

Hansard

LEGISLATIVE COUNCIL

60th Parliament

Tuesday 7 March 2023

Members of the Legislative Council 60th Parliament

President

Shaun Leane

Deputy President

Wendy Lovell

Leader of the Government in the Legislative Council

Jaclyn Symes

Deputy Leader of the Government in the Legislative Council

Lizzie Blandthorn

Leader of the Opposition in the Legislative Council

Georgie Crozier

Deputy Leader of the Opposition in the Legislative Council

Evan Mulholland (from 31 August 2023) Matthew Bach (to 31 August 2023)

Member	Region	Party	Member	Region	Party
Bach, Matthew	North-Eastern Metropolitan	Lib	Luu, Trung	Western Metropolitan	Lib
Batchelor, Ryan	Southern Metropolitan	ALP	Mansfield, Sarah	Western Victoria	Greens
Bath, Melina	Eastern Victoria	Nat	McArthur, Bev	Western Victoria	Lib
Berger, John	Southern Metropolitan	ALP	McCracken, Joe	Western Victoria	Lib
Blandthorn, Lizzie	Western Metropolitan	ALP	McGowan, Nick	North-Eastern Metropolitan	Lib
Bourman, Jeff	Eastern Victoria	SFFP	McIntosh, Tom	Eastern Victoria	ALP
Broad, Gaelle	Northern Victoria	Nat	Mulholland, Evan	Northern Metropolitan	Lib
Copsey, Katherine	Southern Metropolitan	Greens	Payne, Rachel	South-Eastern Metropolitan	LCV
Crozier, Georgie	Southern Metropolitan	Lib	Puglielli, Aiv	North-Eastern Metropolitan	Greens
Davis, David	Southern Metropolitan	Lib	Purcell, Georgie	Northern Victoria	AJP
Deeming, Moira ¹	Western Metropolitan	IndLib	Ratnam, Samantha	Northern Metropolitan	Greens
Erdogan, Enver	Northern Metropolitan	ALP	Shing, Harriet	Eastern Victoria	ALP
Ermacora, Jacinta	Western Victoria	ALP	Somyurek, Adem	Northern Metropolitan	DLP
Ettershank, David	Western Metropolitan	LCV	Stitt, Ingrid	Western Metropolitan	ALP
Galea, Michael	South-Eastern Metropolitan	ALP	Symes, Jaclyn	Northern Victoria	ALP
Heath, Renee	Eastern Victoria	Lib	Tarlamis, Lee	South-Eastern Metropolitan	ALP
Hermans, Ann-Marie	South-Eastern Metropolitan	Lib	Terpstra, Sonja	North-Eastern Metropolitan	ALP
Leane, Shaun	North-Eastern Metropolitan	ALP	Tierney, Gayle	Western Victoria	ALP
Limbrick, David ²	South-Eastern Metropolitan	LP	Tyrrell, Rikkie-Lee	Northern Victoria	PHON
Lovell, Wendy	Northern Victoria	Lib	Watt, Sheena	Northern Metropolitan	ALP

¹ Lib until 27 March 2023

 $^{^2}$ LDP until 26 July 2023

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The PRESIDENT (Shaun Leane) took the chair at 12:03 pm, read the prayer and made an acknowledgement of country.

Bills

Racing Amendment (Unauthorised Access) Bill 2022

Royal assent

The PRESIDENT (12:04): We have received two messages from the Governor. The first is dated 7 March:

The Governor informs the Legislative Council that she has, on this day, given the Royal Assent to the undermentioned Act of the present Session presented to her by the Clerk of the Parliaments:

2/2023 Racing Amendment (Unauthorised Access) Act 2023

Building and Planning Legislation Amendment Bill 2022

Royal assent

The PRESIDENT (12:05): Second message, dated 28 February:

The Governor informs the Legislative Council that she has, on this day, given the Royal Assent to the undermentioned Act of the present Session presented to her by the Clerk of the Parliaments:

1/2023 Building and Planning Legislation Amendment Act 2023

David Davis: On a point of order, President, a number of us over the last week or two have become aware that a letter was provided by the former IBAC Commissioner the Honourable Robert Redlich to the then President and, I understand, to the Speaker, and I ask: would you be prepared to distribute that letter to members?

The PRESIDENT: Mr Davis, you know that is not a point of order. I am ruling out the point of order. But, as you know, I see it as my role to be as helpful to this chamber as I possibly can be. A letter was sent to the Presiding Officers. I sighted the letter. The author of the letter did not request that this letter be shared in any way with anyone. There was not a verbal request from the author of the letter; for that matter there was not a verbal request from IBAC either. Every letter we get we take as confidential. If the letter did ask me to distribute it far and wide to all MPs – and it did not – what I would have done is contact the author with links to every MP of this state and invite them to distribute that letter themselves.

I am finding this all a bit weird and quite offensive. As you know, if there is going to be an allegation against a sitting member's integrity, it can be done through a substantive motion, and you have got more than a right to do that. I am not taking any more points of order on this. But, as I said, you have got a right to move a substantive motion.

Questions without notice and ministers statements

Independent Broad-based Anti-corruption Commission

David DAVIS (Southern Metropolitan) (12:07): (57) My question is to the Leader of the Government, who represents the Premier in this place. The former IBAC Commissioner the Honourable Robert Redlich provided a letter to the President in December. Has the Premier or have you as his representative seen that letter?

The PRESIDENT: Mr Davis, I am going to give you what you probably want and rule out that question because it does not come under the minister's administration as far as the government is concerned.

David DAVIS: President, she represents the Premier in this chamber, and I am asking her in her capacity representing the Premier. She is the Leader of the Government here, but she represents the Premier. The former IBAC Commissioner the Honourable Robert Redlich provided a letter to the President in December. That is now a fact. Has the Premier or the minister as his representative seen that letter? I am asking her in her capacity representing the Premier.

The PRESIDENT: Mr Davis, I cannot see how a letter to the President comes under this minister's administration. If the Leader of the Government wants to answer, she can answer as she sees fit. But I am probably giving you what you want. I am ruling it out.

David DAVIS: President, I am entitled to ask a question about the minister's representational portfolio.

A member: Accept the ruling from the Chair.

David DAVIS: I understand the *Rulings from the Chair*, and I understand this quite well. President, I move:

That your decision be taken into account on the next day of meeting.

Motion agreed to.

Water policy

Sarah MANSFIELD (Western Victoria) (12:09): (58) My question is to the Minister for Water. In the lead-up to last week's Murray-Darling Basin Ministerial Council meeting, you made it clear that Victoria would continue to block water purchases for the Murray River's environment. But while the Victorian government has continued to block these water purchases, Victorian farmers have continued to sell water to multinational corporations, overseas pension funds and institutional investors. My question to the minister is: how much water has been sold to these corporate players while Victoria has opposed purchases for river health?

Harriet SHING (Eastern Victoria – Minister for Water, Minister for Regional Development, Minister for Commonwealth Games Legacy, Minister for Equality) (12:10): I thank the member for this question. There are a couple of things in the question itself which I want to address, because fundamentally the Murray-Darling Basin plan is an intricate set of policy frameworks. It is an intricate set of work between different jurisdictions including South Australia, Victoria, New South Wales, the ACT and Queensland, as you would well know. There are existing rules as to how it is that people can trade water; irrigators can sell, for example, to other irrigators. The way in which trades occur is recorded under the water register, and you would know from previous discussions about amendments and refinements to the legislation that volumes of trade over and above a certain quantum need to be recorded under the Victorian Water Register.

What we are in the process of doing is creating a better level of accountability and transparency on the way in which water is traded. We do want to make sure that we are balancing the competing interests of various stakeholders as we implement our work under the Murray-Darling Basin plan. We are absolutely determined to make sure that there is accountability and transparency, including in the way in which water may be sought to be moved from an allocation under licence to irrigators on the one hand through to other purposes for use of that resource on the other. So there are a range of components to this particular part of your question that I just want to go to because of the complexity of the issues. I am really happy to provide you with a range of packages of information to assist you on how to understand the way in which that water has been traded, but licensing arrangements are something that we have worked really hard to provide transparency on. We have also worked through a process of water compliance to improve the way in which metering compliance and enforcement takes place in Victoria. There was a review undertaken by Des Pearson which found that Victoria is actually doing a power of work to lead the nation on water compliance and enforcement to make sure that those rules are complied with.

We do want to make sure that we are also talking with the Commonwealth and with other jurisdictions. The water in the basin does not respect state boundaries in the way that we might understand Victorian and other jurisdictions to operate with different rules and regulations. So this is where again it is important that we can operate across state boundaries to understand what those pressures are for water users; what irrigators are looking for; the changing nature of trades, particularly as we move to hotter and drier climates; and what to do about a system which we all want to see operating in a transparent, accountable and fair way as far as allocations go now and into the future. I hope that provides you with some context. Of course I am happy to provide you with more information if you would like it.

Sarah MANSFIELD (Western Victoria) (12:13): I thank the minister for her answer, and I will take her up on that offer to obtain some more detailed information about the trading system and licensing. The state of Victoria has actively blocked environmental water purchasing despite overwhelming scientific and economic analysis that shows open tender purchases are the most efficient, cost-effective and practical way to return water to the environment, and yet for nearly two decades the Victorian water department has wrongly insisted that expensive taxpayer-funded projects such as the current Victorian Murray Floodplain Restoration Project and on- or off-farm efficiency works are the best way to return water to the environment. My supplementary question to the minister is: why is the government relying solely on the department's advice while ignoring the scientific and economic analysis that favours tender purchases?

Harriet SHING (Eastern Victoria – Minister for Water, Minister for Regional Development, Minister for Commonwealth Games Legacy, Minister for Equality) (12:14): Thank you very much for that. President, I would seek your guidance on the extent to which that supplementary flows from the substantive question, if you will excuse the pun on flowing. I am really happy, though, without perhaps interfering with any ruling you might make, President, to provide the member with additional information once you have determined that issue. Do you want to rule on it now?

The PRESIDENT: No. I am finding it hard to rule that there might not be a link between the substantive and the supplementary. I know it is loose, but I call on you if you want to answer.

Harriet SHING: I am very happy to, President, thank you. I am just wondering about the clock. There is a fair bit to say on environmental water, and it is one of those things which I think is really important. We know that buybacks do not actually assist in the way in which a number of stakeholders would see. Buybacks actually drive up the price of water, and they reduce the volume of water which is available in the consumptive pool. We know that this is something which then impacts upon communities, including those communities that rely upon secure water sources to meet the challenges of seasonal primary production.

The Murray-Darling Basin is one of Australia's food bowls, and we do need to provide that consistency of the resource and its availability. We do not need buybacks in order to in fact deliver environmental outcomes. I made this really clear at the MinCo that I attended last week, and I have also made clear the fact that environmental water simply returned to the river and rising river levels do not in fact deliver the environmental benefit that happens when you water a flood plain, for example, and you mimic those natural flows. Again, I am really happy to provide you with additional information if you would like it.

The PRESIDENT: I note that former member Mr Ondarchie is in the chamber.

Ministers statements: early childhood education

Ingrid STITT (Western Metropolitan – Minister for Early Childhood and Pre-Prep, Minister for Environment) (12:16): Our \$14 billion investment into our kindergarten sector will not only be a game changer for Victorian children, it will also be a game changer for Victorian women. Right now the lack of access to child care takes over 26,000 women entirely out of the workforce in Victoria and costs our economy \$1.5 billion per year in lost earnings alone.

More than half of women who want to do more paid work say child care is the main barrier preventing them. Our government's nation-leading reforms will reduce this disparity for thousands of women. We have made kinder free, saving families up to \$2500 per child per year and giving more than 28,000 Victorians, most of them women, more flexibility to return to work. We are establishing 50 new government-owned and affordable early learning centres in those communities that need them the most and establishing pre-prep, an extra year of 30 hours of play-based learning, which will also save families money and help more women to get back into the workplace.

Together these reforms are making early childhood education and care more affordable and more accessible, ensuring that women no longer have to weigh up the financial impacts of going back to work. Deloitte research shows that between 9100 and 14,200 additional primary carers are expected to participate in the labour force by 2032–33, with the total hours worked by primary carers to increase between 8 and 11 per cent. It is women who really stand to benefit, with 94 per cent of primary carers being women. These nation-leading reforms will benefit women today, tomorrow and into the future.

Country Fire Authority

Ann-Marie HERMANS (South-Eastern Metropolitan) (12:18): (59) My question is to the Minister for Emergency Services. Morale in the CFA is at an all-time low. The number of operational volunteers has shrunk from 38,335 to 28,936 since 2014. At the same time, the percentage of operational volunteers has decreased as a percentage of the total workforce from 64 to 55 per cent. Given the CFA cannot decide its own organisational leadership without union sign-off due to the Andrews government's merger legislation, will the minister review organisational arrangements to give the CFA autonomy over management selection?

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:19): I thank the member for her question. Whilst I do not agree with the statements that you have made, I am certainly not in this place to talk down our CFA or our volunteers. I think it was only last sitting week that we were talking about how amazing this cohort of people were in responding to the Flowerdale fire and protecting their community proudly. Every CFA volunteer that I speak to on the ground regularly across Northern Victoria and across the rest of the state is very proud of and dedicated to the service that they provide to our community.

CFA have already welcomed 2200 new members this year, and 3000 applications are in process. CFA have constantly maintained a pool of over 50,000 dedicated people who day in, day out are on call to respond to people in need. I will not question the dedication of these people. The variation in volunteer numbers over time has been for a range of reasons but has not affected operational capacity for CFA to respond to incidents and major emergencies. You would have seen responses of CFA in relation to some of the outrageous comments from the opposition, who again and again want to cause division and talk about issues that just are not true. There is no attack on our volunteer firefighters. Everyone on this side of the chamber respects our volunteer firefighters and will stand by them in relation to –

Nicholas McGowan: On a point of order, President, the minister is now clearly debating the question. I ask you to bring the minister back to the question at hand, which was in respect to the review of organisational arrangements.

The PRESIDENT: I think the minister was being relevant to the question.

Jaclyn SYMES: Thank you, President. I certainly back the leadership at CFA. They do a fantastic job, as do all of the volunteers and paid staff at CFA. Becoming a CFA volunteer is an incredibly rewarding opportunity. I will take the opportunity right now to encourage anybody who might be watching out there, if you are considering participating in a volunteer organisation, to join the CFA. They are amazing.

Ann-Marie HERMANS (South-Eastern Metropolitan) (12:21): Given that CFA insiders and former Bracks government adviser Garth Head have acknowledged the role the merger has played in

collapsing volunteer numbers, does the Andrews government accept responsibility for the loss of almost 10,000 CFA volunteers since 2014?

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:21): I have never met Garth Head, but given that you have made reference to comments in relation to individuals that I cannot verify, I will just repeat the answer that I gave previously. This government supports CFA. We have funded them. We have not threatened to take away their funding. We have not taken away their funding. We have increased their funding, unlike previous governments of other colours. We will continue to stand by them. We will continue to respond to their needs and continue to encourage more and more people to join this amazing organisation.

Lord's Prayer

David ETTERSHANK (Western Metropolitan) (12:22): (60) My question is for the Attorney-General, Ms Symes, in her capacity representing the Premier and relates to the Lord's Prayer. In the last term of Parliament, on 4 August 2021, you gave an undertaking to this chamber that:

A Labor government, if re-elected, at the beginning of the next term and as part of the consideration of changes to standing and sessional orders will commit to workshopping a replacement model that is purpose-fit for Victoria.

It is certainly our feeling that the model should be consistent across both houses of Parliament and not just in the Legislative Council. My question simply is: has that workshopping occurred and is a replacement model imminent? If not, what is the time frame to progress this important question of principle?

Georgie Crozier interjected.

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:23): I thank Mr Ettershank for his question. I agree with Ms Crozier that it is borderline in relation to whether it relates to the general order, but because you have said my words back at me I feel it is appropriate to respond to those. Indeed it was a commitment that I gave in the last government to workshop potential replacements for the Lord's Prayer. We know that it is a vastly different chamber and a vastly different community from a hundred years ago, when the Lord's Prayer was established. I know that there is –

David Davis: 1857.

Jaclyn SYMES: Mr Davis is an expert in relation to the history of this.

David Davis: More than a hundred years.

Jaclyn SYMES: More than a hundred years. Mr Davis is always very useful in relation to talking about the tradition of this chamber, and of course tradition is important. I reiterate that commitment. It is something that has been raised with me from a number of members in this chamber from a variety of parties. I think it is not a matter for the government; it is not a matter for the executive. It is a matter for this chamber and a matter for the other chamber. I concur that consistency is appropriate, and I am sure many people in this chamber would have a view. I am certainly happy to collate that and come up with a proposal following those discussions and discussions across the way. It is a commitment that is not yet met, so I stand by that commitment.

David ETTERSHANK (Western Metropolitan) (12:24): I thank the minister for her response. After the Lord's Prayer we pay our respects to the traditional owners of these lands. This seems to me rather arse about and somewhat less than respectful and that it would be more appropriate that we pay our respects first. Could the minister advise whether this question has been considered previously and whether this can be included in the consultative process that has been foreshadowed?

The PRESIDENT: I just warn Mr Ettershank about his use of words in the chamber. They may be unparliamentary.

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:25): Mr Ettershank, that is a point well made and I think would be something that is worthy of conversation in relation to where we might land on this as a chamber.

David Davis: On a point of order, President, you ruled out the first question to the minister in her capacity representing the Premier, and another question has just been asked by another member, quite legitimately it seems to me, to the minister in her capacity representing the Premier. I am just curious as to how this is going to work where some questions are ruled out and others are ruled in, even though standing order 8.01 is actually very clear: you can ask questions to the minister where they represent another minister.

The PRESIDENT: The reason I ruled it out is that you were talking about a letter that was actually sent to the Presiding Officers, which this minister has no responsibility for. Mr Davis, as I said, I was helpful from the start. I was very helpful from the start, and that letter has not been distributed to anyone other than the people that it was addressed to. I reckon we might be sort of getting somewhere now, but you are looking like you want to raise a further point of order.

David Davis: Further to the point of order, President, it may well be that the letter has been shared elsewhere with the Premier, and that is what I am seeking to establish. The minister can answer yes or no on that matter. It either has or has not been shared.

The PRESIDENT: There is no point of order. The minister is not responsible for a letter that was sent to the Presiding Officers.

Ministers statements: training and skills

Gayle TIERNEY (Western Victoria – Minister for Training and Skills, Minister for Higher Education, Minister for Agriculture) (12:27): Today I am pleased to update the chamber on how the Andrews Labor government is central to national discussions about skills and training provision. Recently I was pleased to join my training and skills ministerial colleagues across states and territories and the Honourable Brendan O'Connor, the federal Minister for Skills and Training. After many difficult years of a previous disinterested federal government, the day was remarkably cooperative, with ministers working together to ensure we equip Australians with skills and jobs for the future.

The meeting discussed reform opportunities under the five-year national skills agreement, which is scheduled to commence in January 2024. Further discussion at the meeting included the establishment and progress of Jobs and Skills Australia, JSA. In 2023 JSA will develop the evidence base needed to respond to changing needs in the economy, and of course there will also be a new national study on adult literacy and numeracy. A capacity study on the emerging workforce needs for Australia's transition to a clean energy economy will also be undertaken.

This meeting occurred at the South Brisbane TAFE campus, where we were able to see a lot of classrooms interacting over a variety of courses, including hospitality, mathematics and catering. The Andrews Labor government is working cooperatively with the Commonwealth and other states and territories to ensure that Victorians have access to the highest quality training. This establishes the workforces for the future and ensures Victorians have long, meaningful careers.

Fire services

Ann-Marie HERMANS (South-Eastern Metropolitan) (12:29): (61) My question is for the Minister for Emergency Services. The Productivity Commission's 2023 *Report on Government Services* has revealed that Victoria has the most expenditure on fire services per capita of any state, with Fire Rescue Victoria reporting a \$132.5 million deficit, while at the same time FRV and the CFA have failed to meet their own benchmarks on (1) time taken to reach roadside incidents, (2) percentage of structure fires contained and (3) education programs delivered to the community. Can the minister explain what impact the Fire Rescue Victoria—CFA merger has had in contributing to these poor outcomes?

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:30): I thank Ms Hermans for her question. There is a fair bit in that. You start with expenditure on fire services and identify that in Victoria we spend more on fire services than any other state, and that is something that I think we should be proud of. Unfortunately we live in an environment that is an extremely high-fire-risk part of the world. We are renowned across the world for not only our fire risk but our fire services and the world-class service that we provide through both the FRV model and also the CFA model. In relation to response times data, I think that was another question that you had – there were about five questions in your question, so picking and choosing where I respond –

Georgie Crozier interjected.

Jaclyn SYMES: I am not sure which question you would like me to answer, because you asked the question but Ms Crozier is deciding which parts of the question you would like me to answer.

Members interjecting.

The PRESIDENT: Order! Minister, interjections are unruly. I would ask you to ignore them and continue with your answer.

Jaclyn SYMES: Thank you, President. I think I can reflect on my previous answer. I am extremely proud of the firefighters' efforts in our state. We have had a very fortunate period this last fire season where we have had less fires than usual, but there are still, day in, day out, people responding, whether they are paid firefighters, whether they are volunteer firefighters, and I think as Victorians we should be very proud of the service that is provided from every corner of our state. This is a government that will continue to support all of our firefighting efforts, whether they are paid employees or our hardworking, dedicated volunteers.

Ann-Marie HERMANS (South-Eastern Metropolitan) (12:32): Given that Victoria is spending the most on our fire services per capita of any state while at the same time not meeting basic benchmarks, what is the minister doing to ensure that Fire Rescue Victoria meets critical benchmarks while achieving a budget surplus?

The PRESIDENT: On whether that was supplementary to the substantive question, the substantive question was about the effect of the merger, and that is a completely –

Georgie Crozier: On a point of order, President, in the substantive question Mrs Hermans did refer to Fire Rescue Victoria reporting a \$132.5 million deficit, so it is directly related in terms of what the outcomes are, the money expenditure and how this is not meeting benchmarks. It is directly related.

The PRESIDENT: I am happy for the minister to answer the question.

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:33): Thank you, President. There is a lot of commentary in relation to your question, but I think I would at the outset question the tone that you are bringing to this. Victoria has some of the fastest response times in our country compared to other jurisdictions, so to actually start your question with 'We have a failed system' is wrong. It makes it difficult for me to respond to your questions when you have a false narrative that attacks our firefighters, because it is unhelpful to the information that you are trying to obtain from us.

It is fair to say that we expect all of our government agencies to act in a financially responsible manner. I continually work with FRV in relation to their budget, in relation to their needs and in relation to what they need to respond to the community. What we know is that they do a fantastic job in protecting the community. In terms of the organisation and its governance arrangements, they are continual conversations that I have on a weekly basis.

Duck hunting

Jeff BOURMAN (Eastern Victoria) (12:34): (62) My question is for the minister representing the Minister for Outdoor Recreation, Minister Shing. I had hoped that I would be able to move on from duck-hunting questions once the seasonal changes were announced. Unfortunately the seasonal changes that were announced were not what the expert scientists recommended but something else. The reasons given for these changes have previously been debunked, so the reasons must be other than those given. My question is: will the minister immediately release all the documentation and advice she received regarding the changes to the duck-hunting season that went against the government science?

Harriet SHING (Eastern Victoria – Minister for Water, Minister for Regional Development, Minister for Commonwealth Games Legacy, Minister for Equality) (12:35): It will come as no surprise to Mr Bourman that in accordance with the standing orders I am very happy to refer this to the minister in the other place and obtain an answer on that basis.

David Davis interjected.

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Jeff BOURMAN (Eastern Victoria) (12:35): I thank the minister for her answer and Mr Davis for his commentary. This is the first duck season after the election – the election that the government went into supporting duck hunting. Yet the very same government immediately ignored the science that their own scientists have presented to them. This is clearly a concern that goes beyond just duck-hunting issues, so my supplementary question is: given the deviation from following the science, is there any other form of hunting we should be worried about?

Harriet SHING (Eastern Victoria – Minister for Water, Minister for Regional Development, Minister for Commonwealth Games Legacy, Minister for Equality) (12:35): That is a slight broadening of the substantive question into the supplementary, but to my mind I am very happy, in accordance with the standing orders, Mr Bourman, to refer that to the minister and to seek an answer on that basis.

Ministers statements: Victims of Crime Consultative Committee

Enver ERDOGAN (Northern Metropolitan – Minister for Corrections, Minister for Youth Justice, Minister for Victim Support) (12:36): I rise to update the house on the work of the Victims of Crime Consultative Committee. The committee is designed to ensure that the voices of victims of crime are front and centre in the criminal justice system. It does that by bringing victims of crime together with senior representatives from across the criminal justice and victim support systems.

Last week I attended the final committee meeting of the current group of victim representatives. Sharing your lived experience as a victim of crime can be an incredibly difficult thing to do. It can be distressing, it can be intimidating and it can be extremely exhausting, but it can also be empowering and it does make a difference. It is vital that we listen to and learn from the lived experience of victims, and that is why this committee and the victim representatives that serve on it have such a profound effect.

I would like to take this opportunity to acknowledge and thank outgoing victim representatives Cathy, Melinda, Jaylee, Russell, Sandra and Thomas. I had the honour of meeting them and hearing some of their stories. I also heard from the representatives about the work they have contributed to the committee during this current term and insights into the ongoing work of the committee, particularly the new victims legal service and the Aboriginal legal strategy. Finally, I want to thank the chair the Honourable Jennifer Coate for her work in guiding the committee. I look forward to updating the chamber again once the next term of the Victims of Crime Consultative Committee begins in June 2023.

Youth justice system

Matthew BACH (North-Eastern Metropolitan) (12:37): (63) My question is also for the Minister for Youth Justice. Minister, a whistleblower from the Parkville youth justice centre has said that due to the government's 'rampant' use of solitary confinement of children:

... boys were threatening to kill themselves so that they could be put on constant observation, giving them someone at their cell door to talk to.

As the minister will be aware, this follows a United Nations committee specifically condemning the use of solitary confinement in Victoria's youth prisons. Minister, will you end this practice?

Enver ERDOGAN (Northern Metropolitan – Minister for Corrections, Minister for Youth Justice, Minister for Victim Support) (12:38): I thank Dr Bach for his question and interest in this matter. From the outset, I think the best outcome for young people in our state is to not have interaction with the criminal justice system in the first place. But obviously, if they do come into contact and they are in our custody, then we have a responsibility for their safety as well as that of the hardworking staff in our youth justice system. In relation to the use of isolation, it is a mechanism of last resort. There is no solitary confinement in our youth justice system. Isolation cannot be used as a form of punishment. Dr Bach would well know that, so I am surprised that he has come with that question today. But obviously any use of isolation is in accordance with the human rights charter, and I am pleased to report that we have the lowest rate of young people in custody in this state of anywhere in the nation.

Matthew BACH (North-Eastern Metropolitan) (12:39): I thank the minister for his response. Minister, you were quoted in the media today saying that solitary confinement – isolation, in your language – is 'rare'. However, the most recent data from your own department shows that it was used exactly 9287 times in the last quarter alone. In the face of this evidence, how do you maintain that solitary confinement is rare?

Enver ERDOGAN (Northern Metropolitan – Minister for Corrections, Minister for Youth Justice, Minister for Victim Support) (12:39): I thank the member for his supplementary. As I have stated, the use of isolation can only be done in certain circumstances. The statistics actually show that there has been a 38 per cent decrease. You may not have listened to my substantive answer to your first question, but the stats are a 38 per cent decrease in the use of isolation. In the last financial year reporting there was actually a 9 per cent decrease in the use of isolation. So it is used only in rare instances and in accordance with human rights responsibilities.

Bail laws

Katherine COPSEY (Southern Metropolitan) (12:40): (64) My question is to the Attorney-General. Attorney, we welcome your indication over the weekend that your government is considering reform of the bail system in Victoria, a system which we know is disproportionately impacting First Nations people and people in vulnerable circumstances. The government has previously stated that it responded 'quickly and perhaps, without the opportunity to consider all of the consequences' when changing the bail laws in 2018. We know that any reform must reduce the number of unsentenced people currently held in our prisons and we must reduce the number of First Nations people held and dying in custody. The question is: will the government commit to comprehensively fixing our broken bail laws, not a piecemeal approach, in line with legal evidence, criminological data and the longstanding representations of First Nations community legal and legal organisations?

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:41): I thank Ms Copsey for her question and indeed her interest in this matter and look forward to further engagement with her and many members of this chamber and indeed political parties. It has been fantastic to have the engagement. I have had lots of members of Parliament reach out to me with an interest of bipartisanship and wanting to know more about these reforms. I guess it is an unusual way to be developing legislation in the chamber, and it is not something that I want to start a practice of. It

is a delicate piece of legislation that has a range of views and a range of options, and we have telegraphed what we want to do. We have identified the problems.

I concur with the observations that you have made in relation to the disproportionate impacts that our bail laws are having on disadvantaged cohorts, particularly women, First Nations people and people with other underlying conditions such as mental ill health and disability. This chamber will have an opportunity to debate that legislation when it comes through. It is not the only option or the only measure to address the over-representation of cohorts in our justice system. There are a range of options that the government is considering to address those issues. When it comes to justice reform, bail included, it is not necessarily 'complete something and stop'. We may consider further refinements to bail as we go along. But I look forward to consultations with interested parties in relation to that bill as it makes progress through the department and back to me. I have given a full commitment to being very transparent in the consultation in relation to that bill.

Katherine COPSEY (Southern Metropolitan) (12:43): I thank the Attorney for her answer. We welcome the commitment to reform, but we do note that up until now the concerns raised over many years for the urgent need for bail reform to address the explosion in First Nations imprisonment that has occurred under this government are yet to result in action from the government. I am talking about data that is so shocking it showed that First Nations imprisonment rose by 70 per cent in the first five years of this government and that in only 12 months after the introduction of the 2018 bail reforms the number of First Nations women in prison doubled. Given such data and the deaths in custody that have been driven by the mistaken changes to bail laws, Attorney-General, can I have a commitment from you today that the government will never again delay necessary justice reforms to reduce the shocking levels of First Nations imprisonment?

Jaclyn SYMES (Northern Victoria – Attorney-General, Minister for Emergency Services) (12:44): Ms Copsey, I think that is a little bit more of a statement than a question. But in relation to your substantive question – it was in relation to bail – I have given a commitment in this chamber and outside of this chamber that we are advancing legislation in that regard, and that bill will be in the Parliament within months.

