LEGISLATIVE COUNCIL

Wednesday, 28 November 2018

The PRESIDENT (Hon. A.L. McLachlan) took the chair at 14:15 and read prayers.

The PRESIDENT: We acknowledge Aboriginal and Torres Strait Islander peoples as the traditional owners of this country throughout Australia, and their connection to the land and community. We pay our respects to them and their cultures, and to the elders both past and present.

Parliamentary Procedure

PAPERS

The following papers were laid on the table:

By the Treasurer (Hon. R.I. Lucas)—

Reports, 2017-18-

Legal Profession Conduct Commissioner Lotteries Commission of South Australia State Procurement Board

Report on the review of the operation and effectiveness of the Serious and Organised Crime (Control) Act 2008, for a period of approximately six years from 17 June 2012, dated 19 November 2018

Ministerial Statement

PHOENIXING

The Hon. R.I. LUCAS (Treasurer) (14:17): I table a copy of a ministerial statement made in another place today by the Attorney-General on the subject of combatting illegal phoenixing.

Parliamentary Procedure

ANSWERS TABLED

The PRESIDENT: I direct that the following written answer to a question be distributed and printed in *Hansard*.

Question Time

NATIONAL PARTNERSHIP AGREEMENT ON REMOTE INDIGENOUS HOUSING

The Hon. K.J. MAHER (Leader of the Opposition) (14:18): I seek leave to make a brief explanation before asking the Minister for Human Services a question regarding the National Partnership Agreement on Remote Indigenous Housing.

Leave granted.

The Hon. K.J. MAHER: We are nearly six months on from the expiration of the last housing agreement between the state of South Australia and the commonwealth and the South Australian remote Aboriginal housing funds do not appear to be any closer to being secured. The opposition has been advised that the minister met with federal Minister for Indigenous Affairs, Nigel Scullion, in the company of Premier Steven Marshall, and during that meeting the minister verbally accepted an offer of federal funding for a one-year term, providing it was matched by the state government.

We are further informed that, shortly after this meeting occurred, the federal minister, minister Scullion, wrote to the South Australian minister extending that offer to a three-year agreement. Unfortunately, over the last few weeks both the Prime Minister, Scott Morrison, and now more recently minister Nigel Scullion have ruled out any more funding from the federal government, which was previously almost \$300 million over the last 10 years. My questions to the minister are:

- 1. What is the reason the minister declined to accept a three-year funding deal from the federal government?
- 2. Does the minister think a one or even a three-year funding agreement is in the best interests of remote Aboriginal communities given the previous agreement was secured for 10 years?
- 3. Who is wrong when it comes to stating that this agreement is still being negotiated? Is it the federal government or is it the state government?
- 4. Has the South Australian minister's failure to act, accepting a three-year funding deal, lost the potential of some \$45 million for some of South Australia's most vulnerable people?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:20): I thank the honourable member for his question. Most of the content of his question is incorrect. I stand by my previous responses in this parliament.

NATIONAL PARTNERSHIP AGREEMENT ON REMOTE INDIGENOUS HOUSING

The Hon. K.J. MAHER (Leader of the Opposition) (14:20): Supplementary: when will negotiations be complete?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:20): As anybody who's involved in negotiations knows, there can be a range of factors at play. I can't put a particular time frame on that, except to say that it would have been advantageous for the former government to commit funding in the forward estimates. As I have outlined in this place before, they were able to make all sorts of outrageous promises to build a \$300 million tram to Norwood, which was clearly rejected by the people of Norwood and the people of South Australia, and did not have anything on the table, as was outlined in the federal parliament in February of this year. That is one of the great disappointments in this whole debate. This new government is committed to executing an agreement as soon as practicable, and we are working towards it assiduously.

NATIONAL PARTNERSHIP AGREEMENT ON REMOTE INDIGENOUS HOUSING

The Hon. K.J. MAHER (Leader of the Opposition) (14:21): Further supplementary arising from the original answer, in which the minister claimed that much of the explanation was incorrect: can the minister outline which bits were incorrect? In particular, was there a verbal offer made at that meeting that the minister and the Premier attended?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:22): The Leader of the Opposition asked who was wrong: was it the federal minister or the state minister? The individual who was wrong is the Leader of the Opposition.

NATIONAL PARTNERSHIP AGREEMENT ON REMOTE INDIGENOUS HOUSING

The Hon. K.J. MAHER (Leader of the Opposition) (14:22): Final supplementary—

Members interjecting:

The PRESIDENT: Order! I cannot hear the Leader of the Opposition.

The Hon. K.J. MAHER: Final supplementary: has the commonwealth government made any offer to South Australia in relation to remote Indigenous housing?

Members interjecting:

The PRESIDENT: It's by way of clarification, for those who are murmuring on the government backbenches. Minister.

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:22): I stand by my previous statements.

The PRESIDENT: The Hon. Ms Scriven.

Members interjecting:

The PRESIDENT: Order! The Hon. Mr Hunter, I would like to listen to the Hon. Ms Scriven's question.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:22): I seek leave to make a brief explanation before asking a question of the Minister for Human Services regarding the Disability Advocate.

Leave granted.

The Hon. C.M. SCRIVEN: In May this year, Labor sought to amend the Disability Inclusion Bill to include a disability advocate. The amendment sought to:

...establish an independent disability advocate to safeguard the rights of people with disability and ensure that South Australians get the support they are entitled to under the National Disability Insurance Scheme. The advocate would provide a stronger voice for people with disability and help improve service delivery...

The Disability Inclusion Bill passed the parliament on 6 June, meaning a disability advocate could have been established nearly six months ago. My questions to the minister are:

- 1. Why was a disability advocate a bad idea in May but a good idea in November?
- 2. What has been the source of the delay in the announcement of Dr David Caudrey as Disability Advocate, given the minister's comments to the media in April concerning her commitment to a disability advocate?
- 3. Does the minister regret delaying yesterday's announcement, given the ongoing delays and rollout issues for the NDIS we have continued to see across South Australia during 2018?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:24): I thank the honourable member for her questions. Of course, I would expect that all South Australians, particularly those with disability and with particular needs, would welcome the appointment of Dr David Caudrey to the position of independent Disability Advocate. He is a highly respected individual who understands these issues very deeply.

I stand to be corrected, but I understand that he was the driving force behind the Disability Inclusion Bill, which was commenced under the previous government and passed this parliament as the first piece of legislation in the new parliament under the new government, and we are very proud of that fact. As I have stated in this place before, I think members of the opposition either suffer from—

The Hon. D.W. Ridgway: They suffer from lots of things.

The Hon. J.M.A. LENSINK: They do suffer from many things. They suffer from poor memory, lack of understanding in relation to funding issues, they don't read comments—

The Hon. I.K. Hunter: Eight months and you've done nothing.

The PRESIDENT: The Hon. Mr Hunter, I can't hear the minister!

The Hon. J.M.A. LENSINK: —that have been made in the past—a whole range of afflictions for which we pity them. In relation to this particular issue, as I have outlined in this place before, I made the commitment to fund this role in April on the understanding that it had been funded. Indeed, I made some comments on, I think, 5RPH to say that I was really pleased to see that the former government had been able to obtain funding and, on that basis, we would continue that in government. I was absolutely horrified to find that this was just another Labor slogan.

The Hon. C.M. Scriven: You could have fixed it. You could have agreed to the amendment.

The Hon. J.M.A. LENSINK: The honourable member may think that money grows on trees but, again, perhaps she has been failing to pay attention to the cost overruns in health of some \$300 million; TAFE, tens of millions of dollars; child protection, tens of millions of dollars. Every agency across government has to find funding and savings because of the abject and complete financial mismanagement by the Labor government: a very, very sloppy group of individuals who should not have been in charge of South Australia. In fact, I note that the people of South Australia only voted for the Labor Party once in the last 30 years, which was the 2006 election.

In terms of this particular position, we needed to obtain funding for it, which we have now been able to do. We wanted to make sure that we got the role right and someone who was well

respected. In fact, I saw the member for Light yesterday and he indicated that he thought it was a good appointment. We look forward to working with Dr Caudrey as we go through to full transition to the NDIS. I am sure that he will make a great contribution to assisting us in this role.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:27): Supplementary: when was the decision made to appoint Dr David Caudrey as Disability Advocate and when was the decision made to announce his appointment publicly?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:27): My recollection is that both of those matters have been quite recent. The announcement was made by press release. I put that out. I can retrieve it; I don't have it right in front of me. That was this week. In fact, it was yesterday that the announcement was made, and the decision to appoint Dr Caudrey is quite recent, too.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:28): Further supplementary: could the minister clarify what is meant by 'quite recent'? Surely she knows when a decision was made to appoint someone to a very important position.

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:28): I would have some information about that, but my recollection is that it has been in the last month.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:28): Further supplementary: so was the embarrassing admission of the minister's executive officers that an announcement was a week or two away in a forum on Monday the factor in her announcing the Disability Advocate on Tuesday?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:28): No.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:28): Further supplementary: what is the cost of the appointment of Mr David Caudrey as Disability Advocate in terms of both Mr Caudrey's remuneration package and other ancillary costs?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:29): I understand that the amount of funding that has been allocated for this particular role is in the order of \$200,000.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:29): Further supplementary: I did ask in terms of remuneration package and other ancillary costs, so is that a total of \$200,000?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:29): The total funding for this particular role is \$200,000. If I need to clarify any breakdown of that then I will get back to the parliament.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:29): Further supplementary: what recruitment process did the minister undertake regarding the South Australian Disability Advocate, and what criteria was Dr Caudrey required to meet before his successful appointment?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:29): I do not hire people, that is the role of our agencies. The only person from cabinet who is in a position to make appointments is the Premier.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:30): Further supplementary: why has the minister only committed to a 12-month term for Mr Caudrey as Disability Advocate?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:30): We were due to be at full scheme by 1 July 2018. I understand that the Labor Party's commitment was only for one year in

itself. They had one position before the election and another entirely, having had a bill before the parliament, which was in all ways identical to the one tabled by the Liberal Party. They had some sudden change of heart after the election, where they wanted to create this new statutory role, which on my understanding, had they been in government, they would not have done. I find the positions of the Labor Party in opposition somewhat entertaining.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:30): A further supplementary: is the minister saying that she does not think there will be a need for a disability advocate after 12 months?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:31): As I have explained in this place before, we have had a briefing from the NDIS, so it is a bit disappointing that Labor members continue not to demonstrate an understanding of these matters, but disability services and funding is changing fundamentally in the way it will operate. The federal government is becoming responsible for the funding role through the National Disability Insurance Agency.

We have a Quality and Safeguards Commission, which has been operating from 1 July in South Australia, as we are due to be at full scheme. These things are becoming the responsibility of the commonwealth government. Our focus into the future is on disability inclusion, which is why the passage of the Disability Inclusion Bill is so important. The funding and monitoring roles in terms of services are transitioning to the federal government.

The PRESIDENT: The Hon. Ms Scriven, this will be the last one, I think, and we will move on.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (14:32): Final supplementary: am I to take from that answer that the minister is saying that the state will have no Disability Advocate after 12 months, there is no need?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:32): I have already answered this question.

Parliamentary Procedure

VISITORS

The PRESIDENT: I acknowledge the former member for Schubert in the gallery. The Hon. Ms Bourke, you have the call.

Members interjecting:

The PRESIDENT: Can the government front bench be silent so that I can listen to the question of the Hon. Ms Bourke. The Hon. Ms Bourke.

Question Time

MINING LEGISLATION

The Hon. E.S. BOURKE (14:32): It is a very good question, too. I am excited about it. I seek leave to make a brief explanation before asking a question of the Minister for Trade, Tourism and Investment regarding regional mining.

Leave granted.

The Hon. E.S. BOURKE: On 13 November, the minister stated in this chamber that he was happy with the government's community consultation process on the mining bill, not once but three times, going as far as to say, 'I am very happy with the consultation that was done.' On 25 October in this place, when asked if the minister sympathised with the difficult position in which he has put the member for Narungga as a result of the broken election commitment to consult, in the minister's words, far and wide on this bill with the community, the minister stated, 'I do not believe I have put anyone in a difficult position.'

Yesterday, the Marshall government experienced an unprecedented blow, with four members of the Liberal Party crossing the floor to side with the Labor Party on deferring the mining bill. There is no record in living memory of so many government MPs voting against their own government on a government bill. My questions to the minister are:

- 1. Considering four government members in the other place crossed the floor yesterday to vote with the Labor Party—and I believe two members sitting behind you are also considering doing the same when it comes to this place—do you still agree that your pre-election commitments have not placed any members of your party room or the government in a difficult position?
- 2. Are you concerned about your pre-election commitments to the community that the government would consult far and wide on this bill, and do you agree they have damaged your government and caused an internal stoush that has divided your party room?
- 3. Does the minister feel responsible for the government having four members cross the floor within its first eight months?
 - 4. Are you personally still 'very happy' with the community consultation process?

Members interjecting:

The PRESIDENT: Order! Let the minister answer.

Members interjecting:

The PRESIDENT: Members of the opposition benches, I would like to hear the minister's answer, not your answer for him. Minister.

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:35): They can't help themselves, Mr President.

The PRESIDENT: Answer the question, minister.

The Hon. D.W. RIDGWAY: I thank the member for her question. It is an interesting number of facts that she put in her question. Members would know that in this chamber about this time last year the government at the time had a mining bill that was very similar to the one that is in the House of Assembly now. The then government—being the members opposite, the mob that are in opposition—wanted to ram that bill through, and it was with the support of the Greens and the Hon. John Darley, I think, and the other crossbenchers at the time that we said that we wanted to delay that until after the election; we thought it was important.

Some of the criticisms have been that this bill is the same as the Labor Party's, and it is largely a similar bill. There has been consultation on this issue for the best part of two years now. There was some consultation in relation to the bill prior to the election where I said a number of times, in my capacity as the shadow minister for agriculture, that we would have further consultation on it but it would be a matter for whoever was fortunate enough to be the minister, if we were fortunate enough to win, to conduct that consultation.

Certainly, the events of the last 24 hours have shown that some of the members of the Liberal Party—if anybody opposite crossed the floor, they would get expelled from their party; they can't actually express an opinion. Most of these people opposite were in short pants when we saw the Hon. Terry Cameron and the Hon. Trevor Crothers cross the floor, and they were expelled from their party. People in the Liberal Party are allowed to express their concerns and represent their constituents, not just toe the party line. As I said, I think the Hon. Terry Cameron suffered a significant amount of abuse, bullying and intimidation after he and Trevor Crothers had crossed the floor. Consultation is now scheduled to take place over the entire summer.

Members interjecting:

The PRESIDENT: Order! I can't hear the minister.

The Hon. D.W. RIDGWAY: I can barely hear myself let alone anyone else, Mr President. As a result of what happened yesterday in the House of Assembly, consultation will now take until at least 23 or 26 February. There will be ongoing consultation and I expect that we will see the bill debated next year.

MINING LEGISLATION

The Hon. E.S. BOURKE (14:38): I have a supplementary question—

The Hon. K.J. Maher interjecting:

The PRESIDENT: Leader of the Opposition, you're showing discourtesy to the Hon. Ms Bourke—discourtesy to one of your own members. The Hon. Ms Bourke, a supplementary.

The Hon. E.S. BOURKE: If you believe all your members should be respected, and their opinions and the community's opinion be respected, why didn't all members of the government support deferring the bill?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:38): I thank the honourable member for her supplementary. As members would know, that is a matter for the House of Assembly. I am a member of the Legislative Council. We're not all members of the House of Assembly.

Members interjecting:

The PRESIDENT: Order! The Hon. Ms Bourke, a supplementary.

MINING LEGISLATION

The Hon. E.S. BOURKE (14:38): Just also confirming, I guess as a supplementary: are you still 'very happy' with the consultation process?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:39): Mr President, everyone knows that I am always happy in this place—in fact, most of the staff in this place can't believe I am always so happy. We have had extensive consultation. You can always have more consultation and, as a result of the actions yesterday, we are consulting until at least the end of February 2019.

Members interjecting:

The PRESIDENT: Order! I can't hear.

SUPPORTING INNOVATION IN SOUTH AUSTRALIA

The Hon. D.G.E. HOOD (14:39): Big smile. Look, big smile. My question is to the Minister for Trade, Tourism and Investment. Can the minister inform the council about the exciting launch of the Supporting Innovation in South Australia visa, which is exclusive to our state of South Australia?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:39): I thank the honourable member for his ongoing interest in growing the state's economy and the entrepreneur sector. In fact, last week, at the SouthStart technology and entrepreneur conference, the Premier launched a key election commitment, our entrepreneur visa, which will attract some of the sharpest minds in the entrepreneurial world to establish their start-ups in South Australia.

Officially known as Supporting Innovation in South Australia, this is a bold new federal government visa arrangement that is exclusive to South Australia, having been negotiated in opposition and now delivered in government. The program will run for three years, with the federal government to look at a possible national rollout from 2020.

We are very proud of this visa, which goes to show what can be achieved when we work constructively with our federal counterparts. The new visa arrangement builds on our plan for an innovation, incubator, start-up and growth hub at Lot Fourteen, the site of the former Royal Adelaide Hospital.

We expect the visa scheme will attract up to 30 budding young entrepreneurs to the state in the first year and up to 100 in the next year, who will be encouraged to develop their innovative ideas into start-up businesses. To be successful, applicants will need endorsement from South Australian innovation ecosystem providers or the Office of the Chief Entrepreneur. Successful applicants will be nurtured in South Australia's local innovation ecosystem to help build a successful new business and grow jobs in our great state.

Importantly, unlike previous visa classes in this area, the new visa arrangement does not require applicants to demonstrate a minimum funding of \$200,000 for approval. The success of their application will ultimately rest upon the quality of their start-up and idea, and the soundness of their business plan. Entrepreneurs can be focused on a variety of industries. However, we will be looking favourably at applications that relate to the state's emerging industries, such as defence and space, cybersecurity, big data, agribusiness, health and medical technology, robotics, film and media.

Five local co-working organisations, accelerators and incubators, in collaboration with the Office of the Chief Entrepreneur, will implement the pilot. The five organisations are CO-HAB, the Innovation and Collaboration Centre of the University of South Australia, the Moonshine Lab, the New Venture Institute at Flinders University and ThincLab at the University of Adelaide. Applications for the program will be processed by Immigration SA, in my department, along with the federal Department of Home Affairs. The entrepreneurial program will then be delivered by the Department for Industry and Skills and the Office of the Chief Entrepreneur.

I want to thank the federal Minister for Immigration, the Hon. David Coleman MP, and his department for their hard work in developing the framework and regulations around this pilot program. Having a visa unique to one state is virtually unheard of, and we are very grateful for the confidence they have shown in South Australia by granting us this pilot.

Also, many thanks to the hardworking staff in Immigration SA for their great work in implementing this key priority for the Marshall Liberal government. Your hard work is greatly appreciated. I look forward to hearing of the great success stories it facilitates in the months and years to come. People interested in applying for the visa or finding more details can do so via the Immigration SA website.

SUPPORTING INNOVATION IN SOUTH AUSTRALIA

The Hon. J.E. HANSON (14:43): Supplementary: will South Australia or the commonwealth government be handling the vetting and application processes for the program?

The Hon. D.W. RIDGWAY: I wonder if you could repeat that. Somebody was coughing. It was the Hon. Mr Wortley and I missed that.

The PRESIDENT: The Hon. Mr Hanson, please.

The Hon. J.E. HANSON: I am always happy to help out the happiest member of the front bench. Will South Australia or the commonwealth government be handling the vetting and application processes of the new program?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:43): I will just repeat: to be successful, applicants will need endorsement from South Australian innovation ecosystem providers or the Office of the Chief Entrepreneur. Successful applicants will be nurtured in South Australia's local innovation ecosystem to help them build successful new businesses in our state.

We have the Office of the Chief Entrepreneur and I also said, in the answer that I gave the federal government and the state government, that the application process will be processed by Immigration SA, in my department, along with the federal Department of Home Affairs. The entrepreneurial program will then be delivered by the Department for Industry and Skills and the Office of the Chief Entrepreneur.

SUPPORTING INNOVATION IN SOUTH AUSTRALIA

The Hon. J.E. HANSON (14:44): Supplementary: to be clear in regard to my question, I did listen to the original answer and I get that there are multiple areas. What I am after is some concise answer as to who is actually responsible, because it seems like there is a wide array of people responsible.

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:44): It has to be relatively wide ranging because, of course, immigration is handled by the federal government, in case the honourable member had not realised that. Of course, we have our own department, Immigration SA, and, as I said, we have the Office of the Chief Entrepreneur. There are a number of layers to make sure that the people who come are the 30 brightest and smartest people we can

attract to the state. As I said in my closing statement, the honourable member could look at Immigration SA's website.

GAYLE'S LAW

The Hon. C. BONAROS (14:44): I seek leave to make a brief explanation before asking the Minister for Health and Wellbeing a question about Gayle's Law.

Leave granted.

The Hon. C. BONAROS: SA-Best and our Centre Alliance Senate candidate, Skye Kakoschke-Moore, recently revealed that a law in honour of murdered nurse Gayle Woodford is still not operational nearly a year after being passed by state parliament. Known as Gayle's Law, the Health Practitioner Regulation National Law (South Australia) (Remote Area Attendance) Amendment Act 2017 requires remote area nurses to work in pairs when attending after-hours callouts and is intended to reduce isolation and improve safety for health workers and practitioners, particularly in remote areas. Because the legislation has not been proclaimed by the state government, it has not been operationally enforced. When this was revealed in the paper just last week, the minister said, and I quote:

I am keen to hear the feedback from the consultation that is currently underway into Gayle's Law, ahead of the fine-tuning of regulations. We are determined to better protect our health professionals. This is a genuine consultation and I will not allow political point scoring and shortcuts to undermine effective and sustainable change.

