



Hansard

LEGISLATIVE ASSEMBLY

60th Parliament

Thursday 29 August 2024

Office-holders of the Legislative Assembly

60th Parliament

Speaker

Maree Edwards

Deputy Speaker

Matt Fregon

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Juliana Addison, Jordan Crugnale, Daniela De Martino, Paul Edbrooke,
Wayne Farnham, Paul Hamer, Lauren Kathage, Nathan Lambert, Alison Marchant,
Paul Mercurio, John Mullahy, Kim O’Keeffe, Meng Heang Tak, Jackson Taylor and Iwan Walters

Leader of the Parliamentary Labor Party and Premier

Jacinta Allan

Deputy Leader of the Parliamentary Labor Party and Deputy Premier

Ben Carroll

Leader of the Parliamentary Liberal Party and Leader of the Opposition

John Pesutto

Deputy Leader of the Parliamentary Liberal Party and Deputy Leader of the Opposition

David Southwick

Leader of the Nationals

Peter Walsh

Deputy Leader of the Nationals

Emma Kealy

Leader of the House

Mary-Anne Thomas

Manager of Opposition Business

James Newbury

Members of the Legislative Assembly
60th Parliament

Member	District	Party	Member	District	Party
Addison, Juliana	Wendouree	ALP	Lambert, Nathan	Preston	ALP
Allan, Jacinta	Bendigo East	ALP	Maas, Gary	Narre Warren South	ALP
Andrews, Daniel ¹	Mulgrave	ALP	McCurdy, Tim	Ovens Valley	Nat
Battin, Brad	Berwick	Lib	McGhie, Steve	Melton	ALP
Benham, Jade	Mildura	Nat	McLeish, Cindy	Eildon	Lib
Britnell, Roma	South-West Coast	Lib	Marchant, Alison	Bellarine	ALP
Brooks, Colin	Bundoora	ALP	Matthews-Ward, Kathleen	Broadmeadows	ALP
Bull, Josh	Sunbury	ALP	Mercurio, Paul	Hastings	ALP
Bull, Tim	Gippsland East	Nat	Mullahy, John	Glen Waverley	ALP
Cameron, Martin	Morwell	Nat	Newbury, James	Brighton	Lib
Carbines, Anthony	Ivanhoe	ALP	O'Brien, Danny	Gippsland South	Nat
Carroll, Ben	Niddrie	ALP	O'Brien, Michael	Malvern	Lib
Cheeseman, Darren ²	South Barwon	Ind	O'Keefe, Kim	Shepparton	Nat
Cianflone, Anthony	Pascoe Vale	ALP	Pallas, Tim	Werribee	ALP
Cleeland, Annabelle	Euroa	Nat	Pearson, Danny	Essendon	ALP
Connolly, Sarah	Laverton	ALP	Pesutto, John	Hawthorn	Lib
Couzens, Christine	Geelong	ALP	Read, Tim	Brunswick	Greens
Crewther, Chris	Mornington	Lib	Richards, Pauline	Cranbourne	ALP
Crugnale, Jordan	Bass	ALP	Richardson, Tim	Mordialloc	ALP
D'Ambrosio, Liliana	Mill Park	ALP	Riordan, Richard	Polwarth	Lib
De Martino, Daniela	Monbulk	ALP	Rowswell, Brad	Sandringham	Lib
de Vietri, Gabrielle	Richmond	Greens	Sandell, Ellen	Melbourne	Greens
Dimopoulos, Steve	Oakleigh	ALP	Settle, Michaela	Eureka	ALP
Edbrooke, Paul	Frankston	ALP	Smith, Ryan ⁵	Warrandyte	Lib
Edwards, Maree	Bendigo West	ALP	Southwick, David	Caulfield	Lib
Farnham, Wayne	Narracan	Lib	Spence, Ros	Kalkallo	ALP
Foster, Eden ³	Mulgrave	ALP	Staikos, Nick	Bentleigh	ALP
Fowles, Will ⁴	Ringwood	Ind	Suleyman, Natalie	St Albans	ALP
Fregon, Matt	Ashwood	ALP	Tak, Meng Heang	Clarinda	ALP
George, Ella	Lara	ALP	Taylor, Jackson	Bayswater	ALP
Grigorovitch, Luba	Kororoit	ALP	Taylor, Nina	Albert Park	ALP
Groth, Sam	Nepean	Lib	Theophanous, Kat	Northcote	ALP
Guy, Matthew	Bulleen	Lib	Thomas, Mary-Anne	Macedon	ALP
Halfpenny, Bronwyn	Thomastown	ALP	Tilley, Bill	Benambra	Lib
Hall, Katie	Footscray	ALP	Vallence, Bridget	Evelyn	Lib
Hamer, Paul	Box Hill	ALP	Vulin, Emma	Pakenham	ALP
Haylett, Martha	Ripon	ALP	Walsh, Peter	Murray Plains	Nat
Hibbins, Sam	Prahran	Greens	Walters, Iwan	Greenvale	ALP
Hilakari, Mathew	Point Cook	ALP	Ward, Vicki	Eltham	ALP
Hodgett, David	Croydon	Lib	Wells, Kim	Rowville	Lib
Horne, Melissa	Williamstown	ALP	Werner, Nicole ⁶	Warrandyte	Lib
Hutchins, Natalie	Sydenham	ALP	Wight, Dylan	Tarneit	ALP
Kathage, Lauren	Yan Yean	ALP	Williams, Gabrielle	Dandenong	ALP
Kealy, Emma	Lowan	Nat	Wilson, Belinda	Narre Warren North	ALP
Kilkenny, Sonya	Carrum	ALP	Wilson, Jess	Kew	Lib

¹ Resigned 27 September 2023

² ALP until 29 April 2024

³ Sworn in 6 February 2024

⁴ ALP until 5 August 2023

⁵ Resigned 7 July 2023

⁶ Sworn in 3 October 2023

Party abbreviations

ALP – Australian Labor Party, Greens – Australian Greens,
Ind – Independent, Lib – Liberal Party of Australia, Nat – National Party of Australia

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Thursday 29 August 2024

The SPEAKER (Maree Edwards) took the chair at 9:32 am, read the prayer and made an acknowledgement of country.

*Business of the house***Notices of motion**

The SPEAKER (09:33): General business, notices of motion 10, 11 and 26, will be removed from the notice paper unless members wishing their matter to remain advise the Clerk in writing before 2 pm today.

*Committees***Public Accounts and Estimates Committee***Inquiry into Vaping and Tobacco Controls*

Sarah CONNOLLY (Laverton) (09:34): I have the honour to present to the house a report from the Public Accounts and Estimates Committee inquiry into vaping and tobacco controls, together with appendices, a minority report and transcripts of evidence.

Ordered that report, appendices and minority report be published.

Integrity and Oversight Committee*Membership*

The SPEAKER (09:34): I have received the resignation of Eden Foster from the Integrity and Oversight Committee effective from today.

Mary-Anne THOMAS (Macedon – Leader of the House, Minister for Health, Minister for Health Infrastructure, Minister for Ambulance Services) (09:34): I move, by leave:

That Dylan Wight be a member of the Integrity and Oversight Committee.

Motion agreed to.

*Motions***Suburban Rail Loop**

John PESUTTO (Hawthorn – Leader of the Opposition) (09:35): I move, by leave:

That this house condemns the Premier and the member for Yan Yean for signing Victorians up to their \$216 billion Suburban Rail Loop, depriving the communities of Epping North and Wollert of their fair share by abandoning the proposed Wollert rail line.

Leave refused.

David SOUTHWICK (Caulfield) (09:35): I move, by leave:

That this house condemns the Premier and the member for Broadmeadows for signing Victorians up to the \$216 billion Suburban Rail Loop, depriving the Broadmeadows community of their fair share by refusing to properly fund the promised upgrade of Broadmeadows train station.

Leave refused.

Peter WALSH (Murray Plains) (09:35): I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop, forcing up the price of rental properties for residents of Bendigo West because of the huge increase in land tax to pay that bill.

Leave refused.

James NEWBURY (Brighton) (09:36): I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop and depriving the Catholic Ladies' College in the Eltham community of their fair share by forcing parents to pay Labor's school tax, which will drive up fees and make life harder for families.

Leave refused.

James NEWBURY: I move, by leave:

That this house condemns the Minister for Planning for talking out both sides of her mouth when she opposed the 10-storey development in her own electorate but will force 20-storey developments onto other communities and rip away third-party rights from thousands of residents.

Leave refused.

James NEWBURY: I make available to the house the letter from the Minister for Planning opposing 10-storey developments in her own electorate.

Roma BRITNELL (South-West Coast) (09:37): I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop and depriving the Cornish College community of their fair share by forcing parents to pay Labor's school tax, which will drive up fees and make life harder for Victorian families.

Leave refused.

Nicole WERNER (Warrandyte) (09:37): I move, by leave:

That this house condemns the Premier for spending \$216 billion on a Suburban Rail Loop nobody wants and depriving my community of our fair share and depriving us of the funding to finally fix the perilous Five Ways intersection in Warrandyte South.

Leave refused.

Nicole WERNER: I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop and depriving the Presbyterian Ladies' College community of their fair share by forcing parents to pay Labor's school tax, which will drive up fees and make life harder for PLC families.

Leave refused.

Nicole WERNER: I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop and depriving the Kingswood College community of their fair share by forcing parents to pay Labor's schools tax, which will drive up fees and make life harder for families.

Leave refused.

Brad ROWSWELL (Sandringham) (09:38): I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop and depriving the Penleigh and Essendon Grammar School community of their fair share by forcing parents to pay Labor's school tax, which will drive up fees and make life harder for PEGS families.

Leave refused.

Richard RIORDAN (Polwarth) (09:39): I move, by leave:

That this house condemns the Premier and the missing-in-action Labor MP for South Barwon for signing Victorians up to the \$216 billion Suburban Rail Loop while depriving the people of South Barwon of the aquatic centre they were promised at the 2022 election.

Leave refused.

Sam GROTH (Nepean) (09:39): I move, by leave:

That this house condemns the Premier and the member for Hastings for signing up Victorians to the \$216 billion Suburban Rail Loop and depriving Hastings of its fair share by failing to upgrade the Stony Point line, leaving this as the only part of the metropolitan rail network with slow, crowded, outdated and unelectrified trains.

Leave refused.

Cindy McLEISH (Eildon) (09:40): I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop, depriving the communities of Kalkallo and Yan Yean of their fair share by refusing to properly fund the duplication of Donnybrook Road.

Leave refused.

Brad ROWSWELL (Sandringham) (09:40): I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion Suburban Rail Loop, depriving the community of St Albans of their fair share by failing to deliver safety improvements to Main Road East and Main Road West to prevent further fatalities.

Leave refused.

Richard RIORDAN (Polwarth) (09:40): I move, by leave:

That this house condemns the Premier for signing Victorians up to the \$216 billion Suburban Rail Loop and so depriving the homeless and vulnerable people of Colac and district of their fair share by failing to build the 50 extra social homes promised in last year's housing statement.

Leave refused.

Tim McCURDY (Ovens Valley) (09:41): I move, by leave:

That this house condemns the Premier for signing Victorians up to \$216 billion in costs for her Suburban Rail Loop, depriving the community of Wangaratta of their fair share by putting the Wangaratta High School upgrade promised at the 2022 election on the backburner.

Leave refused.

Jade BENHAM (Mildura) (09:41): I move, by leave:

That this house condemns the Premier for signing Victorians up to her \$216 billion in costs for her Suburban Rail Loop, depriving the community of Mildura of their fair share by putting the Mildura West Primary School upgrade promised in 2018 on the backburner and forcing children to learn in facilities held together by chipboard.

Leave refused.

Business of the house

Adjournment

Mary-Anne THOMAS (Macedon – Leader of the House, Minister for Health, Minister for Health Infrastructure, Minister for Ambulance Services) (09:42): I move:

That the house, at its rising, adjourns until 10 September 2024.

Motion agreed to.

Members statements

Keilor Sports Club

Ben CARROLL (Niddrie – Minister for Education, Minister for Medical Research) (09:43): We all know local sport is essential for any community, and my community is no exception. We are very

lucky to have many wonderful community sports right throughout the Niddrie electorate, and I want to pay tribute today to the Keilor Sports Club, which is one of them. The club oversees football, cricket and athletics, bringing various communities and families together. At the beginning of this month I got the opportunity to visit Keilor Sports Club to get an update on their very important Keilor Recreation Reserve renovation. David, Sandy, Brad, Kevin, Steve and Lachie from the building subcommittee, as well as Hayden Kelly, the president of the club, talked me through their plans. This is all part of the commitment we made more than a year ago to a \$700,000 investment in the Keilor Sports Club to redevelop its clubrooms, which are a hub for over 1000 people in the local community.

I have got many fond memories myself, whether of playing against Keilor Football Club, a very strong club, or even of doing Keilor Little Athletics at the football club. One of my favourite things by far is the art deco fireplace, and I am very pleased that that will be saved and, most importantly, continue to be used as part of the important redevelopment.

I want to pay tribute today to Mick McGuane, the famous Mick McGuane from Collingwood. He coached 300 games at the Keilor Football Club, an incredible achievement. In fact he is the first ever coach to coach 300 games in Essendon District Football League history. Some 219 players have played under his watch in his 17-year career, and they got to present him with a wonderful, special jersey last weekend. Congratulations to the club and Mick. I cannot wait to see the future.

The Addams Family Inclusive!

David SOUTHWICK (Caulfield) (09:44): Over the weekend Hayley and I had the pleasure of attending a brilliant 'inclusive' production, *The Addams Family* at the Alexander Theatre. Stars and the Moon, a unique all-abilities company, has a great performance model for people with and without disabilities that brings kids together so they are able to give the ultimate performance on stage. It is really magic on stage. I want to give a big thanks to the Stars and the Moon president Eli Boroda and his team, Michaela Raitman, Steve Lustig, Joey Wilkinson, Kate Lustig and Vicki Lustig. Most of all, a big thanks to all the performers in *The Addams Family Inclusive!* – the best show yet.

Australasian Union of Jewish Students

David SOUTHWICK (Caulfield) (09:45): Also today I want to give a big shout-out to the Australasian Union of Jewish Students Victorian political training seminar. Over 20 students are here today to take part in this program, a really important program, and I want to thank national president Noah Loven, Nathan Levy, Holly Feldman, Eva Boroder and all the team at AUJS, and I hope they look forward to today's event.

Caulfield Local Hero Award

David SOUTHWICK (Caulfield) (09:45): Tonight I will be presenting a local hero award to Amanda Morris, who has been running the National Council of Jewish Women of Australia Jam Project for two years, helping year 9 students build confidence, self-esteem and leadership skills. Thank you, Amanda, for what you do in caring for women.

More Trees for a Cooler, Greener West

Tim PALLAS (Werribee – Treasurer, Minister for Industrial Relations, Minister for Economic Growth) (09:46): I am pleased to update the house on the recent tree-planting event at Victoria University under the More Trees for a Cooler, Greener West program. Together with the member for Point Cook and the member for Tarneit I joined Victoria University staff for their tree-planting event organised in collaboration with the More Trees for a Cooler, Greener West program. With the assistance of Department of Energy, Environment and Climate Action staff and over 200 volunteers, we successfully planted the remaining 2500 trees. I, for my part, planted a substantial minority of the 12,600 trees allocated to the Werribee campus as part of the initiative.

The More Trees for a Cooler, Greener West program was introduced as currently Melbourne's west has far less tree canopy cover than the east and south-east, causing the western suburbs to experience

the greatest urban heat island effect across metropolitan Melbourne. The program will create more shade and green spaces, which in turn will drive down pollution, reduce temperature and improve air quality. I am proud to tell you that we have officially hit the three-quarter mark, with 375,000 new trees now planted across the western suburbs. This achievement means residents in Melbourne's west now have access to cooler, greener and more livable spaces, especially for the staff and students at Victoria University, who will enjoy the urban forest at the Werribee campus.

Cohuna community safety

Peter WALSH (Murray Plains) (09:47): Cohuna residents are concerned about the spread of Melbourne's tobacco wars to their town. In early July a tobacco shop there was rammed and firebombed, and thanks to the good work of the CFA volunteers it was contained to that particular shop, although both shops on either side were severely damaged. There is now a burnt-out scar in the middle of the main street of Cohuna, King George Street, which just reminds people daily of what happened there and how the Melbourne tobacco wars have come to their town. Now the shopkeepers in the town are extremely concerned that the person who rented that shop, who ran that tobacco shop, is now trying to rent another shop in town, and they worry that this will happen again if that is the case.

What is the Premier doing? It is the Premier's responsibility, and it is the government's responsibility to keep people safe in their community. I ask the Premier: what is she doing to make sure the tobacco wars do not break out in Cohuna and other regional towns again? The police are short-staffed. The CFA volunteers do a great job, but they should not have to go and fight fires that are deliberately lit illegally by people from Melbourne who want to terrorise local shop owners. Please, Premier, do something about it.

Nepalese community

Lily D'AMBROSIO (Mill Park – Minister for Climate Action, Minister for Energy and Resources, Minister for the State Electricity Commission) (09:48): I rise today to share my experiences of two vibrant Nepalese community-led events I attended this month. Both events were Teej melas. Teej is a significant festival originating from South Asia. It is observed by Nepali women to enhance their families' wellbeing and to purify both body and soul. The celebrations I attended were organised by the Nepalese Neighbourhood Community and the Epping–Wollert Nepalese community. I thoroughly enjoyed both events, which featured beautiful cultural performances, sumptuous feasts, live musical entertainment and engaging community activities.

I am grateful to the executive committee members of the Nepalese Neighbourhood Community for their invitation. Special thanks to Krishna Mahara, Bishwo Khanal, Nirdosh Giri, Sunil Anu, Homnath Rijal Krishna and Amrita Gurung. I would also like to express my thanks to the executive from the Epping–Wollert Nepalese community for their warm invitation. My appreciation goes to Krishna Sapkota, Manoj Poudel, Sanjay Bhandari, Parshuram Parajuli Anup and Bibek.

The Nepali community in Victoria is a flourishing multicultural group that makes significant contributions to the social, economic and cultural prosperity of our state. I am thrilled to represent such a diverse electorate and to continue to explore the rich cultures that make Mill Park so special.

Bullumwaal Road–Howitt Avenue, Eastwood

Tim BULL (Gippsland East) (09:50): I want to quickly raise a couple of issues this morning. The first of those is that Regional Roads Victoria has recently released plans for traffic lights at the intersection of Bullumwaal Road and Howitt Avenue in Eastwood. In 2019 I was given plans for a roundabout to be there. I have still got those plans on my desk. The community wants to know why the preferred option has changed without any community consultation, and I currently have a question on notice to the minister seeking an explanation on behalf of the community as to why that change has taken place.

Lucknow Primary School

Tim BULL (Gippsland East) (09:50): I also last week attended the Lucknow Primary School and spoke with the year 6 students about the three levels of government and endured quite a testing question time from some of the students. I am very pleased that today they are in the upper deck of the gallery here. As part of their trip to Melbourne for the week they are learning about the different processes of Parliament. They have been into the upper house this morning. They are now in the Assembly today.

A member interjected.

Tim BULL: Where the real work is done, absolutely, Minister. They are in the right chamber here. We have two other groups coming in over the course of the morning, and I certainly look forward to meeting them as well if possible. It is a great little school with a great ethos, and we certainly welcome the kids to the Victorian Parliament.

St John's Regional College

Gabrielle WILLIAMS (Dandenong – Minister for Government Services, Minister for Consumer Affairs, Minister for Public and Active Transport) (09:51): I rise to commend the exceptional efforts of year 8 students at St John's Regional College in Dandenong, who recently participated in a civics and citizenship political party debate. I was delighted to join principal Tim Hogan as a guest judge as students debated a very topical issue for many of us in this place and outside of it, which is the issue of vaping.

I can confidently say that the students' dedication, their insight and their passion were truly impressive, and it was very clear on the day that they had worked tirelessly to research, to prepare and to present their arguments, showcasing not only their understanding of the complexity surrounding the issue but also their commitment to making a positive impact in their community. In the end it was the team Dcop who emerged victorious, and I want to extend my warmest congratulations to those team members for their outstanding performance, but the standard across all teams was very high, and I want to commend all participants for their hard work and their creativity along the way as well.

I think this exercise, though, highlights the importance of engaging our young people in discussions about the challenges that we face as a community. It is through initiatives like this that we empower the next generation to think critically and build that next generation of leaders, many of whom may one day sit in this very place. Congratulations to the students at St John's.

Housing

Gabrielle DE VIETRI (Richmond) (09:53): In the middle of a housing crisis the Greens have put renters rights and housing affordability on the political agenda. Every day in this place we bring in the struggle of everyday people scraping the bottom of the barrel to pay the rent, to service a mortgage or, if they are lucky, to save for a deposit. We know that people are doing it tough, and we know that governments have the power to stop people from being forced out of their homes to live in tents or cars or sleep on friends' couches. While Labor is turning their back on renters, demolishing public housing and giving massive tax breaks and handouts to developers, with the Greens in the shared balance of power, we are delivering for renters and everyone struggling to find a place to live.

Earlier this year we secured a tax on empty homes, pushing investors to rent them out or sell up. Now we have secured crucial reforms to how Airbnb and other platforms work to free up more homes for renters and first home buyers to actually live in, because it is just not right that in the middle of a housing crisis there are 48,000 entire homes on Airbnb. So along with an Airbnb property tax, we have secured new powers for councils and owners corps to turn short-stay accommodation back into homes. These Greens wins will help more Victorians find a home, but we will not stop until everyone has a secure and affordable place to live. Next up, rent freeze.

Bundoora electorate early childhood education

Colin BROOKS (Bundoora – Minister for Development Victoria, Minister for Precincts, Minister for Creative Industries) (09:54): The first few years of life are crucial for setting children up for success later on. That is why the Allan Labor government is rolling out early years reform like the game-changing free kinder program and has been investing in preschool infrastructure across the state. These government investments are making a real difference for the Bundoora area.

Earlier this month Diamond Hills Preschool in Greensborough, led by president Dani Page and a wonderful volunteer committee, opened their spacious and bright new building complete with two new classrooms, a multipurpose room, a kitchen, a library and a really impressive outdoor area. This was made possible with \$2.9 million from the Allan Labor government, and I acknowledge the efforts of the member for Eltham in securing those funds when that was in her area. Funding also came from the Shire of Nillumbik and the Diamond Hills Preschool community itself. Earlier this year the Goodstart Early Learning centre in Watsonia opened their doors on Devonshire Road, providing extra capacity for local families thanks to a \$1 million investment from this government. And just last week I was at the McLeans Road Kindergarten in Bundoora for their Book Week fair with lead teacher Natalie Vecchio and the whole team. This preschool too was recently built as a partnership between the Labor government and the City of Whittlesea, back in 2022.

In nearly a decade of federal Liberal–National government, and when those opposite were in power for four years, not one cent was invested in early years reform in my electorate. In contrast, we will continue investing in early years education and supporting families in the Bundoora electorate.

Rowville electorate football clubs

Kim WELLS (Rowville) (09:56): I would like to wish all the footy teams playing in finals over the next few weeks all the best and Scoresby footy club and their senior team the best of luck in their upcoming grand final in the Eastern footy league. The Magpies secured their position in the grand final after thrashing Chirnside 94 to 42. I cannot wait to see who Scoresby will take on in the grand final. Whichever team it is, I am sure that they will put up a good fight against the mighty Scoresby seniors – wishing them the best of luck. I would also like to wish the Rowville footy club seniors the best of luck in their finals campaign, with their first final match this Saturday against Balwyn Tigers. Rowville is an amazing club, being in the premier division and having won the premier league premiership last year. Knox seniors have also made it to the preliminary final this weekend against Surrey Park, hoping that they will also make it to the grand final. Hopefully, we can have three teams from the Rowville electorate bring home three premierships.

Williamstown electorate transport infrastructure

Melissa HORNE (Williamstown – Minister for Casino, Gaming and Liquor Regulation, Minister for Local Government, Minister for Ports and Freight, Minister for Roads and Road Safety) (09:57): There is so much happening across Williamstown electorate when it comes to transport-related issues. A couple of weeks ago the Minister for Public and Active Transport came out to Brooklyn to hear firsthand some of the challenges that we face in the inner west. It was great to have engaging conversations about the need for more reliable and more frequent bus services. Thank you very much to all who attended.

In relation to roads, last May the Department of Transport and Planning conducted a community and road users survey in relation to Blackshaws and Kororoit Creek roads. Without a doubt, due to the growth in the suburbs, there really needed to be a safety check there. There is also a strip of shops on Blackshaws Road that has some real constraints with parking, and I want to extend a special thanks to Nick Gugliotta of Gugliotta Butchers for taking the time to discuss safety concerns.

As a result of community input I am pleased to say that from this December speeds will be reduced along Kororoit Creek and Blackshaws roads from 60 kilometres to 50 kilometres an hour. That is a

real win for community safety. On top of that, we are also doing work to improve pedestrian safety at the roundabout at Ferguson Street and Melbourne Road. Work will progress over the coming year.

