## LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

## STANDING COMMITTEE ON PLANNING AND ENVIRONMENT

(Reference: Karralika)

## **Members:**

MS R DUNDAS (The Chair)
MR J HARGREAVES (The Deputy Chair)
MRS H CROSS
MRS V DUNNE

TRANSCRIPT OF EVIDENCE

**CANBERRA** 

FRIDAY, 16 APRIL 2004

Secretary to the committee: Ms L Atkinson (Ph: 6205 0142)

By authority of the Legislative Assembly for the Australian Capital Territory

Submissions, answers to questions on notice and other documents relevant to this inquiry which have been authorised for publication by the committee may be obtained from the committee office of the Legislative Assembly (Ph: 6205 0127).

The committee met at 9.19 am.

**NIGEL GRIFFITHS**,

LOUIS RAGO,

MARYANNE HASLAM,

**KESTREL ANDREWS** and

**GARRY COOMBE** 

were called.

**THE CHAIR** (Ms Dundas): I welcome the Karralika Action Group. Thank you for joining us today to help the planning and environment committee with its deliberations on the planning process around Karralika. You need to know a few things. This meeting is being recorded and broadcast through the building and through to public servants' offices, so they can hear what you are saying. We are also making a transcript so that we can refer to your evidence. You will be sent a copy of it to check to make sure that when you said 50 you meant 50, not 500, and those kinds of things.

This is a statement that needs to be read to you and you need to understand: you should understand that these hearings are legal proceedings of the Legislative Assembly, protected by parliamentary privilege. That gives you certain protections but also certain responsibilities. It means that you are protected from certain legal action, such as being sued for defamation for what you say at this public hearing. It also means that you have a responsibility to tell the committee the truth. Giving false or misleading evidence will be treated by the Assembly as a serious matter.

Obviously you have a presentation to go through. We will run through it and then we will move on to questions, but I do remind you that we are focusing on the planning issues in relation to the Karralika development and the consultation process. We cannot look at the underpinning health question. That is not within our terms of reference; in fact, it is outside the committee's bounds. If you remember that and stay focused on the planning issues it would be helpful. The first time you start speaking, please introduce yourself by stating your name and the organisation that you represent. Ms Haslam, would you like to kick off?

Mr Griffiths: Can I start first? My name is Nigel Griffiths. I am a resident of Macarthur and I am a member of the Karralika Action Group. Madam Chair, committee members, good morning. First off, we would like to thank the committee for giving us the opportunity to present this information and for your time in considering the quantity of information that has come before you. This is not just a cordial thank you. Many members of the community have asked us to pass on their appreciation to the committee members for allowing us to be heard. I would also like to thank those members of the community who have taken time off to attend the hearing today. We are also grateful for your continuing support.

I will be presenting some background on the Fadden and Macarthur community, the unfortunate situation and the action group, and outlining the community's position. Lou will be presenting a summary of the community's experience with the consultation process or total lack thereof and Maryanne will present details on the inadequacy of the planning process for the proposed facility and why it is so completely inappropriate for a residential area, after which I will conclude with our recommendations for a more positive way forward. As there is a large amount of information to be covered, if you agree we would ask that the committee save their questions until the end. Thank you.

THE CHAIR: But if something comes up, you cannot hold the committee members back

**Mr Griffiths**: Sure. That is fine, thank you. This is perhaps one of the most difficult things to present to the committee, the character of an area, the atmosphere of living within a particular community. This is something that can really only be experienced, not described, but I am going to make the attempt.

There is something exceptional about these suburbs, something that can't easily be quantified. It's an atmosphere, it's the way that it feels, it's in the air, it's in the people and the character of the community itself. Those people that live there know exactly what I'm talking about. There is tremendous community spirit there. They don't just live in the community; they're involved in it.

We would like you to imagine the experience of the majority of people living in this community. You spend years looking for exactly the right place to live, to buy a home, to invest in your future and your family. You wait, you save, you work hard to afford to buy into this area. Finally, you find the right home and actually move into the suburb.

Macarthur—and this is the area I have the most experience in because it is where I live—is the smallest suburb in Canberra, fewer than 400 homes and, like Fadden, it's surrounded by nature parks and horse paddocks. It's peaceful. There's a natural feel to the place. It's nestled into the hills. Kangaroos graze on your lawn. The homes are well kept. There are no through roads, so there is very little traffic, and there are no bus routes because the community agreed it would change the peaceful nature of the area.

There are no shopping centres, no large facilities of any kind. It's as safe, secure and tranquil as open suburban living is likely to get. Whoever initially planned this suburb got it exactly right. You know most of your neighbours. You notice that a lot of the people love the area so much that as their needs change they don't move out of the suburb, they move within it; their children even buy into the area. A lot of your neighbours work from home; it's the perfect place to do that. You're now in the suburb all day long, along with many of your neighbours. It has become a way of life, not just a place to sleep at night.

And then one day during the Christmas holidays you discover secretive plans to build a multimillion dollar, multipurpose, multistorey, high impact experimental institution in the middle of your suburb—a facility so completely out of character with the rest of the area that at first you assume it must be a joke or some kind of a stunt. Apparently it's not. And nobody asked you what you thought about that or how it might affect you, your family, lifestyle or business. You were not consulted; in fact, you were not even granted

the common decency of being properly informed.

You soon realise you are being presented with a fait accompli; your community is going to be forced to have a permanent structure that will significantly alter the whole character of the area, an area that 5,000 people in 1,500 homes have carefully bought into with the knowledge that this kind of facility is not next door. Imagine how you feel and imagine how 5,000 people feel about how little consideration they've been shown.

For the rehabilitation needs and wishes of 60 people, the clients of the facility, the needs and wishes of 5,000 people have been completely disregarded. To make matters even worse, the government that has shown this blatant disregard was the government that promised the exact opposite. In Chief Minister Jon Stanhope's Labor leader's address for 2001, he speaks about how his government will provide a code of good government which would be:

...based on the values and principles it shares with the community it seeks to represent...They are simple and long-held values: Fairness. Integrity. Openness. Honesty. Compassion. Responsibility. Accountability. Leadership...It is a vision of a community-of-the-whole that does not ignore one in favour of another...Not for a privileged few, or for selected interest groups. For all Canberrans.

The Stanhope government was elected on these promises, promises that have not been kept. The majority of people in this community were ignored in favour of a minority, select interest group.

With the indulgence of the committee, I would like to demonstrate the sheer magnitude of this discrepancy in the government's priorities. I have here 60 jelly babies to represent the 60 clients of the proposed facility. These people have names, stories, needs and the right to be cared for and considered. We support their right to have access to the rehabilitation they need. However, just as they have rights and needs, so too do the 5,000 people of the community of Fadden and Macarthur.

As these people could not all be here today, we felt they should at least be visually represented. These people also have names, stories, needs and the right to be cared for and considered. They have the right to be heard and their opinions genuinely acted upon. They have so far been denied that right. The government that claimed to represent the community of the whole did not represent them at all, but chose to represent the minority. As you can plainly see, the imbalance here is extreme.

In the absence of any real government representation, the Karralika Action Group has by necessity stepped up to take over that role for the community. As we talk today, we want you to be aware of these 5,000 people and to consider that the development we're talking about will impact directly on their lives every day permanently, a development that is being forced on a community which has made it abundantly clear they do not want it. These are the people we represent—people who are relying on an action group to speak and act on their behalf because they've been offered no other forum or process in which to voice their objections to this development.

We also want you to be aware that this combination of extreme disregard and government force is exactly the reason there is an action group sitting here before you in the first place. If you use force, you automatically create resistance. This is a

fundamental law of physics and of human behaviour. You would think governments would have learnt this simple fact of good governance by now. It is why genuine consultation is not only considerate but actually necessary, otherwise you get governance by revolution. So we draw your attention to the words on the screen as a reminder—"Karralika Action Group: if you don't consult, we are the result."

