



QUESTION TIME
OF THE
LEGISLATIVE ASSEMBLY
FOR THE
AUSTRALIAN CAPITAL TERRITORY

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Tuesday, 3 May 2022

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Questions without notice

Dhulwa Mental Health Unit—safety

MR HANSON: My question is to the Minister for Mental Health. The *Canberra Times* yesterday reported your announcement of an inquiry into Dhulwa mental health facility and that Matthew Daniel from the nurses' union is seriously concerned that a nurse could lose their life on the job. You announced an independent inquiry, but you have not released any terms of reference, nor revealed who will conduct the inquiry, nor how long it will take. Minister, when will you release the terms of reference? How long will the inquiry be? When will it report? Will you commit to implementing its recommendations?

MS DAVIDSON: I thank you for the question. We are currently working through all of those details with the ANMF because we want to make sure that the nurses' voices are heard and that the inquiry that is run addresses the concerns that the nurses brought to us. I will provide updates as they are decided.

MR HANSON: Minister, will there be public hearings, and what will you be doing to protect nurses who fear speaking out about conditions at Dhulwa?

MS DAVIDSON: As I have said previously, there will be the opportunity for hearing submissions and for the nurses to be able to engage in that inquiry, which will be independently chaired. That will all be covered in the terms of reference, which we are working through with the ANMF right now.

MS CASTLEY: Do you share Mr Daniel's serious concern that a nurse could lose their life on the job at Dhulwa?

MS DAVIDSON: It is always a very serious concern when people are experiencing safety issues in their workplace. That is why we are going to be holding this inquiry, which will be independently chaired and will have inputs from WorkSafe ACT, the Human Rights Commission and an independent clinical review. So we are doing absolutely everything we can to address those concerns.

Dhulwa Mental Health Unit—safety

MS CASTLEY: My question is to the Minister for Mental Health. Minister, the Canberra Liberals share the union's serious concerns for the safety of nurses at Dhulwa mental health facility. Have you increased security at Dhulwa to protect nurses since 5 April, when the union launched its public campaign, and do security staff have the power to step in and protect nurses?

MS DAVIDSON: Thank you for the question. We have made a number of changes to improve security and safety at Dhulwa, over a period of years, but also to address the specific circumstances that occurred during February, when there was an increase in incidents. It is also really important to make sure that the nurses are able to be part of the conversation about any changes in their workplace. That is why we are engaging with the ANMF and why CHS are working with WorkSafe ACT to make sure that any improvements that can be identified are able to be implemented quickly.

MS CASTLEY: How will Dhulwa nurses be protected while the inquiry is underway, and if attacks continue will you close the facility?

MS DAVIDSON: It is really important that everyone feels safe, supported and confident at work. Dhulwa is a mental health facility that is providing care and support for people with some of the most complex mental health conditions in the ACT. This means that the way that we provide care and keep staff safe at work will be different to other workplaces around the ACT. That commitment to a safe workplace for everyone is something that we take very seriously, so we are continuing to work with staff, the ANMF, WorkSafe ACT, the Human Rights Commission and clinical experts to deliver the best clinical practice for patients and a safe workplace. That means that when we can identify possible areas for improvement, we do that quickly.

There has been significant work over a period of years to reduce occupational violence across the whole of Canberra Health Services, including at Dhulwa. While this has resulted in an ongoing reduction in incidents of occupational violence, we did see some specific circumstances in February that resulted in a particularly high number of incidents and we are continuing to address safety issues as they are raised by the nurses. I would encourage them to put in a RiskMan report if there is anything that they can see that is worrying them about their safety at work.

MR HANSON: Minister, what is your plan to attract nurses to work in mental health, given the events at Dhulwa?

MS DAVIDSON: There is extensive work underway within Canberra Health Services to attract and retain some fantastic staff, including across all of our mental health facilities. I note that we had great success in attracting people from outside the ACT to come here to work in Ward 12B when that was opened, our new subacute ward. That work has been quite helpful in increasing the number of mental health nurses who are working in the ACT. The nurse and midwife ratios that have been implemented across Canberra Health Services are also helping to provide opportunities for more people to work in our fantastic services.

Lake Tuggeranong—recreational fishing

MR DAVIS: My question is to the minister for city services, and it relates to recreational fishing around Lake Tuggeranong. Minister, as you are aware, I recently surveyed almost 500 of my constituents on issues pertaining to Lake Tuggeranong, particularly about the government's plan for the foreshore upgrades. Interestingly, people took advantage of the free form box, and a lot of people wanted to talk to me specifically about recreational fishing around the lake. Can you outline for the Assembly what work is being done to ensure that recreational fishing does not come at the cost of people's ability to enjoy the lake amenity?

