LEGISLATIVE COUNCIL

Wednesday 28 March 1984

The PRESIDENT (Hon. A.M. Whyte) took the Chair at 2.15 p.m. and read prayers.

PETITION: VOLUNTARY ORGANISATIONS

A petition signed by 25 residents of South Australia praying that the Council urge that a Royal Commission be set up to investigate the accountability of voluntary organisations for money raised on their behalf was presented by the Hon. R.I. Lucas.

Petition received and read.

PETITION: EMPLOYMENT OF PERSONS IN SHELTERED WORKSHOPS

A petition signed by 25 residents of South Australia praying that the Council urge that a Royal Commission be set up to investigate the exploitation of employees in sheltered workshops was presented by the Hon. R.I. Lucas.

Petition received and read.

PUBLIC WORKS COMMITTEE REPORT

The PRESIDENT laid on the table the following interim report by the Parliamentary Standing Committee on Public Works:

Adelaide College of Technical and Further Education (Stage 1V).

QUESTIONS

DOCTORS' FEES

The Hon. M.B. CAMERON: I seek leave to make a brief statement before asking the Attorney-General a question about price control.

Leave granted.

The Hon. M.B. CAMERON: Recently, Cabinet clearly decided to institute price control on fees for doctors. I imagine that prior to such a decision being made evidence would have been presented to Cabinet and the Government showing that there were difficulties in this area. My questions are as follows:

1. How many complaints have been lodged with the Prices Division concerning excessive fees charged by doctors?

2. How many investigations have been instituted by officers of the Prices Division as a result of these complaints?

3. What were the results of such investigations?

4. Did Cabinet take into account this information and any complaints about excessive fees being charged by doctors in making this decision to impose price control on doctors' fees?

The Hon. C.J. SUMNER: The honourable member misses the point. Often there are complaints about excessive fees charged by professionals of all kinds, including lawyers and doctors. The fact is that the price control order was imposed for a reason: to enable participants in Medicare to receive benefits under the Medicare scheme and not to be left with the possibility of having to pay accounts to doctors which were not covered by Medicare. That was the reason for the introduction of price control. The honourable member knows that, because it has been explained fully on many occasions by the Minister of Health.

The Hon. J.C. BURDETT: My question is directed to the Minister of Health. What paragraph or subparagraph of section 17 of the Commonwealth Health Insurance Act as amended requires doctors to sign agreements indicating a willingness to charge fees for diagnostic services at or below the scheduled fee?

The Hon. J.R. CORNWALL: The bush lawyer has had a bit of help. He should know—

The Hon. J.C. Burdett: What about the bush vet?

The Hon. J.R. CORNWALL: He should know—the political pigmy who sits opposite and pretends to be the shadow Minister of Health—because he pretends to be learned in the law that the requirement for signed agreements was contained in the guidelines promulgated by the Federal Minister for Health. The honourable member should also know, if he was a little more diligent and stayed abreast of contemporary events, that that specifically was the reason why selective price control was imposed on diagnostic specialists in hospitals in South Australia.

He would further know if he followed the events of recent days that after a meeting with my colleagues, Ron Mulock (the New South Wales Minister of Health) and Tom Roper (the Victorian Minister of Health)—

The Hon. J.C. BURDETT: A point of order, Mr President. The question was simply: what paragraph or subparagraph of section 17 was involved? I ask the Minister whether he would confine his comments to answering the question.

The PRESIDENT: Order! The honourable Minister of Health.

The Hon. J.R. CORNWALL: Thank you, Mr President. There is no point of order at all as you quite rightly did not observe but by your actions you made it clear. The honourable member would also know, as I was saying when I was rudely and inappropriately interrupted by the pretender opposite, that at a meeting held on Monday night between Ron Mulock, Tom Roper and me—

The Hon. J.C. BURDETT: A point of order, Mr President. This has got absolutely nothing to do with the question that I asked. I did not make an explanation; if I had, I would have expected some sort of carry on about it, but I did not. My question was: what paragraph or subparagraph of section 17 of the Commonwealth Health Insurance Act as amended requires doctors to sign agreements indicating a willingness to charge fees for diagnostic services at or below the scheduled fee? Any question of what was said at any meeting has nothing to do with this. The Minister is confined on this occasion, because I have made no explanation, to answering the question.

The PRESIDENT: The Minister may answer the question in any way that he chooses and I have no jurisdiction over that, but just as a matter of common courtesy I hope that the Minister on this occasion will now give the answer without reverting to matters that do not belong to the answer.

The Hon. J.R. CORNWALL: Is that a reflection on me from the Chair, Mr President? You did use the expression, 'as a matter of common courtesy'. I was unaware that I was not being courteous, gentle, calm and cool.

The PRESIDENT: I did not intend it as a reflection; I intended it to facilitate the proceedings of the Council.

The Hon. J.R. CORNWALL: Thank you. This is a matter of grave importance; it is far too important for the political pigmy opposite to be playing games. I am trying seriously to give a comprehensive and sensible answer to what the Hon. Mr Burdett obviously thinks is a political trick question. He is being half smart.

An honourable member: Why don't you give the answer?

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: The simple answer is that the requirement is not in the legislation as it currently exists; that is, as it was amended last September and passed by both Houses of the national Parliament. It is not in section 17; it is in the guidelines as promulgated—

The Hon. J.C. Burdett: Then he can change them.

The Hon. J.R. CORNWALL: Shut up for a minute and let me finish a serious answer to a half smart political circus-type question. It is a very important thing and I will stand here as long as I have to to make sure that other members understand it. The Hon. Mr Burdett clearly does not, and I am trying to slowly get it through his head. I am sure that other people—certainly members on this side and people in the press gallery—will be able to understand if I am given the opportunity to explain it. The simple answer is that it is not contained in section 17, but in the guidelines which were promulgated by the Minister and which have been the source of ongoing controversy and debate. The position as far as South Australia is concerned is that when doctors refused to sign contracts and when the matter became one of public controversy we withdrew all the new contracts in South Australia on 24 February—more than four weeks ago.

The Hon. R.I. Lucas: Rubbish!

The Hon. J.R. CORNWALL: The Hon. Mr Lucas interjects and says 'Rubbish'. The fact is that the South Australian Health Commission officially withdrew all the new contracts on 24 February.

An honourable member: They didn't tell—

The Hon. J.R. CORNWALL: The question of whether a diligent chief executive officer of a hospital was still chasing them some days later is another matter.

Members interjecting:

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: The other question of the lack of the ability of the AMA to communicate with its individual members also comes into that matter. I suggest that the AMA in this State, as well as in other States, would be better off communicating with its members rather than attempting to conduct dubious campaigns in which the AMA officials see themselves as media performers. The simple answer is that it is not in section 17; it is in the guidelines that were promulgated by the Minister. Following further submissions, those guidelines are being withdrawn.

The section is being amended, along the lines of the proposal put forward by Senator Janine Haines of the Australian Democrats. We tried yet again to put together a package on Monday night; it was subsequently ratified by the Federal Cabinet, to ensure that there is no disruption to patient services in our hospitals. Just as we are trying to put that fragile package together, the shadow Minister of Health in this State has behaved, I submit, quite disgracefully in conspiring with a small (and I stress that it is small) faction of the South Australian Branch of the AMA to try and deliberately provoke industrial action. The Hon. Mr Burdett should be ashamed of himself, and his colleagues should be ashamed to sit opposite with him.

JUSTICE INFORMATION SYSTEM

The Hon K.T. GRIFFIN: I seek leave to make a brief explanation before asking the Attorney-General a question about the Justice Information System.

Leave granted.

The Hon. K.T. GRIFFIN: The Liberal Government made a decision to implement a Justice Information System in respect of offenders from the point of apprehension by police to release from prison or on satisfaction of any other penalty imposed by a court; that is, the system would track a person arrested by the police through the courts system to Correctional Services, including imprisonment and parole. It would eliminate a number of repetitious actions in the compiling and keeping of records, would improve departmental efficiency in dealing with offenders, and ensure that records are accurate. It would, of course, provide modern record-keeping facilities for the Department of Correctional Services, a need which was referred to yesterday by the Minister of Correctional Services.

The decision by the Liberal Government included provision for the development of adequate data protection mechanisms to ensure that access to information could only be obtained by persons on a 'need to know' basis. The proposal also would be flexible enough to allow the participating departments to add to their segment of the system's capacity to deal with matters peculiar to those departments, for example, the scheduling of cases by the courts or the scheduling of lawyers in the Crown Solicitor's Office.

At the time, some concern was expressed by the Chief Justice about the courts being part of the system. Concern was also expressed at that time that the programme for implementation kept up momentum; otherwise, the pressing requirements of departments might result in their acquiring their own computing requirements independently of the integrated Justice Information System.

I was pleased, of course, that when the Labor Government came to office it continued the initiative. However, suggestions have been made to me that the momentum is in danger of being lost, that the Data Processing Board is not responding quickly to matters raised with it and is, in fact, creating obstacles to the implementation of the scheme. There is a fear that, notwithstanding the earlier commitment of the present Government, the system is in danger of being overtaken by the pressing needs of the participating departments which may have no option but to go their own way.

Perhaps that is what has happened to some extent with the recently announced intention of the Police Department to spend about $500 000 in meeting its computer needs this year. In light of this, my questions to the Attorney-General are as follows:

1. What is the current position with the implementation of the Justice Information System?
2. What programme has the Government adopted for implementation of the system?
3. Are all Departments previously involved continuing to participate in the proposed system?
4. Has the Data Processing Board placed obstacles in the way of implementation?
5. Are there any problems in implementing the system?
6. Is the recently announced purchase by the Police Department of computing requirements part of its contribution to the Justice Information System or additional to that system?

The Hon. C.J. SUMNER: It is a somewhat enthusiastic interpretation of events by the Hon. Mr Griffin to say that the previous Government had decided to introduce a Justice Information System. I do not believe that that is so.

The Hon. K.T. Griffin: It is on the record.

The Hon. C.J. SUMNER: The previous Government decided to carry out feasibility studies.

The Hon. K.T. Griffin: That's correct.

The Hon. C.J. SUMNER: I can only say that not one cent was allocated for the establishment of a Justice Information System by the previous Government. Certain money was allocated to prove up a system to see whether or not it could be introduced in South Australia. The previous Government may well have made an in-principle decision for a Justice Information System, but that is a far cry from actually allocating money. A substantial amount—several millions of dollars, the estimates vary—is required over a

period of time, and I believe it will cost more than $10 million to establish such a system. So, although certain things had been set in train to establish a Justice Information System, no money had been allocated for its establishment. When the Labor Government came to office in November 1982 what was already in place at that time was continued.

The Hon. K.T. Griffin: I am not disputing that.

The Hon. C.J. SUMNER: I appreciate that. It has been continued. However, a number of issues must be resolved before the sort of commitment that any Government would have to make to this scheme can be entered into, particularly because of the substantial cost involved in establishing it. Proposals put up by the Management Group about the Justice Information System has been the subject of discussions with the Data Processing Board. That Board has the responsibility for overseeing the introduction of computers in Government departments, and it raised a number of queries about the system: namely, whether or not it was economically feasible, whether it was adequate for the purposes, and a number of other issues. Indeed, the question of privacy is one of the important issues that has to be resolved by the Government if it decides to proceed with this comprehensive system.

The situation is that the last round of discussions between the Data Processing Board and the Management Group has been concluded, and I expect certain propositions to be presented soon to the Government. I do not believe that there has been any falling off in momentum but, obviously, the final decision to commit that sort of money has not yet been made. It is that sort of commitment that will be presented to the Government for a decision in the reasonably near future.

All departments that were previously involved are still involved. I do not believe that the Data Processing Board has put any undue obstacles in the way of the development of the Justice Information System. There have been discussions, queries have been raised (there is no question of that), and some people were not happy with certain aspects of the proposal. However, I believe that that body was doing its duty. As I said, the management group and the Data Processing Board have had discussions about this matter, and I expect that a proposition to determine the future of the Justice Information System will be put before the Government again in the reasonably near future. I do not believe that the computing requirements that were announced by the police relate in any way to the Justice Information System: they relate to the obtaining of criminal intelligence information in particular from the Federal authorities.

CORPORAL PUNISHMENT

The Hon. ANNE LEVY: I seek leave to make a brief explanation before asking the Minister of Agriculture, representing the Minister of Education, a question about corporal punishment.

Leave granted.

The Hon. ANNE LEVY: Yesterday, the Minister, in replying to an earlier question of mine, pointed out (if members were unaware) that a new policy on corporal punishment was printed in the *Gazette* of last September: parents or guardians may request in writing that their child not be subject to corporal punishment in any Government school, and that that request is to be adhered to by the school. Can the Minister say, since this announcement was gazetted, how many schools in this State have informed parents of either new or continuing students that they can request in writing exemption from corporal punishment? Secondly, will the Minister request all Government schools in this State to inform parents that this option exists? Thirdly, how many parents have opted their child out of corporal punishment by writing a letter as indicated, both in schools where parents have been given this information and in schools where parents have not been given the information? Finally, have any difficulties been encountered in regard to discipline in schools in which parents may have taken up the option to opt their child out of corporal punishment?

The Hon. FRANK BLEVINS: I will refer that question to my colleague and bring back a reply.

ETHNIC COMMUNITIES

The Hon. C.M. HILL: As the Labor Party prior to the last election included in its ethnic affairs policy the promise—

The Hon. Frank Blevins: Did you seek leave?

The PRESIDENT: Order! Is the honourable member seeking leave to explain his question?

The Hon. C.M. HILL: No, Mr President, I am asking a question of the Minister of Ethnic Affairs. As the Labor Party, as part of its ethnic affairs policy prior to the last election, stated that it would encourage the formation by ethnic communities of a central organisation that was independent of the Government and representative of all ethnic communities to ensure that ethnic communities have the right to participation and to full and continuing consultation and information in the implementation of ethnic affairs policies, what has the Minister of Ethnic Affairs done to honour that promise so far?

The Hon. C.J. SUMNER: Whether or not such an umbrella organisation is formed by ethnic communities is a matter for the ethnic communities. What the Government undertook to do, and that undertaking stands, is that if such an umbrella organisation was formed then assistance could be given to it by the Government just as it is given to other ethnic organisations.

The Hon. C.M. Hill: You had better look at the wording—

The Hon. C.J. SUMNER: That is all right.

The Hon. C.M. Hill: This is taken from the Government's policy.

The Hon. C.J. SUMNER: I am not arguing with that.

The Hon. C.M. Hill: Yes you are. This said that you would encourage the formation—

The Hon. C.J. SUMNER: We will. I said that, if such an organisation was formed, then funding would be available for administrative expenses. I have discussed this matter several times with the Chairman of the Ethnic Affairs Commission. I know that there have been discussions between the two organisations that purport to represent ethnic minority groups in South Australia: the Ethnic Communities Council and the United Ethnic Communities. I understand that those discussions have not come to fulfilment yet and, indeed, they may not. The Government is not about forcing groups to come together in an umbrella organisation. We would encourage such a formation. I intend to have discussions with representatives at an appropriate time but, up to the present, the Chairman of the Ethnic Affairs Commission, I understand, has had discussions with the respective groups. I know that there have been negotiations between those two groups although, of course, there are still other groups apart from those that are not included in either of those so-called umbrella organisations that would have to be consulted.

To date I do not believe that agreement has been reached, and it may be that it cannot be reached. If that is the case then the Government will continue to do what it does at present, which is to receive applications from ethnic organisations and associations, consider those applications on their merits, and make grants, as have been made in the past. So, the Government would encourage the formation

of such an organisation in the manner I have described. Those discussions, which have already occurred, have not yet come to fruition. There are differences in points of view between the organisations, but that is a matter that will be pursued to see whether anything can be done: if it cannot be done, then that is a matter for the ethnic communities themselves. There is no suggestion that the Government will impose a so-called independent lobby group on them. That was not what was intended. What was intended was encouragement and assistance if the groups themselves wished to come together in such an umbrella organisation.

MENTAL HEALTH SERVICES

The Hon. R.J. RITSON: I seek leave to make a brief explanation before asking the Minister of Health a question concerning community-based mental health services.

Leave granted.

The Hon. R.J. RITSON: In last Saturday's *Advertiser* an article appeared describing the problems faced by patients discharged back into the community from psychiatric hospitals. I am sure that the Minister is aware that, because of the progressive deinstitutionalisation of psychiatric patients and also because of the reluctance of hospitals to accept mildly disturbed non-remedial patients, there are many people attempting to cope with life in the community in a lonely and isolated environment. Many of those people do not cope very well. Some abandon medication or follow-up outpatient treatment, a number of them come to the notice of police, and a number cause distress and anxiety to friends and relatives. There is a strong body of opinion amongst social workers that community based psycho-social support, including supervision in non-hospital residences, is of great value in the management of patients who would otherwise be either unsupervised in the community or back in hospital.

The value of community-based mental health facilities was stated in the Smith Report. However, the problem is that, while funding for psychiatric hospitals has been, more or less, adequate, I am informed that there has not been adequate funding for community-based mental health in all its aspects. What does the Minister intend to do for the many psychiatric patients who would benefit from both residential and other forms of psycho-social support? Can the Minister state the general trend of funding levels of community mental health as compared to the trend of funding of psychiatric hospitals? Does the Health Commission, the Minister, the Government or the ALP have a policy on this subject and, if so, will the Minister state that policy?

The Hon. J.R. CORNWALL: I am pleased that the Hon. Dr Ritson brought up this matter, although I am surprised to some extent at the manner in which he did it. The article appearing in the *Advertiser* on the third page of the *Saturday Review* last week was wrong in almost every substantial detail. It was presented to my office by the author for comment before publication, and the Director of Mental Health Services, Dr Brian Shea, and other senior people were involved for quite a lengthy period explaining to the author of the article why it was wrong in, I think, at least 30 different ways. I spent about three-quarters of an hour with the author. Notwithstanding that, the article was run virtually unchanged.

The distressing thing about the article was that it used two composite patients. The first patient was a young schizophrenic, presented as having that difficulty because of a breakdown in his family and home situation. That was quite a disastrous misrepresentation. The fact is, as the Hon. Dr Ritson would know, that schizophrenia is one of the major chronic disabling diseases in communities throughout the world. It affects more than 1 per cent of the population, so that at any given time about 14 000 South Australians are affected with schizophrenia in various forms (the hearing of voices and the dreadful disabling things that go with it). As far as is known it is in no way related to socio-economic circumstance. It occurs right across the board, in all sections of the community. In no way, as far as is known, is it connected with home environments. It occurs in homes where children and teenagers have the most loving, doting and caring parents.

The point I am putting is that it was quite disastrously wrong, once that had been pointed out, to lead into an article with the sort of supposition that Peter, Tom, or whoever the anonymous composite character was was in this position with schizophrenia because his father had been a bum, his mother had been an alcoholic, or whatever the picture was painted. That would have caused, I think, a great deal of distress in many fine South Australian families who have the misfortune to have a son or daughter who is schizophrenic.

The Hon. R.J. Ritson: You are missing the point a bit.

The Hon. J.R. CORNWALL: No, the honourable member misses the point. In view of the fact that he has had professional training in the area, his missing the point is rather unforgivable.

The Hon. R.J. Ritson: I understand what you say.

The Hon. J.R. CORNWALL: Yes, but the public of South Australia may not. If they read that article, they would have been severely misled, which is why I am spending additional time on it. The article confused those women in the community with behavioural problems, the ones for whom the Government is now investigating the provision of a special shelter because they cause a great deal of disturbance in the ordinary women's shelters to which they go. There is nothing that is satisfactory in the mental health services to cater for these women.

It confused further those people usually of borderline IQ who, because of congenital problems, brain damage at birth, or at some stage in their life, also have severe behavioural problems. At present, there is no agency in South Australia, Australia or anywhere in the world that caters adequately for those sorts of people.

It may well be that adequate retraining or behaviour modification programmes over long periods—over periods of years—may do something to help. Of course, that raises the vexed question of whether they should be detained, and what is the position *vis-a-vis* their civil liberties. So, it was a very complex area, which was approached from a third-rate social worker's point of view. In the event, the result was disastrous. I thank the Council for bearing with me in making that explanation, because I believe that the people of South Australia are owed it.

Reverting more specifically to the general trend in funding, the point was made in the article—inspired by a senior social worker, one Jim Barber, who was named therein—that we are spending more and more money on institutional care for the mentally ill, despite falling numbers, and less and less on community health care. Again, the position was explained to the gentleman who wrote the article. That was and is wrong and, I might say, it did a grave disservice to Hillcrest Hospital in particular.

The situation at Hillcrest is that last year it had an annual budget of about $18 million of which about 20 per cent was allocated to community services. It was allocated directly to a whole range of outreach services. It is a deliberate policy of the South Australian Health Commission and the Government that the expansion logically should occur in community mental health services—the services in the community. Indeed, Dr Stanley Smith, whom I appointed to head up the Inquiry into Mental Health Services took that

a step further and said that ultimately the community mental health programmes should be integrated into general community health programmes.

The Hon. R.J. Ritson: Will you adopt that policy?

The Hon. J.R. CORNWALL: We endorse that. I point out that we have not had a chance to face up to one Budget since the Smith Report was introduced. A further criticism was made in the article that in the past two years the Government had ignored all these things and the Smith Report. First, I point out that we had been in Government for only 16 months. Secondly, we have had only one Budget, in 1982-83, which was finalised by the end of June, yet the Smith Report was not available until October last year. So, clearly, it is a nonsense to say that we have ignored the Smith Report.

Also, it was implied that somehow the Smith Report had been thrust upon us. Of course, the fact is that I set up the Smith Report: I scoured the world to find Dr Stanley Smith from the United Kingdom to head it up. We have only had the report since October, and it is currently being processed. Already, in the early Budget bids, I have put in some of my substantial bids in the community mental health area, and I know, given colleagues like the Attorney-General and the Minister of Correctional Services and Minister of Agriculture, that being the self-effacing people they are (being interested in the community generally) they may also seek to ensure that my bids are as successful *vis-a-vis* their own. I do not know; I cannot say that with any certainty. Seriously, we are acutely aware of the need to expand the community mental health programme. We intend to give it the highest priority in the Mental Health Services area generally.

In conclusion, I point out that Dr Smith did say that any thrust that we might make would be to make a good Mental Health Service in this State better. We did not inherit a Mental Health Service that was in any sort of disarray. By any standards, it would be conceded in most areas (I exclude adolescent and child psychiatry) that it is probably the best Mental Health Service in the country. It can and will be made better, and particular emphasis will be placed on expanding the Community Mental Health Service as we promised in our pre-election statement.

MILLIPEDES

The Hon. K.L. MILNE: I seek leave to make a brief statement before asking the Attorney-General, representing the Premier, a question about the millipede extermination programme.

Leave granted.

The Hon. K.L. MILNE: I noticed in yesterday's *Advertiser* an article by Alan Atkinson complaining that the Government has not done enough to eradicate millipedes in the Hills and surrounding areas, including some Adelaide suburbs and some suburbs which have not previously been infested.

The Hon. B.A. Chatterton: How many millepedes are there?

The Hon. K.L. MILNE: In today's *Advertiser* there is a report that Mr Stan Evans, M.P., asked a question of the Premier on this matter, but I consider that the Premier's reply was quite inadequate.

Members interjecting:

The Hon. C.J. Sumner: Did you look at yesterday's *Hansard?*

The Hon. K.L. MILNE: No. I live in Stirling and have had to cope with the millipede problem for several years and, while I am not so concerned for myself, I am most worried about the rapid spread of these pests. Already this year I have collected about a barrow-load of millipedes from around my home, even after spraying, and they are still coming. So, in answer to the interjection of how many millepedes, I can tell honourable members that it is a barrow-load. I would have thought that it would be sensible for the Government to have made this matter a priority in its programme some years ago. Therefore, I am really complaining about the lack of action by both the Liberal Party when it was in office and now the Labor Party when it is in office. They simply do not seem to make it a priority matter, yet every year the area infested by millipedes increases considerably. My questions are:

1. Does the Government consider the millipede infestation to be a serious matter?
2. What priority has it placed on it?
3. What amount of money is the Government willing to spend on this problem in the remainder of this financial year?
4. What amount does the Government propose to place in the 1984-85 State Budget for the programme of eliminating or controlling millipedes?
5. Was the amount of $4 000 quoted in the press as the amount allocated to Dr Baker to go to Portugal correct?
6. If so, what was the $4 000 to cover?
7. What else does the Government intend to do about its programme?
8. Will the Government give a guarantee to the people of Adelaide and suburbs, particularly those in the Hills suburbs, that it will step up this campaign and treat it more seriously than in the past?

The Hon. C.J. SUMNER: This is a matter in which I have to declare my interest: millipedes have in fact arrived at North Adelaide, despite the fact that most maps indicate that they have not come that far. In view of my interest in the matter and because the Minister of Agriculture has been concerned about the issue for some time (I know that it has been one of his top priorities), it is a matter about which he should respond to the honourable member.

The Hon. FRANK BLEVINS: I thank the Attorney-General for asking me to respond on behalf of the Government, which of course I am delighted to do. I was a little surprised to hear the Hon. Mr Milne ask the question, because the issue arose as a public issue again (it arises annually) last Saturday, and it has taken the Hon. Mr Milne until Wednesday to wake up that there is a topic around on which he has not had a line in the press and to crank his brain into gear (or what resembles gear), so that he can attract a mention in the press a little late.

However, the honourable member may not have been here during Question Time on Tuesday when I spelt out the Government's position on this. He also obviously has not read yesterday's House of Assembly *Hansard.* Quite an extensive answer was given by the Premier, but, as the Hon. Mr Milne must have been busy on other things, he read only the report in the paper, which was a very brief report. I am sure that he will not only read the answer in full but will pay very careful attention to the information that I am about to give him—although I concede that it was given on Tuesday.

The position is very clear. To criticise the previous Government or this Government for the degree of concern that they have shown over the millipede problem is grossly unfair and totally inaccurate. I have never complained until yesterday about any article that I have seen in the press that referred to me. I obviously would not have written all those articles in the way in which they were written, but, by and large, the articles that have referred to me have been a reasonable approximation of what has gone on, with the exception of yesterday morning's article. I was absolutely disgusted at that article; it was wrong in a whole number of ways, and I just do not understand—

The Hon. C.M. Hill: Was this in the AM column?

The Hon. FRANK BLEVINS: Alan Atkinson. I do not understand why a reporter should write an article in that way; it was totally and utterly inaccurate and quite malevolent. It is the first time. I have been in Parliamentary politics for going on nine years; I have been involved in the public arena for almost 20 years; and I have never experienced that standard of reporting by any journalist. I have no idea at all why the reporter should report the matter in that vein. I have written to the Editor of the *Advertiser* complaining about that article and setting the record straight, but in case that letter is not published I will do it again now for the Hon. Mr Milne.

The previous Government, quite properly, entered into an arrangement with the CSIRO to see whether the millipede problem could be overcome or at least controlled. It set up a three year programme costing some $102 000. The interim report of that proposal has been presented to the Department of Agriculture, and the final report is due, I think, in April. When we get that final report we will be pleased to take up anything that gives some hope of controlling this nasty pest.

In the interim report, Dr Baker suggested that the next step should be—this is prior to his writing his final report—a further trip to Portugal (he has been in Portugal for quite a while already) to collect a number of parasitic flies that hold out some hope of controlling this pest. They do in Portugal; whether that is directly translated to South Australian conditions is yet to be proved. The request was for a return air fare to Portugal plus some living expenses, which came to about $4 000—I cannot remember the exact number of dollars. The request by Dr Baker was for $4 000-odd to enable him to take the next step in his programme which, I repeat, was to go to Portugal to collect some parasitic flies which appear to give some hope to control the problem.

The Hon. K.L. Milne: It won't go anywhere. He can't be serious.

The Hon. FRANK BLEVINS: The Hon. Mr Milne was distracted by another member and said, '$4 000 won't take him anywhere.' Let me briefly recap: $102 000 has been spent so far.

An honourable member interjecting:

The Hon. FRANK BLEVINS: No, it was $200 000-odd; it is all State money.

The Hon. K.L. Milne: It is nothing compared with what we are all spending.

The Hon. FRANK BLEVINS: Just hang on. The previous Government entered into that arrangement with the CSIRO, and we have so far been given an interim report by Dr Baker. His final report on that programme, on that period of research which he undertook and which included two years in Portugal, is not due.

The Hon. L.H. Davis: Did he run out of research money?

The Hon. FRANK BLEVINS: Not as far as I know. There has been no suggestion of that at all.

The Hon. R.I. Lucas: Why is he on snails now? Why isn't he concentrating on millipedes?

The Hon. FRANK BLEVINS: We do not employ Dr Baker; he is an employee of the CSIRO. If Dr Baker says, 'I want to drop everything and come to work on millipedes,' I am sure that we will be delighted to make some arrangement.

The Hon. L.H. Davis: But you haven't asked him. Have you asked him?

The Hon. R.I. Lucas: Have you asked him?

The Hon. FRANK BLEVINS: Do not be silly! Dr Baker has been employed full-time with us on this programme. He has presented an interim report, which we have acted on completely. We have said, 'Yes, we are happy to go on with your next step, which is a further trip to Portugal to collect this parasitic fly.' We have not yet had the final report to know what his forward programme is, but we will be delighted if this final report says that there is some light at the end of the tunnel. But, I warn honourable members that to date Dr Baker is not prepared to say that. I myself saw Dr Baker on TV the other night, when he said that he is talking about years down the track—not because of any shortage of funds or any other reason than—

The Hon. Anne Levy: It takes time to do the work.

The Hon. FRANK BLEVINS: That is correct; it will take years to control this pest, and that is assuming that the parasitic fly performs in Australia as it does in Portugal. That will take at least a year to find out and to test. Every facility that we as a Government have will be made available. We will be delighted to make it available to go through that testing programme. There is no suggestion at all of impeding Dr Baker's progress.

Let me restate for the benefit of the Hon. Mr Milne, who is having a very bad afternoon—he is constantly being distracted by other honourable members—that all that Dr Baker has asked for to date is $4 000-odd to go back to Portugal in August to collect these flies, which hold some promise. We have agreed readily. We said, 'Yes, no problem.'

The Hon. K.L. Milne: He will have to go steerage or something.

The Hon. FRANK BLEVINS: I am not sure how he is going; I have no idea, but if the Hon. Mr Milne is suggesting that I try to make it more expensive, that is a very difficult thing for me to do. I can give only what he has asked for; that is all that has been asked for. I have given it quite willingly. I hope that it contributes to the solving of this problem. However, again I point out that when we get the final report in April from the studies that Dr Baker has been doing for us over the past few years, I will be delighted to make it available to the Council so that it can examine it, and I am sure that there will be a great deal of interest.

But, I warn the Council that Dr Baker himself says that with all his best efforts we are still looking at many years before there is any semblance of control of this obnoxious pest. I commend everybody in the interim to contact the Department of Agriculture because there are certain measures that can be—

The PRESIDENT: Order! Call on the Orders of the Day.

SPLATT ROYAL COMMISSION

The Hon. K.T. GRIFFIN (on notice) asked the Attorney-General:

1. What is the total cost of the Splatt Royal Commission to 29 February 1984?

2. What is the detail of that cost, including, but without limiting the detail:

(a) the fees to solicitors and counsel for each party represented at the Commission including fees paid or payable by the Legal Services Commission;

(b) the cost of counsel, solicitors and clerks in the Crown Solicitor's office involved in the Royal Commission;

(c) the cost of the secretary to the Royal Commission;

(d) the fees to the Royal Commissioner and the cost of his accommodation and travel (intrastate and interstate);

(e) the cost of the transcript of proceedings;

(f) the cost of orderlies and other staff assisting the Commission;

(g) the cost of prison officers in arranging Splatt's attendance at the Commission;

(h) the cost of witnesses, including the costs of such witnesses met by the Legal Services Commission; and

(i) the costs of any laboratories (Government or private) and testing of materials.

The Hon. C.J. SUMNER: The replies are as follows:

	$
1. Direct Expenditure	1 140 160.50
Indirect Expenditure App.	172 000.00
Total	$1 312 160.50

2. *(a)* The Legal Services Commission has not made any payments to solicitors or counsel in respect of the Commission. Moreover, as at 29 February 1984 the Commission has made available $150 000 to the Government to assist to defray the legal costs of representation of Mr Splatt before the Commission.

Fees to Counsel and Solicitors—$306 356.67.

(b) Estimate—$122 000.00.

(c) $19 954.67.

(d) Fees $99 571.00; Travelling Expenses $4 423.40.

(e) $98 581.89.

(f) $16 360.79.

(g) Estimate $50 000.00.

(h)

	$
Witness Fees	18 359.50
Travel Expenses	24 048.13
Accommodation Expenses	30 880.29
	$73 287.92
Scientists Fees	$495 338.94

(i) Laboratories $1 940.00; Testing Materials $4 248.95.

(Note costs paid to Scientists for performing tests included in fees paid to Scientists (see *(h)* above).

Sundry Expenses $20 096.27.

CRIMINAL LAW CONSOLIDATION ACT APPEALS

The Hon. K.T. GRIFFIN (on notice) asked the Attorney-General:

1. How many appeals has the Attorney-General instituted against sentences under the Criminal Law Consolidation Act from 1 January 1983 to 31 December 1983?

2. In each case—
   (a) What was the offence for which the offender was convicted?
   (b) What was the penalty appealed from?
   (c) What was the result of the appeal?

The Hon. C.J. SUMNER: The replies are as follows:

1. 32

2. *(a), (b)* and *(c)*

Offence	Penalty Appealed From	Result
1. Rape and Abduction	3 years and 18 months conc.—total 3 years	8 years and 6 years conc.—total 8 years
2. Indecent Assault (2) and Attempted Sexual Intercourse with a person under 12	3 months on each conc. and 15 months conc.—total 15 months	Second sentence increased to 15 months and third to 32 months—total 32 months
3. Manslaughter	2 years susp. sentence—$1 000—G.B. 3 years—with conditions	Dismissed
4. Robbery with violence	2 years susp.	Dismissed
5. Poss. Indian hemp for sale (2)	16 months on each conc. Susp.	Dismissed
6. Cult. Indian Hemp	3 years susp.	Allowed against suspension (no appeal against length)
7. False Imp. (2)	7 months on each conc.	3 years and 6 months on each conc.
8. Causing Death by Dangerous Driv.	Fine $400 and licence disq. 12 months	Allowed only to increase licence disq. to 2 years
9. Break, Enter and Larceny (2) and Arson	9 months on each conc. and 18 months conc.—total 18 months	Dismissed re break, enter and Larceny (2), allowed re Arson—sentenced inc. to 3½ years conc.—total 3½ years
10. Cult. Indian Hemp	6 months susp.	4 years (not suspended)
11. Rape	2 years	5 years
12. Cult. Indian Hemp	3 years	Dismissed
13. Manslaughter	4½ years.	Dismissed
14. Rape (2)	4 years conc.	Allowed only to increase non-parole period from 16 mths. to 28 mths.
15. Rape (2)	4 years conc.	Allowed only to increase non-parole period from 16 mths. to 28 mths.
16. Indecent Assault (2) and Incest (2)	2 years on each conc. and 2 years on each conc.—total years	Dismissed
17. Cult. Indian Hemp	$900	2 years and 3 months
18. Cult. Indian Hemp	$400	12 months
19. Cult. Indian Hemp	$900	1 year and 3 months
20. Murder, Attempted Murder and Others	Life—non-parole 18 years	Non-parole inc. to 20 years
21. Detaining with intent to have sexual inter. and Indecent Assault	5 years and 18 months conc.—total 5 years	10 years and 5 years conc.—total 10 years
22. Rape	15 months susp. 3 years	Dismissed
23. Rape (3) and Assault with intent to Rape	Total 8 years	Dismissed
24. Causing death by dangerous driving	9 months susp. No licence disqualification	Dismissed
25. Armed Robbery	6 months	4 years
26. Wounding with intent to Cause Grievious Bodily Harm	2 years susp. Bond $200 G.B. 3 years with conditions	Dismissed
27. Armed Robbery (3)	3 years	9 years
28. Armed Robbery (3)	3 years	9 years
29. Attempted Rape	2 years	4½ years
30. Cult. Indian Hemp (4), Trade in Indian Hemp and Poss. Indian Hemp for trade	Total 10 years, non-parole 4 years—appeal re non-parole only	Pending
31. Larceny as Servant (11)	O.P.A. Bond G.B. 2 years. Appeal for sentence if called.	Dismissed
32. Causing Grevious Bodily Harm with intent to do Grevious Bodily Harm; Rape.	6 years each count conc.	Dismissed

By way of additional information, perhaps I should point out that the legislation allowing the Crown to appeal against sentence was proclaimed on 11 December 1980. Up until November 1982, 17 appeals had been instituted of which nine were allowed, two abandoned and six dismissed (no appeals were instituted between November 1982 and 1 January 1983).