Ministers statements: water policy

Harriet SHING (Eastern Victoria – Minister for Water, Minister for Regional Development, Minister for Commonwealth Games Legacy, Minister for Equality) (12:44): To follow on from the question that I received earlier about water, I do want to touch on the water council meeting that occurred last week. This ministerial council was about the Murray-Darling Basin plan and the work that a range of jurisdictions are doing to achieve the stated objectives of the plan. At the meeting itself I was very, very clear on Victoria's position, and we remain fully committed to implementing the plan as it has been agreed and to balancing environmental, social and economic outcomes in a way that was and indeed is intended under the plan itself.

Victoria has, as you would be aware, already made significant progress towards implementation and delivery of the plan, and I am really proud of what it is that we have been able to achieve in recent years, despite considerable hardship and the impact of those changes upon communities, irrigators and indeed primary producers in northern Victoria. So despite the state facing many, many setbacks in recent years, including bushfires, devastating floods and the impact of the pandemic on workforce availability and indeed the cost of materials, we are on track to deliver 98 per cent of our commitments under the plan by 2026.

It was on that basis that I in fact sought an extension of two years in order to deliver those projects to bring us to 98 per cent of delivery of the plan by 2026, including the constraints projects that were referred to earlier. Not only do these projects deliver more water to the regions and enable us to deliver more water to the environment, they also capture the efficiency gains that we are looking for and enable us to bring cultural water back to traditional owners, with the landmark *Water Is Life* project

really setting a national pace for engagement with traditional owners. This is important work and it does go on. I am keen to ensure that I am continuing to advocate for Victoria's interests in this space.

Written responses

The PRESIDENT (12:46): Minister Shing will get written responses in line with the standing orders for Mr Bourman from the Minister for Outdoor Recreation.

Matthew Bach: On a point of order, President, about questions, at the last question time – some time ago now; I think it was on the Thursday – you asked Minister Blandthorn if she would not mind providing a written response to my question because, as normal, she had not answered it here in the house. That still has not been provided, so I wonder if that may be followed up for me.

Lizzie Blandthorn: I believe it has been provided, or lodged at the very least.

Questions on notice

Answers

The PRESIDENT (12:47): I have received a written request from Mr Davis seeking reinstatement of a number of questions on notice directed to the Minister for Public Transport. I have reviewed the responses and order that parts (1), (2) and (4) of questions on notice 20 and 22 be reinstated, as the responses do not address Mr Davis's specific questions.

Constituency questions

Southern Metropolitan Region

David DAVIS (Southern Metropolitan) (12:48): (45) My constituency question is for the Minister for Environment, who oversights the parks and so forth around the state through committees of management. Particularly the Wattle Park Heritage Group has sought from me assistance. They have often been funded in the past for Anzac Day services and with support for the work that that heritage group does. Obviously this is an old tramways park, an important park in the local area, that services many people in my electorate but also, I might add, President, in your electorate. They seek \$4000 in support to enable them to continue their work. People may not know, but the Lone Pines are in that heritage area. One of the four Lone Pines was planted there in 1933, and that pine is growing well, as is its successor pine that some of us fought strongly to get put in the area. Four thousand dollars seems a very modest amount to provide in support, and if the minister cannot do it through the environment portfolio it could be done through veterans.

Northern Victoria Region

Georgie PURCELL (Northern Victoria) (12:49): (46) My question is for the Minister for Environment. Recently residents in Marysville witnessed 12 active wombat burrows on private property being bulldozed still with wombats inside. While killing of our native wombats is not illegal, filling in burrows and suffocating them to death is not an approved method of doing so. Wombats usually have multiple burrows. If notice is given, wildlife carers can humanely evict wombats using a one-way gate, and then the burrow can be immediately filled in. The Wombat Protection Society of Australia reports that this horrific disregard for our native wildlife is common practice; however, it usually happens under the cover of darkness. It was distressed locals who reported this incident initially to police, who did not assist. The Department of Energy, Environment and Climate Action have inspected the bulldozed burrows; however, after over three months of follow-up they will not provide an update or an outcome, including whether wombats were found inside. My constituents would like to know if the minister will release information on the Marysville wombat burrow investigation.

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Southern Metropolitan Region

John BERGER (Southern Metropolitan) (12:50): (47) My question is to the Minister for Multicultural Affairs in the other place, Minister Brooks. My constituency is home to the largest Jewish population in Australia. I recently attended a Parliamentary Friends of Israel meeting, where I heard that Australia has seen a rise in antisemitism over the last four years. In response Victoria has taken great steps towards combating antisemitism by adopting the International Holocaust Remembrance Alliance, or IHRA, working definition of 'antisemitism', which creates a framework to interpret and manage antisemitism. These are important steps which lay the groundwork for a more inclusive and safer Victoria, but without the proper education and implementation we risk a continued rise in antisemitism. Antisemitism is a scourge that must be stopped. When it is found, it must be stamped out. Hatred does not stagnate, it spreads. So my question to the minister is: how are Victoria's strong policies on combating antisemitism and hatred creating a safer, more inclusive Victoria and ensuring our Jewish community is protected?

Northern Victoria Region

Wendy LOVELL (Northern Victoria) (12:51): (48) My question is for the Minister for Roads and Road Safety, and it concerns the need to upgrade the dangerous pedestrian crossing at the Kialla West Primary School, which crosses the Goulburn Valley Highway. I have continuously spoken of dangers at the crossing and the need to upgrade it in the wake of a horrendous collision that occurred in September 2018 during school pick-up that severely injured members of a school family. I direct this question to the new minister in the hope that it will fully inform her understanding of the dangers of the crossing faced by the school's students, staff and parents as well as motorists daily. After years of inaction the minister needs to get on with the job of fixing this crossing. Nearly 4½ years after the collision there have been no meaningful safety upgrades to the crossing to ensure the safety of pedestrians and drivers. Minister, will you accept my invitation to visit Kialla West Primary School at the end of the school day to see for yourself the dangers of the school crossing and the importance of upgrading it?

South-Eastern Metropolitan Region

Rachel PAYNE (South-Eastern Metropolitan) (12:52): (49) My constituency question is for the Minister for Health and relates to maternal and child health, or MCH. My constituent is a young mother in the City of Casey. She was shocked to be told by her MCH nurse that her eight-week-old son's MCH appointment may be his last. Upon further digging she discovered that Casey is providing just four of the 10 key ages and stages visits ordinarily provided by Victorian MCH services. We all know just how important the first thousand days are to a child's future wellbeing and what a critical role these visits play in that period. So my constituent asks: what assistance and support is the minister providing the City of Casey to bolster services for the many young families in the area?

Eastern Victoria Region

Melina BATH (Eastern Victoria) (12:53): (50) My question is to the Minister for Energy and Resources. In the news today the Japanese government through its Green Innovation Fund has committed to providing and investing \$2 billion for a joint venture with regard to the hydrogen liquefaction process and hydrogen energy, both produced through the gasification of coal in Latrobe Valley and shipped out through Hastings in my electorate. Constituents in both the Latrobe Valley and Hastings are delighted with this. My question goes to the need for carbon capture and storage to be part of that process and the CarbonNet project and the work that has been done. So my question is: what is the minister doing to actively assist with the commercialisation of carbon capture and storage, which is pivotal for the hydrogen project's viability?

Northern Victoria Region

Rikkie-Lee TYRRELL (Northern Victoria) (12:54): (51) My question is for the Minister for Roads and Road Safety and is concerning the recent rise in vehicle accidents resulting in fatalities

within the Northern Victoria Region. Most recently – in fact last Sunday just past – a 19-year-old man was killed within kilometres of my own road. Numerous constituents have raised concerns with me pertaining to the noticeable disregard for general road safety. In an effort to keep our community safe and give guidance to our youngest road users, also assuming there is provision for road safety campaigns within the budget, how does the government intend to address this issue?

Western Victoria Region

Bev McARTHUR (Western Victoria) (12:55): (52) My question is to the Minister for Public Transport. On 30 May 2020 a V/Line passenger train smashed through the Lydiard Street heritage rail gates at the Ballarat railway station. It took 534 days for the government to reopen one of Ballarat's busiest roads. On 7 October 2021 Heritage Victoria provided the permit to allow temporary boom gates and updated signalling to be installed at a cost of \$10.5 million. The permit also required a report to be submitted within 15 months for an options paper assessing permanent options for the level crossing and the future of the salvaged heritage elements. It was required to demonstrate community consultation. The report should have been lodged in January this year. My question is: has that report been lodged; if so, what community was consulted; and given that consultation will report, has it been made public?

Northern Victoria Region

Gaelle BROAD (Northern Victoria) (12:56): (53) My question is to the Minister for Water in relation to the flood levee along Bendigo Creek that was badly damaged during last year's floods. Local constituents raised concerns about several spots along the creek, and I visited the site last week. A roadway that was a few metres wide along the creek has all but eroded away. Another heavy rainfall could see the levee bank break, and houses are now at risk of flooding. Local residents want to see the issue fixed, but various authorities are involved, including Goulburn-Murray Water, the catchment management authority, the local council and Parks Victoria. The state government needs to undertake urgent works to repair the levee bank, and I would appreciate the minister's advice as to what is being done to fix this problem. A flood mitigation study was done years ago, but since then nothing has happened. If the levee breaks, houses in Huntly are at risk of flooding. It would be devastating for local families, and the damage bill would be in the tens of millions of dollars.

Western Metropolitan Region

Moira DEEMING (Western Metropolitan) (12:57): (54) My question is for the Minister for Education. When will the government build a primary school in Williams Landing? Williams Landing is in Wyndham, one of the fastest growing areas in all of Australia. The government reaps an economic reward from this population growth, but it is not matching that income with a corresponding investment in services. Money has been collected from landowners and developers into what is called the Growth Areas Infrastructure Contribution Fund. The ABC reported at the end of last year that the fund in Wyndham had collected almost \$250 million, but less than half has been allocated, and the government's latest budget made no funding commitments from that fund. This is inexcusable when we are already behind and playing catch-up in our provision of schools for the west. There is not a single primary school in Williams Landing even though it has a thousand primary school-aged children. Williams Landing needed its own school years ago; they cannot wait any longer.

Northern Metropolitan Region

Evan MULHOLLAND (Northern Metropolitan) (12:58): (55) Last week the people of Wallan were forced to fill in a pothole by creating a makeshift garden bed and fruit tree that had a sign on it saying, 'Wallan Botanical Gardens, sponsored by VicRoads.' My question to the Minister for Roads and Road Safety is: given that the notorious pothole was fixed straight away after this, why must the people of Wallan resort to such drastic action in order to get the government to take some interest in the deplorable state of the Northern Highway in Wallan; will the minister review the maintenance

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schedule so that these potholes are fixed in a more timely manner; and will the minister come out with me and inspect the Northern Highway?

Eastern Victoria Region

Renee HEATH (Eastern Victoria) (12:59): (56) My question is for the Minister for Roads and Road Safety, and my question is: when is the minister going to address the state of the roads in Thorpdale? This weekend Thorpdale comes alive as people come from all over the state to celebrate the potato. The Thorpdale Potato Festival celebrates a long history of potato farming in the Thorpdale district. In fact 70 per cent of our brushed potatoes come from there – a statistic locals are extremely proud of. However, locals are extremely concerned about the state of the road, in particular the Thorpdale slip. When there is heavy rain, the road actually moves, and to my knowledge it has been fixed four times already this year. On a recent visit a local expressed to the Leader of the Opposition that it is only a matter of time before a serious accident occurs. As thousands of tourists come to the area this week, it is a timely reminder. When will the government find a permanent solution to this extremely dangerous issue?

Bills

Public Administration and Planning Legislation Amendment (Control of Lobbyists) Bill 2023

Introduction and first reading

David DAVIS (Southern Metropolitan) (13:00): I introduce a bill for an act to amend the Public Administration Act 2004 and the Victorian Planning Authority Act 2017 to provide more control over lobbyists, and I move:

That the bill be now read a first time.

Motion agreed to.

Read first time.

David DAVIS: I move, and I predict that this will be known as the 'Theophanous bill':

That the second reading be made an order of the day for the next day of meeting.

Motion agreed to.

Committees

Scrutiny of Acts and Regulations Committee

Alert Digest No. 1

Sonja TERPSTRA (North-Eastern Metropolitan) (13:01): Pursuant to section 35 of the Parliamentary Committees Act 2003, I present *Alert Digest* No. 1 of 2023, including appendices and extracts of proceedings, from the Scrutiny of Acts and Regulations Committee. I move:

That the report be published.

Motion agreed to.

Papers

Parliamentary Budget Office

Report of Operations for the Victorian 2022 General Election

Nicholas McGOWAN (North-Eastern Metropolitan) (13:02): Pursuant to section 27 of the Parliamentary Budget Officer Act 2017 and on behalf of the Public Accounts and Estimates Committee, I present the Parliamentary Budget Office's *Report of Operations for the Victorian 2022 General Election*.

Report 2021-22

Nicholas McGOWAN (North-Eastern Metropolitan) (13:02): Pursuant to section 28(4) of the Parliamentary Budget Officer Act 2017 and on behalf of the Public Accounts and Estimates Committee, I present the Parliamentary Budget Office's report 2021–22.

Papers

Tabled by Clerk:

Local Government Act 2020 - Commission of Inquiry into Moira Shire Council (Ordered to be published).

Planning and Environment Act 1987 - Notices of approval of the -

Frankston Planning Scheme - Amendment C140.

Greater Geelong Planning Scheme – Amendment C431.

Melbourne Planning Scheme - Amendment C413.

Stonnington Planning Scheme – Amendment C329.

Victoria Planning Provisions – Amendment VC215.

Yarra Planning Scheme - Amendment C313.

Safe Drinking Water Act 2003 – Drinking water quality in Victoria – Report, 2021–22.

Statutory Rules under the following Acts -

Port Management Act 1995 – No. 13.

Residential Tenancies Act 1997 - No. 10.

Victorian Civil and Administrative Tribunal Act 1998 - No. 12.

Water Industry Act 1994 - No. 11.

Subordinate Legislation Act 1994 - Documents under section 15 in respect of Statutory Rule No. 12.

Department of the Legislative Council

Overdue government responses to standing committee reports

The Clerk: I have received the following paper for presentation to the house pursuant to standing orders: President's report on overdue government responses to standing committee reports, as at 28 February 2023.

Business of the house

Notices

Notices of motion given.

David Davis having given notice:

David DAVIS: I move, by leave:

That that be debated forthwith.

Leave refused.

General business

Georgie CROZIER (Southern Metropolitan) (13:08): I move, by leave:

That the following general business take precedence on Wednesday 8 March 2023:

- (1) order of the day 2, second reading of the Public Health and Wellbeing Amendment (Health Services Performance Transparency and Accountability) Bill 2023;
- (2) order of the day made this day, second reading of the Public Administration and Planning Legislation Amendment (Control of Lobbyists) Bill 2023;

- (3) order of the day 1, listed for a future day, resumption of debate on the second reading of the Road Safety Amendment (Medicinal Cannabis) Bill 2023;
- (4) notice of motion given this day by me on the production of documents relating to briefs to the Assistant Treasurer on the banking and financial services contract;
- (5) order of the day 6, resumption of debate on the second reading of the Independent Broad-based Anticorruption Commission Amendment (Facilitation of Timely Reporting) Bill 2022;
- (6) order of the day 5, resumption of debate on the second reading of the Independent Broad-based Anticorruption Commission Amendment (Restoration of Examination Powers) Bill 2022;
- notice of motion 19 standing in Mrs McArthur's name establishing a joint committee to inquire into road trauma and road safety;

and the resumption of debate on the address-in-reply to the Governor's speech be postponed until Thursday 9 March 2023.

Motion agreed to.

Members statements

Türkiye and Syria earthquakes

John BERGER (Southern Metropolitan) (13:09): Today I rise to pay tribute to those supporting the Türkiye and Syria earthquakes relief efforts. Recently I met with Michael Valos and David Hobson of Balwyn Rotary to learn about their fundraising plan for the Türkiye relief fund. Balwyn Rotary pledged a massive \$50,000 to the cause, and not only that, they also invited me down to the Camberwell market, where all the profits that Sunday were being donated to relief efforts. I congratulate David and Michael and Balwyn Rotary for their work.

But my Sunday did not end there. I then drove to a restaurant in Balaclava, where I joined the Minister for Small Business, Minister for Veterans and Minister for Youth Natalie Suleyman and Ryan Batchelor. You see, Tulum held a street barbecue to raise money for the Türkiye and Syria earthquakes relief, and wow, it was popular – there were lines stretching down the street. I thank the owner and head chef Coskun Uysal, who I had the pleasure of meeting, for such a great initiative. Always support your local, as your local will always support you.

I want to pay tribute to branch assistant secretary of the Transport Workers Union Mem Suleyman, who coordinated the TWU and Australian Container Freight Services efforts to mobilise local community groups, schools and allies in the union movement to fill a shipping container with baby bottles, nappies and women's sanitary products in only 72 hours. Finally, to all the unions, who collectively raised \$40 million, it was a job well done.

Pat LaManna

David DAVIS (Southern Metropolitan) (13:11): I want to draw attention to the sad death of Pat LaManna OAM, a great Victorian who was senior of the year in 2009 and, obviously, recently passed away on 10 February this year. He battled adversity in the years after his arrival in Australia from Italy in 1948, but he was a great entrepreneur and gave back to many charities in Australia and indeed overseas. He was honoured for his remarkable contribution to our country through the OAM. His family and the community believe his achievements should be acknowledged and celebrated further, and I agree with them. The LaMannas are a great family, but he typifies their contribution to the community through his lifelong service and the incredible impact he had on so many in this state.

He founded the Lions Club of Melbourne Markets and was a member for 40 years, and it became the highest fundraising Lions Club in Australia. He suffered a stroke in his late 60s and initiated the Pat LaManna Cancer and Research Stroke Foundation. His tireless fundraising efforts have resulted in millions of dollars being raised to help those in that need. His story is inspiring. It is a migrant story but it is also a story of great service, and I think we can be incredibly proud of Pat LaManna's amazing contribution. I, for one, certainly regret his passing.

Family violence

Samantha RATNAM (Northern Metropolitan) (13:13): We are nine weeks into 2023, and already 11 women have been killed in Australia because of family or gendered violence. Ten of those women were killed within the space of 20 days. Family violence prevention advocates have rightly been asking: where are the protests? Where are the vigils? Where is the outcry? Instead we hear more silence.

As we prepare to mark International Women's Day 2023, we condole the loss of these women, often killed by the people they trusted the most. We keep their families and communities in our hearts, and we resolve to never forget and we resolve to act. This action needs all of us to work together. It needs multipartisanship. It needs governments to bring us all into the conversations and solutions, including our culturally diverse communities. I remain deeply concerned that these communities – our communities – continue to be left out of the policy dialogue, problem solving and funding.

Tonight the Multicultural Alliance of Women against Family Violence, a community alliance of powerful women, is hosting an event, Cracking the Cultural Code, in Parliament, and you have all been invited. The alliance are apolitical and determined to ensure that grassroots community organisations are listened to by governments and supported through funding to do the life-saving work of preventing family violence and deaths. I hope that as many of you as possible are able to attend.

Our multicultural communities are at the front line of family violence epidemics. They are losing women every week, and their stories are not being heard. Mainstream approaches have failed our communities. We still do not have a culturally specific women's refuge in Victoria, despite many other states going ahead. We must do more, and we must do that work now.

Voice to Parliament

Ryan BATCHELOR (Southern Metropolitan) (13:14): I would like to speak about the groundswell of community events that are happening in support of constitutional recognition of our First Peoples across the Southern Metropolitan Region. I recently had the pleasure of attending a forum at Monash University's Caulfield campus hosted by the federal member for Macnamara Josh Burns and joined by the Commonwealth Attorney-General Mark Dreyfus. The forum started with a very thoughtful and generous welcome to country by N'arweet Carolyn Briggs and followed with a discussion of the importance of the Voice campaign, with moving contributions from Professor Christopher Lawrence from Monash University, talking in very honest terms about his traumatic childhood and the impact of that ongoing trauma on him and his family, and Jamil Tye from the very important William Cooper Institute at Monash University, explaining the federal referendum on recognising a First Nations voice in the constitution as a simple but profound measure which will give First Nations people a say in decisions that affect them. Voice, treaty and truth have always been a priority for the Andrews Labor government. I am proud of the progress we have made here in Victoria leading the nation working with Aboriginal Victorians toward self-determination, and I know that voters across the Southern Metropolitan Region are looking forward to the opportunity to vote yes for constitutional recognition later in 2023.

Ballarat Begonia Festival

Joe McCRACKEN (Western Victoria) (13:16): The Ballarat Begonia Festival is on this coming long weekend, so if you have not already, go on to booking.com and book yourself a room and celebrate the wonderful flower the begonia.

Melina Bath: The humble begonia.

Joe McCRACKEN: The humble begonia. There are a number of great music performances available. Additionally there will be the *Bloom!* performance, featuring the aerial antics of three highly skilled performers on – get this – 15-foot-high sway poles. I want to see that in here. While you are at it, you can bring the kids along and they can go to the tiny town display or get a photo with the roving

bees and butterflies. There will be plenty of food options available too – I think there are even vegan options, so there are no excuses from anyone. There is a farmers market and a flower market as well and local nurseries. You can learn about beekeeping, visit the greenhouse and attend cooking demonstrations and many other things as well. All this is set against the beautiful backdrop of Ballarat Botanical Gardens, next to the heritage-listed Lake Wendouree. To cap it off, the Power FM begonia parade will be on Labour Day, Monday the 13th, and will feature dozens of floats. So come on down to Ballarat, get yourself a room and you will not regret it. I am happy to show you around if you want to come down as well.

Air pollution

Katherine COPSEY (Southern Metropolitan) (13:17): I was alarmed recently to read about the effects of traffic pollution in Australia. A recent study by Melbourne Climate Futures used a peer-reviewed study from Aotearoa, New Zealand, looking into particulate matter and nitrogen dioxide levels to show that traffic pollution is likely to cause more than 11,000 premature deaths in Australia. Particulate matter, which is tiny particles formed by the combustion process in internal combustion engines, can enter the bloodstream and cause many health problems throughout the body. Many experts are calling for the introduction of emissions standards and emissions regulation.

In this chamber two weeks ago I raised the concerns of residents in Footscray who are asking for the enforcement of a 2015 curfew that would ban trucks on Moore Street in Footscray during off-peak times, for environment and health monitoring of air pollution and emissions and for this monitoring to be shared with residents. Based on a 2020 Victorian government report we know that residents in Melbourne's inner west, who experience a high volume of truck traffic and heavy industry, have the highest rates of child asthma in the state. Their hospital admission rate is estimated to be more than 70 per cent higher than the nation's average, and the inner west also has a higher incidence of lung cancer than the general Australian population. I call on this government to repeal its unfair EV tax, which is holding back the uptake of electric vehicles in Victoria; to tighten our air quality standards to align with World Health Organization standards; and to improve vehicle emissions standards for both light vehicles and trucks to decrease the amount of these fine particulates in our air so that our local communities can breathe a sigh of relief.

Minister for Child Protection and Family Services

Matthew BACH (North-Eastern Metropolitan) (13:19): President, it is a close-run thing, but I have made a decision. Of the five child protection ministers I have gone up against in this place in the last two years, Minister Blandthorn is now my favourite. At the end of question time I made a mistake. I stood up and I said she had not responded to a question I asked two weeks ago. She was right; she had responded – she had responded 5 minutes before. I had asked a question last sitting Thursday about a report that I have seen – I was not sure if the minister had seen it – into the economic costs of foster care. The minister took two weeks to respond. During question time she responded, 'I have the report'.

Georgie Crozier: Is that all she said?

Matthew BACH: That was her response in full. So it has been interesting to me since facing off against the minister – because I had never faced off against the minister; they have always been in the other house – that Minister Blandthorn has been deemed by you, President, to be the most evasive minister in the government. More times than any other in the government she has been deemed to be in breach of standing order 8.07 and forced to respond in writing. And when she does respond in writing she gives me tidbits like that. So I want to help the minister.

I also put a matter to her in the adjournment debate last week about same-sex adoption. I asked how often this has happened, because the Premier last question time said that it was a fabulous thing – and I agree, by the way – that some years ago we legislated for same-sex adoption. Mr Dimopoulos at the time said, 'Why should the thousands of gay foster carers not be able to adopt kids?' I have now found

out, Minister, that on fewer than five occasions since 2017 same-sex couples in Victoria have been able to adopt, so do not worry about that question.

Medically supervised injecting facilities

David ETTERSHANK (Western Metropolitan) (13:21): Only a few short weeks ago I was pleased to tour North Richmond's medically supervised injecting centre and overdose prevention centre for the first time. It is a centre I have supported in principle for a long time, but it is not until you see the service in action that you appreciate its true worth. It is saving lives and reducing demand on ambulances and first responders. But it is doing so much more. To learn about their wraparound services and successes in transitioning patients of the centre from heroin to long-term alternatives, for example, their remarkable success rate in treating hepatitis C because of their ability to complete diagnostic pathology on site immediately and then treat on the same day and their huge successes with dental silver fluoride to topically treat dental cavities where surgical treatment would otherwise be near impossible to facilitate for their clientele – it was just so very impressive. So I am very pleased that, having saved 63 lives and successfully managed over 6000 overdoses, the centre will now become an ongoing service. I commend the government for committing to the ongoing operation of the service. It is abundantly clear to me that Victorian lives will be saved by having more centres of this type. Subject to appropriate consultation, overdose prevention centres should be opened when and where they are needed.

Australian Army

Trung LUU (Western Metropolitan) (13:22): On a happier note, Wednesday 1 March was the Australian Army's 122nd birthday. Our army has a long and proud history of service and sacrifice made by men and women who have worn the uniform since 1901. This constitutes some 2 million Australians. We should reflect on their accomplishments. Our army has been a national institution and professional fighting force since Federation. The army reflects Australian values, and those who put on the uniform demonstrate excellence every day at home and abroad. We congratulate and thank the army for its commitment and professionalism in service of our nation. Happy birthday, Australian Army, and best wishes for the years to come.

Meadow Heights mosque

Evan MULHOLLAND (Northern Metropolitan) (13:23): It was great to attend on the weekend the open day for the Meadow Heights mosque in my electorate of Northern Metropolitan. I particularly want to acknowledge the president of Islamic Community Milli Gorus Australia Ramazan Otkun, the president of Meadow Heights mosque Hasan Guresen, the president of the Brunswick mosque Recep Aktep and Fatih Buyukyazici from Ilim College. Put on by the Islamic Council of Victoria and ICMG Australia, these open days help provide the community and us as politicians greater understanding of the contribution faith communities make to our great state. It was a pleasure to be joined by former Liberal candidates for Broadmeadows and Greenvale Mr Baris Duzova and Usman Ghani to reinforce that the Liberal Party is the party of multicultural Victoria and does preselect candidates that look and sound like the communities they represent. It was great to be greeted with such a warm reception by the community and terrific to see so many stalls fundraising for the relief efforts in Türkiye and Syria. Through ICMG Youth Australia I was in deep admiration for the work that the mosque does to support and mentor young people who, like me, are big fans of the Ultimate Fighting Championship and are keen to watch and even train at their community centre to try to get those young people on the straight and narrow, supported by mentors in their community. I very much enjoyed the gozleme and Turkish coffee, and I thank again those at the Meadow Heights mosque for the warm reception they gave me hopefully the first of many.

Boolarra Folk Festival

Melina BATH (Eastern Victoria) (13:25): On the weekend I attended the 20th Boolarra Folk Festival, and what a fantastic folk festival in the most beautiful little town. I am going to read out here

some of the people. There were about 70 volunteers and supporters, but I do want to put on record some of these wonderful people: president Rick Teychenne, an amazing person; secretary Carolyne Boothman; Kath Aveling; Charlie Twomey, who is a teacher at Yinnar Primary School, and Kate Reiske, both of whom did an amazing job in coordinating the music; Jack Spira; David Francis-Foreman; Glenn Wearne; Jules De Cinque; Kristy Mills; Gab Francis; Mel Wearne, Elspeth Kiddell; Holly Grady; Ray Stewart; Grant McNeil; the wonderful Dan Clancey, who is a councillor out at Latrobe City; Bronwen Hilton; Brett Van Hoorn, a sound engineer of the most amazing standard; Ray Machen; John Cargill; Caterina Reiske; and Jacqui Healey. These are wonderful people. I thank them all for their amazing work over many, many years.

Erica Country Expo

Melina BATH (Eastern Victoria) (13:26): The next event I went to was the Erica Country Expo and woodchop event up in Erica, a smaller event by nature but a most wonderful, heartfelt event. Bec and Trevor Closter were the main organisers of that, showcasing all things rural and showcasing our woodchop event. It was fantastic to be there also.

Business of the house

Notices of motion and orders of the day

Lee TARLAMIS (South-Eastern Metropolitan) (13:26): I move:

That the consideration of order of the day 1, for the resumption of debate on the motion for the address to the Governor in reply to the Governor's speech, and notices of motion, government business, 2 to 7, be postponed until later this day.

Motion agreed to.

Bills

Statute Law Amendment Bill 2022

Second reading

Debate resumed on motion of Enver Erdogan:

That the bill be now read a second time.

Georgie CROZIER (Southern Metropolitan) (13:27): I rise to speak on the Statute Law Amendment Bill 2022 and in doing so do not intend to say very much in relation to this bill that has come into the house today, because it is largely a technical bill. It is making amendments to various acts to correct errors, references, omissions and ambiguities, and I will come to those in a moment. I do want to thank the minister's adviser who contacted me and reassured me that there were no issues with SARC, the Scrutiny of Acts and Regulations Committee. I thank her for giving me that assurance in relation to this particular bill that we are now debating.

I note that some of those errors and ambiguities in references apply to the following pieces of legislation: the Aboriginal Heritage Act 2006, the Domestic Animals Act 1994, the Housing Act 1983 and the Terrorism (Community Protection) Act 2003 – important acts that are here in our state. I note that there are other ones, like the Competition Policy Reform (Victoria) Act 1995, which refers to the Trade Practices Act 1974, a Commonwealth act, which has now become the Competition and Consumer Act 2010. Again, it is important to update those and to understand that those acts at a Commonwealth level have also had an impact on these acts here in Victoria. Not only does this bill amend a variety of acts, as I said, it also amends the Sex Offenders Registration Act 2004 to give effect to an amendment that was sought to be made by the Justice Legislation Amendment (Police and Other Matters) Act 2022, but that was thwarted by an error in the Firearms and Other Acts Amendment Act 2021.

