



Debates

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31 May 2023

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Wednesday, 31 May 2023

MADAM SPEAKER (Ms Burch) (10.00): Members:

Dhawura nguna, dhawura Ngunnawal.
Yanggu ngalawiri, dhunimanyin Ngunnawalwari dhawurawari.
Nginggada Dindi dhawura Ngunnaawalbun yindjumaralidjinyin.

The words I have just spoken are in the language of the traditional custodians and translate to:

This is Ngunnawal Country.
Today we are gathering on Ngunnawal country.
We always pay respect to Elders, female and male, and Ngunnawal country.

Members, I ask now that we stand in silence and pray or reflect on our responsibilities to the people of the Australian Capital Territory.

Legislative Assembly—unparliamentary language Ruling by Speaker

MADAM SPEAKER: Members, you will recall that, during the Assembly on 11 May this year, Ms Berry took a point of order concerning the use of the word “dictator”. Ms Berry claimed that Mr Hanson and his backbenchers had made the comment at least a dozen times during the debate, and used the words, “If you look like little dictators taking over Calvary.” Whilst the word has not been—

Mr Hanson: Hear, hear.

MADAM SPEAKER: Mr Hanson, today is not the day. Whilst the word has not been ruled unparliamentary previously, I undertook to reflect on the matter and report back.

The *Macquarie Dictionary* defines a dictator as “a person exercising absolute power, especially one who assumes absolute control in a government without right or free consent of people”. The word was used on several occasions—six by Mr Hanson and once by Ms Castley—and in none of those were the words used to describe a particular member; rather, they were used to describe an action being taken.

Standing orders 54 and 55 prohibit the use of offensive words against any member and provide that all imputations of improper motives and all personal reflections on members will be considered highly disorderly.

I have considered the proof *Hansard* of what was said and in the context of the debate that occurred on that particular day. On this occasion, and in that context, I do not believe it was unparliamentary—but, I remind members, in that debate and in that context. I therefore do not uphold the point of order.

Members, be very clear that I ask members to be very careful with their use of language to ensure that they do not breach standing orders 54 or 55, and I will be very attentive to language used throughout the course of debate today.

Petition

The following petition was lodged for presentation:

Callum Brae Nature Reserve—Symonston crematorium—petition 13-23

By Ms Clay, from 252 residents:

To the Speaker and Members of the Legislative Assembly of the Australian Capital Territory

The following residents of the ACT draw the attention of the Assembly to Development Application 202138789 for a proposed crematorium complex located on a 9.72 ha site, adjacent to the Callum Brae Nature Reserve.

DA 202138789 proposes the clearance of critically endangered Box-Gum Woodland which will have a significant adverse environmental impact on threatened ecological communities, including endangered Gang Gang cockatoos, other flora and fauna as well as disrupting the breeding sites for the small ant blue butterfly. The crematorium complex would disrupt connectivity among several Nature Reserves.

Furthermore, there is currently no need for another crematorium with two crematoriums in the ACT operating at 18% capacity and a third planned for the Hume Southern Memorial Park.

The crematorium proposal includes two cremators, expected to use gas infrastructure, which can cause toxic emissions. ACT plans to prohibit new gas connections from November 2023. The DA site is classified NUZ1 broad acre zoning, which does not allow car parks. Nor is it clear that a crematorium rather than a cemetery is allowed.

Your petitioners, therefore, request the Assembly to call on the Government to

- investigate whether existing capacity of crematoria in the ACT is sufficient
- advise on projected greenhouse gas emissions from the crematorium, noting the new EIS trigger that applies to greenhouse gas emissions
- review all licences and approvals required and advise if these have been provided
- review whether the proposed crematorium complex complies with NUZ1 broad acre zoning
- incorporate Block 1, Section 3, 99 Mugga Lane (9.72 hectares) into the existing Callum Brae Nature Reserve to protect biodiversity, connectivity and enjoyment by ACT residents and visitors.

The Clerk having announced that the terms of the petition would be recorded in Hansard and a copy referred to the appropriate minister for response pursuant to standing order 100, the petition was received.

Motion to take note of petition

MADAM SPEAKER: Pursuant to standing order 98A, I propose the question:

That the petition so lodged be noted.

MS CLAY (Ginninderra) (10.04): I want to speak briefly about the petition presented by Pamela and the Friends of Callum Brae today. This is actually the second petition on this topic. The first petition received 583 signatures. This one has received 252. I know that Pamela and the Friends of Callum Brae are really concerned about this issue.

Pamela has pointed out that this has endangered gang-gangs in it, and that it is the only known breeding site for the small ant-blue butterfly. She has actually joined up with the Conservation Council, and Ms Eleanor Lawless has added her voice on this issue. She has called into question the emissions that might come from this facility.

It is always fantastic when we can take voices from the community directly into the Legislative Assembly. It is a really important role of these petitions. I look forward to a thorough and considered response to this issue, knowing that there are a lot of people in that area and a lot of people who are really concerned about the Callum Brae reserve.

Question resolved in the affirmative.

Justice and Community Safety—Standing Committee Scrutiny report 29

MR CAIN (Ginninderra) (10.05): I present the following report:

Justice and Community Safety—Standing Committee (Legislative Scrutiny Role)—Scrutiny Report 29, dated 23 May 2023, together with a copy of the extracts of the relevant minutes of proceedings.

I seek leave to make a brief statement.

Leave granted.

MR CAIN: Scrutiny report No 29 contains the committee's comments on four bills, 12 pieces of subordinate legislation, one regulatory impact statement, proposed amendments to two bills and two government responses. The report was circulated to members when the Assembly was not sitting. I commend the report to the Assembly.

Public Accounts—Standing Committee

Statement by chair

MRS KIKKERT (Ginninderra) (10.06): Pursuant to standing order 246A, I wish to make a statement on behalf of the Standing Committee on Public Accounts relating to a referred bill.

The Health Infrastructure Enabling Bill 2023 was referred to the committee on 11 May 2023. The committee notes that, according to the resolution of the Assembly of 11 May 2023, the bill may be debated in the Assembly prior to any committee inquiry or report. The committee determined that there is not sufficient time to conduct an inquiry and report on the bill before it is debated. For this reason, the committee has resolved not to inquire into this bill.

Statement by member

MRS KIKKERT (Ginninderra) (10.06): I seek leave to speak as an individual member to the committee statement on the bill, as I have just presented.

Leave granted.

MRS KIKKERT: Scrutiny is an essential element for ensuring responsible government. In bicameral parliaments the upper house—formally named the “legislative council” in the states—is also called the house of review, because of its central role in scrutinising the actions and decisions of the executive government, which arises from and therefore controls the lower house or Legislative Assembly.

The parliament of New South Wales offers an important explanation in one of its documents, which I quote:

The basic rationale for having two parliamentary chambers is the need to avoid a concentration of power in a single body, and the risk of abuse which this entails. Dividing power between two legislative chambers of broadly equal status is a safeguard against a single chamber taking extreme and extensive measures which may lack broad community support.

It continues:

A further rationale for having two chambers is to ensure that the Parliament can properly perform its role of holding the government to account and checking or restraining the use of government power. In most instances, a single chamber is unlikely to be able to act as an effective restraint as the majority of its members will be representatives of the government party [or parties] who vote as the government dictates. A second chamber with broadly equal powers to the first provides a more effective check on government conduct.

Parliaments with only a single chamber, such as we have here in the ACT, have sought to implement alternative strategies to try to prevent the concentration of power leading to extreme or excessive measures, and to ensure that the government of the day can be held to account. The principal strategy in the ACT Legislative Assembly is our system of standing committees and the crucial role each plays in

reviewing proposed legislation. Information on the Assembly’s website makes this perfectly clear:

Committees have an important role in enabling the Assembly to consider issues in more detail than is generally possible during debates in the chamber. They are also an opportunity for the public to have a say on issues that affect them, as most inquiries seek submissions and hold hearings.

The ACT Legislative Assembly website also assures Canberrans that a bill goes “through several stages, giving members and the public an opportunity to have their say” and will only be debated and voted on “after scrutiny and inquiry stages are complete”.

Further, the December 2020 resolution of appointment establishing our current standing committees begins with the following statement:

The purpose of such committees is to enhance the scrutiny of the Executive, to examine and suggest improvements to any bills referred to it, to enable the citizens of the Territory to engage and to participate in law-making and policy review, and to enable financial scrutiny of the Executive’s budget proposals.

Any attempt to bypass or circumvent an inquiry into proposed legislation by a standing committee should therefore correctly be seen as an attempt to avoid scrutiny of the executive, to devalue good legislation, to prevent the citizens of the territory from engaging with and participating in lawmaking and policy review, and to disable financial scrutiny.

Those are your goals, and that is precisely what we are seeing play out in the Assembly today. When the health minister Ms Stephen-Smith presented the bill authorising this government’s forced takeover of Calvary Hospital a mere 20 days ago, every single Labor and Greens member opposite voted along with her to suspend standing orders—the rules of this Assembly—to allow the bill to be debated and voted on today, before the public accounts committee, which I chair, could conduct any kind of inquiry.

I remind those opposite, and those who read or hear my words, of what wise democratic legislative bodies realised a long time ago—that, without this kind of scrutiny, the risk is that a concentration of power in the executive will lead to extreme measures lacking broad community support. Checks designed to hold a government to account and to check or restrain the government’s use of power are not trivial things at all. They are there for a reason. When members of the parties forming the government decide foolishly to toss aside those checks, just because scrutiny might be in the government’s way, the outcome will never be good. Unchecked, unregulated, uncontrolled government never is; I promise you that. That is precisely what is happening with this government’s forced acquisition of Calvary Hospital.

The government whip, Mr Gentleman, has tried unsuccessfully to convince the public that this government’s decision to take the authoritarian and undemocratic approach is motivated by concern for the staff at Calvary Hospital. No doubt this fake justification sounded good when it was workshopped by the cabinet or by staff in the minister’s office. But no-one believes it—no-one! Calvary staff certainly do not. The Australian

Nursing and Midwifery Federation has said that the mad dash by Labor and the Greens to forcibly take over Calvary Hospital without the normal consultative processes has left nurses and midwives in distress. In a public statement, nurses at Calvary have accurately accused the ACT government of arrogance and have stated—again, accurately—that it is making an absolute mockery of democratic process.

Senior doctors at Calvary have called on the government to stop the acquisition until consultation can occur. “We believe we live in a democratic society where our rights and opinions matter,” they have stated, acknowledging that what is happening today is indeed undemocratic. They have called for “due process” to be followed prior to what they have labelled “such drastic action”. Furthermore, the President of the ACT branch of the Australian Medical Association has said that “the time frame of the ACT government’s forced acquisition of Calvary Public Hospital Bruce is unreasonable”, leaving senior medical staff feeling that “they have been disrespected and ignored”. Consequently, the AMA is calling for a longer time frame to allow senior medical staff an opportunity for consultation and to warn against mistakes the government is making.

Every single one of these concerns could have been avoided if the public accounts committee had been allowed to follow the normal democratic process of holding a public inquiry into this bill before it was debated and voted on. To their everlasting shame, those opposite—despite everything they have ever said or written about the importance of democratic processes, transparency, community engagement and government responsibility—have demonstrated that, when it comes to getting their way, their presumed commitment to all of those things can be thrown right out of the window in an instant. And no-one is more aware of this than the nurses, midwives, doctors and other staff who work at Calvary.

After using Calvary staff as the excuse to fast-track this legislation right past democratic safeguards, has the minister listened to what staff at the hospital actually want, which is for the debate on this bill to be delayed to allow for due process? Clearly not. The staff at Calvary have publicly stated what they want, and many of them have repeated their demands to the Canberra Liberals, and, I am sure, to those on the other side as well. I say to these staff members: we hear you, and we respect you. Clearly, demonstratively, ACT Labor and the Greens do not. The security and wellbeing of Calvary staff have never been anything more than an excuse for this government to let nothing and no-one get in its way, including, ironically, the staff at Calvary.

Lastly, I remind those opposite who have convinced themselves that this decision to bypass established democratic safeguards is somehow the moral or right choice that there has always been an alternative. Standing order 192 allows the member in charge of a bill to declare that a bill is urgent. If agreed to, due process is still followed, but within a compressed time frame. Minister Stephen-Smith could have done this if her goal, and her cabinet’s goals, were to act quickly. I can only conclude that, from the beginning, the real goal was to avoid scrutiny, to prevent consultation and public engagement and, in short, to get what the ACT government wants, democratic processes be damned. The Labor and Greens MLAs who have endorsed this authoritarian advance should be ashamed of themselves. They have revealed their true colours. My colleagues and I will not let the residents of this territory ever forget.

What is really going on here has become even clearer to me. The Health Infrastructure Enabling Bill was introduced on 11 May, only 20 days ago, and although ACT Labor and the Greens had already voted to trample established democratic safeguards by allowing a debate to proceed before an inquiry could be completed, the bill was still referred to the committee. I think the government took a crash course on impulsive decision-making and earned a diploma in “How to make people unhappy 101”—or a crash course in “Removing democracy and replacing it with totalitarianism 101”. Perhaps the minister mistook haste for efficiency, but all she has achieved is a masterclass in causing public discontent and wasting people’s hard-earned tax dollars on the legal battlefield.

Regardless, I am always up for a challenge, so when this 20-day time frame was bestowed upon the public accounts committee like a surprise package from a time-management dictatorship, I was ambitious to prioritise efficiency, collaboration and effective decision-making to match the unfair and challenging timeline. I therefore suggested to the committee to have an interim report ready by today, which is a normal procedure, as confirmed by the committee secretary. It was doable; it could have been achieved.

However, Greens member Mr Braddock and Labor member Mr Pettersson did not want one.

Mr Hanson: Shame.

MRS KIKKERT: Surprise! They had no appetite even for partial scrutiny. Today, I say shame on them, as I did in our meeting. They have successfully prevented—

Mr Braddock: A point of order.

MADAM SPEAKER: A point of order. Resume your seat, Mrs Kikkert.

Mr Braddock: I believe Mrs Kikkert is divulging confidential committee information as part of her speech.

MADAM SPEAKER: I will come back to you on the point of order by the end of her speech.

Mrs Kikkert, you know full well that you cannot divulge private deliberations.

MRS KIKKERT: I understand that, Madam Speaker; I had consultation with the Clerk and he said it was okay, so I thought it was okay.

MADAM SPEAKER: You may have, but I am not aware of that. With my caution, please continue.

MRS KIKKERT: Thank you. It appears that they believe in transparency only when it suits the Labor-Greens agenda. But selective transparency is not how one responsibly manages the government’s treasury, acquisition and contracts.

Holding an inquiry was important and would have allowed for careful consideration and the gathering of as much necessary information as possible within the 20-day challenge that the minister dropped in our laps. It was doable and an interim report was possible. Instead, a majority of the committee did not want one.

The decision to rush a forced acquisition has led to widespread dissatisfaction amongst the affected individuals. Instead of considering the concerns and opinions of the people involved, this Labor-Greens machine has determined to run them over. The haste of this decision has disrupted the lives of many citizens, breeding resentment and further eroding trust in this government and all Labor and Green MLAs altogether. Common sense requires that the single largest acquisition since self-government crucially required a committee to engage in careful scrutiny. Unfortunately, I was outnumbered by the Greens and Labor members of my committee, who voted against the democratic process of scrutinising a bill before debate.

This house is meant to be a democratic house, but those opposite have turned it into a totalitarian one. You have come here today as elected members to represent the public, but each of you is willing to rob the public of their will, their voices and their right to engage in proper scrutiny of this forced takeover of Calvary Hospital. Again, this is the most significant acquisition in the history of the ACT government, but Labor and the Greens have rejected transparency in favour of something more resembling a dictatorship. Outside this Assembly, however, the people still believe in democracy; thank goodness. Mark my words: they will have their voices heard at the next election when they will anxiously work to remove you from this Assembly, just as you have today removed their voice from this Assembly by blocking proper scrutiny of this Calvary bill.

MADAM SPEAKER: On Mr Braddock's point of order, I direct members to standing order 241, which says that a committee's evidence, documents or proceedings may not be disclosed or published to a person unless they have been reported to the Assembly. That is a shortened version of standing order 241. There is no point of order. But it is good manners for committee members always to have respect for other committee members.

Health Infrastructure Enabling Bill 2023

Debate resumed from 11 May 2023, on motion by **Ms Stephen-Smith:**

That this bill be agreed to in principle.

MR HANSON (Murrumbidgee) (10.26): The Canberra Liberals will be opposing this undemocratic, unprincipled, deceitful and destructive bill in every possible way. We oppose it on health grounds, we oppose it legally and we oppose it ethically. This bill tramples over staff. It tramples over trust. It tramples over our democratic principles and over common sense.

It is an appalling example of a government acting without consideration for due process and without concern for the harm that they will cause. Most of all, it is a breach of trust—the trust of staff, patients, all of the people of the ACT and any business doing work with the ACT government.

It is worth taking note of what we are talking about here. Calvary are a vital acute public hospital providing services to the north of Canberra. They employ over 1,800 staff, from wardsmen to nurses and specialists, and they have established and maintained contracts with many local Canberra businesses.

Importantly, they have provided good health care to the ACT for over 44 years. They have 76 years left to run on a contract signed with them fairly recently by this government. Today this same government is going to tear all of that up!

What does this legislation that is before us today do? It takes over an entire hospital without the consent of staff or providers. It takes all of the land. It takes all of the assets. It takes all of the systems. It takes all of their people. It takes all of their information. It takes all of their contracts. It takes all of their hard work and goodwill, and it takes everything else that the government wants. If Calvary do not comply by 3 July, the bill contains the threat of the government calling in the police to use force to acquire it.

Most egregiously, this legislation represents a broken promise. It is an act of deceit. It is a breach of faith and a breach of trust. This government have gone back on their own deal. They have broken their word.

In 2011 the government promised to develop and work with Calvary to expand that hospital to 400 beds. We in the Canberra Liberals have always supported an expansion in acute hospital facilities in the north of Canberra, but for a decade this government has done nothing other than string us along, string Calvary along and string the community along.

This government's future hospital plan, as it was called, that was tabled in the Assembly in 2011 promised a 400-bed Calvary acute hospital. On the back of that they signed an 88-year contract with Calvary that has 76 years left to run.

It is an important point, Madam Speaker, that it is this government that signed that contract! As Archbishop Christopher Prowse said in the *Canberra Times* on 24 May:

These are not agreements signed by some long past government. It is the same ACT government that signed the deal that now wants to tear up the contract it signed. A contract, in fact, signed by federal Finance Minister Katy Gallagher when she was ACT chief minister.

This bill that is before us today is just a way for this government to legalise breaking that contract and breaking their word.

What the government are doing, and what they have done, is ambush a health provider here in the ACT. They did it in secret and they did it with deceit. As we heard Mrs Kikkert say, this is a deal that they had stitched up between them, behind closed doors, in this place, in the community and in committee. It is absolutely irrefutable. I will quote Calvary from 10 May, in an article headed, "Devastated" Calvary Boss says government went quiet for 6 months":

Calvary national chief executive Martin Bowles said he was only informed about the planned compulsory acquisition of the hospital on Monday, the first time the government had contacted him since November.

“I heard nothing effectively and then I got a call to say, ‘Can you come in on Monday ... the Minister wants to talk’. I turn up and she says, ‘I’m introducing legislation that will compulsorily acquire your land and buildings and will also terminate the contract you have in place’.”

The reaction from staff and specialists has been scathing. Mrs Kikkert made the point that this excuse, to hide behind staff, has been utterly debunked. I will read from an open letter from senior nurses at Calvary. They state:

As a collective of senior nurses we write in response to the recent announcement of the Government’s intention to compulsorily acquire Calvary Public Hospital, with Canberra Health Services (CHS) assuming governance.

The way in which this has been done reflects poorly on the highest levels of leadership within the territory.

To allow the majority of Calvary’s 1800 staff to find out about this via social media was absolutely disgraceful.

Clearly this had been in covert planning for quite some time. The level of complicity in this deception speaks to a somewhat disturbing ethical code and leaves us with many questions related to your party’s ideology.

The arrogance of making and releasing YouTube videos and transition websites by CHS prior to this decision even going to the legislative assembly makes an absolute mockery of democratic process and was so disrespectful to the staff of Calvary Public Hospital.

The subsequent misinformation and mixed messages that have ensued following the announcement, fed by the inability to present staff with a clear and transparent plan for what this all means, is incredibly unfair.

As members of the Canberra community it concerns us hugely that we have now set a precedent for due process to be bypassed, for consultation to be bypassed, in order to facilitate the government to do as it pleases. It concerns us that the appointment of a whole team of transitional staff at CHS ... has occurred with no consideration for the principles related to fair and transparent recruitment processes as outlined in the nursing and midwifery EBA.

CHS have shown us neither kindness nor respect by their recent actions. This leaves many of us here at Calvary with the question: how do we trust you?

It is a fair question for them to ask. Of course, they are not the only ones to voice their concerns about what is happening and how it is being done. The Australian Salaried Medical Officers Federation, ASMOF, said that many of their union members were distressed by the news of the takeover. I quote:

“Some members have worked previously for the ACT government at CHS and have had bad experiences there and are concerned about the implications for them and returning,” he said.

“Some have recently returned to Canberra to work specifically at Calvary—they’re concerned that they’ve made major changes in their lives already.”

Mr Ross also questioned the capacity of CHS management to smoothly manage the transition of Calvary to CHS, adding the union already had a number of outstanding disputes ...

The AMA, in a report from 21 May, stated:

Senior doctors at Calvary Public Hospital are shocked, dismayed and angry at the ACT government’s plans to forcibly acquire the hospital.

“There’s a general feeling that senior medical staff have been disrespected in this whole process so far”, said Prof Walter Abhayaratna, AMA ACT President.

The overwhelming message from a meeting of the medicos was that senior doctors and other staff have been ignored by the ACT government and given no opportunity for consultation or to warn against the mistakes the government was making.

“Many of the senior doctors who met with us have provided long and, in some cases, multi-decade service to Calvary and the residents of Canberra. They deserve to be respected ...

“One thing was clear at the meeting—the senior doctors were angry at being disrespected and wanted to tell the ACT government that they have set a terrible precedent.”

Hear, hear. I agree with the doctors. The Australian Nursing and Midwifery Federation, on 26 May, said:

Nurses and midwives have been left in “distress” at the speed of the ACT government’s takeover of Calvary Public Hospital Bruce, the Australian Nursing and Midwifery Federation has said.

The union has expressed concern at a lack of consultation, saying this was actually required under the territory’s nursing and midwifery enterprise agreement.

The agreement says the ACT public service “recognises that consultation and employee participation in decisions that affect them is essential to the successful management of change”.

The ANMF’s statement said the acquisition was not a conventional transfer of business but rather it was “the transfer of Canberrans’ healthcare”.

“It is a decision that goes to the health and wellbeing of all Canberrans, both right now and into the future,” the statement said.

“This is important because it is a decision that is made absent the views and advice from Canberra’s nurses and midwives.”

The comments from frontline staff make an absolute mockery of the minister's claim that this bill is being treated as urgent to look after staff welfare. Staff are saying the exact opposite. They want consultation and they want proper process.

The way that the minister has falsely hidden behind claims of staff welfare to ram this bill through without proper scrutiny is disingenuous and disrespectful. How many staff will now want to work for her and Canberra Health Services after this? I hope they do, but who could blame staff for walking away after they have been treated with such little respect from this government?

There is then the issue of cost. The government have tried to play down the issue of cost; but, yet again, that is a deceit. They are taking all of the assets and announcing afterwards what they will pay. But what will that be?

An article titled, "Value of Calvary Public Hospital in Bruce could exceed \$200 million, property industry sources say", from 2023, stated:

The compulsory acquisition of Calvary Hospital in Bruce could be valued at more than \$200 million, property industry sources have suggested.

This all calls into concern whether this is being done on just terms. Certainly, the process to date has been anything but just!

I have spoken to several very senior lawyers in the ACT who have looked at the bill and advised me that it is actionable both to the Federal Court and to the High Court; and, in their view, there is a very good chance of that action succeeding. We now know, based on media reports, that the Little Company of Mary will be taking this matter to the High Court.

What about public opinion? People with no connection with Calvary have been approaching me in shock. They question why a government would act like this. There is a petition against this move that has so far gathered over 32,000 signatures—32,000 signatures!—against this proposal. Those voices should not be ignored.

What is also inconceivable and what we hear is this view from the government that they think they can run Calvary better than Calvary runs it. Why do they think that? Let us turn to what the nurses said. The nurses themselves have made it very clear. They stated:

It has certainly convinced us that the culture of CHS—described as toxic, even by its own employees—is a direct reflection of the values and behaviours that stems all the way to the top, and that the culture review was nothing but a box ticking exercise ...

All of this sets up the system for failure from the outset. A system that cannot withstand much more given what it has been through in recent years.

I had a long conversation last night with a staff member at Calvary, talking about the impact that COVID has had on them and the impact that this latest piece of information, the acquisition, is having. It is devastating for those staff members.

Dr Paul Burt, a former head of anaesthetics at both Canberra Hospital and Calvary Public Hospital, is quoted as having—and I quote:

... accused the ACT government of “dubious managerial competence” in its administration of the health service it currently runs.

It’s had problems in cardiology, obstetrics, intensive care, paediatrics, plastic surgery, just to name a few.”

The union said:

Canberra Health Services and Calvary had different policies, procedures, governance arrangements, models of care and ... ethos.

The union questioned how all these matters would be worked through in only five weeks.

It is a good question. When this was first announced, I read a letter that I had received from a staff member at Calvary who was a concerned citizen and who talked about the impact this was having on him. He had been at Calvary, and then went to Canberra Health Services, and said:

I chose to return to Calvary from the health directorate due to the incompetencies in management of the health director, blatant ignorance of bullying and harassment.

Being a gay man, I can honestly say I felt less welcome in the Health Directorate than I ever did at Calvary, in fact as a gay man I feel extremely welcomed within the public hospital and with management across Calvary ...

We know this is happening nationally, but even Labor members have concerns. This debunks that this is just some conservative point of view. Katy Gallagher said:

Compulsory acquisition could also be a disaster.

“That would cause a lot of conflict, it would put the system into disarray.”

