



QUESTION TIME
OF THE
LEGISLATIVE ASSEMBLY
FOR THE
AUSTRALIAN CAPITAL TERRITORY

HANSARD

Edited proof transcript

Tuesday, 8 May 2018

This is an **EDITED PROOF TRANSCRIPT** of question time proceedings that is subject to further checking. Members' suggested corrections for the official Weekly Hansard should be lodged with the Hansard office (facsimile 02 6205 0025) as soon as possible. Answers to questions on notice will appear in the *Weekly Hansard*.

Tuesday, 8 May 2018

Questions without notice:

Hospitals—waiting times	1
Answers to questions on notice—costs.....	1
Hospitals—waiting times	2
Centenary Hospital for Women and Children—complaints	3
Economy—growth	4
Centenary Hospital for Women and Children—complaints	5
Centenary Hospital for Women and Children—complaints	6
Planning—Curtin master plan.....	8
Visitors	8

Questions without notice:

Planning—Curtin master plan.....	9
ACT Health—governance.....	9
ACT Health—workplace culture	10
Education—future strategy	11
Calvary hospital—alleged bullying	13
Disability services—grants	14
Hospitals—discharge policy	16
Canberra Hospital—accreditation.....	17
Arts—funding	17

Questions without notice

Hospitals—waiting times

MR COE: My question is to the Minister for Health and Wellbeing. Minister, I refer to an FOI request published online showing that one-third of paediatric patients are waiting longer than clinically recommended for elective surgery. The government's target is zero per cent of people waiting longer than the clinically recommended time. Why are one-third of paediatric patients waiting longer than clinically recommended times for elective surgery?

MS FITZHARRIS: Because they have not yet been able to access elective surgery. But as I outlined in my statement earlier today, the government's \$6.4 million investment this year to complete additional elective surgeries in this current financial year includes a focus on adult and paediatric general surgery.

MR COE: Minister, what information have you received from your directorate about the effects of long wait times for paediatric surgery on the health and development of these children?

MS FITZHARRIS: No particular advice other than broad advice around the government's efforts to increase access to elective surgery for Canberrans. That is why, as I have mentioned on a number of occasions, there has been a \$6.4 million investment to bring down elective surgery wait times in this current financial year.

I would note that all national performance indicators measure performance on hospitals based on full financial year figures. Those full financial year figures are not yet available because the financial year has not yet concluded.

MRS DUNNE: Minister, how many children in Canberra are waiting for a year to see a specialist before they get on the official waiting list?

MS FITZHARRIS: I will take that specific question on notice.

Answers to questions on notice—costs

MS LE COUTEUR: My question is to the Chief Minister and relates to the new practice of including time and cost accounting at the bottom of answers to questions on notice. When and why did this practice begin? Are the totals going to appear in annual reports?

MR BARR: Yes, the government has put in place this additional reporting of the cost of compiling answers to questions on notice. The timing is roughly in line with the new requirements under FOI for the publishing of a whole variety of pieces of information. The government felt that in that spirit it would be appropriate to have an estimate of the dollar cost based on the amount of time it takes to answer those questions.

MS LE COUTEUR: Given what you said, is this practice going to extend to other areas of provision of government information like fix my street inquiries, freedom of

information requests and constituent correspondence to ministers?

MR BARR: In a number of those areas, yes, costings are and were previously standard practice, particularly in relation to FOI, for those who, under the old arrangements, would not automatically have an entitlement to receive information for free. It is simply a recording and accountability measure. Generally speaking, people are in favour of more data being publicly available.

MR COE: Chief Minister, if questions are not lodged from this place, does that mean that these people would be sacked, or are these in fact sunk costs?

MR BARR: The ACT government directorates maintain a large number of staff for whom the vast majority of their time is spent responding to questions on notice.

Hospitals—waiting times

MRS DUNNE: My question is to the Minister for Health and Wellbeing. On 15 August 2017 you advised the Assembly that “Canberra Hospital emergency department waiting times are coming down”. On 15 February this year you advised the Assembly that the Canberra Hospital emergency department waiting times were headed in the right direction. However, a report received through FOI shows that only 44 per cent of people who presented to the Canberra Hospital emergency department from July 2017 to February 2018 were seen on time. This compares to the target of 70 per cent and to the 61 per cent who were seen on time up to February 2017. Minister, why were only 44 per cent of people who presented to the Canberra Hospital emergency department seen on time? This is well below the target and well below the achievement for the same time last year.

MS FITZHARRIS: I note that the information provided in the FOI was year-to-date information. As I said earlier, it is generally the case that these figures are reported over the full financial year, so some of these figures relate to the previous year. I note, with the previous year, that at the end of each year data is subjected to a verification process. It certainly goes through a verification process before that information is provided to our national partners for presenting financial year information.

As I said it is certainly the case that there have been general improvements in emergency department wait times at the Canberra Hospital. I mentioned that earlier. That has been the case over a number of years. Last year we saw the worst flu season since 2009. That happened right across the country. Therefore the average for the year was worse than that of the previous year because of a significant increase in presentations in our community.

The initial advice to me was that, following a very bad flu season, we might expect to see a more normal flu season approaching. This year, in the first quarter, we have already seen a doubling of those people who have notified as having the flu. That is one contributor to increased demand as well.