As you can tell, this bill is largely technical and corrects these omissions, errors and ambiguities that apply in relation to references to acts in Victoria as well as in the Commonwealth. I note that this is a routine type of bill that ensures that the statutes here in Victoria are clear and that, as I have said, those acts that have been affected have clear direction. It is very much our intention to support this bill so that Victoria's statutes do operate as intended and that individuals, including of course the courts and the judiciary, understand and know the intentions of this Parliament.

This legislation, as I said, is really largely technical; it is tidying up those ambiguities, errors and omissions. It is not making any substantial changes to legislation. The one that I referred to around the sex offenders act by my understanding is just effecting amendments already considered to that act which were agreed to by the previous Parliament. On that basis and with those few words around this bill, the opposition will be supporting this legislation.

John BERGER (Southern Metropolitan) (13:31): I rise to discuss the necessity of simplifying and streamlining statutes with the Statute Law Amendment Bill 2022 and the perils of blocking incoherent and outdated pieces of legislation. The minor amendments proposed in the Statute Law Amendment Bill are designed to achieve clarity, relevance and accuracy by correcting references to other pieces of legislation, statutory bodies and other authorities and fixing errors to ensure the law is accessible and the statutes are clear and accurate for our community. I can say with certainty that Victorians would expect to have confidence in our laws – that they are clear and remain current. The amendments proposed are good housekeeping.

I want to outline a variety of important updates being made today. The Competition Policy Reform (Victoria) Act 1995 needs to be updated to refer to the Competition and Consumer Act 2010 in various paragraphs. These minor amendments reflect the renaming of the Commonwealth Trade Practices Act 1974 to the Competition and Consumer Act 2010, which has been effective since 1 January 2011. Not only was this act renamed, but it also introduced more schedules. We must account for this by substituting 'Trade Practices Act' with 'Competition and Consumer Act. Clause 6 will clarify the role of the 'commission' – the minister referred to in section 8 of the Competition Policy Reform (Victoria) Act 1995 – to be the Commonwealth minister administering part IV of the Competition and Consumer Act 2010. They are necessary and important so that the statute stays up to date, consistent and clear and is maintained in a regular and orderly manner.

Minor corrections are needed to the Aboriginal Heritage Act 2006. Sections 65(2D) and (2E) point to an incorrect cross-reference to section 65(1). The cross-reference needs to relate to the time within which the secretary needs to decide whether to approve a cultural heritage plan. Section 65(1) refers to the criteria for an application. The time specified in sections 65(2D) and (2E) is wrong and should be referred to as '65(2)', which stipulates the time frame to make a decision. It is important that there are no errors to ensure that the meaning of the act can be easily read and understood.

In relation to the Domestic Animals Act 1994, this needs to be amended to clarify that a person or body referred to in section 84M(1), which relates to the recovery of a dog or a cat, is someone who has an agreement with a council under section 84Y. This will make the law clear so that there is a clear set of rules that outline who has the power to recover a dog or a cat, and ultimately this person has the power to seize and dispose of the dog or the cat – it is a serious matter.

Also included in the bill are amendments to the Housing Act 1983. This needs to be corrected to be up to date and reflect the government body, changing 'the Director' to 'Homes Victoria', making the statute accurate with a change in the name. Other corrections also include errors made in section 37(1) on the issuing of notices, declarations and certificates. The statute should refer to the correct person, being the chief executive officer of Homes Victoria. Again, the law needs to be clear on who has the power to issue these notices, declarations and certificates, as the statutes will affect thousands of Victorians, and the people in charge should be correctly identified in the statute.

The Sex Offenders Registration Act 2004 has a typographical error caused by the Firearms and Other Acts Amendment Act 2021. The Justice Legislation Amendment (Police and Other Matters) Act 2022 removed the relevant reference, and consequently the amendment which Parliament intended to make has not occurred, causing the statute books to be unclear. The commencement date of the Firearms and Other Acts Amendments Act 2021 and the Justice Legislation Amendment (Police and Other Matters) Act 2022 caused the typographical error. The amendment will mean that there is a new class 2 offence: if sentenced this person is automatically registered as a sex offender and will need to comply with the requirements of the Sex Offenders Registration Act 2004. This act assists Victoria Police to keep a check on registered offenders by requiring them to report to Victoria Police. This class 2 offence involves a person using a carriage service – phone or internet – to prepare or cause harm to engage in sexual activity with, or procure for sexual activity, a person under 16.

As the law currently stands, simply planning or preparing to cause harm to a person under 16 years of age with the use of a carriage service is not an offence under the act, because there is not an engagement in sexual activity, and consequently it will not attract a class 2 offence requiring the perpetrator to be placed on the sex offender register. Surely Victorians would expect perpetrators to be stopped in their tracks prior to a crime being permitted. This was Parliament's intention. This is an important piece of statute relating to children under 16, who are vulnerable and need to be protected, yet the statute does not do this because of a typographical error.

I would like to draw attention to the legal case of the *Queen v. Dalwood* [2020] New South Wales DC841, where the offender was in breach of section 474.25C. He was arrested and released on bail and then rearrested for a breach of bail after engaging in further communication with the victims and with further images of themselves being sent. This demonstrates the importance of placing a person who has used a carriage service to prepare or plan to cause harm to, or engage in sexual activity with, a person under 16, on the sex offender register and for it to be classed a class 2 offence. This stuff is common sense. These reforms are necessary. Everyday Victorians expect strong functioning laws and the people with the power and the responsibilities to correctly identify them.

We deal with these matters in everyday life. I know a bit about rules as a former union secretary. We often took rules out to deal with ambiguity. This is particularly vital during enterprise bargaining agreement negotiations. With employment matters stipulations of law and provisions are vital. There could be a dispute around rostering, hours of work or meal breaks, or systems of work or processes. If you do not update them and keep them up to date with the modern, changing work environment, you will find yourself quickly caught out as a union secretary, falling short of the standard. You will find yourself falling short of that. I know that clear provisions make it easier to interpret and implement. Poor legislation lends itself to be interpreted poorly and leads to time being lost and wasted, and often in the case of an enterprise agreement you have to go to a tribunal to have the matter determined. This leads to pointless court trials and VCAT hearings.

A few years back the Fair Work Commission went through an important exercise to simplify awards, taking out anomalies to make them more readable. This practice is common and widespread. It is about democratising the law. It is about ensuring that it makes sense. It is about the law being relevant to the time and to the way it is being interpreted. So how embarrassing is it the other way? I imagine someone in this building is currently building a home, or someone here knows someone who is doing that. Let us think about this. If all the specifications are not documented and the nitty-gritty is not documented, it leads to cost blowouts, and most people building homes are not experts in law. It should not require a fancy lawyer to understand it.

I do not expect this law to be controversial. I do not expect this law to be scary. I know this law is about common sense, but this amendment allows me to have the chance to talk about the importance of doing the little things. The purpose of the proposed bill is simple. First, we need to correct inadvertent technical errors; second, there are minor updates to clauses, which I have outlined; and thirdly, and I think importantly here, it goes to the heart of what we are trying to do to make effective laws, and this clarifies that that is our intention.

From my understanding, Parliament regularly considers and passes statute law amendment bills to correct ambiguities, minor omissions and errors found in the statutes. This bill touches on a variety of different portfolios. There is treaty and First Peoples, led by the minister in the other place Gabrielle Williams. Then there is agriculture, led by my colleague in this chamber Minister Gayle Tierney. Then there is the minister in the other place Colin Brooks, who deals with a portfolio deeply important to my community, that of housing; my friend in the other place Anthony Carbines, who deals with police; the Attorney-General, Jaclyn Symes; and the Treasurer in the other place, Tim Pallas. Their portfolios are touched by this.

For such a straightforward bill it covers a lot of areas, but I would like to talk about the importance of the area close to my heart: housing. These changes to the Housing Act are administrative in nature. In 2022 amendments were made to the Housing Act 1983 – quite an old act – supported by the evolution of the director of housing, with the formal establishment of Homes Victoria and its CEO. Why is this important? You see, the modern-day era requires a modern-day approach to housing. We recognise that we must modernise the approach of the commission block and work with local communities to grow a supply of local and affordable housing. Nowhere is this more important than in the electorate of Southern Metropolitan Region. There are old commission housing blocks in Albert Park on the corner of Reed Street and Victoria Avenue; in South Melbourne there are Park Towers and Emerald Hill Court; close to where I worked for decades – an area I know well – is Evans Street in Port Melbourne, which houses two buildings; from the old to the new, my electorate office is just a hop and skip away around the corner to the buildings on King Street; on the corner of Little Chapel Street there are two buildings nestled away in a vibrant area; and do not forget those on Malvern Road in South Yarra and Union Street and Raleigh Street in Windsor. My community knows firsthand the importance of public housing.

That is why I am proud that we have committed \$5.3 billion for the Big Housing Build, which is the biggest single investment in social housing of all states and territories. But who can be surprised? Victoria leads the nation. It is also our biggest investment as a state in housing. It will deliver more than 12,000 homes, including 2400 affordable homes in Victoria to who needs them the most. It will boost our social housing supply by 10 per cent, a big deal for thousands of Victorians who need it most. But it will not just benefit my community; the flow-on will help regions, with 25 per cent of funding allocated to regional Victoria, and – hardly a surprise for a program of our government – the housing build will create an average of 10,000 new jobs each year, creating new employment opportunities for all Victorians.

The bill is straightforward. The purpose of the bill is clear. The bill will revise the statute law of Victoria to amend grammatical, typographical and other errors in legislation. On the topic of housing, the amendments outlined have no substantive effect on the Housing Act; rather, they correct errors that are relevant to the provisions. It is all about ensuring that Victoria's statutes remain relevant and accessible to the Victorian community. Our community deserve to have confidence in the clarity and accuracy of the legislation that affects them. I am pleased the Department of Premier and Cabinet worked so closely with the variety of government departments touched by this bill. It is how a government is supposed to work.

Why are there so many errors? Whenever we draft legislation I know, from our side, we approach it with sanctity, with the utmost care and to the highest professional standards. But occasionally all sides of politics, including those opposite in the coalition, make minor errors or may forget to include details or accidentally include irrelevant details in legislation. Put simply: mistakes happen.

We are a government of action, and we are a government that aims to quickly identify any errors and to rectify them as soon as possible. This ensures that our legislation is world standard. Do not forget that the Charter of Human Rights and Responsibilities Act 2006 came into place 23 years after the previously mentioned Housing Act 1983 came into place. Back then there was no section 28 dealing with compatibility rights, and now there is. Times have changed, and we must change with them.

In conclusion, these sorts of bills are passed on a regular basis by the house. It is about ensuring we keep legislation modern, efficient and accurate, and it will help ease the administration of our laws. This bill lapsed at the end of the last Parliament. There has been no statute law revision bill for a few years now, and I think everyone in this room knows we can imagine why. With a once-in-a-generation pandemic there have been other demands and priorities on our government. But now we can keep up with some good housekeeping, and that is why I commend the bill to the house.

Jacinta ERMACORA (Western Victoria) (13:45): The Statute Law Amendment Bill 2022 has a number of purposes. The purposes of this proposed bill are to correct inadvertent technical errors, make minor updates and implement Parliament's intention to make effective statute laws. Parliament regularly considers and passes statute law amendment bills to correct ambiguities, minor omissions and errors found in statutes. The bill also updates several acts that are impacted by new names of entities or changed names in related jurisdictions like the Commonwealth. This bill is an essential piece of good legislative housekeeping, where clarity, relevance and accuracy of statute law in Victoria are maintained. The updating of references and correction of errors makes sure that Victorian statutes are up to date, consistent and clear and are either able to fulfil their original intention or updated to ensure that new context is taken into account to maintain functionality. It is important that Victorians are able to be confident in the application of the law to themselves and that there are no unintended consequences as a result of minor errors or being out of date. These types of bills also streamline interactions between the Commonwealth, other states and our state of Victoria. The application of what appears to be similar language between different jurisdictions may actually be taken to mean different things.

In particular, this bill corrects minor ambiguities, omissions or errors in the following acts: the Aboriginal Heritage Act 2006, the Domestic Animals Act 1994, the Housing Act 1983, the Terrorism (Community Protection) Act 2003 and the Competition Policy Reform (Victoria) Act 1995. It renames the Trade Practices Act 1974 to the Competition and Consumer Act 2010. It amends the Sex Offenders Registration Act 2004 and provides a correction to schedule 2, where what it sought to do was likely ineffective due to the typographical error caused by section 34(1) of the Firearms and Other Acts Amendment Act 2010. It repeals an ineffective amendment made by section 8(2) of the Justice Legislation Amendment (Police and Other Matters) Act 2022.

You might be forgiven for assuming that this bill is not particularly exciting, but there are many examples of minor errors causing significant unintended consequences. This bill is for the boffins. This bill is for the pedants who say that details matter. This is a bill that will warm the hearts of every academic referencing department in every university in this state, where the placement of a comma profoundly affects the acceptability and credibility of a written document. It is with memories of churlish frustration I remember grappling with commas and full stops associated with such reference tools as 'ibid.', 'loc. cit.' and 'et al.' at 11:55 pm on the due date of an assignment. 'Ibid.' means a reference to the same source as already mentioned. 'Loc. cit.' means the same title and page number as already mentioned. 'Et al.' refers to a citation where there are multiple authors, meaning 'and others'.

This bill is for the fans of spellcheck and grammar check, of which I am one. I doubt that a grammar check program like Grammarly would have prevented the requirement for most of the minor changes addressed in this bill. Certainly many of the minor adjustments achieved through this bill are not at all exciting or dramatic. They facilitate the smooth operation of legal process in this state. If there was such a program to prevent such errors and omissions, some aspects of this bill may not have been necessary and therefore the need for this speech might have been avoided. This bill is for those who are passionate about avoiding unintended consequences. In this case, it is not the content of an act that produces an unexpected result but the very presence or absence or positioning of a modest grammatical tool like a comma. A humble comma, hyphen or full stop can change the effect or meaning of a sentence, which in turn could change the lives of citizens in this state.

I refer to an article in the *Business Insider* on 10 May 2019, describing how a number of seemingly minor errors caused massive consequences and even a catastrophic outcome. In 1962 a NASA rocket called *Mariner 1* launched on 22 July to undertake a fly-by of Venus. A misplaced hyphen is believed to have caused the rocket's trajectory to alter. The NASA safety officer responsible had intended to prevent the rocket from crashing back to Earth. Unfortunately 293 seconds into the launch it blew up. The article goes on to say that:

The coding blunder cost NASA \$80 million (in today's money, that's over \$673 million).

That was in 2019, when the article was written. NASA was never clear on the exact cause of the disaster – whether it was a misplaced decimal or a hyphen that caused the error. The article quotes Arthur C Clarke as calling it 'the most expensive hyphen in history'. So you can see that whilst this bill may seem quite innocuous and not entirely exciting, the importance of ensuring the smallest of details can sometimes have a profound consequence.

A further example cited in the article tells of a Google forward slash breaking the internet. On 31 January 2009 the internet was essentially not working for 55 minutes. Anyone trying to log on received an error message saying 'Warning! This site may harm your computer.' It turns out that someone had added a forward slash – that is this one – to a list of harmful sites. Every website includes a forward slash; therefore every website was considered harmful to computers.

The biggest error cited in this article was the loss of \$617 billion on the Tokyo stock exchange. In September 2014 a seemingly innocuous typographical error caused the loss of \$617 billion in stocks on the Tokyo stock exchange. The article states:

A trader accidentally pressed the wrong button, cancelling stock sales adding up to 67.78 trillion yen. Forty-two separate transactions were cancelled ...

According to the ... <u>London Evening Standard</u>, the mistake is "thought to be the most extreme example of a trader in financial markets inputting hopelessly wrong figures while working under intense pressure."

Not all errors produce a negative consequence. Whilst a typo caused an enormous loss on the Tokyo stock exchange, the article points out that Google makes money from users like you and me making simple typographical errors when we are searching. I am sure most of us have experienced being taken to a slightly different webpage unexpectedly, only to discover we typed one of the words incorrectly. Whilst this seems a small momentary mistake, the article goes on to explain that these webpages are referred to as typosquatting sites. According to a Harvard study, Google's annual income from these types of typos is \$497 million, because they are what I would call opportunistic advertising, and apparently they pay for top billing in Google's search results. Whilst this is bad news for consumers, typosquatting is good news for Google's bottom line.

So if we return to the Statute Law Amendment Bill in question here today, some of the corrections are innocuous, even mundane. For example, one amendment provides an update to reflect the updated name of the Department of Justice and Community Safety to allow the act to work as intended. This bill also amends the Justice Legislation Amendment (Police and Other Matters) Act 2022. The bill repeals section 8(2) of the justice legislation amendment act, which effectively amends the Sex Offenders Registration Act to include a new class 2 offence under the act. This repeal will occur ahead of the automatic repeal date in 2025 under the justice legislation amendment act. The new class 2 offence intended to be made by the justice legislation amendment act is now being included under this bill. The amendment to the Sex Offenders Registration Act is proposed to give effect to section 8(2) of the justice legislation amendment act and satisfy the position of the Ministerial Council for Police and Emergency Management and Council of Attorneys-General, which states that territories should expand their registration and supervision schemes to apply to Commonwealth child sex offenders as soon as practicable. This bill gives effect to Parliament's intention, expressed in section 8(2) of the justice legislation amendment act. These amendments are likely to increase, ensuring that sex offenders are registered in the way that they are intended to be across the country, and in doing so may provide clear information for citizens who need to make decisions based on that information.

This bill also makes minor changes to the Aboriginal Heritage Act. The bill amends section 65(2D) and (2E) of the Aboriginal Heritage Act so that it cross-references the correct provision. This is a positive change to the act and will result in efficiencies in the course of the development and the land use planning process. Section 65(2) relates to the time within which the secretary must decide whether or not to approve a cultural heritage management plan. Section 65(1) refers to the criteria for an application for a cultural heritage management plan and is not relevant to the time period referred to in section 65(2D) and (2E). The government is of the view that there will be no substantive effect on the act from the passage of the bill.

As recently as December last year the Minister for Treaty and First Peoples welcomed 18 new graduates who had completed their certificate IV in Aboriginal cultural heritage management, a course that is funded by the Andrews government and delivered in partnership with Victorian Aboriginal communities and La Trobe University. The Aboriginal Heritage Act empowers traditional owners as protectors of their cultural heritage and the world's oldest continuing culture. We know that traditional owner knowledge of our natural landscapes and biodiversity is strong and unique, and these courses will strengthen that knowledge base in our state.

So to sum up, the bill is an essential piece of good legislative housekeeping, where clarity, relevance and accuracy of statute law in Victoria are maintained. The updating of references and correction of errors makes sure that the Victorian statutes are up to date, consistent and clear and are either able to fulfil their original intention or updated to ensure new context is taken into account. This bill is an acknowledgement of all those practitioners, no matter their discipline, who love the details and are passionate about the things that seem insignificant to the rest of us but in actual fact are extremely important.

Tom McINTOSH (Eastern Victoria) (14:00): I rise to contribute to the debate on the Statute Law Amendment Bill 2022, which is before the Legislative Council. The bill is the result of the regular review of Victoria's statute books and makes minor amendments to acts to ensure everything is up to date, aligned and clear. It is unavoidable that through the thousands of lines of legislation considered in this place there are, very rarely, technical errors, ambiguities or omissions, and making these updates maintains the accuracy of our legislation and ensures that this information remains relevant and accessible for all Victorians. I want to thank the member for Western Victoria for her contribution and highlighting the absolute importance of correct grammar and the unexpected outcomes that can occur if amendments like the important amendments in this bill are not made.

This bill corrects minor ambiguities, omissions or errors in the Aboriginal Heritage Act 2006, the Domestic Animals Act 1994 and the Housing Act 1983 and updates a reference in the Terrorism (Community Protection) Act 2003. It also makes minor amendments to the Competition Policy Reform (Victoria) Act 1995 to reflect the renaming of the Commonwealth Trade Practices Act 1974. It amends the Sex Offenders Registration Act 2004 – the SOR act – to give effect to an amendment to schedule 2 of the SOR act that section 8(2) of the Justice Legislation Amendment (Police and Other Matters) Act 2022 sought to make but which was likely ineffective.

In my contribution I will not have time to talk to all of the above, but I would like to refer to some areas of interest to my constituents in Eastern Victoria and highlight the Labor government's work in some of the policy areas affected by these amendments.

Nicholas McGowan: On a point of order, President, as the member is slavishly reading from those notes, I ask that those notes be tabled.

The PRESIDENT: There is no point of order.

Tom McINTOSH: I will continue, following on from the member for Western Victoria. I have already highlighted the incredible work she did in highlighting the importance of the amendments that occur in this bill, because if we do not address the finer details that many people would not understand

are in these amendments, or not notice or not realise are in these amendments, then there could be consequences that we do not realise will occur.

Firstly, I want to talk to the Aboriginal Heritage Act. It is timely to discuss the protection and management of Aboriginal cultural heritage in Victoria. The Aboriginal Heritage Bill 2006 received royal assent on 9 May 2006 after being drafted and passed by the Bracks Labor government. Fundamentally, the bill sought to protect Aboriginal cultural heritage in Victoria. I would like to remind the house of the purpose of this important act – to provide for the protection of Aboriginal cultural heritage and Aboriginal intangible heritage in Victoria, to empower traditional owners as protectors of their cultural heritage on behalf of Aboriginal people and all other peoples and to strengthen the ongoing right to maintain the distinctive spiritual, cultural, material and economic relationship of traditional owners with the land –

Nicholas McGowan: On a point of order, President, there are long-held rulings from your chair in respect to slavishly reading from documents. If it is to be the practice of this place that members just rise and read word for word, then I would suggest that that is inconsistent with those orders, and I ask you to bring the member to order.

The PRESIDENT: Mr McGowan, it is a practice. It is not in the standing orders, but I have been pondering this practice. I have been here for many years, and I have seen people on either side of the chamber read a fair part of their speeches. So I will take into account your point of order. I have asked the clerks to consider all the practices that may have been practices 20 years ago and to consider if they have been practices in the last 10 years.

Tom McINTOSH: Thank you, President. I will return to discussing how the bill seeks to protect Aboriginal cultural heritage in Victoria and detail the purposes of the act, of which there are four. I will admit I do not know them word for word, but I will go through them individually again:

- (a) to provide for the protection of Aboriginal cultural heritage and Aboriginal intangible heritage in Victoria; and
- (b) to empower traditional owners as protectors of their cultural heritage on behalf of Aboriginal people and all other peoples; and
- (c) to strengthen the ongoing right to maintain the distinctive spiritual, cultural, material and economic relationship of traditional owners with the land and waters and other resources with which they have a connection under traditional laws and customs; and
- (d) to promote respect for Aboriginal cultural heritage, contributing to its protection as part of the common heritage of all peoples and to the sustainable development and management of land and of the environment.

These purposes are important statements about the value of Aboriginal knowledge and culture. The statement that struck me most was objective (b), to recognise Aboriginal people as the primary guardians, keepers and knowledge holders of Aboriginal cultural heritage. The act gives traditional owners a say on what happens in areas that are culturally significant. It lays out in Victorian legislation the right to have a say on matters that affect cultural heritage. These may include – I will lay these out; they are tabled in the act – ancestral remains, secret or sacred objects, and Aboriginal places and the activities that take place at these places. Aboriginal cultural heritage legislation sits alongside native title legislation, and both have a focus – and rightly so – on land and land management, so the right to have a say about what happens in significant places or places where there is native title is codified in law.

These are great achievements and steps towards reconciliation and a fairer and more just Australia, but there are other areas of government policy and activity that affect Aboriginal and Torres Strait Islander people where they do not have direct representation. Right now Victorians are considering how they respond to the proposed referendum on the Indigenous Voice to Parliament. This is an opportunity to unite and consider a change to our constitution that will promote respect for Indigenous Australians and their culture once again. Constitutional recognition of Indigenous Australians has been

considered directly by the Australian Parliament for more than 15 years. It has been advocated for by the community for much longer than that. Once again the advice back from Aboriginal and Torres Strait Islander people is that they want a say on what happens on policies and laws that affect them, just like this cultural heritage act.

Victoria has been the first jurisdiction in the nation to action voice, treaty and truth, the three elements of the 2017 *Uluru Statement from the Heart*. We have long been guided by the principle of self-determination in our work with First Peoples and will continue to work in partnership to deliver on these elements. We are proud of the progress that has been made under our government, including the historic establishment of the First Peoples' Assembly, the establishment of the Treaty Authority, the launch of the Yoorrook Justice Commission hearings and the launch of the stolen generations reparations package. Generations of First People across the country have advocated for voice, treaty and truth, and we deeply respect the historic consensus of the hundreds of First Nations leaders who wrote and endorsed the *Uluru Statement from the Heart*.

Victoria is already on a path to truth and treaty. In 2019 we established the First Peoples' Assembly of Victoria as the first democratically elected body of Aboriginal Victorians. The Assembly is the voice for treaty in Victoria. The prior establishment of a voice has been critical to our journey towards treaty and truth, and progress in Victoria could not have happened without the Assembly, its diverse and elected membership of Aboriginal Victorians and their steadfast commitment to representing their community to the Victorian government. Victoria's experience has shown just how much we all stand to gain from enacting voice, treaty and truth. A federal referendum on the nation's first Voice to Parliament is a simple but profound measure which will give First Nations people a say in the decisions that affect them. This year we all have the historic opportunity to vote yes to a better future together as Australians and begin our national journey towards voice, treaty and truth.

By way of example of the importance of cultural heritage and how much we all have to learn by listening to and learning through our First Nations communities, I consider the Budj Bim Cultural Landscape, part of the beautiful Western Victoria Region. The *State of Victoria's Aboriginal Cultural Heritage Report 2016–2021*, a report published by the Victorian Aboriginal Heritage Council – the body established by the Aboriginal Heritage Act 2006 – has this to say about the Budj Bim Cultural Landscape:

In 2019 Budj Bim Cultural Landscape was recognised as having "outstanding universal value" and was listed as a UNESCO World Heritage site. Budj Bim is the first landscape to be listed in Australia solely for Indigenous cultural values.

Budj Bim Cultural Landscape is Gunditjmara Country with an area of over 7,000km² in south-Western Victoria. Budj Bim features a 'highly productive aquaculture system [which] provided a millennia-long economic and social base for Gunditjmara society', and is recognised by UNESCO for its 'exceptional testimony to the cultural traditions, knowledge, practices and ingenuity of the Gunditjmara'. Some of the features of the World Heritage Site include all the aquacultures at Tae Rak (Lake Condah), Tyrendarra...

The continued connection, management and control over the landscape by Gunditimara people was a feature that amplified UNESCO World Heritage Site recognition, with UNESCO stating that the continued cultural connection to the landscape is an 'outstanding representative example of human interaction with the environment and testimony to the lives of Gunditimara'. Budj Bim Cultural Landscape is owned and managed with respect to Gunditimara customary and legal obligations by Gunditimara Traditional Owners, and was recognised on the National Heritage List in 2004. Budj Bim is also legally protected under the *Environment Protection and Biodiversity Conservation Act 1999* ...

This piece of Aboriginal cultural heritage is a state-, national- and world-renowned asset that we all have much to learn from. We know that with over tens of thousands of years of continuous care for country by Aboriginal Victorians there are more landscapes out there like Budj Bim, and I look forward to learning about the sites in Eastern Victoria that have been cared for and managed by the Bunurong and Gunaikurnai for so long. One site with significant cultural heritage in Eastern Victoria

is Knob Reserve, by the Avon River in Stratford. From the Gunaikurnai Land and Waters Aboriginal Corporation, GLAWAC, who I caught up with near Lakes Entrance last week:

The Knob Reserve ... demonstrates the living culture of Gunaikurnai in the present as well as the past: a traditional gathering place used by five clan groups for thousands of years; a place of clandestine resort in the 19th and 20th centuries to maintain connections with family, separated during the mission era; and the location of the ceremony to confer Victoria's first native title determination in 2010.

The Avon River:

... was a major travelling route between the high country and the Gippsland Lakes, as well as providing eel, bream, flathead and prawn.

The bluff above the -

river -

... was a significant campsite. Axe heads were sharpened on the sandstone grinding stones beneath the bluff. The resulting deep grooves are rare and significant in Victoria. Evidence of site scatters, scar trees and camps are also present within the reserve.

The site is now owned by the Gunaikurnai people and is one of 10 jointly managed parks and reserves in Gippsland. To continue the work of protecting Aboriginal cultural history the amendments in the bill provide necessary housekeeping to the act. The bill amends section 65(2D) and (2E) of the Aboriginal Heritage Act so that it cross-references the correct section. Section 65(2) relates to the time within which the secretary must decide whether or not to approve a cultural heritage management plan. Section 65(1) refers to the criteria for an application for a cultural heritage management plan and is not relevant to the time period referred to in section 65(2D) and (2E).

The bill is a result of the regular review of Victoria's statute books and makes minor amendments to acts to ensure everything is up to date, aligned and clear. Making these updates maintains the accuracy of our legislation and ensures that this information remains relevant and accessible for all Victorians. The bill makes minor corrections to the Aboriginal Heritage Act 2006, the Domestic Animals Act 1994 and the Housing Act 1983 and updates a reference in the Terrorism (Community Protection) Act 2003 to ensure the meanings of these acts are clear and accurate and reflect the intention of the Parliament. The government has a proud record in these areas and is continuing to build on this good work with voice, treaty and truth and record investments in social and affordable housing.

Nicholas McGOWAN (North-Eastern Metropolitan) (14:15): I was not going to speak on this bill today, but given the contributions thus far, I was compelled to do so. It would be remiss for Victorians in the future to look upon this bill and read in *Hansard* that this is, among other things, simply the product of typos – I have heard the word 'typos' many times today – mistakes, housekeeping, correction of errors and cross-referencing mistakes. This is 'Nothing to see here.' I think what we have seen here today in actual fact is a concerted effort, in a scripted way, speaker after speaker, to make amends – apologise, if you will – for what is sloppy lawmaking. That is what it is; that is what it should be called out for. I would welcome the fact that now at least Victorians can reflect on the fullness of *Hansard* and realise that this sort of lawmaking is not standard and should not be the kind of standard any Parliament should seek to accomplish in its time here.

I should put this in context. This is not to say that in any way, shape or form I do not welcome the changes, because of course that would lack common sense. It is important from time to time when any governments make errors that they make those corrections that are necessary. But this is a litany of errors – and what concerns me perhaps more is that the litany continues.