The Karralika Action Group—KAG for short—is a part of these 5,000 people represented here. This is our community. We live, work and play there. We're not nimbys, radicals, extremists or hysterical constituents; we're ordinary people, just like everyone else in the community. The members are mothers, fathers, teachers, programmers, public servants, tradesmen, lawyers, members of the defence forces, retirees, and many other perfectly regular vocations.

But there's another side to this. We contain a huge cross-section of professions which gives us access to a wide and comprehensive source of expertise directly relevant to the responsible planning of a development such as this one. We are made up of doctors, detox nurses and social workers. We have pharmacists and members of drug squads and police forces both locally and interstate, ranging from entry level to very senior positions. We've been in contact with previous clients of the facility and have been approached by ex-staff and an ex-director of Karralika, and they all share the same concerns.

One member of KAG is a senior executive of a well-known organisation related to this issue who has been working with drug addicts for over 30 years. Our concerns are not coming from irrational fear; they're coming from people who have had seasoned experience in the relevant areas, people who have had years of hands-on experience and real world experiences. Together they've had lifetimes of experience, and these experts are saying this is not the best solution. But these people were not given the opportunity to be consulted.

However, we are not professional activists, nor are we lobbyists, politicians, media liaisons or town planners. Unfortunately, we've had to become those things at the expense of our own valuable time and money because our elected government representatives were not doing what they had promised to do, which is to govern on behalf of the broader community.

In response, Karralika Action Group was formed in January of this year, nine days after a handful of residents had been delivered a letter from ACT Health informing them of an imminent refurbishment of the Karralika rehabilitation centre. In that time, those residents had uncovered the real extent of the development, mobilised a nearby community and begun to act. As concern grew and the neighbourhood became widely informed, it quickly became apparent that KAG was extremely well supported.

By the public meeting held on 5 January, just over two weeks after the group had been formed, that support and concern had spread across Canberra. With only four days notice, around 700 people attended from all over Canberra to express their support and serious concern over this outrageous lack of consultation and planning. We are all aware of the outcome of that meeting; that's why we are here.

The Karralika Action Group is large, motivated, dedicated and well supported across

Canberra, and it has its own website, kag.org.au, to keep the community informed. After all, the group is sourced from a passionate and dedicated community. The action group's position on this development is simple and direct: the community consultation process was non-existent. This institutional development is completely inappropriate for a residential area, something that a genuine planning process would have revealed. Lou and Maryanne will now detail the reasons.

**THE CHAIR**: Thank you, Nigel. Before you move on, I wish to let you know that we do have your written submission and we have read it and studied it. Because of the short time that we have allocated today, you don't need to go over those points. I understand that there are other points that you will be trying to make today. If you could focus on those so that we can make sure that there is time at the end for questions.

**Mr Rago**: My name is Louis Rago. I'm a resident of Macarthur and a member of the Karralika Action Group. Madam Chair, committee members, good morning. I'll be presenting an overview of the community consultation process regarding the Karralika redevelopment. But firstly, with your indulgence, let me set the scene.

During the action group's meeting with the planning minister, Mr Corbell, we couldn't help noticing that he seemed unsure as to what was meant by the term "consultation". By way of clarification, "consult", according to the *Collins English Dictionary*, is defined as to ask for advice, to confer with, to consider, to refer to information, and to have regard for a person's feelings and interests in making decisions or, indeed, plans.

This community was not asked, nobody conferred with us, we were not considered, and nobody referred to us for information. Most especially, our feelings about this development and how it affects our interests as individuals and as a community were not taken into consideration during the decision making or planning processes.

Labor's platform for 2003-04 states that the government is committed to the highest degree of community participation in the decision making process as possible and that it is a basic right of all ACT citizens to be involved in making decisions which affect them. Further, Labor's planning and land management policy, called "Planning for people", includes the following statement:

Planning for people means directly involving Canberrans in the decisions which affect the suburbs where they live...Local residents deserve a direct say in the planning rules for their suburbs. Planning needs to become more local, and planning rules need to reflect the individual characteristics and amenity of our Garden City suburbs.

With this in mind, I would now like to explore the government's consultation process for the Karralika redevelopment. The consultation is summarised on this particular slide. As you can see, there is not much to be said about the non-existent consultation process that occurred for our community. There simply was no community consultation from the government, nor indeed from its agencies. I do refer you back to the definition of consultation earlier in my presentation.

Why has the community of Fadden and Macarthur been exempt from these policies? We have been given no access, nor afforded any opportunity, for any consultation at all. Indeed, the only community consultation that occurred here was via the action group.

Had KAG not researched the development, letter-boxed the community with that information, informed people how they could voice their opinions, called a public meeting and lobbied this Assembly, nobody would have known what kind of development was being planned until it was already built. In fact, construction was due to begin about now. What we did get was secrecy, obstruction, intentional misinformation, minimisation tactics, emotional blackmail and a farcical attempt at Clayton's consultation.

I am going to review some of the major examples of this disingenuous behaviour. As we know, we don't have time today to cover all the examples that occurred, and we would respectfully refer you to our submission, which covers these topics in detail. I will begin, if I may, with the notification of a refurbishment received by 10 residents adjacent to the Karralika facility on 5 January this year. The first thing to note here is that there are 17 homes directly adjacent to the facility, so seven were not notified. Of course, the other 1500 homes in the community weren't notified, either. The notification also took place over a very interesting period, the Christmas holidays, when most people were away and it was virtually impossible for residents to contact various departments for further information.

The letter referred only to "work required to refurbish the interior of the existing homestead, but will also involve the replacement of several existing buildings with new ones and the addition of new facilities". It didn't in any way mention a major redevelopment, but gave a highly misleading impression that it was a minor refurbishment. This letter goes on to say that there will be no change to the existing purpose of the Karralika facility and that it will retain its essentially discreet and low-profile character and more strongly resemble domestic-scale dwellings It also claims that the new buildings will cover less than 26 per cent of the site. All of these statements deliberately minimised the true impact of this major development.

Attached to the Christmas letter was a site plan. Unfortunately, the site plan didn't include any indication of what is currently there to allow a reasonable person, indeed our residents, to allow a comparison for the changes that had been proposed. Also attached was a plan showing three elevations. Good, you might say. But the fourth elevation, showing the front view of nine-metre tall buildings, was not included. The plans had incorrect scales, minimising the height of the buildings, and an incorrect section number making it less likely that the plans would be located at ACTPLA if residents inquired, and that is exactly what happened.

There was no mention that objections could be made to ACTPLA, no process of consultation was offered in any form. In fact, residents that rang those mobile numbers were told they could not oppose the development and that it was a done deal. It was only when residents called the minister's office that they were told the project had been designated confidential and therefore residents had no right of appeal. Interestingly, surveyors were first observed at the site by residents in February 2003. The architectural plans themselves were drawn up in March 2003. Since then and till now, that's 10 months in which the community could have been informed and consulted about these plans.

Another interesting point is that, notwithstanding the fact that plans were not shown to

our community, they were shown to Karralika support groups. ACTPLA had the development application for four months before anyone in the community became aware of the plans. The community was only notified at the eleventh hour and everything appeared to have been orchestrated to prevent the community from gaining access to information about this development.

This was achieved initially through the misuse of regulation 12 of the planning act designating the facility a provider of confidential services. That act was intended for small domestic crisis services. It was never intended to be used to cover up a major redevelopment. Karralika has never been a confidential service—sensitive, perhaps, but not confidential. There is a sign out the front of the centre saying, "Karralika, 256 Bugden Avenue." Most locals are well aware of its existence. The government's own budget media release of May 2003 detailing the redevelopment mentions it openly. It's listed in the phone book and you can arrange to visit the centre by giving them a call.

Prior to being removed, ADFACT's own website contained extensive information on the Karralika program, including photographs of the facility. Interestingly, this website was removed from public access just before the DA was submitted to ACTPLA in September 2003. It would appear that ADFACT and the Karralika program suddenly became confidential just before the development was initiated. Being confidential means that ACTPLA doesn't notify the community, doesn't put the plans on their website and doesn't make all the information on the development available to the public.

