

LEGISLATIVE COUNCIL

Wednesday 10 August 1988

The **PRESIDENT** (Hon. Anne Levy) took the Chair at 2.15 p.m.

The Clerk (Mr C.H. Mertin) read prayers.

PETITION: LAURA HOSPITAL

A petition signed by 1 542 residents of South Australia praying that the Council would urge the Government not to close or reduce services in the Laura and District Hospital was presented by the Hon. M.B. Cameron.

Petition received.

RIVERLAND REGIONAL HOSPITAL

The **PRESIDENT** laid on the table the following report by the Parliamentary Standing Committee on Public Works, together with minutes of evidence:

Riverland Regional Hospital at Berri.

PAPER TABLED

The following paper was laid on the table:

By the Attorney-General (Hon. C.J. Sumner):
The Australian Formula One Grand Prix Board—Report 1987.

QUESTIONS

TRAINEE DOCTORS' DISPUTE

The Hon. M.B. CAMERON: I seek leave to make a brief explanation before asking the Attorney-General, representing the Minister of Health, a question on trainee doctors' disputes.

Leave granted.

The Hon. M.B. CAMERON: Many people share my concern at the work bans by trainee doctors at the Modbury and Lyell McEwin Hospitals which are now costing the State thousands of dollars a day. To their credit the doctors' bans, to date, have not affected patient care. It would seem that the doctors' main anger is aimed at the hospital administrations and the Health Commission, which have allowed situations to continue in which medical staff are often working in excess, I am informed, of 36 hours in one shift.

In February 1987 the former Minister of Health, in reply to a question from me on nurses' career structure, revealed that he was aware of unacceptably long hours being worked by young doctors and in fact indicated that the whole question of overtime and conditions for interns, residents and registrars would be the subject of a 'significant review'. I quote partly from the former Minister's reply on 12 February 1987:

Allegations of 36 hours worked in a stretch have been made. That is unusual, but it is not unusual for them to work unacceptably long hours. No-one can perform at their peak over a 24 hour stretch. ... I suggest that that is not only undesirable but, in some circumstances, may place patients potentially at risk.

The former Minister also indicated on that date that, in fact, if anything, South Australia had too many graduate doctors. As a result, he was puzzled at a situation where doctors had to work such excessive hours when we were

doing everything to supply an adequate number of doctors. Again, I quote the former Minister from his reply in this Chamber 18 months ago:

It has concerned me for some time that, despite the fact we graduate more doctors than anywhere else in this country (and almost anywhere else on earth) per thousand of population, somehow we have interns and residents who are working 80 to 90 hours a week.

My questions are:

1. What were the major recommendations of the significant review of overtime and conditions for young doctors which the previous Minister of Health foreshadowed in this Chamber 18 months ago?

2. Has the Government considered implementing any of the review's recommendations in order to break the deadlock with the trainee doctors at Modbury and Lyell McEwin which is costing the State thousands of dollars a day, that is, if the review took place? If not, why not?

3. Can the Minister explain why, 18 months after the former Minister of Health publicly acknowledged that trainee doctors were working excessively long hours—and possibly compromising patient safety—the Government has been unable to implement strategies to overcome a situation where doctors still work 36 hours straight?

The Hon. C.J. SUMNER: I will seek a report on that matter from the new Minister of Health who, I assume, will be sworn in on Friday, and bring back a reply for the honourable member.

HON. J.R. CORNWALL

The Hon. L.H. DAVIS: I seek leave to make a brief explanation before asking the Attorney-General a question on the subject of the Hon. Dr Cornwall.

Leave granted.

The Hon. L.H. DAVIS: In 1983 the Hon. Dr Cornwall abused the well respected Mayor of Port Pirie, Mr Bill Jones, attacked the Chairman of the Hillcrest Hospital Board in front of patients and staff, and described Dr Dutton as an 'unhappy malcontent', a maverick who acted irresponsibly, in a fiery exchange at the Adelaide Children's Hospital. About this exchange with Dr Dutton, the Hon. Dr Cornwall had this to say:

Perhaps it would be best to say I did my block. I have a fairly short fuse.

But in 1984 the Hon. Dr Cornwall made his now wellknown attack on Dr Peter Humble, and he accused Queen Elizabeth Hospital administrators of 'incompetence, connivance or both'. In 1986 he called some country doctors a 'handful of rednecks'. The list is seemingly endless. My questions are:

1. In view of the Hon. Dr Cornwall's admission that he had a short fuse, in view of his propensity to be abusive publicly, in view of the fact that the Premier had dressed down the Hon. Dr Cornwall on at least two occasions for intemperate language or inappropriate ministerial behaviour, and given that the State Government has provided the Hon. Dr Cornwall with an indemnity for costs and damages in the Humble defamation case, did the Attorney-General or the Premier (who is also a lawyer) counsel the Hon. Dr Cornwall on the importance of appropriate behaviour during the court case?

2. Does the Attorney-General accept that both a proper apology from and appropriate behaviour by the Hon. Dr Cornwall would have reduced the level of damages and costs by a considerable amount, so lessening the burden on the taxpayers of South Australia?

The Hon. C.J. SUMNER: The Hon. Mr Davis has put forward a rather extraordinary proposition: that I as Attor-

ney-General or the Premier (who, by the way, is not a lawyer) should have—

The Hon. L.H. Davis interjecting:

The PRESIDENT: Order!

The Hon. C.J. SUMNER:—coached the Hon. Dr Cornwall in his court case. I now know why the Hon. Mr Griffin did not ask this particular question, because he would know that that is quite improper.

The Hon. K.T. Griffin: I have another question here.

The Hon. C.J. SUMNER: That's all right; you can get to me. I know why the Hon. Mr Griffin did not ask this question—because he would not be stupid enough to ask it.

The Hon. L.H. Davis: What about coaching?

The Hon. C.J. SUMNER: That is what you did. You talked about whether we counselled him about his behaviour during the court case. In other words, did we suggest to him that he should do certain things before the court; did we suggest that he should say certain things before the court?

The Hon. L.H. Davis: I didn't say that.

The Hon. C.J. SUMNER: You did. Well, that is tantamount to what you said.

The Hon. L.H. Davis: I just talked about appropriate behaviour because it aggravated the level of damages.

The Hon. C.J. SUMNER: You said: should we have counselled him? Clearly not. It would not have been appropriate. In fact, it would have been improper.

The Hon. L.H. Davis interjecting:

The PRESIDENT: Order!

The Hon. C.J. SUMNER: What do you mean then—that we should have talked to him about what he said in the court?

The Hon. L.H. Davis: No, I didn't say that.

The Hon. C.J. SUMNER: Should we have talked to him about whether he picked his nose or scratched his head in the court?

The Hon. L.H. Davis: Come on!

The Hon. C.J. SUMNER: Well, come on. What is it that you suggest we should have told him about his court case?

Members interjecting:

The Hon. C.J. SUMNER: Well, I have answered the question. The Hon. Mr Griffin did not ask the question because he would not have been stupid enough to ask whether the Premier and the Attorney-General should have counselled the Hon. Dr Cornwall about his behaviour in court. It is an extraordinary proposition to suggest that the chief law officer of the Crown should counsel a litigant before the courts as to how he should behave in court.

The Hon. L.H. Davis interjecting:

The PRESIDENT: Order! The Hon. Mr Davis will come to order.

The Hon. C.J. SUMNER: It is an astonishing proposition, even from the Hon. Mr Davis, who also is a lawyer. At least he has got legal qualification of some description. I remember that he was at the law school at about the same time as I was there, and I assume he passed. Whether he actually went on to articles and admission to the bar I am not sure. I think he did. If he did, then of course his question is even more extraordinary. It is astonishing for him to suggest that in relation to the Premier and me, particularly me. If I had done that to some other litigant before the case, they would have been in here screaming for my blood and saying that I had interfered with the judicial process. It is an absurd proposition that you are putting: that somehow or other the Chief Crown Law Officer in this State should have counselled a litigant before the courts. It is bizarre.

The Hon. L.H. DAVIS: I have a supplementary question. Will the Attorney answer the second question, namely, whether he accepts that both a proper apology from and appropriate behaviour by the Hon. Dr Cornwall would have reduced the level of damages and costs by a considerable amount, so lessening the burden on the taxpayers of South Australia?

The PRESIDENT: I would point out that legal opinions are not admissible as question topics.

The Hon. C.J. SUMNER: Furthermore, if the matter is not technically *sub judice* at this particular moment, it will certainly become *sub judice* very shortly. The effect or otherwise of an apology from Dr Cornwall in the court proceedings may well be one of the matters that the Full Court will have to adjudicate on, so I certainly do not intend to comment on it one way or the other, beyond saying what I said yesterday, namely, that there were attempts by Dr Cornwall to settle the matter at the same time as the media settled its case with Dr Humble, and Dr Humble was not interested in settlement with Dr Cornwall.

POLICE GENERAL ORDERS

The Hon. K.T. GRIFFIN: I seek leave to make an explanation prior to asking the Attorney-General a question on police general orders.

Leave granted.

The Hon. K.T. GRIFFIN: The police general orders in respect of civil claims in which police officers are involved contain the following:

An application for legal aid may be made to the Commissioner where a member has had civil proceedings instituted against him arising from an incident occurring during the course of his duties. Such applications seeking assistance from the Crown Solicitor, will be forwarded to the Chief Secretary, unless it is considered that the member concerned has acted improperly or unreasonably. A member engaging legal assistance other than as described above will be personally responsible for expenses incurred.

This particular part of police general orders must be distinguished from that which relates to criminal proceedings which, of course, deal specifically with the Police Association's claim for reimbursement, as I understand it, of something over \$110 000 for costs in a number of criminal proceedings against police officers. The emphasis in relation to civil claims under this police general order is placed upon the fact that an application for legal aid (that is, legal aid from the Crown) cannot be made if the Commissioner of Police is of the view that the police officer acted unreasonably or improperly. Ordinarily, as I understand it, if an application is approved by the Commissioner, the costs are then paid by the Crown.

In the judgment relating to the Hon. Dr Cornwall's case, the judge found that the Hon. Dr Cornwall did not act reasonably or properly in the course of his duties.

The Hon. C.J. Sumner: He didn't say that.

The Hon. K.T. GRIFFIN: He did. My questions are:

1. Does not the Government's decision to indemnify the Hon. Dr Cornwall reflect a blatant double standard—one for a Minister and another for a police officer?

2. Does not the Government's decision on the Hon. Dr Cornwall's case if it were to deal consistently with police officers now require the amendment of police general orders for dealing with claims involving police officers?

The Hon. C.J. SUMNER: The answer to both questions is 'No'. It is a matter of judgment whether the Hon. Dr Cornwall acted improperly or unreasonably. Whether or not he did so is the subject of an appeal.

The Hon. L.H. Davis: Why was he sacked?

The PRESIDENT: Order!

The Hon. C.J. SUMNER: The comments made by the judge are the subject of an appeal. I am not going to comment on the judgment.

An honourable member interjecting:

The Hon. C.J. SUMNER: You are asking me to say whether I consider that the judgment was to the effect that Dr Cornwall had behaved improperly or unreasonably. If that is a finding or an implication that one draws from the judgment, then that is commenting on the judgment and, until the matter is resolved in the Full Court, I do not intend to do that. The reality is that there were no agreed guidelines relating to indemnities for Ministers. The previous Government agreed to indemnify Mr Dean Brown in relation to a particular case. This Government honoured that agreement and the settlement was accordingly carried out. The problem, which I outlined in this Council last week, was that there were no agreed guidelines relating to the payment or indemnity for Dr Cornwall. I advised Cabinet that it was an appropriate case for indemnity, because Dr Cornwall was obviously acting in his capacity as a Minister of the Crown.

The Hon. L.H. Davis: Why was he sacked then? Why did you sack him?

The Hon. C.J. SUMNER: He was not sacked.

Members interjecting:

The PRESIDENT: Order!

The Hon. C.J. SUMNER: The fact is that he tendered his resignation in the light of the judgment by Acting Judge Bowen-Pain and that judgment, as members know, will soon be the subject of an appeal. I will not pre-empt what a Full Court might say about that judgment and, frankly, I do not think that, if members opposite in this Chamber use a little common sense, they ought to comment, affirmatively or otherwise, about the judge's decision at this stage, knowing that it will be the subject of an appeal.

Those police general orders and other orders or guidelines applying to the indemnity for civil cases relating to public servants stand and I see no reason for them to be altered. In this particular case there were no specific guidelines, essentially because of the dilatoriness of the Hon. Mr Griffin in responding to my requests for an agreed set of guidelines.

The Hon. K.T. Griffin: Four years.

The Hon. C.J. SUMNER: Four years, that is right, including loss of the file and several other excuses. The fact is that there were no guidelines. There have been precedents for the payment of costs by previous Governments and, in these circumstances, I considered it appropriate for Dr Cornwall to be indemnified.

REFERENDUM

The Hon. CAROLYN PICKLES: I seek leave to make a brief explanation before asking the Minister of Local Government a question about the referendum.