MR STEEL: I thank the member for his question. This is probably something that fits into other ministers' portfolio areas, but I can talk specifically about TCCS's involvement in helping to manage our waterways, and particularly the urban open space that surrounds them as well.

There are a number of water bodies in the ACT that we have to manage, including

Lake Tuggeranong. We are consulting with Lake Tuggeranong residents at the moment about what upgrades they would like to see around the foreshore, to get a better understanding of what the priorities are, if there are conflict points around the lake for different recreational uses, and what capital improvements can be made right around the lake, not just around the Tuggeranong town centre, to ensure that we can continue to enhance the use of this asset into the future. If there are some specific things that Mr Davis wants to raise—I know he has provided some feedback and passed on the views of residents, and we are hearing that through the ACT government’s consultations as well—then he can do so specifically in relation to fishing.

MR DAVIS: Minister, what interventions specifically have TCCS taken on the Lake Tuggeranong foreshore underneath the Soward Way bypass, where most of the recreational fishing takes place?

MR STEEL: I will take that on notice.

MS CLAY: Minister I wonder if you have heard any similar representations about Lake Ginninderra?

MR STEEL: I do not believe that there is a Soward Way overpass on Lake Ginninderra, so I do not think we would have heard about the same issues.

Health—post-COVID recovery clinic

MR PETTERSSON: My question is to the Minister for Health. Minister, you recently announced the opening of a post-COVID recovery clinic here in the ACT. Can you please update the Assembly on what this means for the Canberra community?

MS STEPHEN-SMITH: I thank Mr Pettersson for the question. The post-COVID recovery clinic is an excellent initiative, providing a person-centred interprofessional health service for Canberrans who are experiencing post-COVID conditions.

As I described in my statement this morning, long COVID can deeply affect a person’s life, from ongoing lung issues to extreme fatigue and a myriad of other symptoms. I recently spoke with a patient who has started attending the post-COVID recovery clinic, and they described not being able to walk up the stairs in their own home and brain fog after having COVID. I am sure many of us have heard about these very real symptoms after someone we know or, indeed, members themselves have had COVID-19.

Madam Speaker, when a person cannot manage their day-to-day activities or participate in the things that they enjoy this can have further knock-on effects to their health and wellbeing. That is why the team at the University of Canberra Hospital started work on a health service that could support Canberrans through this time.

The post-COVID recovery clinic is a nation-leading innovation that is supporting our community. The interprofessional team works through individualised specialist rehabilitation programs for each patient and ensures good links with other specialist

health services to provide a network for patients as they continue their recovery from COVID-19.

The post-COVID recovery clinic team is also undertaking research with the University of Canberra, investigating long-COVID care. This research will contribute to further innovations in our public health system here in the ACT and, indeed, across the nation and potentially around the world now and into the future. This post-COVID recovery clinic is a great example of how we are supporting Canberrans through the pandemic from an individual to a community level.

MR PETTERSSON: Minister, how is this health service ensuring good health outcomes for Canberrans with a long-COVID diagnosis?

MS STEPHEN-SMITH: I thank Mr Pettersson for the supplementary. While most people who contract COVID-19 in our community, of course, will not experience significant post-COVID conditions, we know that quite a few may still be struggling to recover more than 12 weeks after their acute illness. The pioneering post-COVID recovery clinic at the University of Canberra Hospital will be a port of call for those who need additional support during this time.

Currently, the clinic operates every second Tuesday at UCH, with new patients triaged according to the severity of their ongoing symptoms. The clinic is accessed through referrals from primary care and specialists working with individual patients following their acute COVID-19 illness. Patients are provided with, as I said, individualised rehabilitation that will incorporate group and individual therapy.

An example of goals that health professionals and a patient might work through is returning to the same level of physical activity that they were doing prior to having COVID. A COVID-specific therapy group will also run twice a week, with as many as 12 existing patients attending this group therapy at any given time.

The post-COVID recovery clinic team includes a range of health professionals, including medical and allied health professionals, who work collaboratively to support patients to recover. The team is also ensuring good access for patients to other services such as psychology, dietetics and speech pathology, depending on the individual's symptoms and needs.

Madam Speaker, we expect that this service will be vital in helping those experiencing long COVID. Canberrans who had COVID more than 12 weeks ago and who are struggling to return to their activities should speak to their GP, their nurse practitioner or their specialist about options for recovery, including getting a referral to the excellent team at the post-COVID recovery clinic.

