



QUESTION TIME
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LEGISLATIVE ASSEMBLY
FOR THE
AUSTRALIAN CAPITAL TERRITORY

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Questions without notice

Bimberi Youth Justice Centre—safety

MR COE: My question is to the Minister for Disability, Children and Youth. Minister, in yesterday's statement you belittled and intimidated complainants and staff by stating that this discussion is about "unsubstantiated allegations" and "recent sensationalist headlines". On 8 July, an Amnesty International spokesperson is quoted as saying that "ultimately that comes back to the ACT government and [Ms Stephen-Smith] about taking seriously any allegations of child abuse and ensuring independent investigations are undertaken". Minister, is the *Canberra Times* report of 8 July about another assault of a youth worker an example of "unsubstantiated allegations" and "recent sensationalist headlines"?

MS STEPHEN-SMITH: I thank the Leader of the Opposition for his question. I made it clear both in my statement yesterday and on radio yesterday afternoon that the particular allegations that I was referring to related to allegations of drug use and allegations of organised fighting within Bimberi. As I said in my statement yesterday, the Community Services Directorate has not found any evidence to support such allegations; neither has it received any evidence to support such allegations.

I have also said repeatedly that if people have evidence to support such allegations, they should absolutely bring that evidence forward to the Community Services Directorate, to ACT Policing or to the Human Rights Commission so that such allegations can be investigated. We take all of these allegations very seriously. But I also have a responsibility to consider the wellbeing of staff and young people in Bimberi and their families. So I did make the point that repetition of allegations that the directorate has repeatedly said it has no evidence to substantiate is harmful to morale at Bimberi and is harmful to the families of the young people in Bimberi.

MR COE: Minister, what mechanisms are in place for staff and young people to pass on allegations or evidence about crimes or potential crimes that have taken place at Bimberi?

MS STEPHEN-SMITH: I thank the Leader of the Opposition for his supplementary question. As I said in my statement yesterday and have repeated on a number of occasions, official visitors are in Bimberi on regular occasions. Last financial year, official visitors visited Bimberi on 46 occasions. They are there to speak to the young people in Bimberi so that the young people can raise any concerns that they have about their treatment or about the way Bimberi is managed. They also engage regularly in conversations with staff at Bimberi, and staff are of course free to raise their concerns with the official visitors.

The Public Advocate is also a regular visitor at Bimberi and is an avenue for people to raise concerns, as is the Human Rights Commission. If people have concerns about potential criminal activity at Bimberi, they can and should raise those with ACT Policing also. And there are a range of staff consultative mechanisms as well. Young people are welcome at any time to raise concerns with the management of the Community Services Directorate, the senior management at Bimberi or, going above that, the CSD executive.

I also note, as I did yesterday, that there are a number of organisations that visit Bimberi regularly. There are people in there from community sector providers and from ACT Health and, of course, the teachers and educators at the Murrumbidgee Education and Training Centre. All of those people would be appropriate avenues for young people to raise concerns through, and they would have the opportunity to raise those with the directorate.

So there are multiple avenues; multiple external people entering Bimberi all the time. That is why it concerns me when allegations are repeated that no other evidence has been brought forward to support.

MRS KIKKERT: Minister, why has it taken so long for you to respond to issues at Bimberi, despite complaints from staff, the CPSU, more than 20 questions in question time and media reports?

MS STEPHEN-SMITH: I fail to see how it has taken “so long” to respond to issues. I have made two statements in this place updating members on the implementation of the blueprint for youth justice and its success in reducing the number of young people involved in the youth justice system. I have been transparent about staff training activities that have taken place. I have answered every question that I have been asked in this place. I, my office and the directorate have responded to numerous media inquiries in relation to Bimberi.

All incidents that have occurred have been appropriately recorded, are being reviewed and are being responded to. As I said in earlier statements, there are also mechanisms for staff to raise their concerns, including staff consultative committees of which the union is a participant, and we welcome the union’s feedback and input in terms of what it is hearing from its members as well.

Women—health services

MS ORR: My question is to the Minister for Health and Wellbeing. Minister, how does the government ensure that the specific healthcare needs of women are being met?

MS FITZHARRIS: I thank Ms Orr for the question. The ACT government has worked hard over many years to build a comprehensive program of health services and facilities that address the health needs of women and children. One of those, of which this government is particularly proud, is the Centenary Hospital for Women and Children which brings together comprehensive and diverse services, including maternity services, the birth centre, neonatal intensive care, gynaecology and foetal medicine, paediatrics and specialised outpatient services.

As part of this work to make sure we have a range of healthcare options available to suit the diverse needs of patients across Canberra, we are also currently delivering a home birth trial and have recently appointed two endorsed midwives who care for their patients privately in the prenatal period and admit them for delivery at the Canberra Hospital.

We have also designed an early intervention program for early detection of pregnancy-related depression during the antenatal and postnatal periods and made available counselling services for women who may need them. With responses to situations of violence often creating significant financial and social disruption to women and children, the ACT government's women's health service offers free nursing, medical, nutrition and counselling services, particularly to vulnerable women in the ACT and region.

To support families where there is alcohol and drug abuse and/or domestic violence, we recently commenced a pilot project to bring together ways to support women and children in these challenging situations. These essential services are characteristic of Labor governments and our efforts to make sure we respond proactively to all the health needs of our community.

