

LEGISLATIVE COUNCIL**Tuesday, 4 June 2019**

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.

*Bills***STATUTES AMENDMENT (SCREENING) BILL***Assent*

His Excellency the Governor assented to the bill.

NATIONAL ELECTRICITY (SOUTH AUSTRALIA) (RETAILER RELIABILITY OBLIGATION) AMENDMENT BILL*Assent*

His Excellency the Governor assented to the bill.

SENTENCING (SUSPENDED AND COMMUNITY BASED CUSTODIAL SENTENCES) AMENDMENT BILL*Assent*

His Excellency the Governor assented to the bill.

*Parliamentary Procedure***ANSWERS TABLED**

The PRESIDENT: I direct that the written answers to questions be distributed and printed in *Hansard*.

PAPERS

The following papers were laid on the table:

By the Treasurer (Hon. R.I. Lucas)—

The University of Adelaide—Report, 2018

Regulations under Acts—

Dangerous Substances Act 1979—Dangerous Goods Transport—

Miscellaneous No. 2

Fair Work Act 1994—Declared Employer

Land and Business (Sale and Conveyancing) Act 1994—Fees No. 2

Limitations of Actions Act 1936—Revocation

Rules of Court—

Magistrates Court—Magistrates Court Act 1991—

Criminal—Amendment No. 73

Section 74B Summary Offences Act 1953—Road Blocks for the period from

1 January 2019 to 31 March 2019

Section 83B Summary Offences Act 1953—Dangerous Area Declarations for the period from 1 January 2019 to 31 March 2019

By the Minister for Trade, Tourism and Investment (Hon. D.W. Ridgway)—

Regulations under Acts—

Aquaculture Act 2001—Fees

Bills of Sale Act 1886—Fees No. 2
 Community Titles Act 1996—Fees No. 2
 Fisheries Management Act 2007—Fees No. 2
 Harbors and Navigation Act 1993—Fees No. 2
 Motor Vehicles Act 1959—
 Fees No. 2
 Fees No. 3
 Passenger Transport Act 1994—Regulations—Fees No. 2
 Real Property Act 1886—Regulations—Fees No. 2
 Registration of Deeds Act 1935—Regulations—Fees No. 2
 Roads (Opening and Closing) Act 1991—Regulations—Fees No. 2
 Strata Titles Act 1988—Regulations—Fees No. 2
 Valuation of Land Act 1971—Regulations—Fees No. 2
 Worker's Liens Act 1893—Regulations—Fees No. 2

By the Minister for Human Services (Hon. J.M.A. Lensink)—

Essential Services Commission of South Australia Final Report of the Review of Water
 Third Party Access Regime dated May 2019
 Plumbing Standard published by the Technical Regulator prepared under the Water
 Industry Act 2012

By the Minister for Health and Wellbeing (Hon. S.G. Wade)—

Regulations under Acts—
 Health Practitioner Regulation National Law (South Australia) Act 2010—Remote
 Area Attendance

TRANSPORT SUBSIDY SCHEME

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:25): I seek leave to table a hard copy of a letter which was requested in the last sitting week by the Hon. Clare Scriven, written to Dr Helen Nugent, chair of the board of the National Disability Insurance Agency.

Leave granted.

Question Time

EXPLORERS WAY

The Hon. K.J. MAHER (Leader of the Opposition) (14:27): My question is to the Minister for Trade, Tourism and Investment. Will the minister advise whether SATC have recently used images of the Northern Territory in promotional material for South Australia?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:27): I thank the honourable member for his question. This has been an issue that's been canvassed in the media and on social media. What it is is a collaborative marketing campaign for the Explorers Way. I know the honourable member opposite is very passionate about the north of South Australia. I am sure he has driven on that road many times and he would have seen the billboards explaining the Explorers Way.

My advice from the South Australian Tourism Commission is that we have a memorandum of understanding with the Northern Territory tourism authority—their name escapes me at this moment—to promote the Explorers Way, driving from both Adelaide to Darwin and Darwin to Adelaide, and both the state and the Territory will use images from the other state. It is part of an ongoing promotion of the Explorers Way to drive more tourists into South Australia and, in relation to the Northern Territory, to encourage more people to drive to Darwin along the Explorers Way. Those images haven't been used without anybody's authority.

There has been a number of commentators in the media and a couple of people on social media, but this is part of the ongoing campaign to promote the wonderful driving opportunity of the

Explorers Way. We have the Seafood Frontier, we have the Southern Ocean Drive and we have the Epicurean Way, which I announced as the Liberal opposition spokesman for the 2014 election. We were really pleased to see that the Labor government took up the option of one of our great ideas to embrace the Epicurean Way, but in this case this is just an ongoing promotion of the great initiative called the Explorers Way.

EXPLORERS WAY

The Hon. K.J. MAHER (Leader of the Opposition) (14:28): A very brief supplementary: can the minister inform the chamber what the ad was entitled and what was the messaging of that particular advertisement?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:29): I will get the details for the honourable member. I saw some reference to it on social media and, of course, I have been made aware that it is just a promotional campaign designed to promote the Explorers Way. I will get those particular details for the honourable member.

TRADESTART

The Hon. C.M. SCRIVEN (14:29): My question is to the Minister for Trade, Tourism and Investment. What is the recurrent state expenditure on the TradeStart program, who staffs the TradeStart offices and where are they located?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:29): The recurrent expenditure will be revealed in the budget on 18 June. We have a number of TradeStart offices. Regarding the actual locations of the offices and the individuals involved, I will bring back a response to the chamber.

TRADESTART

The Hon. C.M. SCRIVEN (14:30): Supplementary: the question referred to the current expenditure, not what might be announced or revealed in the budget.

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:30): I don't have those exact figures at my fingertips. I will bring that figure back to the chamber.

EXPORT STRATEGIES

The Hon. E.S. BOURKE (14:30): My question is to the Minister for Trade, Tourism and Investment. For the 2018-19 financial year, how much did the SA government spend on all export assistance programs and resources?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:30): I thank the honourable member for her question. So all SA government export programs and resources?

Members interjecting:

The Hon. D.W. RIDGWAY: There is a whole range of activities that we undertook: opening trade offices and all sorts of promotions.

The Hon. K.J. Maher interjecting:

The PRESIDENT: Leader of the Opposition, the question is clear and concise. The minister is trying to answer. Please don't repeat it.

The Hon. D.W. RIDGWAY: I will bring back a response with the exact figure for the honourable member.

TOURISM

The Hon. T.J. STEPHENS (14:31): My question is to the Minister for Trade, Tourism and Investment. Can the minister update members on how the Marshall Liberal government is investing in its key growth sector of tourism to market and showcase South Australia to the world?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:31): I thank the member behind me for his ongoing interest. It is this government's focus on strategic targeted investment in key sectors that will drive economic and jobs growth. Tourism is absolutely vital to

South Australia's economy. We know that the visitor economy is currently worth some \$6.8 billion, and we are on track to reach our \$8 billion target by 2020.

We have a target to reach an additional 10,000 jobs by 2020, and we are setting another ambitious target of 16,000 additional jobs from 2020 to 2030. As a government, we are absolutely committed to regional growth as part of our overall economic prosperity. We can't underestimate the impact that these jobs will have on sustained and vibrant regional communities. After all, 42 per cent of our visitor economy spend is in the regions, despite only 23 per cent of our state's population residing there.

As I continue to say, with our state transitioning into a high-tech agriculture and advanced manufacturing space, tourism is the only regional industry that continues to be labour intensive and deliver more jobs to regional South Australia. This is why our government is committed to taking action and investing in areas that will grow our tourism industry.

In the 2020 plan, and again in the 2030 tourism sector plan, this is an industry-driven plan. The number one priority is driving demand, that is, marketing our wonderful state to the world. In a demonstration of the government's commitment to tourism, I announced last week that the 2019-20 budget, to be handed down on 18 June, will provide an extra \$10 million a year over three years from 2021 from the Economic and Business Growth Fund for marketing South Australia as a premier tourism destination.

This is in addition to the \$10 million already budgeted for in 2019-20 and a further \$3 million for the recent domestic Rewards Wonder winter marketing campaign across digital media, television, cinema, print and outdoor billboard advertising to boost visitor numbers during our cooler months. It is a deliberate and targeted investment by the Marshall government aimed at building the state's visitor economy by promoting South Australia to the world.

Marketing is critical to driving awareness and appeal from our state to an influential visitor audience. The funding will be used by the South Australian Tourism Commission for marketing campaigns with a strong digital focus, targeted at increasing primarily international visitation but also interstate tourism numbers in the key markets of Sydney, Melbourne and Brisbane. I will relentlessly continue to advocate for the industry and deliver more funding as it becomes available.

A fortnight ago, I met with the regional tourism chairs to discuss what the challenges are and how the state government can support tourism regions into the future, because we know that, for our regions in particular, the success of the sector is critical to regional employment and general community wellbeing.

The Joyce review identified tourism as being a critical part of the state achieving a growth rate of 3 per cent per annum. We as a government are delivering on our agenda of economic growth for this state, and we are starting with a set of plans that are industry driven. The tourism industry has articulated its priorities in order to grow, and the Marshall Liberal government is delivering on those priorities.

TOURISM

The Hon. C.M. SCRIVEN (14:34): Supplementary: is the minister aware that he is just continuing with the previous government's \$10 million marketing budget measure?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:34): It is interesting to know that the previous government did provide \$10 million but not across the forward estimates. They didn't provide it. They weren't interested in giving a message to the tourism sector that they were there for the long haul. They were there for just a short little sugar hit. Well, we are actually there for the long haul. We want to walk with the tourism industry to continue to market them not just in one year but for the next four years.

ROAD TOLL

The Hon. J.A. DARLEY (14:35): I seek leave to make a brief explanation before asking the Minister for Health and Wellbeing, representing the Minister for Police, Emergency Services and Correctional Services, a question regarding the road toll.

Leave granted.

The Hon. J.A. DARLEY: The road toll in South Australia continues to grow at an alarming rate, currently standing at 53 fatalities, which is 19 more than at the same time last year. I understand an urgent forum was organised in May amongst the state's road safety experts to address the rising road toll. Can the Minister advise the outcome of this meeting, with details about the initiatives to be implemented?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:36): I thank the honourable member for his question and undertake to seek an answer from the minister in the other place.

TRADE OFFICES

The Hon. J.E. HANSON (14:36): My question is to the Minister for Trade, Tourism and Investment. Will the minister advise—sorry; apologies, Mr President.

Members interjecting:

The Hon. J.E. HANSON: I have so many questions. Given that the chief executive of DTF stated more than a year ago that KPIs for trade offices were being developed, I ask:

1. Will the minister advise what KPIs have been established for government trade offices?
2. Are those KPIs standard across all trade offices or changing, depending on what country the trade office is located in?
3. Are all KPIs being met?
4. How are the KPIs being tracked?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:37): I thank the honourable member for his question. We are developing some KPIs for our trade offices, and I don't have the current KPIs that are under development at the moment. What I will say is we actually have a broad ranging set of KPIs for the government, which is to grow our economy, to grow exports, to grow investment, to grow international student numbers, all of which are increasing. We have a broad ranging set of targets for KPIs for government. The trade offices are signed up to that and they are to continue to deliver on the Marshall government's agenda of growing the state's economy.

TRADE OFFICES

The Hon. J.E. HANSON (14:37): Supplementary: I just would like to know whether or not the minister is willing to take on notice some of the questions which I have asked and bring those back to me?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:38): I will be happy to take them on notice for the honourable member.

DOMESTIC, FAMILY AND SEXUAL VIOLENCE

The Hon. J.S. LEE (14:38): My question is to the Minister for Human Services about the government's strong plan to improve the safety of women and their children. Can the minister please provide an update to the council about the rollout of regional safety hubs to assist those experiencing or at risk of domestic, family and sexual violence?

The Hon. J.M.A. LENSINK (Minister for Human Services) (14:38): I thank the honourable member for her question and for her ongoing interest in this issue. The Assistant Minister for Domestic and Family Violence Prevention, Mrs Carolyn Power MP, and myself were very pleased to announce quite recently that two of the new safety hubs will be rolled out in regional South Australia.

This follows from an election commitment to look at the introduction of safety hubs in regional South Australia, based on the very successful Women's Safety Services SA model, which has been an amalgamation of a number of metropolitan regional services and is co-located with SAPOL, Corrections and a range of other services. It's also where the 24/7 domestic hotline is run from. We thought that to bring services together was a very helpful initiative so that women and children particularly could receive services at one site.

Safety hubs are local places where women and their children who are experiencing or at risk of domestic, family and sexual violence can access information and support from staff and volunteers face to face. They can take a range of forms, as I mentioned, in that they provide a single entry point for integrated services, which may include SAPOL, social housing representatives, education, child wellbeing and protection services and programs, legal services and social workers. Certainly within government the discussions between child protection and domestic violence have been taking place for some time and we recognise that there is a great deal of crossover in the needs of both of those groups.

There is a range of models that we have considered and which we took to our regional consultations, which I have spoken about previously. Firstly, there is the crisis or front-end response, which is similar to the Women's Safety Services hub, and there is also a hub-and-spoke approach which provides outreach to surrounding communities and I think, from memory, that was one that the South-East was particularly interested in. There are also virtual hubs that facilitate access to information and support from services, and there is also a shopfront model for diverse services with a focus on early intervention.

The two locations for the first hubs are Murray Bridge and Berri in the Murray Mallee region. The Murray Bridge Safety Hub will be located in the Murray Bridge Community Centre to provide targeted and appropriate information and referrals to enable access to support for people who need it. The Berri Safety Hub, which is to be located with the Riverland Domestic Violence Service, which is auspiced by Centacare, will provide specialist support for a range of services, including on-site supported crisis accommodation and other housing options; domestic, family and sexual violence services; counselling; targeted early intervention and mental health services; financial advice; and legal support.

The learnings gained from implementing these models will be used for the other seven hubs which we hope will be up and running by June 2021. We thank the community for its input into this important initiative and look forward to improving the rates of family and sexual violence into the future.

MENTAL HEALTH SERVICES

The Hon. C. BONAROS (14:42): I seek leave to make a brief explanation before asking the Treasurer a question about funding for mental health services in South Australia.

Leave granted.

The Hon. C. BONAROS: As the Treasurer and, indeed, the Minister for Health and Wellbeing would know, a lack of comprehensive primary mental health services provided by community-based service providers correlates directly to increased presentations and admissions at hospitals and involuntary treatment mental health facilities. Again, I'm sure the Treasurer and the Minister for Health and Wellbeing are also acutely aware of the cost of this, not only to the healthcare budget but also the negative impact the presentations at emergency departments and hospital admissions have on those affected, including their families and the loved ones of those with a temporary or long-term illness.

There is a growing evidence base that tells us that primary mental health services provided by community-based service providers make a huge contribution towards improving not only the mental health outcomes of people so affected but are cheaper than tertiary services and, therefore, they are also good for the government's health budget bottom line. We also know that mental health clients are scheduled to transition to NDIS funding over the next year or so, but it remains to be seen how mental health clients will fall between the SA NDIS funding gaps in the longer term; however, we already know that there is a huge gulf appearing with mental health services in SA as the NDIS rollout has been slower than expected.

SA Health contract managers have been contacting mental health services providing critical psychosocial supports to advise them that their block funding cuts will commence from 1 July 2019, well before the one-year transition period they understood to have been recently promised, and there is currently unmet demand for these services. My questions to the Treasurer are:

1. What cuts to mental health services has the government decided to implement?

2. Precisely what services will be cut, by how much and when?
3. How many people are expected to be impacted by those cuts?
4. When were the service providers advised that the cuts would occur?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:44): I thank the honourable member for her question. I think it is important to be clear: the NDIS is a long-term plan, an agreement between the commonwealth and the states to transfer significant elements of disability service provision from the states to the federal government, and that includes people whose disability relates to their mental health issues. In that agreement, both the commonwealth government and the state governments agreed to basically ensure continuity of support.

The changes in the 2019-20 financial year to which the honourable member refers particularly relate to the psychosocial mental health services budget. The changes in the budget are not a state budget decision, it is a part of the ongoing process of transitioning people from state-based mental health services to the NDIS. What the government has said consistently is that we will ensure that funding doesn't transfer until the eligibility of the client is established and, if you like, we can ensure continuity of services.

In that context, I don't know whether the implication was intended but if the suggestion is that we are transferring money to the commonwealth ahead of clients transferring to the NDIS, that is not my understanding. My understanding is that, in the IPRSS program, 23 per cent of clients have already been determined to be eligible and in the next financial year we are proposing to transfer 25 per cent. So, if you like, the money is following the clients.

The whole concept of the NDIS is that the clients make the choices. If service providers think that, as their clients leave and have access to NDIS services, they should have double funding for that client who has now been transferred to the NDIS, I just say to them that that is not the concept behind the NDIS, and I think service providers should appreciate that. The government has made a commitment that no mental health consumer will be disadvantaged as a result of the NDIS transition, and SA Health-funded psychosocial clients who are not eligible for the NDIS will continue to receive ongoing psychosocial services via state-funded NGO programs.

In May 2019 (last month), the Chief Psychiatrist wrote to mental health non-government organisations impacted by this transfer of funding to the commonwealth and confirmed the government's commitment as a result of the NDIS transition and requested that the Chief Psychiatrist be advised of any client-related continuity of support issues that arise from the funding reduction.

Since I have been appointed minister, I have been pleased that the Chief Psychiatrist established a transition task force to actively engage both the commonwealth, NGOs and consumer reps to ensure that any issues in relation to the NDIS transfer are ironed out. There will be issues, there have been issues, this is an issue, but we are working within the NDIS bilateral agreement. It was always intended that, as clients transferred, so did the resources.

NATIONAL DISABILITY INSURANCE SCHEME

The Hon. T.A. FRANKS (14:48): Supplementary: where a client is transitioning to the NDIS, is that client fully accepted and supported by the NDIS before the withdrawal of the state NGO funding?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:49): My understanding is that the client will be supported in transition. It is important in this partnership that the state accepts its responsibility to be part of the successful transition, but so does the agency that is, for want of a better word, relinquishing, the agency that has been, if you like, the historical provider.

I would hope that mental health NGOs would see the opportunity for engagement with the NDIS. I am concerned to hear that some organisations which I have a lot of respect for are not inclined to engage in the NDIS. As we express our commitment to patient-centred care and self-determination in terms of self-management of care, I would hope that providers would be supporting clients to transition. As I said, the Chief Psychiatrist has alerted NGOs that he stands ready to deal with any continuity of support issues. In relation to the point at which the transfer occurs, the Chief Psychiatrist has indicated that he wants cases referred to him if issues arise.

NATIONAL DISABILITY INSURANCE SCHEME

The Hon. C. BONAROS (14:50): Does the minister accept that contract managers have caught providers off guard with respect to recent communications about cuts to block funding?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:50): By block funding, do you mean the 100 per cent that is now becoming 75 per cent?