I look no further than just sometime ago in this place and at – it is now an act – the Racing Amendment (Unauthorised Access) Bill 2022. I give the chamber and the people of Victoria this example: new

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section 32C, 'Offence to throw or kick projectiles or cause object to be within restricted racing area'. That says, as an example:

A person must not, without reasonable excuse, throw or kick any stone, bottle or other projectile into or within a restricted racing area ...

and so forth. That is yet another example, because arguably – it is always arguable; we are in a world of lawyers and disputes and challenging these things – if I was to roll a grenade, then that would be perfectly fine. In fact that would not be covered by section 32C of the act. Isn't that absurd completely absurd? That is the very point I am making. Words have consequences, and no more so than when we legislate in this place.

I will give you another example. When you go to new section 32F(3) of that now act of Parliament, it talks about how:

A person who has left a restricted racing area or race-course after being directed to do so by an authorised officer under section 32E must not -

there are two, (a) and (b), and listen to the difference, if the chamber would:

enter or re-enter the restricted racing area or race-course for the duration of the race-meeting or official trial meeting; or -

and the words continue there ad infinitum almost:

attempt to enter or re-enter the restricted racing area or race-course for the duration of the race-meeting or official trial meeting.

In other words, it is superfluous. They could simply have added the words 'attempt, enter or re-enter' and so forth. So to this sort of utopian approach by the government that these amendments are nothing more than good housekeeping on their behalf and this is the routine work of government – no, it is not; I differ. These are late, in some instances tardy and in other instances appropriate - and I will concede that there are appropriate and welcome changes; that is not the point, as I have said before. But let every Victorian know, when they read *Hansard* and when they look at this bill, that it is actually the result of sloppy work and nothing more other than them trying to cover their tracks when they do it.

Motion agreed to.

Read second time.

Third reading

Lizzie BLANDTHORN (Western Metropolitan - Minister for Disability, Ageing and Carers, Minister for Child Protection and Family Services) (14:19): I move, by leave:

That the bill be now read a third time.

Motion agreed to.

Read third time.

The DEPUTY PRESIDENT: Pursuant to standing order 14.25, the bill will be transmitted to the Assembly with a message requesting their agreement.

Local Government (Moira Shire Council) Bill 2023

Introduction and first reading

The DEPUTY PRESIDENT (14:20): I have a message from the Assembly:

The Legislative Assembly presents for the agreement of the Legislative Council 'A Bill for an Act to dismiss the Moira Shire Council, to provide for a second general election for the Moira Shire Council, to make consequential amendments to the Local Government Act 2020 and for other purposes'.

Lizzie BLANDTHORN (Western Metropolitan – Minister for Disability, Ageing and Carers, Minister for Child Protection and Family Services) (14:21): I move:

That the bill be now read a first time.

Motion agreed to.

Read first time.

Lizzie BLANDTHORN: I move:

That the bill be treated as an urgent bill.

Motion agreed to.

Statement of compatibility

Lizzie BLANDTHORN (Western Metropolitan – Minister for Disability, Ageing and Carers, Minister for Child Protection and Family Services) (14:21): I lay on the table a statement of compatibility with the Charter of Human Rights and Responsibilities Act 2006:

Opening paragraphs

In accordance with section 28 of the *Charter of Human Rights and Responsibilities Act 2006*, (the Charter), I make this Statement of Compatibility with respect to the Local Government (Moira Shire Council) Bill 2023.

In my opinion, the Local Government (Moira Shire Council) Bill 2023 as introduced to the Legislative Council, is compatible with human rights as set out in the Charter. I base my opinion on the reasons outlined in this statement.

Overview

The proposed Local Government (Moira Shire Council) Bill 2023 (Bill) will dismiss the Moira Shire Council (council) and provide for the appointment of an Administrator or Panel of Administrators for the council.

This follows the report of the Commission of Inquiry into Moira Shire Council which was provide to me on 26 February 2023. The report describes significant governance failures by the council and its administration and finds that governance of council has deteriorated to the point where it can no longer effectively carry out its responsibilities in accordance with the Local Government Act 2020. The report recommended the dismissal of the council until October 2028.

As such, I seek the dismissal of elected councillors at the council for at least 5 years to ensure the restoration of good governance at the council in accordance with the Local Government Act 2020.

The proposed Bill dismisses the council until October 2028.

Human Rights Issues

Human rights protected by the Charter that are relevant to the Bill

Taking part in public life

Section 18 of the Charter establishes a right for an individual to, without discrimination, participate in the conduct of public affairs, to vote and be elected at State and municipal elections, and to have access to the Victorian public service and public office.

The right to participate in the conduct of public affairs broadly relates to the exercise of governmental power by all levels of government, including local government. The right to be elected ensures that eligible voters have a free choice of candidates in an election and, much like the right to vote, is not conferred on all Victorians, but is limited to eligible persons who meet certain criteria. The processes for the appointment, promotion, suspension and dismissal of candidates and councillors are objective, reasonable and non-discriminatory.

Clause 5 (in dismissing the Moira Shire Council) and amendments to the Local Government Act (providing the next general election for the Moira Shire Council will not occur until October 2028), clearly engages the right to take part in public life under section 18 of the Charter.

In this case, the purpose of the limitation is to enable the restoration of good government at the council. Given the significant issues with the Moira Shire Council and the work that is to occur so that it may operate adequately, the limitation is reasonable and justified in a free and democratic society under section 7(2) of the Charter Act.

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In April 2022, Ms Marg Allan was appointed as a municipal monitor to the council to review and oversee governance processes and practices on the basis of concerns that had been raised by the council Mayor, Chief Executive Officer and other parties.

On 7 October 2022, Ms Allan identified serious concerns that the leaders of Moira Shire Council were not performing in their roles as is expected or required of them. Further, that there were numerous governance issues and alarming reports in relation to staff safety. This report recommended further intervention was warranted to establish a culture of good governance.

As a result, a Commission of Inquiry comprised of Ms Frances O'Brien KC (Chair) and Mr John Tanner AM was appointed on 28 October 2022, to conduct an inquiry into the council and the Commission provided its final report on 26 February 2023.

In summary, the Commission's report finds that the governance of Moira Shire Council has deteriorated such that the council can no longer effectively carry out its responsibilities in accordance with the *Local Government Act 2020*.

The report describes significant governance failures by the council and its administration, including in relation to its management of the performance of its Chief Executive Officer, in ensuring the health and safety of its employees and in giving effect to the financial management principles and community engagement principles under the *Local Government Act 2020*.

The report further identifies instances of how the council's failures and neglect have adversely affected members of council staff and the Shire community. This includes the council's and the administration's actions in transferring asbestos contaminated waste to unlicensed waste stations constituted serious misconduct, putting staff and residents at potential risk of exposure to asbestos; and the delayed implementation of already approved flood mitigation measures, leaving the township of Numurkah and its residents at serious risk.

The report also describes how the council Chief Executive Officer failed in several of her duties including to comply with the council's Employee Code of Conduct and mandatory notification of suspected corrupt conduct to IBAC, and to exercise responsible oversight of human resource management practices in breach of the *Occupational Health and Safety Act 2004*.

The Commission recommended the council be dismissed until 2028. This can only be achieved through legislation.

The serious nature of the Commission's findings justifies the dismissal of the elected councillors. In addition, the Commission recommends an extended period of administration to October 2028 to ensure there is sufficient time to address the issues raised in its report and provide for the restoration of good governance at the council in accordance with the *Local Government Act 2020*. This action therefore ensures and recognises the right of electors to be represented with probity, integrity and accountability, and in the interests of the community.

Removal of an elected council is always a matter of last resort and undertaken only in the most serious of circumstances. While it is regrettable that this is necessary, the Government has a responsibility to protect communities from governance failings by their local representatives.

The Local Government Act 2020 provides a less restrictive and more immediate measure, namely suspension pursuant to section 230(1). However, section 230 is not appropriate in this case because it provides for suspension for a maximum period of 12 months, indicating the provision is intended for circumstances in which a short interruption to elected representation will be sufficient to overcome the failures identified.

However, as the Commission's report demonstrates, the circumstances require the removal of democratic representatives for at least five years.

Privacy and Reputation

Section 13 of the Charter provides that a person has the right not to have his or her privacy, unlawfully or arbitrarily interfered with, and not to have his or her reputation unlawfully attacked.

Clause 5 of the Bill provides for the dismissal of the elected councillors, and therefore purports to restrict the right under section 13 of the Charter.

Any interference with a person's privacy and reputation is lawful and not arbitrary in this case. The decision to remove the councillors from office follows the appointment of a municipal monitor to the Council and is pursuant to the recommendations of a Commission of Inquiry.

The serious nature of the issues identified at the Council by the Commission, as identified above, clearly warrant the immediate removal of the councillors.

The Hon. Lizzie Blandthorn MP Minister for Disability, Ageing and Carers Minister for Child Protection and Family Services

Second reading

Lizzie BLANDTHORN (Western Metropolitan – Minister for Disability, Ageing and Carers, Minister for Child Protection and Family Services) (14:21): I move:

That the bill be now read a second time.

Ordered that second-reading speech be incorporated into Hansard:

This Bill will dismiss the Moira Shire Council and provide for the appointment of an administrator or panel of administrators in response to the recommendations of the report from the independent commission of inquiry into Moira Shire Council.

A municipal monitor, Marg Allan, was appointed in April 2022 under section 179 of the *Local Government Act 2020* to monitor, advise and support the governance processes and practices of the council. This appointment was to assist the council in addressing a number of significant governance issues raised by the council Mayor and Chief Executive Officer and other parties.

On the 7 October 2022 the monitor provided her confidential report to me. The report found that the councillors of Moira Shire Council were "not performing in their roles as expected or required of them". Further, neither the Mayor nor the CEO were "performing their role as required or expected" and that "the Councillors are unable to properly manage the CEO".

The monitor further reported that Moira Shire Council had numerous governance issues, a poor organisation culture with alarming reports of staff safety and culture, and poor community engagement practices and financial management of capital works. The monitor concluded that any improvements were likely to be lost once the monitor's term expired. The monitor noted that she had referred a number of matters to the Local Government Inspectorate, however they would take time for their investigation to be complete.

Finally, the monitor concluded that "due to the significance and extent of the issues at Moira Shire", she had "formed the view that further intervention beyond the appointment of a monitor is warranted, to establish a culture of good governance".

The municipal monitor was initially appointed until 31 January 2023, however following such an alarming report I appointed a Commission of Inquiry under section 200 of the *Local Government Act 2020*. The Commission was established on 28 October 2022 to conduct an inquiry into the affairs of the Moira Shire Council, and the monitors appointment ceased.

The terms of reference saw the commissioners' focus on the advice provided by the municipal monitor and the Australian Services Union as well as on matters affecting Councillors' and the administrations performance of their roles. This was to include the efficiency and effectiveness of governance arrangements in delivering services to its constituents, including financial management and community engagement practices.

The commissioners were required to report back to me by 28 February 2023 and provided their final report to me on 26 February 2023. I have tabled the commissioners' report, which attaches as appendices the monitor's final report and the Australian Services Union's letter.

The commissioners' report finds that governance of council has deteriorated such that it can no longer effectively carry out its responsibilities in accordance with the *Local Government Act 2020*.

The report also finds that the Chief Executive Officer failed in her duties including to comply with the council's Employee Code of Conduct, and to exercise responsible oversight of human resource management practices in breach of the Occupational Health and Safety Act. The council in turn failed to manage the performance of the Chief Executive Officer.

The report further finds that the council and its administration failed to take necessary action to ensure the health and safety of employees; managed the transfer of asbestos contaminated waste in a manner that constituted serious misconduct and risked the health of staff and residents; delayed implementation of already approved flood mitigation measures, leaving the township of Numurkah and its residents at serious risk; failed to act in accordance with the financial management principles contained in the Local Government Act through

the mismanagement of two major capital projects; and failed to provide adequate community representation and to apply the community engagement principles of the Local Government Act 2020 on a Shire wide basis.

The issues identified in the report, which have not been resolved, raise serious concerns about the effectiveness of the council to govern the municipality. The commissioners concluded that the proper functioning of the council needs to be restored, and that there needs to be a break in democratically elected representation at the council for at least five years.

The Bill will dismiss the council and appoint administrators to perform the powers, functions and duties of the council until a new council is elected.

The Bill provides for the next general election for the Moira Shire Council to be held in October 2028, ensuring there is sufficient time to address the issues raised in the commissioners' report while balancing the strong community interest in having democratically elected representatives.

Dismissing a council by Parliament is the most extreme intervention by the state and is only undertaken in the most serious cases of governance failure. This government is taking the conduct of councils seriously by intervening early to prevent serious governance failures but acting decisively when councils fail their communities.

The issues identified in the commissioners' report including the council's abject failure to make decisions and take appropriate action that ensured the health and safety of employees and residents, failure to provide adequate community representation, and major procurement breaches and mismanagement of key capital works, demonstrate extremely serious governance failures warranting the dismissal of the council.

Without this Bill, there is a risk of further deterioration of the governance at the council and the probity, integrity and accountability expected of local government.

The community and Parliament expect the highest standards of governance, probity and representation from their councillors and council staff. This Bill will ensure good governance in Moira is restored to provide the community the leadership they deserve.

I commend the Bill to the house.

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The DEPUTY PRESIDENT: Members, an urgent bill motion has passed, pursuant to standing order 14.35. The purpose of this motion is that the next stage following the tabling of the statement of compatibility and the minister's second-reading speech take place forthwith rather than being adjourned to a future day. In other words, leave is no longer required for the second reading to take place forthwith. Therefore, when I call the next speaker, they cannot move to adjourn the debate but must instead make their second-reading contribution.

David DAVIS (Southern Metropolitan) (14:22): I will not say I am pleased to rise and speak about this bill. It is a very difficult bill because it removes a local council and removes democracy from a local community. I was briefed this morning about these matters, and I understand some of the issues that have arisen at Moira Shire Council. There has been a significant deterioration in governance at the council. The council has failed to properly manage its CEO. There is a long list of health and safety issues, and it has left Numurkah residents and the town at serious risk in the event of a major flooding incident by delaying the implementation of approved flood mitigation measures. There have been a number of capital projects that have been mismanaged, and it has failed to provide adequate community representation and meet its obligations under the Local Government Act 2020. There are specific points made about the CEO in the report from the commission of inquiry, as has been tabled in the chamber just today. I think the community will be very surprised and disappointed at what has occurred.

These issues where governance at a local level has failed are very difficult. None of us wants to see the removal of local democracy, and none of us wants to see a situation where a council is removed and administrations of various types put into place. In this case there was a meeting with the local government minister and Moira council mayor and CEO to discuss concerns on 11 March 2022. There was a letter from the Minister for Local Government to Moira shire requesting the provision of a plan by 30 June. That was sent in March 2022. There was the appointment of Marg Allan as a municipal monitor on 22 April 2022. There was a confidential report of the monitor provided to the minister on 7 October and the appointment of a commission of inquiry on 28 October, and obviously that report was provided to the minister on 26 February and brought to the chamber today. But also a bill has

been presented today to the lower house first and now to this chamber. I think there is a strong case, and I think that a number of areas of the council's responsibility have been maladministered. The commission-of-inquiry report reading makes a reasonable person very concerned about the future of administration of the council. There have been work health and safety issues, there have been failures of governance – it is a long and torrid list.

In conceding that and indicating that the Liberals and Nationals will support the bill, I do want to make some points. This is now becoming an increasing practice under this government. When I was first elected to Parliament it was a very rare thing to see councils removed – a very rare thing indeed. I think it is important to get onto the record this increasing intervention by government. I make the point that some of these interventions are justified, including this one, but there does seem, when you look at the list – the number of monitors appointed, the number of council dismissals under this government – to be a pattern that is building. You have got to ask why local government is having these challenges and why local government is being so routinely overridden by these interventions. I think this is an important list.

I am going to talk about the City of Greater Geelong here first. There were monitors Digby and Dorling appointed on 3 February 2023, but that was after an earlier ousting at Geelong city council, which had been dismissed on 14 April 2015 and had monitors Munro and Dorling appointed in 2017. That was a reappointment, so I regard that as two episodes of appointment. Horsham Rural City Council had a monitor, Jude Holt, appointed on 22 July 2022. Yarra council had two sets of appointments of Yehudi Blacher, who was appointed on 14 December 2021 and extended on 22 June 2022. Darebin, Moira and Wodonga councils had monitors appointed on 26 April 2022, with John Watson at Darebin, Marg Allan at Moira and at Wodonga Janet Dore. That is a series of appointments there. The City of Whittlesea had a monitor appointed, Yehudi Blacher, on 13 December 2019, and the council was dismissed on 19 March 2020. The City of Casey had a monitor, Laurinda Gardner, appointed on 27 November 2019, and the council was dismissed on 18 February 2020. Strathbogie shire had a monitor, Janet Dore, appointed on 9 September 2019. South Gippsland shire had a monitor appointed, Peter Stephenson, on 18 June 2018, and he was dismissed on 19 June 2019. Frankston City Council had a monitor, Prue Digby, appointed on 12 December 2017. Central Goldfields was dismissed on 23 August 2017. And as I said, Geelong council was dismissed on 15 April 2015 and then had a monitor appointed after it came back in 2017, who was reappointed later.

So that is five council dismissals in the last two terms of government and this small part of this term and at least 13 monitor-appointment cycles. These are quite unusual historically, as I say, these interventions. It has traditionally been a very rare thing for a council to be dismissed and a very rare thing for some sort of overarching appointment of this type. I am quite clear on the point that the removal of this council is justified and supported by the opposition, but we do note this increasing trend of monitor appointments and reappointments and this increasing trend of sacking councils. If I was the Municipal Association of Victoria (MAV), I would be asking questions about this.

There is a whole set of different questions here; some of it is the model. There is no ward structure in this particular council's case, which is a part of the problem. The weighting of councillors has been uneven across the municipality, and I think that that does create certain problems. An undivided ward situation in this case is at least a partial contributor to the issue. So there are structural issues that may be at play, but also what is it about this government that seems to have allowed so much trouble to occur at local government level? What is it about this government that has seen these repeated sackings of local councils?

I do want to say that I am a supporter of local government. Both the Liberals and the National Party are supporters of local government, and we see the importance of local government. When I was health minister I had a very good relationship with the MAV and councils, because we delivered a lot of important services through councils. That ability to deliver services at a local level with local engagement in the community is a strength of the Victorian system. Whether it be food health and safety and food matters or whether it be vaccine programs or whatever, councils are close to the people

and are in a position often to deliver services and programs more effectively than a central agency run from Melbourne. But I have to say that trend appears to be in some trouble with this government and this overriding need, it seems, to intervene in local government through the appointment of monitors and the sacking of local councils.

I pay tribute to the commissioners and the work that they have done. I was appreciative of the opportunity to be briefed, but nonetheless I have to say they certainly persuaded me about the issues at Moira and the course that has been embarked upon by the government here. So with those caveats, the opposition will support this bill, but we do sound a longer term warning about what we see as effectively an attack on local government through the appointment of numerous monitors and repeated sackings.

Sarah MANSFIELD (Western Victoria) (14:33): I too find it incredibly disappointing to be in this position, considering the dismissal of a council. The findings in this report are disturbing. I was also afforded the opportunity to have a briefing this morning – and I am grateful for that briefing – to be brought up to speed with the commission-of-inquiry report. Good governance is essential for the proper functioning of councils so they can serve their communities. Council staff deserve a safe workplace, and the community deserve to have trust in those who are representing them. While it is very unfortunate that the Moira Shire Council has reached this stage, we understand, based on this report, that the minister feels they have few options at this stage but to dismiss the whole council. We also understand that the systemic nature of the governance failures and the cultural problems in the council mean that dismissing individual councillors was not deemed an appropriate response. These are not decisions that should be undertaken lightly. Dismissing a democratically elected government is a very serious step.

Notwithstanding the seriousness of the concerns in this case, we do sympathise with the comments made by Mr Davis just now about the increasing pattern of intervention in local government, which one could say is potentially having an undermining effect on the sector. We have seen several such dismissals in recent years, and the decisions have typically been brought to the Parliament in similar circumstances: there is an urgent need to suddenly dismiss a council with very little time for MPs to be adequately briefed or explore alternative options. Given we are being asked to make such important decisions in these circumstances, we would request that in the future other MPs in the Parliament are provided with adequate information in a timely manner. While the minister only received the report last week, many of the findings within that report will not have come as a surprise. There has been a monitor in place for quite some time who would have been providing the minister with regular updates. There was a commission of inquiry launched in October, and again there would have been serious concerns that led to that inquiry being commissioned. Keeping us informed when serious concerns are developing about a council would allow us to have greater input to the process and at least make more informed decisions if we are again presented with a request to dismiss a council.

I also note that the government want to appoint administrators for a period of five years. That is a very long time to be without a democratically elected council. While again in this case we recognise that there are deep issues identified in the report and they will take some time to rectify, there must be a strong focus on returning democracy as soon as possible in these situations.

Motion agreed to.

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Read second time.

Third reading

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Lizzie BLANDTHORN (Western Metropolitan – Minister for Disability, Ageing and Carers, Minister for Child Protection and Family Services) (14:36): I move, by leave:

That the bill be now read a third time.

Motion agreed to.

Read third time.

The DEPUTY PRESIDENT: Pursuant to standing order 14.28, the bill will be returned to the Assembly with a message informing them that the Council have agreed to the bill without amendment.

Health Legislation Amendment (Information Sharing) Bill 2023

Second reading

Debate resumed on motion of Ingrid Stitt:

That the bill be now read a second time.

Georgie CROZIER (Southern Metropolitan) (14:37): I rise to speak to the Health Legislation Amendment (Information Sharing) Bill 2023. I feel like this is deja vu or groundhog day, because in October 2021 we had a very, very similar bill introduced to this Parliament around information sharing. At the time we had just come out of COVID, there were significant concerns and there were a lot of people who were also very concerned about the nature of that bill. As members who were in the previous Parliament will recall, that bill was fully debated – the second-reading debates were concluded in May of 2022 – and then it just sat there and did nothing. It just sat there. The government made the bill sit on the notice paper, and we did not debate it again. The absolute rubbish that we got around this being an urgent bill – it was rushed into the Legislative Assembly and was brought in within a week, there was no consultation – shows the sham process that the government went about with the first iteration of this bill and how badly managed that was.

Now, at the time there were a lot of people that had contacted me – a lot of people within the health industry and a lot of people outside the health industry – who were concerned about the privacy and human rights issues. I want to address those with this latest iteration of that same bill, but I want to make the point that at the time the government said, 'This is urgent, this is urgent, you need to pass it,' and I was told by health professionals that it was up to me to pass this bill. I made the point at the time, and I make the point again to those listening today, that my concerns about the government's bill have not changed; they are exactly the same. In fact in this bill I think it has gone a little bit further, and I want to explore that through the second-reading debate that we are having now and also in the committee stage.

So what I said back whenever it was that we debated it the first time around was that I absolutely understand the intent of this bill. The government was arguing that it came out of the Targeting Zero task force, which wanted to support the Victorian hospital system to eliminate avoidable harm and strengthen quality of care, including recommendation 4.13.2 that:

The department should adopt a goal of ensuring that, by 2021, all major hospitals have a fully electronic health record that enables interchange of information with other hospitals.

That recommendation is quite significant because it talks about 'all major hospitals'. Whilst this bill takes this into consideration – and they have laid out the scheduling and what health services it includes, and it includes both major and minor hospitals – it does have some issues that I will come back to in relation to the definitions around other health entities that I want to explore in more depth.

As I said, I fully understand the purpose of this and why so many health professionals are so concerned about what they are seeing in the emergency departments and what is happening on the ground. As we know over the last three years, with extended lockdowns, code browns and the lack of people being

able to have procedures like cancer screenings, we have got a lot more people whose health conditions have worsened. That is a concern to me, and it will continue to be a concern, because I am still hearing the same stories as I was hearing six months ago, 12 months ago, 18 months ago. People cannot get in to see their doctors. They cannot get in to see a specialist. They are on a hidden waitlist, and when they get on that waitlist it is years sometimes before they can even be seen and treated. Of course we have got the issue of record numbers of people coming into emergency departments, and because there are no staff and hospital beds are closed we cannot get the throughput of patients through an emergency department into the hospital system. Then of course you have got that flowing back into the ambulance response and the ambulance system – and whilst I am on it, those issues have not gone away either.

So while the government might say they have invested billions, the outcomes for Victorians remain extremely concerning to me: too many Victorians are not getting the health care that they deserve and need. I say that they are standards that are falling in this state and they are standards that should never have got to this point. I say again: with Victoria having the harshest of restrictions over the last three years and with the government control that went on for those three years we have the worst outcomes of anywhere in the country.

It is another reason why people have got concerns about this particular piece of legislation, which will allow for the sharing of information – your private health information – with health services across the state without your consent, without your ability to say, 'No, I don't want that shared'. There is no optout provision like there is with My Health Record. Look at that. When that was coming into force it took years to get it in place and there was significant debate around it. In fact it was the federal Greens and their leader Adam Bandt who argued for an opt-out system. They were talking with the then opposition, the Labor Party, about an opt-out provision because it was the right thing to do, it was a human right and it gave patients autonomy over their patient information.

Matthew Bach: I opted out.

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Georgie CROZIER: Dr Bach opted out, and there are many people in this chamber who have told me they are not a part of that, so I will be interested to hear their contributions and their reasoning for either supporting this bill or otherwise.

I understand, as I said, the intent of what the government is trying to do here: to have information on a patient – whether it is medication, diagnoses, their admissions, their disabilities or any aspect that is related to their health and wellbeing that they might have on their patient record – shared in the interests of having some continuity of care. However, I say again that there are instances where people do not want their sensitive patient information shared through health services. And look at our health services. As this government continues to amalgamate health services, more people working in one will be affiliated with a health service that could have access.

Whilst I am on the issue of the concerns that have been raised, I will just refer to the Medibank cyber attack of last November, in which 9.7 million Australians had their data hacked or their data accessed up in the cloud. That was extremely concerning for so many people because they had not only their service provider names and the codes that are associated with a diagnosis or a health-related issue that they might have had associated when they come into a hospital but their diagnoses, their procedures, their names, their email addresses, their home addresses, their dates of birth, their Medicare numbers, policy numbers, phone numbers and health claim data loaded up into the web and the dark web – and then of course we know the disgraceful ransom threats that were applied. That was extremely concerning, and I know there are people, again, affected by that attack. Is it any wonder people are very nervous about their private health information? It is information like cancer diagnoses, history of STDs, terminations and mental health issues. You could have been subjected to domestic violence, and you would not want that information shared, particularly if you had a partner or ex-partner working in the same health service.

For this government to say point-blank we are having this system come into play without taking into consideration some of the sensitive natures around why people would want to have an ability to opt out just defies all logic in my mind, particularly when we have got, at national level and elsewhere, an opt-out system. The government will argue, 'Well, it works in other jurisdictions,' but if you look at some other jurisdictions, they do have an opt-out system as well.

I say again: the cyber attacks in this state have been very significant. Austin Health had a very severe cyber attack not so long ago that brought the whole hospital to a standstill. There were surgeons that could not access the patients' data, and they did not know who had hacked into it; that was a terrible attack. We had another shocking cyber attack in the south-west region that affected so many hospitals down there. These attacks in Victoria have been very significant, and as we know, there are more sophisticated ways to access this information. Some experts are saying that health-related data is the number one thing that these cyber criminals are after. So is it any wonder that people are nervous about cybersecurity?

This government has got a very poor track record, let us make no bones about that. We know that the department gets attacked hundreds of times a day or a week or whatever the latest data shows. But they get attacked very, very frequently — we know that; all government departments are. But I say again, because of those breaches that have occurred, there are concerns around this government's ability to manage IT projects and security — and let us not forget HealthSMART back under the former Brumby government.

I want to move on to some very pertinent points that have been raised by the Law Institute of Victoria (LIV), which has been very vocal on this point, talking about patient autonomy and the right for people to have an ability to say where their information, their sensitive patient information, is shared. Why is that an unreasonable thing to ask? It should be absolutely paramount. They have quite rightly expressed serious concerns regarding aspects of the bill because it proposes a new system of sharing health information without the knowledge or consent of the patients involved. It abandons patient autonomy.

My main concern is there is no opt-out provision. They also say, in the recommendation that I referred to at the start of my contribution, that the Targeting Zero task force did make the recommendation, but it did not recommend automatically sharing every patient's information with every other health service and it did not recommend sharing patient information with the Department of Health. So that aspect alone, where the government justifies that it is part of that task force and we need to have it done, is actually not quite accurate. You are not getting the full picture about what that Targeting Zero task force recommended. They certainly did not recommend broad sharing of information without consent.

Again, they also, in their documentation that they have provided to me, crossbenchers and other members, do understand the potential for safety benefits for patients. We all understand that. That is not what I am arguing here. I understand that, I understand the intent. But there is the concern about how it could be unsafe – and I want to stress that: it could be unsafe – for some patients who do not want their sensitive information shared. That includes patients that might not therefore tell the medical professional that they are seeing the full story about their history if they know it is going to be shared all over the place. Or how do they get a second opinion with confidence? What does that mean if they are not sufficiently satisfied with one opinion from one medical specialist and want to go and get a second opinion? That information is all shared, so it breaks down the trust in the system. It actually breaks down that trust. Again I say patient autonomy and the ability for a patient to be able to have a say in where their information is to be shared is incredibly important.

The LIV also raises concerns about sufficient safeguards. The government says there are sufficient safeguards here, and I note that the Minister for Health, when she was speaking, said, 'Well, there are safeguards, there are penalties,' and she also said the new system is protected by strict security and privacy controls. As I said, I am not convinced that this government has got that down pat, knowing what we do know from recent months. And of course we had the contact tracing debacle back in 2020.

That information was shared without Victorians' knowledge. That was sensitive information as well. So there is a track record of this government already doing this without people knowing where their information has gone, and I do not think that sets a very good precedent in the free and democratic community and society that we live in.

We want to be able to help people, we want to have the best systems in place, but we also should be respecting the rights of individuals and those individual rights that are slowly being eroded by this government because they are taking more and more control of what we have and what we see to be our own personal information. I do not want that. I do not want government in my life to the extent that we have just lived through over the last three years. The controls of this Andrews government have been off the scale, and we never got to the bottom of a lot of those issues around some of those decisions that they made, so I have no faith in this government securing our information in the Department of Health without people accessing it. For people not to be able to then go and check to see, 'Well, actually, I can't even FOI. I can't even find out who might have accessed my private health information in the Department of Health,' shows another level of control by this government.