MS ORR: Minister, given that Women's Health Week is coming up from 4 to 8 September, how is women's health supported in the ACT?

MS FITZHARRIS: Women's Health Week, indeed, is coming up in just a few weeks and it a great opportunity to raise awareness of women's health issues in the community. We know from statistics that those social determinants of health mean that women carry a significant proportion of the health burden. The ACT government has a range of ongoing initiatives in place to try to address these issues in the short, medium and long term, some of which I outlined in my previous answer.

One example I would like to draw members' attention to is the cervical cancer screening program that has been developed. ACT Health also offer the HPV vaccine to reduce the incidence of cervical cancer as well as breast screening for early detection amongst Canberra women. We all know the benefits of preventative health care, and these are just a couple of examples of how we are ensuring that screening and immunisation contribute to women's positive health outcomes.

The ACT government also provides funding to the Women's Centre for Health Matters for important work to improve women's health and wellbeing through the provision of information, education and advocacy, health promotion, social research, community development and capacity building. We also know that some of the major contributors to poor health for women are physical inactivity, obesity, high blood pressure, high cholesterol and smoking. We need to continue to improve women's understanding of health issues, and heart disease is just one example of this. I also note the opposition's failure today to accept that they need to have any policy on women's sexual and reproductive health.

MR PETTERSSON: Can the minister update the Assembly on progress on budget initiatives that will support women's health care in the ACT?

MS FITZHARRIS: I thank Mr Pettersson for his supplementary. I am very pleased that through this budget the ACT government has invested \$70 million to expand the Centenary Hospital for Women and Children, to become an even greater centre of excellence in women's, youth and children's health care. This expansion will respond to the significant growth in our community and in demand experienced recently, as well as future demand over the next 10 years for women's and children's health

services.

The expansion will be both to the physical asset as well as through increased service delivery capacities. We will provide additional maternity beds and, importantly, additional staff to care for women during their pregnancy, birth and, importantly, into the post-natal period. Over the next four years detailed planning and design of the expansion will be undertaken by ACT Health, as well as commencing construction to deliver these new services in the Centenary hospital.

Since becoming the Minister for Health and Wellbeing, I have been approached by many young women and their families about the significant burden of having to access adolescent gynaecology services outside Canberra. So we will be expanding services at the Centenary hospital to provide dedicated adolescent gynaecology services. I have also had many discussions in the community about depression and anxiety in young women and I know that Minister Rattenbury and I together will be very keen to see the expanded adolescent mental health services at the Centenary Hospital for Women and Children, including a dedicated inpatient ward.

Canberra Hospital—risk assessment report

MRS DUNNE: My question is to the Minister for Health and Wellbeing. Minister, on ABC Radio this morning you said that you saw the AECOM report “a couple of months ago”. In the Chief Minister’s claim of executive privilege over this document and other documents he indicated that cabinet had made decisions informed in part by the AECOM report in April 2016. He claimed that these documents were prepared for cabinet. You were a member of cabinet at that time. Minister, when exactly did you see the AECOM report for the first time?

MS FITZHARRIS: I thank Mrs Dunne for the question and the opportunity to clarify and comment on remarks she made in the Assembly prior to the lunch break. It is certainly my recollection of the interview this morning that I was asked as minister, “When did you first see the AECOM report?” I responded on ABC Radio this morning that I saw it just a couple of months ago.

It is the case that I was a member of cabinet but not the responsible minister when the cabinet made the very important decision to act on that report well over 12 months ago. I want to be really clear that the government did the right thing and acted on the findings of this report over 12 months ago.

MRS DUNNE: Minister, when you first saw the AECOM report, what was the highest priority for government to address?

MS FITZHARRIS: I thank Mrs Dunne for the follow-up. As I also indicated in my remarks earlier today regarding your motion, there were four high priorities in the AECOM report, and those four highest priority items were funded in last year’s budget initiative. One has been completed; one has had proactive maintenance and been downgraded in its risk rating; another is expected to be completed in the next couple of months; and the final one, the electrical switchboard, has been the subject of much discussion and was the subject of an extensive ministerial statement I gave in this place in May this year.

MR WALL: Minister, what did you do as a member of cabinet to advocate for the priorities highlighted in the AECOM report when it first came before cabinet?

MS FITZHARRIS: I thank Mr Wall for the follow-up question. I did what all members of cabinet did: I supported the budget initiative—which was in last year’s budget—which funded the priority actions from that report. Again, I would like to be very clear that this report informed last year’s budget initiative to upgrade and maintain ACT Health infrastructure.

I did what every member of cabinet did, and that was to well and truly support the highest priority items. In fact I believe—and I will correct the record if I am not correct—that there were 149 items identified in the AECOM report that last year’s budget initiative addresses. Every member of the cabinet was very clear that we needed to respond to the highest priority items identified in the AECOM report. That is exactly why the government took the decision in last year’s budget to fund the upgrades to health infrastructure. If the opposition have only recently discovered that the government made a nearly \$100 million commitment to upgrading health infrastructure, then that is something for them to reflect on.

Housing—homelessness

MS LE COUTEUR: My question is to the minister for housing and relates to women, children and men experiencing homelessness. Minister, yet again in the media today we heard about people sleeping in cars. This was based on the information from the organisers of Safe Shelter for homeless men. What advice does government and its funded provider, OneLink, give to homeless people, particularly women with or without children who are sleeping in cars?