Williamstown Football Club

Melissa HORNE (Williamstown – Minister for Casino, Gaming and Liquor Regulation, Minister for Local Government, Minister for Ports and Freight, Minister for Roads and Road Safety) (09:58): Finally, congratulations to the Williamstown Seagulls on the weekend, who absolutely slayed the Richmond Tigers, 120 to 54. It was a magnificent win, and I look forward to the elimination final with Box Hill Hawks on Saturday and wish the mighty Towners all the very best.

Dorothy Jean Looker

Bill TILLEY (Benambra) (09:58): They do not make them like Dorothy Jean Looker any more. Dot sadly passed away recently – 93 years young and after a very full life. Dot and her twin Margaret were born at the Walwa bush nursing hospital on 17 December 1930, making the local doctor late for the town's annual Christmas party. The family then moved on to a farm between Walwa and Jingellic. When the 1939 fires hit the Upper Murray, Dot and Margaret were dispatched to the Murray River, ducking underwater as flames passed above. They were only nine years old. When the family shifted to Cudgewa, Dot became well known to the train drivers on the spur line, often hitching a ride after setting her rabbit traps. After that she moved temporarily to Melbourne as a young woman, and the legacy was that she was a lifelong mad Richmond Tigers supporter. She was in fact buried in a Tigers coffin when her service came about.

A member: Go Tiges.

Bill TILLEY: Yes, all right. Anyway, she married Vern in Albury in 1951, and they had five children – Denise, Robyn, Jan, Peter and Anthony – who produced a Tiger army of nine granddaughters, 20 great-grandchildren and seven great-great-grandchildren. Dot was an accomplished dairy farmer who decorated wedding cakes. She was a long-time volunteer with Neighbourhood Watch. Beating lung cancer at 78, only a broken wrist ended her golf at 91.

Raymond Shuey

Anthony CARBINES (Ivanhoe – Minister for Police, Minister for Crime Prevention, Minister for Racing) (10:00): Victoria Police mourn the loss of their friend and colleague Dr Raymond Shuey AM APM PhD, who passed away this month. Ray, a Vietnam veteran, succumbed after a very long battle with ill health. A former Victoria Police officer and assistant commissioner for traffic and operations, Ray's contribution to his country and state was one of selfless devotion.

Following his retirement from Victoria Police in 2003, Ray conducted reviews for VicRoads and Victoria Police as well as coordinating the police response to the 2009 Victorian Bushfires Royal Commission. Ray regularly consulted on road safety and police operational safety in Australia and worldwide. He was head of Strategic Safety Solutions. Despite ill health, Ray was also president of the International Safety Foundation, which facilitates the international transfer of road safety and medical equipment to save lives in lower income countries. Ray worked tirelessly in the areas of road safety and family violence, and his amazing contribution to efforts to achieve improvements in the way these problems are dealt with by both police services and government are acknowledged with sincere thanks by his friends.

To Ray's family, we offer our sincere condolences. I note that there will be a very significant Victoria Police funeral at the chapel at the academy next week. I look forward to attending that to represent the Parliament. There will be four former chief commissioners of police in attendance, which is a mark of respect to Mr Shuey.

Road safety

Chris CREWTER (Mornington) (10:01): The notorious Forest Drive–Nepean Highway intersection in Mount Martha is finally being upgraded. This intersection has had many accidents, deaths and injuries. One local student who had got their Ps recently stated that they were scared for their life when travelling through the intersection, almost causing a head-on with another driver. The previous Liberal–Nationals federal government fully funded the state’s upgrade of this intersection; however, the state Labor government continually delayed the rollout. Works were meant to start before 2023, then in early 2023 and late 2023, before nearly being scrapped under the Albanese Labor government’s 90-day infrastructure review. Thankfully the funds were not scrapped, and works are now expected to be completed in mid-2025, but construction plans continue to seem to change at short notice. The constant dillydallying by the state Labor government has left residents confused and prolonged the serious risk to the lives of people using this intersection. Who knows if there are going to be more delays to this project? The Labor government certainly have a track record of it, and I can tell you that my constituents do not trust them.

Mornington Peninsula car parking

Chris CREWTER (Mornington) (10:03): On another note, the paid parking trial has been disastrous for businesses, locals and visitors in my electorate. Outgoing councillors will decide next Tuesday whether to roll this out across the whole peninsula, including in my electorate, the member for Nepean’s electorate and beyond. This trial should be opposed, and the expansion should be opposed as well.

Sarah Carter

Natalie HUTCHINS (Sydenham – Minister for Jobs and Industry, Minister for Treaty and First Peoples, Minister for Women) (10:03): I rise to pay tribute to Cr Sarah Helen Carter, the first woman elected three times as mayor of Maribyrnong, who spent 16 years fighting for the residents of Melbourne’s west. She was the council’s gender equality ambassador since 2011, and she won multiple awards during her time as a councillor. Fighting for women within the Labor Party to be preselected was one of her badges of honour. She joined the board of Gender Equality Victoria earlier this year, and she was employed in her day job by Save the Children – an NGO improving children’s lives around the world. She did an amazing job at saving young people’s lives.

When Sarah spoke, she did it with understanding, compassion and intelligence. Whether it was about planning permits or predeparture briefings for those MPs she was taking overseas to see developing nations, Sarah knew how to make you understand the whole issue. She was captivating, she was brilliant and she was full of the belief that if you worked hard, then anything was possible. She showed us who we could be and, most importantly, who we should be. She was well supported across the Labor caucus here and in federal Parliament. She had compassion, determination and pure joy in her heart. She will be greatly missed by her Labor family. Vale, Sarah Carter.

Paris Paralympics

Sam GROTH (Nepean) (10:04): I, and I am sure everyone else in this chamber, want to wish our Paralympic athletes the best of luck ahead of the Paralympic Games in Paris. Last night we saw our 160 Australian athletes, 42 from Victoria, walk in the opening ceremony with the flag carried by Madison de Rosario as they went down the Champs-Élysées to the Place de la Concorde. We all know that those Paralympic athletes represent so much more than just the sports in which they are competing in Paris.

The Paralympic motto is ‘Spirit in motion’. It reflects the journey that a lot of those athletes have been on not only to be Paralympic athletes competing in those games but also with the disability and challenges that they have faced throughout their lives. These athletes are competing for far more than just themselves, for far more than just this state or this country when they compete in Paris. They are competing for recognition of the 1.3 billion people with a disability right around the world and they

are showcasing that there are no limits for those people with a disability. They are an inspiration to so many. We wish all the best to those 42 Victorian athletes and those 160 Australian athletes who are representing us in Paris.

St Albans electorate schools

Natalie SULEYMAN (St Albans – Minister for Veterans, Minister for Small Business, Minister for Youth) (10:06): I want to begin by thanking Catholic Regional College St Albans, who invited me recently to engage in a Q and A session with student leaders. The topics included youth justice, education, politics and how to better be involved in community. I want to thank in particular Aurelius, Mia, Corey, Emily, Joshua, Anthony, Jennifer, Joanne, Anshi, Oli and Lena. It is very clear that these students have so much potential and are truly young leaders of the future. A big shout-out to Kevin Quinn, the deputy principal of CRC who facilitated this session.

I also had the opportunity to see firsthand St Albans Heights Primary School. The building works have commenced thanks to \$13.4 million from our government. This means that the school will be rebuilt with new classrooms, playgrounds and learning in quality classrooms. More importantly, it has an amazing community hub for families and the local community, including a childcare centre.

I also had the opportunity to welcome two new principals to our community: Joanna from Albion North Primary School, and Lynne who has taken up the position of principal at St Albans Primary School. It was fantastic hearing their insights, and I know that they will be doing their very best for our school community.

Kalkallo electorate schools

Ros SPENCE (Kalkallo – Minister for Agriculture, Minister for Community Sport, Minister for Carers and Volunteers) (10:07): Earlier this month I was thrilled to announce that three terrific schools in my electorate will receive funding through the Catholic stream of the Allan Labor government's Building Fund for Non-Government Schools.

Kolbe Catholic College is receiving \$6 million for the construction of stage 2 of their Mickleham campus, which includes a learning neighbourhood, 16 general learning areas, a performing arts centre, five specialist learning spaces, multipurpose spaces, four modular general learning areas, landscaping and car parking. Holy Cross Catholic Primary School in Mickleham is also receiving \$6 million for the construction of a senior school learning building, which will include six general learning areas, flexible learning spaces, breakout areas and landscaping works. Oscar Romero Catholic Primary School in Craigieburn will receive \$3.6 million for the construction of eight modular general learning areas and other associated works.

With more than one in three Victorian students studying at a Catholic or independent school, this program is incredibly important in ensuring that local students get the very best education possible in the best facilities.

School breakfast clubs

Ros SPENCE (Kalkallo – Minister for Agriculture, Minister for Community Sport, Minister for Carers and Volunteers) (10:08): I was also excited to recently announce that the school breakfast clubs program will be expanded to another four schools in my community, including Gilgai Plains Primary School, Banum Warrik Primary School, Newbury Primary School and Yubup Primary School. This important program is working to address the impact that disadvantage can have on a student's education outcomes, which is why I was thrilled with this announcement that makes sure that no student starts the school day hungry. Families at these schools have really welcomed this news, and I look forward to the program.

Montmorency Secondary College

Vicki WARD (Eltham – Minister for Prevention of Family Violence, Minister for Employment) (10:09): Congratulations to the cast and crew from Montmorency Secondary College for their outstanding production of Roald Dahl's *Charlie and the Chocolate Factory*. To everyone who took part in the production, from the wonderful cast to set designers, musicians and helpers, you are the music makers and the dreamer of dreams. Congratulations to Jude Mitchell, Amber Hale, Kai LeGrys, Indi Cuthbert-Novak, Maddy Vacchiarelli, Shilo Maddison, Charlie Warburton, Lara McLeod, Hugh Maggs, Nicholas Theofanidis, Ellen Geraghty, Ellie McPhan, Charli Manley-Breen, Ciarra Camilleri, Gabe Mitchell, Rebecca Turner, Mae Butterworth, Matilda Mitchell, Molly Saunders, Ruby Peel, Grace Nihill, Matthew Stone, Izzie Milkins, Jaxon O'Brien, Liam Hughes, Sophie Nihill, Hugo Sheppard, Jinny Charlton, Kelsey Henderson, Essie Sinclair, Gabby Charman, Charlotte Stone, Erin Taylor, Mila Van Wyk, Charlie Cowper, Ben Tostivan, Archie Deylen, Eliza Gallagher, Ty Treharne, Hiroki Williams, Isla Greig, Liam Hughes, Imogen Breen, Lily Thompson, Jessica Thompson, Rosemary Vescio, Gene Kitchen, Leah Taylor, Bianca Wallace and Samantha Kostiw. You were all fantastic. Congratulations also to the fantastic production team, crew and musicians.

Paris Paralympics

Vicki WARD (Eltham – Minister for Prevention of Family Violence, Minister for Employment) (10:10): I also want to give a shout-out to two fantastic athletes from my community: Ahmed Kelly, a former refugee, who will compete in swimming, and the amazing Jaryd Clifford, who will compete in distance running events at the Paralympics. Go them. They are fantastic local people

Warwick Leeson

Vicki WARD (Eltham – Minister for Prevention of Family Violence, Minister for Employment) (10:10): I also want to give a shout-out to Warwick Leeson, who recently was awarded the Volunteer of the Year award by Nillumbik Shire Council.

Grace Larson and Charlie Jackman

Mary-Anne THOMAS (Macedon – Leader of the House, Minister for Health, Minister for Health Infrastructure, Minister for Ambulance Services) (10:10): I rise today to honour two remarkable individuals in the Macedon electorate.

Grace Larson, a paediatric critical care nurse with over 17 years of experience, was recently named the 2024 Victorian state winner and national runner-up in the AgriFutures Rural Women's Award. Grace, along with her sister Skye, founded the Sisterhood Project to address the health disadvantages faced by kids in rural Australia. The Sisterhood Project delivers life-saving skills such as infant and child first aid and CPR and education on preventable illnesses to parents and caregivers right across rural Australia. Their mission is simple but profound: to change the health outcomes for bush kids, reducing the need for rural children to seek specialised services in urban areas. Congratulations, Grace.

Gisborne's own Charlie Jackman is a 17-year-old proudly autistic artist who co-founded his art microenterprise Charlie by Art. A finalist in the Victorian youth achiever awards ethical business category and Victorian winner of the people's choice award, Charlie was presented with his award in June by our very own member for Albert Park. He uses his platform to raise awareness and promote inclusion for neurodiverse and disability communities. Charlie is an inspiration to so many people, balancing his successful business with his studies, his VET course and working as a kitchen hand.

Grace and Charlie are shining examples of the passion, dedication and resilience that define the community that I am so proud to represent. I commend them for their contributions.

John Halliwell

Luba GRIGOROVITCH (Kororoit) (10:12): I am sad to say that a good friend of mine, John Halliwell, better known as Jack to many of us, passed away a few weeks ago. He was a staunch Labor

man, as staunch as they come, an ALP member for 34 years. For 25 of those years Jack was the secretary of the Altona ALP branch. He taught me everything that I knew as his deputy. He worked tirelessly on a number of campaigns for both state and federal MPs. Jack was a keen golfer at the Koorringal Golf Club, where he was a member until just recently. He was also the president of the Truganina Explosives Reserve Preservation Society. Jack and his late wife Eve volunteered many hours at St George's residential aged care, where Jack eventually found himself living. The last time I saw Jack was at St George's care facility, and it was great to visit him. He was a great man, and he really brought true words – *(Time expired)*

Bills

Criminal Organisations Control Amendment Bill 2024

Statement of compatibility

Anthony CARBINES (Ivanhoe – Minister for Police, Minister for Crime Prevention, Minister for Racing) (10:14): In accordance with the Charter of Human Rights and Responsibilities Act 2006, I table a statement of compatibility in relation to the Criminal Organisations Control Amendment Bill 2024:

Opening paragraphs

In accordance with section 28 of the *Charter of Human Rights and Responsibilities Act 2006*, (the **Charter**), I make this Statement of Compatibility with respect to the Criminal Organisations Control Amendment Bill 2024 (**Bill**).

In my opinion, the Criminal Organisations Control Amendment Bill 2024, as introduced to the Legislative Assembly, is compatible with human rights as set out in the Charter. I base my opinion on the reasons outlined in this statement.

Overview

The Bill amends the *Criminal Organisations Control Act 2012* (the **Act**) by:

- modifying the existing unlawful association scheme in Part 5A of the Act to expand police powers to prohibit persons from associating with each other
- introducing a serious crime prevention order scheme enabling a court to impose conditions restricting the activities of the person subject to the order, being a person who is an eligible offender or involved in serious criminal activity
- creating a criminal offence which prohibits a person over 18 years of age from displaying the insignia of certain organisations to be prescribed in regulations in a public place or public view, where that person knows or ought reasonably to know that the mark is an insignia of that organisation, and
- prohibiting members of certain organisations to be prescribed in regulations from entering Victorian Government worksites.

The Bill's purpose is to disrupt serious and organised crime in Victoria.

Human Rights Issues

The Bill limits the following rights under the Charter:

- right to recognition and equality before the law (section 8)
- right to freedom of movement (section 12)
- right to privacy and reputation (section 13)
- right to freedom of thought, conscience, religion and belief (section 14)
- right to freedom of expression (section 15)
- right to peaceful assembly and freedom of association (section 16)
- right to protection of families and children (section 17)
- right to culture (section 19)
- right to property (section 20)
- right to a fair hearing (section 24)

- right to be presumed innocent until proven guilty according to law and rights in criminal proceedings (section 25), and
- right not to be tried or punished more than once (section 26).

Under the Charter, rights can be subject to limits that are reasonable and justifiable in a free and democratic society based on human dignity, equality and freedom. Rights may be limited in order to protect other rights.

As discussed below, these limitations are reasonable and justified in accordance with section 7(2) of the Charter.

Unlawful Association (Part 2)

The Bill will:

- expand police powers to issue unlawful association notices to persons, prohibiting them from associating with each other, where one of the persons has previously been convicted of a serious offence, by:
 - removing the requirement that the previous conviction was ‘heard on indictment’, so that convictions for lower-level offending, or following a guilty plea, can trigger the use of the scheme
 - replacing the current requirement that a police officer reasonably believes that preventing association between individuals is likely to prevent the commission of an offence, with a requirement that the officer is satisfied that issuing the notice is likely to prevent or inhibit the establishment, maintenance or expansion of a criminal group or a criminal network
- reduce the duration of a notice, from 3 to 2 years, to ensure the grounds for issuing a notice are considered afresh within a shorter period
- expand police powers to charge for the offence of contravening an unlawful association notice, by lowering the threshold for the offence so that the recipient of a notice commits an offence if they associate with the person named in the notice once, at any time the notice is in effect, instead of requiring that the recipient of a notice associate with a named person 3 times in a 3-month period, or 6 times in a 12-month period
- narrow the exception to the offence for association with family members, by amending the definition of ‘family member’ so that it applies to a more confined group of people
- provide additional exceptions to the offence where association occurs:
 - during the provision of welfare services
 - in the course of emergency services volunteering, or
 - in the course of an Aboriginal person or Torres Strait Islander engaging in or performing a cultural practice or obligation.
- create a new oversight function for the Independent Broad-based Anti-corruption Commission (IBAC), by requiring IBAC to monitor and report on the operation of the scheme and conduct periodic reviews of unlawful association notices. To ensure IBAC has the information it needs, Victoria Police will be required to report to IBAC quarterly on the use of powers.

Right to peaceful assembly and freedom of association (section 16)

Section 16 of the Charter protects every person’s right to peaceful assembly and freedom of association with others, including the right to form and join trade unions.

The Bill sets out the scope of lawful and unlawful association between persons and expands police powers to prohibit persons from associating with each other, abrogating the rights to peaceful assembly and freedom of association.

The unlawful association scheme prohibits a person who receives an unlawful association notice from associating with the person or persons named in the notice. Such other named persons are also banned from associating with the recipient of the notice (through provisions that allow for reciprocal notices to be issued). Should the persons continue to associate, they will be at risk of committing an indictable offence, with a penalty of up to 3 years’ imprisonment.

The Bill expands police powers to issue unlawful association notices to persons, where one of the persons has previously been convicted of a serious offence, in the following ways:

- Expanding the categories of offences that can form the basis for issuing a notice to include offences committed against the laws of another state or territory, or the Commonwealth.

- Removing the requirement that the conviction for the serious offence that forms the basis of a notice was ‘heard on indictment’, so that convictions for lower-level offending, or following a guilty plea, can trigger the use of the scheme. This will potentially extend the scheme to a larger group of people.
- Replacing the requirement that a senior police officer holds a reasonable belief that issuing a notice will prevent the commission of further offences. Victoria Police advises that the formation of the requisite belief is a high threshold to satisfy and a major hurdle to using the unlawful association provisions.

The Bill also expands police powers to charge for the offence of unlawful association. Under the current scheme, a person contravenes a notice if that person associates with one or more persons convicted of an ‘applicable offence’ named in the notice on at least 3 occasions in a 3-month period, or 6 occasions in a 12-month period. To increase the efficacy of the scheme, the Bill removes the requirement for multiple occurrences of association within a set timeframe for a person to be charged with the offence of unlawful association. Instead, a person may be charged if they associate with the person named in the notice on one occasion.

Section 7(2) of the Charter provides that reasonable limits can be placed on rights where the limits are demonstrably justified in a free and democratic society.

The limitation on these rights supports the purpose of the unlawful association scheme of preventing and inhibiting criminal conduct. This is achieved by prohibiting individuals from associating with each other where one of them has previously been convicted of a serious offence, and thereby preventing and inhibiting the establishment, maintenance and expansion of criminal groups and criminal networks.

The Bill introduces new settings and preserves existing settings in the Act, that aim to mitigate against the risk of notices being issued arbitrarily or having disproportionate negative impacts, including the following:

- The new test for issuing a notice includes a requirement that the officer is reasonably satisfied that doing so is appropriate in all the circumstances. This threshold, coupled with the requirements under section 38 of the Charter that a police officer give proper consideration to relevant human rights when making a decision to issue a notice, imports a blanket requirement of proportionality.
- If a person believes that a notice has been issued or amended in error, they can seek internal review by Victoria Police. The Bill increases the minimum rank of the reviewing officer from Senior Sergeant to Inspector, and allows a person to seek an extension of time in which to apply for review. In addition, the Bill includes a process allowing people to seek revocation of a notice, where there has been a substantial change in circumstances. For example, it may be appropriate to revoke a notice on compassionate grounds, such as because the person has a terminal illness.
- The Bill retains the existing mechanism authorising lawful association with the person named in the notice, by allowing a person to apply to Victoria Police for a lawful association authority.
- The scheme retains the exceptions to the offence of unlawful association. These include exceptions where association occurs in the course of lawful employment, obtaining legal advice, or participating in vocational training and association for genuine political purposes. As noted above, the Bill introduces additional exceptions, including for association that occurs in the context of receiving welfare or support services, and engaging in emergency services volunteering.

The Bill contains measures to support accountability and transparency regarding the use of powers. The Bill creates a new oversight role for IBAC to retrospectively monitor the use of police powers under the scheme and report annually to the Attorney-General. The Bill also requires the Attorney-General to cause a review of the operation and effectiveness of the Act to be undertaken 3 years following commencement of the Bill. The inclusion of reporting obligations and independent oversight aims to enable continued evaluation of the scheme’s effectiveness and ensure government will know if any groups are being unfairly targeted by these laws.

The amendments in the Bill are a reasonable and justified limitation of the rights to peaceful assembly and freedom of association because they are necessary to protect public safety by preventing the commission of serious and organised crime.

Right to freedom of movement (section 12)

Section 12 of the Charter provides that every person has the right to move freely within Victoria and has the freedom to choose where to live.

The rights of both the recipient of a notice and the person named in the notice to move freely within Victorian and to choose where to live are limited because they are prevented from being in company with each other, unless an exception applies.

For the reasons discussed above in relation to freedom of association, this interference with the right to freedom of movement is not arbitrary or unlawful and is proportionate to the legitimate aim of crime prevention.

Right to privacy and reputation (section 13)

Section 13 of the Charter provides that a person has the right not to have their privacy unlawfully or arbitrarily interfered with and not to have their reputation unlawfully attacked.

Prohibiting both the recipient of a notice and the person named in the notice from being able to choose to associate with each other limits this right because it affects their 'interest in the freedom of their personal and social sphere'.¹

In addition, the Bill amends provisions that engage the right to privacy of the person named in a notice, because the provisions require that the person is named in the notice and identified as an offender.

Importantly, the disclosure of the person's criminal history is limited. Neither the nature of the conviction nor aspects of the person's criminal record that are not relevant to the issue of the notice are disclosed.

The requirement to specify the individual on an unlawful association notice supports the purpose of the unlawful association scheme, to prevent and prohibit criminal conduct, by clearly setting out who the recipient of a notice is prohibited from associating with, and the basis for imposing the notice (namely, that the specified individual has previously been convicted of a serious offence).

For these reasons, the interference with the right to privacy is not arbitrary or unlawful and is proportionate to the legitimate aim of crime prevention.

Right to freedom of expression (section 15)

Section 15 of the Charter provides that every person has the rights to hold an opinion without interference (section 15(1)) and to freedom of expression (section 15(2)), which includes the freedom to seek, receive and impart information. The right contains an internal limitation in section 15(3) that allows freedom of expression to be limited where it is reasonably necessary to respect the rights and reputation of others, or for the protection of national security, public order, public health or public morality.

The Bill engages this right by amending provisions that prohibit a recipient of a notice and the person named in the notice from receiving, seeking, or imparting information with each other once a notice has been issued, unless an exception applies.

The prohibition supports the purpose of the unlawful association scheme, to prevent and inhibit criminal conduct and to promote community safety by preventing associations that may lead to the establishment, maintenance and expansion of criminal groups and criminal networks. In addition, not all communication is prohibited but can still occur where an exception applies, including communication between family members, or communication for genuine political purposes, or in lawful protest or industrial action. This ensures the Bill does not go further in restricting the right to freedom of expression than what is necessary to fulfill its purpose.

For these reasons, the interference with the right to freedom of expression is lawful and reasonably necessary for the protection of public order.

Protection of families and children (section 17)

Section 17(1) of the Charter provides that families are 'the fundamental group unit of society and are entitled to be protected by society and the State'. The Charter does not define the term 'family', however it is likely to be given a broad interpretation.

Under the Act, a person who receives a notice is not prohibited from associating with a family member, provided the association is not for an 'ulterior purpose'. The scope of the relationships covered by the term 'family member' is broad, including any person that can reasonably be regarded as 'like family' when having regard to specified considerations.