Leave granted.

The Hon. CAROLYN PICKLES: When I was entering Parliament this morning, I was pleased to notice that the car, which I presume belonged to the Lord Mayor, because of the insignia on the back of it—

An honourable member: A Mercedes.

The Hon. CAROLYN PICKLES: Yes, it was a Mercedes indeed and it had a very interesting sticker on the back of it which urged people to support the referendum question relating to local government. I notice that members opposite are rather discomfited by this.

An honourable member interjecting:

The Hon. CAROLYN PICKLES: I certainly have; I have got lots of stickers on my car. Is the Minister aware of the Local Government Association's campaign to support constitutional recognition for local government; does the Government support this campaign; will the Minister indicate the Government's position relating to question 3 in the referendum that deals with Federal recognition of local government; and what does she see as being the issue?

Members interjecting:

The PRESIDENT: I call for order.

The Hon. BARBARA WIESE: I am very pleased to respond to this question and to indicate that I am very much aware of the Local Government Association's campaign to seek community support for referendum question 3. In fact, I have attended two or three meetings during the past fortnight where I indicated that I as Minister of Local Government—and the Government as a whole—will support the push by local government across Australia to achieve recognition in the Federal Constitution. The State Government takes the view that it is desirable and appropriate for local government to be recognised in the Federal Constitution. We believe that local government is a legitimate level of government in Australia, and it is a level of government that has existed for a very long time.

The calls that have come from local government itself for it to be formally recognised in the Constitution therefore have our support. The move by the Federal Government to achieve this will make sure that councils are given the status and recognition that they deserve. Further, I point out that the wording of constitutional referendum question 3 very much mirrors the amendment that was made to our own State Constitution in 1980.

The Hon. Diana Laidlaw: By a Liberal Government.

The Hon. BARBARA WIESE: As the Hon. Ms Laidlaw points out, that amendment was introduced by the Liberal Party in this State when it was in government, and it is a move that I strongly applaud. It is for that reason that I am most disappointed—indeed, flabbergasted—that the Federal Liberal Party has chosen to oppose this question along with the other three referendum questions that will be put to the people on 3 September. In the past, not only the State Liberal Party but also the Federal Liberal Party have supported constitutional recognition for local government. Indeed, just a few months ago the Federal Leader of the Liberal Party, John Howard, wrote to the Federal Attorney-General (Hon. Lionel Bowen) enclosing a copy of a letter from one of the local councils within his electorate. That letter called for constitutional recognition for local government. In his covering letter, John Howard indicated that he fully supported that council's point of view, and he urged the Federal Government to introduce constitutional recognition for local government.

So it was an enormous surprise to me, and to the local government community across Australia, when the Federal Liberal Party decided—for whatever reasons—to advocate a 'No' vote on this issue. This has led to considerable embarrassment, as I understand it, in the various divisions of the Liberal Party around Australia. Indeed, the Victorian and Queensland Divisions of the Liberal Party have decided to step aside from their Federal colleagues' point of view on this matter because they realise that it is a matter of such sensitivity within their own States and, in fact, they will not support their Federal colleagues.

In this State we have heard a deafening silence from the South Australian Division of the Liberal Party which, as far as I know, has not indicated any stand publicly on referendum question 3. One can only assume from this deafening silence that it supports its Federal colleagues. The

people in local government in South Australia with whom I talk are extraordinarily disappointed about this and, indeed, there is a strong feeling of betrayal amongst them because the Liberal Party is not supporting referendum question 3 or the campaign which is being led by the Local Government Association. It is extraordinary that we have not heard from members opposite about these issues when we consider the sorts of things they were saying in this place just a few months ago when we debated the Local Government Act Amendment Bill.

All sorts of comments were made at that time about the importance of independence and autonomy for local government, and that local government's desires should be recognised. We had the Hon. Ms Laidlaw, for example, suggesting that in the Liberal Party they prefer to respect local government not as a subordinate or agent to State Government but as a vital component in a democratically elected system of government. We also had the Hon. Dr Eastick in another place, who is the Opposition spokesman on local government, saying that the will of local government should prevail. He said that the Liberal Party was the only Party that was listening to and heeding the needs of local government, and that was prepared to stand up and be counted on these vital issues that are of such importance to local government.

It is extraordinary that when the Liberal Party is now being asked to stand up and be recognised on this matter, which is something that local government has asked for and which the Federal Labor Party is attempting to provide, we hear a deafening silence coming from that side of the Chamber. It is also interesting to note that members of the Liberal Party do not always support their Federal colleagues on issues of public concern. They have been very quick to come out in opposition to the Federal Liberal Party's position on multiculturalism. We can only applaud that stand; it is admirable that the State Liberal Party is taking that point of view on those issues, because it recognises the sensitivity of such statements being made at a national level and the effect on the ethnic communities in this State.

However, the State Liberals are completely ignoring the wishes and sensitivities that relate to this matter for the local government community. I can tell members opposite that people in local government will remember this because they are extremely disappointed that, at this stage, the Liberal Party has not been prepared to come out and oppose its Federal colleagues by supporting local government. It seems that the actions and the rhetoric of the Liberals are very different when it comes to local government issues.

I point out also, Ms President, that the action taken by the Liberal Party in this State to introduce an amendment to our own State Constitution Act was a measure supported by all Parties in this Parliament. There has been a shared view about this issue in this State until this time. I strongly call on members opposite to stand up and be counted as they said they were standing up and being counted a few months ago, to come out and join with other political Parties in this State in supporting a 'Yes' vote for question 3 in the constitutional referendum.

CAR PARKING

The Hon. I. GILFILLAN: I seek leave to make a brief statement before asking the Attorney-General a question about car parking on campuses of colleges of advanced education.

Leave granted.

The Hon. I. GILFILLAN: I am sure members will recall that in the middle of April towards the end of the last

session this Chamber disallowed regulations which were seeking to impose parking fees on students and staff at various CAE campuses around the city. With that disallowance, this Chamber, and I assume many members of the public, students and staff, believed that that was the end of the matter. It may come as a surprise then when I inform the Council that as of 25 July the following conditions applied:

1. Restricted parking on city site—staff only—guaranteed cost \$50.
2. For the period 25 July to 31 December for all other sites, the following charges apply: guaranteed staff parks, \$30; unguaranteed staff parks, \$15; unguaranteed student parks, \$10; weekly permit—staff, \$1.50; weekly permit—student, \$1; and daily permit staff/student, 40 cents. (These prices to be increased in 1989.)
3. Permits must be displayed on all cars parked on site (visitors exempted).
4. Permits to be sold for unguaranteed parking at suburban campuses to a factor of 20 per cent over the unguaranteed spaces available. In other words, there would be a 20 per cent over-capacity sold.
5. Permits sold on each site during restricted hours, that is, 2-3 hours per day, to be determined by each site.
6. Fines of \$15 per hour to be issued by caretakers (on each site) for those cars that do not display a permit or that park illegally in a reserved park.
7. Details of home address and car registration number are taken down (onto card system) when applying for a permit.
8. Must give proof of ownership of the said car when applying for permit (although this is not strictly adhered to due to many students not owning cars but using borrowed or parents' cars).

That system has been in effect and fines have been levied. After some inquiry I have now determined that the regulations to permit the imposition of these fines were gazetted last Thursday, 4 August. I am sure I share my surprise with other members in this Chamber that this has actually happened in the light of the debate and decision in this Chamber last April. I ask the Attorney:

1. What justification has the Government for reintroducing the regulations enabling the charging of parking fees at South Australian colleges of advanced education?
2. By what authority can the councils of the colleges of advanced education impose parking fees?
3. Are they entitled to raise revenue by this means from the students for capital works and/or their maintenance, specifically car parks?
4. Is this not a blatant violation of the will of this House of Parliament?
5. Will the Government continue to aid and abet the violation of a decision made in this Parliament last April?

The PRESIDENT: The honourable Attorney does not represent the Minister of Further Education in this Chamber.

The Hon. L.H. Davis: We don't know who represents who.

The PRESIDENT: Order! The honourable Attorney does not represent the Minister of Further Education in this Chamber; it has always been, and still is, the Minister of Tourism. If the Minister of Tourism would care to respond to the question, she may.

Members interjecting:

The PRESIDENT: Order!

The Hon. C.J. Sumner: Presumably the question can be answered by me.

The PRESIDENT: You have no responsibility in this matter. As I understand it, this is a question relating to colleges of advanced education, a matter which comes under the responsibility of the Minister of Employment and Further Education, who is not a member of this Chamber and is represented in this Chamber—and has been for many moons—by the Minister of Tourism.

The Hon. I. GILFILLAN: Can I indicate that I directed the question specifically to the Attorney-General representing the Government. I thank you for your comments. I was somewhat confused because I see that he represents the Minister of State Development and Technology whom I assume to be the same person as the Minister of Further Education.

The PRESIDENT: The one individual has several portfolios.

The Hon. I. GILFILLAN: And separate representatives in this Chamber.

The PRESIDENT: Yes, with different representatives in this Chamber.

The Hon. I. GILFILLAN: In that case, may I leave it to the front bench of the Government to choose which of their eminent Ministers will answer the question.

The Hon. C.J. SUMNER: I think that any Minister is able to answer any question put by the Opposition. Of course, whether it is to the satisfaction of the Opposition is an entirely different matter. All I can say on this point is that I will ask my colleague, the Hon. Miss Wiese, who in fact represents the Minister of Employment and Further Education, to obtain a report on the matters raised by the honourable member. However, it is not unusual for regulations to be repromulgated after they have been disallowed by the Parliament. Certainly, there have been occasions in the past where a House of Parliament has disallowed a regulation and the Government has remade that regulation.

An honourable member: The next day.

The Hon. C.J. SUMNER: That is right, the next day, and there is no legal impediment to it, although it may presumably be something that Opposition Parties, or indeed the Democrats, might criticise. The regulation may not be the same as the previous one because I understand, although I am not privy to all the discussions, that there have been some discussions on this matter. The Hon. Mr Burdett in his capacity as a member of the Subordinate Legislation Committee has obviously studied the question. The regulation is not the same, which was what I had assumed, because there had been discussions on this topic between the time of the disallowance and the remaking of the regulation.

So, it is a new regulation, which presumably has taken into account the concerns expressed by the Parliament. Therefore, there is nothing improper in what the Government has done. There is certainly nothing illegal in what the Government has done because the Government can at any stage remake a regulation even in precise terms to that which has been disallowed by the Parliament. In this case the regulation is different. It will be a matter for the Parliament to determine whether it wishes again to proceed for its disallowance. As I understand it, that is the legal position from the point of view of Parliament and I trust that answers part of the honourable member's question. The rest of the question which deals with the specific facts of this matter can be taken up by the Minister of Further Education and a reply provided to the honourable member.

The Hon. I. GILFILLAN: I ask a supplementary question.

The PRESIDENT: Before the honourable member does so, I point out that there are many precedents in many

Parliaments where questions are not permitted to be answered by other than the responsible Minister.

The Hon. I. GILFILLAN: Under your ruling, Ms President, my supplementary question is to the appropriate Minister. Does the Government favour the imposition of parking fees on students in CAE campuses?

The Hon. BARBARA WIESE: Apparently I am allowed to answer this question. As this is obviously a matter of policy and the Minister responsible would want to have a say about that, that is one of the questions that I will refer to him and bring back a report.

UNDER-AGE PARENTS INQUIRY

The Hon. DIANA LAIDLAW: I seek leave to make a brief explanation before asking the Attorney-General, who I understand represents the Acting Minister of Health and Community Welfare, a question on the subject of the under-age parents inquiry.

Leave granted.

The Hon. DIANA LAIDLAW: The former Minister of Health and Community Welfare, Dr Cornwall, announced in May 1987 the establishment of an inquiry into the Department for Community Welfare's protection policies in relation to children of teenage parents. At the time, the announcement was given prominent treatment in an article by Miss Deborah Cornwall in the *Advertiser*. The former Minister was quoted in that article as saying in part that the inquiry would have the power to recommend changes to the Department of Community Welfare's policy and procedures and, further, that the report would serve as a sound basis for future action.

From these public statements it is quite clear that the former Minister intended that the terms of reference for the inquiry be broad and that the inquiry would not be a secretive, small-scale, internal review. Yet, today in the *Advertiser* the Acting Director-General or Chief Executive Officer of the Department for Community Welfare, Ms Leah Mann, is quoted as saying that she did not think the Cooper report should be released because it addressed many issues that were not originally intended to be put under scrutiny. I ask the Attorney-General the following questions:

1. Did Dr Cooper receive a commission from the Government to undertake the inquiry and, if so, how much?

2. What were the terms of reference for the inquiry and did Dr Cooper adhere to the terms of reference?

3. Does the Attorney-General accept as a valid excuse for the non-release of a report commissioned by the Government the suggestion that the relevant report may have addressed issues not originally intended to be under scrutiny?

4. Considering the high profile given by the former Minister of Health and Community Welfare to the original announcement of the inquiry and also the high level of concern in the community about DCW practices in the field of child protection, does the Attorney-General agree that the findings should be covered up, as is suggested at present, or that the report should be released without delay for public assessment?