Only a few days ago, the media revealed the government's consultation paper on the regulations needed to ensure the laws are operational was indeed only released this month—11 months after the legislation was passed. My questions to the minister are:

- 1. When did the consultation process actually commence?
- 2. What are the parameters of the consultation process and why is it being done now after the legislation was passed nearly a year ago and not before?
 - 3. Who has the government met with to date?
- 4. Has the minister now met with Gayle's distraught family to explain the reasons for the government's delay in implementing the law and what are those reasons?
 - 5. When can we expect to see the legislation actually commence?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:46): I thank the honourable member for her important question. Parliament passed the law commonly referred to as Gayle's Law in December 2017. It was formally titled the Health Practitioner Regulation National Law (South Australia) (Remote Area Attendance) Amendment Act 2017. The purpose of the legislation is to provide greater protection for health practitioners working in remote areas of South Australia, requiring them to be accompanied by a second responder when responding to an out of hours, unscheduled, emergency call-out for treatment.

Gayle's Law provides the framework for ensuring that the safety of health practitioners working remotely is paramount. The former Labor government knew that many of the operational issues would need to be worked through after the legislation passed. I was certainly informed of that fact in the briefings themselves. Much of the detail about how this legislation will work will be fleshed out in the regulations. At the time Gayle's Law was passed, the former government made a commitment to consult on the content of the regulations.

Since the passage of the legislation through this place, a number of information sessions and discussions have been held with SA Health agencies and key stakeholders about the legislation's intent and operation, with a view to the development of the regulations. The honourable member asked: when did that consultation start? The discussions included consultation with the workforce and injury managers of each local health network and that consultation occurred in May. The government was only elected in March.

I have also had the opportunity, personally, to discuss the operation of the legislation and the content of the regulations with stakeholders. In particular, I discussed the operation of Gayle's Law in my first meeting as minister with the Nganampa Health Council, the organisation that delivers

primary health services on the APY lands and Ms Woodford's employer at the time she was murdered.

I am advised that health services are honouring the spirit of the legislation, even while the detail of the regulations are being developed. Earlier this month, on 9 November 2018, I formally wrote to stakeholders and invited them to assist in the development of the regulations by providing feedback on a discussion paper that I distributed with that letter. The stakeholders included the Australian Nursing and Midwifery Federation (SA Branch), the Rural Doctors Workforce Agency, the Nganampa Health Council, the Aboriginal Health Council of South Australia and the commonwealth Department of Health.

The discussion paper seeks feedback on a range of issues, including how after-hours or emergency care is delivered in remote areas, which geographic areas are defined as a remote area and how second responders should be contacted in remote areas. Responses to the discussion paper are due by Friday 21 December 2018. I am advised that, once stakeholder responses have been consolidated, further discussions will take place in early 2019, ahead of the finalisation of the regulations.

Earlier this month, I spoke to Gayle's widower, Keith Woodford, about the legislation and the steps we are taking to develop and implement the regulations. When I spoke to Mr Woodford, I extended an invitation to brief him and other members of Gayle's family. At the family's request, the meeting will take place in December.

I must say that I am disappointed that Ms Kakoschke-Moore is proposing to make this an election issue. She said she wants a law at a national level and that she wants to make it an election issue. I will make the point that, if she does see this as an urgent issue, Centre Alliance does have Senate colleagues in the federal parliament and she can introduce legislation immediately and address it as an urgent matter.

GAYLE'S LAW

The Hon. C. BONAROS (14:51): Supplementary: is it fair to say that the Woodford family, including Gayle's widower, Keith Woodford, were not aware that the legislation had not actually become operational in December last year and that they were not informed of the consultation process at any point until you contacted them most recently?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:51): I think it's a fair point to make that the parliament and the government of South Australia have let the Woodford family down in two respects. First of all, as an opposition member, I was in no doubt from my briefings and my discussions with the government that the legislation was, if you like, a statement in principle. It couldn't have detailed effect until the regulations were in place. There wasn't enough clarity in the legislation itself. So I am very disappointed that the former government didn't properly brief the Woodford family to make sure that they understood that.

Secondly, I am disappointed that my department didn't take the opportunity to keep the Woodford family informed through this consultation process. I am keen to give them a briefing personally to make sure that their views will have an impact on the development of the regulations.

NATIONAL PARTNERSHIP AGREEMENT ON REMOTE INDIGENOUS HOUSING

The Hon. K.J. MAHER (Leader of the Opposition) (14:52): I seek leave to make a brief explanation before asking a question of the Minister for Human Services regarding the National Partnership Agreement on Remote Indigenous Housing.

Leave granted.

The Hon. K.J. MAHER: On 4 September, the minister in this chamber was asked:

...can the minister confirm her answer that there is funding on an ongoing basis for remote Aboriginal housing, that is, ongoing funding for maintenance and new builds of housing?

The minister answered:

...there is sufficient funding available that is carried over for us to enable these programs to continue without any threat.

In statements made earlier this week, Mr Buchan, the Chief Executive of the SA Housing Authority, definitively stated that there is only funding for maintenance under this program and that funding had ceased for the building of any new housing in remote Aboriginal communities. He was asked:

...new builds that would have otherwise occurred, had the program kept running under commonwealth funding, have stopped; is that right?

Mr Buchan answered:

Yes, that's correct. We don't have a new build program in place at the moment.

Both of these statements can't be simultaneously true. My question to the minister is: is there funding for the building of new remote Aboriginal housing and, if so, how much is it?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:54): I thank the Leader of the Opposition for his questions. Quite simply, yes, both statements are correct. In terms of when I have sought advice from my agencies previously, the Department of Human Services and what is now the South Australian Housing Authority, sought to ensure there was maintenance funding available on an ongoing basis. I have reported that to this place before and provided that information.

In terms of the South Australian Housing Authority, we have a new governance structure that is quite different to what it was previously. The arrangements the previous government had were described by the Auditor-General as, I think the word used was 'dysfunctional'. Certainly, that is the feedback I've had from the sector, where the assets and tenancy arrangements were managed through a formal arrangement under two quite separate agencies and we had a board that did not have line of sight over the entire organisation.

As of 1 July, those governance arrangements have been rectified and a new board has been in place from 1 November, the ongoing board. As we speak they are doing a consultation in terms of all the housing matters going forward. We are working through a comprehensive housing and homelessness strategy, which involves the non-government sector, the development sector, and tenant and homeless advocates. They are going to drive how these matters are managed going forward.

In terms of the Housing Trust per se, there has been a pause put on builds generally because we needed to take stock and rearrange the governance arrangements, so it should not really come as any surprise that there are no new builds in the pipeline. As I have said previously just today, we are working assiduously towards executing a new remote housing agreement as well.

NATIONAL PARTNERSHIP AGREEMENT ON REMOTE INDIGENOUS HOUSING

The Hon. K.J. MAHER (Leader of the Opposition) (14:56): A supplementary, for clarification: when the minister told this chamber in September, well after these new arrangements were put in place, that there was ongoing funding for maintenance and the new builds of housing, how could she make that statement when she has just said that new builds have stopped?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:57): I have already answered this question and I stand by all my previous statements.

The PRESIDENT: Leader of the Opposition, a supplementary arising from the original—

Members interjecting:

The PRESIDENT: Order!

NATIONAL PARTNERSHIP AGREEMENT ON REMOTE INDIGENOUS HOUSING

The Hon. K.J. MAHER (Leader of the Opposition) (14:57): Will the minister undertake to take those questions on notice and, if she has indeed misled the chamber, come back at the earliest opportunity—as she is required under standing orders—to correct the record?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:57): I have already answered this question.

TRANSPARENCY IN GOVERNMENT

The Hon. J.S.L. DAWKINS (14:57): My question is directed to the Minister for Health and Wellbeing. Will the minister update the council on the government's commitment to transparency in government?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:57): I thank the honourable member for his question. The council will be aware that one of the many problems with the Transforming Health budget cuts program was that it was imposed by the former Labor government and informed by a centralised bureaucracy without engaging the people on the ground. Consultation with staff was inadequate or simply non-existent.

The Marshall Liberal government committed to genuine engagement with staff in our work to fix the health system mess that Labor left us. This week, I announced the engagement of KordaMentha to the turnaround effort for the organisational and financial dysfunction within the Central Adelaide Local Health Network. In line with the government's commitment, we have made KordaMentha's diagnostic report and implementation plan available not only to staff within CALHN—

Members interjecting:

The PRESIDENT: Minister, please sit down. Can the Liberal government front bench please be quiet and show courtesy to the Minister for Health and Wellbeing. Minister, please continue your answer.

The Hon. S.G. WADE: Again, in line with the government's commitment, CALHN has held staff forums across the network, at The Queen Elizabeth Hospital, the Royal Adelaide Hospital and the Hampstead Rehabilitation Centre. Staff have had the opportunity to be briefed by the network's new chief executive officer, Lesley Dwyer, and hear what the recovery plan means for them as they work in the network.

I am pleased to advise the council that there were nearly 1,000 staff at these forums, either online or in person, and that the response from staff has been overwhelmingly positive. That comes in and backs the initial assessment of their employee organisations. Staff within CALHN understand that things need to change. They want things to change. Staff deserve to be proud of where they work and the work they do. KordaMentha's reports identified leadership and culture as key problems within CALHN and the indication from staff is that they have seen the same issues. Individual staff have told me this, and this was the clear message from the staff at the forums.

Also importantly, a key part of the KordaMentha engagement is to train and upskill CALHN staff to ensure that the organisational change in the network is ongoing. This is good news for staff, and I know that there is real excitement in the network about the opportunities that will come. Staff want the organisational change laid out in an implementation plan. The unions have expressed cautious welcome, and I thank them for that. The only group who don't want CALHN turned around is Labor. They are the arsonists who lit the fire, and now they are trying to stop us from putting it out.

For the sake of the staff of CALHN, for the sake of South Australian patients and taxpayers, they need to stop their obstructionist political games. They need to admit the mess they left and let the Marshall Liberal government get on with the job of fixing it.

NYRSTAR

The Hon. M.C. PARNELL (15:01): I seek leave to make a brief explanation before asking the Treasurer a question about Nyrstar.

Leave granted.

The Hon. M.C. PARNELL: Last year, there was much fanfare over the proposal to turn part of the Nyrstar smelter at Port Pirie into Australia's first recycling facility for electronic waste. That project has excited a lot of people and, together with the potential for reducing lead pollution, they are probably two of the most important features of the smelter upgrade. My question of the Treasurer is: given the economic difficulties that Nyrstar has been facing, what commitment, if any, has he received that the electronic waste, or e-waste, recycling project is still on track?

The Hon. R.I. LUCAS (Treasurer) (15:02): Can I inform the honourable member that if there was any fanfare that eventuated last year it had nothing to do with this government. It had, I suspect, a lot to do with the former government. This government is all about underpromising and overdelivering. There is very little fanfare unless it's perfectly justified.

The Hon. S.G. Wade: Just getting on with the job.

The Hon. R.I. LUCAS: Getting on with the job, as my colleague said. In relation to the specific question about what assurances I have received, I do not believe I have received any assurances in relation to either fanfare or that particular project, more particularly, that the honourable member has raised. I am certainly happy to take it on notice to see what information we might have about that particular project.

In relation to Nyrstar more generally, I can't recall how much of this I have been asked on the public record and how much has been in the media, but in recent times I have met with the global CEO Hilmar Rode, and we had productive discussions in relation to the general issues that relate to the arrangement entered into by the former government and Nyrstar. During that discussion, there was discussion about other issues, in particular in relation to reductions in employment levels generally at Nyrstar and also issues that they have confronted, which have been publicly canvassed, in relation to lead abatement issues in the community and issues about EPA licensing arrangements and the difficulties they are confronting in quarter four of this particular year and potentially likely to confront in quarter one of next year.

I think it has been well publicised that they have had to make some adjustments to the operations of both the existing plant and the new plant to try to meet the licensing requirements for their facility at Port Pirie during this particular period. Their advice to me in relation to that was that they saw their major challenge as being in quarter four this year and quarter one next year. They believed, as the ramp-up of the new operation proceeded much further down the track, that they would not be facing as significant a problem in terms of meeting whatever licensing agreement the EPA might have for them in relation to lead abatement issues.

But the honourable member's question was more specifically in relation to that particular project; the honest answer is I didn't receive any response at that particular meeting because it wasn't canvassed. I don't believe I have received any response in relation to general briefings I have had, but I'm happy to take it on notice, seek a response and bring it back to the member.

DISABILITY ADVOCATE

The Hon. R.P. WORTLEY (15:05): My question is to the Minister for Human Services. Will the minister detail the consultation process surrounding the appointment of the South Australian Disability Advocate. What advocacy service or support organisations were consulted, and will the minister detail precisely what the purview of the South Australian Disability Advocate will be? Will Mr Caudrey's role focus entirely on the transition towards NDIS or will every South Australian living with disability, regardless of their NDIS status, have access to Mr Caudrey as the Disability Advocate?

The Hon. J.M.A. LENSINK (Minister for Human Services) (15:05): I thank the honourable member for his question. As we stated in the media release, which I don't actually have in front of me at the moment, Mr Caudrey will be focusing on systematic matters. As I've outlined in this place on many occasions in the past, there are a range of ways that people can advocate in terms of assisting or obtaining some assistance for their particular matters with the NDIS.

At a national level, we have the Disability Reform Council, which consists of all state and territory ministers and the federal ministers. We have a senior official working group, which also discusses a range of matters, particularly in relation to interface matters going forward. We have a quarterly check-in, which is largely for providers of disability services, which takes place quarterly. We had one a couple of weeks ago, and there were matters there that we raised for providers.

In terms of individual matters, the honourable member may have been away when the briefing was that I organised in conjunction with the National Disability Insurance Agency. The National Disability Insurance Agency for some time has had a members and senators contact office—or MASCO is the shorthand—which federal members and senators have had access to, as

has the minister of the day and the shadow minister of the day. I think, when she was a member, the Hon. Kelly Vincent often used that service.

We are very grateful that that service has now been extended to all state members of parliament. So 69 members of this place are now in a position to directly contact the National Disability Insurance Agency on behalf of their constituents. It's the sort of service where they can get information about where someone's planning meeting and those sorts of decisions are at quite quickly. In the time that it takes for a member of parliament to write to a minister they can just get on the phone and turn those around very quickly. I have had initial feedback from some electorate officers in particular that that service has been quite useful, because they are able to assist people much more rapidly.

We are all in this place individual advocates, I trust, as are our colleagues in the federal parliament. I have to say that I was at one stage receiving letters from a federal member of parliament—not of my persuasion I hasten to add; it was a colleague of the members opposite—who was writing to me about the NDIS, and we had to contact his office to point out that it is actually a federal scheme and he has access to this specialised service, and perhaps he would like to do that in the interests of a more timely turnaround than hopping between offices. So we should all be advocates in this space.

Dr Caudrey's focus is much more on the systematic issues. Particularly as we are passing through to full scheme, those are the much more complex matters. Dr Caudrey has a great deal of experience in this space. He understands it very well, and we expect that he will be extremely useful to the state government as we pass through the last part of the NDIS transition.

DISABILITY ADVOCATE

The Hon. R.P. WORTLEY (15:09): Supplementary: can you tell me what was the process of consultation? Who did you consult with in regard to the appointment of Dr Caudrey and—

The PRESIDENT: That is the supplementary and I will allow it to be asked. If you have a further supplementary you can ask it.

The Hon. J.M.A. LENSINK (Minister for Human Services) (15:10): I thank the honourable member for his question. My department undertook the process in terms of the recruitment of this position, so I would have to take any specific matters about how that took place on notice.

DISABILITY ADVOCATE

The Hon. R.P. WORTLEY (15:10): Further supplementary: your answer is that when someone has—

Members interjecting:

The Hon. R.P. WORTLEY: Yes, it's a supplementary arising out of the answer. You are saying that when a person with a disability has trouble with the NDIS, your answer is for them to ring up their local member, despite the fact that many local members have constituents of—

Members interjecting:

The Hon. R.P. WORTLEY: Would you honestly have us believe that that is the answer: that people with a disability—

Members interjecting:

The Hon. R.P. WORTLEY: I know you don't have any regard for people with disabilities but here we are being told—

The PRESIDENT: The Hon. Mr Wortley.

The Hon. R.P. WORTLEY: —that if they have a problem, 'You go and speak to your local member.'

Members interjecting:

The Hon. R.P. WORTLEY: That is the question.

The PRESIDENT: The Hon. Mr Wortley, can we just have the supplementary.

The Hon. R.P. WORTLEY: Do you honestly expect us to cop that ridiculous answer? What a ridiculous answer: go to your local member.

The PRESIDENT: Minister.

Members interjecting:

The PRESIDENT: Are we all finished? The minister is on her feet.

The Hon. J.M.A. LENSINK (Minister for Human Services) (15:11): My goodness me, Mr President, don't ask your local member for assistance with a problem—I am not quite sure what that tirade was but I will attempt to answer it.

The Hon. R.P. Wortley: What a nonsense answer. There's no advocate, no-one to—go to your local member. The thousands of people who are going to have problems have to go to their local member. It's outrageous.

The PRESIDENT: The Hon. Mr Wortley, I don't mind the odd interjection but not a diatribe. Minister.

The Hon. J.M.A. LENSINK: I don't know what the Hon. Mr Wortley thinks members of parliament are here to do; we advocate on all sorts of issues. As a member of the opposition I was regularly in contact with MASCO on behalf of constituents. We all have that role. If we are all to do each other's jobs then we won't get very much done.

I may be speaking out of turn but I understand, from having spoken to the Hon. Kelly Vincent over time about the National Disability Insurance Scheme, that everybody used to take everything to her office and it was completely overwhelming. We need to be able to point people in the right direction in terms of who is able to provide assistance. My office has certainly had a 'no wrong door' approach for some time in terms of the people who come to us with individual NDIS queries and we are more than happy to follow that up with them.

If the Hon. Mr Wortley doesn't enjoy constituent work he can ring my office at any time and refer any NDIS matters to our office and we will manage them for him. There is a telephone number which we have provided to the 69 members of the House of Assembly and the Legislative Council with the contact details where there is a pretty rapid turnaround in terms of assisting people with their individual queries, if he cannot be bothered.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (15:13): Supplementary for clarification: is the minister saying that MASCO looks after those within the NDIS system or applying for the NDIS system, the new advocate looks after those systematic issues, so there is no advocate, there is no opportunity for Mr Caudrey to look at individuals with a disability who are not within the NDIS system or applying for that system; is that correct?

The Hon. J.M.A. LENSINK (Minister for Human Services) (15:13): I'm not quite sure whether members of the Labor Party understand the difference between individual advocacy and systems advocacy. Of course, Dr Caudrey is well aware of a number of individual matters and will be attending a number of forums. I will put out a plea to any member of the Labor opposition that if they can't be bothered contacting MASCO then we will do that on behalf of any of their constituents; more than happy to do that, more than happy to assist lazy members—

Members interjecting:

The PRESIDENT: Order! I can't hear the minister.

The Hon. J.M.A. LENSINK: —of the Australian Labor Party who cannot—

Members interjecting:

The Hon. J.M.A. LENSINK: —lazy members of the Australian Labor Party, the South Australian opposition, who cannot be bothered picking up a direct number to the NDIA, who can

short-circuit any queries. The people of South Australia should be grateful that this service is available to anybody who is not sure about the status of their particular query.

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (15:15): Further supplementary, since the minister did not seem to hear the question: if one is not accessing the NDIS, what advocacy is available? Presumably one cannot phone MASCO if one is not accessing or seeking to access the NDIS, or is the minister saying that is the advocacy option for them?

The Hon. J.M.A. LENSINK (Minister for Human Services) (15:15): The NDIA might need to do a private briefing for the honourable member. I do recall that she attended that particular briefing, but in terms of where someone is at, they need, first, to go through the process of application.

The Hon. C.M. Scriven: If they're not applying for the NDIS—a person with a disability not applying for the NDIS—that's the question.

The Hon. J.M.A. LENSINK: I am not sure that I even understand what the honourable member is on about.

Members interjecting:

The PRESIDENT: Order!

The Hon. J.M.A. LENSINK: The Labor Party's commitment when in government, prior to the election, was for a disability advocate to assist people with the NDIS. What has changed?

DISABILITY ADVOCATE

The Hon. C.M. SCRIVEN (15:16): A further supplementary: so the minister is saying there is no advocacy option for those who are not accessing the NDIS as part of her disability advocate; is that correct?

The Hon. J.M.A. LENSINK (Minister for Human Services) (15:16): I am not sure whether the honourable member thinks that the advocate should be there for the NDIS or not. I think she needs to answer her own question.

SONNEN

The Hon. T.J. STEPHENS (15:16): My question is to the extremely happy Minister for Trade, Tourism and Investment. Can the minister update the council regarding the launch of Sonnen's manufacturing facility at the old Holden site in Elizabeth, and about recent investments into battery manufacturing in South Australia?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:17): I thank the honourable member for his question and his ongoing interest in the home battery industry. It was a pleasure yesterday morning to attend the opening of the global battery giant Sonnen's manufacturing facility at the old Holden site, alongside the Premier, Steven Marshall; the Hon. Dan van Holst Pellekaan, Minister for Energy and Mining; and Mr Christoph Ostermann, the Chief Executive of Sonnen, all the way from Germany.

This launch is a significant development in battery manufacturing in this state, and the symbolism of its being at the old Holden site was not lost on those attending. In fact, Mr Ross Pelligra, the chairman of the Pelligra Group, which owns the old Holden site, was there and I had a very enjoyable time talking to him about the exciting new tenants that he is talking to that potentially could come to that site. The last time I was there cars were still being manufactured, probably about a decade ago. It is great to see that that site will not just be bulldozed but that there are opportunities for innovative new industries to start up there.

Sonnen was the first company to announce its plans to locally manufacture up to 10,000 battery storage units a year, creating some 430 manufacturing and installation jobs. Significantly, they are now one of three global manufacturers to establish manufacturing operations in South Australia since the launch of the \$200 million home battery subsidy scheme.