The Bill amends the definition of 'family member' in the Act so that it applies to a narrower class of persons, changing the scope of lawful and unlawful association between family members. The amendment will mean that relationships considered by the person, and recognised in the person's community, as being like family, are no longer considered family member relationships for the purpose of the unlawful association scheme. Therefore, conceptions of family or kinship systems based on non-Western or Aboriginal or Torres Strait Islander constructs, will not be recognised for the purpose of the exception. In doing so, the Bill limits the right to protection of families.

The unlawful association scheme aims to prevent the establishment, maintenance and expansion of criminal groups and criminal networks, including criminal networks that operate based on, or utilising, familial connections. The amendments to the definition of 'family' are designed to remove the potential for a broader

interpretation of the term facilitating the exploitation of family relationships by criminals, to further criminal conduct. In addition, the Act enables a person who receives a notice to apply to Victoria Police for specific permission to attend an event or gathering. This may enable, for example, attendance at a family gathering, wedding or funeral. Therefore, the purpose of the limitation is to allow the scheme to operate as intended.

Section 17(2) of the Charter provides that every child has the right, without discrimination, to such protection as is in the child's best interests and is needed by the child by reason of being a child. In recognition of this right, the Act does not apply to persons under the age of 18 years, and so no person under the age of 18 can receive an unlawful association notice.

Recognition and equality before the law (section 8)

Section 8(3) of the Charter provides that every person is equal before the law and is entitled to the equal protection of the law without discrimination. The purpose of the right to equality is to ensure that all laws and policies are applied equally, without a discriminatory effect.

Section 3(1) of the Charter adopts the definition of 'discrimination' in the *Equal Opportunity Act 2010*, which includes both direct and indirect discrimination on the basis of a protected attribute, including race. Under section 9 of that Act, indirect discrimination occurs where a person imposes a requirement, condition or practice that is unreasonable and has, or is likely to have, the effect of disadvantaging persons with a protected attribute.

The Bill includes special provisions for Aboriginal and Torres Strait Islander people, by introducing: a new exception to the unlawful association offence based on Aboriginal cultural practice and obligation; a requirement for Victoria Police to report quarterly to IBAC on the number of Aboriginal and Torres Strait Islander people subject to the scheme; and a requirement for IBAC to report on the impact on Aboriginal people.

The new exception will ensure that an Aboriginal or Torres Strait Islander person does not commit the unlawful association offence, if the association occurs in the course of fulfilling a cultural practice or obligation. The requirement for specific reporting on the number of Aboriginal and Torres Strait Islander people subject to the scheme will enable any disproportionate impact on Aboriginal and Torres Strait Islander people to be monitored and acted upon.

These provisions recognise that Aboriginal and Torres Strait Islander people are over-represented in the criminal justice system, and the potential for the Bill to have a disproportionate effect on Aboriginal and Torres Strait Islander people. This has been found to be the case in New South Wales (NSW), when the NSW Ombudsman and the NSW Law Enforcement Conduct Commission reviewed the operation of the NSW consorting laws.

Section 8(4) of the Charter provides that measures taken for the purpose of assisting or advancing persons or groups of persons disadvantaged because of discrimination do not constitute discrimination. Accordingly, the special provisions for Aboriginal people do not constitute discrimination.

Right to take part in public life (section 18)

Section 18(1) of the Charter provides that every person in Victoria has the right, without discrimination, to participate in the conduct of public affairs.

Under the Act, association for a genuine political purpose is not prohibited. In addition, section 11 of the Act provides that the powers under the Act are to be exercised in a way that does not diminish the freedom of persons in Victoria to participate in lawful protest, advocacy, dissent or industrial action.

Cultural rights (section 19)

Section 19(1) of the Charter provides all persons with a cultural, religious, racial or linguistic background, the right, in community with other persons of that background, to enjoy their culture, to declare and practice their religion and to use their language.

Section 19(2) of the Charter acknowledges that Aboriginal persons hold distinct cultural rights and provides Aboriginal persons with the right, with other members of their community, to enjoy their identity and culture, to maintain and use their language, to maintain their kinship ties and to maintain their distinctive spiritual, material and economic relationship with the land and waters and other resources with which they have a connection under traditional laws and customs.

The Bill amends provisions which set out the scope of lawful and unlawful association between persons, including by prohibiting associations between persons who share cultural and community ties. In doing so, the Bill limits cultural rights.

The unlawful association scheme aims to prevent the establishment, maintenance and expansion of criminal groups and criminal networks, including criminal networks that operate based on cultural and community

connections. The prohibition on association, including association for cultural purposes, supports this purpose by removing the potential for the exploitation of cultural ties by criminals, to further criminal conduct.

The Bill introduces a new exception where association occurs in the course of an Aboriginal person or Torres Strait Islander engaging in or performing a cultural practice or obligation. This will enable the exercise and enjoyment of distinct Aboriginal cultural rights, including maintaining kinship ties and connection to land, identity and culture.

For non-Aboriginal people and Torres Strait Islanders, the Act contains a provision under which a person subject to an unlawful association notice can apply to Victoria Police for specific permission to attend an event or gathering. This would allow, for example, attendance at cultural or religious events, without the risk of charge for the unlawful association offence.

Replacing Declarations and Control Orders with Serious Crime Prevention Orders (Part 3)

The Bill establishes a new serious crime prevention order scheme for the purpose of preventing and inhibiting the involvement of individuals in serious criminal activity by restricting the activities of adult individuals. On application by the Chief Commissioner of Police, the County Court (or the Supreme Court exercising its jurisdiction to hear any matter under section 85 of the *Constitution Act 1975*) may make a serious crime prevention order requiring compliance with conditions. The application can be made in relation to a person aged 18 years or older who is either an eligible offender or who the court is satisfied, to the civil standard of proof, has been involved in serious criminal activity. The term 'eligible offender' is the same as that used in the unlawful association scheme.

The Court may impose a serious crime prevention order if satisfied there are reasonable grounds to believe that compliance with the conditions would protect the public by preventing or inhibiting the individual's involvement in serious criminal activity, and that imposing the conditions is otherwise appropriate in all the circumstances.

The Bill contains a non-exhaustive list of example conditions that the court may impose. For example, the court may consider it appropriate to impose conditions that prohibit the individual subject to the order from associating with specified individuals, leaving Victoria or Australia, possessing or using certain things such as firearms, telecommunications devices, cash or an alias, engaging in specified business activities or specified activities in respect of property. Further, the court may also consider it appropriate to impose conditions requiring the individual subject to the order to provide information and notifications to Victoria Police regarding specified things, for instance a change in address or employment. However, the court must consider what is already required of the individual under other instruments when determining conditions to impose.

Under the Bill, the maximum duration of a serious crime prevention order is 5 years, though it may be renewed more than once. Contravention of a serious crime prevention order is an indictable offence, punishable by a fine and/or imprisonment.

The Bill provides for the mutual recognition and application of corresponding orders made under similar regimes in other Australian jurisdictions. The Bill also applies the existing criminal intelligence provisions in Part 4 of the Act, enabling Victoria Police to protect the confidentiality of criminal intelligence used to support an application for a serious crime prevention order.

Freedom of movement (section 12); Right to privacy (section 13), Rights to peaceful assembly and freedom of association (section 16); Cultural rights (section 19); Property rights (section 20)

The Court has a broad discretion under the serious crime prevention order scheme to impose any conditions that it considers appropriate. Accordingly, it is not possible to exhaustively provide examples of every possible condition that could limit or engage rights as it is dependent on the specific circumstances of a matter before the court.

However, the non-exhaustive list of conditions set out in the Bill provides guidance as to the range of conditions which may be imposed. For instance, the following conditions contained within the new section 17 (clause 41) provide an illustrative example of the diversity of rights that may be engaged and/or limited:

- A condition that prohibits an individual from leaving Victoria or entering a specified place may limit the right to freedom of movement under section 12 of the Charter.
- Imposing a condition that prohibits an individual from undertaking a particular activity in respect of property rights may limit the right not to be unlawfully deprived of property under section 20 of the Charter.
- Where a condition is imposed that prohibits an individual from associating with a specified individual, the right to peaceful assembly and freedom of association under section 16 of the Charter may be limited.

- Requiring an individual to notify and provide information to Victoria Police about specified things may limit the right not to have a person's privacy unlawfully or arbitrarily interfered with under section 13 of the Charter.

To the extent that the rights of an individual may be limited via the imposition of conditions, I consider that any limitation on these rights is reasonable and justified under section 7(2) of the Charter.

The Bill sets out clear criteria that the court must be satisfied of when making a serious crime prevention order. Following satisfaction that the eligibility criteria has been met, the court is only permitted to impose a condition on an individual if satisfied that there are reasonable grounds to believe compliance with conditions would protect the public by preventing or inhibiting the individual from being involved in serious criminal activity and imposing conditions is appropriate in all the circumstances. The criteria for making a serious crime prevention order reflect the stated purpose of the scheme, to protect the public by preventing or inhibiting individuals from engaging in serious criminal activity.

It is open to the court to determine what conditions are appropriate to impose on an individual subject to a serious crime prevention order or whether it is appropriate to impose an order in the circumstances. In either event, the court must assess the future risk that a person will be involved in serious criminal activity, whether there are circumstances that establish reasonable grounds to believe a condition would protect the public and prevent or disrupt future involvement in serious criminal activity and the appropriateness of conditions before they may be imposed.

The criteria require the court to strike an appropriate balance when imposing a condition between the protection of the community via the prevention or disruption of serious criminal activity and the restriction on an individual's liberty that the condition may cause. Therefore, the court must ensure that any conditions imposed are adequately tailored to the circumstances of each case. This ensures that conditions are appropriate and proportionate to the risk that an individual may be involved in serious criminal activity.

Oversight by the court is an important safeguard to ensure that any interference with the rights of an individual will not be arbitrary, and no more than necessary to achieve the purpose of the serious crime prevention order scheme. Accordingly, I am satisfied that any limitation to human rights under the Charter by the imposition of a condition under a serious crime prevention order is proportionate.

Right to a fair hearing (section 24)

Section 24(1) of the Charter provides that a party to a civil proceeding has the right to have that proceeding decided by a 'competent, independent and impartial court or tribunal after a fair and public hearing'.

This right encompasses the right of a party in civil proceedings to be afforded procedural fairness, thereby ensuring a person is aware of the case alleged against them and is provided access to necessary information.

The Bill amends Part 4 of the Act to apply the existing provisions protecting criminal intelligence to the serious crime prevention order scheme. Accordingly, the Chief Commissioner may apply to the Court for an order protecting criminal intelligence which is sought to be relied upon in support an application for a serious crime prevention order.

The existing provisions under the Act provide that criminal intelligence encompasses 'any information, documents or other thing relating to actual or suspected criminal activity in Victoria or elsewhere', which if disclosed could reasonably be expected to prejudice a criminal investigation, risk the discovery of confidential sources or endanger a person's life or safety. Given the risks to individual and public safety, and the administration of justice associated with the disclosure of criminal intelligence, its protection is imperative.

Unless the court orders otherwise, applications for orders protecting criminal intelligence must be heard in closed court. This will result in the person subject to a serious crime prevention order being excluded from the hearing to preserve the confidentiality of intelligence sought to be relied upon. However, special counsel may be appointed to represent the interests of the individual, and may communicate with them prior to the hearing and seek further information from them during the hearing where necessary to represent their interests.

I consider that non-disclosure of criminal intelligence in support of a serious crime prevention order against an individual, may result in unfairness. For instance, unfairness may arise in circumstances where an individual is not able to adequately respond to the case against them as they cannot know all the information that the Chief Commissioner relies upon. Therefore, it is my view that provisions related to the protection of criminal intelligence may limit the right to a fair hearing under section 24 of the Charter.

However, I consider that any limitation of this right supports the purpose of the serious crime prevention order scheme, which is to protect the public by preventing or inhibiting individuals from being involved in serious criminal activity.

The reason being that criminal intelligence relied on for a serious crime prevention order by its nature will likely relate to serious and organised crime. As a person subject to a serious crime prevention order is either an eligible offender with a conviction, or is involved in serious criminal activity, it would not be appropriate to provide that individual with criminal intelligence or have such information be heard in open court. To do so may have serious ramifications on preventing or inhibiting serious criminal activity in ongoing investigations and affect public safety.

The Bill preserves the existing framework in the Act for the protection of criminal intelligence and makes criminal intelligence protection orders available under the serious crime prevention order scheme.

The existing framework affords the Court substantial discretion, which provides a crucial balance to justify any limitation on the rights of a person to a fair trial. For instance, an application for the protection of criminal intelligence must be heard in closed court unless the court orders otherwise. However, the court retains the discretion to adopt a different procedure if a closed court hearing is inappropriate in the circumstances.

Further, the court must undertake a balancing exercise when considering whether to make a criminal intelligence protection order. The court retains a discretion whether to grant an order if satisfied that the reasons for maintaining the confidentiality of the criminal intelligence outweigh any prejudice or unfairness to the respondent to the substantive application.

In my view, these provisions appropriately balance the need to retain the confidentiality of criminal intelligence material and the interests of a party in being able to participate in a hearing that may impact upon them.

Accordingly, I am satisfied any limitation of the right to a fair hearing for a party where the Chief Commissioner makes an application to protect criminal intelligence, is reasonable and demonstrably justified pursuant to section 7(2) of the Charter.

Rights in criminal proceedings (section 25)

Section 25(1) of the Charter provides that a person charged with a criminal offence has the right to be presumed innocent until proven guilty according to law. Section 25(2) broadly sets out the minimum rights of a person charged with a criminal offence in criminal proceedings.

I do not consider that the Bill limits the rights of a person in criminal proceedings.

The serious crime prevention order scheme is civil in nature, not criminal. Section 135 of the Act that this Bill amends expressly provides that unless otherwise specified, proceedings are civil in nature. On this basis, the court need only be satisfied on the civil standard of proof when determining an application for a serious crime prevention order.

The Bill includes eligibility criteria the court must be satisfied of when making a serious crime prevention order. The court must be satisfied that the individual the subject of the application is either an 'eligible offender', which requires a past conviction, or has been involved in serious criminal activity whilst aged 18 years or older. Insofar as the court must be satisfied whether a person has been 'involved in serious criminal activity' it must be satisfied on the balance of probabilities.

Whilst a past conviction may be a trigger for eligibility under the scheme, it is not enough in itself for an order being made. Instead, the threshold test for making a serious crime prevention order is based on the court's assessment of future risk, not merely that a person has been convicted or because of past conduct. That is, the court must assess whether there is a reasonable belief of a future risk of an individual being involved in serious criminal activity that would be prevented or inhibited via the imposition of conditions and therefore protect the public. Relevantly, the majority of the High Court has observed that comparable serious crime prevention order regimes involve an assessment of future risk by the court that includes considerations of past offence, though do not constitute a trial for an offence.²

In dealing with rights in criminal proceedings, section 25 of the Charter also encompasses the right to be presumed innocent until proven guilty according to law.

Clause 41 of the Bill inserts new section 31 in the Act which provides that an individual who knowingly or recklessly contravenes a serious crime prevention order commits an indictable offence. Under new section 31(3), service of a copy of a serious crime prevention order is *prima facie* proof that an individual knows that a serious crime prevention order that applies to them is in effect, unless evidence is adduced to the contrary.

The legal maxim that ignorance of the law is no excuse is particularly relevant where a document is served on an individual. In such circumstances, it is reasonable to assume that a person served with a document is aware of its contents, unless there is evidence of the contrary.

The presumption of innocence requires that the prosecution must prove an offence beyond reasonable doubt. However, requiring an individual to adduce evidence to rebut their knowledge that a serious crime prevention

order applies to them and is in effect, may be considered to shift the burden to an accused. However, in my view, an individual need only adduce evidence to the contrary which would be entirely within their knowledge. The burden then remains with the prosecution to prove absence of this knowledge to the criminal standard of proof, beyond all reasonable doubt, which is consistent with the presumption of innocence.

Right not to be tried or punished more than once (section 26)

Section 26 of the Charter provides that a person must not be tried or punished more than once for an offence in respect of which that person has already been finally convicted or acquitted in accordance with law.

This right embodies the fundamental common law principle of ‘double jeopardy’, which guarantees finality and certainty in the criminal justice system. This principle ensures that a person is not subjected to multiple prosecutions for an offence for which they have been finally acquitted or convicted.

I do not consider that the Bill engages or limits the right not to be tried or punished more than once.

As outlined above in relation to section 25 of the Charter, the serious crime prevention order scheme is a civil rather than criminal scheme. The purposes of the scheme relate to the prevention of serious criminal activity and the protection of the public, rather than punishment. If an order is imposed its purpose is preventative and does not constitute a penalty. Further, as also addressed above, the criteria for making a serious crime prevention order require consideration of a future risk of criminal activity by the court. Relevantly, the majority of the High Court has commented that a comparable serious crime prevention order regime in another Australian jurisdiction did not involve double jeopardy, and constituted a different approach to a different subject.³

Insignia of Certain Organisations (Part 4)

The Bill creates a new summary offence for a person who is 18 years or older to publicly display a mark that is insignia of an organisation, subject to specified exceptions, where:

- the person knows, or ought reasonably to know, that the mark is insignia of an organisation
- that organisation is a Part 5B organisation, being an organisation prescribed in regulations, and
- if the regulations prescribe a mark in respect of that organisation, the mark is either a prescribed mark or consists of “1%” or “1%er”.

Insignia is defined in the Bill to mean a mark that denotes an organisation (including that organisation’s name or logo), or indicates membership of, or an association with, the organisation. If the mark consists of a “1%” or “1%er” symbol, it will be insignia where it relates to a prescribed organisation and that organisation is a motorcycle club.

The Attorney-General may recommend the making of regulations prescribing an organisation following consultation with the Chief Commissioner of Police, where reasonably satisfied that prescribing the organisation is:

- likely to substantially assist in disrupting or preventing serious criminal activity, and
- reasonably necessary to prevent or disrupt serious criminal activity.

Regulations may also be made prescribing a specific mark of an organisation.

The offence is accompanied by the following enforcement powers:

- A police officer may direct a person to cease the public display of insignia, with non-compliance being a further summary offence.
- A police officer may seize without warrant a thing bearing insignia of a prescribed organisation where a police officer reasonably believes that a person is committing or has committed the substantive offence of publicly displaying insignia of a prescribed organisation, that the public display is still occurring where the thing is located at a public place, and where the person has been informed of or asked of specified matters.
- A magistrate may issue a search warrant in respect of the offence of publicly displaying insignia of a prescribed organisation in accordance with section 465 of the *Crimes Act 1958* as applied by new section 124ZV of the Act authorising police to enter a specified building, receptacle, place or vehicle and search for and seize any thing upon or in respect of which an offence against new section 124ZN of the Act is suspected to have been committed or is likely to be committed within the next 72 hours, or which there is reasonable ground to believe will afford evidence as to the commission of any such offence.
- A court may order the forfeiture of property bearing a mark the public display of which constituted an offence of publicly displaying insignia for which a person has pled, or been found, guilty.

Freedom of expression (section 15)

Publicly displaying insignia of an organisation is likely to be considered a communicative act that constitutes expression. Part 4 of the Bill therefore limits the right to freedom of expression by preventing a person's ability to impart information and ideas through the public display of insignia of prescribed organisations.

Victoria Police has indicated that some organisations use public display of insignia to intimidate, stand over and influence others in the community by creating fear and an implied threat of violence, and also to attract and recruit new members through visual presence and status. The purpose of Part 4 of the Bill is to prevent or disrupt serious criminal activity created or facilitated by the display of insignia. The limitation on freedom of expression therefore supports that legitimate purpose.

Further, the scheme is confined in a number of ways to ensure that it is the least restrictive means reasonably available to achieve this purpose. With respect to section 15(3) of the Charter, that purpose of preventing or disrupting serious criminal activity via the prohibition on the public is directed at ensuring the rights and reputations of other persons are respected and the protection of public order.

First, the offence only applies to adults only where a person knows, or ought reasonably to know, that the mark is an insignia of a particular organisation. This ensures that freedom of expression is not unnecessarily constrained, for example, where a person displays a mark without realising it is insignia of that organisation. Similarly, the Bill provides that the offence is subject to a range of exceptions which mitigate impacts on freedom of expression by ensuring that legitimate displays of insignia are not prohibited. Specifically, a person does not commit the offence if the display was engaged in reasonably and in good faith for a genuine academic or educational purpose, in the performance, exhibition or distribution of a work of art, in making or publishing a fair and accurate report of any event or matter, by a member or officer of a law enforcement, integrity or intelligence agency in the performance of the member or officer's duties for the purposes of the administration of justice, in opposition to the criminal activity of the organisation of which the mark is an insignia, or for an unrelated purpose as provided in new section 124ZP of the Act.

Second, as noted above, the offence only applies to displays in or visible from a public place. That is, a person may continue to express themselves through the display of insignia of prescribed organisations in a manner that is not publicly visible. The offence also does not prohibit insignia displayed via tattoos or other like processes, even where the tattoo is visible on a person whilst in public.

Third, the offence will only apply in relation to organisations prescribed in regulations. The Bill provides clear criteria and processes for when an organisation may be prescribed to ensure the scheme has a confined impact directly related to its purpose. Specifically, an organisation may only be prescribed upon recommendation by the Attorney-General as the responsible Minister administering the Act where the Attorney-General has first consulted with the Chief Commissioner of Police and is satisfied on reasonable grounds that the application of the prohibition on publicly displaying an insignia to the organisation is likely to substantially assist in disrupting or preventing serious criminal activity, and is reasonably necessary to prevent or disrupt serious criminal activity. The Attorney-General would need an evidentiary or factual basis for such a conclusion.⁴

If the Chief Commissioner of Police informs the Attorney-General that a person has been involved in serious criminal activity while a member or prospective member of an organisation being considered for prescription, the Attorney-General must take that into account when considering whether to be satisfied of the above criteria.

Fourth, while the definition of insignia, outlined above, is broad, the Bill sets out a mechanism for prescribing only specific insignia of an organisation where that would be a less restrictive means of achieving the scheme's purpose of preventing or disrupting serious criminal activity. This will allow for more targeted application of the offence where the risk of serious criminal activity is limited to particular insignia or where there is a risk that application to all insignia of an organisation may have unintended consequences. Where one or more marks are prescribed in relation to a given organisation, the scheme would only apply in relation to the prescribed marks that meet the definition of insignia, as well as the "1%" and "1%er" symbols where they denote or indicate membership of, or an association with, the organisation and that organisation is a motorcycle club. The scheme will not apply to any other marks of the organisation that are not prescribed, whether or not they would meet the definition of insignia.

For these reasons, I consider that that the scheme is appropriately targeted to ensure that it will only apply where it is necessary to achieve the legitimate purpose of prevention or disruption of serious criminal activity. Accordingly, I am satisfied any limitation of the right to a freedom of expression, is reasonable and demonstrably justified pursuant to section 7(2) of the Charter.

Rights to peaceful assembly and freedom of association (section 16)

The Bill may also limit the rights to peaceful assembly and freedom of association by disincentivising membership of those same organisations on the basis they have been prescribed and/or for fear of criminal penalties if the association is conveyed through display of the organisation's insignia.

Further, as I have outlined extensively above, I consider the scheme is appropriately constrained to achieve its legitimate purpose. In particular, I emphasise again whilst the offence prohibits the public display of insignia of prescribed organisations, including the public visual representation of an association with other persons as part of an organisation, it does not prevent association between members of a prescribed organisation. Nor does it prevent persons identifying themselves verbally as associated with other members of those organisations.

Consequently, I consider any limitation of rights to peaceful assembly and freedom of association is considered reasonable and demonstrably justified.

Right to freedom of thought, conscience, religion and belief (section 14)

Section 14(1) of the Charter provides that every person has the right to freedom of thought, conscience, religion and belief, including the freedom to have or to adopt a religion or belief of that person's choice, and the freedom to demonstrate that person's religion or belief in worship, observance, practice and teaching, either individually or as part of a community, in public or in private. Section 14(2) of the Charter also provides that a person must not be coerced or restrained in a way that limits that person's freedom to have or adopt a religion or belief in worship, observance, practice or teaching.

Given that organisations are yet to be prescribed, I accept that depending on the nature and tenets of such organisations, the right to freedom of thought, conscience, religion or belief in the cause embodied by that organisation may be affected. However, as outlined above, the Bill seeks to prevent and disrupt serious criminal activity and has been appropriately constrained to achieve that legitimate purpose. As such, to the extent that Part 4 of the Bill may be capable of limiting the right to freedom of thought conscience, religion and belief, I consider such a limitation to be reasonable and demonstrably justified.

Recognition and equality before the law (section 8)

Part 4 of the Bill limits the right to recognition and equality before the law by prohibiting the public display of insignia of organisations to be prescribed in regulations as outlined above, confining the scope of the scheme to impact select organisations who are to be treated differently to other organisations.

The limitation ensures that the impact of the scheme (including in relation to other Charter rights outlined in this Statement) is appropriately confined for the purpose of achieving the legitimate purpose of preventing and disrupting serious criminal activity. Consequently, this limitation is considered reasonable and demonstrably justified.

