. When I worked in a nursing home that is basically what I did: I went in straight off the street and my fellow workers and I had to ask for training that gave us at least a degree of skill.

What are we saying about these workers and the work that they are expected to do? Are those workers so little valued because they are a source of cheap labour? Are we saying that that work is not important? Worse still, what are we saying about the people who are being cared for? And, of course, that is our most important concern. For some time there has been the notion that nursing and personal care can be separated. I have thought about this long and hard, having worked in the industry. I contend that this is the product of the agile and expedient imagination of economic rationalists who see this imagined separation as a way of cutting costs by providing cheaper labour in aged care facilities and in our communities.

This Bill is our opportunity to give recognition to the fact that many activities and interventions, whilst being performed by others, remain the concern and responsibility of nurses and nursing. The Nurses Board should have the power to regulate all persons delivering nursing care. The Nurses Board should expand its regulatory functions by dealing with complaints. Complaints about care provided by registered and enrolled nurses, as is the case currently, as well as complaints about care provided by support workers in nursing should be the focus. The board should have the legal capacity to investigate such complaints and prosecute not only nurses registered with the board but also the employers of unlicensed workers if proper standards are not upheld.

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Issues that should be of grave concern to us all include the lack of established and enforceable education standards for these groups of workers. It is unfair and unreasonable that if something goes wrong registered and enrolled nurses face losing their registration, while workers such as nurse assistants cannot be brought before the Nurses Board. Although both my parents have long since passed some 30 and 40 years ago, I have parents-in-law and elderly relatives who are still pretty healthy and enjoying their lives.

Whilst they remain independent and do not require access to a residential care facility, nonetheless they are ageing—as are we all, even though we may not want to admit it. Our State population has one of the highest proportions of ageing in Australia. What we all want for our loved ones, and I guess for ourselves, if we are looking to the future, is the best possible care our health industry can provide. As citizens we should all have rights and choices, and we expect that people will be responsible in dealing with those needs in the future. We have a right to information about choice and about fair and safe treatment, and to redress if something goes wrong.

Health is not a simple market, nor is the relationship between providers and consumers of health care a market relationship. However, we all have the right to a voice and the right to exercise this voice in seeing that the type of care we are provided with ensures us our rights and that the most appropriate person provides our needs and care. Most importantly, when we cannot exercise our own voice we have the right to expect that a qualified nurse will be there to advocate for our health care needs. I would like to conclude with a question. How many more Normans have to die senselessly and tragically before we do something about it? We have the opportunity here if we address this Bill carefully.

Mr VENNING (Schubert): I am vitally interested in this subject. First, I want to pay the highest tribute to nurses. Everyone in this place comes into contact with nurses, particularly when we are born—we are brought into the world by a nurse—and if we are sick at all. Also, in the caring of us in our final hours—

Ms Thompson interjecting:

Mr VENNING: I'm sorry, I'm not built that way, otherwise I would help. Certainly, in our final hours we come under the care of a nurse. I pay special tribute to the nurses who work with our aged and infirm. It is a very difficult area and very taxing for these caring and special people. And they do it so well. One instance that was very important to me was the case of my own father, who died two years ago. He suffered Alzheimer's, and the care he was given in his final days was fantastic. As a family, we could not have asked for more. This care was given with great love and understanding, and these people do it time and again. When we see the tasks involved, the fact that they perform them so cheerfully is phenomenal. We all know a good nurse. I know one particularly, because my sister is a nurse, and I appreciate having one in the family. She is also now a lawyer, so I have a double header there!

The Hon. Dean Brown: She's half okay.

**Mr VENNING:** Yes, as the Minister says. It is great to have a nurse in the family with a legal understanding—

**Ms Thompson:** Especially when they tell you which doctors not to go to.

Mr VENNING: My word. I did not hear that! So, the nursing profession as we have known it has come a long way in the past decade or so. Tonight I want particularly to address clause 5. It is acknowledged that consumer representation on the board is important, but I question why we need three or four members. I note that members have spoken previously about this. Other boards such as the Medical Board have a consumer representative. Is one consumer representative, as is the case on the existing board, not sufficient? Before the shadow Minister has a go, I note that the Labor Party has turned the doctor's position into a consumer's, which makes it worse: we are going from one to three, as the Government is proposing, to four. Should we remove the doctor from the board? I would argue the principle of why you would want to do this.

Has the current board not worked well? During the second reading debate I ask the Minister to address these questions if he can, because they are coming from constituents. I also raise the matter of clause 45 concerning the obligation of the employer to report unprofessional conduct to the board. This is an onerous obligation on the employer, because there are infinite degrees of unprofessional conduct. When people are working with mental patients it is sometimes very difficult to assess what is unprofessional conduct, so that ought to be spelt out.

Today there would be hundreds of examples of unprofessional conduct. It is arguable that a nurse already has an obligation to report unprofessional conduct by other nurses; not to do so could be unprofessional conduct as well, and I thought that was already addressed. I also question the powers of the registrar in this instance. Why has this Bill given that person that increased power in this position? Is this an empire builder at work? Why change from the current position?

A professional nurse should ensure the professionalism of their actions. If they are not professional (and we certainly hope they are), the profession has a social mandate to set and maintain the standards of that profession, and it is accountable to the community at law, as the member for Elder would know. The courts have indicated that they will not interfere with expert boards, as they are considered to be composed of expert, professional people. Therefore, is this the thin end of the wedge which in time will lead to an end of nursing as we know it today? With those few comments I commend the Bill, but I question (and the Minister may want to refer to this in his final speech to the second reading) why these matters have been altered and what was wrong with the existing situation. I conclude by again paying the highest tribute to our nursing profession.

Ms THOMPSON (Reynell): In commencing my remarks I also acknowledge family connections with the nursing profession. My sister is a nurse and one of my five brothers is a mental deficiency nurse. Another of my brothers was at one stage what was then known as a medical orderly. I acknowledge that, despite these close family connections with the nursing profession, I did not really know much about their work, the challenges of their profession and the issues relating to training and professional conduct until I was in a senior management position at the then South Australian

College of Advanced Education at the time of the debate about tertiary qualifications for nurses. That was a watershed time in the development of the nursing profession. The way in which the nurses and their professional and industrial representative organisation struggled to achieve professional credibility and recognition for nurses was one of the important social and professional movements of our time.

The issue of movement to tertiary education was not without its difficulties. Within the Labor Party there were strong voices advocating the need for us to preserve a means for working class and country girls (mainly) to get access to professional training while able to support themselves through an income which they derived while they were in training. Certainly, in the case of my sister, her income that she got as a trainee nurse at the Royal Adelaide Hospital was very important in maintaining our family.

However, the wisdom of time shows that the advances that have been made in nursing since tertiary qualifications have been required have really been quite staggering and, in many ways, have led to the need for a re-look at the Nurses Act. I believe that those forces, just as much as the forces of review caused by competition policy, were extremely powerful in causing the current review.

While we have no real evaluation as to the cost of the advances in terms of opportunities for country and workingclass people, we certainly do have very vivid evidence of what has been achieved. I regularly see some of the research achievements of nurses and the way in which they have developed new avenues of clinical practice, particularly the expertise that has been developed through the nursing profession in the treatment of oedema, and the research undertaken by Professor Neil Pillar and others at Flinders University. They have demonstrated the way in which nursing is a practice and an expertise of its own, making an extremely valuable contribution in a variety of complex ways to the whole health care team. They have also demonstrated the way in which we can now export our expertise in nursing care to many places in the rest of the world, to the benefit of developing nations, and to the benefit of Australian universities and the Australian community. Again, the nurses and their representatives deserve our thanks and commendation for their initiatives in this area.

I have also observed the way in which the increase in the professional skills that nurses have obtained over the past few years, or decade, has not been at the cost of the caring element of their job. It is that caring element of the job that most people who have anything to do with someone who is ill see most vividly. This has caused many difficulties at times in terms of getting appropriate recognition for nurses. They have also contributed to developing new pathways in the industrial relations field. The traditional evaluation of jobs has related to the equipment that people use and the skills that they can demonstrate, in ways that have been more easily measured than have caring skills.

We hardly need to bother to talk about these issues at the moment, of course, when the market is the major determinant for wages but the way in which nurses were able to develop measures to quantify their caring skills, having first gone into a lot of detail in describing them, has been very important for women's work in a number of areas. The caring skills demonstrated by nurses at the highest level are often there in a number of jobs practised by women—and traditionally poorly paid. The nurses' struggle to obtain appropriate pay rates has been one of the important industrial struggles of the last decade.

Against this background, I have been quite alarmed by the number of letters that have come into my office expressing concern about some of the aspects of the Bill we have before us. The fact that so many valuable people have expressed so much concern certainly worries me. I would like to focus simply on three elements of the issues raised in the many letters that I have received, and they are supervision, the powers of the Registrar and the composition of the board.

The removal of the requirement for supervision of enrolled nurses by a registered nurse is really quite surprising, at a time when health care is becoming increasingly complex. The involvement of nurses in multi-disciplinary teams on so many occasions means that a nursing plan is an important element of that team's decision-making process. Enrolled nurses simply are not trained to make that contribution to a health care plan or to carry out the development of a nursing plan on a stand-alone basis.

Yesterday I enjoyed the demonstration of the new village concept by the Department of Transport, in which I was told that very soon people in the country would be able to go into their library and use a monitor to dial up the Department of Transport and interact with the department—to write, draw, demonstrate and communicate on a face-to-face basis with people in the Department of Transport, probably at the moment based in town but, the way things are going, it might be in Singapore soon.

This technology seems to create the perfect opportunity to continue the important supervision of enrolled nurses by registered nurses in remote localities. The supervision does not have to be with people at each other's elbows. The supervision is in terms of developing a plan, being able to monitor and evaluate that plan, and generally assess its effectiveness, and review it as and when necessary. In remote situations, that can be done using technology. The expertise of the registered nurse is available to the enrolled nurse via this means.

The medical practitioner in the local town does not have nursing skills and is not able to develop a nursing plan, so their contribution to a health care team is that of a medical practitioner, not that of a nurse. Just as we would not expect the doctor to substitute suddenly for the social worker or the physiotherapist, neither should we expect them to substitute suddenly for the nurse.

In terms of the issue of the powers of the Registrar, the member for Elder referred to the fact that, in his opinion, only the National Crime Authority has equivalent or greater powers, and I do not find it suitable for a single individual to have such extensive powers of investigation in relation to matters that are so vital to people's care and people's professional lives. There are plenty of measures in the legislation for a small quorum of the board to be called together if the whole board is not able to meet and the legislation also provides for teleconferencing meetings of the board. If there is an urgent matter to be investigated, there is plenty of opportunity for that to be investigated by peers through the board rather than by a single individual using the powers vested in the Registrar under the Bill. I consider these powers to be quite inappropriate.

In terms of the composition of the board, again there is the issue of the need for it to be a board of peers or, at least, a board dominated by peers. It might be that from time to time one of those persons is some other member of the health care profession. It may be an occupational therapist, it may be a medical practitioner, or it may be a dentist. The requirement to have a medical practitioner as a member of the board,

while there is no requirement to have any other member of the health care team as a member of the board and no reciprocal requirement in relation to the Medical Board, is an archaic hangover from an earlier era when 'ladies' gave birth. We need to ensure that the board is one of peers, that it is one that can be respected by the profession, that it is able to hold the confidence of the profession, and that the board members can contribute their expertise, whatever it may be, without any requirement for a medical practitioner to be on it. That is what will make the board work. Certainly, the current proposal is causing a lot of concern to the constituents who have contacted me.

I very sincerely hope that the Government will see the importance of listening to the profession and its concerns about the Bill. My understanding is that the Bill is generally supported, but some elements of the Bill are causing real and serious concerns. If this Government wants to be taken seriously in terms of its rhetoric about listening to and consulting with people, it will listen more carefully to what the nurses are saying with such a loud and unified voice. They have the benefit of an organisation that has the wide confidence of the nursing profession as its professional and industrial representatives. I am sure they have also had the benefit of advice from many individual nurses who have been putting forward their views.

So, the Opposition has developed a series of amendments in consultation with the representatives of nurses, and I can only hope that even at this late stage the Minister will consider really listening to and supporting the amendments that the Opposition is putting forward.

The Hon. G.M. Gunn interjecting:

**The SPEAKER:** Order! *Ms Thompson interjecting:* 

The Hon. G.M. Gunn: Touchy young lady!

**Ms Thompson:** I'm not touchy, I'm not young, and I'm not a Lady.

The Hon. G.M. Gunn: We know that!

The SPEAKER: Order! The member for Stuart will come to order

Mr De LAINE (Price): I wish to speak briefly to the Bill. Together with my colleagues, I indicate that I support parts of the Government Bill and support amendments being moved by the shadow Minister, the member for Elizabeth. The shadow Minister has covered all aspects of this Bill in her second reading speech and will, no doubt, very thoroughly cover all the issues involved during the Committee stage tonight. I will not cover all those points; I will leave that in the more capable hands of my colleague the shadow Minister for Human Services.

I take this opportunity to place on the record my support for nurses in general, and particularly the nursing staff at the Queen Elizabeth Hospital which services people in the western suburbs, and particularly the people who live in my electorate of Price. I wish to pay a tribute to these nurses on behalf of my constituents to thank them for the wonderful job they do every day and every night at the QEH. Their dedication, commitment and patience is fabulous, and their contribution is even greater because of the savage cuts made by this Government in successive budgets to this great hospital. I have been to this hospital on countless occasions to visit loved ones and friends who have been admitted because of ill health, and I have seen at first hand the enormous job that the nurses do, despite the conditions under which they work.

They literally run all the time because they are understaffed, and the shortage of equipment at times is appalling.

Despite these enormous pressures these nurses continue to look after the patients very professionally and do so in a friendly and compassionate way. They have been shoddily treated at times by Governments, because Governments know they are so dedicated to looking after and caring for the sick people that they will not take industrial action even though perhaps they should. Here is the chance now for this Parliament to give these hard working and dedicated nurses our support. I ask all members of this place to join me in giving that support in the form of this legislation and the amendments being put forward by the shadow Minister for Human Services.

The Hon, DEAN BROWN (Minister for Human Services): I would like to thank members for their contributions tonight. A significant number of members have made points in the debate. I will start by acknowledging and supporting the point that so many of the speakers made, that is, our broad appreciation of the nursing profession and what they contribute. I must say that one of the outstanding features in the past 12 months or so as the new and inexperienced Minister for Human Services has been the extent to which I have appreciated the enormous support given in our public hospital systems by the nurses. They have borne the pressure of what has been an enormous increase in demand on the public hospital system, and I have appreciated greatly the way in which they have done so with a great deal of professionalism and commitment. In many ways, nurses have been right at the coalface where that increase in demand has occurred. So, I certainly enforce the support and appreciation that has been expressed by members.