Members would be aware that Canadian energy storage firm Eguana Technologies is the latest global innovator to invest in South Australia's booming battery sector. Eguana Technologies' \$12 million investment will see the company, in partnership with its partner company LG, assemble and manufacture its cutting edge Evolve home energy storing system here in Adelaide, creating up to 200 jobs over the next three years.

Eguana has two decades of experience in delivering fuel cell, photovoltaics and batteries, and delivers proven high-quality products from its high-capacity manufacturing facilities in Europe and North America. This investment comes after Chinese battery manufacturer, Alpha ESS, committed to manufacture and assemble their batteries in Adelaide, creating more than 100 new local jobs. Alpha ESS will initially manufacture battery storage in partnership with Minda Disability Support Services, later moving to a dedicated facility. By 2020, Alpha ESS plans to manufacture more than 8,000 of their SMILE5 batteries in Adelaide per year.

All three manufacturers will have access to the priority period for the Home Battery Scheme, which lasts until the end of the year. This will provide consumers with greater choice during this period. I would like to thank the team at Sonnen for the launch and tour yesterday, particularly Mr Christoph Ostermann, CEO of Sonnen, who travelled all the way from Germany for yesterday's event. It was a significant step forward in local manufacturing post the Holden occupation of that particular site and, indeed, Mr Ostermann was particularly taken with South Australia on his first visit here when we announced that Sonnen was coming to South Australia. It was one of those beautiful winter days. He had not been—

The Hon. K.J. MAHER: Point of order: the question asked nothing about the weather, what sort of wine was drunk, or what they had for lunch at any given time of the visit. It is completely irrelevant to the question that was asked to talk about that.

The PRESIDENT: The Leader of the Opposition does have a point. For future reference, the Hon. Mr Ridgway, can you please keep your answers vaguely relevant to the question that was asked.

Members interjecting:

The PRESIDENT: Order!

Matters of Interest

MENTAL HEALTH AND SUICIDE PREVENTION

The Hon. J.S.L. DAWKINS (15:21): Today, I would like to take the opportunity to highlight my recent involvement with a range of community organisations in a variety of worthy events and projects. It is always good to participate in the 'Walk through the darkness and into the light' from Tennyson to Henley Beach and the moving ceremony which follows in Henley Square, which took place this year on 17 November. I walked from Tennyson, and others walked from West Beach to Henley, then gathering for moving ceremony which followed.

The event is organised every year by AnglicareSA and Living Beyond Suicide and marks the International Survivors of Suicide Loss Day. I was pleased to be joined at the ceremony in Henley Square by the member for Colton in another place, Mr Matt Cowdrey OAM. The Reverend Peter Sandeman, CEO of AnglicareSA and a member of the Premier's Council on Suicide Prevention, walked beside me from Tennyson and provided the main address during the ceremony.

As an Operation Flinders Foundation Ambassador for two decades, I was pleased to host a lunch at Parliament House yesterday for other ambassadors and supporters of the foundation. Thank you to John van Ruth and Jonathon Robran of Operation Flinders for working with my office to organise this event, which featured the ongoing work of the foundation in turning around the lives of at-risk youth. More than 500 young people participated in the program at Yankaninna in the northern Flinders Ranges this year.

Many members from this place have been up to witness an Operation Flinders exercise, and the foundation is very keen to invite many of the newer members who have not had the opportunity to witness the work that goes on at Yankaninna with these young people—they are very keen to facilitate a visit in the near future. It was particularly worthwhile to listen to an interview yesterday

between Jonathon Robran and Kasey Eusope, a young man who went on an Operation Flinders program exercise. Kasey indicated the great turnaround in his life, the motivation the program has given him, and the way in which he has now developed as a peer group mentor who works closely with young participants in the Operation Flinders program.

Members would be aware that the Gawler RSL sub-branch has this year organised the development of Christmas care packages for our service personnel who are serving overseas. I collected many donated items in a box outside my Parliament House office, and I am very grateful for the support that I received from colleagues and staff across the building. We were actually overwhelmed with the amount of items that were left outside the door of my office.

Donations also included those collected for the explosive detection dogs that are also posted overseas. Some very interesting items were specifically deposited there for the dogs. I was very pleased to deliver the items to the Gawler RSL at the Remembrance Day and dedication ceremony in Gawler on 11 November.

I heard that over the weekend many volunteers started the packing of these packages so that they could be posted overseas in time for Christmas for the personnel who are serving. At that stage, I understood that 70 boxes had been prepared, but I have been alerted this morning that the total goods finished up amassing over 100 boxes that will be sent off to serving personnel and those dogs in overseas postings.

TEACHERS DISPUTE

The Hon. R.P. WORTLEY (15:26): Tomorrow, thousands of teachers will support a half-day stoppage in support of their enterprise bargaining negotiations. The decision to take strike action is a decision that no teacher would take lightly. Teachers have been trying to negotiate for better conditions for many months, but have hit a brick wall with the Marshall Liberal government. The Marshall Liberal government has failed to negotiate in good faith and failed to reach an agreement. This Liberal government has failed teachers, parents and students by allowing negotiations to lapse to this point. The Liberal government allowed the enterprise bargaining process to stall. Indeed, they went one step further and flagged their plans to peel back conditions and funding protections.

Teachers are concerned about class sizes, resources for special needs children, job security, and attracting and retaining teachers in country schools. In failing teachers, the Marshall Liberal government has also failed parents and students. The decision to take industrial action is a decision that no teacher would take lightly but, after a long period of negotiation that has broken down, their hands are being forced. Tomorrow's strike should not have happened. It is happening because the Marshall Liberal government has failed to negotiate in good faith.

Parents of students will now suffer inconvenience. In the community, and certainly on this side of the chamber, we know that teachers are hardworking and dedicated. We also know that they will advocate for the best conditions and funding for every school and every student. The community trusts and respects teachers, and trusts what they have to say. Teachers are in our schools and preschools every day. They know what their school needs and they know what their students need. A world-class and well-resourced education system is pivotal for a lifetime of success and wellbeing for our children.

The former Labor government understood this to be the case, doubling investment in South Australian public schools during our time in office. The former Labor government also stood up for South Australian families by fighting the federal Liberal government's cuts to schools. I understand that a section of the current enterprise agreement, called 'The Commitment', which details funding agreements and conditions that schools and preschools rely upon, is under threat. If this section of the agreement is removed, how can teachers trust the Marshall Liberal government that funding levels will remain the same?

It is disappointing to see that the matter has now reached this point and that teachers feel they have no choice but to take industrial action. The Marshall Liberal government needs to act now in the interests of our children and our community. It is the core responsibility of any state government to ensure that children and young people are supported and that any child who walks through the gates of one of our public preschools or schools has the same funding and support opportunities.

The government needs to listen to what teachers have to say. If they are calling for support to meet the needs of students, the Marshall Liberal government must negotiate and consider these requests. Teachers look after the most precious things in our lives. Every day, we allow them to look after our children—to educate them, bring them up during the day and ensure that they work in a very safe and healthy environment. The least the government can do as a government is to provide them with the respect they deserve and the resources they need to make sure they can do the job that is so important to every one of us in this room, this country and this world, which is to look after our children.

RENTAL LAWS

The Hon. M.C. PARNELL (15:30): Australians love their pets. We have one of the highest rates of pet ownership in the world, with 62 per cent of Aussie households having pets. Many see their pets not just as companions but as treasured members of the family, so imagine having to move house but not being able to take your beloved pet to your new home. Having to abandon the family pet in order to have a place to live should not be a choice that anyone has to make, but this is the heartbreaking reality for many Australians.

According to the RSPCA South Australia's website, each year hundreds of families are forced to surrender loved pets to animal welfare and rescue organisations simply because owners cannot find pet-friendly rental accommodation. In addition to those who are forced to surrender their pets, the most common reason for those who do not own a pet is the fact of having an unsuitable home or lifestyle.

The 2016 census shows that 28.5 per cent of South Australians live in rental properties but, according to real estate website realestate.com, less than 5 per cent of rental properties advertised in Adelaide and surrounding suburbs in October last year allowed for pets. There is a distinct shortage of pet-friendly rental properties, despite the fact that pet owners can make responsible and reliable long-term tenants. It is unfortunate that the default position of rental agreements is that pets are not allowed.

The Greens want to change South Australia's rental laws to allow pets in rental properties. We say we should follow the lead of the Victorian parliament, which passed new renting laws in September this year. The Victorian Residential Tenancies Amendment Bill 2018 included more than 130 reforms designed to increase protections for renters, while ensuring that those who provide rental housing can still effectively manage their properties.

One of the key changes that was made was to allow pets to be kept in rental properties. The new Victorian laws require renters to obtain the consent of their rental provider to keep a pet; however, unless the residential rental provider applies to the Victorian Civil and Administration Tribunal (VCAT) within 14 days, consent is presumed. If the tribunal orders that the pet be excluded from the property and the renter does not comply, the rental provider can terminate the lease.

The factors that VCAT can consider when determining whether it is reasonable to refuse consent to keep a pet include the type of pet, obviously, and the character and nature of the property or appliances, fixtures and fittings on the property. This essentially means that a rental provider cannot unreasonably refuse a request to keep a pet. This is a positive reform that the Greens would like to see adopted in South Australia. With 62 per cent of Australians owning a pet and with home ownership becoming increasingly more difficult for young families, this is an issue that we cannot ignore.

Next year, I will be introducing legislation with a broad suite of reforms to improve the rights of renters in South Australia. One of these improvements will be allowing pets to be kept in rental properties, other than in exceptional circumstances. Pets are a huge positive influence on our lives. They improve our lives in many ways. Owning a pet has been shown to have psychological benefits for child development and for adults and a positive impact on our health and wellbeing. In short, pets make us happier and healthier. Let's not force anyone into having to abandon their much-loved family pet in order to have a place to live. Equally, let's not prevent others from experiencing the joys of pet ownership just because they are renters.

LUTHERAN COMMUNITY CARE

The Hon. J.S. LEE (15:34): It is a great honour today to speak about Lutheran Community Care and the launch of the National Community Hubs Program in South Australia. Honourable members, please allow me to share some historical information about Lutheran Community Care. In the 1950s, a small group of women in the Lutheran Church became increasingly aware of the growing need for community support. These support services included women suffering from domestic violence, mental illness, poverty and a number of social welfare problems termed as 'social distress'.

The Lutheran women of South Australia were visionary and definitely well ahead of their time. They formed a social welfare committee in 1964, which led to the opening of the Lutheran social welfare centre in 1969 at the current premises at 309 Prospect Road, Blair Athol. The centre serves as a safe haven for the most vulnerable and newly arrived migrants living in the northern metropolitan suburbs of Adelaide. In 1986, the Lutheran social welfare centre changed its name to Lutheran Community Care, as it is known to us today.

Based on their long-term commitment in supporting communities through responding to the needs of the most vulnerable individuals and families, it is no surprise that Lutheran Community Care is the natural partner to deliver the National Community Hubs Program in South Australia. The Hubs program embraces all people, regardless of language, culture, ethnicity or religion. The national program is an extremely successful initiative, working with marginalised and isolated migrant and refugee women and their families within school-based settings. I was very honoured to be invited to officially launch the National Community Hubs Program in South Australia on Tuesday 20 November 2018.

The launch took place at the Paralowie R-12 School. Despite it being a stormy, rainy day, the launch was very well attended. I would like to place on record my special thanks and congratulations to all involved, particularly the federal government through the Department of Social Services in partnership with the Scanlon Foundation; Dr Sonja Hood, CEO of Community Hubs Australia; Mr Leigh Goodenough, Manager of the National Community Hubs Program in South Australia; Mr Rohan Feegrade, Executive Director of Lutheran Community Care and his wonderful team; and Mr Peter McKay, principal of the Paralowie R-12 School for hosting the important launch event. I would also like to thank the teachers and staff who welcomed us and the students who performed beautifully on the day.

My heartfelt congratulations go to participating schools who have taken on great leadership in the establishment of the Community Hubs Program in South Australia. They are the Paralowie R-12 School, Para Vista Primary School, Salisbury Primary School, St Augustine's Parish School, Karrendi Primary School, Blair Athol North B-7 School and St Brigid's School at Kilburn. They are all to be congratulated for their fine leadership.

Community hubs are safe and welcoming spaces for all members of the community to connect, share and learn from each other. School facilities are community assets and sharing them has benefits for everyone, including creating better connected communities and fostering healthier and safer communities. Community hubs act as a gateway for migrant women and their young families to overcome obstacles, gain better access to health, pathways to employment and support services, and build connections with the wider community.

In 2017, Community Hubs Australia reported to have engaged 8,000 families from over 100 different countries of origin. Community hubs successfully engage culturally diverse women and children. It is very heartening to learn that children show more confidence in attending school and that principals and teachers have reported that they have better parent-teacher relationships and therefore a greater understanding and ability to respond to the needs of migrants and refugee families in their schools.

As a migrant myself from a non-English-speaking background, I have experienced firsthand the struggles and isolation of my parents and siblings in trying to fit into the Australian way of life when my family migrated to Australia back in 1979. I wholeheartedly welcome the establishment of the seven new community hubs in South Australia. As Assistant Minister to the Premier, I am proud to be a part of the South Australian Marshall government, which is absolutely committed to providing better services and support to our diverse communities.

TAFE SA URRBRAE CAMPUS

The Hon. C. BONAROS (15:39): I rise to speak on the matter of the 2018-19 announcement concerning the impending closure of the TAFE SA Urrbrae campus. This is the second time I have spoken on this matter in the chamber, the first was during my recent second reading speech on the Appropriation Bill.

During that speech I spoke about an online petition established by Elly Potter, a passionate horticulture student at the Urrbrae campus, who is here with us today along with John Zwar, a retired teacher at Urrbrae, and other supporters and campaigners, in particular Kate Chattaway, branch head of the Mediterranean Garden Society, and Sonia Green. I thank them for attending today.

Elly has done an absolutely remarkable job with the Change.org petition, which I have with me and which I will be tabling at the conclusion of my speech. In a few short weeks the petition has amassed more than 3,000 signatures, an absolutely outstanding effort in anyone's language and an indication of the strong community campaign against the campus' impending closure.

The campaign to prevent the closure of the TAFE SA Urrbrae campus has certainly gained pace since the government's announcement to shut it. The Change.org petition has been supplemented by a hard copy petition—garnering around a thousand additional signatures and growing—that urges the government to reverse its decision and retain TAFE SA Urrbrae at its present site, continuing to offer courses now and into the future. I encourage South Australians to sign the hard copy petition, available at places like Beaumont House, nurseries and garden clubs throughout the city.

The Nursery and Garden Industry of South Australia (NGISA) has also publicly shared its shock and alarm at the decision to close the Urrbrae campus, and has written to the Minister for Education to express its overwhelming concerns. Other industry stakeholders have followed suit. I have also written to the minister urging him to reverse the Marshall government's rash decision.

Today, I take a step further and invite the minister to accompany me on a tour of the unique and impressive sight, a tour I undertook three weeks ago, so that he can see for himself, just as I did, how special the site is. The TAFE SA Urrbrae campus is unique in Australia because of its setting alongside Urrbrae Agricultural High School and the Urrbrae Wetland, opposite the Waite—the Hon. John Dawkins may have to help me here—

The Hon. J.S.L. Dawkins: Arboretum.

The Hon. C. BONAROS: —Arboretum, the Waite Agricultural Research Institute, SARDI and CSIRO.

I was impressed by the significance of the site with its composition of flora, designed to be a living, breathing outdoor school providing the highest quality horticultural education. SA-Best will not let this exceptional and internationally known and envied site be jeopardised by an ill-advised decision. Elly's petition reads as follows:

Hi, I'm Elly and I'm a Diploma of Horticulture student at TAFE SA. Like others working in SA's horticulture industry, I'm totally gobsmacked by the Marshall government's recent decision to close Urrbrae TAFE campus.

This beautiful purpose-built campus is the heart of horticulture education in South Australia. Closing Urrbrae will damage SA's \$3 billion horticulture industry, which needs skilled workers to expand. I'm really worried about the future of our wonderful industry.

But it doesn't have to be this way. The Marshall government can still secure the future of South Australian horticulture by merely withdrawing its decision to close TAFE. Our industry needs stability to grow jobs in the future—without the threat of thoughtless cuts that hurt our next generation of leaders.

Studying at Urrbrae has been fantastic. The facilities and training I received on campus helped me gain the skills I needed to get into the industry and start my own garden maintenance business.

Horticulture can't be taught in a classroom alone. At Urrbrae we learn to prune grapevines and fruit trees in the campus vineyard and orchard. We get our hands dirty propagating plants in the campus nursery and study water quality at the Urrbrae Wetland. We learn to identify and cultivate hundreds of different plants growing on campus and how to treat pests and encourage beneficial insects. The Waite Arboretum—next door to the Urrbrae TAFE—is our living tree catalogue, with thousands of different species growing under local conditions.

With all these great facilities on our campus why on earth would the state government want to harm our industry by shutting down Urrbrae TAFE? These facilities cannot simply be moved to another campus. And to rebuild them would take years of work and buckets of money.

It makes absolutely no sense.

I'm passionate about our wonderful industry and I'm not going to give up until we get our campus back.

Steven Marshall can secure the future of South Australian horticulture by immediately withdrawing his decision to close Urrbrae TAFE.

With these powerful words from Elly, I seek leave to table the document.

Leave granted.

WORLD AIDS DAY

The Hon. J.E. HANSON (15:45): This year, World AIDS Day will be held on Saturday 1 December 2018. This awareness day seeks to help inform the community across the world about the human immunodeficiency virus and acquired immune deficiency syndrome, known as HIV or AIDS. World AIDS Day is a day for the community to show their support for people living with HIV and to celebrate the lives of people who have passed away of AIDS-related conditions or other conditions associated with HIV.

This year's World AIDS Day theme in Australia is 'Everybody Counts'. The aim of this year's community awareness campaign is to encourage all Australians to inform themselves about HIV, to take steps and action to reduce the chance of transmission of HIV by supporting strategies and encouraging and supporting people who live with HIV to fully participate in community life that is free from discrimination and negative community attitudes that can often be experienced by people with HIV.

It is with great sadness that, unfortunately, not all members in this chamber seem to support the aims of World AIDS Day. Earlier this year, the Marshall Liberal government and Treasurer Rob Lucas announced that they will be slashing funding to community programs that support people living with HIV and AIDS. These cuts and closures will have wideranging effects and force the closure of SHINE SA clinics in Davoren Park and Noarlunga and slash funding to support programs for people who are HIV positive.

These cuts to SHINE SA and the support programs that support people who are HIV positive are cruel and they are putting people's lives and wellbeing at risk for the sake of what is not a great deal of money. It is a disgrace when members opposite can stump up \$42 million to help build a hotel but cannot adequately fund SHINE SA clinics in Davoren Park and Noarlunga and HIV counselling services in Adelaide. It seems that, in the eyes of Premier Steven Marshall and Treasurer Rob Lucas, unlike the theme for this year's World AIDS Day, not everybody counts. It only counts if you want to stay a night in luxury accommodation at Adelaide Oval.

Well, it is not all bad news. The 2018 HIV in Australia annual surveillance report, produced by the Kirby Institute, has advised that in Australia in 2017 there were 963 new HIV diagnoses. This is the lowest number since 2010, with a 7 per cent decline over the last five years. In addition to this, developments continue to be made in community awareness, prevention, testing and medical advances. As of 1 April this year, pre-exposure prophylaxis, known as PrEP—that is, anti-HIV medication taken by a person who does not have HIV to lower their risk of infection—is available on the pharmaceutical benefits scheme.

There is a lot of great work being done in relation to HIV and AIDS, but more can still be done. The federal government should be congratulated on their efforts to list PrEP on the PBS, but unfortunately members opposite do not share the same care or compassion as their federal colleagues and instead choose to cruelly cut the funding to SHINE SA and HIV counselling services in South Australia.

I urge members opposite this World AIDS Day, on Saturday 1 December, to take some time to reflect on what these cuts to HIV counselling services will mean for people living with HIV and AIDS and show their support for a cause to reinstate the necessary funding to them.

FESTA CROATIAN FOOD AND WINE FESTIVAL

The Hon. T.J. STEPHENS (15:48): I rise today to acknowledge the 15th anniversary of Croatia's showcase of culture through its annual event Festa, the Croatian Food and Wine Festival. Last Saturday, 24 November, I was pleased to attend the 15th anniversary of Festa, with 15 years of showcasing a variety of aspects from both traditional and modern Croatia. It is a festival held by the South Australian Croatian community, highlighting Croatia's energetic culture, a culture which has made a large contribution to our South Australian way of life.

The Festa committee has been able to grow the scale of the event from a small picnic-style event to one which attracts thousands of patrons not only from South Australia but from across Australia. It is now widely regarded as the biggest and best Croatian festival in Australia. I commend the hardworking volunteers, led by the Croatian Sports Centre's president, Juli Cirjak, festival director, Gordana Smoljan, and the Festa committee members for their greatly appreciated efforts. Festa's generous volunteers are the reason the festival has been so successful and continues to prosper. These volunteers form the fabric of our immigration story and put their heart into the event year in and year out.

Mr Joseph Petric, the Croatian consul, based in Melbourne, attended for the first time, and we certainly welcomed him, and we were thrilled to have Her Excellency Ambassador Betty Pavelich Sirois, the new Croatian ambassador to Australia, from Canberra, who made a passionate and emotional speech, one which I was very proud of. I was pleased to be joined by the Hon. Jing Lee, who spoke on behalf of the Premier and spoke very well, the Hon. David Ridgway and Susan Close MP, the Deputy Leader of the Opposition.

The festival is special as these volunteers have followed in the footsteps of their parents and grandparents. They share with us their centuries-old family traditions and ensure that these traditions carry on in the generations to come. From donating hours of their time each year in setting up and running the event to keeping family traditions alive, the Croatian culture of food, wine, music and entertainment brought over to Australia has flourished.