The Hon. C.J. SUMNER: Reports that are prepared for the Government are generally released, certainly by this Government. Very few reports have not been released but, quite clearly, the Government does not adopt a *carte blanche* attitude that every report prepared within government should be released publicly. That would make the question—

The Hon. Diana Laidlaw interjecting:

The Hon. C.J. SUMNER: This Government has released reports, large numbers of reports, that have been critical of the Government and, as a general rule, this Government has released reports—

The Hon. L.H. Davis: Before freedom of information?

The Hon. C.J. SUMNER: I have already put my view on that.

The Hon. L.H. Davis: You will have another chance.

The Hon. C.J. SUMNER: That's right. Freedom of information will be introduced in this State by 30 June 1989. There is money in this budget for the freedom of information measure, whereby people will be—

Members interjecting:

The PRESIDENT: Order!

The Hon. C.J. SUMNER:—able to have access to their private records or to information that is held on them by the Government with the capacity to correct them. That initiative has been taken and will be—

Members interjecting:

The Hon. C.J. SUMNER: Well, that is freedom of information in relation to personal records. It does not go as far as the honourable member's Bill but it is certainly a step in that direction and is actually in the process of being done at this stage. There is an allocation in this year's budget, and instructions have been issued to departments to carry it out, with it being in place and fully operational by 30 June next year.

The Hon. L.H. Davis: That is not FOI.

The Hon. C.J. SUMNER: It is certainly FOI as far as I am concerned. It is of great benefit to individuals who want access to records held by the Government. I understand that, interstate, such inquiries constitute the greatest majority of FOI requests. So, the Government has done something concrete with respect to FOI. I appreciate that that was an aside, Madam President, but I was called on to make it as a result of interjections, which are out of order.

The PRESIDENT: I have called for order.

The Hon. C.J. SUMNER: Thank you, Madam President. I understand that. I was blaming not you but members opposite. I cannot say whether this report will be released. It is not within my area of responsibility. However, the honourable member's proposition that all reports prepared within government, no matter on what topic or what they say, should be released is not one that any responsible Government could accede to. Nevertheless, I certainly believe that this Government has released reports to the public and the Parliament whenever that has been possible.

The Hon. DIANA LAIDLAW: By way of a supplementary question, I ask the Attorney-General: will he bring back replies to my other questions to which he has made no reference and will he advise the Council of the guidelines for the release of reports commissioned by the Government?

The Hon. C.J. SUMNER: There are no specific guidelines.

The Hon. Diana Laidlaw: It is just subjective?

The Hon. C.J. SUMNER: It is not a matter of subjectivity: it is a matter of what the report is prepared for. Was it a report that was prepared by a committee that received public submissions? Was it a report that was obviously to be prepared for discussion by the community? Was it an internal government document dealing with highly confidential commercial matters?

Members interjecting:

The Hon. C.J. SUMNER: No, I am not commenting on this particular report. I am just replying generally to the honourable member's question. Obviously, certain reports would not be released; for example, those dealing with highly confidential commercial information that might prej-

udice the State's activities. There might be highly confidential reports dealing with individuals, for instance, such as an investigation within the Public Service. Obviously, reports arising from police investigations are not made public. That is clear, and that position is supported by the Opposition. If every report prepared by the police on suspects or a particular investigation had to be made public, that would render law enforcement very much more difficult. There are broad guidelines.

In relation to this matter, I do not know whether it is a report that should be released to the public, but my comments were not related to this particular report. They were at large merely asserting a proposition that I would have thought would be agreed by the Parliament, anyhow. Obviously, not every report that is prepared within government can be released to the public. On this particular matter, I am happy to take the question to the responsible Minister and bring back a reply.

SALINISATION

The Hon. M.J. ELLIOTT: I seek leave to make a brief explanation before asking the Minister of Tourism, representing the Minister of Water Resources, a question on salinisation.

Leave granted.

The Hon. M.J. ELLIOTT: Salinisation is a major problem in Victoria and Western Australia and until recently has not been a problem in South Australia. What has happened historically in South Australia is that the settlers cleared much of the vegetation, particularly in the Mallee areas. Whereas previously the recharge—the amount of water reaching the water table—was .1 of a millimetre per year, it is now between 8 and 40 millimetres per year, which is quite a significant increase. This water carries a lot of salt which is being held in the upper zones of the soil. It has two consequences. First, the water table starts moving more rapidly towards the Murray River, so increasing amounts of salt will enter the river. The other problem with the rising water table—which is rising by as much as 10 centimetres a year in some places—is that eventually it reaches the surface. Estimates suggest that, even on a conservative scenario, over the next 50 years the Murray River salinity at Morgan could rise by 145 EC units. People familiar with that reading will know that it is a significant rise. An estimate of the cost per year is in the realm of \$10 million. It could be far worse because I do not think that those figures include industrial costs affected by the impact on machinery, etc.

The salinisation that has occurred so far affects a few hundred hectares around Keith and Bordertown, but it will affect a much larger area. Within 25 years, as much as 25 000 hectares will be dramatically affected and, within 50 years, all land that is 20 metres above sea level (I am not sure if that is right)—broadly, all the land west of Keith—could be considered to be at risk. Will the Minister of Water Resources and the Minister of Agriculture, who would have an interest in this matter, ensure that there is a dramatic increase in research funding so that we can be sure of what will happen with this problem?

The Hon. BARBARA WIESE: Salinity in the Murray River has been of longstanding concern to successive Governments of South Australia, and indeed successive Ministers of Water Resources and Environment have devoted a lot of time and energy to addressing some of those problems in South Australia and also by way of communication and negotiation with other State Governments in whose territory

activity has some bearing on what happens to the water supply once it reaches this State. The new Minister of Water Resources, I know, will share those same concerns and will support whatever work can be done to overcome some of these problems. As to the question of research, a lot of time and energy has already been devoted to research on those issues and I am sure that the Government would support any future activity. I will certainly refer that question to my colleague in another place and bring back a report.

HON. J.R. CORNWALL

The Hon. R.I. LUCAS: I seek leave to make a brief explanation before asking the Attorney-General a question about the recent departure of the Minister of Health.

Leave granted.

The Hon. R.I. LUCAS: In reply to a question in another place this afternoon, the Premier has admitted that the former Minister of Health could be liable to pay personal income tax of up to \$73 500 arising from the Government indemnity of his legal costs. In view of the Premier's statement today and Cabinet's stated belief that the former Minister should not be personally financially disadvantaged in this matter, will the Attorney-General be advising that the indemnity be extended to cover payment of personal income tax by the former Minister?

The Hon. C.J. SUMNER: I have not considered that matter and am therefore not able to answer the question. In any event it is hypothetical because the reality is that the matter is subject to appeal.

Members interjecting:

The PRESIDENT: Order!

The Hon. C.J. SUMNER: Maybe the court will overturn the judgment and there are a lot of possibilities. In any event I have not given the matter any detailed consideration as to whether that would affect the advice that I give Cabinet. Suffice to say that the question of whether or not there is income tax or fringe benefits tax payable—or whatever the allegation is from the Opposition—has certainly not been determined. The question is hypothetical in the sense that that will not be determined presumably until the matter is resolved in the courts and the Government is called upon to meet the indemnity which has been given. As I said yesterday, I doubt that fringe benefits tax or income tax would be payable in these circumstances. I would find that somewhat surprising, and I also think any commonsense consideration of the issue would—

The Hon. K.T. Griffin: There is no commonsense in Federal income tax.

The Hon. C.J. SUMNER: That may well be so. The honourable member is a bit of an expert on it. There certainly was not much commonsense in it when the former Liberal Government, the Fraser Government, let a lot of people escape its provisions with bottom of the harbour schemes, and the like. I certainly agree with the honourable Mr Griffin that at that stage there was not a lot of sense in the Commonwealth Income Tax Act. However, if one looks at the matter from what one would consider to be a commonsense point of view, one would find it hard to believe that income tax or fringe benefits tax would be payable on this amount, given that the indemnity is given to Dr Cornwall for actions taken during the course of his employment. I suppose the same ruling might apply for indemnities given by the Government to public servants. That has never been raised before. Is the Hon. Mr Griffin going to tell me that all the indemnities that his Government gave and this Government has given in the past to State public servants—

Members interjecting:

The Hon. C.J. SUMNER: I was talking about both; the Hon. Mr Lucas was talking about income tax. Is it suggested that there should have been income tax paid for indemnities that have been provided for public servants in the past for expenses they have incurred acting as employees of the Government? I have not heard that proposition being put before and I have not heard of any income tax or fringe benefits tax being paid in those circumstances, and yet those indemnities clearly have been given in the past by this Government and by its predecessors.

I have not had the opportunity to study the point, but certainly I will not be accepting at this stage that the Government has any liability in that matter. In any event, it is not a matter that will be determined at this point in time, because the matter has not been resolved finally in the courts and until it is we are talking about a hypothetical situation. When the matter is resolved in the courts, as it undoubtedly will be, and if it is resolved in the way that requires a payment by the Hon. Dr Cornwall then no doubt this issue will have to be examined in more depth.

CITIZENSHIP FEE

The Hon. M.S. FELEPPA: I seek leave to make a brief explanation before asking the Minister of Ethnic Affairs a question about the citizenship fee.

Leave granted.

The Hon. M.S. FELEPPA: We heard that the Federal Government will consider initiating a campaign in order to encourage permanent residents to take up citizenship. In my view this is a good decision because, as I said yesterday during my Address in Reply speech, many migrants are reluctant to take up citizenship not for lack of loyalty but rather for a lack of particular attention. However, the current position of having a \$35 fee for the application is contrary to the spirit of the campaign and, more importantly, it appears to be discriminatory. It is contrary to the initiative of the campaign because the \$35 fee, while it seems not to be a particularly large sum of money, for a working couple or single person unemployed or on low wages within a migrant family can represent a large sum of money. It is discriminatory because no Australian-born person is subject to such a fee to affirm his or her citizenship of this country.

When this fee was introduced I made personal representation simultaneously with other members of Parliament from South Australia, other States and the Commonwealth. Unfortunately, the reply was unsatisfactory. The reason given to us was that this fee was necessary to cover the procedural costs of the application; the certificate (which currently, by the way, consists of a typed sheet produced by computer); and because Canada, the United States and New Zealand apply such a fee. All of these reasons might have been acceptable to the former Minister of Immigration. However, given the spirit of the campaign envisaged it would appear to be contradictory, unfair and, as I said, discriminatory. So, will the Minister of Ethnic Affairs use his good offices to persuade the Minister for Immigration, Local Government and Ethnic Affairs to consider the abolition of such a fee?

The Hon. C.J. SUMNER: I agree with the honourable member that the imposition of this fee was counterproductive, particularly as I think all would agree, whatever one's views about immigration and multiculturalism, that encouragement should be given to people to take out Australian citizenship particularly if they intend to reside per-

manently in this country. So I agree that the fee is unfortunate; I think it is counterproductive. It should be abolished, and I am happy to make representations to the Federal Minister taking into account the argument put forward today by the honourable member.

CONSTITUTIONAL REFORM

The Hon. CAROLYN PICKLES: I move:

That this Council applauds the Federal Government for its commitment to constitutional reform as shown by the establishment of the independent Constitutional Commission; that this Council acknowledges that the involvement of the community in the work of the commission sets it apart from all previous attempts to reform the Constitution; that its work, as reflected in the reports of the commission and its advisory committees, establishes the blueprint for the future of constitutional reform. Further, that this Council urges all members to work with all other Australians committed to the principles embodied in the four referendum questions relating to four year terms and concurrent elections for both Houses of Parliament; fair and democratic elections; constitutional recognition of local government; extended guarantees of trial by jury, religious freedom and fair compensation to ensure they are approved at the referendum on 3 September 1988.

Ms President, on Saturday 3 September, Australians will be voting in a referendum which will provide for fewer elections, fairer elections across the country (both at the State and Federal levels), recognition of local government, and more clearly defined rights for the people.

The Australian Government is asking Australians to vote 'Yes' in all four cases at the referendum. These four proposals arise from the first report of the Constitutional Commission. With the exception of the parliamentary terms, the Government has closely followed the recommendations of the commission. As far as parliamentary terms are concerned, the Federal Government's proposal will accomplish the commission's principal objective of fewer elections and more stable government without reducing the powers of the Senate in any way.

The Constitutional Commission was chaired by Sir Maurice Byers, QC, the former Commonwealth Solicitor-General. The other members were Dame Enid Campbell, Professor of Law at Monash University; Professor Leslie Zines, from the Australian National University; former Prime Minister, Gough Whitlam, QC, AO; and the former Premier of Victoria, Sir Rupert Hamer. The commission was supported by five advisory committees, whose membership was drawn from a broad cross-section of the community. The commission was charged with the role of seeking the views of the people as to the adequacy of the existing provisions of the Constitution and the need to update the Constitution to make it more relevant to our nation in its bicentenary year and into the next century. This role acknowledges that our Constitution is a living document and that, whilst it has served our nation well, it is not immutable.