The unprecedented winter season last year saw an increase in the number of people presenting to ED. It is also the case that the rate of people presenting to the ED has doubled over the previous two years. It concerns me that only 44 per cent of patients

on average were seen within the clinically recommended time. It concerns me even more for category 3 patients. (*Time expired.*)

MRS DUNNE: Minister, what was the basis of the advice that you gave on 15 August 2017 and on 15 February 2018 that data was heading in the right direction if, from your previous statements in answer to the question, you were saying essentially that the data that was released to the ABC was not worth a cracker?

MS FITZHARRIS: I did not say that. I based it on the fact that each year between 2015-16 and 2016-17 emergency department performance had improved.

MR COE: Minister, why did you advise the Assembly that waiting times are coming down and were headed in the right direction as of 15 February when this was clearly not the case, and will you now correct the record?

MS FITZHARRIS: I advised the Assembly that, based on financial year performance, ACT Health performed better in 2016-17 than it did in 2015-16. In the current financial year, 2017-18, our performance did lift briefly after the winter season last year. What we have already seen in the first quarter of this year is a decline in that performance. We will await the final full financial year's performance to see how we have tracked across the financial year.

Centenary Hospital for Women and Children—complaints

MS LAWDER: My question is to the Minister for Health and Wellbeing. I refer to reports in the media of 26 April 2018 about a letter sent to you by midwives at the Centenary Hospital for Women and Children. The letter says:

It is frustrating and upsetting to feel so helpless in such a poorly managed and impossibly busy work environment, unable to provide the care we know we should and feeling consistently exhausted physically and emotionally. The negative effects on patients and staff are seen daily. It is only a matter of time before there is an adverse outcome for a mother, baby or staff member.

Minister, why are the lives of mothers and babies at the Centenary Hospital for Women and Children being put at risk in a poorly managed, understaffed and overworked environment?

MS FITZHARRIS: The letter was sent to a media outlet and copied to me and quite a long list of other people and organisations. Immediately on receipt of the letter, ACT Health followed up. They held a number of staff forums to openly discuss the issues raised in the letter.

It was certainly of enormous concern to me. Subsequent to that letter having been received, I have visited the Centenary hospital. I have also met with senior staff from the Centenary hospital and been briefed on the number of challenges facing Centenary hospital at the moment due to increased demand. There are a range of things that the government is doing to address that demand both at Centenary hospital and at Calvary Public Hospital in Bruce.

It is the case that in addition to that there has been an open letter from the executive

director of the Centenary Hospital for Women and Children addressing the issues raised. That is publicly available and has been circulated to the community and to the media in the city.

It is also the case that I note that doctors from Centenary hospital wrote a letter to the *Canberra Times* which was published just this past weekend about the issues but making it very clear that in their view they were appropriately managing the demand at Centenary hospital. Their clear view is that care is safe and of a high quality and every decision to treat a woman and her baby at Centenary hospital is based on clinically sound decision-making.

MS LAWDER: Minister, who should the people of Canberra believe: you or the staff at the Centenary Hospital for Women and Children?

MS FITZHARRIS: Staff have spoken publicly on a number of occasions about this, as I have just outlined.

MS CHEYNE: Minister, are you confident that maternity services are safe?

MS FITZHARRIS: I am confident that maternity services are safe. I have spent quite some time at the Centenary hospital in the past couple of weeks, making sure that we are doing everything we can to continue to invest in maternity services for our city. There are more and more women having babies every day, which is wonderful, but we need to make sure that we make the right investments and are fully using the capacity that we have across the city. Clinical staff at Centenary hospital have assured me on a number of occasions that the service is safe.

Economy—growth

MS CODY: My question is to the Chief Minister. Chief Minister, what does the latest data show about the performance of the ACT's economy?

MR BARR: I thank Ms Cody for the question and I am very pleased to be able to advise the Assembly of some very positive economic data for the territory.

As we have discussed before, our gross state product grew by 4.6 per cent in the last full fiscal year, which was the strongest growth of any state or territory. A particularly strong contributing factor there was 6.5 per cent growth in service exports from the ACT. Our state final demand grew by five per cent in the fiscal year 2016-17, and a strong contributing factor there was 7.5 per cent growth in private investment in the territory economy.

Our residential population is either the fastest or second fastest growing, depending on which period you measure. The most recent data from the ABS shows population growth of 1.8 per cent. In September 2017—going back about six months now—the territory's population was 412,617 according to the ABS.

Pleasingly, unemployment is either equal to the lowest or the second lowest in the nation. That has come off the back of very strong growth in the labour market. Pleasingly also, there was a significant lift in the participation rate, at 72.1 per cent—

one of the most engaged communities in the workforce.

More recent data in the housing market shows that building approvals, residential approvals, increased by 58.2 per cent through the year to March 2018. And talking of buildings and home ownership, the most recent data shows that first homebuyers made up more than 25 per cent of total housing loans in the ACT. That is significantly higher than the national average.

MS CODY: Chief Minister, how is our continued growth translating into more jobs for Canberrans?