MS ORR: Minister, how does the post-COVID recovery clinic and our other ACT government health services reflect the ACT's pandemic response?

MS STEPHEN-SMITH: I thank Ms Orr for the supplementary. The past two years have been an incredibly difficult time for our community. The ACT government has responded to these challenges and continues to respond to the impacts of COVID-19. Our approach has always been to protect the health and wellbeing of Canberrans and

we have continually adapted as we learn more about COVID-19 and experience its impact on the community.

The nation-leading post-COVID recovery clinic is another example of the innovative way the ACT government and its health services have responded. The clinic sits alongside our responses to vaccination, testing, the supported COVID Care@Home program, the Garran COVID-19 clinic and, of course, our hardworking acute services, who have continued to deliver for our community.

The ACT, of course, has led the way with our vaccination program. The COVID Care@Home program has been critical in the reduction of COVID-19-related presentations to the emergency department by managing patients with COVID treatments early and involving GPs to assist with ongoing care.

Our incredible clinicians have also been among the first to deliver new treatments to people who are identified as being at risk of poor outcomes from COVID-19 and, of course, those treatments continue to evolve as well. The nurse-led Garran COVID-19 clinic provides a walk-in service for people who have contracted COVID-19 and who require support for their symptoms or for other non-life-threatening health conditions while they have COVID.

It is an incredibly difficult time for our health system and it has been tremendously hard on our teams throughout the pandemic. I hear from Canberrans all the time how grateful they are to everyone across the health system because every day they come to work and provide innovative approaches to health care for our community.

The post-COVID recovery clinic is a fantastic nation-leading demonstration of this commitment, ensuring that Canberrans have the right supports in place for their recovery from this virus.

Dhulwa Mental Health Unit—safety

MRS KIKKERT: Madam Speaker, my question is to the Minister for Mental Health. Information you provided in response to questions on notice reveal that there were 136 violent incidents at Dhulwa mental health facility in 2019-20; that there were 109 in 2020-21; and that in just seven months, from July last year to the beginning of February, there have already been 79 violent events. Minister, how many more attacks have there been on Dhulwa nurses since February this year?

MS DAVIDSON: There has been significant work over a period of years to try and reduce occupational violence across the whole of Canberra Health Services, and that includes Dhulwa. I mentioned earlier that there were quite specific circumstances that occurred during February that resulted in a particularly high number of incidents, but during March we had five incidents of occupational violence at Dhulwa. As at 28 April for that month we had nine. That is significantly reduced from what occurred during February, and is much closer to the range of one to five incidents that occurred each month from July through to January. I hope that provides some information for you.

MRS KIKKERT: I have a supplementary question. Minister, what extra safety

measures have you put in place to protect Dhulwa nurses from being attacked on the job today?

MS DAVIDSON: I have talked previously about some of the things that have been implemented to improve safety at Dhulwa, and I can provide some more details on notice if you wish. These things that we are putting in place are things that are being done in conversation with WorkSafe ACT and with the ANMF, and we will continue to look at ways that that can be improved. It is very important that any changes that are being made in the workplace are being done with the nurses involved and engaged in that work, and that is what we are endeavouring to do.

MS CASTLEY: Minister, what do you say to Dhulwa nurses who are still afraid to go to work today and tomorrow?

MS DAVIDSON: I am very pleased that we are able to work on this inquiry that will be independently chaired in consultation with the ANMF to make sure that the terms of reference reflect what they are looking for out of that inquiry. As I have said many times, it is really important that decision-making on any inquiry that addresses the concerns the nurses have raised must be done by working together with their union. We can always achieve more by—

Ms Castley: I have a point of order. I was not asking about the inquiry. I asked about what you have done for today and tomorrow while we are waiting for the inquiry?

MADAM SPEAKER: Ms Davidson, to the point of that question.

MS DAVIDSON: Yes, thank you. While I have been briefed by Canberra Health Services on what was happening during February, it was really important to me that I also heard directly from the nurses and understood what they were experiencing in their workplace and what they were asking for in terms of change. So on Wednesday 30 March I welcomed a group of around a dozen nurses together with their ANMF representatives to talk to me about what they were experiencing at work and what they would like me to do about it. I committed to get back to them with some conversations about what kind of process we could put into place. I am very pleased that we were able to have that conversation with the ANMF and with the nurses last week, and I went back out there to their workplace to have that conversation with them in their work site to make sure that what we were planning on doing was headed in the right direction.

While that is all happening, we are continuing to engage with WorkSafe ACT, and to engage the ANMF in those conversations as well, to address the immediate safety issues that they are experiencing.