The Hon. C. Bonaros: Yes.

The Hon. S.G. WADE: I haven't had access to the ongoing communications between the contract managers for NGOs and the contracting section of SA Health, but if there has been a lack of clarity, I would appreciate information on that and I will follow it up.

NATIONAL DISABILITY INSURANCE SCHEME

The Hon. C. BONAROS (14:51): Can we also get confirmation as to when we anticipate that those cuts, in relation to the 25 per cent, would actually kick in?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:51): I am happy to take that on notice. I think the honourable member's supplementary question highlights the fact that, as I understand it, this is a particular issue in relation to IPRSS and not in relation to other programs. There certainly does seem to have been a problem with communication that seems to have become evident in recent weeks. I will certainly take the honourable member's question on notice and seek clarification.

The PRESIDENT: The Hon. Ms Bonaros, a further supplementary?

NATIONAL DISABILITY INSURANCE SCHEME

The Hon. C. BONAROS (14:51): Are NDIS approvals anywhere near the approval rates the government anticipated and, if so, what are they? Who is picking up the shortfall where those approvals have not been given?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:52): I am advised that, as at 15 May 2019, of the 1,702 state health funded mental health clients, 392 (23 per cent) have an approved and funded NDIS plan. I might clarify whether that relates to IPRSS only because it's, coincidentally, exactly the same number for IPRSS.

The Hon. C. Bonaros: The funding isn't in relation to IPRSS only, either.

The PRESIDENT: It's not a conversation, minister; it's a response.

The Hon. S.G. WADE: I might seek clarification on the question, then.

FUTURE ADELAIDE

The Hon. R.P. WORTLEY (14:52): My question is to the Minister for Trade, Tourism and Investment. What is the value of the recently announced Future Adelaide partnership and who has editorial control over this publication?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (14:53): I thank the honourable member for his ongoing interest in promoting South Australia. The Future Adelaide publication is a matter for the Department of the Premier and Cabinet, so I will bring back the details of that particular program to the honourable member.

The Hon. K.J. Maher: You promote it on your own department's website.

The PRESIDENT: Is that a seated supplementary, Leader of the Opposition? It would be out of order. Would you like me to give you the supplementary? No? Okay. The Hon. Mr Dawkins.

HEALTH SERVICES

The Hon. J.S.L. DAWKINS (14:53): Thank you, sir. My question is to the Minister for Health and Wellbeing. Will the minister update the council on programs to support health care in the community?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (14:54): I thank the honourable member for his question. There were many significant problems with Labor's disastrous Transforming Health experiment. The select committee in this place inquiring into health services has pages and pages of evidence showing its problems, both in implementation and results.

One consistent criticism of Transforming Health was its focus on hospitals to the detriment of other health services. The result of that narrow focus is evident in the pressures being evidenced in the emergency departments of our major metropolitan hospitals, and the Hon. Connie Bonaros has already referenced those problems in her explanation to an earlier question.

The Marshall Liberal government is investing in community-based care as part of our broader work to repair the public health system. Today, I was able to announce the development of a statewide Home Hospital program to support the provision of hospital-level care to South Australians in their homes or in their communities. Home Hospital will build on the success of several pilot programs that have already given care for more than 400 South Australians to date this year.

For example, the Southern Adelaide Local Health Network has partnered with the Royal District Nursing Service to provide people with out-of-hospital support. The Northern Adelaide Local Health Network has partnered with the GP-led service Pop-Up Community Care to link 156 patients to GPs and community services, and in the north-east and north the Geriatrics in the Home program is providing care for older South Australians, freeing up an estimated 16 beds daily at Modbury and Lyell McEwin hospitals.

Collectively, these pilot programs have freed up hundreds of occupied bed days, relieving pressure on our emergency departments while successfully demonstrating that community-based acute care can deliver high-quality, sustainable care that is welcomed by patients. The Home Hospital initiative will aim to expand this community-based care significantly; it is hoped that by 2021 the program will deliver around 200 hospital-level beds in the community.

In addition to the general benefits to patients resulting from receiving treatment in their own homes, where the familiar and comfortable surroundings positively impact a person's overall wellbeing and improve treatment outcomes, there is the added benefit for older patients that hospital stays often worsen their overall condition, involving prolonged bed rest that decreases muscle strength. The Home Hospital program will seek to support patients in their home for a range of situations and contexts, using technology solutions to improve access, such as allowing clinicians to oversee care remotely.

The program acknowledges and builds on the importance of intervening early to prevent illness and deliver care focussed on the patient. The benefits extend beyond the individuals who receive treatment through reducing pressure on our metropolitan hospitals. This rebalancing of the health system will help drive down the cost for South Australian taxpayers while delivering better care across the board to those in hospital as well as those in their homes.

This is delivering on the Marshall Liberal government's commitment to improve health services in South Australia. There is no one silver bullet, but the Marshall Liberal government is working to fix Labor's mess, and I look forward to the Home Hospital program helping in that recovery.

EXTREME WEATHER RESPONSE

The Hon. T.A. FRANKS (14:57): I seek leave to make a brief explanation before addressing a question to the Minister for Human Services on extreme weather response for people rough sleeping.

Leave granted.

The Hon. T.A. FRANKS: Members would be well aware of extreme weather responses for those who sleep roughly not just in our cities but across our state, the Code Reds and the Code Blues that we hear of. Those Code Reds and Code Blues assist those sleeping rough by connecting them with support services and providing additional services, including extended operating hours, increased shelter operations, additional food, etc., when weather conditions are extreme. The current triggers for a Code Blue are:

- conditions predicted to continue for at least three days by the Bureau of Meteorology with any two of the following:
 - temperatures dropping below an average night-time low of 6° Celsius;
 - significant rainfall causing difficulty for unsheltered individuals to remain dry; and
 - damaging wind gusts posing a high risk for the safety of those unsheltered individuals;
- conditions predicted by the BOM to continue for at least five days when temperatures drop below an average night-time low of 5° Celsius; or
- any other factors related to extreme winter weather which require a Code Blue response.

This week on Tuesday night we had a temperature of 4° Celsius, on Wednesday night the prediction is for 4°, on Thursday night 5°, but then on Friday the prediction is for 7°. This will not trigger a Code Blue response, but I think all members would agree that this is now very much the time when winter cold is hitting those of us in our comfortable homes, let alone those of us on the streets. My questions to the minister are:

1. What rationale is there for the current Code Blue criteria?
2. Are there any plans to review it?
3. Why, in a week that is this cold, are we not seeing a Code Blue response triggered, given the cold?

The Hon. J.M.A. LENSINK (Minister for Human Services) (15:00): I thank the honourable member for her question and her interest in this important area. The triggers for the Code Blue are as she has accurately outlined, with one caveat. My notes say that it is 'at least two of the following', but I do take her point that we are going through a period of extended cold. The South Australian Housing Authority has a service response in place to address the needs of those sleeping rough during extreme weather, and the decision to activate the Code Red or the Code Blue is made jointly between the authority and the chief executive of Uniting Communities.

We also had Code Red activation earlier this year in February when we had exceptionally warm weather. My understanding was that that was not just triggered in the CBD but also in the regions. So the Code Blues and Code Reds do provide additional services to people who are sleeping rough.

In terms of the rationale for the triggers, my understanding is that that was determined by the specialist homelessness service providers in conjunction with the Housing Authority. I think it has been reviewed, in either 2018 or 2017, so there may well have been a change to the Code Blue activation. I will double-check what that change was because it is something where we don't rely on our own advice but we certainly seek the advice of the direct service providers in homelessness.

I think it's fair to say that there are services that operate 24/7, regardless of whether there is a Code Blue or a Code Red activated. Indeed, certainly within the CBD, we have Neami, who operate an assertive outreach service. Members of the public can notify them of someone whom they come across who is sleeping rough via the Street Connect app.

There are other services that operate throughout South Australia to provide people with assistance. We have a Homelessness Gateway, which is available for people 24/7 as well. Regardless of whether a Code Blue or a Code Red is activated, we do have services. Some of those are quite assertive services to assist people throughout the year, regardless of any extreme weather events. I will take on notice the part in relation to when it was last reviewed and seek some further information that may be of use to the honourable member.

VISITOR INFORMATION CENTRES

The Hon. I. PNEVMATIKOS (15:03): My question is to the Minister for Trade, Tourism and Investment. In particular, how many visitor information centres are there in South Australia and, more particularly, what commitments, if any, has the minister provided to Tourism Kangaroo Island regarding their visitor information centre?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:03): I thank the honourable member for her question. I think there are about 47—I will check that for the honourable member—visitor information centres across Australia. I am aware that there are some ongoing discussions around the operation of the Kangaroo Island visitor centre. Pretty much all of the visitor information centres—

Members interjecting:

The Hon. D.W. RIDGWAY: If you don't want to listen, I will just sit down.

Members interjecting:

The Hon. D.W. RIDGWAY: Mr President, if they are going to interject, I will sit down.

The PRESIDENT: It's your choice, minister. Do you have a supplementary?

The Hon. D.W. RIDGWAY: They just can't help themselves, Mr President.

The PRESIDENT: You are finishing off the question?

The Hon. D.W. RIDGWAY: My understanding is that nearly all visitor information centres have a partnership between local government and the local visitor tourism organisation, the regional one, and so we are having ongoing discussions with the Kangaroo Island Visitor Centre and I am sure an outcome will be reached soon to make sure that that community has a viable visitor information centre.

KANGAROO ISLAND VISITOR CENTRE

The Hon. R.P. WORTLEY (15:04): Supplementary: is the minister aware that there are a number of businesses on Kangaroo Island, and one that particularly comes to mind is this little business that makes cheese out of sheep's milk. Is the minister aware of the problems and the lack of tourism that may arise out of having this closed and how that—

Members interjecting:

The PRESIDENT: The Hon. Mr Wortley, we understand the question. I am not sure the minister actually touched upon cheesemaking but I am going to allow the question because the minister was very broad about tourism in the state.

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:05): Premium food and wine is an important part of the offering right across the whole state, not just Kangaroo Island. I know the honourable member has a large investment property on Kangaroo Island and probably enjoys the cheese and wine and spirits on a regular basis. He is a great advocate for Kangaroo Island and he is often immersing himself in what it has to offer. We have beautiful food and wine and we continue to promote that to all destinations.

CUTTLEFEST

The Hon. D.G.E. HOOD (15:05): My question is to the Minister for Trade, Tourism and Investment. Can the minister update the chamber on his recent trip to Whyalla for Cuttlefest 2019?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:06): I thank the honourable member for his ongoing interest in regional tourism. It was a privilege on Saturday to be invited to Whyalla to open Cuttlefest 2019. Looking around the city with the mayor, Clare McLaughlin, and the council CEO, Chris Cowley, I could feel a real buzz in the air with the rejuvenation of the steelworks and other recent developments. Indeed, I noted in today's *Advertiser* Mr Gupta's GFG Alliance has announced the design and build partner for the \$350 million Cultana Solar Farm which, of course, is Shanghai Electric.

I also made sure of a visit to the site for the future Whyalla High School, a \$100 million investment by the Marshall Liberal government into a state-of-the-art secondary school to accommodate up to 1,500 students, with the first enrolments expected in 2022. I also dropped into the Whyalla Dive Shop and met the owner, Tony Bramley, and learnt all about the giant cuttlefish and the annual aggregation off the shores of Whyalla. Tony shared how word is slowly getting out about the incredible experience you can get diving and snorkelling with the cuttlefish, and how

thousands of people each season, including documentary makers and scientists, come from around the world to Whyalla specifically for the cuttlefish.

The Whyalla giant cuttlefish are a unique population that has been described as the chameleons of the sea. They have three hearts with blue blood and reach sometimes between 60 centimetres and a metre in length. Although previously threatened by commercial fishing in the past, Tony was saying the numbers are now on the rise, with an estimated 200,000 giant cuttlefish taking part in last year's aggregation, and the numbers look particularly encouraging for this year. By noon I was on the foreshore to take part in the Cuttlefest, a good community event. We have been well supported by the communities and locals and, in fact, it was a spectacularly beautiful day in Whyalla.

I had come up to Whyalla keen and ready to snorkel among the cuttlefish but, unfortunately, the event organisers recommended against it due to the weather conditions. They said the wind was too strong. I don't think they realised what a strong swimmer I am, and maybe I would have been able to battle the elements. I made a commitment to go back there to swim with the cuttlefish and I encourage all members in this place, if they have a chance to get up there in the next couple of months, for a really great opportunity between late May and early August to witness it for themselves.

I am a strong supporter of regional tourism and the Marshall Liberal government is committed to supporting our regions and driving growth into our regional economies by supporting excellent initiatives, such as the Cuttlefest, throughout our state.

HOME HOSPITAL PLAN

The Hon. F. PANGALLO (15:08): I seek leave to make a brief explanation before asking a question of the Minister for Health and Wellbeing, the Hon. Stephen Wade, about the Home Hospital plan.

Leave granted.

The Hon. F. PANGALLO: The minister was on radio today and in this chamber speaking in glowing terms about the government initiative to try to free up hospital beds. Under the plan, patients would be monitored and given acute care in their homes, but what responsibility do hospitals take when they make a decision to discharge patients almost immediately after having major heart surgery and it goes tragically wrong?

In the case of Mr Paul Errigo, he went into the Lyell McEwin Hospital as a private patient last Tuesday to have stents inserted. Mr Errigo's family tell me that, while he was being operated on, Mr Errigo suffered cardiac arrest and had to be revived. Two days later, doctors decided to give Mr Errigo another three stents. Despite family and Mr Errigo wanting to be kept in hospital and monitored because of the seriousness of his condition, the hospital decided he was well enough to go home on the next day, the Friday.

Yesterday morning, Mr Errigo was found dead in his bed, the result of a cardiac arrest as he slept. His family now want answers. My question to the minister is: does he find it acceptable that a still critical patient, who only days earlier had to be revived, was sent home almost immediately after undergoing major life-threatening surgery without any proper monitoring equipment? Will he now order an urgent investigation into the treatment and discharge of Mr Errigo? Why should the public have confidence in his Home Hospital plan, and what assurance can he give that patients with serious medical conditions are not discharged prematurely and against the wishes of family members and patients?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (15:11): I thank the honourable member for his question. It won't surprise the chamber that, in the circumstances of the case he mentions, it's my expectation that that would be the subject of an inquiry not only by SA Health but also by the Coroner, in the circumstances as I understand them. In those circumstances it wouldn't be appropriate for me to comment. In relation to the duty of health services, of course health services have an obligation to ensure the safety of the patients, and that includes considering all factors in making discharge decisions.

I should just clarify that the Home Hospital project is not so much for the discharge of an acute patient who is, shall we say, part way through their care journey but more at either the

pre-hospital stage or at the ED stage. For example, in the Geriatrics in the Home program in Modbury Hospital people are assessed by the geriatric consult team, and once their care needs have been identified the decision will be made as to whether to admit them to the hospital or to admit them to the Geriatrics in the Home program, where they can receive the relevant treatment at home.

Whether SA Health is delivering services in a hospital or in the community, of course it has obligations to ensure quality and safety, and that will be integral to the design and implementation of the Home Hospital program.

HOME HOSPITAL PLAN

The Hon. F. PANGALLO (15:13): Supplementary question, again to the minister: are staff or clinicians at hospitals and also the Lyell McEwin under instructions to discharge patients as soon as possible?

The Hon. S.G. WADE (Minister for Health and Wellbeing) (15:13): I am aware of no such instruction.

MINISTERIAL STAFF

The Hon. T.T. NGO (15:13): My question is to the Minister for Trade, Tourism and Investment. Will the minister confirm to the chamber that the Treasurer's office has informed the minister's chief of staff that his contract will not be renewed?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:14): I am not responsible to the chamber for any of the staffing matters in my office. I don't believe the Treasurer's office was involved in anything to do with the staffing arrangements in my office.

SILICOSIS

The Hon. T.J. STEPHENS (15:14): My question is to the Treasurer. Can the Treasurer give the chamber any further information regarding silicosis and workers in the engineered stone industry?

The Hon. R.I. LUCAS (Treasurer) (15:14): I thank the honourable member for his question. As I have indicated, I think on one or two previous occasions, the South Australian government is extremely concerned about the safety of workers in the engineered stone industry, particularly in relation to the ever-growing importance of the issue of silicosis. It's a national issue. It is not, obviously, an issue that the South Australian government has to address, but the national government is engaged and other state and territory governments are taking action in their respective jurisdictions as well.

I won't repeat what I believe I informed the chamber of on a previous occasion, but just update members on some recent actions that have occurred in relation to the issue of silicosis. The group that I have convened in an informal fashion has met again recently, and that group comprises representatives from SafeWork SA, ReturnToWorkSA, SA Health and the Mining and Quarrying Occupational Health and Safety Committee (MAQOHSC). They have met, I think, on about three or four occasions with me. At the most recent meeting, we had an update about the activities of what each agency was doing in terms of addressing in a coordinated way the issue of silicosis.

ReturnToWorkSA informed me and the group that they have now engaged Corporate Health Group and access programs to provide a free and confidential employee assistance program counselling service, up to three one-hour individual counselling sessions for the workers and the employer who may be impacted by direct exposure to silica dust in the course of their employment. These services can be accessed in both metropolitan and regional areas by phone, Skype or face to face. People can also access further counselling sessions where recommended by the provider and approved by ReturnToWorkSA.

In addition to those one-on-one counselling sessions offered to workers or immediate family members, the employee assistance program provider can also conduct free on-site group education sessions, where requested by the employer. On-site debriefing sessions can also be provided to the workplace and any affected workers by the employee assistance program provider.

The program's service can be utilised by affected workplaces and workers at multiple points, regardless of a diagnosis, i.e., prior to a health screening, during the health screening process, whilst the worker is waiting for results or once results have been communicated to the worker. It may also extend to the workers compensation claims process, depending on the nature of the support required.

Information about this program is available on the ReturnToWorkSA website, where promotional materials on the service are also being distributed by stakeholders, including SafeWork SA, MAQOHSC and Jobfit, which is the occupational health services provider that has been engaged to undertake the health screening of workers.

In addition, ReturnToWorkSA has met with the SA office of MATES in Construction to brief them on the silicosis screening program and the available services that are being provided. I would hope in the near future to be able to report to this council and publicly on the results of the health screening audits that are being conducted. As I have previously advised the council, I approved funding of \$400,000 in January of this year to enable MAQOHSC to conduct those health assessments of workers in South Australia for silicosis.

It is a complex and complicated process. It can require a first test and then, I am advised, there are specialist screeners or readers that are currently only available from Queensland. If required, further assessment is required to be done by those particular specialists (at this stage only available in Queensland).