As previously advised, from November 1982 to date, 32 Crown appeals have been instituted of which 19 have been allowed, 12 dismissed and one remains pending. That is, during almost two years of Liberal Government only 17 appeals were instituted, whereas in only 16 months of a Labor Government 32 appeals were instituted. More than double the number of appeals have been instituted in the same time under the Labor Government than occurred under the previous Liberal Government. The Government's policy announced at the last election, namely, to adopt a positive role in the appealing against lenient sentences and in putting submissions to the court on penalties, particularly in the areas of violent crime, has been fulfilled.

The present success rate of the Crown would indicate that a correct approach has been taken. Nevertheless, it is possible that there will be fewer appeals in the future because there are now very few crimes and principles that have not been covered and principles of sentencing have been established. However, the Crown will continue to appeal where it considers it necessary.

YATALA LABOUR PRISON

The Hon. DIANA LAIDLAW: I move:

That this Council registers its strong objection to the manner in which the Government used section 6 of the Planning Act to achieve the demolition of 'A' Division, Yatala Labour Prison, and, further, that this Council believes that the Government's action not only amounted to a grave misuse of the provisions of the Act but, by circumventing the Heritage Act, has set double standards for the community.

This is an important motion, and I am keen to have the rapt attention of my colleagues on this side and of members elsewhere in the Chamber. I appreciate that there are other matters of importance that other members wish to discuss, so I therefore seek leave to continue my remarks. In so doing, I do not undervalue the importance of my motion.

Leave granted; debate adjourned.

MEDICARE

The Hon. J.C. BURDETT: I move:

That this Council censure the Minister of Health for his dismal and divisive handling of the introduction of Medicare into South Australia.

Prior to the last election, the present 'Bannon three year Government' issued a very bulky health policy. Given the present chaos in the health system, it was quite amusingly entitled 'Health—A New Deal for South Australians'. A new deal! South Australians have faced a new deal indeed, and I suggest that it is a raw deal. Confidence in our health system, from without and within, has been undermined as never before. The credit for this dismal record can be directly taken by the present Minister, whose recent performance in attempting to introduce Medicare in this State has been abysmal.

We have witnessed a number of occasions when the Minister of Health has taken full opportunity of his public status to abuse and denegrate health professionals, who have quite reasonable doubts about the Medicare scheme. In a recent instance, with which I will deal in more detail later, the Minister premeditatedly and callously used the media in an effort to break the public standing of a dedicated doctor. Why does the Minister do this?

The Hon. J.R. CORNWALL: I rise on a point of order, Mr President. We may as well clarify this matter right now. The matter to which the honourable member refers is the subject of many solicitors' letters and several writs. It is well known that I claim never to have used those words, and I have a tape recording of the entire press conference to prove it. There are writs flying all over the place, including some from me. Mr President, I therefore suggest that you rule, right at the outset—

The Hon. R.I. Lucas: Quite a number are coming at you.

The Hon. J.R. CORNWALL: And there are several that have been issued by me, too.

The Hon. R.I. Lucas: There are more coming at you, I can assure you.

The Hon. J.R. CORNWALL: Is your problem congenital, or did you get worse as you got older?

The PRESIDENT: Order! The Minister will concentrate on his point of order.

The Hon. J.R. CORNWALL: I think that I have made it quite eloquently, Mr President, and I would like you to rule forthwith. If members are going to use the privileges of this Council to canvass a specific matter which is the subject of litigation, we will have reached a very sorry pass in our affairs.

The PRESIDENT: Order! Is the Minister suggesting that the motion is *sub judice?*

The Hon. J.R. CORNWALL: No, Mr President, I am suggesting that reference to the matter which has just been canvassed by the honourable member and which he has promised to return to is not a matter that can be discussed by the Council at this time.

The Hon. J.C. BURDETT: Mr President, I have not yet referred to the particular matter.

The PRESIDENT: Order! There is a point of order before the Chair, and I will consider it.

The Hon. J.C. BURDETT: Mr President, may I speak to the point of order? I wish to speak to the point of order. It relates to what the Minister said about Dr Peter Humble.

The Hon. J.R. CORNWALL: On a further point of order, the honourable member is canvassing a specific matter which, I am putting to you, Sir, is a matter for legal action both by me and the individual concerned against two metropolitan daily newspapers and one television channel. It is quite out of order to discuss or debate the matter in this Council.

The Hon. J.C. BURDETT: I wish to speak to that point of order. I do not propose to refer to any words used or alleged to have been used by the Minister in regard to the doctor in question. There was a television interview which I saw and I simply propose to refer to that very broadly.

The Hon. J.R. CORNWALL: That is why you have specifically named the doctor. You have abused your privilege already.

The PRESIDENT: Order! I do not intend to have two members on their feet at the one time. If the honourable member wishes to raise a further point of order, he may do so.

The Hon. J.R. CORNWALL: I want your ruling, Sir. I have been waiting for a ruling on the previous point of order while the honourable member has been abusing and flouting the forms of the Council. He has again flouted the rules in so speaking.

The Hon. J.C. BURDETT: There has been no flouting of the rules of the Council in my naming a person. There was an interview on television regarding Dr Peter Humble.

I do not propose to refer to any question of any other comments alleged to have been made of tape or anything of that kind.

The Hon. J.R. CORNWALL: The honourable member just named a particular individual again. Please rule, Sir, before he flouts the conventions further.

The PRESIDENT: Order! I remind members that, when we are dealing with Bills, there seems very little that is *sub judice*. On the matter of a motion, it is somewhat different. If the Minister wishes to declare that the proposed motion is *sub judice*, I will have to consider the matter.

The Hon. J.R. Cornwall: No, no, no.

The PRESIDENT: Then I suggest that the Minister relax and let the matter continue, as I can see nothing at this point which is prejudicial to anyone concerned.

The Hon. J.R. CORNWALL: In that case, I will explain again.

The PRESIDENT: If it is a point of order, I will listen.

The Hon. J.R. CORNWALL: The particular matter to which the shadow Minister of Health alluded and to which he said he would come back in a moment—and he has now named a particular individual—is a matter for litigation involving two metropolitan daily newspapers and possibly at least one commercial television station. The solicitors in those matters are acting for me and for the individual concerned, and there will almost certainly be writs issued, if they have not already been issued. I am asking you, Sir, to rule on whether that matter can be canvassed within this motion. If you so rule, I will go for my life as well, but I believe it would be out of order and would like a ruling at this early stage.

The Hon. J.C. BURDETT: Continuing to speak to the point of order, I point out that the Minister has just stated that, if writs have not been issued, they will be at an early stage.

The Hon. J.R. Cornwall: It is not within my knowledge as to whether or not they have.

The Hon. J.C. BURDETT: If writs have not been issued, there is no question of *sub judice*. If writs have been issued, the matters which are the subject of those writs may be *sub judice*. The confines of the *sub judice* rule are very strict indeed, but certainly if the Minister cannot assure you, Sir, that writs have been issued, there is no question of *sub judice* at all.

The Hon. J.R. Cornwall: If you want to perpetuate a libel, so be it.

The PRESIDENT: That is the point I made in the first place. I do not believe that the matter is *sub judice*, and the Minister himself does not think it is *sub judice*. I can see no reason why the motion should not continue.

The Hon. J.R. CORNWALL: I did not say that I did not think it was *sub judice*. I said that it was not within my knowledge as to whether the person who was named by the Hon. Mr Burdett or that person's solicitor has at this time issued writs. I can assure you, Mr President, that it is within my knowledge that I have not issued writs but it is an action that I am certainly contemplating.

The Hon. M.B. Cameron interjecting:

The Hon. J.R. CORNWALL: The Hon. Mr Cameron chuckles away and thinks it is perfectly all right to be misreported. That is typical of his attitude. He is one of the great lightweights of our time. I am comforted to read today's poll. One could imagine how well the Government would be going—

The PRESIDENT: Is there a point of order?

The Hon. J.R. CORNWALL: Yes, of course. I am further explaining that it is not within my knowledge as to whether writs have been issued by the solicitors acting for the person concerned.

Members interjecting:

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: If it is gloves off and the Hon. Mr Burdett wants to perpetuate a potential libel in this Chamber—what may be a gross libel—so be it. It is up to you, Sir.

The PRESIDENT: Order! The Minister has asked a question and has stated that he does not know whether any writs have been issued. I have been given no notice that any writs have been issued. Therefore, I suggest that it is not *sub judice* in the first place. I have no indication whether or not at this stage it is prejudicial. Therefore, I will allow the debate to continue. The Hon. Mr Burdett.

The Hon. J.C. BURDETT: I certainly do not propose to be irresponsible, but it will be necessary to repeat what I have just said as it relates to what follows. In a recent instance (I will go into detail later) the Minister premeditatedly and callously used the media in an effort to break the public standing of a dedicated doctor. Why does the Minister do this? Because, so it seems, somebody dares just to disagree with him. Smothered in a shroud of self-righteous indignation, Dr Cornwall vents his dissatisfaction in a harsh and vengeful way. His performance, not just on Medicare but on many other issues, too, has given rise to enormous concern. The Labor Party has shuffled in embarrassment, many lay members have expressed alarm at his behaviour, and the letters to the Editor columns have been inundated by writers universal in their condemnation of the 'master media manipulator'. Indeed, to quote a letter to the Editor from late last year:

> Should the Premier agree to the creation of a Ministry of Public Confrontations, the people of Port Pirie and certain medical doctors would no doubt have a nomination. We could then receive other nominations for suitably qualified persons as Health Minister.

Let me return to that ALP document 'Health—A New Deal for South Australians'. In the introduction Dr Cornwall sets out what he sees as the four great tasks in the health field. Two of these have fallen by the wayside to be overgrown by expediency, but that is not for further comment now. After setting out these 'four great tasks' Dr Cornwall says:

> We will offer a new health deal for all South Australians.

And, he adds—wait for it:

> It will involve a new spirit of co-operation at all levels.

A new spirit of co-operation indeed! Since Dr Cornwall has displayed his lop-sided version of co-operation, the health system has been dogged with discontent and disillusionment.

The public has a right to expect, and this Parliament has a duty to demand, that the Minister of Health end his relentless campaign of attack and vilification of anyone who would dare take a stance in opposition to him. Councillors would recall that in August last year the Opposition, seriously concerned by the performance of the Minister to that time, moved a no-confidence motion, which was defeated—

The Hon. J.R. CORNWALL: I rise on a point of order. I do not find anything in the matter before the Council referring to no-confidence motions of August last year or the subject matter of such no-confidence motions. As I recall, the matter before the Council today concerns my handling or alleged mishandling of Medicare issues. I submit that it has nothing to do with the events of last August, when Medicare was not an issue.

The PRESIDENT: I do not uphold the point of order.

The Hon. J.R. CORNWALL: You do not uphold it?

The PRESIDENT: No.

The Hon. J.R. CORNWALL: You are saying that members can say anything in this debate?

The PRESIDENT: I will determine what can be said in the debate. At this stage I can see nothing objectionable.

The Hon. J.C. BURDETT: To repeat, members of the Council would recall that, in August last year the Opposition,

seriously concerned by the performance of the Minister to that time, moved a motion of no-confidence, which was defeated by the combined forces of the Government and the Australian Democrats.

If there was any doubt about the appropriateness of our concern, it has certainly been dispelled by the Minister's recent performances. The Medicare saga (for that is what it has become—a saga) has been poorly handled by the Minister of Health from the very start. We are concerned that South Australia is being made the 'guinea pig' for this experiment in nationalisation. We are worried that South Australia's Minister of Health has made our best interests subservient to the wishes of the Commonwealth Minister for Health. We are disturbed by the division being created within the health system by the Government. We oppose the loss of freedom which doctors and patients face. We condemn the entry into the Medicare muddle of threatening tactics. We abhor the rejection by a Labor Government of the traditional standards and normal approaches used in industrial relations. Ultimate in our concern is our desire to see a more reasoned and productive approach by the Government.

The Hon. J.R. CORNWALL: I rise on a point of order: I will try again. I am an optimist and I believe that at some stage it will come to your notice, Mr President, that the motion does not refer to a censure of the performance of the Bannon Government generally; nor does it refer to the performance of the Minister of Health. The motion is quite specific in its reference to Medicare. If you, Sir, were listening carefully, I am sure that you would be aware that the poor fellow has strayed into the widest fields possible. I seek your guidance, Mr President (and this will be my last attempt): if you are prepared to allow the debate to wander anywhere, and if they are the rules in this Council, so be it, but I thought that I would ask.

The PRESIDENT: I thank the Minister for his concern about how I am conducting the debate. Before I ask the Hon. Mr Burdett to proceed, I should ascertain whether there is a seconder to the motion.

The Hon. M.B. Cameron: I second the motion.

The Hon. J.R. CORNWALL: Mr President, you did not rule on my point of order. I want to know whether Rafferty's rules will prevail or whether you will keep the debate within reasonable confines.

The PRESIDENT: The Minister asked that question previously and, without reference to Mr Rafferty's rules, I will see that the debate is kept within reasonable bounds.

The Hon. J.C. BURDETT: We and the public as a whole are sick and tired of the Government's waging an ideological war against the health system. Nowhere in all of its action to force contracts on doctors, to slash payments, to limit available services and to prevent patients from having the freedom to choose and insure have we seen the Government produce evidence to show that Medicare will be a better health scheme for the average person.

Instead, the South Australian Minister seems to have been willing to make himself the manipulative tool by which the Commonwealth can achieve containment of health costs. And that is what this whole 'battle' is all about. The Commonwealth bases most of its economic strategy on a reduction in the CPI (however false that may be in real terms) by cutting direct health costs and replacing them with a 1 per cent levy on income.

The Commonwealth is clearly afraid that despite all its promises the Medicare levy could quickly rise beyond 1 per cent, as all the overseas evidence shows. Thus, to keep costs down, doctors have been chosen as the scapegoats—a real reduction in doctors' incomes is what the Government desperately seeks in order to maintain its political credibility. The involvement of the Hon. Dr Cornwall in this whole affair has been a sad and sorry one indeed.

The State and Federal Ministers of Health have twisted and turned, threatened, then spoken softly, then threatened again. Patients have become alarmed and our health system has been undermined. It is most disturbing that the Hon. Dr Cornwall is operating solely out of support for the Commonwealth Government. His new brand of 'double-speak' seeks to gloss over a number of important facts. If Dr Cornwall was solely and seriously concerned about the issue of fees, he could easily put his mind at rest. As he well knows, in South Australia fees charged by diagnostic specialists are at or below the scheduled fee. There is no problem in South Australia in this regard.

If the Minister wants to ensure in the long term that a maximum of the scheduled fee is charged for operations within public hospitals, he has (and he knows it) the opportunity to require hospitals to send out accounts to private patients treated by doctors using the hospital facilities. In this way, fees charged by doctors could be monitored without the necessity for the big stick and the loud voice which the Hon. Dr Cornwall has enthusiastically adopted.

The Hon. J.R. Cornwall: Except that private patients would not get Medicare rebates. Would you put them in that position?

The Hon. J.C. BURDETT: You do not have to put them in that position.

The Hon. J.R. Cornwall: That is exactly the position they were in. In Victoria, the computers were already rejecting claims—and you know it. You are being devious.

The PRESIDENT: Order!

The Hon. J.C. BURDETT: I am not being devious.

The PRESIDENT: Order! During the kerfuffle, I omitted to point out that honourable members are being filmed—I thought I should mention that.

The Hon. J.C. BURDETT: In regard to the Minister's most recent out-of-order interjection, I point out that computers can be reprogrammed or programmed to do the right things.

The Hon. J.R. Cornwall: To break the law.

The Hon. J.C. BURDETT: No, to conform with the law. It rests with Dr Blewett, the Federal Minister for Health, to set his guidelines and to say what the guidelines should be. The Hon. Dr C nwall has lined up totally behind Dr Blewett, whose attitude on the entire Medicare question has been nothing but bloody minded, arrogant and ideologically provocative. As I have said, the Hon. Dr Cornwall uses double-speak. He consistently refers to section 17 of the health legislation which he claims requires that diagnostic specialists and relative general practitioners agree to charge at or below the scheduled fees. That claim is garbage. Section 17 does not require that to happen: it simply provides that the Minister can establish guidelines governing various matters.

Already in its short history it has been necessary to amend section 17 and, according to the press today, it will be amended again. That is an indication that the Act was rashly and inadequately drafted. It is the desire of the Commonwealth Minister for Health—an intransigent desire—to set fees. It is not some specific clause within the Act. Certainly, there is now acceptance by the Government of the view that Parliament could review fees and scrutinise the Minister's guidelines. But the Minister's approach on this matter has been abysmal.

Honourable members would no doubt have seen an advertisement, placed at taxpayers' expense, in a number of South Australian newspapers. The advertisement, which featured the reproduction of a letter from the State Minister of Health, was nothing but an attempt to force doctors to succumb to the wish of the Minister of Health's guidelines—not to the Health Insurance Act. The Minister's letter stated:

Section 17 of the Commonwealth Health Insurance Act requires agreement in writing between doctors and public (recognised) hospitals to ensure that their private patients qualify for Medicare benefits.

He goes on further:

The only remaining problem in implementing the interim arrangements has been the requirement under section 17 of the Commonwealth legislation that diagnostic specialists and general practitioners performing occasional diagnostic services should give a written indication to their hospital that they will charge at or below the scheduled fees for items in Schedule A.

At best, the contents of the Minister's letter are misleading, because nowhere in section 17 of the Commonwealth legislation does it say that doctors have to charge at or below the scheduled fees. In fact, as I have indicated, the requirement is for an 'agreement' and for the Federal Minister to have 'formulated guidelines' with 'the inclusion or omission of such matters as he thinks appropriate'.

So, nowhere in section 17 is there a requirement, as the Hon. Dr Cornwall alleged in his publicly funded advertisement, that the doctors have to charge at or below the scheduled fee. That is simply a guideline set by the Minister—a guideline, I might add, which is already being met in South Australia, because doctors providing diagnostic services do not charge above the scheduled fee. The Hon. Dr Cornwall cannot point to any paragraph or subparagraph of section 17 of the Act which requires, as he said, agreement that doctors should charge at or below the scheduled fee for diagnostic services. He is attempting to create an implication that is quite improper. This means that South Australians, at best, have to pay 15 per cent of the cost of seeing or being treated by a doctor and many margins, because of the revised list, are greater than 15 per cent.

Nowhere in all the Hon. Dr Cornwall's endeavours to force doctors to succumb to the wishes of his Federal counterpart has he shown how the service provided to patients will be at all improved. In fact, if anything, the service will be undermined and patient care and patient confidence will deteriorate.

If the normal provisions governing misleading advertising were extended to Ministers of the Crown acting in an official capacity (as the Hon. Dr Cornwall is), there is no doubt that he would be culpable of unfair and misleading advertising. In South Australia there is no need for the big stick that the Hon. Dr Cornwall consistently yields. He would be better placed fighting for improved rights for South Australians than weakly submitting to the requirements of Dr Blewett.

For example, in South Australia the health system is more nationalised than the infamous and inadequate English system. Private medical insurance is forbidden. All that the Hon. Dr Cornwall is doing is supporting the control of doctors' incomes by the Government, in an effort to keep the cost of Medicare down and so retain its political acceptability amongst the general public.

Choice has been seriously eroded as a result of the new Medicare and, as my colleague the Hon. Dr Ritson recently said, 'Medicare has done nothing—absolutely nothing—to care for the sick or injured; it has not added one nurse, doctor, new treatment or drug to the system.' I add that nor has it added any better equipment or new facility. Rather, it has added millions of plastic cards, computers and bureaucrats to a system already groaning under the weight of bureaucracy.

The Opposition is not alone in its censure of the behaviour of the Hon. Dr Cornwall. The columns of our daily newspapers have literally been swamped by letter after letter condemning his ineptitude on this issue. Editorials in the *Advertiser*, the *News* and many country newspapers have condemned the Government's stand. It is a condemnation that continues to grow. It is a condemnation that is justified. It is a condemnation which the Minister deserves. Trying firstly to threaten, then to gently cajole doctors into signing agreements, the Minister has finally resorted to the imposition of price control on the fees of private specialists in public hospitals. This is quite an improper use of the price control mechanism. Indeed, it is an absolute abuse of price control powers and of the Executive function of government. An editorial published in the *Advertiser* of 21 March stated:

Dr Cornwall has sided with his Labor colleagues in other States and in Canberra to wield a totally unnecessary big stick—unnecessary here because diagnostic specialists in South Australia do not charge more than the scheduled fee. Diagnostic specialists in the non-Labor States, where the question of diagnostic fees has not been blown into a major issue, have suffered no such political bullying. Specialists there have not been forced to sign documents, and patients have been receiving their Medicare refunds. So, Dr Cornwall's justification for price control does not stand up to scrutiny.

Price control was not introduced as a measure to blackmail people with whom the Minister of Health disagreed. Without any investigation into the justification of current charges being levied by doctors in South Australia, and without any proof that the present level of charges is inappropriate, the Hon. Dr Cornwall has acted. His move is again another example of the Minister of Health acting for political ends rather than for the well-being of the South Australian community or the health profession.

Responsibility for price control rests with the Minister of Consumer Affairs, not with the Minister of Health. Moves to take action on prices should be initiated by the Minister of Consumer Affairs only after specific complaints about excessive prices have been thoroughly investigated. In fact, of course, we are talking about scheduled fees which are recognised as justifiable by the Government. Once any complaint is investigated by officers of the Prices Division of the Department of Public and Consumer Affairs, a report should be submitted to the Minister of Consumer Affairs. But this procedure has been completely ignored by the Minister of Health. Instead, he is using the imposition of price control as a weapon to intimidate doctors purely for political advantage. This threat by the Minister hangs like a dark cloud over the health profession in South Australia, and also over the patients, the people who concern me most. The Minister should withdraw it and make it clear that existing fee levels are reasonable and justified and so restore public confidence in the medical profession.

The Hon. Dr Cornwall's bully-boy tactics do not remain confined to price control they lead to the general abuse of doctors. On 28 February he callously and wantonly employed the media to attempt character assassination of a wellknown and respected Adelaide surgeon. The Hon. Dr Cornwall referred in scurrilous fashion to Dr Peter Humble. It was a premeditated attack. A press conference was called by the Minister himself with the specific intention of heaping abuse on a member of the South Australian public and medical profession who was not in a position to be able to defend himself. It was a disgraceful performance, one which would have earned a Minister in a Liberal Government a stinging and lasting rebuke from his colleagues.

Of course, it is not the first occasion on which the Hon. Dr Cornwall has employed the public forum given to him by virtue of his position to denigrate, condemn and, in my opinion, slander prominent or other community members. We all, I am sure, recall his attack on the Mayor of Port Pirie, Mr Bill Jones—

The Hon. J.R. CORNWALL: I rise on a point of order. I cannot see that this is remotely related to the matter before us. There is a specific motion before you and I entreat you, Mr President, to exercise some control and discretion at this stage in your position as President of this Council. I

cannot see anything in the motion that remotely relates to Mayor Bill Jones or anything that the member is canvassing.

The PRESIDENT: The motion I have before me is that this Council censure the Minister of Health for his dismal and divisive handling of the introduction of Medicare in South Australia.

The Hon. J.R. CORNWALL: What the hell does that have to do with Bill Jones in Port Pirie?

The PRESIDENT: The Hon. Mr Burdett may be developing his case to make a point.

Members interjecting:

The Hon. C.J. Sumner: That is outrageous.

The PRESIDENT: The debate has nothing to do with me whatsoever, but I will and I intend to control the debate. If the Minister keeps reflecting on the Chair, I will take what action I think is appropriate.

The Hon. C.J. SUMNER: I must rise on a point of order. You, Mr President, read the motion moved by the Hon. Mr Burdett, which is quite clear in its content. It talks about the handling of the introduction of Medicare in South Australia by the Minister of Health. It is clear within Standing Orders that debate must be relevant to the motion before the Council. Clearly, in this case reference to Mr Jones in Port Pirie and reference to other matters relating to the Minister of Health's portfolio have nothing whatever to do with the motion. They are utterly irrelevant to the motion which you, Mr President, read. I ask that you uphold the point of order taken by the Minister of Health and ask the mover of the motion to return to its subject matter.

The PRESIDENT: It is very difficult at this stage to determine whether the mover of the motion intends to use that part of his censure concerning Medicare. However, I will ask the Hon. Mr Burdett to make sure in fact that any material he is using is in accord with the motion that he has moved.

The Hon. J.C. BURDETT: Thank you, Mr President, I will do that. I have almost finished, anyway, and I was relating the behaviour of the Minister which he has exhibited in the Medicare issue to other behaviour which he has shown. In a court situation it would be called 'similar fact evidence'. I suggest that it is perfectly relevant. If I can just repeat: we all, I am sure, recall the Minister's attack on the Mayor of Port Pirie, Mayor Jones, and on Dr Dutton of the Adelaide Children's Hospital. They were unjustified and unnecessary attacks. It is well known in political circles that the Premier has been concerned over the Minister's consistent outbursts. Now the Minister has gone too far. The Government cannot credibly retain a Minister who persists in the public vilification of citizens—

The Hon. J.R. Cornwall: You are dead worried about what appeared in the poll.

The PRESIDENT: Order!

The Hon. J.C. BURDETT: Worst of all, the Hon. Dr Cornwall's attacks and his heavy-handed approach have not in any way increased the likelihood of a resolution to the confusion now surrounding the introduction of Medicare. What is needed is discussion and negotiation—not abuse, personal attack and ideological intransigence. In this place on 22 March (*Hansard* page 2731) in answering a question, which was not from me, the *Hansard* report states:

> Despite what the *Advertiser* might say editorially, at no stage have I tried to adopt the so-called bullying stance. Price control was invoked from last Tuesday very simply to ensure that private patients in public hospitals would be entitled to receive Medicare rebates for medical services.
>
> *The Hon. J.C. Burdett interjecting:*
>
> **The Hon. J.R. CORNWALL:** The Hon. Mr Burdett interjects and says 'quite improperly'. I challenge Mr Burdett to tell me whether he would be prepared, if he were Minister of Health in the same situation, to jeopardise the rights of private patients in public hospitals, particularly cancer patients receiving very expensive radiotherapy treatment from private radiotherapists. Let Mr Burdett stand in his place and tell us whether he would deny patients the right to Medicare rebates under the Federal legislation by refusing to invoke price control.

I am now standing in my place and I will tell the Hon. Dr Cornwall what I would have done in his position. I would have told the Federal Minister not to be so bloody minded, to either revoke section 17 altogether or withdraw his guidelines, to withdraw his quite unnecessary things about price control, because they were not necessary and relevant, and to sit down and quietly negotiate—

The Hon. C.J. Sumner: What would you have done—

The Hon. J.C. BURDETT: —and not be confrontationist. This Minister did not even do it; he did not even try.

The Hon. C.J. Sumner: What would you have done if he had?

The PRESIDENT: Order!

The Hon. J.C. BURDETT: Earlier today in Question Time the Minister described me as a 'political pigmy'. I am rather pleased about that. I would have been disappointed if he had praised me in any way; that would have upset me. I am very pleased to stand in the company of the other people whom the Minister has denigrated publicly. I am pleased to stand in company with Alan Swinstead of Hillcrest Hospital, Mayor Jones, Dr Dutton, Dr Peter Humble, Robert Ringwood and my Parliamentary colleagues, the Hon. Legh Davis and the Hon. Robert Ritson. For these reasons, I seek support from the Council for my motion.

Members interjecting:

The PRESIDENT: Is there a point of order from the Minister?

The Hon. J.R. CORNWALL (Minister of Health): No, there is no point of order, I am speaking. I am taking the opportunity to respond, and at the outset to try to introduce some common sense into the debate. I do not intend to canvass at any length, as the Hon. John Burdett has done, the matter of cleaning up Julia Farr although, since you have extended the rules somewhat, Mr President, under Standing Orders, I could explain to the Council at length that Julia Farr is now 500 per cent better than it was 18 months ago, that the standard of clinical services at Julia Farr Centre has improved immeasurably since I appointed Dr Last as the Director of Clinical Services, that the accountability and accounting have improved enormously, and that since Mr David Coombe went out there as a full-time Senior Chief Executive Officer the face of Julia Farr Centre has changed immeasurably and the faith of the residents and relatives and the people of South Australia has been restored in this magnificent institution, Australia's largest nursing home, and again, after a period of substantial mismanagement, Australia's finest nursing home.

If that is a matter about which I am expected to apologise and about which I am expected to be ashamed, then I cannot follow the logic of the Hon. Mr Burdett or his Opposition colleagues. I am very proud of what I have achieved at Julia Farr Centre. The Hon. Mr Burdett seemed to want to allude to Port Augusta with a little help from his Leader. Certainly, I can tell the Council that I am proud about what we achieved in Port Augusta in less than 12 months. We have now a system of patient care review; we have quality assurance mechanisms—

Members interjecting:

The Hon. J.C. Burdett: I did not mention it.

The Hon. J.R. CORNWALL: The rules are that we are allowed to discuss John Cornwall's career in general.

The PRESIDENT: I will be as lenient as possible since you are in defence. There is no reason why you should not give a reasonable account.

The Hon. J.R. CORNWALL: You are applying your leniency across the board, Mr President, and I commend you for it. Once the rules are set they apply to everyone. In

regard to Port Augusta, before I was subjected to inappropriate interjections, I am very proud of what I have done in Port Augusta. We now have a model for all provincial hospitals around this State. I said about Port Augusta, in May last year, that it was arguably one of the worst hospitals, and had amongst the worst standards in the country. We now have a degree of certainty, we have the best patient care review mechanisms and the best quality assurance mechanisms of any provincial hospital in South Australia. That has been achieved in nine months. We also have a pattern of medical practice that is very different and changing very rapidly from what we had when I was forced to intervene in May last year. I am absolutely delighted to advise the Council of that. Soon we will be appointing a senior anaesthetist as Medical Superintendent at the hospital. The whole pattern of anaesthetics has changed. The whole pattern of patient care delivery and nursing has changed at Port Augusta hospital. Certainly, I can assure the people of Port Augusta and district, and the people of South Australia, that they can go now to the Port Augusta Hospital with the greatest confidence as a result of the initiatives that I took nine or 10 months ago.

The Hon. L.H. Davis: Have they got an orthopaedic surgeon?

The Hon. J.R. CORNWALL: We are negotiating. Since Mr Smarty Pants himself interjects, I will respond on this occasion only. We are negotiating, subject to Stewart West of the Department of Immigration giving us permission, to bring from overseas a very fine orthopaedic surgeon.

An honourable member interjecting:

The Hon. J.R. CORNWALL: I cannot reveal any further details, but I can advise the Council—

The Hon. C.J. Sumner: Is there an over-supply?

The Hon. J.R. CORNWALL: No. There is no oversupply of orthopaedic surgeons in Port Augusta, let me tell the Council.

Members interjecting:

The PRESIDENT: Order! I am learning more about some of my district hospitals than I have for a long time.

The Hon. J.R. CORNWALL: Indeed, you are well looked after in your area, Sir. I cannot reveal at this time the name or the country or origin of this orthopaedic surgeon, but when his name came up one of the senior officers in the Health Commission rang a Dr Richard Southwood, a well known salaried orthopaedic surgeon at the Flinders Medical Centre—he is also a part-time smiling actor and State Secretary of the AMA, but I am pleased to be able to say that he is an excellent orthopaedic surgeon. We rang to inquire what he knew about this colleague. So good is this man that Flinders was anxious to pirate him away from us: that is the sort of standard of medical care that we are now looking to in Port Augusta.

The Hon. J.C. Burdett interjecting:

The Hon. J.R. CORNWALL: In Port Pirie? It has as much to do with the motion as the things that you talked about. You mentioned Port Pirie; let us come down to Port Pirie. Why not? Since we are having a Cornwall resume day I will revel in telling honourable members about the achievements of the past 16 months.

The Hon. C.M. Hill: Did you go up there and open that building recently?

The Hon. J.R. CORNWALL: No, I was busy on the St John Select Committee.

The Hon. J.C. Burdett: Did you come out on the steps?

The Hon. J.R. CORNWALL: No. I will make a note of that; I want to say a few words about that.

The Hon J.C. Burdett interjecting:

The Hon. J.R. CORNWALL: No. I was having lunch with the Deputy Chairman of the South Australian Health Commission, and it was far more productive than talking to the small, factionalised group of doctors—the right wing rednecks whom John Burdett was courting on the front steps.

The Hon. R.I. Lucas: Were they robber barons, too?

The Hon. J.R. CORNWALL: No, but now that the honourable member mentions that I will make a note of that, too; I did not have it in my speech notes. As a result of actions that I was forced to take, Port Pirie now has an environmental health centre and a comprehensive programme. It has taken the first steps, and we as a Government have taken the first steps—and I stress 'the first steps'—to decontaminate and start the clean up of a serious environmental health problem and to ultimately change the residential face of the city. We have placed a moratorium on the development of further public housing in the contaminated area of Port Pirie West and Solomontown, and we have started to protect the children of Port Pirie, while at the same time—

The Hon. J.C. Burdett: The report is not acceptable.

The Hon. J.R. CORNWALL: And I will come back to the matter of protecting the children of Port Pirie in a moment.

The Hon. M.B. Cameron interjecting:

The Hon. J.R. CORNWALL: I will come back to the Hon. Mr Cameron's criticism of world authority, Dr Phil Landrigan, in a moment. He would not qualify to do up Dr Landrigan's shoe laces; he would not qualify to get within a furlong of him. The honourable member should be ashamed of himself to have the gall to sit there and criticise a man of the capacity and calibre of Phil Landrigan. He should have a look at his *curriculum vitae* some time. But I digress: getting back to Port Pirie, even the local Board of Health in Port Pirie now acknowledges that it has a serious environmental lead pollution health problem. Am I supposed to apologise for those actions? Am I supposed to apologise and grovel for protecting the kids in Port Pirie? They will wait until hell freezes over if they expect me to apologise for my actions in Port Pirie, Port Augusta, or at the Julia Farr Centre.

The Hon. R.J. Ritson: Let's hear it for Medicare.

The Hon. J.R. CORNWALL: Let us hear it for Medicare indeed. In this situation, where we hear Dr Cornwall's name and the Minister of Health's title all the time, I remind members opposite that at no stage have I acted on my own, and in none of these matters have I taken decisions that were not endorsed by Cabinet. The position that we take is one of general support for a universal health insurance scheme, financed by an income related levy. Those general principles were stated in the platform of the South Australian Parliamentary Labor Party prior to the November 1982 State election. They were more specifically enunciated by the Federal Parliamentary Labor Party for more than two years prior to the last Federal election. They were supported by a very clear majority of people through the election of the Hawke Government in March 1983.