To give you an idea and to summarise some of the key points of the time line—the full details are in the submission—February 2003, surveyors observed on site; March 2003, plans drawn up; May 2003, ALP budget press lease re Karralika funding, a release that appeared only on the treasury website, by the way; June to August 2003, ADFACT website removed; September 2003, DA submitted to ACTPLA;. October 2003, planning minister declares development confidential; January 2004, 10 homes finally notified of a Karralika "refurbishment". This has all the hallmarks of a well-orchestrated plan to sneak through what is clearly a controversial development by creating a false cloak of confidentiality to avoid public scrutiny and thus avoid any objections.

With respect, I would like to draw your attention to Chief Minister Jon Stanhope's address of 2001 where he stated, "Labor won't hide behind a cloak of confidentiality." What has occurred with the Karralika redevelopment is in clear contradiction of this particular statement. When members of KAG tried to get the details on the development, we were consistently given misleading and incorrect information. As an example, ACTPLA informed KAG they'd been told by superiors that any Karralika inquiries were to be referred to the architects—a private company of architects. This private company of architects sent us to health and ACTPLA. Many residents experienced this passing around behaviour.

However, after weeks of dogged persistence from KAG, another letter from ACT Health was sent to the same 10 residents who received the original limited distribution Christmas letter. Although there had never been any previous notification concerning public comment, this letter advised residents that ACTPLA would extend the comments period for an additional two weeks and the plans were available at the Dickson—I repeat, Dickson—shopfront for inspection.

By the time the letter arrived it left only seven working days to lodge an objection before ACTPLA made its determination. It did not detail what kinds of comments people could make and to see the plans people had to go to Dickson, travelling to the other side of Canberra, on a working day. When KAG sent a delegation to the ACTPLA shopfront, only very basic plans were available. Even the colour of the buildings was deemed as confidential. The delegation spent over two hours negotiating with ACTPLA staff to gain access to additional information but, unfortunately, most of it remained inaccessible.

KAG also requested an urgent meeting with the planning minister, Mr Simon Corbell MLA, and were informed he would be unlikely to meet with us. It was only after the media began covering the issue that KAG was suddenly contacted by his office to arrange a meeting. KAG requested a number of documents be provided to us before the meeting, none of which were provided. The meeting itself proved fruitless and was conducted in an atmosphere that was condescending, flippant and would not give clear answers to most of our questions.

Both the minister and ADFACT then resorted to feeding misinformation to the media. Feature articles appeared in both the *Chronicle* and the *Canberra Times* detailing ADFACT's and the government's stance on this particular issue. The article in the *Chronicle* was called "Karralika fights back". Fights back against what—the right for community consultation? The *Canberra Times* article was headed "Healing help for lost souls". Both papers focused on the desperate plight of drug addicts. They also contained photographs and names of the supposedly confidential clients. We all agree that more services are needed. The question is about where they can be appropriately placed. These attempts at emotional blackmail and information are offensive.

Again with your indulgence. let me please address a few of the most commonly stated misleading facts. They said only 25 per cent of the one-hectare block will be used for buildings. The fact is that the proposed development will utilise up to 80 per cent of the usable area. They said that the residential capacity will be 60 beds, including provision for 20 children. The fact is that beds of the current Karralika program are in constant flux and there is no such thing as children's beds. No proof of limit, now or in the future, has ever been offered. Based on the fact that the facility currently sleeps 17 but has accommodated 25, it can be extrapolated that even the lower quoted 60 clients could become over 90.

They said that the centre would see a net rise of 15 adults. The fact is that it will have a net rise of eight buildings, two of them nine metres in height, extensive car and bus parking, a large childcare centre, and significant increases in traffic and usage levels. With at least 90 extra people, including staff, clients and support workers, this is a net rise of 900 per cent.

They said that a 23-space car park is a planning requirement but, as clients don't have cars, about 12 will be used by staff. The fact is that 23 spaces is already grossly insufficient. By comparison, Isabella Plains, a centre with 30 clients, currently has only six parking spaces and requires at least 30. When KAG visited the centre, there were 24 cars and buses parked on the street and on an eroding vacant block. A facility catering for upwards of 100 people during the day would require at least 60 spaces.

They said that there will be no significant change in traffic on Bugden Avenue. The fact

is that traffic will be going in and out all day, just as it does in Isabella Plains. However, there will be twice as much because the facility will be more than twice as big. They said that there will be no change in the use of the facility. The fact is that it will become a full-time client care residential facility, both day and night, a childcare centre, an educational facility, an outreach centre and an administration centre. That is a massive change in use.

They said that the ACT desperately needs more drug rehabilitation beds, so we have to build this facility. The fact is that it is not a logical conclusion that because we need more beds the facility must be built in this location and in this manner. They said that the Karralika program is abstinence based and clients are drug free. The fact is that ADFACT has admitted they plan to introduce pharmacotherapies into their program, including methadone. They said that the development will retain its current low profile and will not be higher than the current roof line. The fact is that the planned development is large scale, high density and high usage, completely unlike the current farmhouse.

These attempts to minimise the true impact of the development have occurred throughout the duration of this experience, with the use of misleading statistics, scales, percentages, numbers and indeed photographic renditions. Pretty pictures do not represent the reality.

When the confidentiality strategy was exposed, the government attempted to discredit the community and minimise the development. When that didn't work, they resorted to a convoluted call-in strategy. The community expressed their opinion about this development very clearly at a public meeting. They were not indecisive, they did not lack clarity, they did not stutter: the development is completely inappropriate for a residential area and the community will not accept it.

What was the response? Attempts to mislead once again. Mr Corbell released a statement saying that they were withdrawing the development application. Most people in the community, being of good intent, were relieved to hear this and believed that the situation had been resolved sensibly. The fact of the matter was very, very different. He was intending to resubmit the application and then call it in. That's a nasty trick to play on a community.

The people of this community sent hundreds of letters to multiple politicians, sent letters to ACTPLA, attended a public meeting and sent in submissions to this inquiry. Many even came to the Assembly on a working day to hear the Assembly debate the issue. Some are here today. Unfortunately, not all can be because of work commitments and, indeed, the school holidays. That is an absolutely extraordinary effort. They've gone to huge lengths to make their feelings about this development clear and that should be more than enough.

I will now hand over to Maryanne, who will talk about the inadequate planning of this particular development.

**THE CHAIR**: I have to say that we now have only half an hour left and I know that you have a well-prepared submission, but I ask you to move through it more quickly so we actually have time to ask some questions. I know that members do have some questions on the points that you've already raised.

Mr Griffiths: And we appreciate that as well.

Mrs Haslam: Good morning, Madam Chair, members of the committee. My name is Maryanne Haslam. I am a resident of Fadden and I am speaking on behalf of the Karralika Action Group. I will look at some of the inadequate planning processes for the Karralika redevelopment and hope that I can get through my papers as quickly as possible. When we start arguing about height restrictions and whether or not building conforms to the territory plan or if we can have more or less parking, the real point is being missed. The real point and the only real question here is whether or not this is an appropriate idea in the first place. If the answer is no then all the other details are irrelevant. So let's look at how the government approached some of the basic planning for this development. Is this proposed development the best solution for drug rehabilitation in the ACT?

THE CHAIR: Maryanne, this is what I meant by my opening statement that we cannot necessarily look at the underpinning health reasons that ACT Health is putting forward for wanting to have this facility go through this refurbishment. We can only look at the consultation process and the planning processes around that. So this might be one of those bits where you can move forward a little bit more quickly. It is just not within our terms of reference.

**Mr Griffiths**: We certainly do appreciate that. Our concern or point of view here is that some of these altruistic planning questions, the questions of why, could well solve some of the planning problems that Canberra is having at the moment. So perhaps if we could continue we would certainly respect your dismissing them if it is appropriate.