In South Australia there are over 3,500 Croatian-born residents and many more of Croatian descent, and in total it is a growing community of approximately 10,000 people. The South Australian government welcomes every opportunity to emphasise the important relationship between immigration, multiculturalism and our cultural and economic wealth as a nation. The Croatian community has made a valuable and deeply appreciated contribution to the richness of Australian society and that of our state.

Croats in South Australia, keen to maintain the language and culture of Croatia for future generations, have established several organisations, such as the Croatian Ethnic School, from 1966; the Croatian Radio Hour, in 1976; the Croatian soccer club, from 1952; the Croatian Catholic Centre, from 1956; and the Croatian Club, in 1961. I commend the Croatian community for their passionate and active presence in regional South Australia. These clubs are located not only in Adelaide but in the towns of Port Lincoln, Whyalla, which is where I was introduced to the Croatian community, the Riverland, Coober Pedy and Mount Gambier. Croatian clubs exist to further strengthen artistic, sporting and cultural ties between our two great countries.

Several initiatives in recent years continue to demonstrate the commitment of Croats, both past and present, to the betterment of their community in South Australia. Examples include the development of a modern facility shared with Ukrainian and Belarusian peoples for aged care, the raising of funds for medical equipment in Croatia through the Croatian Medical Aid Foundation, the formation of the Australian Croatian Chamber of Commerce and Industry SA to foster bilateral trade between Croatia and South Australia, and the founding of the Australian Croatian Genealogical and Historical Society.

The longstanding bilateral relationship between Australia and Croatia in the last 26 years is based not only on our shared world view but very much on the personal connections between our peoples. There are also other areas of engagement, including tourism, where an increasing number of Australians are discovering the beauty and delights of this fascinating country. I understand about 150,000 Australian tourists visited Croatia last year. I believe that we, working together through these

business and community circles, will continue to grow as valued partners and trusted friends, contributing to significant and enduring relations into the future.

I congratulate the Festa committee for this year's 15th anniversary. I absolutely congratulate all of the hardworking volunteers and in particular the number of young people who have continued the tradition and stepped up to the plate and taken over the running of the festival, including, as I said, Gordana Smoljan, the daughter of Malcolm and Maria Smoljan, who are great Croatian people who I met in my days in Whyalla. I look forward to returning next year to the 16th anniversary festivities. Ziveli!

Motions

INTERNATIONAL DAY FOR THE ELIMINATION OF VIOLENCE AGAINST WOMEN The Hon. I. PNEVMATIKOS (15:53): I move:

That this council—

- Notes that Sunday 25 November marks the International Day for the Elimination of Violence against Women;
- Notes the unacceptable, shocking and persistent prevalence of violence against women across the globe; and
- 3. Commits to do all that it can to address gender inequality, to empower women and girls and to prevent violence against women.

I rise to move this private members' motion standing in my name because for far too long impunity, silence and stigma have allowed violence against women to escalate. It is one of the most widespread and persistent human rights violations in our world today. This is so much so that in the 2017 session report on the progress towards sustainable development goals, the UN Secretary-General identified violence against women as one of the most extreme forms of discrimination currently being experienced across the globe.

The report, conducted between 2005 and 2016 across 87 countries, and the Secretary-General's Unite initiative have highlighted some alarming facts. Firstly, data collected from 56 of the countries showed that one in five girls aged between 15 and 19 years had experienced physical and/or sexual violence by their intimate partner in the last 12 months prior to the survey. Secondly, mutilation and cutting practices, whilst declining, continue to remain prevalent affecting one in three girls aged between 15 and 19 years in the countries where the practice persists.

Thirdly, in 47 countries where relevant data was available only 53 per cent of women who were married or in a relationship were making their own decisions about consensual sexual relations and the use of contraceptives and health services. Finally, one figure that is particularly haunting is that 37 countries currently exempt perpetrators of rape from prosecution when they are married to or subsequently marry the victim.

Looking in our own backyard, the 2016 Australian Bureau of Statistics personal safety survey received responses from over 15,500 females. Of that, one in six had experienced violence by a partner since the age of 15 and one in four had experienced emotional abuse by a partner. The survey concluded that women in Australia are almost three times more likely to have experienced partner violence than men are and eight times more likely to experience sexual violence. Research shows that achieving gender equality can assist in preventing conflict, yet the UN remains concerned that despite the evidence actions for women's inclusion, leadership and protection remains inadequate.

One of the major challenges, as identified by the UN, for developing efforts to prevent and end violence against women is lack of funds, for without adequate resources how are we to bring real and significant changes in the lives of women and girls? How are we to help those most vulnerable? Frameworks such as the UN's sustainable development goals have recognised that the implementation of new legal frameworks regarding female equality in the workplace and the eradication of harmful practices targeted at women is crucial to ending the gender-based discrimination prevalent in many countries around the world.

Fears of retaliation, stigma and risks of experiencing shame and rejection from families and communities are commonly known challenges for movements against violence against women. Fortunately, in recent years there has been a drive for change within communities across the globe, garnering more visibility on the issue. The activity of grassroots survivor advocates including Me Too, Time's Up, Not One More and Balance Ton Porc reflect the determination and bravery being displayed for the common ideal to end the abuse and violence against women.

In response to the drive for change the theme this year, Hear Me Too, is to encourage people to create opportunities for dialogue between activists, policymakers and the public. Hear Me Too aims to build momentum in engagement with all committed parties to create meaningful opportunities and secure very specific commitments to end violence against women. Everyone in society has an important role to play to help end violence against women. To be able to do so properly we must all work together across sectors to address the various aspects of violence against women.

South Australia and Labor have a strong history in terms of having a strategic and comprehensive approach to violence against women in our state. We recognise that too many women suffer from violence in our community and that for it to end we must make it everybody's business. Furthermore, as a state government we recognise that we have a special responsibility. Accordingly, we built upon the reforms undertaken through the Women's Safety Strategy to improve our legislation and services, as well as develop a stronger focus on early intervention and prevention.

I am pleased that the government, as well as the crossbench, share the belief that state government has a special responsibility to ensure that all women in our state can live free from the fear and suffering that violence can inflict. I am equally pleased that the government has made the decision to continue with the work being undertaken in this area prior to March 2018, as is evident in recent legislation introduced on the matter.

In closing, there could not be a better time for the theme Hear Me Too to be selected for the International Day for the Elimination of Violence against Women. I look forward to the continuing efforts between all members in this place to be able to build further momentum and engagement with the tireless activists for women's rights in our state, to be able to create meaningful opportunities and to secure a commitment to end violence against women.

Debate adjourned on motion of Hon. T.J. Stephens.

Parliamentary Committees

JOINT COMMITTEE ON THE 125TH ANNIVERSARY OF WOMEN'S SUFFRAGE The Hon. J.M.A. LENSINK (Minister for Human Services) (16:01): I move:

That the interim report of the committee be noted.

I rise to note the interim report of the Joint Committee on the 125th Anniversary of Women's Suffrage, which was established through a motion in the House of Assembly on 31 May 2018 and was similarly agreed to in the Legislative Council on 6 June 2018. I commend the member for Florey for having moved this motion on that occasion in the House of Assembly, but also in 2017 prior to the election.

The member for Florey is well known to have a very particular interest in the matter of women's suffrage and clearly is very keen to ensure that these matters are noted and that we have appropriate activities in 2019 to celebrate the 125th anniversary. I think both motions were passed prior to the election, but we did not have an opportunity to come together to undertake any collection of evidence and so forth, but we have done so following the election.

I commend and thank for their interest and commitment in this area the following members of the committee: Ms Frances Bedford MP, the Hon. Connie Bonaros MLC, the Hon. Tammy Franks MLC, Mrs Carolyn Power MP, Ms Katrine Hildyard MP, Ms Paula Luethen MP and the Hon. Irene Pnevmatikos MLC. I also acknowledge our staff, Lauren Williams, and our research assistant, Dr Meredith Brown, for their support.

An eight-member committee was not an easy group of busy MPs to get together. However, we did manage to have a number of meetings and a number of witnesses, so we have therefore tabled this interim report. In terms of the evidence we received, members can peruse that at their

leisure. I understand that the evidence is being placed on the committee's website on the parliament's intranet

We heard from the History Trust of South Australia, Mr Greg Mackie OAM, and the State Library of South Australia. The Centre of Democracy also provided evidence and a range of events are being organised, particularly around the month of May, which is the traditional time for history week. I think it is fair to say that the Office for Women is taking a lead role and already has its skates on in terms of having a range of activities. There has been a logo design competition and the result of that should be announced shortly. That logo will be associated with all the activities of the year of suffrage.

The Office for Women will be hosting on their website a range of events, which include nominations for national honours for the Australia Day Council; events with women artists associated with the Adelaide Fringe; a panel to discuss gender equality associated with the Australia Day Council; social media campaigns, such as 'What does suffrage mean to you?'; Women's History Month in conjunction with History SA; the Gladys Elphick Awards; a gender equality symposium; a symposium on past research by Catherine Helen Spence Memorial Scholarship recipients and other women academics; and, of course, Youth Parliament.

The Department for Education is also warmly embracing suffrage and will be organising activities with schools in terms of prizes, essay competitions and the like, which we are familiar with. A big part of the intent, without putting words into the member for Florey's mouth, is to ensure that members in both of these places would also engage on this matter, so we have also written to all members to ensure that they are aware and engaged. A number of members of our committee had the benefit of being involved in the 100th celebrations, so we were keen to ensure that we had some significant events that reflected that.

In terms of the recommendations that the committee has come up with, we are recommending that the Joint Parliamentary Services Committee organise a particular event and that we are able to engage with school-aged young women as well through that process, and that we have a re-enactment of the 1894 debate. As I have already mentioned, we want members of this place and the other place to be engaged in the 125th celebrations, which I am sure everyone will embrace; that there be promotion through the parliament's electronic media; that there be funding made available—this is a particular recommendation to the state government—to assist community organisations; and that we have an audit on ways that the parliament can become more family friendly.

We are not just focusing on ourselves, but we think it is also important for visitors to the building and our own staff—indeed all staff of the parliament—that those things be progressed. We will also seek that the Standing Orders Committee, in collaboration with the clerks, undertakes a review of standing orders for gender neutrality and to ensure that orders do not impede women from entering political life.

I think it is fair to say that it is often said that politics is a fairly robust place but, as we know from other discussions, boundaries need to be maintained. In this day and age, the standards expected of us are much higher than they have been in the past. Certainly in my 15 years in parliament, I think things are greatly improved, but there is always room for improvement. With those words, I commend the motion.

Debate adjourned on motion of Hon. I.K. Hunter.

Motions

SHINE SA

The Hon. T.A. FRANKS (16:09): I move:

That this council—

- 1. Notes that SHINE SA provides vital services to people who are often in difficult circumstances seeking a safe place for sexual health support, testing and counselling;
- 2. Condemns the Marshall government's 2018-19 budget cuts to SHINE SA, which will have a detrimental impact on the reproductive and sexual health of our community;

- 3. Recognises that over 350 doctors have signed a letter urging the government to reverse these cuts;
- Expresses concern that these cuts could lead to an increase in rates of sexually transmitted infections, unplanned pregnancies and an increase in the use of hospital obstetricians and gynaecologists; and
- 5. Urges the Marshall Liberal government to restore funding to SHINE SA.

I move this motion today having alerted members last night to its urgency. The community has known of this urgency for some time, and many members of this council are aware that the impending cuts to SHINE SA are a matter that should be treated with urgency. Members may also be aware that SHINE SA has now issued a notice of its intent to close its doors in both the northern and southern suburbs as well as cease some of their HIV services in the CBD through SAMESH. This is as a direct result of the funding cuts in the most recent budget.

That letter, alerting the community and service partners, colleagues and collaborators to an early notice of SHINE's clinic closure intentions at Davoren Park and Noarlunga, was sent out on 16 November 2018, and it notes with regret that they provide early warning of the pending SHINE SA clinic closures at Davoren Park and Noarlunga. These closures are planned to occur in February 2019.

SHINE SA, of course, commenced in 1970 and many—certainly I, in my younger days—would be more familiar with the Family Planning Association of South Australia, which was the precursor name to SHINE SA. I remember it being on Phillips Street in Kensington and there, from 1970, it provided sexual and reproductive health services, primarily to women.

SHINE SA, of course, is now a key sexual and reproductive health agency, providing sexual health clinics, health promotion, education and workforce development. Its focus is on providing services to young people and other vulnerable populations at risk of unplanned pregnancy or sexually transmitted infections, including blood-borne viruses, and currently they have clinics in Woodville, Adelaide, Davoren Park and Noarlunga Centre.

They also provide clinics at the Adelaide Remand Centre, the Yatala Labour Prison and the Adelaide Women's Prison, and they deliver the SAMESH program, which is an HIV promotion program targeting people at risk of or living with HIV, in partner with Thorne Harbour Health. Previously, that was known as the Victorian AIDS Council.

The announcement in the state budget on 4 September came as a shock to SHINE. Indeed, the cuts of some 9.5 per cent of funding, with one service, Cheltenham Place, being completely defunded in terms of the sexual health sector, was quite a shock, not just to the sector but to the community. SHINE SA was one of the hardest hit of all the remaining services, losing 547 per year.

In addition to this latest decrease in funding, SHINE SA is also required by government to prioritise and expand their education and workforce development programs. Like many other organisations in the health sector, they have been faced with consistent cuts since 2012 to that SA Health component of their funding. This has come through loss of wages, indexation and/or the requirement to make significant cost savings.

At the request of SA Health over that time, SHINE SA has implemented and maximised commonwealth Medicare Benefits Schedule (MBS) billing, an income model for general practices, when in fact they are a specialised sexual health service. This, of course, has been implemented in an attempt to keep their services running. However, as expected by many of those who work within the sector, many of their most vulnerable and young clients do not fit the standard appointment that would ensure a full MBS cost recovery.

SHINE SA has pondered on this and deliberated. With a heavy heart, they have given full consideration to their options and have taken advice from experts, peers and staff. As a direct result of the \$547,000 per year funding decrease, they find themselves now forced to close the doors of two SHINE SA clinics, plus the HIV counselling service component of the SAMESH service. Those clinics are, of course, on Peachey Road, Davoren Park, and Alexander Kelly Drive, Noarlunga Centre, with the HIV counselling service component of SAMESH being at Hyde Street in the city.

The Woodville and Hyde Street services will continue and they will continue to offer free bulkbilled sexual health checks for young people under 30 and other communities of interest, as published on their website. They fully appreciate that this significant loss of service will create difficulties for their partners, colleagues and collaborators, who have been using, referring to and working with SHINE to deliver seamless services to the people in the north and the south over many, many years.

In various forms, SHINE SA has provided services in both the north and the south since the mid-1970s, so it is with great sadness that they sent that letter out just over a week ago. In response, the health minister, Stephen Wade, has expressed surprise in the media that SHINE would opt to shut those two clinics, stating:

Similar services interstate are operating more efficiently and the government thinks there are more opportunities for SHINE to access Medicare revenue.

Further, the minister has stated:

They need to think again how they can more cost-effectively deliver services. It is a 9 per cent reduction in the grant, but they are talking about a 50 per cent reduction in their clinics.

These are guotes attributed to the minister. He has also gone on to say:

The government does not accept that SHINE SA needs to reduce services. Similar services interstate operate more cost-effectively.

He has gone on to say:

Taxpayers expect value for money and all health services need to strive to be more cost-effective.

If these things were true, that might be a viable argument, but taxpayers expect decisions made by the government to be made with full information and to address the realities and not the rhetoric. So let's start with some of the rhetoric.

The minister has claimed that, by closing two clinics, SHINE is cutting services by 50 per cent in response to a 9 per cent budget cut. This is simply not true. SHINE has lost 9 per cent of its funding, but it certainly has not closed 50 per cent of its services. SHINE SA is not just clinics. The two sites, at Davoren Park and at Noarlunga, are just a fraction of what SHINE does. Indeed, a quick glance at the SHINE SA operational model shows that the Woodville and Hyde Street sites are hub sites with far more comprehensive and complex services. They offer many services, not just the clinic. They offer workforce development and health promotion. Given the successive funding cuts since 2012, Noarlunga was only operating two days a week, as it was.

While Davoren Park and Noarlunga are busy clinics, they actually function as satellites. They certainly do not constitute 50 per cent of the work that SHINE SA does. Within that operational model, I will point out to members for their information that the clinical services at Davoren Park include sexual health clinics, counselling, clinical training and a clean needle program. At Noarlunga, they include clinical services, such as sexual health clinics, counselling and clinical training.

However, if you look at the entire operations of SHINE, there are also prison health clinics. As I mentioned, they are at the Adelaide Women's Prison, Yatala Labour Prison and the Adelaide Remand Centre. At Hyde Street, there are clinical services, which include general practice, HIV and bloodborne viruses and opioid dependence prescribing, HIV point-of-care testing, Health Care Homes trial, sexual health physician, sexual health clinics, a psychologist, a clean needle program and outbreak response.

With the SAMESH program, currently at Hyde Street, in partnership with the former Victorian AIDS council (now Thorne Harbour Health), they have a HIV and STI health promotion for gay men and MSM, HIV and STI prevention, community groups and a SASHA email current awareness service. They also have housed in that premises Foundations of the LGBTIQ Inclusion Workforce Education. They have the Gender Wellbeing Service, which also includes a Port Adelaide outreach that is based there. They have the Bobby Goldsmith Foundation (indeed, given that World AIDS Day is coming up, it is very timely to make note of that). They have research projects, including primary research, higher degree student projects, external projects and clinical research trials.

When you look at Woodville, there are even further services. There you have clinical services, sexual health clinics, counsellors, clinical training, clinical utilities and warehouse, a state sexual health line, an appointment phone line and the Clean Needle Program. They have the DASSA

(Drug and Alcohol Services South Australia) clinic there as well. At Woodville they also have prevention education campaigns, including health promotion, media, online, content provision and consultancy. They also have groups, workshops and peer education. They further have professional communications; indeed, the SHINE website is a valuable resource.

They foster professional networks, doctors, nurses and teachers and provide evidence updates and outbreak response. They have a library and resource centre in Woodville that schools, clinicians, workers, education institutions and the public are able to access. Their online resources are housed there as well. They have medical education, and they provide the FPAA certificate and STI and BBV (blood-borne virus) education. They provide contraception and pregnancy choices and they have cervical and HPV screening. They have nurse and midwifery education, which includes a certificate in sexual health, and education in STI and BBV, contraception, pregnancy choices and surgical and APV screening.

They also have community worker courses for youth workers, disability and mental health workers, CALD workers, Aboriginal health workers and child protection workers. They have a Focus Schools Program curriculum that includes many public and private schools at all levels, as well as universities. From those premises, they also operate the Keeping Safe: Child Protection Curriculum teacher training. That service is from preschool to year 12 and includes a train-the-trainer component. They also have other education and training, including mental health first aid, tailored training, consultancy and some inclusive LGBTI services, just to name a few. Certainly, the two clinics that are facing closure, which were already running with limited capacity, are far from 50 per cent of SHINE's clinic work.

I note that the minister claims that similar services interstate are operating more cost effectively. Upon receiving advice of the funding cut, SHINE SA management moved quickly, benchmarking and taking advice from experts, peers and staff in their deliberations on how they could manage the most recent funding cuts. In October 2018, SHINE SA engaged an independent consultancy firm to conduct an external review of all corporate and administrative services.

SHINE had already acted on this advice, reducing corporate, administrative and management costs. SHINE SA further reviewed, sought external advice on and benchmarked their clinical services and found that SHINE's two hub sites (being Woodville and Hyde Street) were the most cost effective and would allow the organisation to continue to offer the most complex and integrated clinical services, as well as deliver education and workforce development as is requested by SA Health.

In the absence of any funding to cover them, and in the light of those previously mentioned requirements specified by SA Health, the two satellite clinics at Davoren Park and Noarlunga were identified as the least viable. The scope and complexity of services and programs that are provided from their sites are illustrated by the operational model that I just went through.

However, their benchmarking has also found that other organisations in similar situations in similar states have fewer clinic locations. Victoria, for example, only has two: one in the Melbourne CBD and one in Box Hill. Looking at the annual reports of comparative organisations for Victoria, they recorded 13,166 clinical consultations last financial year. In comparison SHINE SA had 43,709: so 13,166 in Victoria compared with 43,709. Clearly, that is not comparing apples with apples.

Comparisons are, of course, complex, as the health system is woven together from many different funding sources, which makes any benchmarking quite difficult. They cannot speak for another service, but those numbers are certainly cause for the minister to take pause. They also found that without reducing the number of sites their overheads, including the required clinical support staff, would, in fact, remain too high.

I note that the minister has faced many questions in this place with regard to the syphilis outbreak, the horrific example of a baby being born with congenital syphilis in the Port Augusta Hospital, and the fact that that outbreak has now spread to Adelaide. I also note that back on 18 September the minister, in response to a question from the Hon. Russell Wortley, noted that in terms of what communication they had had from SHINE SA since the budget, he would take it on notice and check with his department. I believe we are still waiting for those answers, but perhaps I am to be corrected on that. The minister also noted, to the Hon. Russell Wortley, that it was:

important again to appreciate that services evolve over time. SHINE SA provides a comprehensive sexual health service for vulnerable members of the South Australian community at high risk of STIs.

I certainly agree with the minister on that. However, he went on to say:

It is our view that SHINE SA will continue to provide clinical services through billing under the Medicare Benefits Schedule. SHINE SA has increasingly used Medicare billing in recent years to the point where their reliance on funding from SA Health for their core program has declined from around 80 per cent in 2013-14 to around 60 per cent in 2016-17. The funding change reflects...that SHINE SA is increasingly utilising Medicare funding, and it is our view that there is further capacity to do so.

I contend that it is the independent advice that SHINE SA has received, and SHINE SA's view, that there is little blood left to be squeezed from this stone.