Dhulwa Mental Health Unit—safety

MS LAWDER: My question is to the Minister for Mental Health. Minister, the nurses union say that the situation at Dhulwa mental health facility has not changed since they first raised safety concerns four years ago, in 2018. The *Canberra Times* has reported that in 2018 several nurses were punched in the face and kicked in the head during multiple assaults by a patient, which ACT Policing investigated. Minister,

when did your directorate or Canberra Health Services first inform you about problems at Dhulwa and what did you do?

MS DAVIDSON: I receive regular briefs on what is happening across a number of our mental health facilities in Canberra, including Dhulwa. We were being briefed about what was occurring during February. You are talking about some events that occurred during 2018. A significant amount of work has occurred over the last few years to reduce occupational violence in Dhulwa, as well as across all our Canberra health services. That has resulted in significant reductions in incidents of occupational violence across our mental health facilities. It is very important that that work continues engaging with the unions and with the nurses as well as with clinical experts—

Mr Hanson: A point of order, Madam Speaker.

MADAM SPEAKER: Point of order. Ms Davidson, resume your seat.

Mr Hanson: The question, which was specific, was: when was she first informed about the problems at Dhulwa? What was the date she was first informed and what action did she take? What did she do at that point?

MADAM SPEAKER: To those points of the question, Ms Davidson.

MS DAVIDSON: I was trying to answer two elements there, one of which was about things that occurred in 2018, which was a little bit before my time here, and at the same time addressing what was happening specifically during February. I am hoping that the answer I provided addresses both of those elements.

MS LAWDER: Minister, when were you first informed by the nurses union about their safety concerns at Dhulwa and what did you do?

MS DAVIDSON: I was very happy to have had some meetings with the ANMF prior to the events that happened in February. When I first came into this position they began to engage with me, and I very much appreciated that. I was informed by the union of their concerns during February and March. We had a number of conversations about what their nurses were experiencing and what kind of process we would need to go through to address that.

Mr Hanson: On a point of order, Madam Speaker. The question asked what she did. She said she had conversations. She was informed of the problems. The question goes to what did she do? Did she do anything? Yes or no?

MADAM SPEAKER: I can't direct the minister to answer. She still has over a minute left. Ms Davidson, you have the floor. Continue.

MS DAVIDSON: As I was saying earlier, on Wednesday, 30 March I welcomed a group of around a dozen nurses, along with their ANMF representatives, to talk me through their experiences at work. As I have said before, as a community sector worker and as friend I have listened to the experiences of nurses and midwives about workplace safety and culture for many years. But every time that I listen to a nurse

talking about what a hard day at work is really like—it is really hard—and it does hit home that we ask a lot of our healthcare workers—

Mr Hanson: But what did you do? You're not there to be their friend, Minister.

MS DAVIDSON: I am talking about things that I had done before I came here, just to let you know that this is not completely new to me. I committed to follow through on that discussion early the next week with a conversation about what kind of review process we could undertake and made a call to the ANMF on Tuesday, 5 April—

Opposition members interjecting—

MS DAVIDSON: You asked me what I have done. I am telling you what I have done.

MADAM SPEAKER: Don't respond to the interjections, Ms Davidson. That would be my advice.

MS DAVIDSON: Okay. We followed up with a phone call to continue that conversation, then an email request for a further meeting to discuss what kind of inquiry would meet the needs of the nurses and how it should function.

MS CASTLEY: Minister, why hasn't there been an independent inquiry into Dhulwa since it opened, almost five years ago?

MS DAVIDSON: There are actually a number of reviews already underway, including an external review of incidents during February 2022 that is being undertaken by members of New South Wales Forensic Mental Health; a review by the Human Rights Commission that was initiated in February 2021, to which Canberra Health Services have provided information; and a review of the Mental Health (Secure Facilities) Act 2016, which commenced in February 2020, by a consultant engaged by the ACT Health Directorate; as well as WorkSafe ACT's current work that began in April 2022. I am very pleased that the inquiry into Dhulwa that we have announced will review its legislative, clinical and governance frameworks to ensure that the facility is operating under best practice, in a safe environment for all workers and patients, and will be able to draw together what is happening in all of those other pieces of work.

Education—languages action plan

MR BRADDOCK: My question is to the minister for education. Minister, in December 2021 the government released a report into the implementation and outcomes of the *ACT Multicultural Framework 2015-2020 Second Action Plan*. This report stated that “the Education Directorate has developed a draft languages action plan for consultation”. Can you please provide an update about the plan and the time line for the consultation process?