The enabling legislation to put the legislative part of Medicare in place and to amend the Health Insurance Act was passed by both Houses of the national Parliament in September of last year. So here we have a situation where the universal system of health insurance (and it is not a health scheme; quite right: Dr Ritson did not discover that, although Mr Burdett seems to think that it is a revelation), which is income related, was endorsed by the people of this nation and passed by both Houses of the national Parliament. That is something that the born-to-rule conservatives seem to have some difficulty in coming to grips with. Medicare is an integral and essential component of the prices and incomes accord, which was reached by the Prime Minister (Mr Hawke) in a national summit with employer and employee representatives shortly after his election.

The Hon. K.T. Griffin: It artificially brings down the CPI.

The Hon. J.R. CORNWALL: The Hon. Mr Griffin, a self-confessed conservative, as he would have it in the best mould, sits there and criticises the national summit, and sits there and criticises a scheme that has been endorsed by both Houses of the national Parliament. Let him ride with that; if that is the situation as he sees it, so be it. The Hon. Mr Griffin, as an incurable conservative, cannot bear a situation where the conservatives do not control the Upper House in Canberra. They will not on this occasion be able to manoeuvre to sack the Government. Furthermore, they are unlikely to be able to defeat it at the polls. So, I can understand his being riled. He is pretty riled at not having the numbers on the floor here. There was a fair bit of pressure on the President recently to get back on the back bench so that he could vote.

The Hon. K.T. Griffin interjecting:

The Hon. J.R. CORNWALL: Tell us the truth, my friend, sometime.

The PRESIDENT: I have let the Minister move about a bit in the debate, but he had better not bring me in or he may be extended a little further than he ought to be.

The Hon. J.R. CORNWALL: If they did not interrupt my train of thought I would not stray, but you are quite right, Sir, I did stray a little that time. As Minister of Health I have taken every possible step to undertake the responsibility that we have both at the national and State levels in keeping with the decisions of the Australian and South Australian people, in keeping with the decisions of the national summit, and with the responsibility that we have, as the South Australian Government, to assist in maintaining that vital prices and incomes accord. Again, I make no apology for that, but in doing so my overriding concern has been to protect the most important people of all: the patients. It is significant that, whenever the Hon. Mr Burdett or his colleagues speak, they go to bat for sections of the medical profession and for a range of people, but never once since the Hon. John Burdett has been the shadow Minister of Health in this place have we seen him get to his feet and go to bat for the patients.

Rarely does the Hon. Mr Burdett use the word. This Dickensian lawyer shuffles about in an area that he does not understand and in which he shows neither ethics nor credibility. I will say a little more about that later.

The Hon. R.J. RITSON: I rise on a point of order, Mr President. I accept the fire and brilliance of the Minister's debate, but he made an extremely injurious reflection upon the Hon. Mr Burdett when he said that he had no ethics, particularly as the Minister said that immediately after referring to the Hon. Mr Burdett's capacity as a lawyer. I ask the Minister to withdraw and apologise for that component of his remark.

Members interjecting:

The PRESIDENT: Order! I did not take the reflection in context with the Hon. Mr Burdett's profession. However, I ask the Minister to refrain from that type of debate.

The Hon. J.R. CORNWALL: Both the Federal and State Governments have had great difficulty in dealing with the AMA, at both Federal and State level, because of divisive factors that exist within the medical profession. The Prime Minister himself has pointed out that, unlike the situation when one is dealing with a normal trade union, the AMA has been unable to deliver the goods, because constituent elements within the medical profession dictate to other parts of the profession. It was one of those factions, and I suspect a relatively small faction, that I suspect was in there supporting the Hon. Mr Burdett today.

The other basic problem is the mis-information that has been peddled by some of the doctors' leaders. They have taken the simple position that, if you can pick up an untruth, simplify it to the extent possible and repeat it often enough, the message gets through. As everyone knows, the Medicare debate and the whole question of contracts and section 17 has been a very complex and difficult area. It would have been far more constructive, I suggest, if some of the officials of the AMA had spent a good deal more time talking with working doctors and busy doctors in hospital situations and to busy doctors in private practice situations.

One of the real problems is that these officials have spent more time talking to the media than they have to their membership. Because of that it has often been impossible, in a rapidly changing series of situations, for the ordinary rank and file members of the AMA and the ordinary decent rank and file members of the medical profession to make informed judgments. The spokesmen for the doctors have been issuing threats to withdraw services and calling for strikes. I submit that they have proved to be far better in attempting to manipulate the media outlets and using expensive PR machines interstate to do that than in keeping their own profession posted.

I am happy to say that the excellent common sense that still prevails amongst the majority of the profession in South Australia was reflected at a meeting of the Adelaide Children's Hospital last night, where I am informed the medical staff voted not to take industrial action.

The Hon. J.C. Burdett: This intrigues me.

The Hon. J.R. CORNWALL: The Hon. Mr Burdett, if one can call him that, interjects and says 'This intrigues me.' I am sure that it will intrigue him. It is a pity that the Hon. Mr Burdett is not better informed in his shadow portfolio area. I point out that we have set up a Medicare task force within the South Australian Health Commission to monitor the situation around the State and in the teaching hospitals on a day-to-day basis. This morning I was able to request a rapid round-up of feelings within the teaching hospitals and in the major hospitals in Adelaide.

The Hon. L.H. Davis: Tell us what it is going to do to the country hospitals.

The ACTING PRESIDENT (Hon. C.M. Hill): Order!

The Hon. J.R. CORNWALL: I will not bore the Council with all the details, but the advice I have received states:

(a) Adelaide Children's Hospital

The Medical Superintendent indicated that strike action appears to be unlikely at this point in time. As far as is known, there will be no doctors attending the protest at Parliament House this afternoon. A meeting of medical staff was held last night to discuss Medicare issues. It is believed that the meeting was attended by the South Australian President of the Australian Medical Association. Although doctors at the meeting supported the continual refusal to sign agreements concerning the charging of fees, the majority of doctors present indicated that they were not prepared to support strike action. Concerns were expressed about the Australian Medical Association's involvement in political moves, in respect of moves to censure the Minister of Health.

The Hon. J.C. Burdett: It's not true.

The Hon. J.R. CORNWALL: It is very true. It is not my only source of information but, like a good journalist, I do not believe that I should reveal my sources.

The Hon. J.C. Burdett: We made inquiries.

The Hon. J.R. CORNWALL: The Opposition only talked to the red-neck right. I am telling the Council what the majority of responsible members of the staff and responsible members of the profession decided at the Adelaide Children's Hospital last night.

The Hon. J.C. Burdett: They didn't.

The Hon. J.R. CORNWALL: I am telling it accurately; I am telling it like it happened. As I have said, the excellent common sense and commitment is reflected in the decisions that were taken by a clear majority of doctors at the Adelaide Children's Hospital last night, to name but one. I highly commend the doctors, and there are many of them, who

refuse to be dragged into industrial action and who place a careful consideration of the actual issues and the welfare of South Australian patients above the unquestioning support of the unnecessary BLF-style tactics that are being adopted by a minority.

The Opposition has seen fit to raise this censure motion and has, I understand, at least six speakers who will attack me one after the other. I will take a little time to detail for the Council the specific responses of the South Australian Government to this point. I issued an eight-page resume, which was released over my signature, on 6 March, and it contained the following general principles concerning Medicare. First, I canvassed the matter of Medicare and the scheduled fee. I outlined the position at that time, as follows:

1. All doctors in South Australia are urged to charge the scheduled fee.

The Hon. J.C. Burdett: They do charge the scheduled fee.

The Hon. J.R. CORNWALL: Poor John interjects and shows his gross ignorance. I am talking about the scheduled fee as contained in the Commonwealth medical benefits schedule. The Hon. Mr Burdett really should sit there quietly and learn. That includes the standard fee for a standard consultation. The Hon. Mr Burdett interjects and says, 'They do charge the scheduled fee'. It is well known that that is not the case. I refer to the Investigator Clinic at Port Lincoln, which is a cartel or monopoly operation. Doctors there have been charging $15 or thereabouts since 1 February.

The present scheduled fee is $12, yet the Hon. Mr Burdett interjects and says 'They charge the scheduled fee'. Clearly, they do not. The doctors at Ceduna increased their fees from $11.60 for a standard consultation to $15.20 on 1 February. Suddenly, they discovered that their expenses had increased by 30 per cent between 31 January and 1 February. The Hon. Mr Burdett really should keep his finger on the pulse. To sit there and interject and confuse the gamut of the Commonwealth medical benefits schedule with the particular isolated area of diagnostic services shows that he has not begun to grasp his shadow portfolio. My resume continues:

These have always been set by arbitration and negotiation between the Federal Government of the day and the Australian Medical Association and are set out in the Commonwealth medical benefits schedule.

Since the advent of Medicare an increasing number of doctors in South Australia have been charging above the arbitrated and negotiated schedule fee. Many are setting fees between $13 and $15.50 for a consultation rather than the arbitrated $12—

which has applied since 1 March—

For specialists 'the gap' in some cases is very substantial. This problem must be addressed by Government and the medical profession during 1984. No system of medical refunds, whether through public or private insurers, can be very satisfactory unless applied to negotiated, agreed maximum charges. The situation is being carefully monitored.

That was our position on 6 March and remains our position today. The letter continues:

From the patient's point of view, it is obvious that direct billing for all patients (so-called bulk billing) under which the doctor accepts 85 per cent for all patients and direct bills Medicare is the most convenient and economical. While both the Federal and State Governments encourage this procedure, we have always made it clear that this remains at the discretion of the doctor.

That went out over my signature on 6 March. A subheading 'Medicare, Pensioners and other Health Card Holders' stated:

The South Australian Government urges, and if necessary may insist, that all Department of Social Security card holders (pensioners, the unemployed and low income earners) be charged no more than the Medicare refund. Further, it strongly urges that no cash transaction should be necessary, that is, that doctors should use bulk billing arrangements for all card holders. This seems to have continued to be a common, but by no means universal, practice in South Australia.

At no point have I ever said or suggested that all doctors should bulk bill all patients. Under the heading 'Medicare and Hospitals', we stated:

Any person who elects to be a public patient at a public hospital (whether as an outpatient or inpatient) is entitled to free treatment by doctors appointed by the hospital.

The Government believes that, because high income earners pay a high Medicare levy, it is perfectly equitable for them to elect not to pay additional private hospital insurance if they do not wish to do so. It is called 'freedom of choice'. However, many doctors in non-metropolitan hospital practice are disputing this.

Again, on 6 March I (the person who was supposed to be the bully-boy, the bloody-minded one) said:

Again, in the spirit of compromise which has characterised our negotiations (despite some ill-informed editorial comment to the contrary in South Australia) we have agreed to further discussions between the South Australian Health Commission and the doctors in an attempt to resolve this current impasse. Until this dispute is resolved our advice to patients attending provincial and recognised country hospitals is that the matter should preferably be settled by amicable negotiation between doctor and patient before non-urgent hospital admissions.

They are hardly the words of a bully-boy. I have tried consistently and persistently to negotiate settlements with the AMA in this State for more than two months. I will come back to that in a moment. I went on to state:

However, we insist that ultimately no patient must be denied admission to any hospital.

So, the theme that has run through this whole discussion or dispute is that we always return to those persons who are my primary responsibility, namely, the patients. The letter continues:

Any person wishing to be treated as a private patient (whether at a major public hospital, a recognised country hospital or a private hospital) should purchase appropriate hospital insurance.

Again, so much for socialised medicine where we are saying that, if one wants to be in the private system, one should take out private insurance. That is the official statement of the Minister of Health in South Australia on behalf of the Government. I further stated:

In the case of private hospitals, patients should check the category of the hospital and its daily charges against the refunds payable by their private health insurance funds before admission.

The State Government would expect doctors to accept Medicare refund only as full payment of medical fees from pensioners who insure for private hospital cover and elect to go to the hospital of their choice as a private patient.

At this point I would like to go on record again—as I did in this Council earlier this week—and state my support for general practitioners and their fight to earn a decent and substantial income within private medical practice. I said the other day—and I repeat, because I cannot say it too often and cannot have it on the record too often—that I have no argument, as the Government has no argument whatsoever, with the diligent, competent, general practitioners out there in the community. We have no argument by and large with the sorts of incomes that they are earning. I will put figures on that, even in this place.

I would think that a diligent GP who is grossing $100 000 plus a year, giving a net income in the range of $45 000 to $55 000, is earning every dollar that he puts into the bank. I have no argument with that at all. That has been my position consistently and remains my position.

The Hon. L.H. Davis: The counsellor from the Commonwealth Department of Health didn't think that.

The Hon. J.R. CORNWALL: I am not responsible for this mythical counsellor from the Commonwealth Department of Health. It is a matter that was introduced in some strange and garbled way by the member yesterday. The matter does not fall within my area of ministerial responsibility. It is interesting to note that, despite the fact that I said yesterday that if I was supplied with the gentleman's name and details I would certainly take up the matter, all

I have had to date is a surname thrown at me from 6 feet across the Chamber somewhere. If the Hon. Mr Davis is so concerned about this person about whom he made allegations yesterday, he should give me the details in writing and I will take it up with my colleague, the Minister for Health in Canberra, immediately.

I have said that the Government and I support the right of general practitioners in private medical practice to earn a decent living. There is no argument about that. Secondly, I support and have always supported the concept of meritocracy.

Members interjecting:

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: The games that little boys play! There they sit, behaving like pre-school children as they sink into incipient middle age. There sits poor old John with his brain softening by the day, but never mind. This matter is far too important for me to digress. It is said that John Burdett carries a brick in each pocket on a windy day.

The Hon. M.B. Cameron: It would be a gold brick.

The Hon. J.R. CORNWALL: Well, it is very windy, and lightweights blow about easily on North Terrace.

Members interjecting:

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: In support of meritocracy, I repeat that those who are eminent in the profession should be adequately rewarded. I repeat what I stated the other day, namely that consultants or specialists who are eminent in their profession should not be denied the right to a six figure annual net income, in other words in excess of $100 000. However, I cannot support and will never support the small number of diagnostic specialists who exploit the system. They are principally, of course, in the Eastern States. That is the tragedy of the position that has been taken up officially by the AMA in South Australia. They are the robber barons to whom I referred a couple of weeks ago.

Clearly, in the context in which that statement was made, that referred to the rich radiologists of Sydney and the rich diagnostic specialists of the Eastern States. Indeed, in certain circumstances they have become the robber barons of the latter part of the 20th century. I was not referring at that time to the profession generally. I repeat, so that everybody gets its right and so that it is in *Hansard* for ever: I was not referring to the profession at large. I believe that those diligent, hardworking GPs earn every dollar that they put into the bank and by no means are they over rewarded for the skills that they show.

I repeat that a six-figure annual income is not unreasonable for the great majority of consultants or specialists who are eminent in their profession. However, I will not cop those in the diagnostic specialties in particular who exploit the system.

I refer now to direct billing, private medical practice and scheduled fees. Again, I must spend a little time on this issue so that I put on the record forever and for all time precisely what my attitude and the attitude of the South Australian Government is. First, I refer to the alleged attempt to nationalise medicine. That is absolutely ludicrous.

The Hon. C.M. Hill: It is the thin edge of the wedge.

The Hon. J.R. CORNWALL: It is the thin edge of stupidity, and that sort of statement does no credit to the one or two members opposite who have a little grey matter. First, I will explain why. The clear fact (and what should be the undisputed fact) is that Medicare underwrites private fee for service medicine in perpetuity. One of the criticisms of the ideologues has been that this removes the opportunity to move rapidly towards some form of salaried medical service. I have no difficulty with the fact that Medicare underwrites private fee for service medicine in perpetuity. It is as simple as that.

Secondly, if some of the doctors in their wilder moments perceived any threat whatsoever from the Hawke Government in relation to nationalised medicine, I remind them that they have the protection of the Constitution and the High Court. That is not a bad double: it is not bad protection.

I refer now to the question of bulk billing. There have been numerous letters to the Editor; in fact, I have been amazed by the diligence of the spouses of some of our doctors. Letter after letter has appeared, and these letters have really set out to get poor Neil Blewett and me. I would simply make clear that I bruise and bleed the same as anyone else, and I have found the past two months to be extraordinarily difficult—indeed, it has been the most difficult period of my life. It has been alleged that I have been out there kicking and bashing doctors, but a fair number of doctors have been kicking and bashing me, and a fair number of doctors' spouses, mothers-in-law, cousins, and anyone else they could round up have been kicking and bashing me. Those people have had many more column centimetres than I have had. I am not complaining about that: I believe in the saying that, if one cannot stand the heat, one should get out of the kitchen. I guess that I have a fairly high profile in politics.

I repeat that, underneath this rough exterior, there is a constitution that bleeds and bruises the same as anyone else. I resent the fact that there has been widespread inference that the South Australian Government or I insisted in some way that all doctors should bulk bill. I have never done that, and I do not believe that that action is desirable. It is convenient for patients—that is all I have said.

The Hon. J.C. Burdett: But you were going to publish a list.

The Hon. J.R. CORNWALL: Poor John interjects. He is a brilliant one for the interjection—some of his interjections are so witty that the Chamber falls about. The honourable member has said that I intended to publish a list. During the silly season I wrote a story to a wellknown political journalist in which I suggested that we would consider, or might consider, publishing a list of doctors who direct bill all patients. However, after initial investigation, I rejected that suggestion.

The Hon. L.H. Davis: Cabinet rejected it—let's get it right.

The PRESIDENT: Order!

The Hon. R.I. Lucas: You got rolled.

The PRESIDENT: Order! Both the Hon. Mr Lucas and the Hon. Mr Davis will have an opportunity to speak later.

The Hon. J.R. CORNWALL: They are not well, Sir—poor chaps.

The Hon. L.H. Davis: We have private health insurance, too.

The Hon. J.R. CORNWALL: I am really not very interested in the Hon. Mr Davis's private health insurance, because he will not be covered at Hillcrest or Glenside.

The Hon. L.H. Davis: That's another defect of the scheme.

The Hon. J.R. CORNWALL: Regrettably, one of the defects of all the five Fraser schemes and the Medicare scheme is that a patient is not covered in our mental health psychiatric hospitals, so unfortunately the honourable member's private insurance will not help in that situation. After initial investigation, the notion of publishing a list of doctors who bulk bill was rejected by me—

The Hon. L.H. Davis: And Cabinet.

The Hon. J.R. CORNWALL: —and by Cabinet as impractical and unnecessarily provocative in the prevailing climate. However, I must say very strongly that the Government and I deplore the actions taken by some doctors who raised their fees, especially those for standard consul-

tations, by up to 30 per cent from 1 February. Overnight, those doctors discovered, spurred on one suspects by the ideology of the mad right, that their costs had increased by 30 per cent. Fortunately, only a small number of doctors increased their fees. I am unable to say the exact number at this time, but the matter can be monitored very carefully, I am pleased to say, because of the Medicare computer arrangements. In the fullness of time, we will know how many doctors were involved, and if the number is unreasonably high we might have to consider action, but certainly nothing more than monitoring is occurring at present.

The doctors received a 4.1 per cent increase from 1 March. Although that was not a very big rise, it was in line with CPI movements and with the central wage fixation system which, like Medicare, is an integral part of the prices and incomes accord. So, the doctors, like everyone else, received a 4.1 per cent increase. Further, an independent senior commissioner of the Commonwealth Conciliation and Arbitration Commission is undertaking an on-going inquiry, and I can tell the Council that a recommendation for an additional rise is anticipated; I believe that that will come forward within two months. I have not the slightest idea what the rise might be, but I am sure that it will be equitable and it will be in concert with the guidelines that apply centrally on wage and salary earners throughout this country.

Two matters have concerned me about the Commonwealth medical benefits schedule in the past, one being that it is quite unnecessarily and indeed grotesquely complex. About 10 000 items are contained in the extraordinary red book (as it is called) and, if one can find an item number, one has some sort of chance of being paid. It is grotesquely complex, and it must be simplified. I believe that moves are afoot in that regard, and certainly the South Australian Health Commission has urged for the past four years (regardless of the Government of the day) that the Commonwealth medical benefits schedule be tackled.

Another matter has concerned me just as much: the terms of reference for those people inquiring into rises in doctors fees over the years have changed, often at short notice, and the reviews have taken place intermittently. There has been no degree of certainty regarding either the terms of reference or the frequency with which those rises are granted. I specifically took this up as a matter of importance when the three State Health Ministers and Dr Blewett met on Monday. At that time I urged that a degree of certainty be introduced by standard terms of reference and regular arbitrated reviews of the schedule of fees. This is one example where I can tell members opposite that being in Government beats the hell out of being in Opposition. Within an hour of making that recommendation and having it adopted, as we sat around the table in a Senate committee room in Canberra, it was taken to Federal Cabinet and adopted by it. Cabinet immediately authorised Dr Blewett to enter into negotiations with the AMA on this basis. So, that was another significant initiative that I took on behalf of the profession because, I believe, it deserves a fair and reasonable go.

In the interim, while we await this recommendation of the Senior Commissioner of the Commonwealth Conciliation and Arbitration Commission and the result of the negotiations by Dr Blewett and the Federal AMA on regular arbitrated reviews of the general schedule of fees, the South Australian Government urges all doctors to abide by the fees set in the Commonwealth medical benefits schedule.

Finally (and do not think that we are getting near the end—perhaps the beginning of the end), I come to the question of diagnostic specialists and the current dispute. I would like to give a very brief history of events as they have occurred in this State in the past three months. The Medicare agreement was signed by the Premier and the Prime Minister on 27 January 1984, in other words, two months ago. To that point in South Australia negotiations between the South Australian Health Commission, the South Australian branch of the AMA and the South Australian Salaried Medical Officers Association have been progressing quite satisfactorily over a period of some weeks, since before Christmas last year.

As a matter of deliberate policy, I had remained outside that negotiating process. I believed that it was appropriate at that time for the Commission to negotiate without political let or hindrance and outside the direct political process. I was delighted when talks between the South Australian Health Commission representatives, including the Chairman, (Professor Garry Andrews, a distinguished member of the medical profession), and the President of the South Australian Salaried Medical Officers Association, Dr Lloyd Coates—

The Hon. L.H. Davis: He is a pretty reasonable fellow.

The Hon. J.R. CORNWALL: He is a very reasonable fellow. If he could control his members and had the sole conduct in South Australia we would have reached an accord a long time ago. After that meeting a joint statement was issued to the media. The following morning on 28 January, two months ago, the *Advertiser* published an article under the headline 'South Australian doctors/Government sign truce'. At that stage I was confident that contracts would be signed in South Australia and that threats to withdraw services, which at that stage had been made only in the Eastern States, would remain across the border. Neither the Health Commission nor I had any valid reason to believe at that time that the negotiations in South Australia would not be concluded with honour and to the satisfaction of all parties concerned.

However, almost three weeks later on 16 February, the *Advertiser* carried a story under the headline, 'Doctors threaten to withdraw services'. The article said that a meeting of doctors in Adelaide had resolved to withdraw services if the dispute came to a head. That was the first indication we had of any impending industrial action or threatened strike action in this State. I will not canvass at length the discourtesy to the Health Commission or the South Australian Government of union negotiators who purported to be conducting meaningful discussions and who then turned around, without notice, and publicised threats to strike without notifying either the Commission or the Minister regarding the sudden turnabout in position. However, I point out that, in circulating copies of resolutions adopted by the meeting of doctors, SASMOA carefully stipulated that it had not endorsed the motion which carried the militant strike threat.

The reason for that was to become all too clear. The threat to withdraw services and initiate industrial action was made directly in this State as a result of the intervention of two Sydney radiologists who flew to Adelaide for the express purpose of gingering up South Australian doctors. They saw, in their estimation, that South Australia was perhaps the soft underbelly, that we had come close, because of our amicable negotiations to that point, to having doctors sign the new contracts which, by that time, were circulating around the hospitals.

The threat of the withdrawal of services has been hanging over the heads of South Australian patients ever since. In every step that I have taken since that time, I have done my best to remove it. In talks with the AMA and SASMOA and at every opportunity in the media I have repeated again and again that there is no reason for South Australian doctors to withdraw their services.

On 10 March the *Advertiser* published a letter that I wrote in response to an editorial in that newspaper. The letter pointed out that I had informed both the AMA and

SASMOA that officers of the South Australian Health Commission and I remained willing to investigate and negotiate on any matters of concern related to the introduction of Medicare. My letter was quite long and I was treated very well. However, there is a limit to the patience of the letters Editor of the *Advertiser*. For space reasons, the paper did not include an important sentence in that letter, which read:

> Consisent with my endeavours to achieve consensus, I have informed both the AMA and SASMOA that, if they will make a strong recommendation to members that they supply the requested letters, I will recommend that Cabinet defer even the introduction of selective price controls on diagnostic services pending the individual doctor's responses.

The letter concluded:

> The door is still open.

When I announced on 12 March that we would be forced to invoke very selective price controls to enable private patients in South Australian public hospitals to qualify for medical benefits, I said that there was simply no need for South Australian patients to be under threat, that they should never have been placed in the position, and that the advice of the officials of the AMA to their membership should have been to avoid that unnecessary threat in that State. A direct appeal to doctors in a statement that I put out at that time included the following:

> I appeal to individual doctors to reconsider their position and co-operate with the Federal and State Governments in their very reasonable efforts to protect patients.

On 14 March the *Advertiser* editorial said that doctors would be wise to heed the plea of our Minister of Health, Dr Cornwall, to reach some kind of compromise. That was a reference to the letter I sent to all doctors registered in South Australia. The text was published in full in the *Advertiser* and *News*. I took every possible opportunity to push for a compromise, and I stressed repeatedly that medical services should not be withdrawn. The Adelaide *News*, as late as last Friday (23 March) carried a story under the headline 'South Australian talks may solve doctors' dispute'. In that article by Dianne Beer the South Australian President, Dr Southwood, was quoted at some length:

> While the Federal Minister, Dr Blewett, was refusing to give doctors assurances or hope—

this is quoting Dr Dick Southwood of course—

> talks in Adelaide gave promise of 'amiable understanding'. He said, 'Mr Bannon and the South Australian Health Minister, Dr Cornwall, could swing the change.'

On Monday, encouraged very much by what Dr Southwood said here on Friday and motivated as I had been throughout this dispute by a desire to be involved where it was happening so that we could influence decisions as they were taken, I flew to Canberra to meet with Dr Blewett and my colleagues the Ministers of Health in New South Wales and Victoria. Previously, we had tried to meet with the doctors. Only a few days previously, in fact, Dr Blewett had initiated moves to get the Federal and State Presidents of the AMA together with the Federal Minister and the State Ministers of Health. That initiative was rejected out of hand by the AMA.

Notwithstanding that, as I said, on Monday—only two days ago—I flew to Canberra to meet with my colleagues. The main points agreed at that meeting, outlined and released by Dr Blewett, are that the Government will be introducing a Bill into the House of Representatives this week to amend section 17 of the Health Insurance Act. That will, first, provide for Parliamentary scrutiny of the Minister of Health's power to make guidelines. The Senate will have the power to disallow any guidelines put forward by the Minister that it felt were unreasonable. Indeed, both Houses of Parliament—either House of Parliament as I understand it—will have the power to disallow. Secondly, to that extent the so-called Haines amendment (I pay a tribute to Janine Haines for having raised it in the first place) will give the option of Medicare benefits being payable either where there is agreement in writing between the hospital and the doctor or where State legislation or regulations ensure that the guidelines are complied with.

In other words, since we have failed in some instances to get agreement in writing from doctors with their hospitals, the Commonwealth is moving to validate completely and ensure that the action that we have taken here with respect to selective price control will guarantee under the existing legislation or guidelines that private patients in public hospitals continue to be eligible for Medicare rebates. In addition, as I said earlier, Federal Cabinet has agreed in principle to a regular arbitrated review of the scheduled fees and has authorised Dr Blewett to enter into negotiations with the AMA to that end. The guarantee which the Prime Minister and Dr Blewett gave on 2 March still stands; that is, that the Government will implement—it has given the undertaking in advance—whatever consultative and appeal mechanisms are recommended by the Pennington Committee of Inquiry.

In the meantime, the Hawke Government has given a further undertaking that it will not extend its guidelines beyond schedule fee compliance and diagnostic services during the period of the Pennington Inquiry. In other words, they will apply to the schedule fees in the diagnostic service area only, pending the outcome of the Pennington Inquiry. It is obvious that any Federal Government of whatever political persuasion would find it impossible to introduce unreasonable guidelines under section 17 because, under the amendment now proposed, it would require the consent of both Houses of Federal Parliament and also the agreement of State Parliaments to any complementary legislation or regulations made by State Governments.

In addition, in the most recent talks that I had with Dr Southwood on behalf of the AMA yesterday, I gave a further specific undertaking on behalf of the South Australian Government that the South Australian Health Commission will examine at my request on an individual case basis any disadvantage claimed by metropolitan based specialists or surgeons visiting country hospitals. I have gone absolutely as far as it is possible for me to go to act as the honest broker—

Members interjecting:

The Hon. L.H. Davis: Everyone is wincing behind you.

The Hon. J.R. CORNWALL: I must say that I usually find the Hon. Mr Davis a peculiarly revolting sort of person in his manners in this place. On this occasion I find him more disgusting than usual. His behaviour, when we are talking about the possibility of industrial action by doctors withdrawing their services, the possibility of a doctors' strike for the first time in the history of South Australia, quite frankly it is absolutely beyond the pale.

The PRESIDENT: Order! The Minister had no need to sink to that depth to explain what he thought of the Hon. Mr Davis. It is not becoming of the Minister or anyone else in this Parliament to continue in that way.

The Hon. J.R. CORNWALL: Is that a matter of personal opinion, an observation or is it a ruling being made from the Chair?

The PRESIDENT: Really, it is a request to you. It is simple enough to understand.

The Hon. J.R. CORNWALL: I am not about to apologise for it—

The PRESIDENT: I am not asking for an apology.

The Hon. J.R. CORNWALL: —because I want to make it clear to you and anyone else who sits and giggles and tries to make political capital out of a situation where we have for the first time in the history of South Australia the threat of a possible withdrawal of services by doctors in

this State—I find it disgusting and I am not about to apologise, I repeat. At least on this occasion the Hon. Mr Davis should try to control himself and, uncharacteristic though that behaviour would be for him, try and treat the matter as one of great importance to this State.

The PRESIDENT: Order! Let me explain to the Minister that I accept all of that, but not the expression that he used to emphasise what he thought of the Hon. Mr Davis's remarks. I ask the Minister not to continue in that vein.

The Hon. J.R. CORNWALL: I make it clear for the third time that I will not apologise.

The PRESIDENT: I am not asking you to apologise; otherwise we would have another one.

The Hon. J.R. CORNWALL: It is about time that the conservative Opposition in this State started to use the word 'patient' and started to be concerned to some degree. I am close to being finished in this contribution. I want to conclude by indicating that for seven long and I would suggest weary years the Fraser Government and the Federal AMA had the opportunity to devise, refine and implement some sort of satisfactory alternative to Medibank, some sort of satisfactory system through the private health insurance funds that would have worked. They never did so. By the time we had the fifth Fraser scheme—user pays—we had the most inequitable scheme of all.

The conservative Federal Government of Mr Fraser and the AMA through those seven long and weary years, with respect to health insurance, proved to be politically bankrupt. At the end of that period almost two million Australians and almost 180 000 South Australians were not covered by medical or hospital insurance of any description. For them, sickness was a disaster. For us charged with the financial management of the public hospital system in South Australia it was just as big a disaster.

The Opposition must declare where it stands. Let Opposition speakers as they get to their feet one after the other explain to the people of South Australia exactly where they stand. Do they support industrial action by doctors? Do they support the threat of the AMA on behalf of doctors that they will withdraw their services? Would they ultimately support a doctors strike? Let them stand up and tell us exactly where they stand in the matter. By their actions today at lunchtime at least the Hon. Mr Burdett has shown us where he stands: he stands with the red necked right faction of the profession in South Australia. Fortunately, that is not very representative, but he is on the steps of Parliament House. He is joining that percentage of the profession in their threats to withdraw.

The Hon. C.M. Hill: You were ordered not to go there.

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: And honourable members reckon that I overdid it when I described him! God bless me and help me—I am praying on my feet. Does the Hon. John Burdett support industrial action and threatened strikes by doctors in this State? He stood today with militant medicos on the steps of Parliament House. Does he stand with them on threats to withdraw services, to strike and to jeopardise the welfare of South Australian patients? He never used the word 'patients'. It has been conspicuously absent in every contribution that he has made. Doctors have every right to protest at Parliament House and elsewhere; that is their democratic right, but how far—

The Hon. J.C. Burdett interjecting:

The Hon. J.R. CORNWALL: And he doesn't like the truth, either. How far does the Hon. Mr Burdett go—

An honourable member interjecting:

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: —with his mischief making, his ignorance, and his irresponsibility? The Dickensian lawyer skulking around country hospitals attempting to foment strikes, pretending that country hospitals are in some way different! He does not even have the courtesy to inform me as Minister of Health when he is going. He does not even have the courtesy or the manners—

The Hon. M.B. Cameron: What about the time that you went to the Royal Adelaide?

The PRESIDENT: Order!

The Hon. M.B. Cameron: They had to complain about you.

An honourable member: They almost had to ring the police.

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: —to even inform my office as he skulks about trying to stir up industrial action.

The Hon. J.C. Burdett: That is not true.

The Hon. J.R. CORNWALL: It is quite true. The Liberals are tittering as they sit on the Opposition benches.

An honourable member: You are teetering; you are tottering.

The Hon. J.R. CORNWALL: I assure you that I am very strong.

The Hon. M.B. Cameron: No wonder all your colleagues have gone. I would be ashamed, too.

The Hon. R.I. Lucas: They are not game to sit behind you.

An honourable member: I'll sit behind John Burdett any day.

The PRESIDENT: Order!

The Hon. J.R. CORNWALL: Anybody who sits behind John Burdett has gone about as far down the scale of politics as it is possible to go. I am not surprised that so many of the members opposite are breathing down his neck for the shadow portfolio, though. The Hon. Mr Burdett is attempting to misrepresent the outstanding Sax Report, attempting to stir some members of the profession for sheer cynical political purposes, acting with no more than the worst and most basic opportunism to foment and stir industrial disputation in the profession.

In the matter of Medicare generally—more specifically in his attempts to sabotage everything that I have put in place for two months in order to reach some sort of interim peace arrangements with the profession in this State, in his endeavours consistently to play the only sort of politics that he understands (the negative politics of the classical conservative)—he has behaved without honour, ethics and credibility. I reject the motion and the Hon. Mr Burdett's dishonest performance in this Council.

The Hon. M.B. CAMERON (Leader of the Opposition): That is the saddest performance that I have seen from a Minister of the Crown in this Council in my 13 years in Parliament. That was absolutely disgraceful. I have never seen a Minister stoop to such depths to try and justify what he has done. What has he done? He and his Federal Minister are the sole cause of the threat to strike by doctors: not anybody else, but the Minister of Health here in this State and his Federal counterpart. If we did not have them in control we would not have the problem that we have with this scheme. He talks about how he has tried to put in interim peace plans. Why do we need peace plans? Because those Ministers have gone rampaging around this country's health system, creating absolute havoc in the health community. No wonder he has gone out, because the sense of shame that he must feel at what he has done to the health community would drive anybody in his position from the Parliament!

The Hon. C.M. Hill: He has taken his bat home.

The Hon. M.B. CAMERON: No, one of the problems that he has is that he cannot control himself. He has absolutely no self-control; so he cannot sit in here and listen

because he would find himself once again absolutely unable to control himself. He talks about people being media performers. If ever there was a media performer in politics it has to be the Hon. John Cornwall. The thing that surprises me is that the Attorney-General, a person for whose political perspicacity I have some regard—I understand that he was the only person in the Corcoran Cabinet who said, 'No, do not let us have an early election'; I give him credit for political perspicacity; the only thing is that he did not have a single supporter—

The Hon. C.J. Sumner: Oh well.