Right to be presumed innocent until proven guilty (section 25(1))

The Bill limits the right to be presumed innocent until proven guilty by creating an offence for the public display of insignia of prescribed organisations which contains a list of exceptions outlined above. This has the effect of placing an evidential onus on the accused to demonstrate that the display was engaged in reasonably and in good faith for the purpose of one of the exceptions.

Further, by prohibiting the public display of insignia of prescribed organisations, for the purpose of preventing and disrupting serious criminal activity, an implication may be created that anyone who wears or displays such insignia is a criminal and/or a member of a criminal organisation. However, I do not consider this to limit the presumption of innocence as provided for by the Charter, noting that the scope of the offence relates only to public displays of the insignia of prescribed organisations and does not inhibit a person from private display of insignia that is not visible from a public place, nor does it inhibit membership of the organisation itself.

Whilst the offence places an evidential onus on the accused to adduce evidence suggesting a reasonable possibility that they have engaged in the display of the insignia for the purpose of one of the listed exceptions reasonably and in good faith, this does not transfer the legal onus of proof. Once the accused has pointed to evidence of the exception, the prosecution must still prove the elements of the offence beyond reasonable doubt.

The placement of an evidential onus on the accused is required, as the purpose for which insignia is displaced will be known by the accused for which they should be able to readily point to supporting evidence. The burden is also necessary to prevent a person from displaying insignia under an exception dishonestly for some improper purpose.

The exceptions have been designed to ensure that the offence is specifically targeted to achieve its purpose of preventing serious criminal activity. As I have already indicated, they ensure the offence does not prohibit

displays of insignia reasonably and in good faith for specified legitimate purposes, the prohibition of which would not prevent or disrupt serious criminal activity. These exceptions are therefore designed to mitigate the broader impact of the offence on various other rights outlined in this Statement of Compatibility. Further, the matters within the exceptions will generally be uniquely within the knowledge of the accused.

The offence could have been drafted to require the prosecution to demonstrate beyond reasonable doubt each and every exception does not apply in every case, even in the absence of evidence to suggest an exception may apply. However, this would have placed such a high burden on the prosecution as to render the offence unworkable.

Consequently, I consider placing an evidential onus of proof on the accused with respect to the exceptions reasonable and demonstrably justified.

Right to privacy (section 13(a))

The right to privacy, as outlined above, encompasses an individual's 'interest in the freedom of their personal and social sphere in the broad sense'.⁵ Part 4 of the Bill affects an individual's autonomy because it prevents them from being able to choose to wear particular clothing or publicly display marks of their belonging to an organisation. Similarly, Part 4 of the Bill interferes with a person's home by prohibiting the display of insignia of prescribed organisations on such private property in such a way that it would be visible from a public place.

The interference with an individual's autonomy directly supports the purpose of Part 4 of the Bill which is to prevent or disrupt serious criminal activity. As already noted, the scope of the scheme is confined in a number of ways to ensure that it is the least restrictive means reasonably available to achieve this purpose such that I do not consider the interference to be arbitrary.

Similarly, any interference with a person's home is necessary to ensure that persons cannot circumvent the operation of the offence by displaying insignia on private property that is visible from a public place. As previously explained, the prohibition of displays that occur on private property but are visible from a public place limit the scope of the offence only to parts of a person's private property that are in public view. A person remains free to own, possess and display insignia of a prescribed organisation in the complete privacy of their home where it is not in public view.

Separately, the enforcement powers within Part 4 of the Bill, as outlined above, also limit the right to privacy by:

- enabling a police officer to interfere with a person's bodily privacy when exercising seizure powers in accordance with new sections 124ZV and 124ZW of the Act, and
- potentially enabling a police officer to enter and search a person's home where authorised under a search warrant issued by a magistrate under section 465 of the *Crimes Act 1958* as applied by new section 124ZV of the Act.

However, these search and seizure powers may only be exercised in accordance with the law and are subject to appropriate limitations and safeguards. Notably, a police officer may only exercise warrantless seizure powers under new section 124ZW of the Act, where they reasonably believe that a person is committing or has committed the offence of publicly displaying insignia of a prescribed organisation and where the display is continuing. The offence is in turn further confined as outlined above only in relation to marks that meet the clear definition of insignia set out in the Bill of organisations that have been prescribed in accordance with clear criteria and processes that ensure the scheme only applies as far as needed to achieve its legitimate purpose.

The requirement that the public display is continuing ensures that the warrantless search powers are only available to respond to and prevent ongoing offending against new section 124ZN of Act where there would not be time to permit a search warrant. The confinement of the warrantless search powers to being exercised in public places only, also reflects the greater impact to privacy where an item is located on private property. Prior to a police officer exercising the seizure power, they must also:

- inform the person from whom the thing is to be seized that the officer believes that the person is committing an offence against section 124ZN
- inform the person that the officer has the power to seize the thing and intends to do so
- inform the person that reasonable force may be used to assist in the seizure, and
- ask the person to hand the thing over.

Police may only retain an item seized under a search warrant issued as provided under by section 124ZV, or without warrant under new section 124ZW of the Act for a specified period before the item becomes eligible

for collection. Specifically, seized items become eligible for collection by the owner of a seized thing or a person from whom it was seized or another person on either's behalf:

- when 3 months elapse without a person being charged with an offence against the Act in relation to the public display of a mark that the thing bears
- when a decision is made, within that period, not to charge such an offence, or
- if a person is charged with such an offence, when all the relevant proceedings have concluded without a forfeiture order being made.

The search warrant powers may only be carried out after a magistrate has been satisfied by the evidence on oath or by affirmation or affidavit of any police officer of or above the rank of senior sergeant that the specific statutory preconditions outlined above have been met. Further the search warrants are subject to the continued oversight of the Magistrates' Court and the various requirements of the other provisions of Subdivision (31) of Division 1 of Part III of the *Magistrates' Court Act 1989* apply.

I am therefore also of the view that the search and seizure powers outlined above are not arbitrary.

Accordingly, I am of the opinion that Part 4 of the Bill does not limit and is not incompatible with the right to privacy protected by section 13(a) of the Charter.

Property rights (section 20)

Section 20 of the Charter provides that a person must not be deprived of their property other than in accordance with law. This final limitation of 'other than in accordance with law' requires that the law be adequately accessible and formulated with sufficient precision, and not operate arbitrarily or selectively.⁶

The seizure powers discussed above also engage the right to property by depriving a person's ability to enjoy and exercise their exclusive control over things seized by police. Part 4 of the Bill also limits property rights by providing for the forfeiture of things seized pursuant to new section 124ZW of the Act where those things are not collected within a specified period of time and the power for a court to order the forfeiture of seized property bearing a mark the public display of which constituted an offence of publicly displaying insignia for which a person has pleaded, or been found, guilty.

These powers ensure that police have the ability to remove insignia of prescribed organisations from public display in the swiftest manner possible, to prevent them from being publicly displayed again in the future, and to deter others from engaging in the conduct prohibited by the Bill, and are therefore directed at the legitimate purpose of Part 4 of the Bill. Victoria Police has advised that without such powers, the practical enforcement of the offence would likely be significantly undermined. In particular, there would be no practical and operationally workable means of preventing a person who police find publicly displaying insignia of prescribed organisations – that is a person who has not been deterred by the new offence alone – from continuing to display insignia after police leave. I therefore consider that the powers are a necessary addition to the new insignia offence to ensure Part 4 of the Bill is capable of achieving the purpose of preventing or disrupting serious criminal activity.

Further, I consider the powers are appropriately confined and structured and do not operate arbitrarily or selectively. As outlined above, the seizure powers may only be exercised in accordance with the law and are subject to appropriate limitations and safeguards.

The forfeiture powers are also clearly set out in law and subject to appropriate limitations and safeguards. While the forfeiture of seized things not collected within a specified period operates automatically by force of law, there are practical obligations on police to give notice that the seized thing has become eligible for collection to each person who is an owner of a seized thing and, where the thing was seized under new section 124ZW of the Act and was being carried or attended by a person when seized, that person, where such persons are discernible from Victoria Police records. Further, I consider that the timeframes for collection are reasonable and fair, being 3 months after the last person received notice that the seized thing is eligible for collection, or if no notice has been issued, 4 months after the time at which the seized thing became eligible for collection. The power to forfeit items where no notice has been issued reflects that there may be circumstances where gang insignia being displayed in a fixed location and it is unclear who owns the thing or attended to the thing.

The power for a court to order the forfeiture is also clearly set out in law and subject to appropriate limitations and safeguards. This power is only enlivened in relation to property that has been seized and bears a mark the public display of which constituted an offence of publicly displaying insignia for which a person has pleaded, or been found, guilty, and only on application of the prosecution. Further, there are clear criteria and processes that must be followed before forfeiture may be ordered. With respect of a seized thing that is not a motor vehicle, new section 124ZZA of the Act sets out a simple process reflecting the relatively low value of the

largely personal items it is expected to apply in relation to and ensures that the court maintains a broad discretion as to whether or not to order forfeiture.

For seized motor vehicles, the Bill applies Division 1 of Part 3 of the *Confiscation Act 1997* as if the offence against new section 124ZN of the Act were a Schedule 1 offence within the meaning of the *Confiscation Act 1997* while preventing the broader application of the forfeiture power to other tainted property within the meaning of that Act. The process set out in Division 1 of Part 3, and the associated provisions of the *Confiscation Act 1997*, are complex and its application to motor vehicles used to display insignia reflects the comparatively high value of motor vehicles and the fact that they may be more likely to give rise to third party ownership or security interests.

Consequently, I consider that the interference with property rights is appropriately confined and structured, and to the extent such interference amounts to a limitation of those rights, is reasonable and demonstrably justified.

Exclusion of Members of Certain Organisations from Victorian Government Worksites (Part 5)

The Bill will:

- introduce an indictable offence, punishable by up to 3 years' imprisonment, that prohibits members of prescribed organisations from entering an area that is a Victorian Government worksite, to which public access is restricted, and where development is taking place
- provide a broad definition of 'development' that includes construction, demolition, subdivision and relocation
- provide for land to be prescribed as a 'Victorian Government worksite' in regulations, if the area is, or is located at, a project area, or an area at which the Attorney-General is satisfied on reasonable grounds public construction is occurring, and where the Attorney General is satisfied on reasonable grounds that applying the offence to such areas is likely to substantially assist in disrupting or preventing criminal activity in relation to public construction
- define 'project area' to include a number of locations delineated under other Acts in relation to public infrastructure projects such as the Suburban Rail Loop
- define public construction to include construction by, or on behalf of, a Department or public body
- provide for organisations to be prescribed in regulations, where doing so is likely to substantially assist in, and is reasonably necessary to, prevent or disrupt serious criminal activity in relation to public construction
- amend section 11 of the Act – which operates to preserve the freedom of persons in Victoria to participate in lawful protest, advocacy, dissent or industrial action – so that it does not apply in relation to the offence and, thereby, ensure the new offence can apply where the person who is a member of a prescribed organisation is also a union official, and
- clarify that the offence applies despite anything to the contrary under any other law.

Right to freedom of movement (section 12)

The right of members of prescribed organisations to move freely within Victoria would be limited because the scheme prohibits them from entering Victorian Government worksites.

However, the scheme only applies to worksites to which public access is restricted. The limitation is therefore consistent with limitations on the right applying to most other Victorians. As the purpose is to prevent criminal activity in relation to public construction, the restriction on the right is considered lawful and necessary to protect public order, and therefore is proportionate to the legitimate aim of crime prevention.

Right to privacy and reputation (section 13)

The right to privacy includes a person's 'interest in the freedom of their personal and social sphere in the broad sense'.⁷ On one interpretation, the right may be limited 'where employment restrictions impact sufficiently upon the personal relationships of the individual and otherwise upon the person's capacity to experience a private life'.⁸

Therefore, the right of members of prescribed organisations to privacy and reputation may be limited in so far as the Bill restricts the ability of persons to be employed or engaged to do work on a Victorian Government worksite.

The exclusion from employment in these circumstances is considered necessary to achieve the purpose of preventing criminal activity in relation to public construction. For these reasons, the limitation is lawful and non-arbitrary, as it is proportionate to the legitimate aim of crime prevention.

Right to freedom of expression (section 15(2))

The right of members of prescribed organisations to seek, receive or impart information is limited, because the physical exclusion from Victorian Government worksites prohibits this expression in these locations, particularly in the context of union activities and industrial action.

The offence is directed at preventing criminal activity in public construction, and the limitation it imposes is reasonably necessary to maintain public order.

Right to peaceful assembly and freedom of association (section 16)

The rights of members of prescribed organisations to peaceful assembly and freedom of association is limited by the exclusion from Victorian Government worksites. The exclusion will prevent members from engaging in peaceful protests or union activities on Victorian Government worksites.

The limitation is lawful and non-arbitrary, as it is proportionate to the legitimate aim of crime prevention and the social need of prohibiting members from working on Victorian Government worksites. The proportionality of this limitation is evidenced by the fact that members are not prohibited from engaging in peaceful protest or union activities at any other location, including any area that is accessible to the public.

Right to take part in public life (section 18)

The right of members of prescribed organisations to, without discrimination, participate in the conduct of public affairs is limited, in so far as they are prevented from engaging in lawful protest, advocacy and industrial action at Victorian Government worksites.

The right of construction workers who are not members of prescribed organisations to participate in the conduct of public affairs through freely chosen representatives may also be limited, in so far as the offence prohibits union representatives (who are members of prescribed organisations) from attending worksites in that capacity.

The offence aims to prevent criminal activity on Victorian Government worksites, by keeping members of prescribed organisations off these sites. This is intended both to prevent crime and to protect other important rights of workers. Therefore, the limitation is reasonable and justified to achieve this purpose.

Conclusion

I am therefore satisfied for the reasons outlined above that the limitations on rights discussed are reasonable and justified in the circumstances.

The Hon Anthony Carbines MP
Minister for Police
Minister for Crime Prevention
Minister for Racing

¹ *Kracke v Mental Health Review Board* [2009] 29 VAR 1 [619].

² *Vella v Commissioner of Police for New South Wales* (2019) 269 CLR 219 [78].

³ *Ibid.*

⁴ *George v Rockett* (1990) 170 CLR 104 at 112 (the Court).

⁵ *Kracke v Mental Health Review Board* [2009] 29 VAR 1 at [619] (Bell P); *Castles v Secretary, Department of Justice* (2010) 28 VR 141 at [77] (Emerton J).

⁶ *Hoverspeed Ltd v Commissioners of Customs and Excise* [2002] EWHC Admin 1630 at [152]–[158]; *PJB v Melbourne Health (Patrick's Case)* (2011) 39 VR 373 at [91] (Bell J).

⁷ *Kracke v Mental Health Review Board* [2009] 29 VAR 1 [619].

⁸ *ZZ v Secretary, Department of Justice* [2013] VSC 267, [94].

Second reading

Anthony CARBINES (Ivanhoe – Minister for Police, Minister for Crime Prevention, Minister for Racing) (10:14): I move:

That this bill be now read a second time.

I ask that my second-reading speech be incorporated into *Hansard*.

Incorporated speech as follows:

The Criminal Organisations Control Amendment Bill 2024 amends the *Criminal Organisations Control Act 2012* to reform Victoria's unlawful association scheme, introduce a new serious crime prevention order, prohibit the public display of the insignia of prescribed organisations, and prohibit members of prescribed organisations from entering Victorian Government worksites.

Organised crime in Victoria

The Australian Institute of Criminology estimates that serious and organised crime cost Australia up to \$60.1 billion in 2020–21, including direct and consequential costs arising from organised crime activity and costs associated with prevention and response to serious and organised criminal activity.

Outlaw motorcycle gangs, or OMCs as they are commonly referred to, represent some of the more highly visible, but certainly not the only, organised crime groups known by police to be operating in Victoria. Victoria Police reports that 26 individual recognised OMCs are recorded and operating in some capacity in Victoria alone, with 40 such groups operating across Australia. Victoria Police estimates that there are 2,000 OMC members and associates who have links to Victorian addresses. Research undertaken by the Australian Institute of Criminology in 2022 indicates that 4 in 5 Australian OMC members had a recorded criminal history, and that OMC members were nearly three times as likely to have contact with the criminal justice system by age 33 than others. One in 4 members had been apprehended for a recent violent or intimidation offence, and one in 8 for a recent organised crime-type offence.

Victoria Police has emphasised the increasing sophistication of these groups, noting that in recent years OMCs have been known to collude to establish a larger organisation to facilitate major criminal ventures, with each OMC contributing to its activities. Victoria Police has identified linkages between OMCs and other organised crime groups with consistent attacks on tobacco stores and related businesses, fraud activities, and a wide range of other serious offending.

Victoria Police has also observed that, in recent years, high ranking members of OMCs have shifted residence from other Australian states to Victoria where they openly congregate and consort with other serious organised crime entities, driven by effective interstate anti-association laws and serious crime prevention orders.

Unlawful association

The objective of the unlawful association scheme is to prevent and inhibit the criminal conduct of criminal groups or criminal networks, by preventing associations that may lead to this conduct.

In 2015, the Criminal Organisations Control Act was amended to introduce the unlawful association scheme. The scheme has not been used since it commenced in 2016.

The Bill modifies the unlawful association scheme to expand police powers to prohibit persons from associating with each other. Under the scheme, Victoria Police can issue a notice to persons warning them not to associate. Subsequent associations between persons issued a notice may constitute the offence of unlawful association.

Threshold to issue an unlawful association notice

Currently, Victoria Police can issue a notice directing two or more people over the age of 18 not to associate with each other, if:

- one of them has previously been convicted of an applicable offence tried on indictment, and
- the issuing officer reasonably believes that preventing association between the two is likely to prevent the commission of an offence.

The Bill amends this test to expand police powers to issue an unlawful association notice, in the following ways:

- Removing the requirement that the conviction was ‘tried on indictment’, so that a notice may be issued where a person was convicted for an applicable offence heard and determined summarily or following a plea of guilty. This expands the scope of the scheme to capture less serious offending and will enable Victoria Police to issue notices to a much broader group of people.
- Replacing the requirement for a police officer to believe a crime is likely to be prevented with a requirement that the officer is reasonably satisfied issuing the notice is likely to prevent or inhibit the establishment, maintenance or expansion of a criminal group or a criminal network, and thereby to prevent or inhibit criminal conduct. The officer must also be satisfied issuing the notice is appropriate in all the circumstances, following consideration of a list of factors such as whether issuing the notice is proportionate to the risk of criminal conduct.

The Bill also amends the definition of ‘applicable offence’ to capture serious offences punishable by at least 10 years imprisonment, offences that are linked to organised crime, and comparable interstate offences, recognising the cross-border operation of organised crime. However, the Bill provides that the unlawful association powers may not be applied in relation to a person on the basis of a conviction for an applicable offence which has since become spent, or for childhood offences unless the conviction was for a specified serious offence that occurred within the past 2 years.

Offence of unlawful association

Currently, the recipients of a notice commit an offence if they associate with a person named in the notice 3 times in a 3-month period, or 6 times in a 12-month period. This is a serious offence, and if found guilty, the person faces up to 3 years imprisonment.

The Bill will lower this threshold, so that the recipient of a notice commits an offence if they associate with the person named in the notice just once, at any time the notice is in effect. This will increase the efficacy of the scheme by making it easier for Victoria Police to charge persons for associating in contravention of a notice.

The Bill also clarifies the practical operation of the offence, amending the definition of ‘associate with’ to make it clear that chance encounters or inadvertent meetings do not, of themselves, cause a person to commit the offence. Specifically, the Bill amends the definition to clarify that, in order to commit the offence, there must be some seeking out or acceptance of the other person’s company or communication. Therefore, an accidental meeting or communication will not be an ‘association’ for the purpose of the offence, consistent with the High Court’s interpretation of the New South Wales provision in *Tajjour v New South Wales* (2014) 254 CLR 508.

Exceptions to the offence

The unlawful association scheme provides for a number of situations where an exception applies and associating does not constitute an offence. For example, persons subject to a notice are permitted to associate with family members, if it is not done for an ulterior purpose.

The Bill narrows the exception for association with family members by amending the definition of ‘family member’ so that it applies to a more confined group of people. The new definition includes close family relationships, but will no longer capture any person who can reasonably be regarded as ‘like family’, having regard to specific considerations. The definition retains the ‘intimate personal relationships’ exception, to ensure that relationships such as engaged couples are included. It does not, however, extend to mere close friendships.

The Bill also introduces new exceptions where an association occurs while receiving welfare services, or in the course of emergency services volunteering, or an Aboriginal person or Torres Strait Islander engaging in or performing a cultural practice or obligation.

Safeguards

The Bill strengthens the process for seeking the internal review of an unlawful association notice by increasing the minimum rank of the reviewing officer and enabling a person to seek an extension of time to apply for a review. In addition, the Bill includes a process enabling a person to apply to a court to revoke a notice if there has been a substantial change in circumstances.

The Bill also reduces the duration of an unlawful association notice from 3 to 2 years. This will ensure that the grounds for issuing a notice are reconsidered afresh within a shorter period of time.

Independent oversight of the unlawful association scheme

The Independent Broad-based Anti-corruption Commission (IBAC) will be given a new monitoring and oversight role. IBAC will be required to report annually to the Attorney-General on the exercise of unlawful association powers and conduct periodic reviews of unlawful association notices. To ensure IBAC has the information it needs, Victoria Police will be required to report to IBAC quarterly on the use of powers.

Concerns have been raised about the use of similar consorting laws in New South Wales. The NSW Ombudsman and the NSW Law Enforcement Conduct Commission have both found that young persons and Aboriginal persons have been disproportionately subject to the scheme. The Bill seeks to ensure that similar issues do not arise in Victoria. Under the revised scheme, police will not be able to issue an unlawful association notice to anyone under the age of 18. In addition, Victoria Police is required to report on the number of Aboriginal people and Torres Strait Islanders who receive a notice or are charged with the offence. Therefore, government will know if any groups are being unfairly targeted by these laws.

Serious crime prevention orders

The Bill will introduce a new serious crime prevention order scheme to replace the declaration and control order scheme in the *Criminal Organisations Control Act 2012*, which has not been used since it was introduced.

The purpose of the serious crime prevention order scheme is to prevent and inhibit the involvement of individuals in serious criminal activity. The scheme enables the Chief Commissioner of Police to apply for a court order restricting the activities of individuals aged 18 years or older who are involved at the most serious end of organised crime. Provided the court is satisfied that certain criteria are met, it may make an order

requiring an individual to comply with tailored conditions commensurate to their risk profile, to curtail future involvement in serious criminal activity and protect the public.

These reforms have been modelled on, and are substantially similar to, the equivalent New South Wales scheme in the *Crimes (Serious Crime Prevention Orders) Act 2016* (NSW), though they have been adapted to the Victorian legislative framework. The Victorian scheme is broadly consistent with the New South Wales scheme. For example, the comparable operative provision (new section 16 in the Bill and section 5(1) in New South Wales) gives the court discretion to make an order and requires the court to undertake a balancing exercise and future risk assessment before making an order. Further examples of consistency between the schemes include, but are not limited to, the civil nature of both schemes, equivalent durations of the orders, and that both enable orders to be varied or revoked.

The analogous New South Wales scheme has been upheld by the High Court in *Vella v Commissioner of Police for New South Wales (2019) 269 CLR 219*. In upholding the validity of the equivalent scheme, the majority of the High Court outlined 6 steps to be followed before a court may make a serious crime prevention order. Those steps are reflected in new section 16 of the Bill. The High Court decision outlines a 6-step approach as follows:

- (i) the person must be at least 18 years old;
- (ii) the person must have been convicted of, or there is proof of involvement in, serious criminal offending;
- (iii) the court must assess whether there is a real likelihood that the person will be involved in serious crime related activity;
- (iv) the court must consider whether there are reasonable grounds to believe that the order would prevent, restrict or disrupt serious crime related activities;
- (v) the order and conditions must be tailored to protect the public by preventing, restricting or disrupting further serious criminal related activities; and
- (vi) the court must consider whether the order should be made in the circumstances.

Serious crime prevention orders may only be made by the court

The court may make a serious crime prevention order requiring an individual the subject of an application to comply with conditions imposed under that order, where satisfied on the balance of probabilities that the individual is either:

- an 'eligible offender', which is a conviction-based pathway and is defined consistently with the unlawful association scheme, or
- has been involved in serious criminal activity while 18 years or older.

The second limb recognises that a person may be 'involved in' serious criminal activity without being convicted of an applicable offence. This reflects that some individuals, for example leaders of organised crime groups, may not directly offend but facilitate others offending, and provides a mechanism to restrict those individuals' activities.

Where the court is satisfied that either of the eligibility criteria has been met, it must also be satisfied, to the civil standard of proof, that there are reasonable grounds to believe that compliance with the conditions would protect the public by preventing or inhibiting the individual's involvement in serious criminal activity and imposing the conditions is otherwise appropriate in the circumstances. Once satisfied the criteria have been met, the court may make a serious crime prevention order. The criteria ensures that any conditions are appropriate and proportionate to the risk that an individual may be involved in serious criminal activity. This is due to the requirement that the court balance the protection of the community via preventing or inhibiting the involvement of an individual in serious criminal activity as against the restrictions that a condition would place on the liberty of a person.