Unfortunately, I think that nursing tends often not to be viewed as a profession by younger members of our community, particularly young people coming out of school. One thing that I have tried to do in recent months is encourage young people to take on nursing as a profession. The Government offers scholarships, particularly for rural people to come into the metropolitan area, to get rural people to come to the metropolitan area to obtain their training and then return to the country. The Government has now introduced a scholarship scheme for 10 people in the health profession area, and the majority of those scholarships go to those who study nursing.

I am a strong advocate for increasing the allocation of funds for training. Less than a week ago, I held a dinner for nurses who have received the Premier's award for nursing. Since I have been Minister, the number of recipients of that award has doubled: four people now receive that award each year. This award provides an opportunity for recipients to travel overseas and study for about three weeks in a specialist area, and they can then come back and apply that knowledge to our hospital system. The award is available now for nurses in both public and private hospitals. This is just one of a number of initiatives that the Government has taken to give greater recognition to and encourage more people to enter the profession of nursing.

A number of issues have been raised during the debate which I would like systematically to work through. Let us from the outset recognise and appreciate the fact that this Bill has been through an enormous amount of consultation over about a three year period. It has received strong support for its introduction from across the nursing profession. I am not saying that they agree with every point, but there has been

strong support for it. During discussions with me about a week ago, members of the Australian Nurses Federation said that they had heard my comments on the air, and I think it would be fair to say that they began their contribution by saying that they wanted to highlight the support across the profession for the broad thrust of the legislation.

So, although many members have picked certain aspects on which to comment, I think it should be acknowledged that there is broad support for the Bill and that it is accepted that the thrust of this legislation will take nursing from 1984 (when the last major Bill was introduced) into 1998. One of the first functions that I attended as Minister for Human Services was the Nurses Forum. Having spoken on that night, I recall being besieged by people who said, 'For goodness sake, please bring in amendments or a new Bill as quickly as possible because change needs to be made.' So, we start with a broad acceptance of the proposed changes which will ensure that this profession is applicable to the new millennium as we approach it.

I will now touch on key parts of what has been commented on during the second reading debate. My first point relates to the composition of the board. It has always been my intention to appoint as Chair of the board a person with nursing qualifications. I accept that the Bill as introduced into the Parliament did not specifically designate that, but I always believed that the Minister would have done that, anyway. However, after discussions with the ANF I have agreed wholeheartedly to include that in the Bill, and an amendment has been drafted to that effect. So, the Chair of the board will now be a person with nursing qualifications.

I think that any Minister with any sense would appoint someone who has had fairly recent experience and history operating as a nurse. If that is the case, that immediately changes the composition of the board of 11 members from five nurses to six. So, you immediately have a straight majority of the people on the board who have nursing qualifications. Therefore, of the 11 people on the board, six are nurses. That covers at least one of the key points raised during the second reading debate. I acknowledge the fact that we have on file amendments with which we will deal shortly in relation to that issue.

The second issue concerning the composition of the board related to the fact that there is a doctor on the board. I was somewhat surprised that members opposite did not comment on the fact that the present board has two doctors. That Act was introduced by a Labor Government in 1984, and we are halving the number of doctors on the board. All the publicity I have heard has been the other way around: why have a doctor on the board? In fact, we are halving the number of doctors on the board.

Members interjecting:

The SPEAKER: Order! The Minister has the call.

The Hon. DEAN BROWN: In fact, this Liberal Government has introduced for the first time non-medical people—I think I am right in saying a 'consumer'—to the Medical Board. At present, the board and the Act are under review as part of national competition policy. Certainly, it has been suggested that other health professionals be considered for appointment to the Medical Board. I am not opposed to that idea, so certainly I will look at that when the Act is under review as part of national competition policy.

However, the crucial point is that the inclusion of a medical practitioner on the board does acknowledge that medical practice is a significant environmental factor in the working environment of a nurse. They are part of a broader system, a key part of which is the medical profession. Therefore, I do not think it unreasonable that one of the 11 positions on the board should be held by a doctor. In fact, considering that there were two before, I think it is reasonable to drop back to one. There is an argument to maintain one doctor on the board.

I might add that, under certain circumstances, where there may be formal investigations into adverse incidents or sudden deaths, such as coronial inquiries, increasingly you need to explore the interrelationship between the nursing and medical professions.

Members interjecting:

The Hon. DEAN BROWN: The point is made, and I believe that we have taken a significant step in the right direction by reducing the number of doctors. I highlight the fact that on the crucial issue, namely, the balance of nurses on the board, the composition of the board has been fundamentally changed. There are now six nurses on the board and, of course, the all powerful position, the Chair of the board, is a person with nursing qualifications. I now refer to the register of nurses.

Ms Stevens: The Registrar?

The Hon. DEAN BROWN: No, the register of nurses. This matter affects a whole range of areas, including the fact that midwives would like their own separate register and that you have to understand what we are trying to achieve here. The first point is: to be able to enter the broad practice of nursing you have to register and then, once you are registered, you are authorised to operate in specialist areas, and that is recorded against the name of the person involved. This is why it would be inappropriate to have a series of different registers. We need only one register.

A person's qualifications and their competency to operate are registered alongside their name, so they can practice only in those areas. The only people who could practice in those areas are the people with the competency and the qualifications. If members look at it in that way, there is absolutely no need to have a number of registers and, in reality, there is no difference in having a number of registers compared with the single register about which we have talked.

The member for Elizabeth made the point that, surely with computer technology, we could have several registers. The one thing that computer technology now allows us to do is to have only one register and to have different classes of registration which allows a person to operate in key areas of specialisation. Registration was not set up in this way for administrative reasons; it was set up in this way because of the whole structure we are trying to achieve. There is the broad area of nursing in which various areas of specialisation are involved. A person can enter that field, and then they are allowed to go further only when they have both the qualifications and the competency. Therefore, a midwife or a mental health nurse can operate in their specialist area only if they have the approval of the board.

I believe that gives greater security and greater public surety in terms of the level of competency. So, I do not believe that many of the arguments that have been used in the House tonight and some of the arguments I have seen used in the letters are applicable at all, because I do not think people have understood how the new system will operate. They have seen the proposed change and they have been fearful of it, but they do not understand that that change will protect those specialist areas even further. For instance, under this system—and for the first time—a midwife will be able to hang up a shingle and advertise as a midwife, whereas, in

the past, they have not been able to do that. Therefore, they in fact—

Ms Stevens interjecting:

The Hon. DEAN BROWN: I think we have plenty of midwives here this evening. Therefore, I believe that area of specialisation is protected and gives even greater status than applies at present, because at present it is based on qualifications and not competency as well. I refer to the issue of so-called care workers. In the letters that were sent out by nurses they were concerned that there was 'no capacity to regulate unlicensed workers providing nursing care'. That is wrong, because people cannot provide nursing care on a paid basis without formal registration with the board. I have seen many of the letters and I have heard a lot of comment in the House, but they are quite wrong because no-one is allowed to act as a nurse without registration.

Ms Stevens interjecting:

The Hon. DEAN BROWN: That is what nursing care is—the phrase used is 'nursing care'. One of the letters that has been received refers specifically to 'providing nursing care'. People cannot provide nursing care and not be registered under this Bill.

Ms Stevens interjecting:

The Hon. DEAN BROWN: I am saying that the Bill makes it very clear that, if you are to provide nursing care and be paid for it, you must be registered. Therefore, the point raised by many people—and this has also been raised in the letters—is based on ignorance in understanding the legislation.

Mrs Geraghty interjecting:

**The Hon. DEAN BROWN:** I sometimes wonder, in terms of whom you are trying to drag into nursing, whether you are looking at people who might be serving meals.

Mrs Geraghty interjecting:

The Hon. DEAN BROWN: If you are providing nursing care, under this measure you are required to be registered. Therefore, that is not a valid argument to use. In fact, I challenge anyone to find where in the Bill you can provide nursing care on a paid basis and not be required to be registered.

Mrs Geraghty interjecting:

The Hon. DEAN BROWN: It might happen at present, but that is only because it is still a Bill. Once the Bill is passed, that will not be allowed to happen. The next point I pick up is the issue of absence from the profession for a period of five years. The member for Elizabeth raised this issue in some detail when she questioned the need for an arbitrary five year period. If it is not five years, I almost got the impression from what the member for Elizabeth said that it could be two or three years.

Ms Stevens: It could be any time at all.

The Hon. DEAN BROWN: Who will make that judgment?

Ms Stevens interjecting:

The Hon. DEAN BROWN: In fact, if the person has not practised for five years, the board would assess what type of re-education program the person would need to undertake. In fact, the board has that power. In some areas, if it is a lower level of care, and the person is clearly very close to having the skills available, the board can make a decision as to what the level of re-entry needs to be in terms of undertaking a course. If it is acute care or intensive care, it may be an area where significant change has occurred and the person may require a much more intensive retraining program. The power lies with the board.

I have already had some discussions with the board concerning this area, because I recognise that there is an enormous resource of people in the community who have had appropriate training in the nursing profession and have left the profession, probably to have a family and raise some children, and I would like to encourage those people to return to the profession. It is an area where there are inadequate courses or inadequate access to some of the courses available, and we as a community and Government need to encourage people to access appropriate retraining courses and be able to return to the profession whenever they would like, even if they have been out for a while.

Certainly this is an issue we can deal with in more detail when we go through the individual clauses in the Committee stage. I am very concerned that we do not put in place any barrier that would make it more difficult for people to re-enter the profession after a break of five years, but I can equally see that there could be a need for people to be re-trained. There are other professions that require that and ensure that there is a level of competency before they are allowed back in. So it is not an unusual provision. It is one that certainly I would want to monitor very carefully, because the last thing I want to see is an artificial barrier to re-entry.

I have covered most of the issues that have been raised. The letters asked why we propose to abolish the separate registers for midwives and mental health nurses. I have already dealt with that aspect.

I have not referred to supervision. With the approval of the board, we are allowing an enrolled nurse not to be necessarily supervised by a registered nurse. I wish to make a couple of points. First, I have discussed this matter with the ANF. In fact, I put a number of different proposals to it. I believe more discussion needs to take place in this area and, therefore, in the amendments that I propose to introduce, I have included a six month delay on that part of the legislation so that it will be proclaimed six months after the rest of the legislation to allow an opportunity for the new board to have six months in which to hold discussions with the ANF and other professional bodies to determine in what circumstances and under what conditions special approval can be given whereby an enrolled nurse can operate without the supervision of a registered nurse.

We must remember that it was the member for Elizabeth herself who stressed that the first point in relation to this Bill is that we are concerned about public interest. Clearly, the Bill puts that up front. We are not doing anything that is not in the public interest and the Bill protects that but, at the same time, we want to make sure that, as we go into a new millennium, we are not setting up artificial barriers which, under scrutiny, cannot stand up. I pointed out the six month time period to the federation, which went away and considered it. Its point was that it would like to have six months of negotiations on this aspect before we introduced this amendment. As members know, I will not be back in six months with a further amendment to the Act. The appropriate way to proceed is to pass the amendment now but to include the six month delay, allowing for consultation to take place, so that we are not here in six months amending the Act.

I acknowledge that the federation wrote to me indicating it did not wish to accept that proposal. It made the point that all it was looking for was a delay. It was opposed to the clause as it stood, because it had not yet had those discussions. To be fair to the federation, it might still have been opposed to it after discussions, but its main opposition was on the ground that it wanted a further six months to negotiate

the conditions under which the clause would be used. I believe it is appropriate to go ahead with it but to include the delay mechanism.

I do not wish to speculate in what areas that power might be used. That is really up to the board. I stress that the board, in considering this issue, needs to take into account the public interest, which means the safety of the patients involved. I stress that this provision will not be used lightly. Several members opposite tonight tried to imply that this was the thin edge of the wedge and that before long almost all enrolled nurses would be operating without supervision. Clearly, that is not the case under the Bill at all. First, the board has to approve each individual case and it has the protection of the rest of the Bill to make sure that that provision is not abused.

They are the key points. I highlight to the House that a number of these provisions are being picked up nationally; in particular, the single register is now being picked up across the whole of Australia. We have to take into account the impact of mutual recognition because, if the rest of Australia has a single registration, that would automatically apply by default in South Australia except for people living in South Australia. Certainly, it would not stop people from registering interstate and then moving into South Australia and being able to operate here.

Perhaps people who have written opposing this do not understand the implications of mutual recognition. Under mutual recognition, whatever applies in one State applies throughout Australia: if you get your registration in one State, it will apply in the rest of Australia so that whatever is the minimum standard in the rest of Australia will apply in South Australia. We do not have a chance under this legislation to alter the mutual recognition principle. That is already established around the whole of Australia. Equally under that are the broad principles of national competition, and some of the measures picked up under this legislation are part of the national competition principles. Whether we like it or not, we will have to abide by that. If they are not picked up here, they can be picked up by default through the mutual recognition legislation.

Again, I thank members for their contribution to this second reading debate. Obviously, there are quite a few amendments to be dealt with as we go through the clauses. I would ask that the House deal with those amendments in an orderly way because I think there are 10 pages of amendments from the Opposition and there are almost two pages of amendments from the Government. We need a commonsense approach from both sides of the House to work through the amendments to get the best effect from them. I endorse the second reading of the Bill and I urge all members of the House to support it.

Bill read a second time.

In Committee.

Clauses 1 and 2 passed.

Clause 3.

Ms STEVENS: I move:

Page 1, lines 20 to 22—Leave out the definition of 'enrolled nurse' and the accompanying note and insert:

'enrolled nurse' means a person whose name is enrolled under this Act as a general nurse (supervised);

This amendment seeks to change the definition of 'enrolled nurse' from that which appears in the Bill. In proposing this change of definition I will argue the issues involving 'enrolled nurse (supervision)', relating to clause 24. In relation to 'enrolled nurse (supervision)', we first need to take into account the education and training of enrolled nurses.

Enrolled nurses, as I previously mentioned, undertake a one or two year course through TAFE or a private vocational education provider and are licensed to nurse under the supervision of a registered nurse. That is the basis upon which their training occurs.

Secondly, the Australian National Nursing Council's competency standards are based on a requirement that enrolled nurses be supervised by registered nurses. Thirdly, the supervision of an enrolled nurse by a registered nurse takes many forms, and this point has been made by other people. It does not necessarily mean that someone needs to be standing next to an enrolled nurse: the supervision takes many forms. The Minister pointed out that, under clause 16, the first function of the Nurses Board is to regulate the practice of nursing in the public interest.