The Hon. M.B. CAMERON: That's life. I just wanted to point out something about the Hon. John Cornwall; I will come back to it; fear not. I cannot understand why the Attorney-General, being a man with great political perspicacity, puts up with a situation where this Minister's performance is causing so much damage to his Government. I suppose that as members of the Opposition we should be grateful for his presence. If we were pure political animals we would be really grateful for his presence, but we have some fear that the damage he is doing both to the health community and to the confidence of the community in the health systems in this State will be irreparable.

In relation to the Medicare fiasco (and whether or not it is a good scheme), one can only call it that, he has created such damage that it will never be considered on its merits. It has no hope because of the manner in which the Minister has conducted himself, along with the Federal Minister.

The Hon. C.J. Sumner: Haven't you seen the opinion polls?

The Hon. M.B. CAMERON: If the Attorney is happy with that situation, I am happy for the Government to leave him with that portfolio. That is fine by us as politicians, but wait until the Government sees the end result. All we have to do at the next election is display a photograph of the Hon. Dr Cornwall with the caption 'Do you want this man to continue to run your health system?' The voters will flock to us. However, that is the Government's problem. I am giving the Government a mild warning and trying to resurrect a bit of its political perspicacity. I think it is unfortunate that—

The Hon. C.J. Sumner interjecting:

The Hon. M.B. CAMERON: If the Attorney thinks that that is a good result, he had better look at the factors which are brought into it and which also bring in the country vote.

The Hon. C.J. Sumner: Labor is quoted at 51 per cent.

The Hon. M.B. CAMERON: That is the Government's problem. I assure the Attorney-General that that is not a very good result for the Labor Party. The Attorney should get his people to work that one out. The Minister of Health, who has created such problems for the Medicare scheme and for the people who are trying to get themselves organised, reminds me of a little Jack Russell terrier dog that I had years ago. He used to bark whenever he felt that he was not getting enough attention, and he also used to bite people, quite unexpectedly and for little or no reason. If the dog was punished for these two transgressions, he would appear on the surface to be sorry; he would apologise and would do all the right things; but we knew underneath that he did not mean it and that he would do it again some time in the future.

The PRESIDENT: Order! I ask the Hon. Mr Cameron to get on with the motion.

The Hon. M.B. CAMERON: That is exactly what I am doing, Mr President. The Minister of Health reminds me very much of that particular dog. In the end I had to have him put down, but I am not suggesting that that should be the end result for the Minister of Health. However, I think that his Party should put him down in relation to his portfolio. Of course, that is not part of this debate, but it is a bit of well thought out advice. What the Minister has done in relation to Medicare is absolutely disgraceful and stupid: he has gone into this matter with his usual bully-boy tactics and has tried to extract the maximum coverage for himself. One of the great problems is that his ego is bigger than his common sense.

The Minister has gone into the Medicare debate promoting his own ego and forgetting that some time in the next three years this system must work. The Minister is not letting it work. Every time the Minister gets near a conflict situation he exacerbates it. The Minister called sections of the medical profession, the 'red-neck right wing'. What does he think that achieves? Why does he say these things as a Minister of Health? The Minister denigrates his own position by saying these things. The Minister has no need to say these things within this argument, but he cannot contain or control himself. The Minister cannot control his tongue, and that has caused half the trouble with the present situation.

Instead of sitting down and talking, the Minister gets up and abuses people. That is where he has got into so much trouble with this issue. The Minister is like a bull in a china shop: he steps in, kicks everyone out of the way, and then wonders why people do not come around at least to agree with some of his views. Why should they do that when the Minister has already hit them, kicked them and knocked them down? The Minister must surely understand that the health community is a very delicate area, and certainly it is not the place for him with his present attitudes.

Frankly, I do not think there is any hope of the Minister's ever changing, because it seems to me that he is uncontrollable. The Minister is uncontrollable not only from outside but also within himself; he just cannot help himself. I trust that the Council will support the motion, if for no other reason than to try to persuade the Minister to calm down a little and to go into things with a reasoned view and not with his present method of just kicking everyone around and then wondering why on earth everyone reacts against him. I trust that the Council will support the motion.

The Hon. R.J. RITSON: In supporting the motion and having regard to the latitude that you, Mr President, have permitted previous speakers, I hope that you will grant me the latitude to speak about Medicare.

The Hon. J.C. Burdett: That's what the motion is all about.

The Hon. R.J. RITSON: Yes. During the Minister's discourse I had the impression that it was about something else. The first thing that strikes one about Medicare is its name. Unfortunately, the name implies that it might have something to do with medical care. Of course, it does not. The care with which one is treated when one is sick depends on a number of factors: the skills and knowledge of the people who are looking after a patient; the morale and the amount of caring and enthusiasm that those people have for the job; their availability and whether or not they are there (a matter that I think people living in rural areas should contemplate very seriously); and it depends to some extent, but least of all, on a patient's means to reward those providing the care. Of course, Medicare is not about sick people. When one is sick one is interested in the availability of help, the skills of the people providing the help, and their caring.

Medicare is a political financial operation; in fact, it is a form of wealth redistribution amongst those who are not sick. I think it is a political exercise to deceive people into believing that, while they are well, one of their regular expenses, namely, health insurance, is cheaper. It is easy to demonstrate that that is not the case. As the Hon. Mr Burdett said earlier, there is absolutely no way in which Medicare has anything to do with the treatment of sick

people. It does not add anything to the system at the clinical coal face; it simply adds more bureaucratic layers.

I understand that thousands of imprint machines have been added to the, I think, 7 000 000 plastic 23rds. These cards have a short life, which means a multi-million dollar recycling of that little bit of bureaucracy. Indeed, Medicare may reduce the availability of health care to citizens by involving doctors in additional administrative humbug. As an example, the Federal Minister of Health, Dr Blewett, said that patients did not actually need a Medicare card to receive treatment, although it was a convenience that would speed up the accounting procedures associated with treatment.

That led people to believe that they were compulsorily enrolled and that, if they received a Medicare card, that was incidental. Recently, the medical profession was circularised with some rules about the use of Medicare cards. Amongst the rules was the direction that, if a patient arrived at a doctor's surgery without a Medicare card, the doctor must telephone a particular number and inquire whether the patient had a Medicare card.

If the patient had a Medicare card, the details would be given over the telephone to the doctor to facilitate the claim. If the patient did not have a card, the doctor would enrol the patient there and then with a stack of Medicare forms that he would keep in his surgery alongside the stack of hundreds of other forms. If the doctor did not make the inquiry and enrol the patient, benefits would be refused. If one person in one thousand throughout Australia leaves home their Medicare card, every day there will be thousands of phone calls whizzing backwards and forwards and, at each end of the phone, there will be a receptionist who is probably paid $7 or $8 an hour spending five to 10 minutes on each of those thousands of telephone calls. This is but one example of the type of bureaucratic overload that a system like Medicare will place on doctors and patients alike. Yet, we have Dr Blewett's statement that one does not need a Medicare card, along with an instruction issued that, if claims are made without the card or the inquiry, benefits will be refused.

So, the public has a first impression of a Medicare with no new facilities but only additional bureaucracy. However, something worse and more sinister is happening: a very pernicious form of medical rationing by the Government is beginning. It is not just sensible cost containment, as I will illustrate in a moment, but true medical rationing. The question of withdrawal of item numbers has received some prominence in the media recently in relation to the examination of new-born infants by paediatricians. Since the benefits for such have been removed in most cases, members of the general public have written with alarm to the newspapers to express their concern at this form of medical rationing.

It might be of interest to members to know that the circular communication from the Commonwealth Department of Health which indicates the withdrawal of item numbers for benefits contained some dozens of other item numbers which were also either withdrawn, amended or rationed in some way. They were item numbers relating to perhaps far less common conditions, so the public would not in any numbers have perceived that it was a fairly major publication of new restrictions on benefits that were available to patients.

In the past two days in this Chamber we have seen, by way of letters of complaint raised by the Hons. Mr Burdett and Davis, a highlighting of the way in which the Federal Government is about to screw patients mercilessly—patients who are suffering extreme pain and who may be dying. We have had an example of the Commonwealth medical counsellor who should not himself take too much of the blame, because, I am sure, he has his riding instructions. This man has been approaching doctors and accusing them of over servicing. Let us take the matter raised by the Hon. Mr Burdett, namely, a person with chronic pain subject to supervision by a highly specialised pain clinic at a university medical centre. That patient had called out the family doctor after hours on average six times a month and the response to the call had been made by a locum service.

Can anyone explain how, for the life of me, it can be the fault of the owner of the practice if a patient calls the locum service in the night for pain relief? If the Commonwealth Government wants to stop that, it is absolutely useless to go to the doctor's surgery and accuse him of over servicing. Dr Blewett should go to the patient's house, stand by the bed and tell the patient not to call the doctor at night, even though that person may be in pain, or not to call the doctor so often. Dr Blewett should go to that patient's home and tell him not to call the doctor when in pain because that is the way in which the patient initiated and totally justified calls arose. We had other examples—

The Hon. J.R. Cornwall: It is a good story, but it is not too accurate.

The Hon. R.J. RITSON: Has the Minister been out there? Incidents have been reported where, in the case of a patient, the frequency of blood testing slipped above the average. Our wonderful caring Medicare system, which will give this great new deal to the people of South Australia, tells the general practitioner that patient X is having too many blood tests, and that patient X has got leukaemia. That is taking medical rationing a bit too far, but I am sure it will go further.

The Hon. J.R. Cornwall: There is also the well documented case of the dermatologist who—

The PRESIDENT: Order!

The Hon. R.J. RITSON: Thank you for the protection of the Chair, Mr President. If my accuracy is questioned, a little later in my discourse I will level the Hon. Dr Cornwall with the greatest inaccuracy that has ever come from his mouth or from anyone else's mouth. I hope he is in the Chamber when I get to that point.

From where have we come to get to this point? If we look back through the history of health insurance in Australia, we find that in the 1940s and 1950s there were at first, lodges and then special insurance policies for poliomyelitis and other diseases—a patchwork of individual forms of insurance with gaps between them. Certainly, it was necessary to create a more appropriate general layer of insurance to protect the sick. This was done by a combination of the evolution of the pharmaceutical benefits scheme from the original free medicine of the late war years, which was designed to make penicillin available to people, and the Commonwealth Government subsidies to private health insurance, provided that those insurance agencies were non-profit organisations.

By the late 1960s, added to this now generally well-developed Commonwealth subsidised health insurance system, there developed a system called subsidised medical or health benefits. This was a system whereby a person who was disadvantaged, under-privileged or in any other way genuinely unable to afford health insurance, could apply to the Commonwealth and, provided that was their circumstances, the Commonwealth Government would pay the premiums on that person's health insurance. That person would then take an SHB card to an insurer of his choice and obtain the insurance policy at no net cost to himself. Such a person would arrive at the doctor's surgery with his chosen package of private health insurance and with his dignity and freedom of choice. That system worked well and was probably the most socially just system in Australia's history. The Labor Party very deliberately destroyed that

system. The incoming Whitlam Government, as everyone knows, produced hyperinflation and—

The Hon. C.J. SUMNER: I rise on a point of order. This motion deals with the introduction of Medicare in South Australia, but the honourable member is rambling all over the place. I can only suggest that some control must be brought back to the debate in terms of relevance, and what the honourable member is now embarking on has nothing to do with the motion before the Chair.

The PRESIDENT: I hope that the honourable member takes note of those remarks.

The Hon. R.J. RITSON: I take a point of order, Mr President. Quite clearly, I am speaking about the introduction of Medicare, and in order to do so I must refer to the situation pertaining prior to its introduction to make a comparison.

The Hon. C.J. Sumner: The motion concerns the actions of the Minister of Health in relation to Medicare: it is not concerned with Medicare at large.

The Hon. R.J. RITSON: I will continue in my present vein and see where it leads us. The very substantial subsidised health benefits scheme was destroyed by the Government's freezing the level of the means test by holding it down in the days of hyperinflation during the early stages of the Whitlam Government until the recipients of that benefit were disfranchised. This produced a group of people who faced a newly created problem and this provided the basis for the introduction of Medibank, Medibank being justified as a solution to the problem that the Labor Government had created by destroying the subsidised health benefits system.

The subsequent changes to the health system in Australia were nothing short of a disaster, and here we see the ultimate disaster in that Medicare is an economic exercise and a wealth redistribution exercise. It is an exercise to which the commitment of the Labor Party is ideological and total. The way in which Medicare has been brought in certainly supports that contention. It did not come in as a result of a careful analysis of the health problems of all people, a full understanding of all the problems that would be encountered, full consultation and negotiation, or from a deep study. It was the other way around. Medicare is not a natural consequence of a genuine need: it is an ideologically necessary imposition in the view of the Labor Government, regardless of all the problems.

Medicare will be imposed in a Procrustean fashion. Of course, Procrustes was a Greek figure who pretended to offer hospitality to wayside travellers looking for a bed. However, if the bed was too long, Procrustes put the traveller on a rack and stretched him until he fitted the bed and, if he was too short, Procrustes cut off his feet until he fitted the bed. This ideological concept has been imposed without any real study or any real desire to make the bed fit the traveller. The bed is fixed: the bed is Medicare, and everyone darn well has to fit it or else be stretched or have his feet cut off. That is what is happening with medical rationing, and that is why for the first time ever in Australia we saw that spectacle on the steps of Parliament House. It is the work of Dr Blewett and Dr Cornwall.

Dr Cornwall's part in this matter is pivotal. The powers that created this Medicare web are more State powers than Commonwealth powers. The constitutional limitations upon the Commonwealth are probably such that the Federal Government has very little power to do anything to make a person behave in a particular way with regard to health insurance or health treatment. The only power it has is the power of the purse strings. So, essentially, Dr Cornwall and the other State Health Ministers have been caucusing right across Australia, making decisions and promulgating guidelines that are supposed to apply equally from Tumby Bay to Wagga Wagga, all of this being worked out by the State Health Ministers. I am sure that Dr Cornwall is extremely influential in this sphere, because he has a vague idea of what medicine is about, whereas Dr Blewett does not. Dr Blewett and the Federal Government are very important, because they hold the shotgun. The whole thing has been planned, using State administration, State powers and threats of State legislation: Dr Blewett stands up quietly and says, 'I have steered an Act through Parliament which gives me the discretionary power to withhold benefits from patients. If you don't do what your State Minister says, I will withhold those money benefits.' It is as simple as that.

The Labor Party collectively through its little medical Mafioso meeting of Labor State Ministers and the Federal Health Minister, a little conspiracy, worked out a plan, determined the contracts, and then Dr Blewett stood back and said, 'Do what you are told or I will withdraw the benefits.' It could not have happened without Dr Cornwall's not only complying but also conspiring. It is usual for State Ministers to go to bat for their States. We were told without much conviction that Mr Bannon was most firm with Mr Hawke over the Adelaide to Darwin rail link, though perhaps Mr Bannon did not do anything. At least it was accepted amongst the body politic and the citizens of South Australia that it is right for the Minister to go to bat for the people of the State and argue (not conspire or collude) with his Federal counterparts for the benefit of the people of the State. If the view in the letters to the Editor is representative of public feeling in South Australia, it is very clear that the people of this State see Medicare as a disaster and an affront. People wonder whether the Minister will bat for them.

The Hon. C.M. Hill: Where is Dr Cornwall now?

The Hon. R.J. RITSON: That does not matter: I will save a precious little bit until he returns, and he will come back eventually. This matter cannot be allowed to pass without reference to country hospitals, because country people face a special plight. Under this wealth redistribution scheme and exponential form of taxation (the 1 per cent levy) country people have been levied exactly the same amount as city people. Honourable members will bear in mind that in return for the levy people get free public hospital treatment.

If people live in the city they can trot down to the Children's Hospital and see a paediatrician. In other words, they can with some slightly less convenience obtain the same range of treatment as people privately insured. But when one looks at the country it is obvious that there is no way in which the Government can deliver those people their 1 per cent's worth. People living in the country are served by small hospitals which, by and large, provide general practitioner services and are completely devoid of facilities which mark the major public hospitals as places of academic excellence and high technology.

So, the Government has to try to find a way to pretend to the country people that they are to get their 1 per cent's worth. What is happening now is a little exercise of a game of pretend where the hospitals are being told that they should accept certain Medicare beds and, by calling them 'Medicare beds', they will somehow have an immediate transplant of the wonderful public hospital facilities for which they are being levied. In fact, they get the same GP, bed, and hospital. Their only choice is whether or not they want a bill. In fact, what is happening in very large numbers is that people are making the simple choice of going into these hospitals as public patients. They are pretend public hospital beds, because those hospitals cannot deliver the services which I have mentioned. All they do is drive away GPs and visiting surgeons, and this drift in country hospitals is becoming an avalanche.

A doctor in one country practice told me that he has only about 20 per cent of his private patients left. I guess that, if the doctor sticks that out, and most doctors will, the patients will not notice very much difference until they really need treatment and come to town and, if they have dropped their private insurance, they will be dependent upon the public hospital system. This is the crunch. The first thing that will happen is that visiting specialists will not visit the country in anything like the numbers that they have in the past if this system prevails. People who previously could and still should provide for themselves by way of medical insurance, but are prohibited by law from doing so, will be tipped into the public welfare system in far greater numbers than the Government ever dreamt of.

The Hon. Dr Cornwall, during the Estimates Committees debates in reply to questioning from, I think, Mr Oswald, stated that he thought the drift from privately insured persons to those totally dependent on Medicare would be about 4 per cent. He said, 'about 4 per cent', because he is a master of the rubbery figures and was trying to justify the 5 per cent cut in surgical sessions at the Royal Adelaide Hospital. I guess that it was in the Minister's interests to minimise the size of the drift into the public system under those circumstances so that he could demonstrate that the public hospitals would not be stressed.

Then, of course, the Hon. Dr Cornwall and Dr Blewett have, for a year or so, been bandying around this figure of 2 million people who could not afford private health insurance in the past and who will be admitted to the public health care system by Medicare. Out of a population of 16 million people, 2 million is a good deal more than 4 per cent: it is roughly 12 per cent. So, one gets the two different estimates, depending on which point of view the Minister wants to defend. I think that that is a great understatement, considering what is happening in the country now. We will see the terrible spectacle of long waiting lists, overworked public staff and falling quality of care simply because the group of people who previously could and did provide for themselves have been forcibly tipped into a welfare system where they are going to compete for scarce resources against the truly needy. That is not a just system. But, it never was. It is a wealth redistribution exercise. As the Hon. Mr Griffin said earlier, it is a political exercise to distort the CPI, to give the appearance of control of inflation when the next CPI figures come out and to further screw the workman in his next wage adjustment which, of course, will be CPI, indexed. Of course, it is nothing about medical care.

The Hon. G.L. Bruce: I might have missed the point. Why won't the specialists go to the country now?

The Hon. R.J. RITSON: Because they had a certain sort of relationship in the past and they are being turned into Government doctors without having any say. It is very onesided. I will respond to the interjection, as it raises a good point. Anyone offering a job and hiring a workman does so by offering conditions. If the conditions are not attractive and not accepted, one has to change the conditions. One does not say, 'Well look, you do not like the pay and conditions I am offering you but come and work for me or I will burn your house down.' That is what the Hon. Dr Cornwall and Dr Blewett are jointly doing. They are saying, 'All right, we will offer you some lousy conditions, we will cut your pay, we will bureaucratise you immensely and, if you do not accept the conditions under which you treat public patients, we will 'burn your house down'; we will pull the plug on your private practice; we will take your "provider" number out of the computer.' They are the sorts of reasons why I do not think that doctors, in sufficient numbers, will go to the country any more.

I turn now to specific rebuttals of points raised by the Hon. Dr Cornwall. I begin with his gross misrepresentation of statements he said were made by Dr Southwood in relation to a particularly skilful and famous orthopaedic surgeon who was to come to Port Augusta Hospital. In effect, Dr Cornwall said (and it is a pity that I do not have access to the tapes or *Hansard* at this stage) that there was a wellknown prominent orthopaedic surgeon who had been recommended by Dr Southwood as an excellent man and who would be working at Port Augusta Hospital, although Flinders University had been trying hard to get him as he was so good. I spoke to Dr Southwood about this and have his agreement to quote him. He said, 'I did not recommend the man. How could I when I had never heard of him.' I made inquiries amongst other surgeons and discovered a surgeon who had worked as an orthopaedic surgeon in Hong Kong, which is where this orthopaedic surgeon was coming from. I was told by the surgeon I inquired from that he knew of him but could not vouch for his professional skills as he knew little of them and it appeared he was not a particularly prominent orthopaedic surgeon.

The Hon. R.I. Lucas: Has the Minister misled the Council?

The Hon. R.J. RITSON: Just told a lie.

The Hon. J.R. CORNWALL: I rise on a point of order. The honourable member should withdraw and apologise.

The PRESIDENT: That is one of the words that, for some reason or other, is not Parliamentary.

The Hon. R.J. RITSON: I understood that the great distinction in the dispute on the matter that was argued regarding the *sub judice* rule was as to whether the words were, 'That is a lie,' or 'He is a liar.' I thought that that was a very important distinction upon which the Minister pins high hopes.

The PRESIDENT: The point of order was called on the reflection that he told a lie, and I ask the honourable member to withdraw it.

The Hon. R.J. RITSON: I do withdraw that remark: I will put it in a different form. What the Hon. Dr Cornwall told the Council this afternoon was clearly untrue in very many material aspects. I suppose that being such a busy man as he is he does not actually go to these people and say, 'What did you say, what did you recommend?' Perhaps reports come from other people to his desk and without any reflection on the Public Service things may be misconstrued on the way.

The Hon. J.R. Cornwall: I am not willing to say who was at the meeting or blow my cover, but I can assure you that he is a very senior, very intelligent fellow. He would eat fellows like you before breakfast.

The Hon. R.J. RITSON: I am sure he would beat me up in the orthopaedic field. I do not claim any expertise there.

The Hon. J.R. Cornwall: He is not an orthopaedic man.

The Hon. R.J. RITSON: The only point I make is that during the course of his speech the Minister came forth with so many inaccuracies that I cannot let them pass. He said that Dr Southwood recommended the man. Dr Southwood said, 'I could not have recommended him, I never even heard of him.' Dr Southwood said that he inquired of some other surgeons, one of whom had heard of him when working in Hong Kong but that he could not recommend his expertise because it was not well known. Finally, on the question of Flinders fighting for him—and I am not necessarily attributing all of this to Dr Southwood—but I understand that the question of registration of foreign graduates and the question of a public hospital appointment was raised and he ended up with Port Augusta obviously, but I am told that Flinders was suggested because it is easy to get jobs there; they are very unpopular.

The Hon. J.R. Cornwall: He has an English fellowship; he is well regarded. The Department in Hong Kong is as good as any in the world.

The Hon. R.J. RITSON: I sincerely hope—

Members interjecting:

The Hon. J.R. Cornwall: You are the original goose; I feel sorry for you.

The PRESIDENT: Order!

Members interjecting:

The Hon. J.R. Cornwall: I feel sorry for you: you are the original goose.

The PRESIDENT: Order! I call the Hon. Dr Cornwall to order. I expect him to come to order.

The Hon. J.R. Cornwall: What about the rest? Don't single me out. That is grossly discriminatory.

The PRESIDENT: You happened to be the last one talking. I do not mind. You seem the hardest to stop. Honourable members should stop interjecting now and let the Hon. Dr Ritson continue.

The Hon. R.J. RITSON: Thank you, Mr President. The Hon. Dr Cornwall not only misled the Council on that issue, which is not so important, but he misled on his estimates of the transfer from private to public. He made a number of other extraordinary comments during the course of the debate but I cannot find the list of the horrific things he said. The Hon. Dr Cornwall by very strong implication stated that the staff at the Adelaide Children's Hospital—

The Hon. J.R. Cornwall: The medical staff.

The Hon. R.J. RITSON: The medical staff, the staff association, passed a resolution opposing industrial action. Am I correct in interpreting the Minister's words in that way? It would appear that no such motion was put, that there was no resolution either drafted or put to the meeting.

The Hon. J.R. Cornwall: Would you be disappointed if they had? They indicated clearly that they would not strike. Whether they did it by resolution or otherwise—you seem disappointed! You and Burdett and that fellow from the South-East amongst others are dead disappointed that you cannot get the doctors to withdraw their labour. You ought to be ashamed of youself.

The PRESIDENT: Order!

The Hon. L.H. Davis: Cool consensus!

The Hon. J.R. Cornwall: Legh the flea!

The PRESIDENT: Order!

The Hon. R.J. RITSON: Certainly, I do not want to see anyone withdraw their labour.

[*Sitting suspended from 6 to 7.45 p.m.*]

The Hon. R.J. RITSON: Before the dinner adjournment I was attempting to draw some threads together to demonstrate the effect of Medicare.

The Hon. L.H. Davis:—Threads amongst the gold.

The Hon. R.J. RITSON: Yes! They are more like threadworms.

The Hon. C.M. Hill: The Minister does not seem to be in his place.

The Hon. R.J. RITSON: His absence simply reflects his disregard for the citizens of Australia and South Australia. I pointed out that the Minister, in his speech, had gone to extraordinarily great lengths and had employed a large number of inaccuracies amounting to untruths to fudge the issue. One that I made a point of emphasising was his remarkable attempt to demonstrate that a particular surgeon's appointment to Port Augusta was an example of the world of academia beating a path to Australia's door. Nothing is further from the truth. Australia is or should be part of a world market in expertise.

As with the advent of nationalised medicine in other countries, so with the advent of Medicare in Australia: we will see a drought of real excellence in our State medical system. It is true that we have not only enough but more than enough young, inexperienced doctors. We have plenty of new graduates seeking junior trainee places in our public hospital system; we have plenty of junior registrars seeking training in specialties such as general surgery, but we do not have plenty of good general practitioners, specialist surgeons and cardiologists in their middle and later years of life.

The Hon. G.L. Bruce: Why is that?

The Hon. R.J. RITSON: The Hon. Mr Bruce—

The Hon. Frank Blevins: He was out of order; ignore him.

The PRESIDENT: I do not think that the honourable member need answer him.

The Hon. R.J. RITSON: Mr President, I—

The Hon. Frank Blevins: Throw him out.

The PRESIDENT: Order!

The Hon. R.J. RITSON: I can hardly get in a sentence without an interjection.

The PRESIDENT: Order! I am finding it very difficult to relate the honourable member's argument to this censure motion. I ask the honourable member to be more specific.

The Hon. R.J. RITSON: Wherever medicine is being nationalised, as it is being nationalised in this case—make no mistake about it—it has produced a flight of real expertise. In some cases this has been simply an accidental response to the additional bureaucratic burdens placed on doctors who are nationalised. In some cases it has been the response to a deliberate anti-doctor culture established by the ruling bureaucracy. We have seen in the case of the Hon. Dr Cornwall, let us face it, the get David Craddock exercise in terms of trying to attack the best heart surgery unit in the nation. We do not have a lot of good senior surgeons and senior general practitioners who are prepared to go out and work in the country.

An honourable member interjecting:

The Hon. R.J. RITSON: They may go to America; we have an awful lot of top expatriated academics, scientists and surgeons in America who will not come back. They are a good deal less likely to come back to the system that is being thrust on us now. In the end that only hurts patients.

The Hon. Dr Cornwall has gone to extraordinary lengths to boast of the excellence of the system here in South Australia and of the way that he has improved it. By conniving and conspiring with the other Labor States and the Federal Government to produce this system, sure, there will be plenty of doctors, but they will not be good doctors or enthusiastic doctors. By attacking the top of the profession the Minister is making sure that the trend will continue.

One matter that I wanted to raise in this debate was the effect of the Medicare issue on employment, just to demonstrate that it has not been thought through at all. Much has been said of the benefits of bulk billing, which, just to keep the terminology straight, is the direct billing of all one's patients; that is, one uses the card and the imprest print machine and sends no bills. We are told that doctors will easily make up the 15 per cent income reduction by the administrative savings that they will make. I have already explained the administrative burden that it imposes, one example being all the telephone calls that one must make every time someone leaves a Medicare card behind. How would a doctor save in the face of the additional administrative work load on administrative costs by bulk billing? There is only one way: he is not going to save money on rent; his rooms will not contract if he bulk bills. He will not save money on his telephone; and his telephone expenses, if anything, will increase by ringing and arguing with Medicare all the time about the administrative bungles that will occur. The only way that he can save money is to fire someone.

Dr Blewett insists that these savings more than compensate for 15 per cent gross or 30 per cent net of loss of income. Medical practitioners employ on average, I expect, about 2½ full-time equivalents each. One has either one or two

full-time persons employed in the rooms; sitting behind that one has part-time jobs: cleaners, accountants, and so on. Just think if the 2 000-plus private, self-employed practitioners took Dr Blewett's advice and fired someone. It would be somewhat akin to GMH's closing down. I am sure that that has not been thought through. I am sure that the Government's reply would be that it would not reduce unemployment at all because the extra bureaucracy would re-employ them and they all could go to Canberra. It is a terrible mess.

The arguments that the good Dr Cornwall raised about the greedy doctors wanting more than 4 per cent in line with the general wage increase deserves a little comment from only one point of view: the whole purpose of a wages pause was to preserve employment so that the wage payer could continue to employ and even increase his employment of the wage earner.

In this situation the private self-employed practitioner who in every way is akin to a small businessman (someone running a delicatessen, and so on) is a wage payer. The Government has told doctors that they can increase their fees to the same extent as a wage earner. Of course, there is nothing left, after paying one's own extra wages cost, with which to employ more people, even if the gross revenue had not been reduced by 15 per cent, as the Government wants.

Members interjecting:

The PRESIDENT: Order! Members will delay the debate further if they persist in interjecting without any good cause.

The Hon. R.J. RITSON: For the life of me, I cannot understand the Labor Party's logic.

The Hon. J.R. Cornwall: He makes me sick. He's a very bad doctor, too.

The Hon. R.J. RITSON: I think I heard that. As I was saying, for the life of me I cannot understand the logic of the Labor Party, because it says, 'We shall have a wages pause to restore profitability and, hence, an ability to employ. We will restore the profitability to small business so that it can employ, but in the case of medical practitioners across the nation, we will not allow them to increase their fees by anything like the amount of their increase in costs. We will go up 4 per cent and down 15 per cent so that they can employ more people, and then we will tell them that they must bulk bill because of the advantages in administrative savings, when those advantages only lie in firing someone.' This approach has not been thought through. It is Procrustean: they are cutting off the feet or stretching the patients to make them fit the bed, because nationalised medicine is the Labor Party's ideological total commitment.

My final comment relates to the complete intellectual dishonesty of the Minister of Health in some of the remarks that he has made about the role of section 17. This relates to the reason behind the censure motion. I have canvassed some of the terrible faults of Medicare. If the Minister had fought for South Australian patients, to eliminate those faults, perhaps this motion would not have been moved. Not only did he not do that: he has continually and in an intellectually dishonest way tried to justify his part in the conspiracy.

The Hon. J.R. Cornwall: It's light relief. He's a political accident, and everyone should understand that.

The Hon. R.J. RITSON: Mr President, the microphones do not help with the constant din of empty vessels.

The Hon. J.R. Cornwall: That hurt!

The Hon. R.J. RITSON: We must be getting near the mark, if members opposite squeal that loud. The Minister has said repeatedly that all of his anti-doctor moves have been to conform to Federal law. The Minister has told us that section 17 requires him to take certain actions so that patients can get their money. We have repeatedly explained that that is not so, and repeatedly the Minister has redoubled his efforts in that direction. All section 17 does is to give discretion to the Minister to withhold benefits. The Minister can proclaim at his discretion, from day to day, almost any set of criteria whereby benefits may be refused a patient. Section 17 simply gives the Minister that power.

There is nothing in section 17 about price control and, in fact, it contains nothing specific at all: it gives Ministerial direction. The Hon. Dr Cornwall is a powerful part of the Caucus of Labor Health Ministers which determines how that discretion shall be exercised.The Hon. Dr Cornwall went over to the Eastern States and chatted with Dr Blewett, trying to teach him a little bit about human medicine, and they plotted the guidelines. They worked out how Dr Blewett should exercise his discretion. The Hon. Dr Cornwall then returned to South Australia, changed hats and said that he could do nothing because he was bound by Federal law. That is absolute damn rubbish! The Hon. Dr Cornwall is bound by the Ministerial exercise of discretion which he just helped to plot in the Eastern States. It is completely intellectually dishonest of the Minister to stand in this Council and say that he cannot do anything because he is bound by the Federal Act. In fact, the effect of the Federal Act gives discretion to the Minister which he uses daily to plot these schemes. For that reason, I support the motion.

The Hon. C.J. SUMNER (Attorney-General): Honourable members who have contributed to this debate have roamed far and wide. I suggest, with respect, that they have roamed far beyond what the motion before the Council really directed our attention to. The motion, which was not moved by the Government but by the Hon. Mr Burdett, is quite narrow in its compass and states:

> That this Council censure the Minister of Health for his dismal and divisive handling of the introduction of Medicare into South Australia.

The motion is confined to the introduction of Medicare into South Australia. It seems that members opposite wanted to talk about everything but the introduction of Medicare into South Australia. They wanted to talk about the Minister of Health's role in a whole range of other areas. In introducing the motion, the Hon. Mr Burdett mentioned Port Pirie, and some other matters. Other members opposite mentioned Medicare in general. Hardly any member opposite, including the mover, confined their remarks to the motion before the Chair.

By any criteria, in terms of the charge that is included in the motion, honourable members opposite have failed dismally. The motion refers to Medicare in South Australia. The fact is that members opposite did not stick to the point but ranged over Medicare itself, using such phrases as 'nationalisation', 'ideological', and 'making the doctors scapegoats'. Members opposite did not analyse Medicare. The fact is that Medicare is fee-for-service; it is an insurance system; it does not say anything about the system of delivery of health services. Medicare provides a means of levying the people of South Australia for health insurance, and it does that in an equitable way by imposing on higher wage earners in the community, such as members opposite—

Members interjecting:

The PRESIDENT: Order! There have been enough interjections.

The Hon. C.J. SUMNER: —a higher levy than it does on lower wage earners. That is one factor in the Medicare system which did not exist under the Fraser system of health insurance. It is equitable in the sense that it falls more heavily on those who are more able to pay than on those who are less able to pay. It is comprehensive—everyone is Australia is covered by Medicare. Everyone has a right to proper medical treatment. Previously there were two classes:

there were those who were insured and those who had to rely, in effect, on the poverty card to get their medical treatment.

The Hon. L.H. Davis: How many do you think are better off under Medicare?

The Hon. C.J. SUMNER: Everyone is covered under Medicare.

The Hon. L.H. Davis: How much better off are they under Medicare?

The Hon. C.J. SUMNER: Certainly those people on lower incomes are better off.

The Hon. L.H. Davis: Nine out of 10?

The PRESIDENT: Order! The Hon. Mr Davis will have a chance to speak in a moment.

The Hon. C.J. SUMNER: They are paying less than under the private insurance system of the Fraser Government. It is a progressive levy, and honourable members opposite ought to be able to understand that. It is a comprehensive cover with a progressive levy, and those who can afford it pay a higher levy than those on lower incomes. It is essentially fee for service. That aspect of it has not changed. So, the argument about nationalisation or some ideological drive by the Labor Government to put doctors out of business or to bring them under State control is absolute nonsense. The fact is that the basic system of Medicare is still fee for service. It is the method of funding for medical services in this country that has changed. The corollary is that there needs to be protection for the public against overservicing and overcharging. Those sorts of controls exist in the Medicare package.