MR HARGREAVES: Just to let you know we are not trying to duck what you are trying to say. One of the difficulties the committee system encounters is that the standing orders preclude us from considering information that is given to us which is the purview of another standing committee. In this case it is the Standing Committee on Health. If we were, for example, to consider whether or not extra drug beds were needed at all, that is something that we cannot do. It is not a case that we do not want to or are trying to duck it or trying to narrow the focus. We are just not allowed to.

MRS DUNNE: Just to reinforce, the terms of reference of the Standing Committee on Planning and Environment are to examine matters relating to planning and land management, conservation and heritage, transport services and planning, environmental and ecological sustainability. You may wish to make a point but it may be that we just cannot consider it.

**Mr Griffiths**: Okay, and we will certainly try to skim through those parts quickly, thank you.

**Mrs Haslam**: Obviously having committed myself to written notes, it is not as easy to jump around.

MRS DUNNE: Yes, sure.

Mrs Haslam: But going off the written notes, they came basically from an understanding that before you build anything or before you go ahead with any plan of

action there has to be some planning process, and part of that planning process must be a decision as to why are we doing this, who will be doing this, where will we be doing it? The general feeling from the research that KAG has undertaken is that if those three questions were addressed by the government, we certainly could never, ever access any of that information. We asked, why is this building being constructed? We do not deny for one moment the tremendous need in the ACT for more drug rehabilitation beds. Noone in this room would argue that particular premise, although we do wonder whether any large development is going to support those residents of the ACT who are in need of residential drug rehabilitation because any waiting list at ADFACT is on a first-come, first-served basis. So it could well be that any new development would be occupied in large number by clients from interstate. So, if we have a lot of people in the ACT who are in need of residential drug rehabilitation this facility may not support that. So why is it being built? The need is there—no arguments about that.

Who is going to be supporting it, or who is going to be managing it? Research into ADFACT indicated that ADFACT have no data on their success rates. There are no independent studies that show they are the best provider of these services. They have no external assessment procedures, they self-assess their quality standards. They have no experience in running a large, experimental institution or a detox centre and they have no secured funding to adequately run a large facility once it has been built. Now, we say this is what we found out about ADFACT, but in the absence of being able to access any other planning documentation we have had to believe that this is in fact the case. However, ADFACT does have a contract with ACT Health to supply drug rehabilitation services and we believe that that contract is up for renewal in the next few months.

So, the next question or the next segment of planning should be where is it going to be built? And that is the prime concern of the Karralika Action Group. Our research indicates that when working with addicts or the disadvantaged, most experts seem to agree that following the principles of de-institutionalisation small, homogenous groups work best, especially in rural settings. ADFACT's own website which was removed just prior to this whole incident, stated:

Residents live and work in a small family-like situation sharing the domestic duties and helping each other to re-establish constructive, life-coping skills.

The phrase from that that we look at is "a small family-like situation". What we are looking at now is a big institution. So why are we being presented with this big institution? Bigger is not always better. We agree it would be more cost-effective, but that is not the point. Is it more effective for the clients? So is this the best solution? We suggest not. Why is it being built? Agreed, we need something. Who is going to manage it? We are not convinced that it is being managed appropriately but we are willing to be convinced in a proper consultation process. Where is it being built? Is this the appropriate location? If the government feels it has to have a large institution where is the best place to build it? They chose Fadden and Macarthur. Why? As far as we can ascertain because it was there. The Isabella Plains site had no room for expansion and ACT Health already owned the Fadden site. So it was an easy decision or it would have been if the residents had been kept in the dark.

What alternative sites were researched? We can find no evidence of any other alternative sites being researched. We put it to the committee that this is about the least appropriate

location for such a facility. ADFACT had apparently been offered a rural site at Honeysuckle Creek some time ago. One would have thought that this was a fairly appropriate site for a residential retreat. There are plenty of effective rehabilitation centres located in rural areas, and some of the rehabilitation centres which have very long and successful histories were built in rural areas when they were first established and the residential area has come out and engulfed it over the past 20, 30 years. But they started off rural because that was the best place for them. It gets the clients out of an addictive environment and into a natural healing setting and it allows space for therapeutic activities like gardening, like bush walking, and it is also harder for clients to simply leave the centre if the going gets too tough today.

The Honeysuckle Creek site was not taken up by ADFACT because they claim it was not cost effective. But we ask again, what about the effectiveness for the clients? Who are we satisfying here, the clients or the person with the contract to provide the services? So if proximity to the urban area is absolutely essential, why not look at sites where there is no immediate residential development. There are many greenfield sites around Canberra and many in the Tuggeranong area. So, if ADFACT feel the need to be close to the Isabella Plains facility there should be open green space land available for that sort of site.

I want to remind the committee that the proposed development is going to be only  $21\frac{1}{2}$  metres away from the closest residence. That's not a lot of space. This is not acceptable. It is not acceptable in a Fadden environment, it is not acceptable in a Macarthur environment, it is not acceptable in any single Canberra residential environment. I am not saying not in my backyard, I am saying not in anyone's backyard. So we would like to point out that a green site would be more cost effective. At Fadden they are going to have to demolish, excavate—a lot of extra costs. In the future, when we are talking about a 16 per cent increase for drug rehabilitation need, where are they going to expand in Fadden? They are building out to the boundaries. There will be no chance for expansion. Go somewhere where there is space to expand as the need increases, and I have no doubt that the need will unfortunately increase over the next 10 years.

The impact on the community—what I am saying here is going to be fairly repetitious, so I will go through as quickly as possible. What is being proposed is a multimillion dollar, multistorey, multipurpose, high-density, high-impact institution. There are going to be eight large buildings, some up to nine metres tall. There will be over 100 people on site through the day, a 900 per cent increase. There will be constant noise from traffic, trucks, clients coming and going, childcare facilities. No environmental impact study has ever been completed to the best of our knowledge. If it is there, please let us have it. This development adjoins nature reserves and is on a ridgeline. An impact study is essential. Has it been done?

The development will overlook residential homes and it will destroy our visual amenity. The facility will tower over Macarthur. It is just too big to be adequately screened by any vegetation, and that certainly will not happen in my lifetime. It is a high-density facility in a low-density area and alters the whole character of the area. It will create traffic hazards on an already dangerous road. The community pathway to the north of the facility will be built over during the expansion—a path that the community has used for the past 20 years. It will be gone.

Finally, there is a widely held perception that the proposed development will lead to increased security risks for local residents. The site will no longer be run as a small family-like facility, but will be a large multipurpose institution. This is an experimental program and the results are unknown. The impact on the community is absolutely unknown. Whether these risks are real or only perceived, the risks will certainly impact on land and house values. I know the government would like to pretend that this is not an issue, and it may not be politically correct to bring it up, but it is commonsense truth.

Given the choice between buying a home in a quiet, secure suburban location or one located right next door to a multistorey, multimillion, multipurpose drug rehabilitation centre most people are going to choose the former. Just the possibility that this development is going to go ahead has been enough to scare away buyers in our area. Depreciated land values, depreciated home values, and increased insurance premiums are the hidden costs of this development and our community is being forced to bear that.

So back to our question: is this an appropriate location to build a multimillion-dollar, multistorey, multipurpose, high-density, high-intensity, experimental institution? I think the answer is no. It is not an appropriate location. I do not think the planning process considered where at all. It took the easy decision. So the real question has always been is this an appropriate area to place this institution? The answer is obviously no. All the other details we have put forward are really irrelevant. Thank you.

**THE CHAIR**: Thank you. Nigel, before we move on to your discussion about the recommendations you have for the future, I think we might take this opportunity to ask a few questions and maybe let you wrap up at the end. I am quite conscious of time. So I was going to start by putting a question to you, Maryanne, in light of the presentation that you just made. Again this is to try to take it out of that health context and the drug rehabilitation context.