MR BARR: Over the last 12 months 10,600 new full-time jobs were created in the ACT. The share of Canberrans working full time is currently at the highest level it has been at for more than three years. It is encouraging to see that the local economy's growth is also creating opportunities for young people and for women. Women's workforce participation is up over a percentage point compared with this time last year, which means that more than 3,700 additional women in our city are in work. At the same time there are almost 1,000 fewer Canberrans aged between 15 and 24 who are unemployed now compared with a year ago, despite our overall population growth.

We have seen jobs created across a range of sectors as diverse as professional and scientific services, retail, transport and human services. This means there will continue to be even more opportunities for Canberrans from a diverse range of backgrounds to find a good job in our city.

MR STEEL: Chief Minister, what are the government's priorities to sustain and expand the territory's economic growth?

MR BARR: We will continue our strategic investment in services and infrastructure to keep the city moving and productive. We are investing \$3 billion over the next four years on key capital projects, particularly in transport, in education and in health. This will help Canberrans move around our city more quickly and access high quality services locally.

We are also investing in a range of areas that will enable further economic growth: better connections with our region and the world, stronger partnerships between our local firms, and more promotion of what Canberra has to offer as a place to study, to visit or to invest. Next month's territory budget will continue to build on this work and ensure that the benefits of this economic growth are shared by all Canberrans.

Centenary Hospital for Women and Children—complaints

MRS KIKKERT: My question is to the minister for health. I refer to reports in the media of 26 April 2018 that midwives and nurses wrote a letter to you raising a number of concerns. The letter said:

Due to the lack of available beds, women and babies are discharged home inappropriately early with feeding, pain or health concerns ... Babies are often re-admitted ... due to excessive weight-loss as a direct result of being sent home early due to hospital capacity ... Staff are unable to provide adequate breastfeeding support in the brief period they are in the hospital and Midcall, the hospital

postnatal home visiting service has been substantially reduced.

Why are women and babies discharged home inappropriately early with feeding, pain or health concerns from the Centenary hospital due to a lack of available beds?

MS FITZHARRIS: As I indicated previously, the letter was sent from a staff member at Centenary hospital. As I have also indicated, I would encourage members opposite to read the extensive open letter from Centenary hospital and the letter written on behalf of doctors to the Canberra community published in last Saturday's *Canberra Times*.

MRS KIKKERT: Minister, why are babies having to be readmitted to the Centenary hospital due to excessive weight loss as a result of problems with the capacity of the Centenary hospital?

MS FITZHARRIS: It is the advice to me, and also I believe referenced in the open letter, although I do not have that immediately in front of me, that that is not the case.

MRS DUNNE: Minister, are you denying that women are discharged early, that babies are having feeding problems and that women discharged early are having pain management problems? Despite what has been said publicly, are you denying that that is the case and are you denying that there are inadequacies in the amount of breastfeeding support provided to new mothers?

MS FITZHARRIS: No, I am not denying that. What I am saying is that there has been extensive feedback from the staff and the leadership at Centenary hospital and the doctors at Centenary hospital. It is certainly the case that there may be a number of women having breastfeeding difficulties. I have experienced it myself. It may in fact go on for a number of weeks.

It is the advice to me that women are only discharged when it is clinically safe to do so, and that the medical service which provides midwifery and nursing care to women upon discharge is being offered. That may be a daily visit for a number of days or a weekly visit for a number of weeks, when that mother and her baby will then also receive follow-up care from the maternal and child health services, from ACT Health as well.

There are a range of supports for women when they are discharged from Centenary hospital. The clear advice to me from Centenary hospital is that women are only discharged when it is clinically safe to do so. There is a Midcall service available which may follow up and visit women daily or every couple of days for a period after their discharge and also services provided through maternal and child health.

It is also the advice to me that, with respect to the number of readmissions across the board, we are not seeing any increase, but I do not have those precise figures in front of me right now.

Centenary Hospital for Women and Children—complaints

MR WALL: To continue on a theme, my question is to the Minister for Health and Wellbeing. Minister, I refer to reports in the media on 4 May 2018 about mothers at the Centenary hospital facing problems with delays in being admitted for inductions or

receiving epidurals, overcrowding, lack of communication with staff, and poor management and morale. One mother said, “With my labour it’s like trying to fit a triangle into a circle, they applied the guideline to me and my daughter nearly died.” Why are many expectant mothers giving birth at the hospital facing delays in being admitted for an induction or receiving epidurals?

MS FITZHARRIS: I certainly noted some of the experiences of some women reported in the *Canberra Times* this week. I was, of course, concerned to read of their experiences. I also know that every woman’s experience in labour is different. I repeat again, as has been said publicly by doctors and senior staff at Centenary hospital, that decisions are clinically sound. Decisions will only be based on clinically sound decision-making and they provide a safe and high quality service.

I acknowledge that there is increased demand and that on a very busy day, because babies do not always come when they are planned to come, as most parents in this room will know, those processes are managed responsibly. There is within the Centenary hospital a maternal escalation policy extending the hours of the maternity assessment unit, rostering additional doctors and midwives, introducing assistance in midwifery to maternity services and, as I mentioned earlier, doubling the number of graduate midwives coming in this year. Also, there is a policy that involves referring women to the most appropriate ACT or New South Wales hospital.

There are a range of measures in place. I repeat again: I have been informed by clinicians, by lead clinicians at the Centenary hospital, that decisions will only be made based on clinically sound decision-making.