Indeed SHINE SA has, of course, been MBS billing since 2013, and the SA Health recent contract-related communication to SHINE asked that they 'transition to increasing utilisation of external funding sources, eg billing under MBS,' when in fact they have been billing under MBS for some five years. Through benchmarking and the utilisation of expert MBS billing consultants they have found that, in fact, SHINE's current billing is already largely maximised, given the priority populations and the complexity of services they are required to deliver. Indeed, any remaining refinements would come nowhere close to that \$547,000 per year.

Further, in November the minister repeated an answer in response to the Hon. Ian Hunter. He noted that SA Health had expressed a view that a significant portion of the services provided by SHINE SA, 'could be, shall we say, 'Medicarised'; in other words, the funding could be accessed through Medicare item numbers.' Therefore it was still, at that point some months later in November, the government's view that services could be 'sustained without state government funding'.

Clearly this is not the case. We are facing clinic closures, we are facing cuts to SHINE SA, and they not acceptable to the community. The minister should be getting a second opinion, and if he wants a second opinion on this he has not just one second opinion to consider, he has 350 or so from those medical professionals who have signed an open letter protesting the closure of the two suburban sexual health clinics. Those medical professionals have warned that this would lead to a spike in unplanned pregnancies and STIs. That doctors' protest letter, which has in the past week been sent to the health minister, has been signed by GPs, paediatricians, psychiatrists, obstetricians and gynaecologists, as well as emergency doctors and various other clinicians.

Dr Erin O'Connor, the doctors' spokesperson with regard to that group letter of over 350 medical professionals, said the clinics being closed were, of course, in the areas of most need and warned that people in those regions would not travel to the city for help and advice on sexual issues. She also noted in the media that she has sought a meeting with the minister, and I hope that he will elaborate on the progress of that meeting. I note in the letter from concerned doctors that they say:

Denying people, particularly the poorly educated and under or unemployed, access to timely sexual healthcare has ramifications which reach father than the individual. It increases the community's vulnerability to sexually transmitted diseases, some of which are life-threatening. It may also result in the births of children to women who are in circumstances in which they are less well able to meet their child's needs and can hinder their ability to attain higher levels of education, and thus contribute more to our economy. In many cases, it may perpetuate the welfare cycle.

The biggest social determinant of health is education, and timely access to contraception and sexual health services enables our vulnerable and youngest community members to finish their education.

Sexual health is not an optional component of individual health; and those clinics are located where they are because they serve some of our most disadvantaged communities.

The doctors go on to say:

The state health service will no doubt see a measurable rise in STIs and unplanned pregnancies in two communities which are already socially and economically disadvantaged.

They note that many of the clients that SHINE serves are often victims of abuse and they are often seeking a safe place to turn to to get support, testing and counselling, and that needs to be local. They need to feel safe, and safety is near home. It states:

SHINE SA is [of course] a trusted and confidential service which is respected by young people. Young people are often shameful or scared to access STI testing from their regular GP.

Certainly if it is their family GP. It continues:

South Australia is already experiencing outbreaks of Syphilis. Unfortunately this is disproportionately affecting Aboriginal and Torres Strait Islander people. If the government wants to get serious with closing the gap, it needs to pay attention to the current health issues and provide primary care services such as SHINE SA.

Patient deprivation is not the only outcome of this decision, referral points for a service like Streetlink and Centacare are now limited. These services have had to use SHINE SA on a regular basis for second doctor reviews for young patients under 16yo who seek contraception if the young person is Gillick competent.

SHINE SA is recognised statewide as a safe place for young LGTBI people, and this is reflected in their Rainbow Tick accreditation. There is a large community of young people for whom their local clinic is their only safe space to seek medical attention and counselling, and for which it would be extremely difficult for them to travel to the city.

Local obstetrician and gynaecologists both public and private often suggest people go to SHINE SA for discussion around unplanned pregnancies and for IUD insertions. This includes post natal contraception, public hospitals do not have the capacity to do such things such as postnatal IUD insertions, many of which are done at the two SHINE sites set for closure. Many of these new mothers cannot travel.

The Medicare rebate for IUD insertion in general practice barely covers the cost of consumables, let alone the nursing support required, as well as the running costs of the clinic—there are basically no GPs that routinely bulk bill IUD insertions.

Davoren Park SHINE has a Clean Needle Programme (CNP). It is one of the busiest sites in the state. Cutting this while trying to decrease the burden of BBV (blood borne viruses) in the state...is completely counterproductive.

The doctors finish with their extreme concern at the cutting of the services and urge the minister to reconsider. Those concerns were also reflected in an AMA South Australia media release of 22 November. They have called on the government to reconsider this cut.

These are not people who take such calls lightly. This is not playing politics. This is urging the government to revisit a decision that has been made in error on incorrect and out-of-date information. SHINE is as disappointed as we all are about the closure of these services, but they are simply faced with little choice. They have copped cut after cut after cut. This was the straw that broke the camel's back and will see those doors close in Davoren Park and Noarlunga.

We cannot let particularly the young people of the north and the south down. I urge the minister to take on board the submissions from those 350 medical professionals and the counterclaims from SHINE with regard to the information that has been put out to the public. These 9 per cent cuts are not being equated to 50 per cent of the services; they are being equated to the services that they can least afford to continue.

I have moved this motion with some urgency today because this is an important matter. Sexual health and the timeliness of this, with those closures set to take place in February, mean that the staff have already begun the process of transition of ending their jobs. It means the other referral services have already begun the process of finding other options. Indeed, it is a small amount in the scale of the budget, but it will have a profound impact. That profound impact—on sexual health, unplanned pregnancies, sexually transmitted infections and blood-borne viruses—constitutes significant health burdens into the future, and they are devastating situations to put vulnerable communities and young people of our state into.

I note that there are other members listed to speak today, and there has been great community support for keeping and restoring the funding to SHINE. It is a well-loved institution. It is not without controversy. Indeed, that is the very reason it is needed. Young people cannot necessarily go to their family GP to seek these services; they need access at this level in the safe environment that SHINE has provided and has the reputation of providing, what is more. That corporate knowledge and those corporate connections within the medical profession are invaluable, and when we cut them they will be very hard to restore. When we have an increase in STIs and when we have unplanned pregnancies that were needless—when we have those situations for those young people in particular—it will be on our heads that we did not reconsider the folly of this particular cut.

I think the minister comes to this role with a very hard job before him and an enormous portfolio, and one of the most important portfolios in this state. This today is a small matter, and it is not a matter that I brought lightly as a motion of urgency to this place, but it is certainly not a motion I wished to suspend question time for and move in a way of no confidence in the minister. I think the minister has been badly advised, and I think the Marshall government have made a mistake in seeing their cut in isolation from previous cuts and the current situation that SHINE was already in.

I know that the minister and the Marshall government members of this place oppose proceeding with this debate today. I urge them to listen to this debate today and to reconsider this decision. We have put this here with urgency because we know it is important and a small change can make a very big difference. If the minister needs overnight to consider his response to what is put before him today, certainly I would be open to that, if we were to resume this motion tomorrow in government business time. However, I do not believe we should be putting it off another week, because next week is the final week of this parliament, and this parliament will have no recourse to act further before the doors at Davoren Park and Noarlunga are closed, possibly forever.

This is too important to let slide. If the government's only argument is about conventions and processes of this parliament, well, this parliament is here to represent people, and conventions are rules that we abide by when there are gentlemen's agreements, but when a matter is important we have often agreed to progress debate, and this is an important matter today. With that, I urge members to support the motion. I would certainly be happy to amend the motion and not to condemn the Marshall government should they reverse these cuts. It is these cuts that are at fault here today, and it is these cuts that I hope the Marshall government will respond to, not the conditions around them. With those few words, I commend the motion.

The Hon. I.K. HUNTER (16:40): I rise to indicate that the Labor opposition will support this motion today. Since 1970, SHINE SA and its predecessors have delivered sexual and reproductive health services wherever they are most needed. The Hon. Tammy Franks reflected on the organisation once being called Family Planning but I can remember back even beyond that when it was called Mothers' and Babies'.

The job that this organisation has done through those various iterations and names has been immense for our community. We can, as a state and as a community, be proud of the work that SHINE has done since it opened its doors. South Australians have had a place to go for those critical services which quite often people feel are inaccessible in other places, such as their doctor's surgery or hospitals. SHINE has been a safe place for those people to go and it continues to be.

Sexual and reproductive health needs, as the Hon. Tammy Franks reflected on, can be difficult for many people to grapple with and to deal with. Stigma, embarrassment and a level of uncertainty can play on the minds of people who need to find support and treatment and prevaricate about that. SHINE subverts that and allows people to go to a safe place and have their situation assessed and dealt with. That is why the services that SHINE provides are so vital and so unique. They are affordable, they are accessible to all and they offer help that is free of judgement.

We know that health outcomes are better, they are improved when sexual and reproductive health options are more accessible to more people in our community. This is particularly true for groups within the health services that do not find their particular needs are addressed by the mainstream services; for example, women in certain situations, LGBTI community members, those experiencing homelessness, or indeed mental illness, and also new arrivals to our state.

South Australians, as a community, are diverse; we are not all the same and, as the make-up of our community is diverse, so are our health needs. The simple fact of the matter is that many LGBTI young people do not want to talk to their family GP about their sexual health needs, for fairly obvious reasons I would suggest. Young women can be worried about their reproductive health needs and often they do not feel that they want to talk to the same doctor that their parents see.

SHINE SA is one of the few places that people with these types of needs and concerns can feel that they can go to and get the help they need. These communities know that SHINE understands the health challenges they face and will not judge them. That is why these cuts that the Minister for Health and the Treasurer are inflicting upon SHINE SA are so cruel and ultimately, I say,

counterproductive, because in the end they will cost the health system and they will cost the taxpayer even more.

The minister said, as the Hon. Tammy Franks outlined, 'Well, you know, these services can be Medicare rise', but you cannot Medicare rise these services in SHINE if the offices are not there. If they close these clinics in the north and south, the minister knows that many of these people in vulnerable communities will not travel into the city to access these services. They will not because they will have to explain to their family or other members they are close to why they are doing so. That is why these services are so valuable in those centres in the north and south of Adelaide, because they are so easily accessible for people who need them.

SHINE advises that non-government organisations in South Australia are having their funding cut by an average of about 2 per cent—that is bad—but why then, if that is what is happening to most of the services, are SHINE and the sexual health sector in particular being hit with cuts greater than 2 per cent? It is 5 per cent and up to 9.5 per cent, I am advised. Those figures do not even go close to touching what is happening to Centacare's Cheltenham Place HIV refuge, which I have spoken about in this place previously. That service is suffering a 100 per cent cut to its funding and is closing.

These figures, dare I say it, beg the question: is there an ideological agenda here about closing certain services because there is a view that they should not be provided at all by government health services? The Liberal government is cutting sexual health services at a rate far higher than average—that is beyond question. Why? That was the question voiced on Monday when advocates, experts and community groups convened for a round table about these cuts, hosted by the shadow minister for health and wellbeing, the member for Kaurna. We were joined by doctors, practitioners, LGBTI community groups, youth organisations, advocates for people with lived experiences of trauma and others. They were of one mind on this issue: that the Liberal government's cuts are wrong, but they need to be reversed.

We were also joined by the members for Wright and Reynell. The member for Wright is in the north of Adelaide, where one of these clinics is near, and the member for Reynell of course is in the south of Adelaide, near to another of these clinics. They represent constituencies at opposite ends of the CBD. Their communities, however, now face this common threat from this government: the loss of vital community health services in their area.

In the northern suburbs the SHINE SA clinic at Davoren Park will close its doors, as the Hon. Tammy Franks advised us, because of this loss of government funding. In the southern suburbs the community is losing the SHINE clinic at Noarlunga. Right in the middle, the CBD is also being hit. The minister tells us that people can travel. They cannot travel if services are not being provided in the CBD. The HIV counselling component of SAMESH, available from Raj House on Hyde Street, will also be closing its doors because of a lack of government funding.

Across Adelaide, people who need access to sexual health services will be losing this access. Why? Those groups I spoke about earlier—the LGBTI community, young people and many others—may well choose not to access sexual health services at all. A judgement-free space of SHINE will be lost in the northern and southern suburbs—they will not want to go to their local GP, which may be their family GP—as will be their access to free bulk-billed sexual health checks for those under 30 and other communities of interest; they will just not be there.

As I indicated—and I am sure the minister has had advice on—many people in these vulnerable communities will not travel into the city to access similar services. Across the regions communities have lost access to important health services in this budget. At the round table we heard from advocates from the Cheltenham Place HIV refuge, who spoke about the importance of the service for regional people travelling to Adelaide for support in dealing with HIV and all the difficulties that that brings.

In the face of a brutal budget and its cruel slashing of sexual health programs, however, I am hoping that the government will reconsider its position. I left the round table on Monday with a sense of optimism, given the depth of feeling provided to us by the community advocates, because those people are not going anywhere. They are going to keep up the fight about these cuts, they are going to stand up for their communities and their needs. That fight has already begun.

As this motion notes, more than 350 doctors signing an open letter urging the government to reverse its funding cut and help keep SHINE SA clinics open is a first salvo. Those doctors come from a range of areas within the health sector. There is Dr Megan Brooks, the director of the emergency department at the Royal Adelaide Hospital; Dr Simon Kane, head of obstetrics and gynaecology at the Lyell McEwen Hospital; Dr Christine Lai, a senior clinical lecturer at the University of Adelaide; Dr Erin Oliver-Landry, from the Streetlink Youth Health Service in Adelaide and the McIntyre Medical Centre in Para Hills West; Dr Gabrielle Hart, a child and adolescent psychiatrist based in North Adelaide; and hundreds of other medical professionals, all united in condemning these cuts and calling on the government to reverse its position.

The letter touches on a topic on which I recently sought answers from the minister: the ongoing outbreaks of syphilis in South Australia. With the past several years seeing a report of congenital syphilis, ongoing outbreaks in regional South Australia, and now the spread of the outbreak to Adelaide, clearly we need more sexual health support in this state, not less.

The letter rightly points out that young people are often shameful or scared to access STI testing from their regular GP, and that the syphilis outbreaks are disproportionately affecting Aboriginal and Torres Strait Islander people. Medical experts understand the importance of SHINE SA services—that is why they wrote the letter. Advocates and community groups understand the importance of SHINE SA services—that is why they came to the meeting with the shadow minister on Monday.

Now it is time for the Minister for Health and Wellbeing, the Hon. Stephen Wade, to understand their importance too. So far, disappointingly, he has proven himself completely tone deaf on the matter. These deep cuts to sexual health services were announced on World Sexual Health Day. Just let that sink in: these deep cuts by this government to sexual health services in South Australia were announced on World Sexual Health Day, and now we debate this motion in the middle of AIDS Awareness Week, which is this week obviously, and just days away from 1 December, which is World Aids Day.

These occasions are designed for us to remember the huge and tragic losses suffered under the AIDS epidemic. They are a call to action to continue the fight to end HIV, and to support good sexual health around the world. This issue is a very personal one for me. I remember as a young community campaigner, when the AIDS epidemic was hitting, and we tried to unite the LGBTIQ community with one voice to go to government and say, 'We need help. We need the help of the government and the health services to consider this as a major health issue and increase the funding for it.'

It was not easy, it was a long road, but we did it. We talked to government at state and federal level. We communicated with the clinicians, and we came to the view that the best way of proceeding forward was to work together and have government funding dedicated to community organisations who could speak to these communities, provide the services they need, and stop people from getting infections and dying. I saw a graphic today on Facebook, which made me reflect. It was a graphic of the original San Francisco Gay Men's Chorus, and it showed seven members of that original choir still alive. The other 60 are all dead, all dead from AIDS. And that is because the government in America at the time was not engaging with the community and providing the services the community needed to understand about HIV, to learn about HIV and to avoid the infections.

We worked our way through that in this country and the government came on board. All governments, Liberal and Labor successively, state and federal, understood the importance of funding community organisations to give the information to these community groups that they needed. It is a sad day for me to be here in this place and debate an issue for which this state government is now withdrawing funding, and withdrawing that funding at a time of a syphilis outbreak for goodness sake. We should be putting more investment in prevention programs, not withdrawing it.

I am incredibly frustrated and I am incredibly sad that we are having this debate today. The Liberal government should take the advice of the clinicians who are telling them this was a bad, bad decision. We have to demand a higher standard of government. I say to the Minister for Health and Wellbeing: please reconsider. What we are asking you to do is to further reflect on this decision, and to think again about the dangers that these budget cuts put in place, and the dangers they will pose

for members of the community who will no longer get their testing, and who will no longer get the health advice they need to stay healthy and not be infectious and a danger to other people.

We are asking the Minister for Health to wrestle with the Treasurer and make him see sense that these small, paltry amounts of money in the overall health budget are vitally important in keeping people out of acute medical needs, and keeping them out of hospitals, which will cost us more. This small amount of funding is vitally important. Minister, there is no shame in listening to expert advice, and there is no shame in deciding that your original position was wrong, that you have seen the light and that you are going to reverse these budget cuts. I beg you to do so.

The Hon. I. PNEVMATIKOS (16:53): I rise today to speak about the invaluable work undertaken by SHINE SA and the need for immediate restoration of funding. I endorse the comments made by both the Hon. Tammy Franks and the Hon. Ian Hunter. I thank the Hon. Tammy Franks for raising this motion and pressing this matter with due urgency as it should be. Early in my working life, I was employed as a bicultural, bilingual caseworker at the Adelaide Women's Community Health Centre. I was part of a team of doctors, nurses and social workers who undertook a multidisciplinary approach to women's health, and we worked closely with SHINE SA, complementing each other's work and programs.

Clearly, SHINE SA performs an invaluable service to women in our community, because I have seen the difference they have made to so many in the community over the years. SHINE SA specialises in providing vital sexual health services, including clinical services, counselling, sexual health education, early intervention and health promotion. Their focus is on providing services for young people and vulnerable populations, and they often provide the services that are not easily accessible elsewhere.

Unfortunately, the Liberal government does not share my respect for SHINE SA and has cruelly cut funding, resulting in the potential closure of two health clinics, in Davoren Park and Noarlunga, as well as cuts to HIV counselling services in the Adelaide CBD. The impact falls deeper, as the loss of services will create complications for health partners who have worked with SHINE SA, as well as collaborators who have been using, referring to and working with SHINE SA to deliver accessible services to people in the north and south for over 40 years.

GPs, psychiatrists, physicians, paediatricians, emergency physicians, obstetricians and gynaecologists are all banding together against the cuts, with over 350 having signed a letter urging the government to reverse its decision. Their message has been unanimous. With the reduction of this health service, the state health service will no doubt see a measurable rise in STIs and unplanned pregnancies, which undoubtedly will place a further burden on the health system, which is already buckling under the pressure.

It is not just those in the medical profession who are concerned by this cut. In just two weeks, my colleagues and I have received support from over 500 electors who share our disappointment in these cruel cuts. Community advocacy has also garnered support from over 4,500 people who have encouraged the government to reconsider their funding cut and encourage incentives to ensure this does not recur, and have shared their disappointment in the targeting of the sites that have been selected for closure.

I would like to share with the Minister for Health and Wellbeing and his colleagues feedback on the closures that has been provided by Sam:

I grew up in the Barossa and SHINE Davoren was an essential service. Youth in the regions struggle with accessing medical services without parental interference already—having to go far as Woodville or the City will devastate the youth population.

The government cannot refuse to listen to the feedback from specialists in our state, to the increasing support from the community and to Sam, representing the voice and concerns within the community, and must resort funding to SHINE SA.

The Hon. K.J. MAHER (Leader of the Opposition) (16:57): I rise to support this motion and congratulate speakers who have made a contribution, in particular the mover of the motion and the Hon. Ian Hunter, who spoke with passion, expertise and compassion in relation to this issue. Sexual Health Information Networking and Education, or SHINE SA, has done, and continues to do.

invaluable work helping to protect the community from a range of sexually transmitted infections. Now the work that they do is in jeopardy.

We are better than this as a state and as a society. I am informed that SHINE SA provides the only rapid testing clinic for HIV. They have a non-judgemental service that takes around 20 minutes to test and provide counselling. What happens to the service if the scalpel is run over the budget of SHINE SA? What do these cuts mean for front-line services?

We have heard speakers talk about the Davoren Park clinic closure, the clinic at Noarlunga Centre being closed and the HIV counselling service component of SAMESH in Adelaide being closed. This is not just a way to save what is a very small amount of money. This is about real humans and real lives. Basic economics tells us that things that reduce harm or prevent harm, and education, will have proven impacts on our front-line health services.

Unfortunately, these are the same services the government has already cut and it makes no sense. For example, if one person contracts hepatitis C, it costs up to \$14,000 for a liver transplant, plus that person's life has been altered irreparably. Contracting hep C can also lead to chronic cases. Then there is the ongoing cost of medication, the disruption to life and family life, and a possible shortened lifespan.

On top of the cuts that the state Liberal government has made in health and these ones specifically, the federal government has, in recent years, made drastic cuts to our health system, so it is understandable that people are so concerned when services like this are abolished. What we are doing, in effect, is taking services from some of the most vulnerable in the community. We are taking from one budget line and then adding a larger figure to another budget line, which is putting more pressure on our hospitals. This makes absolutely no sense.

At the same time as the government is starting to cut nearly half a billion dollars from our hospital system, we are seeing these cuts at the preventative end. At the same time the government is seeking new innovative pathways for our health system, they are taking away things that will save money at the front end. It makes absolutely no sense.

We saw cuts with things like Service SA and now we are seeing them in our health system, but these cuts have a much bigger impact. These cuts could literally mean the difference between life and death and, particularly, quality of life. These are cruel cuts that we do not support. You do not have to take my word for it. You do not have to take the word of members who have spoken on this. You can take the word of 350 doctors who have signed a letter urging the government to reverse these important cuts in reproductive and sexual health services. The government must reconsider these cuts. They must understand the vital work that SHINE SA provides as a leader in this sector and they must help protect the community.