Let us follow the scenario that the facility that is there is moved out to a rural area, maybe to Honeysuckle Creek. So the government then has a substantial block of land in a residential area that it would like to do something with. Say it decides it wants to put aged care units on that facility. It will have similar amounts of people coming through, regular visitors as family come to visit those people, and it would have to be a different size. What would you see happening if the government said it will put aged care units there instead and went through a development process that way?

MRS DUNNE: That is a hypothetical.

**THE CHAIR**: Yes, it is a hypothetical question.

Mrs Haslam: I think hypotheticals are part of the planning process. I have no objections to that question at all. Our argument from the Karralika Action Group has been we really do not want to see any increased development on that site at all. I think the answer to that hypothetical question would have to be if the government decided to change the use of that area we would go back to the very start of this whole process and say open up the consultation and we will talk about it. If this had been opened up to consultation we would have talked about it. If there had been consultation we would not have thrown up our hands in horror and said, "No, no, no, no, no,". We would have said, "Let's talk about it". The outcome is anyone's guess. Whether you are going to build a rehabilitation

centre or whether you are going to build an old people's home, I suggest let's open it up to consultation and have a look at it.

**THE CHAIR**: What would be your ideal form of that consultation?

Mrs Haslam: We would have to be advised in advance what exactly was being planned for the area, how big it would be, how many residents would be there, what access and egress there would be to and from the area, what environmental impact there would be—all of those things. Anything larger than what is there needs to be considered and we need to be shown there has been appropriate planning put in place in line with my three questions at the start. Why is it being built? Is there a real need for it? Who is going to be running it? Is it going to be a facility that in 10 years' time I might actually look at using and therefore I am going to be more positive about it? If it is going to be built here is it the best place? I am not sure it is the best place for an old people's residence either because you certainly could not walk from there to the local shop to buy a cup of coffee in your 70s. You would break your legs on those roads.

**THE CHAIR**: Before we go to further questions, I have a question for all of you. Can you just explain to me what those 10 residents who were initially informed on 5 January actually did?

**Mr Griffiths**: Do you mean in response?

**THE CHAIR**: Well, they got a letter through their letterbox. They opened it.

**Mr Griffiths**: How it was executed?

**THE CHAIR**: What did they do next?

Mr Griffiths: The original 10 residents' letters were hand delivered. So if they were not home it was left in the letterbox. They were given the information. It was essentially a brief misleading notification. It was really only a few residents who cottoned on to the fact that something questionable was going down, that there was a little bit of cloak and dagger going on while we had a look at some of the information that did not add up. From that point a few of us got together, started to do a little bit of research, and that is when the whole can of worms opened up.

MRS DUNNE: On that question, is there anyone here who was one of those 10?

Mr Griffiths: Yes, me.

**MRS DUNNE**: Anyone else? Okay.

**THE CHAIR**: Did you call the numbers that were given at the bottom of that letter?

**Mr Griffiths**: Yes I did. Mark Kendall was one of the original people and I called Mark Kendall. He was in hospital getting ankle reconstruction surgery so his wife suggested I call the other number, which was Luke Jansen; that was the mobile phone call. That was the one where I was originally trying to find out as much information as possible and as the information was coming forward it was just becoming more and more horrifying. It

was at that point that I suggested this is going to cause grave concerns to the residents and this is when he essentially said, there's nothing you can do about it, it is a done deal.

**THE CHAIR**: So you were having that conversation with one of those contacts and they were telling you things and you were getting further and further concerned?

Mr Griffiths: Yes. Also, just to clarify a point that Maryanne was making, you were asking what would we want to talk about, was it the consultation and all of that? I think it is essentially just trying to find out as much as possible about who our new neighbour is going to be. It is such a close-knit community and this is going to be a new intimate neighbour and we are trying to find out as much as possible, essentially trying to find out what it is that is going to be put in that area, and this is one of the things that we have not been able to do.

MR HARGREAVES: Nigel, going back to that letter and being aware of the restrictions of the committee and what the committee can look into and what it cannot, you mentioned a Mr Kendall. Was there indication on that letter whether he was from the Department of Health or the planning people?

**Mr Griffiths**: I think he was procurements manager of ACT Health.

Miss Andrews: It was. Mark was from Health

**THE CHAIR**: What is your name?

**Miss Andrews**: My name is Kestrel Andrews. My memory of that off hand is that there were two numbers on the bottom of that notification. One was for Mark Kendall from ACT Health and the other was for Alan Morschel from the architectural firm.

MRS CROSS: I cannot hear you very well. You will have to speak up.

**Mr Griffiths**: The other number was Alan Morschel from the architectural firm. We have got a copy of the letter here, so it was—

**MR HARGREAVES**: If you have got it there that would be good. I think we have probably got one somewhere else. But I was really after your perspective as the resident that has received this letter.

Mr Griffiths: Yes.

**MR HARGREAVES**: There was no contact number for the planning people on that letter.

Miss Andrews: No.

MR HARGREAVES: Am I correct in that?

**Miss Andrews**: It is a letter from Health, not from ACTPLA.

Mr Griffiths: That is correct. There was a project architect, the acting Manager of

Capital Works, ACT Health, and the Manager of Capital Planning, Risk and Procurement.

**MR HARGREAVES**: So whilst it may be an unacceptable level of consultation, which is the message I am getting loud and clear, it would appear as though that was an attempt by the health people to get some sort of message out under whatever restrictions they had. But there was nothing from the planning people.

**Mr Griffiths**: There was certainly an attempt to get a message out. It was not consultation, because I actually asked them while they were hand-delivering it, "What do we do if we have objections?", and Mr Kendall clearly stated, "There is nothing you can do; this is a done deal". He said, "Here is a number if you want to find information". So it is more notification rather than consultation.

MR HARGREAVES: Okay. The point that I am actually trying to get stuck in my head here is that the players, if you like—from your perspective as a citizen looking at the government—representing the so-called government in any communication with you were an officer from the Department of Health who one would expect would have responsibility for the facility and the architect who drew the pretty picture of what it was going to look like. But there was nothing from those people who can say whether it can go on that block of land or not—and the people with whom we would normally expect to undergo the consultation process.

**Mr Griffiths**: Yes, that sounds like a fair assessment.

**MR HARGREAVES**: I just wanted that for the record.

MRS CROSS: Could you read the first paragraph of that letter out to the committee because I do not think I have seen it.

MRS DUNNE: Yes you have.

**MRS CROSS**: Have I? Just read the first paragraph out to jog my memory.

**Mr Griffiths**: It says:

Dear Fadden Resident—

And this was also delivered to Macarthur residents—

This letter is to let you know about construction work that will be undertaken at the Karralika Health Facility, 256 Bugden Avenue, Fadden, commencing sometime after March 2004.

The work is required to refurbish the interior of the existing Karralika homestead, but will also involve the replacement of several of the existing out buildings with new ones and the addition of new facilities. There will be no change to the existing purpose of the Karralika facility, which currently serves as a residential rehabilitation facility. While there will be some increase in the level of activity at the site, once construction and landscaping work has been completed, the facility will retain its essentially discreet and low profile character.

MRS CROSS: Thank you for reading that out.

**MR HARGREAVES**: And I have just noticed that that is Department of Health letterhead.

MRS DUNNE: Yes.

**MR HARGREAVES**: And there is no other letterhead. It is not a joint effort or anything like that.

**Mr Griffiths**: No. If I may, there has been no correspondence to my knowledge—and I am a resident of Macarthur—from this territory's planning authority.

MRS CROSS: So when you got this you would have read it and thought—well, I will ask Mr Griffiths. Mr Griffiths, when you got this letter you would have looked at it and thought, "Hang on. This is a fait accompli", because it is actually not consulting; it is just informing you.

Mr Griffiths: That is correct.

MRS CROSS: And given that you have got this from ACT Health, the letterhead says—

**Mr Griffiths**: Well, it also says at the bottom, the last paragraph, "I will update you on this important project closer to the expected commencement date".

MRS CROSS: Which basically is neither an opening nor a closing consultation at all.