The terms of reference of the commission acknowledged that Australia is a democratic federation in which the Federal, State and local governments each play a complementary role in the administration of our society. The commission was required to seek the views of the public, business, trade unions and financial institutions; to stimulate public discussion and awareness of constitutional issues; and to hold public meetings and consider submissions to ascertain Australians' views on constitutional reform. It is these features—the composition and the focus on ascertaining the public's view—that set the commission apart from earlier attempts to review and update the Constitution.

The commission's recommendations reflect the views of the public obtained from open meetings in every State and from more than 4 000 submissions received by the commission and its advisory committees over more than two years. The referendum addresses four fundamental democratic rights: the people's right to a more effective registration of the mandate they give at elections, through greater stability, responsibility and contemporaneity of both Houses of Parliament; the people's right, everywhere in Australia, to vote at fair and free elections; the people's right, as members of local and regional communities, to have the important third level of government recognised as part of the Australian Constitution; and the people's right to have guaranteed, in the Constitution itself, certain inalienable rights and freedoms, including trial by jury, just compensation for compulsorily acquired property and freedom of religion.

On the issue of four year terms for both the House of Representatives and the Senate, it is a fact that Australia has had too many elections since 1945. We have had Federal elections on average once every two years—a total of 22. All State Parliaments, except Queensland, have four year terms, and most democratic countries around the world operate under four or five year terms. A 'Yes' vote will mean that the Senate will have the same four year term as the House of Representatives and that all future elections for the House of Representatives and the Senate will be held on the same day. One very positive aspect of this will be the saving to the taxpayer—the last Federal election bill was \$47 million.

The Hon. Peter Dunn interjecting:

The Hon. CAROLYN PICKLES: Well, you can't change the Constitution without a referendum. A four year term will ensure that Governments can get on with running the country and businesses will be able to plan and invest with more certainty. In fact, the Business Council of Australia has strongly supported a four year term because it believes it to be important for Australia's future welfare. The Federal Opposition has opposed this part of the referendum, because it has stated it affects the powers of the Senate. This is nonsense as the proposal has been carefully drawn up to protect those powers. The Senate will still be free to review, amend or reject legislation, and its powers over Supply Bills will not be changed. The Senate will still be able to force the Government to elections, but will be accountable to the people for its performance at the same time.

The second referendum question on the right to fair elections is one that this State has cause to remember. We now have a fair system of voting, but this is not true of all States, particularly Queensland. For example, in Queensland, three country electorates of just over 8 000 votes (25 000 votes altogether) elect three representatives to Parliament, whilst one city electorate of 25 000 electors elects just one. Vote values vary by three to one. The Queensland Government has consistently refused to address this issue and will go on doing so unless a reform at the referendum is successful. All Australians have the right to equal and democratic elections. This State suffered for many years under a similar system, but now South Australia enjoys a fair system of voting.

The 'Yes' vote on this question will apply for elections for the House of Representatives, State Parliaments and mainland Territory Legislative Assemblies. The changes will ensure that: the number of votes in each electorate must be within 10 per cent of the average number of voters in all electorates in that State; redistributions occur at least every seven years, or more frequently when required; the votes within an electorate cannot be given different weights; all

Australians have the right to vote, unless they are legally disqualified because of non-residence, non-enrolment, mental illness or incapacity, or imprisonment; and voters vote only once in each election.

This proposal does not interfere with present equal representation of all States in the Senate. It does not affect the representation of the States in the House of Representatives. Tasmania will keep its five seats, as guaranteed by the Constitution. The proposal cannot reduce any State's representation in either the Senate or the House of Representatives. The proposal does not affect the preferential voting system. It does not require first past the post voting and voters will still be able to distribute their preferences in elections.

It does not give the Federal Government any greater power, but ensures that all Australians will be guaranteed the right to a fair vote. What it does mean is that the Queensland Government, in particular, will lose its power to hold unfair elections. In fact, the Leader of the Queensland Liberals, Angus Innes, had this to say:

Liberals elsewhere have no personal experience with the distortions of democracy in Queensland and I question their commitment to State rights.

The 'Yes' vote on local government is a recognition that it is the government closest to the people and will guarantee that local government remains a vital part of Australia's Federal system. I have received many letters from local governments urging me to support the 'Yes' vote on this question. I can assure them that I will, and I support their campaign to ensure that this question passes.

The States of Victoria, Western Australia, South Australia and New South Wales have each amended their Constitution to recognise local government but in differing form. Queensland and Tasmania are the only States which do not recognise local government in their Constitution. The Australian Constitution can only be changed by the people. A 'Yes' vote will mean that local government cannot be permanently replaced by State appointed administration. As a result, a system of elected local councils, accountable to their communities, will be guaranteed in every State. A 'Yes' vote will recognise the reality that local government is an important element of the public sector.

Around Australia there are more than 850 councils working to provide a wide range of services to local communities. Last financial year these councils spent more than \$6.5 billion and were responsible for physical infrastructure which was in excess of \$40 billion. It has taken a long time for local government to be acknowledged federally since the Constitution was framed in 1901. The Opposition argues that a 'Yes' vote will give extra power to Canberra. On the contrary, it will strengthen the system of decentralised community-based government. How and where local government bodies operate will still be decided by State Parliaments. A 'Yes' vote will not mean that an inefficient or corrupt council cannot be sacked. Constitutional recognition will require fresh elections to be held within a reasonable time after any dismissal of a local government body. States will still be able to identify areas not suitable for incorporation.

The terms of the referendum proposal put any prospect of a Commonwealth imposed system of regionalism for local government out of the question. The role of the States is specifically set out. A 'Yes' vote will not affect financial matters, such as grants, local government revenue and borrowings. These are issues for resolution at the political level, not in the Constitution. South Australia clearly defined these matters in our last session of Parliament—giving local government greater flexibility in its financial arrangements. One of the reasons the Federal Opposition is opposing this proposal is that it is tokenism. This is nonsense, as local

government has been campaigning for years to have this amendment to our Constitution.

In the *Advertiser* of 14 July 1988, Councillor Kenneth Price, President of the Local Government Association, pointed out that Mr Howard, in his address at the opening of the Australian Local Government Centre on 26 February 1987, said:

The coalition Opposition supports and will continue to strive for constitutional recognition for local government at the earliest opportunity.

Well, now is the opportunity, so why does the Opposition oppose it?

Councillor Price also noted that the National Party Leader, Mr Sinclair, stated in 1986:

In principle I support constitutional recognition for local government. This depends on a successful referendum.

I hope Mr Sinclair will guarantee its success. Councillor Price concluded his letter by saying:

Many loyal Liberal Party supporters, like local government, throughout Australia, were led to believe that past statements were a true reflection of the Liberal Party's stance on this issue. But we were not to account for the blatant opportunism of a political Party that saw its chance better served by coming out with a uniform 'No' campaign to all four proposals. Now local government is forced to endure a series of misleading statements while the Federal Opposition tries to justify its position. We can call this politics or, as did the *Advertiser* editorial 'sheer opportunism'.

It is obvious from his letter that Mr Price considers that many local government members are strong supporters of the Liberal Party, so where does the State Liberal Opposition stand on this issue? I imagine that it wishes that it would just go away, like some of the other confrontationist statements recently of Mr Howard, particularly on immigration matters.

The fourth question in the referendum is one that I, probably like many Australians, was surprised to learn was not already contained in the Constitution. This is the guarantee for all Australians of three basic rights and freedom against the action of all Governments: first, trial by jury for people facing serious criminal charges; secondly, fair compensation if a Government takes your property; and, thirdly, freedom of religion.

Presently, the Constitution gives limited protection for all three, but only from the Commonwealth Government. States and Territory Governments are not bound to observe these rights. At present the Constitution does not give a right to trial by jury for offences against State and Territory laws, or for a number of serious Commonwealth offences. Trial by jury for serious offences is a fundamental right and one of the cornerstones of a democratic society.

A 'Yes' vote will guarantee trial by jury for any person liable to imprisonment for more than two years, or to any form of corporal punishment (including the death penalty). The only exceptions are contempt of court and defence force court-martials where the accused will be able to waive the right to trial by jury.

State and Territory Governments will continue to determine the size and composition of juries. However, the principle of jury trial would override any attempt to deny the right to trial by jury through small juries or anything other than what is commonly understood to be a trial by jury. On the issue of fair compensation, the present situation is that Australians are entitled to compensation on just terms only where the Commonwealth acquires their property. The Constitution gives no right to fair compensation when property is taken by a State Government or local government; by a Territory Government; or by the Commonwealth Government in a Territory.

In the past, State Governments have confiscated privately owned property without providing just terms. This provision will prevent State and Territory Governments doing so again. The proposal will mean that the Commonwealth will also be bound to fully compensate Territory citizens and that, whenever any Government acquires property, fair compensation will be given.

The final issue of freedom of religion is another fundamental tenet of a democratic society. At present, there is no common law protection of the right to religious freedom, nor are the States or Territories obliged to observe this right. Most Australians would be, as I was, unaware of this, but as recently as 1984 the Supreme Court of South Australia confirmed this fact. The Constitution presently says that the Commonwealth shall not make any law establishing any religion, imposing any religious observance, prohibiting the free exercise of any religion and will not require test as qualification for any Commonwealth public office. At present this protection is inadequate as it does not apply to the administrative acts of the Commonwealth, nor does it apply to State or Territory Governments. A 'Yes' vote will apply the guarantee of religious freedom consistently throughout Australia and will extend the present guarantee of Australia's religious freedom so that it is protected against the action of all Governments, whether Federal, State or Territory.

The Opposition has stated that it will prevent Government aid to religious schools or hospitals. While there has been some debate in the community on this issue, the High Court has said that the Government is prohibited from establishing a State or national religion, but not from assisting religious bodies providing community services, and this will remain the case under the proposal. A 'Yes' vote, however, does not mean that people can commit harmful acts in the name of religious beliefs. Again the High Court has said that religious freedom is not absolute, and conduct that offends against normal laws of civilised behaviour will not be protected.

A 'Yes' vote does not mean that prayers will be prohibited in Government schools or at public ceremonies. Just as Governments cannot compel a person to attend religious ceremonies, they will not be able to prevent anyone from voluntarily engaging in religious observance such as prayers. This question only guarantees that State Governments should respect freedom of religion—as the Commonwealth Government has been required to do under the Constitution since 1901. It neither seeks to force any particular religion on Australia, nor does it remove the right of Australians not to participate in religious observance.

Ms President, these referendum proposals are sensible, and I would suggest in some cases long overdue. Eighty seven years is a long time to wait for fundamental rights to be enshrined in our Constitution. There are, of course, other rights which need to be addressed, and I hope that future reports of the commission will address these rights.

Another issue that I believe we should address in relation to the Constitution is the location of the constitutional document. I understand that it is at present in London. I also understand that Canada has repatriated its constitutional document, and I believe that in this bicentennial year Australia's constitutional document should be repatriated to our country. I understand that Margaret Thatcher, the Prime Minister of England, was asked during her recent visit to Australia whether she would indeed return the constitutional document to Australia. She replied that she would not. I would urge the Attorney-General to make representations to the Federal Government to have this significant

and historically important document held in Australia, where it belongs.

Ms President, I urge all sensible Australians to support the 'Yes' vote in all four cases in the referendum proposal, and I urge members to support the motion.

The Hon. K.T. GRIFFIN secured the adjournment of the debate.

COUNTRY HOSPITALS

The Hon. M.B. CAMERON (Leader of the Opposition): I move:

1. That this Council condemns the Premier and the former Minister of Health for their failure to keep a commitment they made to the citizens of Laura, Blyth and Tailem Bend that the Government would not close hospitals in those three towns—or change the hospitals' status—unless such moves had the support of the local community.

2. Further, the Council also condemns the Premier and the former Minister of Health for the failure to attend any public meetings which were called for the purposes of indicating the public's response to the planned changes in country health services.

Madam President, it is a very sad day indeed that it is necessary for me to move this motion.

The PRESIDENT: Order! I would ask any members in the gallery to stay seated, or they will be asked to leave the premises.

The Hon. M.B. CAMERON (Leader of the Opposition): Madam President, it is a very sad day indeed that it is necessary to move this sort of motion within this Chamber because, if the former Minister of Health, Mr Bannon and the Government had kept their word to the people of South Australia and in particular to country people, there would be absolutely no necessity to do this.

The forced closure, against all public opinion, of the Blyth, Laura and Tailem Bend hospitals as of 1 July 1988 must rank as one of the most sordid acts of public deception that I have witnessed in almost 18 years in State Parliament. The manner in which the Premier, the former Minister of Health and senior members of his Health Commission have attempted to hoodwink country people during the past eight months almost defies description. It is worth while recounting the sequence of events which have led to the defunding (or should I say the attempted defunding) of these three hospitals.