Honourable members opposite also have forgotton that Medicare was one of the crucial and principal planks of the Labor Party prior to the last Federal election. It was agreed to by people at that election and passed by both Houses of Parliament, and it is a scheme that has been accepted by the Australian people. Certain doctors, urged on by honourable members opposite, are fighting a rearguard action against what has been agreed to by the Australian people and the Federal Parliament.

Today in the debate honourable members have launched criticisms at Medicare itself. They did not concentrate on or say very much about the introduction by the Minister of Health of Medicare in South Australia. The fact is that the Minister of Health, Dr Cornwall, is not responsible for the introduction of Medicare in South Australia. It was a Federal Government initiative, agreed to by the Federal Parliament after an election at which it was a fundamental policy of the Party that won Government. Honourable members opposite have ranged over a broad spectrum of criticism of Medicare which I have refuted and which they have tried to drag into the debate in an attempt to criticise the Hon. Dr Cornwall.

The critical issue in this area, apart from the criticism by honourable members opposite of Medicare (with which I have dealt) and apart from their extraneous drawing into the debate of other matters allegedly involving the Minister of Health, is what options were open to the South Australian Government, given that the Federal Government was committed to proceeding with Medicare and given that it was passed by the Federal Parliament. When I interjected on the Hon. Mr Burdett during his introduction of the motion, he had no answer. He merely said that he would not co-operate with the Federal Government. He said that he would have gone to Canberra and complained about Medicare.

The Hon. J.C. Burdett: Exactly!

The Hon. C.J. SUMNER: What would have happened? The Queensland Minister objected. Did that make any difference to the situation? The fact is that the Federal Government is committed to the introduction of Medicare because it was put to the people at an election and passed by both Houses of Parliament. When the Hon. Mr Burdett said that he would have said something to the Federal Government, I then asked what would happen if the Federal Government was firm in its resolve. It is clear that the Federal Government is firm in its resolve. The State Government and the Minister of Health therefore had no choice in order to ensure that private patients in public hospitals were not being placed in a position of possibly being refused refunds from Medicare. The only way out was to impose some regulation on certain doctors' fees.

The doctors could have provided a letter of agreement to charge the scheduled fee or below the scheduled fee, but they have not done so in some cases. What was the option, given the Federal Government's determination to proceed with Medicare with its electoral mandate to do so and given that there was an obligation to protect patients in this State from a possible non-refund of their expenses incurred in public hospitals where they were treated as private patients? The action that had to be taken by this State Government was that taken to aim to impose price control.

Members interjecting:

The Hon. C.J. SUMNER: It was not a question of whether there were any—

The Hon. L.H. Davis: Don't you find it remarkable to introduce price control when there was no need for it?

The Hon. C.J. SUMNER: There was a need for it because the Federal Government introduced Medicare. It was determined to proceed with it.

The Hon. J.C. Burdett: This is not in section 17.

The Hon. C.J. SUMNER: It is in the guidelines laid down by the Federal Minister under section 17.

The Hon. J.C. Burdett interjecting:

The Hon. C.J. SUMNER: But the Minister has not changed them. I put the question to the Hon. Mr Burdett but he cannot answer it. If he were the Minister of Health and the Federal Government said that section 17 is there and stays, that the guidelines are there and stay—

The Hon. J.C. Burdett: That is hypothetical.

The Hon. C.J. SUMNER: It is not hypothetical.

The Hon. J.C. Burdett: It is, because you have not asked him.

The Hon. C.J. SUMNER: The Hon. Mr Burdett does not understand what has happened. Section 17 is there and the guidelines are there.

The Hon. J.C. Burdett: The Minister can change them. Have you asked him?

The Hon. C.J. SUMNER: I understand that the Queensland and Tasmanian Ministers have asked him.

Members interjecting:

The PRESIDENT: Order! If members are going to sing out, why do you not all sing out together?

The Hon. C.J. SUMNER: What is the point of asking the Minister? There is no point. If the Hon.—

The Hon. J.R. Cornwall: You'll have a stroke, John. Settle down. You have done very badly with this initiative. Just grin and bear the scars.

The Hon. J.C. Burdett: I'd have said that I've done fairly well.

The Hon. C.J. SUMNER: If the Hon. Mr Burdett was Minister of Health in this situation, in order to protect the Medicare refunds for private patients in public hospitals, he would have had to introduce something similar. Medicare is a fact: it was introduced by the Federal Government with a mandate and passed by Federal Parliament, and South Australia must co-operate with it as best it can. In this sense, it had to introduce legislation in order to protect those patients.

The only option in South Australia was price control. So there is really nothing in this motion. The Hon. Dr Cornwall

has not been dismal or divisive in his handling of the introduction of Medicare in South Australia. The Minister is not even responsible for the introduction of Medicare in this State: the Federal Minister is responsible. The Hon. Dr Cornwall has protected patients who might be entitled to refunds under Medicare. No case has been made out. In all the other areas referred to by honourable members, as they ranged far and wide beyond the terms of the motion, the Hon. Dr Cornwall has a very good record, and he has outlined the significant achievements that have been made in the health portfolio since he became Minister.

The Hon. L.H. Davis: And is the Premier very happy with his performance?

The Hon. C.J. SUMNER: The Hon. Mr Davis interjected previously.

The Hon. L.H. Davis: I asked whether the Premier was happy with the Minister's performance.

The Hon. C.J. SUMNER: I think he is, yes. I do not think there is much doubt that the Premier is happy with the Minister's performance. It would appear that the people of South Australia are happy, too.

The Hon. L.H. Davis interjecting:

The PRESIDENT: Order! I hope that the Hon. Mr Davis gets a better response to his speech than his response to the Attorney's speech.

The Hon. C.J. SUMNER: In the *Bulletin* of 3 April, under the heading 'Public Opinion—Steady at the Helm in Two States' (one of those States is South Australia), an opinion poll taken in January/February 1984—

The Hon. L.H. DAVIS: I rise on a point of order. An opinion poll has little relevance to the motion before the Council.

The Hon. C.J. SUMNER: I am sorry that the Hon. Mr Davis has raised a point of order, because it was his interjection that led me to raise this point.

The PRESIDENT: Order! I do not uphold the point of order, but I hope that the Attorney does not develop a debate in that vein.

The Hon. C.J. SUMNER: I will not develop it very much, but I have to respond. The poll shows that the popularity of the ALP is 51 per cent; Liberals, 39 per cent; National Party, 2 per cent; and Australian Democrats, 7 per cent. Normally, the preferences of the Australian Democrats are about 50/50, and that gives the Labor Party a two-Party preferred vote on the last election of 54½ per cent.

The PRESIDENT: Order! The Minister is now straying from the motion.

The Hon. C.J. SUMNER: My comments are clearly relevant, because Dr Cornwall is responsible for that approval rating of the South Australian Government. The Hon. Mr Davis's interjection is also rejected by the evidence of the figures in a national bulletin today. Dr Cornwall's record as Minister of Health has been excellent. There have been many new initiatives, and he is well recognised in the Health Commission as a Minister with ideas and drive, and for making a significant contribution to the development of health care in this State. I can only ask the Council to reject the motion and most of the irrelevant sentiments expressed by members opposite in this regard.

The Hon. C.M. HILL: I support the motion, which censures the Minister of Health for his dismal and divisive handling of the introduction of Medicare in South Australia. The whole reason for this motion is the Minister's political conduct, not the matter to which the Attorney has just referred about what the State Government has to do because of a Federal law. It is the manner in which the Minister has been conducting himself that is causing problems.

The problem to which I refer was highlighted only today in this debate after the Hon. Mr Burdett moved and spoke to his motion. What happens to the Minister when he comes under political pressure publicly happened to him today. He did not keep a cool head in this debate and sit and wait for those who supported him to speak, as is the usual practice: he jumped to his feet to defend himself and to reply, in the knowledge that speakers on this side still had to speak. The point is that the Minister could not control himself. Let us be perfectly honest—in a situation like that, the Minister cannot control himself, as he could not control himself at Port Pirie, at certain hospitals or in the presence of doctors. That is the Minister's problem. Not only could he not control himself (he jumped to his feet and replied) but also he immediately left the Chamber. I ask honourable members: has anyone ever seen—

The Hon. C.J. Sumner: What did he do? Did he jump to his feet and leave the Chamber?

The Hon. C.M. HILL: No, the Minister left the Chamber after he had spoken, and the Attorney knows that.

The Hon. C.J. Sumner: You'd better get it clear. But he is allowed to speak before Opposition members speak. That is the normal practice.

The PRESIDENT: Order!

The Hon. C.M. HILL: No, the normal convention is that the Minister—

Members interjecting:

The PRESIDENT: Order!

The Hon. C.M. HILL: —who is under censure sits and listens to the criticism from the Opposition and then, having heard all the points that were made in the debate, rises to his feet, responds and defends himself. That is the precedent and convention. What really happened—

Members interjecting:

The PRESIDENT: Order! We must start again, with a little bit of quiet this time.

The Hon. J.R. Cornwall: This is called the politics of laughter, Mr President; they are so bad.

The PRESIDENT: Order! I hope that the Minister of Health will take heed and allow the Hon. Mr Hill to proceed.

The Hon. C.M. HILL: I make the point that the very problem from which the Minister suffers was displayed to the Council today—the Minister did his block. He jumped to his feet and responded. But, that was only half the problem. This Minister, who cannot control himself under political pressure, then left the Chamber. It is completely contrary to Westminster convention that a member who is under censure walks out of the Chamber. That his Leader allowed him to do that surprises me. I am also surprised that the Hon. Mr Blevins, who is a very shrewd tactician in these matters, did not tell the senior Minister, Dr Cornwall, to sit tight and take it. But he did not do so; he disappeared. When the Minister returned to the Chamber he did not even take his seat. He took up a newspaper or two, went out again, probably trying to cool off, and then came back. When the Minister returned prior to the dinner adjournment, he was interjecting and causing a lot of trouble in this Chamber. After the dinner break, the Minister was not in his seat, yet this motion is directed at him.

That is the Minister's problem, and that is the real source of the motion. The public of South Australia, whose opinions we on this side are reflecting in this motion, is very unhappy with the Minister of Health, and it has nothing to do with the points that were made by the Attorney-General, who tried to come to the Minister's aid when he sprang to his feet in the middle of the debate.

The Hon. C.J. Sumner: When did you expect me to do it—after the debate?

The Hon. C.M. HILL: I expect that the Attorney tried to come to his defence. I suppose that the Attorney thought he should do it soon because of the way in which the debate was going on. The Attorney said that Medicare comes under

a Federal law and that South Australia is caught up in it, and that we defend it, whether or not we like it, or whether or not we agree with certain details in it. He said, 'What else do you expect us to do other than to pursue it and to join with Dr Blewett, irrespective of what the South Australian community thinks?'

That was the main thrust of the Attorney's contribution. That is not the real matter of the debate. I will be the first to admit that Ministers, like all of us, are quite human. They have different personalities and temperaments, exercise different degrees of skill in carrying out their work and apply their own human characteristics to the way they do their tasks. Most people are different. But, there is one common requirement that Ministers of the Crown under the Westminster system have to possess and, that is, they have to be able to control themselves and their language in public and to control their political conduct.

Unfortunately, the facts are that the Minister cannot do this. From being a calm and relatively reserved person in private conversation and company, this Minister changes at the drop of a hat to become politically obnoxious and totally objectionable when he loses his temper in public. That is a fact of life. That is what the people are objecting to concerning the Minister and that is the real body of the charge being levelled against him today. When he acts in this manner he becomes an embarrassment to his Premier and, irrespective of what the Attorney says in his defence, I believe that he is an embarrassment to Cabinet and to his Party.

That is only part of the story. In the Medicare dispute which has been waged in recent months he has proved that he is not only unsuitable in treating with and confronting the medical profession, but is incapable of dealing with the Ministerial challenge that has confronted him in handling the introduction of Medicare in this State and from the State's point of view. The matter goes deeper than his own personal characteristics to which I have just alluded. Of course, we have to accept that the Minister is a socialist. He does not deny that, and several members opposite are declared socialists.

The Hon. C.J. Sumner: Not all of them.

The Hon. C.M. HILL: I said some of them. Therefore, the Minister believes in the control of salaries and remuneration. In fact, last night on television I heard him make the statement, whether or not he meant it I do not know, that he believes in the control and regulation of all salaries by the State, not only of salaries of the medical profession, but all salaries. He believes that that should be done by regulation, by Government control—by Big Brother.

The Hon. C.J. Sumner: Which salaries do you think should be controlled?

The Hon. C.M. HILL: I am not here to answer the Attorney's questions. I am making the charge as to what socialists want to achieve: they want to achieve this kind of control. The second thing that socialists want to always keep their finger on is price control. The medical profession, quite rightly, believe in professional freedom and self-regulation. Their charges in this State, particularly when one compares these charges with other professions and trades, are quite fair and reasonable.

The Minister has been challenged to list all the examples of over charging for diagnostic specialist services in this State. He was challenged the other day and could not give one example from this State. He gave a couple of interstate examples, but not one example from this State. So, we must accept from that reply that he cannot produce evidence to prove over charging by such specialists in South Australia. The specialists in public hospitals are charging the scheduled fee. We know that and the Minister knows that. But, as a true socialist, the whole deal must be placed in writing. He has to get the specialist to sign contracts and letters. Indeed, that is not only socialism, that is bordering on totalitarianism.

Members interjecting:

The Hon. C.M. HILL: It is total control. It is not imposing by regulations as to what can be charged, it is first of all getting a man to sign a contract with the State as to what he can charge. Frankly, the Minister is all for it. He supports and he pursues it. He confronts the doctors with relish, not looking for accord—the great watch word of the Labor Party throughout Australia—with the specialists.

The Hon. C.J. Sumner: Consensus is the word.

The Hon. C.M. HILL: Or consensus, but inflaming the situation with his attitude and his remarks. The Minister's excuse is that he says he is concerned about patient care. Has the Minister the effrontery to claim that he alone is concerned with patient care? Has he the effrontery to claim that the profession is not concerned with patient care?

The Hon. M.B. Cameron: He does not have the effrontery to front.

The Hon. C.M. HILL: He is out of the Chamber again. This is the problem I mentioned earlier. Has he the effrontery to say that the vast majority of members in Parliament, irrespective of which side they sit on, are not concerned with patient care? If he was really concerned he would change his ways and not adopt this confrontationist attitude with the medical profession, with whom he discusses such matters publicly. The Minister joins and supports Dr Blewett in all the unsolved problems concerning Medicare. He is at one with Dr Blewett. Not once have we seen the Minister say publicly in South Australia, as the Attorney just said, that we must go along with this because it is part of Federal Government policy and Federal law, but there are some aspects about which I do not agree.

The Hon. C.J. Sumner: I didn't say that.

The Hon. C.M. HILL: No, you said that we have to go along with the Federal Government, that you have no alternative. But, if the Minister did respond to feeling within the community on aspects of Medicare which the South Australian people have objection to he could, from some points of view, take their part on some issues. But, he does not do that. It is all the way with Dr Blewett.

Some of these problems are quite serious. I have not heard the Minister say that it is contrary to the civil liberties of the citizens of this State for the patients to be unable, under the law, to take out health insurance for the 15 per cent of each medical bill they have to pay. I have not heard the South Australian Council of Civil Liberties raise its voice on this issue and that disappoints me very much, because I am a member of that council. I think that I am right in saying that the Hon. Ms Levy is an office holder is that council. I would like to hear her view on this point, that citizens of this State can insure themselves for anything under the free market system, but the Commonwealth have passed a law that they have to pay that 15 per cent and cannot take out insurance for that proportion of their account.

That is contrary to the principles of civil liberty. The second point where the Minister joins with Dr Blewett deals with the whole problem of specialists in this State. I do not think that the Minister is supporting their cause in any way at all. He is keeping them at arm's length, and that is bringing unpopularity quite justifiably on his shoulders and, despite the figures of the general popularity of the Government to which the Minister just referred, I believe it is making the Government unpopular too. The demonstration today must be some evidence of very strong feeling.

The Hon. C.J. Sumner: How many were there?

The Hon. C.M. HILL: I am told about 200. I was not there myself. Who would have ever dreamed that the medical profession would have felt so deeply over an issue that its

members would have stood on the steps of Parliament House? Of course, the Minister should have been there, too, but Ministers generally do not seem to be going to demonstrations these days. The Attorney should have gone to the demonstration by the Vietnamese people a couple of weeks ago when 400 of those people were worried.

The Hon. C.J. Sumner: They came to see me afterwards.

The Hon. C.M. HILL: They rang the Minister after 2.30 on Friday afternoon and the Minister's staff said he could not go.

The Hon. G.L. Bruce: What has that to do with the motion?

The PRESIDENT: Not much.

The Hon. C.M. HILL: The point is that I believe the problems associated with the specialists need not have reached the stage with the feeling that has been generated if the Minister had been a little more understanding of their situation. The Minister, too, knows that this problem is the thin end of the wedge in regard to nationalisation of medicine, and no matter what he or the Attorney say about this question, people are very sensitive and fear change when they can foresee that it can be a first step towards nationalisation of anything, whether it be banks, medicine or you name it. It seems to me very simplistically—

The Hon. C.J. Sumner: How will it be done constitutionally?

The Hon. C.M. HILL: Looking at it in the simplistic way that I look at the problem, the Medicare authorities will know how much they send to each doctor under the bulk billing arrangements. They will know how much specialists are making and, if they can foresee that they can employ their own employees at a lower cost than those charges, people who believe in nationalisation of medicine will take that part: they will employ doctors in the suburbs on salaries paid by the State and anyone will be able to get free service. They will employ more specialists in public hospitals because they will reckon that in the wash-up of the whole complex issue it will be cheaper from the State's point of view for that course of action to be followed. That is one of the feared consequences of the Medicare arrangement.

Lastly, they object strongly to the Hon. Dr Cornwall's response to bulk billing and his claim that doctors should bulk bill. Today, he said that he never claimed that, but he did say that he was looking at ways and means of informing the public about those doctors who do bulk bill. If that is not pressure towards enforcing a bulk billing system throughout the profession of general practitioners, I do not know what is. He did investigate it because in the opinion of the general practitioners he was out to get the GPs. There was no need for the Minister to make that announcement. There was no need for him to investigate that possibility because the Minister knows, as I know, the vast majority of general practitioners charge the fair fee (the prescribed fee) and, when they treat pensioners and other people of limited means, they bulk bill them. It is happening all through the suburbs and it has happened whenever this system has applied. It only follows the old medical tradition of the family doctor often not charging at all when giving service to pensioners and needy people. For the Minister to try to force the system on doctors so that they have to take 15 per cent less remuneration at the same time as the Minister himself has had his hand out for a 19 per cent increase in salary is most objectionable to the public of South Australia.

The Hon. C.J. Sumner: Have you had your hand out for your 19 per cent?

The Hon. C.M. HILL: I supported it, but I do not support the Minister's trying to pressurise doctors into bulk billing, which means that doctors have to take 15 per cent less. That was quite hypocritical of the Minister. Therefore, for the reasons that I have advanced and for the reasons that have been advanced by the other speakers from this side, there is no doubt in my mind that the Minister who is again not even in the Chamber now, is not in his place in this Council when this debate of censure is in progress—

The Hon. G.L. Bruce: It has been going all day.

The Hon. C.M. HILL: What is wrong with the Minister's sitting in his seat all day?

The Hon. C.J. Sumner: He is bored with it; I've been here.

The Hon. C.M. HILL: You are not the Minister under censure—it is as simple as that. There is no doubt in my mind that the Minister's handling of the introduction of Medicare, as the motion states, into South Australia has been dismal and divisive. I believe that without doubt he is deserving of the strongest possible censure and, for those reasons, I support the motion.

The Hon. L.H. DAVIS: It seems that Government members are somewhat surprised that this censure motion is still running after nearly four hours. It underlines the concern of Opposition members towards the personal behaviour, both in Parliament and towards the medical profession, of the Minister of Health, the Hon. Dr Cornwall, and also his attitude towards the introduction of Medicare. The South Australian public has had the opportunity to see a remarkable triella over the past 12 months: public attacks on Mr Jones, the Mayor of Port Pirie; the attack on Dr Dutton from Adelaide Children's Hospital; and, most recently, the attack on Dr Peter Humble. Of course, there have been numerous attacks, some in public, some in semi-public and many within this Chamber which highlighted the Minister's fundamental instability under pressure, his low burning point and, as the Hon. Mr Hill so well characterised, the inappropriate behaviour which he exhibits in carrying out his important duties as Minister of Health in South Australia.

Of course, he is a well known bully in the sense that he attacks without compunction, without thought, shooting from the hip, but so often the biggest bullies are the biggest whingeing, whimpering whifflers and, of course, one can well describe the Minister in that sense. Whilst he loves dishing it out, he simply cannot take it.

The people of South Australia are entitled to have a Minister who looks after their interests in health matters.

I have been concerned that this Minister has not appreciated the impact of Medicare on the community of South Australia. He has been a limp lap dog of the Federal Minister of Health (Hon. Dr Blewett). He has not once stood up to his colleague. He has not once questioned publicly—and I suspect privately—any facet of the Medicare system. Let us just look at what that system is doing to South Australia.

First, it will tear the heart out of country health services. Already we are seeing a dramatic change in public country hospitals: whereas the public-private patient ratio was something like 50-50 before the introduction of Medicare on 1 February, in many hospitals that ratio has already run to 70-30 public-private. I understand that the Health Commission has instructed administrators in those public hospitals to encourage people with private health insurance to admit themselves as public patients. What are the implications of that?

The implications are threefold: first, the Government does not get the benefit of fees out of the private health funds—the Government pays the lot; secondly, the doctor receives only 85 per cent of the scheduled fee rather than the full amount; thirdly, in time, and more fundamentally, the quality of health care in those country hospitals will suffer. The reasons are simple: specialists who travel from Adelaide for one or two days to country areas—the Riverland, the South-East, the Mid-North—and who provide an

excellent standard of care in specialist services that cannot be provided by local general practitioners will simply not travel to those country areas if they receive only 85 per cent of the scheduled fee, and if the facility fee that has been proposed is exorbitantly high.

Admittedly, that facility fee is on a backburner—it is being examined at the moment—but, if it had been introduced as had originally been proposed, many doctors from Adelaide would have been travelling to country centres, and paying a 50 per cent or 60 per cent facility fee for the use of the instruments that they themselves had donated to that hospital. How absurd that is! If one takes this further, one can see that in time specialists from Adelaide simply will not travel that 100, 200, or 300 km in a day or two days to give country patients the benefit of their expertise. Instead, they will say, 'We are busy enough in Adelaide; we will stay in Adelaide; it is simply not worth our travelling to those country areas.'

What are the implications of that? Simply, the quality of health care in country areas will suffer. Indeed, one may not be too emotional in saying that it could well result in consequences that otherwise would not happen. Country patients will come to the city to the teaching and other hospitals. It will result in a lengthening of queues; it will result in a downgrading again of the quality and in the immediacy of health care in the city areas.

One should not underrate the impact of Medicare in country areas because already evidence suggests that 20 per cent or 30 per cent of people on private health insurance are being seduced to admit themselves as public patients. It has not only an implication for the visiting specialist out of Adelaide; it also has an implication for the local GP, who himself will suffer. If Medicare is bringing about a more simple, more efficient and better health care system to Australia—and that is what those disarmingly simple green and gold pamphlets suggest—that example just of country health services indicates that the community in time will learn that that is far from the truth.

These are early days in Medicare. We are only two months into the system, but I make a public prediction that within a few months we will see a build-up in queues in those specialist areas such as orthopaedics, urology and skin care in teaching hospitals. I make that prediction with some confidence. I do not like making it, but I am sure that t will be correct. I believe that immediately we are seeing the impact of Medicare in those country areas. I feel for those country people because they are the ones who are already suffering.

We have had some argument about section 17, which is part of a Federal Act. There is no necessity at all for section 17 in the operation of Medicare; yet the Hon. Dr Cornwall has introduced price control into South Australia without being able to produce one example of any specialist in any teaching hospital in metropolitan Adelaide abusing or charging more than the scheduled fee. The Attorney, who sits opposite and is responsible for price control in South Australia with his other hat as Minister of Consumer Affairs—

The Hon. C.J. Sumner: One of my many.

The Hon. L.H. DAVIS: One of his many hats. He would be one of the first to admit that it is unique to introduce price control for a service where no problem has been exhibited whatsoever. In fact, I challenge the Minister to give me one example where price control has been introduced into this or any other State where no problem has been exhibited. How absurd it is! We talk about small, efficient Government and there are pages in a *Government Gazette* setting out scheduled fees—that have to be absurd, going through this charade and mockery of introducing Medicare in the interests of the community. What hocus pocus is this that we are about! It is utter rubbish! Yet the Hon. Dr Cornwall, who is parading as the Minister of Health in South Australia for the time being, says that price control in South Australia is necessary. But, when asked by me only a few days ago to give an instance where any specialist had charged over the scheduled fee he shuffled around with his customary dexterity, refused to answer 'Yes' or 'No', and sat down to an embarrassed silence.

The Hon. C.M. Hill: He gave a couple of examples from the Eastern States.

The Hon. L.H. DAVIS: He gave a couple of examples from the Eastern States. The Hon. Dr Cornwall is not only shifty; he is also untruthful.

The Hon. C.J. Sumner: Come on!

The PRESIDENT: I think that by this time each member knows that words that relate to the truth and indicate that another member is telling lies or is untruthful are words that are disallowed, and I ask the honourable member to withdraw those.

The Hon. L.H. DAVIS: Out of respect to the Chair I withdraw the remark, although I am surprised that that is your ruling, Sir. But, I accept that. Could I say that the Hon. Dr Cornwall has misled the Council in his view towards doctors incomes? In the *Advertiser* of 28 December 1983 the Minister was quoted as follows:

> Quite frankly, bulk billing is in their (the doctors') own interests.

You will remember, Mr President, at that time the Hon. Dr Cornwall floated the idea that he would get a hit list together of doctors who bulk billed. However, as we have already observed, the Medicare pamphlets go out of their way to say that doctors are free to charge the scheduled fee or any other fee. Despite that, on 28 December 1983, the Hon. Dr Cornwall said:

> Quite frankly, bulk billing is in their (the doctors') own interests.

That is not withstanding the fact that doctors would only be receiving 85 per cent of the scheduled fee. As anyone who knows anything at all about medical costs will realise, 50 per cent of the gross fee goes immediately to cover expenses incurred in running a surgery. A 15 per cent reduction, from 100 per cent to 85 per cent of the gross fee, becomes a 30 per cent deduction in reality in the net income before tax, although I admit that there will be some saving in administrative costs and bad debts as a result of bulk billing.

Certainly, the net income before tax earned by doctors to whom I have spoken would have been subject to an effective reduction. However, the Hon. Dr. Cornwall, masquerading as a Minister of Health, has said that he thought that it was in doctors' interests to accept a 20 per cent cut in income. Today we heard the Hon. Dr Cornwall, and I will quote him as accurately as I can, as follows:

> I have never said that doctors should bulk bill, nor that it was desirable.

Therefore, it can be seen that I am quite justified in saying that the Minister of Health has misled the Council in relation to his attitude towards doctors' incomes.

It is a scandalous but not surprising attitude from the same Minister who has said that he believes that for the most part doctors are not earning too much income. This same Minister of Health, who claims to have the interests of patients and doctors at heart, is prepared to say, 'Sure, I think it is a good idea that doctors should receive a 20 per cent cut in income.' If the Hon. Dr Cornwall addressed a meeting of unionists and said, 'I want you in the public interest to take a 20 per cent cut in income', what sort of reception would he receive? Of course, there is no need for me to respond to my own question.

This very devious approach to Medicare, reflected in the Minister's attitude towards doctors' incomes, in his attitude towards the scheduled fee in the metropolitan teaching hos-

pitals, and in his attitude towards the country health care system, is all part of the concern that has been reflected in the speeches of the Opposition this afternoon and this evening. It gives me no particular pleasure to have to speak in this fashion tonight. I have already predicted that I believe that the Medicare system, floated as it is on the breeze as a wonderful new and simple health care system for all Australians, will prove to be more costly and a greater burden producing greater inequality and more injustice for the community than anyone presently believes. In time, we may well prove that the Hon. Dr Cornwall, along with his Federal colleague (Hon. Dr Blewett), has presided over a system that will result not only in the Federal Labor Government suffering at the hands of the voters (because, after all, it was a Federal initiative) but also in a backlash from the people of South Australia.

My final point is that the Minister of Health continually preaches the politics of consensus, but he practises the politics of confrontation. The Minister uses a sleight of hand to say one thing, yet his attitudes and his performance are quite the opposite. I resent the fact that a Government, whether Federal or State, believes that it can best judge the health care system that people and patients should receive. Of course, that has already been attempted through the Commonwealth Department of Health, as was instanced in the outrageous behaviour of a counsellor from the Department of Health who restricted doctor care for people with chronic pain and restricted blood tests for people with severe leukemia. It is all part of a scheme to ration medical services to the people of South Australia and, indeed, to the people of all States. It is only by a rationing of services and a building of queues that the costs of health services will be contained in Australia. I commend the Hon. Mr Burdett for moving this censure motion. I find the Minister's behaviour before and indeed since the introduction of Medicare dismal and divisive.

The Hon. R.I. LUCAS: I am delighted to see that the Minister of Health has returned to the Chamber to take his just desserts.

The Hon. J.R. Cornwall: I have been enjoying watching *Nationwide.*

The Hon. R.I. LUCAS: I understand that the Minister did not do very well there, either. It is sad that the Minister's actions require another censure motion of this type. It is sad that his political bully-boy tactics, which have been such a feature of his administration so far, have now extended to his part in the introduction of Medicare. It is sad that the Minister's actions have once again demeaned this Council and all members of both Houses of Parliament. It is no wonder that members generally are now held in such low esteem. In the words of the Hon. Dr Cornwall's esteemed colleague, the Federal Minister for Politics, the Hon. Mr Young, 'Politicians have all the public esteem of child molesters.' It is no wonder that this attitude prevails when we gain considerable publicity from Ministers such as the Hon. John Cornwall.

Much has been said in this debate, and I do not wish to canvass matters that have already been raised. I will restrict myself to five specific points. First, I refer to the Minister of Health's political bully-boy tactics in relation to Medicare. Those tactics were best instanced by his attempt late last year to publish what he called his bulk bill list, which the Hon. Mr Davis more aptly titled his 'Hit List'. The article of 28 December reports the Minister as saying:

> . . . he would submit a proposal to State Cabinet early next month for the Government to compile and publish a list of the doctors and clinics prepared to bulk bill patients' accounts direct to Medicare.

He will prepare a submission. That is rather stronger than what he suggested today when he said that he floated during the silly season a possible idea with a political reporter. There is no doubt that this was a thinly veiled attempt at political blackmail. The Minister lauded the advantages of bulk billing to medical practitioners. There is no doubt that in this way he was attempting to force medical practitioners across the board to adopt bulk billing. In the article of 28 December the Minister was grossly inaccurate, if Parliamentary tradition allows me to use that phrase. The Minister said:

> Quite frankly, bulk billing is in the doctors own interests. They are already bulk billing about 40 per cent of their patients who are pensioner health card holders.

The Federal President of the AMA, Dr Thompson, disagreed quite significantly with that statement made by Dr Cornwall. The Federal President said, amongst other things, that a national survey showed that doctors bulk billed for 28 per cent of their services. Dr Thompson went on to say that, if that figure moved to 100 per cent, doctors could lose 20 per cent to 30 per of their income. This has been a sad feature of Dr Cornwall's reign as Health Minister: he has been less than honest with his use of statistics and figures. He says that 40 per cent of doctors accounts are bulk billed.

A national survey (on which I am sure we could place greater reliance) shows that that is not so and that it is only 28 per cent. The result of Dr Cornwall's Cabinet submission was that he was comprehensively once again rolled in Cabinet. No doubt some members of Cabinet, such as the Hon. Mr Sumner—Cabinet members who have a little more political common sense—quite clearly disagreed with the attempt by the Hon. Dr Cornwall. I am sure that Dr Cornwall would readily agree that the Premier was one who did not agree, quite forcefully, with his attempt to compile a political hit list, in effect, his attempt at political blackmail. There is no doubt that when the Hon. Mr Sumner did get up in this debate he did not seek to defend the Hon. Dr Cornwall's proposal.

The Hon. C.J. Sumner: It wasn't relevant to the debate, like most of it that you have carried on about.

The Hon. R.I. LUCAS: It talks about the dismal and divisive introduction of Medicare. The matter is more relevant than many other things that have been said in this debate. It was an attempt by the Health Minister to try to achieve certain ends in the introduction of Medicare. It was a dismal attempt and one which his own Cabinet colleagues would not support. There was no support for that Cabinet submission by Dr Cornwall. For him today to attempt to say that it was an idea that he had floated in the silly season is grossly misleading.

On the question of withdrawal of new contracts, Dr Cornwall on a number of occasions has been quoted as saying, in particular in the *Advertiser* of 7 March:

> No South Australian doctor was now being asked to sign a contract. The requirement to sign new contracts was withdrawn in South Australia on 24 February.

In a letter to some 3 000 medical practitioners on 12 March, Dr Cornwall repeats that statement by saying:

> Accordingly, all the new contracts were recalled by the South Australian Health Commission and withdrawn on 24 February.

Dr Cornwall today, not having learnt his lesson, repeated those statements of 7 and 12 March and said that contracts had been withdrawn on 24 February. Dr Cornwall, on an interjection from myself, found that he was on sticky ground. I have been given information by three visiting specialists that they were not advised until 5 and 6 March—some nine or 10 days after Dr Cornwall says that all contracts were recalled by the Health Commission and withdrawn.

The Hon. J.R. Cornwall: They were officially withdrawn by the Health Commission on 24 February.

The Hon. R.I. LUCAS: Who told the specialists? How were they to find out? The Minister wrote to them on 12 March—16 days later. Are the specialists meant to have ESP? At an AMA meeting a practitioner from the West Coast indicated that he was not advised until 1 March. So, quite a number of specialists were not informed, quite contrary to what the Hon. Dr Cornwall said on 7 and 12 March. He again perpetrated that misleading impression this afternoon in this Chamber.

The Hon. J.R. CORNWALL: I rise on a point of order. I cannot allow this to go on.

The ACTING PRESIDENT (Hon. G.L. Bruce): There is no point of order.

The Hon. J.R. CORNWALL: Wait a minute. I have not explained it; you have to be joking.

The ACTING PRESIDENT: To which Standing Order is the Minister referring?

The Hon. J.R. CORNWALL: I explained this in great depth this afternoon and I am being gravely misrepresented by that junior back-bencher.

The ACTING PRESIDENT: There is no point of order. The debate has been wide ranging.

The Hon. R.I. LUCAS: Thank you, Mr Acting President. In the words of the Hon. Dr Ritson, 'a stuck pig squeals'. There is no doubt that the Hon. Dr Cornwall has been grossly misleading on three separate occasions. He laughably attempted this afternoon to suggest that he could not be responsible for tardy chief executive officers, or words to that effect. That was his laughable attempt to try to wriggle his way out of that inaccuracy.

There is no doubt that in the introduction of Medicare in South Australia Dr Cornwall's administration has been dismal. The simple question remains as to how on earth doctors or specialists were meant to know about the non-requirement to sign the contracts on 24 February, if they had not been advised by the Minister or his officers.

The Hon. J.R. Cornwall: Personally—get on the blower? You don't understand how the Health Commission operates.

The Hon. R.I. LUCAS: I do not understand how the Minister operates it. He has officers and he ought to advise them. It is a simple matter for the Minister to advise them.

The Hon. J.R. Cornwall interjecting:

The ACTING PRESIDENT: Order! If the Hon. Mr Lucas addresses the Chair, he will do much better.