MS BERRY: Yes, there is a draft ACT languages action plan and a position paper, which has been developed as a result of the motion in the Assembly last year. The ACT languages action plan is designed to address those systemic issues that have

been impacting on a school's capacity to deliver languages. Once we have cleared the final draft of that plan, we will begin consultations within the community to finalise that plan.

MR BRADDOCK: Is there a time line for that consultation process?

MS BERRY: Not at this point in time.

MR DAVIS: Minister, can you detail how native language speakers in the Canberra community have been consulted on the development of language education in schools?

MS BERRY: I will have to take the detail of that question on notice. Some of that work might have been done with Tara Cheyne in her role as Minister for Multicultural Affairs. I will take that question on notice and provide some more detail to the member.

Dhulwa Mental Health Unit—safety

MR MILLIGAN: My question is to the Minister for Mental Health. The Canberra Liberals have been told that Dhulwa nurses fear for their safety and that five Dhulwa nurses were on workcover due to being physically assaulted. Minister, how many Dhulwa nurses are currently on workcover leave and for what reasons?

MS DAVIDSON: Thank you for the question. I will take that on notice.

MR MILLIGAN: Minister, how do you respond to the fact that so many of our mental health nurses are on workcover leave due to being physically assaulted on the job?

MS DAVIDSON: This is why it is so important that we are working with their union on the terms of reference for the inquiry and selecting the right independent chair to make sure that the long-term future of Dhulwa sees our Canberra community and our nurses at Dhulwa able to have the best clinical care and a safe workplace. I will be keeping everyone updated as the work progresses.

Our work, in collaboration with the ANMF, to improve workplace safety will not end with the commencement of the inquiry. I have heard what the nurses have been saying about needing their skills and experience to be valued and for staff to be engaged in decision-making about how to operationalise any recommendations for change in their workplace.

For that reason, a task force to oversee the implementation of the recommendations will be stood up by Canberra Health Services and I would very much welcome the ANMF's participation in that task force as a key voice for the staff.

MS CASTLEY: Minister, how do the number of Dhulwa nurses on workcover compare to the figures for those nurses at the adult mental health unit in the Canberra Hospital?

MS DAVIDSON: I will take that question on notice.

Motor vehicles—licences and registration

MS ORR: My question is directed to the Minister for Business and Better Regulation. Minister, what is the ACT government doing to help Canberrans remember important payments and avoid fines for driving without a valid licence or in an unregistered vehicle?

MS CHEYNE: I thank Ms Orr for the question. Remembering important payments can be difficult for all of us at times, and I am pleased to be able to say that following a successful trial in September 2021, Access Canberra has extended its SMS reminder service. The trial sent payment reminders for driver licence renewals, and the expanded service will now also send SMS reminders for motor vehicle registration renewals as well as traffic and parking infringements.

Expanding the service is another example of how Access Canberra is continually improving its services for the Canberra community. These SMS reminders will reduce the risk of Canberrans being fined for driving without a valid licence or in an unregistered vehicle, or facing a late fee for late payment of an infringement notice. SMS reminders will be sent automatically to a driver's nominated mobile number two days prior to the expiry of a licence or registration, and two days prior to the due date of an infringement. Canberrans can confirm or update their mobile numbers at ACT.gov.au/updateyourrego to ensure they receive these important reminders.

MS ORR: I have a supplementary question. Minister, what impact did the September 2021 trial of SMS reminders have?

MS CHEYNE: I thank Ms Orr for the question. We all lead busy lives, and the September 2021 trial of the SMS reminders for driver licence renewals demonstrated the utility of this service for Canberrans. During the trial the number of licence holders that renewed on the date of expiry increased by almost 25 per cent compared with the same time in 2018 and 2019. Renewals on the date of expiry increased by more than 50 per cent compared with the same month in 2020, although that month's renewal numbers were likely down as a result of COVID-19. Approximately 50 per cent of the 341,487 ACT driver licence holders have provided their mobile number to Access Canberra but, as I mentioned in my earlier response, Canberrans can confirm or update their mobile number at ACT.gov.au/updateyourrego to ensure that they are able to receive these important SMS reminders.

DR PATERSON: Minister, what other innovative digital technology is Access Canberra using to improve its service delivery and customer service experience.

MS CHEYNE: I thank Dr Paterson for the question. Access Canberra is committed to continual improvement of services for the Canberra community and has recently implemented a range of new and innovative digital services which further enhance the customer service experience. Access Canberra has worked hard in recent years to make more than 400 transactions available online, but there are still a number of transactions—a small number—which require attendance in person at a service centre—for example, where a photo is required.