The court has a broad discretion to impose suitable conditions. The Bill includes a non-exhaustive list of conditions the court might impose. For example, the court may impose conditions prohibiting association with specified individuals, the use of an alias, the possession of firearms or cash or prohibiting the individual leaving Victoria or Australia. However, the Bill also requires the court to consider what is already required of a person subject to existing orders of a court or tribunal or undertakings amongst other things.

Judicial discretion and oversight in making serious crime prevention orders and determining appropriate conditions is an essential and fundamental safeguard that has been included in the scheme. This safeguard reflects the significance of serious crime prevention orders on the lives and activities of the persons subject to them, ensuring that any conditions imposed are appropriate and proportionate to prevent and inhibit serious criminal activity and protect the public.

A serious crime prevention order may be in force for a maximum duration of 5 years, although it may be varied or revoked earlier in certain situations. The Chief Commissioner of Police may apply to the court for the renewal of a serious crime prevention order and may do so more than once.

Offence for contravention of a serious crime prevention order

It will be an indictable offence to contravene a serious crime prevention order. Contravention of a serious crime prevention order is punishable by a fine of up to 600 penalty units, which is currently \$118,554, and/or 5 years imprisonment.

Protection of criminal intelligence

The Bill applies the existing criminal intelligence provisions in the *Criminal Organisations Control Act 2012* to the serious crime prevention order scheme. Accordingly, Victoria Police may seek to protect the confidentiality of criminal intelligence relied upon to support an application for a serious crime prevention order.

Where the Chief Commissioner of Police makes an application for a criminal intelligence protection order, the court retains a discretion to grant the order after balancing whether the need for confidentiality of the criminal intelligence outweighs any prejudice or unfairness to the individual. Unless ordered otherwise, criminal intelligence protection order applications will be heard in closed court to preserve the confidentiality of the intelligence. Whilst this will preclude an individual subject to a serious crime prevention order from attending court, the Bill provides for the appointment of special counsel to represent the interests of the individual in proceedings related to the protection of criminal intelligence.

Recognition of corresponding interstate orders

The Bill provides for the application and enforcement of corresponding orders made in other jurisdictions under similar regimes. This prevents a person to whom a similar interstate order applies from moving to Victoria and avoiding restrictions that they would otherwise be subject to.

Review of the serious crime prevention order scheme

In addition to oversight provided by judicial discretion, the Bill contains further oversight mechanisms to ensure that the serious crime prevention order scheme operates as intended, is proportionate and effective, and any unintended consequences are identified. Accordingly, the Bill provides that the Attorney-General must cause a statutory review to be undertaken 3 years following the commencement of the scheme.

Prohibition on the public display of insignia of certain organisations

Members of some criminal groups, including OMCs, wear and display 'colours', such as patches, logos or other insignia, to represent their affiliation with the group. Victoria Police has indicated that such public displays are used to intimidate, stand over and influence others in the community by creating fear and an implied threat of violence, and also to attract and recruit new members through visual presence and status.

The Bill creates a criminal offence banning the public display of insignia of certain organisations to be prescribed in regulations. The offence is complemented by a range of enforcement powers. The purpose of this new scheme is to prevent or disrupt serious criminal activity in Victoria which is created or facilitated by the display of insignia. The offence will bring Victoria in line with other Australian jurisdictions and have a positive outcome for community order and safety.

The offence prohibits anyone over 18 from displaying a mark in a public place or in public view if the mark is insignia of an organisation that has been prescribed and the person knows or ought reasonably to know, that the mark is an insignia of that organisation. The knowledge element provides a safeguard against inadvertent displays by persons who were unaware or who couldn't reasonably have known that the mark is an insignia of an organisation.

It is intended that the offence be capable of capturing a broad range of ways in which insignia might be displayed. For example, the offence may apply to the public display of insignia on clothing, jewellery, and other accessories as well as signs, flags and paintings on vehicles or buildings. Whilst the physical display of a phone displaying an insignia published on the internet would be capable of being captured by the offence, the act of publishing the insignia on the internet is not prohibited by the offence. The offence also does not apply where the public display of the insignia occurs by means of tattooing or other like process. This is consistent with human rights considerations under the *Charter of Human Rights and Responsibilities Act 2006* and the prohibition on the display of Nazi symbols in Victoria.

Organisations in relation to which the offence will apply

The offence will only apply in relation to organisations prescribed in regulations. The Bill provides clear criteria and processes for when an organisation may be prescribed to ensure the scheme has a confined impact directly related to its purpose. Specifically, an organisation may only be prescribed upon recommendation by

the Attorney-General where the Attorney-General has first consulted with the Chief Commissioner of Police and is satisfied on reasonable grounds that the application of the prohibition on publicly displaying an insignia to the organisation is likely to substantially assist in disrupting or preventing serious criminal activity, and is reasonably necessary to prevent or disrupt serious criminal activity. In considering that threshold, the Attorney-General may have regard to whether any person has been involved in serious criminal activity while a member or prospective member of the organisation.

Meaning of insignia

A mark – meaning an image or symbol, including a logo, or a piece of text, including a name, abbreviation or acronym – is an insignia of an organisation where it denotes that organisation or indicates membership of, or an association with, an organisation. Further, a mark that consists of a “1%” or “1%er” symbol will be an insignia of an organisation where it denotes or indicates membership of, or an association with, the organisation and that organisation is a motorcycle club. This reflects the use of these “1%er” symbols by those motorcycle clubs who engage in criminal activities and pride themselves on being the 1% who operate outside of the law. These changes will not affect the vast majority of motorcyclists who are law-abiding.

This means that the insignia of prescribed organisations need not be set out in the regulations; only the name of the organisation. This will provide flexibility and adaptability if organisations alter their insignia to circumvent the prohibition.

Nevertheless, there may be occasions where the scope of insignia prohibited by the scheme may be confined to specific insignia while still achieving its purpose of preventing and disrupting serious criminal activity. In such instances, the regulations may prescribe specific marks in respect of an organisation, the scheme would only apply in relation to prescribed marks as well as the “1%” and “1%er” that meet the definition of insignia.

Exceptions

The offence will be subject to a range of exceptions, recognising that there may be legitimate displays of insignia of prescribed organisations that this Bill does not seek to limit. The exceptions apply where a display occurs reasonably and in good faith:

- for a genuine academic or educational purpose
- in the performance, exhibition or distribution of a work of art
- in making or publishing a fair and accurate report of any event or matter
- by a member or officer of law enforcement integrity or intelligence agencies in the performance of the member or officer’s duties
- for the purposes of the administration of justice
- in opposition to the criminal activity of the organisation of which the mark is an insignia, or
- only for purposes not in connection with the prescribed organisation to which the mark is an insignia.

The requirement that the exceptions only apply where a display occurs reasonably and in good faith is intended to ensure organisations and their members and associates do not seek to utilise these exceptions merely as a means to escape liability for the continued public display of insignia. For example, it is not intended that a prescribed organisation could commission an artist to paint its club logo or a variation of that logo on the side of its club house in a way that is clearly visible from public places and rely on the exception for exhibiting a work of art.

Enforcement powers

The offence prohibiting the public display of insignia of prescribed organisations is intended to operate as a strong deterrent to such conduct. However, Victoria Police has made it clear that there will be individuals who may continue to flaunt the law by displaying insignia. In addition, there may be occasions where the general enforcement, investigation or prosecution of the offence requires supporting powers. Consequently, the Bill includes tailored enforcement powers.

First, police officers will be empowered to direct a person to cease display of an insignia, whether on public or private property, within a reasonable time. A police officer may give a direction to the person responsible for the display or may leave a direction in relation to a property, including a motor vehicle from which the public display is occurring. A person who, without reasonable excuse, does not comply with a direction to remove is liable to a penalty of 10 penalty units for an individual, which currently equates to \$1,976, or 50 penalty units for a body corporate, which currently equates to \$9,880.

Alternatively, police will be able to seize without warrant property bearing insignia of a prescribed organisation where a police officer reasonably believes that a person is committing or has committed the

offence of publicly displaying insignia. This seizure power is available where the thing to be seized is located in a public place, the public display is still occurring and the police officer has asked and informed the person carrying or attending the item of certain things. Police may use reasonable force to seize property in accordance with this power if it is necessary to effect seizure.

In circumstances where the power to seize without warrant does not apply, the Bill also provides for the search and seizure warrant power under section 465 of the *Crimes Act 1958* to apply in respect of the offence of publicly displaying insignia of a prescribed organisation. This ensures, for example, that police can enter private property and seize insignia in public view, or where police are otherwise unable to effect seizure while the offence is occurring. Police must apply to the Magistrates' Court for the warrant, ensuring adequate oversight whilst enabling practical enforcement of the offence. This is in line with powers introduced to enforce the prohibition on nazi insignia in the *Summary Offences Amendment (Nazi Symbol Prohibition) Act 2022*.

Lastly, courts will also have the discretion to order the forfeiture of a seized item where the person from whom it was seized is found guilty or pleads guilty to the public display of insignia offence. For motor vehicles seized, forfeiture provisions in the *Confiscation Act 1997* apply, including to address circumstances where there are multiple interests in a seized vehicle.

Offence for members of declared organisations to enter Victorian Government worksites

On 15 July 2024, the Premier announced a response by the Victorian Government to allegations of organised criminal involvement in the Victorian construction sector following allegations in the media of criminal activity and allegations of criminal associations involving the Construction, Forestry and Maritime Employees Union.

To respond to those allegations, and to assure the Victorian community that government funded construction projects operate with integrity, the Bill will introduce a new offence to prevent members of declared organisations from entering prescribed Victorian Government worksites.

The Bill provides that it is an indictable offence for an adult who is a member of an organisation prescribed under regulations to enter an area that is, or is located at a Victorian Government worksite, to which public access is restricted, where development is taking place. The offence is punishable by up to 3 years imprisonment and/or a fine of 360 penalty units, which currently equates to \$71,132.

Definition of Victorian Government worksite

The Bill defines a Victorian Government worksite as an area that is prescribed in regulations made by the Governor in Council on the recommendation of the Attorney-General.

To ensure that the offence is targeted at publicly funded infrastructure projects where there is a risk of organised criminal involvement, the Attorney-General may only recommend a worksite is prescribed where it meets certain criteria. The worksite must be located at a project area, or an area the Attorney-General is reasonably satisfied is a location where public construction is occurring. Project area is defined to include: a project area under the *Major Transport Projects Facilitation Act 2009*; the *Suburban Rail Loop Act 2021*, or the *Development Victoria Act 2003*, or a nominated project under the *Project Development and Construction Management Act 1994*. Public construction is defined to include maintenance, rehabilitation, alteration, extension or demolition of any improvements on land by, or on behalf of a Department or public body.

The Attorney-General must also be reasonably satisfied that prescribing the area is likely to substantially assist in, and is reasonably necessary to, prevent or disrupt criminal conduct in relation to public construction. This ensures that the offence is applied in a way that is proportionate to and justified by the risk of organised crime involvement in the construction industry.

Prescribed organisations

The offence will only apply to members of organisations that are prescribed in regulations by the Governor in Council on the recommendation of the Attorney-General. The Attorney-General may only recommend that an organisation be prescribed if the Attorney-General has consulted with the Chief Commissioner of Police, and the Attorney-General is satisfied on reasonable grounds that applying the offence to that organisation is likely to substantially assist in disrupting or preventing criminal activity in relation to public construction, and is reasonably necessary to prevent or disrupt that activity.

Conclusion

The Bill makes a range of important amendments that aim to prevent, disrupt and counteract serious and organised crime in Victoria and keep our community safe. The Government has worked hard to ensure the reforms are both operationally workable and effective for police and subject to appropriate protections and

oversight. To this end, the Bill includes a requirement that the new provisions be reviewed 3 years after they come into operation to ensure that is the case and identify any unintended issues early.

I commend the Bill to the house.

James NEWBURY (Brighton) (10:14): I move:

That debate be adjourned.

Motion agreed to and debate adjourned.

Ordered that debate be adjourned for two weeks. Debate adjourned until Thursday 12 September.

Health Legislation Amendment (Regulatory Reform) Bill 2024

Second reading

Debate resumed on motion of Mary-Anne Thomas:

That this bill be now read a second time.

Emma KEALY (Lowan) (10:15): I rise today to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. This is quite an extensive piece of legislation we have before us today. There are a number of changes. A lot of them are related to the Victorian Assisted Reproductive Treatment Authority (VARTA) and moving that function into the department. Of course that is something where I am sure many people will share their personal stories of assisted reproductive treatment and the challenges they have gone through. We know how much of a toll that takes on families, on individuals and particularly on women, but also it can cost an enormous amount of money. There are levels of sensitivity around that, particularly in terms of access to information, making sure we have appropriate counselling and support services for the donors but also for the people who are going through those treatments, and potentially we need to do more at the other end of that when it is unsuccessful.

We also have multiple other changes within this legislation, which deal with, I think it is, six or seven other acts. Some of those are small changes; there are others that I think uncover more serious issues. I will spend some of my time during the debate on SafeScript, because there are some small amendments within this legislation that deal with some very, very serious issues around SafeScript and the failure of the original legislation as it was drafted to result in any medical professionals being penalised for inappropriate prescribing of addictive mostly pain medication. There was a very high profile case, which has been highlighted, of a young boy in Victoria that the coroner investigated earlier this year. I would like to spend some time on that because of my connection to SafeScript and my connection to John and Marg Millington, who were the key campaigners. It is really seen, and I think this is acknowledged on both sides of the chamber, that without the strong advocacy of John and Marg Millington we would not have SafeScript in Victoria. We need to ensure that a good, positive program, something that should be saving lives, is actually appropriately managed when it is rolled out and put in place and is delivering what was promised.

There are other smaller amendments, which I will touch on later on in my contribution, but the bulk of the feedback that we have obtained in the Liberals and Nationals around this piece of legislation has been focused on assisted reproductive treatment. As I mentioned in my opening remarks, this is something that is very, very sensitive. It is an area of expertise that I think is perhaps sometimes underestimated. When we look at anything within the health sector, we have a genuine level of respect for people who work in those fields, particularly when it comes to research around what is perhaps the most incredible thing to actually see in a laboratory, which is the creation of an embryo within a laboratory environment.

I had the good fortune to visit the Monash IVF centre before the last election, where we made a comprehensive announcement around opening up access to reproductive treatment to more Victorians,

particularly Victorian women. For me, I was just amazed. There is nobody, whether you are interested in science or not, who could see that process being undertaken under a microscope and not feel a little tingle of how exciting it is from a scientific perspective but also that they are creating life. We often talk about doctors thinking that they are gods, but when you have got that creation of life, which is in the control of scientists, it is just absolutely phenomenal. Scientists in this state have delivered joy and happiness to so many families who have been unable to conceive through traditional practices. It was great to see that happening. I get very excited about this, because I am a scientist, a biomedical scientist.

I was one of only 28 people who graduated with a bachelor of biomedical science after 120 of us started. I was the only one of those 28 who ended up in pathology, working in diagnostic pathology. But all of the others, to their credit, went into research, and they have gone into a broad range of different research areas. Some of them are capturing the methane emissions from cows and measuring that in terms of the gases going into the environment – it would not be my first choice of what I would utilise my science degree for –

Roma Britnell interjected.

Emma KEALY: The member for South-West Coast is very interested in that. However, can I suggest, from speaking to my friend, that perhaps the capturing of the gases is not an altogether joyful experience. I have got another friend who actually went into research into how we can improve and advance the success rate when it comes to assisted reproductive treatment. These scientists are not paid a lot of money. They do an incredible amount of work, and I think at the end of the day they are often not recognised for the research that they put into that end outcome of giving the opportunity to have a child to people who otherwise may not have had that opportunity.

We also have, I guess, a very interesting situation. I do not know – I hope others can share their journey or their stories around this, but it is difficult. For women's health reasons there are a lot of things that happen in your life when you cannot reproduce as you are taught in school. For women in particular the main focus on your reproductive system is about how not to get pregnant. When women then make the decision to have a child, for some that does not happen as it is supposed to. We are supposed to simply have sex and all of a sudden we wake up the next morning and we are pregnant, and that is it; that is your journey towards having a baby. That simply is not the case for so many Victorian women and women around the world. It is not the case.

I have got a very, very good friend who went through early menopause. This is something that is not widely known, that women can go through menopause at a very early age. Emily went through menopause in her early 20s. When she partnered and married they wanted to have children. I caught up with Emily only a couple of weeks ago, and she is still carrying a burden of what the process is to access donor eggs in Victoria. She is somebody who has already gone through a very difficult situation of feeling that they are unusual because they have gone through menopause when they were quite young, as opposed to when they are getting into their 50s or 60s.

It was really surprising to me to hear how donors are matched to their potential recipients. Emily likened it to being on a dating app, because you have to supply a photo and you have to supply information about your family, your situation and where you live. You have to basically put up a profile of 'Why should I carry your child?' as you would for a dating profile. That is an incredibly humiliating experience if you do not think that you are going to fit the mould or if you get constantly rejected by donors – that you are not seen as an appropriate mother. So not only have you gone through this early period of menopause, where you no longer have any eggs and you question how you fit into the world in that regard and perhaps feel like a failure, but then you go through this process of trying to access donor eggs in Victoria and you are again seen as not good enough to be a mother – or that is how that was perceived. I think that we should not be putting women into the position where they feel like failures or exposed to a level of judgement simply because their bodies have told them that at this point in time they are not going to put any more eggs out there for fertilisation and that is it, that is their journey. I think that is an incredibly humiliating experience.

Emily ended up accessing donor eggs from South Africa. It was easier for her to travel to another country to access donor eggs than it was to access eggs here in Victoria, and I do not think there has been a big leap in terms of how women can access donor eggs. We often talk about sperm donors, but we do not often talk about egg donors in these scenarios. I think there is still a lot of work that can be done in that area. But the reason I share this story is not just because the journey of reproduction can be a different one for many different women but also because it is mentally a very big burden to carry. It is a significant burden to carry.

You also have during this period fluctuating hormone levels or the addition of hormones to your body, which can of course create changes in your mental health and mental state but also in your physical state. It can be quite debilitating to feel like you not only cannot naturally conceive but even, when you are having assisted reproductive treatment, still cannot conceive, plus you are putting on a lot of weight, plus you are feeling moody or depressed or not attractive to your partner or like you are not able to contribute. That is one of the reasons that I think it is very, very important that at all levels of this process there should be wide access to counselling. I understand that through this legislative change there will still be mandatory counselling for donors and donor recipients, but the legislation takes away mandatory counselling for those accessing the register at a later date. That is not related to the story I just went through of my friend Emily or other women who have gone through assisted reproductive treatment, but we must look at this as a whole process where this is a very, very emotionally sensitive situation.

It is so important that when a child grows up and they are told, at whatever point during their life, that they were conceived through donor eggs or donor sperm they are given a wholesome and very much wraparound mental health support system. Under this legislation, the mandatory counselling element, which is currently provided by assisted reproductive treatment organisations, will be removed. The feedback from the sector is that this is a bad step – this is a step backwards. Instead, there will be a fact sheet given to those who are accessing information from the register about their donor parent. But it has also been highlighted in the feedback that it is so important that for those people – at that very, very important time in their lives, in a unique situation where it will be hard to find their tribe of other people who are in a similar situation – counselling should be mandatory, with professionals who have been through this before, who have expertise in walking through that process around an individual's sense of identity when they have believed that person A and B are Mum and Dad, only to find out down the track that actually 'You're not really my father.' There is that nature versus nurture, and perhaps looking at some of the background of the donor and working through that association and helping somebody to understand where they do fit in the world. It is very, very complex. I have already spoken about the complexity of the science behind this, but there is complexity in terms of the mental health and the counselling and the psychology around this as well, and that cannot be understated. As I said, that is not just for the donors and it is not just for the recipients, it is also for the children that are resultant from successful reproductive treatment. That is the feedback we have heard from the sector, and I think it is one element that is a major part of this legislation that falls short. I think it is something that should be considered to be revised. That is because we understand that mental health support is so important, because if you get it wrong, at the wrong time, it can be catastrophic in its outcome.

Other feedback that we have had I think has been in part worked through or resolved, or at least it has been flagged with the government and perhaps can be resolved through contributions made in the chamber to clarify what some of those positions will be. But also there is an opportunity perhaps to make some further amendments in the future if that opportunity arises. The bill lists in part 2, clause 4, 'Definitions', that a designated officer is now a 'regulated person'. Given that the current ART act, the Assisted Reproductive Treatment Act 2008, does not define a role for a designated officer, other than the ART provider having to name one, it is unclear what that really means, and that is causing some concern in the sector about what that change might look like. It is also unclear from the bill and some of your changes what the intention is in regard to VARTA's success rate and what adverse event data monitoring functions are.

Thirdly, as a minor concern, it is disappointing that the education function of VARTA is being removed without a clear plan in place to ensure the continuity of educating Victorians about their fertility. So much high school education relates to preventing unwanted pregnancy and STIs, and that is very, very important. But it is very, very important also that young people in particular have an independent and reliable source of information to help them understand how to plan their fertility. Over the years VARTA have developed an incredible range of patient resources. To lose that simply because we are bringing one part of VARTA into the department – if we are not taking it all in or we are not replacing that research element and if we are not replacing that educational element, then it would create a gap in the support services available in the state of Victoria, which would be I think more than just a shame. I actually think that it would be very, very concerning if that happened and it would be deleterious for all Victorians, but particularly for young Victorian women.

The other thing that is a little bit odd with the timing of this legislative change coming through is that there is a comprehensive review being done federally at the moment in relation to artificial reproductive treatment and the IVF sector. That is something that is being undertaken by Greg Hunt. This is something that is happening, as I said, on a national level. We know that other states are also working through individual reviews at this time, but if there is a level of expectation that there will be standardisation between states – which would help us to ensure that women who live near a border could access reproductive treatment on either side of the border and be treated in a similar way and that we had consistency in approach in relation to accessing register information and accessing donors – I think that is important. It would be a step forward if we could have federal agreement and consistency in relation to artificial reproductive treatment. Again, that is something that has been flagged by the sector, and I think it should be taken into account in regard to the timing of this legislation coming through the Parliament of Victoria.

I just want to touch briefly, before I get totally enthralled in reproductive treatment, on SafeScript, because this is such an important issue for me personally but also for all Victorians. I just will go back to when SafeScript was first rolled out. In my opening remarks I mentioned the tireless work of John and Marg Millington of Nhill, who have done an incredible job in sharing their personal experiences of their son Simon, who became addicted to painkillers after a terrible car accident. As part of his treatment he was in so much pain – it was a really bad ute accident – that his mum Marg was begging the doctors, ‘Give him more pain medication. Give him more pain medication.’ But it was not the accident that took his life, it was actually his addiction to pain medication, some 16 years after the accident occurred. John and Marg have on so many occasions shared their story with the public through the media and they have met with politicians on all sides over at least four terms of Parliament. They have worked so, so hard to ensure that we have a better system, to make sure that people cannot doctor shop and to make sure that when they become addicted to medication we have some safeguards in there to make sure that doctors can see what the prescription history is for an individual and also that when pharmacists are dispensing information it will come up with a red flag if somebody has gone through the system too often.

The announcement of this by Labor sounded like it was delivering on what should have been committed to, and it was a bipartisan commitment at the 2014 election, but sadly there simply were not supports put in place for doctors to know what to do if somebody came to them with pain medication addiction, where they should be referred to and alternate pathways for pain management. There were no supports and no pathways given to pharmacists when a red flag presented to them as to what to do in that scenario or where to refer that patient, who was coming in for another prescription to be filled. But the biggest issue that we have about SafeScript is not a single medical professional has been penalised under the legislation, which was supposed to safeguard people and put medical professionals in a position where they had to ensure they were checking SafeScript. While it is very quietly put through the legislation before us today, there is now finally a move, some five years after SafeScript was actually rolled out, to close that gap.

This is on the back of a horrific case that was highlighted earlier this year – it was actually the subject of a coroner’s report – where a young teen, a 16-year-old, died after seeing 70 doctors within a 48-hour period and attaining 64 prescriptions from a total of 31 doctors. That should not happen. That young boy died of a drug overdose. SafeScript failed in that instance, when we were promised that SafeScript would stop that from happening. You promised John and Marg Millington that what happened to their son Simon would not happen again because we have got SafeScript in place, and then we have got these issues being flagged for five long years.

Even in the articles that come through and in the most recent one that I saw earlier this year in March, the department actually admitted that they knew what the legislative drafting error was. It was disclosed to the coroner that there were drafting issues in the legislation. Why has it taken so long for the government to act? When you put out a media release, when you throw money at something and when you say you are going to fix a problem, that is great. So often we hear from the Labor government ‘We’re doing this’, but when you follow through they are not getting the results that they are promising. It comes down to the deliverables, and too many young people are still losing their lives. Year on year we are still seeing the number of Victorians who are dying due to prescription medications increasing; it is not decreasing. There is simply very, very limited access to rehabilitation treatment in the state of Victoria. It is well below the rates of availability per capita in New South Wales. We are not seeing any expansion of rehabilitation services. The most recently announced one was many, many years ago now. Up in Mildura we finally got a site announced a couple of weeks ago, but that should have been built a long time ago. The residents of Mildura and that north-west part of the state should have had access to better drug and alcohol treatment by this point in time.