MS BERRY: I thank the member for the question. I had sought advice again, and I am advised regularly about people who might be sleeping rough in the ACT and the kinds of support available to them. I checked again late last night and early this morning following reports from organisations like Safe Shelter that people were being turned away from accommodation in the ACT. I was advised after I contacted OneLink that there are and have been two vacancies at Samaritan House for men who are experiencing homelessness, so they have not been turning away anyone as was reported by the media today. OneLink and Housing ACT have crisis accommodation available, in the case of women and children who might have experienced domestic and family violence, for temporary accommodation until medium to longer term accommodation can be sought for them.

Sometimes when people might be arriving into the ACT at different times of the evening or early in the morning it might not be possible at that moment in time for Housing ACT to provide that accommodation, but the Domestic Violence Crisis Service can also provide crisis accommodation immediately. Refuges in the ACT also can provide short-term crisis accommodation at the time when the crisis occurs.

MS LE COUTEUR: Minister, when will you release data about service demand, in particular for the number of people that OneLink are aware of who are sleeping rough or sleeping in cars because they cannot access accommodation services?

MS BERRY: Data on housing in the ACT is available from Housing ACT on vacancies and applications that are made for housing in the ACT, and it is publicly available.

Ms Le Couteur: On a point of order, I did not ask about Housing ACT. I asked about the people that OneLink knows about. She did not answer the question.

MADAM SPEAKER: Did you have anymore to add or have you concluded your answer?

MS BERRY: I think there are around 1,700 people in the ACT who have applied for housing. Around 800 of those people are on standard applications. Around 800 are on high needs. Then there are around another 30 who are on priority.

Ms Le Couteur: On a point of order, I asked specifically about OneLink.

MADAM SPEAKER: Ms Berry, can you provide any response around OneLink's data?

MS BERRY: OneLink is working very closely with each of those organisations, more than any other housing provider in the country ever has, and knows individually the needs of each of those individual families and seeks to make sure that they are supported in different ways. Providing information on individuals would not be appropriate.

MR PARTON: Can the minister please detail the support that the ACT government provides to Safe Shelter?

MS BERRY: I thank Mr Parton for the question. Safe Shelter have never requested any support from the ACT government for the service that they provide. However, my office, Housing ACT, St Vincent de Paul night patrol and OneLink are also able to provide support to clients that Safe Shelter might come across. We have encouraged Safe Shelter to put those people who are using Safe Shelter for crisis accommodation in touch with those services so that their needs can be best supported.

Canberra Hospital—procurement

MR MILLIGAN: My question is to the Minister for Health. It relates to the procurement process for selecting the contractor for replacement of the main electrical switchboard in building 2 at the Canberra Hospital. Minister, in your answer to question on notice No 295, you said that expressions of interest for replacement of the switchboard were called on 24 March 2016 and closed on 28 April 2016 and attracted six respondents. In your answer, you also said that on 9 June 2016 a short list was approved. Then you said that a decision as to the successful tenderer was made on 15 December 2016 and communicated to that company the next day. Minister, how many expression of interest respondents were on the short list approved in June 2016?

MS FITZHARRIS: I thank Mr Milligan for the question. I do not have that with me. I will take the question on notice.

MR MILLIGAN: Minister, why did you allow one month for potential contractors to submit expressions of interest but gave yourself two months to develop a short list and then a further six months to decide on the successful tenderer?

MS FITZHARRIS: I would note that I was not the responsible minister at the time. I certainly understand that this, as in all—

Mrs Dunne: Yes, you were.

MS FITZHARRIS: In March 2016 I was not the Minister for Health.

Mrs Dunne: On 15 December 2016, you were.

MADAM SPEAKER: Mrs Dunne.

MS FITZHARRIS: Madam Speaker, I am attempting to answer the question. It is certainly my understanding that procurement processes were followed, and throughout that period. There are a number of different stages in each procurement process, and it is certainly a process that directorates undertake themselves. I will see if I can provide more detail to the Assembly on the specifics of Mr Milligan's question.

MRS DUNNE: Minister, what discussions took place with expressions of interest respondents during the process of compiling the shortlist and then deciding on the successful tenderer, and were those discussions disclosed to other respondents to the respective processes?

MS FITZHARRIS: I will take the question on notice.

ACT Health—policy framework

MR WALL: My question is to the Minister for Health. Minister, I refer to your statement on policy reviews in the Assembly yesterday. You said, and I quote, "I have asked, in conjunction with Minister Rattenbury, as the Minister for Mental Health, for ACT Health to provide to us a fuller explanation of the range of policies that ACT Health is responsible for." Minister, why do you not already understand the range of policies that ACT Health is responsible for?

MS FITZHARRIS: I believe that the context of the question was about the significant number of policies that ACT Health was responsible for in terms of strategic policy. Of course, as the minister responsible I am informed of those. There are many other clinical guidelines within ACT Health that go to support ACT Health and their accreditation process at the Canberra Hospital.

ACT Health will be providing me with a full list of those. It would not be normal practice for a minister to be aware of every single guideline and policy within each directorate, particularly one as complex and subject to specialist clinical guidelines, which I note should not be the purview of ministers. They should be the purview of clinicians.

MR WALL: Minister, did your incoming minister's brief explain a range of policies that ACT Health is responsible for? If not, why not?