The Hon. R.I. LUCAS: It is a simple matter, and it should be simple enough for a simple Minister of Health, as we have in South Australia, to realise that, if he is going to withdraw contracts on 24 February, it might appear logical at least to tell doctors and specialists that he is withdrawing them and is not requiring them to sign such contracts, rather than leave it, as I have been informed, in certain circumstances until 5 or 6 March. That would appear to be common sense. Obviously, to this Minister of Health it does not appear to be that

The Hon. J.R. Cornwall: Are you supporting industrial action by the doctors?

The Hon. R.I. LUCAS: I will get to that in a moment. No, I do not support it.

The Hon. J.R. Cornwall: Let us have it on the record.

The Hon. R.I. LUCAS: I will put it on the record.

The Hon. J.R. Cornwall: What about your colleagues?

The Hon. R.I. LUCAS: The Minister asked me; let me put it on the record for him.

The ACTING PRESIDENT: Order! The Hon. Mr Lucas will come to order, as will the Minister. The Hon. Mr Lucas will do better addressing the Chair and, when I call 'Order!', the Hon. Mr Lucas will resume his seat.

The Hon. R.I. LUCAS: Thank you, Mr Acting President, for your protection from the ceaseless interjections from the Minister of Health. I will certainly abide by your request. How on earth are 3 000 doctors meant to know if the Minister of Health or his officers will not advise them? No-one is suggesting that the Minister, in his laughable attempt to try to fend off this attack, was required to ring 3 000 doctors personally. That is laughable. The Minister has officers. He wrote to the doctors on 12 March. Surely to goodness he could have written to them on 24 February.

The Hon. R.J. Ritson: He wrote to me.

The Hon. R.I. LUCAS: Yes, he wrote to the Hon. Dr Ritson.

The Hon. R.J. Ritson: He has a medical registry, with a mailing list, and he just has to say, 'Do it.'

The Hon. R.I. LUCAS: Of course he has to. As I said previously, it is a simple act for a simple Minister, and he should have been able to accomplish it quite easily. But, obviously on this occasion it could not have been.

The Hon. J.R. Cornwall interjecting:

The Hon. R.I. LUCAS: It must have some substance: the Minister has been squealing ever since he came back into the Chamber, so obviously we are getting pretty close to the bone.

The Hon. J.R. Cornwall: You're a goose. You are a very simple young man.

The Hon. R.I. LUCAS: Mr Acting President, do I have to accept the Minister's calling me a goose across the Chamber. Is that unparliamentary?

The ACTING PRESIDENT: If the honourable member acknowledges that comment, or if he calls for a point of order—

The Hon. R.I. LUCAS: I do not acknowledge it, Sir. The Minister can call me what he likes. Obviously we are getting pretty close to the bone. If the Minister ceases to interject, perhaps we can wrap up the debate. Hopefully, we might convince the Minister to vote for the motion. I was advised this morning that some non-diagnostic visiting specialists received letters early this month, but I am not sure where those letters came from. I have been trying to check their source, although I believe that they were sent by the administrators of hospitals. The non-diagnostic visiting specialists were asked to sign letters agreeing not to charge more than the scheduled fee.

One non-diagnostic specialist telephoned the administrator of a country hospital and asked, 'Why have I been sent this letter? I do not charge more than the scheduled fee. I am in the non-diagnostic area.' The administrator of the country hospital said, 'We have been advised by the Health Commission to take this action.' Six days later the non-diagnostic specialist was telephoned by an officer of the Health Commission, who said, It was a big mistake. You do not have to worry about signing the letter agreeing not to charge more than the scheduled fee. The specialists about whom we are really concerned are the diagnostic specialists.' The non-diagnostic specialist replied, 'Why on earth was this request made?', and he was told 'We do not really know how we can distinguish on our list between non-diagnostic and diagnostic specialists.'

I do not know what the records of the Health Commission are like: the Hon. Dr Ritson may have a better idea than I. But, if that situation is correct (and I can only pass on the information in this debate), surely it is further testimony to the dismal introduction by the South Australian Minister of Health and the officers responsible to him (and I do not criticise the officers, because the Minister of Health is responsible)—

The Hon. J.R. Cornwall: You just did, and that is a pretty low tactic. That is real animal form.

The Hon. R.I. LUCAS: If that was the impression, let me say that the Health Minister is responsible for the officers under his control, and I direct my sole criticism to the Minister of Health and not to those hard-working officers

of the Health Commission who are really only attempting to do what they believe the Minister wants. If that is the situation, I believe that the administration by the Minister of Health of the introduction of Medicare in South Australia has proved to be dismal. The Minister has talked long and hard about the supposed lack of care for patients by members on this side. The Hon. Mr Hill disavowed that suggestion, but I want to repeat one area in which the Minister has not stood up for the rights of the South Australian health consuming public as he ought to do, and that is in relation to the need for gap insurance.

Not once has the Minister of Health stood up on behalf of the health consuming public of South Australia and argued to his Federal counterpart, Dr Blewett, that we should have the right to insure fully for medical costs. It is all right for high income earners such as the Minister of Health or back-benchers on this side who can afford to pay the 15 per cent, or greater, differential on some services, but what about the working poor people? For those people the cost of $150 a year is significant. Not once has this supposed champion of the health-consuming public of South Australia taken up the matter publicly and disagreed with his Federal colleagues about the introduction of this aspect of Medicare.

The Hon. Diana Laidlaw: Perhaps he agrees with it.

The Hon. R.I. LUCAS: Perhaps he agrees with it. In his response today, the Minister did not touch on the matter. He says that he defends the patients and that he looks after patients' interests first, but not once has the Minister mentioned this most important aspect of Medicare. Once again, the Min's handling of the introduction of Medicare in South Australia on behalf of the health-consuming public has been dismal.

In the final instance, I refer to the way in which the Minister's handling of Medicare has been divisive. That relates to a matter on which the Minister clearly is very sensitive—Dr Peter Humble. But we have already had it out and the Minister has indicated that he has not issued writs. I am aware that Dr Humble has not issued writs, so the *sub judice* issue has already been ruled on and does not come into it. I am not really a betting man, but if I was I would advise the Minister to organise a loan from the nearest banking institution. I will not expand any further, but, if I was a betting man, and if I was the Minister, I would organise finance pretty quickly.

The Minister's performance in relation to Dr Humble was absolutely disgraceful. For the Minister of Health to sully through the press and the media the name of a hard-working and respected medical practitioner such as Dr Humble is grossly irresponsible. The points that the Minister of Health wanted to raise could have been raised publicly on television, on *Nationwide,* or wherever the Minister wanted, or even at the zoo, for that matter, without the Minister's referring to the name of the specialist. The Minister could have made his point; he could have blocked out the name of Dr Humble; he could have referred to a specialist in a country hospital.

The Minister need not have referred to Dr Humble by name. He could have made the same points and whatever political kudos he sought by this shabby exercise in the same way. The Minister need not have mentioned Dr Humble's name, and it is absolutely disgraceful for a Minister of Health in South Australia to behave in that way. The Minister knows full well that a medical practitioner is not used to having his name bandied about as a political football in the polical arena, and he is not used to handling the press and the media. The families of medical practitioners are not used to having the press and media harass them at all hours of the day and night seeking information.

The Hon. J.R. CORNWALL: I rise on a point of order. I will have one more try. Mr President, you are aware, are you not, that you are allowing this man to compound under Parliamentary privilege what is quite possibly a gross libel? I believe that that is grossly improper and I appeal to you, yet again. I made it clear today that this is very likely the subject of a number of libel writs. I caution anybody from the media who might be tempted to repeat the dreadful remarks that the honourable member is making, appropos of the matter. I will not canvass it myself except to say that I was reported to have used words I never used. Mr President, I believe that you are allowing a possible gross libel to be made worse by what the Hon. Mr Lucas is doing at the moment. I appeal to you yet again, sir.

The PRESIDENT: Of course, I hope that that is not so. Nevertheless, since I have no evidence to verify or otherwise prove what the Minister is saying to be true, it may be a warning from the Minister that perhaps they are compounding a possible libel situation. I cannot judge that. I have no evidence of writs or other matters.

The Hon. J.R. Cornwall: It is dead irresponsible.

The PRESIDENT: What is the Minister saying now?

The Hon. J.R. Cornwall: I said, 'It is dead irresponsible.' They were my exact words.

The PRESIDENT: The Hon. Mr Lucas.

The Hon. R.I. LUCAS: Thank you for your protection, Mr President. I do not think you were in the Chamber when I said that the Minister had already indicated that he has not issued writs. I am aware that Dr Humble has not issued writs and, therefore, I am informed that the matter cannot be *sub judice.* I accept and support your ruling in protecting my right to raise this matter in Parliament. Of course, I have not referred to the words that the Minister of Health is alleged to have used. I have been very careful about that. What I have done is attack him on the way he went about that particular exercise and the complete lack of need for him to have done what he did on that particular night. I leave it at that; suffice to say that I believe a gross injustice was done to a hardworking medical practitioner. It is difficult for someone who is not used to being in the political arena to find himself suddenly lumped into it. It is difficult for that person, his family and children. I am aware that Dr Humble gained considerable support from the public and that they were virtually 100 per cent behind him in his actions and were not supportive of the actions of the Minister. It is being part of the press and media game that medical practitioners like Dr Humble are not used to, and that can be very wearing for a medical practitioner like Dr Humble and his family. I leave that particular matter there.

In conclusion, I place on record that I do not support strike action by medical practitioners, I hope in South Australia good sense will prevail and that all other forms of signalling discontent and disapproval with the Minister's handling of this issue will be used by the medical profession, stopping short of strike action.

The Hon. M.B. Cameron: The Minister has achieved a miracle in uniting a desperate group of people against him.

The Hon. R.I. LUCAS: I support the motion because I believe that in those five instances I gave the actions of the Minister of Health in South Australia in the introduction of Medicare have indeed been dismal and divisive.

The Hon. J.C. BURDETT: I will not be very long in replying as the Minister said little that was relevant and needed replying to. Almost all of what he said has been so ably replied to by my colleagues on this side of the Chamber. The Minister prattled on at great length about the Port Augusta Hospital which I did not raise and had nothing to do with the motion. He also claimed that I had no interest in patient care. I made it clear and said so when I spoke that that was my main concern. I repeat what I said when I moved the motion, that nowhere in all of the Minister's

endeavours to force doctors to succumb to the wishes of his Federal counterpart has the Hon. Dr Cornwall shown how the service provided to patients will be at all improved. In fact, if anything, the service will be undermined and patient care and confidence will deteriorate. I also said that choice has been seriously eroded as a result of the new Medicare and, as my colleague the Hon. Dr Ritson recently said, 'Medicare has done absolutely nothing to care for the sick or injured. It has not added one nurse, doctor, new treatment or drug to the system.' The Minister talked about my so-called skulking around country hospitals without his permission or giving him the courtesy—

The Hon. J.R. Cornwall: It wasn't permission—the courtesy of telephoning my office.

The Hon. J.C. BURDETT: I thought that I answered that in a letter I wrote to the Minister on 28 February 1984 when I said:

Dear Minister, I refer to your comment this morning about my having—

The Hon. J.R. Cornwall: I do not mind. If you have no manners that is your problem, not mine. You do no real harm. You are so damned ineffective you can go to anywhere you like. You are the greatest ally I have. But, you might develop some manners in your advanced middle age.

The Hon. J.C. BURDETT: In the interests of manners (and the Minister has clearly shown he has none), I will read the letter I wrote to the Minister on 28 February 1984. He did not deserve it, but I wrote:

Dear Minister, I refer to your comment—

The Hon. J.R. Cornwall: That was after I chipped you, was it not?

The Hon. J.C. BURDETT: If the Minister will listen, I intend to read the letter. On 28 February 1984 I wrote to the Minister under his full title and said:

Dear Minister, I refer to your comment this morning about my having visited country hospitals without having informed you, which you considered I should have done as a matter of courtesy. No discourtesy was intended. Immediately after taking up the shadow portfolio and on giving consideration to visits to hospitals, I formed the conclusion that I should inform you or even seek your permission in regard to visits to public hospitals and this I have meticulously observed. In regard to other hospitals, particularly those in the country, I have regarded them, however funded, as having an independent management and I have not felt it was even relevant to inform you of my intention to visit.

The Hon. J.R. Cornwall: All hospitals are public hospitals. There are 82 of them. The status is the same whether the Royal Adelaide Hospital, the Mount Gambier Hospital or the Berri Hospital.

Members interjecting:

The PRESIDENT: I ask that the two members holding the conversation across the floor to allow the member with the call to proceed.

The Hon. J.C. BURDETT: The only other matter to which I intend to refer to in reply is the question of industrial action because I have not addressed it at all. If the Minister had accepted the invitation from the President of the AMA to come to the demonstration on the steps of Parliament House instead of stamping up and down the corridor as I was advised he was doing, he would have heard what Dr Southwood had to say. What Dr Southwood said on the steps of Parliament House was that this was the first occasion that the AMA had ever demonstrated, that the AMA was unwilling to have to do it and it was done because the AMA was unwilling to take industrial action and believed that this kind of demonstration, this kind of speaking in public, might persuade both the State Minister and the Federal Minister to change their minds so that industrial action could be avoided. For those reasons I ask the Council to support the motion.

The Council divided on the motion:

Ayes (9)—The Hons. J.C. Burdett (teller), M.B. Cameron, L.H. Davis, Peter Dunn, K.T. Griffin, C.M. Hill, Diana Laidlaw, R.I. Lucas, and R.J. Ritson.

Noes (10)—The Hons. Frank Blevins, G.L. Bruce, B.A. Chatterton, J.R. Cornwall (teller), C.W. Creedon, M.S. Feleppa, I. Gilfillan, Anne Levy, C.J. Sumner, and Barbara Wiese.

Pair—Aye—The Hon. R.C. DeGaris. No—The Hon. K.L. Milne.

Majority of 1 for the Noes.

Motion thus negatived.

POLICE OFFENCES ACT AMENDMENT BILL (No. 2)

The Hon. K.T. GRIFFIN obtained leave and introduced a Bill for an Act to amend the Police Offences Act, 1953. Read a first time.

The Hon. K.T. GRIFFIN: I move:

That this Bill be now read a second time.

In view of the lateness of the hour, I seek leave to have the second reading explanation of the Bill inserted in *Hansard* without my reading it.

Leave granted.

Explanation of Bill

This Bill proposes amendments to section 17 of the Police Offences Act to deal with the problem of 'squatters'. The modern manifestation of squatting is the unauthorised occupation of premises, usually domestic premises, without the approval of the owner or lessee or other legal occupier. It is acknowledged that there is a serious lack of low cost housing, particularly for the unemployed and other disadvantaged persons, and Governments must do something about it. That problem is to be shared by all citizens, not by individual property owners. That shortage is no reason to disregard the rights of homeowners by unlawfully occupying someone else's home.

Squatters usually enter the premises, arrange for the Electricity Trust to reconnect the power and South Australian Gas Company to connect the gas supply, change the locks and then refuse entry to the person legally entitled to possession of the premises. The most recent case to attract publicity was that of an older person who was in hospital for about six weeks, leaving the home vacant. On returning to the home the owner found that the premises had been occupied without any authority and access was denied to the owner. The police attended at the premises, the squatters offered to pay $20 per week rent and refused to leave the premises. The police in this case, as in other cases, believed that their powers to remove the squatters were not strong and accordingly acted only as a supervisory group to ensure that, as much as that was possible, the premises were not damaged. They did not believe they had adequate powers to forcibly remove the squatters even though the premises had been broken into and there was no authority at all for the squatters to occupy the premises.

This situation can, of course, occur with any premises which are temporarily unoccupied, and ought to be a matter of concern for all property owners. In view of police being uncertain about their own powers the only remedy for an owner of property which squatters have taken over is to go to the District Court or Supreme Court for an order ejecting the squatters. That can be expensive and is likely to take some time. In any event, as a matter of principle, one is entitled to question why it is necessary for a citizen who owns property to expend time and money and nervous

energy (as well as physical energy) in pursuing an application for relief in the courts in order to regain possession of one's own property from those who have no rights whatsoever in respect of the premises. If there were a legal tenancy created by a contract made freely by the owner as landlord and the occupier as tenant then different considerations apply. In the case of squatting the occupancy is not in accordance with any right or law.

There is a Squatters Manual, which some suggest has now been revised, but there is no doubt that whatever the revision the Squatters Manual (first, second, third or subsequent editions) is designed to give advice which allows squatters the best prospect of 'fobbing off' law enforcement agencies and owners and to allow them to contrive a situation which is false and dishonest. For example, the manual says:

> 'Unlawfully on premises' is an offence under the Police Offences Act, section 17. Again private landowners are likely to try to get the police to hit you with this. It is harder to get out of. Probably the best way is to try to convince the police you thought you had a right to be there. For example, say a friend was living there, and invited you to be there, and that you thought the friend had a right to be there.

A contrived situation. The manual concludes:

> After reading this manual you might think squatting is quite hard, but once you know your rights and ways of using the law it will become almost easy. Usually, landlords and particularly Government landlords are reluctant to do anything more than get a court eviction order. Court costs are practically never awarded against the squatters so you get a place to live in without paying rent for anything up to a few years.

No law-abiding citizen and property owner ought to be put in the invidious position which this manual suggests nor should any citizen have any fear of leaving his or her home unoccupied for any period of time only to return and find the property taken over by squatters. Section 17 of the Police Offences Act was enacted in its present form in 1953 and is modelled on a provision which was first enacted in 1936. Section 17 (1) provides:

> Any person who is in or on any premises or part of any premises for an unlawful purpose or without lawful excuse shall be guilty of an offence.

Any lay person looking at this section would presume that the section is designed to protect one's own property from the trespass of strangers or those who are uninvited or unwelcome. However, the section has been given a narrower construction by the courts which weakens the impact of the section. The section creates an offence with two alternative characteristics. The first is to establish that a person is on premises 'for an unlawful purpose'—to achieve this it is necessary to establish that there is a precise purpose which is unlawful. There is no real uncertainty about this.

On the other hand, if it cannot be established that a person is on the premises for 'an unlawful purpose' the alternative is for the Crown to establish that the person is on premises 'without lawful excuse'. A number of cases in the South Australian Supreme Court have dealt with this phrase. The test which has been used in the Supreme Court since 1940 (in the case of *Wilkins v Condell*) is stated as follows:

> The words imply something more than a civil wrong; i.e., they connote the kind of trespass which transcends the mere infringement of a civil right, and calls for the protection of the criminal law, and the punishment of the offender.
>
> ... The question for the court is whether the defendant's presence upon the premises is excusable, in all the circumstances of the case, bearing in mind that the defendant is charged with an offence punishable by imprisonment, and, therefore, that his conduct may well be innocent or excusable for this purpose, although otherwise indefensible. I think that Parliament has left it to the courts to distinguish between a wrongful act for which compensation is an adequate remedy and conduct which goes beyond the mere matter of compensation, and should be treated accordingly, i.e., as a crime deserving of punishment by imprisonment.

For example, in the case of *Samuels v Nicholson* (1973) an inquiry agent sought evidence for the purposes of divorce proceedings. He went to a flat to which access was obtained by a staircase and a balcony, and, although told by an occupant of the flat to go away, remained on the balcony for about a quarter of an hour. He was charged in a court of summary jurisdiction of having been on a balcony without lawful excuse.

The South Australian Supreme Court decided that the magistrate's decision to dismiss the complaint was correct and that section 17 of the Police Offences Act could not be relied upon to successfully prosecute the inquiry agent even though one of the judges, Mr Justice Zelling, expressed great sympathy with the view of the Crown that the inquiry agent ought to have been convicted. He agreed that the conduct of an inquiry agent acting as this inquiry agent did was outrageous. In the case of *Page v Turbill* (1962) the owner of a horse engaged a horse trainer to train a horse. The trainer, claiming a lien upon the horse for his unpaid fees, told the owner he was not to take the horse or go into the stables until the fees were paid. The horse was removed from the stables; and, the trainer alleging that the owner had removed the horse, made a complaint against the owner for being on the trainer's premises without lawful excuse contrary to the provisions of section 17. In that case Mr Justice Mayo held that even if the evidence in support of the complaint was sufficient to establish that the owner had entered the premises and removed the horse, contrary to the trainer's prohibition of entry, mere proof of such entry was not enough to establish that the owner was on the premises without lawful excuse.

In the case of *Varney v Kowald* (1976) a person who was on premises for the purposes of behaving as a 'peeping Tom' was on the premises without lawful excuse. And there are a range of other cases.

The Liberal Government became aware of the deficiency in section 17 of the Police Offences Act and approved amendments to the Police Offences Act to overcome the deficiency. A composite Bill to deal with various problems with the Police Offences Act was ready for introduction prior to the November 1982 election but, in consequence of that election, it could not be introduced to the Parliament. The Bill which I have introduced follows the proposals which the Liberal Government was ready to introduce to overcome major technical difficulties with the present section 17 without prejudicing the legitimate claims and rights of citizens with a *bona fide* right to occupancy or possession of premises. It should be noticed that the amendment deals specifically with a person who is 'a trespasser'.

The monetary penalty of $100 was last fixed in 1953 and is increased to $2 000. The period of imprisonment of six months is increased to 12 months to reflect the seriousness with which the Liberal Party views the unauthorised occupancy or possession of a person's home or other property. In this case, possession is not, and should not be, 9/10ths of the law.

Clause 1 is formal. Clause 2 amends section 17 of the principal Act, which presently provides that it is an offence to be on premises for an unlawful purpose or without lawful excuse. This section as presently worded goes on in subsection (2) to define premises. The effect of the amendment is to increase the penalty in subsection (1) from one hundred dollars or six months imprisonment to two thousand dollars or twelve months imprisonment. Subsection (2) is struck out and new subsections (2), (3) and (4) are substituted. New subsection (2) provides that, without limiting the generality of subsection (1), a person is on premises without lawful excuse, if, being a trespasser, he fails to leave the premises forthwith after having been asked to do so by an

authorised person or he again trespasses within 24 hours after such a request.

New subsection (3) is an evidentiary provision relating to the expression 'authorised person'. New subsection (4) contains definitions of 'authorised person' (in relation to premises means a person in possession or entitled to possession or a person acting on the authority of such a person, or in the case of Crown property, the person having the control or management of the premises, the person acting with his authority, or in their absence, a member of the Police Force, and where the premises are a school or place of education, the person having the control or management of the school, a person acting with his authority or in their absence, a member of the Police Force) and 'premises' (meaning any building or structure, enclosed land, any land belonging to a building or any aircraft, vehicle, ship or boat).

The Hon. ANNE LEVY secured the adjournment of the debate.

COUNTRY FIRES ACT AMENDMENT BILL

The Hon. K.T. GRIFFIN obtained leave and introduced a Bill for an Act to amend the Country Fires Act, 1976. Read a first time.

The Hon. K.T. GRIFFIN: I move:

That this Bill be now read a second time.

In view of the lateness of the hour, I seek leave to have the second reading explanation of the Bill inserted in *Hansard* without my reading it.

Leave granted.

Explanation of Bill

For some time there has been concern that the penalties which are awarded by the courts for arson and breaches of the Country Fires Act have been inadequate. There are two possible solutions. The first is for the Crown to appeal when penalties are inadequate and where the penalty is manifestly lenient. The second is to increase the penalties where appropriate.

Arson is the major offence under the Criminal Law Consolidation Act and in certain cases the penalty is life imprisonment and in other cases a maximum of 14 years. Although there is concern about the law of arson, particularly within the insurance industry, this Bill does not deal with that crime, although it should be said that a Liberal Government will undertake a comprehensive review of the law relating to arson. Concern about low penalties being imposed for arson and for offences under the Country Fires Act have been expressed by many people in the community, including the District Council of Spalding and northern councils and ratepayers.

The Country Fires Act was passed in 1976 and the penalties have not been reviewed since that time. Recent bushfires thoughout South Australia, particularly the Ash Wednesday fires of February 1983, have focussed community concern upon the devastation, loss of life, injury and damage which can result from either accidental or deliberate breaches of the law or carelessness with fire. In view of that community concern it is now appropriate to review the penalties imposed by the Country Fires Act and to increase them, not just by the amount of inflation since 1976, but by a sufficient degree to focus greater attention on the offences, to express the community's concern at irresponsible or illegal activity involving fires and to act more as a deterrent. It is for these reasons that this Bill generally increases penalties by 10 times.

Section 39 of the Act, for example, makes it an offence to light or maintain a fire in the open during the fire danger season and imposes a maximim penalty of $500 for the first offence and $1 000 for a subsequent offence. Under the proposal in this Bill that maximum penalty for a first offence will be increased to $5 000 and for a subsequent offence to $10 000. Section 41 makes it an offence to light or maintain fires in the open in a portion of the State specified in an order of the Country Fires Service Board during the fire danger season except in certain circumstances specified in the order. Again, the penalty of $500 maximum fine for a first offence is increased to $5 000 and the maximum fine of $1 000 for a subsequent offence is increased to $10 000. On days of extreme fire danger section 42 makes it an offence to light or maintain a fire in the open contrary to a warning broadcast under that section. The present penalty is $1 000 maximum fine for a first offence and $2 000 for a subsequent offence. This is to be increased to $10 000 maximum fine for a first offence and $20 000 for a subsequent offence.

Section 48 prescribes a maximum penalty of $200 for throwing any burning material from a vehicle during a fire danger season. How often have people travelling on the road seen others flocking the ash from the cigarette out the window rather than using the ash tray provided in the vehicle? There is no excuse for that blatant disregard of common sense of other people and the law. The present penalty is $200 maximum. This Bill provides an increase to $2 000. The only penalty which is not increased tenfold is that relating to the maximum penalty which may be imposed by regulations. This is increased from $500 in section 68 to $1 000 on the basis that where any offence is created by regulation only modest penalties should be imposed because of the lack of Parliamentary scrutiny of the offence which is created by the regulations. Any major offence should be established by the Statute itself and the penalty fixed for that offence in the Statute by Parliament.

By increasing the penalties under the Country Fires Act the real concern of the community for breaches of the Act will be more clearly expressed by the Parliament and there will be a clear direction to the courts to impose higher penalties as punishment as well as acting as a greater deterrent to would-be offenders. Of course, the courts will still retain discretion as to the penalty which should be imposed in any particular case. The Bill only seeks to increase the maximum penalties which may be imposed by a court.

Clause 1 is formal. Clause 2 amends section 32 of the principal Act, increasing the penalty provided to five thousand dollars. Clause 3 amends section 39 of the principal Act, increasing the penalty provided in subsection (1) to five thousand dollars for a first offence and ten thousand dollars for a subsequent offence. Clause 4 amends section 40 of the principal Act, increasing the penalty provided in subsection (1) to five thousand dollars for a first offence and ten thousand dollars for a subsequent offence. Clause 5 amends section 41 of the principal Act, increasing the penalty provided in subsection (4) to five thousand dollars for a first offence and ten thousand dollars for a subsequent offence. Clause 6 amends section 42 of the principal Act, increasing the penalty provided in subsection (3) to ten thousand dollars for a first offence and twenty thousand dollars for a subsequent offence.

Clause 7 amends section 43 of the principal Act, increasing the penalty provided to two thousand dollars for first offence and four thousand dollars for a subsequent offence. Clause 8 amends section 44 of the principal Act, increasing the penalty provided to two thousand dollars for a first offence and four thousand dollars for a subsequent offence. Clause 9 amends section 46 of the principal Act, increasing the penalty provided in subsection (1) to one thousand dollars.

Clause 10 amends section 47 of the principal Act, increasing the penalty provided in subsection (1) to one thousand dollars. Clause 11 amends section 48 of the principal Act, increasing the penalty provided to two thousand dollars. Clause 12 amends section 49 of the principal Act, increasing the penalty provided in subsection (4) to ten thousand dollars. Clause 13 amends section 50 of the principal Act, increasing the penalty provided in subsection (1) to five thousand dollars. Clause 14 amends section 51 of the principal Act, increasing the penalty provided in subsection (6) to two thousand dollars. Clause 15 amends section 53 of the principal Act, increasing the penalty provided in subsection (3) to five thousand dollars for a first offence and ten thousand dollars for a subsequent offence.

Clause 16 amends section 54 of the principal Act, increasing the penalty provided in subsection (3) to five thousand dollars for a first offence and ten thousand dollars for a subsequent offence. Clause 17 amends section 55 of the principal Act, increasing the penalty provided in subsection (2) to five thousand dollars. Clause 18 amends section 57 of the principal Act, increasing the penalty provided in subsections (1) and (2) to five thousand dollars in each case. Clause 19 amends section 58 of the principal Act, increasing the penalty provided in subsection (2) to five thousand dollars. Clause 20 amends section 61 of the principal Act, increasing the penalty provided to five thousand dollars. Clause 21 amends section 62 of the principal Act, increasing the penalty provided in subsections (1) and (3) to ten thousand dollars in each case. Clause 22 amends section 68 of the principal Act, increasing the penalty that may be prescribed for breach of any regulation to one thousand dollars.

The Hon. C.W. CREEDON secured the adjourment of the debate.

YATALA LABOUR PRISON

Adjourned debate on motion of Hon. Diana Laidlaw (resumed on motion).

(Continued from page 2883.)

The Hon. DIANA LAIDLAW: Having moved this motion earlier today, I now wish to make it clear at the outset that I accept the urgent need for extensive work to be undertaken at Yatala Labour Prison to improve and upgrade both the amenities and the security arrangements. I accept also that for too long the poor conditions for those interned and for those working at Yatala have been neglected by past Governments and that, in so doing, past Governments have contributed in no small measure to the atmosphere of frustration and tension which permeates the prison today and which came to a head a year ago this month in the burning of A Division and other associated wanton acts. I contend, however, that, while the damage done to A Division on this occasion necessitated action by the Government, the need to ensure that redevelopment work proceeded at Yatala did not warrant an abuse by the Government of accepted legal processes. Essentially, throughout this whole saga the Government appears to have accepted without question the notion that, regardless of the consequences of its actions, the means to an end justifies that end. It is an argument that I do not and cannot accept.

For the purposes of this debate, it is important to remind the Council of the architectural and historical merits of A Division, notwithstanding the fact that the building no longer stands. It was constructed between 1880 and 1884 by prison labour. The T-shaped A Division was the largest colonial building erected in South Australia. It was three storeys high with walls over one metre thick, and built of Dry Creek limestone quarried on site. The stone construction was the only example of its type in Australia. The whole of the iron work and the carpentry work was also crafted on site. The historian for the City of Enfield, Mr John Lewis, among others, has described A Division as a 'classic', noting that the quality of the workmanship in all areas of the building, but particularly in the detailing of the stone work, was renowned for its fineness. Indeed, there is little doubt that A Division richly deserved its classification by the National Trust as a building worthy of preservation and its inclusion on the Register of State Heritage items and the Register of the National Estate as a building important to the heritage of South Australia and of the nation.

I understand that in South Australia, and indeed throughout Australia, it is not a common occurrence for a building to be recognised by all of these authorities. The fact that A Division enjoyed this remarkable level of recognition made it a heritage item of extra special importance to the State and the nation. Of the three listings, recognition on the State Heritage Register has the highest status because that Register alone has legal backing. As a consequence, items are not inluded at whim. Rather, an exacting and lengthy process is required (on average over 12 months), involving a large number of people from archeological and archival researchers, the owners, the public, the State Heritage Committee and the Minister. Matters assessed include the uniqueness of design, the method and standard of construction, the sequence of development, its social and historical context and its relationship to its near environment.

When an item is listed on the State Register there is an expectation that at best the building is safe from demolition and that, at the very least in the event of damage or wear, extraordinary efforts would be required of the owner to resore and retain the building for the enrichment of future generations. Certainly, notwithstanding its location, these expectations were held for the future of A Division when it was placed on the State Register in 1980. If there had been any doubt at the time that these expecations could not be fulfilled, surely A Division should not have been placed on the Register in the first place.

However, having resolved to proceed with the registering of A Division, the Government should have been aware that it would be required to be seen by the community as diligently upholding the Act, both in terms of the spirit and the letter of the law. After all, with the passage of the Heritage Act, as with all reforming measures, there was and there continues to be an expectation that the Government would set the standard for others in the community to follow.

In these circumstances, it is not surprising that the Government's decision last year to demolish A Division and, in particular, the manner in which it carried out this decision, has been a bitter blow to those people in our community who are interested in the heritage of South Australia. For them the Government's actions have demonstrated that their faith in the Act has been misplaced. This alarming view has not been isolated to a few. To the contrary, it has been expressed by many, and I cite, for instance:

- The Chairman of the Australian Heritage Commission, Dr Kenneth Wiltshire, who has been recorded as deploring the Government's actions.
- The generally reticent National Trust was provoked to do likewise.
- In addition, the Chairman of the Enfield and Districts Historical Society, Alderman Bonner, and the Publicity Officer, Mr Denis Robinson, in a statement to the *Advertiser* on 8 November 1983, noted that the Society was perplexed by the Act and now considered that it had no value at all.

- The Chairman of the Save the Grange Vineyard, Dr Dibden, in a letter published in the *Advertiser* on 11 November (which coincidentally, was Remembrance Day), noted:

  The Government's decision indicates that the State Government can demolish the Heritage Act whenever it suits it to do so. The action suggests that politicians can avoid their responsibilities by encouraging a concerned public to believe in an Act which is in fact a sham.

- Other writers to the *Advertiser* about the same date noted:

  The Register is not worth the paper it is written on—

  and more ominously—

  if we cannot trust the State Government, whom can we trust with protecting our heritage?

Before I refer in more detail to the Government's decision to use section 6 of the Planning Act to expedite the demolition of A Division, I will outline the saga of events that preceded this decision. I do so because the evasive and conflicting statements by Ministers on the Government's intentions, its repeated refusal to acknowledge the community's right to have questions and grievances answered and doubts allayed, and the underlying deceit that has coloured this whole unsavoury exercise, have together served to reinforce the anger, bitterness and sense of betrayal that have accompanied the Government's final decision to invoke section 6 of the Planning Act.

On reflection, it is clear that from the outset the Government was hell bent on demolishing A Division—

- irrespective of the building's heritage significance;
- irrespective of the claims that following the fire the greater proportion of the building—and therefore its heritage value—remained structurally sound and intact.
- irrespective of endless inquiries seeking to ascertain what, if any, alternative uses the Government had considered for A Division, and
- irrespective of proposals put to Ministers that the building be restored, converted or alternatively used for community purposes.

In all these instances the arguments presented and questions posed by concerned groups and individuals were ignored, although to my knowledge the Government has never refuted their validity. One can only speculate that by ignoring the issues raised the Government hoped to defuse the whole affair. Instead, the Government's stony silence reinforced opposition to its actions and lent credence to early statements by the Enfield and Districts Historical Society that:

It understood that the people who prepared the redevelopment plan for Yatala were instructed that restoration of A Division was not to be considered as an option.

To my knowledge the Government has not repudiated this accusation either. Certainly, to date, my own representations to the former Chief Secretary to clarify this matter have remained unanswered.

The Society's distrust of the Government's intention, as evidenced in the statement that I just referred to, was reinforced in a letter from Iris Iwaniki, Registrar Historian, Heritage Conservation Branch of the Department of Environment and Planning to the Society's publicity officer, Mr Denis Robinson, on 21 July last year. The letter was forwarded in response to an article in the Society's June issue of its newsletter which highlighted concern over rumours about the Government's intention in relation to 'A' Division. Ms Iwaniki wrote:

Dear Denis,

Thank you for forwarding a copy of your latest newsletter. As usual, it contains a number of interesting topics and is evidence of the excellent community interest in heritage matters in the Enfield area. I would like to comment on two matters raised in the newsletter.