The member for Bean, David Smith, said:

If you’re going to have significant workplace change, you should go through a proper consultative process, with the workforce and ... patients. That’s the aspect of this process that is disappointing for me, I’d urge the ACT ... to do as much consultation as possible.

When you see such damning responses from doctors, nurses, the community and even Labor politicians, you have to ask: why is the government doing this? It is impossible not to conclude that there is an element that involves an attack on faith. Whether Mr Barr denies it or not, that is how the people of many faiths are feeling. There is no doubt that many Catholics across the ACT feel under particular attack by this government. I quote from an interfaith forum held recently that had senior representatives of many faiths. I quote from their chair, Dr Khan, who is a Muslim:

We ask for your protection over Calvary Hospital from unfair decision or interference regarding ownership or running of the hospital.

I note with some concern the comment "... the medical service offered at Calvary has too much of a religious overtone..." It manifests some sort of hatred for religion and for people of faith behind it. Religion always helps and will never mislead or do any harm. Hence we pray for your mercy, grace, and power to protect Calvary Hospital so that the present management can continue to provide the services they do.

The Canberra Interfaith Forum is a community committed to inclusivity. We express our disappointment to the unfortunate arbitrary actions for compulsory acquisition in attempting to take over the management of Calvary Hospital.

We stand together in prayer and unity, praying for fairness, justice and transparency so that decisions are made with the utmost fairness and respect to all parties that are affected.

That is from Dr Khan, the Chairperson of the Canberra Interfaith Forum.

Against such a blatant breach of trust, it is also impossible not to consider who is next. Who is next? As we have seen, Clare Holland House reported that their future is uncertain in the Calvary Public Hospital takeover. I invite the minister to be clear today about the future of Clare Holland House.

Ross Fox, the CEO of Catholic Education, wrote a letter which stated:

The ACT government's decision has raised questions as to whether this creates a precedent for compulsory acquisition of Catholic schools in the future. This possibility is a source of concern in Catholic Education.

The Archbishop has said:

The lack of transparency of the ACT government raises several questions and concerns. It is a very sad day when governments can simply decide to mount a takeover of any enterprise they like without any justification.

It opens up the question that all ACT institutions are now open to compulsory acquisition.

Who is next? Is it Clare Holland House? Is it the racecourse? We know that the Greens hate racing. We know that this is a government that works behind closed doors in secret with the Greens to achieve deals. Why is it that the racecourse was left off the draft Territory Plan? For anyone from this government who stands up here today and says, "We would never do that," I remind them that that is what they said about Calvary! This is a government that will not tell the truth—not about Calvary, not about Clare Holland House, and certainly not about the racecourse.

You can no longer trust this government. Calvary cannot trust this government, the nurses cannot trust this government, the community cannot trust this government, people of faith cannot trust this government. From this day forward, whenever this government say something, even if they write it in a contract, you cannot trust them.

We oppose this legislation, and we oppose this disgraceful compulsory acquisition of Calvary.

MR BARR (Kurrajong—Chief Minister, Treasurer, Minister for Climate Action, Minister for Economic Development and Minister for Tourism) (10.46): I rise in support of this significant legislation, legislation that reflects years of work undertaken by the territory government to plan for the growing public health needs in our territory.

The bill we debate today is necessary for the territory. It is necessary to acquire part of the Crown lease of the current hospital site in Bruce and to transition the operation of Canberra's north-side public hospital from Calvary Health Care ACT to Canberra Health Services.

The population of our city and the surrounding region is rapidly growing. The 2021 census confirmed that the ACT was the fastest-growing jurisdiction for the second consecutive census period. So, from 2011 to 2021, the ACT has grown faster than all other states and territories. Public health services in the territory now provide care for more than half a million people, and the demand will only increase.

This means we face two different but significant issues. One is the need to respond to this population growth and future predicted increases in demand. The other is maximising the benefits to the ACT community of efficient public healthcare service provision with the health infrastructure that we build.

In addition to population growth, Canberra is aging, and the complexity of disease and healthcare needs is changing. This has resulted in increased demand for public health services.

The north side of Canberra has the largest population in the territory, and this will continue to rise over coming decades. By 2060, the population in the north side of Canberra is projected to grow by at least another 200,000 people. Data from the ACT health directorate suggest that by 2041 we will need more than double the current capacity provided at the 1970s built Calvary Public Hospital. This is in addition to increasing capacity at the Canberra Hospital. The public health need for a new and larger north-side hospital is well established.

We have a longstanding commitment to deliver a new north-side hospital, with construction commencing mid-decade. This has been affirmed in the Parliamentary and Governing Agreement for the 10th Legislative Assembly and is in the ACT's infrastructure plan.

Our healthcare system must remain accessible, accountable and sustainable as our population grows. It must provide the right facilities in the right locations to meet future health needs for the territory and surrounding region.

The government has been considering the options to meet our growing health needs for some time. In 2016 we committed to conducting a scoping study for new and expanded north-side hospital facilities. This was supported by funding in the 2017-18 and 2018-19 budgets to commence planning for enhanced north-side hospital facilities and the continuation of feasibility and planning works.

To address the need for more capacity, in 2020 a condition assessment of the Calvary Public Hospital infrastructure was undertaken. This condition assessment found that many of the buildings of Calvary Public Hospital were aging and confirmed that most of the hospital's buildings will need to be replaced to enable modern health service delivery into the future.

A strategic asset management plan was developed for the hospital, and the government is working with Calvary to progressively fund and implement remediating critical works identified in this plan. Beyond this short-term investment, though, the detailed analysis undertaken by the government recommended that a new north-side hospital be built, rather than full remediation and expansion of the existing 1970s hospital buildings.

In 2020, the government committed to building a new north-side hospital, and in 2021-22 through the budget we established a north-side hospital project team to undertake scope and early design of a new north-side hospital and to investigate whether the best location for the hospital was at the existing Bruce campus or at a greenfield location in Canberra's north.

Preliminary architectural work as part of this analysis showed a new hospital could be built on the existing campus without the need to cease delivery of any public hospital services during the construction phase. Nevertheless, due diligence was also undertaken to identify greenfield blocks available on the north side and to assess them against a set of criteria for a new north-side hospital.

Unsurprisingly, there are relatively few greenfield sites within north Canberra's existing urban area that can satisfy the needs of a major new hospital. Important considerations include: being accessible to all residents on the north side of Canberra; being large enough to accommodate forecast hospital needs and allow for future expansion; having suitable site conditions such as zoning, topography and environmental considerations; having connectivity to other education and research institutions; and having necessary site access requirements required for a hospital, including the need to keep logistics vehicles separated from cars, having appropriate drop-off and pick-up points, having separate entry and unhindered access for emergency vehicles and having major road and public transport connections.

Compared to the alternative greenfield sites that were considered, the Bruce site performed strongly for a range of reasons, including that there are sufficient services already located on site to support the operation of a hospital; that the community is already familiar with public health services being available at that location; that there is sufficient room across the site to build a new hospital without the need to cease services during construction; and that the campus is accessible and well located near arterial roads and the future light rail corridor. Ultimately, the existing site of the public hospital in Bruce is the most suitable and the most logical for a new north-side hospital.

Choosing a suitable site was only the first step in determining the most efficient and effective way to deliver hospital services for our growing population. An equally important question to answer was how the new hospital should be operated—

whether Calvary Health Care ACT as the operator of Calvary Public Hospital or, alternatively, the ACT government is best placed to develop and operate a new hospital.

In 1971, before self-government in the territory, Calvary was granted a Crown lease to operate a public hospital in Canberra. The hospital was built at the taxpayers' cost, and Calvary Public Hospital, Bruce was opened in 1979. Following the territory being granted self-government in 1989, the territory's relationship with the Little Company of Mary continued to evolve. Negotiations occurred from time to time to try to align the contractual relationship with the changing health and welfare needs of the Canberra community, which included at one point an agreement to purchase the hospital, which then did not proceed after an external intervention.

In particular, there is a self-evident need for an efficiently run, territory-wide public hospital system that accommodates a significantly increasing population. As a result, the terms of the original arrangements, the Calvary Network Agreement, is tied to the term of the Crown lease, which expires in 2098.

In the meantime, the Canberra Hospital, was opened in 1973 and became the only trauma and tertiary hospital for Canberra in the region in 1991 after the closure of the Royal Canberra Hospital. This government opened the University of Canberra Hospital in 2018, which provides substantial subacute rehabilitation and mental health care.

The territory government is responsible for providing public health services to the Canberra community and the surrounding region through the three public hospitals in Canberra as well, of course, through a large range of community-based and home healthcare services.

Over the past decade, the government has invested significant funding to upgrade and build new infrastructure on the Canberra Hospital campus. This has included a new Centenary Hospital for Women and Children—which was opened in 2012 and is currently being expanded—and a more than \$600 million investment in the Canberra Hospital Expansion Project, which will deliver a new critical services building due to open next year, in 2024.

The 1970s Calvary Public Hospital currently has 260 beds. It is a level 4 acute general and teaching hospital. It has a range of critical care, medical, surgical and maternity inpatient areas. It currently caters for less than a quarter of public hospital activity in the territory.

Although it is not operated by the government, Calvary Public Hospital is, of course, entirely funded by taxpayers, through the ACT government budget. In the last five years alone, the ACT government has invested more than \$62 million in capital works at the hospital, and we will continue to invest in the facility whilst the new north-side hospital is being built to ensure that the highest quality care continues to be provided on the north side of our city.

Experience from other Australian jurisdictions has demonstrated that one-service multicampus hospital models deliver significant improvements in throughput and in

cost effectiveness. The benefits of having a single provider, evidenced in other jurisdictions, include more appropriate distribution of patients across hospitals; increased continuity of care, with seamless transfer of patients between sites to ensure all patients are able to access the right care in the most appropriate setting and at the right time; improved opportunities for staff, including training rotations; consistent clinical governance; capacity for increased specialty service provision and in-reach to the smaller site to reduce the requirement for transfer of patients for specialty consults; ensuring the clinical services meet the accepted minimum numbers for safe service provision by being able to operate single models across multiple sites; efficiencies in service provision, which support the delivery of increased activity at marginal cost; and a true hub-and-spoke model of clinical service provision.

Following careful consideration of the options and issues for the new north-side hospital, as well as the needs of the broader health system, the government has decided to move forward with a one-service operator model of public health services across the ACT. This will mean that the new north-side hospital is designed and built by the ACT government and that Canberra Health Services will operate it once it is completed.

This decision was not taken lightly or made hastily. It was informed by extensive work within government and negotiations with Calvary, as the only other operator of a public hospital in the territory. Bringing the management of public hospitals in the ACT under a single operator will enable a range of benefits across the health system and improve the ability of the system to respond to health demands across the ACT and the region.

Building the new north-side hospital under a single management system is a \$1 billion-plus investment in significant microeconomic and healthcare reform in the ACT and the region. This major new asset for the people of Canberra must be fully and properly integrated with Canberra Health Services. It presents a significant shift in the provision of health care but is in alignment with other jurisdictions and regions of a similar size. It provides the opportunity for greater health efficiencies and outcomes.

Work to improve the integration and efficiency of public health systems is not new, nor is it unique to the ACT. Over the last decade, the territory government has been working to improve integration and efficiencies between the ACT and New South Wales hospitals. A bilateral cross-border health agreement with New South Wales is now in place, supporting more connected health systems that deliver optimal health outcomes for ACT and New South Wales residents, regardless of where they access these services.

Our work to integrate the ACT's public hospitals is also consistent with work progressing at the national level. Last month, national cabinet articulated its shared vision for a patient-centred and sustainable Australian healthcare system that delivers the best outcome for our community. (*Extension of time granted.*)

The interconnected nature of our health system means that investments to improve access to primary care would be needed to reduce demand on our hospital system, by preventing the need for tertiary care and diverting people to the most appropriate

setting for care. In the ACT, our establishment of a growing network of public nurse-led walk-in centres demonstrates our commitment to delivering an integrated and effective public health system.

In the national context, the Australian government will deliver improvements to Medicare, through the Strengthening Medicare Fund. These measures will address immediate challenges in primary care, take pressures off the hospital system and lay the foundations for long term Medicare reform.

National cabinet also endorsed the recent 2023-24 commonwealth budget announcements designed to make health care more accessible and affordable. These will ease pressures on primary care and hospitals by enabling pharmacists and paramedics to deliver a wider range of services, expanding the nursing workforce, expanding access to and delivery of after-hours primary care, and supporting patients who have a regular GP to access wraparound care through the My Medicare system, particularly where they have chronic diseases. It will increase access to general practice services inside aged-care facilities, support multidisciplinary teams through flexible fundings and focus a greater investment in digital health.

In addition, the recent commonwealth budget announcement to triple the bulk-billing incentive for eligible patients, to make common medicines cheaper and to provide funding for more urgent care clinics will all combine to improve cost effectiveness and reduce demand on emergency departments and hospitals right across Australia. The decision to build a new north-side hospital under ACT integrated management will drive the maximum benefit for ACT residents from these national reforms.

This is a big change. It is a big change for our workforce—we acknowledge that—particularly for those working at Calvary. We understand and appreciate that it will be a time of stress for some staff and people who rely on Calvary Public Hospital for their health care. The safety, health and wellbeing of patients and staff are, of course the top priorities during the transition.

I want to think every Calvary staff member, from nurses and doctors and healthcare professionals through to reception, administrative, management, roster planners, cleaners and everyone else, who is working hard to provide public health care for the north Canberra community.

Hospitals and health systems everywhere are under pressure, and this change is imperative so that the ACT has an integrated and efficient hospital and community healthcare system. Transitioning operations to Canberra Health Services will create a more efficient and integrated health system that will allow us to better coordinate our health services, distribute resources effectively, strengthen the capacity of our workforce and plan the infrastructure we need on a territory-wide basis.

Delivering a new north-side hospital will service our community for at least the next 50 years. It will boost healthcare capacity and provide modern, sustainable and accessible infrastructure to attract, retain and support the very best healthcare workforce.

The bill before the Assembly today is indeed a significant moment in the delivery of public health care for the Australian Capital Territory. It will ensure the most efficient

and effective delivery of public health services for Canberra and people in surrounding New South Wales for decades to come. I commend the bill to the Assembly.

MS CASTLEY (Yerrabi) (11.05): The action being taken by the Chief Minister and the Minister for Health to forcibly acquire Calvary Public Hospital has thrown its workforce into limbo. This high-handed takeover will impact medical officers, nurses, midwives, allied health practitioners, hospital suppliers, contractors and VMOs.

Many of the 1,800 staff at Calvary are deeply upset. Their anxiety has been exacerbated by the obvious degree of planning and premeditation that went into this surprise strike. The overwhelming message is that they have been disrespected and ignored and that the time frame of the ACT government's forced acquisition of Calvary Public Hospital, Bruce is unreasonable.

ACT AMA President Walter Abhayaratna has said:

The overwhelming message from our town hall meeting was that senior doctors and other staff have been ignored by the ACT government and given no opportunity for consultation or to warn against the mistakes the government is making.

A group of senior doctors at Calvary has written to the Assembly. Their letter talks about: (1) a lack of consultation, saying:

It is an insult to treat health care staff like we are properties that we would just accept whatever terms and conditions the government proposed—

(2) ineffective administration and poor culture, and then the kicker is (3) the potential loss of experienced and well-meaning clinicians.

They go on to say:

The health minister said they are prepared that some of us may not continue, and it is okay. We say the loss of experienced and good doctors and allied health staff will take years to retrain and recover. We are not just some numbers. We represent skills and experiences that are not replaceable. Losing staff means risks of compromising patient care.

Dr Jeff Looi, from the Australian Salaried Medical Officers' Federation, has said that 33 days is an unbelievably short period of time to seek to integrate two sets of workforces and infrastructures into one organisation, and he mentioned concerns that the union has had about the capacity of Canberra Health Services and ACT Health Administration to be able to manage change processes, recruit and retain staff and manage their facilities adequately so that Canberrans are safe in terms of their health and welfare.

National Calvary Health Care CEO Martin Bowles has said:

Put simply, this rushed proposal will create uncertainty and could lead to attrition. This will have a direct impact on Calvary's ability to care for people safely.

The Australian Nursing and Midwifery Federation has also expressed concern at the lack of consultation, saying that the decision affects the health and wellbeing of all Canberrans now and into the future. The ANMF notes that CHS and Calvary have different policies, procedures, governance arrangements, models of care and a different ethos. It questions how all of these matters can be worked through in only five weeks.

I know Mr Hanson and Ms Kikkert have mentioned some of these quotes before, but they are worth repeating, because it is clear that the advice from stakeholders to this government has fallen on deaf ears, and the only people listening are the Canberra Liberals.

The ANMF have said such a thought has left nurses and midwives in distress. A Calvary Hospital nurse wrote the following in an open letter to her community:

Through institutions like Calvary Hospital, the Catholic Church has been at the forefront of fighting for social justice, providing essential healthcare services to those who might otherwise be overlooked or marginalised by the system. A takeover by the government threatens to disrupt this critical work and potentially create a healthcare environment that is less responsive to our communities most vulnerable members.

And if all this is not obvious to the Chief Minister and the health minister, it is to federal Labor member for Bean, David Smith, who says:

We know there's been a significant impact on the workforce through COVID and what we don't want to see is further unintended consequences by a lack of certainty.

When he was asked what the unintended consequences could be, David Smith said, "Well, if there are staff that do not necessarily want to continue because of the way the change has occurred. So, I guess we do not want to see labour shortages. We do not want to see an impact on community care"—blindingly obvious, I would have thought.

The way this government has handled this takeover risks alienating the Calvary workforce to the point that some staff may decide to walk, which will result in labour shortages in an already over-stretched ACT public health hospital system.

Many of the hospital staff only learnt about the takeover through the media, which must have been particularly distressing. But, according to the health minister, this was the only way it could be done. On 19 May, she told ABC radio, "Our capacity to consult with them, the staff, before we made this decision was limited by the fact that they do not work for the ACT government. Although they work in a public hospital, they work for a private organisation."

I just do not accept this. The health minister could have continued discussions with Calvary management and could have been more open and consultative about her options. She should have tried talking with her people. This would have avoided accusations of acting in bad faith, and the anxiety, distress and uncertainty the government's takeover is causing staff.

This government professes that its greatest concern for Calvary is for the staff, but it does not act accordingly. I am just going to read from open letter that nurses have sent to every member of this Assembly. In one paragraph, in particular, they say:

The way in which this has been done reflects poorly on the highest levels of leadership within the territory. To allow the majority of Calvary's 1800 staff to find out about this via social media was absolutely disgraceful. Clearly this had been in covert planning for quite some time. The level of complicity in this deception speaks to a somewhat disturbing ethical code and leaves us with many questions related to your [Rachel Stephen-Smith] party's ideology.

As I said, this letter went to every member in this place. The stakeholders, the staff and Canberrans do not feel like they are being listened to.

The arrogant approach of this government has had a chilling effect on staff morale at Calvary, especially people who have moved from ACT Health. Given the difficulty attracting and retaining skilled medical and nursing staff, the minister could and should have acted with caution.

The minister has said she does not believe staff losses will be as large as has been made out. She told ABC radio, "We would not have chosen this time frame if we did not think it could be done safely and with continuity of patient care." However, we see that project management experts have cast doubt on this time frame.

At the very time the public hospital workforce in Canberra needs stability, the minister is tearing up the contract of one of Canberra's two major public hospitals. The former Chief Minister, health minister and current ACT senator, Katy Gallagher, got it right when she previously said that "compulsory acquisition would be a disaster that would cause a lot of conflict and would put the system into disarray".

It is a sign of this government's arrogance that it now pays no heed to such outcomes. It cares more about its agenda than about staff at Calvary and Canberrans. The Canberra Liberals do care. We are listening. That is why we oppose this action. You cannot trust this government.

MS DAVIDSON (Murrumbidgee—Assistant Minister for Families and Community Services, Minister for Disability, Minister for Justice Health, Minister for Mental Health, Minister for Veterans and Seniors) (11.15): This is a critically important piece of legislation, not just for the health and wellbeing of Canberrans today but for setting the foundations to care for the needs of our community decades into the future. This is the most important health infrastructure project in the history of the ACT. With responsibilities including mental health, disability and justice health, I am committed to improving healthcare accessibility and quality for generations to come. An integrated and quality public health system including mental health services is part of my commitment to the community in which I live and am raising my own children, and it is the reason I support this important legislation.

Hospitals are not the only element of health care or mental health care. It is important that they are integrated with all other elements of the system to provide quality, joined-up care when and where it is needed. Hospitals are a critically important and

complex part of the healthcare system. In ensuring Canberra has the north-side hospital it needs now and well into the future, we need to objectively consider and examine the decisions that will ensure the best health outcomes for our growing community. That is why the ACT government has worked hard to consider a full range of options and research what will best deliver the highest quality health care to all Canberrans, across the whole city.

I support the decision to acquire land at Calvary hospital in Bruce—land that was gifted to Calvary by government and on which the public hospital buildings were built and maintained by government, including ACT government investment of more than \$62 million in Calvary Public Hospital’s facilities over the past five years alone. I support transferring the management of the public hospital to Canberra Health Services, alongside the Canberra Hospital and University of Canberra Hospital in Bruce, as we continue the community consultation and planning for the new north-side hospital facilities on the same site.

In voting with my Greens colleagues for the Health Infrastructure Enabling Bill, I demonstrate my commitment to quality, integrated public health care for Canberrans, now and in the future. This legislation will build on the work we already have underway to improve and integrate community and hospital based mental health services in Canberra.

As I have outlined in this place before, we are working on a range of improvements to the Canberra Hospital in Woden to deliver better health services to the community, including mental health services—for example, the establishment of a dedicated adolescent mental health ward at Canberra Hospital and plans to establish a new Safe Haven in Canberra Hospital, where people can access mental health support in a warm and welcoming environment that feels more like a lounge room or cafe than the emergency department.

We are also improving mental health services outside of the hospital setting to support people to improve their mental health before they need hospital services. We continue to invest in services delivered in the community, closer to home and at an earlier stage in a person’s mental health journey. This includes important new initiatives, like the Eating Disorders Clinical Hub, to better connect people with the services they need. Construction on the new residential eating disorders facility in Coombs will begin soon. The Safe Haven in Belconnen has been a success in diverting people in need from hospitals, as have the PACER teams, who respond to emergencies with paramedics, mental health clinicians and police, working together.

We are working with community to establish an Aboriginal and Torres Strait Islander suicide prevention service, and we will soon move the Child and Adolescent Mental Health Service to a new and improved facility to better serve the mental health and wellbeing of young people. Our introduction of the MindMap youth mental health navigation portal has also helped young people and those that care for them to find the support and services they need.

It is in the context of improving mental health services, both in hospital and in the community, and ensuring we are meeting the needs of all Canberrans, at all life stages and in all parts of the city, that we are discussing this important change towards a

more integrated hospital network for Canberra. At present, we have three public hospitals running under two service providers: the Canberra Hospital; the University of Canberra Hospital Bruce; and Calvary Public Hospital Bruce.

Calvary's staff deliver excellent care—there is no doubt. My own children were born there, even though I live in Woden. But Calvary's services are not as well integrated with other mental health services as they should be. My office and staff working throughout the mental health system in clinical and community settings have listened to the feedback that we receive from carers and people receiving care, and what we consistently hear is how important it is to receive consistent and integrated care, including when accessing different types of services and at different levels of acuity. That might include moving from an acute hospital inpatient ward to sub-acute or rehabilitation care, stepping down to community care, or needing emergency department care in crisis.

This bill contains important changes and measures that will allow for the smooth transition of information and services at the north-side hospital site to Canberra Health Services. This will deliver better integration of not only hospital services but also mental health care in the community. It is important that the transition process is one that is carefully considered and ensures that staff, patients, carers and the community are all supported and their needs continue to be met during this time of change. Continuity of care for patients and support for the wellbeing of staff are too important for us, in this place, to be distracted by who can shout the loudest. As anyone who works in an emergency department will tell you, sometimes it is the person who is the quietest who needs help the most.

Right now, the people that I am thinking about are the people who want to know that they can still go to their nearest public hospital emergency department in a crisis, can still attend their booked elective procedure, can still see their midwife for an antenatal appointment and can follow their course of treatment through to recovery, and that Calvary's dedicated, professional staff can still come in to work on the day of the transition and work with the same team, for the same manager and deliver the same quality services.

This bill ensures the transition protects the existing staff working at Calvary Hospital. I am aware that the upcoming changes to the north-side hospital have caused some concern. Canberra Health Services are doing their best to protect and communicate the rights of Calvary's staff through the transition period. As members of this Assembly, we all have a responsibility to support the sharing of accurate information and not to create unnecessary worry and distress for staff and patients. Calvary Hospital's workforce is a team of dedicated experts and we will support them in managing the changes ahead so they can focus on what they do best: providing quality health care to the people of Canberra. I thank all the staff at Calvary for the hard work and excellent care they provide every day.

The Health Infrastructure Enabling Bill will allow us to create the single, integrated hospital network we need for the future of our community. With Canberra growing and mental healthcare needs increasing in demand and complexity, we need a north-side hospital that has modern infrastructure and a workforce supported by a single provider to deliver excellent care into the long term. The measures in the bill will,

over time, allow for the necessary work to integrate new and existing services at the north-side hospital with those already delivered by Canberra Health Services. This new hospital, to be constructed by 2030, will be much larger to cater for the growing population, particularly to meet demand in the inner north, Belconnen and Gungahlin.

As we plan for the improved mental health services the new hospital will deliver, we will be doing so alongside the redevelopment of the Canberra Hospital in Woden, balancing models of care with the rehabilitation and subacute mental health beds at University of Canberra Hospital and the continued increase in community delivered services. Working on improvements to all three public hospitals under one system means we can take a truly coordinated approach that delivers a holistic mental health care system. It means consistent governance across our public hospital services and clearer accountability for what happens in our hospitals, to the stewards of our health system and to the community our health system serves.

We are investing over \$1 billion in the infrastructure needed to serve the health needs of the community and the governance and policies that underpin best practice care, and to build and support the dedicated workforce to deliver excellent health care to Canberrans. This bill is key to ensuring our investment builds the connections and integration we need to bring our healthcare system together under one provider and to grow with our community.