In light of the fact that the education and training of an enrolled nurse is to be supervised and that national competency standards are based on supervision, how can the public interest be upheld if the Minister does not follow through on that aspect? The Minister has not satisfactorily answered that question. The Minister has made the point, and we are in absolute agreement, that the public interest function of the board should be the No. 1 priority.

I would like to know how the Minister sees that the public interest, in terms of the standard of nursing care, is upheld by taking this away. I note that the Minister has offered in his own set of amendments (and he referred to this a moment ago) that he would defer putting this into practice for six months, until further modifications could be made in relation to working out what sort of conditions enrolled nurses could work under without supervision. This is a significant change to nursing practice. It will be the first time in Australia that this has been done, so we need to be sure that, if there is a solution, it is found before we change the Act. That is why we are not prepared to support the midway point that the Minister is offering in his amendment to clause 24 further down the track.

We believe that this is a very critical issue and that if discussions need to take place they do so before the Act is changed. The Minister has noted that he will not be able to come back in six months and make amendments to the Act. He can do that, although it might be a bit messy; it is not impossible. But, if people would get their act together, we could come back before this Bill is put through the other place and have those discussions as a matter of urgency, and come up with something before the Bill passes both Houses. We are saying that the competency standards in education and training are all based on supervision, and we do not believe that the public interest can be safeguarded with this change.

I want to know how the Minister sees it being safeguarded; how he can ensure that people who have an education and training qualification and competency qualification that says they have to be supervised can do it without supervision. I want to see how that is safeguarding the public interest. We are very firm on this matter, and we have an amendment to clause 24 in which we actually say that enrolled nurses must work under the supervision of a registered nurse.

The Hon. DEAN BROWN: The honourable member has failed to appreciate that the onus of proof is the other way around: under clause 16 there is an obligation on the board to look after the public interest. If the obligation is there under clause 16, the board will not be able to do it unless the public is safeguarded, unless it is in the public interest. The honourable member has said that she wants the Minister to

prove that the public interest will not be damaged here, but it is around the other way. In fact, the board will not be able to do it. Anyone who finds that the board has acted under special arrangements approved by the board and not in the public interest will be able to take action under the Act and will be able to take the board to court and say that it has acted contrary to the Act. Therefore, any special arrangements they have approved would be invalid. So, the honourable member has put the onus of proof incorrectly in terms of how the whole Act is drafted. She should have been in here long enough now to realise.

Ms Stevens interjecting:

**The Hon. DEAN BROWN:** You have been here five years now—

The SPEAKER: Order!

**The Hon. DEAN BROWN:** I make the point: read the legislation and understand it, because what you claimed about the onus of proof is the other way around.

Ms STEVENS: Thank you, Minister, for your patronising comments. However, I have read the legislation and I have a very valid point. You are saying the onus is on the board to ensure that the public interest is safeguarded. How? I want you to tell me specifically how that would happen, especially in light of the fact that enrolled nurses have an education qualification that stipulates that they are to be supervised, and the national competencies they are working under are also based on their supervision by a registered nurse. Okay, you say the board will safeguard it; I want to know how.

**The Hon. DEAN BROWN:** That is up to the board. It has a legal obligation to safeguard the public interest.

Ms Stevens: How?

The Hon. DEAN BROWN: It has all sorts of powers under which to do it. It has the power to do it, it is required under the Act to do it and, therefore, if it is not doing it you can then take action under the Act. Any party who believes that the public interest is not being protected can take that action. A picture has been painted by some who want to try to distort this legislation by making out that this will become common practice. First, the legislation itself provides special arrangements approved by the board. I know of other legislation which has already been challenged in the Supreme Court and various areas, where special arrangements approved by the board are applied as a broad blanket. The honourable member may recall the shopping hours legislation, where this type of issue was challenged in the courts. Because it was a blanket cover approved by the board under shopping hours when it should have been a special occasion when the exemption was granted, the Supreme Court rejected it. Exactly the same sort of condition would apply here.

Therefore, the argument that has been used by a number of members tonight that this would become common practice and would be used widely just does not stand up to examination, particularly when you look at some of the judgments handed down by the Supreme Court. So I do not need to prove it; the court and the interpretation of the law of this State make that very clear indeed. Members who continue to make this claim clearly do not understand what is provided in this Act and what the precedent of law in this State has been.

Ms STEVENS: Minister, I asked you to explain to me specifically how the board could guarantee to safeguard the public interest. You have not been able to do that, except to say that special arrangements would be approved by the board, but you have not been able to answer my question specifically. Also, what you have done here is to hand out a

sop to people who are against this by saying, 'Give us six months and we will work out the special arrangements.' My point is that they are not worked out; this is a very critical issue. This is being done for the first time in the country and it is a significant issue. You say that some people are concerned about this; I would say that 95 per cent of nurses are concerned about it. This is a significant issue. The fact that you have not been able to answer my specific question exactly proves my point.

The Hon. DEAN BROWN: It is up to the new board—and this is what I see as being discussed in the first six months—to work through what it sees as the process under which it would grant an exemption. Quite clearly, because it is defined in the Act as 'special arrangements approved by the board', the board would have to set down a protocol of procedures—if this is what the honourable member is asking about—in terms of how it identifies those special arrangements and how it consults with various people, remembering that there is a majority of nurses on the board and that those people on the board have a governance responsibility—specifically, again, under section 16—in terms of the public interest. So, here you have a majority of nurses looking at special arrangements.

Is the honourable member saying that there can be absolutely no circumstance where an enrolled nurse could operate without the supervision of a registered nurse, and yet the public interest would still not be protected? I can put that back to the honourable member because, in fact, under her argument, there would be no circumstance. I am arguing that, in fact, there could be some circumstances, and it is up to a majority of this board to decide that. The nurses on the board will make their professional judgment and they will lay down a protocol procedure under which they would do that—in other words, who they need to consult.

I have had some discussions with the Australian Nurses Federation about some of those procedures that might be looked at in terms of consultation. That is for the board to decide and I suppose that, ultimately, the Minister has to be satisfied that they are, in fact, special arrangements. There is an obligation that ultimately comes back on to the Minister.

The CHAIRMAN: I remind the Committee that there are some 60 amendments, and we are dealing with the first amendment at this stage. However, the Chair is prepared to show some flexibility, recognising that it is the honourable member who is moving the amendment. The Chair does not want to make a practice of this, but if the honourable member wishes to make one further point she can do so.

Ms STEVENS: I believe that the Minister asked whether I thought there were no circumstances where an enrolled nurse could act without supervision. What we are saying is that, at this point in time, we do not believe that the Minister has demonstrated that he knows what the special arrangements need to be in relation to any change. We are saying that, if this was changed, it would be the first of its kind in Australia and a significant change to the profession and the way in which things have been organised and done.

We believe that the public interest is foremost and that it needs to be maintained and safeguarded, and we are saying that, at this time, we do not believe that this procedure is proven. So, we uphold our amendment. We reject the Minister's offer of the six months, because we believe that the Minister has to get his act together completely for a change of this magnitude and not just have six months built into the Bill.

The Committee divided on the amendment:

#### **AYES** (21

Atkinson, M. J.	Bedford, F. E.
Breuer, L. R.	Ciccarello, V.
Clarke, R. D.	Conlon, P. F.
De Laine, M. R.	Foley, K. O.
Geraghty, R. K.	Hanna, K.
Hill, J. D.	Hurley, A. K.
Key, S. W.	Koutsantonis, T.
Rankine, J. M.	Rann, M. D.
Snelling, J. J.	Stevens, L. (teller)
Thompson, M. G.	White, P. L.
Wright, M. J.	

#### NOES (23)

Armitage, M. H.	Brindal, M. K.
Brokenshire, R. L.	Brown, D. C. (teller)
Buckby, M. R.	Condous, S. G.
Evans, I. F.	Gunn, G. M.
Hall, J. L.	Hamilton-Smith, M. L.
Ingerson, G. A.	Kerin, R. G.
Matthew, W. A.	Maywald, K. A.
McEwen, R. J.	Meier, E. J.
Olsen, J. W.	Oswald, J. K. G.
Penfold, E. M.	Scalzi, G.
Such, R. B.	Venning, I. H.
Williams, M. R.	

Majority of 2 for the Noes.

Amendment thus negatived.

**The CHAIRMAN:** Before we resume with the legislation, I have been informed that in some sections of the building the bells are faulty. Although they are ringing they are very faint so I would advise members to keep their ears attuned

#### Ms STEVENS: I move:

Page 1, after line 24—Insert:

'general nurse' means a person who is qualified in accordance with this Act to practise in all fields of nursing (other than as a mental health nurse or as a midwife) without supervision;

'general nurse (supervised)' means a person who is qualified in accordance with this Act to practise in all fields of nursing under supervision;

Page 2—

After line 7—Insert:

'mental health nurse' means a person who is qualified in accordance with this Act to practise in the field of mental health nursing;

'mental health nurses register' means the register kept under this Act of mental health nurses;

'midwife' means a person who is qualified in accordance with this Act to practise midwifery;

'midwifery' means care, assistance or support provided to a mother or child in relation to pregnancy or the birth of a child;

'midwives register' means the register kept under this Act of midwives;

After line 8—Insert:

'nurses register' means the register kept under this Act of general nurses;

'nurses roll' means the roll kept under this Act of general nurses (supervised);

Lines 14 to 18—Leave out the definitions and note in these lines and insert:

'registered nurse' means a person whose name is registered on a register under this Act;

This set of definitions relates to the question of whether we have a separate register or whether we have the *status quo*, which is three registers. I outlined the arguments for this before. A few moments ago the Minister said that this single register would enable nurses to enter a broad practice. Once they entered in that way they could be authorised in specialist areas which could be recorded against the name of each

person and, therefore, this would be the way that this single register would operate.

A number of groups of people are very concerned about this matter, for example, the midwives. Midwives, particularly if they get approval to enter midwifery through direct entry, will not be nurses as such. They will be midwives, and they will enter via a direct entry course which the Minister has indicated can be considered by the Nurses Board in the near future. It was just pointed out to me in the break that if a midwife comes through on the single register, as proposed in the Bill, the badge that that person will wear will indicate 'nurse—midwife'.

A big issue for midwives is that they see themselves as not being general nurses at all but as midwives. They believe—and this is a legitimate argument—that, by having them on the other register, which is really set aside for general nurses with specialist qualifications, is confusing for consumers, when consumers ought to know that somebody who is only a midwife, probably through direct entry, should simply be known only as a midwife. The badges that they wear and everything else about them should indicate midwife only, not 'nurse—midwife', because they simply will not be that. That argument really applies across the other specialty areas as well. That is the argument, and that is how we see it.

The Hon. DEAN BROWN: The most powerful argument of all is that 5 000 midwives are registered in South Australia, 4 994 of whom—that is, all but six—have the qualifications of and are registered as a nurse. Therefore, effectively you are looking at identical registers. Six out of 5 000 is about one in 1 000. Let us look at the logic behind what we are trying to do. If we were watering down the role of midwives through this measure, I would be the first to support the point being made by the member opposite. However, the facts are that we are not. If anything, we are strengthening the role of the midwife; we are strengthening the role of the mental health nurse; and we are creating an opportunity in the future to set up other areas of specialisation, not just these two.

I imagine that one of those crucial areas could be intensive care nursing or trauma nursing, which is a relatively newer area of specialised nursing. I think that in the future other new areas of nursing which require a great deal of specialisation and very high standards of competency will emerge. We will want to put those people apart and say, 'Here is a group of people who are highly trained specialists who can practise only in this one area.' Therefore, I reject the argument that we are trying to water down standards, when we are trying to lift standards, not just in the area of midwifery or mental health nursing but also in other areas of specialisation.

I ask the honourable member whether, if we set up these other areas of specialisation, we would have to provide a separate register for them also. It is just not logical to create a separate register for every area of specialisation in a profession where specialisation is always increasing. Nursing is probably one profession in which more specialisation is occurring than in almost any other profession.

Ms STEVENS: Within the group of definitions there are definitions of 'midwife' and 'midwifery'. In my second reading contribution I said that it was important not only to protect definitions in the Act but also to define them in the legislation. This is part of that attempt to define the terms 'midwife' and 'midwifery'. If this is lost on the basis of the separate registers, is the issue of having definitions in the legislation something about which we can have discussions when the Bill is considered in another place?

The Hon. DEAN BROWN: At present, there are 47 areas of specialisation. If we do it for one or two areas of specialisation, we will end up with 47 different registers. The next thing is that you will have to pay a different registration fee for each of them, and next we will have a lot of complaints from people who have to pay perhaps two or three registration fees because they are specialists in different areas. Frankly, I think there is more likely to be argument on the administrative side about having separate registers than there is about having a single one.

I refer to a point that another member raised about direct entry. There is nothing stopping a suitably trained person with qualifications in midwifery from having direct entry onto the register here and not having thereon the other more general qualifications as a nurse. That person would then be registered under the Act as a midwife, in other words, a person with competency and qualifications in midwifery, and would be able to train as such. So, there is nothing for those people to fear at all in that respect.

The honourable member has asked, if the separate register issue is lost, whether I would at least be willing to have discussions in terms of definitions. I am willing to have those discussions. This measure will not be debated in the Upper House until next year. In the interim, I am willing to talk about the definition issue with the honourable member. I am yet to be convinced. I think there is a strong argument against putting in definitions, but I am only too willing to have a fairly detailed discussion on it.

Mr MEIER: I have not yet contributed to this debate. I have heard the comments from both sides of the Committee and the Minister's response to the various concerns. I have certainly been contacted by quite a few nurses—fewer from my own electorate than from outside—who have raised with me a variety of issues, including the particular issue as it relates to the inclusion of midwives in the legislation.

In most cases, I took the opportunity to refer the correspondence to the Minister as soon as I received it so that he could consider the various issues they raised, and I thank the Minister for giving due consideration to those issues. I believe that the key issue is that, of the some 5 000 people who are registered as midwives—and the Minister will correct me if I am wrong—only six are not registered in that group and therefore-

The Hon. Dean Brown: Only six do not have nursing

Mr MEIER: I respect that argument, and I think it is compelling. Whilst I acknowledge the arguments from those who are qualified midwives—and I have had a personal conversation with several of them and recognise the views that they put forward—I hold to what the Minister has stated in response to the issues relating to these definitions. Certainly, we can achieve perfect legislation, but it will not necessarily suit everyone—and that is fully recognised. I believe I have put forward the views as strongly as I can, and I thank the Minister for considering them. I believe that the Minister's approach will serve the best interests of the nursing fraternity.