When more information on that becomes available, I am prepared to share that with the council. I am advised that, as at 24 May, 292 employees had been identified as requiring a health assessment. One hundred and seventy-five health assessments had been completed and, out of those, 29 had been referred to a respiratory physician. I am also advised that SafeWork SA inspectors are currently auditing all workplaces that they are aware of to ensure compliance with work health safety legislation. SafeWork SA is working with all PCBUs to reduce current and future exposure to respirable silicon dust.

Finally, on 30 April 2019 I was pleased to see, during the federal election campaign, the then federal government and now re-elected Morrison government announced \$5 million to establish a national dust diseases task force, referred to as the national task force, to develop a national approach for the prevention, early identification, control and management of dust diseases in Australia. Members of the national task force will be drawn from the medical community, industry, researchers and government. I am advised the national task force will report to the COAG Health Council of which my ministerial colleague, the Minister for Health, is a member. That will commence as from July of this year.

The PRESIDENT: The Hon. Ms Bonaros, a supplementary?

SILICOSIS

The Hon. C. BONAROS (15:20): Has the government included in their discussions or contemplated broadening the scope of the dust diseases regulatory regime to ensure that it extends to silicosis if and as required in the future?

The Hon. R.I. LUCAS (Treasurer) (15:21): I am certainly at this stage taking advice from all those agencies on the particular task group, but that has not been a specific recommendation as yet that has come through. There is obviously a response at the national level. We have been in touch with other ministers with similar responsibilities in other jurisdictions and other stakeholder groups. We certainly have an open mind in relation to a coordinated national response to this.

We have an example that we are aware of of a worker who worked in another state for a number of years and who then moved to another state or another jurisdiction and that particular worker may, for example, be impacted by silicosis. So there is a national requirement, in our view, to try to address this important issue. We have an open mind in relation to suggested not necessarily remedies but suggested actions that the governments of Australia might be prepared to take, but at this stage we have made no firm decision in relation to that particular issue.

BRAND SOUTH AUSTRALIA

The Hon. M.C. PARNELL (15:22): My question is to the Minister for Trade, Tourism and Investment about Brand South Australia:

1. With the imminent closure of Brand South Australia, what analysis has the government undertaken in relation to the economic impact on South Australian businesses of the closure, and in particular has any work been done to measure the likely impact of ceasing the I Choose SA campaign, which is aimed at a domestic audience rather than interstate or overseas?

2. What will happen to the I Choose SA business directory, which is currently compiled, published and maintained by Brand South Australia? Will the government be taking over that project or will it wither and die?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:23): I thank the honourable member for his question. It is also a pleasure to see him back here, fit and healthy, after his recent illness. It is good to see him here.

The South Australian government is passionate about promoting the state to the world and sees great value in looking at how we might continue the campaigns that drive success for local businesses. As the member knows, we will have a much far greater emphasis on marketing South Australia interstate and internationally through targeted activities through the Department for Trade, Tourism and Investment and particularly tourism campaigns and outbound and inbound missions.

Our strategy to market South Australia is to ensure that everything we possibly do grows our economy. So we see that in some of our overseas activities we can do more, and we also know that we can do more interstate. There are some functions of Brand SA that are currently under discussion with some other stakeholders in South Australia as to how we might look at, if you like, using the elements of any of the work that Brand SA did that has an economic benefit to businesses in South Australia. That work is continuing to be done. I can assure members opposite that we as a government are invested in the brand. I know props are not allowed but members can see my business card and it is prominent on my business card.

We love the brand and we continue to use it. We will look at all of the elements of the activities that Brand SA did that added value to the business community. A number of businesses have spoken to a range of stakeholders around elements that they would like to see continue, and the directorate—as I think the honourable member called it—is one of those things that we will look at, and if it adds value to South Australian businesses we will look at ways of using it and integrating it in the way forward.

As I said earlier, we are passionate about the brand. It is important to note that the brand is a logo that has been widely supported, but we also know that it actually identifies exactly where South Australia is and it is perfect. That is why, when the premier and I met some five years ago, I said that we supported the new logo and the brand, but we think there are more opportunities now to take that to the world.

We have to grow our economy. As a former New Zealand prime minister once said, 'We're not going to get rich by selling lattes to each other.' While it's a bit of fun to do that, we need to grow our economy and to have more jobs, more tourists and more international students. We think that in the way that we will use this particular brand from now on it will have a much greater interstate and international focus.

COUNCIL FOR INTERNATIONAL TRADE AND COMMERCE

The Hon. K.J. MAHER (Leader of the Opposition) (15:26): My question is to the Minister for Trade, Tourism and Investment. How much state government funding is currently provided to the Council for International Trade and Commerce, and how many South Australian chambers of commerce are members?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:26): I don't believe that CITCSA gets any funding currently from the state government. I can't recall the exact number of chambers of commerce that are members. I know a number of the members. It was an organisation that was significantly defunded by the former government. I know that there were some

concerns when that happened. I have met with a large number of them over the period of time that I have had the good pleasure to be a member of this chamber, but at this point in time we are not giving them any funding.

Condolence

HAWKE, HON. R.J.L.

The Hon. R.I. LUCAS (Treasurer) (15:27): With the leave of the council, I move:

That the Legislative Council expresses its deep regret at the recent death of the Hon. Robert James Lee Hawke AC GCL, former Prime Minister of Australia, and places on record its appreciation of his distinguished public service, and as a mark of respect to his memory the sitting of the council be suspended until the ringing of the bells.

Robert James Lee (or Bob as he was known) Hawke was born in Bordertown, South Australia, on 9 December 1929, the son of a minister of religion and a former teacher. I think that other very famous product of Bordertown, my colleague the Hon. Mr Ridgway, may well make an informed contribution from, in part, a Bordertown perspective.

The Hawke family moved to Perth, Western Australia, where Mr Hawke completed his schooling. He studied at the University of Western Australia and then went on to distinguish himself at Oxford University as Western Australia's Rhodes scholar for 1953, and distinguished himself in many other good old Aussie ways: as it was described, he established a world beer drinking record whilst at Oxford, drinking a yard in 11 seconds flat.

On returning to Australia he started doctoral studies at the Australian National University, Canberra, but did not complete them. He joined the Australian Council of Trade Unions (the ACTU) as a research officer in 1958 and became an advocate, before his elevation to ACTU president from 1969 to 1980. I must admit that I was not aware that he unsuccessfully contested the Victorian seat of Corio for the ALP at the 1963 federal election. He then continued to build a presence in the Australian Labor Party and was a member of its national executive from 1971 and served as national president of the ALP from 1973 to 1980.

As an ACTU leader, Mr Hawke had become a household name, and his transfer from the industrial relations field to national politics was predicted and expected by many. He entered federal parliament by winning the Melbourne seat of Wills at the 1980 general election and was immediately promoted to the opposition front bench as spokesman for industrial relations, employment and youth affairs.

On the same day, in February 1983, the Liberal prime minister Malcolm Fraser sought and was granted a double dissolution, and the ALP announced that parliamentary leader Bill Hayden would step aside. Mr Hawke was confirmed as leader five days later on 8 February. For those of us in the chamber old enough to remember, it was a period of monumental political change: the turbulence of being able to, not in the middle of an election campaign but at the commencement of a federal election campaign, successfully depose one leader and replace that leader with another. I do not think that had been done before and I do not think has been done since in terms of its brutal efficiency in making a leadership change.

The ALP won a clear majority at the March election, in significant part based on the personal popularity of Mr Hawke, and formed a government for the first time since 1975. Under Mr Hawke's leadership the party also won elections in 1984, 1987 and 1990. Ultimately, Mr Hawke lost the ALP leadership and the prime ministership in a party room challenge or coup by former deputy prime minister and treasurer, Mr Paul Keating, on 19 December 1991. He resigned as prime minister the next day and from parliament on 20 February 1992.

Encapsulated in that was a remarkable industrial and then political career, and I want to speak a little about his time in politics and some of his achievements. In reflecting on Mr Hawke and our memories of former Prime Minister Hawke, many of us remember various things. I guess his larrikin appeal to the Australian electorate, in terms of his punting, smoking, drinking and other habits, endeared him to not just workers but many Australians in terms of his leadership, first of the ACTU and then his leadership of the nation.

In the nearly 30 years since his leaving politics and his untimely death in recent days, his reputation, together with that of some other former prime ministers, grew in stature, and the respect

that a broader group in the community have felt for them in their retirement years has grown compared with perhaps the more narrow-cast support they might have had whilst they were political leaders.

Mr Hawke is a bit like our current Prime Minister, Mr Morrison, in one respect anyway, in that they are known to the majority of Australians by their nicknames of great Aussie familiarity: Hawkie in his case and ScoMo in the case of Mr Morrison, the current Prime Minister. When one thinks of all the other recent prime ministers, Mr Howard, as widely loved and respected as he was, was never known as Howie or JoHo, and Malcolm Fraser, Paul Keating, Kevin Rudd, Julia Gillard and the like were never ultimately accepted by the majority of the Australian populace by endearing nicknames. Mr Hawke was known in particular as Hawkie to the vast majority of Australians.

Former Prime Minister Hawke certainly was courageous in relation to his leadership on a range of particular issues. His abhorrence of racism led his political views, both before becoming a member of parliament as the ACTU leader and during his time in politics, and led him to lead the national debate in a number of those important areas during those particular years.

In the 1970s, his commitment to the selection of sporting teams on a non-racial basis led to a ban on the South African cricket team touring Australia. His abhorrence of apartheid would lead to further effective action while he was prime minister in support of human rights in South Africa. There are a number of other examples throughout his political career, such as his attitude to dissenters in China, for example, and elsewhere, where he led national and public debate in a way that was widely regarded by people from across the political spectrum.

On more particular political, economic and development issues, he led a debate that was not always supported by the majority of his own party. In the late 1970s, for example, the Australian Labor Party and the union movement were deeply divided about uranium mining. Bob Hawke's advocacy both as a union leader and as a Labor leader ultimately was different from many within his own party. He told the 1979 ACTU national conference that banning uranium mining would be 'a monument to futility'.

For those of us who are old enough to have followed the debates, that period of 1979-82 was a period of great debate in the South Australian parliament in relation to the Roxby Downs mining development. Many within the South Australian Labor Party were trenchantly opposed to uranium mining and the Roxby Downs mining development. As I have highlighted before, it was through the courage of a Labor member in this particular chamber, the Hon. Norm 'Stormy Normy' Foster, who crossed the floor and was ultimately kicked out of the Australian Labor Party for it, that ultimately allowed the Roxby Downs development to proceed in South Australia.

The thousands of workers and their families in South Australia who benefited from jobs related directly and indirectly to uranium mining and the Roxby Downs development is testament to the courage of a few within the labour movement and within the Labor Party, like former Prime Minister Hawke, then ACTU leader, in relation to it. We as a state are indebted to the courage of those few who were prepared to have the courage to stand up and lead debate.

As prime minister, he again took positions that were not comfortable to many within the Australian Labor Party. He led the charge on privatisation, for example. During his leadership of the Australian Labor Party at the national level, the Commonwealth Bank was privatised, Qantas and TAA were prepared for privatisation, Telstra was opened up for competition and personal and company taxes right across the board were reduced. We have seen in the recent public debate significant debate about the level of income tax and company tax reductions and whether or not they should apply across the board or perhaps to only certain groups in the community.

The entry of foreign banks was allowed whilst he was leader, the financial industry was deregulated, the dollar was floated and tariffs were cut. Many of those areas were uncomfortable issues for some within the Australian Labor Party and within the broader union movement. Again, he showed leadership and, to be fair, with the support of the Hon. John Howard, then leader of the opposition, those particular changes were able to be implemented, to the ultimate benefit of the people of Australia in terms of the major economic reforms that Bob Hawke led, together with the support of Paul Keating in his own party, during that particular period.

He also urged the opening up of Australia's trade and economic relations with the rest of the world, in particular with China; in fact, he anticipated, before most, the opportunities in relation to trade with China. He encouraged all aspects of our relationship with China but, as I said earlier, not at the cost of his recognition of the need for human rights, his priority in the immediate aftermath of the student uprising in Tiananmen Square in 1989. Many Australians will know the leadership role former Prime Minister Hawke showed during that period, a period of great controversy not only in China but around the world and in Australia, in particular, as well.

On behalf of the members of the Liberal Party in the Legislative Council, I want to pay tribute to the contribution former Prime Minister Hawke made to public life, to Australia. I have highlighted aspects of what he did that were to the great benefit of South Australia but, on behalf of the Liberals in this chamber, I pay tribute to what he did and what he sought to do on behalf of the people of Australia.

Political leaders are not loved by everyone; they are certainly not all saints and not everyone loves everything that an individual political leader does, but the warm regard that was felt by the overwhelming majority of Australians on his passing is testament to the fact that, by and large, the majority of Australians believe he did much good for Australia, and for that we should be thankful and grateful. We pass on to his wife Blanche and his children, his family and his friends, our sympathy and our gratitude for the contribution he made to the people of Australia.

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment) (15:42): I would like to endorse the comments made by my leader in relation to the former Prime Minister of Australia, the Hon. Bob Hawke.

My colleague the Hon. Rob Lucas mentioned the town of Bordertown, which members know was my hometown—and I guess it still is my home town. My grandparents lived next door to Mr Clem Hawke and his wife, so when Bob was born my mother and aunt were next-door neighbours. If my mother were still alive she would be 96 now, so she was about six years old when Bob Hawke was born, but my aunt was about four or five years older than my mother and was about 11 or 12. They used to babysit him, especially my aunt, and push him around Bordertown in a pusher.

As members would know, Bordertown is not an area that is fond of Labor politicians, and there were often jokes that perhaps it was a shame they did not push him into the creek or something, but as time went by even Bordertown softened. It is an area where the local member still enjoys one of the safest seats in the nation for the Coalition, but Bordertown softened its view to having a prime minister born there, respecting the fact that rising to the office of prime minister, irrespective of your political allegiances, is a significant achievement.

I am reminded that the Apex Club invited the then prime minister to come back to Bordertown for their 500th meeting; little old Bordertown had probably 30 or 40 members of the Apex Club, but he saw fit to come for their 500th meeting. My father-in-law was a member of the Apex Club, and I still have a bottle of the port bottled especially to commemorate that particular dinner meeting. He then came back for the 1,000th dinner meeting, after he was no longer prime minister, and I think he also came back more recently, in the last decade, just to visit Bordertown and pay tribute to the community.

The house he was born in is known as Hawke House—it was not known as Hawke House until he became prime minister—and I think the same family still owns it today. I looked through a book that recounts some of the local community history. When he became prime minister there was a suggestion that a plaque be put on the house. The owner of the house rejected that idea, but then a suggestion came from a Melbourne firm of monumental masons, who perhaps saw an opportunity to make a little bit of money out of it. They offered to donate a bronze bust to the community. There was a lot of discussion at the local council level as to where that should be situated, but in the end it was placed in front of the institute or the town hall. It probably received a bit of adverse attention in the early days and may have been a little damaged, but I know it was repaired.

Within a matter of years, irrespective of his politics, people respected the fact that this man was the prime minister. It is a bit like Sir Robert Menzies and Jeparit. There is a monument to Sir Robert Menzies there, and I am sure there are a lot of people in the Jeparit community who would not have ever supported Sir Robert Menzies but who nonetheless respect the fact that he was born

there. I think that today Bordertown celebrates the fact that a prime minister of significance, which the Hon. Mr Bob Hawke was, was born in that town.

I know there was some discussion around his house being a museum. Maybe if Mr Bill Shorten had been successful at the recent federal election they might have turned his house into a museum. I am sure the house will be there for many, many years to come. Maybe, at some point in the future, if there is a federal change of government and the local members of the Labor Party would like to turn it into a museum, that would be an option. On behalf of the Bordertown community, we appreciate and acknowledge the contribution that Bob Hawke made to public life and we celebrate the fact that he was born in country South Australia in a place called Bordertown.

The Hon. K.J. MAHER (Leader of the Opposition) (15:46): I rise to support the motion. Bob Hawke is a Labor legend, but more than that he was a prime minister for all: comfortable in his own skin, a true believer, a true leader and a voice for Australia. Born on 9 December 1929 in Bordertown in the upper South-East, Robert James Lee Hawke was the younger of two sons. Tragically, in 1939, Bob lost his brother, then 18, to meningitis. After moving to Western Australia, Bob Hawke quickly became the president of the University of WA's student representative council and graduated in 1953 with law and arts degrees. That year, Albert Hawke, Bob's uncle, became WA's Labor premier.

In 1953, Bob went to Oxford University as a Rhodes scholar. In 1956, he married Hazel Masterson in Perth. Bob Hawke enrolled in a doctoral program at the ANU and then took a job with the ACTU, a defining moment in his career path. After fighting many battles at the ACTU for working Australians, including the basic wage decision, he went on to become the member for Wills in 1980. In just a few years, he would become prime minister—quite a remarkable achievement.

He was elected prime minister in a double dissolution election after then prime minister Malcolm Fraser called a snap election. As we have already heard from the Leader of the Government, Hawke had only just been elected leader, not long before polling day. Fraser and his team thought that the best way to capitalise on possible leadership problems was to call a snap election. Of course, that turned out to be a disastrous mistake for the then Fraser government. Labor gained 24 seats in that election, sweeping the former ACTU president, Bob Hawke, to power and securing a 3.6 per cent swing.

In government, there were many very big-ticket items that changed the country dramatically. Bob Hawke and his government promptly cemented the Prices and Incomes Accord, an agreement between federal Labor and representative unions. It was a revolutionary agreement for wage restraint in return for sweeping social reform, particularly including the introduction of Medicare. Enacting Medicare went on to change the fabric of society, ensuring that we had a healthcare system for all, not just the well-off. It was a system that did not discriminate, a system that boosted the economy and kept people well and a system that is an integral part of our health system today.

Hawke ensured that we did not go down the same path as countries like the United States, where there is a patchwork of healthcare systems that primarily benefit only those who can afford them. He introduced other sweeping reforms, particularly to the economy, including the floating of the dollar and the sale of the government-owned bank, which were very difficult decisions at the time but laid some of the foundations for the modern and outward-looking economy that we have today.

He was a strong advocate for the environment, well ahead of his time, famously supporting moves to protect the Franklin River from damming. Importantly, he was ahead of his time in other areas. In 1988, at Barunga in the Northern Territory, Bob Hawke was presented with the Barunga Statement, which now hangs in federal parliament. Hawke committed to a treaty process that I think many people still call unfinished business, business that the last Labor state government continued on the long road that is difficult, but this country is getting there.

I think what many people thought about Bob Hawke, and what they thought set him apart, was how genuine he was. He was committed and he was not afraid to wear his heart on his sleeve. He was a partner with the public throughout the good times and the bad. In 1984, when Bob Hawke shared his devastation about his daughter's addiction to heroin, there was not a dry eye in many houses watching that footage on the evening news. Bob Hawke was that kind of guy, the sort of guy that you could have a beer or 10 or 12 with.