This is something that is so important to me: that this government listens. I look forward to the opportunity to be the minister for mental health and to make sure that people who are in the midst of challenges with drug and alcohol addiction, when they want to access treatment, can get treatment. Because nobody who is suffering from drug or alcohol addiction should ever, ever be told, ‘We can’t help you for another six months. We can’t help you for another 12 months.’ I have spoken to people who are in the midst of addiction and who in that position say, ‘Emma, all you can do is basically give yourself the white-knuckle treatment,’ which is just to clench your fists and hope to God that you can make it another day until you might get the phone call that you can get into rehab and start your treatment process. But all too often the temptation is too much. People are self-medicating for childhood trauma, for issues that have happened in their life. They are not able to access mental health support, so they self-medicate. It is catastrophic that we have not seen any significant shift in access to treatment rehabilitation in my time in Parliament and for a long time before that.

We also have a terrible situation when it comes to waitlists. The waitlists are growing and growing and growing. There are more people than there have ever been on waitlists for rehabilitation in this state. So while, yes, I welcome SafeScript – it is fabulous to have SafeScript – but please, this is only the start of some of the amendments that need to take place. Yes, we need to have legislation so that when we say we are going to penalise a doctor or a pharmacist for ignoring the SafeScript system they absolutely should be penalised. But it is more than that. We need better supports and controls for people who clearly have an addiction to pain medication. We need to make sure that we are making mental health support available to all Victorians when they need it. This is not what we have seen in this year’s budget, which is catastrophic cuts – a pause, basically, or a cancellation of the mental health reforms that were promised before the 2018 election.

We have seen massive budget cuts in the mental health sector. They are so concerned that all of the promises that were made about rebuilding Victoria’s mental health system have been completely pushed aside and they are no longer the focus. They are desperately concerned, because they put their heart and soul into the public arena and now have been told by Labor they are not good enough and it is not going to invest in that anymore. We see the mental health locals being scrapped – even though the federal government is still providing money to the state government they have been scrapped. I have the member for South-West Coast sitting next to me. In our part of the state, in the west and the

south-west corner of the state, we were promised mental health locals. They have now been canned for at least another three years, which means in my communities there is no mental health support. There is literally nowhere for people to go.

Roma Britnell interjected.

Emma KEALY: The need is absolutely growing, member for South-West Coast. If we could get the Lookout in Warrnambool, it would close a massive gap that we have got in rehabilitation services in the entirety of the south-west of the state. Unfortunately this is what we are seeing from the government; we are seeing so many cuts.

While this bill might be heralded as a great step forward for women and for reproductive treatment in Victoria and as a big step forward for SafeScript and for supporting people with alcohol and other drug issues or mental health issues, we are simply not seeing that from Labor. This budget cut so much out of issues and programs that are important for Victorian women. In the early childhood sector supports and regulation were cut by nearly \$80 million, or 11 per cent; wellbeing supports for schoolkids were cut by \$34 million, 8.4 per cent; child protection was cut by \$141 million, or 6.2 per cent; family violence service delivery was cut by \$29 million, or 3.7 per cent; women's policy was cut by \$300,000 following a \$3 million cut in 2023–24; and worst of all, public IVF services were cut by \$42 million. This is of course after that horrific period during COVID where for whatever reason IVF was seen as being dangerous to people's health and was suspended. I got stopped in front of my office by someone in tears because they were due for a cycle. It was an enormous amount of money that was down the tube, but also it was their hope of having a family. That cycle could not go ahead because IVF treatment was suspended during COVID lockdowns.

There are so many women that are doing it incredibly tough at the moment. Women were the ones who held their families together during the COVID lockdowns. They were the ones that were homeschooling their kids. They were supporting the mental health of others, and so often they were turning to the bottle to support themselves through that. We are now in the midst of a cost-of-living crisis. Again it is the women who are working hard to make sure they can put some form of a meal on the table for their family. Often they are cooking for the family and just scurrying off and having a sandwich in the corner, in the pantry, so their kids do not see that they are not eating the same meal. People are accessing Foodbank at higher rates than they ever have before. This cost-of-living crisis is hurting Victorian women.

While I can see what the government are attempting to do with this legislation and other themes that we hear from the government about supporting women, it is nothing more than words. From the action and on the ground, what we see is Victorian women are paying the price for Labor's decisions. We need to see much more being done when it comes to addressing the cost-of-living crisis and when it comes to addressing the health crisis across this state, where it is becoming harder and harder to access the health services that people need and deserve close to home. Every day we see another issue, whether it is ambulance ramping, people not being able to turn up or hospitals struggling to get staff. We are in dire straits when it comes to health care in this state.

These are issues that matter to Victorian women. We are not seeing them being addressed by the Allan Labor government. It is something that every single person in this chamber should be standing up and fighting for. But I will say to any Victorian woman listening that we are listening – the Nationals are listening and the Liberal Party are listening. You will be heard. We will always fight for you and make sure you are not being forgotten, as the Labor government have forgotten you.

Alison MARCHANT (Bellarine) (10:45): It is a pleasure to rise on the Health Legislation Amendment (Regulatory Reform) Bill 2024. They say when you have your health you have everything, and I think in this place it is important that we continue to reform and improve our legislation in the health space to ensure that all Victorians continue to have world-class health care and to also have safeguards around that. We are committed in this space to the health and wellbeing of

every Victorian. We not only have certainly taken significant steps over time to ensure that our health regulations are strong and modern but in this place will continue to reform to make sure that we keep pace and we have modern legislation, particularly when we have such technology advancements and especially in that space and practice of assisted reproductive treatment, which this bill does speak a lot to. These reforms, which were announced last year, are all about keeping Victorians safe and ensuring we have that modern health regulator in this state who looks out for them.

I want to talk a little bit about what this bill means in terms of the finer details but then also share a little bit of a personal story. The vision is pretty clear in that we want to have a state where everyone has health care and is free from avoidable disease and injuries, and it really just allows every individual to live a healthy lifestyle. This bill, which builds on our reforms, is that crucial step. It is strengthening our health regulations, and we aim to create a safer and more consistent healthcare system for all. This is not just about legal adjustments that we do in this place but about those safeguards which I have referred to. It does respond to that quickly changing landscape that is our healthcare system, and it is also there to meet community expectations. Our technology and medical advancements and practices have evolved so much, and so too our regulations, that we want to assure that regardless of your age or circumstances you can trust that healthcare system to be robust, fair and up to date.

I probably did not appreciate, being a newish member to this place, that really diverse range of responsibilities that the Department of Health have, including in relation to child safety, communicable diseases, medicines, poisons, legionella risk management, pest control – which I did not appreciate – radiation safety, food safety, private hospitals and day procedure centres, non-emergency patient transport, first-aid service providers, tobacco and e-cigarettes and safe drinking water. It is quite a list. Established earlier this year, the health regulator now has most of the department's regulatory function, and it consolidates and brings all of it in-house and enables that department to assume more consistency and a really consistent approach. It just centralises the expertise within the department, and that in turn allows us to respond more rapidly and allocate the appropriate resources.

This is about work to deliver safer, fairer and more accessible services for those who are seeking and maybe receiving assisted reproductive treatment, for donor-conceived people and their future and for donors and surrogates. It is an honour to speak in this place on various issues, but sometimes the bills and acts that come to this place are a little bit more personal. We hear in this place a lot of people bringing their own personal experiences to share in the debate of bills, and it is an honour to contribute to this bill, because I know that these types of bills do make a real difference to people's everyday lives. I want to acknowledge those who share their deeply personal experiences of assisted reproductive treatment such as IVF, conception, pregnancy, childbirth and child loss, which does include miscarriages. Sharing your lived experience shapes the language in our community, shapes our discourse, shapes our policymaking and shapes the kind of community we want to be. Ultimately, I hope that that ends in a more respectful and empathetic community.

It is hard to share those personal experiences on topics such as this, because even with how far we have come in speaking about this there is still a lot of stigma and taboo. I have shared in this place before that my husband and I lost a baby at 22 weeks – too small and too little to stay with us. She was born sleeping 16 years ago now, and there is not a day when I do not think about what she would look like and what she would be like if she were still with us. I openly share this story, and I know that by sharing my story that can assist others. I do have a lot of people who stop me in the electorate and say thank you for sharing my story. They will quietly say 'I have a very similar story' and that they appreciate that being shared.

It did take a little bit of time to become pregnant with our second child. Although we did not need to use assisted treatment, my heart goes out to families who do. I can appreciate that it is a journey and one that I have heard the Minister for Government Services state is not for the faint-hearted. I think it is probably worth noting that by the time someone does reach out or start accessing that assisted reproductive treatment they have probably gone through a very significant journey before getting to that point. It is a privilege to be in this place and have a chance to amend laws that will make it fairer

and make it easier for those who want to grow a family. It is a privilege, as I have said, to share my personal story to help destigmatise that topic. Although no amount of legislation can entirely remove all those challenges from IVF, we must try and make that process fairer. We must make it accessible, available and as compassionate as possible.

For those that do use assisted reproductive treatment these reforms are going to make a real difference. We are going to transfer regulation of assisted reproductive treatment to the health regulator, and that will enhance our compliance with and simplify access to the donor conception register. We recognise the importance of these registers for donor-conceived people and their families, and we are committed to making this a process that is as supportive as possible and as accessible as possible. Those who are being born through assisted reproductive treatments and the rights of donors and their recipients really remain at the centre of our efforts. We will continue to listen to the voices of those with lived experience and we will use that to shape our insights and our policies.

The Victorian government has already conducted and delivered a significant amount of reforms after the recommendations from the Gorton review, and that was really to promote access and remove barriers to assisted reproductive treatment. There are also a few other key milestones that we have delivered as a government. We have delivered a Victorian public fertility service, a nation-leading public egg and sperm bank. We have invested \$120 million to support thousands of Victorians looking to start and grow their families. We have had an additional \$2 million in this last budget to fund the public egg and sperm bank as well. We will continue to work in this space. We know there is always more to do, and that is what part of this bill is about.

This bill also transfers that responsibility to the new health regulator. It introduces a consistent set of compliance and enforcement tools in line with the Gorton review's recommendations. This reform is about delivering modern and improved health regulatory outcomes for consumers and for the state as the Allan Labor government strengthens our regulations in Victoria. It is there to protect, and it is there to provide greater consistency and regulation across the health system for Victorians. We have a world-class health system. We have a bill here in front of us today that not only strengthens it but is really putting people at the centre of it. It does mean a safer and stronger health system for all. I thank the minister for all her work in bringing this bill to the house. I commend the bill to the house.

Tim McCURDY (Ovens Valley) (10:55): I am delighted to rise and make a contribution on the Health Legislation Amendment (Regulatory Reform) Bill 2024. We have heard from other speakers that this bill will improve health regulation, which is a great step forward; make changes to assisted reproductive treatment, ART; abolish the Victorian Assisted Reproductive Treatment Authority, VARTA; and make many other changes to the legislation. Any changes we can make to assist in the health sector are very important, because the Victorian health system is in crisis, and we see it all over Victoria – not just in metropolitan Melbourne but in our regions as well. It is a real concern, and that begins in the ambulance sector: from making the call, getting picked up, getting to hospital and getting the care that you need. We see paramedics are being overworked. I have been talking to MICA paramedics in my electorate, and they have got real concerns about the burnout that is going on there.

That is the very beginning of the health system, when you are dealing with paramedics and MICA paramedics, and of course when you get into the hospitals the nurses, again, are feeling well overworked. And it really is the Victorian patients who are paying the price. There is not a week that goes by when constituents do not talk to me about ambulance ramping, beds not being in use and concerns for their relatives who are in health care. So any step forward is a good start, but we certainly need to not just stop here but go further with other changes, assistance and investment in our health system. It is not acceptable in any community. The pillars of any community are clean water, a roof over one's head, a satisfactory health system and education. I can comfortably say we have got clean drinking water, but after that things fall away very quickly; we have got some work to do. As I say, there is a housing crisis, a health crisis in every community and of course the education gap, and the students are paying the price.

The bill makes amendments to the regulatory frameworks, including cooling towers under the Public Health and Wellbeing Act 2008; drinking water under the Safe Drinking Water Act 2003 – I will talk about that in a moment; first-aid services under the Non-Emergency Patient Transport and First Aid Services Act 2003; non-emergency patient transport under the Non-Emergency Patient Transport and First Aid Services Act 2003; pest control operators under the Public Health and Wellbeing Act 2008; and radiation sources under the Radiation Act 2005. These will be regulated by the health regulator with the aim of strengthening compliance and enforcement powers with a wider range of mid-range remedies and penalties in graduated steps for appropriate intervention. The bill gives the health regulator powers to issue improvement or prohibition notices, accept enforceable undertakings, issue infringement notices and require the production of documents.

If I look at the health sector in the Ovens Valley region and our communities, as the member for Lowan spoke about, there is a need for mental health support. We all know a greater investment needs to be made. I accept that the government has made investment in mental health, but it is not enough. We do need more, and in our communities, not just our bigger communities. So in an electorate like mine Wangaratta, Yarrawonga, Cobram, Brighton and Myrtleford are the major centres in the Ovens Valley, but in the smaller communities like Eurobin, Katamatite and Tungamah, when people cannot get to the bigger communities or cannot get the services they need in the bigger communities, there is just nowhere for them to go. I really fear how that filters down through our smaller communities. It really is a concern.

In Cobram we have been trying to get dialysis chairs for I do not know how long now, and it is another concern we have got. People have to leave our region to go to Shepparton, Mooroopna and further and beyond to get dialysis three times a week or even more. We are finding that takes another person to drive, and it just ties up resources for that family. It can be the difference for a family in Cobram, for example, between having a relatively normal life if they can get access to the dialysis chair and having on four or five days a week the whole day taken up getting access to dialysis. Again, we are not talking about the millions and billions of dollars in investment which happens here in Melbourne. We are not after the world; we just want basic services so our communities do not have to travel or get a friend, an uncle, an aunt, a son or a daughter to take them to dialysis.

We know that Yarrawonga is the fastest growing town in regional Victoria. They take on a lot of work from across the river in Mulwala. I often say as a cross-border member that people do not understand the strain there can be on our services from non-constituents who live across the border, which is only a couple of kilometres away. And we know of the investment that Wangaratta needs at Northeast Health, because it was a base hospital and still effectively is. All the towns I have just mentioned – including Benalla, which is out of my electorate – and other towns and other communities like Goorambat need that support.

People love Bright. Everybody knows Bright and they love Bright. It is a fantastic community. When I first got Bright in my electorate in 2014, there had been a push to try to get an upgrade to the hospital in Bright. It was going to cost about \$22 million to \$23 million at the time. The local op shop had raised a million dollars over a couple of years to make sure they had enough money to kickstart the process, and we made that commitment in 2014. Obviously we did not get into government and have not since, but clearly Bright has not got that hospital upgrade. They have got the hospital they currently have, but it is under-resourced. We really need that investment with the amount of people that are moving to Bright and to that region – tree changers. I spoke only yesterday about how the price of houses has gone up. People in Melbourne are moving that way, but there is also the tourist trade. It is absolutely astonishing. Every weekend in Bright is busy. In fact if you do not go to the supermarket before Thursday morning, you really struggle after that until Sunday night because it is just so busy with tourists. They are all riding bikes – mountain bikes, road bikes – heading up to Mount Hotham and all those sorts of things. We have to keep investing in these small communities, because if we do not, the pressure on Bright then gets pushed onto Wangaratta. Wangaratta is already under pressure at Northeast Health with the amount of nurses and shifts required to keep that big health system going.

They do a fantastic job with the resources they have got, but the other towns, like Benalla and Cobram and Yarrawonga and those sorts of communities push into Wangaratta to make sure they can get the services they need. It is really important that this happens.

We know why this investment is light on. We know it is because of the Suburban Rail Loop. The investment that is going into the SRL is just unfathomable. We know, and I think many on the other side know, that if we just pause the SRL, billions of dollars are not going to get injected into a hole in the ground. Yes, one day it will be very good for Melbourne and Victoria, but is now the right time, when we have got a health crisis and a housing crisis and our roads and education are subpar? There are just so many other places where we could invest that money. Pausing the SRL would allow us to do investment in Melbourne, in regional Victoria and in everyone's electorate. If you divide the amount of money by the 88 seats in Victoria, the share that we would all get out of that would be just a massive investment we could all put into our communities. I know a lot of it would go into health and roads in my electorate, because they are the things that are most at risk and most in need of support from dollars invested. If you asked me where I would invest money in the Ovens Valley, it would be in health and roads. As I say, what is holding that investment up is the SRL and that massive commitment. If it goes ahead, and it seems to be that way, we are going to be in the doldrums with some dark times for many years to come, because this is not a commitment we can afford. Victoria cannot afford it. At the end of the day, it is what we are doing without because of it. It is important that it is stopped so that we can continue on and fulfil our health needs.

I will let somebody else have a go. I have gone through some of the regulations. Some of the speakers have spoken about them as well. As I say, any improvement is a good improvement.

Josh BULL (Sunbury) (11:05): I am pleased that it is Thursday. I am pleased to have the opportunity to be in the house and contribute to debate on the Health Legislation Amendment (Regulatory Reform) Bill 2024. When it comes to the health and wellbeing of all Victorians, we as a government are focused on supporting each and every individual and ensuring that we are investing right across our state.

I do want to take the opportunity before I get into some further detail of the bill just to acknowledge the very powerful and important contributions that have been made in the house thus far on this bill and certainly – not reflecting on the Chair, of course – yours yesterday, Acting Speaker Mercurio, when you spoke about the health and wellbeing of your daughter. I think it brings to light discussion of how we as a Parliament, as a government and as individuals within our own community must always be constantly striving to support those that are in health care, our families and local communities and making sure that we are listening and enabling people to speak about what are often incredibly tough, traumatic experiences in their daily lives.

I also heard the member for Bellarine and her powerful contribution just a short time ago. I want to acknowledge her loss and again make the point that these are powerful and important matters for individuals, for families, for members of Parliament and for communities. I want to make the point that as a Labor team, both in terms of investment and when it comes to this bill in terms of a regulatory sense, ensuring that we are getting the very best healthcare system that we can possibly have in this state is an incredibly important function of our government.

The 2024–25 state budget provided a massive investment in health within our state. We know that we did experience a one-in-100-year global pandemic. As I did and many members did throughout the journey at that time, we thank and acknowledge our entire health workforce but also see it in the context of what it is, and that is a system that was under immense pressure, a system that we have worked incredibly hard, both from a budgetary sense but also a regulatory sense, and closely with to support. This bill builds on that, and it also builds on the \$1.5 billion investment that was provided by the government a couple of months ago to provide for additional support and additional care for our amazing health workforce and the hospitals and health services right across our state.

On that, I do want to take the opportunity to acknowledge the local health services within my local community. The Premier and I had the opportunity to visit the Sunbury community hospital a couple of weeks ago. This was the day hospital, which will soon be the Sunbury community hospital thanks to a significant investment from this government in additional urgent care, additional oncology, improved dialysis. Making sure that we can provide the best health care locally when and where people need it is a commitment that we are very pleased to be working towards delivering, but I do want to take the opportunity to thank the entire team locally, because these people are incredible. They do phenomenal work, and we are very thankful and very grateful for everything they do. I also want to acknowledge Sunbury and Cobaw Community Health, who do an amazing job as well, and the team at the Goonawarra priority primary care centre (PPCC).

This bill, as I mentioned earlier, goes to regulatory reform. It goes to making sure that we are providing a better health service. Nine regulatory schemes across seven acts will be amended by this bill to improve compliance and enforcement powers. These in-scope regulatory schemes have significant gaps in terms of compliance and enforcement powers. What we are doing effectively with this piece of legislation and through those changes to the seven acts is making sure that things can be done in a more streamlined, more effective and better way – those acts being the Assisted Reproductive Treatment Act 2008, the Non-Emergency Patient Transport and First Aid Services Act 2003, the Safe Drinking Water Act 2003, the Public Health and Wellbeing Act 2008, the Drugs, Poisons and Controlled Substances Act 1981, the Health Services Act 1988 and the Radiation Act 2005.

I know some members have spoken about those provisions thus far, and depending on how we go for time throughout the journey of the day I expect they will be canvassed quite significantly. We are making sure that there are new powers to do things such as the issuing of improvement notices to require that a regulated entity take specific actions to render noncompliance with the regulatory requirement, the issuing of prohibition notices to prohibit a regulated entity from engaging in an activity that poses a risk of harm or health to safety, the issuing of information or documentation production notices to require the provision of information or documents to be supported in compliance monitoring and the issuing of infringement notices for prescribed offences to impose a fine for noncompliance and accept enforceable undertakings.

There are a lot of words in there, and the basis, the origin, of this piece of legislation is getting the very best service that we can get. Health is a really complex area of public policy. It is a multilevel, multiagency framework that goes to supporting our local communities. I mentioned Sunbury Community Health before, the PPCC, urgent care and places like the Royal Children's Hospital, which I visited just last week with my little one for a relatively minor but still very important procedure. It is a complex and dynamic area where every single Victorian should have the opportunity to both access and go through a system whereby you are given the very best chance. We should always remember in this country, because there are places throughout the world where this does not exist, that we are massively fortunate, incredibly fortunate, to have the system of Medicare – a system whereby when you are unwell, you are not forced, as in some places throughout the world, to make a decision between going broke and getting the health care that you need. Both as a state Parliament and at a national level we should always fight for and value that. We should always make sure that we are putting people's health first, and that is exactly what we are focused on. I know that the minister is focused on that, and the entire team as well.

Regulatory reform is an important part of that health network, that journey. For those within our local communities and all of us in here, there is no family anywhere in our state that is not touched by matters of health. We are all in this together, as has been often said. Regulatory reform, investment in health and supporting our doctors, our nurses and our ambos at each and every opportunity should be something that is at the forefront of what we do as core government business. That is what we are focused on. This is another piece of legislation that goes to efficiency, to transparency and to making sure that we are getting the very best health care that we can. That is exactly what we are focused on. I commend the bill to the house.

Roma BRITNELL (South-West Coast) (11:15): I rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. The very first paragraph of this bill talks how about it will modernise and streamline compliance and enforcement powers to support a graduated, proportionate and risk-based approach to regulation by the Secretary of the Department of Health to prevent or minimise harm to health or safety of Victorians. I follow on from the member for Sunbury, who said that we must do everything we possibly can to support our health community, our doctors, our nurses, our allied health staff – everybody in the health system that pulls together to help people in their most vulnerable time, when they are unwell.

Our regional hospitals are absolutely – no doubt – facing significant challenges. This is having a detrimental impact on the communities that they serve. I suspect the health department through the government's pushing is really squeezing the hospitals dry, and it is having a detrimental effect. In South-West Coast I have been made aware of numerous instances where highly skilled medical professionals are refusing to work in certain hospitals. This situation is not only unacceptable but also unsustainable, as it forces our residents to travel considerable distances to access specialist care.

Allow me to highlight a few cases that exemplify the gravity of this issue. We have an ophthalmologist residing in Portland who, rather than operating locally, is driving to South Australia and Hamilton to perform surgeries. A urologist based in Warrnambool, who served the Warrnambool community for eight years, now operates in Portland and Hamilton but not in the Warrnambool public system. An obstetrician has relocated from Warrnambool to New South Wales, citing an unwillingness to continue working in Victoria. A general surgeon in Portland unable to secure a contract left to work in New South Wales. An orthopaedic surgeon has recently resigned due to dissatisfaction, I am told. We have two anaesthetists in the region on stress leave. An oncologist physician has departed Victoria for New South Wales, where they report that while the system is also under strain, they at least receive the respect they deserve. There is an oncologist living in Warrnambool but not practising in the region. A general surgeon living in the region, who was operating in Portland for many years, no longer operates in Portland as his contract was left languishing for months on end.

Furthermore, I was recently made aware of an advertisement for an emergency doctor position offering a salary range of \$400,000 to \$600,000. This has understandably caused considerable discontent among our current emergency doctors, who are earning significantly less for the same role. Such discrepancies in remuneration are not only inequitable but also jeopardise our ability to retain specialists we desperately need. The South-West Coast region faces the tyranny of distance, making it all the more crucial that the specialists who choose to work in our region are treated with the respect and fairness they deserve. These doctors are not only highly skilled but also understand the unique challenges of our environment. They are experienced in managing their case loads and balancing overtime. These professionals are best placed to make decisions about their schedules in the context of the demands they face.