The Hon. DEAN BROWN: In closing the second reading debate I raised the point that I thought this potentially gave midwives greater recognition and freedom, and I mentioned the fact that they will be able to hang up a shingle and advertise. I noticed someone in the House shook their headand I will not say from where—and I checked again. There are restrictions on advertising at present; that is, they can do some advertising but there are restrictions. Under this legislation those restrictions, which currently are in regulations, not in legislation, will be lifted. So, there is greater freedom for midwives to advertise under this legislation compared with what they can do at present.

Amendments negatived.

#### Ms STEVENS: I move:

Page 3, after line 9-Insert:

- (3) For the purposes of this Act, nursing practice means nursing care provided to an individual or a defined group within the community in order to assist the person or group to reach or maintain a particular goal associated with their health and wellbeing
- (4) A person may provide nursing care by observing, assisting, reporting, monitoring, diagnosing, planning, evaluating or intervening in relation to the health care of an individual or group and nursing care may include undertaking an associated responsibility for education, research or management.
- (5) Subsections (3) and (4) operate subject to any determination of the board as to the scope of nursing practice for the purposes of this Act.

The amendment defines 'nursing practice'. We believe strongly that there needs to be a definition of 'nursing practice'. Again I refer to clause 16 and the first function of the board, which is 'to regulate the practice of nursing'. Therefore, we think that 'nursing practice' should be defined in the legislation.

The Hon. DEAN BROWN: I am happy if this is one of the issues we look at before the legislation is debated in another place. I will oppose it now, but I am willing to discuss the matter further.

Amendment negatived; clause passed.

Clause 4 passed.

Clause 5.

The CHAIRMAN: There are two amendments on fileone is to be moved by the Minister and the other by the member for Elizabeth. This is rather complicated, but to safeguard the Minister's amendment, which occurs within the words proposed to be left out by the member for Elizabeth, the Chair will put the question on the member for Elizabeth's amendment only up to the point at which the Minister's amendment seeks to have effect—that is, to leave out the words, 'must be a person' in line 17. If that question passes, the Minister's amendment cannot proceed and I will put the remainder of the member for Elizabeth's amendment. If the first part of the member for Elizabeth's amendment is lost, the remainder will not be put and we can deal with the Minister's amendment.

## Ms STEVENS: I move:

Page 4, lines 17 to 19—Leave out paragraphs (a) and (b) and insert:

(a) six must be nurses registered or enrolled under this Act; and

Line 20—Leave out paragraph (c).

Lines 22 and 23—Leave out paragraph (e) and insert:

(e) four must be persons, nominated by the Minister, who are not eligible for appointment under a preceding paragraph and who are considered by the Minister to be appropriate persons to represent the interests of consumers.

After line 24—Insert:
(2a) The Governor must appoint one of the members of the Board appointed under subsection (1)(a) as the presiding member of the Board.

This is a very important amendment in relation to membership of the Nurses Board. The Opposition believes two things in relation to this amendment: first, that a majority (six) of the Nurses Board should be nurses; and, secondly, that the Presiding Member of the board should be a nurse who would come under the provisions of this legislation. We differ from the Minister because the Minister is saying that the Presiding Member of the board simply has to be a person with nursing qualifications. In other words, they could have left nursing some years ago, and they could have retained their Bachelor of Nursing or whatever they have achieved and no longer practise. Under the Minister's amendment, that person can be the Presiding Member of the board.

We are saying that the board needs to be chaired by somebody who is currently practising under the provisions of this legislation, and that is about being completely up to date, about being part of things that are happening now and needing to be able to use that to lead and to do all the things required into the twenty-first century. So, we are saying that a majority of board members (six) should be nurses, but the critical point is that the Chairperson would not be somebody who has nursing qualifications but who left nursing 10 or 15 years ago.

The Hon. DEAN BROWN: I have already talked about the amendments. I reiterate that I am now specifying that the Chair of the board needs to be a person with nursing qualifications. That means that six of the 11 members of the board will have nursing qualifications. Under clause 10, every member of the board has a vote on any issue. With 11 members, including the Chair, who will have a vote, if there is a equal vote on any issue, the Chair shall have a casting vote. The Chair will have both a deliberative and a casting vote. In reality, potentially 12 votes can be cast at any meeting, although there will not be an even vote on the first 11 votes. If someone is absent, there is always effectively an extra vote over and above that for people with a nursing background. The Chair will get both a deliberative and a casting vote.

I will give an example. If all members are present and there is an equal vote amongst the non-Chair members, the Chairperson will have a deliberative vote, which will ensure that, even without having to use a casting vote, the issue is passed in favour of the nurses. Therefore, effectively there are two safeguards written in to ensure that those with nursing qualifications have a greater say than those without nursing qualifications. I stress that there is both a deliberative vote and a casting vote for the Chair, and that effectively creates an extra vote for the person with nursing qualifications. I understood the point that had been made earlier by the federation. In my discussions with it, in requiring the Chair to have nursing qualifications, I believe there is added protection because, if there is an even vote, the Chair has the casting vote as well.

Ms STEVENS: Our position is that the Chair should not only have qualifications but should be registered or enrolled under the Act.

Mr McEWEN: I have sympathy for the member for Elizabeth's point but I come back to the Minister's explanation about when the casting vote can be used. The casting vote is relevant only if there is an equal number of votes in the first place. A quorum being 50 per cent plus one, ignoring fractions, in extreme circumstances there could be four non-nursing members of the board in a quorum of six and, even with the presiding officer using the casting vote as a registered nurse, the matter could still be defeated.

I applaud the Minister's taking up the issue of redressing the balance on the board by having as the presiding officer a registered nurse. That is a move in the right direction, but there is still some sympathy for the suggestion that the presiding officer actually be practising at the time. Perhaps in the break the Minister might have another look at it, because the profession would be comfortable if the presiding officer, who I acknowledge on occasions will be exercising both a deliberative and a casting vote, was actually practising. That is a positive move and I have some sympathy for that request by the member for Elizabeth on behalf of the profession.

The Hon. DEAN BROWN: The answer to the specific question asked by the member for Gordon is that, yes, I am willing to look at it during the break. However, it needs to be recognised that, in terms of the Chair, we are looking at someone who has had some experience, and we could well find that the person has nursing qualifications, has practised as a nurse for a number of years and then has gone on to a more senior role as an administrator.

Mr Venning: Or a lawyer.

The Hon. DEAN BROWN: Even a lawyer. The member for Schubert knows someone well who has both nursing and legal qualifications. It just highlights the point that we are looking for an outstanding person as Chair, and invariably outstanding persons have had experience in the profession and then moved onto a broader role. I would not like to exclude those people from being selected as Chair. In fact, I think we would be doing ourselves a disservice by excluding someone like that from taking on the role of Chair.

The Committee divided on the amendment:

#### AYES (22)

Atkinson, M. J.	Bedford, F. E.	
Breuer, L. R.	Ciccarello, V.	
Clarke, R. D.	Conlon, P. F.	
De Laine, M. R.	Foley, K. O.	
Geraghty, R. K.	Hanna, K.	
Hill, J. D.	Hurley, A. K.	
Key, S. W.	Koutsantonis, T.	
McEwen, R.J.	Rankine, J. M.	
Rann, M. D.	Snelling, J. J.	
Stevens, L. (teller)	Thompson, M. G.	
White, P. L.	Wright, M. J.	
MODE (OA)		

NOES (24)

Armitage, M. H.
Brokenshire, R. L.
Buckby, M. R.
Evans, I. F.
Brindal, M. K.
Brown, D. C. (teller)
Condous, S. G.
Gunn, G. M.

Hall, J. L. Hamilton-Smith, M. L.

Ingerson, G. A.
Kerin, R. G.
Kotz, D. C.
Matthew, W. A.
Meier, E. J.
Oswald, J. K. G.
Scalzi, G.
Venning, I. H.
Kerin, R. G.
Maywald, K. A.
Maywald, K. A.
Maywald, K. A.
Penfold, E. M.
Such, R. B.
Williams, M. R.

Majority of 2 for the Noes. Amendment thus negatived.

## The Hon. DEAN BROWN: I move:

Page 4, line 17—After 'person' insert: with nursing qualifications

I will not go over the debate. Having previously touched on the relevant matters, I simply move the amendment.

Amendment carried.

### **Ms STEVENS:** I move:

Page 4, line 20—Leave out paragraph (c).

This amendment removes the requirement for a medical practitioner to be on the board. Enough has been said about this matter.

Amendment negatived.

#### Ms STEVENS: I move:

Page 4, lines 22 and 23—Leave out paragraph (e) and insert: (e) three must be persons, nominated by the Minister, who are not eligible for appointment under a preceding paragraph and who are considered by the Minister to be appropriate persons to represent the interests of consumers.

This amendment is consequential in part on the passing of the previous amendment. I move this in order to make it more specific in the legislation that the people in this category are representing the interests of consumers on the Nurses Board. I am making explicit something that the Minister said in his second reading explanation, with which the Opposition agreed, namely, that it was very important to have a consumer perspective. This was highlighted by the Minister in his second reading explanation, and I think it important enough for it to be explicitly put in the legislation.

**The Hon. DEAN BROWN:** I oppose the amendment, and in doing so I want to make sure that, apart from the amendment that I have moved, which has been passed, section 5(1)(e) of the Act will stand as currently printed.

**Ms STEVENS:** I register my surprise at the Minister's response, because I would have expected that, in relation to his comments about how important it is for consumers to be on this board, he would support this, which simply states those comments in the legislation.

Amendment negatived; clause as amended passed.

Clauses 6 to 9 passed.

Clause 10.

#### Ms STEVENS: I move:

Page 6, line 8-Leave out 'two' and insert 'three'.

This clause relates to the board's procedures. Currently clause 10(2) provides that at least two of the members of the board appointed under clause 5(1)(b) must be present at any meeting of the board. In other words, at least two of the nurses should be present at any meeting of the board. We are suggesting that that be made three rather than two.

The Hon. DEAN BROWN: I do not accept this. You cannot start saying that Fred and Joe Blow and someone else should attend to make up a quorum; it becomes awfully messy. There are six nurses on the board and there is an obligation for a reasonable number of board members to attend. A quorum requires six members to be there. Frankly, we are asking two out of the six who are qualified nurses to be there. Two out of six is not many, and if two out of six are not present there is something wrong with the board members. I put the onus back onto whether the members who are sitting on the board are carrying out their function, because they ought to be.

**The CHAIRMAN:** Order! Is it the intention of the member for Elizabeth to move both her amendments to clause 10 or to treat them separately?

Ms STEVENS: This is slightly altered because of changes in the membership of the board. What I had intended was that originally two out of five nurses had to be at any meeting of the board. We have now increased the total number of nurses on the board to six, so I am saying that three out of the six ought to be present. There probably needs to be a change to the amendment to provide three of the six members of the board appointed under 5(1)(a) and 5(1)(b), including the Chair. So, there needs to be a change to that amendment to 10(2) which combines those two.

**The CHAIRMAN:** Order! The member for Elizabeth has been successful in completely confusing the Chair on this one.

Ms STEVENS: I seek to amend my amendment to page 6, line 8: to leave out 'two' and insert 'three'; and, in the same line, after the word 'section,' insert '5(1)(a) and 5(1)(b)'.

The CHAIRMAN: Order! I would suggest that the honourable member move these amendments separately. We are working under difficult circumstances here. It is usual for the honourable member to bring the changes to the table, but we are trying to facilitate speedy passage. The member for Elizabeth has moved an amendment to clause 10, page 6, line 8, to leave out 'two' and insert 'three'.

Amendment negatived; clause passed.

Clause 11 passed.

Clause 12.

## Ms STEVENS: I move:

Page 7, after line 18—Insert:

(2a) A member of the staff of the board must be employed on conditions that are not less favourable to the conditions applying to persons holding a comparable position under the Public Sector Management Act 1995 or the South Australian Health Commission Act 1976.

**Ms STEVENS:** I mentioned this issue in my second reading speech. I believe that it is a straightforward amendment, and I do not need to say any more.

The Hon. DEAN BROWN: I am willing to have further discussions with the honourable member on this point during the parliamentary break. At this stage, I will oppose it. We have had little time to, in fact, examine the amendments of the Opposition, because they were put on file only today (as were ours), and I appreciate that. So, I will give further thought whether or not we might adopt that. However, I will oppose it at this stage.

Amendment negatived; clause passed.

Clauses 13 to 15 passed.

# The Hon. DEAN BROWN (Minister for Human Services): I move:

That the time for moving the adjournment of the House be extended beyond 10 p.m.

Motion carried.

Clause 16.

**Ms STEVENS:** I did have an amendment but it has been lost, because it really depends on the single register issue.

Clause passed.

Clause 17 passed.

Clause 18.

**The CHAIRMAN:** Both the Minister and the member for Elizabeth have identical amendments.

#### The Hon. DEAN BROWN: I move:

Page 10, lines 31 to 34, page 11, lines 1 to 4—Leave out subclause (4).

Amendment carried.

## The Hon. DEAN BROWN: I move:

Page 11, line 6—Leave out 'or the Registrar'.

This is identical to the amendment on file by the Opposition.

Amendment carried; clause as amended passed.

Clauses 19 to 22 passed.

Clause 23.

## Ms STEVENS: I move:

Leave out this clause and insert:

Registration

23. (1) Subject to this Act, a person is eligible for registration as a general nurse, mental health nurse or midwife under this Act if the person—

- (a) has qualifications approved or recognised by the Board for the purposes of registration on the appropriate register under this Act: and
- (b) has met the requirements determined by the Board to be necessary for the purposes of registration on the appropriate register under this Act; and
- (c) is a fit and proper person to be registered under this Act.
- (2) Subject to this Act, registration as a general nurse authorises the nurse—
  - (a) to practise in all fields of nursing, other than as a mental health nurse or a midwife, without supervision; and
  - (b) to practise in the fields of mental health nursing and midwifery under the supervision of a mental health nurse or midwife (as the case requires).
- (3) Subject to this Act, registration as a mental health nurse authorises the nurse to practise in the field of mental health nursing without supervision.
- (4) Subject to this Act, registration as a midwife authorises the practice of midwifery without supervision.
  - (5) The Board may, on conditions determined by the Board—
  - (a) authorise a general nurse to practise in the field of mental health nursing or midwifery without supervision;
  - (b) authorise a mental health nurse or a midwife to practise in any other field of nursing.
- (6) The Board may, as it thinks fit, by written notice to a nurse who holds an authorisation under subsection (5)—
  - (a) vary conditions that apply under that subsection;
  - (b) revoke an authorisation under that subsection.