I was lucky to spend some time with Bob Hawke after he retired from politics. One of the many things I admired greatly about Bob Hawke is how actively he stayed in campaigning for the Labor Party after he retired from politics. During the 2007 federal election campaign, I was fortunate to drive him around for a couple of days to shopping centres throughout Adelaide where he was literally mobbed by adoring fans. The genuine regard in which people held Bob Hawke saw him mobbed whenever he went to shopping centres.

Then again in 2010, Bob Hawke spent a couple of days in South Australia and I quickly volunteered to spend those couple of days with him, picking him up from the airport and ferrying him from place to place. I learnt a very great deal about some of the insights into Bob Hawke, some of the very interesting and very funny stories from his early days and just the sort of person that he was.

He is survived by his second wife, Blanche, his children, his grandchildren and his great-grandchildren. On behalf of the Labor Party, I want to thank Bob Hawke for all he has done for the labour movement. We will miss him dearly and we will attempt to live up to his ideals and passion for making a difference.

The Hon. E.S. BOURKE (15:52): March on. Before Bob Hawke's imminent passing, Bob made it clear to the Labor Party headquarters that the campaign and volunteers, win or lose, must march on. Despite Bob knowing the end was near, his energy was directed towards his family and his beloved Labor Party and country. To march on, to keep going, was the message Bob left echoing in the minds of many Labor volunteers to fight for the Labor legacy and build on Bob's legacy, a legacy that surrounds us in monuments that remind us of what a Labor government can achieve.

We did not deliver victory on 18 May, but we will, as he rightfully said, march on. Bob was a leader of conviction. He brought a nation together. Bob's most powerful and enduring tributes will not necessarily be his loud jackets or his words or acts of empathy. They are, however, I believe, the world-class universities that stand in our community today that were made accessible to all Australians. It is the modern and competitive economy that we enjoy today, with an idea that growth is stronger when it is shared, when wages and living standards rise and security for retirement is provided through the creation of a compulsory superannuation scheme.

Legacies like Bob's dedication to education enriched our country forever. It is hard to believe that fewer than three in 10 students finished school when Bob came to office. Remarkably, eight in 10 finished school when he left. Bob Hawke gave many life gifts to every Australian but there is a green and gold monument to Bob Hawke that we all carry with us right now, and that is our Medicare card, a promise made in green and gold that the health of all Australians matters. Bob's drive to bring people together, to not label or segregate communities, is what I feel made him the leader he was and the leader who was loved by all Australians.

I want to touch on a few personal stories, some very similar to those of many other members in both this and the other chamber. Putting aside Bob's political achievements, I know Bob had an opportunity to be part of a fabulous school community because he went to a fantastic school, the same regional school in South Australia that I went to—many, many years later—Maitland Area School, now known as Central Yorke.

In 1935, Bob and his family moved to Maitland from Bordertown, and perhaps we were the only two Labor people in the village. It was here, as in many cases, that Bob's loud voice at the time not only resulted in him getting into trouble but also proved his ability to be a leader. In his school report, which you can see at the Hawke Library, it states:

Bob is capable of achieving very good work but would have received higher marks if it were not for his carelessness.

This feedback worked for him. He went from being an average student in his class to getting the highest marks in his class for the remainder of his time at Maitland.

Another story that happened in Maitland, which probably no-one outside of Maitland knows about, is that Bob Hawke could have been the prime minister we never had. At a very young age, Bob was pulled out of the local Maitland dam by a local farmer after almost drowning. So I do thank that farmer because he delivered to us one of the greatest prime ministers this country has ever seen.

Another story—and this is when it comes more to the time when I started to meet Bob—is that, when I was working in the party office, I was asked to contact Bob's office to organise a meeting. I looked up the directory thinking I was calling his office. It rang out and I did not think much more of it. Two weeks later, our receptionist answered the phone and called out, saying, 'Emily, there's a Bob Hawke on the phone for you.' I thought, 'One of the guys is clearly messing around.' I took the call and said, 'Who is it this time? Who's pretending to be Bob Hawke?' Then I heard the voice, 'It is Bob Hawke.' I was incredibly embarrassed after that and the conversation did not go very well, but he did organise the meeting.

Later on, I did something very similar to what the Hon. Kyam Maher just stated and also what the member for Croydon in the other place said today. I was one of the very lucky few who was given the opportunity to pick Bob up from the hotel he was staying at in Adelaide and drive him down to Colonnades. It was the longest drive of my life and I was terrified about doing this. When I picked him up it was a terrible, windy day. I pulled up to the hotel very nervous. I got out and opened the door for him. He quickly shut the door and said words I cannot repeat in this chamber to highlight how windy it was. I certainly was not as nervous after his opening line to me.

As the member for Croydon said in the other place, he was just incredibly distracted, thinking about the many, many things that were always going through his mind, even at that point in his political life when he was not in politics. He was on the phone the entire trip and had to borrow my phone, because his went flat, to do radio interviews for the trip down there.

From the second we walked into Colonnades I saw something I have not seen in any other political leader—and there have been a few in previous years. He was absolutely swamped when we walked into the food court in Colonnades. He must be eating a lot of ice cream, because the member for Croydon said the same thing. He shared an ice cream with a very adoring fan in the food court. There were many, many people, young and old—it did not matter what age group they were from, everyone just loved Bob and they could not get enough of him on that day.

I pay my respects and give my thoughts to Blanche and her family, to Bob's family and also to his very loyal adviser, Jill. Anyone who ever called his office instead of his home would have spoken to Jill. She was always there and she was very, very protective of Bob.

Many have said that in Australian history and Australian politics there will always be BH and AH: before Hawke and after Hawke. I could not agree more. It was not just Bob's loud jackets that were technicolour; Bob's emotions were a technicolour of tears and temper, and they were vividly displayed. He did not hide who he was. He did not treat voters like fools, and he had a personal ambition to change Australia. He achieved what many politicians could only ever dream of achieving. He left this country a kinder, better and bolder country. Bob, we will march on and we will continue your legacy.

The Hon. R.P. WORTLEY (16:00): I rise today to support the condolence motion for the Hon. Robert James Lee Hawke, the 23rd Prime Minister of Australia. It is with sadness and pride that I speak today on this motion. Sadness because a great man has passed away, but pride because of the great contribution that Bob Hawke left after a lifetime of work within the labour movement.

Bob Hawke had an extraordinary career, both as a union leader and later as prime minister. Few Australians have made such a large contribution to our nation as Bob Hawke, and with his passing Australia has lost a man who gave so much for his country. Many will remember Bob Hawke as a much-loved larrikin, who could down a yard glass of beer in 11 seconds, the quintessential Australian who would become a beloved figure both in the labour movement and across the nation.

The omnigregarious, charismatic man who bestowed his prime ministerial approval for a national sickie was someone who cared very deeply about Australia and Australians. Bob Hawke abhorred racism, placed a high priority on improving the status of the lives of women, fought for the rights of unions to organise and bargain and championed the right of every Australian to access a world-class health system.

Bob Hawke had a modest start in life, born in Bordertown, South Australia, in 1929. He went on to study at the University of Western Australia and later at the University College of Oxford. Hawke joined the Australian Council of Trade Unions in 1958 and after a decade became its president, from

1970 to 1988. I was lucky to get involved in the trade union movement myself in the late 1970s and became an organiser in 1984, and I know that he played a major part in industrial relations right through his prime ministership.

In 1980, he decided to enter parliament. At this stage of Hawke's career, he was one of the best known and admired public figures in the country. As president of the ACTU, Hawke championed causes such as opposing the war in Vietnam and opposing French nuclear testing in the Pacific. Hawke vehemently opposed apartheid in South Africa and campaigned for racial equality. He defended Nelson Mandela against conservatives who labelled Mandela a terrorist.

In 1980, Hawke entered the federal parliament and went on to become the Labor leader on the very same day the election was called by Malcolm Fraser. Hawke and the Labor Party successfully formed government in March 1983, taking 75 of the 125 seats in the House of Representatives.

Hawke, along with his treasurer, Paul Keating, undertook the challenge of managing an ailing economy by working closely with business and workers. His government started work by deregulating the financial system and exposing it to competition. Then came the floating of the dollar on the world market rather than tying its value to any standard. This process helped reshape Australia's relationship with Asia, Europe and the US.

Hawke was also instrumental in forming APEC, the Asia-Pacific Economic Cooperation, in 1989, he reformed superannuation for workers and outlawed gender discrimination in the workforce. His government also implemented stronger environmental controls, overruling Tasmania's plans to build a controversial dam. Hawke's legacy is one of reform to the economy, which set our nation on a strong course. In doing so, Hawke adhered to a belief that a system based on the idea of growth is stronger when it is shared, built around the notion that wages and living standards should rise and a safety net should be put in place for those who would fall on hard times.

Hawke's legacy, naturally, endures today. Hawke was not only a larrikin, he was also never frightened to show his emotions, and on a number of occasions he would shed tears, quite emotionally, on TV in front of a national and international audience. It was this that made him an icon in Australia: people felt confident that this man truly cared about the things he believed in and the people he represented. Hawke's legacy endures all around us and can be found wherever we look. It is in our Medicare card, our world-class universities, our modern economy, our antidiscrimination protections and the preservation of the Daintree Rainforest and Franklin River.

Hawke was loved right up until the end. Hawke played a significant role even though he retired in about 1992. Hawke was still very active right up until within days of his passing away. Hawke touched the hearts of many people in the movement. I had the pleasure of meeting him on a number of occasions. He would come to Adelaide quite often, and his favourite restaurant was Paul's restaurant on Gouger Street. There was no pretension about Hawkie. When he came to Adelaide that was the thing he wanted to do at night time—go and have a nice fish dinner at Paul's restaurant.

I remember one time when Dana was in the Senate, and there was a leadership challenge between Kevin Rudd and Kim Beazley. We got home—one of the rare times we got home at night reasonably early—and there was a message on the tape from, well, we knew it was Bob Hawke, we knew what he sounded like, saying, 'Dana, Bob Hawke here, give me a call.' So she gave him a call, and Blanche answered the phone. Dana told her who she was, and she called him. I could hear him on the phone; we had the phone sitting between us. She said, 'Bob, Dana's on the phone, Dana Wortley.' He came to the phone, and he was lobbying on behalf of Kim Beazley. Dana was very quick in her response. Dana said, 'Look, Bob, you don't have to worry, I'm supporting Kim Beazley.' After about five seconds of jubilation, he said, 'Thanks very much for that,' and went off.

Also another story: on the day he died we had a meeting of the Torrens sub-branch. There were about 90 people there ready to meet with the candidates, Steve Georganas for Adelaide and Cressida for Sturt. Just as Cressida was coming through the door Steve was speaking, and my son came up to me and whispered in my ear that Bob had passed away. At that very minute, Cressida came in with tears pouring down her cheeks. It took her about three or four minutes to compose herself before she started speaking. But this is the impact that this man had on many people who

knew him. So it is with great sadness that I am here speaking about him passing away. I support the condolence motion.

The Hon. T.A. FRANKS (16:09): I rise to associate myself with the remarks made by previous speakers and support this motion of condolence for former Prime Minister Bob Hawke. As a member of generation X, Bob was my first prime minister, the first one I really remember. All I remembered of Malcolm Fraser was that his wife was called Tamie, and I was at quick pains to point out that it was spelt very differently, and a very different Tamie.

Bob Hawke was my first prime minister. I was a generation X child growing up with the threat of a nuclear winter and global warming. It was little surprise then that one of the things I remember best of my first prime minister is his work on the environment, taking the lead and using the instrument of section 52 of our constitution, that external affairs power, regarding the decision of the High Court in the Franklin Dam case in 1983.

Although those states had control over their land matters, when Australia became party to international agreements for environmental protection, commonwealth law could override state law. It is not often that I welcome that these days. Certainly the enactment of the World Heritage Properties Conservation Act 1983, giving the commonwealth responsibility for all the places listed as world heritage areas and the government moving for world heritage listing of both Tasmania's forests and of course those rainforests in North Queensland, was something that I thought was a mark of great leadership.

To me, Bob Hawke was the prime minister who championed the Sex Discrimination Act. As a teenager I watched those debates and realised that often truth is the first casualty in parliamentary debates. There were ridiculous stories of workers and what would happen should we have equality between the sexes in our workplaces that would unfold and were portrayed in our national parliament. I remember the minister for the status of woman, Susan Ryan, and her fortitude. I remember the development of things such as the national agenda for women, the affirmative action agency and, of course, the passage of that Sex Discrimination Act in 1984.

I particularly remember that Bob Hawke talked about treaty. We did hear it on the radio, we did see it on the television, we thought it was actually going to happen but, of course, we are still waiting for treaty. Back then, in 1989, the department for Aboriginal affairs was replaced with the Aboriginal and Torres Strait Islander Commission (ATSIC). Heady days that I hope we see again.

Thirty years ago to this very day I remember, as many people across the country who were alive then would, Bob Hawke shedding a tear at the human rights atrocities that were taking place in Tiananmen Square. For weeks we had witnessed massive rallies of people in both Beijing and Shanghai and we had heard their call for democratic reform. We were inspired by their idealism and courage and Bob Hawke, our prime minister, called on the Chinese government to withdraw their troops from that deployment against those unarmed civilians, to respect the will of its people, stating quite profoundly that 'to crush the spirit and body of youth is to crush the very future of China itself'.

He backed those words and those tears with real action, offering over 20,000 humanitarian visas to Chinese students who were then living in Australia. The families of those students were also invited here where we do indeed, for those who come across the seas, have boundless plains to share. Cabinet papers tell us that that decision was made without consultation to cabinet. He made that decision because it was the right thing to do and he made that decision with the backing of this nation.

I do not have a personal experience of meeting Bob Hawke, but he certainly did once ruin my school excursion. Back in 1983, when Bob Hawke became leader just as Malcolm Fraser called an election, my school had already booked in to go to Canberra to visit Parliament House. Shortly after that, on the day that the Hawke government was in fact sitting for their first day in parliament, our class duly arrived—as we had been preparing for many weeks by that point; certainly it had been planned prior to the election being called—and we were told, 'I'm sorry, there is not enough space for you all here; some of you will have to go to the National Art Gallery instead, but some of you we can fit in a small space up here and you have to be very quiet because all of the new ministers are being sworn in today and it's a very exciting day and they have all brought their families.'

So we were split into half and, quite honestly, I wanted to go to the National Art Gallery but somehow I ended up seeing Bob Hawke's first day as prime minister of the nation. I remember being very high up, very far away, and I know it was only the old Parliament House but I remember thinking he was a very short man, as I am sure many people did over time, but that shortness of stature belied his bigness of heart.

We were proud as a school because our local member for Kingsford Smith, Lionel Bowen, had just become the deputy prime minister—a great day for us. Back then, the nuclear disarmament movement was just starting to kick off and the later member for Kingsford Smith, Peter Garrett, who at that time was a member of the Nuclear Disarmament Party, had also given us great pride in the months to come under that Hawke era.

I also remember quite vividly the partnership of Bob and Hazel. Hazel Hawke was the first prime minister's wife that I remember, other than denying that Tamie Fraser was any relation to me, as would often be the charge. I recall the sacrifices of Hazel, the family that suffered with a daughter with drug addiction, that suffered in the public eye, that stood against racism, that stood for working people, that stood for what was fair and right, that stood in support of Nelson Mandela when he was labelled a terrorist, when he was not supported by groups like Amnesty International, and that stood with courage.

I remember Hazel's fortitude and courage and her sacrifice. One particular sacrifice that Hazel has recorded in her memoirs, and that was a passionate concern for her, was that she become very much a pro-choice advocate. In 1952, Hazel had an abortion so that Bob could go on to be a Rhodes scholar. At that time, the criteria required that he be unwed to be a Rhodes scholar, so they chose not to have that child at that point and to marry later so that Bob could fulfil some of his dreams and ambitions.

Bob's ambitions, dreams and achievements were well recorded later in life by the great love of his life, Blanche d'Alpuget, as well. We remember so many things about Bob: the Guinness world record beer drinking; the loud jackets and the telling people, which again was of great excitement at my school, that any boss who sacks someone for not turning up to work today is a bum. My school took that quite literally to heart: we refused to study that day, much to our teachers' chagrin, but the lessons he taught us were to have the courage of our convictions, to have that compassion and to not crush our youth.

I have often talked in this place about the moment Bob Hawke talked about no child need live in poverty in this country. Yes, he went off record and he paid a price for that. He often said that he wished he had stuck to the script, which of course was that no child need live in poverty, but the greater hope is that no child should live in poverty, and that was the greatness of Bob Hawke.

I am sure he gave Hazel many headaches and I am sure that is why she actually ended up advertising those particular tablets later in life, and we trusted that Hazel had had many headaches. He was the larrikin leader, but he also, along with those headaches, gave us a lot of hope, and I hope that sort of hope comes back to the leadership we have in this country some time soon.

The Hon. C. BONAROS (16:18): I rise to speak in support of the motion honouring former prime minister and Labor luminary Bob Hawke. Robert James Lee Hawke, or Bob as he was more commonly known, was, as we have heard, born in the small country town of Bordertown, South Australia, on 9 December 1929, and passed away peacefully in his sleep at his home in Sydney on 16 May, aged 89.

He was the prime minister of Australia in my formative years, throughout so much of my school life. He was very much a household name and one that I often heard family members older than me talk about with a great deal of respect. My father-in-law still lists him as our best ever prime minister, and I know that he is not alone. He was above class, above party and a consensus leader with a fierce determination to make things better for all Australians. In his own words, he said:

In whatever you can, try and help those around you. This is both the right and the good thing to do—but also it will make your own life more satisfying.

Bob remains the Australian Labor Party's most successful prime minister, winning four election victories from 1983 to 1991. I remember that time as when Australia came into its own with its own

independent and uniquely Australian identity. He gave us a new definition of Australian nationalism. Bob Hawke was the leader of the land Down Under.

Advance Australia Fair was adopted as our country's national anthem by the Governor-General in 1984 on the recommendation of Bob Hawke. The announcement followed a decade of debate, a national opinion poll in 1974 and a plebiscite in 1977. At the same time, Mr Hawke announced that green and gold would be officially recognised as Australia's national colours. It was the period that coined the phrase 'put another shrimp on the barbie', the phrase uttered by Aussie larrikin Paul Hogan in those celebrated and hugely successful ads for the Australian Tourism Commission first aired all those years ago in 1984.

Bob Hawke's tenure as prime minister saw the passage of the Australia Act 1986, the short title to a pair of separate but intrinsically linked pieces of legislation, one an act of the commonwealth and the other an act of the parliament of the United Kingdom. The nearly identical acts came into effect simultaneously and were passed by the two parliaments to eliminate the uncertainty as to whether the commonwealth parliament had the ultimate authority to do so. Each state also passed its own enabling legislation.