The sequence of events almost reads like a script from some demented merging of *Monty Python's Flying Circus* and *Yes Minister* television comedies. The arrogant, unsympathetic and dictatorial attitude of the former Minister of Health would provide excellent material for John Cleese to write a Monty Python sketch, while the smooth doublespeak of his commission officers, as they tried to placate irate country residents at public meetings around the State would do proud the 'Sir Humphrey' of *Yes Minister*.

The Bannon Government's performance on the entire country hospital debacle serves only to demonstrate that it no longer believes it is answerable to the public of South Australia. It is a Bannon Government which has become arrogant—a Bannon Government which now believes that it has a monopoly on the knowledge of what is best for South Australian communities.

The Premier, Mr Bannon, sits up in his Victoria Square office and does not have the gumption to come down and listen or speak to thousands of country people who rallied to voice their concerns about losing their local hospitals.

The Hon. L.H. Davis: The invisible man!

The Hon. M.B. CAMERON: That's dead right. Mr Bannon and his Government are now not only alienating large numbers of the general public but are also ignoring the very roots of their political support—the union movement. Let me tell the Council that there are union people who are at these meetings and who are saying exactly the same things as other country people. In fact, the majority of residents of Tailem Bend would be grass roots people, like the Hon. Mr Crothers and the Hon. Mr Bruce. They are people of the union ranks—ordinary, decent working class citizens who have been forced to use their funds to travel to Adelaide to attend meetings in order to try to convince this arrogant Government exactly what they want in their town, and not be told by some arrogant former Minister of Health, or the invisible Mr Bannon who did not turn up, what they need.

That is a measure of how out of touch the Bannon Government has become with the ordinary people of this State. The Bannon Government's steamrolling attitude to its restructuring of country health services exposes a litany of broken promises. Little wonder there is now widespread mistrust among country communities about any assurances that the Premier, the former Minister of Health, or in fact any member of this Government can give in the future.

It was in this Chamber on 2 December 1987 that the former Minister of Health assured everyone that there would be no changes to country health services without the full support of the local communities that those changes would affect. He was, in fact, misleading this Chamber. Dr Cornwall assured us that without that basic community support he would not endorse any planned changes to country hospitals. I quote the former Minister from *Hansard* on that day, in answer to a question from me because I was keen to get on record exactly what he meant. He said:

I chose my words very carefully and I reiterate: unless there is significant community support for these initiatives, I do not believe that I could give them my support. That means in turn that Cabinet will not give them its support because they will not get to Cabinet.

That was a misleading statement in this Chamber.

The Hon. L.H. Davis: It was a lie.

The Hon. M.B. CAMERON: It was a lie, a deliberate untruth told in this Chamber by the former Minister of Health. Let me say now that I am pleased that he is no longer the Minister of Health because of this fact alone, let alone anything else, because he did not deserve the position if he was prepared to mislead people in this way. That is a very clear statement that I am sure would be supported by the majority of country people. On 16 December 1987 readers of the *Advertiser* were able to see an identical assurance from the Deputy Chairman of the Health Commission, Mr Ray Sayers, who wrote a letter to the Editor. I will quote the end of his letter, which I can provide to the Council if it is required because it is absolutely clear cut. He said:

Despite the commission's desire, no changes will be effected unless there is significant community support for them.

Where on earth did they find the community support to bring about the changes after that assurance? Again on 30 January 1988 the former Minister of Health repeated assurances that no hospital would be closed, or have a change in role, without public support. Again I quote from the *Advertiser*, from a front page article on that day describing the Minister's plans for a \$22 million upgrading of country health services. A copy of that is available for any member of the Government, back-benchers who want to know the truth. I hope they read it and if they do I will be very surprised if they continue to support this former Minister. The article states:

He [Dr Cornwall] said no country hospital would be closed in the life of the present Government unless a community requested it.

Not content with the front page exposure this upgrading of country health services attracted, the publicity seeking former Minister of Health wrote to the *Advertiser*, and a letter was subsequently published on 12 February 1988. In the letter Dr Cornwall repeated, and I quote:

Under the proposals in the two years to 1990, no country hospital would be closed.

While the Minister was repeating those assurances to the press, and again in this Chamber on 9 February, no less a person than Mr Bannon—and we all know him; he is the Premier of this State—

An honourable member: The invisible man.

The Hon. M.B. CAMERON: Yes. This is the man who could not come to meetings in the country along with his Minister and other members of the Government—no back-bencher, nobody. He was signing letters to concerned country people assuring them that no major changes would be made to their country hospitals unless those changes were acceptable to the local community. I have with me a copy of one of those letters from Mr Bannon—and I understand that hundreds of people received them—to a constituent at Georgetown. Mr Bannon's signed letter ends with the following final paragraph:

I can reassure you that my Government will only consider major changes which can demonstrate an improvement in services, which are consistent with available resources and which are acceptable to the local community.

The Hon. R.I. Lucas: Who said that?

The Hon. M.B. CAMERON: Mr Bannon. I seek leave to table a copy of that letter because I think it should be on the record forever so that people can look back and know the sort of person they had for a Premier.

Leave granted.

The Hon. M.B. CAMERON: I will read the letter into *Hansard* because it is an important matter. I will not give the name; members can read the name. The letter is from the Premier dated 19 February 1988 and states:

Thank you for your letter concerning the Laura Hospital. I apologise for providing you with a standard reply but the comments made by you are similar to those which I have received from other residents in your area.

Neither the Government nor the S.A. Health Commission has any firm plan to close the Laura Hospital although officers of the Health Commission are talking with local health service providers on the future role of the Laura Hospital. No decision has been made as a result of those discussions.

As recently announced by the Minister of Health, officers of the Health Commission are consulting with health service providers and communities in the region on ways and means of improving general health services and of expanding hospital services in the more specialised medical and surgical procedures. New health service needs in the region have been identified through studies over the past 18 months in which there has been a large involvement of local people. Based on its knowledge of new services and programs which are working effectively elsewhere in the country or in metropolitan Adelaide, the Health Commission has also developed ideas for fulfilling the needs in the region. The Health Commission is consulting locally on how to improve the health services to all of the communities in the region, particularly in the following service areas:

- Specialist medical and surgical services available in the region (rather than only in Adelaide).
- Expanded allied health services, e.g. podiatry, speech pathology, physiotherapy, dental services.
- Mental health services for child and adolescent victims of sexual and physical abuse.
- Women's health services.
- Expanded drug and alcohol services.
- Health information and promotion.

Although the Health Commission is committed to providing these additional services, it must do so mainly from within existing financial resources. This is an understandable position in light of the national economic situation which is calling for reductions

in overall public spending. Officers of the Commission are therefore questioning the effectiveness of every health dollar currently being spent in the region and have put forward proposals for discussion with the local health service providers and eventually the wider community. These proposals do consider significant changes for some health care units but all within the context of expanding hospital services and introducing new health service programs. I trust the above description explains the context in which officers of the Health Commission have developed an alternative role for Laura Hospital for further negotiation. I am assured that any new role will be based on the continued presence of a general practitioner in the Laura township.

I can reassure you that my Government will only consider major changes which can demonstrate an improvement in services, which are consistent with available resources and which are acceptable to the local community.

Mr Bannon, in a more recent television interview, clearly demonstrated the Government's true colours in its supposed consultation with the public on this issue. Put simply the attitude is: 'If the community does not want what the Government is proposing, ignore them. The public, if it opposes us, can be accused of being obstructionist. Under this Government's process of consultation, in the end the Government always knows what's best for you'. From that television interview it seems that Mr Bannon believes that the Laura, Blyth and Tailem Bend hospitals are only third-rate. As he told the television reporter:

It appears to me that some communities at the moment would be satisfied with a third-rate facility in the knowledge that it [the hospital] is somewhere there without looking at the users of that facility—the people who need it—and whether or not it will meet their demands.

In other words, these hospitals are third rate; these hospitals that have been put there by the community are considered by Mr Bannon to be third rate. I wonder how the country communities concerned feel about that. Mr Bannon will not find out about that because, as I said before, he does not have the gumption to go to public meetings anywhere in the area to find out. Perhaps members who have been through Tailem Bend lately know what the people of that town think about it. The signs in Tailem Bend have been there for some time and will not be coming down. Those people are very angry about what has been done to them by this Government.

I have had the benefit of assessing the wishes of the community in those three towns—unlike the invisible Mr Bannon or the former Health Minister who clearly demonstrated their lack of gumption by failing to attend the three public meetings called to discuss the hospital closures and the Victoria Square rally held to show people's feelings. I can assure the Premier and his Government that the people of Laura, Blyth and Tailem Bend do not believe that their hospitals are third rate. They are well aware of their hospitals' benefits and equally aware of the fact that, like all hospitals, they have limitations. No-one has denied that. Nevertheless, they are there and they are an important part of the community. If you break your leg, it is not much use having preventive medicine. It is not much use having a local facility where you cannot be fixed. Anybody with an ounce of commonsense would know that. It is not an argument for ignoring the wishes of local communities and shutting the hospitals, simply because the Government says it must happen.

Just before Mr Bannon gave his assurances on hospital closures, a group of concerned country people, with the support of the Country Women's Association (and, along with the United Farmers and Stockowners, I give that association full credit for its fight on behalf of country people), pushed a hospital bed from Eyre Peninsula to Adelaide. That does not show that people are not concerned about their local facilities. Along the way they collected 40 000

signatures from people who clearly do not want any country hospital closures or major changes in status.

During the early months of this year, people attending public meetings in the Mid-North, Lower Murray and Lower North areas repeated those sentiments yet, in early May, the then Minister of Health announced that Cabinet would, within a fortnight, discuss the future role of the Laura, Blyth and Tailem Bend Hospitals. He had not been to any public meetings. He had not tried to find out what the people wanted. All he did was hold quiet little meetings with two or three people in the community at which he thought he or his Health Commission officers would get away with bullying tactics.

It was quite clear by then that the former Minister and the Health Commission had decided what proposals they would take to Cabinet. They did not give a damn what other people thought. Where were the former Minister's assurances (made in this Chamber under close examination by the Opposition) of 2 December? Where were the letters of assurance, printed in black and white, from the invisible Premier to the country people who were concerned about hospital closures?

The Hon. L.H. Davis: They conned the country people.

The Hon. M.B. CAMERON: Did they ever! Incredibly, at this late stage, the former Minister announced that he would set up an advisory group on rural health care to ensure better communication with the public on future Health Commission proposals. What a load of nonsense! It was just an attempt to grab a headline so that he could be seen to be consulting with country people after he had made his decisions. An absolute farce!

For eight months rural communities had been telling the Government, the former Minister and the Health Commission that they wanted to retain their local hospitals. But the Government, Dr Cornwall and the commission knew best and simply did not want to listen. They did not give a damn. Instead, Cabinet approved the closure of the Blyth, Laura and Tailem Bend Hospitals. So proud was the commission of its achievements that it served the closures to the hospitals under the cover of darkness with personal messengers. They scurried around in the dark bringing these closures to people so that they would not have to front up. They did not want to front up because once they got to the country towns there would have been a crowd waiting for them, waiting to tell them what they thought of their decisions.

So anxious were commission officials of the public reaction to the Cabinet decision on the closures that 14 police officers were detached to escort commission officers who attended a meeting at Tailem Bend. When they attended a board meeting, there was a paddy wagon, two plain-clothes policemen and a patrol car. The two plain-clothes policemen escorted them into the board meeting at the hospital to protect them from the savages of Tailem Bend. They are dreadful people! I tell you what, I skirt the town. I keep away from it. It is obvious that the Government might well be right and I had better keep away from it. What a load of nonsense!

The Hon. L.H. Davis: John Cornwall would drive through there in the dark these days.

The Hon. M.B. CAMERON: He would want to. He wouldn't like the messages. The Government's announcement of the closures came immediately before three public meetings were to be held to discuss the issue at Tailem Bend, Blyth and Gladstone. Although invitations were sent to Mr Bannon and the then Minister of Health to attend these meetings, it was senior Health Commission officers who had the difficult and uncomfortable task of explaining

the Government's decision. What a weak-kneed, cowardly act by the Government! An absolute disgrace! Not only was Mr Bannon invisible, as usual in these affairs—so was his entire Government. Not a single member of the Government attended; not a single backbencher. I can assure the Government that the people would have appreciated one person having the gumption to turn up. He or she would probably have got a cheer for having a bit of gumption.

At Tailem Bend on 25 May there was the extraordinary situation, as I said, where 14 police officers escorted the Chairman of the Health Commission (Dr Bill McCoy) and the head of Country Health Services (Mr Ray Blight) to the public meeting in the Tailem Bend Town Hall. There Dr McCoy attempted to explain the rationalisation proposals to the local community. It is obvious he is not a politician. One could pick that from the way he performed at the meeting. One could not expect him to have the sensitivity of politicians. In the process, he succeeded only in alienating almost all of the audience with comments such as this:

We believe that there are many people in this room, and outside this room, who suffer from mental health disorders.

At this stage he was having great difficulty being heard. He continued:

Seriously, there is a very major problem of mental illness in our community. It is largely undetected. It is certainly not serviced at an appropriate level. My view is supported by very many reports of very many experts all throughout this country and indeed throughout the world.