Frankly I am sick to death of that control, and that is why I think it is incredibly important that we have the ability to opt out – that every Victorian has the right to choose. That is a fundamental right that we should be absolutely proud to have. We all should be acknowledging that. We should all be proud to have that right. Yet this government comes over the top and says, 'No, you don't have that right.' Well, that is what I am, frankly, fed up with, because I think too many Victorians have suffered at the hands of government control. I think we are slowly eroding those rights, and I do not think that that is at all helpful.

I want to just also state that some community health services have written to me and said they actually have got concerns. They have said they are concerned about information being shared across all manner of services that are identified under the act and by the department secretary without the consent of the client patient – it is not an opt-in system. While this is efficient, I am not sure many of the clients of a community health service would want to have information shared with other services even if it is for the purpose of providing better health care. We have seen this with My Health Record at a Commonwealth level. There is concern out there in some community health services, who have expressed that. Again I would like to also read from the Victorian Alcohol and Drug Association press release from just a few days ago about what concerns they have about this piece of legislation. They say:

This Bill will further exacerbate stigma as information relating to substance use (such as overdose or support through opioid substitution therapy) will be visible to a range of health professionals without patient consent.

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 \dots We know with the Medibank hack, some of the first efforts at extortion were directed towards those who had sought assistance for alcohol and other drug and mental health concerns \dots

They have raised issues around where this information is going to be shared and the lack of trust and the stigma that could apply to their clients.

The joint media release today from the Law Institute of Victoria, Liberty Victoria and Digital Rights Watch reiterates the calls to respect patient autonomy, just what I have been speaking about. LIV president Tania Wolff says:

All Victorians should be concerned about the failure to include an opt-out provision in the Bill. This signals a departure from a human-rights and patient-orientated framework which is well established in other Victorian legislation.

I could not agree with her more. They go on to say that they feel that this bill does not strike the appropriate balance between clinical efficiency and safeguarding patients' rights. Again, I could not agree with them more.

I have got concerns with this bill, as I have just outlined: those issues around there being no opt-out provision, those issues about there not being the ability for a Victorian patient to FOI the Department of Health and access who has actually been looking at their patient information. This bill does not allow that to occur. I have also got concerns about the definitions in clause 4, subsection (k):

a prescribed entity or a prescribed class of entity that provides health services ...

The other definitions actually talk about scheduling – a denominational hospital listed in schedule 2, a metropolitan hospital listed in schedule 3, a multipurpose service, a public health service listed in schedule 5 et cetera – and outline a whole lot of health services which this bill captures. They are public health services. But what does that definition in subsection (k) – 'a prescribed entity or a prescribed class of entity that provides health services' – mean? Does that mean every private health system in Victoria? Does it include private GP practices? And if it does, who is going to be paying for this technology and this information? That is why I have got three amendments that I am happy to circulate now, if I may.

Amendments circulated pursuant to standing orders.

Georgie CROZIER: I would just like to speak to these while they are being circulated. Obviously they relate to the issues that I have just highlighted, but with the definition in relation to that prescribed entity – I will be interested in the government's response, and I will be asking this in committee – what does 'a prescribed entity or a prescribed class of entity that provides health services' mean? If it is confirmed by the minister that that does take in private health services, then the first amendment I will move is to exclude that clause, because I do not believe that they have been consulted with at all on this legislation. I will be asking more questions in relation to that.

The second amendment relates to the opt-out provision. Again, you have just heard me speak about why I am very strong on this. This is about patient rights; it is about patient autonomy. It is incredibly important that patients have the right to understand where their sensitive patient information is being shared and why they cannot have an opt-out clause, which is in line with My Health Record, which is operating at the Commonwealth level.

The third amendment I have relates to the issue around the FOI aspect, where there is no ability for a Victorian to actually ask the health department, 'Who has accessed my private health information that you are storing?' I think that, again, is another absolute right that any Victorian should have when you are dealing with very sensitive information, whether it is physical or mental health implications, whether it is drug abuse, whether it is the termination of pregnancy, whether it is cancer diagnoses or whether it is a history of STDs or blood-borne viruses – something that people just do not want others to know about other than their treating doctors. I have heard the minister on radio. She could not really answer why there was no opt-out provision. She just answered it by saying it will save lives. Well, I am concerned that with many people concerned about their information being hacked, being exposed, as we have seen, and having it spread throughout health services that are getting larger as the amalgamations take place people will not be up-front and will not be giving their true medical history.

As somebody who has worked in this area, I understand when they say, 'You can go along to a paper file and check out somebody's information.' That is absolutely true, but that is confined to a ward, to a hospital or to a medical records department. It is not spread throughout systems and then stored in the Department of Health – and that is the difference. I say again that I remain extremely concerned about the lack of ability of patients to have control over their sensitive health information. It is their right to understand where that information has been shared, where it has gone and who has accessed it. It is their right because it is their information.

As I have said, this government wants to take more and more control. We have had a taste of it over the last three years. It is incredible that they are just unwilling to budge on this. As I said, the task force might have recommended information sharing, but it did not recommend that every patient's information would be automatically shared with every other health service, and it did not recommend sharing patient information with the Department of Health.

With those words I urge the crossbench to consider what they are about to vote on. This is an incredibly important piece of legislation that we are debating. I understand the intent; I understand what the government wants to do. But I also understand the increasing groundswell of Victorians who want a right over their information. They want to have a say about what is shared and what is not, and they have every right, in my view, to have an opt-out provision. I am looking forward to the rest of this debate, and I would urge the crossbench to support the amendments that I have put forward that provide for an opt-out provision and that not every single health service in Victoria will be captured because of the unintended consequences that could then apply. Also, there is the third amendment around the ability to FOI the Department of Health to understand exactly who may have accessed your private health information.

Michael GALEA (South-Eastern Metropolitan) (15:06): I also rise to speak on the Health Legislation Amendment (Information Sharing) Bill 2023. In doing so I would like to begin by commending our health workers across this state, who work extremely hard day in, day out providing exceptional care to all of us when we need it the most. Of course that ranges from high-ranking professionals – surgeons and doctors – right through to administrative staff in the healthcare system, paramedics, nurses, ward attendants: the whole lot. This is a bill that will help them as they do their jobs.

The bill will aim to improve the Victorian healthcare system by enhancing information sharing between healthcare providers, and it will lead to better decision-making and also better treatment outcomes. This is something that is critical in today's healthcare landscape, which has become increasingly complex and fragmented. The reforms will move our healthcare system into a place that can deliver better outcomes and better, more responsive decision-making by healthcare providers. We have moved beyond the days of an individual's medical history being stored in physical folders spread across various GPs, hospitals and other treating providers. The platform that this bill establishes will establish a safer and more secure method of information sharing. The current methods used by some clinicians are not actually comparable in terms of either efficiency or, quite importantly, security. I think it is important to note that a number of medical services and healthcare providers already do operate their own systems and they may not have the same robust level of security as this bill proposes for this new system. So, addressing Ms Crozier's concerns, there are already some concerns which this bill will actually directly address.

There are a number of ways that records are currently kept and dealt with. In fact in a lot of cases there are still faxes being used to distribute medical records, which is something that is quite surprising to hear. Many of us thought that perhaps the days of faxing were gone. I remember that when I started my professional career back in 2011 the organisation I worked for had a fax machine. I think it might still do so; it might be in the archives now. It maybe got one fax a year, but that was still a thing back then. But we are now in 2023, and I think it is fair to say that we have moved beyond the need for fax machines. In fact when I was volunteering at the Puffing Billy Railway as a 15-year-old I had to fax the daily departures from Gembrook station back to Belgrave to tell them how many people had gone on the train that day. It took about 20 minutes, to be honest. It is much easier to send a text or use a secure platform to do that, which I am sure is what they do now. It is ridiculous that we still have information being shared over fax machines in this day and age, and this is one platform that will help us to address that significantly. It will help the storage but also the communication of information for our healthcare systems, which is something that should inspire a bit more confidence than a humble fax.

By establishing this robust framework for information sharing, it will address the fragmentation of the healthcare system. It will empower patients by requiring health service providers to seek consent before sharing their information. The bill also ensures that patients will receive optimal care and ultimately achieve the best possible health outcomes. Information sharing between health services will

occur through a secure platform operated and managed by the Department of Health. The department will be the body authorised to store and share health information between public health services electronically. Health services will not be allowed to store and share information of their own accord; they will have to use this platform, again which will improve security. Establishing a health information platform where information can be stored, managed and shared in a manner that is responsible, discreet and secure is at the centre of what this bill seeks to achieve.

The bill recognises the significance of information sharing in providing topnotch healthcare services and provides safeguards to protect personal information consistent with privacy principles. There are provisions for the information to be shared without consent only if it is necessary to provide healthcare services or if there is a serious threat to that particular patient's health or safety. This will ensure that patient privacy is protected while still allowing for vital information to be shared when it is absolutely necessary to do so. It is also important to note that this bill does recognise the importance of obtaining patient consent before sharing their information and includes provisions for sharing information without consent only in those situations where it is strictly necessary to provide healthcare services or if there is a serious threat to the patient's health or safety. The bill will not allow for unauthorised sharing of patient information.

Discussion of this bill has brought up the potential for there being an opt-out system, with the Commonwealth's My Health Record and its opt-out mechanism being floated as an example. I will touch on this briefly and note that under existing law public hospitals actually already can share health information — as many in this room who have medical backgrounds would be aware — required in connection with the treatment of a patient. Hospitals can access this information without the requirement to get permission. In this instance the bill will adopt a similar approach to how the law currently functions, allowing for the sharing of health information for the continued care and treatment of patients. What this secure health information system will do is improve the way in which information is accessed as well as the security around the sharing and storing of that information.

So there are some particularly demonstrable benefits that this legislation will bring. The Health Legislation Amendment (Information Sharing) Bill 2023 will build upon the information-sharing systems already implemented, as has already been noted, in various other states. Health information sharing will bring Victoria into line with other similar jurisdictions which have already integrated their electronic health information sharing between public hospitals and other medical providers at the point of care, such as HealtheNet in New South Wales, the Viewer in Queensland – which is perhaps a bit of an odd name for it, but they can do them – and the Digital Health Record in the Australian Capital Territory. These systems have demonstrated the benefits of a centralised system for sharing patient information between healthcare providers. With their implementation we have seen these systems assist in improving patient outcomes and ensuring that healthcare providers have access to the information that they need to make timely and informed decisions.

Information sharing is of course not a new concept. Both Liberal and Labor governments have implemented similar systems in the past, as I referred to, such as those in those other states and the territory that have implemented those other equivalent pieces of software. The Health Legislation Amendment (Information Sharing) Bill 2023 builds on this bipartisan legacy by creating a framework for information that is flexible and also scalable. The approach will ensure that the healthcare system can continue to meet the needs of patients whilst also allowing for future advancements in its technology. Given the existing success of information-sharing systems, the Health Legislation Amendment (Information Sharing) Bill should be a bipartisan effort. The bill's provisions prioritise patient privacy whilst still enabling healthcare providers to access the information that they need to provide effective care. This balance is crucial to ensure that patient care remains a top priority of the healthcare system regardless of political affiliation.

All that hopefully sounds all very well and good, but I think it is also important to reflect on some of the real-world examples of what this actually means. We can talk about information sharing and amendments and everything else for days, it is all very important to do so, but let us have a look for a moment at what this bill will actually mean.

Tuesday 7 March 2023

In looking at this debate, I had the opportunity to read up on the member for Monbulk's contribution on this bill in the other chamber a few weeks ago. I strongly recommend other members read it too. It was a very, very moving contribution. She spoke very well about her family experiences with the healthcare system. She has had a number of interactions with them, for her mother and also for her son. She told the house that she had to take her mother to an appointment just last month – quite a serious medical appointment. Unfortunately she had had a rather bad fall and was on a number of medications at the time. The member for Monbulk had to then bring out every single one – I think there were about a dozen, so 12 medications – to the treating practitioners to explain one by one what medications her mother was taking at the time. She showed them the empty bottles – if she had not had the empty bottles, she probably would not have been able to actually do it – and the pharmacist on duty duly noted down by hand each and every one of them. Obviously the absolutely inefficient use of time, let alone the risk for error in that process, does not lead to the best and fastest possible patient outcomes. That is a very, very good real-world example of the sort of thing that this bill seeks to achieve.

The member for Monbulk further contributed that her son had to be taken from his school by ambulance to hospital due to a cardiac-related issue. The attendants and the medical practitioners believed that he had been suffering from drug-related symptoms given the extreme nature of those symptoms. Now, he was not, and the member for Monbulk certainly explained that, but in the time it took her to actually speak to the medical practitioners decisions could have been made – fortunately they were not – which could have adversely affected her son, that patient. That just goes, again, I think, to show the real importance of this bill and what it actually seeks to achieve for patients right across this state.

An independent oversight committee supported by a clinical advisory group will be established as part of this bill, before the commencement of the legislation in February 2024, to ensure privacy and security. This committee will also provide advice to the Secretary of the Department of Health on the implementation and successful operation of the information system. The bill will address cybersecurity concerns, and it protects patient privacy by implementing strong access controls and encryption to secure sensitive information. The measures established by the government will mitigate cybersecurity risks by implementing strong access controls and using encryption to protect sensitive information. A primary management framework, or PMF, will be implemented to limit access to and ensure the management of sensitive health information. Restrictions on sensitive information ensure additional protections for vulnerable groups, including victims of domestic violence. The PMF will ensure that only designated healthcare staff who need to see the information for decision-making purposes will have access to it. This bill also establishes a framework for information sharing that is consistent with those privacy principles. It ensures that healthcare providers can access the information they need to make informed decisions. The framework is flexible and scalable to allow for future advancements in technology, as I said, as well.

There must be high standards and strict controls to protect information and to minimise the risk of loss, misuse and, of course, unauthorised access to health information. The Department of Health will establish a health information sharing management committee, which will oversee the implementation of advanced cybersecurity tools and services as well as ensure that the implementation of the necessary systems to safeguard health information are in place. This committee will function as an arms-length body of the department and provide strategic direction and assurance. It will consist of various experts from different fields, including health, privacy and legal professional backgrounds. The committee will be responsible for monitoring the use of the system, ensuring that patient privacy is protected and also making recommendations for improvements. Moreover, it will ensure that the system is being used appropriately and that personal information is being protected. It will promote transparency and accountability and ensure that health service providers are accountable for any breaches of patient

privacy. The committee will also provide guidance to health service providers on how to use the system safely and effectively.

By establishing strong governance arrangements and an oversight body the Andrews government is demonstrating its commitment to ensuring that patient privacy is protected in this bill and that the healthcare system is being used appropriately. The bill includes provisions to address cybersecurity concerns. Misusing the system can trigger an investigation, disciplinary action and criminal penalties. The three new criminal offences are introduced in this bill to prohibit unauthorised access to the system, unauthorised disclosure or unauthorised use of information.

These can carry considerable penalties, which are very important to have in place. This includes 240 penalty units, which is currently approximately \$44,380 or two years of imprisonment, for any unauthorised access of the information. In addition, treating clinicians will have an obligation to ensure that health information they access is kept safe. This work will be done in conjunction with a duty to comply with their existing professional and legal obligations. Cases of there being a failure to comply with both their professional and legal obligations may trigger investigation or of course other disciplinary action.

In closing, the Health Legislation Amendment (Information Sharing) Bill 2023 is a continuation of the Andrews Labor government's commitment to enhancing the health outcomes and general wellbeing of all Victorians. I believe that the mechanisms and safeguard measures established in this bill demonstrate an appropriate and strong level of protection to ensure that health information stored by the department is securely stored and managed and that it will be shared appropriately. The bill does not compromise people's personal information but ensures a high level of security to maintain their privacy and confidentiality. By enhancing this information sharing, though, the Health Legislation Amendment (Information Sharing) Bill 2023 will improve the healthcare system of Victoria, guaranteeing patients receive the best possible care and the best health outcomes. I commend the bill to the house.

David ETTERSHANK (Western Metropolitan) (15:21): I rise to speak to the Health Legislation Amendment (Information Sharing) Bill 2023. There is no doubt that in an emergency room context having a patient's medical history at hand can be life saving. It can also be time saving and cost saving: life saving in terms of immediacy of treatment and time and cost saving in terms of diagnostics, quicker treatment and reduced wait times. There can be no doubt that our health system is currently at a point of crisis, a crisis that has the potential to become worse if, or rather when, a more virulent strain of COVID presents itself. There is no doubt that in Victoria in 2023 there has to be a better alternative to doctors and nurses faxing each other, because that is how information is being exchanged across our public health system this very minute. We support the intent of this bill in that regard, but it is a bill with criticisms from a range of prominent stakeholders, on which we are well briefed. Patient autonomy and privacy are very legitimate concerns already canvassed in this chamber and privately. These are issues of great concern too to medical cannabis patients, who remain stigmatised both inside and outside of the health system.

This bill as originally presented could not have had our support. A range of concerns will hopefully be ameliorated in part by government house amendments. Further concerns may be addressed via undertakings given on the floor of this chamber by the minister representing. Some may be remedied via amendment. We currently await a response from the government to a number of matters raised, and we will be paying close attention to the remainder of the debate.

David DAVIS (Southern Metropolitan) (15:23): I want to make a contribution to this bill, the Health Legislation Amendment (Information Sharing) Bill 2023, which sets up a large data system for our state health system in Victoria. As Mr Ettershank has just said, there are good reasons for data sharing but there are also significant risks. We are very concerned about the way this will operate, and I think it is worth putting those concerns on the record. The objectives of better data sharing, of better

information to support clinicians and of cost saving potentially – where information is available and tests and otherwise do not need to be duplicated – are perfectly understood.

Equally, there are significant concerns with this bill. This bill sets up a centralised repository for information. It sets up a repository where hacking can occur, and we have seen repeatedly over recent times some of the concerns that have arisen where significant hacking of central repositories of information occurred. The Optus example I think resonates in everyone's mind, where telephone, text and other data was significantly mined and put out onto the web at huge cost to individual people. The Medibank Private example is also recent and I think bears heavily on how people view this. I am told that more than 9 million records in terms of the Medibank Private hack were got by the hackers and released in regular tranches of information. And it is the most sensitive information that is always the target of these hackers. Whether it is illegal drugs or whether it is pregnancy terminations, whether it is cancer or STDs or other diagnoses, information and test results being put out after a hack, it is a great concern to most Victorians.

We have heard the government and government speakers blithely say, 'Oh, there are checks, there are balances, there are protections.' So we heard with Optus, so we heard with Medibank Private. I for one am completely and utterly unconvinced, and I say this as a former health minister, having dealt with the data issues in the department. I inherited a set of circumstances where the HealthSMART system - administered initially from about 2003 on but in the more recent years, before I came in as health minister, by Daniel Andrews as health minister – was an absolute debacle, an absolute dog. It was hundreds and hundreds of millions of dollars over budget and a data system that did huge damage to a number of health services, most famously up at the Eye and Ear, where clinical errors increased as HealthSMART was put in place. It was a very, very bad system. One of the things that the government sought to do with that was to force records together. Interoperability is actually the key, and an ability to have dispersed records that can be accessed in a comprehensive and thoughtful way with appropriate protections is a much better way to go than the central repository, the central storage. The government's concerns and problems with health data management before the 2010 election when Daniel Andrews was health minister I think are indicative. We saw data mismanagement, we saw data manipulation, we saw cheating. We saw a whole series of serious and problematic interventions, all administered and overseen by Daniel Andrews as health minister. So I for one have little faith in him or anything of this type that comes from a government that is administered and oversighted by him.

I also want to say that the need for greater protections has never been greater. The difficulty with these large centralised repositories is becoming greater, not lesser, and we actually need to make sure before we proceed with these matters that there is a solid and reasonable set of protections in place.

Again, I think the national system is quite different but also controversial. There is an opt-out arrangement with the national system. I for one, again, with the national system am far from convinced that it is actually as secure as it should be, and I will just indicate to the chamber quite clearly now that I have opted out and made sure my whole family has opted out of that system because I do not trust it and I do not think –

Nicholas McGowan interjected.

David DAVIS: No. But let me be clear here: I am less trusting of this system at a state level, run by Daniel Andrews and his government. This is simply a terrible grab for power and a terrible grab for centralisation.

I think at a minimum you need an opt-out arrangement. We need that ability for people to opt out of the system and to clearly state that they do not want to be part of that system. And why is the government trying to suppress FOI oversight, FOI access to the central repository and who has accessed people's personal records? Why can't people see their own records as they are held in the central repository and held by the Department of Health? Why is that? What is the problem with people exercising an FOI access to the details of their own personal health records and the holdings that the

government has on their own personal records? I cannot understand why the government has those concerns.

Ms Crozier has indicated that the opposition will seek to introduce those important amendments. An opt-out provision and also a guarantee of that FOI on the centrally held information and who has accessed that centrally held information will be opposition amendments. I welcome those amendments, and I urge the house to support them.

I should say that this is a bill that SARC – the Scrutiny of Acts and Regulations Committee – ought to have played a bigger role in. I understand the difficulty that SARC has faced, as it has been recently set up. I am clearly a member of SARC, but my long-term criticisms of SARC remain. Mr Limbrick, you will understand my long-term criticisms of SARC. It is a committee that has got a very important oversight of the rights and privileges of Victorians, and this is the sort of bill on which SARC should become very active. In my view - and this is a general comment - it should not just be having submissions from one or two or three bodies; it should be hearing from a wide audience about these matters, including technical matters, in my humble view. It is not enough for a committee like SARC – and this is a general comment I am making about these sorts of bills - to sit back and make the sort of standard sets of analyses. I am not diminishing the importance of those, but SARC needs to become more engaged, in my humble view, in the work of actually scrutinising these bills at a deeper level. This is such a bill. I admit it is very early in the Parliament. The committee has just been established, and the government has come in headlong with this bill. But in fact a similar bill was in the last Parliament, and in the last Parliament SARC could also have played a very significant role. It could have held hearings; it could have sought to find out the best methods of protecting the personal information of people. That is not what it has done with this report; it is not what it did with the previous report. I make the point that SARC has a very important role, and that role should not be shortcircuited. It should not be a cursory role. It should not be a role that is limited to the desk analysis that is routinely what SARC reports are and what they produce. It needs to be deeper, it needs to have community input and we need to make sure that rights and liberties are actually protected. That is the role of the committee, at the end of the day.

As with the earlier report, I am far from convinced that the report comes to grips with the depth and the problems with this bill. I really firmly believe that the issues in this bill are profound. The government has brought this bill to the chamber, and I know many of the health practitioners that support the bill do so in sincere belief. I understand precisely the advantages of bringing together health information in a constructive way and enabling clinicians to see more-complete sets of information. I fully appreciate that point. But clinicians also need to understand that a critical matter for people is to have confidence in the system, and I, for one, do not have confidence in this government's ability to put in place such a health data management system. I far from have confidence in that ability. We have seen a number of our health services hacked already. You only need to think what is going to happen with the central repository of information, a centrally managed arrangement in the Department of Health – 50 Lonsdale Street or one of the outlying areas – and think of the risks that are involved here.

The depth of the data should not be underestimated. It is Ambulance Victoria data; it is community health data; it is the public health service data from all around the state, and with some of the definitions that are put there it is pretty clear that the government intends to rope in the private sector as well, so private hospitals will be an early target for this information. What the government will do with GPs, what the government will do with other health practitioners, is also an open question. Will the government seek to use the powers in this, which are clearly more than adequate to do whatever the government wants? They are able to rope in any registered health practitioner and perhaps some that are not registered too to the data control that is involved with this. Will they do that? I do not know, but I would posit at this point that the major private hospitals are an early target for the government with respect to —

Nicholas McGowan: And pathology.

David DAVIS: Pathology as well, and some of that would of course be captured in information in our public health services. But yes, I can see pathology and radiology services dragged into this as well. If people think it is a good idea to have a central repository that is not protected in an adequate way and people think that it is a good idea to have people's mental health information, their test results, a whole range of other critical pieces of health information hacked and from a central location, this bill will set the way forward for that to occur.

Let us not make any mistakes here. If anyone thinks that a Department of Health repository managed and controlled by the Department of Health is safe from hacking, good luck to you, because I predict that if this is set up, it will be hacked. Data will be released. People will be compromised. Their personal information will be released, just as we saw with Medibank Private, just as we saw with Optus and just as we have seen with individual health services – there have been significant hacking attempts at those. So these things will occur. It is not a question of if, it is a question – after the central repository is set up – of when that hacking will occur and when it will successfully break into the system.

I think this is a very significant bill people have not understood, and people need to think very, very carefully about this. I know the government is putting enormous pressure on the crossbench to buckle, to bend, to bow down in front of the government on this and to tick the way forward for this bill. I understand that that is what is occurring, but I urge the crossbench to think very carefully about this and to think about actually standing up for the long-term rights of Victorians. At a minimum, support the opposition's key amendments about FOI and an opt-out provision. At least with an opt-out provision people have the ability and right to say, 'No, I don't want to be part of this system, this Orwellian system.' This is like Hal, the central computer – (*Time expired*)

Jacinta ERMACORA (Western Victoria) (15:39): The passing of the Health Legislation Amendment (Information Sharing) Bill 2023 is a serious commitment by the Labor government to the highest possible communications across our health sector. Public hospitals and specified health services will be able to share patient health information electronically for the purpose of providing medical treatment to patients. This bill is about patient care. It obviously has the potential to save lives and improve health outcomes, and it will also help streamline our medical system and stop diverting essential resources to the publication of tests, diagnoses and treatment information.

The health information will be shared through a secure system operated and managed by the Department of Health. A secure patient health information sharing system will provide a far safer way to exchange information than we currently have. As my colleagues have mentioned, faxes and phone calls are still used today, and the lack of a coherent and consistent paper trail can lead to mistakes and lost information. Indeed having information available in one place is essential to providing the best care and treatment for patients across Victoria. This bill will establish the legislation needed to create the right authorising environment to collect patient health information as well as put appropriate controls around how and why that information is accessed, used and disclosed. Advanced cybersecurity tools and services are applied by the department to all health operational and personal data, meeting the security levels set by the Victorian and Australian governments. This bill creates strict rules around restricting access in the system for the purposes of medical treatment, information security and data management only. This will provide frequent auditing, security identity and access management capability to regulate who has access to patient information and data. This security demonstrates the serious commitment the Andrews Labor government has to the highest possible cybersecurity to safeguard our communications.

A privacy management framework will restrict access to designated health service staff – those who need the data to make the best clinical decisions possible with all relevant information at their fingertips. Very importantly – and I understand why there is some concern about this – this framework will provide additional protections for groups in circumstances like family violence, child protection and health justice. It is recognised that vulnerable and high-risk groups may have heightened expectations and needs around processes in place to safeguard their privacy and to minimise the risk

of the wrong eyes seeing their health information. Only authorised clinicians working in public hospitals will have access to the secure health information sharing system, and it is worth noting that there are already strict controls in place at the hospital level.

Confidentiality is not a new concept for the health sector. The security framework is seriously backed by the introduction of this bill. There are three new criminal offences completely prohibiting unauthorised access to the system. Breaching the system for unauthorised use or disclosing information will be criminal offences that will attract a fine of 240 penalty points, translating to over \$44,000 or upwards of two years imprisonment.

The Department of Health will also establish a health information sharing management committee to provide independent advice to the secretary on the department's governance, risk, control and compliance frameworks. This committee will be supported by clinical and consumer advisers. Detailed policy and procedural guidelines will support the operation of the bill. Let us be mindful that data breaches can happen the old-fashioned way, as we have already heard in this chamber today. Medical information stored at a doctor's office is vulnerable to a physical break-in through a window or through a door, and as we know, faxes and phone calls are hardly above the risk of abuse or negligence.

It is also important to note that significant consultation took place for this bill during 2020–21, and the new system is expected to start operation by February 2024. There has been and continues to be an extraordinary level of attention to detail and consultation throughout this process. The department has conducted engagement with peak bodies and the hospital and clinician communities, and the lead time of this bill ensures consumers, patients and health services will be well aware of the new information-sharing provisions ahead of implementation.

This access to all health records will help alleviate pressure and streamline processes for our health sector. We all agree that, particularly since COVID, our health professionals have been under huge pressure with staff shortages, and we must recognise that our systems need to adapt and become more efficient. It is not uncommon for old ways of doing things to become superseded by better ways of providing health care, and I think we have all experienced over the last couple of years the transition from meetings only being available in person to now being hybrid meetings or meetings completely online. Prior to COVID we probably would not have considered that to be acceptable – it was something we were not used to – but also it was something that perhaps was not technologically available to everybody, nor was it inclusive of everybody. Since COVID everybody has become able to access – or most people have – that mechanism for meeting. It is a really good example of how changing the way we do things can be change for the better.

Many people now have multiple points of contact for their health: changing GPs, accessing specialists and moving from city to country. Information sharing will significantly reduce red tape and embarrassment for patients, who will no longer need to tell their medical history over and over again. This will also impact on reducing administration costs. For a period of time I worked at a primary care partnership, and my role was to work with health service consumers and patients and to listen to them and understand what their needs were in relation to information and information sharing. The feedback that was provided to me and the primary care partnership in Warrnambool was that patients were sick of telling the same story over and over to every practitioner that they went to see. They wanted all of their practitioners, everybody providing health services to them, to be working together in what in the health services sector is called an integrated health service. It seems to me that this model is going to meet that consumer request, that patient request.

This bill delivers on key government commitments outlined in the 2016 *Targeting Zero* report. As we all experienced, COVID also reinforced the need for less barriers with information sharing. In recent years natural disasters, such as floods and bushfires, have shown the importance of information sharing when facilities are damaged. These factors have led to a dramatic increase in the use of telehealth, showing us that up-to-date electronic health information is vital as systems change to meet new

challenges and as systems change to meet the demands of patients. The take-up of telehealth under COVID was, I think, unexpected. It was seen as very popular, particularly in regional communities. It allowed them to access their doctors without risking their own health further.

The opt-out principle undermines the primary objective of the bill, which is to ensure clinicians can have access to all relevant medical information to provide timely care. Right now under the existing law public hospitals can share health information required for the further treatment of a patient. I personally find it irritating when I go to a specialist and they do not have my medical records with them; that is really frustrating.