MR COCKS (Murrumbidgee) (11.24): This is an important debate. I would like to acknowledge all the people who have turned up today to see it proceed, both in the chamber and outside the building. We must treat the debate with the respect that it deserves. That means some clarity, starting with what this bill does and does not achieve.

The government has chosen to call this bill the Health Infrastructure Enabling Bill 2023. Nothing in this bill is about building a new hospital. The word build is not mentioned and the word construction is used a total of twice, only peripherally. Nothing in this bill is about building anything. This bill is purely, simply and only about taking and breaking.

Upon passage of this bill, the government will take a fully functioning hospital. They will take the land, the buildings and the infrastructure which have been built up over decades. The government will take the staff, the doctors, the nurses, the administrators, the ward staff, the pharmacists, the cleaners—everyone—and make them to work for the government. Their only choice is to leave. Upon passage of this bill, Labor and the Greens will take 40-plus years of goodwill built up by the hospital, its owners and operators, and they will break it. They will break the relationship between the hospital operators and their suppliers, they will break the relationship between the hospital operators and their staff, and they will break the relationship between the hospital operators and our community.

This bill, which takes and breaks, is nothing less than a Calvary hospital hostile takeover bill. Compulsory acquisition is an extraordinary step for a government to take. That is why it is so rare and so controversial. There are, sometimes, instances where there might be an argument for acquisition of land for important projects. In the ACT, as with every other jurisdiction, we have legislation already in place that sets

out how to deal with that, which raises the question: why do we need special legislation for this? Put simply, we need special legislation for this acquisition because it is fundamentally different. In fact, it is highly unusual.

This is so out of the ordinary that I could not find any recent case where an Australian jurisdiction took the assets of an operating business or not-for-profit in the way that this government intends to today. In an ABC Fact Check on compulsory acquisition powers, they needed to go back to 1947 to find an Australian example—the same year that the Chifley Labor government started trying to nationalise the banks. That went well!

So, with such an unusual and significant departure from the ordinary, I believe it is incumbent on each individual member here today to assess this bill and the government's intention to take Calvary hospital from Calvary Health Care on its merits. Sadly, it has been difficult to discern what has even happened. As far as anyone knew until a few weeks ago, compulsory acquisition was not even on the table. The last the owners heard was that the government was happy enough with their services to offer them another 25 years. The minister herself has told Canberrans that they had a good relationship. None of the issues that have been raised by the government in this debate were an obstacle to good faith negotiations or the ongoing operation of Calvary for another quarter of a century. It is unclear what has changed or whether there were secret discussions behind closed doors and they never intended to pursue that path.

The recent arguments we have heard from the Minister for Health, the Minister for Mental Health and the Chief Minister are steeped in spin and ideology. After spending days and weeks pouring over their arguments in opinion pieces, in their statements to the Assembly and in their responses to questions, I can see very little in the way of justification from Labor or the Greens.

They have tried the argument that they want to build a new hospital. They promised to keep working toward a new north-side hospital at the election. It is in their power-sharing agreement and it should be done. That is great, and it is about time that this government recognised they are failing to deliver an adequate health system in Canberra, but that is not an argument for taking an existing hospital. Indeed, they are not even planning to build a new hospital; they are simply planning to take the existing hospital, knock some of it down and build some new buildings. That is not a new hospital; that is just another broken promise.

Then there is the somewhat better argument for integration put forward by Minister Davidson in her opinion piece and again today. The ACT government says it wants integrated health systems, integrated health services. They say this would enable smoother transitions between services as well as better health planning. Integration is one of those amazing words that can mean different things, depending on how you use it.

I worked for years in the Australian government supporting people and organisations across the mental health sector in their efforts to better integrate mental health care across private, public and community mental health services. Integration was a fundamental underpinning theme of the Fifth National Mental Health and Suicide

Prevention Plan. That plan, and the suite of national reforms it spawned, set out a vision for integration—a way of understanding the principle that is really important for this debate. It said:

... integration is concerned with building relationships between organisations that are seeking similar aims to improve the outcomes and experiences of consumers and carers.

That vision for integration is one of integrating the patient experience of health care. That type of integration allows people to move between services without the trauma of retelling their histories, revisiting failed treatments or becoming lost in the yawning chasms that can appear between different services or programs in Canberra. It provides for warm referrals, handovers between providers, information sharing, easier system navigation, and cross-service support, no matter the entry point you find, not because you have only one choice of entry point.

But that is not what this government means when it talks about integration. Apparently, this government's perspective is that integration just means it gets to own everything and you have to put up with what it is that it offers. An integrated health system does not need a single provider, unless a government is incapable of working well with others. I would suggest that, where a government is that incapable, integration through acquisition is simply an erosion of choice that will undermine the outcomes and experiences of consumers, carers and all those with a lived experience. This government's idea of integration is no justification to take property away from its owners.

We need to address the other underlying narrative Mr Barr and his ministers have been driving. In trying to justify the unjustifiable, Mr Barr has tried to suggest that this acquisition is fine because the land and buildings were paid for with public money. That statement, parroted by his ministers, indicates the depths of the Chief Minister's ignorance when it comes to building an effective healthcare service and underscores a dangerous precedent in this whole episode.

The Chief Minister needs to understand that a hospital is more than land and buildings. A hospital must bring the full range of skills and talents of multiple health disciplines, administrators and all the other staff involved, together with strong evidence based systems, processes and procedures. If it is going to succeed, a hospital needs strong and positive values, and service-driven cultures and behaviours, and it needs trust from the community. Calvary has built all of that, not the government. Mr Barr is not entitled to anything.

Then there is the dangerous precedent. If this acquisition is about making ACT's health system more integrated with a single government provider, if it can be justified on the basis of governments having invested funding on which things are built, every not-for-profit health provider in the ACT is in the same boat. Precisely the same argument could be made regarding the government-funded Aboriginal health services or mental health services provided by Northside Community Service or Woden Community Services. The same argument could be made regarding STRIDE's ACT services. The same argument could be made regarding services provided by the Canberra Inclusive Partnership, Meridian or Spectrum. Government funding to

not-for-profits who deliver valuable services to the Canberra community is no justification for a government taking them away.

The Labor-Green coalition's forced acquisition of Calvary hospital is wrongheaded, ideological and destructive. The Minister for Health, the Minister for Mental Health and the Chief Minister have all told the ACT community that this bill is about building a new hospital. It is not. From where I sit, it looks like just another lie to justify what they simply want to do—political spin from a government with nothing left except ideology and spin. The arguments the government have put forward do not stack up. In fact, when it comes down to it, every argument they have put forward amounts to saying they want it—the government want it. They have the power to take it, so take it they will, unless some from the other side have the decency to vote against it.

MR RATTENBURY (Kurrajong) (11.36): I rise today to speak in support of the Health Infrastructure Enabling Bill and to commend it to my colleagues across the Assembly. The ACT Greens support this bill and we support the government's acquisition of Calvary as a reasonable and necessary step in the provision of an effective and efficient health service for Canberrans.

With Canberra's population expected to expand significantly, particularly on the north side of our city, it is essential that the ACT government makes plans to grow the provision for essential public health services in the interests of every ACT citizen while making the best use of existing assets. This is the rationale that the ACT government has made very clear. There has been a lot of commentary made on the acquisition proposal, including here today, and there has been a lot of speculation—a lot of strawmen built and attacked. There has been some pretty strident language used by those who do not support this proposal and a lot of attempts to make this some kind of ideological debate. But the government has been perfectly clear about the very valid reasons for the acquisition. The Greens agree with these, and I will, in the time I have available, touch on a few of the key points.

The ACT government has identified six key benefits from delivering health care through a single network model of care. The first is strong, unified and transparent governance. This will ensure that services are well aligned and that there are the same lines of accountability across the healthcare system. The second is improved workforce arrangements which will seek to build and maintain a strong combined workforce culture, making Canberra Health Services a destination of choice for healthcare professionals. Investing in our healthcare workforce will also build a culture which delivers the best possible patient care.

The third is greater flexibility in how patient care is delivered, with enhanced service planning, collaboration and public awareness. The fourth is economies of scale. By centralising our purchasing power, we can negotiate better deals with suppliers, ultimately resulting in better operating efficiencies, lower prices and more consistent practices. Of course, it is pretty well known that, if you order more of something, you usually get a discount, and, rather than having two rule books, if you need to develop only a single one you reduce unnecessary additional bureaucracy.

The fifth is that, by streamlining communication and optimising the use of space across the healthcare estate, we can redirect valuable resources towards frontline care. This means more funding for essential services accessible to all Canberrans.

The sixth is that, through asset sharing and efficient management practices, we can maximise the utilisation of our healthcare facilities and resources. By doing so, we ensure that every dollar invested in our healthcare system goes towards creating a sustainable and robust infrastructure that can meet the needs of the ACT's growing population.

As one reflects on those points, it is evident that the acquisition of the Calvary site is a rational and pragmatic approach towards delivering a healthcare system that delivers clinical excellence while also using resources efficiently and providing the best possible value for money. We know that each member of the Calvary team works to provide excellent care to every patient, but, as we undertake the largest infrastructure project in the ACT's history to date, spending \$1 billion on a new north-side hospital, we need to ensure that this existing care is seamlessly integrated into the wider health network.

We know that many Canberrans can attest to the professionalism of Calvary staff and to the excellent treatment that they, their relatives and friends have received. These points are not contested. Similarly, we know that Canberra Health Services, or CHS, already delivers a wide range of healthcare services across our city. CHS runs the Canberra Hospital, the University of Canberra Hospital and the elective surgery wait list. CHS also runs our five-strong network of nation-leading nurse-led walk-in centres. They run a range of community based health services, including childhood services, youth and women's health, dental health, mental health, and alcohol and drug services.

In this context, having Canberra Health Services as the operator of the north-side hospital will maximise the integration of the new state-of-the-art facility into the ACT's health system, streamlining the diagnosis of healthcare issues which can be seamlessly referred to suitable services across the healthcare network. As the Greens, we want to ensure our community has access to the best hospital experience they can have. That means high-quality facilities, well trained and caring staff, information technology that means staff have your health records on hand, and well organised support systems that you never notice but that mean your experience is as seamless and efficient as possible.

Equally though, as the territory's first mental health minister, I know that hospital is not always the best place for all stages of all conditions. There is much to be done through early intervention and alternative models of care. For example, I worked with the Health Directorate to deliver the territory's initial roll-out of the Police Ambulance and Clinician Early Response service, the PACER, service, which works together to assist patients experiencing a mental health crisis. In other jurisdictions, people experiencing a mental health crisis may end up in in the emergency department and perhaps not getting the treatment that they need. Many people who have used PACER do not end up using hospital services at all. They get the treatment they need in an environment in which they feel more comfortable. Those that do have to go to hospital are the ones who genuinely need to be there. It is all about ensuring people have access to the right service at the right point in their clinical journey.

Let me focus for a few moments on the public debate that has occurred since the government announced its proposal to acquire the Calvary Public Hospital. The announcement did come as a surprise to most people, and that is to be expected. At some point, you have to announce these things and people do not always see these things coming. It is a significant decision and not one many people would have contemplated. The people who did know it was an option and had contemplated it were those in charge of Calvary. It had been identified as an option, as part of the negotiations about the future health services on the rapidly growing north side.

As the Minister for Health has explained in various public comments that she has made, the government entered good-faith negotiations with Calvary last year—that was certainly the latest round—regarding the operation of the new north-side hospital and the modernising of the Calvary Network Agreement. Regrettably, through the course of those discussions, the parties were unable to reach an acceptable agreement. Calvary had an agreement that had run for decades and changes to update arrangements or seek out improved coordination of services could only be made when Calvary chose to agree.

They did not choose to agree. Although they contemplated the potential for acquisition that had been identified by the government as a possible pathway, they instead chose to stay in their preferred position. This left the government with a stark choice: continue with an outdated approach that our partner had limited interest in reforming or make the difficult decision, bite the bullet, and take the option that will deliver a better healthcare system for Canberrans into the future. I am clear which side of that choice I stand on.

That stark choice is reinforced by the funding issues that sit behind it. One fact that is not that widely known in the community when you go out and chat to people about these things is that either the commonwealth government or the ACT government has already paid for all the buildings at the Calvary Public Hospital site. Further, in the past five years alone, \$62 million of public money has been spent on the site. So the investments and the upgrades that are happening, and have happened in recent years, have been paid for already by ACT taxpayers. On top of these figures, the ACT government pays around \$260 million per year for Calvary services—one of the largest contracts held by the territory. These are significant sums of public money—vital resources that are being invested. We need to make sure we are getting the best possible return on that investment. These are the reasons why the government needed to take the decision it has to deliver healthcare services through a single network operator.

Given the earlier refusal to move, the disinclination to update the Calvary Network Agreement, the public protestations that Calvary now want to return to the negotiating table ring a little hollow. This is a significant decision. It is one that has not been taken lightly. It is one that I understand has surprised some people and one that has left some people upset or uncertain. I acknowledge there are members of the community who disagree with this decision. What I particularly want to emphasise today is for the staff who may be feeling uncertain or have questions to please take the opportunity to attend the information sessions being offered by ACT Health Services, to ask questions but also to raise the issues that they have. Their contribution is vital to ensuring the success of this transition.

Despite the inflamed commentary offered by some and the genuine questions flagged by others, one thing that I am certain of is that everybody wants to deliver the best possible health care for our fellow Canberrans. That is something on which I am sure there is a unity ticket. That is why I commend this bill to the Assembly without reservation, because this legislation is clearly designed to build a strong, interconnected healthcare system that will support today's and future Canberrans in living the best and healthiest lives they can.

MR DAVIS (Brindabella) (11.47): I rise today to speak on the Health Infrastructure Enabling Bill, one of the most significant pieces of legislation brought to this Assembly in my time as an MLA. Indeed, this bill represents one of the most significant decisions the ACT government has taken since self-government. The ACT Greens support this bill, as it is critical to enabling the ACT government to deliver an integrated and efficient healthcare system for everyone in this city and for all of those who will call Canberra home in the future. This bill enables the territory to build a brand new, north-side public hospital by transferring the existing site, employees, assets and services of Calvary Public Hospital Bruce to the management of Canberra Health Services.

Calvary has been operating the public hospital since the 1970s, when it was granted the facility and land by the commonwealth government. The ACT government currently pays approximately \$260 million every year for Calvary services, one of the biggest contracts in the ACT; that is every ACT ratepayer. Delivering good public health services is a fundamental and core role of good government, so we will start from the basics—something on which I hope most people in this Assembly can agree.

We Greens believe that all Canberrans have the right to access free, high-quality public health care. Health care is not just hospitals and infrastructure. Through our platform, the Greens embed the ambition for healthy communities in every bit of work that we do. Just as an integrated healthcare system and integrated interdisciplinary policies deliver the best outcomes for people, we have delivered significant improvements for the health of Canberrans. With the passing of this legislation today, we will continue to do so.

A good healthcare system prioritises preventative health care. It requires good detailed planning to deliver walkable neighbourhoods and encourage active transport. Governments have a central role to play in preparing our healthcare system for future climate change, which will bring new diseases and new healthcare challenges. Last year, I spoke to a motion in this Assembly calling on the government to develop a climate change preparedness strategy for the ACT's public healthcare sector and proposed a national strategy for climate, health and wellbeing to national cabinet.

In government, Greens have delivered the first PACER team in the ACT, which integrates our emergency healthcare services with mental healthcare services and police workers. This delivers better outcomes for people living with mental illness, while providing efficiencies for ACT ratepayers. We have established the first safe haven cafe to ensure that people contemplating suicide have somewhere safe to go other than distressing, busy emergency departments—better health care delivered more efficiently for ACT ratepayers. I have consistently called for better policies and

programs to address air quality issues caused by wood heaters, particularly in my electorate.

While we always want to keep people healthy and out of hospital and our core ambition and shared ambition in this place should be keeping our constituents out of hospitals, having an integrated public hospital network is also a critical part of public health care. Much of the infrastructure at Calvary Public Hospital Bruce needs upgrading, and the ACT government has already spent \$62 million of Canberra ratepayers' money in capital works at the hospital in the last five years alone. With huge population growth forecast for Canberra, particularly on the north side of our city, demand for hospital services will reach more than double the current capacity of Calvary Public Hospital Bruce by 2041, and the ACT government has a responsibility to plan for this. This is why the ACT government has committed to building a brand new, north-side public hospital with a \$1 billion capital investment: the single biggest infrastructure investment in the history of self-government, which will set this city up for delivering the healthcare services that Canberrans want and Canberrans deserve.

To ensure the new hospital has the best possible integration with other healthcare services, which will benefit patients, frontline healthcare workers and the community now and in future decades, the ACT government has decided that Canberra Health Services is best suited to operate the new north-side public hospital. The existing Calvary site was identified as the best site for the new hospital for many reasons. Canberrans have been accessing healthcare services at this site for over 40 years; we therefore know that the site can support hospital services. Keeping the same location will maintain the familiarity and confidence the community has with the site and allow the brand new, north-side hospital to be integrated appropriately with Calvary private hospital.

The ACT government has been in discussions with Calvary around its role in the new north-side hospital for some time but was unable to negotiate an agreed outcome. The ACT government has the responsibility to act in the best interests of all Canberrans. With the territory making this single biggest investment in health infrastructure in the history of self-government, Canberrans deserve to own and operate their hospital. The government will deliver a healthcare system owned by Canberrans, managed by Canberrans, staffed by Canberrans for Canberrans.

With Canberra Health Services operating the brand new, north-side hospital, we will see huge benefits for efficiency and service delivery. A single-network health system will provide more opportunities for staff across our public hospitals and clearer governance. It will boost buying power and lower the territory's costs. It will drive efficient communications. It will better use space and ensure consistent management and healthcare practices.

Madam Speaker, I acknowledge that change is often stressful, and I sympathise particularly with those healthcare workers who are anxious about this decision and the pending transition. I want to assure them that I and the Greens will always advocate on their behalf, especially during this transition period. This transition is both for patients and for healthcare workers, and it will only be successful if we provide optimal support for healthcare workers along the way. Our frontline healthcare workers are our healthcare system. I have sought information from the minister about

what supports are being delivered to healthcare workers, and I will continue to do so and promote that throughout the community throughout the transition.

I have consistently acted in the interests of frontline healthcare workers in this Assembly since I was elected. I chair the committee for health and community wellbeing. I have sponsored the biggest petition this Assembly term, calling for a detailed recovery plan for nursing and midwifery workers, which received more than 2,600 signatures. I am leading a subsequent inquiry into the same issues.

In addressing the many Liberal health motions brought to this Assembly, I have been a vocal supporter—

Mr Parton: What about the royal commission?

MADAM SPEAKER: Members!

MR DAVIS: I listened to you in silence.

I have been a vocal supporter not only of optimal patient care but also of healthcare worker safety, security and workplace satisfaction. I understand the decision to pursue a short transition period was based on expert advice. A short transition period provides the best chance of a seamless transition, including certainty for staff and, importantly—as I trust, frontline healthcare workers will empathise with—minimising interruptions to the services provided to patients and to the community.

Madam Speaker, as a non-executive member of this Assembly, it is my responsibility to scrutinise the decisions of executive government. As chair of the health and community wellbeing committee, I have demonstrated leadership and requested fortnightly briefings from Minister Stephen-Smith, senior officials at Canberra Health Services, the directorate and the transition team overseeing the transition. It provides me, and my Labor and Liberal colleagues who also sit on the committee, with the opportunity to be updated in a timely manner on the transition's progress, to ask questions, to raise concerns and to provide advice.

Opposition members interjecting—

MADAM SPEAKER: Members!

MR DAVIS: I support the decision enabled by this bill, as do my ACT Greens colleagues, and we will continue to work as part of this process to ensure we are monitoring closely and providing advice on the implementation of this decision.

Madam Speaker, hospitals are places where life-defining moments, both joyful and devastating, happen. That is no small thing. I was born at Calvary Public Hospital. I received emergency health care at Calvary Public Hospital as a teenager after doing typical things teenagers do. I would like to personally thank Calvary and all the staff who have worked and still work at Calvary Public Hospital Bruce. In particular, I thank them for providing life-saving health care to a member of my own family as recently as last year.

I am grateful to everyone who has shared with me their experiences of receiving health care from Calvary. I am grateful to every healthcare worker who has reached out to me and sought some time with me to discuss their experiences of working at Calvary and providing life-saving care to Canberrans.

My support for this bill is not based on any personal beliefs that I hold other than my desire to ensure that every single Canberran has access to the best health care possible. We know that there are ever increasing burdens on our healthcare system. The healthcare system is changing. It is growing more complex, not just here in Canberra but across the country and the world as well. Canberrans rightly expect this government to deliver the best possible health care. I believe that this decision is in the best interests of all Canberrans. It is a difficult decision, and I do not shy away from that, but it is one that is crucial if we want to ensure we can continue to provide the best possible public healthcare network for Canberrans today, for Canberrans tomorrow, for Canberrans always.

Debate interrupted in accordance with standing order 74 and the resumption of the debate made an order of the day for a later hour.

Sitting suspended from 11.57 am to 2 pm.

Questions without notice

Calvary Hospital—acquisition

MR HANSON: My question is to the Minister for Health, and it relates to the speed of the forced takeover of Calvary Hospital. Minister, we are aware of doctors who have stated publicly that they are concerned that the time frame is not reasonable and have proposed a longer time frame for the takeover. Minister, will you be extending the time frame for the forced acquisition of Calvary? If not, why not?

MS STEPHEN-SMITH: I thank Mr Hanson for the question. We do not intend to extend the acquisition date beyond 3 July at this point. All of the advice that we have received is that that is a reasonable time for transition to be safe and to ensure the continuity of patient care and support for staff. We have endeavoured throughout this process to provide as much certainty as we can for staff. A very important element of that is that they understand the time frame for the implementation.

Of course, transition will proceed a lot more smoothly if Calvary national supports Calvary regional to collaborate with Canberra Health Services. Indeed I note that a number of conversations have already occurred with some of the senior executive, and I thank the regional CEO of Calvary for facilitating a meeting between the Canberra Health Services CEO and some senior executives to talk about how this process is envisaged to work. Whenever I have spoken with staff, including doctors, I have been able to provide them with some reassurance about how it will work that has left them much more reassured that this is not only possible but the right way forward.

MR HANSON: Minister, what clinical risks are there in you forcing your takeover at a speed that is against the advice of doctors in the ACT?

MS STEPHEN-SMITH: It is not against the advice of doctors and nurses. We have doctors, nurses and other experts advising us about this. We have people on the team who have actually been through these kinds of processes before. Their very clear advice was that the quicker you can do this process safely, the quicker you should do it.

The people who have been through this process before have provided very clear advice that doing this process as quickly as possible, with patient safety and continuity of care in mind, is absolutely crucial. The reason for that is to provide certainty for the staff, and to ensure that things that support the staff can continue to go ahead—things like the reconstruction of the theatre complex at Calvary Public Hospital. Everyone would be aware of the fire in December. Calvary had seven theatres; they are currently operating with three theatres. My understanding is that that construction work has ceased during the period when the legislation was before the Assembly. It was very important that that occur quickly, and that we were then able to get in there and work with them through the transition to make sure that that construction work gets back on as quickly as possible, to make sure that recruitment can recommence as quickly as possible, and to make sure that all of the services can transition.

Of course, our significant investment in the digital health record means that the clinical systems are identical across Canberra Health Services and Calvary, which significantly reduces the risk associated with this time frame. So we are operating on the basis of expert advice from people who have done this before.

MS CASTLEY: Minister, why are you ignoring the Calvary doctors' advice for a longer time frame?

MS STEPHEN-SMITH: We are not ignoring the Calvary doctors. I have had a number of meetings with clinicians, doctors, nurses and allied health professionals. The CEO of Canberra Health Services, as I said, has met with executives from Calvary, and we are talking through with them the process that we are intending. When we have that conversation directly with Calvary staff—something that is difficult for us to do formally until the legislation is notified—actually, they understand the reason behind what we are doing and how they can help to ensure that this transition is smooth, safe and provides continuity of patient care.

Clare Holland House—operation

MR HANSON: My question is to the Minister for Health. Minister, I refer to the Canberra Health Service's website which, in relation to the future of Clare Holland House, says:

The ACT Government has invited Calvary to discuss its preference for the ongoing operation of this facility, its employees and operations. In order to provide you and the community [with] certainty, the ACT Government looks forward to discussing these matters with Calvary as soon as possible.

Minister, is the government considering taking over Clare Holland House?

MS STEPHEN-SMITH: The only reason that we are in this situation of even having to consider the future operations of Clare Holland House is that Calvary Health Care has consistently declined over many years our request to enter into a separate funding agreement for Clare Holland House. It was established under a separate contract and, when it was expanded in 2007, ACT Health sought to enter into a new, separate contract with Calvary to run Clare Holland House. It has always been the ACT government's position that Clare Holland House is not part of the Calvary Network Agreement.

However, Calvary has had a different position and has consistently declined to enter into a separate contract for the management of Clare Holland House and has got to the point where they have described Clare Holland House as the "Barton campus of Calvary Public Hospital, Bruce" and the staff are all employed as if they are employees of Calvary Public Hospital, Bruce.

This situation, where we are having to have a conversation about Clare Holland House as a result of this decision to build a billion dollar hospital on the north-side campus, has come about exactly as a result of Calvary's declining over multiple years and multiple requests to enter into a separate agreement. We will continue those conversations with Calvary—and I will address this further in my closing remarks on the bill this afternoon—but we want to conclude those conversations and negotiations with Calvary as quickly as possible to provide certainty for staff at Clare Holland House.

We have heard clearly from staff that they want the hospice and the home-based and community-based palliative care services to stay together. We have heard that clearly, and that is forming the basis of our ongoing conversation with Calvary about who will operate Clare Holland House into the future.

MR HANSON: Minister, will you rule out a forced takeover of Clare Holland House?

MS STEPHEN-SMITH: As I have indicated, the only reason we are having a conversation about Clare Holland House is because Calvary itself, for many years, has refused to enter into a separate funding agreement for Clare Holland House and has, in its own mind, wrapped Clare Holland House up with the Calvary Network Agreement and employed those staff—

Mr Hanson: Madam Speaker, on a point of order: it is a very clear question as to whether the minister will rule out a compulsory takeover of Clare Holland House, and I would ask her to be directly relevant and answer that question—yes, or no?