It is difficult—

The Hon. R.I. Lucas: To keep a straight face.

The Hon. M.B. CAMERON: I must say that I couldn't. He went on to say:

I refuse to believe that Tailem Bend would be exempt from that situation and suggest to you that a sensible look at the provision of local community health services—

by this stage everybody is looking at their neighbour—may be of an inestimable benefit to people in this town.

Not content with suggesting that Tailem Bend residents may have serious need for mental health services, which therefore justified closing the local hospital, Dr McCoy tried to project the idea that many people in the town were also in need of counselling for drug, alcohol or tobacco smoking problems. Not satisfied with the first little burst, he went a bit further. This service would be offered at a price: the commission must close the local hospital. I will again quote Dr McCoy because it is important to get his words. A tape of the proceedings is available for anybody who does not believe these actual words.

The Hon. L.H. Davis: It would have been a best-seller.

The Hon. M.B. CAMERON: It would have been. Dr McCoy continued:

It is our view that there are many people in this room and outside this room who have a problem with a drug, or with alcohol or with tobacco.

I hope he was not talking about me. He continued:

You can say what you like. Those are the hard facts, that those of you who are thinking members of the community will recognise as facts.

So, not content with suggesting that many people in the Tailem Bend district might be mentally unsound—that is probably the reason for the 14 police officers—the Chairman of the commission then suggested that many local people might also have drug or alcohol problems. That is hardly what one might describe as the best method of winning over an already hostile community!

The Hon. R.I. Lucas interjecting:

The Hon. M.B. CAMERON: No, they are quite mild, these people. In fact, they were pretty weak at the end from

laughing. The Health Commission officers who attended these three meetings—

An honourable member: Was this a free meeting?

Members interjecting:

The ACTING PRESIDENT (Hon. G. Weatherill): Order!

The Hon. M.B. CAMERON: It is all right; I can handle it. They were at pains to explain to the local communities that the closure of the Blyth, Laura and Tailem Bend Hospitals was not a cost cutting exercise, even though the closures would save the commission \$1.2 million. Again, I quote Dr McCoy speaking at Tailem Bend as follows:

This is not a cost cutting exercise. All the money will be put to the provision of services that you have told us are greatly needed in this community.

The Hon. Diana Laidlaw: For drug counselling.

The Hon. M.B. CAMERON: Yes, that is right. It is staggering that the proposition was put. By the following night, the explanation of where the savings would be directed was less specific, when Dr McCoy told a public meeting at Blyth that they would be directed to the region. By the time we got to Gladstone they were going to be directed to country health services. There was a bit of shift going on as we drifted along from meeting to meeting. So, in the space of two short days the ground rules for the use of any savings generated by the closure of these three hospitals were bent to suit the whim of the commission. But, the whole issue of the \$1.2 million savings from closing these three hospitals is enveloped in one statement being countered by another.

For example, earlier this year the former Minister of Health indicated that the upgrading of several hospitals, including Berri, could be jeopardised if his rationalisation program did not proceed. The next day he reversed that stance when there was a bit of an outcry: no, the money saved by the three hospital closures would not be central to whether Berri Hospital was upgraded. Then, a week after that, Mr Ray Sayers from the commission said that the saving of \$1.2 million was essential for Berri to be upgraded.

So, how on earth are we supposed to know who is telling the truth? You would not be able to pick it from the various statements that have been made. I do not think they ring or speak to one another. They certainly do not read one another's press clippings. It is little wonder that the public has been asking me for some time just who is lying in this issue and who is telling the truth—the Government, the former Minister of Health or Health Commission officers who are trying to sell the idea of rationalisation. I must say that I have reservations about the truth of some of the details that were provided by the former Minister of Health on this issue. I am inclined to the words of a well-known acting judge in his recent assessment of Dr Cornwall's perception of the truth, and perhaps I should read that. I quote him from page 34 of his judgment, as follows:

Dr Cornwall's evidence ought not to be accepted, in some respect not believed, unless his evidence is otherwise supported by the evidence of an independent witness.

I do not quite know what that means, but I think it is pretty straightforward. Similarly, evidence from this country hospitals debacle proves that Health Commission officials were often scurrying to match their policies and proposals (and I think this is important) with decisions made on the run by the former Minister of Health. I do not think they knew what he was going to say next. I am certain that many of the proposals that were put forward had to be deliberately designed to fit in with what the Minister had said the previous day. It becomes apparent from listening to transcripts of these public meetings that the closure of these three hospitals was first priority and that the alleged justification for the closures, that is, improved services, was

very much a secondary consideration. While the hapless men from the commission were specific in the types of improved services they saw being needed at Tailem Bend, they became fuzzy by the time they reached Blyth and Gladstone. So, we have Dr McCoy telling people at Blyth that it will not be the commission which decides which extra services go into the town once the local hospital is shut. I quote as follows:

I want to make it very clear that it will not be the Health Commission that will direct health services into this region; it will be the relevant boards of the institutions that will decide what those services should be.

The following night he had great difficulty in selling the commission's concept of a wider range of community health services to the people at Gladstone who rightly pointed out that the very services that the commission wanted to provide in the district, in return for the closure of Laura Hospital, were already being provided. One woman said to Dr McCoy and Mr Blight:

Mr McCoy, you say you know the Gladstone Health Centre—
By the way, Mr McCoy had already got up and said that it was wonderful to be there at Laura, when he was at Gladstone—

An honourable member: He was geographically illiterate.
The ACTING PRESIDENT: Order!

The Hon. M.B. CAMERON: Another person had a problem, which I will tell you about later. The woman continued:

I fail to believe that we have a speech pathologist, a podiatrist, a physiotherapist, a visiting gynaecologist, an optician, an optometrist, a mental health nurse, a psychiatrist, a visiting gerontologist, a CAFHS nurse and 1½ community health nurses as well as a paramedical aide; what else do you think this area needs in that field? Yet you are closing our hospital at Laura.

All that was available in that area already, but those were the services that were going to replace the Laura Hospital. It was absolute nonsense, and deliberate untruths were being told to those people to justify the closure of the hospital. Dr McCoy's response to this most pertinent question was simply to say, 'Well, if those services were provided in Gladstone or Laura then perhaps another area might want them.' Too bad for the communities at Laura and nearby who were losing their hospital!

At all these meetings the public were told that the changes were only minimal. Commission officers refused to accept that the three towns would lose their doctors if the hospitals shut. However, anybody who has been in that area and has talked to the local practitioners would know that that is simply not true. The doctor at Laura will leave; he will not stay, because there is nothing to keep him there if he does not have any acute beds. They are saying 'You will have acute beds; they will be short-stay beds for four hours. You will be able to go in there for four hours' and then "onward Christian soldiers", wherever they might send you. What happens if you get there at 11.00 o'clock at night? At 3.00 o'clock in the morning, you will be marched out of bed into an ambulance and onwards because that is the ruling: that you must move onwards. While you are there, you are being looked after by a nurse. If you are in an accident, do you imagine that any registered nurse will be able to handle the sort of trauma that comes from an accident? If he or she does that, then they will be potentially in very serious legal problems. I say to the commission that it is a load of nonsense to say that they will still have acute services because they happen to have a registered nurse on 24-hour duty. No nurse would say that they could provide those services.

It is quite apparent that the changes are not minimal. It is clear that the closure of the local hospital will be a major factor in any decision by the local doctor to quit the town.

Not only that, but also other jobs will be lost if the hospitals close. I have heard the crocodile tears about poor old Dr Cornwall losing his Ministry and all the nonsense that has gone on about that. What thought do you think he has given to the people in those towns that he has affected?

The Hon. R.I. Lucas: Nothing.

The Hon. M.B. CAMERON: Absolutely nothing. Why should people write to the paper and worry about him when he did not give one ounce of sympathy or understanding to the people in this area whom he was just cutting off at the knees. I suggest to people who are supporting him on the Government side that they think about that very carefully. Anybody with any background in the union movement ought to give that very serious thought. Dr McCoy conceded to the Tailem Bend public meeting, for example, the following:

The other point that we understand you make (and I well understand this) is that you will lose an employment base. This is an unfortunate by-product of this proposal.

Of course it is. Dr McCoy has admitted that. He knows that; he is prepared to accept that; but the Government does not give a damn. People like the Hon. Mr Bruce do not care about that problem which is facing this community. An unfortunate by-product! Maybe, in years to come, that might be the excuse given for why Tailem Bend, Blyth and Laura no longer offer any employment base, because all the local jobs have been lost to the major regional towns, or even Adelaide, because, once you take away the doctor and the hospital, you lose the chemist, and people who would normally retire or live in those towns eventually will not stay there. They do not go to that town anymore, and you lose the country town.

One of the problems we have is that there are not enough people in the Government who understand country people and country communities. It is time that some of them got up and started to talk to people in these regions and towns because, if they do not, they are certainly setting about the destruction of community life, by relative standards, in large country areas.

By its own admission, the Health Commission states that up to 40 per cent of the existing hospital employment base will be lost under these rationalisation programs in each town. That is 40 per cent fewer jobs in Laura, Blyth and Tailem Bend, and the commission's officers say (and these are their words) that the job losses are an 'unfortunate by-product'.

What a stupid attitude! I mentioned earlier the police escorts needed to accompany commission officers to the public meetings to discuss the hospital closures, but they need not have been worried about crowd anger. What really angered country people was that not once has Mr Bannon, the former Minister of Health, or his Cabinet colleagues, or even a Labor backbencher, deigned to attend a public meeting to explain the hospital closures. That says much about the arrogance of this Government, which now believes, erroneously, that it is no longer accountable for its actions, having overridden enormous community support for the retention of these three country hospitals. Perhaps I should explain to members how many people attended these meetings. At Tailem Bend the entire town of 500 people attended. Not one person would have been left at home. At Blyth 600 attended and over 800 attended at Gladstone.

The Hon. L.H. Davis: Did Mr McCoy know that he was at Tailem Bend?

The Hon. M.B. CAMERON: Yes, I think he did—he certainly would have known by the end. One cannot imagine any other issue that would get those communities together in those numbers. That indicates very clearly what community support there was. Surely someone in this Govern-

ment must soon start to listen. At least we will have a new Minister of Health, and I trust that whoever that is might start thinking very carefully about what the former Minister did to these people. The pig-headed behaviour of the—

Members interjecting:

The ACTING PRESIDENT (Hon. G. Weatherill): Order!

The Hon. M.B. CAMERON:—Government has been demonstrated. It is the same old ploy of blaming the victim. The former Minister claimed that the three hospitals are duplicating services already available at Murray Bridge, Clare and Crystal Brook. Not only that but also the commission and former Minister have tried to blame country people for the closures. In the initial stages Crystal Brook was also under the hammer, but then they suddenly thought that it was a little too far between Laura and Port Pirie and that they had better keep Crystal Brook open for the time being; otherwise, they might not be able to justify what they were doing on the basis of distance.

They dragged Crystal Brook out of the net for the time being. They said that they did an area health plan several years ago and that people, for example, at Tailem Bend, said that they wanted extra services, but the commission and the former Minister of Health cannot pass the blame to rural communities. The commission Chairman, Dr Bill McCoy, addressed people at Tailem Bend last May and he said that a very wide survey had been done of people in that region who assisted in an area health plan. In answer to questions they received, they said that a huge number of people in the community indicated that they wanted additional health services. However, he did not once say that in any of those questionnaires that were circulated people were told, 'If you agree that you want these extra services, we will give them to you, but we will take your hospital away.'

That is a clear deception of the people, and it is quite improper. It is scandalous for the Health Commission to set about closing hospitals on the basis of a questionnaire circulated three years previously and which carefully hid what they had in mind, and that was to close the hospital. They did not once do that and, if they now pulled out that same questionnaire and said, 'We are going to give you these extra services, but we are going to take away your acute care services,' I know the answer that would be provided. The Government is a bunch of deceivers, because it set about deceiving the public. It is using material from three years ago that carefully hid its true intent. That is gross deception by a Government and something which the community will not accept.

The Hon. R.I. Lucas interjecting:

The Hon. M.B. CAMERON: The new Minister has quite a task ahead of him or her. The Government is a law unto itself.

The Hon. R.I. Lucas: A few people there need to be sorted out.

The Hon. M.B. CAMERON: They haven't got the gump-tion to do it. That is why I say that the closure of the three hospitals is an example of gross deception. Not once did the commission or its former Minister give the full agenda for the reorganisation of country health services. The commission is now conducting another area health plan for Clare and nearby districts, but what a farce that is! This is about the third one that it has done in Clare. The commission has already said that it will close the Clare Hospital, and it has already served notice to that effect. The people in the entire system (Mr Bannon, Dr Cornwall and his Health Commission) have simply tried to pull the wool over country people's eyes. They must think that country people are stupid, or at least that is the feeling I get. They

must think that either they can say anything and country people will not remember, or they have senile dementia themselves and do not remember what they said the day before. In the past, Dr Cornwall has selectively used figures supposedly to portray the Laura, Blyth and Tailem Bend hospitals as being grossly under-utilised and cost inefficient or, to use Mr Bannon's own words, third rate, but nothing could be further from the truth.