The bill adopts a similar approach, with the changes allowing for a single point of complete and accurate patient information for the following entities: public hospitals, multipurpose services, denominational hospitals, metropolitan hospitals, prescribed health services, registered community health services, the ambulance service, the Victorian Institute of Forensic Mental Health and the Victorian Collaborative Centre for Mental Health and Wellbeing. The secure sharing of information amongst these entities will naturally lead to increased efficiency and faster time lines in understanding a patient's medical history. Clearly, by aligning these entities under the bill and including all Victorians, our health system will be far more robust. If the opt-out model was to be adopted, patients might be required to redo tests, which we know can be distressing for the patient and creates unnecessary cost and delays.

The bill lapsed due to COVID, and it is now logical to pass this bill into law, particularly as COVID has shown us firsthand how better integrating our health services will improve health outcomes. The introduction of the secure system will bring Victoria in line with New South Wales and Queensland. New South Wales introduced the HealtheNet platform in 2015 and Queensland introduced the Viewer in 2017. The ACT and South Australia have also implemented integrated digital health record systems across their hospitals. Consultation has been ongoing with our state counterparts, and many learnings have been observed from the operation of their systems and their current procurement of any upgraded platforms – and the market is continuing to develop for these products.

There is different legislation and there are different purchasing agreements in different states, and Victoria's secure system will be tailored to operate within the Victorian health IT systems. However, this bill will align us far more closely with our state counterparts and in the future will facilitate a larger conversation about our health system federally. Border health services such as Albury Wodonga Health will use and have access to the Victorian security health information sharing system. Victoria, New South Wales and South Australia do adhere to the same health national information standards, and it will place all states in a strong position to support care on all sides of the borders.

As the Minister for Health Mary-Anne Thomas has stated, secure health information sharing will deliver Victorians the same benefits that patients around the country are already getting, ensuring they receive the best possible care. I support this bill.

Renee HEATH (Eastern Victoria) (15:54): Acting President McArthur, may I extend my sincere congratulations on your appointment to this role.

I rise to make a contribution on this bill. I agree with this bill in its intent. The integration of health records under a centralised electronic patient health information sharing system – it is a mouthful – is an essential step towards Victorians experiencing the best health outcomes. A more efficient and effective health system is something I support. However, the lack of an opt-out system represents a major breach of the right to privacy and could risk the safety of our community's most vulnerable.

It is deeply concerning for many Victorians, including victims of domestic abuse, violence and stalking to name a few. A mandated data system could risk victims and their children being exposed to their abusers if they were to gain access to this information. Implementing an opt-out system upholds the principle of patient autonomy by giving patients the choice to decide who can access their health information and how it can be used. The right to privacy is paramount. The erosion of this right

risks Victorians disengaging from our healthcare system in fear of their safety or in fear of how their information could be used, and this could result in Victorians avoiding critical medical services which they really need.

The neglect of our right to privacy is significantly troubling given recent events in the health industry. While those opposite will cite the perceived improvements to data protection in this bill, we cannot ignore the increasingly dangerous environment that electronic databases are facing. In recent months Australians have been aware of major threats that the IT industry faces when it comes to databases, notably through the hacking of Medibank and Optus. In fact the UK's National Health Service was last year involved in a major ransomware attack. This concerning pattern of attacks has unfortunately been the topic of many conversations with my constituents. The Law Institute of Victoria, which is the peak body for the legal industry in this state, has expressed grave concerns regarding the Andrews Labor government's refusal to include an opt-out system. I refer to the LIV's media release from 15 February this year. It says this:

Patients must have the right to say who can access their health information – even if this means their health information will not be shared under the scheme. Patient autonomy is a fundamental human right: it's the same principle that allows a patient to refuse medical treatment.

Just hours ago the LIV, in partnership with Liberty Victoria and Digital Rights Watch, reiterated its call for a patient autonomy to be respected and described this bill as a departure from a human rights and patient-oriented framework which is well established in other Victorian legislation.

I am also worried about the government's exemption from freedom-of-information requests in this bill. This provision prevents patients from requesting information on who has accessed their health data and why. The Law Institute of Victoria president Tania Wolff said the following:

Such a provision leaves patients in the dark on how their health information has been accessed and by whom.

My constituents are calling for an opt-out system, the Law Institute of Victoria is calling for an opt-out system and therefore I am calling for an opt-out system. While I agree with the intent of this bill to improve the health outcomes for Victorians, I will not stand by while the principle of autonomy is yet again trashed and neglected by this government.

John BERGER (Southern Metropolitan) (15:59): I rise today to contribute to the productive debate on the Health Legislation Amendment (Information Sharing) Bill 2023. I want to explain the bill in detail and comment on the significance of the amendments and ultimately demonstrate the benefits that it will provide to the community of Southern Metro and ultimately indeed to all Victorians. Put simply, the bill will make provisions on health services more efficient, and consequently the quality of medical treatment will be improved. What is this all about? Essentially, the bill will amend the Health Services Act 1988 to allow a centralised electronic health information sharing system. Health providers will share information with the purpose of it being used to treat their patients.

In practice health information will be collected and disclosed to the Secretary of the Department of Health, the head of the administration, to establish the electronic health information system to help hospitals and other health services such as Ambulance Victoria, denominational hospitals, multipurpose services, public health services, registered community health services, the Victorian Institute of Forensic Mental Health, residential care services and the Collaborative Centre for Mental Health and Wellbeing to share the information efficiently and securely. From a practice standpoint, the amendments will come to be in effect on 7 February 2024 unless the department and the heads need more time to design and construct the system. The amendments will allow for the secretary to establish and maintain a system with the purpose of sharing this information with the other health services providing medical treatment under section 134ZF.

The bill will also allow for specific information to be collected and given to the secretary under section 134ZG. The secretary will have the power to specify in a notice that patient health information being shared may include medicines prescribed to the patient and other relevant information such as

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allergies, alerts, admissions, discharge summaries, outpatient consultations and laboratory and imaging results. The bill will allow the secretary to ask for information up to 7 February 2021 – and uniformly the information on that system. A retrospective date is needed for a context of a patient's medical history to allow for a proper holistic view of the patient.

Importantly, division 3, section 134ZO allows for the effective maintenance and operation of the system and includes securely hosting the system with unique identification numbers. Why? Because it provides better security and data management, guaranteeing the system operates safely, securely, effectively and with the correct information.

I would also like to outline the provisions of the legislation that are designed to keep personal information safe. Division 4 lists the offences that protect the information that is being collected and stored by the secretary. It will be an offence to access private information unless authorised to do so. Penalties will include two years imprisonment, which demonstrates the sensitivity of the matter.

There is a new section, namely 134ZS. This stipulates that the system will hold specific information at one point in time. The initial health service providing that medical treatment will have no more information on that patient. As a result, the Freedom of Information Act 1982 does not apply to the healthcare database. There is a lot to consider on this front. I am not a lawyer, but I have had 40 years of working experience and I have got a bit of common sense from it.

This government is not in the business of engaging with political arguments for the sake of it, but some have used straw man arguments to create division over this piece of legislation. I want to call it out, not by name, not by finger-pointing, but by specific incidents. I do not want to engage in gutter politics. The Premier has pointed out there are no opt-out provisions in similar legislation in New South Wales, the jurisdiction in Australia most like Victoria. Health practitioners already share information and have full visibility of your pharmaceutical history – they can see holistically your treatment journey.

It has been pointed out that this legislation will strengthen data integrity, not diminish it, and it has been pointed out, this important note, that in the 21st century, particularly after the year of hacks we saw in 2022, Victorians must be sure that their private data will be protected. This legislation will strengthen cybersecurity. So let us be clear, this is about ensuring Victorians get the best health care possible. The Premier has noted that health care is not negotiable and that this system will only work if there is no opt-out measure. And I agree – it is not up for debate.

In Victoria hospitals already use internal digital databases where healthcare records are stored and can be viewed by different healthcare practitioners. The reality is that the staff that do the wrong thing, if they use the information improperly, will face fines of up to \$10,000 or face the sack or jail. This sort of information being shared is already out there, but under these proposed changes people face jail time for up to two years and we are beefing up the punishment for people doing the wrong thing. It is big, important stuff and is seriously strengthening what is already out there. Make no mistake about it: the Premier has made it clear that clinicians already share information electronically. These measures will strengthen the data integrity and safety.

The Premier has been up-front publicly around what this is all about. There is much to talk about in the media, who are whipping this up into a frenzy. I saw on Channel 10 last week talk of human rights breaches and using victims of stalking to create false equivalency. It is disingenuous and wrong by all those that are involved. Make no mistake: this information sharing already occurs. Now hospitals share medical records over the phone or ad hoc. This is not sustainable, and it is reckless. Imagine at 3 am in a crisis trying to find medical records. I think this needs to change, and we have made it quite clear that we want it to change.

In the other place Minister Thomas made it clear in her statement of compatibility speech that she was satisfied those interferences with individuals' privacy that may occur under these provisions will be predictable and proportionate to the objects of the system and will therefore not be arbitrary. But I want to emphasise the next point the minister made, which is that the amendments will not require the

collection of new information from individuals but rather facilitate the transfer of copies of existing information already collected and held by public hospitals and health services to a central platform. Let me stress that point: no new information; it is merely to facilitate the existing information.

I want to talk for a few seconds, if I can, about some of my own personal experiences. I was with a family member not more than two or three weeks ago, and I did not know the historical background of that person I took in. I was lucky that the records on this patient were held in the hospital, because that patient had an allergy to a particular medication. You can imagine what could have gone wrong. In the heat of the moment things can fall through the cracks. How hard would it have been had I been in another hospital; things would have been a lot different. I have had countless operations — numerous arthroscopies, numerous knee reconstructions and recently two knee replacements. I would be mortified if I went into a hospital unconscious and was not able to be treated because they did not have my health record. If I was involved in a motor vehicle accident and had the same issue with my legs whilst unconscious, I would not be able to identify what had been done to me. I was in a motor vehicle accident a few years back. Luckily it was not too serious. The same could have been the case. I want to know that I will receive the best care in hospital no matter what part of the country I am in.

What if I came across someone at a local sporting event who had had a concussion and they had a history of concussion? I know from experience, from seeing firsthand the dangers of concussion, how successive concussions increase the risk factor for serious long-term medical issues and increase in the short term the chance of serious brain bleeds. I have been the president of local footy clubs, and I have seen from time to time, when parents drop off their kids and they are not around to see the game in its entirety, that sometimes we have had to call an ambulance. That ambulance has arrived, and we have been unable to find out what the medical history was. So if there is no family around, what if nobody knows what the underlying conditions could be if they are treated and they are hurt and if anybody can help? What if someone collapses on the field? The list goes on.

I respect the work that civil libertarians do to protect the freedom and liberty of Victorians and people around the country. I hear concerns on this, but I do not agree. The argument is that hackers might access personal details that can be used to victimise and stalk people, but I have already outlined how hospitals already keep records. GPs keep these records, pharmacies keep these records, the local pathology clinic keep these records. Wouldn't it be better to have a centralised, secure, locked-down system rather than smaller ones where the public who use the system have no idea –

Members interjecting.

The ACTING PRESIDENT (Sonja Terpstra): Order!

John BERGER: If there is a breach, they have no recourse. Now they are streamlining the process.

I do not want to get sidetracked about the reality of what is going on. I saw in the *Guardian* the other week a great point from Victoria's peak medical body, the Victorian AMA, who said that the benefits outweigh the risks 99 to one. The Victorian AMA president Roderick McRae made it clear that the system aligns with the existing schemes in New South Wales and Queensland. Mr McRae said:

If someone is in ... intensive care ... you may have no idea what ... medication they're on.

This sort of stuff is life and death, and we have got to change the system.

I feel quite bad for victims of stalking who have had their stories exploited in the media like this. Make no mistake, the data breaches are serious, but the reality is that current systems do nothing to stop the data breaches. This will create a uniform system and beef up those protections and will make those data breaches less likely, because if we have a few ad hoc systems and random systems that local GPs operate and who knows what, how do we know that they are secure? They often have lower budgets and are less secure, less transparent. This will increase the integrity of those security systems. It pains me to see victims' lived experiences exploited in this way. Make no mistake: this is game-changing legislation.

Western Health CEO Mr Russell Harrison has stated that the new system will be a game changer for clinicians. I want to quote a statement he made to the ABC during an interview prior to the last sitting week. He said:

We share information between health services all the time ... generally it is on the phone ... it is by fax ... So this just makes it much more efficient, much more secure and much safer ...

much more efficient, much safer and more secure. How is a fax machine more secure than an online system? Come on. Paper is sent through fax machines and blurted out the other end and anyone can pick it up, and the reality is that there is no evidence of who picked up that paperwork. Some random people can access that information, view it and put it back, all without anybody knowing. Having a centralised database will provide clear evidence of who accesses this information and severe punishments for those who use it the wrong way. It does not diminish privacy, it strengthens it. It does not diminish safety, it strengthens it.

Only treating clinicians directly involved in healthcare patients can access medical information. But let me take pause. It pains me that this debate has become about privacy. It pains me that we must humour these arguments, because it is about patient health care, simple –

Members interjecting.

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The ACTING PRESIDENT (Sonja Terpstra): Order! Those on my left!

John BERGER: You always want privacy in terms of your financial arrangements. I know myself that I do not want my financial arrangements being made public. But the reality is that there are measures in place to hold individuals accountable and to ensure that nobody is playing with the system. That is why our tax records, public filings, financial records and much more can be shared with complete strangers during an audit or other business of this kind – because the benefits outweigh the detriments. On a privacy level there is no difference. Let us not forget this is about health care, not about privacy. This is about ensuring that if you rock up to a hospital and you have a heart attack, the clinicians can treat you properly.

In conclusion, I would like to reference Minister Thomas's remarks to Raf Epstein on the ABC. As the minister explained, doctors share information with other doctors about the patients they are treating all the time. The information has been shared, but until now it has been through a medium of paper or phone calls — outdated 20th century means of communicating sensitive healthcare records. The legislation today, as the minister said, is about allowing information to be shared on a digital platform.

This bill is about ensuring that clinicians have the resources to make decisions quickly. This bill is about saving lives. You cannot opt out of a doctor having a conversation with another doctor when you are in an emergency room. You cannot tell someone how to treat you when you are unconscious. The legislation is about ensuring Victorians always get world-class health care, that Victoria is in line with New South Wales. I thank the house for giving me the opportunity to speak today, and I commend the legislation to the floor.

Gaelle BROAD (Northern Victoria) (16:13): I am standing today to speak on the Health Legislation Amendment (Information Sharing) Bill 2023. Constituents across Northern Victoria have written to me about this bill, and I will speak to their concerns. But first let us consider the purpose of this bill and what is actually proposed.

The bill establishes a centralised electronic patient health information sharing service for participating health services to share certain health information. It makes it mandatory for specified health services to adopt this new system. It will apply to services including ambulance services, hospitals, metropolitan hospitals, multipurpose services, public health services and public hospitals, registered community health centres, the Victorian Institute of Forensic Mental Health, public aged care facilities and the Victorian Collaborative Centre for Mental Health and Wellbeing. It permits the Secretary of the Department of Health and their delegates to create and maintain an electronic health information

sharing platform. The secretary would have powers to specify the information required and contained in the system and be able to direct health services to provide this information without requiring the consent of patients to whom the information relates. It enables specified health services to access information about patients and their previous treatments including medications, allergies, alerts, admissions, discharge summaries, outpatient consultations, laboratory and image results and any other information as determined by the Secretary of the Department of Health. The overall purpose of this bill is to allow for better information sharing between public health services in order to improve patient safety and patient outcomes to ensure that clinicians at specified health services have access to complete and accurate health information on a patient.

As a parent of a child with allergies, I can understand the benefit of information sharing between health services to transfer information from one service to another to ensure efficient treatment — so that details such as about previous treatment, health conditions, medication and allergies can be easily transferred. But I am also aware that many stakeholders have indicated broad support for a system that provides a secure information-sharing platform for public health services. Given that the health system is under immense strain and experiencing workforce shortages, it is worth looking at ways to share this information and save time. But while the intent of the bill is to improve patient safety and give better outcomes, there are clearly some gaping holes that need to be amended before the bill goes any further. The major concern regarding this legislation is the fact that there is no provision for individuals to opt out of the system.

When the federal government introduced a health information sharing scheme known as My Health Record it allowed people to opt out, and 10 per cent of Victorians chose to do so. Ten per cent is a large number of people choosing to opt out. A similar system that operates in Queensland also has an opt-out provision. The automatic sharing of information without consent undermines the privacy and right for individuals to choose – an issue that can be resolved by amending this bill. People may choose to opt out for a range of reasons, and we need to maintain people's trust in our health system. If people are concerned about who is accessing their data or that it may be used against them, they are less likely to come forward and seek help. People who have experienced mental health issues or victims of family violence may feel trapped and vulnerable to information being used against them, and they are less likely to reach out for support.

We cannot afford to put barriers in the way of people accessing health care and mental health services. First and foremost, any legislation put forward in this house should consider the impact on people. From the representations made to my office I am already aware that there are many people who do not wish for their personal details to be shared. One of the constituent letters I received was from a social worker who wrote these words:

I am very concerned about the possibility of the Legislative Council passing legislation to allow centralisation of all Victorians' personal medical records and access by thousands of health workers.

In view of recent major breaches of data security we can no longer assume the privacy of government information systems.

The key safeguard which must be available for citizens themselves is provision for them to "opt out" of this data collection. The importance of this right certainly outweighs the need for the health system to gain in efficiency.

I can assure those with a similar view that the Nationals share your concerns. Implementing an optout system upholds the principle of patient autonomy and would give patients the choice to decide who can access their health information and how it can be used. The Law Institute of Victoria is also calling on the government to allow patients to opt out.

Another major concern with the bill is that the scheme is exempt from freedom-of-information requests to the Department of Health. Patients will be unable to find out who has accessed their health records under the system and for what purpose. The Law Institute of Victoria expressed serious

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concerns that the bill does not include sufficient safeguards to protect patients' rights and expressly exempts the system from freedom-of-information requests.

The Liberals and Nationals are seeking to amend the bill so that Victorians can opt out of the system and individuals can lodge an FOI request regarding the sharing of their personal health information. We want appropriate safeguards to protect individuals' rights in relation to privacy of personal information. There is strong support from key stakeholders and members of the public for these proposed amendments. A petition has been presented to the Parliament with more than 10,000 signatures calling on the government to make amendments that protect patients' rights.

There are additional questions that need to be addressed in relation to this bill: the funding, what the actual technology might be, how it will be compatible with other systems – including the My Health Record and also across state borders – how privacy will be protected and how cybersecurity will be delivered. There has been no business case and there has been a lack of budgetary consideration. This bill presents a worthy concept that has the potential to benefit people. Overall the Nationals support the intent of the bill, but first there is homework that needs to be done. We want to see the opt-out and FOI amendments included to ensure that individuals' rights are protected.

Tom McINTOSH (Eastern Victoria) (16:21): Victorians want and deserve access to world-class, 21st-century health care. We have incredible people working in the healthcare system to make that a reality. From doctors to nurses, specialists, scientists, radiographers, personal carers, managers, cleaners and caterers, I am in awe of the work that our health workforce undertakes and the challenges that they have overcome. The government has an obligation to provide an exceptional health service for all Victorians, and we are continuing to do this in a range of ways, including workforce recruitment, investment in infrastructure and upgrades, support for women's health, major changes and reforms to mental health, voluntary assisted dying legislation and other important investments in the health system.

A modern, world-class health system is a complex system. Going to the GP and having all your health needs met in one place is a thing of the past. This is not to put down the fantastic work of GPs – they play a crucial role in treatment, referral and stewardship of patients' journeys – it is just a reality of the modern healthcare system. There are great advantages to this complexity. Specialists know more and more about specific areas, meaning that people can receive life-changing care for rare or complex ailments rather than just surviving on generalist advice. There are also challenges with a complex system. This bill seeks to address in a small and meaningful way the greatest one of those challenges, and that is sharing information. Most Victorian patients will often be treated at different health services over their lifetime, and patients cannot know what information from their medical past will be critical to their medical future. The information is also often complex, and patients cannot be expected to self-report full medical histories in new or emergency situations.

The government has an obligation to address the major challenges affecting our health system's safety and cost effectiveness, and that is what this bill does. The Victorian government is committed to improving patient safety and continuity of care for Victorians. This also means ensuring our health services and clinicians have the most appropriate tools and information at their disposal. The bill will allow health information sharing at the point of care for patient care between specified Victorian public health services. The health information will be shared through a secure system operated and managed by the Department of Health. The data available on the system will include a summary of a patient's visit to the Victorian public health service, and it needs to be understood that this is not a complete medical history.

To discuss the changes in this bill we first need to understand the current practice of information sharing in our health system. Critical health information is spread across different health services, depending on where a patient has visited or been transferred. These records are also in separate systems and paper files. A new patient at a hospital in Victoria will have no record with the hospital and their digital records are not shared. The treating physician will contact previous hospitals and physicians

over the phone and through email, and fax is still often also used. So after locating the correct physician, finding accurate contact details, making contact with the previous physician and the previous physician making the time to find the record and send it, the information can be shared over a less secure system than the one that is proposed in this bill. Information in this current system is not controlled as tightly as it could be and there is no audit log of who has accessed patient health information.

Having verbal information bounce around through phone calls and written information through email and fax is less secure than a platform that has strict access requirements and an audit log. The proposed new secure health information sharing platform will fix that by establishing a single point of complete and accurate patient information for clinicians to provide safe and timely care. Important life-saving summary information will be shared through this platform, including medications; allergies and alerts, such as severe asthma; biopsy results; diagnoses that may have taken months to make; and results of tests and expensive scans. Making this information readily available will save time, money and lives.

Health professionals looking up a phone number and then waiting on the phone while a paper file is located is not a practice the community expect of a world-class 21st century health service, and we do need it to change. The reform is needed and supports wider digitisation efforts in government, like My Health Record and online vaccination records, and in the private sector. When people contact their bank or insurance provider, they expect that different parts of the organisation will be able to help them with their inquiry by quickly looking up their circumstances, and the community expects this level of service from Victoria's public health system.

There are well-known privacy concerns about sharing patient information. Health services currently share health information; the bill introduces no changes to that simple fact. One of the proposed responses to this concern is to create an opt-out provision. There is currently no opt-out provision for health services sharing patient information. This bill does not introduce one, and again, there is no change to current practice through these changes. The changes that this bill introduces are about accessibility of the data.

For the gains in patient safety, health outcomes and overall system efficiency, summary patient data will be more accessible, and there are risks with that increased accessibility acknowledged in the bill. The mitigations to those risks are strong and targeted. The bill specifies that only healthcare providers who are directly involved in a person's care and treatment can access medical information and only for the purpose of providing care. The platform will be frequently audited to see who has accessed patient data, and there are three new criminal offences prohibiting unauthorised access and unauthorised disclosure of information. The penalties in the bill include 240 penalty units – that is \$44,380.80 – or two years imprisonment for any unauthorised access, use or disclosure of information held in the system. It is also worth noting that health professionals are licensed by professional bodies and have existing duties to comply with their professional and legal obligations regarding privacy.

Access to highly sensitive health information will be more limited, and these protections will ensure additional protections for vulnerable groups, like victims of domestic violence and child protection and justice cases. This approach is consistent with other Australian jurisdictions such as New South Wales, Queensland, the ACT and South Australia, which have all successfully implemented health information sharing at the point of care.

The opt-out model suggested is a step backwards by winding back current information-sharing protocols under the existing law that public hospitals can share health information required in connection with the further treatment of a patient without getting their consent first. It will lead to expensive duplicated tests, misdiagnosis, inefficiency, delays – not just for the patient who opted out but for other patients – and a lower level of patient safety. It is unclear whether opting out would be for total records or individual pieces of information. Would physicians be expected to sit there and redact parts of a discharge summary before uploading them to the platform?

In terms of case studies, I would like to mention some cases that I know of where this system would have made a difference. An example is a case where diseases are rare and new treating physicians may not be able to easily diagnose what is happening. I know of a case where a man with a rare blood disease who was still going through the long process of getting a final diagnosis experienced extreme pain and suffering and drove himself to the emergency department in the middle of the night. Before he attended, he scrambled to find a letter from his specialist that outlines where things are up to with his treatment and expressly instructs staff at the ED to use a rare and expensive drug that is withheld but for the most serious of cases. If he forgot the letter or the information was not clear, he would not have got the necessary relief from the excruciating pain and would have needed to wait until the specialist was contacted by phone for confirmation.

The example I hear all the time is of chronic illness, especially as illness is advancing and people are becoming hospitalised frequently, being transferred by ambulance frequently and perhaps being transferred from aged care. Consider someone with advanced chronic illness who now resides in aged care. In the middle of the night they fall and need to be transferred to hospital. Their regular hospital has no rooms available, so they are transferred to a different hospital, which does not have their records. The illness is advancing and cognitive difficulties are coming into play, but there is not a formal diagnosis of dementia – not that the hospital could access it if there were. Self-reporting from the patient is now limited and unreliable, and their carer is unavailable because it is the middle of the night, and now they live separately as the patient is in aged care. Snippets of information come through from the aged care, but the patient has not been there long. This is done verbally with night staff to ambulance staff and then to emergency department staff at the new hospital. The patient is distressed, the carer is distressed after the middle of the night wake-up call, and there are hours of anguishing wait until morning when inquiries to relevant physicians to get the summary information can start.

Sadly, I think many of us know of a case like this, and the bill will help to ease the distress families feel at a difficult time. Endless examples can be given, including of asthma, infections and cancer, but the key point to me is clear – and that is that we need these changes to information-sharing technology. Ultimately, patients are the reason for the changes, and their rights must be upheld and respected along with changes that improve care and outcome.

Under the bill patients retain all their current freedom-of-information rights to access their full medical records from the health service provider under FOI and privacy legislation. The information shared through the new platform is not a full medical record or history but a summary of the most relevant information for their treatment purposes. It is a subset of the information that is available under FOI. The bill does not enable FOI requests on the health-sharing system itself, because it would require the department to access clinical information to respond to questions, which would be inappropriate and counteractive to the strict protections and access controls the bill seeks to establish.

Everyone has the right to feel safe at work. The health, safety and wellbeing of Victorian public healthcare workers is a high priority for the government. The system will provide new safeguards for clinicians working in health care to be alerted to a history of occupational violence and aggression from patients. Risk assessment and management strategies will be able to be included in the system in the same way they are included in medical records – both hard copy and electronic – and patient care plans in line with the department's framework for preventing and managing occupational violence and aggression. The timesaving impact of this information sharing cannot be understated. Rural and remote health services still have many records on paper file and in some cases will need to send someone from medical records to get a file for it to be sent to the new hospital if someone has been admitted elsewhere.

Overwhelmingly healthcare professionals and bodies support the changes and consider this a part of getting on with the job of providing world-class care to patients. Healthcare providers work in challenging environments, and saving time using information sharing is a matter of course for our healthcare professionals. The government understands that there is nothing more important than getting the best care close to home, and we are investing in our healthcare system. There are currently

several large-scale hospital projects across Victoria, including the Wonthaggi Hospital upgrade, the new West Gippsland Hospital in Drouin and the expanded Latrobe Regional Hospital in Traralgon in my electorate of Eastern Victoria. This includes delivering the biggest hospital infrastructure project in Australia by building the new Royal Melbourne and Royal Women's hospitals alongside Metro Tunnel's new Arden station, giving patients across Victoria access to the very best care. From 2025 both the Parkville and Arden medical precincts will have brand new train stations and be linked, making it a 2-minute trip between hospital campuses and connecting them to the Monash Medical Centre in Clayton – again improving access.

The government will continue its focus on women's health by delivering a \$71 million package to create 20 new women's health clinics at public hospitals, a new statewide service, and more sexual and reproductive health hubs across Victoria. The government will also work with the Aboriginal health organisations to deliver the first ever dedicated Aboriginal-led women's health clinic. Delivering new women's health clinics will completely change the way women's health issues are treated in Victoria and will provide comprehensive care for Victorians experiencing conditions like endometriosis. Endometriosis is a good example of a diagnosis that can take a long time to get and results from several presentations to hospital with different sets of tests. An information-sharing platform with the results of previous tests and discharge summaries will be good for women's health.

Again, Victorians want and deserve access to this system. The government has an obligation to provide an exceptional health service for all Victorians, and we are continuing to do this in a range of ways, including workforce recruitment, investment in infrastructure and upgrades, supports to women's health, major changes and reforms to mental health, voluntary assisted dying legislation and other important investments in the health system. This bill will allow health information sharing at the point of care for patient care between specified Victorian public health services. The health information will be shared through a secure system operated and managed by the Department of Health. The data available in the system will include a summary of patients' visits to the Victorian public health service, and this will improve the safety and health outcomes for patients in Victoria's public health system. (Time expired)

Melina BATH (Eastern Victoria) (16:36): I am pleased to rise to make a brief contribution today on the Health Legislation Amendment (Information Sharing) Bill 2023. If you listen – and I have been listening – to the debate, all is rosy in the health sector under the Andrews government. 'All is well; trust us, all will be well' is the overarching theme that I have heard while I have been sitting in the Parliament.

This government has certainly been a progressive government. It has made social reforms like never before. Many a time I have heard in this chamber about giving Victorians choice. We want to enable you to have more choice – more choice about your body, more choice about what you can do with your body. We heard the previous contributor just then talk about the Voluntary Assisted Dying Bill 2017, how you can choose through a whole variety of steps to end your life, providing that choice. What we are asking on this side of the house is to continue that theme about choice, to enable Victorians to opt out of this information-sharing scheme, this information-sharing legislation, to provide them with autonomy, with their own right to take control of their health – as much as we can take control of our own health. There is a need to better share information; there is a reason. This bill has merit, but give Victorians a choice.

The bill in essence establishes an electronic platform for patient information sharing to provide, in its benefits, access about a patient's conditions. They can be a variety of conditions. They can be previous treatments, current medications, allergies, alerts, admissions, discharge summaries, outpatient consultations, laboratory and imaging results. I am sure we have all had our bodies looked at and scanned in some form or other, and we value those assessments.

The other thing that the bill will do in its current form is make it mandatory – and here is that word 'mandatory'; we have heard it a lot over the COVID pandemic – that specified health services adopt

a new health information platform: metropolitan hospitals, multipurpose services, denominational hospitals, public service hospitals, registered community health services, the Victorian Institute of Forensic Mental Health, public aged care facilities and the Victorian Collaborative Centre for Mental Health and Wellbeing. Also we have heard on one hand in the bill briefing that GPs will not be included in this, and then we have heard from others from the government on the other side of the benches that GPs will be included in this, so that needs to be clarified.