MADAM SPEAKER: The minister is in order because it is around Clare Holland and the provision of services through Clare Holland House. Minister, you have time left.

Ms Lawder: On a point of order, Madam Speaker: the standing orders say that you should not be debating the question. She is talking about why they might be discussing it but is not answering the question.

Mr Rattenbury: On the point of order, Madam Speaker: Mr Hanson is endeavouring to dictate the manner in which the minister should answer the question. The standing orders do not allow him to do that.

MADAM SPEAKER: The question, in essence, is around the provision of services through Clare Holland, and the minister is referring to that. I cannot under the standing orders, as Mr Rattenbury has pointed out, dictate or direct how the minister should answer.

Mr Hanson: On a point of order on your ruling, Madam Speaker: the question is not about the provision of services; the question is very clearly whether the minister is ruling out a compulsory acquisition. That is what the question is about, and I would ask that the minister be relevant to that point.

MADAM SPEAKER: I understand; thank you, Mr Hanson. Minister, you have 20 seconds left.

MS STEPHEN-SMITH: Thank you, Madam Speaker. This is not about compulsory acquisition; it is about whether we can come to an agreement with Calvary about the future operation of Clare Holland House. That will be on the basis of the very clear information that we have heard from staff—which I have now run out of time to talk about but may be able to in response to a supplementary.

MS CASTLEY: Minister, why won't you rule out a compulsory takeover of Clare Holland House? Why not rule it out?

MS STEPHEN-SMITH: We are not talking about a compulsory acquisition when we are talking about Clare Holland House. We are talking about a flow-on impact of the legislation, because Calvary has chosen to include, in its mind, Clare Holland House under the Calvary Network Agreement and employ the staff as employees of Calvary Public Hospital, Bruce.

We have said that we want to enter into conversations with Calvary about the future management, but we will be doing that on the basis of what we have heard from staff. What we have heard is they want the hospice and the home-based palliative care services to stay together as one integrated service. They provide nation-leading palliative care services there.

Mr Hanson: “Integrated”. Is that your buzzword to excuse your—

MADAM SPEAKER: Mr Hanson, enough!

MS STEPHEN-SMITH: They want to know that they will be employed on public sector wages and conditions—equivalent wages and conditions to that they are on now with the ACT Public Sector enterprise agreement—now and into the future.

Mr Hanson: Madam Speaker, the minister is waffling. This is not relevant. Will she rule it out or not? If not, why not?

MS STEPHEN-SMITH: So the staff views are not relevant at all?

Mrs Kikkert: That is not the question. Just listen to the question. He did not ask you about the staff views.

MADAM SPEAKER: Mrs Kikkert and Ms Stephen-Smith, please. It is question time, not a rabble across the floor.

Mr Hanson: It is clearly not answer time!

MADAM SPEAKER: You are warned, Mr Hanson!

Gordon—playing fields

MR DAVIS: My question is to the Minister for Sports and Recreation. Minister, recently this Assembly saw a petition from more than 770 Canberrans calling for redevelopment of the Tuggeranong Skatepark which the government has rejected. Additionally, in response to vandalism at the Gordon playing field pavilion, the government has placed porta-potty loos and a shipping container canteen at the site while the pavilion remains fenced and derelict. Minister, what do you say to the constituents of Tuggeranong who reach out to me constantly with the same sentiment—that they feel that this government does not prioritise community sport investment in Tuggeranong?

MS BERRY: I absolutely reject the premise of the question that Mr Davis has asked of me today. If I can go into a bit more detail around the Gordon pavilion, the Gordon pavilion was unfortunately vandalised and has serious fire and water damage. Working with the Tuggeranong football and netball club, we put in temporary facilities. I was going to talk more in this place next week around temporary shipping containers to provide for the sports that use that field while the pavilion is being assessed to be either knocked down and completely rebuilt or repaired.

Of course, Mr Davis could have, as he lectured Ms Castley during the last hearing, got advice from my office before asking the question in this place about Gordon or, indeed, putting up a Twitter post about his feelings about things—without actually coming to or writing to my office and asking me to get some information, as you did, Madam Speaker, on this very issue so that I could reassure you and the community.

Indeed, the Chief Minister also provided funding of \$10,000 to the Tuggeranong football and netball club to support them to replace the equipment that they lost during the fire. As far as I am aware, they are fully aware of what has been going on at the Gordon playing fields. If you had gotten in touch with my office, I could have informed you of that as well, Mr Davis.

MR DAVIS: Thank you, Minister. Fortunately, there are so many ways to ask questions, like here in question time! Minister, what are the plans to repair or replace the now fenced and derelict pavilion at the Gordon playing fields?

MS BERRY: I refer to my first answer, Madam Speaker.

MS CLAY: Minister, are there other community and sports facilities around Canberra that are making do with temporary facilities like porta-potties and shipping container canteens?

MS BERRY: There may be. Shipping containers are used quite frequently across the ACT for storage. I know the softball centre in Hawker is also using shipping containers to develop a media centre. Now we have shipping containers that can operate separately to the grid, through solar panels, and we can move these shipping containers around should they be needed across the city, using solar energy. At the same time, we can upgrade their facilities as well. It has been a great investment by Sport and Recreation, and, as far as I am aware, gratefully received as a temporary measure while we assess the damage at the pavilion at Gordon.

Calvary Hospital—acquisition

MR HANSON: My question is to Minister for Health. I refer to the section in the Health Infrastructure Enabling Bill which provides, on application to a magistrate, for the use of police force to allow for Canberra Health Services to exercise all powers under proposed section 11 of the legislation. What is the government's justification for compelling staff to assist Canberra Health Services under the ultimate threat of police force?

MS STEPHEN-SMITH: As Mr Hanson, I am sure, is aware, this section has been, essentially, lifted from the Lands Acquisition Act. It is a very standard piece of legislative drafting that relates to a piece of legislation that puts requirements on parties to undertake certain actions, but if the parties fail to undertake those actions that you can go to court. We do not envisage that that part of the act would need to be used at all. Obviously, there would be many steps we would take to encourage Calvary to support the transition appropriately, and we do not envisage that it would be used. It is a very standard part of parliamentary drafting and legislative drafting. I think the opposition is just playing politics with this issue. It is quite a ridiculous point to make for a standard part of legislative drafting.

MR HANSON: Minister, the Lands Acquisition Act 1994, to which you refer, only provides for an authorised person to enter and perform works on compulsorily acquired land and then only when obstructed. What precedent is there for compelling staff at Calvary, under threat of police force, to provide unlimited assistance to incoming authorities with the transition? It has not just been lifted, has it?

MS STEPHEN-SMITH: Mr Hanson is taking the whole of the act and then applying this to it. The reason that that provision is in the act is we need access to the land and to the buildings in order to undertake the work for the smooth transition. So that is why a provision that exists in the Lands Acquisition Act has, effectively, been replicated in this bill.

MS CASTLEY: Minister, if you do not intend for the police force to be used, why did you insert this provision in the legislation?

MS STEPHEN-SMITH: As I think I have explained already, this is a pretty standard piece of legislative drafting.

ACT Emergency Services Agency—zero emissions vehicles

DR PATERSON: My question is for the Minister for Police and Emergency Services. Minister, yesterday the ACT Emergency Services Agency unveiled its new electric fire truck. How does this new asset fit into the ACT government's broader zero emissions vehicle strategy?

MR GENTLEMAN: I thank Dr Paterson for her interest in emergency services and our zero emissions strategy. The world around us is rapidly changing in terms of technology, workplace diversity and the environment. So, to lead by example from the Emergency Services Agency, we have been working closely with companies from around the world to identify potential alternate fuel vehicles to supplement or replace frontline ambulances and fire appliances in the ACT. As indicated, yesterday I was pleased to unveil the result of this hard work; the first plug in hybrid electric heavy vehicle within the ACT ESA fleet for ACT Fire & Rescue.

The ACT government and the ACT Emergency Services Agency are leading the nation in innovative technology, being the first emergency service in Australia to welcome an electric fire appliance of this kind. This electric fire appliance is pioneering the change in emergency response capability and it is the first step in our journey towards a sustainable and environmentally responsible future. With our emergency services responding to various jobs every day and travelling significant kilometres annually, this change to sustainable vehicles will see a dramatic impact on the ACT's overall transport emissions.

Rosenbauer is one of the largest providers of firefighting technology and equipment in the world, and their expertise has allowed us to bring forward new technologies to benefit our firefighters, our community and the environment. With firefighter safety and comfort at the forefront of this design, this vehicle will be one that will revolutionise the operation of ESA's fleet. The safety and operational benefits are world class and I know ACT Fire & Rescue is eager to see the vehicle in action and test out its capabilities. I look forward to seeing the vehicle out in the community, making a positive contribution first to the safety of the ACT community and secondly to ACT climate change strategy. *(Time expired.)*

DR PATERSON: Minister, how does the transition to zero emissions vehicles support the wellbeing and safety of emergency services staff and the community?

MR GENTLEMAN: From the outset the design of the electric appliance has been focused on firefighter and community safety. The initial design concept for the electric fire appliance began with identifying key areas of safety improvements for firefighters and designing an appliance that helps them to effectively manage the hazards they respond to. The design of the electric fire appliance provides for street level entry, reducing the risk of injuries to firefighters due to climbing in and out of fire trucks with heavy equipment on their backs. The main cabin of the appliance further protects firefighters with the inclusion of high efficiency particulate absorbing filters to eliminate contaminants from smoke entering the cabin as well as a positive pressure system preventing outside air from entering except through the filtration system. The storage on the vehicle is designed for ergonomic presentation and access

to battery operated tools and equipment. These operated hydraulic rescue tools and power tools further reduce hazards associated with carbon monoxide, noise and vibration while undertaking rescue operations.

For community safety the electric pumper is equipped with a number of features to alert hearing-impaired members of the community to its approach and to alert drivers in a modern well-insulated vehicle to an approaching emergency vehicle. As Canberra continues to grow and develop as a city, urban infill, high density housing and more traffic congestion will be features of our immediate future. So this electric pumper features four-wheel steering at low speeds to allow the appliance to negotiate restricted spaces in the city and town centres and to manoeuvre around traffic and other obstacles.

MR PETTERSSON: Minister, how is the ESA working to both prepare for the shift to electric vehicles and encouraging uptake of new technology?

MR GENTLEMAN: I thank Mr Pettersson for the question. The ESA has, and will continue to, take all actions required to prepare the electrification of its fleet and it is working closely with other ACT government directorates to assist in this preparation. Detailed assessments have been conducted across several ESA sites to determine the safety, infrastructure and operational requirements associated with the electrification of key fleet assets. The ESA will continue to expand upon these assessments as its electric vehicle fleet grows and the new vehicle technologies and infrastructure is developed. Extensive training for ESA staff will be conducted on all new vehicles to ensure their safe operation within the community. I also note the announcement from Minister Steel today about electric buses. This government is working towards a zero emissions future across the board. The uptake of new technology is crucial to this and I am very excited to see what is next.

Sustainable Household Scheme—electric bikes and motorbikes

MS CLAY: My question is to the Minister for Climate Action. Minister, the recent cost-of-living inquiry found that transport costs were putting increasing pressure on Canberrans. The committee heard from several submitters—including ACTCOSS, the Conservation Council and Pedal Power—that including electric bicycles in the Sustainable Household Scheme or another scheme would help low income households to access active and multimodal travel. Why aren't e-bikes and e-cargo bikes included in a government grant or loans scheme?

MR BARR: I thank Ms Clay for the question. The loans scheme operates under a set of criteria, with a minimum loan amount of \$2,000. It is focused on household appliances, rather than transport. It is a heavily subscribed scheme that has already drawn down on the allocated capital at the beginning of this parliamentary term. I welcome the fact that the commonwealth government provided a further \$7½ million injection to the Sustainable Household Scheme. There are criteria for assessing the eligibility of new products into the scheme. I also note that there are other zero or low interest loan schemes available for the purchase of the items that Ms Clay refers to.

MS CLAY: Minister, which government rebates or government loan schemes would assist a low income household to obtain an electric cargo bike, electric bike, electric motorcycle or electric scooter?

MR BARR: Electric motorcycles are eligible for a range of government supports in relation to the Sustainable Household Scheme. The other products are generally available at a price below the minimum loan amount for the Sustainable Household Scheme. There are non-government providers and, I understand, ACT government funded community groups who provide access to a number of the equipment types that Ms Clay refers to.

Calvary Hospital—acquisition

MR HANSON: My question is to the Minister for Health. Minister, your actions in forcibly taking over Calvary, including its land, assets, people and patients, have not only caused “fear and angst” among staff, but the ANMF has stated that it does not meet your obligations under the EBA. Minister, given the obvious terms of consultation in the EBA, why did you decide to proceed in such a way that did not meet those obligations to current staff?

MS STEPHEN-SMITH: I know that Ms Castley questioned this earlier in her comments on the bill, but it is a fact that staff working at Calvary Public Hospital Bruce are not employed by any ACT government agency. They are employed by a private employer, Calvary Health Care ACT. It would not have been possible for us to consult with somebody else’s employees under somebody else’s enterprise agreement on a decision that their employer was clearly not going to support. We were consulting with their employer. We have been for months. Their employer was advised in April last year that if we were unable to reach agreement in a timely—

Ms Lawder: A point of order, Madam Speaker. The question was about a conversation with current CHS staff under the EBA, not about consultation with Calvary staff.

Mr Hanson: I said current staff; I did not specify CHS.

Ms Lawder: Current staff are at the hospital.

MADAM SPEAKER: I think you are on track, Minister, if you want to continue.

MS STEPHEN-SMITH: Those consultation requirements in the EBA in relation to CHS staff relate to the work that CHS staff do, and their work will not change.

MR HANSON: Why did you proceed in a way that, according to the union, has caused extensive fear and angst to staff at Calvary?

MS STEPHEN-SMITH: I have met with a number of the Australian Nursing and Midwifery Federation members and the union itself a couple of times. I absolutely recognise that this decision took staff by surprise. It has been a shock. It has created uncertainty for staff. That is why we have wanted to move as quickly as we can to be able to directly engage formally with those staff.

Canberra Health Services has established regular, multiple times a day, employee support forums for those staff who are able to attend and engage directly with the CEO, Dave Peffer, or the deputy director-general and former chief operating officer at Canberra Hospital, Cathie O'Neill, who is leading the operational transition team. Those staff who have been able to attend those forums have generally been able to share their concerns, ask a lot of questions about what it means for them in a practical sense, and share their hopes and ideas for what this change will ultimately mean. At the end of the day, most of those staff actually think that ultimately this will be a good thing.

The ANMF has had some criticism of us over this process, but it has also had some criticism of Calvary. It has recognised that this has been an ongoing negotiation between the ACT government and Calvary Health Care, who is ultimately the employer of these staff and who has clearly not engaged the staff on the conversations that it was having with the ACT government.

MS CASTLEY: Minister, how can staff trust you when you conducted a forced takeover in a secret way?

MS STEPHEN-SMITH: I do not think this was secret from Calvary at all. Calvary Health Care had been advised, in April last year, that if we were unable to reach agreement, we would consider introducing legislation to compulsorily acquire the land that we need to invest a billion dollars to build a new north-side hospital for the people of the ACT. We have been very clear. We are going to invest a billion dollars of taxpayers' money in a new, state-of-the-art hospital. We want that hospital to be owned by Canberrans, not by some private company. We were very clear with Calvary that that was absolutely our bottom line, and we were not able to reach agreement on how that was going to occur, despite months and months of formal negotiations.

Calvary Hospital—acquisition

MR HANSON: My question is to the Minister for Health. Minister, how soon after the passing of this bill will public servants and CHS staff be moving into Calvary?

MS STEPHEN-SMITH: I do not think it is a question of moving into Calvary. The formal transition period commences once the bill has been notified. So we expect that, if the bill passes this afternoon—as we anticipate it will—it will probably be notified tomorrow or potentially Friday morning. The lead of the operational transition, Cathie O'Neill, has a draft transition plan that she has developed and, with her team, she will share that with the nominated Calvary transition lead as soon as possible and start having a conversation with them about how to manage the transition.

I want to be really clear with the chamber and with any Calvary Public Hospital staff who are watching today that we intend for this transition to be managed in partnership with those staff. As I said earlier, I was very pleased that the regional CEO invited Dave Peffer, the CEO of Canberra Health Services, in to talk to the senior executive—

Mr Hanson: Point of order, Madam Speaker: the question was about when those staff—Ms O’Neill and the transition staff—will actually be moving into Calvary. At what point is that happening? Are they knocking on the door tomorrow? When are they moving in?

MADAM SPEAKER: Mr Hanson, there is no point of order. The minister was very clear at the beginning of her response to that point of the question—I think without paraphrasing it: “It is not a matter of moving into Calvary; it is about transition processes.” Minister, you have the floor.

MS STEPHEN-SMITH: Thank you, Madam Speaker. As I was just saying, our intention is to ensure that this transition is done collaboratively with the existing senior leadership within Calvary Public Hospital, Bruce. We will have the opportunity, once the legislation has been notified and the formal transition period commences, to issue expressions of interest to Calvary Public Hospital staff to become part of the transition team, to support the transition for their teams and their workforce within their hospital. We recognise that they are the experts in how their hospital runs. Already, some very productive conversations have been held. *(Time expired.)*

MR HANSON: Minister, what will happen to Calvary staff if they do not comply with directions from the transition team?

MS STEPHEN-SMITH: It is not a question of complying with the directions of the transitions team. To the greatest extent possible, this will be a collaboratively process with Calvary staff.

As I was saying, we have actually had some very positive indications from many senior staff at Calvary Public Hospital that they will be supporting the work that is required to undertake this transition—because we recognise that they have the expertise in how their hospital runs.

All I would request of Calvary National is that they enable the staff on the ground at Calvary Public Hospital, Bruce to support this transition in a way that is best for staff and best for patient safety and continuity of care.

MS CASTLEY: Minister, will you rule out using the police force if staff do object?

MS STEPHEN-SMITH: I think I have already answered that question.

Opposition members interjecting—

Business—night-time economy

MR PETTERSSON: My question is to the Assistant Minister for Economic Development. Minister, what work are you leading to support and develop the ACT night-time economy?

MS CHEYNE: I thank Mr Pettersson for the question. The government recognises the critical role the night-time economy plays for Canberrans and visitors alike. Also, our city has changed a great deal in the last decade and now is a great

opportunity to review the regulatory and non-regulatory settings to ensure they are working their best to support our night-time economy.

As I foreshadowed at the Canberra Region Tourism Leaders Forum earlier this month, we will soon begin a program of sector consultations and discussions on these settings. These findings will be released before the end of this year. The first step is developing a vision for the ACT night-time economy, and, over the coming months, a draft vision will be tested within government and more broadly with industry and the community.

MR PETTERSSON: Minister, why is it important to develop a vision for the ACT night-time economy?

MS CHEYNE: I thank Mr Pettersson for the supplementary. Establishing a vision provides a shared direction which can be understood, agreed and owned by all stakeholders. A vision shared by government, community and businesses will guide our priorities and efforts as we undertake these important reforms and seek to grow the sector. A vision will also help to create the understanding, momentum and buy-in for businesses and community to engage with any changes, both proposed and as they are realised. We will be starting our discussions this weekend at MusicACT's State of the Territory forum.

MS ORR: Minister, can you please detail what themes and ideas will be explored through the public consultation on the night-time economy?

MS CHEYNE: I thank Ms Orr for the supplement. The night-time economy public consultation will explore stakeholder views, paying points and opportunities for reform on a variety of themes and ideas, including but not limited to liquor licensing and other regulatory settings, support for small night-time economy venues, noise management arrangements and wider zoning considerations, building design and materials to enhance the night-time economy user experience, temporary and outdoor uses to diversify night-time offerings, and other key themes and ideas, such as clarifying definitions and understanding the impact on sectors that do not fall neatly into core night-time economy businesses. I look forward to sharing the consultation findings later this year.

Calvary Hospital—acquisition

MR HANSON: My question is to the Minister for Health. Is it the case that, before transitioning to Canberra Health Services, current staff at Calvary must resign from their current positions?

MS STEPHEN-SMITH: No, that will not be the case. That was originally the advice we had provided, but we have amended the regulation in line with advice on industrial requirements. The draft regulation is currently with Calvary—the most up-to-date one—and we have provided this information to staff, as well, in updated “frequently asked questions” information that has been established. When staff accept the offer of employment at Canberra Health Services, the regulation will operate to automatically terminate their employment with Calvary Health Care ACT on the acquisition day, so they will not be required to take that extra step of resigning.

MR HANSON: What will happen with entitlements such as leave? Will they be paid out or carried over?

MS STEPHEN-SMITH: For all of those staff who accepted an offer of employment at Canberra Health Services, all of their entitlements will carry over. That includes flex leave. This is an example of how we have responded to the feedback we have already received from staff in relation to resignation. In relation to flex leave, it was one of the early questions we were asked. It would not normally be part of a transition of entitlements, but we have included flex leave as well and enabled that to be included. All entitlements will transfer cross.

MS CASTLEY: Minister, who will be paying out the redundancies if staff leave?

MS STEPHEN-SMITH: There are provisions in the bill that mean that the ACT government will have to support any of the at-costs that Calvary bears and associated with this decision. To the extent that they are required to pay redundancy to people who are not transitioning over to CHS, those costs will be covered by the ACT government—to the extent that they are required under law to pay that redundancy.

Calvary Hospital—acquisition

MR HANSON: My question is to the Minister for Health. Minister, part of the bill for the forced takeover of Calvary includes taking over contracts Calvary has with other businesses. Minister, what is the liability to the territory for breaking any terms with external contractors affected by this change?

MS STEPHEN-SMITH: One of the key things we have identified is that those contractors, including ACT small businesses that are providing to medium sized businesses that are providing services to Cavalry, will want to see those continue and it will be important for us and the smooth transition that services can continue to be provided to Cavalry Public Hospital Bruce with the greatest level of consistency possible, and so the legislation provides for those contracts to be novated from Cavalry to Canberra Health Services.

It is important to recognise that the ACT government already pays all of the operating costs of Calvary Public Hospital Bruce. It is a public hospital. It is fully funded by taxpayers. So those contracts are effectively already paid for in the agreement we have with Calvary to run this service. So I am not quite sure what Mr Hanson is getting at; maybe he could provide some more detail in his supplementary, but the intention for these contracts is that they will continue as they are, to the greatest extent possible.

MR HANSON: Will new contracts need to be written with the ACT government, presuming the contracts are existing with Calvary at this stage?

MS STEPHEN-SMITH: It is likely that some new contracts will need to be signed—for example, there may be some services that Calvary Public Hospital Bruce is receiving as a result of a contract that Calvary national has, that maybe covers Calvary public, Calvary Bruce Private Hospital, Calvary John James Hospital or might even

be national contracts, and so the regulation will enable new contracts to be signed as well. Again, to the greatest extent possible, that will be to ensure continuity of service. One of the amendments I will be moving this afternoon relates to the capacity to enter into new contracts with the suspension or disapplication of some of the Procurement Act requirements, to provide that continuity of service to the hospital campus beyond the acquisition date, recognising that not necessarily all contracts will be finalised by the acquisition date.

MS CASTLEY: Minister, who is liable for any consequential contract liabilities? Will it be Calvary or CHS?

MS STEPHEN-SMITH: It is very clear that the costs that are associated with this decision that Calvary bears will be reimbursed by the ACT government. It is up to them to provide a clear indication of what those costs are but we have been very clear that if there are costs associated—and this is part of the just terms measures in the bill, that those costs will be covered by the ACT government.

Gungahlin—Australian public service

MR BRADDOCK: My question is to the Chief Minister. Chief Minister, I am interested in the Gungahlin town centre prospectus for APS investment, which was produced in early 2022. Can you please provide an update on how this prospectus has been used in your engagement with the Australian government about the future of Gungahlin?

MR BARR: I thank Mr Braddock for the question. The prospectus was forwarded to the then Minister for the Public Service and the Minister for Finance. I understand that it was also provided to relevant heads of departments, as part of commonwealth government consideration. Obviously, there has been a change of government since that time. The territory government and the commonwealth government continue to have an active dialogue on the future of the Australian public service. I do welcome a number of very significant announcements in the first two budgets of the new government in relation to the Australian public service and its presence and potential growth in the ACT and Gungahlin.

MR BRADDOCK: Chief Minister, have you raised the specific location of Gungahlin as part of those discussions with the new federal government?

MR BARR: The broader and substantive issues that the new federal government have been dealing with relate to some of the challenges associated with the average staffing level cap that was imposed by the previous government and the implications that that had on outsourcing—and some reasonably high profile issues that outsourcing to some of the national consultancy firms has generated in recent times.

We have also had a particular focus on working with the commonwealth on the implementation of a number of their major election commitments that have resulted in more Australian public service staff being required and being allocated to agencies that have a significant proportion of their employment in the ACT. Specifically in Gungahlin, I am not aware of any new commonwealth government building projects—as in new offices to be built in Gungahlin at this point in time—but we are

in the early days. We are just over a year into the new government, so I would not expect that they would have made a major commitment to a new building at this point.

MS CLAY: Chief Minister, how often do you discuss the economic development of Canberra with the Australian government?

MR BARR: How often? I think there are at least nine commonwealth ministers who have overlapping responsibilities with just the portfolios that I hold, let alone the portfolios of other ministers who have responsibilities in economic development. It is not daily, I will observe, but it is often weekly, several times each week, across issues that are incredibly diverse. The short answer is a lot.

I also observe that Gungahlin's economic development is not just about public sector activity. I have also been actively engaging with a number of large private sector employers, particularly in the retail and recreation areas, where there is clearly an opportunity for investment in the Gungahlin town centre. Its economic development hinges on both public and private sector economic growth, so the government need to pursue both, and we are.

Calvary Hospital—acquisition

MR HANSON: My question is to the Minister for Health. Minister, the bill to forcibly take over Calvary includes a requirement that Calvary hand over all records, including private patient records. It also allows for any information gained to be passed on to third parties. Minister, what third parties will receive this information and why?

MS STEPHEN-SMITH: I thank Mr Hanson for the question. Again, this is an element of the bill that is covering off on eventualities. Of course, Canberra Health Services and the ACT government will continue to be bound by the Health Records (Privacy and Access) Act, which is very clear about the way that any health records would be managed, just as Calvary is bound by the act at present.