The effect of the acts eliminated once and for all the remaining possibilities for the UK to legislate with respect to Australia, for the UK to be involved in Australian government and for an appeal from any Australian court to a British court. It meant that the High Court of Australia became the highest court of the land and ended appeals from state courts to the Privy Council, something that the federal courts ceased in 1968. The acts cemented the status of the Commonwealth of Australia as a sovereign, independent and federal nation.

The 1980s were a great era in our nation's rich history, maybe best accentuated by Australia's inaugural win of the America's Cup in 1983—the first ever country other than the US to do so—with our secret weapon, the winged keel. One iconic moment of Bob Hawke's time in office was his response to *Australia II's* historic America's Cup triumph, which he watched from the confines of the Royal Perth Yacht Club. Donned in a sports coat with a map of this great country and the word 'Australia' emblazoned across it and a wide grin you could not wipe from his face, his advice to bosses around the country is legendary. If you were not around to experience it at the time, you can still find the clip on YouTube.

Bob Hawke energised this wonderful country and indeed the Labor Party by ushering in a decade of significant economic and social reform. He was able to harness his charismatic personality, powers of persuasion and strong relationships with both business and unions to forge a powerful consensus that defined a leadership style not seen since.

He had a touch of the Aussie larrikin and maverick about him, coupled with an amazing intellect that saw him attend Oxford University in 1953 as a Rhodes scholar. He studied economics at Oxford and submitted a thesis on the history of wage fixing in Australia. Bob graduated with a Bachelor of Letters in 1955, returning to Australia the following year and joining the Australian Council of Trade Unions, where he fought for higher wages at the Conciliation and Arbitration Commission.

As prime minister, he cemented Australia's place on the world stage, building bridges with Asia and beyond. With Paul Keating as treasurer alongside him, he modernised the economy, integrating it into overseas markets, floating the Australian dollar and being the chief architect to the historic wage accord between big business and unions. Bob Hawke made Australia a major player on the global stage as our country took advantage of the opportunities for us to compete internationally. He was, and until his death remained, a visionary.

As other members have mentioned, the Hawke government also oversaw stronger environmental controls, overruling Tasmania's plans to build the proposed Gordon below Franklin dam on the Gordon River in pristine Tasmanian wilderness. The dam would have flooded a large section of the Franklin River in south-west Tasmania. The World Heritage Committee declared the area a World Heritage Site in 1982; however, the listing of the area as a World Heritage Site by itself would not have prevented the construction of the dam. To stop the dam required incorporation of the protection of the area under international law into Australian domestic law.

In the midst of a growing national controversy and protests, led by emerging political leader Bob Brown, the Tasmanian government passed laws in 1982 allowing the dam to proceed and the Tasmanian Hydro-Electric Commission commenced preliminary works for the construction of that dam. During the 1983 federal election the Labor Party, under Bob, promised to intervene and prevent construction of the dam.

The Liberal Party, led by Malcolm Fraser, refused to use the external affairs powers to intervene to stop the dam, and this helped Labor win the election because it turned out that it was not only the right thing to do but the popular thing to do. The newly installed Hawke Labor government subsequently passed the World Heritage Properties Conservation Act in 1983. That act, in conjunction with the National Parks and Wildlife Conservation Act, enabled the government to prohibit clearing, excavation and other activities within the Tasmanian Wilderness World Heritage Area.

I pause to reflect on the fact that Bob was announced Labor leader on the very same day Fraser decided to call the election, and just four weeks later was installed as prime minister after a historic, landslide victory—an absolutely remarkable achievement.

The Tasmanian government challenged these actions of the Hawke Labor government and refused to halt construction of the dam, arguing that the federal government did not have power under the Commonwealth Constitution to stop the dam. Undeterred, however, the Hawke government commenced proceedings in the High Court for an injunction and declaration of the validity of the laws, which culminated in a historic decision delivered in July 1983.

In a four-three split decision, the High Court largely upheld the validity of the commonwealth laws, thereby preventing the dam proceeding—an absolutely monumental moment. This decision has had enormous significance for the extent of commonwealth powers to make laws under the Australian Constitution, including its powers to make laws to protect our environment, and for that I am sure we are all forever grateful.

The Hawke government banned uranium mining at Jabiluka on the western border of Arnhem Land in the Northern Territory, and gave highly publicised priority to the World Heritage-listed Kakadu National Park. The park was inscribed on the World Heritage List in three stages, beginning in 1991 and concluding in 1992. He brought environmental issues into the national discourse.

Bob Hawke's legacy continued with him leading the widespread reform of education and training. He inherited a fanatical commitment to education from his schoolteacher mother, Ellie. When he came into office in 1983, Australia had one of the lowest high school retention rates in the developed world; just 30 per cent completed year 12. When he left office that number had increased to an extraordinary 70 per cent. You can only imagine the difference that made to this country.

Hawke's reputation as a playboy should not be confused with sexism. As we know, at the ACTU Hawke championed equal pay for women. In 1984, the Sex Discrimination Act outlawed sex discrimination in the workplace. Bob Hawke appointed Susan Ryan to the portfolio of Minister Assisting the Prime Minister for the Status of Women, and she served in that role from 1983 to 1988. He even advocated a treaty—as the Hon. Tammy Franks alluded to, still unrealised—with Indigenous Australia

The introduction of Medicare, of course, will forever remain one of Bob Hawke's signature policy achievements, one that we are all extraordinarily grateful for. As we know, before Medicare most Australian families had to pay for private insurance to cover their expenses in hospital. The situation in Australia before Medicare was similar to that of America today, where medical expenses continue to push families into poverty. Hospital and medical expenses were one of the main reasons for personal and non-business-related bankruptcy before Medicare. After Medicare, authorities actually removed it from the published list of reasons because it fell to such an extraordinary low.

Bob Hawke unveiled Medicare in 1984, bringing the scheme into line with the Medibank model originally introduced by Gough Whitlam and partially dismantled by Malcolm Fraser's government. It became Australia's first affordable universal system of health insurance. The goal of Medicare was to greatly improve access to good medical care. It was the biggest and greatest social reform of our time, and Bob Hawke was responsible for that.

Bob also abhorred racism. He was disgusted with apartheid in South Africa and could not abide the timid responses around the world. As head of the ACTU, he was a leader in the protest against the visiting Springboks. As PM, he marshalled support at Commonwealth Heads of Government Meetings in the Bahamas in 1985 and in Vancouver in 1987 to put together financial sanctions against South Africa.

On this precise day, we also mark the 30-year anniversary of the Tiananmen Square massacre, which saw the slaughter of hundreds of innocent people on 4 June 1989 as the People's Liberation Army troops cracked down on pro-democracy protesters, many of them students, in and around Beijing's Tiananmen Square. It was the culmination of a series of protests that challenged the authority of China's leaders. The Chinese government's brutal response to the student-led pro-democracy protests sent absolute shock waves around the world. Of course, upon receiving the news about what had happened, Bob—being Bob—was shocked and sickened into action. He said:

When I received a message from the Embassy telling me of the incidents of the tanks rolling over the students, it broke my heart for China.

On 9 June 1989, he spoke in the Great Hall of Parliament House in Canberra at a memorial service for the victims of the Tiananmen Square massacre. He described the Australian embassy briefing that graphically catalogued how the pro-democracy student demonstrators had been killed. As he spoke, tears streamed down his face and he had to stop several times to compose himself before he said:

We meet here to show our support for the Chinese people and to reaffirm our commitment to the ideals of democracy and freedom of expression that they have so eloquently espoused... To crush the spirit and body of youth is to crush the very future of China itself.

Hawke condemned the Chinese government for the ruthless repression of its people. He instructed our ambassador in Beijing, David Sadleir, to convey this view to the Chinese government. He cancelled a planned visit to China later that year and he suspended other government-to-government exchanges, including a visit by the HMAS *Parramatta* to Shanghai. Hawke, who first visited China in late 1978 as the president of the ACTU and was regarded as one of Beijing's staunchest allies, did not have any significant contact with Chinese leaders for the next three years.

In response to the slaughter, Hawke extended the visas of Chinese nationals living in Australia, as alluded to by the Hon. Tammy Franks. However, there was opposition from within the Public Service to the idea of granting temporary humanitarian protection. 'You can't do that, Prime Minister,' is apparently what he was told. Of course, as we have heard, he rejected that advice and said, 'I've just done it.' It is one of the finest moments of Hawke's prime ministership. As a result, about 42,000 permanent residency visas were granted to Chinese nationals living in Australia.

He was prepared to take risks, something that few politicians are prepared to do today. He was immensely popular but never a populist. He was driven by purpose and set out to achieve that purpose. Bob Hawke was easy to like, with a twinkle in his eye and a burst of energy on the Australian political scene, with such steely determination to change Australia for the better—much better. He was not a perfect man—none of us are perfect—but he was an extraordinary politician and an extraordinary prime minister.

He was not just a Labor government's prime minister, he was truly the people's prime minister, loved and respected by Aussies of all political persuasions. I am rather saddened by the fact that I do not have any personal stories of Bob, other than the one time that I got to see him when he presented before Justice Kirby, so I figure I got two in one on that day. But, by gee, I and I think we all have a lot to be grateful for in his name. Vale, Bob Hawke, you beauty.

The Hon. F. PANGALLO (16:34): I rise to support the condolence motion and warmly endorse the words of praise by all my colleagues here today. Bob Hawke is the Australian political figure I admire the most, and he made a huge impression on me at a young age. He was a rambunctious man who possessed that rare commodity of intellectual smarts yet whose manner and language could cut right through with kings, queens and world leaders to cranky entertainers, boilermakers and pensioners. He could be both the statesman and the dinky-di Aussie bloke with a larrikin streak, complete with human flaws, of which he was open about.

Born in Bordertown in 1929, we can also rightly claim the son of a preacher man as a South Australian, even though his family moved interstate later on. Bob had the persona and charisma of a rock star and that legendary status never waned right until his final breath. The media loved him and Bob was skilled in using it to his advantage through different facets of his public life. I do not know if you have ever noticed one of his quirks: when he made a point of inflection that left eyebrow would often arc up.

I came across Bob in fleeting encounters a handful of times, the first in 1974 when I worked as a cadet journalist for *The News* and I was based in Melbourne at the offices of *The Herald Sun*. A group of workmates had been invited to a barbecue and a hit of tennis at his place, replete with the glistening swimming pool, that he joked loudly while chomping on a cigar came courtesy of a legal stoush with my 'bloody boss' at that time, Rupert Murdoch. It was followed by that trademark burst of laughter. You could not help but be mesmerised by him.

Bob was the boss of the Australian Council of Trade Unions, where he skilfully negotiated pay rises for blue-collar workers. In those days, the ACTU was extremely powerful, so powerful that he threatened Frank Sinatra would never leave the country unless he could walk on water and until the crooner apologised for insulting members of the fourth estate at his opening Melbourne concert at the place they called 'the House of Stoush', Festival Hall. I was fortunate to be in the audience that night but I shrank into my seat as Ol' Blue Eyes, with that customary burning cigarette hanging from his fingers, launched into his tirade, calling us 'bums, pimps and parasites' and female journalists 'buck and a half hookers'.

There was uproar in *The Herald and Weekly Times* editorial office the next morning. Journalists called on the unions to act, forcing the cancellation of Sinatra's second show. The Transport Workers Union refused to refuel his private jet so the party took a commercial flight to Sydney where cranky Frank was holed up in the Boulevard Hotel for three days contemplating calling the Seventh Fleet to come from Tokyo into Sydney Harbour to rescue him, and trying to get Bob's equivalent in the US, Teamsters' boss, Jimmy Hoffa, to exert some muscle. Bob Hawke turned up after the third day using his exceptional negotiating skills and elicited a form of an apology that quelled an international incident that made global headlines.

In a touch of irony, the next time I briefly encountered Bob was when he waltzed unannounced into a Hindley Street nightclub, aptly called Sinatra's, during an ALP national conference, holding up the bar in the wee hours with his jovial banter and blue jokes punctuated by that blaring laugh, before heading back to the Ansett Gateway Hotel, now the Stamford Plaza. In the wake of the Dismissal, Bob was an active participant whipping up the hysteria at migrant and worker rallies in Victoria Square with Labor luminaries, Gough Whitlam, Jim Cairns, Clyde Cameron and Don Dunstan. Bob stood out with his ocker style and you just knew politics was going to be his calling, and becoming prime minister his destiny.

As we have heard, Hawke made some of the most significant economic, social and environmental reforms of the postwar era, helping create the Australia we enjoy today. He tore down racial discrimination barriers here and championed the anti-apartheid push in South Africa to free Nelson Mandela. He was a fearless crusader for human rights.

Bob Hawke was a man for all seasons. He was unafraid to show his raw emotion in public when revealing on national TV that one of his daughters was a heroin addict or putting Richard Carlton back in his place after his 'blood on the hands' remark following Hawke's coup that unseated Bill Hayden as Labor leader and, of course, his teary condemnation of the massacre in Tiananmen Square.

In his tribute, former Liberal prime minister and political rival John Howard thought Hawke's biggest strength was his communication skills, particularly on television. Much to his chagrin, he was often more remembered for those off-the-cuff moments. In one campaign speech opener, he went off his speech script and decreed that no Australian child would live in poverty by 1990. What he meant to say was that no Australian child need live in poverty. Thirty years ago, while campaigning in Whyalla, local Bob Bell heckled him, 'You get more a week than we get a year.' An open camera mic caught the clash, with Hawkie telling Mr Bell, 'You're a silly old bugger.'

A few years earlier, when Alan Bond's *Australia II* broke a 132-year-old hoodoo to win sailing's America's Cup, he doffed that cringeworthy jacket with 'Australia' emblazoned all over it and declared that any boss who did not give his workers the day off was a bum. Of the bum remark, he once said:

I'm very proud of it in one way (and) very disappointed that all the other, many brilliant things I've said are never mentioned.

Bob Hawke will forever be remembered for the brilliant things he did as a Labor leader, a union stalwart and, foremost, the fiercely proud Australian he was. From now, whenever I hear *Waltzing Matilda* my thoughts will be drifting to the ghost of Bob Hawke belting out those verses 'by a billabong' as he did in the later years of his life at a folk festival, but I thank him for not making it our national anthem.

The PRESIDENT: Treasurer, do you wish to sum up the debate?

The Hon. R.I. LUCAS (Treasurer) (16:42): No, Mr President. I just thank all members for their contributions.

The PRESIDENT: I ask honourable members to stand in their places and carry the motion in silence.

Motion carried by members standing in their places in silence.

Sitting suspended from 16:45 to 16:54.

Bills

HEALTH CARE (GOVERNANCE) AMENDMENT BILL

Second Reading

Adjourned debate on second reading.

(Continued from 16 May 2019.)

The Hon. C. BONAROS (16:54): I rise to speak on behalf of SA-Best in support of the second reading of the Health Care (Governance) Amendment Bill 2019. As we know, the bill provides for the second tranche of changes to the Health Care Act 2008, with the first set passing with the support of SA-Best in July of last year. The first set of amendments in the 2018 bill established governing boards for local health networks, which sees decentralisation of the health system in this state.

Chairpersons for the 10 governing boards were appointed last year and, as I understand it, the remaining board appointments have all been made, bar perhaps one or two appointments. They have already started meetings and no doubt the minister will update us as to the progress of those meetings when he sums up the debate.

The governing boards will, from 1 July this year, be responsible for the delivery of local health services within their geographic area, which is a departure, of course, from the centralised system of Transforming Health under the former Labor government. Transforming Health had poor health outcomes for patients and consumers of our health system. That has been well documented and continues to be clear through the evidence presented before select committees, and indeed before the select committee into public health services, which I am chairing.

It is also clear that to continue with Transforming Health was absolutely no longer a viable option. There has been evidence on the public record, which has made its way into the press, in relation to the damning nature of the assessments being made by stakeholder groups. Only a week ago, Phil Palmer, the secretary of the Ambulance Employees Association, painted a very bleak picture of the current state of affairs impacting our overworked and stressed ambos dealing with an equally stretched health service.

While we cannot quote, obviously, from the evidence that has been given to the inquiry, we can certainly refer to statements that he has made to the media. Mr Palmer has publicly stated that some patients are waiting more than 10 hours for an ambulance as paramedics battle to cope with a severe staff shortage. It is forcing staff to work unreasonable amounts of overtime, and that

overtime is costing us somewhere in the order of \$15½ million dollars, which would, of course, have paid for some 155 paramedic interns. I think those figures translate, in fact, to about \$600,000 a fortnight in terms of what we are paying in overtime fees.

He has further been reported as saying that ambulances were only meeting key performance indicators for priority 1 cases. I am sure the minister will provide his own views in relation to the 10-hour waiting period, but again I think Mr Palmer has been very clear in terms of distinguishing between priority 1, 2 and 3 patients. He was quoted by *The Advertiser* as follows:

Priority three response times are not meeting response time criteria...cases that should be responded to in 30 minutes are actually taking 10 or more hours. These are patients who are very sick and/or in significant pain.

In addition to that, Mr Palmer has also been on the public record as saying that, with the very severe influenza season we are facing this winter, he anticipates that wait times will move from the accepted eight minutes up to 23-plus minutes. This is in the public domain in terms of statements Mr Palmer has given in the media. A 10-hour wait for priority 3 is nothing short of an outrage, and I am deeply concerned about key performance indicators not being met when dealing with the sick and vulnerable in our community.

He has said that ambulance services are underfunded, under-resourced and are suffering a crisis of morale. I would be interested to learn from the minister what we plan to do in terms of this crisis of morale and specifically what this government and what the minister plans to do in relation to this crisis of morale, as reported by the very person representing the ambos, those people on the front line, on the ground, who are having to respond to this very dire situation.

Also, I would like to hear what he plans to do to rectify the chronic underfunding and under-resourcing that Mr Palmer talks about and whether this government has an understanding of the sacrifices that are being made by our ambos in order to meet KPIs for priority 1 cases to their detriment—to their detriment in terms of their own health and in terms of their own wellbeing.

The research is clear about the effects of stress and post-traumatic stress disorder on our emergency services staff. Compounding the stress they face on the job by inadequate resourcing and not enough funding will only drive ambos to leave the service in droves as they seek to protect their mental health and wellbeing.

As I said again, just moments ago, we are in the midst of what has been labelled the worst flu season on record. We have known this for some time and yet our emergency services and indeed our health system as a whole are ill-equipped to deal with it, and that is simply unacceptable.

Of course, we have not just heard from Mr Palmer in public, we have also heard from senior industrial officer Bernadette Mulholland from SASMOA, the Salaried Medical Officers Association, who has also painted a very bleak picture in relation to an issue which we have raised time and again in this place; that is, in relation to our mental health patients. In fact, just last week Ms Mulholland was quoted in the paper as having referred our treatment of our mental health patients in this state to the Human Rights Commission. That is not a good state of affairs for any of us.