I have had constituents come to me who are very frustrated with the current system, and I can give you an example without naming names. At a local hospital in Eastern Victoria Region an elderly father went in, had multiple health issues, and the family provided information. His health was deteriorating, and he was moved from our smaller hospital over to a larger centre in Gippsland. The family went over and again related the medication, the information, the high-alert things that should be known, like when to have his medication, whatever it be, diabetes medication – it is better for him in the morning. They provided all that information. Then a couple of days later it was not given in the right sequence, and they went back to the new set of doctors or the new set of nurses that are there in the same hospital.

I am not sure how this will be the panacea to that issue. If it improves it, that is good, but there are constituents who, under the shadow of COVID, feel very nervous about enabling this information to be shared. We all have had constituents or members of the public write to us – I think the government benches have said it is all straw man tactics or something like that – with their genuine concerns about if information is adversely shared. They are keeping their privacy. Their privacy is absolutely paramount to their safety and the safety of their children. If that is somehow shared on a platform – and we have seen an example of that in the media – then their mental health can be eroded. If they cannot have an opt-out provision, their mental health can be eroded. Do we not care? Do we not consider that mental health is part of our overall health as human beings and our nature of living?

I put it to the crossbench – and I thank them for listening to the arguments that Ms Crozier and others have put forward, and I thank Ms Crozier for the great deal of concern she has and the in-depth work that she has put into this over many years – that we should have an opt-out clause. Indeed that Commonwealth health platform My Health Record has shown that 2.5 million Australians have decided to opt out. They feel more comfortable with that. Many people will not care if their information is shared from pillar to post, but some will, and I think it is a retrograde step if we do not allow opting out to happen. Also in this bill there is a denial in that individuals – again, choice – cannot FOI the department to see who has been speaking to whom about information.

Matthew Bach interjected.

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Melina BATH: I pick up Dr Bach's concern around potentially Labor staffers being involved in some of that information sharing. The government will say that is not an issue. I think there are people that are concerned. Indeed I congratulate Mr Limbrick for putting forward a petition with 10,000 signatures over a small number of days. If it was not a concern, you would have had 1000 signatures. We do have 10,000.

The government has been spouting *Targeting Zero: Supporting the Victorian Hospital System to Eliminate Avoidable Harm and Strengthen the Quality of Care.* This is about quality of care. One of the recommendations is that the department should adopt a goal of ensuring that by 2021 – so we are behind the times already – major hospitals have full electronic health records that enable interchange of information with other hospitals. The difference is that this task force did not recommend an automatic sharing of every patient's information with various health services and it did not recommend the sharing of patient information with the health department. I put to the house that the intent of this has merit. It does need to be amended; I think the government has amendments that we are yet to see. I would ask the crossbench to consider those Victorians who do not feel comfortable with their information being shared, who want the choice to opt out and who also want the choice to see what is going behind the system and to put those amendments put forward by Ms Crozier in a positive light.

I also go back to the government saying that we have a leading, world-class health service. We have heard from the AMA. We have heard from others about an 85,000-person – we will call it – elective waitlist. But we all know it is not superficial surgery, it is must-have surgery – and this waitlist is blowing out. I believe there should be an intense focus on that, particularly for our regional hospitals in my electorate – I am allowed to be parochial. These flaws in this bill need to be rectified if we are going to vote in favour of it.

Moira DEEMING (Western Metropolitan) (16:46): I rise today to speak on the Health Legislation Amendment (Information Sharing) Bill 2023. I note that this government have just admitted to us that they cannot conceive of a way to run a functional healthcare system in this state without first requiring that every single Victorian gives up wholesale their right to own and control their own personal health information. They tell us that our choice is between an online, centralised, government-controlled website and a fax machine. They tell us that it is for our own good. They tell us that it is life and death. Members of this government have even just told us that the people of Victoria, patients in Victoria, have asked for this. I personally do not recall any evidence of patients lobbying to hand over their medical privacy and autonomy to this government. In fact I have very strong memories of exactly the opposite type of lobbying by tens of thousands of people over the past few years not 50 metres from where I stand. Everyone in Victoria is frustrated with the catastrophic mismanagement of our health system, so I am sure we are all glad that changes are on the table. But this bill cannot be allowed to pass without amendments. The plain and simple truth is that we can achieve better outcomes and patient care without destroying patients' rights to confidentiality. The plain and simple truth is that there is nothing reasonable, nothing proportionate and nothing necessary about denying people their right to privacy, safety and dignity that comes with genuine confidentiality and with reasonable personal controls over their own medical information and choices.

The government have told us that they have introduced new offences to punish unauthorised access to and use of this smorgasbord of lucrative medical personal information, and then in the very same bill they have removed our ability to collect evidence if such a crime is committed against us. This government assure us that we can trust them but also tell us that we are not allowed to know the who, what, why, when or where when it comes to how our personal medical files are being used – and not even via an FOI request. They tell us that there are safeguards, that we can trust them, but then they demand that we never check up on them. We need an opt-out and we need to know who is accessing our records when and why. The truth is this is not good enough.

Matthew BACH (North-Eastern Metropolitan) (16:48): It is good to rise to join this debate with just a brief contribution. I know other members want to make further contributions too. I have been listening, as others have been listening, to both government speakers and speakers on this side of the house. I confess my chief concerns with this legislation are very much in keeping with the concerns that Mrs Deeming has just very eloquently explained.

I was honestly quite surprised to hear that new bloke Mr Berger say that arguments put forward by organisations here in Victoria as revered as the Law Institute of Victoria should not be humoured. That is what he said. He did not misspeak, he was reading from notes – because members opposite just read from their talking points from the Premier's private office. He said they should not be humoured and that these were straw man arguments. Honestly, I cannot recall – I have only been here three years – an organisation as revered as the law institute being referred to with such a lack of respect even by members of a government that is this arrogant and this hubristic. I would trust Tania Wolff over members opposite any day when it comes to, well, basic truthfulness and certainly when it comes to the issues of privacy and of patients' rights that Mrs Deeming and Ms Bath before her spoke about. Here is what the law institute said recently:

This signals a departure from a human-rights and patient-orientated framework which is well established in other Victorian legislation.

... the Bill fails to strike an appropriate balance between clinical efficiency and safeguarding patient rights.

It:

... unjustifiably erodes privacy rights ...

Members opposite have said, 'No, well, that's not true; there's no impact on rights.' They have mounted a strange argument that on the one hand there is no change here, that records are shared all the time in exactly this way – there is no change, chill out – but on the other hand the changes are going to be so significant that lives will be saved across the board. We have heard a whole array of bizarre hypothetical medical cases put forward from members opposite where lives would be saved by this legislation, which also, according to members opposite, makes no changes to current practice. I think Mrs Deeming put it best when she said we are being offered a proposition here from the government that the only way to move forward when it comes to medical records is to do that either via the use of fax machines or via this particular system that none of us can opt out of.

And people have spoken about the fact that constituents have reached out to us to express their concern; that is a fact. The government has said that so many Victorians are crying out for this. Well, I am not aware of any evidence, as Mrs Deeming said, that that is the case. I have seen Mr Limbrick's petition – 10,000 people in such a short period of time – so there is ample evidence that there is great concern in the community. I do not mind saying I opted out of the federal scheme. I do not want federal Oompa-Loompas in the department of health having access to my medical records – no way. And there members across the Parliament worked together to get a better outcome. I want to quote briefly, if I may, from comments made by the Leader of the Greens at the time, Mr Di Natale. The Leader of the Opposition simply misspoke a little earlier when she attributed some similar comments to Mr Bandt. These comments were actually made by the former Leader of the Greens party. He said at the time:

They need to understand -

meaning people need to understand –

how this information is managed and then they need to make some decisions about how they want their own personal information to be managed.

He made these comments in the context of supporting an opt-out, and I am really hopeful that many members of the crossbench will support an opt-out.

David Limbrick: That would be the old Greens.

Matthew BACH: That was the old Greens, Mr Limbrick said. Mr Di Natale went on:

We do think that Australians have got the right to make an informed choice about this, and they -

Australians -

haven't been given that opportunity. Indeed, everything that's happened so far has undermined confidence in the system.

Well, for goodness sake, if our confidence in health systems was undermined some years ago, think about what has happened since then. Think about the catastrophic failures that have occurred on this government's watch, especially when it came to contact tracing. So no, I do not have confidence that just because Mary-Anne Thomas in the other place says, 'Trust me, I've been working on it,' we should trust the minister. She spends her time trawling through my social media to try to put forward ridiculous motions attacking me – and do not worry, I like the attention – in the other place. That is what she has been doing over the course of the last few days: a motion in her name specifically attacking me because I called the Suburban Rail Loop a mangy dog. It is a mangy dog, and it is interesting that one of the reasons for that assessment that I put forward in the lead-up to the election was the fact that there is no business case. Other members have referred to the fact that there is no business case here either. So that person is not a serious person. I would not trust her to manage this process. I would not trust some of the former Labor staffers who they have attempted to stack out the

Department of Health with to manage this process either. It was Paul Sakkal of the *Age* of course last year who did some excellent forensic work demonstrating the extent of the politicisation of the public service. Once you get to my age –

Bev McArthur: So old!

Matthew BACH: Well, once you start to commence upon a journey into middle age, as I have done –

Bev McArthur: How's it going?

Matthew BACH: badly – as a bloke, you start to develop closer relations with your proctologist and you start to develop closer relations with your urologist. But I would say to the Minister for Health in the other place: you will take my proctology records and my urology records from my cold, dead hands.

Evan MULHOLLAND (Northern Metropolitan) (16:54): I note the contribution of Dr Bach. We in the Liberals and Nationals I think support the purpose of this bill for better information sharing between public health services in order to improve patient safety and outcomes. More efficient use of resources to deliver practical healthcare outcomes aligns with our Liberal values on this side of the house, so of course we support the intent of this bill. More efficiency is needed in our health system, which is being stretched to the limit after years of wasteful mismanagement by the Andrews Labor government. But as is always the case when it comes to this government, there are serious and sensible amendments that need to be made first. They always take it that step too far, the Andrews government, and instead of seeking collaboration and consultation, they seek to bulldoze through this Parliament, bulldoze through this place, in attempting to get legislation through that many do not agree with.

This legislation is about sharing data, and some of this data relates directly to individual patients and their medical history. While many of us may be fine with this, there should always be an option for people to opt out of sharing their personal information. Currently this legislation does not provide for that safeguard. By contrast, the federal government's health information sharing scheme, My Health Record, gave all Australians a choice over who has access to their medical history. They could opt in or they could opt out. Indeed 10 per cent of Victorians have exercised their right to opt out, and it should be their right to do so regarding this bill. We should give those 10 per cent of Victorians a chance to opt out of this bill. The equivalent system to the proposed system that operates in Queensland also has an opt-out provision. Why shouldn't Victorians have that right, just as Queenslanders do, to decide this and who can access that information?

So we have got the Commonwealth and we have got Queensland, and I note the Premier in his press conference was like, 'Whoa, whoa, you know, New South Wales doesn't have an opt-out. Look over there, look over there!' Well, I say to that point – and I do not agree that they do not have an opt-out; I think they should – that it is apples and oranges. New South Wales has Service New South Wales. They have a world-class digitised public service. They got some time ago security experts, digital experts, to focus on how they can have a public service system that is focused on the people rather than the bureaucracy. They have things like digital drivers licences. They have things like Dine and Discover to immediately interact with small business. Do any of those on this side – or maybe those on that side will – remember Labor's chaotic regional travel voucher scheme in comparison to New South Wales? The website usually crashed. If you did not miss out on the lottery and finally got through, you basically had to pay all the costs up-front, and then after you got a written receipt for your travel, you had to either fax it in or email it to a single bureaucrat who would take ages to actually give you a refund, so you were fronting all the up-front costs.

But we see often with the Andrews government and their bureaucracy – the octopus that extends beyond the bureaucracy – that it is all about the bureaucracy and the public service rather than what is best for the people. I would not trust the Victorian IT systems to manage private data as well as New South Wales. There are quite clear investments in digital capability that they have made that Victoria,

quite frankly, has not. It is like comparing current AI technology to Windows 95. That is what this is when the Premier says, 'Oh, we can do the same as New South Wales'. No, you cannot.

Back to the legislation, further to this legislation, it fully prevents the system of freedom-of-information requests. This is a sensible protection when it comes to protecting Victorians from having their data being sought by others, but what it is about is Victorians who wish to inquire about how their own medical data is being used and distributed. It is a critical accountability oversight that is completely missing from this bill. Data accountability is critical, especially when it is clear that this government has no regard for confidentiality. I can give you an example of this. Just last Friday we found this government taking great delight in leaking confidential information of a highly respected journalist from the Premier's private office for political pointscoring. If we cannot even trust the Premier and his office to not leak confidential information to the *Herald Sun*, how can we write them a blank cheque when it comes to every single Victorian's private medical information? How do we know that someone in the Health Services Union or a bureaucrat or someone in the octopus of the Labor Party throughout the public service and union movement will not get the private information and use that, through the Premier's private office, for political pointscoring? These are legitimate questions to ask because the Premier's private office has form in this matter.

Matthew Bach: Last week.

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Evan MULHOLLAND: Just last week. We already know that this government has form, but they do not seem to care about it. We should be able to FOI personal health data. How are we to know that someone's private health data will not be accessed by other agencies through the Department of Health – through someone, a source, in the Department of Health maybe; that is another bill – to pursue police, security or health outcomes? We would only know that if a person was able to lodge a freedom-of-information request with those issues.

There are serious reasons why someone might wish to keep their personal medical information private, whether it is their sensitive medical history, family violence history, current or former drug use, or miscarriage, which one in four families go through. There are a number of highly personal reasons why someone might not want that data shared. Medical data in the wrong hands can open people up to discrimination, exploitation and even blackmail, and last year's hack of Medibank Private should give all Victorians reason for concern. We know that cyber hackers are focusing on health data as a priority, so the government need to explain as a matter of priority what they are doing to ensure all of this data is held securely. I am sure the government intends to keep its word when it says that this data will be given the strongest possible protections to prevent cyber hacks, but Victorians who seek caution should be given that right to opt out of this system.

It is not just us here on this side who are concerned about this; it is the Law Institute of Victoria, it is Liberty Victoria and a number of other organisations. We are asking for the ability of a person to FOI. I know this government is not very forthcoming when responding to freedom-of-information requests, and I think I just saw another truck full of black ink roll back into Treasury Place for the amount of black ink they have to put on all their freedom-of-information requests. This is the most secretive government of any government in Victoria's history. If you lodge a freedom-of-information request—if they do not try to fight it through the courts—what you will end up with will be completely blacked out.

With this bill they are taking it a step further. They just want to skip that process. They do not want the hassle. The citizens – Victorian taxpayers – to this government are just a hassle; they are just an inconvenience. We heard the comments from Mr Berger. I could not believe that side of the house would speak about the law institute in that way. You have got eminent, respected organisations coming out against this bill. Mr Limbrick and others – 10,000 people – have spoken out against this bill. There are very serious reasons why the government should just be collaborative, should just consult. All we are asking for is an opt-out clause and the ability for Victorians to see who has accessed their private medical data. As I said, you have got people with drug use in the past or present drug use, you have

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got family violence victims, you have got people that have gone through miscarriage or had abortions — there are serious reasons why Victorians do not want their private medical information given over to the state but also shared with other doctors. That relationship with your doctor is a sacred one and it is a very important one — it is a really important one — and just because your GP has that information does not mean bureaucrats or other doctors should also have that information. So I would implore the government: listen to this chamber, listen to the law institute, listen to Liberty Victoria, listen to us and work with us so we can get a better outcome on this bill.

Nicholas McGOWAN (North-Eastern Metropolitan) (17:05): I rise to speak on this bill, and in so doing I would like to take a bit of a walk down memory lane. I know that is inconvenient for many, but I think it is probably apt. I will take us all the way back to the Victorian Auditor-General's Office report *Clinical ICT Systems in the Victorian Public Health Sector*. It strikes me that very often when governments take action they all too frequently ignore the lessons of the past, and yet here we are again doing precisely that. While I am not one to quote from documents per se, from time to time I do it, and today is going to be one of those times. It is I think valuable to remind members, particularly the crossbench, of what was said by the Auditor-General at the time, so I will quote a number of – only three – parts of this report, because I think it is that important. It says:

Timely and reliable patient information is fundamental to the delivery of safe and effective healthcare.

I do not think there is a person in this chamber that would disagree with that. That is not part of the quote of course. I will continue:

Modern technologies should enable patient records to be efficiently and accurately recorded, stored and shared across hospitals. However, the majority of our hospital patient records and practices are still paper based. They operate as unconnected islands of patient data and are unable to be efficiently shared with clinicians across the state's various health services to improve patient treatment and care.

In 2003, the government committed to the \$323 million Health SMART program, which included the roll out of clinical ICT systems to 19 health services by 2007. Like any other transformational ICT project, clinical ICT systems require a significant investment of people and money. They are complex and risky, and unforeseen issues often emerge which need to be addressed.

This is the penultimate part of this particular page:

This audit found that poor planning and an inadequate understanding of the complex requirements to design and implement clinical ICT systems has meant that the Department of Health exhausted its allocated funds, and ultimately delivered the Health SMART clinical ICT system to only four health services.

The report goes on, and members for themselves can receive obviously and – I hope in time they do – read that report.

Where to begin? Well, we have heard a lot of debate today, and unfortunately from the government side – expectedly perhaps – they have just gone off the script provided for them. I am hoping that the crossbench use a forensic mind, that they actually turn their mind to the questions that are before them at the moment. You need look no further than the bill itself, which is alarming in the extreme. It is alarming because at its very outset it refers to 'health information' – that is the information it will collect – and it refers that definition to the Health Records Act 2001. Let us be clear about what we are talking about here, because I think that is always a good beginning point. You need to look at the Health Records Act, which by the way could facilitate the sorts of objectives and goals that the government now say they seek to achieve, but they do not want to do that. That is not really what they seek to achieve at all. In the Health Records Act 'health information' is defined. People in this chamber might be surprised by what it means. It means a lot of things. It means:

- (a) information or an opinion about -
 - (i) the physical, mental or psychological health (at any time) of an individual ...

Keep in mind that this is the definition that will be the basis for the health legislation amendment act, should it pass. Health information also means:

- (ii) a disability (at any time) of an individual; or
- (iii) an individual's expressed wishes about the future provision of health services to him or her; or
- (iv) a health service provided, or to be provided, to an individual -

and I think this needs to be emphasised –

that is also personal information; or -

wait for it-

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(b) other personal information collected to provide, or in providing, a health service ...

any personal information whatsoever. Let us be very clear, and to the crossbench who are not here at the moment, except for one of my colleagues: if you pass it in its current form, what you are passing here is perhaps without question one of the greatest, largest grabs and attacks on personal privacy in this state's history. Two things: there is no possibility to ever opt out; and, two, no scrutiny insofar as the FOI, freedom-of-information, legislation goes, because they have stripped that away carte blanche.

You cannot look at the integrity of the system. You cannot look at who looked at the system. It is very well to come into this place and talk about penalties. That is a joke. There is no policing in this proposal – none at all. I searched through the pages. I thought there would be more. There is nothing. There is nothing about policing. Of course there is not. There will be no policing. The only policing we will need to do is when we call the federal police to investigate why there has been a breach and we are all being blackmailed because all of our information – not only medical information but all the other information, because it is clear that is what it will include – has been collected.

But I have not even finished. I have not even finished this bit, so I have got some time to go. That act says:

other personal information that is genetic information about an individual in a form which is or could be predictive of the health ...

That is captured by this, and that is how serious what we are talking about is. Gone is the patient's right, gone is your right as an individual, gone are your children's rights. I hope members in this place are absolutely clear about what is being proposed here today. Every single child in the state has no choice and will be dragged kicking and screaming into this, whether they want to or not, whether their parents have given their consent or not. You will be part of this if this passes in its current form. It is an abomination. There is no other word for it.

Other colleagues today have spoken about the Law Institute of Victoria, and it is important what they have said. These are not partisan people. These are people who have the best interests of all Victorians at heart, and it is for that purpose I will also quote from that they have said in their press release. They make a salient point, and it also illustrates that unfortunately in the Victoria of 2023 the government fundamentally misunderstand the basic human rights of individuals in this state. I quote from that press release:

While we acknowledge the aim of this Bill is to improve efficiency of medical care provided to Victorians, this must not come at the cost of patient autonomy ...

Patient autonomy must be front of mind in any health legislation being put forward by government to protect patients' rights. The implementation of an opt-out scheme would place choice back in the patients' hands about the healthcare they receive in the Victorian public health system.

Patients must have the right to say who can access their health information – even if this means their health information will not be shared under the scheme. Patient autonomy is a fundamental human right ...

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I will repeat that:

Patient autonomy is a fundamental human right: it's the same principle that allows a patient to refuse medical treatment.

That should be lost on nobody in this place.

What is more – and this is particularly for the crossbenchers to consider – if a patient chooses to seek the advice of another doctor because they are not happy with their existing doctor, there is nothing to prevent the next doctor from looking at those records, nothing at all. Not only do we then confront the issues of a bias but further than just the bias that a doctor might have, the bias that will permeate because everybody looked at those records. They think they understand the person in front of them. The unconscious bias could wreak havoc with that person's treatment by that doctor. They have a fundamental right to seek a second opinion. We all have that right, but under this that would be polluted from the outset because that next doctor is already going to see, 'You've already spoken to the doctor next door. You've already been somewhere else,' to say nothing of people's confidence in not being prejudged by other results. We live in a very modern society where people have, to this day, the right to privacy with respect to their healthcare results. Under this, that will all be thrown out the window – gone.

What is also alarming to me is the ease with which members on the other side accept what they are being told by those that give them their instructions – or perhaps behind closed doors they do share some of these concerns. But I can only hope the government does put forward sensible recommendations to make this bill palatable, because in the current form it is far from that, and I say that because the consequences are far-reaching. They go beyond just the bill itself.

There is no budget. The department do not even try and pretend they have done a budget for this. This will blow out. I mean, it will make HealthSMART, which was health dumb, look like a cakewalk, a cupcake by comparison. There is no budget, no budget whatsoever. There is no policing. They are doing away with transparency. Worst of all, we might go through all this and, guess what, there is no guarantee that there will actually be any improved health outcomes because of it. And no-one can, still to this day, explain to me with any satisfaction why we cannot simply work with the federal government, who have already undertaken this process, who have an opt-out and who are collecting records assiduously in large volumes every single moment of every single day in this country. There was no mention of that today. There was no mention of the duplication. There was reference to other states, but it ignored the fact that Queensland has an opt-out and completely ignored the federal scheme, where again we have an opt-out.

If those opposite are serious about improvements in our healthcare system – because if that is what this is about then I would support it – then put KPIs in the bill. Let us come back and review it. It is nonsensical to talk about improvements and just wish they will occur. The evidence we have, particularly in government and particularly in bureaucracy, is that it just does not happen, so put some KPIs in the bill. Outline how you think these improved outcomes will occur, because if you can do that and you can substantiate it and we can measure it, then I am all for it – provided of course it has an opt-out and provided of course we allow freedom-of-information requests. To segue from freedom of information – I mean, it is under this government freedom from information. I understand that, but this is taking it to the nth degree.

A member: Government freedom.

Nicholas McGOWAN: Government – they will not be sharing any information. The only information they are prepared to share is between the health department and every other provider, essentially.

We have not even started to touch on the cost of what this is going to take at every level, and that comes at a cost in terms of time. Time matters in health care, everyone knows that. I think that is an accepted concept right across the chamber. Yet we are quite prepared to now place an additional

significant burden upon every hospital, every clinic, every healthcare provider you can imagine. Think for a moment that that will not impact health, and think for a moment that the information received will somehow have outweighed benefits for the same people, because then when you start to drill down in the bill and you start to look at how long these authorities have to provide the information, it could be up to six months. So in most cases or in very many cases, it could be argued that even by the time you collect the information, under the bill as it stands unamended, it could be superfluous. I hate to say it, but the patient could be long dead. That is the reality. I mean, has anyone actually bothered to look at and read the bill? Six months – that is assuming you get the information.

Then have a further look at the bill. What is to stop duplicate information? Under this bill every one of those listed hospitals, clinics and so forth, and some things that do not even have definitions at this point – we will get into that in committee – have to provide, presumably, the same information. So if I go and get a blood test at my local GP tomorrow, well, the GP has got the blood test results, they are going to have to comply and give that information. The pathology has got that result, so they are going to have to give the information, and if they sent it to a specialist, the specialist has got the result, so they are going to have to give the information too.

I have no confidence whatsoever that this government has any ability to be able to actually achieve the stated outcomes that they say they seek. If they were serious about it, they would put into this bill KPIs. If they were serious about this, they could have looked at the Health Records Act. They could have looked at how that tries to facilitate and create and achieve a balance between both the use, the timely use, of health records and the rights of the individual to be able to opt in or opt out as is their right – a fundamental human right which this government appear to have completely ignored or ridden roughshod over, which we are getting all too used to, unfortunately, in this place in the last term of government and in this term. This accelerates that and takes this to whole new levels.

I can only hope, I can only plead with the crossbenchers to use their common sense. I can also only hope and plead with the government members who do not support this nonsense, despite what they might have said, to come back to the table with commonsense amendments and something that we can all support.

Bev McARTHUR (Western Victoria) (17:20): In rising to speak on this bill and to criticise significant elements of it, I hope it goes without saying that I am highly supportive of its stated aim – that of improving health care for Victorians. Heaven knows that needs to be improved. We are in an almighty mess in the healthcare system in this state, and you are asking the people of Victoria to trust you after you ran the most appalling health operation during years when you locked us down and the contact-tracing system run by Commander Weimar was just hopeless. 'Trust us' – no, sorry, we cannot. The problem is that shot through this government's DNA is a statist, centralist, bureaucratic, anti-individualist tendency which shapes even admirable policy aims into unwieldy, inflexible and deeply illiberal proposals. But as you will hear, I do not just oppose them in principle; I also believe that these flaws mean in practice they will fail too.

Firstly, on the positives, there are obviously significant advantages to having health records which follow the patient and allow the rapid transmission of relevant information to medical professionals in urgent situations. As one of my colleagues remarked when this bill was discussed in the lower house, it is remarkable and frankly shocking that in some instances we have more information on our cars when we take them for a service than doctors have on our loved ones when making decisions on critical treatments. So it is no surprise that this bill represents the latest attempt to address the issue, but it is deeply disheartening that the Andrews government, through ideological inflexibility, stubbornness, arrogance and maybe even laziness, has unaccountably refused to make any concessions to improve past efforts. Instead, they have simply rehashed their previous proposal with all its flaws. It is not good enough and particularly disgraceful when the goal is better patient care. I will be certainly supporting the coalition amendments that Ms Crozier has put forward and those of Mr Limbrick, which I have heard about. I am impressed by the work done by both sets of amendments to salvage the bill and will outline briefly now why I believe they are necessary.

I do not intend to make an exhaustive contribution, but I am particularly struck by certain aspects of the legislation and I wish also to relay an important contribution from a constituent who has significant experience in this area. Firstly, it is interesting to note the unusual coalition of domestic violence survivors, civil liberty groups, legal practitioners and cyber experts opposing the bill — what a collection of opponents. It is not just a single-issue group or even a unified political opposition, a self-interested employer or dogmatic unions who object. We should note too that it is extremely likely that similar objections are shared by a very significant percentage of the population. Even before the damage to public trust done by the COVID-19 lockdowns, 9.9 per cent of Australians — some 2.5 million — had opted out of the federal My Health Record system. So why does the Andrews government choose to deny those same people that opportunity? If the federal system allows opt-out, why would Victoria think they should do any different? I personally might have no issue with information sharing, and I am sure Labor ministers, staffers and the Department of Health do not — that is obvious — but is completely wrong to make public policy which disregards such a significant percentage of the population with no proportional justification.

As the Law Institute of Victoria media release last week put it, and I repeat what my colleague has just said because it is important to have it on the record everywhere:

Patient autonomy must be front of mind in any health legislation being put forward by government to protect patients' rights ... an opt-out scheme would place choice back in the patients' hands about the healthcare they receive ...

. . .

Patient autonomy is a fundamental human right: it's the same principle that allows a patient to refuse medical treatment.

Why can't we say no? Why can't we make an informed decision that even though our care may be less good we still choose to opt out? There are serious matters here: mental health, sexual assault, domestic violence, abortion, sexually transmitted diseases, addiction and COVID vaccine status – all sorts of different reasons people might wish to keep their own information confidential. Rightly or wrongly, people may be scared for their financial future, for their reputations, for the custody of their children, for the safety of their families. How can we force upon them a system which creates nervousness, anxiety and even depression? I want to quote a constituent here who wrote to me at some length on her fears about this bill:

Many people may not want their personal health information shared in this way and I most certainly do not. Having worked in the health system for many years I am aware that privacy and confidentiality is extremely important to the majority of people attending for services. Indeed it is common for people to specifically ask if the information they provide will be kept confidential. This bill could especially seriously impact vulnerable people such as those in family violence situations, victims of sexual assault and those using or recovering from drug or alcohol issues. It can be very challenging for stressed, traumatised and vulnerable people to seek health care and they are less likely to do so if they feel unsafe because their personal information is not respected and not kept private.

My constituent then adds another important observation:

Having had my own personal information breached by Victorian Government departments several times and aware that others have also, I have no trust –

no trust –

that the Government has the ability to keep personal and sensitive information secure and safe.

So to me it is obvious. Sometimes people have developed relationships of personal trust with their practitioners. This can particularly be the case with psychologists and psychiatrists, dealing with difficult and complex cases, distressed people who might not in the eyes of the department or health bureaucrats be making rational decisions. But it is their decision to make, not the government's and not the health department's. Surely we do not want to set them back. Why take any risk?

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It is problematic for the practitioners too, not just the patients. In fact I see this as much like the attack on an individual's judgement and competence in the so-called gay conversion bill. It is another diktat from on high which will remove from practitioners via their employing organisations the discretion to treat individuals in the way they see best, which could include acceding to their heartfelt request to maintain confidentiality. What is so abhorrent to the government that they do not want people to be able to retain their confidentiality and not have their records go far and wide?

Even worse is another element – the retrospective nature of the legislation. We know now, looking at new section 134ZH, part 2, that up to three years of health records from before the commencement date may be uploaded to the information-sharing system. By this measure even the autonomy remaining open to Victorians not to seek treatment is retrospectively removed. Is it any wonder that with heavy-handed absolutist retrospective legislation like this paranoia and conspiracy theories are bred? And it is all so unnecessary.