This clause relates to specialist qualifications and it provides that a general nurse can practise in all fields of nursing other than as a mental health nurse or as a midwife without supervision. Our amendment contains some consequential measures relating to the separate registers issue, but also woven through it is the issue of specialist qualifications. There are two things twisting through this amendment, that of separate registers, which has been lost, and that of specialist qualifications.

The Hon. DEAN BROWN: I oppose this amendment, and let me spell out why. I indicated that, under the provisions of this Bill, there was greater protection for the professions of midwifery and mental health nursing than is currently the case. At present, a general nurse can operate under the supervision of a midwife in the area of midwifery. However, under the Bill that could not occur. The only ground on which a person could operate in the area of midwifery would be where a person has suitable qualifications and competency in the area of midwifery. We are actually protecting the midwifery profession even more than at present.

Having heard arguments tonight during the second reading debate, I would have thought the Opposition and the midwives would support this amendment—and I see some nodding of heads around the place—because we are lifting the requirements for standards for a person to be allowed to practise in the area of midwifery. A clear inconsistency is coming through. One moment they said we are putting midwifery under threat. In fact, we are lifting the standards for that, and I have argued consistently for that. Now they are opposing the very clause that establishes that higher standard.

Ms STEVENS: I absolutely disagree with the Minister's comments. This is an absolutely critical issue. As I outlined in my second reading speech, one of the principles for the review of the Nurses Act was that of protection for the public good and the facilitation of information and education to the public to enable consumers to make informed choices as to their health service providers. The current Act requires nurses working in the areas of midwifery and mental health to hold specialist qualifications or to be supervised by a nurse with those specialist qualifications. The Bill removes this require-

ment and the safeguard it provides for patients with these health care needs. I and many thousands of other people—nurses, midwives and others—simply do not accept what the Minister has just said, that it strengthens these requirements. We say it does exactly the opposite.

The Bill removes the requirements of specialist qualifications whilst maintaining what are identifiably illusory protections such as restrictions upon the use of specialist titles of 'midwife' and 'mental health nurse'. This is likely to result in confusion and misunderstanding by consumers, and reduction in the capacity of consumers to make informed choices as to health providers. We also believe there is potential harm for the public, if expert trained nurses are not required in midwifery and mental health areas. As I said before, it is not enough to rely on employers alone to meet their duty of care. Unfortunately, there are already too many examples of unscrupulous employers in their efforts to cut costs not providing suitably qualified staff. We made the point before, too, that employers are under increasing pressure to meet increased demand with diminishing resources.

It is not enough to rely on an employer's duty of care or individual nurse's compliance with codes of conduct and the like. Nurses are too often placed in a situation where they are directed to work in areas in which they do not feel competent. They are sometimes pressured into acceptance through appeals to their concern for patients' welfare or colleagues in areas grossly under staffed. They are also lured into acceptance by promises of support and assistance that are in many cases illusory as a consequence of other nurses' heavy workloads.

So, we say that this is a critical area and that patients have the right to expect people qualified in midwifery and mental health to deliver care or, if a person does not have a midwifery qualification, that they be supervised by someone who does have a qualification in midwifery or mental health. We believe this is extremely important. We make that point, and we follow up with a further amendment later which deals with the fact that there may be other areas where such conditions also ought to exist.

The Hon. DEAN BROWN: With all due respect for the argument just put by the honourable member, I do not think she appreciates or understands some of the powers that are provided under other clauses of the Bill. She is insisting on two important issues: first, that a person must have the qualifications to operate as a midwife and, secondly, that a person must perform under the supervision of a midwife. In this legislation, we use the power of registration—not that of an employer—to say that the only person who can operate as a midwife is a person who has both the appropriate qualifications and competency, and we exclude the possibility of a person performing as a midwife under supervision.

If ever there was an example of the opposite argument, where a general nurse is ordered to work in this area, it is under the present legislation. Under the proposed legislation, that would be prohibited. So, although I appreciate the honourable member's concerns, I think she misunderstands the legislation very seriously indeed. I am happy during the break to work through this in some detail, because I think the honourable member is making a grave mistake in judgment. Under this clause and other clauses, some of which have already been passed (for instance, clause 16, etc.), we are setting a higher standard than that which currently exists in terms of midwifery. We are protecting the profession.

If the honourable member's argument had any validity, I would support it, but her argument is just the opposite. We have seen tonight how complex this legislation is. Many different parts of the proposed legislation interact with this clause. I think someone has misunderstood quite badly what this is all about. I therefore urge the honourable member to reconsider. As I said, I am willing to discuss it with her during the break.

**Ms STEVENS:** I thank the Minister for his offer of discussion, but he should understand that not only I but all nurses and midwives have also misunderstood. So, 23 000 other people, my colleagues and I have misunderstood. At this point, that makes about 23 025 people.

**The Hon. Dean Brown:** How many of them have read the legislation?

Ms STEVENS: Whether or not they have read the legislation, I think the Minister has a huge problem on his hands to explain not only to me but also to 23 000 other people that he is protecting the standard of care for patients, because it is clear that we do not believe he is.

The Committee divided on the amendment:

#### AYES (21)

Bedford, F. E.
Ciccarello, V.
Conlon, P. F.
Foley, K. O.
Hanna, K.
Hurley, A. K.
Koutsantonis, T.
Rann, M. D.
Stevens, L. (teller)
White, P. L.

### NOES (25)

Armitage, M. H.	Brindal, M. K.
Brokenshire, R. L.	Brown, D. C. (teller)
Buckby, M. R.	Condous, S. G.
Evans, I. F.	Gunn, G. M.
Hall, J. L.	Hamilton-Smith, M. L.
Ingerson, G. A.	Kerin, R. G.
Kotz, D. C.	Lewis, I. P.
Matthew, W. A.	Maywald, K.
McEwen, R.J.	Meier, E. J.
Olsen, J. W.	Oswald, J. K. G.
Penfold, E. M.	Scalzi, G.
Such, R. B.	Venning, I. H.
Williams, M.R.	-

Majority of 4 for the Noes.

Amendment thus negatived; clause passed. Clause 24.

#### The Hon. DEAN BROWN: I move:

Page 15, after line 16—Insert:

- (4) However, the board must not give an approval under subsection (2)(b) until at least six months have elapsed from the commencement of that subsection.
- (5) The board must, during the period of six months from the commencement of subsection (2)(b), consult with the Australian Nursing Federation on the implementation and operation of that subsection.

This amendment delays the operation of this provision by six months, and I have already talked about it.

Amendment carried; clause as amended passed.

Clauses 25 to 27 passed.

New Clause 27A.

Ms STEVENS: I move:

Page 17, after line 12—Insert:

Form of registration or enrolment

27A. (1) The board will determine the form of a current certificate of registration or enrolment under this Act.

- (2) If the board has imposed a condition or limitation in relation to the registration or enrolment of a person under this Act, a notation of the existence of the condition or limitation may be made on the certificate of registration or enrolment.
- (3) However, a notation under subsection (2) may only identify that a condition or limitation exists (and the certificate must not provide any other information relating to the condition or limitation).
- (4) A person whose registration or enrolment is subject to a condition or limitation under this Act must comply with any direction of the board concerning the disclosure of the condition or limitation in connection with the practice of nursing.

Maximum penalty: \$10 000.

This proposed new clause replaces clause 38. Clause 38 relates to illegal holding out concerning restrictions on conditions of a nurse's registration or enrolment. As it stands, clause 38 provides:

A registered or enrolled nurse whose registration or enrolment is restricted or subject to a limitation or condition under this Act must not—

- (a) hold himself or herself out as having a registration or enrolment that is unrestricted or not subject to a limitation or condition:
- (b) induce another person to believe that the registration or enrolment is unrestricted or enrolment is unrestricted or not subject to a limitation or condition.

As I mentioned in my second reading contribution, we believe that this amendment is a better way of addressing the situation. It has been pointed out to us that all the details of the limitation of registration are put on their A4 certificate and, in some cases, this can be very embarrassing for a nurse, particularly if what is being dealt with is of quite a minor nature. I mentioned that in my second reading contribution. We are suggesting an alternative that will combine this and still mean that any limitations to registration are appropriately disclosed, but it is done in a fairer way. I believe that proposed new clause 27A is a reasonable solution.

We believe that this proposed new clause still means that people will not be able to hold themselves out and must disclose appropriately any limitation on their registration, but we think it is fairer. We understand that the current situation means that nurses are often faced with all those details on their certificate but are probably not sure to whom they have to show it or not show it. Therefore, we suggest that this is a better solution all round, and we would be interested in the Minister's view.

**The Hon. DEAN BROWN:** I would like to give this more consideration. Therefore, to preserve our position on this, we will oppose it, but I undertake to look at proposed new clause 27A during the break. However, I indicate that we are prepared to delete clause 38(b) on page 19.

New clause negatived.

Clause 28 passed.

Clause 29.

Mr HILL: With respect to the issue of nursing contained in the first paragraph of this clause, I understand some comments were made earlier by the Minister in relation to the definition of nursing. In respect of this clause, would somebody who worked for five years in a dental surgery assisting a dentist be included in the definition of nursing in terms of this legislation? Would the definition of nursing cover someone who worked at home looking after an elderly person who needed some home nursing? Would someone working on a voluntary basis be considered to be nursing?

Would someone who was working in the health industry but not doing the medical side of nursing but perhaps an administrative job be considered to be nursing?

The Hon. DEAN BROWN: Under the Bill these activities are picked up as the Australian Nursing Council's competency areas and are effectively defined by the council in the different areas of competency. That is recognised under the proposed legislation. If you want to find out the definition of a particular area, you go to the area of competency under the Australian Nursing Council and that will give the definition.

**Mr HILL:** Does the Bill include that in one of its provisions?

The Hon. DEAN BROWN: It is under clause 16(1)(f), whereby the board can pick up those codes of competency.

Ms STEVENS: I oppose the clause, which is headed 'Board's approval required when nurse has not practised for five years'. Competency to practise is not a matter of time but a matter of competence. Again, I make the point that each and every nurse should undertake ongoing staff development and continuing education in order to maintain and update their nursing skills. One of the obligations of being accepted into a profession is the personal and individual commitment to ongoing staff development. In addition to this is the requirement for every nurse to maintain their own level of competency, which is enshrined in the National Nursing Competency Standards and in the National Code of Conduct.

The Nurses Board can and does use these standards to remove a nurse's licence to practise or to refuse to grant a licence to a nurse where there is evidence that a nurse cannot meet these standards. We are saying that the selection of five years is arbitrary. It is a matter of competence, not a matter of time and years. We say that this clause is not in line with current standards, which require that all workers be able to demonstrate an ability to meet competency standards, irrespective of length of training or time in practice, that the five year requirement is an unnecessary hurdle and that the amount of time in practice bears no relation to a nurse's competence to practise.

That is not in the Acts of all other States. I gave the example that New South Wales does not have this requirement and I made the point that nationally nurses boards have recognised that provisions such as the five year rule are inadequate and obsolete to ensure nurses' competence. I mentioned that during 1998 a national project has been conducted by the Australian Nursing Council, which has been developing indicators of continuing competence. It is expected to deliver recommendations on alternatives to the five year recency of practice within the next few months.

For those reasons we oppose the clause and I will be interested to hear from the Minister when the Australian Nursing Council investigation project will be completed. With the presentation of recommendations for alternatives, I presume we will be removing this provision from the Act and substituting something else. Will the Minister tell us the situation and when we are likely to see changes?

**The Hon. DEAN BROWN:** To answer the last point, it will always be there as a safeguard. I do not know whether the honourable member was implying that this is not done elsewhere around Australia.

Ms Stevens interjecting:

**The Hon. DEAN BROWN:** In fact, it is done in every other State except New South Wales. Someone has pointed out to the honourable member the exception rather than the

rule. The rule around Australia is that it is done in all States except New South Wales.

I wonder whether the honourable member understands the implications of what she is doing. If her move to delete clause 29 were successful, a person could leave the profession for 20 years and come back, with no requirement to tell anyone that they have come back, and immediately start to practise the next day—absolutely no protection at all. Is that what the honourable member really wants? Does she want to allow someone who has been out of it to come back and on the day they come back to say that they are an intensive care nurse, a trauma nurse or a midwife and work in a very sensitive area which requires updated skills?

The honourable member is exposing the public dreadfully by deleting this provision and not putting in some other requirement. At present, there is no test at all under the honourable member's proposition. I think this is one case where the honourable member might like to re-think her stance during the parliamentary break.

Ms STEVENS: During the break, the Bill will be held over to go to the other place. I understand the need to have something else in its place, and I am asking the Minister whether he will be ready to put in the other part when the Bill is discussed in the other place.

**The Hon. DEAN BROWN:** No, we do not believe it will be ready by the time this Bill gets to the Upper House. Therefore, we urge members of the Committee to support the clause as it stands.

Clause passed.

Clauses 30 to 37 passed.

Clause 38

### The Hon. DEAN BROWN: I move:

Page 19, lines 11 and 12—Leave out paragraph (b).

I referred to this amendment earlier.

Amendment carried; clause as amended passed.

Clause 39 passed.

New clause 39A.

#### Ms STEVENS: I move:

Page 20, after line 5—Insert:

Approval of certain arrangements

- 39A. (1) The Board may, on application under this section, in its absolute discretion, authorise a person to employ or engage a person or persons who are not registered or enrolled under this Act to provide nursing care.
- (2) The Board may, in granting an authorisation under subsection (1)—
  - (a) grant any associated authorisation in connection with the operation of section 39;
  - (b) impose conditions on which the authorisation is granted.
- (3) The Board may, as it thinks fit, by written notice to a person who holds an authorisation under this section—
  - (a) vary conditions that apply under this section;
  - (b) revoke an authorisation under this section.
- (4) A person must not contravene or fail to comply with a condition imposed under this section.

This proposed new clause authorises a person to employ or engage a person or persons who are not registered or enrolled under this Act to provide nursing care. We spoke about this proposed new clause previously as it relates to unlicensed workers who are providing nursing care. If one follows the amendment through one sees that we are suggesting that it be a condition of an authorisation under subsection (1) that the person who provides nursing care does so under the supervision of a registered nurse and that the board may grant any associated authorisation in connection with the operation of this section and impose other conditions on which the authorisation is granted.

Subsection (3) provides that the board may vary the conditions that apply and revoke an authorisation under this section, while subsection (4) provides that 'a person must not contravene or fail to comply with a condition imposed under this section'. Essentially, this proposed new clause attempts to provide some sort of regulation on unlicensed workers providing nursing care.