Returning to the bill before us, it revises the functions of the chief executive of the Department for Health and Wellbeing and includes provisions for service agreements between the chief executive of the Department for Health and Wellbeing and the local health networks and the SA Ambulance Service. It makes provision for the annual reporting and transfer of assets for the metropolitan governing councils that will be dissolved on 1 July this year. It reflects the new governance and accountability framework for the public health system.

It also intends to remove one aspect of the disclosure requirements that were introduced and amended in stage 1 of the bill from 2018 regarding conflicts of interest being noted in the minutes of board meetings. In relation to that, I note the Hon. Tammy Franks has an amendment opposing the particular changes being proposed in the bill, and I am certainly keen to hear from both the minister and the mover of the amendment before finalising our decision on whether we will support or oppose those amendments.

Of particular note, the bill also seeks to dissolve the Health Performance Council once the proposed commission on excellence and innovation in health is established. It is this aspect of the bill that has caused the most concern among stakeholders, including the AMA(SA) and SACOSS,

among others. As we know, that council was established in 2008 when local hospital boards were abolished and authority and accountability for our public health system became the responsibility of the chief executive of the Department for Health.

The Health Performance Council has provided independent and objective oversight of the health system since its inception. It acts as an independent body that investigates, gathers data and provides recommendations for change. I note that Labor in government had previously sought to abolish the Health Performance Council on at least two occasions, I think it was, but failed to do so. From the briefings provided by the minister and his staff, I understand the Health Performance Council members have been advised that they will have their jobs until August 2020 if the changes that are being proposed are successful.

However, I note again that the Hon. Tammy Franks has amendments opposing the proposed dissolution of the Health Performance Council. Again, while we are yet to formalise our position in relation to those particular amendments, I will say that it is our view that it is imperative that in this state we have an independent body that can assess the performance of the state's health systems and do so without fear or favour.

I note also that a number of concerns were raised by stakeholders in relation to the data collecting capabilities or roles previously undertaken by the Health Performance Council, and that is something that I am hoping the minister will be able to expand upon either in his summing-up or once we move into debate so that we have a clear understanding going into this bill about what it is that we are seeking to abolish, what the minister says will be replacing the council in this particular respect and where the holes are in terms of data, data collection and so forth.

I am not just referring to the obvious data collection issues that we have with private hospitals but the issue that has been raised in terms of the Health Performance Council being unable to undertake that role effectively in its current form with the data that it has available to it. Concerns have been raised by the AMA, which I certainly share, regarding the independent assessment and the independent collection of that data, so we will be asking the minister to expand upon his understanding of that in due course.

We have consulted widely on the bill and we are grateful to have been invited to take part in a stakeholder briefing held, I think, a fortnight ago, organised by SACOSS and the Health Consumers Alliance. It was a big turnout. We were joined by other groups, including the AMA, the Australian Association of Social Workers, SANDAS, the Mental Health Coalition, the Public Health Association, the Lived Experience Network Leadership Group and Health Promotion. There were a lot of concerns raised by stakeholders at that meeting, many of which have now been included in a series of Labor amendments filed only today, including statutorily enshrining the role of the Mental Health Commissioner and amending the act to provide an independent consumer voice, as well as providing for a focus on community consultation.

I certainly have not had the opportunity to consider those amendments in any level of detail up until now. Again, I note that they have only just been filed today, so I would not support any move to deal with those amendments today or at least until we have had an opportunity to consider them appropriately. It would be of great benefit if the minister could address the amendments from the Greens and the opposition so that we are all able to come to some position in relation to them sooner rather than later. I note also that the government has filed amendments to the bill which deal with testamentary gifts and trusts. As I understand it, they are not controversial amendments but, again, I will let the minister confirm that for us.

Finally, I want to thank the minister for the briefings provided to us and for passing on the submissions made by stakeholders in relation to the bill. We have had a number of conversations now and this debate is one which inevitably is going to be divided, particularly in terms of whether you support a centralised or a decentralised model of health governance. Our position in relation to the first tranche is already on the record and so we will not be diverting from that; that is the position that we support, but there are a number of issues that I think we need to deal with in the context of this bill.

I appreciate that the minister may not necessarily agree that this is the appropriate forum for dealing with some of those issues, but the fact that so many stakeholder groups feel like this is the

only forum available to them is certainly something that concerns us on this side of the chamber. I have spoken about the ad hoc nature of the consultation process with respect to government bills, and it is exceedingly frustrating and extremely inefficient that we continually have to chase up submissions on bills. However, I do thank the minister and his office for making that process slightly easier on this occasion and would hope that the government continues to follow in his footsteps in terms of making that a much more streamlined and efficient process.

At the end of the day, this means that we come to this place prepared for debates and we do not have to go begging stakeholders for copies of their submissions or looking for them here, there and everywhere to put them together. It would be extremely efficient if we were able to get them from the minister responsible for whichever portfolio we may be dealing with. Again, I acknowledge the minister's assistance in this. With those words, I indicate SA-Best's support for the second reading of the bill.

The Hon. J.A. DARLEY (17:10): I rise to speak on the Health Care (Governance) Amendment Bill. The bill makes a number of changes to the act, in line with the government's commitment to reform South Australia's health system. Among other things, the bill outlines the role of the chief executive. I understand the chief executive and local health network boards will enter into service agreements, and the chief executive will be responsible for ensuring that the obligations under the agreement are met.

I, like many others in this place, received a joint statement signed by a number of authorities, including SACOSS, SANDAS, the AMA, Health Consumers Alliance and the Aboriginal Health Council of SA. This joint statement outlined a number of shared concerns. One of the concerns that was outlined was the issue of a silo mentality that may arise if local health networks are operating completely independently of each other. What provisions are there to ensure that, if you attend The Queen Elizabeth Hospital's emergency department, the experience you have will be much the same as if you attended the Royal Adelaide Hospital?

I organised a briefing with the minister a few weeks ago to address these issues and was assured that it was the role of the chief executive to ensure that the health system as a whole worked cohesively, notwithstanding the autonomy of the local health networks. That is to say that, even though the local health networks are responsible for what happens in their areas, the chief executive will have oversight of the system as a whole and will address issues with local boards that are not meeting the performance standards as outlined in their service agreements.

There was also great concern that the Health Performance Council would be abolished and a commission on excellence and innovation in health would be established. Whilst the government has not said that the commission will directly replace the Health Performance Council, the commission will take on many roles that are currently undertaken by the council.

Part of this concern was that the bill lacks the provision of independent oversight of the health system. Understandably, many people are sceptical of a Caesar under Caesar approach, whereby an internal body is charged with oversight. Again, I have raised this with the minister and I understand that the commission will have statewide clinical networks that will help drive policy and direction for the health system.

For example, I understand there will be a cardiac clinical network that will comprise clinicians and practitioners, as well as consumers, who will be charged with looking at cardiac-related health services. If a particular problem is identified, the clinical network will be able to investigate further and provide recommendations. These investigations can be self-instigated or come by direction.

In essence, the minister advised that there will still be oversight available through these statewide clinical networks under a commission on excellence and innovation in health. I would be grateful if the minister could confirm my understanding of these networks and add any additional details on how they will operate in order to ensure that there is transparency and independent oversight on the health system.

Whilst I have been largely satisfied with the responses the minister has given to me regarding the concerns raised in the joint statement, I understand there are a number of amendments that have been filed that will address some of the matters. Given they were only filed today, I have not yet had time to consider them but, on looking at them briefly, I believe there may be some merit to them.

Whether we need to legislate for everything that the amendments address is a matter that needs further consideration. I support the second reading of the bill.

The Hon. S.G. WADE (Minister for Health and Wellbeing) (17:14): I would like to thank the honourable members who participated in the second reading of this bill: the Hon. Kyam Maher, the Hon. Tammy Franks, the Hon. Dennis Hood, the Hon. Connie Bonaros and the Hon. John Darley. The Marshall Liberal government went to the 2018 state election with the strong and clear commitment to establish governing boards for local health networks in South Australia. Boards will put responsibility and accountability for our networks at the local level and ensure that clinicians and communities are engaged in decisions about their local health services.

Last year, parliament passed the first tranche of amendments to the Health Care Act 2008 to establish the governing boards. Appointments have been made with a view to the boards coming into full operation on 1 July 2019. As the Hon. Connie Bonaros rightly said, the boards have been operating on a transitional basis for some time. My understanding is that the Central Adelaide Local Health Network started meeting in late 2018, if not early 2019, and other boards have started meeting progressively since then.

The second tranche of amendments to the act was foreshadowed at the time of the first bill. It was necessary to do more work on developing the new governance and accountability framework for the public health system. Since the passage of the first bill, work has continued on the governance and accountability framework for the public health system and the role of the department and the governing boards. Stakeholders have been engaged at differing times on specific matters. A key goal is to ensure that there are key roles for each entity and that functions are neither duplicated nor omitted. In particular, it is important to delineate the role of the minister, the role of the chief executive, the role of the governing boards and the role of the local health networks.

Let us look at each element in turn. Firstly, the minister, under the new governance accountability framework, will continue to be responsible for ensuring the public health system meets the requirements of the South Australian community. The act outlines three aspects of the role of the minister. The first is to support the provision of a system of health services that is comprehensive, coordinated and readily accessible to the public; the second is to ensure that health services that are established, maintained or operated by the government are operated in an efficient and economical manner; and the third is to ensure the proper allocation of resources across health services.

The second element of the governance structure is the chief executive of the department. From 1 July 2019, the role of the Chief Executive of the Department for Health and Wellbeing will change from having direct responsibility for the administration of the local health networks to being that of a system manager. The chief executive as a system manager will be responsible for the overall management of the public health system. The chief executive's role will be not to usurp local health network management but, rather, to maintain oversight of the whole system.

He or she will be responsible for setting system-wide strategies and policies and to ensure that system enablers are in place, such as workforce, capital infrastructure, funding and technology. The role of the system manager is not a new concept; it is outlined in the National Health Reform Agreement. It has been adopted in all other Australian states where boards oversee the roles of their hospitals, consistent with the National Health Reform Agreement.

The third element of the governance model is the governing boards of the local health networks. From 1 July 2019, the governing boards will be responsible for the government and management of the local health networks. The governing boards will be responsible to the minister for the oversight of the delivery of health services in accordance with the service agreement negotiated between the local health network and the Department for Health and Wellbeing.

A form of service agreements have been in place in South Australia for a number of years through administrative arrangements. As required under the National Health Reform Agreement, these service agreements have been published on the department's website. However, as the governing boards will be required to report annually against the performance measures outlined in the service agreement, the bill formalises these agreements and their content. This, again, brings South Australia in line with other jurisdictions that have health service governing boards.

The issue has been raised about what would happen if a local health network does not sign a service agreement. The service agreements will outline a dispute resolution process. It is anticipated that the service agreements will require negotiation firstly between the deputy chief executive of the department and the local health network chief executive officer; failing this, a determination will be made by the chief executive of the department. The bill also include provisions that in cases where the department and the local health network are unable to agree, the minister will make the final decision. Again, this provision is similar to legislation in other jurisdictions.

As system manager, the Department for Health and Wellbeing will monitor the performance of local health networks and take remedial action when performance does not meet the expected standard. This remedial action would involve an escalation process once an issue has been identified. The department will firstly work with the governing board and the local health network on measures to improve performance. Should the issue continue, the legislation gives the minister the opportunity to appoint an advisor to the board to assist the board in meeting its performance measures or, where there is sustained performance failure, the minister may remove the board and appoint an administrator.

One feature of the bill on which feedback was received during the consultation process was the government's decision to dissolve the Health Performance Council. In particular, feedback was focused on the need for data in the health system to monitor system performance and support clinical care. The Marshall Liberal government reforms significantly strengthen performance monitoring data and analysis. In this context, the government considers that the functions of the Health Performance Council will be better discharged by other entities in the future.

The history of the Health Performance Council demonstrates the consistency of the government's position. In 2008 Labor introduced the Health Care Act 2008, which abolished boards and centralised decision-making about health services within the department. The Health Performance Council was established under the Health Care Act 2008 at that time and in the context of the abolition of boards.

The role of the council, in the absence of boards, was to provide advice to the minister on the operation of the health system and health outcomes for South Australians. The council was to be an independent voice to the minister on the management of and decision-making about the health system, which was now the responsibility of the department. It was done to compensate for the loss of boards.

With this government introducing boards and decentralising governance arrangements there will be increased scrutiny and monitoring of health system performance, with the governing boards being accountable to the minister and subject to performance monitoring by the department through service agreements. Governing boards will also be required to develop and publish both clinician and consumer and community engagement strategies to ensure that clinicians and consumers are involved in the planning of health services.

In 2008, under Labor, the central department became responsible for the operation of the whole health system. In this government's reforms, the local boards will now be responsible for the provision of health services at arm's length from and accountable to the department and the minister. This removes the conflict that Labor set within the department and allows the department to give strategic advice and guidance without the conflict of simultaneously being responsible for service delivery.

The opposition's position on the abolition of the Health Performance Council is hypocritical. Labor twice tried to abolish the council with two bills, one in 2014 and one in 2015. At the same time Labor dismantled the Clinical Senate and the statewide clinical networks as part of its disastrous Transforming Health experiment. The loss of these two bodies undermines the ability of consumers and clinicians to provide input into decisions about the health system.

This government is not only establishing boards, we have also moved to re-establish statewide clinical networks. The networks will help ensure that clinicians, consumers and other stakeholders are able to provide input on the needs of the community, delivering the highest standards of safe and quality care and being economically viable for the future.

The statewide clinical networks, bringing together stakeholders from right across the health system, will provide independent insights into the delivery of health services. The first three statewide clinical networks are currently being established. They are focused on cardiology, palliative care and urgent care.

The government is also strengthening performance monitoring and accountability through the establishment of both wellbeing SA and the commission on excellence and innovation in health. These bodies will absorb many of the functions of the Health Performance Council and will provide broad alternative views within the health system.

The establishment of wellbeing SA will see the return of health promotion and prevention strategies designed to keep people out of hospital. Wellbeing SA provides the opportunity for chronic diseases, such as diabetes and asthma, to be managed through effective management practices and to tackle risk factors that are known to have an impact on health, such as tobacco, alcohol and drug abuse, obesity, physical inactivity and high blood pressure.

Wellbeing SA will be evidence driven and strategic. Performance monitoring and data will be key to its work. The department's planning sees the following elements as key to wellbeing SA: epidemiology, health economics, data collection and monitoring, analysis and evaluation, evidence translation and priority setting.

The commission on excellence and innovation in health will be based on similar entities in New South Wales and Victoria and will bring together expertise from clinicians (both from the public and private sectors), consumers, health partners and other relevant stakeholders to work together to maximise health outcomes for South Australians.

The Health Performance Council was also seen as a mechanism to independently report on the performance of the health system. Since 2008, there has been an increased focus on transparency and health system performance and monitoring. Under the National Health Reform Agreement, all states and territories are committed to the reporting of data to the Australian Commission on Safety and Quality in Health Care and the Australian Institute for Health and Welfare. These bodies report nationally comparable information about hospital performance and health services across individual hospitals and jurisdictions.

In addition, the Department for Health and Wellbeing has published patient safety reports and hospital dashboards to provide easy access to current data and information about how the state's public health system is performing in a range of areas. These performance and accountability measures, along with the focus on outcomes by wellbeing SA and the commission on excellence and innovation in health, duplicate the current role of the Health Performance Council.

There have also been comments about the lack of data available for the Health Performance Council to perform its role in providing advice on the health system. This has been a long-running issue and I understand that a particular issue has been the ability to obtain data from the private health sector.

Many of the barriers to accessing data are slowly being broken down. For example, Medicare and pharmaceutical benefits data from the commonwealth government have recently become available to jurisdictions for planning purposes. I hope that that the inclusion of clinicians from the private sector into the commission on excellence and innovation in health and into the statewide clinical networks will continue to break down barriers and result in better access to data from the private sector.

However, I would make the point that, in spite of 10 years of work by the Health Performance Council on these and other issues, the issues remain. I want to make clear that the government does not intend that the Health Performance Council will be abolished until both wellbeing SA and the commission have been established. The members of the Health Performance Council will serve their full terms through to August 2020.

I know there have been two other issues raised by stakeholders of the bill. The first is about the disclosure requirements for the boards. In the first tranche of amendments there was considerable debate about the disclosure requirements. The end result was that disclosure

requirements were placed in the bill that were higher than those in any other Australian state with health boards and higher than those in any other state government board.

The government seeks to finetune these arrangements. We propose that the act continue to set the high-water mark for provisions for health boards nationally and for state government boards. The proposed change is supported by both the Australian Institute of Company Directors and the Commissioner for Public Sector Employment, both of which have indicated that the disclosure requirements as currently legislated go too far and could have the effect of deterring members from raising a conflict of interest.

While I will speak to this in more detail during the committee stage, the government is proposing that all disclosures will still be recorded in a register available to be inspected by the public but not to be recorded in the minutes of the meeting. Board members will still be required to disclose a conflict of interest at a board meeting and must not be present or vote on the matter at the meeting. Failure to disclose a conflict of interest will attract a maximum penalty of \$25,000, a higher penalty than any other South Australian government board and the highest penalty of any other health board in other states.

I would also like to address the issue of the level of consultation on the bill. As outlined earlier, stakeholders were engaged at differing times on specific matters with the bill. For example, discussions on the employing authority commenced with employee representative organisations in late 2018. Discussions on the role of the chief executive and the service agreement requirements have been ongoing with board chairpersons since their appointments.

The bill was released for public consultation—I think it would be fairer to call that targeted consultation—on 8 April 2019 and briefings were held with stakeholders between 9 and 16 April 2019. Stakeholders were provided until 30 April 2019 to make comments on the bill. Two stakeholders were provided additional time beyond 30 April 2019 to submit their feedback. The bill was introduced to the parliament on 2 May to allow the parliamentary process to be accommodated, with a view to having the legislation passed by 1 July 2019.

I would put it to the council that the fact that the bill was made available in full almost a month before it was tabled in the parliament and the fact that it has been in the public domain for another month before we resumed consideration today demonstrates that there has been ample opportunity for consultation and engagement. It is not unusual for bills to be introduced to the parliament while consultation is still underway, or the bill itself can be the basis of consultation.

The outcomes of consultation can be dealt with through government amendments, and the government's openness to amendment was demonstrated in the first round of legislation. To say that there was little consultation on this bill is just not true. I would like to thank officers from the department and from parliamentary counsel who assisted me in bringing this legislation before the chamber.

In conclusion, I would like to remind the council of some history. In 2002, Labor claimed that they would reform the health system. The key reason they gave for the reform was to have stakeholders, consumers and the community involved in working collaboratively towards improved health status. In their Generational Health Review, it was reported that communities were disempowered in health matters and there was a need to substantially involve clinicians in the work of the department.