To assist customers in planning their visit to a service centre the Access Canberra website now shows live wait times for its service centres available via the home page. Customers are also no longer required to wait in line at the service centre. Upon arrival, customers will be greeted by one of our friendly and knowledgeable concierge team, who will assist them to join the virtual queue, meaning they can support a nearby local business by grabbing a coffee or doing some shopping while they wait. Customers receive a text message when their turn is approaching, inviting them to return to the service centre.

I would also like to take this opportunity to give a shout-out to the team at Access Canberra who have worked hard behind the scenes during lockdown to implement the e-conveyancing for the ACT, allowing most property transactions to occur remotely. Since the implementation last year, the ACT has seen the highest take-up of e-conveyancing of any jurisdiction.

Dhulwa Mental Health Unit—safety

MR CAIN: My question is to the Minister for Industrial Relations and Workplace Safety. Minister, as you are aware, WorkSafe ACT has issued an improvement and prohibition notice at Dhulwa mental health facility. This morning, on radio, nurses union secretary Matthew Daniel said that work health and safety representatives had not been engaged about these notices. Mr Daniel called for Canberra Health Services to sit down with Dhulwa work health and safety reps today to work on solutions. He also said that an external work health and safety expert should be called to Dhulwa to advise on immediate problems. Minister, why haven't Dhulwa work health and safety reps been engaged, and will you order that this happen today?

MR GENTLEMAN: I thank Mr Cain for the question. It would not be appropriate for me to comment on matters that are being considered by the independent authority at the moment, but I will certainly have a think about how I could provide more information to Mr Cain.

MR CAIN: Minister, will you order that an external health and safety expert be called to Dhulwa to advise on immediate problems?

MR GENTLEMAN: No. It is a matter where, as the independent authority is investigating, I will look to their response to that investigation.

MS CASTLEY: Minister, have you spoken or met with anyone at Dhulwa—work health and safety reps—and what have they told you about the situation?

MR GENTLEMAN: No.

Dhulwa Mental Health Unit—safety

MR PARTON: My question is to the Minister for Mental Health. In question time on 6 April, speaking about the nursing union's call for an urgent inquiry into the Dhulwa mental health facility, you said you were "listening" to their concerns and added:

He has got my number: call me maybe.

Minister, was the “he” you referred to the union’s ACT branch secretary, Matthew Daniel, and how do you explain such a flippant remark referencing a Carly Rae Jepsen pop song?

MS DAVIDSON: I thank you for noting my excellent taste in music. I am very pleased that I was able to have the conversation with the ANMF last week, and that we were able to go out to the Dhulwa worksite and meet with the nurses together to confirm that what we were talking about doing was heading in the direction that they wanted to go.

As I have said many times, it is very important that, if we are going to be working through this situation and setting up an inquiry that is independently chaired, that is done with the union and with the nurses involved, and I am very appreciative of this ongoing engagement—

Ms Castley: A point of order, Madam Speaker.

MADAM SPEAKER: Ms Davidson, resume your seat. There is a point of order.

Ms Castley: My point of order is that it is not about what she is doing with regard to the inquiry; it is about how she explains such a flippant remark about Mr Daniel. It is as simple as that.

MADAM SPEAKER: I think there is a point of order. I cannot direct you as to how you answer, but I believe you need to go to that.

MS DAVIDSON: Thank you. I believe I have covered some of the chronology of the phone and email conversations and meetings in my previous answers. Thank you for the question.

MR PARTON: Have you apologised, Minister, to Mr Daniel and Dhulwa nurses for your dismissive remark? If not, why not?

MS DAVIDSON: I have been very busy having conversations with the ANMF about the terms of reference for the inquiry and who would be an appropriate independent chair for that inquiry, and that is where the process needs to be.

Mr Hanson: A point of order, Madam Speaker.

MADAM SPEAKER: A point of order. Ms Davidson, resume your seat.

Mr Hanson: The question was very specific—whether she has apologised for what was clearly a dismissive and flippant remark. Has she apologised? Yes or no?

MADAM SPEAKER: Mr Hanson, you know that there is no point of order. I am not going to direct the minister to give a yes or no answer. Ms Davidson, you have the floor.

MS DAVIDSON: It is very important that the conversations that I am having with the ANMF—

Opposition members interjecting—

MADAM SPEAKER: Members, there is no need for snide interjections.