MR WALL: Minister, why is the Centenary Hospital for Women and Children having problems with high-risk pregnancies?

MS FITZHARRIS: It is not the advice to me that there are significant problems. In answer to four questions in a row I have outlined quite extensively that the advice to me from clinicians—which we have heard from the opposition this morning they respect—is that Centenary hospital is a safe and wonderful place to have a baby. Decisions made there by clinicians are clinically based.

MRS DUNNE: Minister, how will three extra beds in Calvary’s maternity unit meet the increased workload resulting from population increases and your plan to redirect pregnant women from the Centenary hospital?

MS FITZHARRIS: It is one of the ways that we might better manage maternity services here in the ACT. When a minister is faced with capacity that is increasing at one facility and decreasing at another, in quite significant numbers, it is not appropriate to have wonderful staff—nurses, midwives, doctors—at Calvary hospital wishing to treat women in our community, wishing to be able to work with women and their families so that more women can give birth at Calvary Public Hospital.

One of the ways that we are doing that is by increasing investment in the facility, because many women have given feedback over a number of years now that one of the key reasons they would like to attend Centenary is the quality of the infrastructure. Calvary is currently under capacity and we want to change that.

Planning—Curtin master plan

MR STEEL: My question is to the Minister for Planning and Land Management. Minister, can you outline to the Assembly the consultation currently underway to finalise the Curtin group centre master plan?

MR GENTLEMAN: I thank Mr Steel for his question and his interest in the Curtin community. The ACT government is finalising the master plan for the Curtin group centre. The master plan draws on the centre's existing strengths and outlines a vision, planning principles and strategies to guide growth and development in the centre. It identifies what is important about the centre and how its environmental, social and economic sustainability can be enhanced. The master plan is being finalised with input from the community and stakeholders, including traders and lessees and the ACT government directorates.

Community engagement is an important part of the master plan process. People who live or work in or near the centre, or who use the area, have valuable knowledge to contribute to the planning process. Community involvement is essential in helping to develop a successful and achievable master plan. I encourage anyone interested to visit the your say site to review the plans and provide their feedback. Community engagement will close on Wednesday, 6 June this year.

MR STEEL: Minister, can you inform the Assembly of the community panel consultation undertaken that has informed the development of the Curtin group centre master plan?

MR GENTLEMAN: The community panel process, held from July to November last year, has greatly helped with developing a way forward to finalising the Curtin group centre master plan. Three community panel meetings were held to discuss the development and redevelopment opportunities for the group centre. This process was designed to bring the developers and community together, to look for shared outcomes. The panel format facilitated discussion on the future of the group centre with representation from the community, lessees, owners, young people, developers and government.

The panel meetings were framed around the master plan process, development proposals, infrastructure—things that make the area special to the community and businesses in the group centre. At the third and final community panel meeting, revised master plan diagrams were presented by the ACT government for consideration and discussion by panel members. The community panel meetings provided a positive forum for open discussion about the future of the Curtin group centre.

Visitors

MADAM SPEAKER: I acknowledge that in the chamber we have the pleasure of the company of the President of the New South Wales Legislative Council and the current CPA Australian regional representative, the Hon John Ajaka MLC. Welcome to the Assembly and to Canberra once again. Mr Ajaka is accompanied by the Clerk of the New South Wales Legislative Council, Mr David Blunt, and I believe a senior adviser

of the team as well. Welcome to the ACT Assembly. I am sure all members will be on their best behaviour now.

Questions without notice

Planning—Curtin master plan

MR PETTERSSON: Minister, can you outline how the Curtin group centre master plan will help to revitalise the centre while retaining the existing character that the Curtin community loves?

MR GENTLEMAN: I thank Mr Pettersson for his interest in the Curtin community. The finalisation of the Curtin group centre master plan will pave the way for revitalisation of the centre. We have listened carefully to the feedback from earlier stages of consultation and the community panel. We have weighed up the issues and arrived at an approach that I believe provides a range of positive outcomes for the Curtin community.

At each stage of community engagement, the ACT government heard clear messages about the value of the central courtyard as a place for community life. Markets are held in the courtyard on weekends and families visit the area in the afternoon on the way home from school. It is also a space where people enjoy the sunshine and generally feel comfortable to stay, meet people and enjoy themselves. How the existing buildings at the edge of the central courtyard are redeveloped and designed will be critical to ensure that this space will continue to be an important focal point for the community into the future.

A number of planning strategies are proposed to ensure that solar access is maintained and that the future development facing the central courtyard is of an appropriate bulk and scale. There are also strategies to ensure that the courtyard continues to function as a vibrant space for community activity and for businesses to thrive.

This includes introducing a solar fence to limit overshadowing onto the courtyard and providing a building setback above the ground floor where development is permitted above one storey. This will ensure there is a single storey height facing the central courtyard—the human scale, if you like—limiting the building height to one storey at the northern and western edges of the central courtyard and mandating active frontages such as cafes, restaurants and shops facing the central courtyard.

ACT Health—governance

MISS C BURCH: My question is to the Minister for Health and Wellbeing. I refer to a quote in the *Canberra Times* of 8 May 2018 in which you said:

I have also acknowledged to staff that in recent times the governance of the organisation has let staff down.