The Hon. C. BONAROS (17:01): I, too, rise to indicate wholeheartedly the support of SA-Best in relation to this motion. I would like to start by noting that Saturday is World AIDS Day, which is held every year to raise awareness across the world about HIV and AIDS. On Saturday, some of us might buy a ribbon or attend an event to commemorate the solemn occasion to show our support towards people battling HIV, as well as to honour those who have died of AIDS-related conditions or other conditions related to HIV.

It is against this backdrop that we come to debate the motion and the cruel cuts by the Marshall government to SHINE SA, forcing the service to close vital services. At the risk of repeating some of the statistics that have already been placed on the record, I would like to point to recent research from the Kirby Institute that shows that there were 963 new HIV diagnoses in Australia in 2017, the lowest number of diagnoses since 2010, with a 7 per cent decline over the last five years and a 5 per cent decline between 2016 and 2017.

HIV rates among heterosexual people have risen by 10 per cent over the five years to 2017. Sixty-one per cent of newly-diagnosed cases were males. In Australia, prevention strategies are mainly focused on homosexual men, who recorded a 15 per cent diagnosis drop in 2017 alone. New data has raised concerns about HIV among Aboriginal and Torres Strait Islander people, whose diagnosis rate is double the rest of the population. These are scary statistics. In addition, the Seventh National HIV Strategy 2014-2017 has lapsed, despite HIV/AIDS remaining a major health concern in Australia.

When the government points to efficiencies as a rationale for the cuts in funding to SHINE SA, I, on behalf of SA-Best, point to the lives of vulnerable South Australians who need care and support and who are living with HIV and AIDS. As we know, SHINE SA currently operates four clinics, which have been well canvassed today, across Adelaide, providing sexual health services and offering key advice about contraception and support to people with unplanned pregnancies and sexually transmitted infections. Many of the young members of our community do not have the ability or the luxury to go to the family GP and discuss these issues openly, particularly when other family members, most commonly parents, are involved.

I would like to provide some further statistics, firstly on chlamydia. Chlamydia notification rates increased substantially between 1999 and 2011, from 74 to 363 infections per 100,000 people. Since 2011, the rate increased slowly until 2016, when it reached a peak of 385 infections per 100,000 people. The rate for 2017 was slightly lower than for 2016, at 379 infections per 100,000 people.

Gonorrhoea notification rates have increased since 1996, most noticeably between 2008 and 2017, when the rate more than tripled from 36 to 118 notifications per 100,000 people. The rate of syphilis notifications has more than doubled between 2004 and 2017, from 10 to 26 notifications per 100,000 people. Before 30 September 2018, there were 2,300 cases of syphilis diagnosed: 1,184 cases in Queensland, 877 in the Northern Territory, 196 in Western Australia and 44 in South Australia; 15 are babies, with up to seven babies believed to have died from congenital syphilis.

In 2016, Aboriginal people were three times more likely to be diagnosed with chlamydia, seven times more likely to be diagnosed with gonorrhoea and five times more likely to be diagnosed with infectious syphilis when compared to non-Aboriginal people. It is clear that Australia is experiencing a syphilis epidemic, and the cuts to SHINE SA will only serve to enable rates of sexually transmitted infections to increase, particularly in some of Adelaide's most disadvantaged communities in the long term, and that is the direct result of the cuts that this government is proposing.

The Hon. Tammy Franks, the Hon. Ian Hunter, the Hon. Kyam Maher and the Hon. Irene Pnevmatikos have outlined in detail the tremendously important work and services provided by SHINE SA. They have, I think, also set the record straight in relation to a number of important issues that SHINE SA has outlined very succinctly for us in response to the decision to close clinics, but particularly also in response to some of the comments that have been made by the government.

As we have heard, those concerns have been echoed by the AMA SA and other stakeholder groups, but also by those 350 doctors that we have just heard the Hon. Kyam Maher refer to. At the risk of repeating what the AMA has said, I would like to refer to a media release in which Professor William Tam says:

'We are calling on the State Government and Health Minister Stephen Wade to continue to fund these essential community services at SHINE SA.'...

'The new State Government has shown leadership in health for children and young people by funding meningococcal vaccinations to protect them from this devastating disease—

this is a matter that is very dear to me, and I am extremely grateful that the government has taken a very important step—

But STIs and unplanned pregnancies can also have huge repercussions on young people's lives and health.'

'SHINE SA provides tremendously important services to people who are often in extremely difficult circumstances. SHINE clients are also often victims of abuse, seeking a safe place for help and support, testing and counselling...

'We believe the Government has not realised the impact this cut would have, and we are urging it to review its decision. If not, we fear the results: an increase in rates of sexually transmitted infections; a rise in unplanned pregnancies; a loss of counselling services for LGBTI youth, which may be seriously detrimental to their mental health; and a lack of access to PrEP and PEP (HIV prevention)—running contrary to the federal government's goal of virtual elimination of HIV transmission by 2020.

In closing, the release, attributed to Associate Professor William Tam, says:

The clinic closures would also lead to an increase in the use of hospital outpatient clinics for long-acting contraception (eg IUD insertion), as well as for reasons such as pelvic inflammatory disease due to untreated infection,

pelvic pain, etc. Senior obstetricians and gynaecologists have told us how frequently they refer patients to SHINE for information and treatment because of its easy access and prompt specialised services, which are bulk billed. For those most at need this can make all the difference.

SHINE reduces the burden on the public gynaecology outpatient departments, by providing sought after GPs who are motivated and skilled in this particular aspect of women's health, under one banner. Removing these clinics will remove services from socially disadvantaged groups in the north and south who will now be isolated by distance from these services. This would be detrimental to the community and state as a whole, as well as those directly affected

I do not need more convincing than that, Mr President. For what it is worth I think those we ought to be listening to are not the bean counters but those in the know, the doctors in the know, and particularly the AMA (SA), that we so often refer to for advice and which advice we often quote in this place as being so important to decisions we make.

I would like to close by saying this: to put it simply, as others have done, we cannot afford to see these cuts come to fruition. On behalf of SA-Best I too would like to urge the government to follow the Prime Minister's lead in acknowledging when they have it wrong. Just two weeks ago we saw the Prime Minister fully acknowledge that he had it wrong in relation to Foodbank funding, and that decision was promptly reversed and the funding reinstated—and it was reinstated because the government simply cannot afford to lose such a valuable service.

Our position is that we cannot afford to do the same here, in relation to SHINE SA. We urge the minister and the government to reconsider their position. In so doing I personally echo the sentiments expressed in this place by other honourable members.

The Hon. J.A. DARLEY (17:12): I rise very briefly to say that I will be supporting the Hon. Tammy Franks' motion. I have always believed that prevention is better than cure, and funding early intervention programs should be prioritised as, ultimately, they cost the taxpayer less. Cutting these services could lead to an increase in sexually transmitted infections.

There are some infections that are asymptomatic, and people may not be aware they carry an infection until damage has been done to their reproductive system. The government should seriously consider whether it is worthwhile saving a dollar up front if they will have to spend hundreds of dollars down the track.

The Hon. S.G. WADE (Minister for Health and Wellbeing) (17:12): I move:

That the debate be adjourned.

The council divided on the motion:

AYES

Dawkins, J.S.L. Hood, D.G.E. Lee, J.S. Lensink, J.M.A. Lucas, R.I. Ridgway, D.W. Stephens, T.J. Wade, S.G. (teller)

NOES

Bonaros, C. Bourke, E.S. Darley, J.A. Franks, T.A. (teller) Hanson, J.E. Hunter, I.K. Maher, K.J. Ngo, T.T. Pangallo, F. Parnell, M.C. Pnevmatikos, I. Scriven, C.M. Wortley, R.P.

Motion thus negatived.

The Hon. S.G. WADE (Minister for Health and Wellbeing) (17:17): By way of preface to my speech, I express my disappointment as a member of this council at such a low bar that the council is setting so early in its term. It has been a longstanding expressed view of the crossbenchers that they do not want to be rushed with matters, that they would like to consider motions and bills in an orderly manner.

For this motion to have been moved yesterday, for us to be given notice last night that it was to be brought forward to debate and for the express request of the government that it be considered next week is very disappointing. I remind honourable members on the crossbench that that is the standard they have set. I certainly agree with the statements made that sexual health is important. Sexual health is too important to be rushed through without due consideration.

I want to acknowledge at the beginning the contribution that SHINE SA has made to the sexual health of South Australia since 1970 and in particular pay my respects to the recently deceased Ms Kaisu Vartto, the former chief executive of SHINE SA and a tireless advocate for family planning in this state over many years. I would also like to acknowledge the letter from medical practitioners, raising concerns about the funding changes. This government welcomes input from health professionals and health consumers and we respect their view.

I encourage all doctors to take up the opportunity to work with SHINE SA. They provide relevant, welcoming and supportive clinical services to communities wherever they may be. This includes a range of services. The community should be reassured that a significant portion of SA Health's \$4.5 million annual grant funding contract with SHINE SA is to provide education and training in clinical sexual health services to GPs. This is so GPs across South Australia are supported to provide sexual health services to their communities, whether that be prescribing contraception, inserting IUDs or testing for STIs.

I acknowledge the work that has been done by SHINE SA in terms of workforce development earnings. They have increased by 300 per cent since 2015-16. SA Health's funding is being increasingly focused on workforce development, and it is our view that one of the ways that SHINE SA can ensure that services will be maintained is by amplifying its impact by developing the capacity of the health workforce.

Another area where SA Health and the government are of the view that SHINE SA can continue to develop its revenue and therefore maintain its services is in relation to Medicare Benefits Schedule billings. SA Health expects SHINE SA to increase their budget through maximising MBS billings for primary care services and to build the capacity of GPs and nurses to deliver sexual health services through its function as the provider of sexual health workforce development across the state.

In the context of MBS billings, SHINE SA introduced MBS billing in 2014. I think I have a slightly different date from that of the Hon. Tammy Franks, but it is around that period. MBS clinic earnings have increased every year since then; in fact, they have increased 167 per cent since 2015-16. SA Health and the government welcomes the way that SHINE SA has engaged in that revenue stream. It is our view that the Medicare revenue can be further increased, and we urge SHINE SA to do so.

From next year, pending procurement approval, SHINE SA will receive annual funding of \$4.45 million for core services. SHINE SA will continue to provide a targeted HIV prevention program. In addition, the government invests almost \$800,000 per year for the targeted HIV and STI-prevention SAMESH program. Overall, SA Health's total funding to SHINE SA has increased by \$750,000 since 2012-13.

In relation to the recent budget, I met with executive staff from SHINE SA on 26 October in what I thought was a productive meeting. I advised SHINE SA that the government is committed to its budget. I also advised SHINE SA that I do not agree with their decision to close the clinics in the northern and southern suburbs of metropolitan Adelaide and urged them to review their priorities in order to meet the needs of community members in those areas. I stress that the department and the government did not request or suggest that SHINE SA close those particular clinics.

We agreed to work closely with SHINE SA on a range of related matters, including meeting the health needs of international students. In addition to maximising alternative funding sources such

as MBS billing, transition priorities will include supporting clients to access primary care services and enhancing the sexual health workforce development for primary care providers across South Australia. SA Health advises that the rates of sexually transmitted infections and unplanned pregnancies and an increase in the use of hospital obstetricians and gynaecologists are multifactorial and cannot be attributed to SHINE SA or to funding changes alone.

In relation to the decision to close particular clinics, I would call on SHINE SA to reconsider its decision. If SHINE SA believes that there is significant need for services in the northern and southern suburbs, which is certainly my view, it makes no sense that they would close those two clinics and keep two centrally located clinics open. The northern suburbs and the southern suburbs are areas of particular need. I reiterate the fact that similar services interstate are operating more efficiently, and we believe that SHINE SA can derive more revenue from Medicare to fund its services and more revenue from fee-for-service and education programs.

All health services need to continually strive to be more cost effective and SHINE SA is no exception. In that context I indicate to the council that there was another organisation that had a similar funding change to that of SHINE SA in this budget, and instead of withdrawing from the northern suburbs they took the opportunity to base their services in libraries. I would urge SHINE SA to be creative in terms of maintaining services. It is certainly the view of the government that with a range of strategies they can maintain services and in particular services in the north and the south.

I will take the opportunity to respond to some of the comments made by members in their contributions earlier. In relation to the Hon. Tammy Franks' comments about my comments in relation to 50 per cent of clinics, the Hon. Tammy Franks kept referencing 50 per cent of services. I never claimed that SHINE SA was reducing 50 per cent of services. In relation to her comments about the number of episodes of care by the Victorian organisation compared with the South Australian organisation, that is exactly why these sorts of debates are best held in an orderly fashion so that the government can look at the assertions being made and respond in a timely fashion.

The Hon. Ian Hunter posed the question as to whether there was an ideological agenda in these funding changes. I just ask the honourable member: when the former Labor government reduced health promotion funding by two-thirds since 2012, was that ideological? When the former Labor government cut funding to SHINE SA by 6.9 per cent in 2012, was that ideological? When the former Labor government cut funding to SHINE SA by 5 per cent in 2017-18, was that ideological?

In closing, I urge SHINE SA to reconsider the decisions it has made in the context of the budget. Whether it is the Central Local Adelaide Health Network or other providers such as MOSAIC, the fact of the matter is that all health services need to continue to strive to be sustainable so that South Australians continue to get the services that they need.

The Hon. T.A. FRANKS (17:27): I rise to thank those members today who have made a contribution to what I think is a very important and urgent issue: the Hon. Ian Hunter, the Hon. Irene Pnevmatikos, the Hon. Kyam Maher, the Hon. Connie Bonaros, the Hon. John Darley and the minister, the Hon. Mr Wade.

I reflect particularly on minister Wade's remarks. Certainly the minister has been out there in the media stating that 'SHINE SA has lost 9 per cent of its funding but closed 50 per cent of its clinics.' None of those quotes ever went on to say that that of course is not 50 per cent of its services, and the very point that I was making the minister has just highlighted himself by pointing out that the clinics are simply one fraction of the services that SHINE provides.

I note that SHINE SA has experienced successive funding cuts since 2012 to the SA Health core grant equivalent to a 30 per cent decrease in funding over eight years. That now represents a loss of funding in real terms of \$1.5 million per year from the year 2020 onwards. Over this time SHINE SA has implemented MBS billing which is now approximately \$650,000 per year. However, MBS billing does not fully fund SHINE SA's clinical services given the level of disadvantage and complexity of clients who are referred to them by GPs and other government health services, and of course that the revenue was already offsetting previous years' cuts.

These are cuts that the minister should have been ready, willing and able to debate today because they are not cuts that the opposition created or the crossbench created: these are the cuts

of the Marshall government, which the Marshall government has been out spruiking since September.

We have heard in the other place this week of a minister having a tin ear and being unwilling to properly consult. The minister's response to SHINE SA to 'get creative' concerns me. I think the minister needs to get consultative, to lose that tin ear and to meet with Dr Erin O'Connor of those doctors who have signed that open letter, giving minister Wade not just a second opinion but a 350th opinion, because Dr Erin O'Connor is easily accessible on Twitter—she has just started following me—and she has noted that she has yet to hear from the minister with regard to those 350 doctors who have expressed their concerns. If you do not believe this council, perhaps if you met these doctors you might actually believe them.

These cuts are a folly; they are a small amount. There is the ability for the Marshall government to reverse these cuts, with barely blinking an eye, but they will have a profound impact on people's lives if they are not reversed. With those words, I thank members for their indulgence and for recognising this issue with the importance it deserves. I again urge the minister to reconsider these cuts.

Motion carried.

ADELAIDE OVAL HOTEL DEVELOPMENT

The Hon. I.K. HUNTER (17:31): I move:

- That a select committee of the Legislative Council be established to inquire into and report on a redeveloped Adelaide Oval, with particular reference to:
 - (a) the economic and financial benefits of the redevelopment of Adelaide Oval, including to whom the benefits are accruing:
 - (b) the operations and financial management of the Adelaide Oval;
 - (c) the corporate governance of the Oval, including the Stadium Management Authority;
 - (d) the financial returns to the South Australian National Football League, the South Australian Cricket Association, and the Adelaide and Port Adelaide football clubs;
 - (e) the financial contributions into the Oval infrastructure and into the broader sporting community from the Oval's operations;
 - (f) the proposed hotel development at the Adelaide Oval, and the process by which the government considered the proposal and approved financing the proposed hotel development;
 - (g) the impacts on the hotel industry in Adelaide of the proposed hotel development;
 - the legislative, regulatory and other legal frameworks governing the operations of the Adelaide Oval, and any opportunities for improvement;
 - the impact of the Oval and its operations on the surrounding Parklands and the legislative, regulatory and other legal frameworks governing further development in the Parklands; and
 - (j) any other related matters.
- That standing order 389 be so far suspended as to enable the chairperson of the committee to have a deliberative vote only.
- That this council permits the select committee to authorise the disclosure or publication, as it sees
 fit, of any evidence or documents presented to the committee prior to such evidence being
 presented to the council.
- 4. That standing order 396 be suspended to enable strangers to be admitted when the select committee is examining witnesses unless the committee otherwise resolves, but they shall be excluded when the committee is deliberating.

This select committee is necessary, I believe, to investigate the operation of the Adelaide Oval, as well as the provision of a \$42 million taxpayer-funded loan to the Oval's Stadium Management Authority for the construction of a hotel at the Oval.

It is clear that the redevelopment of the Oval has been a tremendous success; I do not think anyone would argue with that. Since the first test was played in late 2013 and the first game of AFL was played in March 2014 we have seen record crowds. In 2014, the first year of the redeveloped oval, the total crowd figure at the ground for Port Adelaide and Adelaide games was over one million, an average of over 46,000 people per game—a massive increase from Football Park's last year, in which attendance totalled 666,808, with an average of just over 30,000.

These crowds, to both the Adelaide Crows and Port Power home games, have significantly exceeded the financial model, I am advised, which estimated what was necessary for a redeveloped oval to be a success. Similarly, record crowds have been achieved for test cricket matches, and the huge success of the Adelaide Strikers has also meant record crowds attending to watch those cricket matches.

Concerts have pulled huge crowds, including one of your favourites, sir, AC/DC, the Rolling Stones and Adele. These are only a few of the extraordinary number of events scheduled at the Oval since 2014, although in my humble opinion none of them compare to Madonna's fantastic concert performance at the old Adelaide Oval.

It is clear that the Stadium Management Authority, created to manage the operation of the Oval, has control of not just the best oval in the country but also what clearly should be a massive money-spinner for us. As we have heard, they have also invested in the Adelaide Oval Roof Climb, the Bradman museum and the new cafe at Telstra Plaza, and this will undoubtedly be positive. Speaking of which, I am advised they have also received multimillion dollar sponsorship from Telstra of their plaza fronting the footbridge.

For its part, on top of the \$535 million provided for the redevelopment, the government has regularly funded confidential inducements to attract events and concerts to the Adelaide Oval, and provided free public transport services to AFL matches, in conjunction with two AFL teams and with minor contributions, I am advised, from the SMA and the SANFL.

Despite all of this, we are now told that a new hotel must be built at the Oval to generate more revenue for the SMA to invest in oval infrastructure. The SMA is claiming they do not earn enough revenue from the current operations of the Oval. That is a surprise, to me at least, because the Oval charges about \$9.50 for a beer, \$6 for a soft drink and over \$5 for a bottle of water. I understand, as is frequently reported in the local paper, that this compares very unfavourably to the rest of the country—in fact, we are one of the highest.

So you have to ask: where is all the money going? Who is getting the benefit of this oval? It certainly does not seem to be the two AFL clubs or even the SACA. But, most importantly, it does not seem to be the punters either. In South Australia, the Adelaide Football Club and Port Adelaide Football Club are very well supported by hundreds of thousands of fans who each pay their own hard-earned cash to become members of these clubs and support these clubs financially. Quite rightly, many of these supporters expect that the money they spend at Adelaide Oval contributes to making their club as strong as possible on and off the field and, in a bipartisan way, to making sure that the fantastic Port Power win every home game they play over the next 12 months.

The Hon. T.J. Stephens: Dream on-delirious!

The Hon. I.K. HUNTER: Thank you, Terry. You are biased on this matter. I understand and I will accept that. But where is the money going that should be supporting the infrastructure for anything that needs to be done at the Oval into the future? It is a question that needs to be explored. What about the SANFL? How much are they taking from the Oval? Are they getting their fair share? I suggest that a committee is needed to look at some of these detailed questions.

Another question that needs to be thoroughly explored is whether the Oval is being run as efficiently as possible. What are the administrative overheads? Are they reasonable? Is the government's structure or the SMA conducive to ensuring that financial returns are maximised to those that the parliament sought to assist in approving the \$535 million for the redevelopment—the Crows, the Power, and SACA?

One area I am particularly concerned about is the lack of consideration that this government and indeed the SMA, on the face of it at least, seem to have for our other restaurants, hotels and

CBD venues. You see, what the hotel is asking us as a parliament and as a government to do is, I suggest, a potential risk, because it could be moving visitors out of the CBD into an isolated pocket where visitors will not engage with the businesses already established throughout the city in Grote Street and Gouger Street, and with the bars in streets through which people would normally walk to get to the Oval and back to their accommodation. They will not need to do any of that if they are closeted down at the Adelaide Oval. They can stay there and they will not need to move to the restaurants in North Adelaide, or walk up Peel Street to have a drink at one of our bars or to go to a fantastic Gouger Street restaurant.

I am not sure if we have actually thought this through. When a group comes over from Melbourne to watch the footy and stay in the CBD, they do not just pay for their hotel and a beer at the footy which is, as we have heard, one of the highest in the country. They might go out and enjoy what other venues in the city have to offer, spend a few dollars in a local venue and help employ South Australians in those venues. And, if they are supporting a Victorian team against the Power, then they will be also be spending a lot of money drinking their sorrows away.

This means more tourists, more income and more revenue, which fundamentally means more jobs for South Australia in a vibrant CBD. What does building a hotel down at the Oval do to that? I am very concerned about that. It is not something that has been canvassed and I think it is something that this committee, if it is supported by the council, should have a close look at.