MS DAVIDSON: continue in the constructive manner in which we have been conducting them, in order to address the concerns of the nurses at Dhulwa. I thank the staff at Dhulwa for sharing their experiences with me, in all their honesty and rawness. I also thank the ANMF for being willing to engage with us on how we can make real and lasting change, as well as addressing the immediate concerns.

Ms Castley: A point of order, Madam Speaker.

MADAM SPEAKER: Ms Davidson, resume your seat.

Ms Castley: The question is not about the ongoing conversation; it is referencing a previous comment that the minister made in question time. Our question is: has she apologised? If not, why not? That is all it is.

MADAM SPEAKER: There is no point of order because your colleague has also raised it, and was seeking a yes or no answer. You have the floor for the remaining 30 seconds, Ms Davidson.

MS DAVIDSON: I think I have addressed the chronology of the conversations that I have had and the detail of the topics of those conversations in my previous answers.

MS CASTLEY: Minister, why did you make light of such a serious safety issue where nurses have been assaulted and made afraid of going to work?

MS DAVIDSON: As I have addressed in my previous answers, the number of conversations that have been had with the ANMF and with the nurses at Dhulwa and the frequency with which we have engaged demonstrate that we are working through a very difficult situation in a collaborative and constructive manner.

Environment—Healthy Waterways project

MS CLAY: My question is to the minister for water. Minister, I was really pleased to see your recent announcement of \$14 million of funding for the Healthy Waterways program, which includes construction of new wetlands and other structures in Belconnen. How many healthy Waterway projects will we see in Belconnen from this funding and where will they be?

MR RATTENBURY: This is a really important injection of money to continue the Healthy Waterways programs to make our lakes cleaner and particularly to seek to tackle blue-green algae. There are 13 sites across the ACT that are proposed to be worked on under this program and two of those are in the Belconnen area.

The first stage of some of these projects will be community consultation. The research

that has been done by the government and by the staff who are experts in these areas has identified the locations. Clearly, some of these are quite substantial projects and we want to make sure that there is community support for them as well. The consultation will determine whether the project goes ahead as planned or whether the proposal is adjusted to address any of the issues that are raised by the community during those discussions.

The two sites in Belconnen are an area of Kippax Creek in Holt, where a solar pump is planned to be installed and a bioretention swale, and a proposed subsurface wetland at Belconnen oval. The proposed wetland at Belconnen oval is subject to community acceptance, to be tested by community consultation that will actively seek out what people's views are on the project and whether the design that is currently proposed by the government is one that they think is right or whether there is scope for further adjustment.

One of the fortunate things for Belconnen is that Lake Ginninderra is the least affected by blue-green algal blooms. That is why the bulk of these projects have been developed in the Tuggeranong catchment for Lake Tuggeranong, but we are keen to make sure that we continue to also look out for the health of Lake Ginninderra. That is why these infrastructure projects are going ahead in that area.

MS CLAY: Minister, will any of this funding go to stormwater drains or other infrastructure to stop leaves from washing into Lake Ginninderra?

MR RATTENBURY: The issue of leaves flowing into the lakes is very important. The research work that has been done, particularly on Lake Tuggeranong, has identified that leaves flowing into the lakes are a significant source of the nutrients that are then available for recruitment by the algae. Gross pollutant traps and grates or drains can be an effective way to stop larger items from flowing into the lakes. However, they do require ongoing maintenance to remove leaf litter and the rubbish that accumulates in them. While they are a useful tool, we also need to look at how we can prevent leaf litter from getting to that point in the first place.

As members may be aware, the government runs the H2OK campaign to raise awareness about water quality and encourage residents to avoid polluting waterways or contaminating the stormwater. We also have a project being tested at the moment, a pilot program called the "leaf collective", which is testing approaches to encouraging community involvement in collecting leaf litter from gutters before it can wash into the lakes.

As I touched on earlier, the research for Lake Tuggeranong has particularly identified that even eucalypt leaves sitting in the gutters can release nutrients that flow right through the system and into the lake. What we are trying to do is look further upstream. Whilst gross pollutant traps are part of our response, overall there are opportunities to intercept some of the nutrients before they even get down anywhere near the lakes or some of those urban ponds.

MR DAVIS: Minister, of the \$14 million announced, what specific investments are being made in Lake Tuggeranong?

MR RATTENBURY: As I indicated earlier, the bulk of the investment is actually in the Lake Tuggeranong catchment. Significant research work has been undertaken through a fantastic partnership with the University of Canberra, who have really looked at Lake Tuggeranong in far greater detail than has ever been done before. It has given us really improved insights and understanding into the dynamics in the lakes. The history of them, of course, is that they were set up as pollutant traps. That was how they were designed in the early days. With changing community expectations, that has proven to be a problem. We are seeking to make them more amenable.