What responsibility do you take, as minister, for the poor governance of your directorate which has let staff down?

MS FITZHARRIS: I take responsibility and I have also taken steps to significantly

improve governance of ACT Health.

MISS C BURCH: Why haven't you acknowledged to the people of Canberra and to the patients of our health system that your poor governance of your directorate has let them down?

MS FITZHARRIS: I spoke to staff about this on Friday. I spoke to the media about this on Friday. I spoke to the Assembly about this this morning.

MRS DUNNE: Minister, seeing that you have now acknowledged your responsibility for this poor governance, will you resign from your position as Minister for Health and Wellbeing?

MS FITZHARRIS: No.

ACT Health—workplace culture

MR MILLIGAN: My question is to the Minister for Health and Wellbeing. Minister, on 20 February 2018 the media reported that the Australian Salaried Medical Officers Federation ACT had claimed doctors were being put off by a bad culture within ACT Health. Minister, why has the government allowed a bad culture to develop within ACT Health?

MS FITZHARRIS: I do not believe that is the case and, as I said this morning, a positive culture, particularly in a health organisation, is everyone's responsibility. I have taken some clear decisions to significantly improve the governance of the organisation and, with it, my clear direction to the interim director-general and to the senior staff is that they lead by example in establishing a positive and healthy culture within ACT Health and across all of its facilities.

MR MILLIGAN: Minister, why has the government failed to tackle issues in specialties such as urology and obstetrics that have led to specialists not wanting to move to Canberra?

MS FITZHARRIS: That is not the case. I believe that in relation to urology there were some issues a number of years ago, prior to my time. They have subsequently been addressed, and that profession has now been re-accredited. Certainly, there is hot competition for specialists right across the country. I think we have a very good story to tell about the level of service we provide, the government's investment in more health services and more health facilities, and our tremendous relationship with our universities, particularly the ANU, the University of Canberra and ACU. We have a very good story to tell about health investment in this city and what a wonderful city it is to live in. That work on workforce attraction is well underway.

MRS DUNNE: Minister, when will you face the fact that you will not succeed in workplace attraction until you address the staff culture issues that are a turn-off to young doctors considering moving to Canberra?

MS FITZHARRIS: We welcomed, I believe, over a hundred interns into ACT Health earlier this year. I understand they are all delighted to be working for ACT Health. We

have had people looking to work in the wonderful new facility, the University of Canberra hospital.

I note that it is certainly the case that we have seen consistently from the opposition any opportunity to talk down anything that is happening in Health. I have observed this from afar within the chamber, both on the backbench and on the frontbench now, and I guess it is no surprise to see it continue.

Opposition members interjecting—

MADAM SPEAKER: Members, Mr Pettersson has the call and is about to ask a question.

Education—future strategy

MR PETTERSSON: My question is to the Minister for Education and Early Childhood Development. Minister, can you please update the Assembly on the future of education project?

MS BERRY: I thank Mr Pettersson for his question and I am very happy to update the Assembly on progress so far on the future of education.

At the start of my time when I was appointed as education minister, I kicked off a big conversation with the ACT community about the vital work that the government does in providing education in the ACT. That conversation has been a big and genuine conversation. It has involved the government providing some stimulus to the community, listening to feedback from individuals in the community and then confirming that what we heard was what they told us. I am really happy to say that the conversation so far has included over 5,000 interactions from students, parents, teachers, educators, support staff and other community members.

Over the first few months of 2018 the conversation transitioned to its second phase. There are already 10 key themes which I have spoken about before in the Assembly. These have filtered down to some key strategies that will be developed in an education strategy for now and into the future. It has involved a lot of further discussions and will provide more information to the ACT government about the future of education in the ACT.

Opposition members interjecting—

MS BERRY: Those very strong common foundations for the strategy are already emerging. They include learning professionals, students, systems and the community.

Ms Cody: A point of order, Madam Speaker.

MADAM SPEAKER: Yes, Ms Cody.

Ms Cody: I was trying very hard to listen to the minister's response to the question that Mr Pettersson asked but people on the other side of the chamber were talking, laughing and making jokes. I thought this was a very serious question time. They have been

asking some serious questions. We have been listening quite contentedly to the ministers' responses. It would be nice if they could show the same courtesy.

Mrs Dunne: Was that a point of order?

MADAM SPEAKER: It was a point of order. It was about being quiet and allowing people to answer the question without being interrupted and other members being able to hear.

MR PETTERSSON: Minister, how are school leaders, teachers and support staff being engaged?

MS BERRY: Through this conversation, I was keen to make sure that teaching staff, in particular, and the learning professionals get the time to take some time out to reflect on their work and consider what is working in their profession and what could be changed to make it even better. Ultimately, this is the most important factor in student outcomes, after background and circumstances of the student: the professionals responsible for taking students on their learning journey.

Soon I will release a dedicated discussion paper for the workforce supporting school education in the ACT. This discussion paper will be accompanied by a survey for teaching professionals so that we can identify some of the ways they can improve their own profession and their place within the teaching profession. The discussion paper and survey ask learning professionals to challenge themselves and make a contribution about things beyond just resources in the classroom. Issues around training, professional learning and leadership, as well as measuring performance, are all relevant. I look forward to hearing what the people working with the students have to say.