**The Hon. DEAN BROWN:** For the reasons already outlined during the second reading debate, I oppose this amendment.

The Committee divided on the new clause:

#### AYES (21)

Atkinson, M. J. Bedford, F. E. Breuer, L. R. Ciccarello, V. Clarke, R. D. Conlon, P. F. De Laine, M. R. Foley, K. O. Geraghty, R. K. Hanna, K. Hill, J. D. Hurley, A. K. Key, S. W. Koutsantonis, T. Rankine, J. M. Rann, M. D. Snelling, J. J. Stevens, L. (teller) Thompson, M. G. White, P. L. Wright, M. J.

#### NOES (25)

Armitage, M. H. Brindal, M. K. Brokenshire, R. L. Brown, D. C. (teller) Condous, S. G. Buckby, M. R. Evans, I. F. Gunn, G. M. Hamilton-Smith, M. L. Hall, J. L. Ingerson, G. A. Kerin, R. G. Kotz, D. C. Lewis, I. P. Matthew, W. A. Maywald, K. A.

Matthew, W. A.
McEwen, R. J.
Olsen, J. W.
Penfold, E. M.
Such, R. B.
Waywald, K. A.
Meier, E. J.
Oswald, J. K. G.
Scalzi, G.
Venning, I. H.

Williams, M. R.

Majority of 4 for the Noes.

New clause thus negatived.

Clauses 40 to 45 passed.

Clause 46 negatived.

Clause 47.

#### The Hon. DEAN BROWN: I move:

Page 23 after line 9-Insert:

(2a) At least one of the members of the Board appointed under section 5(1)(a) or (b) must be present at any meeting of the board for the purposes of proceedings under this Part.

I urge the member for Elizabeth to support our amendment rather than hers, because ours takes both (a) and (b)—in other words, both the Chair of the board or one of the other nurse representatives of the board—whereas the honourable member's amendment deals only with the other members.

**Ms STEVENS:** The Opposition supports the amendment. Amendment carried; clause as amended passed.

Clauses 48 and 49 passed.

Clause 50

Ms STEVENS: This is consequential on a lost previous amendment.

**The CHAIRMAN:** The member for Elizabeth is not proceeding with her amendment to lines 9 to 11.

### The Hon. DEAN BROWN: I move:

Page 25, line 15—Leave out subparagraph (ii).

Amendment carried; clause as amended passed.

Clauses 51 to 53 passed.

New clause 53A.

#### The Hon. DEAN BROWN: I move:

New clause, page 26, after line 20—Insert: Board may require examination or report

53A (1) The board may, on the application of the Registrar. for any purpose associated with the administration or operation of this Act, require a nurse, or a person who is applying for registration or enrolment, or reinstatement of registration or enrolment. as a nurse, to—

- (a) submit to an examination by a health professional, or by a health professional of a class, specified by the board;
- (b) provide a medical report from a health professional, or from a health professional of a class, specified by the board,

(including an examination or report that will require the nurse to undergo some form of medically invasive procedure).

(2) The board may suspend the registration or enrolment of a nurse who fails to comply with an order under subsection (1) and that suspension will, unless otherwise determined by the board, remain in force until the nurse complies with the order.

I think the member for Elizabeth and I are after the same thing here. Without going into too much detail, what we have said is basically that the Registrar of the board has certain powers to undertake an investigation and ask questions on a voluntary basis. If the person refuses to answer the questions on a voluntary basis the matter has to go back to the board before there is any compulsion to answer the question. I think the member for Elizabeth is trying to achieve the same outcome.

### Ms STEVENS: I agree.

New clause inserted.

New clause 53B.

**The Hon. DEAN BROWN:** I move to insert the following new clause:

Registrar may conduct an investigation

53B. (1) The Registrar, or a person authorised by the Registrar, may, for any purpose associated with an inquiry or investigation into the conduct or competence of—

- (a) a nurse; or
- (b) a person who was at the relevant time a nurse; or
- (c) a person who is applying for registration or enrolment, or reinstatement of registration or enrolment, as a nurse, request any person—
  - (d) to answer questions and to be present or attend a specified place and time for that purpose;
  - (e) to produce records or equipment for inspection.
- (2) If a person objects to, or fails to comply with, a request under subsection (1), the Board may, on the application of the Registrar, require compliance with the request.
- (3) The Registrar or other person acting under this section may retain any records or equipment produced under this section for such reasonable period as he or she thinks fit, and make copies of any records, or of any of their contents.
- (4) A person who fails, without reasonable excuse, to comply with a requirement under subsection (2) is guilty of an offence. Maximum penalty: \$5 000 or imprisonment for one year.
- (5) A person is not obliged to answer a question under this section if the answer to the question would tend to incriminate the person.
- (6) However, a person is obliged to produce any records or equipment for inspection notwithstanding that they might tend to incriminate the person.
- (7) This section does not limit or affect a power of inquiry or investigation that exists apart from this section.

**Ms STEVENS:** I notice that this new clause 53B is the same as our 53B. The Minister could have agreed with our amendment

The CHAIRMAN: Order!

Ms STEVENS: However, I will certainly agree with the Minister's amendment.

New clause inserted.

Clauses 54 to 61 passed.

Clause 62.

Ms STEVENS: That amendment is consequential.

Clause passed. New clause 63.

#### Ms STEVENS: I move:

Page 29, after line 21—Insert:

Review of special fields of nursing

63 (1) The Board must, by 30 June 2000, complete a review of the specialist areas of nursing practice and make recommendations to the Minister in relation to other areas of nursing that should require qualification or supervision as separate fields of nursing.

- (2) The Board must, in conducting a review under subsection (1), consult—
  - (a) with organisations and associations that, in the opinion of the Board, represent the interests of nurses within the State; and
  - (b) with the public generally.
- (3) The Board must prepare a report on the outcome of the review and provide a copy of that report to the Minister by the date referred to in subsection (1).

This is an amendment that I mentioned previously in relation to requiring the board, by 30 June 2000, to complete a review of specialist areas of nursing practices and make recommendations to the Minister in relation to other areas of nursing that should require qualification or supervision as separate fields of nursing. The amendment also talks about the requirement for the board in conducting the review to consult and to prepare a report on the outcome of the review.

New clause negatived.

Schedule.

Ms STEVENS: The amendment that I had was consequential.

Schedule passed.

Title passed.

# The Hon. DEAN BROWN (Minister for Human Services):I move:

That this Bill be now read a third time.

In moving the third reading, I must say that I appreciate the cooperation of the members of the House in dealing with the large number of amendments. There have been very few Bills in recent times with so many amendments—and so many complex amendments—and I appreciate the way in which they have gone through. I also appreciate the spirit in which members of the House on both sides have debated the legislation. Although there were differences—and there are still some differences—let me assure the honourable member that I am willing to discuss some of those differences during the parliamentary break. However, I believe it is fair to say that there has been goodwill on both sides. We have tried to see each other's point of view, and we have come some way towards achieving that.

Bill read a third time and passed.

#### ADELAIDE FESTIVAL CORPORATION BILL

Received from the Legislative Council and read a first time.

## The Hon. DEAN BROWN (Minister for Human Services): I move:

That this Bill be now read a second time.

I seek leave to have the second reading explanation inserted in *Hansard* without my reading it.

Leave granted.

The Adelaide Festival of Arts was established as an incorporated association in 1958, with the primary object of managing and presenting Australia's first multi-arts festival.

The first event was held in 1960, and in the ensuing years the Adelaide Festival has established a reputation as Australia's leading arts festival—and together with Avignon and Edinburgh—as one of the world's three great festivals.

The Adelaide Festival has undergone a number of structural changes over the years.

Initially, it was effectively managed on box office income, with financial guarantees from a number of leading local companies and citizens. After each of the early festivals a levy was made of so many pence for each pound guaranteed. At this time the Board of the Festival was elected by the members of the Association—the Friends of the Adelaide Festival Inc.—and generally consisted of the guarantors. Meanwhile, various committees of the Board were responsible for all the activities of the Festival including programming, marketing and fundraising. Only a limited number of professional staff were engaged.

Major changes followed the 1972 Festival. The guarantors had become concerned at the increased risk they were undertaking. Also the Adelaide Festival Centre was nearing completion.

For the following three festivals Mr Anthony Steel served as both Artistic Director of the Festival and General Manager of the Adelaide Festival Centre. The management of the Festival inevitably moved away from volunteer committees to professional staff. The Festival and Adelaide Festival Centre Trust shared many resources. And the size of the festival increased dramatically with increased funding from the State Government.

In 1994 earned income fell below the level of State Government support, necessitating a financial rescue. As a consequence, the Government appointed a Working Party to report on the structure and operations of the Festival.

After considering a number of possible legal structures the Working Party recommended—and Cabinet then authorised—the Minister for the Arts to conduct the Adelaide Festival in her corporate capacity, as agent for the Crown.

Under this structure the Festival is not a separate legal entity. The Board exercises powers given by delegation from the Minister. This arrangement has worked well in re-establishing the Festival as a strong structure artistically and financially.

However, there have been some practical difficulties. For example, in conducting its business the Festival must enter into a variety of contractual relationships with companies, performers and sponsors. Under the current structure, technically it is the Minister who must be the party to these contracts. This situation has been particularly problematic—

- in the case of sponsorship contracts which for sound commercial reasons, need to be clearly separate from Government operations; and
- in the case of some performers contracts, where indemnities are sought.

In addition the requirement for all staff above the ASO-2 level to be appointed by the Governor in Executive Council is somewhat cumbersome.

After discussion with the board and the council of the Friends of the Festival the Government now considers it desirable that the Festival gains a board and management structure which provides for greater levels of accountability, plus the flexibility and responsibility to manage day to day transactions (including employment arrangements).

Against this background, three structural options were considered.

1. A company limited by guarantee.

This option, however, ignores the fact that in a very real sense the Adelaide Festival is almost indispensable. Meanwhile the independence conferred by this status may be more imagined than real, since any Government would be likely to intervene to protect the survival of the Festival.

A public corporation.

While this model has been successfully used for State Opera Ring Corporation the statutory authority framework already existed in the form of the State Opera Act.

3. A statutory authority

In the final analysis it is considered that the Adelaide Festival is such an important entity in South Australia that it warrants its own legislative framework outlining the powers and obligations of the organisation.

As a statutory authority the Adelaide Festival will enjoy a great deal of independence from Government in terms of its operations, and a clear independence in relation to its artistic activities. Other statutory authorities such as South Australian Film Corporation and South Australian Country Arts Trust operate in this manner.

The legislation provides-

- that the primary function of the proposed Adelaide Festival Corporation is to conduct the event known as the Adelaide Festival of Arts, as well as conducting and promoting other events; and
- that the Board consist of no more than eight members—with up to six nominated by the Minister. The other two members will be selected from three nominations received from each of the Friends of the Adelaide Festival and the Corporation of the City of Adelaide.

Currently the Board comprises up to 12 members. The Bill does not specifically provide, as is the case now, for either the Adelaide Festival Centre Trust or the South Australian Tourism Commission to continue to nominate a member to the Board.

It is considered that as a service provider to the Festival, the Trust has a potential conflict of interest in being represented on a Board. Meanwhile, because the SA Tourism Commission has a key role in promoting the Festival along with many other events which attract international tourists to South Australia, it is no longer considered appropriate for the Commission to be directly involved in the management of particular events.

Although the proposed legislation does not specifically deal with the use of the names—the Adelaide Festival and the Adelaide Festival of Arts—for completeness I will make reference to the arrangements surrounding their use.

Both names were originally registered as a business names by the Friends of the Adelaide Festival Inc.

Late in 1994, when the current structure was established, an agreement was reached between the Friends and the Minister for the Arts, for the Minister to have use of the names the 'Adelaide Festival' and 'the Adelaide Festival of Arts', effectively in perpetuity.

The Council of the Friends, following a briefing on the preferred structure for the Festival, has advised that it will licence both names to the new entity on the same terms and conditions as the current agreement.

I commend the Bill to members

Explanation of Clauses

Clause 1: Short title

This clause is formal.

Clause 2: Commencement

The measure will be brought into operation by proclamation.

Clause 3: Interpretation

This clause sets out the definitions required for the purposes of the measure. Various definitions relate to the use and protection of official insignia under Part 5 of the Bill. The new corporation will, in promoting an event, be able to undertake various activities.

Clause 4: Establishment of Adelaide Festival Corporation
The Adelaide Festival Corporation is to be established as a body corporate. The Corporation will be an instrumentality of the Crown and hold its property on behalf of the Crown.

Clause 5: Functions of the Corporation

This clause sets out the functions of the Corporation. The first function to be mentioned is to conduct the multifaceted arts event that is known as the Adelaide Festival of Arts. The Corporation will also continue, and further develop, the Festival as an event of international standing and excellence. The Corporation will also conduct or promote other events and activities. The Corporation will also be able to provide advisory or other services within its areas of expertise.

Clause 6: Powers of the Corporation

The Corporation will have all the powers of a natural person together with the powers conferred by legislation. Various powers are specifically mentioned. The exercise of certain powers will be subject to the approval of the Treasurer (see subclause (3)).

Clause 7: Establishment of board

A board is to be constituted as the governing authority of the Corporation.

Clause 8: Composition of board

The board will consist of not more than eight members appointed by the Governor, of whom one will be a person selected from a panel of three persons nominated by the Friends of the Adelaide Festival, one will be a person selected from a panel of three persons nominated by the Adelaide City Council, and the remainder will be persons nominated by the Minister. At least two members must be women and at least two members must be men.

Clause 9: Terms and conditions of appointment of members

A member of the board will be appointed for a term not exceeding three years. A member cannot hold office for more than six consecutive years.

Clause 10: Vacancies or defects in appointment of members An act or proceeding of the board is not invalid by reason only of a vacancy in its membership or a defect in an appointment.

Clause 11: Remuneration

A member of the board will be entitled to remuneration, allowances and expenses determined by the Governor.

Clause 12: Proceedings

A quorum of the board will consist of one half of its total number of members, plus one. The board will be able to hold a conference by telephone or other electronic means in appropriate circumstances. The board will be required to keep minutes of its proceedings.

Clause 13: Disclosure of interest

A member of the board will be required to disclose any pecuniary or personal interest in any matter under consideration by the board, and to not take part in any deliberations or decision in relation to any such interest.

Clause 14: Members' duties of honesty, care and diligence A member of the board will be required to comply with various duties and obligations associated with his or her position and the operations of the board.

Clause 15: Immunity of members

A member of the board will not incur any civil liability in acting (or failing to act) under the Act (unless he or she is guilty of culpable negligence). Civil liability will instead attach to the Crown.