MS FITZHARRIS: Certainly my incoming government brief gave me a range of information about the activities and priorities of ACT Health. As I indicated in my response to the previous question, health is a large and complex portfolio. I think that in my response yesterday I spoke about both specific policy and specific guidelines. There are many within Health. They would not always be in the purview of ministers to be fully aware of.

MRS DUNNE: Minister, when will you and Minister Rattenbury receive this explanation, and will you table it in the Assembly on the first day after it is received?

MS FITZHARRIS: I have asked Health to provide me that advice as soon as possible. I have not determined a final date with them, but I expect to continue this discussion with them over the coming weeks.

Minister for Health and Wellbeing—drug treatment briefing

MS LEE: My question is to the Minister for Health and Wellbeing. I refer to an article in the *Canberra Times* of 26 July this year in relation to a report on opioid treatment options that is five years overdue. You stated:

ACT Health has not briefed me directly on this matter.

Minister, before last week had ACT Health briefed anyone in your office about the five-year delay to the report, and what explanation did your directorate give for its oversight on this matter?

MS FITZHARRIS: I thank Ms Lee for the question. Not to my knowledge, in my office. As I have indicated previously this week, one of the reasons for the delay in reviewing the guidelines was the development of national guidelines which will inform, and have informed since those national guidelines were put in place, ongoing clinical treatment. I reiterate that the advice to me from Health is that the national guidelines and the existing ACT guidelines provide sufficient guidance to clinicians in their daily work.

I have expressed my disappointment with Health that these reviews were not undertaken in a timely way. They have assured me this week that they will be finalised within the next six weeks.

MS LEE: Minister, were you briefed, in your capacity as the then Assistant Minister for Health, about the delays to the report last year?

MS FITZHARRIS: No, I was not.

MRS DUNNE: Minister, did you seek any briefing on methadone treatment after the overdose of the prisoner at the AMC last year?

MS FITZHARRIS: I did receive a briefing after that incident last year.

Government—safer families policy

MR PETTERSSON: My question is to the Minister for the Prevention of Domestic and Family Violence. An important commitment of the safer families program of work was to co-design and pilot a family safety hub. Minister, can you provide an update on how this work is progressing?

MS BERRY: I thank Mr Pettersson for the question. Tackling domestic and family violence has been a key priority for the ACT government. We have been doing things differently than we have ever done before, and we are expecting the whole community to join with us and help us with this work. The co-design of the safety hub is progressing with considerable work already now being undertaken. The co-design has begun with a whole lot of engagement with services and the users of those services to understand the true needs of families who have been experiencing violence. This has included many discussions and workshops and a series of insights and walkthroughs to feed back what we have heard or identified as key issues and feedback. These insights will directly inform the design of the hub.

A number of groups who face particular barriers have been prioritised. They include: Aboriginal and Torres Strait Islander women and families; culturally and linguistically diverse women and families; lesbian, gay, bisexual, transgender, intersex and queer communities; women with a disability; and young women with lived experience of violence in their families.

My office will soon be inviting all members in this place to a further series of walkthroughs in the coming weeks. I hope that everybody will be able to participate in these sessions as it gives a very good illustration of how complex it is to solve this issue in our community and the work the co-ordinator-general, Jo Wood, is doing in the development and co-design of the safety hub.

MR PETTERSSON: Minister, how are you engaging with stakeholders and interested parties, and who are they?

MS BERRY: I thank Mr Pettersson for the supplementary. A core design team comprising government and non-government members, including specialist family violence services and people with lived experience, are driving the design and the development of the hub. The team brings a depth of expertise and experience in different relevant areas. In addition, a critical friends network, including representatives of services who work with priority cohorts, is providing input towards the design of the hub.

Over 50 front-line workers, including workers from across family violence, legal, health and children's and other community services, provide an input through interviews and focus groups during the consultation phase of the hub's co-design. Twenty people with lived experience of domestic and family violence have also been interviewed during the consultation phase, including women who have experienced violence and men who have used violence.

These important consultations are directly contributing to the design of the hub and will result in real change for our community in how we respond to this issue into the future.

MS CHEYNE: Minister, how will this new hub benefit our community?

MS BERRY: I thank Ms Cheyne for the supplementary question. The aim of the family safety hub is to link existing support services in the ACT to ensure that Canberrans receive seamless, integrated and holistic support when it matters most.

The hub has been rigorously researched, including through the use of services' and service users' insights. The detailed insights being gathered will directly inform its design. Questions have been asked like "How might we work with the whole family, not just the victim and the perpetrator?" and "How might we better coordinate ACT government services to provide a value add to non-government services?" There are also questions like "How might we break through the barriers for people to access the service they need?" and "How might the design of the hub have a safety focus and not a crisis focus?" The insights include identifying a need for early intervention responses, understanding that some people experiencing domestic and family violence are seeking options to end violence that do not involve family separation, and understanding that some people fear a response when they engage with the system.

The final hub pilot design will be the result of a highly consultative co-designed process to which all key services and a range of service users have provided input. The hub pilot will be evaluated to ensure that desired outcomes are being achieved. The pilot will be refined, pending the results of the evaluation process.