The review recommended the establishment of six country regions and three metropolitan regions. These regions would continue to have boards but with strengthened mechanisms for input from community members and consumers. That model seems remarkably similar to the model that is before the council tonight.

The Generational Health Review also recommended a clinical senate to provide direct advice to the department on a broad range of issues such as health workforce requirements, the research and training needs of the health system, professional development requirements, safety and quality issues and the appropriate use of technology. A number of networks are established under the senate to provide advice to the senate on particular matters such as older people, cancer and cardiology.

I put it to the council that a number of those elements are part of the government's proposed commission on excellence and innovation in health and the statewide clinical networks. The then minister for health at the time of the establishment of the Senate in 2004 stated in a media release, and I quote:

We believe the most effective way to bring about changes to improve the coordination and outcomes of our health system is to involve clinicians, and for those clinicians themselves to lead the process and be advocates for improvement.

That did not happen in the past, and it is an important step forward for improving the health system in South Australia.

Given the 14 years that followed that statement under Labor, it is galling. Labor backed away from reform and, at the same time that the rest of the country was establishing boards under a Labor federal government, here the state Labor government moved to monolithic centralised control. The health system was severely damaged by the centralisation of health under Labor and its arrogant disregard for clinicians and the community.

We saw this arrogance in the design of the new Royal Adelaide Hospital. We saw this arrogance in EPAS. We saw this arrogance in Transforming Health. This government has a mandate for a very different path. Labor should put its arrogance aside and let the government reconnect the health system with the community and the health systems that serve them.

I might pause and, at the risk of being deemed out of order, respond to some comments made by the Hon. Connie Bonaros in relation to the Ambulance Service. The Ambulance Employees Association has made comments about excessive overtime in the Ambulance Service. I am advised that the South Australian Ambulance Service has spent \$14.6 million during the last calendar year on overtime for front-line staff working under the paramedic award.

While SAAS is exploring a range of options with the employee representative body to reduce its reliance on overtime, including reviewing roster patterns, this figure comprises a range of scenarios. Ten per cent of the overtime can be attributed to end-of-shift overtime, when a crew is being held on a complex job supporting patients. A significant portion of the overtime is attributable to resourcing our often vulnerable country areas, and strategies are underway to mitigate this. I make the point that our country services are volunteer services, so it is not a matter of employing people to avoid that overtime. I am advised that overtime is reducing month by month, as strategies to better configure rosters come into effect.

I can assure the honourable member, the Ambulance Employees Association and our hardworking paramedics that the government is committed to continuing to work with the Ambulance Service to make sure that overtime is managed at an appropriate level so that the occupational health and safety of our Ambulance Service is maintained.

Bill read a second time.

Committee Stage

In committee.

Clause 1.

The Hon. K.J. MAHER: I want to confirm something the minister made reference to in his second reading summary. In terms of the dates in relation to feedback, is it correct that the bill was introduced to parliament one day after the formal date for stakeholder feedback was closed?

The Hon. S.G. WADE: As I said in my second reading summing-up, I think a couple of stakeholders asked for additional time and that was provided. It was always the intention of the government that, as the need arose and as consultation feedback was analysed, amendments would be filed to address any issues that we saw had merit.

The Hon. K.J. MAHER: To confirm then: the minister finalised this bill, had it approved by cabinet and presumably his party room and put it into parliament for the parliament's consideration before he or his department had actually considered any of the stakeholder feedback?

The Hon. S.G. WADE: I do not know what the honourable member thinks cabinets do with draft bills for consultation—

The Hon. K.J. Maher: They consider what stakeholders say about things, in my experience. They do not just ignore it.

The CHAIR: Let the minister answer. We are in committee. It is free ranging. You can raise your points in a second. Minister.

The Hon. S.G. WADE: The date today is 4 June. The bills were distributed to stakeholders on 8 April, which is two months ago. There has been plenty of time for people to review the legislation and express their views. This is only one house in a two-house parliament. There is opportunity for amendments here. The government has put forward amendments. The opposition and crossbenchers have put forward amendments.

In the context of the imminence of the full introduction of the boards from 1 July, it was the government's judgement that it was appropriate—so that the parliament would have due time to consider this bill before it is enacted so that it can take effect before 1 July—that the bill be tabled and amendments be placed as the bill progressed.

The Hon. K.J. MAHER: Does the minister consider he breached any undertakings he gave when this council considered the first bill on this government's reform in terms of consultation and properly listening to consultation with this second reform?

The Hon. S.G. WADE: If the honourable member has a particular statement in mind then let him draw my attention to it.

The Hon. K.J. MAHER: A final question on this topic: does the minister envisage it will be his habit to introduce legislation before the government has even considered stakeholder feedback when he tries to make reforms?

The Hon. S.G. WADE: The two tranches of the bills, I believe, demonstrate a very respectful engagement with not only the community but also parliamentarians. I do not recall the number, but I suspect there were four progress updates where I made available to crossbenchers and members of the opposition updates on where we were on the consultation on the health governance.

The community, including the stakeholders who have engaged in this round of consultation, was made aware of the architecture of this governance framework since the bill passed last year. The key element of the second bill is the performance and accountability framework.

As I said in my second reading summing-up, there was consultation with external stakeholders last year and this year. There has been very extensive consultation with employees of the department, particularly in relation to employees in the country regions because these reforms will have the most significant impact on country staff.

The second tranche is, if you like, putting in some finer detail on a framework that was put in place and passed by this parliament last year. We believe that the development of the bill, which was based on significant input from a range of stakeholders, particularly employees and their representatives, was given adequate time and that, considering the time remaining, there was a balance to be struck.

In my view, the tabling of legislation after full consultation would have meant that we would basically miss the opportunity to have the framework in place by 1 July. The opposition would have criticised us for that. This is the nature of the opposition under the member for Croydon. It is basically negative. We saw that with the mining bill and we see that with this bill. This opposition—

The Hon. K.J. Maher: We are supporting you. We will pass this bill; the opposite of negative.

The Hon. S.G. WADE: —plays politics. It is completely politics.

The CHAIR: Leader of the Opposition, given the committee is free ranging, given that you can make any statements you want, let the minister answer the question and then you can get up and say exactly the same thing as you are saying seated.

The Hon. S.G. WADE: In terms of the consultation that we have undertaken on the first tranche, the second tranche and the policies and procedures that sit around them in terms of the department, I am more than satisfied that we have done a very good job at engaging the stakeholders in what has been a limited time frame. Certainly, some of the interstate experts who advised us saw it as a courageous time frame, but let us be clear: this state is in dire need of reform. Board governance is central to getting the state back on track in relation to health services following the disastrous Transforming Health experiment. We were not going to wait another year while Labor continued to play political games.

The Hon. K.J. MAHER: I thank the minister for his response and I think his probably ill-advised use of the word 'courageous', which we know from *Yes Minister* is another way to say 'foolish and outlandish' behaviour from executive government. But I thank the minister for confirming that he intends to treat external stakeholders with the disrespect that he has shown in this process. Can I ask him now: what will happen in the event of a dispute between the chief executive of SA Health and the boards over funding priorities?

The Hon. S.G. WADE: I addressed that issue in my second reading summing-up. I am happy to reiterate those remarks if the honourable member was not listening.

The Hon. K.J. MAHER: It is very specifically on financial funding priorities in particular.

The Hon. S.G. WADE: Service agreements include funding priorities.

The Hon. K.J. MAHER: I would appreciate it if the minister would place on record the dispute mechanism specifically for funding priorities?

The Hon. S.G. WADE: I thank the honourable member for confirming that he was not listening to the second reading summing-up, and I will give him the benefit of hearing it all again.

The Hon. T.A. FRANKS: Point of order: in terms of procedure, where people expect us to go from a second reading summary responding to our questions and then to know exactly what was said several minutes later without the benefit of a written copy, it would be good parliamentary process to give us written copies of what is going to be said if we are going to move straight into clause 1.

The CHAIR: Thank you, the Hon. Ms Franks. Minister, if you could take that on board, that we have gone into committee.

The Hon. T.A. Franks: We do not know everything you said. If we had a copy, which sometimes we do and sometimes we do not, we would not be quibbling over this.

The CHAIR: The minister is going to re-read or do whatever he is going to do.

Members interjecting:

The Hon. S.G. WADE: Going back to the comments by the Hon. Connie Bonaros, I am very interested in improving the way that we engage within the parliament, but how can I provide you with written comment? The Hon. Connie Bonaros raised issues in relation to the Ambulance Service which I had no notice of. All I ask is that if people want to be part of the debate they actually listen to it. From 1 July 2019, the governing boards took responsibility for governance and management of the local health networks.

The governing boards are responsible to the minister for the oversight of the delivery of health services in accordance with the service agreement negotiated between the local health network and the Department for Health and Wellbeing. As required under the Health Reform Agreement, these service agreements will be published.

In terms of what happens if a dispute arises in relation to a service agreement, it is anticipated that the service agreements will require negotiation firstly between the deputy chief executive of the department and the local health network chief executive officer and, failing this, a determination will be made by the chief executive of the department. The bill also includes provision that in cases where the department and the local health network are unable to agree the minister will make the final decision. Again, this provision is similar to legislation in other jurisdictions.

As system manager, the Department for Health and Wellbeing will monitor the performance of a local health network and take remedial action when performance does not meet the expected standard, and this remedial action will involve an escalation. Once an issue has been identified, the department will firstly work with the governing board and the local health network on measures to improve performance.

Should the issue continue, the legislation gives the minister the opportunity to appoint an advisor to the board to assist the board in meeting its performance measures or, where this is sustained performance failure, the minister may remove the board and appoint an administrator.

The Hon. K.J. MAHER: I thank the minister for his answer. What other powers does the minister or the chief executive have to override decisions of boards?

The Hon. S.G. WADE: I am not sure what the honourable member is implying there.

The Hon. K.J. MAHER: You just said—

The Hon. S.G. WADE: Sorry, if I was—

The Hon. K.J. MAHER: You just said—

The CHAIR: Leader of the Opposition, let the minister answer. You are pre-empting the answer. Let the minister answer.

The Hon. K.J. MAHER: He seems to have difficulty understanding the basic things today.

The CHAIR: You can ask as many questions in committee as you like, Leader of the Opposition. Let the minister answer.

The Hon. S.G. WADE: The honourable member's question, as I understand it, was about disputes in relation to funding. His follow-up question asked me in what other context could the government or the minister override the decision of the board? With all due respect, it is not a decision of the board as to how much funding goes to the board. The board is charged under the act with the responsibility of appointing the CEO, managing their budget and delivering health services within their region.

The Hon. K.J. MAHER: Either the minister is deliberately choosing to misunderstand the question or he is seriously misguided about what he thinks has been asked. I said 'other areas', so not just funding but in what other areas would the minister have ultimate responsibility? When could the minister override a decision of the board? We have talked about a decision of the board and, if it was a dispute between SA Health and the board, eventually the minister could have the ability to override the board in funding areas. In what other decisions could the minister override the board?

The Hon. S.G. WADE: The provisions in the act are general in terms of directions and that is not dissimilar to other LHN board governance models around Australia. If you like, much of the reality of how the system works is the spirit that both the minister and the department bring to the model. In that context, I would like to read from a memorandum issued by the chief executive of the department, which says:

The Minister for Health and Wellbeing has considered the question of what level of autonomy should be afforded to the South Australian local health network boards. His advice is as follows:

The goal is to maximise board authority. This authority is to be exercised in the context of government policies and priorities. Government policies and priorities may be expressed in terms of service level agreements, as set out and amended from time to time. The minister expects a high level of engagement, both formal and informal, with board chairs, to be kept abreast of major decisions and emerging issues. It would be fair to say that the higher the level of engagement and cooperation, the more likely there will be high levels of autonomy, that is, earned autonomy.

The powers of the minister and the department, in terms of direction, are broad, but both the powers of the minister and the powers of the department will be exercised with the overarching principle that the goal is to maximise board authority. The former Labor government persistently centralised power; we are decentralising power, with a determination to maximise local control.

The Hon. K.J. MAHER: This might be more helpful for the minister: in what area of operation of the board or a local health network can the minister not intervene?

The Hon. S.G. WADE: I can only reiterate what I have already said, namely, that the powers of direction of both the minister and the department are written broadly, but just as they are in other jurisdictions, just as other jurisdictions have respected the autonomy of the board, there is no point decentralising if you are not going to let them exercise their power. It will be the determination of this government that we implement board governance in a way that maximises devolution.

The Hon. K.J. MAHER: I thank the minister for not even coming close to answering the actual question. So that the minister understands clearly: can the minister name one single area of operation of a board or a local health network in which the minister could not override a decision?

The Hon. S.G. WADE: I have already answered that question.

The Hon. K.J. MAHER: So the minister cannot point to a single area in which he could not override a decision? Will we see the minister take responsibility for decisions of the board, or will the minister say that they are autonomous board decisions and that he has no control over it, or does the minister now concede that he cannot identify a single area in which he can override so that he has the ultimate responsibility?

The Hon. R.P. Wortley interjecting:

The CHAIR: The Hon. Mr Wortley, please, you are not assisting me.

The Hon. S.G. WADE: A key principle of devolution is the devolution of accountability. Devolution of accountability by definition means that those who make the decisions own the decisions. I expect boards to consult with their community and their clinicians and to own the decisions they make.

The Hon. K.J. MAHER: Who has the ultimate responsibility for the provision of health services to South Australians?

The Hon. S.G. WADE: Again, it would have helped the progress of this committee stage consideration if the honourable member had listened to the second reading summing-up. In that, I highlighted the specific roles detailed in the legislation of the minister, the department and the local health networks. Each has their own area of responsibility. As I confirmed in my second reading summing-up, the minister, of course, has primary responsibility for the delivery of health services in South Australia.

Consistent with the policies of the Liberal Party of Australia (South Australian Division) taken to the March 2018 election and consistent with a clear mandate given to that party at that election, we are putting in place, with the support of this parliament, devolution of health board governance, which will fundamentally shift power back to clinicians and the community. The fact that the Labor Party, in the first tranche of the bill and here again tonight, is trenchantly wanting to oppose that mandate that this government has is to their shame.

The Hon. K.J. MAHER: Can I ask the minister what section of the bill allows the minister to intervene in disputes and what section of the bill allows the minister to override decisions of boards?

The Hon. R.P. Wortley interjecting:

The CHAIR: Order! It is not even humorous. That is not funny, the Hon. Mr Wortley; it is 6 o'clock.

The Hon. S.G. WADE: Given the hour of the day and the fact that the honourable member is asking a question, I propose to take that on notice and move that we report progress.

Progress reported; committee to sit again.

SENTENCING (SUSPENDED AND COMMUNITY BASED CUSTODIAL SENTENCES) AMENDMENT BILL

Final Stages

The House of Assembly agreed to the amendments made by the Legislative Council without any amendment.

VICTIMS OF CRIME (OFFENDER SERVICE AND JOINDER) AMENDMENT BILL

Introduction and First Reading

Received from the House of Assembly and read a first time.

At 18:04 the council adjourned until Wednesday 5 June 2019 at 14:15.

*Answers to Questions***CHILD AND ADOLESCENT MENTAL HEALTH SERVICE****134 The Hon. C. BONAROS** (30 April 2019).

1. What has been the total expenditure on the Child and Adolescent Mental Health Service (CAMHS) in each financial year:

- (a) 2014-15;
- (b) 2015-16;
- (c) 2016-17;
- (d) 2017-18;

2. What has been the total expenditure on CAMHS for each financial year from 2014-15 to 2017-18, broken down by location of service?

3. What is:

- (a) the total budget allocation to CAMHS in financial year 2018-19; and
- (b) total allocation broken down by location of service?

4. What is the capacity number of young people that CAMHS can currently service?

5. How many young people currently receive ongoing services from CAMHS?

6. What is the current median wait time for new patients to CAMHS?

7. How many young people were:

- (a) turned away from CAMHS in financial year 2017-18? and
- (b) referred to other services in financial year 2017-18?

8. What plans does the government have to improve the quality and quantity of the CAMHS?

The Hon. S.G. WADE (Minister for Health and Wellbeing): I have been advised:

Total expenditure on the Child and Adolescent Mental Health Services (CAMHS) over the past five years is:

	Actual Expenditure				Expected 2018-19
	2014-15	2015-16	2016-17	2017-18	
Total Expenditure	38,173,297	36,389,312	36,313,413	36,225,415	38,288,387

As at 2 May 2019, CAMHS had 3,469 individual active clients receiving a service.

As of March 2019, median wait time for new community-based clients to CAMHS is 13 days from referral to first face-to-face appointment.

In the financial year 2017-18, there were 6,422 referrals to CAMHS, of these 2,910 referrals were accepted for long-term therapy and 3,512 were either clinically managed (short term) or referred to or supported to engage with another service as clinically indicated.

CAMHS has developed and is enacting a new model of care that offers mental health services for infants, children and young people with moderate to severe, complex emotional, behavioural and mental health difficulties, including a number of sub-specialities.

CAMHS has employed a lived experienced consultant and continues to develop the role of lived experience (consumer/carers) within the organisational governance framework.

CAMHS is implementing a new organisational structure to provide improved clinical governance through:

- the appointment of a Clinical Director and Medical Unit Head positions for clinical oversight of practice;
- the development of an education and training centre to support evidence based, age appropriate mental health staff training;
- development of nursing and allied health senior clinical leadership roles and a mix of multidisciplinary clinical roles across services for clinical practice review to support client care;
- an increase in the number of permanent Aboriginal roles to support access for Aboriginal clients into Child and Adolescent Mental Health Services.

Services will be further improved through the creation of a single Centralised Triage Service to provide a consistent entry point and standardised referral management across CAMHS, and restructuring CAMHS Consultation Liaison Services 'clinical reach' across the Women's and Children's Hospital Local Health Network, Flinders Medical Centre

and the Lyell McEwin Hospital. This will support access to mental health care for children and adolescents experiencing mental health issues in the context of their acute or chronic illness, injury or disability.

LONG VALLEY ROAD

135 The Hon. F. PANGALLO (1 May 2019). Can the minister for Transport, Infrastructure and Local Government advise—

1. Has the review of Long Valley Road, which the minister stated in a media release issued on 20 February 2019 would be 'fast-tracked', been undertaken?
2. If the review has been undertaken:
 - (a) When was the review undertaken?
 - (b) Who undertook the review?
 - (c) What actions are proposed by the review?
 - (d) When and what action will be taken by the government as a result of the review?
 - (e) Are the results of the review available to the public?
3. If the review has not been undertaken:
 - (a) Why not?
 - (b) When will the review be undertaken?
 - (c) Who will undertake the review?
 - (d) Will the results of the review be made public?