Figures can always be manipulated, especially when you have an unsound proposal such as the former Minister had with the closure of these three hospitals. I, too, can use figures—figures which show Tailem Bend has one of the lowest bed/day costs of any hospital in the State. I can produce facts which show that Blyth Hospital has had low acute bed occupancy levels in recent months because the town's doctor, at the Health Commission's request, was away in Adelaide upgrading his skills in obstetrics so that the local community could benefit. While he was away, they closed his hospital; they pulled the rug from underneath him. It is an extraordinary situation.

The Hon. L.H. Davis: Changed the locks?

The Hon. M.B. CAMERON: They took the locks away. In relation to this area health plan that they are now doing, the Health Commission officer involved went to visit a prominent person in Clare whom I will not name, but I know it is the most prominent person in Clare. When this officer arrived two hours late, the prominent person asked, 'Where have you been?' She replied, 'I couldn't find Clare in the Barossa Valley.' That is a person who will tell these people what sort of area health plan they will have—the officer did not even know where Clare was.

The Hon. R.I. Lucas: Is this the Health Commission officer?

The Hon. M.B. CAMERON: The Health Commission officer. It is extraordinary! It is like Monty Python's circus. It is the most extraordinary saga that I have ever had to shadow.

The Hon. L.H. Davis: This puts Monty Python to shame.

The ACTING PRESIDENT: Order!

The Hon. M.B. CAMERON: I can provide details which demonstrate that many aged people will be grossly inconvenienced by the closure of Laura Hospital and that a 12-bed nursing home proposed to replace it will be a prescription for its eventual demise. In fact, it would be interesting to see what would have occurred last week had Laura Hospital been redirecting acute patients to Crystal Brook Hospital as per the commission's directives. Crystal Brook Hospital was full, as was the Booleroo Centre Hospital and Laura Hospital. They had a 'flu epidemic, so there was no room anywhere. The other hospital had already shut down on 1 July.

On the day of the closure at Tailem Bend a patient arrived at two minutes past midnight (which was past the time for the closure of the hospital) with a very serious breathing problem. That patient would not have survived until Murray Bridge and would now not be with us had it not been for the acute beds and acute care in that hospital. That is the sort of situation that this Government is bringing about.

The former Minister has spoken repeatedly of the closures of the three hospitals as not being a downgrading. He tried to say that it was not a closure. You take away the acute services and put in all aged people; then it is still not closed—it is still open. It almost tends to lead one to give up trying to talk to the man. He tried to tell us that it would be an upgrading of services; there would be no closures, just a change of role. The Premier is also adept at such use of semantics, but Mr Bannon and Dr Cornwall have not fooled anyone. The changing role of these three hospitals

means that they will cease to be hospitals. They will be nursing homes or community health centres, and they both know that, but they have continued to attempt that deception.

The former Minister indicated in May how important it was to shut these three hospitals. He told the *Advertiser* that, if he could not carry out the closures of the three hospitals, the upgrading of Berri hospital would be in jeopardy. In fact, in an ABC radio interview, the Deputy Chairman of the Health Commission (Mr Ray Sayers) conceded a similar outcome if the plans fell through. I quote from an ABC radio interview in June:

The Deputy Chairman of the South Australian Health Commission, Mr Ray Sayers, said that funding for the new regional hospital at Berri may depend on the abolition of some current services at Blyth, Laura and Tailem Bend. These are the three hospitals which are fighting moves to downgrade their acute care facilities.

Speaking in the Riverland today, Mr Sayers said he hoped all country health initiatives were implemented, thus allowing the Berri project to proceed smoothly.

The interviewer then says:

There have been some rumours that the services at Blyth, Laura and Tailem Bend, if they were to be at their current levels, there could be jeopardy of the Berri Hospital going ahead.

Mr Sayers replies, as follows:

Yes, that has been mentioned and I would have to say that I would hope that would not be the case. I would hope that all aspects of our strategy are implemented. One aspect of course is the expansion of regional hospital services into the regions of South Australia, and another one is in fact to redistribute funds within existing regions.

Clearly, Mr Sayers is saying in typical Sir Humphrey public service doublespeak: 'We want to upgrade the Berri Hospital but that means we will have to pinch funds from either the Riverland or neighbouring districts to do so. Naturally, there will have to be closures or downgradings of hospitals to do so.'

This is the Bannon Government, and this is the Health Commission which said that all the money saved from the proposals would be ploughed back into the town or district from which it came. It begs the question of who is actually telling the truth, and it begs the question of just what plans have been formed for reorganising rural health services.

The true reason for these closures is not an upgrading of country health services, but a downgrading of services. These towns are not in such urgent need of a wider range of services that they need their local hospitals shut. Many of the services are already provided, anyway. It is not that these towns are geographically too close to neighbouring towns, but the Government sees that as a handy excuse. Last December, when I raised the issue of hospital closures, as I have said, one of the hospitals earmarked for closure was that at Crystal Brook. The Government has now shifted away from that.

People in Laura, Blyth and Tailem Bend realise that their hospitals must be retained if they are to maintain decent health standards and decent standards within their community. It is not a case of status as the former Minister has too often said in the past. It is a case of retaining your doctor, retaining your pharmacist and retaining other businesses in the town that revolve around health care. In the end, it is even possibly about securing a future for the town. It is about retaining people in the town, or attracting new people—people who would think twice about moving to a town without the support of a local hospital and resident GP. Young families will not do that: they will not take that risk.

Even the Health Commission realises the importance of a GP in a country town, although it will not concede that doctors will quit these towns when the hospital shuts. But

the commission was so keen to ensure that the doctor at Blyth stayed there that it offered substantial inducements for him to quietly accept the demise of the town's local hospital. Naturally—and I applaud him for this—he rejected the offer. This is what was offered to the local doctor in return for his silence over the Blyth Hospital closure: between \$9 000 and \$15 000 a year as primary medical officer at Clare; a subsidy for the salary of a second partner (that is, half the salary); a free house in Clare for the partner; and a Government car for his service to run backward and forwards to Blyth to see the old people.

The Hon. L.H. Davis: Was this the price for silence?

The Hon. M.B. CAMERON: That is exactly right. This is the package which the Health Commission claims was just part of the normal negotiations for doctor's conditions. Of course one can draw one's own conclusions about why the remaining doctors at Clare were not consulted on this proposition. It reached a sad stage when even some of Dr Cornwall's supporters began to question exactly what was going on; when covert offers were being made as inducement to support a flawed, ramshackle plan to close three hospitals.

The Hon. L.H. Davis: The doctor at Blyth had integrity, did he?

The Hon. M.B. CAMERON: He sure did, and I give him full credit for that. He asked an interesting question at Blyth. He asked the Chairman of the Health Commission, 'Have you consulted the local general practitioner about this issue?' The answer was lengthy and at the finish he had to identify himself as the local GP. It was quite incredible that the Chairman did not recognise him; he did not know him. The Chairman is so in touch with his health system that he did not know this fellow, yet the Commission had been setting up the closure of this hospital for some time.

It has come to a sad stage given that the Chairman of the Clare Hospital—a hospital which I might add has much to gain by the reorganisation of health services in the Lower North—has stated:

I have some sympathy for the Minister and his aims, but I don't like the way he is going about it.

I support that view. This sentiment might well be echoed by thousands of other South Australians. This Government and the former Minister are increasingly steamrolling the public on any policies they want to push through. They make the art of consultation a farce. They have continually ignored public opinion when it has been voiced.

The ACTING PRESIDENT (Hon. G. Weatherill): Order! I ask people in the gallery to please sit down. I point out that the President has already warned these people about their behaviour.

The Hon. M.B. CAMERON: The Government and the former Minister seem equally disinclined to reply to correspondence on the issue. I refer to, for example, two letters, the first to Mr Bannon from the Lower Murray District Hospital at Tailem Bend—which will be affected by the proposed closures—dated 3 August 1988, as follows:

Dear Mr Bannon, on 13 May 1988 a letter was forwarded seeking information on this hospital's future, and in that letter five photos were enclosed, to show you the voluntary work that was performed by people of this district, which have not been returned. It is very hard to believe that a letter of such importance to this hospital has not been answered by yourself.

An early reply would be appreciated, as this hospital's annual meeting is being held shortly, and this information will be required to inform the community, who have quite clearly directed to this board that this hospital remain as an acute hospital.

Thanking you, Yours faithfully, D.W.A. Howell, Chief Executive Officer, Lower Murray District Hospital Inc.

Of course, Mr Bannon is a very busy man and neither he nor any of his quite substantial staff have the time to answer

letters such as this, even though they were sent almost three months ago! Especially when they ask awkward, unpalatable questions.

It appears that the former Minister of Health was equally as tardy in replying to letters from concerned groups. Take, for example, a letter sent to Dr Cornwall on 22 July 1988 from the National Senior Citizens of Australia, South Australia, as follows:

Dear Dr Cornwall, on 19 June 1988 we sent you a letter expressing our concerns over the planned closure of the Laura, Blyth and Taillem Bend hospitals. As we had no reply from you we sent another letter on 6 July 1988 again expressing our concerns and requesting a meeting with you.

As we still have no reply from your office, we again write to you requesting a meeting at your earliest convenience. This issue is very important to a number of people, and our pleas should not be taken lightly. We realise of course that you are a very busy man but our concerns are genuine and urgently need attending to.

We have expressed our view, both to the Premier and publicly, that your handling of this matter has been less than satisfactory. We have called for your resignation. However, that does not mean that we are not willing to listen to your argument if you will listen to ours. All that we ask is that you give us, and the people of Laura, Blyth and Taillem Bend a fair go.

Yours sincerely, Jessie Taylor, State President.

Quite clearly this Bannon Administration is not a Government of compromise; it is not a Government prepared to reply to enquiries, let alone take on board the views of people it is supposedly consulting. This is a Government that embraces opinions only when they coincide with its policies, its desires, its plans.

Despite eight months of assurances and platitudes, this Government seems set on closing these three hospitals, contrary to the desires, the opinions and pleas of thousands of people. Consider the following sequence of events.

On 2 December 1987 Dr Cornwall admitted to Parliament that a review of country health services was being undertaken. He assured us there would be no changes without majority community support. On 16 December 1987 Ray Sayers gave a similar written assurance to readers of the *Advertiser*. On 30 January 1988, Dr Cornwall announced a \$22 million upgrading of country health services which might involve the closure of three hospitals, but none would be closed unless a community requested it. On 12 February 1988 Dr Cornwall wrote a letter to the editor of the *Advertiser* telling readers that under his proposals no hospital would close in the two years to 1990. On 10 May 1988 Dr Cornwall said that Cabinet would discuss the future of the three hospitals within a fortnight. He also agreed to establish an advisory group on rural health care to act as a liaison committee to ensure better communication on commission proposals.

The Hon. J.C. Burdett: He needed to!

The Hon. M.B. CAMERON: It was too late. On 25 May 1988, contrary to all these previous assurances, Dr Cornwall announced the three hospitals would have a change of status and would be converted to nursing home and primary care centres. In other words, they would be closed.

On 30 May 1988, Dr Cornwall told the *Advertiser* that he would only reconsider his decision to close the three hospitals if communities throughout the country areas were opposed to the plans. On 31 May 1988 he said that the plans were not negotiable, the decision had been made and could not be reversed. That is fairly atypical.

On 16 June 1988 two police squad cars, a paddy wagon and two plainclothes officers were detached to accompany Health Commission officers to a meeting with the Taillem Bend Hospital board.

The Hon. J.C. Burdett: It is astonishing—in a free country!

The Hon. M.B. CAMERON: That is a Taillem Bend Hospital board meeting; one would think it was somewhere in East Germany, Poland or somewhere else. They could not believe it; they wondered what on earth had happened. They thought there had been a bank robbery in the middle of the hospital. All of a sudden there was an influx of the law.

On 29 June 1988, Ray Sayers stated, in a radio interview, that Dr Holmes of Blyth was not offered financial inducements to accept the down-grading of the local hospital. He was just offered the things I have quoted: a car, an office, consulting rooms in the new primary health centre, the position of chief medical officer of the new medical centre, a half-share for a partner, and a rent-free house for a partner. They are not inducements; they are part of the normal package—like fun!

So, in summary, the Bannon Government's performance on this issue has been an indictment of just how arrogant it is becoming. It is so out of touch with ordinary people in the street that it now very foolishly believes it no longer has to listen to what South Australians are saying. It will continue that course at its peril. Long may it do so! I do regret losing the former Minister as a political adversary. I must say that he made my job very easy. He was a very comfortable opponent because you could always guarantee that he would do the most arrogant thing possible to the people.

Country people are, by and large, undemanding in their needs. They do not ask for a lot. They have a lot of problems that other people do not have, but they do not ask for a lot. Many of them are not on huge salaries; in fact, a lot of them are struggling, yet they often have to pay a high price for the privilege of living in the country.