The impact of these issues is being felt acutely by our local communities, who are being forced to travel greater distances for essential specialist appointments, adding unnecessary stress and financial burdens, not to mention lengthy wait times. One example that demonstrates the effect on our community is that of a constituent who was referred to a urologist in Geelong, who was told that the next available appointment was in 55 months – yes, that is 4½ years. This is a taste of what the mergers will look like, with Geelong in charge of South-West Coast. They are clearly already under enormous pressure with major wait times. We simply cannot afford to lose any more medical professionals from our region. I call on the government to take immediate action to ensure that our healthcare professionals are adequately supported, fairly compensated and treated with the respect they deserve. We want to keep them in our region. We want to support them. The health and wellbeing of our community depends on it. Just last night one of the specialists said to me that he is concerned that people will not be able to travel: they cannot afford it, they have not got the support to be able to do it or they just simply cannot. My own father was diagnosed with liver cancer, brain cancer and lung cancer in July. He is obviously very poorly, but he is having immunotherapy treatment, which they

tell me could produce miraculous results. He is clearly too poorly to travel for a PET scan to Geelong, so instead he is having a CAT scan and an MRI in Warrnambool.

We have been promised a PET scanner for over two years by the government. I do not really care what it takes to get that promise delivered, but Warrnambool deserves a PET scanner. Perhaps the government can speak with other providers in the region so that we can get a PET scanner at another precinct, where it is still free to the community. These are options the government needs to explore. We have a hospital that should have been built to scope, like every other hospital. We spent 10 years designing the needs of South West Healthcare. But there is no position in that design for a PET scanner, so how was that a complete scope, when the government came out and said we need a PET scanner but has not put that in the design? We need a helipad. Why is that not in the design of the hospital? Why are we being told we have to cut biomed, pathology and all the things that were supposed to be in that design for the precinct of the South West Healthcare base hospital, yet it did not even have the PET scanner that the government then announced and it does not have a helipad?

As the state of Victoria's population grows, regional hospitals like South West Healthcare should have a helipad, and they should also be looking at the concept of perhaps a catheter lab. Cardiac patients are having to go down to Melbourne and Geelong, when cardiac treatment is becoming much more advanced than it was. When I did my training, from 1985 to 1988, someone having a heart attack was a significant event. Since then so much has been developed around thrombolytic treatment, which can actually reverse the effect. No necrosis occurs, and the patient does not end up with CCF, congestive cardiac failure, which is the complication when tissue in the heart dies and becomes necrotic and floppy. So much has been developed in just that period of time. Putting a catheter lab in Warrnambool should be in the design scope of people who are thinking about how we better look after the community's health future.

It surprises me. The ambulance officers have talked to me about that service in Warrnambool that we value so much. I always thought if we called 000, an ambulance would be there immediately. I have heard from the ambulance officers recently, who have not been allowed to speak to me, because the government has told them they are not allowed to. But now, because of the window of opportunity they are provided with while they are negotiating the enterprise bargaining agreement, they are speaking to me and telling me things about the resource desert that is occurring in our region. On a Saturday night you would expect more than one ambulance in a population of 35,000, but instead, because of strains on the system, often the second ambulance has to go to Hamilton or Port Fairy.

The hours these professionals are having to do – if you are a health professional, you have just done a 12-hour shift and someone needs to be transferred across to Geelong, you are not going to say no. But these are very unsafe situations, and it is only coming to light for our community that we are in such a high-risk situation because they are now allowed to speak out. We are a community that should not be gagged – no-one, in the state of Victoria. This is not a socialist state. Surely if our community only has one ambulance and it is a risk to the safety of our community, that should be freely discussed and a problem dealt with and solved, not hidden from the community and swept under the carpet. The people who are employed by the government are told that if they speak up, they will lose their job, and if they do not lose their job, they will never get a promotion.

These are the sorts of things we are hearing about the current Labor government that constituents are now finally sharing with me, and that is why we saw the gagging take place with the hospitals when the board members and the CEOs were being told to cut their budgets. One of the hospitals in my electorate was told to cut their budget by 40 per cent, and that is because the government knew they had been bequeathed money that would keep them sustainable for another year. This is a desperate government looking for money wherever they can get it, and once they have done that they will say to these smaller health services, 'You have to merge now because you've mismanaged your money and you haven't got anything to be able to manage your budget for the next 12 months.'

These are tactics that are so clear and obvious to the people in the system like me, who worked as a nurse in that system for 30 years. Unfortunately they have gagged the employees of the hospital, but they have not gagged me. I certainly can see quite clearly what is happening, and you only have to look at what I have just highlighted here about the trend that is going on in the south-west and the pressures put on specialists. People will say they are rich doctors, they do not need anything and they are getting enough. That is not true. They are highly skilled, hardworking professionals who care about their community, not money at all. You cannot treat people with disrespect and divide them and destroy them. You need to show the respect that one of those specialists talked to me about just last night, and they will work with the government, not against them.

Sarah CONNOLLY (Laverton) (11:25): Look out, colleagues on this side of the house. I have got the Labor red on because I am so excited to stand here and talk about our incredible Allan Labor government and speak on this Health Legislation Amendment (Regulatory Reform) Bill 2024. The aim of this bill is to strengthen our health regulations so that Victorians are better protected. On this side of the house, we always stand up for Victorians. I have to say it is an absolute pleasure for me to get the chance once again in this place to speak on a piece of legislation that deals with a topic that is so dear to my heart, and I know for so many comrades here in this place it is so very dear to their hearts, and that is the reproductive care and access to fertility services and IVF that the Allan Labor government has made possible.

I have spoken so many times in this place about my own experiences with IVF and how it helped both me and my husband have the family that we love and that we cherish today. I cannot be clearer when I say if it was not for IVF – and that was some 15 years ago when we started our journey – I would not be standing here as a mum and my husband would not be sitting over there across the road in the Fair Work Commission as a dad. IVF and fertility services and equal and fair access to them mean everything to people in Victoria, and there are many of them across this state who are struggling to get pregnant and struggling because of the cost – and the cost can be incredibly high – to access reproductive healthcare services.

It is a sentiment that I hear from so many women because I talk so publicly about our journey, the IVF journey, that roller-coaster journey to get pregnant. It is a sentiment I hear from so many women in my electorate who seek access to IVF treatment. I have to say in the time that I have been sitting on this side of the chamber this morning I have not heard those opposite mention the many, many women in their electorates who are desperately trying to seek access to IVF and get pregnant. The fact that this government has made public IVF free has been absolutely groundbreaking. It is something that this government should be commended for.

I have said it time and time again – I said it 15 years ago, and it is just as relevant today as it was back then – that you can never underestimate the desire of a person to have a child, especially when there are complications or issues and challenges that may require fertility or reproductive care. Fifteen years ago, when Scott and I started undergoing the treatment, it was not something people talked about. It was hidden away. There were very few support groups, and the support groups did not meet face to face. They were little online chat groups, not these sort of WhatsApp groups or instant messenger groups and things like that. It was really private. It was not talked about and there was a sense of shame and stigma attached to it. But fortunately for women nowadays who are requiring fertility services to get pregnant and who are undergoing IVF, it is something we talk about. It is one of the reasons why I stand here and I talk time and time again in this place about the importance of making access fair and equal and not just based on how much money you have in your bank account at the time.

Before I continue, I do want to give a big shout-out. On behalf of this side of the chamber, I want to give a big shout-out of support to all the women and the families who are undergoing IVF treatment and reproductive services to try and get pregnant right now. Keep going. It is a really tough journey. We will stand here alongside you. There are many of us here on this side of the chamber who have also had to walk that journey. It can be very isolating. There are services that you can reach out to for support, and I would recommend anyone undergoing IVF reach out to those support services. I am

happy to say that Scott and I reached out to receive counselling while undergoing our IVF journey, and that was really helpful to get us through that journey to finally find ourselves pregnant thanks to IVF, but it was also something that was really helpful for our relationship during that really challenging time to stay on track and for us to stay together. Services are available.

I am really proud to say that we were the first state to have an IVF baby, born all the way back in 1980. As someone who was born in 1980, that first IVF baby would be turning 44 this year, which is just such a remarkable achievement. Four years later, after that event in 1980, we were the first state to implement legislative safeguards for this treatment.

It is also a good opportunity to remember the incredible strides that this government, the Allan Labor government, has made in this space in the course of nearly 10 years. It was this government that initiated the Gorton review back in 2018, which has actually informed so many of the reforms that we have made here in this place to make it easier and more accessible for folks to undergo IVF. We removed the requirement – this is such a ridiculous requirement; I remember the debate that took place here in this place – for women to get police checks to undergo IVF treatment. We removed the requirement for women who were separated from their spouse to obtain permission to do IVF. Can you believe that? We made it easier for existing families to use the same donor, so that their children can be 100 per cent biological siblings. That is something that if you have not had to sort of make these decisions in your journey to get pregnant, you cannot imagine how important that would be for families who are facing those decisions. We also allowed for a deceased person to attest in their will to how their gametes – sperm, eggs and embryos – can be used by their spouse or partner in accordance with their wishes. I mean you really hope that that does not happen to you, but for the people in this state that it has, we have changed the laws to make it easier to be able to determine what you want to do with sperm, eggs and embryos after the very sad death of a spouse or partner.

Most importantly, in 2021 our government funded the establishment of Victoria's first public IVF fertility care service. That was groundbreaking, absolutely groundbreaking. This has been extended as an opportunity to thousands and thousands of families right across Victoria. I really cannot overstate my support for this service and the benefits it is bringing to so many families, saving them up to – it is just revolting how much it costs to do IVF if you are having to pay it up-front – 10 grand, \$10,000 in IVF costs. It really is a game changer for so many families across Victoria, so many couples or so many individuals who are wanting to become a family and have a child. Even more recently, just last year in fact, we opened the first public egg and sperm bank in Australia, right here in Victoria, at the Royal Women's Hospital. This means, on the flip side, that it has never been easier for people to donate sperm and eggs. For people undergoing IVF, who do need access to sperm or do need access to eggs, you cannot underestimate what an incredible groundbreaking thing this was to do for folks seeking to become a family.

What we wanted to do was to make IVF even more accessible for families in Victoria, and that is what this bill is about. That is why I am so excited to stand here in my proud Labor colours – or uniform as some have mentioned to me today. It makes me so proud to stand here and say what we are wanting to do is to make IVF more accessible for families in Victoria. That is why it is so important to speak on this bill, and that is why I know I have so many colleagues alongside me on this side of the chamber, noting that across the chamber it is quite empty. That is why we are so excited to hear this debate, why we are so excited to speak for a whole 10 minutes on this, why we are so excited to get up and back in this incredible bill. It really is an incredible bill; it really is. I do have to commend the minister for time and time and time again bringing this kind of legislative reform before the house. Labor is all about making Victoria a fairer and more equitable state and making it more inclusive for everyone, regardless of how much money you have in your bank account. This bill, the changes in this bill, goes towards those principles that the Allan Labor government is so intent on, sprinkling and spreading the love right across Victoria. It is about equality, it is about being able to become the parent that you want to be, and I commend the bill to the house.

Cindy McLEISH (Eildon) (11:35): I am always bemused when the Labor government talk up the health system, because we know it is in an absolute crisis at the moment. They have clearly drunk the Kool Aid, or they are not listening to what is going on in their communities. The Health Legislation Amendment (Regulatory Reform) Bill 2024, which we have before us, is really about preventing or minimising harm. That might be to our health or to our safety. Generally, they are good things that people will be supporting. There is quite a lot here about the Victorian Assisted Reproductive Treatment Authority (VARTA), which is the bulk of the bill, but there are also quite a number of other areas that are covered, and I will touch on one of those a little bit later on.

The health regulator was established earlier this year, and it has the role of consolidating regulation on a very broad range of health-related matters, including food safety; child safety; legionella risk management – and there are some common parts to the legislation today; radiation safety; pest control; schools of anatomy, which is interesting; medicines and poisons; and safe drinking water. So a very broad range of areas are covered under the health regulator. The bill that is before us is around compliance and regulation in a number of those areas. It will also abolish VARTA, and it is going to transfer the regulation elements related to assisted reproductive technology, ART, to the Secretary of the Department of Health.

VARTA has not been working as it should have been – there has been quite a bit of feedback about that – and in 2018 the government announced a review of assisted reproductive services. It was conducted by Michael Gorton AM, who was chair of Alfred Health at the time and has expertise in law and in health. That report was finalised in May 2019, so that is over five years ago, and some of the recommendations in that report are being dealt with today. Five years is a long time to be sitting on an outcome of a report before you are actually putting those into place. I will talk about some of those in a little bit more detail.

The Gorton review was looking at strengthening laws and providing more safeguards for those that are going down the assisted reproductive treatment path. The review made 73 recommendations and they were very varied. Some of those recommendations were around protections for individuals around breaches, sharing of information between the relevant regulators and other bodies, artificial insemination, and discrimination against married women who want to access assisted reproductive treatment following separation. As I said, there were some 73 recommendations, so lots of areas are covered in that. What was found very much was there were problems with access, affordability and quality of care, and particularly that people were not at the centre of fertility care. It recommended to the government that that needs to shift. I am going to quote from the executive summary of the report:

... there have been growing patient concerns with ART and its regulation over the last 10 years –

remember that this is in 2019 –

... high costs, unclear success rates, misleading information, limited psychosocial support for patients, intrusive legal requirements on patients, unproven treatments, and a small number of cases of unethical practices.

So there are very admirable causes and very admirable areas that we need to look at and make changes to. As I said, it is a little bit disappointing that some of those are still being rolled out at the moment. We have seen that VARTA is not working as well as it could have been, and so the government is making a number of changes here, as I have said, about the abolition of VARTA and transferring regulation to the Secretary of the Department of Health. This also has within it improvements to health regulation and compliance and enforcement tools. These are some of the purposes of the bill. There are a whole lot of other minor miscellaneous changes as well.

But when we have a look at the risks associated with the changes, there are a couple of areas of concern, and I think that they have been really skimmed over. The Department of Health released a summary of feedback it received during its consultation which did identify some concerns about aspects of the abolition of VARTA. They have been raised in the media as well. There is a need for specialist expertise in this very complex case. I do not think anyone would deny that this is a

particularly complex area. The health department needs to ensure that it maintains that level of expertise and knowledge with that transfer.

There has been quite a bit of comment around the removal of mandatory counselling before accessing information from donor registers. This is an interesting one because counselling will still be mandatory before consenting to treatment or consenting to be a donor. That is still there, but there is part of that where people who are wanting to meet the donor parent or child are very vulnerable – there are heightened emotions, as you can well imagine – and they are about to enter a minefield which really could raise unexpected issues. They may find out that the parent or the child is dead or has criminal convictions or mental health issues, and they need to be supported to deal with those, because when something like that is thrown into the mix of what is already a complex emotional time it is important.

Monash IVF have made some comments on this, saying that they have seen firsthand how important it is to help these people manage their sense of identity if their donor conception status was disclosed later in life, to manage expectations and set boundaries for their contact with the donor and to manage relationships with their existing family members and that failing to do so can cause psychological harm and trauma and even lead to suicidal ideation, so it is something that is really important. It has been recognised by clinics that have been in this space since its inception. Also, removing the education function of VARTA is a little bit disappointing without a clear plan to ensure the continued provision of reliable and independent information to help people understand issues relating to fertility.

The government certainly talks a big game in this space and with women's services. I will note that in the budget that was handed down in May public IVF services were cut by \$42 million. In 2018 the Premier announced that there would be low-fee bulk-billing clinics in metropolitan and regional Victoria – I think it was something like 10. Things have really struggled in that part. This cut means that plenty of families will be waiting for longer for their treatment and services. We know, as I said at the outset, we are in the midst of a crisis.

One of the other areas that is mentioned in the bill concerns changes to the Safe Drinking Water Act 2003 and Alpine Resorts Victoria, because we have had an alteration in the set-up and governance there. I do want to mention that there have been issues in this space, particularly for Mount Buller. There was an \$11 million investment in making a reservoir for water on the mountain. You would think the village needs water. Water is essential for snowmaking in the white season but also for activities in the green season, in the summer period. The alpine resorts are significant economic drivers for the state and they have significant private investment. Over 1.38 million people visit the alpine resorts annually. A recent study found that \$2.14 billion in economic output annually is generated through this, with \$1.3 billion directly via visitor expenditure. There are over 12,000 jobs. The government needs to do all that it can to assist Mount Buller with the issue regarding water.

In April, because of the restrictions on being able to pump water, the dam was only 30 per cent full. We need to have that dam 100 per cent full. When the government allows Mount Buller to pump water at the wrong time of the year, they go into the season with a dam less than half full. The dam needs to be full for the season so they can extend the snow season and make more snow. They have five snow factories and over 300 snow-making guns. They will only need to pump the same amount as suburban golf courses, so I urge the government to work to fix this problem at Mount Buller.

Mathew HILAKARI (Point Cook) (11:45): I rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. I am going to just give a shout-out that I am going to talk a little bit about miscarriage during my contribution, so those people who want to turn down their speakers at the moment, please do so, and anyone who wants to get a coffee, do so too. Sometimes these are really challenging issues to think about and to reflect on from your past. I certainly want to thank the member for Laverton, who always gives such a joyful presentation of her past and the challenges and going through IVF. It is always such a pleasure to hear her and the member for Bellarine and the member for Sunbury as well, who just make such great contributions in this place.

These of course are important reforms that we are setting forward around assisted reproductive treatment, and the \$120 million that we have put in to start and grow families is just so important for people in our community. For my family it was also important, because just before my son was born – my son is almost one now and my other son is almost four – we were at that point of going, ‘Well, we need some help. We need the support of medical professionals to complete our family.’ We have got a wonderful, completed family now with two children, but we had a number of miscarriages along the way.

Just last week my son was in bed – I had both children and my partner there – and he was asking lots of questions, because little kids ask lots of questions, you would be surprised to hear, when they are coming up to four years old and they want to know all the things about the world. He asked, ‘Do I have a sister?’ This was one of those questions where grief and all these emotions come at you in all sorts of different ways at different points in time, and it was a question that just then I did not want to really answer. He asked again, and my partner fortunately said, very well, ‘No, you’ve got a brother and you’ve got cousins and you’ve got uncles and aunties and all of these things.’ But I did not know how to answer it, because that is sort of half true and it is half not, because we had a miscarriage that was a late miscarriage. It was after the period when we knew the gender. We had started to tell all our friends and family. We had had that brilliant piece of joy of saying, ‘Well, look, we’re at this point in time, and this is going to be our complete family. This is what we’ve been working towards for many, many years together.’ And it did not happen, and that was of course horrid – a horrid point in time. I am not alone in this; there are many, many people across our community, across this Parliament. I am so thankful for my friends and family, who have been around both me and my partner sharing their stories, and I am very thankful that I am living in a period of time when we can share those things with each other, because it was not so long ago that I think there really was a lot more silence. I am really thankful that we are in this position.

I actually think there is a big thing that has gone on in our parliaments and in the Labor Party in particular, which is to see more women sitting in parliaments. This has been a real driver of a change – more women in leadership positions generally in society – in the cabinet room. It means that we are talking about policies that were never really considered in the way they should have been considered before. I am really thankful that I am part of a party which has prioritised seeing women into leadership positions, into the Parliament and into the cabinet, because we have a completely different set of conversations than we had before. We open up the space to talk about things that one day we really would not have talked about.

We moved on and we had our second son, and it is really just the greatest joy in our lives. I see around this Parliament so many people who have just had children or who are in the process of having children, and I am just so joyful for them. It just makes me happy. It puts a real spring in my step every day to know that more kids are coming along and more families are reaching the place that they want to get to. I am really thankful for that and really happy for that all the time. When we think fundamentally about the things that are really important to us, they always relate back to family and really directly to that. I just want to say to all those people in the community who are going through these things: there are people who are there for you and care for you and have experienced this as well and will be there to support you.

I want to talk a little bit more about the bill now. The member for Laverton was quite right in saying that IVF is something that has now been around in this state since 1980, so it is just slightly older than me. This has been a real change for so many people wanting to grow and complete their families. We have an important task to do in government, and that is supporting those people in their absolute time of need. When we were at the point of thinking about assisted reproductive treatment, IVF, we were not really thinking about how our data was stored or kept over time and about the regulations that were put in place. Governments need to think about these things because people are probably not in a position to do so when they are really ready to take that step, because it is in a period of a great deal of

stress. I am really thankful that we are spending the time to get these regulations right and to support families both now and on an ongoing basis.

The member for Eildon really gave a good coverage across the Gorton review and the 73 recommendations that were attached to it. This review landed in 2018, and this is just another step in our completing some of the actions that came out of that review. It is important that we listen to the particular expertise over time that we do get. We had 148 submissions in response to the minister calling for submissions on 29 April 2024, and they were generally from people who had lived experience in ART. Being informed by that lived experience is so important for us, going out and seeking the community's wisdom and input on such matters. We also had peak bodies make contributions to this, as well as registered ART providers et cetera.

The whole bill itself seeks to make changes to seven different acts, including the Assisted Reproductive Treatment Act 2008, which I think is the most substantial section of the changes; the Drugs, Poisons and Controlled Substances Act 1981; the Health Services Act 1988; the Non-Emergency Patient Transport and First Aid Services Act 2003; the Public Health and Wellbeing Act 2008, the Radiation Act 2005; and the Safe Drinking Water Act 2003. There are a lot of changes in there, but it all comes back to the experience that people have, and the experience that people have over time, in our healthcare system.

I was very fortunate to have Minister Mary-Anne Thomas out adjacent to the electorate, at Werribee Mercy, last week. Werribee Mercy is the hospital in Melbourne's south-west for people to have babies in – they have hundreds and hundreds of babies every month – but also we have a very well used emergency department there. We got to put some spades into the ground and shift some dirt around as part of the process to double the emergency department at Werribee Mercy. It means that 25,000 extra patients every year will be serviced by this emergency department. It is a really big deal for people in Melbourne's south-west, because too often people are waiting at the emergency department for just that bit too long, and this is part of the ongoing effort to make sure people are getting the health care they need. I will give a particular shout-out to a doctor there who saw my partner on one occasion – she pulled her name out, and she was really just a wonderful doctor – and all the healthcare staff who work so hard every day. I do want to thank the minister for taking the time and the care to bring this forward to the advisers and to the departmental staff, because this is an important bill for people at vulnerable times for them – when they are seeking to grow and seeking to start a family. I commend this bill to the house, and I look forward to its speedy passage.

Brad ROWSWELL (Sandringham) (11:55): I also rise to address the Health Legislation Amendment (Regulatory Reform) Bill 2024. This bill is a government bill, which it says will modernise and streamline compliance and enforcement powers to support a graduated, proportionate and risk-based approach to regulation by the Secretary of the Department of Health to prevent or minimise harm to the health or safety of Victorians. That draws me to my first point – that is, one of the greatest risks, in my view, to the harm or health or safety of Victorians in the health space is the way that this government has managed the health budget over the last decade.

It was only a few short months ago that the government's 10th budget was delivered in this chamber, and in that budget there were significant cuts to health services. Public IVF services, just as an example, were cut by \$42 million in that budget. It was not so long ago that the government was claiming time and time again that a record amount of funding was being pumped into Victoria's health system. But Victorians know that not to be true. They know that not to be true because of the evidence before them, whether it be code reds or code oranges for ambulance services or whether it be vulnerable Victorians in need of health services not being able to receive those health services and those health outcomes in a timely way. That is the proof of the fact that Labor is not investing what it should be investing in health and is certainly failing when it comes to the management of health services in this state.

It was only two weeks ago that the Treasurer admitted that there was a \$1.5 billion shortfall in health service funding in Victoria and failed to tell the Victorian people how he was going to find that \$1.5 billion for health services in this state. On 9 July my colleague in the other place the Shadow Minister for Health Ms Crozier said that the Minister for Health Mary-Anne Thomas had denied that hospitals had been told to cut their budgets and that all available funding had been allocated. Then the Premier stated:

If we do need to provide more funding ... then we will do so.

So you have got a circumstance where the health minister is saying that there is record hospital funding, and there is a denial by the health minister that health services around the state have been told they need to cut funding, and days later we have got the Premier saying that if they need to add more funding they will do that.

There you go: \$1.5 billion is the figure that has been put on this. Now the Treasurer, when asked about where that money is coming from a couple of weeks ago, said that it would not add to debt. If you are not going to add to debt, you have got two choices. To get that \$1.5 billion you either raise taxes or you cut existing services. When asked about that, the Treasurer would not rule it out either. This is the way the health system is being managed in the state of Victoria, and it is just, frankly, shocking.

For my own part in my own community, and I have spoken about this before in this place and I am grateful for the opportunity to be able to speak about this again today, Sandringham Hospital in my community is a much-loved health service. It is the caring heart of our community. For many, many decades Sandringham Hospital has been the go-to hospital, with a 24/7 emergency department for people who need those emergency health services. As a father of two, I have found myself in the emergency department at Sandringham Hospital with both my son and my daughter receiving the very best care. In the context of recent conversations and recent suggestions that health services may be amalgamated and health services' budgets may be forced to reduce, to decline, I wrote to the health minister saying I was deeply concerned about the potential impact on Sandringham Hospital. I asked a series of questions in a letter dated 27 June 2024. I asked the health minister:

How will budget cuts impact Sandringham Hospital? Are there particular departments or services that are at risk of being scaled back or eliminated entirely?