ACT Health—opioid treatment review

MR DOSZPOT: My question is to the Minister for Corrections. Minister, I refer to an article in the *Canberra Times* of 25 July 2017 in relation to a review of the guidelines governing opioid maintenance treatment in the ACT. This review was scheduled to be completed in 2012, but five years later it has still not been completed. On ABC radio on 27 July 2017, you stated that ACT Health had dropped the ball in its handling of this review. Minister, who is ultimately responsible for this review being five years overdue?

MR RATTENBURY: Yes, those are comments that I made. It is disappointing that this work has not been done. It is a fact—I have also said this publicly—that ultimately the Minister for Health has responsibility for these guidelines but I have also been very clear, given my interest in corrections, that we will jointly work together on making sure that this gets dealt with. It needs to be done.

What I have also been very clear to say—in the interview on ABC the other day I made this point very clearly—is that Justice Health has not stood still during this five year period. As the Minister for Health has very clearly explained today, these are overarching guidelines. Beneath that, operational practices are updated continually. I can inform the Assembly, as I have informed the public through my media interviews, that a range of improvements have been made by staff at the operational level to the methadone program at the Alexander Maconochie Centre.

These have been the results of quality improvement activity throughout 2016-17. I am happy to detail to members what those particular improvements are but they go to issues of staff training, they go to issues of the timing of delivery of methadone and the like. So I think it is very important to be clear that while the guidelines have continued to be the 2012 guidelines, operational practices have been updated in that time frame.

MR DOSZPOT: Minister, would adopting the national guidelines governing opioid maintenance treatment be the best course of action?

MR RATTENBURY: I think Mr Doszpot has asked me for an opinion on a matter on which I do not claim to be an expert.

MRS DUNNE: Minister, did either of the deaths in custody that have occurred at the AMC trigger the realisation that this review was five years overdue?

MR RATTENBURY: As Mrs Dunne knows, both of those matters are before the coroner at the moment. In terms of drawing any conclusions, that is not something I am in a position to do. I believe that this matter came about as a result of inquiries by a journalist. Whether that journalist's interest was triggered by those issues is not for me to answer; Mrs Dunne would need to ask the journalist that question.

Crime—motorcycle gangs

MADAM SPEAKER: A question from Mr Hanson.

MR HANSON: Thank you, Madam Speaker. May I say that it is a delight to have you back after the reign of terror of Mrs Dunne yesterday.

My question is to the Attorney-General and relates to organised criminal gang activity in the ACT. Attorney-General, the *Canberra Times* editorial of 19 July 2017 stated:

As matters stand Canberra is now viewed by some as a safe haven for these gun-wielding thugs who have fled across our border to avoid being persecuted elsewhere.

The Human Rights Commissioner stated on 29 July:

We are no longer a one-gang town and there has been inter-gang violence recently, so in principle to prevent such behaviour new laws may be necessary.

That was in relation to a discussion on anti-consorting laws following the release of the Canberra Liberals' exposure draft. Attorney-General, do you accept the Human Rights Commissioner's position that we are no longer a one-gang town and new laws may be necessary?

MR RAMSAY: I thank the shadow attorney-general for his question. I made comments yesterday, in answer to a similar question, about a number of things that the government is already committed to. I draw the attention of the shadow attorney-general to the statement by the Chief Minister yesterday which outlined the

legislation program in spring, which includes new laws in relation to outlaw motorcycle gangs.

Mr Hanson: Madam Speaker, a point of order on relevance.

MADAM SPEAKER: Please resume your seat, Attorney.

Mr Hanson: The question and the statements relate to the need for new laws, specifically relating to anti-consorting laws, not the list of other laws. So that was a nice try. But are new laws, as in the anti-consorting laws, necessary, which is what the Human Rights Commissioner was referring to?

MADAM SPEAKER: Thank you, Mr Hanson. You have some time left to come to the point of the question, Attorney.

MR RAMSAY: I note that the focus of the comments was in relation to outlaw motorcycle gangs and how it is that we can best address those. Regarding the way that we can best address those, the government has been clear, and I said it yesterday, that we will make decisions on the basis of evidence. The evidence is not strong in relation to anti-consorting laws. I again draw the attention of the Assembly to the fact that, in relation to the laws that have been used as the model by the shadow attorney-general for the bill that he is considering at the moment, there has been a report that has looked at the effectiveness and efficiency of those, and the report has recommended that those laws be repealed. This government will work in the area of evidence-based decision-making. We will look at new laws. A range of new laws is being considered. Anti-consorting laws are not one of those.

MR HANSON: Attorney-General, how many more shootings or other acts of violence will need to occur across Canberra suburbs before you will follow the lead of New South Wales and other jurisdictions and introduce anti-consorting laws?

MR RAMSAY: The government is working with the Chief Police Officer at the moment for the introduction of effective laws rather than laws that have been found in reports to be not effective. So we will be looking at areas of anti-fortifications laws, we will be looking at crime scene powers, as the Chief Minister highlighted in his speech yesterday. We will focus on ensuring that Canberra is safe. We will do it in a way that is effective.

MR STEEL: Minister, why do anti-consorting laws not work?

MR RAMSAY: I thank Mr Steel for his supplementary question. I again draw the Assembly's attention to the report that I mentioned yesterday. It is a very helpful report for people who have been thinking in the area of anti-consorting laws because the New South Wales Ombudsman has worked through a range of areas. It has said that the laws are ineffective, the laws do not work, the laws do not create a structure that policing in this state and New South Wales or in other states are able to use effectively, and because of that the recommendation is that they be repealed.