Clause 16: Ministerial control

The board will be subject to direction and control by the Minister. However, the Minister will not be able to give a direction as to the artistic content of an event or activity conducted by the Corporation, or as to a dealing with a testamentary or other gift.

Clause 17: Committees

The board will be able to establish committees, which need not include members of the board.

Clause 18: Delegation

The board will have an express power of delegation.

Clause 19: Accounts and audit

The board must keep proper accounting records and prepare annual financial statements, which will be audited by the Auditor-General.

Clause 20: Annual report

The board will prepare an annual report, which will be tabled in Parliament by the Minister.

Clause 21: Common seal and execution of documents

This clause regulates the use of the common seal of the Corporation.

Clause 22: Corporation may conduct operations under other name

The Corporation will be able to conduct its operations, or any part of its operations, under another name authorised by the Minister by notice in the *Gazette*. The name 'Adelaide Festival Corporation', and other names authorised under this clause, are official titles for the purposes of the measure.

Clause 23: Declaration of logos and official titles

The Minister will be able to declare certain logos, names and titles to be subject to the operation of this measure.

Clause 24: Protection of proprietary interests of Corporation The Corporation will have a proprietary interest in official titles and other declared items under the Act. The use of these titles and items will then be protected.

Clause 25: Seizure and forfeiture of goods

There will be an ability to seize goods that bear official insignia in contravention of the legislation.

Clause 26: Approvals by Treasurer

This clause will facilitate the giving of approvals.

Clause 27: Regulations

The Governor will be able to make regulations for the purposes of the Act.

Schedule

The Governor will be able, by proclamation, to provide for the transfer of existing staff involved in the conduct of the Adelaide Festival of Arts to the staff of the new Corporation. A transfer of employment under this provision will not affect existing rights. The Minister will also be able to vest assets and liabilities associated with the Adelaide Festival of Arts in the new Corporation.

**Mr ATKINSON** secured the adjournment of the debate.

## ROAD TRAFFIC (ROAD EVENTS) AMENDMENT BILL

Adjourned debate on second reading. (Continued from 24 November. Page 353.)

Mr ATKINSON (Spence): Road closures are the subject of this Bill and I have a special interest in road closures. Under the Bill, volunteer marshals holding stop signs will man intersections and junctions on the route of road races. The races could be between motor vehicles, bicycles or athletes. The Minister says that some of these races are so long that they intersect dozens of roads and that to ensure the safety of competitors and the public these intersections or junctions need to be blocked by barriers, police or volunteer marshals.

Section 359 of the Local Government Act allows the temporary closure of streets and roads for events such as street fairs, the Christmas Pageant and the grand final parade. As an aside, let me tell the House that this provision has allowed the temporary closure of Barton Road, North Adelaide for the past 11 years. This provision requires only a resolution of the local council. The usual method of blocking off roads under this provision is to use barriers such as 44 gallon drums. Sections 33 and 34 of the Road Traffic Act permit the temporary closure of streets and roads: section 33 for the purpose of road events; and section 34 for emergency use by aircraft. A combination of barriers and police is intended to execute these closures, reinforced by penalties for disobeying the closures. The Bill by its schedule moves to reinforce those by adding demerit points.

However, in the case of long road races, the Minister makes the point that barriers and police are a difficult and expensive way of keeping all junctions closed as the race goes by. The Minister says that the Bill is principally intended to help the Tour Down Under cycle race, which will proceed over 160 kilometres. The Bill achieves its aim by amending section 23 of the Road Traffic Act, which is the section which authorises volunteers to hold up stop signs at pedestrian crossings and for road workers to hold up stop signs where roadworks are taking place. Now a volunteer marshal, appointed in the prescribed manner, may hold up a stop sign in front of an entry closed for a road event under section 33.

The Bill authorises the Minister to appoint volunteer marshals to hold stop signs at intersections along the route of the race or event. The marshals would be found by the group staging the event, not by the Government or the police. Appointment as a marshal can be subject to conditions such as wearing identification and a uniform. The Bill then amends section 78 of the Act to create a duty on motorists, cyclists and pedestrians to stop at these signs held by volunteer marshals.

The Minister says that, although marshals may ask drivers, cyclists or pedestrians to wait or use an alternative route, they may not give directions which if disobeyed will incur a penalty. The only enforceable direction a volunteer marshal may give is the mute one to stop. Indeed, the transport Minister rather unkindly says the marshals are substitutes for barriers, not the police. Although I am most reluctant to trust any member of the Laidlaw dynasty with road closure legislation I have scrutinised this Bill carefully and have no objection to it.

Bill read a second time and taken through its remaining stages.

## PASSENGER TRANSPORT (SERVICE CONTRACTS) AMENDMENT BILL

Adjourned debate on second reading. (Continued from 26 November. Page 468.)

Mr ATKINSON (Spence): The Bill lifts a limit on contractors who win a parcel of bus routes during the Passenger Transport Board's tendering of public transport services. The limit was that no more than 100 buses could be used for that parcel. The Bill enables the Government to reduce the number of parcels from 13 to eight. The Bill also states some principles that the PTB should apply in considering competing bids for a parcel. These parcels are called service contracts in the Bill. The Bill prohibits a bidder holding more than seven of the eight parcels to be put to tender next year.

An Opposition amendment in another place requires the PTB to report to the Minister 14 days after awarding a parcel of routes and for the Minister to place the report before Parliament within six sitting days of the Minister's reviewing the report. This report would say to whom the contract had been awarded, its duration, the routes granted, the amount payable to the board by the successful tenderer, and how the statutory principles the PTB must consider in the tendering have been applied to the bids.

I believe the Government objects only to paragraph (d) of the clause introduced by the Opposition, namely, and I quote, 'the amounts payable to the board'. The Government says it is happy to tell the public the total amount from all the successful tenderers, but the money amounts paid by each successful tenderer is, according to the Government, a business secret. Although the Government had earlier indicated it was only objecting to paragraph (d) of the Opposition's amendment in another place, I am interested to see an amendment circularised by the Minister which strikes out the whole clause introduced by the Opposition. This is an overreaction by the Government, and I would be interested to see how the Minister justifies the Government denying to Parliament and, therefore, to the public, information such as who has been awarded the contract, its duration and the routes granted.

I return to the first change in the Government's Bill, namely, an end to the 100 bus limit on any parcel. When, after the Liberal Party returned to office in late 1993, the proposal came to Parliament of contracting out bus services, the Labor Opposition feared that, if the parcels were too big, small bus companies of the kind dispossessed in 1974 might be unable to win a parcel. We feared that one company might win all the contracts as had happened with bus privatisations elsewhere.

Labor moved an amendment to the Government's 1994 Bill providing that no parcel of routes could be offered for tender that required more than 100 buses to operate it. The Government accepted our amendment. However, the amendment did not have the intended effect: most of the local bus companies had no more than a dozen buses and were not in the race against a multinational company such as Serco. Serco won all the contracts that went to private tender.

The Government now wants to lift the 100 bus limit for another reason. Adelaide's bus routes are in 13 parcels, each with a single area, rather like a State electorate or a football club's recruiting district, except that each area converges on the city where most of our buses run. When the State Transport Authority had its monopoly, and even before that

when the Municipal Tramways Trust (MTT) dominated the market, buses would start in a suburb, run to the city and then leave the city in a different direction for another suburb.

So, during the heyday of the MTT, trams would run for a short distance from the Hackney depot to St Peters and then go along North Terrace to the city, through the magnificent engineering feat which was the tram junction outside this building, and down King William Street on their way to Parkside. Trams would then return from Parkside along Duthy Street and George Street to the city and then go on to St Peters again.

More recently, my local bus, the 253 to Arndale shopping centre at Kilkenny, would leave Arndale for the city, running via Torrens Road, Hawker Street and Barton Road. It would then leave the city via Grote Street, passing St Patrick's bound for distant destinations such as Glenelg and Seacliff. If I happened to be travelling to the Glenelg Jetty or to the Orthodox Bishop's chapel on Anzac Highway, I did not need to change buses.

Mr Clarke interjecting:

Mr ATKINSON: The member for Ross Smith interjects. Constituents of the member for Ross Smith's electorate worship at the English language liturgy at the Orthodox Bishop's chapel on Anzac Highway. I am sorry if the member for Ross Smith does not have any need to go there (I would have thought he did) or to Glenelg jetty.

**Mr Clarke:** I go to the earlier session; that is why you don't see me.

Mr ATKINSON: There is only one session in the Bishop's chapel. I was conveyed from stop 21 on Torrens Road at Kilkenny to my far-flung destination via the city without needing to change buses. We call this 'through running'. The Government ended most through running by dividing our bus routes into 13 parcels. Now the 253 bus travels to the city, stops at a layover in Victoria Square next to Francis Xavier's, then travels around the square and goes straight back to Arndale whence it came.

This does not always happen with my bus: sometimes it goes on to Glenelg and Seacliff, but one cannot discover this from the timetable—one has to crack the codes. The reduction in through running results in what the Hon. T.G. Cameron has, with only slight exaggeration, referred to as parts of the city becoming a 'bus barn' as buses lay over in Elder Park and Victoria Square before their return journeys. The Government says that once Parliament scraps the 100 bus limit the number of parcels could be reduced from 13 to eight. Thus the areas could be enlarged and that could accommodate more through running.

The Opposition hopes that this is what will happen after the lifting of that limit. TransAdelaide, with 75 per cent of the routes, was of course better able to maintain 'through' running. Now that the 100 bus limit is to be lifted and TransAdelaide's statutory entitlement to at least half Adelaide's public transport services has lapsed, there is some concern in both Government and Opposition that there could be a risk of private monopoly were Serco to win all eight new parcels. There is also a chance that TransAdelaide could win all eight contracts.

The Bill says that the PTB should not grant service contracts so as to allow one contractor to obtain a monopoly, by which the Transport Minister says she means 90 per cent of the market. This translates to a prohibition on winning all eight of the parcels, seven parcels being 87.5 per cent of the total, assuming the parcels are of equal size.

Other principles that the Bill requires the PTB to take into account are the development and maintenance of stable competition, the integration of bus routes and timetables, efficient operation, and innovation. The Bill goes on to say that there are other principles that the PTB may take into account in considering the tenders. The Transport Minister says these are price, financial capacity, service proposals, and service capabilities.

The contentious part of the Bill is that inserted by the Opposition which requires the PTB to report to Parliament through the Minister about how the principles were applied to particular tenders. The Government will oppose this clause in the House because it was inserted by the Opposition. The Government needs no further warrant to seek the deletion of the clause, but the House should scrutinise the justification that the Government gives for removing this clause. For instance, the Minister says that the requirement to disclose the price would lead to the unsuccessful tenderer's suing the PTB. However, if one refers to subclause (3a) of the Government's Bill, one sees that it provides that the Bill is an expression of policy and does not give rise to rights or liabilities, whether of a substantive, procedural or other nature. This is an exclusionary clause.

Is the Government saying that it does not think the exclusionary clause will work if it is subjected to the scrutiny of the courts? I do not share the Government's opinion that it exposes itself to lawsuits if it discloses the price to be paid by the successful tenderer.

The Minister also claims that there would be few or no tenders if the price were to be disclosed. I think that, again, the Minister is crying wolf to try to turn the House against a sensible provision. Serco and TransAdelaide will continue to tender, because they think they can make money out of bus contracts, and, in TransAdelaide's case, it is its reason for existence.

The Opposition supports the Bill in its current form and asks the House to join us in voting for a sensible measure that prises a little useful information out of this secretive Government. The Minister responsible for this Bill tonight made great play of the need for the State Government to be more accountable when he was Leader of the Opposition in the 1993 general election. Let him live up to his promises tonight and endorse this small measure of accountability to Parliament and to the public for the PTB's contractual arrangements.

The Hon. R.G. KERIN (Deputy Premier): I thank the member for Spence for his comments. This Bill results from a review of the Public Transport Act 1994, which recommended that approaches to generate competition other than a 100 bus limit per contract area be considered. Currently, the Act provides that service contracts for the provision of public transport services should not require the use of more than 100 buses. This limit has been a critical factor in determining the size and delineation of contract areas.

The combination of limits on bus numbers and the subsequent size of contract areas has given rise to a number of unintended negative consequences: decreased through running of buses, which has increased the number of buses in the city by up to 20 per cent; reduced level of innovation for operators, limiting the flexibility in the choice of bus size because of the need to maximise carrying capacity; more layover time in the city particularly; buses which ran in two contract areas were counted in each contract area; the limit does not make it clear which vehicles are to be taken into

account for the purpose of the limit—for example, are buses kept for replacement of buses undergoing maintenance included?; and an operator could have operated a total fleet of more than 100 buses by winning a number of or indeed all contracts.

The 100 vehicle limit was introduced following amendments moved by the Hon. Sandra Kanck and the Hon. Barbara Wiese, which were supported. The intent was to provide opportunities for small local operators and to ensure that a public monopoly was not replaced by a private monopoly. The 100 vehicle limit has not proven to be an effective means of achieving these objectives. This Bill (initially introduced in the Legislative Council) was introduced to maximise competition and facilitate improvements in efficiency and innovation. It requires the PTB to take into account a number of principles in awarding its service contracts.

Included in these principles is that service contracts should not be awarded so as to allow a single operator a monopoly or near monopoly. The Opposition has expressed concern about the lack of definition in this clause in respect of what is meant by 'near monopoly'. The clause is deliberately non-specific in defining 'new monopoly', although the Minister has indicated that she will consider a market share close to monopoly as 90 to 100 per cent.

The intent is to ensure that there is no monopoly, nor can one operator win all the contracts. The Government does not believe that this is in the best interests of public transport in South Australia. By not nominating an exact percentage, TransAdelaide (which currently operates 75 per cent of the bus market) is provided with some level of security. If a figure of 40 per cent were included, TransAdelaide would lose business. Under this Bill it could win up to 89 per cent of the contracts. The PTB will obviously take into account a range of factors in awarding contracts, including service capabilities, price, proposals for innovation and the financial capacity of the company. A list is being prepared as part of the tendering process.

This Bill sets out more meaningful and helpful principles to be applied to the PTB when considering the awarding of contracts. The Bill focuses on particular features of the wider issue of service contracts such as the creation and viability of the market, the provision of integrated services and the efficiency and innovation of services. These are more appropriate matters for the PTB to consider than a prescription on vehicle limits. The removal of the 100 bus limit will give the PTB more flexibility in selecting contract areas and increase efficiencies, particularly relating to increased through running and decreased lay-over time and bus numbers in the city.