There are a number of programs across the Tuggeranong catchment. They are particularly looking at getting upstream, higher into the catchment, so things such as bioretention swales and the naturalisation of creek lines. But they are also looking at some of the ovals in Tuggeranong where it has been identified that excess fertiliser can flow off those community sporting ovals into the drains and also provide those nutrients into lakes.

There are a number of projects across Lake Tuggeranong and the Tuggeranong catchment. Similar to my earlier remarks about the Belconnen area, as those projects get developed, there will be a range of community consultations so that we are working with the local community. There is a fantastic community contribution in Tuggeranong. We want to make sure that those partnerships are strong and the community understand why the projects have been put where they are, why they are being designed that way and whether they have any comments on the design before we proceed to construction.

Suburban Land Agency—Coombs and Wright

DR PATERSON: My question is for the Minister for Housing and Suburban Development. Minister, can you please provide an update on the Suburban Land Agency's work to improve public spaces in Coombs and Wright?

MS BERRY: I thank Dr Paterson for her question and for her continued engagement as a local member in her community for improvements in this space. The government has been working hard to ensure that all of the land sales that it makes deliver great results for the community. The Coombs and Wright project is a key result of that work, and I am pleased to say that the Suburban Land Agency is working to secure building partners who will be able to deliver on these high expectations.

Delivering the Coombs and Wright village will see a range of improvements, including: the realignment of Steve Irwin and Fred Daly avenues; additional tree planting; a pedestrian zone on Beecroft Street; upgrades to the Coombs park adjacent to the Coombs and Wright village to include toilets and a pavilion; and the construction of a community centre to be transferred to ACT Property Group.

While that work is underway and will be delivered in the next year, there are more immediate benefits from the Suburban Land Agency's work in Coombs. Works are continuing around the Coombs play space, with an official opening planned for Spring 2022. The play space is designed as an all aged adventure and nature area. It will include slides, towers, an all-abilities swing, barbecue tables and shade sails. On site

currently, the earthworks and shaping of the site have been completed, with the installation of some of the playground equipment. I am pleased to hear that parents and families are in great anticipation of the finalisation of this work and are already planning for their visit.

DR PATERSON: Minister, how were the views of Coombs and Wright residents reflected in the SLA's work?

MS BERRY: This has been a really important part of this work. Both of these improvement projects have been the result of extensive consultation with Coombs and Wright residents. In 2021, the Suburban Land Agency spoke to residents to shape its release method for the mixed use and community zoned blocks in the area. A community panel was established and many options were put forward. YourSay as well as the Molonglo Valley forum were engaged to assist the community with providing its views.

Following all of that work to learn about the residents' views, the Suburban Land Agency set up a two-stage tender process for the relevant blocks. The first stage of that process was to identify builders who would be suitable to deliver on the community's need. This stage is complete. The SLA is currently working through competitive tenders for those sites and expects to finalise the process later this year.

The Coombs play space was also the result of thorough consultation through YourSay. Designs were put to the community and changes were incorporated to reflect the feedback. When the Coombs play space opens this year, it will offer the amenities that residents have told us that they want to see in their neighbourhood.

MR PETTERSSON: Minister, how is the SLA's approach to Coombs and Wright being used in other neighbourhoods across Canberra?

MS BERRY: As the minister responsible for the ACT Government's Suburban Land Agency, I have been really proud to lead this work and improved consultation and communication with all of our neighbourhood projects, including those at Coombs and Wright. I want to acknowledge the team at the Suburban Land Agency for their continued commitment to good consultation and communication to build spaces where people want to live. Just two examples of community led design in other parts of the city are the Belconnen town centre project as well as ongoing consultation on the Gungahlin town centre.

In the Belconnen town centre, a place design brief shaped the tender process for releasing multiple sites. When that package is released through tender, Belconnen residents can be confident that it will deliver on their expectations.

The creation of a place design concept for the Gungahlin town centre is currently underway. A standing community panel has been established and will inform both Planning and SLA work to deliver land releases that meet the needs of the Gungahlin residents. This detailed design and consultation work gives the government an opportunity to showcase everything that we can deliver through our land development program.

When it comes to land, it is not all about profit. It is about building stronger communities—building suburbs where people want to live. We will keep working with all the tools that we have available to deliver fantastic neighbourhoods that meet Canberrans’ needs and give them the amenity and the life experiences that they need.

Mr Barr: Further questions can be placed on the notice paper. Thank you.