In addition, I note that the Ombudsman's report outlines and provides evidence to support, again, that anti-consorting laws are likely to criminalise behaviour by other

groups of people that would not otherwise be criminal. The focus on those and those human rights laws is important for us. We will be progressive. We will take the way of ensuring that we are based on evidence and effectiveness.

Bimberi Youth Justice Centre—ministerial response

MRS KIKKERT: My question is to the Minister for Disability, Children and Youth. Minister, when serious allegations were raised in the *Canberra Times* on 4 July 2017 about alleged drug use and a lack of staff training at Bimberi, why did you avoid the media for much of the day?

MS STEPHEN-SMITH: I thank Mrs Kikkert for her question but, as I am sure she knows, I did actually speak to the media that day. But also the directorate made available the executive director who has operational responsibility for these matters. He was in a position to answer journalists' questions in detail, as he did, including, for example, talking about the program of periodic drug screening at Bimberi, which is one of the reasons why he could confidently assert that the drug-screening program has not identified issues around drug use in Bimberi. So we made available expertise, and I also fronted the media.

Ms Lawder: Point of order.

MADAM SPEAKER: Point of order, Ms Lawder.

Ms Lawder: My point of order goes to relevance. The question related to why the minister avoided the media for much of the day. It was not referring to the executive director.

MADAM SPEAKER: At the very beginning of that answer I heard the minister say she responded to the media. So there is no point of order.

MRS KIKKERT: Minister, given that under the Ministerial Code of Conduct a minister should fulfil their obligation to the highest standard, why did you pass on your responsibility to the executive director of children, youth and families to be in the position of having to respond to the media to questions about your ministerial responsibilities?

MS STEPHEN-SMITH: I thank Mrs Kikkert for her supplementary question. As she is well aware, I was elected to this place in October last year. The executive director who has responsibility for these areas has been in place for a significantly longer period than I have and was in a position to speak with authority about the operation of Bimberi over a longer period of time.

I also was happy to make myself available to the media when I was available. I, my office and the directorate have repeatedly answered questions from the media. I have been on radio a number of times in relation to Bimberi, I have answered questions in this place and I have made two statements in this Assembly. I absolutely reject any aspersion that I may be neglecting my role in relation to this matter.

MS LEE: Minister, if as you have stated in your previous answers the executive

director was in a better position to answer these questions from the media than you, what made you change your mind and eventually face up to the media in the afternoon?

MS STEPHEN-SMITH: I thank Ms Lee for her supplementary question. The executive director turned up and answered a wide range of detailed questions from journalists which required a level of background detail. I also talked to the media. I was obviously briefed in relation to those matters. I speak with the knowledge that I have from the briefings and the information that is available to me. In making both officials and ministers available to be able to provide answers is actually a sign of the level of transparency that we are committed to in this portfolio.

Bimberi Youth Justice Centre—assault statistics

MR PARTON: Madam Speaker, my question is to the Minister for Disability, Children and Youth. Minister, yesterday in question time you took on notice the question of how many assaults by detainees on other detainees had occurred at Bimberi in 2016-17, saying that you have asked your directorate to prepare a standard report on KPIs for Bimberi. Following yesterday's question time, did you ask your directorate for the number of assaults by detainees on other detainees at Bimberi in 2016-17 and, if so, what is that number?

MS STEPHEN-SMITH: I thank Mr Parton for his question, but actually I did not take that question on notice. In response to that question, I repeated what I had said in my ministerial statement that I have asked the directorate to prepare a report of key indicators for Bimberi that are more extensive than just one or two individual numbers that can be tabled on a regular basis as part of our commitment to the transparent operation of our youth justice system. As I said then and I will say now, when those figures are available for 2016-17 that report will be tabled.

MR PARTON: Minister, why have you not asked for assault data before now; and why is it seemingly so difficult to compile?

MS STEPHEN-SMITH: I reject the premise of the question.

MRS KIKKERT: Minister, why have so many current and former staff risked their livelihoods to blow the whistle on problems at Bimberi?

MS STEPHEN-SMITH: I thank Mrs Kikkert for her supplementary question. I am not in a position to speak to the many reasons that individuals may have for speaking to journalists about any matter.

Bimberi Youth Justice Centre—assaults

MRS JONES: My question is to the Minister for Disability, Children and Youth. Minister, I refer to your report on youth justice tabled yesterday in which you noted that during the 2015-16 period there were eight incidents of detainees assaulting other young people in Bimberi. How many of these assaults were referred to ACT Policing?

MS STEPHEN-SMITH: I thank Mrs Jones for her question. I will seek confirmation,

but my understanding is that in each of these cases referral to the AFP is a fairly usual part of the process in relation to these incidents. But I will take on notice whether every one of those incidents was individually referred.

MRS JONES: Minister, how many of these assaults on young people were committed by detainees 18 years and older?

MS STEPHEN-SMITH: I will take the question on notice.

MRS KIKKERT: In the past two years how many detainees have been transferred to adult corrections after they assaulted another young person at Bimberi or because they were determined to pose that threat?

MS STEPHEN-SMITH: I thank Mrs Kikkert for her supplementary question. I gave quite a detailed answer to the Leader of the Opposition some time ago about the circumstances under which young people are transferred to AMC. I will take the detail of that question on notice but there are a range of matters that need to be taken into account in considering whether or not a young person should be transferred to AMC.