Firstly, regarding the decision to remove 'A' Division from the State Heritage Register. In accordance with the Heritage Act, the Minister cannot remove an item from the Register until he has received representations from the Heritage Committee, has advertised his intentions for one month, and considered any objections to the item's removal. The Cabinet's decision to remove 'A' Division at Yatala Gaol was made following the fire, and notified to the Branch on 1 June. It is therefore no reflection upon the item's heritage status that it has been removed, the decision having been made as it was at Cabinet level.

It is clear from Ms Iwaniki's letter that, if the Branch was notified on 1 June of the Cabinet decision to remove 'A' Division from the Register, the decision itself was taken sometime earlier. This short time frame—at the maximum eight weeks between the fire and the Cabinet decision—clearly allowed the Government no time to consider fully any alternative uses, and I suggest confirms that it was never the Government's intention to do so. The letter also makes it perfectly clear that, while the Government would later go through the motions as required by the Act of calling for objections in writing to the delisting, the preparation of such submissions would be a futile exercise, as the Government already had make up its mind that A Division would be demolished, come what may. Subsequent events proved this to be the case.

On Thursday 21 July in an advertisement placed in the back pages of the *Advertiser*, the Minister for Environment and Planning, Dr Hopgood, advised that he intended to remove 'A' Division cell block from the Register of the State Heritage items. The advertisement stated:

I shall consider all written objections to the removal of the item if received on or before 5 p.m., 14 October 1983.

Just over two weeks after the Minister for Environment and Planning inserted the above advertisement calling for objections by 14 October, the Chief Secretary on 9 August unveiled with considerable fanfare a $13.2 million master plan to redevelop Yatala Labour Prison. While he noted the plan had not yet gone to Cabinet and had yet to be considered by the community, the Enfield Council, prison officers and prison interest groups, the model plan had erased 'A' Division and in its place had erected a new security building housing up to 40 prisoners and a new chapel.

However, one month later, in early September, the Minister of Public Works, the Hon. Jack Wright, publicly denied claims that 'A' Division would be erased and said no action would be taken until submissions objecting to the removal of A Block from the Register had closed and the Minister for Environment and Planning had considered delisting options.

To compound the confusion, not only in the Government but also in the community, on 14 September, a month before the deadline for the closure of objections, the Chief Secretary wrote to the Honorary Secretary of the Enfield and Districts Historical Society, Mrs M. Thorndike, as follows:

After assessing all alternatives, the Government has decided to replace 'A' Division with a modern unit which will reflect a twentieth century approach to correctional administration. The decision was not taken lightly and it is regretted that a building with the architectural qualities of 'A' Division should be demolished.

Clearly, this decision was taken one month before the time for objections closed. While the Minister blithely stated that 'the decision to demolish 'A' Division was not taken lightly', the statement itself is, in fact, a public outrage. It confirms that without any regard for the due processes of the law the Government had determined 'A' Division would be demolished. It confirms that, not only was the Government prepared to thumb its nose at the very procedures it demands the rest of the community to follow, but also it was prepared, for the sake of political expediency, to make a farce of the only measure in this State that has the capacity to safeguard our limited and precious stock of significant heritage items.

The contradictions and confusions, however, do not end there. After many hundreds of objections to the delisting of 'A' Division were received by the Minister for Environment and Planning by the closing date, 14 October, the Government had a change of heart. Its new policy was to retain 'A' Division on the Heritage Register until after it was demolished. While I appreciate that the Crown is not bound by the legislation, this situation was absurd, and was seen as such by the community. It was described, however, by the Minister for Environment and Planning 'as an indication of the Government's honesty'. The Minister's rationale was 'that leaving the building on the register until it was demolished showed the Government had a regard for its heritage value'. While it was refreshing to see the Government attempting to be 'honest' for the first time in nine months, the Minister's arguments in fact support the contention of the Enfield and Districts Historical Society, among others, that the March fire had not caused irreparable damage to 'A' Division—that in fact the greater proportion of the building, and thus its heritage value, remained structurally sound and intact and as such could and should have been restored. The subtlety of this argument, however, escaped the Minister and the Government, and they opted instead to call in the demolition contractors.

The incident to crown this whole sordid episode of Government arrogance, however, was the decision to invoke section 6 of the Planning Act. On Friday 6 January, the Minister of Public Works issued a three sentence statement explaining that due to 'a procedural error' demolition work at Yatala had been brought to a halt. In its single-minded haste to demolish 'A' Division, the Government apparently neglected to serve the Enfield Council and the South Australian Planning Commission with notification, under section 7 (2) of the Planning Act, 1982, of it's intention to proceed with demolition work. Under section 7 the council is granted two months to forward its comments in a Crown proposal to the Planning Commission, which in turn must then report to the Minister for Environment and Planning before the development proposal can proceed. For the purposes of the Planning Act, work on 'A' Division was defined as 'development' because of its listing on the Heritage Register. A week after Mr Wright's announcement of the administrative blunder, the Government, through Executive Council, invoked section 6 of the Planning Act to exempt it from the aforementioned provisions. This in effect denied the Enfield Council its democratic and established right to comment on the demolition.

The Hon. L.H. Davis: Absolutely disgraceful!

The Hon. DIANA LAIDLAW: It was disgraceful.

The Hon. L.H. Davis: No private developer would have been allowed to do that.

The Hon. DIANA LAIDLAW: That is quite right. The Minister has since acknowledged that he is in a most difficult position in working with private developers because of this decision.

Not surprisingly, the Mayor of Enfield was provoked to comment after learning of the decision to invoke section 6. He said that the Government's actions demonstrated that George Orwell's predictions were coming true. His outrage was shared by the council as a whole, as evidenced by a letter from the Town Clerk to all members of Parliament on 17 January, stating:

Dear Sir./Madam,

Demolition of 'A' Division—Yatala Labour Prison

I have been directed to write to every member of the South Australian Parliament on the above matter, which is one of very serious concern to my Council. The council desires to register its strongest possible objections to the manner in which the Government has used the provisions of the Planning Act to achieve the demolition of A Division, which has effectively denied the council any reasonable opportunity to formally state its views on the matter. The council considers that this totally undemocratic course of action appears to be even more reprehensible in the light of the cirumstances enumerated hereunder:

1. Some months have elapsed since the Government adopted a redevelopment plan for Yatala, and it is therefore obvious that adequate time existed for the Government to have lodged with the council the application under section 7 (2) of the Planning Act to enable proper consideration to be given to the proposal to demolish the building, without the need to invoke the provisions of section 6.
2. It is most clearly apparent that the decision to use section 6 to achieve the Government's desires in the matter is a very grave misuse of the provisions of the Planning Act, particularly when the stated reason for the invoking of section 6 is merely to overcome a departmental blunder.
3. The precedent set by the use of section 6 so early in the life of the new Act, in circumstances which were completely avoidable and unnecessary, had the Government acted in compliance with its own statutory requirements, is really quite deplorable, and may well be bitterly regretted at some future time.

In addition to the foregoing aspects, the council believes that the 'A' Division building has such obvious merit as a heritage item that it should be retained and rehabilitated for posterity. Council members also express strong resentment that the Government has circumvented the Heritage Act by a process which, interpreted in its best light, sets double standards for the community. The council believes that section 6 of the Planning Act should be used only as an absolutely final resort in instances of great community importance when the normal procedures under the Act are demonstrably ineffective or inadequate.

If there is anything at all which may be done, even at this late stage, to retrieve the situation, and give effect to the council's views, your assistance will be appreciated by council members, and assuredly also by future generations of South Australians.

The letter was signed 'yours faithfully G. Turner, Town Clerk'. In respect of the Enfield Council's plea, there is nothing that can now be done to retrieve the situation in respect of 'A' Division for it, like the old South Australian Hotel, the Aurora Hotel, the Grange vineyard and countless other examples of our heritage, has disappeared for all time.

However, this Council does have the opportunity now to register its strong objection to the roughshod and arrogant manner with which the Government has handled the unfolding saga of 'A' Division since the fire last March and the contempt which it has displayed throughout, for both community concern and accepted legal processes. We also have an opportunity now to register our concern at the ramifications of the Government's actions—and they are immense. Due to haste, ineptitude and lack of foresight, the Government has unnecessarily alarmed large sections of the community, has undermined the confidence of many in the value of the Heritage Act and has set in motion a vigilante group, which, according to its spokesman, Andrew Cawthorne, has decided as a starting point to seek the preservation of all buildings in the city built before 1914. Above all, however, the Government, which should be setting high standards of integrity and responsibility in heritage matters for the community to follow, has in fact established double standards—one law for itself and another for the community.

It gives me little pleasure to move and speak to this motion today, but I sincerely regret the events that have unfolded over the past year in respect of the fate of 'A' Division. I do move the motion, however, for, as I said at the outset, I cannot and do not accept that the means to an end, regardless of the consequences, justifies that end. I hope that other members in this Chamber feel likewise and will support this motion.

The Hon. I. GILFILLAN: The Democrats support the motion and believe that it is of significance not only to the present Government but also to future Governments of whatever political persuasion. It does reflect the fragility of the protection of the State's heritage. I have full sympathy with the circumstances in which the Government found

itself because, at that time, the crisis at Yatala was of very high priority in the Government's mind. As I was involved in that, it was also a high priority in my mind. At the time, it seemed to me that the major issue was obviously to achieve some resolution of the enormous stress and disturbance occurring at Yatala within the gaol itself.

This motion emphasises that what have been accepted as desirable goals and secure safeguards by Parliament can be bulldozed aside if the pressure of the occasion can persuade the Government that it has a higher priority. This is a typical case where the pressures of the moment have left us with a hangover which we are deeply regretting, namely, the loss of a precious and irreplacable part of the State's heritage. Therefore, unlike the precedent set in other speeches in this place, I do not intend to repeat what has already been said, except to say that we agree with the bulk of the argument that the Hon. Diana Laidlaw has presented in support of this motion and to acknowledge that there were perhaps extraordinary circumstances around this decision which should only act as a warning and certainly no excuse to future Governments to protect themselves from being swept into making poor decisions and into an intolerable misuse of their powers.

If it does nothing to replace the 'A' Division at Yatala, which has obviously gone too far, I hope that the initiative of the Hon. Diana Laidlaw will stand as a memorial to future Governments that this is unacceptable. It should act as a warning to Parliamentarians to be on the alert to see the signs of Governments misusing provisions in Acts to subvert the basic intention of the original legislation and of the people of South Australia. The Australian Democrats support the Hon. Diana Laidlaw's motion.

The Hon. ANNE LEVY secured the adjournment of the debate.

SHOP TRADING HOURS ACT AMENDMENT BILL

Adjourned debate on second reading.

(Continued from 21 March. Page 2647.)

The Hon. I. GILFILLAN: I have a sense of deja vu; I believe that I have addressed this issue previously. I did not expect to be speaking to it again quite so soon. The Democrats support the intention of this Bill, and there should be no doubt about that. This Bill contains the substance of the orginal Bill that lapsed early in my time in Parliament. However, some features of the way in which this matter is being dealt with in Parliament, the reactions of the people of South Australia to the restrictions of the sale of fresh red meat and the various steps that have been taken so far to alter the situation are similar, and it is basically with that in mind that I speak this evening.

I make plain yet again that the Democrats unreservedly wish to see the relaxation of the restriction on the sale of fresh red meat which currently applies and which compares with the regulations controlling the sale of competitive products. My original Bill would have more fully and more adequately achieved that purpose than the Bill introduced by the Hon. Martin Cameron, because the honourable member failed to provide for the extension of trading to 6 p.m. That is a relatively minor deficiency, but I feel duty bound to point it out.

More significantly, it is likely that this Bill will result in a change of the hours during which South Australians can buy fresh red meat. I have not had a chance to have informed discussions with the Leader of the Opposition to ascertain whether he has estimated if this measure will substantially improve the hours during which fresh red meat can be sold or if he has measured whether there will be Government support, but perhaps the Leader will comment on that. My opinion is reflected by conversations that I have had with Government members. The Act has been operating for only one month. It has gone through a trial period, so there has been very little time for the measure to leave a mark in South Australia. However, it is satisfying that that legislation is already beginning to bear fruit: very strong pressure is being brought to bear on the Government and those who oppose further relaxation of the hours by the general public and quite large areas of the retail trade. I received a letter today—

The Hon. R.I. Lucas: Are you going to read it?

The Hon. I. GILFILLAN: It is not long, and I will read it for the benefit of the Council. The letter, addressed to me from the Retail Traders Association of South Australia, and signed by B.D. Thomes, the President, states:

> Dear Ian,
>
> There is little doubt that the initiative shown in introducing legislation allowing for the sale of red meat on Thursday nights has not only given the consumer an opportunity to purchase red meat at a time that was not previously available but has further alerted the consumer to the inadequacy of the new legislation.
>
> You will be well aware that there are still times which are now considered to be 'normal' trading hours that the consumer is unable to buy red meat and this places consumers, retailers and producers at a disadvantage. We are hopeful that the consumer support which is evidenced by the receipt of some 9 000 letters in favour of allowing red meat to be sold on both the late night and Saturday morning will result in complete political support for legislation that will bring this about.

There is a 'PS', which states:

> Ian—we would be pleased to supply you with the above letters to facilitate a further change in the legislation.

I am very pleased to use this opportunity at my discretion, in consultation with other members, to achieve a change in the legislation. I would like to say quite clearly that my aim, as it has been from the beginning, is to change the legislation so that reasonable and fair marketing hours for fresh red meat are achieved. I would like to think that all those who are now involved in efforts to change the legislation are aiming in that direction and that there will be no point-scoring or propaganda in relation to this issue, because that will occur at the expense of the buying public and the producers and will merely delay the next step in the reform of trading hours.

If all members believe in a common goal, for goodness sake let us co-operate to achieve the end result. I see no point in trying to beat one another down the straight to the post, because I am frightened that those who run too soon will not get to the winning post but will get to a losing post and make it very difficult to achieve the more constructive results that will eventually come from well thought out legislation. I look forward to having conversations with the mover of this Bill and other Government members who aim to achieve this goal.

In conclusion (and my remarks in this regard may be of a lesser note than the gist of my other remarks), I believe it is important for retailers who are feeling anxious to realise that the extension of hours will not be punitive in relation to the hours that they must work, other obligations of overtime, and so on. The Act specifies quite plainly that, although the hours may be extended, there is no obligation on any retail outlet to remain open during all those hours. I repeat that those who are concerned about the intention of this Bill and those who believe that no-one should be compelled by law to open during all those hours need not fear, because the Bill allows the opportunity to trade.

I believe that an increasing number of South Australians who are expressing publicly that they want to see the next step achieved will remember that, when the preliminary Bill was introduced and passed, I said that it should be the first step. We can now go on to the next step as quickly as

possible. I commend the intention of the Bill and I trust that we will all work together towards achieving proper marketing reforms for fresh red meat.

The Hon. G.L. BRUCE secured the adjournment of the debate.

METROPOLITAN TAXI-CAB ACT REGULATIONS

Adjourned debate on motion of Hon. M.B. Cameron:

That the regulations under the Metropolitan Taxi-Cab Act, 1956, re a common licence, made on 5 January 1984 and laid on the table of this Council on 20 March 1984, be disallowed.

(Continued from 21 March, Page 2649.)

The Hon. G.L. BRUCE: We oppose this motion. The report and evidence of the Subordinate Legislation Committee was tabled in Parliament today, and it was recommended that the regulations be allowed. The committee heard a lot of evidence, and many witnesses appeared before it. The matter was discussed in thorough detail. The evidence that I heard convinced me that the regulations benefit the people of South Australia as a whole as well as the taxi cab drivers. The regulations aim to create harmony in the industry, and I believe that they will do that, perhaps not in the short term but in the long term.

The Hon. C.M. Hill: That's what the taxi drivers out the front were told, but they didn't like it.

The Hon. G.L. BRUCE: There is a 15-month leeway for those who will lose white plates. In fact, there is a longer leeway, because successive Governments over the past four years have talked about abolishing white plates.

If the regulations go through now it means that a total of 15 months would occur, from 5 January 1984 until 1 April 1985, before the disappearance of white plates. In the metropolitan area there are 845 taxis, 250 having white plates. If there was uniformity in the industry it would be more cost efficient.The public would get better value for money and have a better distributed service and more efficiency among the taxis. On evidence presented to the Subordinate Legislation Committee and from facts I have ascertained South Australia at the moment has the highest fares for taxis in Australia. Evidence has been presented and, from what I have observed, white plates leave the city with a fare, deliver that fare and return to the city empty. By the same token green plates in suburban areas pick up a fare, bring it to the city and leave the city empty. So, it is a most inefficient way of running an industry, especially when the people of South Australia are dependent on that industry.

Evidence presented to the Subordinate Legislation Committee came from all avenues of people interested in taxi movement. The transport union and the Metropolitan Taxi Cab Board supported the green plates. Taxi drivers with green and white plates gave evidence. From sifting through that volume of evidence I came to the firm conclusion that it would be in the best interests of all concerned if the regulations were adopted and we had a one plate system. Presently, the one plate system applies in Melbourne, Perth, Brisbane and Hobart. I understand that Sydney is operating on a one plate system outside peak hours on mornings and evenings on week days and that they will gradually move to a one plate system.

It would appear that the Hon. Mr Cameron feels that the white plate system should be maintained. The shadow Minister in the other place, the Hon. Dean Brown, has gone on record as saying that he wants to abolish the white plates, but to allow three years for that to be done. I believe that if the Hon. Mr Cameron's motion is carried all it will do is add more confusion, conflict and disharmony to the industry. I believe that eventually there will be a one plate system. The Liberal Party, when in Government, indicated that it was going to abolish white plates and, even in Opposition, is still saying it will abolish them, but to allow three years instead of 15 months. This will only create false hopes in the bosoms of the white plate taxi drivers. I believe that it is in the best interests of all concerned and the consumers of South Australia that these regulations go through.

I am not sure how the Australian Democrats will vote on this issue. I have an inkling that they will support confusion and chaos and support the Opposition. I see no useful purpose being served by dragging out this issue any further. The Government opposes the motion of the Hon. Mr Cameron.

The Hon. J.C. BURDETT: I rise to support the motion. I am a member of the Subordinate Legislation Committee, as is the Hon. Mr Bruce, and I heard the evidence presented. I make two points. First, in all matters of this kind my main concern is with the consumer. This applied concerning the motion I moved regarding Medicare and is also the case with this motion. I was convinced by the evidence I heard that the consumers' interests would not be advanced by the retention of these regulations. I am satisfied that, if there is a one plate system in a city such as Adelaide, which has linear development stretching from Port Noarlunga to Elizabeth, in peak and prime hours taxis will cruise the high density areas, namely, the city, and outer areas like Elizabeth will find it hard to get a cab. At the present time with the system of white plates for the city, the unrestricted green plates and restricted green plates—and there are restricted green plates for Elizabeth—one gets cabs which drive in those lower density areas. I am satisfied that the consumer would be disadvantaged by the retention of these regulations.

Secondly, I raise a point mentioned by the Hon. Mr Cameron concerning the question of the capital investment of people who have paid for their white plates. This is established by statistics read out by the Hon. Mr Cameron. People with white plates have paid at least $3 000 more than other plate holders. If these regulations remain in force and are not disallowed those people will lose that money. These are comparatively small business men, and for them to lose $3 000 from their investment is unfair. As the Hon. Dean Brown said, this can be worked out in the future. It will not be worked out by these regulations in the short term. For these reasons, I support the motion.

The Hon. K.L. MILNE: The Democrats support the disallowance of the regulations on the understanding that there be a Select Committee of the Legislative Council. We realise that the Subordinate Legislation Committee did a great deal of work on the matter and that there have been a number of inquiries. We also feel that the recent inquiry by the Minister of Transport was too narrow and did not address some of the problems which were not as important as the common licence or one plate issue, but important just the same. A number of matters should be discussed. Therefore, we deem it wise not to approve the regulations at this stage.

The problem of common licences or one plate has been with us for seven or eight years. We feel that it would be a pity to half do the job for want of more discussion and thought. We are inclined to support a common licence eventually being introduced, but would like to be quite certain that this is, in fact, in the interests of the travelling public as well as the taxi owners and drivers. We have not had any evidence to that end. Verbal submissions indicate that it is not in the interests of all people, particularly people in Glenelg, Port Adelaide or Elizabeth. We are simply saying that this is a House of Review. This is a genuine case for pausing and making a review of suggestions from the Sub-

ordinate Legislation Committee. We are not criticising that committee; it did what it was asked to do and did it well.

The common licence has been an issue since the late 1960s when I was a member of the Taxi Board. We are not trying to unduly delay the matter, nor are we trying to be obstructive: we are just trying to be certain that this move is right. We will be supporting the Hon. Mr Cameron's motion.

The Hon. M.B. CAMERON (Leader of the Opposition): I will be very brief. It is important that we take the trouble to look into all sections of the industry and ensure that this is the proper step, that it is one that will bring about the harmony that the Hon. Mr Bruce talks about. It is important that we ensure that this change will be in the interests of consumers, because there is still a lingering doubt in the minds of some people that that might not be the case. It would be foolish to take a step within the industry if a Select Committee is to inquire into it. It is for that reason we have taken the step of moving for the disallowance of the regulations, as much as anything, to ensure that this step is the proper one.

From my reading of the conclusions from the committee of inquiry established by the Minister, I was left with much doubt as to whether the conclusions said anything other than that it will transfer disharmony from one section of the taxi industry to another. Also, it indicated clearly that there were no known advantages to consumers from this move. If that is the case we have to look closely as to whether that is the appropriate step. I regret that we had to take this action before the Subordinate Legislation Committee had finished its work. It has perhaps caused it to hurry its work, but there are reasons that honourable members are aware of, because of the impending starting date of the regulations and the necessity to take this step now in order to ensure that that does not happen. I thank the Hon. Mr Milne for his indication of support, and I trust that the Select Committee when it is established will do its work judiciously and will come forward with a report that will lead to the reforms that are necessary in some areas of the industry.

The Council divided on the motion:

Ayes (12)—The Hons. J.C. Burdett, M.B. Cameron (teller), L.H. Davis, R.C. DeGaris, Peter Dunn, I. Gilfillan, K.T. Griffin, C.M. Hill, Diana Laidlaw, R.I. Lucas, K.L. Milne, and R.J. Ritson.

Noes (9)—The Hons. Frank Blevins, G.L. Bruce (teller), B.A. Chatterton, J.R. Cornwall, C.W. Creedon, M.S. Feleppa, Anne Levy, C.J. Sumner, and Barbara Wiese.

Majority of 3 for the Ayes.

Motion thus carried.

VEGETATION CLEARANCE

Adjourned debate on motion of Hon. M.B. Cameron:

That regulations under the Planning Act, 1982, concerning vegetation clearance, made on 12 May 1983, and laid on the table of this Council on 31 May 1983, be disallowed.

(Continued from 7 December. Page 2422.)

The Hon. I. GILFILLAN: The Democrats intend to support the retention of the regulations which control the clearing of native vegetation. The regulations are not a threat to anything that the Democrats will be supporting. I would like to cover some of the background behind our attitude to this measure. The unfortunate situation that has arisen with enormous consequences, we feel, for South Australia and for those who care about the retention of natural vegetation is not so much the regulations or the fact that they are not being applied as thoroughly and efficiently as they could have been in regard to certain anomalies but primarily and emphatically because there is a building up of hostility between the farming community, the Government, and environmentalists.

One of the reasons why this measure has such dire consequences to South Australia is that environmentalists and Ministers of Environment and Planning do not understand that it does not matter how you frame legislation or what controls are imposed on the farming community, if they do not intend to protect the native vegetation declared not to be cleared and they allow the sort of erosive practices, the intrusion of stock, occasional misadventure with fire and that sort of thing, no native vegetation will be left as a result of these regulations in a short period.

I would say that in 50 years one would see dramatic changes. It is essential that some harmony and co-operation be achieved between the farming community, the environmentalists and the Minister for Environment in this case. In spite of that and maybe because of the regulations, there has been an accentuation of resentment from the farming community.

We believe that the regulations must remain in place. The climate is so disturbed now that, if there were even for a short period any relaxation of these regulations, enormous inroads would be made into the remaining native vegetation—and a small enough area it is—because people would act on panic and it would not be a deliberate, calm decision. So, we will not support any move to relax these regulations.

But, at the same time, and with some confidence, we believe that we and others of goodwill can contribute to improving the situation. As a result, I venture to suggest that because of my personal intervention the Minister went to Kangaroo Island and met in a very constructive climate with 35 farmers on the Island who had direct involvement in applications for clearing of native vegetation. At that meeting the Minister was able to give an undertaking to institute the farmer consultative panels that are currently operating and to allow an extra period for the clearing approvals to be commenced and completed, which meant that a lot less pressure and urgency was put on the farming community. Although it was by no means a complete reconciliation, it was a very substantial move towards understanding and trust. So, I believe that maybe by chance, maybe by the uniqueness of our situation, we are able to offer more construtive help in retaining what can be retained of native vegetation in South Australia through co-operating, discussing, acting as mediators and contributing ideas.

The Hon. Peter Dunn: Is your farm all cleared, Ian?

The Hon. I. GILFILLAN: No; I have 600 acres, which is probably a bigger percentage than most farmers in South Australia, and I do not intend clearing any more. I have said that before and I put it on record so that there is no dispute about it. There are obvious needs to review the regulations. I have appreciated the fact that the Minister (the Hon. Don Hopgood) has given me the opportunity to speak directly to officers in his Department about various details in the regulations that could and should be looked at, some of them quite minor, but they are very important if one is to build up a confidence in the farming community and in the regulations.

I just quote one example in this context because it highlights the sort of thing to which I am referring. There is a restriction on the clearing of native vegetation with a diameter over 15 cms. The anomaly with that is that in the Kangaroo Island mallee situation if one does not destroy the trees over 15 cms they will not survive because they are ecologically developed to revolve on the process of destruction by fire and revival from the root structure. A fire stimulates a re-germination of lots of the smaller herbage

which, if the scrub is left completely untouched by either fire or man made demolition, will gradually expire.

The point is that the farmers on the Island who know that see the regulation and immediately say, 'That is not practicable', and therefore the whole reputation of the regulation slips back a notch. That is just one example, which may appear relatively insignificant. However, when I repeat that the major aim is to establish this trust and co-operation, honourable members can see that those sorts of minor details are important. I can actually make a rather impassioned plea for the retention of native vegetation, but I rather suspect that the emotional response tonight may not be all that I desire. I see an amiable nod from the Chair.

I will make three significant points: first, what these regulations aim to achieve and are achieving is gardening. They are not substantial measures to retain for all time areas of major vegetation in South Australia. Even if the regulations as they are currently being applied are properly adhered to and protected by the farming community, in a matter of 200 to 300 years they will have virtually disappeared; they are not big enough. It has not a large enough conterminous area to be immune from the gradual erosive factors that take place on small areas of native vegetation.

A lot of people do not realise that just the intrusion of superphosphate and just the intrusion of annual exotic grasses will gradually destroy native vegetation. This is a call of a voice in the wilderness, and I want to see the wilderness retained. No-one yet, not even the Minister, has picked up what I see as the crying need in South Australia and that is to recognise that we have precious few areas large enough still to remain extant for 1 000 years and, unless we take legislative measures and educate the public to be responsible for this demand and priority in retaining our heritage for all time, it will be too late.

So, I urge the Government and those of goodwill towards keeping an environment that will be precious for years to come to bear in mind that the current procedure is gardening, with a relatively short life span for native vegetation, and we must take steps to retain, where we still have them, large conterminous areas that will survive ecologically intact for all time.

Secondly, one of the reasons why the farming community reacts with such hostility to the regulations is understandable when I wear my hat as a farmer, but it reflects a sort of Custer's last stand syndrome that the farming community has, partly from their own character, partly because it is whipped up by the UF and S and partly because of their traditional political philosophy. They are automatically suspicious of anything that is introduced by a Labor Government; they are automatically and quite often suspicious of regulations that are imposed by a bureaucracy.

The Hon. C.J. Sumner: Are they suspicious of a Labor Minister of Agriculture?

The Hon. I. GILFILLAN: I have not heard them express that yet. The fishermen seem to spend more time bashing me about that. That is an irrelevancy. As far as I know there is no regulation aiming to keep the Minister of Agriculture and Fisheries intact for the next 200 years. I would like to make that point, and I plead in this case with the farming community that they try to see the issue as apolitical as they so often do, and can, see it with a vision past their own temporary self-interest. I believe that they will respond to that call, and the first steps are being taken, but they will not be helped by disallowing these regulations.

The third and final point is the question of compensation. One of the major reasons why the farming community has so easily been secured in a position of opposition to the regulations is the catch cry of compensation. I am persuaded that in justice and logic there is a case for compensation where there has been imposed on a landowner a restriction on the use of that land which has resulted in a measurable loss of market value. I have heard in part the arguments against compensation, some based on the fear that it is contagious and spreads into other areas of quite justifiable Government decision making and planning.

The Hon. M.B. Cameron: It already happens in Western Australia.

The Hon. I. GILFILLAN: I am not happy with Western Australia. That is far too generous and is really a threat to economic viability. It is too wide. I will spell out what I see as an acceptable formula in a moment. It is appropriate to say here that, having claimed that I support the logic for compensation in certain categories, I think that there is another dimension. Those on the Government side who care for really achieving the end result should consider the matter on that criterion alone, if no other. If a reasonably acceptable form of compensation can be presented to the farming community, it will do much to establish goodwill, co-operation and a sense of fair play from that community.

I implore the Government and the Minister in particular to take very seriously the suggestion that I am putting forward. I suggest that there should be a tribunal to estimate the amount for compensation. That would be brought into play under the normal procedure when a landowner applied for permission to clear and is given an unsatisfactory response to his application. In that situation the landowner could apply to the tribunal for an estimate of compensation. I suggest that the compensation would be calculated on the estimated loss in market value of the area of native vegetation that was the subject of the application for clearance. I can give one simple example.

Quite obviously, the question of compensation is not exhaustively covered in what I am saying tonight. I welcome further discussion and inquiry on this matter outside of the Chamber or in debate at some future time. If, for example, a landowner applied to clear 200 hectares of native vegetation, the market value of that land prior to the application was $60 per hectare and the landholder was given permission to clear half the amount applied for, that is, 100 hectares, if he was so minded he would apply to the tribunal for compensation. The calculation from the tribunal could be based on the 100 hectares that the landholder had been given permission to clear, and that would not vary because he would still have the anticipation of permission to clear that land. The 100 hectares that he had not been given permission to clear would be estimated at a value that reflected the fact that the land must be retained in its native state, and that might well be $30 per hectare. Therefore, on my formula, the landholder would be able to receive compensation of the 100 by $30 per hectare gap between the market value equivalent, which would be $3 000.

I am suggesting that the tribunal that would make the decision would be a representative body, including a representative of land agents and stock companies that deal with the marketing of rural land, a representative possibly from the Lands Department, and a third representative, who may be a Ministerial appointment and who may be encouraged to represent the farming community (that is, someone who has either practised or been involved in farming). I do not believe that those details will be a stumbling block to this procedure. I recommend that as a basis upon which fair and just compensation could be developed. I hope that my suggestion will receive serious attention from all those who are genuinely concerned with achieving justice in this area.

In conclusion, I repeat that the Democrats do not support the move for disallowance. Although we acknowledge that there are faults, particularly in the early administration of the regulation, which caused a lot of resentment (and some

of it quite well justified), we are certainly not persuaded that disallowance is justified.

The Hon. L.H. DAVIS secured the adjournment of the debate.

FISHERIES ACT AMENDMENT BILL (No. 2)

The Hon. FRANK BLEVINS (Minister of Agriculture) obtained leave and introduced a Bill for an Act to amend the Fisheries Act, 1982. Read a first time.

The Hon. FRANK BLEVINS: I move:

That this Bill be now read a second time.

Given the lateness of the hour, I seek leave to have the second reading explanation inserted in *Hansard* without my reading it.

Leave granted.

Explanation of Bill

The Bill seeks to incorporate three measures into the Fisheries Act, 1982, which is expected to come into operation on 1 July 1984. An amendment is proposed to section 38 to enable a transferable fishery licence, upon the death of a licence holder, to vest in the personal representative of the deceased as part of the estate, and to be transferred in accordance with the laws of succession but subject to the consent of the Director of Fisheries.

To enable a fishing operation to continue (and this is generally for the benefit of the family of the deceased), provision is made in the Bill for the Director to consent to another person acting as registered master of a boat where the licence holder had been the registered master. To cover the gap until an executor of the will or administrator of the estate is appointed, the definition of 'personal representative' means, in relation to any period for which there is not an executor or administrator, the Public Trustee.

Because some deceased estates in practice take years to wind up, and such delays, for one reason or another, can be contrived, the Bill proposes that a licence, not transferred within 12 months after the death of a licence holder or such further period as may be approved by the Director, may be suspended pending transfer of the licence. This has particular relevance in those fisheries where an 'owner-operator' policy applies, since the licence holder is required by regulation to be the registered master and thus to be the person on board the registered boat during all fishing operations, subject to approved short-term exceptions.

The Bill also seeks to provide that the Minister may, by notice in the *Gazette,* implement fisheries management measures relating to prawns and abalone during a specified period. These are areas in which there is a particular need to respond quickly to circumstances. Speed and flexibility are vital elements in, for example, the situation where seasonal conditions cause a delay in the growth of prawns and an extra two weeks closed season is required at short notice to improve the yield. Past experience has established that the period from recommended management decision to proclamation is unacceptably long.

Accordingly, the Bill proposes an amendment to section 43 to provide that the Minister may by notice in the *Gazette,* rather than, as is presently the case in the Fisheries Act, 1982, the Governor by proclamation, declare temporary prohibitions relating to prawns or abalone. The amended provision would correspond to that contained in the Fisheries Act, 1971, following the coming into operation of the Fisheries Act Amendment Act, 1983, on 3 November 1983, but be restricted to prawns and abalone. A further measure proposed would enable the Minister to delegate his powers conferred by section 28 with respect to the seizure and forfeiture of fish or other things, for example, devices. An amendment to section 23 is thus proposed.

In view of the perishable nature of fish, problems have been envisaged with the present section 28 provisions concerning disposal of fish taken in contravention of the Act which are seized by a local fisheries officer, at times when it may be inconvenient to contact the Minister for instructions, for example, at weekends, on public holidays or at night. A delegation for this purpose from the Minister to fisheries officers as a class of persons, together with the Director and certain other officers, would enable those officers to, for example, seize a truckload of prawns and deliver them to a fish processor for credit of the Fisheries Research and Development Fund, before deterioration and a consequent loss in value of the fish; donate a small quantity of seized fish to a charitable organisation; store and retain such fish as evidence; or dispose of such fish by destruction. The latter situation could arise in remote areas, for example, Cooper Creek. If a case were subsequently not proved or proceeded with, the fisherman would have the right to compensation equal to market value at time of seizure, as provided in section 28 (9) *(c).*

A delegation from the Minister is also desired to empower fisheries officers to release seized items, for example, devices, if they are no longer required as evidence, and to destroy seized items, for example, devices of illegal specifications or devices found unattended and unmarked in closed waters. Both the Australian Fishing Industry Council (AFIC) representing professional fishermen and fish processors, and the South Australian Recreational Fishing Advisory Council (SARFAC), representing recreational fishing interests, have been consulted. They support the measures in this Bill.

Clause 1 is formal. Clause 2 provides that the measure is to come into operation on a day to be fixed by proclamation. Clause 3 amends section 23 of the principal Act which provides, in subsection (1), for delegation by the Minister of any of his powers under the principal Act. Subsection (2) provides that the Minister's powers under section 28 (which relates to the seizure and forfeiture of fish, boats and other things in relation to which offences are committed) and section 57 (which relates to the suspension and cancellation of licences) may not be the subject of a delegation. The clause amends subsection (2) by removing the reference to section 28, thereby enabling the Minister's powers under that section to be the subject of a delegation.