Now the Bannon Government is saying to three communities, 'We believe you'd be far better off without a local hospital, so you can travel to another town. You will bear the costs; you will have to accept the inconvenience; you will possibly lose your local doctor and lose local jobs. This is the Government's will.' And the Bannon Government steamrolls its policies through, believing that country people will complain for a few weeks. That was the open boast amongst Government members: that it does not matter, as it will all be over shortly. There will be a short burst of publicity and it will be finished. They do not understand country people. They do not understand how determined some of these country people can be. I have had some indication myself of how determined they are, and let me assure the Government that this argument is not over yet.

They fought hard in most cases to establish their local hospitals and have been supporting their hospitals through thick and thin. They are hardly unlikely to give up now simply because this arrogant Bannon Government wants to push through a half-baked, policy-on-the-run plan to close three hospitals—especially when that policy, and the Government's past broken promises give every indication that the closures will be only the start of major upheavals to country hospitals. I sat at a meeting at Cummins on the Eyre Peninsula at which the Health Commissioner said—and I have seen Dr Cornwall quoted as saying the same thing—'There will be no closures on the Eyre Peninsula without the support of the local community.'

Do you think those people can believe him or anybody in the Government after what has happened, after the misleading statements in this Chamber by the former Minister, the misleading letters that have been sent out by the Premier and the misleading statements made by Health Commission officers? Nobody in the country will believe them, and we will wait to see where this group of people who now believe

that they have absolute dictatorial control over country health services will strike next.

Let me give this assurance: when the Liberal Party gets into office after the next election these three hospitals will be reopened immediately. There will be no ifs, buts or maybes. That is a promise that will be kept, unlike the promises of the arrogant Bannan Government which was not even prepared to go to reasonable public meetings and listen to the people. Rather, it sent, in a cowardly way, Health Commission officers accompanied by dozens of policemen to attend country meetings. That has proven quite clearly to me that this Government no longer understands the people. I urge members to support the motion, but most of all I urge the new Minister of Health to have a good look at the whole subject and set about reversing the stupid decision of the previous Minister and the Government.

The Hon. M.J. ELLIOTT secured the adjournment of the debate.

CHLOROFLUOROCARBONS BILL

The Hon. M.J. ELLIOTT obtained leave and introduced a Bill for an Act to prohibit the use of chlorofluorocarbons for certain purposes. Read a first time.

The Hon. M.J. ELLIOTT: I move:

That this Bill be now read a second time.

This is the third occasion on which I have introduced a Bill that tackles the problem of the destruction of the ozone layer. Certainly since the first occasion 14 months or thereabouts ago public awareness, and hopefully that of other members in this place, has grown significantly. I do not want to cover the complete range of debate that I covered last time, but wish merely to refresh memories and give something of an update as to what has happened since the previous debate.

Chlorofluorocarbons, compounds of chlorine, fluorine and carbon, as the name would suggest, are escaping from the atmosphere in three main sources and in about equal proportions. About one-third come from aerosol spray cans where they are used as a propellant; another third comes from refrigerators and refrigerated airconditioners; and the remaining third comes from CFCs being used as expansion agents for the production of polystyrene foams. Small trace amounts of CFCs are used for other purposes, such as the cleansing of electric circuits, microcircuits, in particular. The first three uses are the predominant ones.

The possibility that chlorofluorocarbons could be a danger to the atmosphere was raised only a little over a decade ago by a few scientists who felt that CFCs may have the capacity to break down ozone. There was no real scientific proof of that until probably three or four years ago, when some data came in which suggested that the ozone layer over the Antarctic, in particular, was being seriously depleted towards late winter and early spring. Successive measurements have indicated that that ozone hole, which has appeared each year, has been getting successively larger and more intense. The most recent measurements indicate still further growth. It is worth noting as an aside that CFCs are also involved in the greenhouse effect, and it is predicted that, by the turn of the century, unless there are changes in production, they will contribute something like 5 or 10 per cent to the greenhouse effect. There is a part remedy towards tackling that problem, but it is in relation to the ozone layer that the most serious and immediate concerns are before us.

I am sure that many members are aware that depletion of the ozone layer leads directly to increases in penetration of ultraviolet light to the earth's surface. This involves immediate dangers to humans, particularly fair-skinned humans, where each 1 per cent rise in UV is linked to something between a 2 per cent and 4 per cent increase in skin cancers. It is also seen as an immediate threat to certain life forms, particularly microscopic forms such as plankton, which are the basis of much of the food chain. Grave concern is expressed there, and UV is in part mutagenic and as such could be a problem with many of our crops as well. So, there is a wide range of concern, and it is of serious and increasingly immediate concern.

About two years ago the Montreal protocol was signed. It was agreed to in the first instance by most Western countries on the basis of then current scientific evidence that there was a need to reduce the production of CFCs. Under that agreement production of CFCs by the mid-1990s was to be no higher than it was in 1986. By the end of the century it was to have been cut to about 50 per cent of current levels. Unfortunately, the scientific evidence since has done two things: first, it has confirmed that CFCs are responsible for ozone destruction, that is, as far as scientists can be sure and, secondly, and more importantly, the problem appears to be more severe than was at first thought. I quote from the *New Scientist* of 24 March 1988 as follows:

Joe Farman, the man credited with the discovery of the ozone hole over Antarctica, gave evidence to the House of Commons environment committee last week.

'We thought that [ozone depletion] might be a slow trend, but what we're finding is that it goes horribly non-linear; runaway effects can happen at any time,' he said.

Farman and other council witnesses told the committee that the Montreal protocol, signed last autumn, was inadequate. 'Urgent consideration must be given to reducing the release of all man-made carriers of chlorine and bromine dramatically enough to allow the atmospheric content of these halogens to fall back towards the level presiding before 1960,' they said. This means cutting emissions to 15 per cent of current levels—rather than the 50 per cent cut envisaged by the existing protocol.

I also suggest that it is worth noting that, if we are talking about a worldwide cut to 15 per cent, the advanced countries will obviously have to cut even further, because we will see the Third World countries, such as China, and so on, increasingly having refrigeration and other uses of CFCs themselves. So, even if they use it in fairly low quantities the populations involved are so large that our cutback must not be back to about 15 per cent of our current production: it must be beyond that and probably much closer to about 5 per cent. We need to bear this clearly in mind. The Montreal protocol—

The Hon. Diana Laidlaw interjecting:

The Hon. M.J. ELLIOTT: Not at this time. Of course, that is a matter of great concern, as well. I will refer to another article in the *New Scientist* of 24 March. An international panel of atmospheric scientists had been looking at what has happened so far. The article states:

The results of the study, announced in Washington last week, confound existing models that predict very minor falls in ozone in the stratosphere from the action of trace amounts of artificial gases. The most notable ones are chlorofluorocarbons (CFCs).

The layer is thinning most in winter and at high latitudes, bringing fears that the same processes that have created an ozone 'hole' over Antarctica in the past decade may also be at work over the Arctic.

Their studies in the Northern Hemisphere indicated a small reduction in ozone levels of about 2 per cent in temperate latitudes in summer, but a larger reduction in the ozone layer in winter of around 6 per cent since 1969 at latitudes between 53°N and 64°N. The depletion of ozone is quite clearly indicated, not only in Antarctica but also in the

higher latitudes of the Northern Hemisphere and certainly within latitudes in which significant populations live.

The Western countries have fiddled for far too long with this problem and action is imperative. Since I brought my previous Bills into this place, the Tasmanian Liberal Government and the Western Australian Labor Government have acted on this issue. They have not waited for the Federal Government, which has fiddled and continues to fiddle. It is now starting to talk in terms of acting along the lines of the Montreal protocol but, as I suggested, the protocol has not gone far enough. It was a compromise that had as much to do with the interests of DuPont, other manufacturers and manufacturing countries as it did with solving the problem.

Some would argue that what is needed is self-regulation. I suggest that no-one can seriously suggest that we can cut our production to 5 per cent simply by asking for self-regulation. Even the aerosol industry, which is trumpeting what it has achieved so far, uses aerosols in something like 20 per cent of its sprays. While that is 20 per cent of production, overall production is continuing to rise. The problems will not be solved unless the Government insists that CFCs are removed in almost all cases. A letter has been brought to my attention which indicates the sort of things that are happening in South Australia at the moment. The letter was addressed to the Pollution Management Division of the Department of Environment and Planning and reads:

Respective Sirs,

I feel compelled to inform you of what I think to be a gross neglect of proper safety precautions to contain the environmentally hazardous liquid gas freon (fluorocarbon). This neglect is being carried out at a partly governmentally controlled organisation/company namely Telecom Australia, precisely, the Kidman Park Telecom workshops, Tele 1 manufacturing group. As a worker at this complex, I have placed suggestions to improve the containment of the use of freon as a PCB, PAB flux remover. I was assured by senior supervisor technical officers that my concerns are unfounded. I believed them to be telling me the truth, so I took the matter no further. As time has passed, I have frequently viewed different 44 gallon drums of freon every 1½ months or so. Workers using the baths have informed me that large amounts of freon escape into the atmosphere. I estimate approximately 1 601.6 litres escape per year.

From this one Telecom workshop—a Government department—something like 2 tonnes of freon is allowed to escape into the atmosphere. Clearly, something needs to be done. I will refer now to a refrigeration magazine which discussed the problem of the ozone layer and what needs to be done, as follows:

However, let us correct a flaw in our own industry where some service companies flush out dirty finned condensers on the job with, say, 10 kg of R12 refrigerant in a way similar to compressed air. They, of course, charge the customer, but at the same time this valuable ingredient should not be used at the expense of the civilised world.

I have had contact with the bodies representing refrigeration engineers, and they are seriously concerned about what some of the cowboys in their own industry are doing. They have told me clearly that they want regulation brought in.

I will now address the clauses of the Bill. As I see it, we have the capacity to virtually eliminate the use of CFCs as a propellant. We also have the capacity to virtually eliminate its use as an expanding agent in the manufacture of foams. We do not have the capacity to eliminate its use as a refrigerant. No-one would seriously suggest that we return to using ammonia and other dangerous gases in refrigeration systems. The important thing with refrigeration and refrigerated air-conditioning is not so much whether CFCs are used, although ideally in the long run they should not be, but whether CFCs manage to escape from those systems.

Clause 4 of the Bill provides very firm controls on the design of refrigerators and refrigerated air-conditioners, and

their manufacture, sale, supply, servicing and ultimate disposal. It is important that such units are designed so that the prospect of leakage is decreased. That means putting in as few joints as possible which are prone to leakage. It also means prescribing different materials. For instance, aluminium is frequently used but it has fairly high porosity and far too much freon can escape through it. Alternative materials should be considered.

In addition, when a refrigerator is serviced, the refrigeration mechanic should not bleed out the existing freon before replacing it. Devices are available to pump out the remaining CFCs so that no refrigerant is released into the atmosphere. I have a copy of an advertisement for such a device. The same thing should happen with cars. If cars use CFCs, they should be designed so that the unit containing it is not placed in a position where it is likely to be broken in case of accident. At the moment, they are put at the front of the car where they are prone to damage in an accident.

When a refrigerated air-conditioner comes to the end of its life, it should not be unreasonable that the remaining refrigerant is bled out of it and not let out into the atmosphere but recaptured for further use. If we do that, the release of CFCs from refrigerators and refrigerated air-conditioners can be cut to the bare minimum.

Clause 3 is a general prohibition clause which says in simple terms that a person shall not use chlorofluorocarbons for any purpose other than as a refrigerant. It is important that clause 5, the regulations clause, gives the Governor power to make regulations. For instance, CFCs are a propellant in asthma sprays, and it has been argued that nothing else is suitable to use. They are not a major contributor to CFCs in the atmosphere, so it is not unreasonable that the Government would grant an exemption. Where a company needs the chance to change its tooling so that it can use alternative propellants in aerosols, it is not unreasonable that an exemption be made.

I believe that in the few cases where CFCs are absolutely essential, the fact that they are essential would need to be demonstrated to the Government and it is probably at that point not unreasonable that the Government grants an exemption by way of regulation. In the case of the production of foams, which is another major use, it is worth noting that in the United States, much of the polystyrene foams are now expanded not using CFCs, but using simple hydrocarbons, and there are no problems there. In fact some companies have reverted to using cardboard rather than using foam and are having no problems there.

There is, I suppose, one final alternative. I guess that if a company can demonstrate that it uses the CFC as an expander, within a closed system, whereby the CFCs are captured again and do not escape, once again there is the possibility of exemption by regulation.

The Bill is a fairly simple one but I would suggest it is highly workable. It is time for procrastination to stop or we in this place and members in other Parliaments around the world will be severely judged for fiddling not so much while Rome burns, but while the world burns. I ask all members to give this matter serious consideration. I think many members are far more aware of the problems than they were 14 months ago and I ask for bipartisan support of both Labor and Liberal on this matter.

The Hon. T. CROTHERS secured the adjournment of the debate.

ADJOURNMENT

At 5 p.m. the Council adjourned until Thursday 11 August at 2.15 p.m.