MR HANSON: What ability do patients have to refuse to provide their records as part of this takeover?

MS STEPHEN-SMITH: Health providers have an obligation to hold health records of patients. One of the things that we have already established, if it is likely that Calvary's historic patient records will be held in a form that is not electronic and is not necessarily going to be transferred to Canberra Health Services, the requirement will be that those records will continue to be available, should they be required for patient care. Of course, now we have a shared digital health record system across Canberra Health Services, Calvary Public Hospital Bruce and QEII, so those records of patients are already available to CHS. When patients attend CHS services, those records already sit in the same single electronic patient record system across the whole territory.

MS CASTLEY: Who are the third parties mentioned that this private information will be passed to?

MS STEPHEN-SMITH: I could not possibly answer that question. As I said this is in relation to a contingency if required, but the Health Records (Privacy and Access) Act will continue to be applied to any decision made about records. Patients and Canberrans can be assured that their information will be treated appropriately, in line with legislation and in line with privacy requirements, just as it is now.

Transport Canberra—zero emissions fleet

MS ORR: My question is to the Minister for Transport and City Services. Minister, how is the ACT government progressing its transition to a zero emissions public transport system?

MR STEEL: I thank Ms Orr for her question. As Minister Gentleman alluded to, I am very pleased to confirm that the ACT government has taken the next step in the electrification of our city's public transport network with the successful procurement of 90 new zero emissions buses. This is through a contract with VDI to buy 90 Yutong E12 battery electric buses. Transport Canberra are also in the final stages of negotiations with Custom Denning for an additional four battery electric buses.

This will mean that 94 electric buses will be added to our existing 12 that have been operational since the start of the year, bringing our fleet up to 106 battery electric buses over the next three years. The rest of the fleet is expected to be transitioned to zero emissions by 2040 or earlier, in line with the Transport Canberra Zero-Emission Transition Plan.

Purchasing the buses is only one component to achieving a zero emissions fleet. We are also supporting the workforce by providing the skills that they need to work on the buses and also building the electrical infrastructure required to charge the buses.

MS ORR: Minister, when will the new battery electric buses be added to the Transport Canberra fleet?

MR STEEL: The 94 new battery electric buses will be progressively delivered between late this year and 2026. The delivery schedule for the buses is subject to negotiation and will be influenced by various factors, such as the provision of charging infrastructure.

Buses are expected to be housed between the existing Tuggeranong depot and the new Woden depot, which is under consideration. The four leased battery electric buses from Custom Denning, which Transport Canberra are currently in negotiations for, are expected to operate from the Belconnen depot, on the north side.

The new electric buses will initially replace aging diesel and compressed natural gas buses but will also grow the fleet overall to service our growing city. The buses can operate for a maximum of 16 hours on a single charge and have capacity for 65 people. They will join the 12 battery electric buses that are already providing cleaner, quieter and more comfortable services to Canberrans.

DR PATERSON: Minister, how does the ACT compare to other states in its transition to a zero emissions public transport system?

MR STEEL: I thank Dr Paterson for her question. The ACT government has taken nation-leading steps in the transition of our public transport system to zero emissions technology, with the largest fleet of electric buses delivered per capita in the country. That was confirmed by the Australia Institute in their recent report *Stuck in the slow lane*.

We have committed to also achieving a 100 per cent zero emissions bus fleet by 2040 or earlier. Our plan for achieving that is outlined in our ACT Zero-Emission Transition Plan for Transport Canberra. The only state or government which has set a similar target is New South Wales, who have now committed to transitioning to a zero emissions bus fleet by 2047, which is seven years after the ACT and much later than they even expected.

The ACT government has not set this ambitious target without due consideration. It has taken significant preparation and planning, informed by research and technical advice, to ensure that we are ready to operate and maintain the buses once they arrive. Of course, we are not just buying buses; that is only one part of the story. We are also forward planning and investing in the infrastructure and skills needed to make the transition successful.

Mr Barr: Further questions can be placed on the notice paper, Madam Speaker.

Supplementary answers to questions without notice Sustainable Household Scheme—electric bikes and motorbikes

MR BARR: I can provide some further information to Ms Clay in relation to the e-motorbikes. I am advised there are 195 of them registered in the ACT, and the government support is that they are eligible for the discounted registration; that is, two years of free registration.

Clare Holland House—operation

MS STEPHEN-SMITH: I want to clarify something in relation to Clare Holland House. On reflection, Mr Hanson referred a number of times to compulsory acquisition, or “enforced acquisition” were his words—something like that. Just to be very clear for anyone reading the *Hansard* in the future, and for those opposite who may not be aware, the ACT government owns Clare Holland House. It is an ACT government owned facility that is managed, effectively, under contract by Calvary Health Care, so there would be no compulsory acquisition of Clare Holland House, because we already own it.

Papers

Madam Speaker presented the following papers:

Bills, referred to Committees, pursuant to resolution of the Assembly of 2 December 2020, as amended—Correspondence—

Bills—Inquiry—

Justice (Age of Criminal Responsibility) Legislation Amendment Bill 2023—
Copy of letter to the Speaker from the Chair, Standing Committee on Justice
and Community Safety, dated 31 May 2023.

Supreme Court Amendment Bill 2023—Copy of letter to the Speaker from
the Chair, Standing Committee on Justice and Community Safety, dated
19 May 2023.

Bills—Not inquired into—

Health Infrastructure Enabling Bill 2023—Copy of letter to the Speaker from
the Chair, Standing Committee on Public Accounts, dated 26 May 2023.

Justice and Community Safety Legislation Amendment Bill 2023—Copy of
letter to the Speaker from the Chair, Standing Committee on Justice and
Community Safety, dated 19 May 2023.

Standing order 191—Amendments to:

Freedom of Information Amendment Bill 2022, dated 15 and 16 May 2023.

Sexual Assault Reform Legislation Amendment Bill 2022, dated 15 and
16 May 2023.

Mr Gentleman presented the following papers:

Annual Reports (Government Agencies) Act, pursuant to subsection 8 (5)—
Annual Reports (Government Agencies) Directions 2023—Notifiable Instrument
NI2023-272, dated 25 May 2023.

Financial Management Act, pursuant to subsection 30F(3)—2022-23 Capital
Works Program—Progress Report—Year-to-date performance as at 31 March
2023.

Justice and Community Safety—Standing Committee—Report 13—*Inquiry into
the Road Safety and Crimes Legislation Amendment Bills 2022*—Government
response, undated.

Menstruation and Menopause Policy—Assembly Resolution of 13 October
2022—Government response, dated May 2023.

Mental Health Funding—Medicare Benefits Schedule—Assembly Resolution of
8 February 2023—Government response, dated 31 May 2023.

Mental Health Funding—Medicare Benefits Schedule—Assembly Resolution of
8 February 2023—Letter to the Commonwealth Minister for Health and Aged
Care and the Commonwealth Assistant Minister for Mental Health from the ACT
Minister for Mental Health, dated 30 May 2023.

Subordinate legislation (including explanatory statements unless otherwise stated)

Legislation Act, pursuant to section 64—

ACT Teacher Quality Institute Act and Financial Management Act—ACT
Teacher Quality Institute Board Appointment 2023 (No 1)—Disallowable
Instrument DI2023-71 (LR, 4 May 2023).

Crimes (Sentence Administration) Act—

Crimes (Sentence Administration) (Sentence Administration Board)
Appointment 2023 (No 1)—Disallowable Instrument DI2023-66 (LR,
12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 10)—Disallowable Instrument DI2023-80 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 11)—Disallowable Instrument DI2023-81 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 2)—Disallowable Instrument DI2023-72 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 3)—Disallowable Instrument DI2023-73 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 4)—Disallowable Instrument DI2023-74 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 5)—Disallowable Instrument DI2023-75 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 6)—Disallowable Instrument DI2023-76 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 7)—Disallowable Instrument DI2023-77 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 8)—Disallowable Instrument DI2023-78 (LR, 12 May 2023).

Crimes (Sentence Administration) (Sentence Administration Board) Appointment 2023 (No 9)—Disallowable Instrument DI2023-79 (LR, 12 May 2023).

Electronic Conveyancing National Law (ACT)—Electronic Conveyancing National Law (ACT) Operating Requirements 2023—Disallowable Instrument DI2023-62 (LR, 17 May 2023).

Housing Assistance Act—

Housing Assistance (Public Rental Housing Assistance) Program 2023 (No 1)—Disallowable Instrument DI2023-92 (LR, 30 May 2023).

Housing Assistance (Review of Entitlement to Housing Assistance) Determination 2023 (No 1)—Disallowable Instrument DI2023-94 (LR, 30 May 2023).

Housing Assistance (Review of Entitlement to Housing Assistance) Operational Guideline 2023 (No 1)—Disallowable Instrument DI2023-93 (LR, 30 May 2023).

Integrity Commission Act—Integrity Commission (Acting Commissioner) Appointment 2023 (No 1)—Disallowable Instrument DI2023-64 (LR, 17 May 2023).

Long Service Leave (Portable Schemes) Act—

Long Service Leave (Portable Schemes) Governing Board Appointment 2023 (No 1)—Disallowable Instrument DI2023-60 (LR, 8 May 2023).

Long Service Leave (Portable Schemes) Governing Board Appointment 2023 (No 2)—Disallowable Instrument DI2023-61 (LR, 8 May 2023).

Motor Accident Injuries Act—Motor Accident Injuries Levy Determination 2023 (No 1)—Disallowable Instrument DI2023-88 (LR, 18 May 2023).

Public Place Names Act—

Public Place Names (Campbell) Determination 2023—Disallowable Instrument DI2023-85 (LR, 18 May 2023).

Public Place Names (Kingston) Determination 2023 (No. 1)—Disallowable Instrument DI2023-82 (LR, 15 May 2023).

Public Place Names (Spence) Determination 2023—Disallowable Instrument DI2023-86 (LR, 18 May 2023).

Road Transport (General) Act—

Road Transport (General) Application of Road Transport Legislation Declaration 2023 (No 5)—Disallowable Instrument DI2023-63 (LR, 9 May 2023).

Road Transport (General) Concession Determination 2023 (No 2)—Disallowable Instrument DI2023-87 (LR, 18 May 2023).

Road Transport (General) Driver Licence and Related Fees Determination 2023 (No 1)—Disallowable Instrument DI2023-55 (LR, 8 May 2023).

Road Transport (General) Fees for Publications Determination 2023 (No 1)—Disallowable Instrument DI2023-58 (LR, 8 May 2023).

Road Transport (General) Numberplate Fees Determination 2023 (No 1)—Disallowable Instrument DI2023-56 (LR, 8 May 2023).

Road Transport (General) Parking Permit Fees Determination 2023 (No 1)—Disallowable Instrument DI2023-84 (LR, 18 May 2023).

Road Transport (General) Pay Parking Area Fees Determination 2023 (No 1)—Disallowable Instrument DI2023-83 (LR, 18 May 2023).

Road Transport (General) Refund and Dishonoured Payments Fees Determination 2023 (No 1)—Disallowable Instrument DI2023-57 (LR, 8 May 2023).

Road Transport (General) Vehicle Registration and Related Fees Determination 2023 (No 2)—Disallowable Instrument DI2023-54 (LR, 8 May 2023).

Veterinary Practice Act—Veterinary Practice (Board) Appointment 2023 (No 1)—Disallowable Instrument DI2023-70 (LR, 4 May 2023).

Planning—ACT Planning System Review and Reform Project independent review

MR CAIN (Ginninderra) (2.55): I move:

That this Assembly:

- (1) notes that the:
 - (a) ACT Government commenced the ACT Planning System Review and Reform Project in 2019 which has informed a new Planning Bill, pending interim Territory Plan and draft district strategies for the Territory;
 - (b) proposed planning reforms represent the most significant change to the ACT planning system since the adoption of the current *Planning and Development Act 2007* and *Territory Plan 2008*; and
 - (c) ACT Planning System Review and Reform Project has been conducted internally by the ACT Environment, Planning and Sustainable Development Directorate (EPSDD);
- (2) further notes that:
 - (a) the ACT Legislative Assembly has previously declared that the ACT is currently experiencing a housing crisis;
 - (b) planning and land management has a considerable impact on housing choice and affordability in the Territory; and
 - (c) it is critical that any new planning system be an improvement on the operational effectiveness and efficiency of planning in the ACT in order to best address the current housing crisis and properly prepare the Territory for future planning and housing challenges; and
- (3) calls on the ACT Government to:
 - (a) institute an independent review of the ACT Planning System Review and Reform Project by a panel of expert planners and architects to assess the necessity, operational effectiveness and efficiency of the Planning Bill 2022, the draft new Territory Plan and the draft district strategies; and
 - (b) adjourn debate on the Planning Bill 2022 until the completion of the independent review.

Madam Speaker, Canberra's vital Bush Capital and garden city characteristics are under threat by this Labor-Greens government and this ambiguous outcomes-focused approach to planning, anticipated to be operating out of the Planning Bill 2022 that is being put forward for debate this week and next week.

The bill itself gives little consideration of what Canberrans actually want. I want to talk for a little bit about the vision behind the government's planning system and planning review. I will talk about that throughout, but I want to present that I do not hear often enough from the local level or from the federal level about the significance of Canberra. Canberra is not just a regional city or a small jurisdiction. It is the capital city of this wonderful country. It is my desire that Australians see this city, this jurisdiction, with pride. I want Australians to be proud that Canberra is the capital of this wonderful country. I want Canberrans to be even prouder because they live here.

We have international and national recognition as a Bush Capital. That is under threat by this Labor-Greens government and this planning review. It is my hope that we will be in a position to boost Canberra's national and international significance and

standing with a truly regional vision—a Bush Capital that is loved and recognised and, as I said, that the citizens of this country are proud to call their capital.

What we are seeing, rather, from this Labor-Greens government is dictatorial densification, brutal infill and creation of urban heat islands—cancelling out so much of the important agenda of climate change strategy. The strangulation of land being released, particularly for detached housing, dramatically impacts the character, liveability, affordability and aesthetics of our Bush Capital. Choice seems to be a thing of the past, as our market is being flooded with apartments.

The Canberra Liberals believe the planning system needs to be transparent, clearly articulated and supportive of the future vision of a Canberra that Canberrans want to see. Where is the plan, for example, for a million people in Canberra? The Labor-Greens government proposed planning changes do not accomplish any of the things that I have spoken of. We need respectful infill, as opposed to Barr’s brutal infill. We need to be planning for the community, not planning for profit. We need to plan for people, not plan for profit.

As our leader, Elizabeth Lee, called for some time ago, we need a “Winton”-style survey to re-engage with the community, as it stands, to find out what their housing choices and preferences are. What kind of city do they want to live in? What kind of city do they want their children to grow up in and their grandchildren? We see that very sensible suggestion has been rejected by this Labor-Greens government.

As I said, it seems like the planning vision of this government is to find out how much money it can get from land. It is almost as if it is a rush to build before they even plan. The proposed reforms have produced more concern than comfort for a city that is already highly suspicious of this Labour-Greens government due to their poor record of consultation and lack of consideration of community desires. Toward the end I will be reading out some quotes from the Combined Community Councils of the ACT—councils that stand for each of the districts in Canberra—to reflect their views.

As said in my motion, the debate on this bill should be adjourned, and there should be an independent inquiry into our planning system and these planning reforms. I do note Ms Clay’s amendment, which I will speak to toward the end as well, and perhaps in closing. The Planning Bill should not be considered by this Assembly until all the relevant parts of this planning reform are locked and in place and able to be looked at together by our community. We even have notice of Greens and government amendments, which will be debated in the next two weeks—again, things that the community should be able to have time to consider.

The new Planning Bill reduces the power of the Assembly and materially increases the power of the chief planner. It seems like this is a planning review dictated by the minister and his chief planner: run by them, assessed by them, and, rather remarkably, giving them incredibly increased powers with less community consultation.

There are so many things that are still to be finalised, it is foolish to lock in a significant plank of this planning review while so many parts of it are still open. We have yet to see an interim Territory Plan which the planning committee has said it will inquire into—they will have a public inquiry into the interim Territory Plan. We have

yet to see a consultation paper on the listening report that was recently issued. We still have draft district strategies. We have not seen the design guides. It is both foolish and, I suggest, arrogant to lock in a significant piece of this planning reform before so many other significant parts of it are finalised.

As I will read a bit later, the review process has been heavily criticised by community councils and resident associations for its flawed community consultation. It has been called by several “a tick-box exercise of consultation”. There are still uncertainties regarding development assessments and approvals. What are these territory priority projects, and how will these discretionary powers operate to produce an acceptable outcome? Obviously, that means an outcome decided and approved by the government and its chief planner! What does outcome-based planning really mean? I am not sure yet, and I have heard many who agree with that view.

The people of Canberra deserve better than an expansive and expensive legislative reform package that only seems to advance an unelected and unaccountable planning bureaucracy. Despite the prolonged process of review and reform, there are still question marks over this legislation and, as I said earlier, we do not even know the key components of this planning system. We do not even have the final versions of them.

As far as the consultation process on this went, the minister said the governance reform and enforcement were not part of the reform, or part of the review, but these are some of the most significant things impacted by this bill and proposed other changes. For example, reform has placed more power in the hands of senior bureaucrats who directed the review and who have limited public accountability measures imposed upon them. Governance issues comprised about 15, in my estimation, of the 49 recommendations out of the planning committee, and these have been largely ignored.

I would like to read just a few quotes from two media pieces produced by the Combined Community Councils of the ACT, representing all of the districts of Canberra. Interestingly, back on 6 December last year, they stated:

The Combined Community Councils of the ACT (CCC), the peak body for the eight Community Councils in Canberra, is calling on Members of the Legislative Assembly to ensure the new Planning Bill is not approved until governance, clarity and community engagement concerns have been addressed.

I will be reading media from yesterday from the Combined Community Councils, and it is pretty clear their view remains that those things have not been addressed. I quote convenor Peter Elford. He said:

The Planning Bill is just part of the new planning system. It should not be approved until other key components such as the new draft Territory Plan and draft District Strategies, and their interaction with the Planning Bill, can be subjected to full public and independent expert scrutiny—

Very much the heart of my motion, Mr Assistant Speaker—

Land is the ACT’s greatest natural resource and residents expect strong stewardship of that resource. The Planning Bill—

And I am reading, again, from the media notice of 6 December of the Combined Community Councils—

vests too much power in the hands of the planning authority and one person, the Chief Planner. There should be better checks and balances to manage governance risks and to restore confidence and trust in the Planning System.’

I will just finish with their last paragraph from 6 December:

Finally, while we were led to believe that the new planning system would be easier to understand, it is in fact more complex. The Planning Bill alone now has 648 sections—

And we are going to see some of those amended—

compared to 517 sections in the existing Planning Act. The Planning Bill and its interaction with other components needs to be clearer and simpler.

Going to my earlier point: the community deserves to see the final versions of all these planks of the planning reform, or a proper independent review.

It is arrogant to bring this bill forward for debate at this time. I would like to read from the Combined Community Council’s media release of yesterday:

The ACT Government’s response to the ACT Assembly Standing Committee on Planning’s Inquiry into the Planning Bill 2022 is underwhelming and dismissive according to the Combined Community Councils of the ACT (CCCACT). The response validates the widespread view held across the community that the outcome of the Planning Reform was always predetermined and that the opportunity for meaningful reform has been missed.

If my motion is supported, the wishes of the Combined Community Councils of the ACT—the only thing we have close to a check and balance on this government and representing the communities of the ACT—would be realised.

It is disappointing to see the Greens amendment, which basically dismisses the heart of my motion. I quote again:

... the Reform process has lacked adequate or appropriate engagement, an evidence base and a well-designed evaluation framework ... the CCCACT believes they will not accept them if the process is not transparent. The Government runs the risk that the processes prescribed in their Planning Bill will not be regarded or accepted by the Community.

I will finish with this short paragraph from yesterday’s media notice from the Combined Community Councils of the ACT:

The Planning Bill should not be considered by the Assembly until all the relevant parts of the legislation (Territory Plan, Explanation of Intended Effects, Design Guides and District Strategies) are available and have been comprehensively discussed with the community.

Mr Assistant Speaker, I do not know that I could find a stronger statement—statements, indeed—in support of my motion. I would like the Greens member, who is moving amendments that really water down my motion and take the heart of it, to reflect on how the community councils will view her amendments, because she is basically undercutting what they think should be happening next. Debate on this bill should be adjourned. We deserve an independent inquiry.

MS CLAY (Ginninderra) (3.10): Mr Cain, I thank you for your interest in planning and for bringing forward this motion today. I move the amendment circulated in my name:

Omit paragraph (3), substitute:

“(3) consistent with the recommendations made by the Standing Committee on Planning, Transport and City Services, calls on the ACT Government to:

- (a) undertake a legislative review of the ACT Planning System Review and Reform Project within three years of passage of the Planning Bill, should that Bill pass; and
- (b) undertake a governance review on the new ACT Planning System conducted by an independent expert who does not report to EPSDD, to be conducted within 12 months of passage of the Planning Bill and to be tabled in the Legislative Assembly, with the terms of reference of the review to include issues raised in the Committee Report including recommendations 11, 12, 16 and 47.”.

I will be speaking to Mr Cain’s original motion and to the amendments I have circulated. I am interested to hear a different statement from the Canberra Liberals than we have had before, which is usually a rush to build before you plan. I am really pleased to hear a different kind of approach. I have lost count of the number of motions we have considered in chambers to instantly release land in Kowen, instantly release land in West Tuggeranong, instantly release land in South Ginninderra, and develop it, all before we have done any of the environmental assessments, before we have done any community consultation and before we have been through any kind of planning process. The Greens did not back any of those motions for hasty and rushed land releases. So it is intriguing that today we have the opposite of that. I do not know if this is a new direction for the Canberra Liberals or if we just have different views on different days.

Mr Cain’s motion calls on the ACT government to institute an independent review of the planning review to assess its necessity, its operational effectiveness and its efficiency and it calls for us to adjourn debate until the completion of that review. I would really like to thank Mr Cain for outlining the background of this project. He has given a really good outline of the project. This project has been running for a long time. It has been running for four years. I have been working on it in my term here, and it pre-dates me, and it has been one of the major projects I have been looking at. It is a really critical project.

We know that planning underpins all of the major decisions we have to make in this city and all of the major problems we have in this city. It is critical for us to deal with our homelessness crisis and our housing affordability crisis. It is critical for us to deal

with climate resilience, with the climate change locked in and with the ongoing climate emissions that we see from development. It is critical for us to deal with ongoing loss of habitat, the extinction crisis we are experiencing and the environmental pressures we are seeing on all fronts. We need to get these systems working properly. We will be spending a lot of time on this bill and all of these issues over the next two weeks, and I am looking forward to some really detailed and meaty contributions from the Canberra Liberals.

I have been working on this review as the ACT Greens spokesperson for planning, and the Greens are taking this project extremely seriously. Our Greens ministers left cabinet last September so that we could work on the Planning Bill to improve it. We want to make sure it reflected the values of community members. We wanted to make sure it reflected all of the comments we heard. We wanted to make sure that it protected people and the planet in the right way, and that is why we chose to step out of cabinet for this matter.

I am speaking in my private capacity as an MLA and as the Greens spokesperson for planning right now. There was an inquiry by the Standing Committee on Planning, Transport and City Services. I am not speaking on behalf of that committee, but I need to refer to the work of that committee. That committee made 49 recommendations for change, including four related to governance and one that called for a legislative review of the new system within three years of the commencement of the new system. The requirements came after a really detailed inquiry—there were two days of hearings, there were 65 submissions, there were dozens of concerns raised during that inquiry on a whole lot of different topics.

I was pleased to hear Mr Cain touch on a number of issues in his speech. I was a little disappointed that his motion really only focused on one or two issues. We in the Greens are looking at a whole suite of critical issues in the system. We are not just focusing on one or two. We have been following up on all of the concerns raised during that committee inquiry, raised by the community councils, raised by community members that we meet out in our electorates in our suburbs, and raised by various stakeholders, and we are taking them very, very seriously.

Last December, I put out some statements for the Greens. I said the ACT government needed to take a closer look at specific issues such as governance, community consultation, transparency and environmental protection. I said:

If the community is going to have confidence in the planning system, we need to make sure these recommendations are incorporated before we debate this Bill.

And:

We need a review of governance arrangements...

Our position has not changed, and I think you can see in the amendments I have circulated that our position has not changed since then. We have spoken about this planning review many, many times since December. We have been working really closely, really collaboratively with our colleagues in Labor from our position outside of Cabinet. We are trying very hard to get a good planning system for Canberra that actually tackles the major problems we are facing.

This is really difficult and detailed work. It involves a whole lot of consultation, a whole lot of meetings with different people who have different fields of expertise, and lots and lots of different drafts of legislation and planning documents. It is not simple work. It is much harder to work on this—to get amendments through, to try and get the details of the system working, to look at the flaws in the system and the opportunities of the new system—than it is to simply shut the whole project down. That is a very easy position but that position will not give us a planning system that will allow us to tackle the major problems we have of housing affordability, climate change and the environmental pressures we are facing.

The Leader of the Greens, Shane Rattenbury, wrote to the Minister for Planning and Land Management about the need for a governance review. I seek leave to table Minister Rattenbury's correspondence with the planning minister.

Leave granted.

MS CLAY: I table:

ACT Planning Review and Reform Project—Copy of letter to the Leader of the ACT Greens from the Minister for Planning and Land Management, dated 19 May 2023.

Members will be able to see from the letter I have just tabled that four weeks ago, on 3 May, Minister Rattenbury wrote to the Minister for Planning and Land Management to set out clearly the Greens' expectations about the matter of a governance review. Minister Rattenbury stated that our expectations were that such a review would be independent, which seems to be one of the calls that Mr Cain made yesterday; that it would be completed within 12 months of passage of the bill, should that bill pass; that it would be tabled in the Assembly; and that it would cover the governance matters that were raised in the committee inquiry.