The Premier, I understand, has claimed that in granting this \$42 million loan to the Stadium Management Authority we are essentially levelling the playing field. I just cannot comprehend how he could run that argument. He is giving, in essence, a loan to an organisation to set up a competitor to the rest of the businesses in Adelaide. He is giving favoured position to a hotel to be established on the site which will fundamentally compete with other businesses that have to go out to the banks and ask for a loan to increase and improve the operations of their business. How is that levelling the playing field? I just do not understand.

Hoteliers, businesses, restaurants and cafe owners have invested their own capital in constructing and improving hotels and their venues, with a view to attracting interstate and overseas to attend matches at the Oval and enjoy the local hospitality. How will a state-owned, effectively, hotel down at the Oval affect the prosperity and viability of those ongoing businesses and the jobs they provide for South Australians?

I do not think much reflection has happened about that fundamental question. If it has, I would like to be told about it. Did this hotel get the exclusive stewardship and access to profit-making enterprises that the Stadium Management Authority did when they got the keys to a brand-new \$535 million best-in-the-nation stadium? Is that an inducement that is being offered?

Members interjecting:

The PRESIDENT: Can honourable members cease having a conversation? I would like to listen to the Hon. Mr Hunter.

The Hon. I.K. HUNTER: Why did the Stadium Management Authority need a \$42 million loan from the Liberal government for the construction of this hotel? Did they not ask their bank for a commercial loan first? If they did, were they knocked back? If so, why were they knocked back? Can a bank not look at the financials of the SMA and their operations and see that it is profitable enough for them to be able to make the necessary loan and for the SMA to make the loan repayments?

If a bank cannot see that the SMA can make the loan repayments, then how can the taxpayers expect that? It is a question, I think, that bears a little more examination. How can taxpayers be expected to fund a loan to an organisation that cannot get a commercial loan on the basis of its ongoing business? That is a question that needs an answer.

Parliament also needs to understand how this loan was arranged. Who asked for it? Who exactly approached the government and asked for this loan? Were correct probity procedures put in place to ensure actual or perceived conflicts—

Members interjecting:

The PRESIDENT: The Hon. Mr Hunter, just hold it there for a moment. Can the minister and the Hon. Mr Wortley cease engaging in repartee? It is not witty, and I would like to listen to the Hon. Mr Hunter give his important speech seeking an examination into a potential state asset. The Hon. Mr Hunter, please continue.

The Hon. I.K. HUNTER: Thank you, Mr President, for your protection. Were correct probity procedures put in place to ensure actual or perceived conflicts were handled appropriately and dealt with adequately? Why was this all hush-hush until it was leaked on Saturday night to Channel 7?

Another aspect which I think is worthy of exploring is the impact of the Oval and its operations on the surrounding Parklands. There is not another city in Australia, and very few in the world, that can boast this green ring of parklands and trees around their CBD, a ring that is open to all South Australians for recreation, for a picnic, for a jog in the morning or to walk their dog.

Any development in the Parklands must be carefully considered. I am not saying that there are not appropriate developments in the Parklands, but we cannot just hack away at sections of the Parklands for the enjoyment of a few wealthy citizens. We need to consider how those developments in the Parklands will benefit everybody, if they do. If they do not, we should seriously consider whether they should go forward.

I am not educated in the law as you are, sir, but I think there are significant legal questions regarding this proposed hotel. Is it actually legal? Will there need to be changes to the legislation to allow it to go forward? Does existing legislation prevent it from being built now? I think it may well do, but we need further advice about that.

The Hon. D.W. Ridgway: Thank god you're not a lawyer.

The Hon. I.K. HUNTER: Indeed, thank god I am not a lawyer. I was just a humble cancer researcher a long time ago, who came into this place and now relies on other people with legal background to give me that advice, but we do not have it. We do not have it and I am asking this council to allow a select committee to find out.

It is vitally important that the legislative and regulatory framework governing the operations of Adelaide Oval are fit for purpose. This select committee will allow us to explore whether any updates are needed and whether they are in the state's best interest. After the first five years of the redeveloped Adelaide Oval, I think it is an appropriate time for us to set up a select committee to inquire into these matters. I look forward to the support of honourable members for the establishment of this important select committee and the important work that it will do in the future.

Debate adjourned on motion of Hon. T.J. Stephens.

DRUG AND ALCOHOL TREATMENT SERVICES

The Hon. C.M. SCRIVEN (17:45): I move:

That this council—

- Notes that a recent federal fund for drug and alcohol treatment services is not open to services in the South-East of South Australia;
- 2. Expresses its dismay that the South-East has been excluded from the opportunity to apply for this federal funding;
- 3. Calls on the South Australian health minister to stand up for the residents of Mount Gambier, Millicent, Naracoorte, Bordertown and the rest of the South-East and demand from his federal Liberal counterpart that the South-East not be abandoned; and
- 4. Calls on the South Australian health minister to demand that the federal Liberal government reverses its decision to disregard the South-East and opens the applications process to the South-East, including extending the deadline for applications beyond the current date of 20 December 2018, if necessary.

On 23 November, Mr Greg Hunt, the federal Minister for Health, announced a \$20 million fund to boost drug and alcohol treatment services in South Australia, particularly in regional and rural areas. He states that this is so 'people struggling with alcohol and drug misuse can receive the right treatment in the right place at the right time'.

However, it seems that, if you are in the South-East of South Australia, you are not in the right place at the right time. Apparently, the South-East is not an area of need, despite well-documented issues with drugs and alcohol and, in particular, crystal methamphetamine, known as ice. Ice has become a particular focus because its severe impacts include psychosis and violent erratic behaviour. This is damaging for the person who is using ice, but it is also devastating and often terrifying for those around them—their families, friends and neighbourhoods.

It is important to note that there is not a one-size-fits-all solution to these serious problems. The most effective approaches are tailored for the particular needs of the individuals concerned. Some people certainly benefit from residential rehabilitation services and one of the outcomes of the former state Labor government's Ice Taskforce and Stop the Hurt strategy included residential rehabilitation services in regional areas, including in Mount Gambier. For other people, counselling is effective and sufficient. Other options include non-residential rehabilitation, inpatient withdrawal management and psychosocial counselling interventions.

It is important to note that ice is not the only issue in Mount Gambier, or elsewhere. Alcohol, cannabis and opiates are also prominent problems. The federal fund is for drug and alcohol treatment services, which are important and to be commended, but we are told that the South-East is not an area of sufficient need to justify being included in this fund. Local substance abuse services have queried how that determination was made. They asked whether wastewater testing was a large determinant because their understanding is that alcohol and cannabis are not part of the wastewater testing regime.

The people trying to provide services to address the serious issues of substance abuse, the people working with affected people every day, know there is a very high need in our area of the South-East. There will be those who try to politicise this issue and play the blame game and I think that is unfortunate. This is a community issue and we can only address it by working together.

I believe I can acknowledge the many good initiatives the former Labor government achieved yet still be more than willing to acknowledge that there is much that still needs to be done. For example, information provided to me is that South-East drug and alcohol workers have an average of 35 clients in their case loads at present, with waiting lists. I am told there are only five spots left for the whole Limestone Coast until mid-January and that there are not enough staff to do mandatory intervention drug and alcohol assessment reports for DCP clients, but because these are mandated and must be seen, other people miss out.

Workers tell me that seeing seven people per day on average does not leave time for preparing for clients, writing reports and forwarding referrals or letters to doctors and lawyers, and so on. There are three to five new referrals a week from the community, not including mandated or hospital referrals. They report that hospital rounds are not happening and that drug and alcohol clients in hospital are not getting their service. I am told there are only two GPs in the Limestone Coast who prescribe opioid or heroin substitution and that there is a waiting list to get onto the methadone program.

Given this information, local residents of Mount Gambier, Millicent, Naracoorte, Bordertown and elsewhere in the South-East would hope that the federal member for Barker, Mr Tony Pasin, would stand up for them and demand funding for our area, but they have been sorely disappointed. Instead of advocating for better services, he has launched a political tirade. No-one gains by such political games, and it is deeply saddening that he prioritises game playing over serious health issues such as substance abuse. Indeed, his wriggling became quite ludicrous, if he was correctly quoted in today's *Border Watch* newspaper, which stated:

...Mr Pasin noted the funding opportunity did not exclude Mount Gambier-based organisations from applying, proving their proposal delivered increased services to an 'area of need'.

What this doublespeak means is that South-East-based service providers can apply for funding as long as it is not to deliver services in the South-East. This is not much use to people in the South-East affected by substance abuse. This type of community issue should be one that we work on together. That is why, in this motion, I am calling on the South Australian health minister to demand that his federal Liberal counterparts reverse the decision to exclude the South-East from this funding.

We in the South-East know it is an area of need, and our communities need the support this funding could provide. I commend the motion to the chamber.

Debate adjourned on motion of Hon. D.W. Ridgway.

WIND FARMS

Adjourned debate on motion of Hon. C. Bonaros:

That this council—

- Notes that a decision on Neoen's development application for a significant wind farm of 26 turbines standing 240 metres high at the proposed Crystal Brook Energy Park will soon be made by the state government;
- Acknowledges that, according to new guidelines for Europe published by the World Health Organization, wind turbines can cause health problems if they result in people being exposed to excessive noise levels;
- 3. Further acknowledges that a Supreme Court-ordered report on the Bald Hills wind farm in Gippsland, Victoria, found there was a nuisance under the Public Health and Wellbeing Act despite the wind farm being compliant with state planning laws;
- 4. Further notes that a class action lawsuit is now being prepared by local residents against the South Gippsland council, the Victorian government and the wind farm operator following the independent report;
- Recognises that the core objective of the Environmental Protection Authority's 'Wind farms environmental noise guidelines' is 'to balance the advantage of developing wind energy projects in South Australia with protecting the amenity of the surrounding community from adverse noise impact';
- 6. Further recognises that the most recent State of the Environment Report (2013) by the South Australian EPA reported on the increase in noise complaints from existing wind farms, yet there has been no change to monitoring and compliance requirements; and
- Calls on the government to place an urgent moratorium on approval or construction of any new wind farms until an independent full and thorough review is undertaken and an updated planning and compliance regime is implemented.

(Continued from 24 October 2018.)

The Hon. I.K. HUNTER (17:54): I rise on behalf of the opposition to indicate that we will be opposing this motion. We do so because we, on this side at least, prefer evidence-based policy that is employing the best scientific evidence available in the formulation of policy over a call for a moratorium.

In speaking to the motion, the Hon. Connie Bonaros relied heavily on the World Health Organization's Environmental Noise Guidelines for the European Region, published earlier this year. Throughout her contribution the honourable member made a series of claims about the contents of the World Health Organization report, stating that the report 'recommends that exposure to wind turbines should not exceed 45 decibels over a 24-hour period'.

What the honourable member did not reflect on in her contribution was that all the report's recommendations with regard to wind turbine noise were highly conditional. The report makes consistent references to the low quality and unreliability of evidence available on the impacts of wind farm noise. At page 80, on the potential for cardiovascular disease, evidence assessed is described as 'very low quality', and the report states, at page 81, that evidence associating wind turbine noise and annoyance is 'rated low quality'. At page 82 the report states:

no studies were found, and therefore no evidence was available on the relationship between wind turbine noise and measures of cognitive impairment; hearing impairment and tinnitus; and adverse birth outcomes.

All this was clearly important to the World Health Organization in making their recommendations. In making their recommendations on a limit to wind farm noise, they clearly labelled them as 'conditional', precisely because unreliable or low quality evidence was all they had available.

The motion before us suggests, in my view, that the World Health Organization is sounding the alarm over the health risks of noise from wind farms. With greatest respect, I submit it is not.

Instead, the World Health Organization makes clear, time and again, that there simply is not enough quality evidence to back up claims relating to the health risks of noise from wind farms.

However, I contend there is an abundance of high quality evidence on the benefits of wind energy to our community, our nation and our planet. The Clean Energy Council reports that in 2017 33.8 per cent of Australia's clean energy was generated by our wind farms—and, as is often the case in these matters, particularly with renewable energy, South Australia is once again leading the way. A report published in November 2017 by the Australian Energy Market Operator stated that in the 2016-17 period, 39.2 per cent of energy generated in our state was from wind.

Wind farms are part of a movement away from fossil fuels and harmful energy generation practices toward the clean energy future. South Australia is proud to be at the forefront of this transition, and I believe rightly so. The claims of serious health problems arising from wind farm noise have not been proven. In 2014 the Australian Medical Association took a public position on wind farm noise, stating:

the infrasound and low frequency sound generated by modern wind farms in Australia is well below the level where known health effects occur, and there is no accepted physiological mechanism where sub-audible infrasound could cause health effects.

Let me read that part again: 'there is no accepted physiological mechanism where sub-audible infrasound could cause health effects'.

The Hon. Connie Bonaros is right that as technology develops further and innovations are made, wind farms are getting larger, generating more electricity, powering more homes, businesses and communities. It is, of course, integral to the role of a member of parliament to assist constituents who have concerns about developments in the area, and to support them in reporting and recording those concerns. It is integral to our work that we take up those cases and explore them as best we can with the authorities available to us.

However, even the report of former prime minister Tony Abbott's National Wind Farm Commissioner, published in March this year, reported that since November 2015 only seven reports have been received about proposed wind farm developments in South Australia. In that same period—more than two years—only 17 complaints had been received about operating wind farms in South Australia. The commission's report stated:

despite numerous invitations to complainants to provide evidence of their medical conditions, complaints regarding health concerns received by our office have provided only anecdotal evidence regarding stated health issues and perceived causality.

The community at Crystal Brook clearly have concerns about the proposed development, as the Hon. Connie Bonaros has outlined, and it is really important that those views and concerns of the local community are listened to by the developer, Neoen Australia, and the State Commission Assessment Panel.

The Advertiser has reported that the panel has met with community members and has heard their submissions, while I am advised that Neoen has halved the proposed number of wind turbines in response to community concerns. However, the community also needs to have full and accurate information at its disposal, not half-truths, not conspiracy theories often peddled by climate change deniers in Canberra and the fossil fuel industry. Residents should be informed about the facts of these kinds of wind farm developments. In my view, calling for a moratorium on the approval of construction of wind farms is absolutely the wrong approach to take.

Flinders University scientists are currently conducting a five-year study on the impact of wind farms on health and sleep, and I understand the government is looking at reviewing the EPA's guidelines on wind farm noise, and that is for the government to advise us on. Considered responses to community concerns backed up by the best available science, I believe, is the only sensible way to go about this. For these reasons, the opposition will not be supporting the motion today.

The Hon. M.C. PARNELL (18:00): I am yet to meet a single person who does not profess to agree that we need a cleaner, greener, more sustainable and a fairer world. If there is such a person who is genuinely happy to hand over a trashed planet to their children and grandchildren then I have not met them. Protecting the environment, living more in harmony with nature, caring about

social justice and future generations are all universal values, and everyone says that they want them. So what do we do?

This motion asks us to stop or slow down one of the most effective and efficient forms of renewable energy available. It asks us to put the brakes on one of this state's most important and growing industries that is part of the solution to climate change rather than part of the problem. The Greens are absolutely opposed to this ill-conceived call for a moratorium on new wind farms, and here is why.

The world is facing a climate emergency. It is now beyond all doubt that human-induced climate change is having a profound effect on our planet. It is changing the environment irretrievably and it is sending species extinct. Climate change risks the world's food production capacity and it impacts hardest on the poorest communities with the lowest resilience. Climate change is also increasing the frequency and severity of extreme weather events, which affect us all.

This climate emergency is an existential threat. It is indeed, as others have said, the greatest moral challenge of our time, but thankfully there are things that we can do. We have the knowledge, we have the technology and we have the overwhelming bulk of the community on side. If we have political will, we can take real and effective action to address climate change and to minimise the harm that it will cause to people and the environment on which we all depend.

One of the most important areas identified for action is to reduce our reliance on fossil fuels. The lowest hanging fruit is to change the way that we generate electricity. That is exactly what South Australia has been doing, and we need to do more of it. Putting the brakes on the development of renewable energy in this state is absolutely the wrong way to go, and the Greens reject it. In rejecting this motion, I want to delve a little deeper into the rationale for the motion and the evidence that has been relied on.

I have received a number of submissions from stakeholders, and I want to put those on the record. The most important stakeholder is the Clean Energy Council, which represents the entirety of the renewable energy industry, including wind, solar, batteries, pumped hydro and all of the other forms of electricity generation that are helping to reduce climate change. I received a submission from Kane Thornton, the CEO of the Clean Energy Council, which states:

Dear Mr Parnell,

...I am writing with regards to a motion that was tabled in the Legislative Council on 24 October by SA-Best member, Connie Bonaros MLC, advocating for a moratorium on wind farm developments in South Australia.

This motion is based on a poor interpretation of the relevant information and it seeks to undermine public confidence in the robust planning and environmental controls already in place for wind farm developments.

Ms Bonaros' statement to the Legislative Council cites a number of concerns regarding the size of turbines proposed for the Crystal Brook project, a recent World Health Organisation...report, a class action at Bald Hills wind farm in Victoria, and the EPA's 2013 State of the Environment Report. The Clean Energy Council does not consider that these matters provide evidence as to why a moratorium or a review of the state's wind farm planning and compliance regime should be necessary.

There are stringent planning and environmental policies and regulations in place in South Australia, developed over many years, which govern the way that the wind industry develops its projects. South Australia's noise standards for wind farms are already amongst the strongest in the world and are in line with the noise limits conditionally recommended by the WHO's Environmental Noise Guidelines for the European Region (2018). These standards apply to every wind farm, regardless of the number of wind turbines or their megawatt capacity.

Further, the WHO's Guideline Development Group found no studies available with respect to cardiovascular disease, cognitive impairment, hearing impairment or tinnitus. The only available evidence for the health impacts of wind farms related to 'annoyance', but here it determined that the evidence was 'low quality'. The WHO also examined six cross-sectional studies on wind turbine noise and self-reported sleep disturbance, and here too deemed the evidence to be of 'low quality'...

A primary function of the National Wind Farm Commissioner's office, which was established in 2015, is to receive and refer complaints to the relevant respondent. In 2017, the office received a total of 73 complaints across Australia and just one of these was in South Australia. While the industry strives for zero complaints, we note that these numbers are nevertheless comparatively low when compared to the 80-plus wind farms currently under operation and the further 65 wind farms currently in some form of development.

Furthermore, according to the Commissioner's 2017 Annual Report (31 March 2018), noise complaints fell by 27 per cent and health complaints fell by 58 per cent year-on-year. Were it the case that wind turbines adversely

affected human health, one would expect to observe growth in the number of these complaints as the number of wind farm developments across Australia increased.

The Hon. Ian Hunter has already alluded to the Wind Farm Commissioner. Members will recall this was created largely at the behest of the climate denialists and anti wind farm members of the federal parliament, the Hon. Nick Xenophon and the DLP Senator Madigan in particular. It has a budget of \$2 million over three years, and just a few weeks ago the office was continued for another three years. So the amount of work that they have to do for the money that they have is remarkable.

I want to take members to the annual report of the office of the Wind Farm Commissioner to offer a few statistics. The first thing is the number of open files they have—across Australia, 18. That is not bad for a \$205,000 per year part-time job with three staff, to have 18 open files. As a junior solicitor earning about \$20,000 a year I had about 150 open files. It is a remarkably low number.

Let us have a look under the heading of Complaint Activity. In terms of operating wind farms, for the year 2017 there were 11 complaints Australia wide. In terms of all complaints since the office has been going, there have been 57 in total, over 26 months of operation. Another statistic that the Wind Farm Commissioner offers is complaints over the entire existence of the office that relate to South Australia—17. The number of wind farms those complaints relate to—two. Two wind farms. I know one of them the Hon. David Ridgway and I spent some time at, at Waterloo. We slept in the haunted house and hardly heard a thing. We had a good night's sleep.

Another submission I received was from the Australian Wind Alliance. This is a group that specifically represents the wind industry. They were alarmed at this motion before the house, and they asked me if I could consider the following material. Andrew Bray, from the Australian Wind Alliance, says:

In the breathless rush to portray the WHO report as some kind of fundamental shift in our understanding of wind turbine noise, Ms Bonaros has overlooked a key detail in the WHO's determination. The WHO's recommendation around wind turbine noise is only conditional—this is, it is only tentatively made, and the WHO acknowledges there is little evidence to support it.

The WHO report updates WHO guidelines on a range of different noise sources. These updated guidelines are graded into strong and conditional categories, based on the WHO's confidence in the research regarding the noise source and the efficacy of proposed noise limits.

There is then the technical analysis, and the Hon. Ian Hunter referred to that. As has been said, their recommendations in relation to wind turbines was that they had very little confidence. The communication goes on:

The primary reason the report states for the low rating of their recommendations around wind turbine noise is either the lack of evidence to support claims of ill health, or, where such evidence exists, the research is of such poor quality that it cannot be relied upon.

The fact is, there simply isn't reliable evidence to support or back up the kind of claims of ill health Ms Bonaros makes. Indeed, respected Australian medical bodies such as the National Health and Medical Research Council and the Australian Medical Association have both put out statements to this effect.

This lack of evidence is not for want of trying.

Wind turbines have been operating continuously in Europe for over 40 years. In Australia the first large scale wind turbines were installed 30 years ago, with many thousands of people living in close proximity to wind farms in South Australia for the last ten years. As turbine numbers have increased across the country in the last five to ten years, these numbers run into the tens of thousands.

All wind farms have been assessed to operate within approved noise limits and the number of complaints is extremely low. It is worth noting that many host landholders agree to allow exposure to higher levels of noise than is stipulated under the EPA guidelines, as part of their commercial agreements with wind farm operators. Complaints, or evidence of ill health, from this cohort is almost non-existent.

...In short, the conditional recommendation of the WHO to a particular level of wind turbine noise, may be a signal that we should keep an eye on this issue. But it falls a long way short of a justification of the extreme measures Ms Bonaros calls for, such as moratoriums on approvals or constructions for new wind farm projects.