Clause 4 amends section 38 of the principal Act which provides that fishery licences are not to be transferable unless the scheme of management for the fishery so provides, in which case they are to be transferable subject to the consent of the Director. The clause amends this section by inserting provisions catering for the transfer of a fishery licence where the holder of the licence dies. Under the clause, a fishery licence that is transferable shall, upon the death of the licence holder, pass to and become vested in the personal representative of the deceased but may not be transferred by the personal representative in the course of the administration of the deceased's estate except with the consent of the Director.

The clause provides that, where the deceased licence holder was the registered master of a boat, the boat may continue to be used for fishing during the administration of the deceased's estate with the consent of the Director and in accordance with any conditions of such consent. Proposed new subsection (7) provides that, if a licence is not transferred by the personal representative (with the consent of the Director) within 12 months or such further period as may be allowed by the Director after the death of the licence holder, the licence shall be suspended pending such transfer. 'Personal representative' is defined by proposed new sub-

section (8) to mean the executor of the will or administrator of the estate of the deceased or, for any period for which there is not an executor or administrator, the Public Trustee.

Clause 5 amends section 43 of the principal Act which empowers the Governor, by proclamation, to prohibit fishing activities of a specified class during a specified period. The clause amends this section so as to enable such a prohibition, where it relates to prawns or abalone, to be imposed by the Minister by notice published in the *Gazette*.

The Hon. M.B. CAMERON secured the adjournment of the debate.

PARLIAMENTARY SALARIES AND ALLOWANCES ACT AMENDMENT BILL

Adjourned debate on second reading.

(Continued from 27 March. Page 2824.)

The Hon. M.B. CAMERON (Leader of the Opposition): The Opposition will not oppose this Bill. The form of this legislation is further confirmation of the stance adopted by the Opposition in January in relation to this matter. It means that eventually salaries decided on by the salaries tribunal will be granted to members over a phase-in period. During that period I must say that I found slightly wearing the attitude adopted by members of Federal Parliament, including the Prime Minister and others. They pontificated, and in fact berated us, about the terrible decision of the salaries tribunal in this State. In fact, over that period this Parliament and its members have shown great responsibility towards salary increases, while in the same period Federal members received what I believe was a 21.2 per cent increase.

The Hon. R.C. DeGaris: How did the Democrats in the Senate vote on that?

The Hon. M.B. CAMERON: I have no idea. I do not remember hearing any refusals. It would have been a little less hypocritical if the Federal members who jumped into the fray had reduced their salaries and then started talking about reducing our salaries to where we are. I was surprised to hear the Prime Minister telling us that we should have a salaries tribunal, which showed a great lack of knowledge of how we are operating in South Australia. No matter when an increase is granted to members of Parliament, there will always be public flak. On this occasion there was more than usual because of the size of the increase. However, I expect to be standing up defending in some way or other salary increases in the future in the face of public criticism, because that it is just the way the public see us in this profession. With those few words, I support the Bill.

The Hon. L.H. DAVIS: This Bill comes before us as a result of public outcry at the beginning of the year when the Premier announced the findings of the Parliamentary Salaries Tribunal. Of course, it is not so long ago that Parliament was master of its own destiny in the matter of members' salaries. That, not surprisingly, attracted some flack, and therefore an independent Tribunal was established to determine the salaries and allowances of members of Parliament; it was a Tribunal which, in many respects, was not unlike the tribunals which determine salaries and wages for the community at large. However, even the independent Tribunal was not above criticism.

It is worth remembering that it was in 1981 that the then Tonkin Government tried without success to introduce into legislation a requirement that economic conditions should be noted by the major tribunals in this State when making salary determinations. In fact, at that time in this Chamber the Labor Party Opposition and the Democrats combined to defeat that proposal. However, in 1982 the Tonkin Government was successful in writing into the Parliamentary Salaries Tribunal requirements, when considering salaries and allowances for Parliamentarians wages, due regard should be paid to the public interest and the state of the economy. So, it cannot be said that the Liberal Party in this Parliament has been neglectful of the need for members of Parliament to set an example in salary determinations.

The Hon. Martin Cameron has rightly observed that, when one looks at salary increases over recent years, State members of Parliament have not fared well. Over the period 1981 to 1984 the increase in such salaries has been some 34.9 per cent, whereas the increase over that same period for a Federal member of Parliament has been 41.8 per cent. One could look through a whole range of occupations within the Public Service, the trades sector, and the professional and service sectors of the economy and find increases well in excess of that received by State members of Parliament. It is perhaps unfortunate that we have been forced to stand and justify the increase granted to us. It does not give me any pleasure to be standing here tonight having to do that.

It is pertinent to note that quite a good deal of the furore associated with the 18.9 per cent increase resulted from the fact that, in 1983, the Parliamentary Salaries Tribunal awarded no increase because of the example that had been set by the Tonkin Government. Ironically, the example set for the community in that period resulted in an abnormally large increase in 1984. I suspect that no member of Parliament received applause, letters or phone calls in 1983 when setting an example of wage restraint in taking no increase at all. Indeed, it is worth remembering that at the Federal level in two of the past eight or nine years there were no increases at all in Federal Parliamentary salaries, the argument being that that would set an example for the rest of the community. I am not a cynical person, but I suspect that that example has not been really followed.

I would hope that the media in future, if commenting on members' salaries, would do so in a balanced way. It is easy to beat up the issue of members of Parliament because, as one honourable member observed earlier this evening in another debate, it has been said that members of Parliament are one or two positions below child molesters on the popularity scale in the community at large. I would hope that there is some balance when discussing this matter. If the media is going to publish, as it is entitled to do, the salaries of members of Parliament and berate members for receiving unduly large salary increases, at the same time it may care to publish the salaries and/or wages of the trades and various professions and service industries because there can be no argument that many members of Parliament in this Chamber and in another place could receive far more through their profession or trade outside this Parliament.

However, they have chosen to serve the people of South Australia as members of Parliament. I do not mind that fact at all—it is a healthy thing in the community that people are prepared to serve as members of Parliament. However, if we are going to have proper members and proper representation, it is important to have quality in the Parliament. If the salaries are going to be restricted unduly, there can be no question that the people of South Australia will not be so well served. It will be harder to attract proper representation.

Finally, having moved from Parliament's determining the salaries to an independent tribunal determining the salaries and still being criticised for that, it may well be that this Parliament on some future occasion will resolve to link Parliamentary salaries to general awards, the national wage case awards or the consumer price index. I suggest that, ironically, if that was done it may well be that members of

Parliament achieve greater salary increases under that arrangement than they currently receive. In supporting the comments of the Hon. Martin Cameron, who has indicated that the Opposition is not opposing the legislation, I raise the point that it is an easy issue to beat up in the media. It is a popular issue at a time when wage restraint is an important consideration in Australia. However, we should not ignore the fact that what was seemingly a large increase this time was occasioned by the very example of wage restraint which had been shown in the preceding year.

The Hon. G.L. BRUCE: I support the second reading. I would like to put on record statements made in the newspaper, and I would like to comment about the very cynical attitude that some people adopted towards the wage increase. In particular, I refer to the *Advertiser* of Wednesday 11 January, and I must say that the *Advertiser* showed more responsibility than the other local newspaper, the *News*, which conducted a campaign against salary increases that could only be described as a whipping up of ferment out of all proportion. I was concerned about some of the comments. In the *Advertiser* it was stated:

Describing the increases as totally irresponsible, Mr Sinclair said unions would find it hard now not to press for claims outside the accord... Earlier in the day the Deputy Leader of the Opposition, Mr Howard, said Mr Hawke must show some real leadership in defending the accord... The Leader of the Federal Opposition, Mr Peacock, told an Adelaide press conference yesterday that the South Australian MPs' rise should be cut to 4.3 p.c. in line with the national wage increase... Mr Dawkins said later that Mr Hawke's letter emphasised the need for the Premiers to take all measures open to them to ensure the effective operation of the centralised wage system.

Mr Hawke went on record as saying that he did not approve of the wage rise. Further, it was stated:

The basic salaries of Federal and Victorian MPs have both risen by $7 143 or 21.6 per cent and 21.96 per cent respectively since the last South Australian rise granted from 1 January 1982.

That is pure hypocrisy. For the record, I would like to read an article by the industrial reporter, Michael Grealy, that was featured on the front page of the *Advertiser*. I cannot see how anyone in the community could argue with the points he put. So that it is available for anyone to see when eventually this Bill goes through (as I hope it will), I will read this article into *Hansard* for the record. Under the heading 'Comparison justifies big increase for South Australian politicians', it is stated:

The pay rise for South Australian politicians is justified when compared with the rise in the general community standard in the post-indexation period. The 18.9 per cent rise just awarded to South Australia's 69 MPs puts them about 6.4 p.c. ahead of the general community standard over the past two years. But in 1981 the general community standard or metal tradesman's rate moved by about 7 per cent more than the rise awarded to the politicians. So the rise awarded last week by the Parliamentary Salaries Tribunal has almost redressed the situation in the three years since January 1981. This is backed up by union and employer opinion.

Further study of the 18.9 per cent or $5 970-a-year base rise to South Australia's MPs shows their increase is less than that received by politicians in some other State in the past two years. The basic salaries of Federal and Victorian MPs have both risen by $7 143 or 21.6 per cent and 21.96 per cent respectively since the last South Australian rise granted from 1 January 1982.

The South Australian rise fits fairly and squarely in the middle of the 'basket' of rises won by politicians in all States during that time. The Tribunal says in its decision that it decided on the 18.9 per cent rise by using the principle of comparative wage justice with interstate politicians while giving 'greatest heed' to the NSW rates, which also are set by a tribunal. Its 1982 decision put South Australian politicians $470 behind those in NSW. Its 1984 decision leaves them $500 behind the NSW base rate of $38 000. Last week's rise took the basic salary of South Australian MPs from $31 530 to $37 500.

The Tribunal says in its decision MPs should not be treated any differently from other members of the work force in South Australia. The metal tradesman's rate moved by a net 10.6 per cent in 1982 and 1983, made up of a $14 or 6.3 per cent rise in June 1982, and the national 4.3 per cent indexation rise in October last year.

An expected rise in the December 1983 quarter of about 2 per cent will be reflected in the next indexation rise in March. This means the rate will move a net total of 12.5 per cent for cost-of-living increases in 1982 and 1983, or 6.4 per cent behind the South Australian MPs rise of 18.9 per cent. But in 1981 the tradesman's rate had two indexation rises in January and May of 3.7 per cent and 3.6 per cent and the large $25 or 12.7 per cent post-indexation rise in December. This is about 7 per cent ahead of the 13.5 per cent rise granted to South Australian MPs from 1 January 1982. Also, $9.30 was transferred in December from the tradesmen's over-award payments to the award.

Small differences between politicians' pay rises and community wage movements occur quite often. In 1980 South Australian MPs were awarded an extra 11 per cent compared with the 9 per cent wage indexation rises awarded by the Arbitration Commission. But any thought that South Australian MPs are significantly ahead is dispelled by comments made in the Parliamentary Salaries Tribunal report of 1982 when it awarded a 13.5 per cent rise from 1January. The Tribunal says average weekly earnings throughout Australia rose by 103.7 per cent from 1 January 1975 to 30 September 1981.

Federal and State awards between January 1975 and December 1981 rose by 101.3 per cent and 96.2 per cent respectively. The consumer price index rose by 105.5 per cent between the December quarters of 1974 and 1981. (These increases are to be compared with a percentage increase of the basic salaries of members of the South Australian Parliament from 1 January 1975 to 31 December 1981 of 68.3 per cent), the Tribunal says.

That article puts squarely on the line where we lie in the wages situation. Further, an article on industrial affairs stated:

The recent bleating about MPs' wage rises should be taken one step further. Shoot-from-the-hip critics and newspapers that jump on the band waggon should spell out what socialistic uptopia they are seeking when they attack such rises.

Do they believe everyone in the community should earn $350? Do they think a doctor or a tradesman should pick up the same pay packet similar to that of an unskilled, untrained worker? Are they opposed to pay margins representing skill, years of training, intelligence and effort? The delay in MPs getting their rise is a useless political exercise.

That is just what it is. I understand that the Hon. Mr Milne has amendments on file, but that is a useless political exercise. The honourable member is kite flying. This is a popular issue, and I do not believe that the criticism is justified. The honourable member is trying to cash in on a cheap issue, trying to denigrate politicians and their salary increases. If we go down, everyone goes down with us: if we pick up increases, we are picking up what has happened in the community. It would be wrong to change that situation.

Effectively, because this Bill has been introduced we will receive an 11 per cent increase over the year instead of the 18 per cent increase that was awarded, and I believe that that is a big enough sacrifice. Even then, it is going too far. I do not believe that that sacrifice should be made in regard to wage justice, which should be followed in setting Parliamentary salaries as well as by industrial tribunals in setting the salaries of anyone else. I fully support the second reading, and I will oppose any amendments moved by the Democrats.

The Hon. K.L. MILNE: It was most amusing, if it was not sad, to see the agonising of these good people who are trying to justify an increase.

The Hon. G.L. Bruce: There was no agonising.

The Hon. K.L. MILNE: Perhaps the honourable member was not agonising because he does not have any morals in this matter.

The Hon. C.J. Sumner: We do not have the same private income as you have.

The Hon. K.L. MILNE: As a matter of fact, I think that the honourable member between him and his wife, to be honest, has a comparable income.

The Hon. C.J. Sumner: That is a ludicrous proposition.

The Hon. K.L. MILNE: I do not know what figures the honourable member is working on. The Government Bill that I seek to amend perpetuates the mistakes which have brought criticism on members of Parliament, with accusa-

tions of self-seeking and treating ourselves differently from the rest of the community. The Opposition and the Government have missed the point. It is not a question of whether the rise can be justified: it is a question of whether members of Parliament in South Australia should take the lead in wage restraint. The Hon. Mr Bruce has just proved that we do not have restraint when he said that we have caught up with the past three years and is proud about that.

The Hon. G.L. Bruce: What is wrong with that?

The Hon. K.L. MILNE: On the one hand we talk about wage restraint and, on the other, the honourable member is talking now about catching up. The honourable member thinks it is right and proper that we have caught up to everyone else and done exactly what everyone else is doing. The result is that the workers are becoming unemployed. Honourable members know what is caused by wage hikes.

The increase of 18.9 per cent was, at best, unfortunate, and could not have come at a worse time. It could be justified in no way. Nearly every decision which the Government made on State finances, salaries and taxes has broken election promises and hurt the very people one would expect them to protect—the pensioners, small business and members of trade unions which rely on the private sector. The Government has predictably looked after the public sector: the Public Service, teachers, and members of Parliament and everyone on the taxpayers pay-roll. The Public Service and teachers only have to cough and the Government rolls over on its back like a spaniel.

The Australian Democrats consider the performance of the Government in this area to be a disgrace and we ask it to begin to rectify its mistakes by agreeing to amendments in this proposed Bill. This is its last opportunity to do so. The Prime Minister and the Federal Government called for, first, a wage pause and, secondly, a wage accord, both of which were agreed to and accepted by the entire Australian community. Well, nearly the entire community—South Australia's performance has been very disappointing, to put it mildly.

The Hon. G.L. Bruce: What about the Feds and Victoria?

The Hon. K.L. MILNE: We are not talking about them: we are talking about what you have to do—not what someone else has to do. If others do not take the lead, I suggest that you take the lead. You are suggesting that you do not want to.

The Hon. G.L. Bruce: That is right. Spot on.

The Hon. K.L. MILNE: I am sorry that that comment is on record. There are no less than five groups of salary earners on the public pay-roll in South Australia who have already broken the accord. First, in April 1983, soon after the wage pause began, our Supreme Court judges—all unlikely people—sought and received salary increases of up to $5,000 per annum. I cannot think of anybody who needs a $5,000 increase less. Secondly, for some reason this flowed on to the permanent heads of Public Service departments.

The Hon. C.J. Sumner: Did Mr Justice Millhouse give his increase to charity this time?

The Hon. K.L. MILNE: No, he did not. He did not have the discipline he had when he was in the Democrats. We could not handle him. He got greedy like the rest of you. I was very sorry to see it.

The Hon. C.J. Sumner: Are you giving your increase to charity this time?

The Hon. K.L. MILNE: I have not got it. I am proposing that we do not get it. We have already said what we will do if we have to take it. We are not going to give it to charity: we are going to do something else with it.

The Hon. C.J. Sumner: What are you going to do with it?

The Hon. K.L. MILNE: We have said what we are going to do. We will tell you when you have made a decision.

The Hon. J.R. Cornwall: Is this a well publicised secret plan?

The Hon. K.L. MILNE: It has been publicised.

The PRESIDENT: Order! There have been enough interjections.

The Hon. K.L. MILNE: The next group to receive an increase was the Public Service clerical officers followed by the teachers. Both categories received over and above 4.3 per cent awarded by the CPI decision in 1983. Now politicians come along with a rise of 18.9 per cent, which is way above any accord. We are to receive 18.9 per cent in the end in four stages: that does not disguise the fact or fool anybody. One should not forget that percentage increases of any kind are iniquitous. Honourable members have known this for upwards of 10 years.

The Hon. G.L. Bruce: I haven't.

The Hon. K.L. MILNE: It is about time that the honourable member did because he knows perfectly well that percentage wage increases have been frowned upon by Federal courts. I do not know whether or not our courts have caught up with it. Federal courts have said this, but gave the 4.3 per cent rise to avoid industrial disruption. Public Service and teachers unions, do not have to worry because the Labor Party looks after them, but does not look after the other unions which are getting smaller and going backwards and having a hard time. Many union members are unemployed.

The Hon. G.L. Bruce: Do you reckon that by us going down the plughole in wages it will help them? That will be used as a whipping block to not give them any rises.

The Hon. K.L. MILNE: Don't be silly. This is a sorry series of weak decisions by the Government, supported by the Liberal Party. The rest of Australia must be wondering what we are going to do next. We have a choice right now. We either pass this Bill as it is and confirm that we are selfish in the extreme and are not to be trusted or we agree to amend the Bill, as I am suggesting, so that we, as politicians, lead the way in wage restraint and accept the same wage increases as anyone else.

The Hon. Barbara Wiese interjecting:

The Hon. K.L. MILNE: If you support what I am saying you will do it. We now know that indexing wages at the same rate as the rise in the cost of living does not do what we thought 10 years ago it did. It does not improve the situation or stop inflation. It merely perpetuates the dreadful spiral of increased costs, wages, unemployment, welfare, taxation, and so-on. The Labor Party should know that, because Bob Hawke's accord worked. The wages pause worked and the economy went ahead, partly because of world recovery, partly because the drought stopped but, partly because of the wage pause.

The Hon. L.H. Davis: So was Malcolm Fraser's wage pause.

The Hon. K.L. MILNE: It was contributed to by Malcolm Fraser's last Budget. The Commonwealth wage fixing tribunal has known this for some time and has said so. I doubt whether the State tribunals have caught up with it yet and, if they have their decisions do not reflect this. Indexing wages and salaries on a percentage basis increases the gap between the haves and have nots and is divisive. I would have thought that it was completely contrary to Labour policy.

I have been asked by one of the Labor Party's senior members now retired, who shall be nameless, to plead for the abolition of indexation through the Democrats in Federal Parliament. The Labor Party wishes it had never been brought in. I implore all members of the Council to make an honourable decision right now and show the rest of Australian that we have some honesty and courage left.

My amendments will reduce the recent 18.9 per cent salary increase to 4.3 per cent as from 6 October 1983.

It will avoid any catch-up of salaries because if we all did that, if everyone throughout Australia did that, the accord would break up because of leap frogging. Everyone criticises the builders labourers for trying to put something over, and now we are—

The Hon. Barbara Wiese: The AMA likes it!

The Hon. K.L. MILNE: Do not bring the AMA into it. They would be the greatest racket this side of the teachers. We want to limit the powers of the tribunal to granting increases no larger than the central CPI increases while the indexing system continues, although I hope it will not continue for much longer. I want to increase the number of members of the tribunal from three to five so that the public servants on the tribunal are in the minority. I do not think it is fair for us to have our wage increases calculated by public servants, and I do not think it is fair on them.

This is the least that we should do in order to display some leadership in the present situation and retain some dignity in being members of the South Australian Parliament. We have to remember that our Parliamentary allowances have already been increased as recommended by the Salaries Tribunal. There has not been a word about that. I support the second reading knowing that the entire State is watching to see whether we as a Parliament and whether members as individuals in it are true or false—just that.

The Hon. C.J. SUMNER (Attorney-General): I thank honourable members for their contributions to the debate on this very important measure. In response to the Hon. Mr Milne I make the following points. First, he says that we have looked after the Public Service, teachers, members of Parliament and everyone on the taxpayers' pay-roll. He then gives some examples of increases that have occurred, including Supreme Court judges, permanent heads of the South Australian Public Service departments, clerical officers and the like. All those increases were in accordance with accepted wage guidelines and decisions that had already been taken. Increases for judges and permanent heads were due to them before the wages pause was instituted in December 1982.

The other increases mentioned by the Hon. Mr Milne were also increases that were justified in accordance with the normal wage fixing principles. The increase to Parliamentarians of 18.9 per cent was determined by an independent tribunal, the Parliamentary Salaries Tribunal, also in accordance with well established criteria. As has already been pointed out, the 18.9 per cent, as a result of this Bill which has been introduced to interfere with the Tribunal's decision, will effectively mean an 11 per cent increase in 1984 after a two-year pause on increases in salaries of members of Parliament.

If one takes into account the other effect of the Bill now before the Council, namely, that there will be no indexation increases to Parliamentarians' salaries in 1984 (until the end of 1984), that further reduces the effect of the 18.9 per cent increase. So, the 18.9 per cent increase is to be phased in over the whole of 1984, effectively making it 11 per cent. Further, there will be no indexation increases in 1984, but such increases may be given to the rest of the work force in accordance with the principles of wage indexation; that may be a further 7 per cent which would not be available to members of Parliament although, presumably, it will be available to the rest of the work force, including judges and the like. The increase that is effected by this Bill is nothing like the 18.9 per cent awarded by the Tribunal. It is a substantial reduction on that increase, taking into account the two effects of this Bill.

The Hon. I. Gilfillan: Why are you not bringing in the full 18.9 per cent?

The Hon. C.J. SUMNER: The full 18.9 per cent is being brought in, but in stages during 1984.

The Hon. I. Gilfillan: Why?

The Hon. C.J. SUMNER: By the end of 1984 the full 18.9 will have been awarded.

The Hon. I. Gilfillan: Why do you not bring in the full 18.9 per cent now?

The Hon. C.J. SUMNER: I would have thought that it was obvious to the honourable member, who is a politician.

The Hon. K.L. Milne: It is obvious that you are a bit ashamed.

The Hon. C.J. SUMNER: There was a Tribunal decision. All members of Parliament support the Tribunal, which was established some years ago. In fact, Parliamentary salaries have been taken out of the political arena, but it seems that that move has not achieved that end and, for that reason, this Bill is now before us—a Bill to interfere with the Tribunal's decision in the manner that I have outlined. The Hon. Mr Milne's contribution was full of inaccuracies, some of which I have pointed out to him; namely, the five groups of salary earners on the public pay-roll who have allegedly broken the accord—those increases did not break the accord, as I have pointed out. The Hon. Mr Milne also seems to be under a misapprehension as to the composition of the Tribunal when he claims that his amendment will increase from three to five the number of members so that public servants are in the minority.

Even on the Tribunal now there is only one member who can be considered to be a public servant, that is, the Chairman of the Public Service Board. Although technically a public servant, he is also a statutory officer. The other two members are a lawyer (a QC, who was in private practice and who is now effectively retired) and a judge of the Supreme Court.

The Hon. K.L. Milne: He is paid by the Government.

The Hon. C.J. SUMNER: If the Hon. Mr Milne wants to say that people are on the public pay-roll he should select his words more carefully. What the honourable member said in his speech was inaccurate. Only one Tribunal member could be considered to be a public servant. There has been enough debate on the Bill in the community. Obviously, the question of Parliamentary salaries and allowances will need to be addressed again, because the current system does not appear to be satisfactory to the public nor to Parliamentarians presently but, for the moment, I ask honourable members to support the Bill.

Bill read a second time.

The Hon. K.L. MILNE: I move:

That Standing Orders be so far suspended as to enable me to move an instruction without notice.

A division having been called for and there being not a single member on one side, the division could not further proceed, and the President declared for the Ayes.

Motion thus carried.

The Hon. K.L. MILNE: I move:

That it be an instruction to the Committee of the whole Council on the Bill that it have power to consider a suggested new clause dealing with the constitution of the membership of the Parliamentary Salaries tribunal.

A division having been called for and there being not a single member on one side, the division could not further proceed, and the President declared for the Ayes.

Motion thus carried.

In Committee.

Clauses 1 and 2 passed.

New clause 2a—'Parliamentary Salaries Tribunal.'

The Hon. K.L. MILNE: I move the following suggested amendment:

Page 1, after line 15—Insert new clause as follows:

2a. Section 3 of the principal Act is amended—

(a) by striking out from subsection (2) the passage 'three members' and substituting the passage 'five members';

(b) by striking out subsection (3) and substituting the following subsection:

(3) One member shall be appointed on the nomination of the Chamber of Commerce and Industry, South Australia Incorporated and one member shall be appointed on the nomination of the United Trades and Labor Council of South Australia;

(c) by striking out from subsection (4) the passage 'Each member' and substituting the passage 'Each of the other members'; and

(d) by inserting after subsection (5) the following subsection:

(5a) The Governor shall appoint a member to be the Chairman of the Tribunal.'

The CHAIRMAN: This being a money clause, the amendment, if carried, must be suggested to the House of Assembly.

The Hon. C.J. SUMNER: On a point of order, why is this considered to be a money clause, Mr Chairman?

The CHAIRMAN: I am following the general criteria for legislation dealing with Parliamentary salaries.

The Hon. C.J. SUMNER: As I understand it, the suggested new clause 2a deals with the Parliamentary Salaries Tribunal. That seems to me not to be in any way a money clause, unless you, Mr Chairman, deem this to be a money Bill, in which case all the honourable member's amendments are out of order.

The CHAIRMAN: The amendments would be out of order, if they were moved as amendments, but they are only suggested amendments. Past practice dictates that all Bills dealing with Parliamentary salaries are treated as money Bills. Therefore, this measure is also regarded as a money Bill and, as this is part of a money Bill, it is a suggested amendment.

The Hon. C.J. Sumner: This is not a money clause.

The CHAIRMAN: I am happy to accept any ruling from the Committee. I am merely following past practice. If the Committee wishes to make a different decision on this Bill, I am happy to deal with it on that basis.

The Committee divided on the suggested new clause:

Ayes (2)—The Hons. I. Gilfillan and K.L. Milne (teller).

Noes (19)—The Hons. Frank Blevins, G.L. Bruce, J.C. Burdett, M.B. Cameron, B.A. Chatterton, J.R. Cornwall, C.W. Creedon, L.H. Davis, R.C. DeGaris, Peter Dunn, M.S. Feleppa, K.T. Griffin, C.M. Hill, Diana Laidlaw, Anne Levy, R.I. Lucas, R.J. Ritson, C.J. Sumner (teller), and Barbara Wiese.

Majority of 17 for the Noes.

Suggested new clause thus negatived.

Clause 3—'Certain limitations to apply to Tribunal's powers.'

The Hon. K.L. MILNE: I move the following suggested amendment:

Page 1, lines 22 and 23—Leave out '(being an order made during or after 1985)'.

Suggested amendment negatived; clause passed.

Clause 4—'Variation of determination dated 22 December 1983.'

The Hon. K.L. MILNE: I move the following suggested amendment:

Page 2, lines 16 and 17—Leave out 'in the manner set out in the Sixth Schedule' and insert 'so that the amounts payable by way of basic salary and additional salary pursuant to the determination shall be the amounts set out in the Sixth Schedule'.

This amendment restricts the salaries as set out in the sixth schedule. It is the decision we were hoping for. I realise that members are opposing the suggested amendment, but I ask that it be discussed.

The Committee divided on the suggested amendment:

Ayes (2)—The Hons I. Gilfillan and K.L.Milne (teller).

Noes (19)—The Hons Frank Blevins, G.L. Bruce, J.C. Burdett, M.B. Cameron, B.A. Chatterton, J.R. Cornwall, C.W. Creedon, L.H. Davis, R.C. DeGaris, Peter Dunn, M.S. Feleppa, K.T. Griffin, C.M. Hill, Diana Laidlaw, Anne Levy, R.I. Lucas, R.J. Ritson, C.J. Sumner (teller), and Barbara Wiese.

Majority of 17 for the Noes.

Suggested amendment thus negatived; clause passed.

Clause 5—'Insertion of Sixth Schedule.'

The Hon. K.L. MILNE: I move the following suggested amendment:

Pages 2 to 9—Leave out the proposed new Sixth Schedule and insert schedule as follows:

'SIXTH SCHEDULE

Basic and Additional salaries payable pursuant to the determination of the Tribunal dated the 22nd day of December, 1983.

MINISTERS OF THE CROWN

	$
Premier	
Basic salary	32 890
Additional salary	38 200
Deputy Premier	
Basic Salary	32 890
Additional salary	26 840
Leader of Government in Legislative Council	
Basic salary	32 890
Additional salary	23 350
Other Ministers	
Basic salary	32 890
Additional salary	22 000
OFFICERS OF PARLIAMENT	
President of Legislative Council	
Basic salary	32 890
Additional salary	18 420
Speaker of House of Assembly	
Basic salary	32 890
Additional salary	18 420
Chairman of Committees in House of Assembly	
Basic Salary	32 890
Additional salary	9 210
Leader of Opposition in Legislative Council	
Basic salary	32 890
Additional salary	8 490
Leader of Opposition in House of Assembly	
Basic salary	32 890
Additional salary	22 000
Deputy Leader of Opposition in House of Assembly	
Basic salary	32 890
Additional salary	8 490
Government Whip	
Basic salary	32 890
Additional salary	6 045
Opposition Whip	
Basic salary	32 890
Additional salary	6 045
Other Members of Legislative Council	
Basic salary	32 890
Other Members of House of Assembly	
Basic salary	32 890'

It is simply the provision setting out the new salaries scale subject to the amendment to clause 4 being passed. It is no longer relevant and I will not further insist upon it.

Suggested amendment negatived; clause passed.

Title passed.

Bill read a third time and passed.

ROAD TRAFFIC ACT AMENDMENT BILL

Received from the House of Assembly and read a first time.

MARALINGA TJARUTJA LAND RIGHTS BILL

The House of Assembly intimated that it had agreed to the Legislative Council's amendments.

DAVID JONES EMPLOYEES' WELFARE TRUST (S.A. STORES) BILL

Returned from the House of Assembly without amendment.

TRUSTEE ACT AMENDMENT BILL (No. 2)

Returned from the House of Assembly without amendment.

OMBUDSMAN ACT AMENDMENT BILL

Received from the House of Assembly and read a first time.

CLEAN AIR BILL

Received from the House of Assembly and read a first time.

HEALTH ACT AMENDMENT BILL

Received from the House of Assembly and read a first time.

The Hon. J.R. CORNWALL (Minister o Health): I move:

That this Bill be now read a second time.

In view of the lateness of the hour, I seek leave to have the second reading explanation inserted in *Hansard* without my reading it.

Leave granted.

Explanation of Bill

The object of this small Bill is to remove those sections of the Act that empower the Governor to establish a Clean Air Committee, an Air Pollution Appeal Board, and to make regulations relating to clean air. The regulations made under these sections will be revoked successively as the new Clean Air Act comes into operation.

Clause 1 is formal. Clause 2 provides for commencement of the Act upon proclamation. Clause 3 repeals the sections dealing with the Clean Air Committee, the making of clean air regulations and the Air Pollution Appeal Board.

The Hon. J.C. BURDETT secured the adjournment of the debate.

PLANNING ACT AMENDMENT BILL

Received from the House of Assembly and read a first time.

The Hon. J.R. CORNWALL (Minister o Health): I move:

That this Bill be now read a second time.

In view of the lateness of the hour, I seek leave to have the second reading explanation inserted in *Hansard* without my reading it.

Leave granted.

Explanation of Bill

This Bill proposes consequential amendments to the Planning Act, 1982, following the introduction of the Clean Air Bill, 1983, and it contains the necessary provisions to ensure that authorisations granted under the Planning Act adequately take into consideration the likely air pollution impact of developments.

In my introduction of the Clean Air Bill, I stressed the importance of appropriate assessment of potentially polluting industries at the design stage as a valuable strategy in air quality management. Responsible management not only involves application of engineering controls to reduce pollutants emitted but also considers the sensitivity of the surrounding environment to those pollutants. Thus the location of potentially polluting activity is an integral factor in assessment of its impact and hence its acceptability as an environmentally sound development.

The majority of industries wishing to establish operations in a new location require authorisation under the Planning Act. Accordingly, the Bill proposes that the planning authorities shall seek the advice of the Minister responsible for the Clean Air Act when they receive application to establish a potentially polluting activity. There are two categories of activities likely to cause air pollution for which location decisions may be an important part of the abatement options available. The Bill defines developments for establishment of these two categories of activity as 'primary impact level' and 'secondary impact level' developments and proposes two corresponding levels of referral to the Minister responsible for the Clean Air Act.

'Primary impact level developments' are equivalent to the 'prescribed activities' referred to in the Clean Air Bill. They include industries whose emissions may constitute a direct threat to human health or may contribute significantly to the total air pollution burden for the region. In general, abatement of air pollution is very expensive and requires the application of complex technology. There may be no economically acceptable technology to reduce the air pollution impact and thus a decision on facility location becomes all important.

It is intended that the Minister's advice to the planning authority on the location of 'primary impact level' developments be binding and that no appeal be available. These conditions are proposed, since, should such a development proceed although deemed unacceptable in that location, impairment to health or severe environmental damage could result. 'Secondary impact level' developments, on the other hand, include industries which constitute a nuisance threat to adjacent land uses, rather than a health risk. Control of this nuisance can be effected by application of appropriate technology but is, in some cases, prohibitively expensive when related to the size of the industry and its capacity to pay.

It is intended that the planning authority should seek the Minister's advice on the location of these industries but that the advice would not be binding. The normal appeal provisions against the planning authority's decision would apply. This Bill is designed, therefore, to ensure the establishment of polluting actitities in appropriate locations and with adequate air pollution controls incorporated at the design stage of development. Industry can thus settle more securely and avoid expensive retro fitting of control equipment or possible relocation to eliminate environmental damage. The public also benefits by reduced likelihood of suffering an intolerable air pollution burden.

Clauses 1 and 2 are formal. Clause 3 inserts a new provision in the part dealing with development control. An application to a planning authority for approval of a development that is for the purposes of establishing an industry, operation or process that has a primary impact level of air pollution must be referred to the Minister charged with the administration of the Clean Air Act. The Minister may direct that the application be refused, or that certain con-

ditions must be imposed in the event of the authority granting the application.

An application refused or conditions imposed pursuant to a direction of the Minister are not subject to appeal, and the applicant must be advised of this. Applications relating to developments for the purposes of establishing an industry, operation or process that has a secondary impact level of air pollution must similarly be referred to the Minister. The Minister may make representations which must be taken into account by the planning authority when determining such an application.

Clause 4 provides for the declaration by the regulations of certain industries, operations or processes as having either a primary impact level or a secondary impact level of air pollution. Those that pose a threat to human health or have a serious adverse impact on the environment will be declared to have an air pollution potential of a primary level of impact. Those that constitute a nuisance to surrounding occupiers will be declared to have an air pollution potential of a secondary level of impact.

The Hon. M.B. CAMERON secured the adjournment of the debate.

ADJOURNMENT

At 12.25 a.m. the Council adjourned until Thursday 29 March at 2.15 p.m.