The Greens have thought quite hard about these governance issues. We have talked to a lot of people. We have heard all of the community concerns that were raised. I chaired the planning hearing that looked at those matters. We have given this a great deal of thought. Rather than making hasty changes to a system that is not yet in place and rather than having a lengthy review now to a system that is theoretical and is not yet in place, we think the better and more sensible approach is for us to look at those arrangements in the new system, as they are operating, on the terms we have set out—by an independent expert who reports back within 12 months and who tables that report in the Assembly. That is actually going to get us the best possible governance review we could get. It is an actual review of the governance of the system as it is working; rather than a review on the old act, the current act, which may not be in place if we pass a new one, or on bits and pieces of a new system that is not yet working together.

We are looking at a lot of issues in addition to a governance review. I am really pleased to see our colleagues in Labor heartily agree with us and I think we are about to hear from the planning minister on that. It would be great to have a governance review and we are going to get that committed to. I have, for clarity, popped that into

the motion here today but you will see from the letters tabled that were initiated a month ago, that it was well in train long before today.

There are a lot of other issues in the planning system that we need to get right. We need to make sure that this planning system protects our environment; adapts to the climate change that we already have locked in; make sure we are genuinely reducing emissions as we go; make sure we are building affordable housing not just more housing; make sure we have transparency and consultation measures locked in with generous enough timeframes for community members to participate in those; make sure we have some of the non-legislative backups we need, the resourcing that goes with a lot of these systems to make sure they work well; and we also need to make sure the entire system will fit together properly and seamlessly. The Planning Bill is just one stage of that.

The Planning Bill is scheduled for debate from tomorrow. If that bill passes in the next couple of weeks—and it will depend on whether we all reach agreement on the detail of it—it will not come into immediate effect; the Assembly and the community will have time to look at all of the other systems as it will lie there dormant whilst we are looking at the rest of the pieces of the puzzle.

I definitely understand how people need to see if all fit together. I do not have a problem with sequencing it. We actually have to sequence it. It is too much material all at once, and we need to get the bones of the system and the parent legislation in place first before we can look at all of the pieces that get made under that legislation.

I will be bringing forward 19 amendments for that debate, and I am really looking forward to debating Labor's amendments. Labor has a lot of measures in there that respond to the concerns we were raising and that the community were raising. So, I think that is really promising. I am looking forward to seeing how the Canberra Liberals will participate in that debate. I was really pleased to start discussing these matters with my colleague Mr Cain a couple of weeks ago. I spoke about our concerns about a governance review and how we thought we had that agreed to take place. I am slightly surprised that we have had the matter brought forward.

We also have commitment and, if the motion is amended, it will be in this motion to review the entire legislative system within three years. Again, I think it will be more useful reviewing a system as it is operating than reviewing something on paper before it has been assembled and before it is in place. So we have taken a lot of steps to make sure we put in place the reviews that the community needed, and we have tried to put them in place in a useful and operational way.

As I said, I am pleased to hear Mr Cain talk about other matters in his speech. I am surprised that the motion itself really only talks about one. There is a lot in this planning system, in the new Territory Plan, in the design guides and in the technical specifications. It is a lot of detail. We have incredibly generous community members and stakeholders who have spent hours going through this stuff. It is hard to get your head around it, but you need to engage with the detail and you need to put up amendments and to put up suggestions—if this is not working what would work better? It is really important that we engage with this detail as legislators.

The amendment I have moved to Mr Cain's motion does commit us to a legislative review of the system within three years, assuming the new system comes into place which, as I said, we do not yet know. We have not yet debated the bill, we have not yet debated the motion for the second stage of the package, so this is jumping the gun a little bit. But if those things pass then we will have a review of the entire system and we will also have a governance review on what we consider to be satisfactory terms that meet the requirements of the committee inquiry. So that goes a long way to dealing with that level of concern. There are a lot of issues still in play, so we will need to make sure that we get all of those issues dealt with as well.

I think should the new system pass, with the governance review and a legislative review—noting the Standing Committee on Planning Transport City Services has already announced its intention to review the Territory Plan—we already have three reviews locked in. I think this is a good level of scrutiny and I think all of those reviews are going to be much more useful by looking at a system as it is functioning rather than looking at a vast quantity of paperwork.

So the Greens will not be supporting Mr Cain's motion in its original form but we will be supporting an amended version. We are very much looking forward to the debate on this incredibly important piece of planning legislation for Canberra that will shape Canberra's future. It has such immense environmental implications; such immense implications for current and future generations. It is really important that we get this one right. I would like to thank Mr Cain for his time and I am looking forward to his detailed consideration and his considered amendments on the debate to come.

MR GENTLEMAN (Brindabella—Manager of Government Business, Minister for Corrections, Minister for Industrial Relations and Workplace Safety, Minister for Planning and Land Management and Minister for Police and Emergency Services) (3.24): I thank Ms Clay for moving her amendment. The amendment reflects the huge amount of work that we have done to get to this point in the planning review process. It shows that the Legislative Assembly scrutiny of the Planning Bill has done its job effectively. I want to thank Ms Clay for her work in this process and in finalising the bill for debate. I also thank my other government colleagues. It will be clear when we move the government's amendments to the bill that many of them have come from the committee's recommendations.

Despite Mr Cain's motion today, we will be proceeding with the debate on the bill tomorrow. This is because the passage of the bill is necessary before we can move to the next steps in this reform process. The bill allows for the government to make district strategies and the new Territory Plan. These are the next steps in the reform process. Only the provisions in the bill that allow for these to be made will be commenced straightaway, as you heard. The rest of the bill will commence later in the year, once the interim Territory Plan has been finalised and the Assembly and the public have had another chance to see it.

These important documents will be finalised in the coming weeks. I would like to acknowledge the significant work undertaken by officials and my colleagues to progress this work. I have had many conversations with industry professionals and the community, and I am proud of the work that we have achieved. There has been extensive consultation over many years on the new planning system. Consultation

with the community and industry has been an important part of developing this planning system. The feedback we have heard from the community at every step of the way has been considered by planners, including a consultation report written by third-party planning consultants.

This revised bill gets the balance right on what we have heard from the community and the committee and will deliver reforms to our planning system that lead to better outcomes for people, the community and the environment. Separately, the government is working through the feedback that we have received on the new draft Territory Plan and draft district strategies. These will be finalised over the coming weeks and will incorporate what we have heard from the community.

The motion from the Canberra Liberals today is a bit rich. It calls for a review of a review before that review is even done. It seems that the Canberra Liberals are going to do everything they can to hold up the debate on the bill, instead of engaging on the content itself. Instead of process arguments like this, we should be having a debate on the substance of the bill. I certainly hope Mr Cain will be careful to engage on the substance of the bill, instead of spending time spouting alternative facts to the media and trying to stop the proceedings.

Passing the bill is an important step in reforming our planning system. Through this reform we are shifting to an outcomes-focused system. This new system will make it easier to build good developments and more homes for our growing city. It will also make it easier to stop bad developments that are not in the community's interest from being built. With the help of my colleagues, we will be making several amendments to this bill, and this includes strengthening environmental and housing affordability principles and provisions. There will also be a government amendment to commence a review of the act three years after it passes. This comes from the PTCS committee report recommendations. Mr Cain knows this because he was briefed last week on the government amendments.

Ms Clay's amendment to the motion also makes reference to the committee's recommendations around governance. There has been a good discussion on this matter. I can advise the Assembly that the ACT government will be conducting a review of governance over the next 12 months. For the Assembly's benefit, I will table correspondence between me and Minister Rattenbury on this matter, further to what has already been tabled by Ms Clay:

ACT Planning Review and Reform Project—Copy of letter to the Leader of the ACT Greens from the Minister for Planning and Land Management, dated 19 May 2023.

I do not think it is beneficial for us to get further into the detail of this review in the chamber. It is important that this independent process can run its own course.

Monitoring and evaluating the implementation of reforms is done as best practice. But the system and reforms also need time to be implemented to provide all those who participate in the system time to adjust, and also to enable time for the outcomes of the changes to be realised. The process that Ms Clay has outlined in her amendment strikes this balance well. I once again invite Mr Cain to engage meaningfully on the substance of the bill.

I look forward to this bill passing the Assembly in the coming days so that we can get on with this reform and deliver a more efficient planning system for our city.

MR CAIN (Ginninderra) (3.30): I will just touch on a couple of the comments from Ms Clay and Mr Gentleman. I am not quite sure how leaving the bill open is shutting down the process. I think they were Ms Clay's words. The whole point of my motion is to put in front of the community the government's intended final package, which includes the bill. Mr Gentleman's point that we need the bill in law to get to the next stages is nonsense. That is absolute nonsense. Again, it shows how they are not interested in true consultation.

How about this as an idea? Let us have the bill, the intended Territory Plan, the intended district strategies and the intended design guides reviewed properly and all together! You do not need the bill to be law to do that, Minister for Planning and Land Management. You do not need this bill to be law to have a review of the planning system, and the intended changes through the Territory Plan and the district strategies and design guides. That is absolute nonsense, and it shows your lack of interest in hearing from the community. Sure, it is a lot to look at, but you have been asking the community to look at this for quite a while already, which actually supports my recommendation that we need a panel of experts to look at this and to advise the community, as well as to give the community a chance to comment at the same time.

I could not quite believe my ears when the planning minister said that this bill will help us to stop bad developments. What a remarkable thing to say. I wonder how a bad development happens? It must be approved before it can be developed, and if it is not in conformity then something should be done about it. Do you need a new planning system to stop bad developments? That is a confession from this minister that he is failing to look after Canberra. "Let's take care of these bad developments that we are in control of. Let's change the legislation and bring in a whole new raft of things." What a ridiculous thing for a planning minister to say as a justification for the change in planning legislation and the whole approach to planning in the territory: "Goody! We will be able to stop bad developments." Ridiculous.

I will touch on something Ms Clay said earlier as well: we do not have to have the legislation in place to review the other elements of the planning reform. That is untenable. That is just not true. We are in a state right now where we have most of the elements available in draft form—not the design guides, not the interim Territory Plan, but we have the district strategies and an interim plan. We are in a state where we have a bill that is not law and significant parts of this planning reform open for consultation. Obviously, some of that is closed, but some consultation is yet to happen. It makes no sense to say that the bill must be passed or we cannot reform our planning system. That is absolute nonsense.

How could the media from the combined community councils that I have read out this afternoon not be persuasive? One thing I have heard from community council chairs is that no-one has really explained what is wrong with the current system. But when I asked that of community groups and builders and developers, some themes emerged. One is that in our current rules-based system the rules are not always applied properly, so it is not being administered correctly. There is inadequate compliance with what is

actually built. Mr Gentleman's so-called bad developments are because there is not adequate compliance in the developments, either in the stages of the build or in the final build. Maybe the things that were approved in the first place should not have been approved.

We are also hearing, particularly from builders and developers, that they are waiting so long for DAs to be processed. That is not the community's fault. That is a resourcing problem that the government refuses to fix in this area and in many other areas of governance in our territory. Just ask the police commissioner!

What is wrong with the current system that we need this wholesale change? I have not really heard an answer to that. I think Minister Gentleman did touch on what they are hoping to achieve, and that is to do more of the ugly densification that we are seeing now. It will be easier to do: easier to flood the market with apartments, easier to create urban heat islands in our suburbs and in some of our greenfields, and easier to get more money from land more quickly.

This bill is a flawed product from a flawed process. Just ask the combined community councils. That is also my opinion, of course. Where is the national capital vision, and how is it supported by these changes? I do not see a connection. I do not see a vision-driven planning system that enhances our city and raises its standing in the eyes of Australians and the international community as a bush capital that we can be proud of.

We are moving from a rules-based system to a deregulated system. We still are unsure what an outcomes-based planning system will produce. I reject Ms Clay's amendment. My motion as presented should stand. The community deserves proper consultation and an independent assessment of all of the elements of this planning review before this bill is passed.

Question put:

That the amendment be agreed to.

The Assembly voted—

Ayes 14

Noes 7

Ms Berry
Mr Braddock
Ms Burch
Ms Cheyne
Ms Clay
Ms Davidson
Mr Davis
Mr Gentleman

Ms Orr
Dr Paterson
Mr Rattenbury
Mr Steel
Ms Stephen-Smith
Ms Vassarotti

Mr Cain
Ms Castley
Mr Cocks
Mr Hanson
Mrs Kikkert
Ms Lawder
Mr Milligan

Question resolved in the affirmative.

Original question, as amended, resolved in the affirmative.

Government—fuel pricing

MR PETTERSSON (Yerrabi) (3.41): I move:

That this Assembly:

- (1) notes:
 - (a) in 2019, a Select Committee on Fuel Pricing was established to conduct an inquiry on ACT fuel pricing. In its final report, the Select Committee recommended that the ACT Government initiate a real-time, mandatory price monitoring scheme similar to the FuelCheck scheme operating in NSW; and
 - (b) on 4 November 2022, real-time fuel pricing was made available to Canberrans via the NSW FuelCheck scheme for an initial six-month pilot. The NSW FuelCheck tool gives power to the consumer to make educated and informed decisions on how and where they spend their money. It provides transparency to the ACT fuel market and allows users to easily search the best option for them based on their vehicle needs:
 - (i) sixty-one of the sixty-two fuel service stations in the ACT have signed up to participate in the pilot; and
 - (ii) the pilot is set to expire imminently;
- (2) further notes average retail fuel prices in Canberra are now on par with other major capital cities:
 - (a) the Australian Competition and Consumer Commission (ACCC) petrol quarterly report of December 2022 found that for the December quarter of 2022, Canberra's average retail fuel price was 185.3 cents per litre, only marginally higher than Sydney at 184.6 cents per litre and Melbourne at 185.2 cents per litre; and
 - (b) in March 2019, six months before the Select Committee handed down their final report, the ACCC reported that Canberrans were paying, on average, 16.1 cents per litre more than Sydneysiders and 11.6 cents per litre more than Melburnians; and
- (3) calls on the ACT Government to:
 - (a) extend the pilot of the NSW FuelCheck scheme; and
 - (b) continue monitoring the price of fuel in the ACT to ensure prices remain fair and comparative to other capital cities.

I rise today to call for an extension of the FuelCheck tool pilot. FuelCheck is an important tool in addressing the rising cost of living and the immense pressure that high petrol prices put on family budgets. In 2019 there was vocal debate in our community about the ACT's fuel market.

It was obvious to most that fuel retailers were price gouging to make a quick buck, due to the limited competition that exists in the ACT. Many people, including my constituents, were reporting that the cost of fuel was lower elsewhere: in Sydney, in Yass, and across the border in Queanbeyan. Despite Canberra's status as the nation's capital, only a couple of hours from the coast and with a pretty decent population,

we had higher petrol prices than many regional towns. It did not make sense to Canberrans, and it certainly did not make sense to me.

In response, this Assembly established a Select Committee on Fuel Pricing to undertake an inquiry to investigate these issues further. There were many great recommendations made by that select committee. In my opinion, a key recommendation was for the ACT government to initiate a real-time mandatory price-monitoring scheme similar to the FuelCheck scheme operating in New South Wales.

Soon after, in April 2020, international fuel prices were at record lows, due to the initial economic shocks associated with COVID-19. Canberrans were happy with the price drops at first. But when they realised that fuel retailers in the ACT were deliberately failing to pass on the same savings that Sydneysiders were getting, they were mad and they demanded more transparency. The ACT government investigated and found that the public's reports lined up with the actual data. Retailers were shamelessly price gouging, and Canberrans were paying up to an additional 25 cents per litre compared to those in Sydney.

In response, the Chief Minister issued an ultimatum to operators, threatening to use special legislative powers under the Fair Trading (Australian Consumer Law) Act 1992 to enforce a retail margin if prices did not drop below \$1. Yes, that is right: we were talking about \$1 for petrol. Not long after that, on 4 November 2022, real-time fuel pricing was made available to Canberrans via the New South Wales FuelCheck scheme for an initial six-month pilot.

The FuelCheck tool has been widely lauded by Canberrans for giving them back the power to make an educated and informed decision on how and where they spend their money on fuel. I know personally because I use it myself. Drawing back the curtain on the ACT's fuel market has allowed users to easily search the best options for them, based on their vehicle's needs. It has received lots and lots of positive feedback. This great reception has only increased since Canberrans have become increasingly more money conscious as a result of cost-of-living pressures. People like FuelCheck.

The numbers also show that it has been effective in levelling the fuel market playing field for Canberrans. Following the implementation of the select committee inquiry recommendations and the Chief Minister's interventions as well, average retail fuel prices in Canberra are now on par with other major capital cities. The ACCC's petrol quarterly report found that for the December quarter of 2022 Canberra's average retail fuel price was 185.3 cents per litre, only marginally higher than Sydney, at 184.6 cents per litre, and Melbourne, at 185.2 cents per litre.

Compare that to March 2019, only six months before the select committee handed down its report, when the ACCC reported that Canberrans were paying, on average, 16.1 cents per litre more than Sydneysiders and 11.6 cents per litre more than Melbournians. These figures show that the massive chasm between us here in the ACT and those elsewhere has been closed. Things are better. All the measures that the ACT government has initiated so far have worked in concert to make things better for Canberrans, the FuelCheck tool being just one of them.

Unfortunately, the six-month pilot is set to end very soon. We know that FuelCheck has value. Canberrans have told us that they are big fans of it. We also know that it works. The numbers show us that it does. So today I am calling on the ACT government to extend the FuelCheck scheme. I urge my Assembly colleagues to join me today to support the passage of my motion and the extension of this very important tool.

MR BARR (Kurrajong—Chief Minister, Treasurer, Minister for Climate Action, Minister for Economic Development and Minister for Tourism) (3.47): I thank Mr Pettersson for bringing forward the motion this afternoon. It is a timely reminder of the need to stay vigilant to avoid extreme examples of price gouging, and we have certainly experienced some of those in the recent past. As many Canberrans are facing cost-of-living pressures, information on how to reduce the cost of living is important.

As members would remember, it has not always been the case that Canberrans have paid prices for fuel similar to those paid by residents in other major cities. In 2019, when the government established the Select Committee on Fuel Pricing to combat relatively high fuel prices in Canberra, we focused on looking at practical ways that we could make a difference and ensure that there was not the sort of price gouging that we had been experiencing.

I do not think it came as a great surprise to many that the committee found that Canberrans were faced with an unfair gap in pricing, compared to many areas of New South Wales. In early to mid-2020, during the first wave of COVID in Australia, Canberrans were paying up to 30 cents a litre more than motorists in Sydney. Although these prices do seem somewhat low now, the price was about \$1.30 a litre in Canberra and \$1 in most parts of Sydney.

At that time I wrote to every fuel retailer in the ACT, calling on them to end the price gouging. I set the benchmark that the government expected fuel prices to be at or around the major metropolitan price average. I made it clear that any exploitation of our community at a time of major economic uncertainty and hardship would be viewed very unfavourably by me, the government, and indeed the broader community. I outlined that the government was willing to use its standing legislative powers to introduce price regulations, should there not be a price correction. Perhaps not surprisingly, petrol prices in the ACT very quickly aligned more closely to the benchmark set for major retailers.

It is, of course, disappointing that it requires a threat of major market intervention from government for fuel companies to do the right thing, but for the sake of Canberra motorists I am glad that they responded. Since that time we have seen our fuel prices stay roughly on par with other metropolitan centres. Some weeks they are marginally lower; some weeks they are marginally higher.

One of the 2019 select committee's recommendations to government was to initiate real-time price monitoring and to look at schemes such as the New South Wales FuelCheck scheme. Initial investigations into adopting the scheme showed that it would be very expensive and that it would not represent value for money for ACT ratepayers to establish our own stand-alone scheme, but I was able to engage with the New South Wales government and advocate for an expansion of their FuelCheck app

into the ACT. I welcomed their support for that and was very pleased that we were able to commence a real-time fuel pricing pilot at no cost to the territory.

I thank and acknowledge the New South Wales government for being able to see the real benefits of real-time pricing information for ACT residents, and for the tens of thousands of New South Wales residents from the surrounding region who drive daily into the ACT for work, school, shopping, health appointments or other things. Since the launch of this pilot, we have been glad to see 58 of the 60 petrol stations in the territory sign up to provide real-time pricing. This figure, I think, is a slight update from the one cited in Mr Pettersson's motion.

Canberrans can enjoy significant savings using FuelCheck. It gives them up-to-the-minute pricing information, either at their favourite stations or across the territory. I know that over the past six months it has been possible to use the FuelCheck app to shop around and save, on average, 16 cents per litre on standard unleaded, 24 cents per litre on premium unleaded and nearly 27 cents per litre on diesel. The FuelCheck app can also help motorists to save further, through advice on the cheapest day of the week to fill up and notifications when prices drop below a certain level at their favourite petrol stations.

The government is committed to ensuring that competition in our marketplace remains strong. We are encouraged by the current state of competition, but we do remain watchful. Any significant and sustained deviation from benchmark pricing will be examined and urgent explanations sought. The government is currently reviewing the operation of the FuelCheck app during the pilot period to determine whether any further adjustments to the scheme might be needed or whether any additional measures may be necessary.

I thank Mr Pettersson for putting this on the agenda. I indicate that we are going to examine the pilot process and look at how we might be able to improve things further. We do not take evidence of price gouging lightly. We certainly did not in 2019 and we will not in the future. FuelCheck is an important tool that gives Canberrans the power to make educated decisions as to where they fill up their car. It is also an important piece of the puzzle in how we keep increasing competitive tension and put downward pressure on fuel prices, in line with expectations in our community.

I should also note that a potential future element for FuelCheck might be to include the recharge pricing for electric vehicles—noting, of course, that one in five new vehicles sold in the ACT in recent times has been an electric vehicle. That is likely to increase as a share of new car sales. It is very clear that you can save even more money on running your car if you go electric. As the price of electric vehicles continues to fall, we will maintain our advocacy and focus on fossil fuel prices, but we will also be looking to support more people to make that transition and to have competition in the pricing of electric vehicle recharging.

I thank Mr Pettersson for bringing this motion forward, highlighting the importance of FuelCheck to make sure that Canberra drivers have the power to get the best possible deal, however they power their vehicle—petrol, diesel or electric.

MR RATTENBURY (Kurrajong—Attorney-General, Minister for Consumer Affairs, Minister for Gaming and Minister for Water, Energy and Emissions Reduction) (3.54): I welcome this opportunity to make some comments as the consumer affairs minister, but also to express on behalf of the ACT Greens that we are happy to support this motion and for the helpful FuelCheck app to become permanent.

I was pleased last year, in co-operation with Minister Cheyne, to launch the trial of the FuelCheck app. As we know, the tool is an expansion of the New South Wales app, and it provides real-time fuel pricing comparisons across the territory. The information I have is that the trial has been going well, that almost all of the retailers have signed up voluntarily, and that Access Canberra will be finalising its overall review of the scheme in the next few weeks.

One of the features I am pleased about is that we are integrating into the FuelCheck app the location of EV charging sites. This is an important feature as we transition away from petrol cars to electric cars and as we roll out our city-wide charging network.

Canberrans have been able to enjoy significant savings using FuelCheck by seeing up-to-the-minute pricing information, either at their favourite stations or across Canberra as a whole. Over the past six months it has been possible to use the FuelCheck app to shop around and to save, on average, 16 cents per litre on standard unleaded, 24 cents per litre on premium unleaded and nearly 27 cents per litre on diesel.

I want to acknowledge that, for many people in Canberra, fuel is a critical household cost. Transport is in fact the second highest cost for Canberra households, and primarily these transport costs are the costs of owning private cars. That includes fuel, rego, maintenance and insurance. People on low incomes are particularly vulnerable to this cost pressure. Unfortunately, it is also low income people who tend to live further away from services and from public transport routes, and who therefore are more reliant on private transport. I agree with the need to promote competition in fuel pricing to ensure that Canberrans are not getting gouged and to offer some relief from excessive fuel costs, which can really bite Canberra households. This relief is especially needed for low income earners, who are particularly susceptible to the spiking cost-of-living pressures.

As the Independent Competition and Regulatory Commission, or ICRC, has determined when looking at petrol pricing in the ACT, Canberra has suffered from weaker competition in the supply of petrol when compared to places such as Sydney. We have fewer independent retailers here. What we know is that Costco is the key competitive disruptor to ACT petrol prices because it regularly offers discounted petrol. What we tend to see is that Costco will regularly provide the cheapest petrol. The closer you get to Costco, the cheaper rival petrol stations become and, generally, the further from Costco, the more expensive the petrol. This provides a good demonstration of how much independent competition can influence prices in our city.

The geography of Canberra and the location of service stations has made it harder for Canberra consumers to shop around and compare competing retailers' prices.

Our service stations tend not to be out on main roads, like you might see in Sydney, but tucked away in our suburban shopping centres. The FuelCheck app helps to mitigate this problem. Broadly, though, Canberra is a relatively well-off city and Canberrans are less sensitive to price differences than those in some other cities. They are less likely to shop around and reward discount retailers with their patronage. This can make it harder to generate competition. Some of the onus is on the consumer to use the app, favour the cheaper prices and drive the competition that helps to keep prices low.

As I said, I do not want Canberrans getting ripped off at the petrol pump. I support fair pricing and competition in the fuel market. In fact, as consumer affairs minister, I have progressed some other reforms related to fuel pricing. In 2018 I introduced a bill to regulate the fuel prices that service stations are allowed to display on price boards that are visible to passing motorists.

ACT law prohibits service stations from displaying discounted Shopa Docket fuel prices on their fuel boards—that is, the price payable after the discount is applied. This means that the price board must show the retail price that is payable by all consumers before any discount is applied to the price. Discount voucher schemes, such as the four cents off per litre that many of the supermarkets operate, can still be advertised; however, the price displayed must be the full price available to all motorists. These changes were introduced to ensure that Canberrans were not lured into service stations by advertised discounted prices that require a Shopa Docket, an in-store purchase or membership of a loyalty rewards program to receive the discount price.

Service stations are also prohibited from displaying a fuel price on a fuel price board that is lower than the price at the corresponding fuel pump. These laws allow motorists to make the best choice about where they buy their fuel, based on clear, accurate and up-to-date information about fuel prices. Transparent fuel pricing increases competition in the petrol market, which, as I have said, then leads to more competitive prices across the board. This information is especially important today, when there appears to be increasing confusion about fuel prices, due to the changing nature of the fuel price cycle over recent years, and increased living costs.