MS CHEYNE: Minister, has the recently released Gonski report provided any insights for the future of education work?

MS BERRY: I thank Ms Cheyne for her supplementary. As members will know, last week the federal government released Mr David Gonski's report *Through growth to achievement: report of the review to achieve educational excellence in Australian schools*. I welcome this report and thank Mr Gonski and the review panel for their work. It was a privilege to be able to be part of that conversation during the two times that I got to be part of an interview with Mr Gonski and his team.

The report aligns well with what the ACT government's future of education conversation is finding. It clearly confirms many of the themes that are coming out through the conversation and also our work towards an early childhood strategy. I am grateful that Mr Gonski took the opportunity to reinforce the vital importance of equitable early childhood education and care. That work was also backed up in the *Lifting our game* report. We were also able to get a really great report from the editors of that report during our conversation last week at the ministers' Education Council.

I was also encouraged to see Mr Gonski's acknowledgement of teachers as expert professionals. Finally, Mr Gonski's report supports the ACT's national leadership in seeking a review of NAPLAN assessment and reporting. It is good to see that the country is warming up to this idea. The report is important confirmation that the ACT

government's future of education work is definitely on the right track.

Calvary hospital—alleged bullying

MR PARTON: My question is to the Minister for Health and Wellbeing. On 15 April this year the media reported on bullying at Calvary hospital. It cited cases of bullying in the emergency department and in wards, security, administration and human resources. On 16 April the AMA called for an investigation into bullying. Minister, for how long have you known about bullying in the ACT public health sector, and what have you done about it?

MS FITZHARRIS: Mr Parton failed to mention that I have also written, as I believe was reported, to Calvary to outline my concerns with the issues that were raised and to say that, as the funder of public hospital services at Calvary, I would like further advice from Calvary on the matters that were raised. I have received an initial response from Calvary and I look forward to further advice from Calvary about how those particular issues are being addressed. I do believe it is the case that Calvary are also working with WorkSafe ACT on some recommendations that were made, and I look forward to that work continuing.

Mr Coe: A point of order.

MADAM SPEAKER: A point of order, Mr Coe.

Mr Coe: It is on relevance. Whilst the minister answered the latter part of Mr Parton's question, the first part was: for how long have you known about bullying in the ACT public health sector? I ask that she be directly relevant to that question.

MADAM SPEAKER: Have you got any more to add, minister?

Ms Fitzharris: No.

MR PARTON: Minister, will you be heeding the AMA's call for an investigation, and what form will that investigation take?

MS FITZHARRIS: I referred to that in my previous answer and reiterated the calls for those matters to be fully investigated. That is a matter for Calvary.

RS DUNNE: Minister, why have both Calvary hospital and Canberra Hospital had chronic bullying problems and harassment problems over the past decade, and what, apart from platitudinous statements like "zero tolerance", will you do to ensure that there is an end to bullying in the public hospital system?

MS FITZHARRIS: Mrs Dunne goes back well beyond my time and probably to times even prior to self-government. It is the case that I think every health minister in the country, of any political persuasion, would wish that there were not instances of bullying in their organisations. I know that in meetings with the AMA and the various royal colleges, they are very clear that they will not tolerate bullying in the medical profession. I know that in the case of the ANMF, they do very important work with nurses and midwives to make sure that there is not bullying.

Organisations must have clear policies and procedures in place. It is everyone's responsibility to build a healthy culture. I outlined this morning, extensively, the approach that ACT Health takes to bullying. I also outlined quite extensively my clear direction to the interim director-general and the senior staff at ACT Health that they lead by example and make sure that the two new organisations contribute very strongly to building a positive culture so that health services can continue to be delivered to our community.

Disability services—grants

MS CHEYNE: My question is to the Minister for Disability, Children and Youth. How do the disability inclusion grants enable community organisations, volunteer-run groups and small businesses to better include and engage Canberrans with disability?

MS STEPHEN-SMITH: I thank Ms Cheyne for the question. The disability inclusion grants deliver on Labor's 2016 election commitment to provide \$200,000 over four years to promote the inclusion of people with a disability through removing barriers to social participation. Disability inclusion grants provide funding for community groups, organisations and small businesses to undertake initiatives that enable greater inclusion of people with disability.

People with disability still face hurdles to participation in their local community. This can often be due to a lack of awareness about inclusion, physical barriers or communication issues. At the same time it is important to recognise the ongoing desire of the broader Canberra community to be more inclusive. We know that groups and clubs would like to be more inclusive of people with disability but are not always able to do so due to accessibility issues with their facilities, a lack of resources to purchase accessible equipment or because they simply do not know where to start.

Applications are now open for the second round of disability inclusion grants. Organisations can apply for a grant of up to \$20,000 for projects to improve access for people with disability to their activities or services. Projects may include, for example, installing automatic doors, developing a disability action plan, disability awareness training for staff or members, purchasing assistive technology or upgrades to make a bathroom more accessible.

These grants will help to broaden the inclusion of people with disability. They will open up opportunities in employment, recreation, sporting pursuits and greater participation in community groups. The grants round will close on 2 July. More information can be found on the Community Services Directorate website. I strongly encourage all members to share this information with their community.

MS CHEYNE: Minister, what are some examples of successful projects funded under the previous round of the disability inclusion grants?