**Mr Griffiths**: That is correct. I scanned this letter quickly on the spot and that is when I asked them what do we do if we had objections, and they made it very clear that this was a different story; it was signed off—

MRS CROSS: And did you say earlier you rang the architectural firm?

**Mr Griffiths**: At one stage we did—a little bit later on down the process when we were trying to find out more information.

MRS CROSS: And when you rang the firm, what was their advice to you or the information they gave you?

Mr Griffiths: Well, we tried to get them to send us information, and they were having trouble sort of meeting the needs that we had. There seemed to be some amazing miscommunication there. And in the end they essentially said that they had been told they could not deal with us any longer; we had to forward all responses back to ACT Health.

MRS CROSS: And did they say why they were told they could not deal with you any longer?

Mr Griffiths: I think it was financial reasons actually.

MRS CROSS: Okay.

**MR HARGREAVES**: But that was interesting that your responses had to go to the Department of Health.

**Mr Griffiths**: Absolutely.

MRS DUNNE: Mr Griffiths, you said that some people read it and sort of did not think very much of it. I think that the point was made at an estimates hearing a while ago that what was represented there was pretty much a misrepresentation. I have actually read that to people and said, "What do you think that means?", and most people will think, "Well, we're going to sort of change the interior, we're taking out the old tool shed and putting in a new tool shed sort of thing".

Mr Griffiths: Yes, jaws dropped when we told them what was happening.

MRS DUNNE: Yes, and when you tell them what is actually happening it is quite different. When did you twig? You said some people did not twig. When did you twig that something was amiss?

**Mr Griffiths**: I think there was no particular point in time; it was a slow process. We started doing a small amount of research in the following few days, and then when we realised that there was a bit of, I guess you would call it cloak and dagger going on, we started to really hit the phone seriously. So we would say that within the first week we uncovered this issue

MRS CROSS: Can you also advise the committee of your experience with Canberra Connect?

Mr Griffiths: Yes, that was another level of obfuscation. One of the residents was in charge of trying to extract information through the Canberra Connect switchboard system, and he is a very persistent fellow. He has received a lot of reference numbers now from all of that, but at one stage he built up quite a relationship with one of the assistants and they told him off the record that they had been told to give Karralika inquiries low priority and to pass them around.

I personally reached a point where when I was trying to find information from ACTPLA, one of the employees at ACTPLA—and ACTPLA I think really were trying to do a thorough job but their hands were tied—this particular person told us that they had been told from higher powers that any more inquiries were to go through to the architectural firm, and of course the architectural firm were telling us to go through ACT Health.

**MRS CROSS**: Has the information you have just given us come from another KAG member—in other words, the KAG member spoke to the Canberra Connect person?

**Mr Griffiths**: Yes, the Canberra Connect person was a different—

MRS CROSS: So it is a KAG person that has given you this information; is that correct?

**Mr Griffiths**: Yes, definitely a KAG person; yes, that is correct.

MR HARGREAVES: Given that it is, with respect, a number of people down the line—somebody tells somebody that tells somebody—what do you think the person who received that information over the phone would be prepared to come forward and tell the committee—or at least put it in writing; they do not have to physically turn up, if you know what I mean?

**Mr Griffiths**: I think that person would be happy to give it in writing. I could get back to you later.

**MR HARGREAVES**: I think it is important, and I would appreciate it if you would. I also recognise that you are not prepared at this stage to name that person, which is fine.

**Mr Griffiths**: And we also do not want to cause trouble for Canberra Connect, because they are just doing their job as well.

**MR HARGREAVES**: I should advise you also that the privilege which attaches to information which is given to this committee means that people cannot be sued for defamation and stuff like that, as Ms Dundas indicated on here, but of course there is the other side, the responsibility side.

But also when the committee report, the minutes and all that sort of stuff are actually authorised for publication, the committee has the right to actually block out pieces. If, for example, this gentleman wanted to say, "Well, this is the truth and this is how it went but I would appreciate you keeping my name out of it", then the committee has the right to consider doing just that.

**Mr Griffiths**: We will certainly look into that, but we have no doubt that there have been higher powers tying hands all the way along. For example, with ACTPLA HQSD, whilst having a conversation with a person from ACTPLA, this person indicated that the project had not gone through and possibly would not even pass HQSD but it had been signed off by a superior.

**THE CHAIR**: When were you informed of that?

**Mr Griffiths**: That would have been—it is fairly recent, yes, because it was definitely after the submission.

**THE CHAIR**: Yes, because your submission talks about the HQSD process actually being completed so—

**Mr Griffiths**: Because it has been ticked and signed and we have the paperwork for that. And it was after that that we found out that a particular person from ACTPLA felt that not only would it probably not have passed HQSD but that it had not gone through the process; it had just been signed off.

**MRS CROSS**: Mr Griffiths, can I just say that what you are saying now is serious, and I take Mr Hargreaves's point, that it is important that we get this type of evidence either from the people that are giving it, or in writing. The reason it is important is that it does

fit into the terms of reference of this inquiry, which go to the planning process. And if someone has attempted—and I am saying "if"—to interfere with that process, then it is very important that we are made aware of that.

**Mr Griffiths**: Yes. We can provide the name of the person from ACTPLA who gave us that information as well, but—

MRS CROSS: That is excellent.

**Mr Griffiths**: But before doing that, if it is okay with you, I would like to check with the person who gave us that information—

MRS CROSS: Sure, yes.

**Mr Griffiths**: And let them know that things are heating up now.

MR HARGREAVES: But I think it is also worthwhile you telling this person that this sort of stuff that you are telling us is very serious stuff—I mean, super-serious stuff—and we will be almost obliged to put that question to the officers of ACTPLA. And so, having received the sort of indication from you that there is some suspicion on the process, if that cannot be substantiated then there will be ramifications, obviously, and we need to be able to make sure that fairness actually is the go.

MRS CROSS: We also want to protect people who do give this information from the department from being victimised—

**Mr Griffiths**: Right, okay.

MRS CROSS: Because this is a very delicate issue now. We now come to the core of this inquiry, and that is the planning process, and any potential or perceived interference. So it is very important that you know that we will do our utmost to handle any information you give us sensitively. Okay?

MRS DUNNE: Madam Chair, could I ask some questions of Mr Rago?

**THE CHAIR**: Yes, let us ask some questions.

MRS DUNNE: Mr Rago, you said that at one stage incorrect block and section numbers were provided. Can you just outline what happened? Can you outline how this sort of came about and do you think it was incompetence or calculated?

**Mr Rago**: It was an attachment to that letter—

MRS DUNNE: That original letter.

Mr Rago: That Mr Griffiths just read out.

MRS DUNNE: This one?

Mr Rago: Yes, indeed. And when that particular attachment is studied closely one can

see that there are issues, misrepresentations and miscalculations within that particular attachment. There are in fact—there were two attachments, I am sorry. There was the elevation—a plan giving three of the four elevations—and a plan of the actual site plan.

**THE CHAIR**: And did you discover these mistakes just looking at these original plans, or was it when you went to Dickson and actually looked at the bigger plans?

Mr Rago: May I finish?

THE CHAIR: Sorry.

Mr Rago: Noting that this is the only information that some of the residents had—and I was advised by the community that this was happening so I joined in. Remembering that this was the only information that we had to start with, we had to research and find out, and we actually spent quite an amount of time trying to ascertain whether we were talking about the right piece of land, or the total piece of land, and through the expertise that we have in our community we managed to narrow that down.

Mr Griffiths might be able to say how long, but it took quite some time to narrow down the facts, noting that this Christmas letter of limited distribution was the only one piece of information that anybody in the community had received.

MRS CROSS: Can I ask a question on that, Madam Chair? Given that you have just said, Mr Rago, that there was a lot of time spent in procuring the information, because you were given a limited amount of information—

Mr Rago: Correct.

MRS CROSS: I think I would like to know—and you can take it on notice; I am aware that some people work from home and some people do not—how much time you have all spent on scrutinising or trying to get this information on this particular project, because I think it is important for us to know how much time your group has spent in getting all this, because this is incredible.