Budget—community legal centres

MR STEEL: My question is to the Attorney-General. Can the minister give some detail about which organisations will receive funding through the community legal centres package in the 2017-18 budget?

MR RAMSAY: I thank Mr Steel for his question. This budget shows, indeed, our government's commitment to a justice system that is accessible, that is timely and that is transparent. Early this year I met with a number of our CLCs and I heard how the uncertainty of their funding was impacting on the services they provide. For example, Canberra Community Law warned that with the planned commonwealth cuts up to 200 people could go without important legal help. Thankfully the commonwealth reversed its policy, but in reversing its cuts the commonwealth provided funds only for specific programs and it did not provide funds for core funding for existing services. That meant that for core services funding remained uncertain.

That uncertainty has real impacts, which I heard about in the meeting with the CLCs. The Women's Legal Centre explained how the uncertainty of ongoing funding makes it difficult to hire and retain lawyers as short-term funding means short-term employment. Street Law pointed out that with a history of year-to-year funding it has only ever been able to plan services for people on the basis of having help to the end of the year.

The \$2.4 million in funding that was provided in this budget will be supporting our CLCs to give them certainty. This budget will provide four years of funding for Canberra Community Law, four years of funding for Street Law and four years of funding for the Women's Legal Centre. We will be providing two years of funding to the Environmental Defenders Office. This budget directly responds to the concerns that our CLCs have had about being able to serve this community well.

MR STEEL: What sorts of new programs for vulnerable people will be available to the community with this funding?

MR RAMSAY: I thank Mr Steel for his supplementary question. The CLCs will use the certainty that is provided in this budget to support some of the most vulnerable people in our community. For the first time in its seven years of operation, Street Law will have recurrent funding. Street Law is a service that helps people who are homeless or at risk of homelessness to address their legal problems and to get their lives back on track. Prior to this budget, Street Law had only ever been funded one year at a time. But this budget means that Street Law can engage in long-term service planning and give certainty to their clients over the next four years.

Services to help Aboriginal and Torres Strait Islander people in Canberra will be strengthened through this budget. The Women's Legal Centre will use this funding to grow its Aboriginal and Torres Strait Islander Women's Access to Justice Program. This service focuses on the legal issues, including family and domestic violence, faced by many women in our community.

Canberra Community Law will have recurrent funding to progress its Aboriginal Human Rights Program beyond the seed phase. This is a dedicated program for Aboriginal and Torres Strait Islander people. It is a direct response to calls for more culturally appropriate services.

The core funding for the CLCs in this budget means more programs for women, for families and for Aboriginal and Torres Strait Islander members of the community. It means that the community legal centres can hire ongoing staff and even build up more expertise to keep serving our community over time.

MS ORR: Minister, are you aware of the reactions and response by CLCs regarding the funding?

MR RAMSAY: I thank Ms Orr for the supplementary question. Indeed, as we may expect, the feedback from our community legal centres has been overwhelmingly positive. Following the announcement in this year's budget, I was invited to tour the local CLC hub to get a first-hand look at what CLCs do, and to hear about their plans for the funding.

The hub is a single location that houses Canberra Community Law, the Women's Legal Centre, Street Law, and the Tenants Union. The hub makes it easier for people to access the range of services available. It also brings together a community of people who share an enthusiasm for service. It was a privilege to visit the hub and to hear the level of excitement about what the new funding would allow.

This budget empowers the dedicated staff of our CLCs to continue to help people to have a voice in the legal system. CLCs help people to understand the legal process and to ensure that their rights and interests are protected. Our legal system is fairer and better serves the people who most need its protection as a result of the hard work of the CLCs.

Support for legal assistance is one of the ways that we can ensure that those who are

marginalised are fully included in our society. I commend the CLCs for their contribution to building a society that is safer, stronger and more connected. This year's budget will support a group of dedicated, hardworking professionals to build on their services for women, for Aboriginals and Torres Strait Islanders and for people across Canberra who are facing challenges in life.

Bimberi Youth Justice Centre—safety

MS LAWDER: My question is to the Minister for Disability, Children and Youth. Minister, when will you stop making unsubstantiated allegations about the media, which is actually doing your job for you in exposing dangerous conditions in Bimberi for staff and young people?

MS STEPHEN-SMITH: I thank Ms Lawder for the question but I am not aware that I have made any allegations about the media.

MS LAWDER: Minister, when will you stop attacking staff and detainees for speaking up about the dangerous conditions in Bimberi?

MS STEPHEN-SMITH: I thank Ms Lawder for the question. I would note that I have repeatedly encouraged anyone who has any concerns or any evidence of wrongdoing within Bimberi to report that to the directorate, to ACT Policing, to the Human Rights Commissioner, to the official visitors, to any of the official bodies who actually have the capacity to investigate those allegations. We do that because we take all of these allegations incredibly seriously.

The wellbeing of children and young people and staff at Bimberi are our number one priority. But I will stand up for the staff at Bimberi who work every day in a difficult and challenging environment to support the rehabilitation of some of the most vulnerable young people in our community. Those staff deserve the support of the Canberra community. They do not deserve to have—

Mr Coe: You don't think we do?

MS STEPHEN-SMITH: Your behaviour does not indicate that.