The amendment moved by the Hon. Carolyn Pickles in the Upper House is not acceptable to the Government because of subsection (3b)(d) which contains the words that a report 'provides information on the amount or amounts that will be payable by the board under the contract'. The amounts paid under any specific contract have never been publicly disclosed because that information is extremely commercially sensitive and disclosure would be totally opposed by the contractors as commercial in confidence. This is the view of TransAdelaide and the private sector operators. Disclosure of the contract amounts for each individual contract would threaten the long-term competitiveness of the market and the ongoing provision of services—that is, it is not a one off event; at some time in the future the contracts will again be up for tender.

In addition, the amounts paid in total to contractors are already fully reported in the PTB accounts, which are audited and published in the PTB's annual report, so why do we need this extra legislation? The contract value relates to a specific parcel of services which will be different in each case between bidders. Tender bids have different levels of service innovation and service ideas. A focus on total costs suggests that the price is a determining factor, and this could be misleading. The disclosure of price could lead to litigation from unsuccessful bidders. The amendment also asks for a report, including details of prices, to be tabled before both Houses of Parliament within six days of receiving the report, which must be sent to the Minister within 14 days of awarding the contract. This is not practical as there is a significant period of detailed negotiation before a contract is finalised, and it may take up to several months.

Finally, the disclosure of the contract price is contrary to the policy of Governments of both persuasions and is not normal business practice. It is not a move to shield the Government. Rather, it is a critical issue in terms of attracting maximum interest in the competitive tendering process. In conclusion, I recommend that the Government's amendment be passed by the Committee as it will ensure the best result for public transport in this State.

Bill read a second time.

In Committee.

Clause 1 passed.

Clause 2.

#### The Hon. DEAN BROWN: I move:

Page 2, lines 8 to 21—Leave out subsections (3b) and (3c).

**Mr ATKINSON:** I think the Government's striking out of subsection (3b) is manifestly excessive. The Government says that it has an objection to the contract price's being disclosed. If that is so, we can strike out paragraph (*d*) and let the rest remain. As the Bill now stands, this clause reads:

The board must, within 14 days after awarding a service contract to which subsection (3)(a) applies, forward to the Minister a report which—

(a) sets out the full name of the person to whom the contract has been awarded—

I do not know why the Government wants to suppress that—

(b) provides information on the term of the contract—

I do not know why the Government wants to keep the contract's duration a secret—

(c) identifies the region or routes of operation under the contract—

I have no idea why the Minister would want to keep that information from the Parliament and the public—

(e) provides information on how the principles under subsection (3)(a) have been applied in the circumstances of the particular case.

I do not see why the Passenger Transport Board cannot write down the reasoning which led it to grant a particular contract, especially when this Bill provides that these things are an expression of policy and do not give rise to rights or liabilities. So, I put it to the Minister that his amendment is excessive. He could simply strike out paragraph (*d*). In fact, he is striking out the whole of subsection (3b) and denying the Parliament and the public routine information that ought to be freely available.

Amendment carried; clause as amended passed.

Title passed.

The Hon. DEAN BROWN (Minister for Human Services): I move:

That this Bill be now read a third time.

**Mr ATKINSON** (**Spence**): The Opposition will support the third reading which will send this Bill to a deadlock conference. I am most disappointed that the Minister representing the Minister for Transport was unable to answer a series of simple questions.

Bill read a third time and passed.

# TRANSADELAIDE (CORPORATE STRUCTURE) BILL

Adjourned debate on second reading (resumed on motion). (Continued from page 500.)

Mr ATKINSON (Spence): The Opposition has studied the Bill carefully, consulted stakeholders, amended the Bill in another place and will vote for the Bill in the form it arrived in the House. We wish TransAdelaide well and we hope it is able to maintain the 75 per cent share of metropolitan public transport it has. Labor will vote for any change to the legislation governing TransAdelaide that strengthens its competitive position. However, we note that reductions in the cost of public transport to the State Government in the past four years have been obtained almost wholly at the expense of the wages and conditions of bus operators.

From 1974, metropolitan public transport was provided by Government monopoly—the State Transport Authority—after the State Government nationalised most of the privately run bus routes in Adelaide. Before 1974, the dominant provider of public transport in Adelaide was the Municipal Tramways Trust, which had started out as a confederation of local governments for the purpose of spreading electric tram routes through Adelaide. In 1994, the Government opened up groups of bus routes and the bus depots that went with them to competitive tender and it transformed the State Transport Authority into TransAdelaide, a corporation sole, created by schedule 2 of the Passenger Transport Act.

TransAdelaide was to be a tenderer—not a monopolyalthough it was guaranteed 50 per cent of the market for about three years. The Bill before us converts TransAdelaide into a public corporation and TransAdelaide's filial connection with the Passenger Transport Act is severed. The Opposition has added one clause and a paragraph to the Bill. Having learnt from our experience of this Government's ambushing the public with the ETSA privatisation, we have drafted a new clause 17A that forbids a sale or lease of TransAdelaide unless it is approved by resolution of both Houses of Parliament. The Opposition's clause is not meant to forbid the sale of surplus assets of TransAdelaide nor to prevent some subcontracting of services. The clause is directed to making the Government consult Parliament before it sells or leases a major part of TransAdelaide, by which we mean 50 per cent or more of the assets or the undertaking.

The paragraph we have added concerns the board of TransAdelaide. The Opposition proposes that the board of not more than five persons include one person who represents the labour movement, including the interests of TransAdelaide employees. That person would be nominated by the United Trades and Labor Council. People have speculated that a person chosen by the UTLC would be an official of one of the unions covering TransAdelaide workers. One name mentioned was that of a union secretary who endorsed the

Liberal Party at the last State election. As an aside, this gentleman lost his position as secretary in a ballot today of the Public Transport Union.

Mr Clarke: Who won?

**Mr ATKINSON:** I think a bus operator from Lonsdale depot

The Hon. Dean Brown: Who was it? Mr ATKINSON: Rex Phillips.

**The SPEAKER:** Order! The honourable member should come back to the Bill.

Mr ATKINSON: This is most unlikely to occur because of the danger of a conflict of duties or a conflict of interest. I think the UTLC choice would most likely be someone outside the PTU or the Transport Workers Union but someone who would represent the interests of both Trans-Adelaide employees and the ever diminishing number of workers who use public transport to travel from their homes to their place of work. Provisions such as this used to be uncontroversial in the post war years when most Australian Liberals were one nation Liberals in the same sense as one nation Conservatives in Britain. It was thought harmony in industry and society would be enhanced by giving the workers a small say in the business. Alas, these days have passed and I understand that the Minister will resume the class struggle by proposing to amend the Bill by deleting this paragraph.

The Hon. DEAN BROWN (Minister for Human Services): I thank the honourable member for his comments and support, and wisdom, apparently, in the other place.

Bill read a second time.

In Committee.

Clauses 1 to 9 passed.

Clause 10.

The Hon. DEAN BROWN: I move:

Page 4, lines 5 to 8—Leave out subclause (2) and insert:

(2) The board is to consist of not more than five members appointed by the Governor on the nomination of the Minister.

Mr ATKINSON: It would be interesting for the Committee to hear why it would be unsatisfactory for the United Trades and Labor Council to appoint just one member to the TransAdelaide Board, or why the Minister could not amend the paragraph differently to allow the Minister to consider appointing one person nominated by the United Trades and Labor Council. Frankly, given the Minister's role in politics in the past quarter of a century, I would not have thought that he needed to take advice on why the United Trades and Labor Council should not be nominating someone to the Trans-Adelaide Board.

The Hon. DEAN BROWN: It has been the policy of the Government not to wander around looking for representatives but rather to appoint board members who are able to carry out the task to the best of their ability wherever they come from. This does not exclude someone from the Trades and Labor Council at all, but certainly the Government for the past five years, instead of looking at which organisations ought to be represented, has looked at appointing people who are capable. I am a very strong supporter of that. If you appoint people from organisations, particularly where they are trying to run commercial organisations, as in this example, you must be very careful that they do not start to believe their allegiances to the organisation from which they have come rather than make commercial decisions based on the charter before them under the Act.

There have been some classic examples where one could argue that there has been almost a conflict of interest in making commercial decisions where they are seen as a representative of an organisation rather than one of a certain number of board members with a specific task under the Act, and I support that strongly.

Mr CLARKE: I am intrigued by the Minister's rationale on that point because, if one goes through the Acts of Parliament passed over the past five years, one sees that a number of Government boards have been established by this Government that specifically give organisations the right to nominate their representatives on boards, such as the South Australian Farmers Federation. If one looks at any of the rural Bills the Minister's Party has introduced which require the establishment of boards, one will see representatives of any number of rural organisations which have close links with the Liberal Party and which have the right to nominate a person on a Government board—and a paying position at that.

If one looks at the WorkCover board one notes that representatives are to be called from employer organisations representing employer interests, as well as, I might say, employee interests, although the United Trades and Labor Council is not specifically nominated: it is just an organisation the Minister may consult and then choose to ignore—and does ignore—the person that it might put forward. As the Minister would probably be aware with respect to the old Municipal Tramways Trust, going back to the days of Tom Playford, it is a historical fact that the Secretary of the United Trades and Labor Council of South Australia was, for many decades, a nominee representing the United Trades and Labor Council on the board of the Municipal Tramways Trust.

That practice carried right through the 1970s and the early part of the 1980s under both Liberal and Labor Governments. However, if we go back over the past five years, a number of pieces of legislation were enacted under the Minister when he was formerly the Premier and, under the current Premier's leadership, legislation has been brought before this Parliament and enacted, particularly in respect of rural areas where rural organisations have been given the right to nominate their particular persons. Indeed, only this afternoon and this evening we spent a great deal of time on the nurses' legislation debating whether medical practitioners should be on the Nurses Board.

I appreciate that they were not, as I recall, to be nominees of the AMA, but nonetheless they would be a body which the Government would ordinarily consider to provide it with a range of nominees. Whether or not the Minister likes it, the United Trades and Labor Council does represent the bulk of organised labour in this State. The overwhelming majority of TransAdelaide employees are members of unions that are affiliated with the United Trades and Labor Council. It is true, as the member for Spence pointed out, that the bulk of savings with respect to TransAdelaide and the running of public transport generally in this State has been at the expense of the workers in the sense that their wages have been reduced; that is, those workers have had to go across to Serco.

Those workers have had lower rates of pay than when they were employed by TransAdelaide. The workers at Trans-Adelaide have effectively had no real pay increases for the past three or four years for fear that they would lose their jobs as a result of the rivalry from Serco's drivers operating under a substandard award.

TransAdelaide feared that it would lose contracts to Serco if the workers of TransAdelaide sought to keep their wages up at least on a par which they had enjoyed prior to the

Liberal Government's being elected. Again I say that it is more a question of the Government's ideology of not wanting to have anyone from the United Trades and Labor Council nominated on the board. As I say, it flies in the face of what happened under Tom Playford for decades where the Secretary of the UTLC was always on the board of the MTT.

The Hon. DEAN BROWN: There is a difference between some of the boards to which the honourable member refers, which are professional or industry orientated boards, and what we are looking at here, which are commercial operations. If one looks at the other major commercial operations, such as ETSA Corporation, SA Generation Corporation, the South Australian Housing Trust, the Ports Corporation and SA Water Corporation, one sees that all are large commercial corporations.

They do not have specific representation from organisations, and that is exactly what we are dealing with here. There is a big difference between something like the Nurses Act and dozens of other Acts I can quote to the honourable member which are dealing with professions or specific industries. The WorkCover board, obviously, needs people representing the interests of the employees and those representing the interests of the employers; it is the whole structure of the organisation. But here it is a commercial organisation. You need people there making commercial decisions, otherwise in running these large corporate enterprises you will end up with State Bank-type disasters because people's first commitment is not to the corporation; they are more worried about their representation.

Mr CLARKE: I just point out to the Minister, with respect to representatives on the State Bank board, that there was nothing in the legislation to guarantee that someone from the Finance Sector Union or from the United Trades and Labor Council had to be on the board of the State Bank. Indeed, it was the choice of the Minister or the Government of the day to appoint whoever they pleased to the board. Some of the supposed doyens of the South Australian capital sat on the board of the State Bank at various times, at the very time the State Bank was going down the gurgler. So, the fact that the Minister says that we want to have a professional outfit and, therefore, not necessarily people tied to or coming from a particular organisation for it to operate efficiently is just not so.

In the case of the failure of the Bank of Adelaide and the near failures of many of the private banks in Australia in the late 1980s because of the same sorts of problems as the State Bank had, all had so-called doyens of industry on their boards and it did not save them from the losses that they incurred.

Amendment carried; clause as amended passed.

Clauses 11 to 15 passed.

Clause 16

**Mr LEWIS:** What would be the position if land that was formerly set aside as parkland by Colonel William Light in his original survey were to become the property of the corporation that it could then choose to sell?

**The Hon. DEAN BROWN:** The Minister would take account of any parklands requirements with the Adelaide City Council.

Clause passed.

Clause 17 passed.

Clause 18 negatived.

Clause 19, schedule and title passed.

The Hon. DEAN BROWN (Minister for Human Services): I move:

That this Bill be now read a third time.

Mr ATKINSON (Spence): The Opposition believes the Bill emerges from the Committee stage in a poorer form than it entered it. We are most disappointed that clause 18 has been eliminated, because all we wanted to achieve with clause 18 was to prevent the privatisation by stealth of TransAdelaide. We understand that TransAdelaide sometimes needs to subcontract services. We understand that sometimes TransAdelaide will want to sell surplus assets. We are quite prepared to provide for that, but what we do not think should happen is that more than 50 per cent of TransAdelaide's assets or more than 50 per cent of its undertakings—its routes—can be sold or subcontracted. That is all clause 18 prevented.

So, it is disappointing to see the Government signalling its intention to go ahead with privatisation by stealth, because that is the only possible reason for the Government's using its numbers in this Chamber to delete clause 18 from the Bill.

I put the Government on notice that the Opposition will be arguing strongly at the deadlock conference for a provision such as clause 18 and that, as far as we are concerned, if a provision such as clause 18 is not in the Bill we are prepared to see the Bill go down. That would be regrettable, but we will not allow any more privatisation by stealth.

Bill read a third time and passed.

### GUARDIANSHIP AND ADMINISTRATION (EXTENSION OF SUNSET CLAUSE AND VALIDATION OF ORDERS) AMENDMENT BILL

The Legislative Council agreed to the Bill without any amendment.

#### ADJOURNMENT

At 11.43 p.m. the House adjourned until Wednesday 9 December at 2 p.m.