The amendments presented by the coalition today and those Mr Limbrick I think plans on presenting address all these legitimate concerns while leaving the essential intent of the bill intact. It could be optins, opt-outs or even allowing patients the discretion to choose which of their conditions or medical treatments are shared; there are many potential solutions, none of which the bill as introduced presents. Why should the government be so stubborn that it will not actually listen to what could make this proposal better?

The irony is that in failing to introduce these protections, patient care will be damaged. Some will simply not access care for the reasons I touched on earlier. It is also remarkable that the minister, in this place no less, specifically stated that a main objective of this bill is to deliver person-centred care. There is no doubt that in today's health system patient-centred care – shared decision-making – is universally recommended. The idea of 'No decision about me without me' has become rightly central in the relationship between healthcare professionals and patients, yet this bill rides roughshod over that idea.

I want to conclude by reinforcing this point. There are other arguments to make on how useful the scheme will actually be – by analogy with My Health Record, on government competence in delivering IT projects, on cost blowouts, on cybersecurity in the light of Optus and Medibank Private, on hospitals' understandable prioritising of patient care over IT investment and on the increasing prevalence of cyber attacks on healthcare institutions, as evidenced in my electorate by the disruption Barwon Health and the South West Alliance of Rural Health have suffered. But all these are secondary arguments. Believe it or not, I respect anyone's right to have complete confidence in the Andrews government's ability to deliver well-designed, on-time, on-budget, perfectly secure services. We do not ever see any evidence of it happening, but you know, they could have confidence that it might. But it is their choice to weigh up the facts and come to that decision. It should also be anyone's choice to reach the opposite conclusion, so I cannot see how any member here can, without amendment, vote to impose this bill on all Victorians. I certainly will not be doing so.

Wendy LOVELL (Northern Victoria) (17:33): I rise to speak on the Health Legislation Amendment (Information Sharing) Bill 2023. I will be brief in my contribution. Many of my colleagues have canvassed this bill very extensively and the concerns that the opposition have with it. I have to say that I have some empathy with the bill. I actually think that it is a good thing that we can share health information, particularly if somebody is brought into a hospital in a situation where they have been in an accident or they are in a coma or something like that where they cannot give the information to the medical professionals. I think it would be a good thing to be able to access medical history to make sure that patients are being treated appropriately. But in saying that, I also have to say that I believe very much in an individual's right to privacy and self-determination. Whilst I may want that for myself – that they can access my health records and give me the appropriate care – I respect everyone's right, every individual's right, to privacy and self-determination. That goes for whether they want their information shared or whether they want to be able to deny medical treatment.

The problem with this bill is there is no opt-out clause. As has been canvassed very extensively, the federal system, the My Health Record system, does have an opt-out clause, and 10 per cent of Australians have opted out of that system – and Victorians should have the same right. Mr Limbrick has collected in a very, very short time 10,000 signatures on a petition to say that they do not agree with this bill. If there had been further time, I am sure that number would have been tenfold or twentyfold or probably even a hundredfold.

It should be an individual's right to opt out. It should also be an individual's right to lodge a freedom-of-information application if their records have been wrongly accessed, and yet this bill expressly denies Victorians that right. We do know that this government is the most secretive government ever. They do not like being asked for information. I have a freedom-of-information application at the moment just for some minutes of a cemetery trust that I am having dreadful problems getting any information from the government about. They are cemetery trust minutes; they are not minutes of a cabinet subcommittee or something. They are minutes of a cemetery trust, and the government are going to all sorts of lengths to try and stifle that application.

I actually had — sorry, I have got a bit of a migraine today, so I am not exactly thinking extremely straight as I am putting this contribution together, but I am trying to contribute to the debate anyway — an incident very early on in my career where I had a phone call from a journalist where a member of another party had given that journalist some information about me that was medical information. It was inaccurate medical information that had been given to that journalist, but the journalist was interested enough to ring me up and ask me was that true. Now, I did not think that it had anything to do with my ability to do this job, whether that was true or not. It was not true, but the journalist was interested enough to ring me up and ask me if it was true. Were they interested enough to put it on the front page of the paper if it was true? We should not have to go through that as members of Parliament, and members of the public should not have to go through that at all either.

We know this government's history of developing IT systems is absolutely stellar – not. It is pretty concerning, this government's history of developing IT systems, and we could talk about a number of systems that have been huge failures in the IT area under this government. So do we trust them to actually put together a system that would be secure and would not be subject to people accessing it for the wrong reasons? We know that the law enforcement assistance program database is often – often – accessed for the wrong reasons, and we are continually hearing in the media stories of the LEAP database being accessed and used inappropriately. We do not want that happening with health records here in Victoria, and therefore we will as an opposition, as the Liberal Party, move amendments to this bill to allow for an opt-out and to allow for freedom of information, and I appeal to the crossbench to support those amendments to make this bad bill a slightly better bill.

Ann-Marie HERMANS (South-Eastern Metropolitan) (17:38): I rise to speak briefly about the Health Legislation Amendment (Information Sharing) Bill 2023. This bill seeks to centralise an electronic patient health information sharing system by amending the Health Services Act 1988. This bill also allows health information of Victorians to be centralised and accessed by non-disclosed government authorities. While centralising appears initially to make sense for medical consistency, today's Victorians under an Andrews government live in very different times where they may not feel safe, and unwanted disclosure of personal details can be challenging for vulnerable people who wish to keep aspects of their medical information private. This has been shown by the fact that this government have demonstrated their preference to be secretive with their own data with responses that they 'don't recall', but they want access to everyone else's data.

After so many lockdowns from this government in recent years, many Victorians will have many reasons to be concerned with this bill. In an age when many people have lost faith in this government to be fair in its ability to keep people's records and personal details private, there is no transparency to protect Victorians so they feel safe from being discriminated against. Some have lost faith in this government and their ability to protect all Victorians.

It is congruent with a Liberal Party value to have the freedom to protect personal beliefs and values, to maintain the right of the individual and protect personal details. This is essential for all Victorians to feel safe. So it is important that my colleagues and I fight this bill in its current form. All Victorians should be able to choose whether a person can have access to their personal health records. At a time when non-vaccinated people still suffer discrimination, why would they want their health record accessed by Victorian government authorities? Even vaccinated patients should have the fundamental human right to keep their own health records private.

I do not support this bill in its current form, because it does not permit Victorians the freedom to opt out or to opt in or to prevent unknown or undisclosed people from having access to their personal records. It is yet another draconian measure of this government, which would allow current Victorian government authorities to inappropriately use highly personal data, which should be permitted to be maintained as confidential for any and every Victorian, should they wish. Should there be an opt-out or opt-in clause, I would support the concept of allowing medical practitioners to access data for medical purposes, should the patient be prepared to share it. But I do not – will not – support this bill in its current form because it denies the individual the opportunity to protect their personal data from unknown, undisclosed government authorities.

Lee TARLAMIS (South-Eastern Metropolitan) (17:42): I move:

That debate on this bill be adjourned until the next day of meeting.

Motion agreed to and debate adjourned.

Adjournment

Harriet SHING (Eastern Victoria – Minister for Water, Minister for Regional Development, Minister for Commonwealth Games Legacy, Minister for Equality) (17:42): I move:

That the house do now adjourn.

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Greater Shepparton Secondary College

Wendy LOVELL (Northern Victoria) (17:42): (71) My adjournment matter is directed to the Minister for Education, and it concerns the dramatic decline in the number of students attending Greater Shepparton Secondary College (GSSC). The action that I seek is for the minister to conduct a full audit of the reasons students have left the college, including tracking students who left the college prior to graduation, to ascertain why there has been such a dramatic decline in student enrolments at the school since it was formed in 2020 and where these students have gone, to ensure they have not just been lost to education and employment altogether.

Stage 1 of the Andrews Labor government's *Shepparton Education Plan* saw the closure of four public secondary schools to create a single campus super-school that would immediately cater for up to 2700 students. In 2018 these four schools – Wanganui Park Secondary College, McGuire College and Shepparton High School – had a total student enrolment of 2645 students. The *Shepparton Education Plan* document clearly articulated that student enrolments at GSSC were predicted to grow year-on-year to reach 3117 by 2026. In fact the opposite has occurred, with the student enrolments at Greater Shepparton Secondary College steadily declining each year.

In an online article posted on 9 May 2021, Department of Education officials revealed the number of enrolments at the school was 2308, 337 less than the 2018 enrolments at the four former schools. I was reliably informed at the time that whilst the student number of 2308 was accurate in early 2021, a further 55 students had left the school by May 2021, leaving the official enrolment at 2253. Data in the department's website reveals that the official enrolment numbers for 2022 were 2163, but those with access to the data have told me that the numbers had fallen to around 2100 by late in the year. Whilst we have not seen official data for 2023, I have been informed that the student enrolments have further declined. Apparently on 2 February the school expected 2120 students at the start of the school year, but again those with access to the data claimed that on 20 February there were only 2081 students

and by 3 March the numbers had dropped even further to 2070. That is a drop of 11 students in just two weeks. There are now well over 600 students missing from the projected student numbers for the school. It is true that some will have gone to neighbouring towns or Catholic or independent schools, but the numbers for those schools do not account for over 600 students. An audit will identify where these students are.

Victims of crime

David LIMBRICK (South-Eastern Metropolitan) (17:45): (72) My request for action is for the Minister for Police in the other place. It was reported recently that there were more than 13,000 stalking-related offences last year in Victoria. I was honoured to meet recently with Dianne McDonald. You may recall Dianne was the subject of a two-part episode of *Australian Story* called 'To catch a stalker'. Dianne told me about the terrible ordeal she has been through as a stalking victim over many years. Dianne told me she found it difficult to get good support and advice about how to protect herself. My request for action is to provide data about the kinds of information and support that are provided to victims of stalking and how this is provided. My follow-up request is for the minister to meet with Dianne McDonald to discuss what can be done to provide better support for her and other stalking victims.

Ballarat level crossing removals

Joe McCRACKEN (Western Victoria) (17:46): (73) My adjournment matter is for the Minister for Transport and Infrastructure, and it relates to the level crossing removal program. The action that I seek is for the minister to roll out level crossing removals in Ballarat instead of solely focusing on metropolitan Melbourne. My constituents travelling in Ballarat face delays at level crossings when they are waiting for a train to pass. This not only is a major inconvenience but also has an impact on the productivity of local businesses. Busy crossings that could be upgraded include Gillies Street, Forest Street, Burnbank Street, Creswick Road and MacArthur Street. If you are around these level crossings at school times or during the after-work rush, it can be absolute bedlam, particularly given that many of these local crossings are near built-up areas where there are plenty of houses. What gets me is that of all the level crossings that have been completed so far, which the government likes to promote, none have actually been completed in Western Victoria. Those that are planned – and there are three of them in the Melton area – are scheduled to be completed by 2028, which is beyond this term of Parliament anyway. So why are regional people ignored? Why are we not as important as those in the metropolitan Melbourne area? Does the government care? I am not sure. I do look forward to the minister's response, sooner rather than later. Hopefully we can get level crossings removed in Ballarat in particular, because we are just as important as metropolitan Melbourne.

Duck hunting

Georgie PURCELL (Northern Victoria) (17:48): (74) My adjournment matter this evening is for the Premier, and the action I seek is for him to join me alongside Victoria's volunteer rescue teams on the opening day of his annual duck-shooting season on 26 April 2023. This government have been insistent in their support for the recreational slaughter of our native animals. It is their policy that sees our waterbirds wounded or killed in the name of entertainment, and it is their policy that forces volunteers to deploy wildlife rescue services and mobile vet clinics as well as monitor for shooter noncompliance.

Last year, at opening, shooters walked around illegally with unbroken guns while they harassed and threatened rescuers. Despite being removed from the game species list due to their declining population, it was only a few hours before volunteer vets were working to save their first blue-winged shoveler. As shooters continued firing, dozens of swans abandoned their nests, and scattered eggs were found floating on the water's edge. That same day, shooters were overheard bragging about shooting birds they did not retrieve as rescuers scrambled through dense reeds in desperate attempts to locate them. I was with a small team that spent hours following the cries of a wounded bird who had fallen from the sky into wetland grass so thick it was impossible to access. We never found her. As we

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walked hopelessly up and down the tracks, all I could think was: if duck shooters are required to retrieve the birds they wound, why then is shooting permitted on wetlands where this is not possible?

I had a similar thought as we watched shooters entering the water against warning from the EPA. The Wildlife (Game) Regulations 2012 require shooters to harvest at least the breast meat of the birds they shoot, but PFAS and blue-green algae contamination make birds on certain wetlands unsafe to eat. It is not possible to abide by the Wildlife (Game) Regulations while also following EPA warnings, so shooters decided to flout both. As the weeks go on, Indigenous sacred sites are decimated, with shooters removing scarred trees as firewood and leaving their rubbish and excrement behind. Genuine nature-based activities are put on hold as nearby residents are forced to listen to gunfire from morning through to night. Each year it is the job of unpaid and overworked animal responders and volunteers to monitor duck shooting, and yet each year they are ignored in their pleas to this government. It is time for the decision-makers to witness the carnage for themselves. In line with my calls to review the future of duck shooting in this state I hope the Premier can support my request.

Glen Huntly level crossing removals

Ryan BATCHELOR (Southern Metropolitan) (17:51): (75) My adjournment is for the Minister for Transport and Infrastructure. The action I seek is for her to facilitate a visit to the Glen Huntly level crossing removal. We know that every Victorian dreads the ringing sound of the boom gates coming down and the frustration that comes with it during the morning and afternoon peaks. I am pleased to say that in the last six years this government has removed 67 level crossings and has built and upgraded 37 train stations, easing congestion and making our roads safer and people's travel journeys more comfortable, with work still underway at more than 18 sites. Last year the Andrews government committed to removing 25 more level crossings by 2030, which is going to be a remarkable transformation of our transport network, meaning 110 dangerous and congested level crossings will be gone for good. This includes the two level crossings at Neerim Road and Glen Huntly Road, currently being removed in the Southern Metropolitan Region.

The Glen Huntly Road level crossing is one of the city's most dangerous, featuring one of the last remaining tram squares in Melbourne. Used by vehicles, trams and trains it is a cause for huge delays, particularly during peak hour, as the interaction between train and tram tracks increases the risk of tram derailment and requires trains to pass through at much lower speeds, meaning boom gates are down for even longer. Since 2016, 12 near misses have been recorded at the Glen Huntly Road level crossing, and 10 have involved pedestrians. With the level crossings removed the busy area will become safer and more accessible, reducing delays for drivers.

We are also building a brand new station at Glen Huntly. The old station is being replaced with a modern and safer facility with upgraded tram, cycling and car parking facilities, including accessible facilities for people with disabilities, making it easier and safer for all passengers. I think everyone in the community is looking forward to the new light-filled train station, and these two dangerous and congested level crossings are being fast-tracked for removal. Work is underway. Three thousand concrete piles are being laid right now to stabilise trenches, and a big dig will commence mid year. There is a very big tank being installed. Work is going to be completed in 2024, a year ahead of schedule. There will be unavoidable disruption and delay in the meantime, but it is going to be worth it. I want to thank the Caulfield and Glen Huntly communities for their patience as we get on with this very important infrastructure project.

Wombat Action Group

Melina BATH (Eastern Victoria) (17:54): (76) My adjournment debate this evening is for the Minister for Environment in this place. It is actually quite a disturbing one that I do feel uncomfortable with, but I feel compelled to raise it as an issue. It relates to an appalling social media post by so-called environmental group Wombat Action Group. The action I seek from the minister is for them to write a letter to the Wombat Action Group castigating its members for vilifying native timber harvester and president of the Victoria Axemen's Council Mr Brad Meyer and informing them that their group will

never receive government funding now or in the future. I also ask the minister to provide a copy of this letter to Mr Meyer.

In the past 30 years Brad Meyer has spent no less than 200 days working on the fireground, protecting life and property, protecting our native forests, protecting our communities and protecting flora and fauna, livestock and human life. He has used his specialised equipment and harvesting machinery and regularly put his own life on the line accessing and opening up vital links for first responders, opening up local roads and cutting down dangerous trees. This man also fought the fires in 2003, 2009 Black Saturday and 2019–20 Black Summer, to name a few.

Enter the Wombat Action Group, who feel elitist and entitled enough to denigrate Brad for their own amusement. Their Facebook shows – and I will not produce it, but it is here – a naked muscular torso holding a koala, with Brad's head superimposed on the body. This is from 27 February. This is a disgraceful personal attack. And why? Because he is the president of the Victorian Axemen's Council, who want to preserve a 140-year-old tradition of accessing logs for timber for a competition. The quote from them is:

It's a satirical attack on ... his ridiculous opinions.

Apparently now we cannot have opinions. If they differ from somebody else's, they are ridiculous opinions. This is not the hallmark of a responsible environmentalist group; it is the hallmark of a group that think they know better. I believe that we should stand up against these sorts of people, and I call on the minister to do so. Brad's commitment to preservation of public and private forests over 30 years is nothing short of heroic, and this is a disturbing image for him to have to endure.

North East Link

John BERGER (Southern Metropolitan) (17:57): (77) My adjournment matter is to the Minister for Transport and Infrastructure in the other place, Minister Allan. I recently received a briefing on the North East Link Program, where I heard of its massive scale. It will connect the heavily congested Eastern Freeway to the M80 ring-road, providing a much-needed alternative for motorists. It will cut travel time on the Eastern Freeway to the city by 11 minutes and, by diverting trucks, significantly decrease traffic on the Monash. These alternative improved transport links will increase the ease of access for businesses in my own region of Southern Metropolitan Region to customers and suppliers across Melbourne. This will stimulate economic growth in the region, generating business opportunities and creating jobs. Let me say that again: the construction of the North East Link Program will create thousands of jobs both directly and indirectly, with 10,000 of those jobs alone being local. This will provide a vital economic boost for the region, and importantly the jobs created will be available to people from a range of different backgrounds and skill levels. The North East Link Program will require a wide range of skilled workers, including engineers, surveyors, architects, construction workers and project managers. And in good news for those entering the workforce, these jobs will be open to workers of all levels of experience. It will provide a great opportunity for our state to build our next generation of industry leaders.

Importantly to me, many of these sites will be unionised. The benefits of unionised work are clear: better pay, better security and better conditions. Thanks to the improved pay and conditions, unionised workers stimulate the local economy. It is simple: when workers earn more, they spend more. With more money in their pockets for businesses, they create more jobs and so on and so forth.

Finally, the North East Link Program will improve the livability of the Southern Metropolitan Region by reducing congestion, improving transport connections and putting new green spaces in Balwyn North. Reduced congestion will make it easier for people to get to work, school and other important destinations. It will reduce the amount of time that people spend sitting in traffic, something that is linked to massive increases in stress.

The project is all part of the Andrews Labor government's Big Build, something I am very proud to support. So my question to Minister Allan is: what are the other benefits that the North East Link

Program will provide to Southern Metropolitan Region that I may not have heard about in this briefing, and will you join me in visiting the southern part of the project in the constituency of Kew?

Ravenhall prison construction

David DAVIS (Southern Metropolitan) (18:00): (78) My adjournment matter tonight is for the attention of the Treasurer Mr Pallas, and it relates to a firm called RPR Trades. The managing director Darren Da Costa has written to me several times, as he has written to the Treasurer. In fact going back as far as May last year he was in communication with the Treasurer seeking to deal with the many issues that are faced by his firm. It is a recruitment and labour hire business, and it incurred a significant debt while supplying labour to the Ravenhall construction project in 2021. Their client CellCon Australia went into voluntary liquidation and, as per the liquidator's report, had accumulated debts owing to RPR Trades Pty Ltd of almost \$650,000 for work carried out on the Ravenhall project. The size of the debt is obviously very significant for a small business, and it has impacted its viability.

I asked questions in the chamber last year about this, but the issue still continues. This phoenix-like firm that has dragged down the one that I am referring to, RPR Trades, is a firm headed up by John Dorning, who is the business and development manager now at Advance Steel Manufacturing. I notice that this fellow Mr Dorning has appeared at a different location in Queensland involved in actually showing his factory off and showing the supply of material to a number of people. He is out there on LinkedIn posting excitedly, but still the debt remains to the earlier firm, and that is the issue here.

Ms Pulford, as minister, was asked to assist with this because this is a small business, but I am aware of the correspondence with the Treasurer. Mr Da Costa in a communication to me on 27 June pointed out a whole series of problems, and the problems as I say continue right up to the present day with a communication on 1 March. He said that as things currently stand RPR Trades is one of many businesses owed substantial debts on the Chisholm Road prison project and that to his knowledge the previous owner of the CellCon business that went into liquidation, John Dorning, remains the beneficiary of a highly suspicious business sale and is happily ensconced in a phoenix arrangement at Advance Steel Manufacturing in Brisbane, doing exactly the same products and services that the former CellCon did, and that he even has the gall to gloat about it. What I ask the Treasurer to do is contact RPR and actually try to solve their problem and work with them to get a fair outcome so that they are paid for the work that they undertook with respect to this state government project.

Western Victoria Region level crossing removals

Bev McARTHUR (Western Victoria) (18:03): (79) Tonight is the night for level crossing removals, I can tell you. I have just got to follow on from my eminent colleague Mr McCracken, who has identified the problem we have got outside the tram tracks of Melbourne. Now, you are busy removing level crossings in Melbourne – I think it is going to total about \$30 billion by 2030 you are so busy removing them inside the tram tracks – but give us a break. Out in country Victoria we need some level crossings removed.

My adjournment matter is for the Minister for Transport and Infrastructure, and it does relate, as I said, to level crossing removal. The action I seek is for her to get on down and remove some level crossings in – where are we going to? – Swanston Street, Kilgour Street and especially McKillop Street in Geelong, but we are also going to Lara. We need level crossings removed in the fine electorate of Lara. Unfortunately it is held by your side of the sticks, so they will never get one removed there. You need to get with the strength over the other side. Anyway, we need the Lara electorate one which is in St Georges Road and North Shore Road removed.

We have really got to look at having level crossings removed. If you can do it in \$30 billion inside the tram tracks of Melbourne, what about poor old country Victoria? I am sure Ms Bath would have a few. You have a few down your end of the state. Mr Mulholland has got them. Probably they are all in the City of Yarra somewhere; it is amazing they have not got removed. Ms Broad will have some up in the north, won't you. Look, we have all got level crossings.

A member: Diamond Creek.

Bev McARTHUR: Diamond Creek. Let us have Diamond Creek – throw that into the mix. We badly need you to start focusing on level crossing removals outside the tram tracks of Melbourne. Give us a break – get rid of our dreadful road infrastructure. You know, you cannot fix a pothole.

Evan Mulholland: They put in a flowerbed.

Bev McARTHUR: We are doing horticulture in your roads because you just cannot simply fill the potholes. There are community gardens now happening in roads in Mr Mulholland's electorate. The Minister for Transport and Infrastructure needs to get with the strength and get out to country Victoria, and if you are going to remove every level crossing in Melbourne you had better get some removed in country Victoria.

Recycal

Nicholas McGOWAN (North-Eastern Metropolitan) (18:06): (80) My matter is for the Minister for Environment, and the action I seek is for the minister to provide a brief to this place with respect to a waste transfer facility that is well known to locals in my district or electorate. It is the Heatherdale Road waste transfer facility operated by the company Recycal.

I was fortunate some two weeks ago to receive a community group – the Heatherdale Community Action Group. Their members have for quite some time engaged not only with the local planning authority and the local council but also the EPA. They have been very diligent in their efforts. They are concerned because the facility that I have raised this evening is one that was subject to action by the EPA. They are very keen to understand what actions have happened since a particular incident. It was reported at the time, and it was reported in the *Age* newspaper. The headline read, 'Stockpile of flammable, explosive waste found near homes and major highway'. That was on 8 April 2021. At that time the journalist noted that only after the journalist actually contacted the EPA, some five months after the EPA's initial inquiries, it appeared – and I say 'appeared' – that they actually conducted further investigations into the facility.

As members here would be well aware, there have been a number of high-profile fires throughout metropolitan Victoria, where substances of a very concerning and indeed alarming nature have gone up in flames. It displaces the communities. This particular facility runs along EastLink and abuts residential properties, so it is a matter of absolute importance for the local community that I represent. They have emphasised to me that they have been thwarted, prevented from investigating and in their dealings with the EPA have a number of matters that remain outstanding. I for one would be very appreciative if the minister could provide, as I have asked, this place with a brief in respect to not only what the EPA have done in the past but what actions they have taken, if any.

Councillor conduct

Evan MULHOLLAND (Northern Metropolitan) (18:09): (81) My adjournment tonight is for the action of the Minister for Local Government, and I call on the minister to reject an attempt to gag free speech by publicly elected councillors in Victoria. It is not a wacky idea but a dangerous one.

I know we have been speaking about local government today. The minister is being urged by a crowd called Local Government Professionals, or LGPro, to apply fines or suspensions for up to three years for what is considered councillor misbehaviour and misconduct, but their gripe seems to be in what they deem unruly or rowdy councillors. If someone were upset by something someone said, an arbiter would be appointed to investigate and dish out penalties. According to the submission now with the minister:

Arbiters should be empowered to suspend a Councillor from office for up three months in the event of misconduct.

And:

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Councillor Conduct Panels should be empowered to suspend Councillors for up to three years -

or in fact determine if that –

... Councillor is ineligible to remain in office for the balance of the Council term.

What is more, they reckon consideration should be given to dishing out fines as a sanction, hoping that it basically acts as a deterrent.

My problem with such penalties is that they can be used to gag or stymie political opponents by other councillors. We have seen this movie before. Councillors have seen this arbiter process weaponised, mostly actually not by the Labor Party but by Greens members, in what are clearly political partisan tactics. In one case a councillor in –

David Davis interjected.

Evan MULHOLLAND: Well, I'm getting to that. In one case a councillor in Stonnington, Alexander Lew, was ordered to go to social media and behaviour training after a spat with the council, like some kind of re-education camp. But we have to look into this LGPro organisation. Two of the four executive members of this organisation, I wonder what council they come from; that would be right, the Greens-controlled City of Yarra Council, who are at the moment attempting to sneak through a bin tax that they ruled out at the election. They are trying it again. We have already seen examples where Yarra are restricting ratepayer questions, holding fewer council meetings and preventing councillors from talking to the media.

We are seeing across Victoria these green-tinged councils setting up media and communications Star Chambers. Those opposite will know the Premier's private office acts in a similar way to prevent speaking. But these Star Chambers – we cannot allow this mission creep to take hold. Like elected representatives in this place, it is incumbent on us to allow councillors to act on behalf of their community – to fearlessly act on behalf of their community. I call on the minister to shut the door on this ridiculous proposal.

Tarneit Senior College

Trung LUU (Western Metropolitan) (18:12): (82) My adjournment matter is for the Minister for Education. The action I am seeking is the allocation of appropriate funds for the much-needed sports oval at Tarneit secondary college. Once again, evidence of lack of care for our schools in the west continues. I had the opportunity to visit Tarneit secondary school during the week. I was appalled to see the lack of planning and proper funding for students' welfare at the school. It is a new campus, completed in 2012 to be precise, and right in front of me was a large block of vacant land fully fenced off. The school own this allotment, yet it is still sitting there vacant, with no funds given for the development. The school tries to manage and cater for its students, with one soccer pitch and an unshaded courtyard to accommodate 1100 students when the school bell rings for lunch and recess as students pour out of the classroom – let alone the projection of new students to double in years to come.

The school is doing what it can, opening indoor areas so the students can have space to stretch their legs and recharge their minds after sitting in a classroom for hours, but urgent funding is needed to help what it is desperately lacking, which is open space — in this case a much-needed sports oval. Let me say it again: the school's block of land has been sitting there vacant since 2012. Can the minister please outline in her response why the money has been sitting in the government's coffers and not been provided for a school that desperately needs it to ensure their students' wellbeing and social development, in this case Tarneit secondary college. So my question is: can the Andrews Labor government please allocate appropriate funds for this much-needed sports oval at Tarneit secondary college?

Electricity infrastructure

Gaelle BROAD (Northern Victoria) (18:14): (83) My adjournment matter is directed to the Minister for Energy and Resources. The action I seek is that the minister guarantees to set up a proper public consultation process and face-to-face meetings with the people of western and northern Victoria, areas affected by the last-minute addition of a proposed new route for the high-voltage powerline between Victoria and New South Wales. If you will pardon the pun, this has come as a complete shock for these communities. The Australian Energy Market Operator, AEMO, is due to start work early on the project, known as VNI West. The scheme would see a high-capacity overhead line connecting the Western Renewables Link at Ballarat with the new terminal station near Jerilderie in New South Wales. Residents had been led to believe the KerangLink was the preferred option. This would have followed the existing powerline easement from Bendigo through Prairie to Kerang. However, the last-minute addition of so-called option 5 follows a totally different footprint – towards St Arnaud and Pyramid Hill.

It wanders through a range of farming communities over such a wide area it is hard to pin down where it will actually go. Some locals believe the government has simply taken the route of least resistance. Sadly, given the importance and scope of this project there has been minimal consultation with residents and councils. This is a complete change of direction for this multibillion-dollar project. There is no detail and only a few short weeks for consultation, currently closing on 5 April. I attended a briefing with AEMO at the Murray River Group of Councils in Echuca last week, and it was evident that they would like the time frame for public consultation extended. I also commend the *Loddon Herald* for standing up for the communities in this area and bringing this issue to the forefront of people's minds. Again I ask that the minister guarantee she will extend the public consultation period and set up a proper consultation process with the affected communities on this very important issue.

Responses

Harriet SHING (Eastern Victoria – Minister for Water, Minister for Regional Development, Minister for Commonwealth Games Legacy, Minister for Equality) (18:16): I am almost tempted to request that somebody else do an adjournment, because we have hit lucky 13 today. We have adjournment matters this evening from Ms Lovell to Minister Hutchins; from Mr Limbrick to Minister Carbines; from Mr McCracken to Minister Allan, Deputy Premier; from Ms Purcell to the Premier; from Mr Batchelor – a fine, fine adjournment – to the Deputy Premier; from Ms Bath to the Minister for Environment; from Mr Berger to the Deputy Premier; from Mr Davis to the Treasurer; from Mrs McArthur – we can always count on you – to the Deputy Premier; from Mr McGowan to the Minister for Environment; from Mr Mulholland to the Minister for Local Government; from Mr Luu to the Minister for Education; and from Ms Broad to the Minister for Energy and Resources. Thank you, President – 13 in total.

The PRESIDENT: The house now stands adjourned.

House adjourned 6:17 pm.