Another submission that I know the Hon. Connie Bonaros has received herself, because it is a submission that has been posted on the web by David Clarke, who is a long-term campaigner in relation to renewable energy—he was the person who camped under the wind turbines at Waterloo

all those years ago when we were last debating this issue. David Clarke has written an open letter to Ms Bonaros and put it on his web page where anyone can see it. He states:

G'day, Connie:

You probably haven't come across my response to your complete misinterpretation of the WHO report yet so I will point it out to you.

He then signifies a web page. He goes on:

I wonder, does climate change, ocean acidification, sea level rise, the millions of deaths world wide each year from air pollution, damage to the Great Barrier Reef, increased frequency and seriousness of fires, floods and storms, thousands or millions of species going extinct, etcetera, all resulting from the burning of fossil fuels bother you at all? Or do you somehow see renewable energy to be a greater threat to the future of the planet?

I will not go through all of the detail but most of it the Hon. Ian Hunter has put on the record. He goes through in forensic detail, page by page, the World Health Organization report and shows that the motion before us is not a natural consequence of that report.

I want to refer quickly to some of the media commentary around the issue of wind farms generally and then around this motion. I refer members to an article that appeared in *The Conversation* last year on 7 April 2017. The author was Emeritus Professor Simon Chapman, Professor of Public Health at the University of Sydney. He again refers to the tiny number of complaints that have been received over the last few years. It is a year old so his figures do not reflect the report that has just been released. Basically, he points out that, as of when he wrote last year, there were 46 complaints relating to nine operating wind farms—and that is Australia-wide. He points out that there were 76 operational wind farms in Australia in 2015. He says:

These figures are frankly astonishing.

The complaint investigating mechanism was set up after a Senate enquiry report that cost undisclosed millions to deal with a 'massive' problem with wind turbines.

But the hordes of people who apparently needed a way to help them resolve matters have now gone shy.

He does, though, as a professor of public health, specifically address the issue of wind turbines and sickness. Professor Chapman, after referring to the lack of complaint, then goes on:

This is all very awkward for those who argue wind turbines cause illness. How is it that if wind farms are a direct cause of illness, that 67 wind farms around the country (88%) [of the total] saw not one complaint, about health or anything else across a whole year?

The stock answer given here by wind farm opponents is that wind farm illness is like sea sickness: only a few get it. So in the whole of two states,—

and he points out there were two states where there was not single complaint about any wind farm—and across 88% of wind farms, there's apparently no-one with susceptibility to wind farm illness.

Former Prime Minister Tony Abbott, who described wind farms as 'ugly', 'noisy' and 'visually awful', threw the senate committee a giant political bone.

The committee, and the Office of the Wind Farm Commissioner, put up their 'we're open' shingle and invited the alleged throngs of suffering rural residents to air their problems.

This annual report shows very few did, and the great majority of 'complaints' dissolved by being sent information.

This sorry episode in appeasing the wind farm obsessions of a tiny number of cross-bench senators needs to have its time called, fast.

The final commentary I will refer to was published back on 25 October in the RenewEconomy online journal by Sophie Vorrath, and under the heading, 'SA-Best calls for wind farm ban as it seeks to rekindle health concerns', the first paragraph of the article says:

Nick Xenophon may be gone, but his anti-wind legacy remains. What is now known as the SA-Best Party has—again—called for an inquiry into the human health impacts of wind farms, and demanded an 'urgent' ban on all new wind energy developments in South Australia until that review is carried out.

I will not go through the whole article, but it includes:

...the new call for yet another 'independent' parliamentary review of wind health impacts is disheartening—particularly in light of the numerous parliamentary inquiries, reviews and medical reports that have already been produced on the subject, and returned little tangible evidence that it is any sort of a thing.

Further on:

Even the very WHO report Bonaros says should be terrifying us all—a broad report on the health impacts of noise pollution—found little to support the claim that wind farm noise, audible or otherwise, had direct long-term health impacts.

Having put all that on the record, we need to point out, as I think the Hon. Ian Hunter did, that that is not to say that every location is appropriate for every wind farm. Obviously, we have to have a rigorous planning process, which we have. We need a rigorous environment protection process, particularly in relation to noise, which we have, and there are certainly locations where wind farms are inappropriate, but to call for a moratorium to basically pull the plug on one of South Australia's most important and growing industries that is part of the solution to climate change is ill-conceived.

I will conclude with the following remarks. Again, this is just to conclude the submission from Kane Thornton, the CEO of the Clean Energy Council. He says:

The motion's reference to the noise nuisance case regarding Bald Hills Wind Farm in Victoria is premature as the Council's investigation is ongoing.

Australia is currently witnessing an unprecedented wave of investment in clean and lower-cost new energy generation capacity, which is stimulating regional economic activity, creating new employment opportunities, putting downward pressure on electricity prices for consumers and businesses, and reducing greenhouse gas emissions.

In South Australia, the wind energy sector currently employs hundreds of people, provides steady income for landholders and local governments, and benefits broader communities through the numerous community enhancement funds in operation.

It is important that the design, planning and delivery of these new projects is managed responsibly, and over the past few years, the wind industry and the CEC have taken many positive steps to improve community engagement approaches. These have included a range of best practice guidelines and a new Best Practice Charter for Renewable Energy Development. These enjoy strong support from our members and we are committed to working together to continue to raise the bar further.

In summary, wind energy generation investment in South Australia is proceeding within the context of a mature planning regime that aligns with international standards, and an industry that observes responsible community engagement practices. We therefore encourage members of Parliament to reject the SA-Best motion for a wind farm moratorium.

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (18:19): I rise on behalf of the government to make some remarks in relation to the motion moved by the Hon. Connie Bonaros. State government policy seeks the provision of reliable and affordable energy that supports households and businesses based on an appropriate mix of existing and new generation for sustainable, long-term development and economic growth.

The Crystal Brook Energy Park Development is currently being assessed by the independent State Commission Assessment Panel (SCAP). SCAP heard from a number of representatives at a two-day meeting in Port Pirie on 10 and 11 October 2018. SCAP have requested additional information from Neoen, including further details in respect of potential noise impacts.

The EPA has already assessed a proposal and did not raise any objections subject to the appropriate conditions being applied to the construction and operation of the development. Following the conclusion of their assessment process, the Minister for Planning will be in a position to review SCAP's recommendation, if satisfied that all relevant information has been provided, including further advice from state agencies that determine the application.

Current planning policies include specific guidance on wind farm developments, backed up by mandatory referral mechanism and licensing requirements overseen by the South Australian Environment Protection Authority (EPA). This includes post-operation monitoring and compliance checks on constructed wind farms.

The State Planning Commission is currently reviewing all planning policies as part of the new planning and design code to be implemented under the Planning, Development and Infrastructure Act 2016. The Minister for Planning has requested that the commission review wind farm policies. A

number of updates to existing renewable energy policies are being considered, which will be informed by the current practice and research.

The EPA is also undertaking a technical review of its 'Wind farms environmental noise guidelines' in light of the latest international standard on wind farm acoustic noise measurement techniques. This report will be finalised by the end of November 2018 and will provide expert guidance on whether existing policy settings require further review or updating.

Court determinations in other states are noted but they are not directly comparable or relevant to our own independent regulatory and licensing frameworks. In addition, I refer to the National Wind Farm Commissioner, who has been referred to by two previous speakers. Interestingly, my statistics differ from some of the other statistics so perhaps all our researchers could get their heads together and make sure we check the statistics.

This commissioner of course is independent of state government, and investigates complaints from members of the public with respect to wind farm developments. A total of 73 complaints were reported in 2017 and only one complaint was received from South Australia in respect of an operating wind farm. On this basis, it would be premature to introduce an arbitrary moratorium on wind farm developments in South Australia.

The Minister for Planning is still to receive a planning recommendation on the Crystal Brook development, and the EPA's technical review is still to be concluded. Any of these recommendations need to be taken into account to ensure a fair and transparent process. Those wind farms that are currently under assessment are subject to the regulatory framework at the time of lodgement. A moratorium is not something that can be applied retrospectively. At a state level, there are only two wind farms under assessment—one at Crystal Brook and the other at Twin Creek, north-west of Truro—and one wind farm under construction, being Lincoln Gap Wind Farm, west of Port Augusta.

The overwhelming majority of renewable energy developments in South Australia either proposed to be lodged under assessment or recently approved are large-scale solar photovoltaic or pumped hydro projects. The government does take seriously the potential for environmental noise impacts to affect human health and wellbeing. This was a matter specifically addressed in the recent report from the World Health Organization, and its Environmental Noise Guidelines for the European Region October (2018), which considered a number of noise sources arising from various traffic modes, leisure activities and wind farms.

It is noted that the World Health Organization report only makes conditional recommendations in respect of wind farms, due to the absence of high-quality, definitive research. The government is aware of a number of other jurisdictional reviews into wind farm noise and ongoing National Health and Medical Research Council funded studies into the evidence base for the effects of wind farms on human health. The findings of this Australian-based research will guide any future response in respect of potential noise and health impacts from wind farm developments with any recommendations to be provided to the government by the EPA and SA Health, whose legislated responsibilities are focused on safeguarding the wellbeing of all South Australians. With those few comments, I indicate the government will not be supporting the motion.

The Hon. C. BONAROS (18:24): I indicate my thanks first to those members who have spoken on this most important matter. Did I expect anything different? Frankly, I do not think I did. I would like to thank the people sitting in the public gallery behind us today, the people who are most impacted by these developments: residents from Keyneton, from the Barossa Valley, from Twin Creek, from Palmer and from Crystal Brook, obviously, and surrounding areas.

Can I say to those people who have joined us here today for this debate that this is an important matter to you. I know that it has been an extraordinarily long day and not everyone who was here this afternoon was able to stick around, given the hour at the moment. I thank you all very much. I am grateful to you for giving up your time to be here. I think it is a testament to your commitment to this most important issue, something that affects each and every one of you and your lives, your livelihoods and your families. Thank you.

The world-famous and iconic Eiffel Tower stands at an impressive 324 metres tall. By comparison, Westpac House, across the road, Adelaide's tallest building, stands at 135 metres in height. A wind farm being proposed at the gateway of our world-renowned Flinders Ranges is to

have 26 wind turbines that will be a massive 240 metres in height per wind turbine. The total span of its rotor blades, from tip to tip, will be 160 metres, only seven metres short of the entire length of the Adelaide Oval.

A wind tower that is only 80 metres smaller than the Eiffel Tower and almost twice the size of Westpac House just across the way—if you have not seen it, cross at the lights, have a look at how tall it is and try imagining that by another 100 metres—with a wingspan just shy of the length of a football field is simply overwhelming. Sadly, it is a trend that is emerging, and emerging fast right here on our doorstep.

Just as frightening is the pace at which wind farms are increasing, not only in size but also in generation capacity. This debate is not about climate sceptics. It is not about being a climate denier. It is not about not believing in the merits of renewable energy. It is about our communities and it is about listening to the wishes of our communities. This is why SA-Best has called for the state government to place a moratorium on the approval or construction of any new wind farm until an independent, full and thorough review is undertaken.

At the moment, the current planning and environmental guidelines are not keeping pace with the burgeoning size of these projects. A wind farm being proposed by French company Neoen at Crystal Brook, at the gateway—again, at the gateway—of SA's world-renowned Flinders Ranges in the Mid North, is a classic case in point. Currently before the State Commission Assessment Panel (SCAP) for approval, each of the project's 26 wind turbines—I am going to say it again—will stand 240 metres high, the tallest ever built in this state and double that of many of the existing turbines in South Australia. Each turbine will have an output of just under five megawatts—again, around double that of most existing wind farm developments in this state.

Neoen's proposed wind farm is situated just three kilometres from the township of Crystal Brook and a lot closer to nearby rural living properties, an issue that has concerned local residents, many of whom have contacted SA-Best. I point out that this is not an issue that I went to Crystal Brook looking for. This is not an issue that my colleague and I went out in search of. This is an issue that members of the community of Crystal Brook, and surrounding communities, brought to us.

Sitting extended beyond 18:30 on motion of Hon. R.I. Lucas.

The Hon. C. BONAROS: With the chamber's indulgence, there are a number of people who have made the long trip here today. I will try my best to finish as quickly as possible, but they have been here since the early hours of the morning waiting for this debate to conclude today.

As I was saying, Neoen's proposed wind farm at Crystal Brook affects residents living at Crystal Brook, as well as people living near the proposed Twin Creek Wind Farm near Kapunda, the Waterloo Wind Farm, located 30 kilometres from Clare—both are located in SA's Mid North—and the proposed Keyneton Wind Farm on the cusp of the Barossa Valley, many of whom joined the protest today on the steps of Parliament House.

Wind farms around the world, including many either being built or proposed for SA, are getting ridiculously large in size and capacity. I am not suggesting that that may necessarily be a bad thing, but it is something that we need to consider very carefully in the context of where these wind farms are situated. It is imperative that they are located in areas that do not impact local communities and the people who live in those communities, not to mention the local wildlife.

For all the reasons that I have outlined so far, SA-Best has called on the government to place an urgent moratorium on approval or construction of any new wind farms until an independent, full and thorough review is undertaken. We are also seeking the implementation of an updated evidence-based planning and noise pollution compliance regime that is transparent, effective in protecting health and relevant for much larger and more powerful wind turbines.

We have to ensure that both operating and future wind farms in South Australia are not allowed to emit noise that causes sleep disturbance or otherwise cause disturbances to human health or local communities. We need to review the legislation surrounding wind farm developments to ensure that SA residents are adequately protected from harm, whether or not that harm may be questionable in some members' views, over the lifetime of each and every project.

The state government also has a responsibility to ensure that South Australian taxpayers will not foot the bill in any future noise nuisance litigation because inadequate planning and noise pollution regulations have failed to protect our residents from harm. I am going to say again for the record that SA-Best supports renewable energy, including wind farms, but we must ensure that appropriate laws and guidelines are commensurate with advances in wind farm technologies and generation capacities.

In guidelines developed for the European Union, but which the WHO stressed are relevant globally, the organisation recommends that exposure to wind turbines should not exceed 45 decibels over a 24-hour period. On the presumption that a wind farm is permitted to operate throughout an entire 24-hour period of a day, the WHO guideline for the nominated acoustic metric would give rise to a limit of 36.3 decibels as a measured background level. This level is lower than the 40 decibels, or background plus five decibels, whichever is greater, provided in wind farm noise guidelines by South Australia's EPA. By comparison, the WHO has said soft radio music is 50 decibels.

Current laws in SA permit wind farms to be built one kilometre from a property without the owner's consent and two kilometres from a town. When in opposition, the Liberal government—this Liberal Party—had a longstanding policy to better protect residents by banning new wind turbines from being built closer than two kilometres from an existing dwelling without the homeowner's consent and five kilometres from any town or settlement.

I have sought urgent meetings with the planning minister, Stephan Knoll, and the environment minister, David Speirs, to be briefed on the government's stance on this issue, but I am not getting anywhere fast. While in opposition, the Liberals made all the right noises about what it would do to tackle this alarming issue if it won government. Indeed, when I moved this motion, I read onto the record a letter that a number of Liberal members—including the Hon. David Ridgway, who is not here at the moment—sent to their constituents and to constituencies for the Liberal Party in relation to this very issue. That letter outlined the Liberal Party policy in relation to this issue very clearly.

The EPA's wind farm noise guidelines for South Australia exclude noise characteristics specifically identified by the WHO as being of concern, including low-frequency noise and amplitude modulation (thumping). Any reviews by the government must be undertaken with full transparency with independent acousticians and input from the very communities that will be impacted at the local level, and improved safeguards for nearby residents must be in place before any new wind turbines are approved or constructed.

Until these issues are resolved, it is absolutely imperative that the state government place a moratorium on approval or construction of any wind farms. In my discussions with the minister, I have said to him that this is not about saying, 'We don't want wind farms in South Australia.' This is about drawing a line in the sand and saying, 'We will undertake to implement our policy, the policy that we took to the 2014 election and the policy that we have held in relation to wind farms. Until such time, we will not allow any further applications to be lodged and decided under the existing rules.'

This is not about banning wind farms: this is about wanting to draw a line in the sand and have a review. I think we owe it to the people who have the misfortune of living close to these wind farms to do just that. Earlier today, I stood with a group of those here in the gallery on the steps of parliament to help them raise their cause and also to listen, albeit briefly, to some of their stories, like Natalie, whose property is to be surrounded by 51 turbines in a semicircle fashion, with each turbine 165 metres in height and located two kilometres from her local township. Hers is only one of countless stories that we have heard today and over the years.

There have been alarming anecdotal reports—I agree that they are anecdotal reports—about the impact that this is having on families. There have been reports of people who have taken their lives due to their concerns over this issue; others who have made claims about suffering from ongoing health issues; families who have been forced from their homes and properties due to the disturbances that they have faced; property values plummeting as a result of wind farms being constructed near houses; reports of pool fences vibrating due to the sound emanating from wind farms; and the list goes on.

The Hon. Ian Hunter said that I omitted important facts from the WHO report. He says that the jury is out on many of these sorts of issues and impacts. What I would say is that, for me personally, if the jury is out, then that is even more reason to support this motion. Many of the decent, hardworking folk in the public gallery today believe that they are not being heard, and for very good reason. It is a case of out of sight, out of mind for this city-centric government and maybe the Labor opposition, too.

I ask—in fact, I implore—politicians here today to take a good hard look at the people in the gallery. They are the ones you as a government are letting down, not because you have not implemented your policy and not because they will not be voting for you at the next election, but because you failed at the most basic level: you have not bothered to listen, to genuinely listen, to the concerns that they have raised. You hear what they say, but you do not listen. That is all they have been asking for.

We have heard about the number of reports that apparently have or have not been made to the commission, but we ignore the fact that, in one case alone, there are at least 230 submissions that have been made in the Crystal Brook case. There are 230 submissions that have been made by the local community in opposition to that wind farm, but apparently there is nobody saying that they do not support these wind farms.

The purpose of this motion is that SA-Best is asking the government to implement what they said they would do in opposition, something that has fallen on deaf ears now that they are in government. We throw about names of usual suspects in a discourteous and disrespectful manner: the antagonist, the troublemakers, the wind farm sceptics, but we do little to actually listen to those individuals. They are simply community members who are worried sick about their family's future. They are worried sick that, despite having the support of the vast majority of their own communities, when it comes to their representatives in parliament their concerns continue to fall on deaf ears. They are the people you are letting down, failing, not me. It is an absolute disgrace.

Yesterday, four of your regional members crossed the floor over your very own proposed mining bill. There is nothing like a bill to refocus our attention. It is a pity that this motion could not be done in the other place to focus the attention of the mining minister, the planning minister, the environment minister and some of their colleagues, the very same MPs who made all the right noises in opposition but who are now backpedalling at a rate of knots.

There are a lot of naysayers and deniers out there who are very critical of those opposed to wind farms, those they call 'the crazies'. On a personal level, this is probably the most divisive issue I have confronted since being sworn into this place earlier this year. As I said, we support renewable energies, and I will repeat it again: we support wind farms. Our track record in relation to renewables speaks volumes to that end. There are no climate sceptics in SA-Best, but we are willing to listen to our communities and we must ensure that appropriate laws and guidelines are commensurate with advances in wind farm technologies and generation capacities.

I know that I have taken up more of the chamber's time than I ought to. I do have a very lengthy response that I would like to table in relation to Mr Clarke's email to me and the comments that we have from a renowned leading Australian expert in acoustics. I seek leave to table that correspondence.

Leave granted.

The Hon. C. BONAROS: In closing, I end on this note: I will happily stand side by side with those community residents who are mocked for being opposed to wind farms, because as the old saying goes—and unlike other politicians I will not attempt to attribute this quote to anyone in particular—first they ignore you, then they say you are mad, then dangerous, then there's a pause and then you can't find anyone who disagrees with you.

There being a disturbance in the strangers' gallery:

The PRESIDENT: Order! There is no clapping in the chamber.

The council divided on the motion:

While the division bells were ringing:

The PRESIDENT: The person with the sign, put it away, otherwise you will be thrown out of the chamber.

Ayes 2 Noes 19 Majority 17

AYES

Bonaros, C. (teller) Pangallo, F.

NOES

Bourke, E.S. Darley, J.A. Dawkins, J.S.L. Franks, T.A. Hanson, J.E. Hood, D.G.E. Hunter, I.K. (teller) Lee, J.S. Lensink, J.M.A. Lucas, R.I. Maher, K.J. Ngo, T.T. Parnell, M.C. Pnevmatikos, I. Ridgway, D.W. Scriven, C.M. Stephens, T.J. Wade, S.G.

Wortley, R.P.

Motion thus negatived.

At 18:48 the council adjourned until Thursday 28 November 2018 at 11:00.

Answers to Questions

DISABILITY MOBILITY VEHICLES

In reply to the Hon. M.C. PARNELL (24 October 2018).

The Hon. J.M.A. LENSINK (Minister for Human Services): The Department of Human Services has advised:

Our government is committed to promoting mobility and access to the community.

I introduced the *Disability Inclusion Act 2018* to improve opportunities for South Australians with disability to participate in the community as equal citizens.

Under the act, state authorities, including the Department of Planning, Transport and Infrastructure, will be required to consult with the community about better access and inclusion to develop disability access and inclusion plans. The plans will be required to outline strategies that improve outcomes for people with disability, including in access to built environments and transport.

My department will support authorities to develop creative, best practice and innovative disability access and inclusion plans to improve outcomes for people with disability in our community.

The Minister for Transport, Infrastructure and Local Government has provided the following advice:

Officers of the Department of Planning, Transport and Infrastructure have contacted the National Transport Commission regarding this matter. They are advised that the NTC forward work program for 2019 includes a reconsideration of some work undertaken by Austroads which set out potential parameters for using powered wheeled recreational devices.

Potential law reform would consider whether the devices should also be subject to restrictions on mass and speed, and restrictions on access to the road network. There would also be safety requirements such as users being of a certain age, wearing helmets and for devices to be fitted with bells and lights, for example.