MS STEPHEN-SMITH: I thank Ms Cheyne for her supplementary. The first round of grants was held in 2017 and saw more than 40 high-calibre grant proposals submitted. It was great to see the breadth of the proposals from Canberra organisations large and small. The number of applications demonstrated the clear commitment of the Canberra

community to engage in inclusion as a concept and as a practice.

Applications were received from all sorts of organisations and eight successful projects were funded for equipment, training or infrastructure modifications. The successful organisations ranged from sporting to computer gaming, to the arts, to volunteer-involving community organisations. The funded projects will create a broad and deep impact on the lives of people with disability and help to advance community attitudinal change about inclusion.

The eight successful projects were: Capital Football for training to raise awareness of disability for footballers and their coaches; the Academy of Interactive Entertainment for building modifications to welcome people with disability through physical access; Girl Guides to develop inclusive resources to welcome newcomers; Warehouse Circus for disability awareness training and accessible equipment to create more inclusive classes; Belconnen Arts Centre for building modifications to revolutionise access to the arts; filmmaker Jolene Lavery to support short films on the experiences of people with disability in the ACT; GG's Flowers & Hampers, which I know some of us are regular purchasers of, for accessible equipment to increase employment of people with disability; and ENGAGE Sports for accessible sports equipment to create inclusive sporting opportunities led by the students at Marist College.

I look forward to announcing further successful projects and initiatives in the future and encourage community groups and small businesses to consider making an application in this grants round.

MS ORR: Minister, what else is the ACT government doing to ensure that Canberrans with disabilities are included and consulted?

MS STEPHEN-SMITH: I thank Ms Orr for her supplementary question. The government is committed to ensuring that people with disability are included and consulted in a myriad of ways across our community. We recognise that mainstream service systems have not always catered appropriately for the needs of people with disability and we are committed to doing better.

Noting this, the ACT government established the Office for Disability in the Community Services Directorate as a focal point for our ongoing work to ensure that Canberra becomes an even more inclusive and engaging city for people with disability. The office works with and promotes policy outcomes for people with disability in a number of ways, including supporting the ACT Disability Reference Group, which is designed to advise the government on issues affecting people with disability. The office manages the I-Day grants for organisations to celebrate the International Day of People with Disability. The office also supports the work of the Inclusion Council, which is currently collaborating with the Canberra Business Chamber on a project to enhance the employment of people with disability.

In partnership with the Inclusion Council, the ACT government values and celebrates inclusive action through the Chief Minister's inclusion awards. Of course, the ACT government also encourages Canberrans of all abilities to connect, participate and discover all that Canberra has to offer in community activities through the annual Connect and Participate Expo—the CAP expo.

This year's CAP expo brought together a diverse range of more than 100 social, recreational, cultural, artistic and sporting groups from across Canberra. These groups are inclusive of all abilities and ages, with a focus on wellbeing and social inclusion. The CAP expo gives people a chance to participate in their community, because only by working together can we ensure that Canberra is a more inclusive city, which I am sure is an objective that we all share.

Hospitals—discharge policy

MS LEE: My question is to the Minister for Health and Wellbeing. I refer to media reports on 3 May this year about an elderly woman who was discharged from Calvary hospital hours after testing positive for influenza. She is living with her family, including a granddaughter who has had problems with pneumonia. The family has had to buy face masks and protective outer wear as a precaution. I seek leave to table the media story for the minister's reference.

Leave granted.

MS LEE: I table the following paper:

Canberra Times article of 3 May: "Family 'at flu risk' from released patient".

Minister, why did Calvary hospital discharge this woman only hours after she was diagnosed with influenza?

MS FITZHARRIS: I recall that Calvary made comment in the media report. It would be my expectation that Calvary would only discharge patients if it was clinically safe to do so. If there is anything further to add, I will provide further advice to the Assembly.

MS LEE: Minister, are Calvary Public Hospital and Canberra Hospital discharging patients before it is clinically recommended due to the ongoing crisis in the health system?

MS FITZHARRIS: Not to my knowledge.

MRS DUNNE: Minister, what guarantees will you give to the Assembly and to the people of the ACT that patients will not be discharged from hospital before it is clinically recommended during this flu season?

MS FITZHARRIS: I note extensive comments this morning from the opposition about the hard work of doctors and nurses. It is the doctors who make the decision on whether or not to discharge patients. I expect that they will do so based on clinically sound evidence.

I would note, in my comments around Calvary, a snapshot of occupancy as of 3 May this year. Occupancy rates at Canberra Hospital were 94 per cent. Occupancy rates at Calvary Public Hospital were 68 per cent. We have capacity in our health system; it must be used. It is essential that we invest in health services in our territory, but it is

essential that we make the best of the capacity that already exists. This underpins why I have led a significant negotiation with Calvary to make sure that we can effectively use the capacity we have in our public hospital system. I believe that that is what the Canberra community expect. It is the best way to spend public money. I am sure that staff at both facilities work diligently every day and make decisions in the best interests of their patients.

Canberra Hospital—accreditation

MR HANSON: My question is to the minister for police. No, it is not.

Members interjecting—

MR HANSON: My question is to the Minister for Health and Wellbeing. In preparation for the recent accreditation process at the Canberra Hospital, was any equipment removed from active use during the lead-up to the accreditation? If so, why?