I reiterate that ensuring we have transparent and competitive fuel pricing is an important goal. It is important for the community, especially for Canberrans who are more sensitive to cost-of-living pressures. I do want to make the point, though, as the Greens have made many times before, that, for the sake of the community and the environment, in order to address climate change we need to transition our city to one that is less reliant on cars and definitely less reliant on fossil fuels. In fact, we can no longer be reliant on fossil fuels. We need to move to a new paradigm.

We need to be a city that prioritises public transport and active transport. For the private vehicles we do use, we need to transition as quickly as we can to using zero emissions vehicles. This clean, zero emissions city will benefit everybody. One of the benefits is that individuals and families will be free from the vicissitudes of fuel pricing. These are big city-level changes that are largely the responsibility of the government. It is about how we build and plan the city, and the macro policies we put in place to ensure that the zero emissions transition happens speedily but also equitably.

There is already a lot of important work happening in this area. As we know, in some areas the ACT is leading the way. The ACT government now has a leading zero emissions vehicle strategy that includes various supports and incentives, and the target of no internal combustion engine vehicles being sold from 2035. We already see that our zero emissions vehicle plan is having an impact. Many people in our community are choosing to shift to zero emissions vehicles to cut fuel costs and also to cut their emissions.

As the Chief Minister noted, since the start of this year one in five new vehicles registered in the territory has been a zero emissions vehicle. That is a fantastic statistic and it is more than double the percentage of the next best jurisdiction. Making the switch to a zero emissions vehicle offers significant benefits, including reduced running costs and maintenance costs, which can make an important contribution to reducing cost-of-living pressures.

The issue remains that new zero emissions vehicles are still out of reach for many Canberrans. We need to make sure that as many people as possible can enjoy these benefits by making these vehicles more affordable and for used vehicles in this category to be more widely available. One of the specific measures to assist with the affordability of zero emissions vehicles is to ensure that the incentives are available for used vehicles, as well as new vehicles. For example, our two years free registration is available for used zero emissions vehicles being registered in the ACT for the first time, and a stamp duty exemption is available for used zero emissions vehicles, as well as new zero emissions vehicles.

The \$15,000 interest-free loans available through the Sustainable Household Scheme are available for both new and used vehicles. A household purchasing a used vehicle can access the zero interest loan to greatly reduce the up-front cost. There is a lot more work to happen in this equity space to ensure that lower income people can access these new technologies. We are living in a market-based world. There are in-built challenges with universal access, but through our policies we are striving to increase the availability of electric vehicles to increase the number of models available and, through this method, to bring the price down for everybody and ensure that there are healthy second-hand markets.

The ACT government fleet is continuing to shift to a zero emissions passenger vehicle fleet, with all newly released vehicles being zero emissions over recent years. Once these vehicles reach the end of their lease period, they will be resold, boosting the number of zero emissions vehicles available for Canberrans to purchase. I note Mr Steel's announcement today that the transition of the bus fleet to becoming zero emissions is progressing. I welcome the addition of the extra buses that he has announced today.

There is a lot of work to do on the transition of our city, to undo our car dependency and particularly our petrol dependency. There is much improvement needed for Canberra's public transport system, and there is still a lot of improvement needed in planning our city to embed sustainable transport as a priority. I am confident that over the next decade we are going to see dramatic changes in how our city works. Petrol stations are going to start to disappear as zero emissions vehicles take over and people regularly charge at home with renewable electricity.

My hope, as ever, is that public transport networks and active travel options, such as walking and cycling infrastructure, also significantly improve, and that Canberrans are able to be less reliant on their private vehicles and have more choices about how to get around our city. Other cities do it; there is no reason we cannot do it here. We are certainly in the right position to do it. If we put the right policies and prioritisation in place, we can make a substantial difference.

In the meantime, I support the FuelCheck app as a useful way to provide real-time, transparent information to consumers, to promote competition in the fuel market and to help Canberrans to make savings on their household costs. The Greens are pleased to support Mr Pettersson's motion today.

MR COCKS (Murrumbidgee) (4.05): I thank Mr Pettersson for raising the issue. I am very pleased to hear that both Mr Barr and Mr Rattenbury seem to have had a conversion on the idea of a fuel check app as a solution to address the information problem when it comes to competition in the fuel market. Both of them opposed a motion to embed precisely this type of app fewer than 10 months ago.

The adoption of a fuel check app is something that the Canberra Liberals have fought for for a long time. We will be supporting this motion today. It builds on years of work. FuelCheck is a sensible solution. It was developed by a sensible, forward-looking Liberal government in New South Wales. It was one of the very first subjects that I had the privilege to speak on in this Assembly, a little less than 10 months ago. My colleague Peter Cain has been a fierce advocate for this, as a solution in the fuel market, as well. Before either of us was elected, I have to say that Alistair Coe was the individual who really fought for this in the previous Assembly.

When I last spoke on this subject I pointed out that we on this side of the chamber believe in competitive markets. Competitive markets can set their prices, and consumers have the right to choose the best price. For that to occur, though, consumers need to be informed. They need to have the information at their fingertips and that is what FuelCheck does. Consumers need to know when they are getting ripped off and when they are getting a good deal. When consumers have informed choice, competition can drive down prices, and that is precisely what we have seen.

This is about more than efficient markets. We in the Canberra Liberals have advocated for this reform because it is an efficient and effective way to fight a small component of the Canberra tax. Canberra's cost of living is too high. There should be no reason for Canberrans to pay more than we would if we lived somewhere else, but we do.

Fuel is one part of that, but there are many other areas in which people in Canberra are paying too much. Many of them are within the government's control. People in our community are suffering with the cost of living. The cost of housing has contributed to an extremely high burden of mortgages and rents. People are struggling in Canberra. There has been, across Australia, a more than 40 per cent increase in the average mortgage in the past two years. People are paying more for rates, people are paying more for fuel and people are paying more for fruit and vegetables. The everyday cost of living has skyrocketed, and in Canberra we are feeling it even more.

I spend a lot of time in the community, meeting with people from areas as diverse as Deakin all the way out to the Molonglo Valley, to Weston Creek and even down to Tuggeranong, and I can tell you that the experience people have across the entire electorate is the same. Whether you are in Deakin or whether you are in Kambah, the cost of living hurts. The cost of living is really hard for people now.

A fuel check app is one way to take the pressure off, and that is why we will support it. It is a fundamental way to address those information asymmetries. It is a fundamental way to take economically responsible decisions and make sure that people have the ability to choose the right choice for them. The Canberra Liberals will support this motion. We look forward to continuing to advocate for measures that address the cost of living for Canberra families.

MS CHEYNE (Ginninderra—Assistant Minister for Economic Development, Minister for the Arts, Minister for Business and Better Regulation, Minister for Human Rights and Minister for Multicultural Affairs) (4.10): I thank Mr Pettersson for bringing this important motion to the Assembly today.

The cost of fuel in the ACT is an issue that is front of mind for Canberrans and for this government. With fuel prices continuing to fluctuate due to wholesale market rates and broader global circumstances, the ACT government is aware that cost of living pressures weigh heavily on some Canberrans.

We have taken steps to address this, as a parliament and as a government. In 2019 a select committee inquiring into fuel prices in the ACT was established, which I chaired. This was a thorough inquiry. We took a large amount of evidence, visited other jurisdictions and tested a large range of possible approaches with the community through an interim report, before finalising a shorter list of recommendations.

One of those recommendations was that the ACT government explore the feasibility of the New South Wales FuelCheck scheme being adapted to incorporate the ACT market. We had inquired about FuelCheck, including specifically about the ease of including the ACT in the scheme, and establishing our own. We knew that the cost of establishing the scheme in New South Wales alone some years ago was \$600,000. While we were told it could be expanded to the ACT, what would be required, and the cost, were not shared with us. That is why the recommendation was crafted in that way.

The Chief Minister today, and 10 months ago, has detailed what happened next, including writing to retailers in 2020 when we saw an extraordinary drop in prices nationally, due to COVID, everywhere except here in the ACT. The government also continued to engage with the New South Wales government about the possibility of expanding FuelCheck to the ACT.

We knew, and as was explained patently in that debate 10 months ago, that there was a high cost—a prohibitive cost, indeed—of establishing our own stand-alone scheme and a high proposed cost of expanding the scheme. Pleasingly, the conversations that the Chief Minister had with the previous New South Wales government proved fruitful last year, and the New South Wales government agreed to waive the

establishment and licensing fees. This meant that FuelCheck was expanded into the ACT at no cost.

By increasing transparency and competitive pressure in the local market, the website and app provide an easy way for Canberrans to find the best fuel price for their vehicle. Of course, expanding FuelCheck to the ACT benefits both New South Wales and ACT residents, with 40,000 New South Wales residents travelling into and through the ACT every day. The then Minister for Customer Service and Digital Government, Victor Dominello MP, said:

We know how porous the ACT and New South Wales border is so this is a win for residents of both New South Wales and the capital territory. I congratulate the Chief Minister and his Government for embracing this technology.

We thank the New South Wales government for extending the scheme to include the ACT at no cost. Given the marginal costs for them of including the ACT in the New South Wales scheme, and those porous borders, this approach made the most sense.

In making this announcement, we agreed that there would be a pilot period of six months, after which there would be a review. The review is to determine whether adjustments to the scheme are required. Our scheme began as an opt-in scheme, and 58 of 60 retailers have opted in. But we note that other jurisdictions have industry-specific laws in place, including to compel retailers' participation and compliance powers for the regulator. Now, having conducted a six-month pilot, it is timely to review the scheme in considering what, if anything, might be needed to assist with the running of the scheme.

This pilot period is not a cliff at the end of which FuelCheck will be discontinued or paused; rather, the pilot period informs the review. It gives us a period we can look back at in determining if there are any legislative changes needed to govern the scheme. That review is now underway. As I flagged, the review does not impact the use of FuelCheck, and Canberrans can continue to access FuelCheck's benefits.

In considering whether changes are required, the review is analysing information on the uptake of FuelCheck by service stations and consumers, and leveraging data on the number of downloads and the number of visits to the FuelCheck app and website. The impact of the scheme on petrol prices is also being investigated. I can share some early data.

Data obtained from the New South Wales government to inform the review indicates that, over the past six months, it has been possible to save, on average, 16 cents per litre on standard unleaded, 24 cents per litre on premium unleaded, and nearly 27 cents per litre on diesel, through shopping around via the FuelCheck app or website.

It is also useful to compare how the ACT's prices have compared to the national average while FuelCheck has been operating in the ACT. Between 6 November last year and 21 May this year, the ACT's average retail price for standard unleaded was 183.7 cents per litre, marginally lower than the national average of 184.1 cents per litre. For the same period, the ACT recorded an average diesel price of 214.5 cents per

litre, which is 3.4 per cent higher compared to the national average of 207.5 cents per litre.

However, during this period an ACT motorist could pay less than the national average, by around eight cents a litre for standard unleaded and 10 cents a litre for diesel, by shopping around using the FuelCheck app or website.

Finally, the review is considering whether the scheme is being delivered in an optimal way, taking into account complaints about price mismatch, and the end user experience. Through Access Canberra's data-led, evidence driven and proportionate approach to risk and harm, compliance is most often best achieved through targeted and effective education and engagement with individuals, business and the community.

There has been a low level of complaints received during the first six months of FuelCheck, with only 16 complaints being received, and none since 1 April. Access Canberra undertook a sector scan of 23 retailers in April, which showed a 96 per cent compliance rate. When Access Canberra receives a complaint of price mismatching, officers engage with the retailer to remind them of the need to update FuelCheck with the correct price.

Retailers have been highly receptive to this approach, and all instances of price mismatching have been resolved. Access Canberra can also connect retailers with NSW Fair Trading if any retailer needs any technical assistance.

I take the opportunity to thank the regulatory and trading team in Access Canberra, and the compliance team. They do a fantastic job in engaging right across the business sector each and every day, and their work with these retailers is no exception.

We look forward to reporting on the review at its completion. In the meantime the community can have confidence that, while the review is ongoing, FuelCheck is continuing in the ACT, and that the government, as the Chief Minister has indicated, will continue to review the prices of fuel in the ACT.

I thank Mr Pettersson for this important opportunity to highlight the work that the government is doing on this issue, and I commend the motion to the chamber.

MR PETTERSSON (Yerrabi) (4.18), in reply: I would like to begin by thanking all members for their contributions. They were all comprehensive and very enlightening for the Canberra community.

Madam Speaker, you know you have a good motion when a couple of cabinet ministers, the Chief Minister and all political parties support your motion, so I am very happy to receive that support today.

As Mr Cocks highlighted, we are experiencing a cost of living crisis. We need to be laser focused in this place on ensuring that everything we do lessens the financial burden that Canberrans are experiencing, and petrol prices are definitely one of those things that I hear about most. Once again I thank all members for their support.

Question resolved in the affirmative.

Health Infrastructure Enabling Bill 2023

Debate resumed.

MR STEEL (Murrumbidgee—Minister for Skills, Minister for Transport and City Services and Special Minister of State) (4.19): I am pleased to speak today in support of the Health Infrastructure Enabling Bill 2023, which is so important for the future of the ACT's healthcare system.

Our city is growing and growing rapidly, and now is the time for the ACT government to make the right and smart investments in the future of our healthcare system, to support a population that will reach half a million, expected as early as 2026, and three-quarters of a million by 2060.

The decision for the government to acquire the public hospital at Bruce and invest in a more than one billion dollar hospital for Canberra's north side is a responsible decision and responsive decision to the growing healthcare needs of our community. This bill, and our decision for the new north-side hospital is about putting the health of our community first, by making the largest investment in hospitals and health care in our city's history.

Hospitals around the country are under pressure, and we must work to make sure that the ACT has an integrated, efficient and equitable hospital and community healthcare system to support our growing community. Taking the step to acquire Calvary and deliver a new major acute hospital in Bruce will serve our growing community's health needs for decades into the future.

It is a decision that we are making in tandem with the construction of the Canberra Hospital expansion, which is delivering a new critical services building at the existing hospital campus in Woden. These projects are a significant step forward for health care in the ACT. They will also be significant for my constituents who use, work for and live near the city's major hospital, the Canberra Hospital.

It has been unfortunate that the opposition have used this debate on this issue to denigrate the dedicated staff at Canberra Hospital and the services that they provide. I know that my constituents value the services at Canberra Hospital, which provides great quality health care and has some of the country's finest medical staff. The healthcare sector in the Canberra Hospital is one of the largest employers of people in my electorate. Many of my constituents work at the Canberra Hospital and they serve our community well and they are valued by our government.

This decision about the north-side hospital is an important one for them and for my community, because we all know that many people from the north side avoid Calvary to seek healthcare services at Canberra Hospital on the south side. We have all heard their stories of driving straight past Calvary. This is not about the quality of healthcare services delivered by the public hospital staff at Calvary, but simply because Canberrans know that Calvary is not a full-service acute hospital.

The unintended consequence of a private provider running our public hospital service is that patients are caught between two organisations when they need continuity of care across an integrated healthcare network. They need services that are able to work together to provide what they need when they need it.

The Canberra Hospital is our only principal referral hospital in the ACT, which by definition means that it provides a very broad range of services, has a range of highly specialised service units and has very large patient volumes. It is in a different league to Calvary. It is why Calvary is compared to a completely different set of peer hospitals, which are actually defined as not providing the breadth of services provided by principal referral hospitals like Canberra Hospital.

So the reality is that Canberra Hospital receives some of the most complex patients and delivers more services to more people and, because of its role as our only major acute public hospital, it is under pressure. That pressure on the Canberra Hospital continues to build because of the inflexible contract that sits between well-meaning clinicians and, quite literally, drives more demand to the south side.

The time has come in our city's growth for us to make sure that Canberrans can access a wider range of acute healthcare services on both sides of Canberra, north and south.

The decision to build a north-side hospital is important for south-siders because it means that the government can better manage the demand across the public healthcare system, by being managed by a single public provider through Canberra Health Services. This will mean that north-siders can access more services closer to where they live, reducing the need to come to Canberra Hospital. It will provide an anchor on the north side for the delivery of important healthcare services to the fastest-growing regions of our city—in Belconnen, Gungahlin and the inner north.

This decision is coupled with the offer of a fair transition of existing Calvary Public Hospital staff to the new hospital. Our government will continue to invest in new hospital staff, nurses, doctors, midwives and other allied health professionals to support the expanded range of services, north and south, supported by the recently released workforce strategy. The north-side hospital will also complement the breadth of work we are doing with our expansion of the Canberra Hospital and delivering the master plan for the hospital campus.

It is disappointing that the Canberra Liberals do not support this bill, but it is not surprising. Time and again they have proven that they do not support the infrastructure that our growing city needs. Our government will continue to invest in the infrastructure and services that our growing city needs across health care and hospitals, education and schools, transport and community services and other services.

This decision today to build two new hospitals, north and south, powerfully demonstrates that the health of our community is our priority and that we are making an historic investment in health care. Today's decision will also deliver certainty for Calvary Public Hospital staff to transition to the new arrangements. In contrast, the delay and obfuscation that the opposition is calling for on this bill would actually cause ongoing uncertainty for staff.

We have seen these types of tactics used before to try to block other infrastructure projects, and the only people that it serves is the narrow interests of the Canberra Liberals. Their pattern of behaviour reinforces a consistent narrative that the Canberra Liberals do not support large infrastructure projects and they have no plan to address the challenges in our growing city.

Our government knows that delivering a public healthcare system is complex and requires careful planning and, at times, it requires tough decisions. The decision the Assembly will make today is about preparing our healthcare system for the future and recognising that the way we deliver hospital care must grow and change.

There is no greater public purpose than the health care of Canberrans. It is one of the core reasons why compulsory acquisition powers exist. While rarely used, I cannot think of a more important reason for this established power to be used than to enable the largest healthcare infrastructure investment in the history of our city.

This is as important to south-siders as it is for north-siders. This is about putting the health care of our community first. The new north-side hospital will see the healthcare services that our community needs delivered more flexibly and closer to where people live, by more efficiently managing demand on existing healthcare services and staff. It will enable the government to deliver a wider range of high-quality healthcare services by our public healthcare provider to more people across our growing city. It will support staff with more opportunities, more innovation and a better workplace. I commend the bill to the Assembly.

MS STEPHEN-SMITH (Kurrajong—Minister for Aboriginal and Torres Strait Islander Affairs, Minister for Families and Community Services and Minister for Health) (4.27), in reply: The Health Infrastructure Enabling Bill 2023 has been introduced, fundamentally, to enable the government to invest more than a billion dollars in a new north-side hospital to be owned by Canberrans, and it will mean that that hospital is part of a single integrated network.

The benefits of this, of course, have been a matter of debate on and off for at least 15 years. As the Chief Minister has outlined, Calvary Public Hospital Bruce has always been a public hospital, and it has always been entirely funded by taxpayers. The current Crown lease for block 1 section 1 Bruce is very restrictive for this reason. The land can only be used for a hospital and ancillary activity, and Calvary is not able to sell any part of the land or erect or demolish any building without the territory's agreement.

In 2009 the Little Company of Mary agreed to transfer the entirety of the block to the ACT government. At the time Calvary itself identified the importance for the ACT government of having the north-side hospital on its own balance sheet to enable serious investment to be made in new hospital infrastructure. The then Australian Nursing Federation agreed that the sale of Calvary Public to the ACT government would, to quote from a series of opinion pieces in *Canberra Doctor*, to which Mr Hanson may recall contributing at the time, “result in the hospital being fully integrated into the ACT public healthcare system and deliver a more consistent and comprehensive network of service delivery across the ACT and region”.

This is a position that the union has held consistently ever since. The concerns it has recently expressed reflect the surprise of its members about the announcement at this time, and their uncertainty about what it means for them. We respect that, but the ANMF has also noted that this is not all on the ACT government. Calvary also has some responsibility here.

The union's comments demonstrate why the short period between introducing legislation and commencing formal transition is key. The bill, when enacted, will require Calvary to enable the government and Canberra Health Services to consult with staff—something that has simply not been possible to date, despite direct requests from staff, for example, that I meet with them at the hospital.

The key point of contention in 2009, of course, was the future of Clare Holland House, which was proposed to be sold to Calvary Health Care and staff moved onto separate enterprise agreements. This proposal met with opposition from many quarters. For clarity, that is not part of the proposal now. I will return to Clare Holland House later; but I want to clarify, in response to the Canberra Liberals' desperate media release this afternoon, that there could be no compulsory acquisition. As I said after question time, the ACT government already owns Clare Holland House and it is a public service, and the staff there fully understand that.

Of course, we know that the whole deal fell through when the Little Company of Mary withdrew its support in early 2010. It did so, at least in part, because it could not get agreement from the Vatican to transfer ownership to the ACT government. Following much debate from 2009 through to 2011, including a Legislative Assembly inquiry, the ACT government reached a new agreement with Calvary Health Care in late 2011, with its term tied to the Crown lease. It was hoped and intended that the Calvary network agreement, or CNA, would enable a better networked public hospital system with more engagement and accountability. This was what everyone agreed was needed.

The CNA also enabled the construction of Calvary Bruce Private Hospital, which will continue to be an important part of the ACT health system, as will Calvary John James. We will continue to partner with both hospitals to deliver care for public patients.

Madam Speaker, the CNA is an improvement on the arrangements inherited from the 1970s, but you need to only look at the culture review and subsequent annual reviews of its implementation to see that the agreement continues to be a constraint on collaboration and progressing culture reform across the ACT health system. And when it came to planning again for the new north-side hospital, many of the same old hurdles arose.

Since the government introduced this legislation, there have been questions about why we could not simply reach agreement with Calvary national, Little Company of Mary, on a path forward. The answer is that we have tried. Conversations have been going on for years, and formal negotiations occurred over many months from April 2022. At that time we made it clear that the ACT government must own the land on which the new north-side hospital would be built, just as Calvary itself explained in 2009.

We said we would be drafting legislation to acquire the land if necessary, knowing the barriers that the Little Company of Mary may face in agreeing to transfer its Crown lease.

We also said that we wanted the new hospital to be better integrated into the broader health system. Anyone who works at either Canberra or Calvary hospital could tell you why this is important. In contrast to the overblown rhetoric about the ACT government simply wanting to remove Calvary, as Calvary itself has publicly indicated, the government offered it a 25-year modern services agreement to operate the new hospital. Ultimately, however, we could not reach agreement. To be clear, for Mr Cocks's benefit, Calvary rejected the proposed 25-year agreement. But that was not the only sticking point.

Further, even if we resumed commercial negotiations and could agree between ourselves, my understanding is that canon law has not changed. I am no expert on canon law, but I have it on good authority from someone who is that the Little Company of Mary would still need Vatican approval to transfer the land to the government. This is the only aspect of Calvary being a religious organisation that has, in fact, been relevant to our considerations. To point this out is not to criticise the church; it is simply to outline for the community and the Assembly the reality of the situation we faced.

During this time, of course, we have also been consulting the community about the new north-side hospital, but we have had limited capacity to engage directly with Calvary Public Hospital staff. Instead, Calvary has been consulting its employees about its master plan. Faced with this difficult situation, we needed to make a difficult decision. It was not one that we took easily or lightly, but we need to get on with the planning and construction of a new hospital. We are certain that the decision we have made, hard though it is—and I absolutely recognise that it has come as a shock to many Calvary staff—is the right decision made in the best interests of Canberrans.

We have made this decision so that we can invest more than a billion dollars in building a state-of-the-art hospital in Canberra's north, in a place where people are used to receiving care, and where the synergies can be maintained between the public hospital and Calvary's private hospital and other medical facilities.

Labor believes in delivering public health services for all Canberrans when and where they need them. Labor invests in the public health system, in public health workers and public health infrastructure for the future. This is who we are.

To ensure public health services are owned by the people of Canberra, this bill provides certainty over the land that will enable us to get on with developing the new north-side hospital in partnership with those who will use it and those who will work in it.

As well as acquiring the land, this bill enables the transition of operations of the existing Calvary Public Hospital Bruce to Canberra Health Services, bringing together the ACT's public hospitals and community health services into a single network.

The bill also ensures that we can deliver modern public health services across the ACT without the problematic structural issues that impact staff and patients every day with an inflexible contract that sits between well-meaning clinicians.

The bill, of course, does not seek to acquire the part of the Crown lease on which Calvary's private facilities are located; indeed, the revised Crown lease facilitated by the bill will expand on the current private precinct area.

In 2020 the ACT government released a framework for the ACT public health system, describing our vision for public health services under three headings: accessible, accountable and sustainable. The fact is that having a private provider delivering one of only two acute public hospitals, particularly under the current arrangement, works against each of these objectives.

Acute health service access is not equitable across the territory. As Mr Steel has eloquently explained, there are a range of areas where, despite years of negotiations, there is no territory-wide waiting list. Endoscopy, the subject of much debate in this place over the Canberra Health Services waiting list, is just one example. With Canberra Health Services as the hospital operator, the capacity of expanded paediatrics and the care of people with higher risk pregnancies in a hub-and-spoke model are practical examples of the potential for service improvement on the north side.

When it comes to accountability, the Legislative Assembly itself has often expressed concern that Calvary is not as accountable as CHS and the ACT Health Directorate. While the government reports regularly on Calvary Public Hospital's performance, those who run the service rarely appear before committees, including estimates and annual reports hearings. Again, this is not a criticism of Calvary or the individuals involved; it is simply the reality of a contracted service. Also, frankly speaking, the fact is that those opposite are rarely interested in critiquing Calvary Public Hospital's performance in the way they do Canberra Hospital's.

Most importantly, though, having two acute public hospital providers, one of them a non-government provider, works against system sustainability. It builds in duplication of administration and contract management, and limits the capacity to plan and load share across the acute public hospital system. It makes it almost impossible to plan our hospital infrastructure territory-wide, at a time when so many of the existing buildings are reaching the end of their useful life and we are master-planning across both acute hospital sites. At a time when the pressure on our public hospitals is greater than ever and is forecast to only grow, this is a level of inefficiency that the ACT can no longer afford.

Speaking of efficiency, the numbers show quite a different story to that touted by those opposite and many of those criticising this decision in the media. To get technical for a minute, the cost of delivering hospital services nationally is measured by the cost per national weighted activity unit, or NWAU. It may surprise members to know that, on this nationally comparable basis, the most recent publicly available figures from 2019-20 show that Canberra Hospital is more efficient than Calvary public in delivering both acute and sub- or non-acute services.