**Mr Rago**: I can answer a little bit of that and then take the rest on notice. Once I was informed by Mrs Dahl and Nigel and Mr Griffiths that this was happening—and I live a few doors away. That was early January, if I recall correctly—about 5 or 6 January that I had the knock on the door. I then chose to do nothing apart from this work for the next two weeks, doing the research to try and understand the questions that Maryanne had raised actually—

MRS CROSS: Full time?

**Mr Rago**: Full time. Two weeks I spent, because I felt the need to understand the full ramifications of the whys and the wherefores of this particular probe, and indeed some of the issues, as Madam Chair has pointed out, do not come within the—

**MRS CROSS**: Do you work? Do you have a job?

Mr Rago: Yes, I do. I work for myself.

MRS CROSS: And how did you get to do this? Did you take leave or—

**Mr Rago**: I work for myself.

MRS CROSS: So you took away from your business to do this; you sacrificed your business time to do this job?

**Mr Rago**: Two weeks, yes. I must admit that was not an issue. I mean, it was a pretty quiet time anyhow.

MRS CROSS: No, I understand that, but—

**Mr Rago**: But I felt the need to actually fully understand what was being presented before me and put that into context. And after I had done that study on this I passed on information that I had gleaned to other members of KAG. And by pooling all this information we then got what we thought was a picture of the way things possibly were.

MRS CROSS: You said you live a few doors up.

Mr Rago: Yes.

MRS CROSS: If you just live a few doors up, how come you did not get a letter—well, you would not know the answer to that, but you did not get a letter, did you?

**Mr Rago**: No, I am not one of the 17 in accordance with the distribution.

MRS DUNNE: Just going back to one of the things that you said, this letter says buildings will cover 26 per cent of the site, but you have said in your submission that 80 per cent of the useable area will be covered. Just looking at this plan, which is page 2 of the attachments, how do you come up with the figure of 80 per cent of the useable area? I notice that it is qualified by the useable area.

Mr Rago: Yes, that is a very good question. It is not at the footprint. I mean, you could have a very small footprint that covers a very small area and put a 20-storey building on it with high density. What we believe—and in accordance with all the planning guidelines, and advice, and the research that we have done—is that one has to consider the full ramification of all the facilities, paths and all those other things. It is not just a buildings issue. The buildings may only cover 26 per cent, but all the other infrastructure that goes around those particular buildings covers up to 80 per cent of the site.

MRS DUNNE: So that is including the car parks, and the paths, and the sand pit, and the—

Mr Rago: All of those bits and pieces. And one has to take that into consideration in such a development process when you look at the numbers of people proposed to be there, and, I think, the distance of this development from the nearest private residence, which is about—I think it is  $21\frac{1}{2}$  metres.

Mr Griffiths: Could I please respond to a couple of those things because I might have a few extra points to add. With respect to the usable area, none of us is really expert at reading maps—it's not our profession—but on this map here you'll see that to the west on the map there's a strange curve; that's actually a storm drain. So everything from the storm drain to the west is not usable for buildings. So what we're saying here is, take the area east from the storm drain onwards from that curve and have a look at that area. Then have a look at the amount of that area that is actually being used up with buildings. So I honestly believe that when they say 26 per cent of building footprint they're probably correct. They've probably done their sums. It's also a very convenient way to—

MRS CROSS: Make it seem less—

**Mr Griffiths**: Yes, exactly. The fact of the matter is, when you look at this, pretty much all of this area will be concrete and buildings apart from a few patches of tan bark and a few shrubs. So at the moment it's pretty much nature reserve.

**THE CHAIR**: This is a question I asked before: you had these plans, you started to think there was something wrong with them, you were trying to research block numbers and eventually you got into Dickson and were able to look at the plans there—

**Mr Griffiths**: Sorry no, we couldn't get into Dickson. It was confidential so we couldn't get into Dickson. That was a lot further down the line when he opened it up a little bit.

**THE CHAIR**: Okay. What did you see at the ACTPLA offices in Dickson?

Mr Griffiths: If we can just step back a little bit. With the issue of the block and section number, the original plans did have that incorrect section number; it said section 339 of block 1. The result of that was I called ACTPLA and asked them about it and said, "Can you tell me a little bit about Karralika?" They said, "I'm sorry, we can't work with names, you need to give us a block and section number." I gave them the block and section number and of course there was no plan there for that block and section number. They said, "No, you're right, there is nothing in there." It was only a few days later that someone contacted us and said, "Hey guys, did you know you've been given the wrong block and section number?" The correct block and section number was block 1, section 399. I called ACTPLA and said, "Okay, let's try again. Block 1, section 399," and then they said, "Yes, we do have that."

**MRS DUNNE**: I see, so on this—the number has been crossed out and I don't have my glasses on so I couldn't read it.

**Mr Griffiths**: That was my crossing out on the original.

MRS DUNNE: So it is actually 339.

Mr Griffiths: The correct one is 399

MRS CROSS: 399.

MRS DUNNE: Yes, I know. But what it originally said was 339.

**Mr Griffiths**: Yes, and I think we actually got that information off allhomes.com. So we're not—

MRS CROSS: Where did you get that?

**Mr** Griffiths: allhomes.com. I mean we're just residents here, you know, but we're doing the best we can.

MRS CROSS: Can I ask a quick question going on from something that Mrs Haslam said earlier. You said that—I didn't know this—they were offered Honeysuckle Creek. Did you say that? How did you find that out? Who told you?

**Mr Griffiths**: ADFACT volunteered the information. We were going to a Friends and Families of Drug Law Reform meeting.

MRS CROSS: Okay. I'm just curious as to how you found that out.

**THE CHAIR**: Can I get an answer to my question? You eventually got into the ACTPLA offices in Dickson. What happened there? You were told to go there, that the plans would be available in Dickson.

Mr Griffiths: That's correct.

**THE CHAIR**: Eventually you got there. Were the plans available?

**Miss Andrews**: I was one of the people who went. Four people from KAG went down to Dickson. After we got the second notification we went down to Dickson and had a look at what was there. What exactly would you like to know?

**THE CHAIR**: What happened? You are told that the plans would be available and you rock up in Dickson. What are you shown?

Miss Andrews: We were shown similar plans to the ones that they had sent us previously and they had a couple of extra elevations of the buildings. That was pretty much all we could have a look at. Then we spent about two or three hours there negotiating with ACTPLA staff to try to get hold of some more information. Initially they said, "It's all confidential. We can't show you anything." As we had a discussion with them they decided, "Well, there are probably a couple of things that we can show you," and they would go off and find something and blank things out and all that sort of stuff and then come back and give us some extra information. But it was very limited.

**THE CHAIR**: And were you allowed to ask questions about the plans you saw and the extra elevations? Did you ask questions? You have said that you're not planning experts. You were looking at a diagram, basically. Were you able to have conversations with ACTPLA staff about what that diagram actually meant?

Miss Andrews: Yes. If we had questions they would answer them.

**THE CHAIR**: Thank you. We are running short of time. I'll take last questions and then I'll let you wrap up, Nigel. But please keep it brief.

**MR HARGREAVES**: My question is a very brief one. The person from ADFACT who told you about Honeysuckle Creek, presumably is the same person with whom you discussed what the institution was going to do, and what it intended to do. Who was that?

**Mr Griffiths**: There were two key players there. There was Lynne Magor-Blatch who, in my understanding, is a supervisor of clinical services and—

**MRS CROSS**: What was her name?

Mr Griffiths: Lynne Magor-Blatch, and Phil Lawler—

MR HARGREAVES: Phil Lawler, the director.

**Mr Griffiths**: Phil Lawler who's the CEO of ADFACT.

**MR HARGREAVES**: CEO, right. Thank you. We might have a chat with Mr Lawler about the planning processes behind it, not what the institution is going to do.