MRS KIKKERT: Minister, when will you stop hiding behind endless bureaucratic responses that fail to address the dangerous conditions in Bimberi?

MS STEPHEN-SMITH: I thank Mrs Kikkert for her ongoing interest in Bimberi. I know that she has taken the time to go out and visit Bimberi Youth Justice Centre. I know that she took the time to play basketball with some young people while she was there. I understand that she has a genuine interest in the wellbeing of the young people at Bimberi.

But I reject the premise of her question. I have sought on every occasion to be transparent. That is why I have asked the directorate to prepare a new report with indicators that will be tabled on a regular basis. I want to be as transparent as I can be about the operation of our youth justice system.

There will be times when we cannot talk about the details of incidents, either for the privacy of young people or to protect the staff in terms of procedural fairness. But I am absolutely committed to being as transparent as I can be about the operation of our youth justice system, and I will maintain that commitment.

Children and young people—government support

MS CHEYNE: My question is also to the Minister for Disability, Children and Youth. How will the government's record investment in child and youth protection services and A step up for our kids deliver better services to vulnerable children and young people in Canberra?

MS STEPHEN-SMITH: I thank Ms Cheyne for her question. This government is proud to continue investing in services that protect our most vulnerable children and young people and provide them with a safe home. In the 2017-18 budget the government committed an additional \$44 million over four years to support our child protection system. This major funding initiative reflects the government's priority to provide better support when it matters to our children and young people and to their families.

For child and youth protection services this means the establishment of two new case management teams. More case managers working on the front line will allow child and youth protection services to provide a timely response to struggling families and the ability to harness the service system to support families to parent safely.

Some \$34 million over four years will fund the government's ongoing commitment to delivering on our reform strategy, A step up for our kids. This strategy aims to ensure that families are supported where possible to stay together and parent safely in their own home or to restore children to home when it is safe to do so. When it is not safe to restore children to their families or for them to stay with their parents, the strategy aims to achieve permanence in a timely manner. We are continuing to invest in our community partners who work with us to support these children and their families and to provide more therapeutic placement options for children who cannot live at home.

Our community partners are helping us to reform the out of home care system, and this funding is evidence of the Barr Labor government's commitment to a long-term program of change that will deliver better outcomes for Canberra's children and families.

MS CHEYNE: Minister, what else is the government doing to enhance quality assurance and support improved decision-making for vulnerable children and young people in Canberra?

MS STEPHEN-SMITH: I thank Ms Cheyne for her supplementary question. Madam Speaker, the 2016-17 budget, as you would be aware, provided \$2.47 million over four years for enhanced child protection case management and coordination. This involved building stronger analytical capacity inside child and youth protection services, as well as stronger independent oversight external to CYPS. \$1.9 million established a specialist case analysis team comprising a team leader and four child protection experts. Case analysis explores the risks and vulnerabilities related to a

child's safety and whether there are sufficient protective factors to mitigate these vulnerabilities.

The practice themes elicited from each case analysis are collated and used to inform the training priorities for staff and the development of practice guidance, policies and procedures. A further \$562,000 was invested in developing a quality assurance mechanism with members who are independent of CYPS.

The Child and Youth Protection Quality Assurance and Improvement Committee has been established by the director-general to strengthen the quality of child protection practice in the ACT and to foster ongoing improvements in the child protection system. Its membership includes two child protection experts from other jurisdictions who are able to offer a fresh perspective on ACT processes.

I also recently announced an independent review of Aboriginal and Torres Strait Islander children and young people in the child protection and out-of-home care systems, as we seek to address one of the most serious challenges for child protection, not just in the ACT but around Australia.

This review will examine case planning for Aboriginal and Torres Strait Islander children and young people known to ACT child and youth protection services. It will be conducted by a team led by skilled Aboriginal and Torres Strait Islander people with experience in child protection and will work alongside the Child and Youth Protection Quality Assurance and Improvement Committee.

MR STEEL: What can members of our community do to be part of the implementation of A step up for our kids and support vulnerable children and young people in need of safer environments?

MS STEPHEN-SMITH: I thank Mr Steel for his supplementary question. Foster carers and kinship carers are the backbone of our out of home care system. Carers open their hearts and their homes to the most vulnerable children and young people in our community. Since becoming minister I have heard many stories of how caring has transformed people's lives; not just the kids who receive love, support and a more stable life but also the carers.

Through a step up for our kids, the ACT government funds a consortium of out of home care providers—ACT Together—to provide trauma-informed, therapeutic care options to support children and young people in need of care. ACT Together have set themselves an aspirational goal of recruiting 80 more foster carers. This will assist in providing the best possible match for children and young people when they come into care. But for that goal to be achieved, ACT Together and the ACT government would like all Canberrans to consider what role they can play in supporting vulnerable children and young people in need of care. ACT Together holds regular information sessions for anyone who is interested in becoming a foster carer.

There are various types of fostering, from short-term emergency care and respite care through to longer term options including the potential for adoption. Every carer can make a big difference to the life of a child or young person. Canberra is a supportive and caring community in which we can all play a part in looking after the next

generation of Canberrans.

We are stepping up for our kids but we can always do more. That is why we have established the independent oversight, both by the committee I referred to earlier and the ministerial council monitoring the implementation of A step up for our kids. I encourage everyone to get involved in a positive way.

Mr Barr: I ask that all further questions be placed on the notice paper.