MS FITZHARRIS: It is nice to see Mr Hanson make us laugh at least once during a question time. I thought for a minute I might avoid the full trifecta—I don't know what you call it; whatever you call it—having every question from the opposition—

Mr Barr: A full hand.

MS FITZHARRIS: A full hand. I think I have achieved it.

Mr Barr: I think you have.

MS FITZHARRIS: Thank you very much. I believe it was the case—as was reported—that equipment was removed during the week of accreditation. It is my understanding from the advice to me that, on a regular basis—every day and every week—equipment is maintained, upgraded and taken away to be cleaned. There was no additional removal or cleaning of equipment specifically for accreditation. It was previously scheduled that equipment and furniture on a particular ward in the hospital be removed for cleaning during the full week of the accreditation process in late March.

MR HANSON: Minister, has that equipment that was removed now been replaced?

MS FITZHARRIS: It is my understanding that it has been returned and not replaced.

MRS DUNNE: Minister, are the reports true that equipment was returned broken?

MS FITZHARRIS: That is not the advice I have received, no.

Arts—funding

MS ORR: My question is to the Minister for the Arts and Community Events. Can the minister provide further information about how the new arts funding arrangements he announced earlier today will better serve our growing arts sector?

MR RAMSAY: I thank Ms Orr for her question. The Canberra arts sector is certainly

strong and vibrant and an important cultural and economic contributor to our wonderful city. The ACT government has committed to implementing a new arts funding plan, which will present a reinvigorated model of funding and support.

A key part of that new approach to arts funding is to significantly restructure how funding is provided to individual artists, groups and arts organisations for self-determined projects that would have previously been funded through project and out-of-round funding.

What will now be called the arts activities fund will increase flexibility and will be more responsive to the needs of artists, groups and arts organisations, and will support an increased range of activities, including artform-based projects, mentorships, residencies, professional and skills development, and opportunities for the community to actively engage in the arts.

Arts activities funding will have two streams for all projects. Funding of up to \$5,000 will be available on a rolling basis throughout the year. Funding of up to \$50,000 will be available in two rounds per year, allowing artists and arts organisations to undertake larger projects.

All processes around grants will be streamlined and consistent, and there will be a comprehensive handbook, information sessions and one-on-one appointments to assist artists to make the best application they can.

As the government has previously committed, a minimum of \$750,000 is available each year for arts activities funding. We remain committed to the transparency of announcing the size of the funding pool each round. In fact, for 2018-19, we have \$775,000 available. The first round for both funding categories will open on 1 June this year.

MS ORR: Can the minister please outline what the consultation process has been to arrive at the new arts funding approach?

MR RAMSAY: I thank Ms Orr for the supplementary question. The ACT government is committed to getting funding for artists and organisations right, which has meant taking the time to consider all the options. Extensive consultations with the arts community have allowed us to hear what artists really need in terms of how funding is made available and what their ambitions are for the ACT arts sector.

Artists have told us that they need flexible and responsive funding programs with clearly explained, transparent and consistent processes. They are seeking professional development opportunities and career pathway options. They value strong communication with government and they seek clear recognition and support for Aboriginal and Torres Strait Islander arts and cultures.

The next area that we will be consulting on will be corresponding changes to arts organisations funding. Funding for organisations is more complicated, which is why there will be further conversations in working towards the right funding model. It will be important to hear from both those currently funded programs and key organisations and also those organisations that have not previously received organisation funding. We are looking forward to good, open communication regarding the challenges and the

opportunities in this category.

Another way that we reach into the community on funding matters is to make a renewed call for people to nominate on the register of peers to participate in the peer assessment process of grant applications. We are looking for peers across all art forms, including dance, circus, music, literature, theatre and visual arts and crafts. They are encouraged to apply via the ACT arts website.

MS CODY: Minister, can you outline the other exciting measures announced in the package this morning which will benefit ACT artists and arts organisations?

MR RAMSAY: I thank Ms Cody for the supplementary question. Today I was pleased to announce further funding for 2018 in the community outreach program which currently includes funding to the ANU School of Music and School of Art and Design, the Canberra Symphony Orchestra and the Belconnen and Tuggeranong arts centres to enhance community access to and participation in arts and cultural activities.

We will be providing a one-off round for community outreach arts projects with a total pool available of \$325,000 for projects that have an emphasis on engaging people who may experience barriers to participation in the arts, notably those experiencing some kind of disadvantage. The aim of the community outreach arts funding is to increase participation in the arts, promote collaboration between organisations, artists and the community, and to establish relationships or programs which contribute to long-term arts engagement outcomes. Applications will open on 1 June. They will close on 31 July. An announcement of the successful applications will be made by 30 November.

I was also pleased today to announce the new government initiative for capacity building in the arts sector. From 1 June artsACT will be gradually rolling out a suite of support services to artists and arts organisations in areas of grant writing, good governance, strategic planning, change and risk management, and diversity representation and arts cultural awareness. There is an initial \$100,000 set aside for this work.

Finally, it is good to have been able to announce today that nominations for the ACT book of the year will open on 1 June, with a \$10,000 prize for the winner, \$2,000 for any highly commended book and \$1,000 for each short-listed book.

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