MRS DUNNE: Just looking back at these things—the original piece of paper that you received—I notice that none of them has a scale on them. Did they ever have a scale on them?

Mr Griffiths: There was a scale on the original one but it was incorrect. When we actually had an on-site meeting with the architect a lot later on and we spoke to him he said that he believed that the scale might have been slightly inaccurate. But by our calculations they are suggesting that the nine-metre buildings will be about four metres tall, according to their scale.

MRS DUNNE: Would it be possible to provide the committee with an original? I've looked at these before and this one, which is part of the submission, doesn't have a scale on it. We might actually have to ask the health department.

**Mr** Griffiths: I think you will find that yours does have a scale—on the bottom right.

**THE CHAIR**: I think we've already got that in the submission from ACTPLA.

**Mr Griffiths**: On the bottom right it says, "A3 plot"—which is what this is—"1:200". So it suggests that the building is about four metres tall.

MRS CROSS: I'll ask one last question. I'm interested in the comment that you made regarding your meeting or session with ACTPLA. You said you spent 2 to 3 hours "negotiating". Your words were that you were negotiating.

Mr Griffiths: Absolutely.

**MRS CROSS**: Can I ask you to explain to the committee what you mean by negotiating with ACTPLA? What did you have to do? And why were you there that long?

Miss Andrews: Because we were trying to get more information and we were very

persistent. There were three or four of us at different periods of time. Some people came in the beginning and had to leave to go back to work, and then others would take over.

MRS CROSS: So you had to go through shifts to keep it going on in one day?

Miss Andrews: We had to do shifts. Yes.

MRS CROSS: Where was this?

Miss Andrews: That was at the Dickson shopfront.

**MR HARGREAVES**: Did you have a go at the FOI scheme of things?

**Mr** Griffiths: We considered that option. We certainly had it lined up as a possible option as the only course of action.

**MR HARGREAVES**: But you didn't actually need to go down there in the end? Is that right?

**Mr Griffiths**: One could argue that perhaps we would have been better doing that right from the beginning. A few colleagues advised us that if we were to do that it would change the whole ballgame, so we probably needed to be a bit careful.

**MR HARGREAVES**: In what way was that?

**Mr Griffiths**: Well, I'm not a legal expert but my understanding is that once you start slapping FOIs on things that—

MR HARGREAVES: They disappear down the—

**THE CHAIR**: We'll let Mr Griffiths answer that question.

**Mr Griffiths**: Partly that. But it changes the whole process. That's my understanding of it. And also these things apparently are quite costly, so that's another issue.

**MR HARGREAVES**: Well yes, except you can apply to have that waived. The reason why I was asking the question—

**THE CHAIR**: Sorry, I think that Lou has the answer for you.

Mr Rago: In response to that, there were two main reasons—having had some dealings with this sort of activity in another life—cost and time. They were the driving issues, but primarily time, noting that it was at a particular time of the year when most folks were away, so we marshalled our resources to glean what we could. Having said that, of course, we still had to be ready to go forward. But the timing precluded the areas we needed to go through in delivering what we required in the timeframe to actually get our act together to deliver various pieces of information.

MR HARGREAVES: Where I was coming from with respect to that was noting the amount of actual physical time and tag teaming that you had to do to get what you did. I

was just wondering whether or not you had a go at the FOI process and ran foul of it and whether or not people were totally uncooperative in respect of that and therefore you were stuck with the other. But correct me if I'm wrong, what I'm hearing is that you still have that up your sleeve a little later on if you don't get what you were going for.

**Mr Griffiths**: If need be, yes.

**MR HARGREAVES**: Okay. I'm happy with that.

Mrs Haslam: I think it was the very naive assumption on all of our parts until maybe six or eight weeks into the process that we only had to ask the right questions; that if we pooled our resources and learned a little bit more about the government processes; that maybe we were at fault; that we just weren't asking the right person or asking at the appropriate office. So for a while there we really just kept saying, "There's no conspiracy here; we're just not asking the right questions." A little bit further down the track it became vaguely apparent that there was.

**MR HARGREAVES**: So you were going with incompetence ahead of conspiracy at that point. Good call.

THE CHAIR: Nigel, can you please wrap up?

**Mr Griffiths**: Yes. And just to finish that investigation into ACTPLA, I think Kestrel forgot to mention that ACTPLA had actually allocated specific staff members to deal with the Karralika issue, so when this team turned up and started asking questions they had to go off and get the correct staff member to deal with that issue.

MRS CROSS: Who were they?

**Mr Griffiths**: We can provide names if you want.

**Miss Andrews**: We can if necessary.

**Mr Griffiths**: Well, as you've heard, the total lack of consultation and adequate planning for this development has burdened this community with a conflict that could easily have been avoided. If people had been consulted from the beginning it would have been quickly evident that this was not going to work and alternatives could have been explored.

This has resulted in an unnecessarily adverse situation for everyone involved. Instead of a useful and appropriate solution being found during adequate planning and consultation we have ended up with a high public profile and reduced community support for the Karralika program; significant loss of time in providing the increased support for drug rehabilitation; another bungled development by the planning minister; an outraged community that has lost faith in their government; a waste of the community's time and resources; a waste of the Legislative Assembly's time and resources; and a waste of money already spent on an inadequately planned development.

None of this was necessary. It could have been, and can be, done differently, with far more positive results. All that needs to be done is to genuinely ask and genuinely listen

to feedback. It's that simple. All we're after here is for some commonsense to prevail. Put the development in a more appropriate location; it's the most effective and simple solution.

We appreciate that we wandered into this grey area of planning, terms of reference and so on. We are addressing the third point of the standing committee's invitation which asks for any other issues specifically related to the planning or public consultation process. We would like to ask you to consider at least briefly some of these basic planning questions: the why questions. Perhaps with more of an altruistic outlook on planning we might be able to remove some of those weekly media releases on planning issues at the moment.

Anyway, we ask that the committee please listen to this community. They are the people who love and care about the community. They did not choose this development; it has been forced upon them after the fact. This community has a right to the highest possible degree of participation in a decision making process. There are 5,000 people living in the community who deserve that right. The 60 clients of the Karralika centre are just passing through as are the developers, the current government and the people who run the centre. This transient minority should not be given greater rights than the permanent majority.

We're not suggesting that the clients of the facility shouldn't have the services they need. What we're saying is that this is not the most appropriate location to build those facilities. This community has said no. No does not mean that the government and its associated agencies have to use more force and sneakier tactics. We've seen their digital photographs, their renditions, their skewed perspectives and their clever numbers and we're not fooled. It's not the point. "No" means listen to the feedback and find a better alternative. If you force this on the community it only results in conflict and in a build up of resentment about the centre. It's counterproductive in every way.

In the interests of a positive outcome this is what we would like to see occur: the facility being built outside a residential area—there are plenty of alternative sites available that would be appropriate; genuine widespread community consultation occurring with all major developments across Canberra—notifying a handful of residents about a facility that affects the whole community is not good enough; a clear and effective system of community consultation—there should be community planning forums of some kind to deal with these issues; There was no system in place to assist us at all. We would also like to see the planning minister prohibited from making planning decisions that relate to his other portfolio, i.e., health, to prevent this kind of conflict of interest occurring in the future, and the call-in powers of the planning minister abolished—the potential for abuse is too high; and a change of lease on the Karralika site in Fadden to prevent any major developments from occurring there in the future so the community can finally have some peace of mind.

We're more than happy to assist and be consulted in the development of these suggestions. We're not going anywhere. The Karralika Action Group is dedicated to remaining active until the issue is resolved and an effective community consultation system is in place. Until then we will be actively working on behalf of this community and others to bring about those goals.

The lack of government consultation created us and we will happily hang about like a

bad smell until we're given reason not to. That reason would be genuine resolution. Resolution or revolution: it's a choice. We hope this committee can encourage the government to choose resolution. It would save a whole lot of everybody's time. Thank you very much.

THE CHAIR: Thank you very much.

The committee adjourned at 10.47 am.