The only reason Canberra Hospital's overall average NWAU cost is higher than Calvary's is that its mental health services are significantly more costly. This is not surprising, given the much higher level of acuity and complexity that they manage. The most appropriate way to look at this, though, as Mr Steel has mentioned, is to look at peer hospital comparisons. Taking the overall average cost per NWAU, including mental health, in 2019-20 costs at Calvary Public Hospital were more than six per cent above its peers across Australia, or \$368 more per NWAU. By contrast, Canberra Hospital was less than half of one per cent above its peers, or \$31 per NWAU.

While Calvary Public Hospital staff tell us that they run a lean service, and I have no doubt that that is their experience, this is not flowing through to overall costs and efficiency for the taxpayer. We are confident, and independent analysis demonstrates, that the efficiencies we will achieve through consolidating our hospitals into a single network run by CHS will outweigh any just terms compensation. Of course, compensation on just terms is a key feature of this bill. While the Little Company of Mary was granted the land at Bruce for free, the buildings and maintenance have been funded by the government and Calvary Health Care claims to make no profit from running the public hospital, any compulsory acquisition must be undertaken on just terms.

This recognises the interest of the private provider in the service, and that it has a further 76 years to run on its Crown lease of the public hospital land. In response to recent comments from Calvary National, it should be noted that just terms does not require a compensation package to be finalised and presented as part of the acquisition, as long as the law includes adequate procedures for determining fair compensation, which this bill manifestly and explicitly does. The bill enables the making of a regulation to guide the working out of just terms, as well as transition arrangements, particularly with regard to staff employment and conditions.

We are seeking to work through what these just terms will look like with Calvary. Our preference would be, of course, to work through the just terms collaboratively and respectfully, but if this needs to be determined through a legal process then it will be. We urge Calvary National to keep this matter separate from that of transition.

This is a difficult time for Calvary Public Hospital staff. We recognise, as I said, that this decision has come as a shock to them. Throughout the transition, the government's focus will continue to be on the safety and wellbeing of patients and the health workforce. We will continue to work respectfully and collaboratively with Calvary Health Care. My expectation is that Calvary's regional team will share this focus and assist in a smooth transition, in the interests of the ACT community that needs our public health services, and of their workforce.

Following expert advice and evidence about transitioning health services, including experiences in other jurisdictions, the bill includes a transition period that is as short as possible, while being achievable and safe. This transition time frame provides certainty for staff, patients and the community. It minimises ambiguity and provides assurance to patients and carers in the community that there will be no interruption to services.

There are two paths in the transition. One is the critical path, with those operational activities that absolutely must be completed by 3 July. The other relates to those that can be worked through over the next six months. Critical activities are those that keep the hospital and health service running smoothly and safely for patients and ensure that staff can be paid appropriately and on time. We are confident that these matters can be addressed by 3 July, but things like working out depreciation schedules are not urgent and can be completed as part of the next stage of the transition. (*Extension of time granted.*)

I do want to assure Calvary staff that we are committed to supporting them to do the same job, in the same team, with the same manager, in the same hospital, with the culture and community that they have built. Because Labor supports workers, this transition is applying the principle of the same or better for those transitioning: same pay, same conditions and same entitlements.

We are also committed to giving staff, patients and carers the information they need during the transition period, consulting with them and making their voices heard as we bring together our public health services. While the opposition has chosen to question this, the fact is that the government could not have consulted with staff who work for a private organisation about a decision that their employer was manifestly not going to support.

We have provided workforce support sessions for staff, to ensure that they have the information they need throughout this time and to alleviate uncertainty to the greatest possible extent prior to the passage of the legislation. We will continue to provide this workforce support as we progress into the transition period, and we look forward to being able to engage formally with Calvary staff. We know that it is hard right now and this decision has come as a surprise, but it is the right decision for the future, and we look forward to working closely with staff after the act is notified.

Madam Speaker, I said I would return to the topic of Clare Holland House. I want to be clear that Clare Holland House is only part of this discussion because for many years the Little Company of Mary has declined to enter into a separate contract for its operation, despite numerous requests from the ACT Health Directorate. Instead, even though it was originally established under a completely separate agreement, Calvary has identified Clare Holland House as the Barton campus of Calvary Public Hospital Bruce, and staff at Clare Holland are considered to be employees of the hospital.

We have been speaking with Calvary about the future operating arrangements for the vital palliative care services delivered from Clare Holland House—a facility that will continue to be owned by the ACT government for the provision of public palliative care.

I understand that staff at Clare Holland House are uncertain about the road ahead for them. I have sought to reassure those I have spoken with that we are trying to resolve this situation with Calvary as quickly as possible. I have heard clearly from the staff at Clare Holland that the most important thing for them is that they stay together as a specialised, nation-leading palliative care service. I have also heard that they want to remain a public health service, under public service employee pay, conditions and entitlements. They want opportunities for career progression and to take palliative care into the future.

Staff have faced significant challenges over the past year, with the number of vacancies putting additional pressure on them, and it is important that a resolution is reached so that recruitment can be finalised. In the meantime, during the transition period, Canberra Health Services will be able to step in and support this critical service in a way that has not been possible to date. We will continue to work with Calvary Health Care and to engage with Clare Holland House's dedicated staff as we work towards a decision as quickly as possible.

The legislative scrutiny committee has undertaken a review of the bill, prior to it being debated today. I thank the committee for its consideration. In response, the government is proposing one amendment to the bill. This amendment, to section 10, is proposed to provide further clarity that a regulation may provide for compensation for any acquisition of property as a result of the operation of the bill.

I will seek leave to move a number of other amendments to the bill in the detail stage. These are minor and technical in nature. They do not alter the intent or effect of the bill but simply seek to correct some drafting errors and provide greater clarity for the processes involved in the acquisition and transition. I will speak to those briefly in the detail stage.

In conclusion, this bill will help to deliver an ACT public health system that is accessible, accountable and sustainable. I thank the many Calvary Public Hospital and Clare Holland House staff, nurses, midwives, allied health professionals, doctors and support staff who have taken the time to share with me their fears, questions, hopes and ideas for the future. Ultimately, these conversations have largely ended with reassurance and optimism about the opportunities that this change will offer. I also thank everyone in the community who has contacted me to offer their support for this decision. I commend the bill to the Assembly.

Question put:

That this bill be agreed to in principle.

The Assembly voted—

Ayes 14

Mr Barr	Mr Gentleman
Ms Berry	Dr Paterson
Mr Braddock	Mr Rattenbury
Ms Burch	Mr Steel
Ms Cheyne	Ms Stephen-Smith
Ms Clay	Ms Vassarotti
Ms Davidson	
Mr Davis	

Noes 7

Mr Cain
Ms Castley
Mr Cocks
Mr Hanson
Mrs Kikkert
Ms Lawder
Mr Milligan

Question resolved in the affirmative.

Bill agreed to in principle.

Detail stage

Bill, by leave, taken as a whole.

MS STEPHEN-SMITH (Kurrajong—Minister for Aboriginal and Torres Strait Islander Affairs, Minister for Families and Community Services and Minister for Health) (4.51): I seek leave to move amendments to this bill that were not circulated in accordance with standing order 178A, together, but have been circulated, were not considered by the scrutiny committee, and, pursuant to standing order 182A (b) and (c), are minor and technical in nature and in response to comments made by the scrutiny committee.

Leave not granted.

Standing orders—suspension

MR GENTLEMAN (Brindabella—Manager of Government Business, Minister for Corrections, Minister for Industrial Relations and Workplace Safety, Minister for Planning and Land Management and Minister for Police and Emergency Services) (4.51): I move:

That so much of the standing orders be suspended as would prevent Ms Stephen-Smith from moving her amendments together that had not been circulated in accordance with standing order 178A, had not been considered or reported on by the Scrutiny Committee, and, pursuant to standing order 182A (b) and (c), were minor or technical in nature and in response to comments made by the Scrutiny Committee.

MR HANSON (Murrumbidgee) (4.51): We will not be supporting this. This is one of the most significant, substantive pieces of legislation that certainly I have seen in my time in this Assembly. You have circumvented all due process. You have done it in a matter of weeks. You have rammed it through the committee. You would not allow the committees to conduct an inquiry. Then, yesterday afternoon, we got eight pages of amendments circulated that are not compliant with standing orders, and then the minister came in here and said, “Trust me. They are all minor technical amendments.” I have looked at them. I am not convinced of that.

Why should we give leave when we have a minister who has conspired in secret with her mates in the Greens to concoct a piece of legislation and she has actively worked hard to circumvent all due process? Then she came in here at the last minute with eight pages of amendments and said, “We are going to ram these through too,” without having gone through scrutiny! Why should we give leave?

Why not adjourn these? Why not let them go through scrutiny, at the very least, and come back? When you came into this place three weeks ago, you said, “We are not going to go through the normal committee process, but we will go through scrutiny.” I remember Mr Gentleman, with his motion, saying, “It is important that it will go through scrutiny.” If it is important for the bill to go through scrutiny, surely it is important for us to look at these amendments and make sure that they are what the minister says they are, because no-one believes her anymore. I do not, my colleagues do not, the doctors and nurses at Calvary do not, and there are a whole bunch of people in the community who do not.

We do not support leave for these amendments. Take them through the proper process. Come back another day. Do this properly.

MS STEPHEN-SMITH (Kurrajong—Minister for Aboriginal and Torres Strait Islander Affairs, Minister for Families and Community Services and Minister for Health) (4.53): I would note that these amendments, while they were not circulated by 12 pm yesterday, were circulated at about 1.30 yesterday afternoon. The opposition had plenty of time to seek a briefing on these amendments, which are indeed minor and technical. We have not heard that they have sought a briefing on these amendments. If they had, we could have run them through them. They are actually very straightforward. They could have gone through the bill with a pen and a piece of paper and worked out that all these amendments are, indeed, minor and technical. One of them actually responds specifically to the scrutiny report. We responded to the scrutiny report in a timely way. This bill was referred to committee, and the PAC determined not to undertake an inquiry into it, and the health committee—

Opposition members interjecting—

MADAM SPEAKER: Could you resume your seat. Members, this debate has been conducted so far with a level of respect. I want that to continue. And I remind you that you were warned earlier this morning, Mr Hanson.

MS STEPHEN-SMITH: The health committee, which had clearly assumed that it would be the committee to which this bill would be referred, considered the matter early and asked officials to attend private briefings, which we did. They determined that a half-hour private briefing was appropriate. We were there for more than half an hour. Mr Milligan was there. He had opportunities to ask questions.

As I say, the opposition has had well over 24 hours to seek a briefing on these minor and technical amendments, and, if Mr Hanson had in fact read them, he would understand that they are minor and technical. They are clarifications, and one of them is specifically a response to scrutiny. I think it is absolutely appropriate to deal with this now for the reasons that we have provided: that we need to provide certainty to staff and we need to commence this transition period so that we can formally engage with staff and consult them, just as the opposition says we should, but we cannot at the moment because they work for another employer. We need to get on with this so that we can consult with staff and help them help us work through this transition, as they want to do.

MR GENTLEMAN (Brindabella—Manager of Government Business, Minister for Corrections, Minister for Industrial Relations and Workplace Safety, Minister for Planning and Land Management and Minister for Police and Emergency Services) (4.56), in reply: I think the minister was very clear and concise in her address as to why we should suspend the standing orders and continue with the amendments to the bill.

Question put:

That the motion be agreed to.

The Assembly voted—

Ayes 14

Noes 7

Mr Barr

Ms Berry

Mr Braddock

Ms Burch

Ms Cheyne

Ms Clay

Ms Davidson

Mr Davis

Mr Gentleman

Dr Paterson

Mr Rattenbury

Mr Steel

Ms Stephen-Smith

Ms Vassarotti

Mr Cain

Ms Castley

Mr Cocks

Mr Hanson

Mrs Kikkert

Ms Lawder

Mr Milligan

Question resolved in the affirmative, with the concurrence of an absolute majority.

MS STEPHEN-SMITH (Kurrajong—Minister for Aboriginal and Torres Strait Islander Affairs, Minister for Families and Community Services and Minister for Health) (4.58): I move amendments Nos 1 to 28 circulated in my name, together [*see schedule 1 at page 1447*]. I table a supplementary explanatory statement to the government amendments.

As I have indicated, the government amendments to the bill are minor and technical in nature and seek to further the purposes of the bill. Government amendments 4 and 5 are responsive to comments from the Standing Committee on Justice and Community Safety ACT Legislative Assembly *Scrutiny report 29*. The amendments include changes to the day the bill takes effect. It will be the day of notification, rather than the day after notification, to allow the transition period to occur as soon as possible for the reasons that we have been talking about today.

For a period of six months following the acquisition day, sections of the Government Procurement Act 2001 will be disappplied, which was the case in the original bill, but it is slightly widened in time frame to achieve the intended outcome. This amendment is to ensure that, during transition, appropriate urgent action could be undertaken in an unlikely situation that would require contracts to be amended, entered into or varied for the continued safe operation of the hospital in the first six months following transition. This, of course, includes ensuring that those small and medium sized ACT businesses that have contracts with Calvary can have those contracts continued or refreshed by Canberra Health Services.

I want to emphasise here that not all requirements of the Procurement Act are disappplied by this amendment, and all requirements of the Procurement Act that can be complied with will be, including the provisions of the secure local jobs code. Administrative arrangements will be established to provide additional safeguards during this period, and of course all contracts of \$25,000 or more will be uploaded to the contract register. So, ultimately, we will end up with a much higher level of transparency than is currently available for contracts that relate to Canberra's north-side public hospital.

There is a change to the definition of public health services to ensure services that deliver care outside of the hospital are considered, which includes Hospital in the Home and other in-reach services.

The final purpose of these amendments is to make it clear that a regulation may provide for any acquisition of property and, thus, the bill is not inappropriately delegating legislative powers. This amendment specifically responds to comments made by the scrutiny committee.

I commend these government amendments to the Assembly.

MR HANSON (Murrumbidgee) (5.00): We will not be supporting these amendments, because, to be frank, we have not had time to consider them. They have not been through scrutiny. They are not consistent with standing orders. They are just part of a deliberate decision by this government to trample over the democratic conventions of this Assembly.

It is claimed that these amendments are technical. In some ways, these amendments are filling up some pretty substantial holes exposed in the original bill since it was first tabled. For example, proposed new clause 6(5) and (6) excludes a whole range of procurement laws and guidelines, including the Government Procurement Act and the secure local jobs code. I remember debating the secure local jobs code for months! That is something that you lot fought for. You fought for it tooth and nail, for your union mates. At first it was an MOU and then it was a bill. Nothing can go without the secure local jobs code! Now, those opposite, in what they say is a technical amendment, which has not gone through scrutiny, just wash that away. How can you come in here as a minister and say this is minor and technical, when you are dispensing with the secure local jobs code in perhaps one of the biggest procurements that we have seen in the territory? You say that is minor and technical!

You have a bunch of Procurement Act laws and regulations being dispensed with. There are other clauses relating to just terms and how they will be provided. This is a matter now that we have been advised by the Little Company of Mary that they are seeking to take to the High Court, and you are making amendments at the eleventh hour that adjust what “just terms” are in this legislation, and we are being expected to just accept it. This is something we need to have time to deliberate on, to consider, to engage, to consult. That is the way you are meant to do legislation—not ram it through.

There are other clauses. There are a whole bunch of errors that are being fixed up. What other errors are in this bill that will need to be fixed up? This is a sloppy piece of legislation from the minister. She is often trying to have a go at Ms Castley. Well, let me tell you: if you want an example of sloppy work, have a look at this. The minister is coming back in and fixing up her own homework, which others have corrected.

We do not support these amendments. We will not be supporting the bill. This is a pretty outrageous part of an outrageous process.

Why does this all have to be so rushed? Why can we not have time to consider these amendments? At the end of the day, the minister admitted she had offered a 25-year services agreement to Calvary. On the one hand, the government are saying that this has to be done so quickly we cannot even have a look at these amendments, that it has got to be rammed through committee because we have to get this integrated system happening right now because it is so urgent, but only a matter of months ago the minister was happy to have a 25-year deal with Calvary. How is that consistent? How can you on the one side of the debate say, “Hey, here is 25 years, Calvary,” but now say, “You have got to rip the bandaid; this has got to be done immediately”? That is entirely inconsistent!

It goes back, as the minister said, to the committee inquiry that was held in 2010. I remember it because I established it through a motion in this place on 23 September. That was as a result of the last botched attempt to take over Calvary, and as a result of that, there was a committee report, and the committee, chaired by the late Mr Doszpot, said, “We recommend option (d) or (e).” The government then in their response to that committee report said, “We will do option (e).” They tabled that in the Assembly in 2011. Let me tell you what option (e) was. Option (e) was an extra 200 beds at Calvary Hospital. They said that in 2011.

Where are they, Madam Speaker? The previous health minister came in here and said in writing, “We promise we will deliver another 200 beds to Calvary.” That led to a contract with Calvary. Where is it? You say you are committed to health in the territory. Where are those 200 beds that you came in here and promised? You did not deliver them. You spent a decade or more gaslighting the community, telling them that you are going to do something that you did not. And you say, “We are the ones that care about hospital services.”

You said you would rebuild the Canberra Hospital tower block. You said that in 2011. You put money in the budget. You then ripped the money out of the budget and did not do it. We went to the election in 2016 with a promise to rebuild the Canberra Hospital and to put a hospital in Gungahlin, in Canberra’s north. Do you remember that? You lot said no. You lot opposed it, because no, no, you did not want extra health services in Canberra’s north! You opposed it.

Opposition members interjecting—

MR HANSON: You promised to put beds into Canberra’s north. You said it in 2011 and that was not true. You said that you would build a subacute hospital with 200 beds. You delivered 140. You said you would rebuild the Canberra Hospital. You did not.

Do not come in here telling us about how you are delivering health services. You just cannot trust this government. Even if you have it in writing, and it is signed, and it is a contract for 76 years, it is not worth the paper it is written on!

We will not support these amendments. We will not support this bill. We will do everything we can to build Canberra Health Services and to build hospital beds throughout Canberra. We support more hospital beds. What we will do is we will actually build them. We do not want to do what you do—for a decade or more tell people you are going to do it and not deliver.

Question put:

That the amendments be agreed to.

The Assembly voted—

Ayes 14

Noes 7

Mr Barr	Mr Gentleman
Ms Berry	Dr Paterson
Mr Braddock	Mr Rattenbury
Ms Burch	Mr Steel
Ms Cheyne	Ms Stephen-Smith
Ms Clay	Ms Vassarotti
Ms Davidson	
Mr Davis	

Mr Cain
Ms Castley
Mr Cocks
Mr Hanson
Mrs Kikkert
Ms Lawder
Mr Milligan

Question resolved in the affirmative.

Amendments agreed to.

MADAM SPEAKER: The question now is that the bill, as a whole, as amended, be agreed.

Question put:

That the bill, as a whole, as amended, be agreed to.

The Assembly voted—

Ayes 14

Noes 7

Mr Barr	Mr Gentleman
Ms Berry	Dr Paterson
Mr Braddock	Mr Rattenbury
Ms Burch	Mr Steel
Ms Cheyne	Ms Stephen-Smith
Ms Clay	Ms Vassarotti
Ms Davidson	
Mr Davis	

Mr Cain
Ms Castley
Mr Cocks
Mr Hanson
Mrs Kikkert
Ms Lawder
Mr Milligan

Question resolved in the affirmative.

Bill, as amended, agreed to.

Adjournment

Motion (by **Mr Gentleman**) proposed:

That the Assembly do now adjourn.

Human rights—anti-protest legislation

MS DAVIDSON (Murrumbidgee) (5.11): Madam Speaker, I want to talk about a very important right we have here in the ACT—a right that is under threat around the country—and that is the right to peaceful protest. We have seen peaceful protest here today at this Assembly, and that is how a healthy democracy works. When our government is doing something we feel strongly about, we can use our democratic right to peacefully protest to let them know.

Last night, the South Australian Labor government, with the support of the South Australian Liberals, rammed new anti-protest laws through their upper house with no public consultation. Under these harsh new laws, peaceful protestors could be fined \$50,000 or face three months in jail. South Australia is not the only state to take democratic rights backwards with these kinds of laws. In New South Wales, peaceful protestors can be fined \$22,000 or jailed for up to two years. In Victoria, anti-protest laws carry fines of up to \$21,000 and up to a year in prison. In Tasmania, environment protestors at a forestry site can be fined \$13,000 or face up to two years in prison, and organisations that support a community protest can be fined up to \$45,000. These laws have passed because Labor and Liberal members in each state worked together to pass them despite Greens opposition.

Let us be clear about who they are targeting. They have said they are about climate change protestors. The state governments do not want to stop climate change; they want to stop climate change protests. They want to silence the people who are calling out the climate emergency and pointing out where we can make changes that will protect our planet and our people.

You can bet that if governments are allowed to get away with silencing the voices of people on climate change, they will also use those laws to silence First Nations people calling for truth and treaty, as well as a voice to parliament. They will use those laws to block protest that calls out the inequality crisis and the rising rates of homelessness resulting from inaction on housing affordability. They will use those laws to prevent voices being heard on any issue that makes people with privilege in this country feel uncomfortable about what it takes to maintain their privilege.

Last Saturday night, I joined my friends to dance in the streets of Melbourne CBD in protest at the lack of serious action from the Australian government on climate change. That night, some of them were arrested for sleeping in a public park. With the rising cost of housing, the increasing inequality crisis and the ongoing disruption to society caused by the increasing rate of climate collapse, we face a future where many more people will have no choice but to sleep out in the cold in public parks.

To Violet, Daisy, John and all my friends who put their bodies and their freedom on the line in protest to try to make this world a better place: thank you. Being part of what you do reenergises me to keep pushing for change. This is why peaceful protest is such an important part of our democracy. Long may the ACT resist the rollback of our right to protest.

Question resolved in the affirmative.

The Assembly adjourned at 5.14 pm.

Schedule of amendments

Schedule 1

Health Infrastructure Enabling Bill 2023

Amendments moved by the Minister for Health

1

Clause 2 (1)

Page 2, line 5—

omit

the day after

2

Clause 5 (d)

Page 3, line 17—

omit

immediately

3

Proposed new clause 6 (5) and (6)

Page 4, line 17—

insert

- (5) The following provisions do not apply to a procurement of goods, services or works by a territory entity necessary for or ancillary to the operation of the public hospital in the 6-month period immediately after the acquisition day:
- (a) the *Government Procurement Act 2001*—
 - (i) part 2A (Procurement activities) other than section 22A (1) and (2); and
 - (ii) part 2B (Secure local jobs code); and
 - (iii) any other provision prescribed by regulation;
 - (b) the *Government Procurement Regulation 2007*—
 - (i) part 2 (Government procurement—quotation and tender thresholds); and
 - (ii) part 3 (Procurement proposals); and
 - (iii) part 4 (Secure local jobs code); and
 - (iv) any other provision prescribed by regulation.
- (6) In this section:
territory entity—see the *Government Procurement Act 2001*, section 3.

4

Proposed new clause 10 (3) (aa)

Page 7, line 11—

before clause 10 (3) (a), insert

- (aa) how just terms for an interest acquired under this Act are provided;

5

Clause 10 (3) (a)

Page 7, line 12—

omit

under subsection (2)

6

Clause 11 (1) (d) (ii)

Page 9, line 24—

omit

immediately

7

Clause 11 (1) (d) (iii)

Page 9, line 28—

omit

immediately

8

Clause 11 (1) (d) (iv)

Page 10, line 3—

omit

immediately

9

Clause 12 (1)

Page 11, line 3—

before

information

insert

documents or other

10

Clause 13 (3) (c)

Page 15, line 1—

omit clause 13 (3) (c), substitute

(c) ensure that any disruption to Calvary's operation of facilities on the private hospital land caused by the transition of the operation of the public hospital to the Territory is minimised to the extent reasonably practicable; and

11

Clause 14 (1) (a)

Page 16, line 7—

omit

section 18

substitute

section 19

12

Clause 17 heading

Page 19, line 5—

omit the heading, substitute

17 Continued access to records relating to public hospital

13

Clause 17 (1) (a)

Page 19, line 9—

omit

historical

substitute

documents and other

14

Clause 17 (1) (a) (i)

Page 19, line 11—

omit

existing or pending

substitute

past, current or future

15

Clause 25 (1) (b) (v)

Page 26, line 4—

omit

historical

16

Proposed new clause 28 (2)

Page 27, line 9—

insert

(2) A regulation may commence on its notification day.

17

Schedule 2, part 2.2

Proposed new amendment 2.7A

Page 31, line 11—

insert

[2.7A] Section 27

omit

planning and land authority

substitute

territory planning authority

18

Dictionary, note, proposed new dot point

Page 32, line 6—

insert

- document

19

Dictionary, definition of *interest*, paragraph (b) (iii)

Page 33, line 20—

omit
and
substitute
but

20

Dictionary, definition of *operation*

Page 34, line 8—

omit the definition, substitute
operation, of the public hospital, includes a public health service.

21

Dictionary, proposed new definition of *public health service*

Page 34, line 19—

insert
public health service—
(a) means a public health service provided by public hospital employees at places other than the public hospital; but
(b) does not include a thing excluded by regulation.

22

Dictionary, definition of *public hospital assets*, paragraph (a) (iii)

Page 34, line 27—

after
public hospital
insert
or a public health service

23

Dictionary, definition of *public hospital assets*, paragraph (a) (v)

Page 35, line 4—

after
public hospital
insert
or a public health service

24

Dictionary, definition of *public hospital contract*, paragraph (a)

Page 35, line 13—

omit
necessary for and ancillary to the operation of the public hospital
substitute
necessary for or ancillary to the operation of the public hospital or a public health service

25

Dictionary, definition of *public hospital employee*, paragraph (a)

Page 35, line 20—

omit

other public health services

substitute

or a public health service

26

Dictionary, definition of *public hospital employee*, paragraph (a) (iii)

Page 35, line 26—

omit

27

Dictionary, definition of *public hospital employee*, proposed new paragraph (aa)

Page 35, line 26—

insert

(aa) includes any other person prescribed by regulation; but

28

Dictionary, definition of *public patient health records*

Page 36, line 11—

after

public hospital

insert

or a public health service