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment): The Minister for Transport, Infrastructure and Local Government has provided the following advice:

1. The Department of Planning, Transport and Infrastructure (DPTI) is currently undertaking a road safety review of Long Valley Road. The safety review, which comprises analysis of the full length of the road corridor between Wistow and Strathalbyn, is in its final stages of completion and I anticipate receiving it in the near future.
2.
 - (a) The road safety review commenced in February 2019.
 - (b) DPTI is undertaking the road safety review of Long Valley Road.
 - (c) The review is yet to be finalised.
 - (d) Recommendations arising from the safety review will support an informed decision-making process on the allocation of resources to enhance road safety outcomes in that location.
 - (e) The review contains sensitive and confidential information about fatal crashes that occurred on the Long Valley Road corridor. It will not be made public, however the overarching recommendations will be.

KEOGH CASE

138 The Hon. F. PANGALLO (16 May 2019).

1. Can the Attorney-General advise as to whether she has had any formal communication with the Chief Justice in relation to Crown Law advice he gave as Solicitor-General in relation to the Henry Keogh case, and if so—
 - (a) What are any stated reasons given by the then Solicitor-General for the weight he placed on the opinion of Professor Vernon-Roberts, given he was the Crown's chosen expert and the state's most senior pathologist?
 - (b) Why was permission for the test for haemosiderin, as recommended by Professor Vernon-Roberts in his report, not granted by Mr Kourakis, given the test would have clarified what Mr Kourakis says in his advice, is the most 'controversial' issue?
 - (c) What are any stated reasons as to why Dr Manock's findings on critical issues were preferred by Mr Kourakis to those of qualified pathologists when it was known since he was appointed (as confirmed in evidence to the court in *Manock v IMVS and the State of South Australia, 1978*) that Dr Manock's evidence could not be admissible because he was unqualified as an expert?
 - (d) Has Mr Kourakis indicated that he accepts that if there was relevant information, as was provided to him by Professor Vernon-Roberts and others in his inquiry, that his duty of disclosure was paramount?
 - (e) Are there any stated reasons why Mr Kourakis formed the view that it was not necessary to disclose the Vernon-Roberts report to Mr Keogh's defence team?

(f) Has Mr Kourakis provided any reasons as to why he thought it was his job to advise the then Attorney-General as to Mr Keogh's apparent guilt or innocence in his advice that Mr Keogh's third petition had no prospect of success?

(g) Has Mr Kourakis provided any reasons why he re-prosecuted the evidence to produce a conclusion of guilt, rather than addressing the issue for the Appeal Court of whether it is reasonably arguable that an appealable error had occurred at trial?

(h) Has Mr Kourakis indicated that he now accepts that, given the inadmissibility and unreliability of the evidence upon which Mr Keogh was convicted, the question of guilt or innocence upon a case is quite different to that presented to a jury is for a subsequent jury upon retrial?

(i) What are any stated reasons given by Justice Kourakis (as he then was) as to why he openly expressed in an interview on ABC Radio National with Richard Fidler in 2012, his opinion as to the guilt of Mr Keogh arising from his advice to the SA government when that advice was still being considered by the Attorney-General to be the subject of a claim to legal professional privilege?

(j) Has Chief Justice Kourakis indicated that he agrees that he broke the legal professional privilege accorded to his advice in doing so, after then Acting Attorney-General (Hon. Kevin Foley) subsequently also did in 2006?

(k) Do the Attorney-General and Mr Kourakis agree with the state Ombudsman's view in his judgement on the FOI application by the Seven TV network in 2018, that in this matter, the Crown did not act as model litigants?

(l) What are the implications, remedies or penalties that can be applied when the Crown has not acted as a model litigant?

(m) Has the Chief Justice indicated that he accepts that the Court of Appeal in Keogh was correct to overturn the conviction with a finding that there had been a substantial miscarriage of justice?

(n) Has the Chief Justice indicated that he accepts, considering the Court of Appeal's decision to quash the Keogh conviction based on substantially the same evidence that was presented to him, and order a retrial, that his decision not to refer the matter to the Court of Appeal was wrong?

(o) Does the Attorney-General still have confidence in the judgement of the Chief Justice in light of the advice Mr Kourakis gave to the previous government (between 2004 and 2006), having regard to the unanimous judgement of the Court of Appeal that there had been a miscarriage of justice?

2. If there has been no formal communication as described above, can the Attorney-General advise of her understanding in response to the questions above.

The Hon. R.I. LUCAS (Treasurer): I have been advised:

1. The Attorney-General, Hon. V Chapman MP, has not had formal communication with the Chief Justice in relation to advice he gave as Solicitor-General.

2. The Attorney-General cannot comment on reasons or views of the then Solicitor-General. To the extent the questions relate to the Chief Justice having indicated matters to the Attorney-General, the Attorney-General refers to her answer to question 1.

(k) The question demonstrates a misunderstanding of paragraph 69 of the Ombudsman's determination of 25 September 2017.

(l) Any consequence of the Crown not acting as model litigants will depend on the facts of the case.

(o) The Attorney-General has utmost confidence in the Chief Justice.

CENTRAL ADELAIDE LOCAL HEALTH NETWORK LEGAL ADVICE

In reply to **the Hon. J.E. HANSON** (12 February 2019).

The Hon. S.G. WADE (Minister for Health and Wellbeing): I have been advised:

In September 2018, approval was provided by the Crown Solicitor's Office (CSO) under Treasurer's Instruction 10 for Central Adelaide Local Health Network (CALHN) to engage Arnold Bloch Leibler (ABL) and EMA Legal to provide legal advice to CALHN for the implementation of CALHN's Organisational and Financial Recovery Plan.

In partnership, ABL and EMA Legal are providing expert and specialised legal advice in relation to:

- Strategic human resources / industrial relations management;
- Best practice regulatory compliance;
- Workplace investigations;
- Executive remuneration and benefits; and

- Independent contractors and outsourcing.

Part of ABL's practice involves advising public and private companies on a broad range of employment matters, including employment disputes, strategic employee engagement, complex restructures and employment issues in commercial transactions.

As at Friday 24 May CALHN has paid ABL \$275,561 and EMA Legal \$113,633.

SA PATHOLOGY PWC REPORT

In reply to **the Hon. E.S. BOURKE** (21 March 2019).

The Hon. S.G. WADE (Minister for Health and Wellbeing): I have been advised:

1. The Hon. Jamie Briggs has not been involved in the PwC SA Pathology report.
2. The honourable member is referred to the contract, available on the South Australian Government Tenders and Contracts web page.

CORONIAL REPORT

In reply to **the Hon. J.A. DARLEY** (30 April 2019).

The Hon. R.I. LUCAS (Treasurer): I have been advised:

1. The Attorney-General was not aware of the state Coroner's response to Hon John Darley MLC of 28 March 2019 before the question was asked and the letter tabled.
2. Certain material specified in the Coroners Act 2003 can only be inspected with the permission of the state Coroner. It is a matter for the state Coroner as to how he exercises his discretion.

HANNOVER MESSE

In reply to **the Hon. C.M. SCRIVEN** (30 April 2019).

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment): I have been advised:

1. Eight South Australian businesses participated in Hannover Messe. Companies participating in business missions led by the South Australian government expect, and are entitled to, privacy under the terms and conditions of the South Australian government's 'Mission Agreement'.

The Department for Trade, Tourism and Investment advises that in the absence of written permission from companies that participated in trade missions, it is unable to release the requested information.

2. The South Australian government did not ask companies to pay a fee to participate in this business mission.

HANNOVER MESSE

In reply to **the Hon. K.J. MAHER (Leader of the Opposition)** (30 April 2019).

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment): I have been advised:

1. Feedback provided to date by four of the eight companies indicates a consolidated revenue of \$700,000. Incremental job count will be determined by the final contract specifications.

SCISSOR LIFTS

In reply to **the Hon. T.A. FRANKS** (30 April 2019).

The Hon. R.I. LUCAS (Treasurer): I have been advised:

Since the beginning of the SafeWork SA audit program in January 2019:

- 37 improvement notices have been issued to persons conducting a business or undertaking (PCBUs);
- 17 prohibition notices have been issued to PCBUs;
- There have been no serious safety incidents, including hospitalisation of a worker, identified as part of the program.

Independent of the SafeWork SA audit program, since January 2019 there has been only one serious EWP safety incident, including hospitalisation of a worker. The PCBU notified SafeWork SA about this incident pursuant to their duty to notify of a notifiable incident under section 38 of the Work Health and Safety Act 2012 (SA) (WHS Act). The worker was admitted to hospital with a fractured pelvis. SafeWork SA after investigating the incident, recommended no further investigation after some additional follow-up in relation to incident notification.

In addition to the mentioned incident, there has been one other EWP safety incident (independent of the SafeWork SA audit program) involving an injury to a worker. The PCBU notified SafeWork SA about this incident pursuant to their duty to notify of a dangerous incident under section 37(g) of the WHS Act. The worker suffered jarring and a muscle sprain but was not admitted to hospital. SafeWork SA investigated the incident and the PCBU has

subsequently implemented corrective and preventative actions to prevent or minimise a re-occurrence of the incident. On the basis of these actions SafeWork SA recommended no further investigation.

KANGAROO ISLAND FERRY

In reply to **the Hon. F. PANGALLO** (30 April 2019).

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment): The Minister for Transport, Infrastructure and Local Government has provided the following advice:

1. Wavelength Consulting was engaged on 2 May 2019.
2. A request for quotation was given to three consultants, from which the preferred consultant was selected. This process complies with procurement policy within the Department of Planning, Transport and Infrastructure (DPTI).
3. Wavelength's report is scheduled to be completed in late 2019.
The report will be used by DPTI to identify the most appropriate options to improve the operational efficiency of both harbours.
4. Until the findings of the report are received and assessed I am unable to make comment on the most appropriate application of the committed \$2 million at Cape Jervis.
5. SeaLink's current licence to operate a ferry service expires in July 2024. DPTI is currently working through the procurement process to deliver a new ferry service. The process includes reviewing future operating models, developing the specification, engaging with relevant stakeholders and then proceeding to market to award the contract.

AMBULANCE RAMPING

In reply to **the Hon. R.P. WORTLEY** (30 April 2019).

The Hon. S.G. WADE (Minister for Health and Wellbeing): I have been advised:

There were 1,535 total hours lost due to delays in transfer of care across the state in March 2019, compared to 1,031 total hours lost due to delays in transfer of care across the state in March 2018. This was the lowest number of hours lost thus far for the 2019 calendar year. Following the stop ramping summit at Central Adelaide Local Health Network in February 2019 there was a 23 per cent reduction in the number of total hours lost due to delays in transfer of care between February and March 2019.

It should be recognised that the number of ambulances arriving at metro sites increased by 1,457 (or 14 per cent) between March 2018 and March 2019.

POLICE VEHICLES

In reply to **the Hon. C. BONAROS** (1 May 2019).

The Hon. S.G. WADE (Minister for Health and Wellbeing): The Minister for Police, Emergency Services and Correctional Services has been advised:

The Commissioner of Police has not raised any concerns with the Minister for Police, Emergency Services and Correctional Services in relation to the use of the Holden Commodore ZB by South Australia Police, or any need for replacement.

KEOGH CASE

In reply to **the Hon. K.J. MAHER (Leader of the Opposition)** (1 May 2019).

The Hon. R.I. LUCAS (Treasurer): I have been advised:

SAicorp's role is to ensure all claims made against the state are reviewed in their entirety, taking into account all relevant facts and information.

SAicorp obtain legal advice in respect of claims and recommendations made to me by SAicorp are based on that legal advice.

Prior to making a recommendation to me about payment to Mr Keogh, SAicorp received and carefully considered legal advice from the Crown Solicitor's Office and Senior Counsel.

The full history of the matter including the factual matters dealt with in the Solicitor-General's 2006 opinion and the subsequent quashing of Mr Keogh's conviction were all relevant to advice given.

That advice is privileged and I will not comment about what is in that advice.

GLENELG TRADERS

In reply to **the Hon. T.A. FRANKS** (1 May 2019).

The Hon. R.I. LUCAS (Treasurer): I have been advised:

Neither my office nor SafeWork SA, the business unit that administers shop trading legislation in this state, have received any representations from Ms Nicolle Flint, federal member for Boothby, on behalf of Glenelg traders.

SA HOUSING AUTHORITY

In reply to **the Hon. J.E. HANSON** (1 May 2019).

The Hon. J.M.A. LENSINK (Minister for Human Services): The South Australian Housing Authority has advised:

From 1 July 2018 to 30 April 2019, 102 targeted voluntary separation packages were offered to South Australian Housing Authority employees, with 77 employees accepted as at 30 April 2019.

DISABILITY SA

In reply to **the Hon. J.E. HANSON** (1 May 2019).

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

From 1 July 2018 to 30 April 2019, 140 targeted voluntary separation packages were offered to employees working in the Disability divisions of the department, which included accommodation services, disability and reform, and NDIS reform and services, with 11 accepted as at 30 April 2019.

CHINA TRADE

In reply to **the Hon. K.J. MAHER (Leader of the Opposition)** (2 May 2019).

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment): I have been advised:

12 South Australian businesses participated in the China Outbound Mission in July 2018. Companies participating in business missions led by the South Australian government expect, and are entitled to, privacy under the terms and conditions of the South Australian government's 'Mission Agreement'.

The value of the deals with Infinitus are commercial in confidence. However, the local wineries that have given permission for their details to be released are Wines by Geoff Hardy and Shingleback. The third company declined to release its details publicly.

The following South Australian companies exhibited at CIIE, representing South Australia's wine, packaged food, meat and dairy and international education sectors. Major South Australian organisations participating in the event included Thomas Foods, University of Adelaide and Food SA members. The list of companies exhibiting was provided in the Chinese publications promoting their presence at the expo, such as the Show Directory—1st China International Import Expo—5-10 November 2018 and therefore can be publicly disclosed.

1. Earth Adventure
2. Port Adelaide Football Club
3. University of Adelaide
4. Food SA
5. SA Cattle Company
6. Oleapak Pty Ltd Olive Oil/Australian Almond Board—FoodSA
7. Tynan View Premium Wines
8. Serafino Wines
9. Schubert Wine
10. Nova Vita Wines
11. Wines by Geoff Hardy
12. Aus Swan Wine Group
13. Shottesbrooke Vineyards
14. Anderson Hills—AOD
15. Charles Cimicky Wine—AOD
16. Mosaic Group—Belvidere Winery—AOD
17. Australian Origin Direct (AOD)—Novel Logic Pty. Ltd
18. Vigna Wines—AOD
19. Thomas Foods International

20. 1847 Wines
21. Lannister Winery
22. Australian Vintage; and
23. Beston Global Foods.

JAPAN AND SOUTH KOREA, TRADE AND INVESTMENT

In reply to **the Hon. E.S. BOURKE** (2 May 2019).

The Hon. D.W. RIDGWAY (Minister for Trade, Tourism and Investment): I have been advised:

The objectives of my trip, which were achieved, were to:

- Open the South Australian Trade and Investment Office, serving North East Asia, located in Tokyo, Japan
- Support industry associations leading South Australian company delegations to FOODEX to grow their exports to Japan
- Call on long-time investors to commit on future collaborations; and
- Promote South Australia's capacity for hydrogen export.

The South Australian Trade and Investment Office in Tokyo was officially opened on 7 March 2019 by the Governor of South Australia, His Excellency the Honourable Hieu Van Le AC, in the presence of the Australian Ambassador to Japan His Excellency Richard Court AC, at the Australian Embassy, Japan.

The official opening was attended by the below organisations:

- Food South Australia
- AUSVEG SA
- Australian Southern Bluefin Tuna Industry Association
- Thomas Foods International
- University of South Australia
- Mitsubishi Motors Australia; and
- Representatives of multiple Japanese organisations.

Senior representatives from the Australian Embassy in Japan, the Australian Trade and Investment Commission, the Japanese government as well as the South Australian government also attended.

The Tokyo office is now building on connections made during the trip and driving those opportunities.

In relation to how many jobs were created, how many contracts were signed and what was the value of those contracts, I refer the honourable member to page 3314 of *Hansard*.

The cost of travel for the Department for Trade, Tourism and Investment's two accompanying officers is A\$9,042.

The cost of travel for myself and my chief of staff is publicly available at https://www.dtti.sa.gov.au/upload/proactive-disclosure/archive-2018-2019/ridgway/Minister-Ridgway-Overseas_Travel_March_2019.pdf?t=1558586267279

CU-RIVER MINING AUSTRALIA

In reply to **the Hon. F. PANGALLO** (2 May 2019).

The Hon. R.I. LUCAS (Treasurer): I have been advised:

1. Appropriate environmental and financial controls are in place for the mining and exploration tenements held by CU-River Mining to ensure its performance meets the same high standards expected of every company by the South Australian public.

Any proposal for development of a port or a mine that the state government might receive in the future will be subject to the same rigorous assessment, the same laws and same financial requirements as any other mining or port company operating in South Australia.

2. The state government currently holds an \$800,000 rehabilitation liability bond for CU-River's Cairn Hill mine in accordance with the approved operating plan under the Mining Act 1971.

The EPA has set a condition on the EPA licence for the Port Augusta site requiring that a \$2.4 million financial assurance in the form of a bank guarantee be maintained, to ensure that all environmental obligations associated with remediation of the site are met.

3. As stated above, CU-River has provided a rehabilitation liability bond for its Cairn Hill mine. A financial assurance in the form of a bank guarantee has been set on the EPA licence for the Port Augusta site under section 51 of the Environment Protection Act 1993.

4. The state government has not received an application to develop a port at Port Augusta nor any new associated mines.

CU-River Mining Australia and JMA have publicly committed to employing South Australian workers in their operations, and CU-River Mining has recently announced plans to resume production at Cairn Hill, to employ about 80 people.

Further, the companies have said publicly they are working closely with the Antakirinja Matu-Yankunytjatjara on building skills and business opportunities for the local traditional owners.

The commonwealth has established laws regarding employment of foreign workers and their visa requirements under which companies operating in Australia are required to comply.

5. The Premier and Treasurer are confident that both the commonwealth and state governments will apply the appropriate environmental and employment laws to any mining company operating in South Australia.

6. I am not aware of any specific role played by the former senator in lobbying or advocating for the development of the Port Augusta power station site by CU-River Mining.

NATIONAL DISABILITY INSURANCE SCHEME

In reply to **the Hon. F. PANGALLO** (15 May 2019).

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

The Department for Child Protection operates under the Children and Young People (Safety) Act 2017 (the Act). The Act sets out the legislative threshold by which the department may intervene in keeping a child or young person safe from significant risk of harm. The act does not allow for children or young people to be brought into child protection arrangements on the basis of disability or lack of disability supports alone.

Where a child protection report has been made and the department has undertaken a child protection assessment and determined that there is no risk of harm to a child or young person but has identified that there is a need for access to, or an increase in access to disability supports, the Department for Child Protection negotiates with the NDIS to support the family to access appropriate NDIS funded specialist disability supports.