I asked:

Will you guarantee that the Sandringham Hospital Emergency Department will remain open 24 hours a day, 7 days a week?

I asked:

What measures will be taken to ensure that patient care and safety are not compromised as a result of budget cuts?

I asked:

Will there be staffing cuts at Sandringham Hospital? If so, how will the hospital manage potential shortages to maintain the standard of care?

I asked, finally:

What steps will the government take to support my community and mitigate the negative impacts on those who depend on Sandringham Hospital for their healthcare needs?

In my view and on behalf of my community these are eminently sensible and necessary questions to ensure that Sandringham Hospital continues to provide the level of care and health service for members of my community. Of course it goes without saying that my community would expect nothing less of me.

I received a letter in response to those very specific questions asking about potential cuts to services and seeking assurances that the emergency department at Sandringham Hospital will remain open

24 hours, seven days a week et cetera. I asked those very specific questions, and to her credit I did receive a response from the Minister for Health on 24 July. The letter reads:

Dear Mr Rowsell

Thank you for taking the time to write to me about Sandringham Hospital, which is operated by Alfred Health.

I'd like to assure you that the Allan Labor Government will not be closing or privatising hospitals.

I have run through for the purpose and the benefit of the chamber the very specific questions that I asked in relation to Sandringham Hospital on the extent of the impact of potential budget cuts to emergency care, patient care and safety, staffing levels and general community support. I never asked whether the Allan Labor government intended to close or privatise Sandringham Hospital. I suspect that the response by the minister is a generic response, not a specific response, because the only time Sandringham Hospital is mentioned in the 1½-page letter, which I am happy to make available to the house and I will certainly make available to *Hansard*, is in the first sentence. That is it.

This response from the minister hardly gives my community the assurances that we are requesting to protect and defend our magnificent health service at the Sandringham Hospital. I cannot for the life of me understand why the health minister would not have used it as an opportunity to assure my community and the great people that make up the Sandringham Hospital that the Allan Labor government is on the side of Sandringham Hospital, its staff, its patients, its volunteers and the community that depend on it in a very significant way. I am disappointed, frankly, by the response from health minister Mary-Anne Thomas on this occasion.

The reality is that the Allan Labor government and the Andrews government before them have been in power in this state for 10 years. Victorians need to ask themselves: in the last 10 years, do they feel safer in their community? Do they feel healthier in their community? Do they feel like they are better off in their community or do they not? I think there are a significant amount of data points to say that we do not feel safer as a community, we do not feel healthier as a community and we certainly do not feel better off as a community, and that is on the heads of members of the Allan Labor government.

I think there is a better way, and perhaps it will take a change of government in November 2026, to invest in a meaningful way in our health services, for a government to take the reins in this state that actually values my local health service at Sandringham Hospital, that values the people that work there, that values the administrators, that values the volunteers that fundraise for the hospital and that values the patients and the community that that hospital seeks to serve. I just wish the Labor government would do better for the Sandringham Hospital.

Lauren KATHAGE (Yan Yean) (12:05): I rise to speak in support of the Health Legislation Amendment (Regulatory Reform) Bill 2024. This bill continues our government's work to improve the health of Victorians, and in particular this bill strengthens and reforms health regulation in Victoria. What is really important about this bill is that it fills in the middle ground that has sometimes been missing previously where options open to regulators were between doing nothing and severe prosecution on the other end. You can see how for more minor or middle-ground compliance issues related to regulation that did not warrant full prosecution it would leave reduced options for dealing with that noncompliance and for creating improvements. What this bill essentially does is set us up to be more proactive and to be more preventative, making sure that we are keeping Victorians healthy rather than responding when things do not go well. I really support this bill and that approach to health regulation in Victoria.

If we think about the health of Victorians and if we think about public health more broadly, there are a few different things that contribute to that. We have got regulation, such as we see in this bill. There are the skills of our health services personnel, and we can see action from the government there with things like free nursing degrees, free postgraduate mental health qualifications et cetera. Another key factor contributing to the health of Victorians is making sure that the facilities are there for treatment, and we can see that in spades. Up in the north where I am we have got our community hospital in

Mernda under construction at the moment. We have got mega-upgrades coming to the emergency department at the Northern and also at the Austin. In all the different ways, in all the different pillars with which we uphold health, you can see that Victorian Labor is providing a strong foundation for the health of Victorians.

This bill creates changes to the Safe Drinking Water Act 2003, and I find this a really interesting area of legislation. The electorate of Yan Yean in fact is named for Yan Yean Reservoir, which is Melbourne's oldest water supply, and we celebrated 170 years since the sod turned on construction this year. Governor La Trobe I believe turned the sod. If we think about the understanding of water safety 170 years ago compared to today, there have been massive leaps forward in our knowledge and understanding but also in our technology for how we improve drinking water.

The idea that we need clean water is not new. There is information about that recorded in Sanskrit. It is on Egyptian walls – wick siphons and whatnot. But the first documented proof of the impact of drinking water on health was coincidentally at about the same time that they were turning the sod on the Yan Yean Reservoir. Back in 1854 Dr John Snow – no, not that Jon Snow, a different John Snow – performed the definitive work concerned with the spread of cholera, and this was through analysing water supplied by two different sources in London. One source of water was the Thames at Battersea, and the other source of water was a fair way upstream on the Thames. There were two pipes. There was a pipe that went from each water source to the same suburbs and streets in London, but different houses received different pipes. They were then able to compare – it was about 30,000 residents, so a pretty good sample size – the incidence of cholera between those who received water from Battersea and those who received water from the Thames. At Battersea, sewage was pumped into that section of the Thames. Looking at that, they saw that people who had the Battersea water had a much higher incidence of cholera and those who received water from upstream had a much lower incidence of cholera than the average across London. Through that they were able to conclude that the water supply itself was transmitting the cholera agent. This is a classic study in the field of epidemiology, and it is really impressive when you consider that germ theory had not been realised yet. I think people are still drinking sewage, potentially, in London, but back then they did not have that clear understanding. So many changes have been made since then. We still use the same reservoir that was constructed at the time that this understanding of cholera was developing, but just recently we have again upgraded the filtration system at Yan Yean Reservoir.

It is not just the infrastructure, which I was talking about before, with health, but it is also the regulations. This bill means that the providers of our drinking water – the people who care for our water at its source, such as Melbourne Water, and the people who bring water to our homes, such as Yarra Valley Water – can be issued with infringement notices if they do not comply with the standards for safe drinking water in Victoria. It should be really reassuring for Victorians to know that that middle ground is being covered by infringement notices. Previously, if smaller noncompliance activities had occurred, we would have worked with those water suppliers to improve their practice, but this means that we can also apply infringement notices to strengthen compliance.

Just on a side note, we have not privatised water in Victoria. We have seen recently in England what happens when you do privatise water. We have the cleanest drinking water in the world because it is public. We have also managed to keep the costs of water down for families because it is not privatised. It is another thing to be proud of for Labor. I also want to acknowledge that there has always been Aboriginal knowledge in Victoria of the importance of clean water and how to source and maintain safe water for families. That knowledge has existed in Victoria for a long time.

I would like to touch briefly, if I could, on the health regulator itself. This health regulator, which will oversee safe drinking water et cetera, was stood up in February of this year after being announced in December. This health regulator was created through a new branch of the Department of Health, and it brings together expertise in the different areas that it covers, such as radiation safety, food safety, pest control, e-cigarettes et cetera, as well as regulation expertise – those who know about monitoring, compliance et cetera. Having these people all together in one place means that we can have consistent

approaches and that we can work on, as I said, prevention and proactive action rather than reactive or extreme actions only. This really creates that sensible, safe middle ground for our department to ensure the health of Victorians.

The member for Sandringham ended his contribution promising that if his party was in government, they would be improving the health of Victorians. Well, I say they are a long, long, long way behind, because this is the government that backs the health system in Victoria, this is the government that backs health workers and this is the government that invests the billions in infrastructure that Victorians need, and long may it continue.

Tim READ (Brunswick) (12:15): I am joining the debate today on the Health Legislation Amendment (Regulatory Reform) Bill 2024. We have heard plenty about the bill in prior contributions, so I will not cover it in too much detail. In short, the bill equips the government's new centralised health regulator with the legislative powers it requires to carry out its duties. It also provides the regulator with what are being termed 'mid-range enforcement tools' – infringement notices, enforceable undertakings and the like.

In its mission to centralise, which is a real theme emerging from the government, this legislation also proposes to dissolve the Victorian Assisted Reproductive Treatment Authority. I will start by noting that not one of the experts, academics or community members that my colleagues and I have heard from believes that VARTA should be abolished. In fact many were at pains to point out that VARTA is highly valued by members of the community who have used its services and by health regulators in other Australian jurisdictions and around the world.

Other than for the purposes of consolidation of regulatory powers across health services, I must admit that the reasons given for the dissolution of VARTA have been unconvincing. It is unclear whether the government gave any consideration to VARTA retaining many of its functions while still transferring its regulatory powers to the Department of Health, so we are left wondering if this may yet be another cost-cutting exercise. Of most concern to many is that VARTA will no longer exist to provide counselling to those wishing to access information about their donors or to engage in what is known as donor linkage. Whether counselling for those wishing to touch base with their donor or offspring should be mandatory is a question that is up for debate and perhaps better left to experts, including psychologists. However, that counselling should be readily available and well resourced is surely a no-brainer.

In 2016 this Parliament passed world-leading reforms giving greater rights to donor-conceived people to access information about their donors. Not only did that mean that people suddenly had greater access to their genetic medical history, it also meant that for some their sense of identity, of belonging and of family shifted dramatically. VARTA have been instrumental in ensuring that these people have been well supported. From all accounts VARTA counsellors are extremely good at what they do. They specialise in a very niche field. Many people are still finding out that they are donor conceived, so the need for specialised services has not gone away with time. Conflating the normalisation of IVF treatment and donor conception on the one hand with the idea that specialised support is no longer required on the other hand would be short-sighted.

The minister and her department have made promises about these functions being made available to consumers through an external provider. Many people remain worried about how this change will be implemented. Wherever counselling is transferred to, these counsellors must meet minimum standards. This is an extremely sensitive issue for people and it requires specialised support, so I really hope that the government does everything in its power to make sure that this change is implemented correctly. For example, ART – assisted reproductive technology – clinics provide fertility counselling, but donor conception linkage services are not part of their usual business, and nor should they be.

Another significant aspect of this legislation is the removal of the legislated requirement for education and research under the Assisted Reproductive Treatment Act 2008. For many years now VARTA

have been world leaders in education, industry oversight and research, providing the public with up-to-date information about emerging technologies in assisted reproductive technology, helping to differentiate trend from breakthrough. Public education and research functions are important in the context of the predatory commercial behaviours of some IVF clinics. While the rapid transformations in IVF treatments and technologies have been life-changing for many, they have been accompanied by more and more so-called add-ons. These are additional treatments with low efficacy but a high price tag. The market power of these multinational services is significant, and with the uptake of social media and influencers as a common place for information gathering, misinformation, whether sinister or accidental, is common. VARTA have a dedicated team of researchers who have years of experience in this field and who are able to proactively respond to emerging issues as they arise.

Some have questioned whether the health department have the requisite expertise to continue to carry out the whole spectrum of this work and, given they will also be tasked with regulating the rest of the health system, whether the promise can really be made that ART will receive the specialist attention it deserves. One in six couples in Australia experience fertility difficulties. ART involves a high level of public interest, and yet there has been no transparency in the process undertaken by the government in making this decision. The government appears to be on a mission to reduce the cost and regulatory burden across many of its portfolios, particularly in relation to health services, but at what price? Therefore given the level of concern about the process that has been undertaken to make this decision, the Greens propose a reasoned amendment. I move:

That all the words after ‘That’ be omitted and replaced with the words ‘this house refuses to read this bill a second time until an expert panel comprised of representatives from the legal sector, specialist counsellors, people with lived experience of donor conception and assisted reproductive technology, and people with other relevant expertise has examined the implications of the dissolution of the Victorian Assisted Reproductive Treatment Authority and that the findings of this panel are tabled in both houses.’

IVF and other reproductive treatments are very important to particular groups, such as rainbow families, single people and those with chronic disease or genetic conditions. We need to think carefully about the impacts on them before we dissolve VARTA. We need to get this right.

Steve McGHIE (Melton) (12:22): I rise today to talk on the Health Legislation Amendment (Regulatory Reform) Bill 2024. I have just been handed the amendment from the member for Brunswick. I should go to that initially. I cannot see any reason for that amendment. I do not think that we should be delaying this bill being passed in this chamber or when it goes to the upper house. I am sure other members will talk to that amendment in greater detail than me.

I do want to acknowledge some of the previous contributions, in particular from the member for Point Cook and the member for Laverton, their personal contributions. I acknowledge them, the lived experiences that they have had and how important that is. I want to thank the Minister for Health and her staff, who have worked tirelessly on this bill in conjunction with the many key stakeholders, the experts and the people around Victoria, to finalise this particular piece of legislation.

The bill, through these amendments, at its core will modernise, streamline and strengthen compliance and enforcement powers to advocate for a graduated, proportionate and risk-based regulatory approach by the Department of Health’s health regulator aimed at preventing and minimising risk to the health and safety of Victorians, and that is at the utmost forefront of what this bill is all about. The amendments to the Assisted Reproductive Treatment Act 2008 will transfer the regulatory powers to the Department of Health and bolster the compliance and enforcement powers to add to the strengthening of compliance and enforcement. The donor conception register will be managed by a new donor conception registrar.

I just want to touch on health itself and what this Allan Labor government has done, in particular out in the west, out in my patch, in regard to health infrastructure and that commitment. I will just highlight a couple of health infrastructure projects. The new Footscray Hospital, which opens up next year, 2025 – the \$1.5 billion build – is going to be amazing for the whole of the western suburbs, not just

the electorate and the surrounding suburbs of Footscray. I know the member for Footscray is so excited about this particular facility. In my patch of Melton we will commence building the new Melton hospital later this year. The builders have been announced and awarded, and they are finalising plans. We cannot wait to see the start of that build. There will be a maternity section in the new Melton hospital, and I am sure there will be families that are affected by the outcomes of this bill. We will work through the new Melton hospital in the future, through that new maternity section. There is the upgrade to Western Health, Sunshine, a massive upgrade and a fantastic hospital; to the Joan Kirner facility; and of course to the Werribee Mercy, which the member for Point Cook alluded to.

And just under 12 months ago we opened up a new primary care clinic in Melton to take some of the stress off the emergency departments out in the west. They are just some of the commitments in the west, and for those opposite to suggest at times that we are leaving the western suburbs behind is so far from being accurate. As I say, there is a lot happening out in the west, in particular with health infrastructure. It is certainly well needed, and it is being delivered by the Allan Labor government.

The health and safety of Victorians are paramount to our government. An integral part of this is how health regulation works to best serve the interests of all Victorians, and minimising and preventing risk of harm in all forms to the health of the community is really important. Just before I came back into the chamber at 11 o'clock I was at the Parliamentary Friends of Diabetes event, and many, many people – members of Parliament and others – were there to hear about the great work that they are doing in regard to the medical treatments now around diabetes but also the great research that is being done. Earlier in the week we had medical research institutes come in, and right across our health sector they are doing fantastic work in supporting Victorians. It is really important stuff.

To ensure the effective execution of regulatory functions, regulators must be equipped with a robust, best practice toolkit that grants comprehensive compliance and enforcement powers, empowering them to implement a risk-based and proportionate approach to compliance and enforcement. So minimising harm is at the forefront of the government's mind when it comes to this bill. Its few amendments pave the way for better compliance, better enforcement powers and a more consistent approach across a number of health regulation schemes, such as the Assisted Reproductive Treatment Act 2008, the Drugs, Poisons and Controlled Substances Act 1981, the Health Services Act 1988, the Non-Emergency Patient Transport and First Aid Services Act 2003, the Public Health and Wellbeing Act 2008, the Radiation Act 2005 and finally the Safe Drinking Water Act 2003 – and I know it was referred to by the member for Yan Yean. This bill ensures that across all of these acts the powers of the regulator are there to issue improvement notices, prohibition notices, information or document production notices and infringement notices for prescribed offences and to accept enforceable undertakings. This bill recognises that not every situation requires the same notices or tools to address issues that may arise, and that is why these powers create means for a proactive and appropriate response to noncompliance. So to ensure the effective execution of regulatory functions, regulators must be equipped with a robust, best practice toolkit that grants comprehensive compliance and enforcement powers.

Victoria has been a pioneer for such a long time in the provision and regulation of assisted reproductive treatment. I think it was roundabout 1980 or 1981 when Victoria became the birthplace of Australia's first IVF baby, and it was the first jurisdiction in the nation to establish legislative safeguards for individuals undergoing assisted reproductive treatment with the groundbreaking Infertility Treatment Act 1995. And 1981 was an interesting year for me because that is when I started in the ambulance service. I became a paramedic in 1981, so the timing was quite interesting in regard to the first IVF baby. I remember it very well.

Our history in Victoria in championing the provision and the regulation of assisted reproductive treatment means that we know the unique challenges and complexities that surround donor conception. Of course donor conception is an increasingly common method of family formation, a really important method of family formation, and families should have easy access to it, should be supported through

it and should be allowed to choose in regard to the formation of their family through this process. It is not an easy process, as we have heard from some lived experiences raised in previous contributions.

That is why these amendments include additional funding for the appropriate organisations. It is really important that we do that and support them with the appropriate level of funding so they can deliver the support and the services to these families that are going through this process in every which way that we can. It is essential that these families have access to suitably qualified and experienced counsellors that provide quality and culturally safe counselling for those that require it and want it. It is a really important part of the process that the potential parents receive that appropriate level of counselling.

The Allan Labor government recognises that the issues that may arise when it comes to assisted reproductive treatment are not common in other health service areas and the issues that are unique to assisted reproductive treatment may require specific legal protections. On the other hand, these changes recognise that the most effective support may in fact be one that falls under the legislated functions.

This bill is a really important bill, and it covers a lot. It is quite complex in regard to the processes that are involved. We have referred to the Gorton review and the recommendations that have come out of that. I know there are many, many families that will rely on the outcome of this bill being passed, and as I said earlier, things like counselling and things such as that are very important to the people that are going through this particular process. Once again, I just want to thank the health minister and her staff. This is an important bill, and I commend the bill to the house.

Sam GROTH (Nepean) (12:32): I am going to make a short contribution on the Health Legislation Amendment (Regulatory Reform) Bill 2024. As we know, the health regulator was established in February 2024 to consolidate regulation across a range of areas sitting in the Department of Health. I also want to address, in the general section of the explanatory memorandum, the part that says the bill:

... will modernise and streamline compliance and enforcement powers to support a graduated, proportionate and risk-based approach to regulation by the Secretary to the Department of Health to prevent or minimise harm to health or safety of Victorians.

Before I go into that sort of stuff I just want to recognise those people who in this state are going through an IVF journey. My wife Britt and I were lucky enough to have twin boys 3½ years ago and did not have to undertake IVF to do so, but our boys were born premature and spent an extended period of time in hospital in a special care unit. In special care you see a lot of families that are in there with twins. The first question you get when you become a parent of twins is, 'Did you go through IVF to get them?' It is very, very common for people who go through IVF to get twins. We spent a lot of time in there with other families who had gone through that journey, many of them taking years and years to get there. I just want to acknowledge all those people that do go through that journey, the ones that do end up having children and are able to start a family, as well as sending, along with probably many people in this chamber, our thoughts and wishes to all of those who are undergoing that journey and who want to start a family of their own. I just want to start my contribution by acknowledging all of those families and wishing them all the best. I think all sides of the chamber would love to see that journey made as easy as possible for anybody who undertakes it so they can have their own family. I will leave that part there.

When you talk about general health commitments in this state, and I will keep my contribution fairly local, Rosebud Hospital, as I have spoken about many times and written to the Minister for Health about, continues to go with a lack of support. Previously it did have maternity services, but it no longer does as certain parts of that hospital have been closed down over time and it has gotten older. We have written many, many times to the Minister for Health with requests from constituents in my area, with firsthand accounts of their experiences. Every single one of those accounts does start with the fact that the staff, the nurses and everybody in that hospital does an incredible job, acknowledging the work

that they do and how fantastic it is. The challenge that we have, though, is that we do not have a hospital that is meeting the needs of the community outside of the fantastic work that those nurses do.

I just want to raise some of those concerns in here from those constituents directly. A couple of them relate to the hospital. A couple of them relate to services around health that are not so easily accessed in my area. The first one was an elderly constituent who contacted my office recently and spoke about the closest 24-hour pharmacy being at Peninsula Private. Peninsula Private is at least a 45-minute drive away one way and a 1½-hour return trip. They have very, very limited health services, and most others are only open until 7 pm, still a 25-minute drive, so even if you can access telehealth medical assistance, you cannot access medications after hours.

Another constituent said that what seems to be overlooked is the fact that they are down there and that they are primarily an ageing population. Many do not have their own licence any longer and are unable to drive and so rely on others to assist with transport. If they need emergency treatment, wait times for an ambulance can be excessive, and then transport to Frankston or Peninsula Private can take valuable time depending on where they live. Further down towards Portsea it will be a trip too far and valuable time lost. Even from Rye it can take an hour to reach Frankston depending on the time of day, and in the peak holiday season much longer.

To put that into context, when you think about some of the seats that Labor members hold, that would be like the member for Pakenham having to travel to Ringwood to get health care inside metropolitan Melbourne at a public hospital. I do not think anyone on the other side of the chamber would find that acceptable, so why anybody would find it acceptable for those people living on the Mornington Peninsula to have to do so, while we still suffer as being part of metropolitan Melbourne, I think just beggars belief.

I also want to address an FOI request that we submitted recently to the Victorian Health Building Authority trying to chase up details of the business case around Rosebud Hospital. We submitted an FOI request on 24 May this year seeking a copy of the Rosebud Hospital master plan and business case. In response to that FOI, the search identified three documents. Unfortunately for me and my constituents, that FOI request has been denied in terms of being able to view the documents because of three reasons: that it is cabinet-in-confidence information – the government is obviously looking at it; that the master plan is an internal working document and is therefore exempted under section 31, which does not allow that to be released; and that they are documents relating to trade secrets.

While ‘cabinet in confidence’ gets used around a lot of FOIs, I think the people on the peninsula deserve to know, after all this time, why they keep being referred to Frankston. I think the investment in Frankston is fantastic for the people there. But for me, the member for Mornington and the member for Hastings, all of our constituents use Rosebud Hospital regularly as their primary public health service. And seeing the government and these departments continue to reject providing the reasons, the business case or any sort of communication around why the health of people in the peninsula is being put second behind those who live closer to public transport systems, I think the people in my electorate deserve to know the reasons why. If there is a business case that says the hospital should not be built, then tell us that, stop keeping people under the false pretence that the hospital is not needed. The people down there know it is needed. Give us the information – tell us why – and make some commitment, like we did and we have and we continue to do, around the future of Rosebud Hospital. I urge the government to do more in health right across the state, but please do more to support those people on the peninsula who need that public health care.

John MULLAHY (Glen Waverley) (12:38): It is a pleasure to rise in support of the Health Legislation Amendment (Regulatory Reform) Bill 2024. From the outset I would like to thank the Minister for Health and her team for the tremendous work put into this piece of legislation. I trust it will make a positive impact on Victorians. I also would like to acknowledge the member for Bellarine for sharing her personal story. It is wonderful that you share your personal story; it makes it easier for people to share their story.

The Victorian people rightly expect that the government will make the necessary investments in upgrading and modernising their health system. They deserve a healthcare system which is affordable and efficient. They deserve the comfort of knowing that if they or their loved ones fall ill, they can get the care they need. This is what this bill is all about: improving regulatory frameworks to ensure that legislation reflects the needs of our healthcare system in serving Victorians. As new illnesses are discovered, new technology is implemented and new treatment methods are utilised, there is a clear need to make every effort to support our amazing healthcare workers. This bill makes amendments to several acts to do just that: to minimise risks of harm to Victorians by strengthening our regulatory framework systems and ensuring fair compliance with rules and enforcement.

Amending the Assisted Reproductive Treatment Act 2008 will result in the regulatory function being transferred to the Department of Health and the donor conception register also being transferred to the Department of Health. I would like to take a moment to discuss Victorians' leadership in the provision of assisted reproductive treatment, or IVF. The campaign to give people the gift of parenthood is inspirational and makes me proud to be a Victorian. Victoria is the birthplace of Australian IVF. The first IVF baby in Australia is a Victorian, and I want to commend the tireless efforts of those who have advocated for safeguards and support systems for those involved. The changes to the Assisted Reproductive Treatment Act outlined in this piece of legislation are the implementation of recommendations 56 and 78 of the Gorton review, which are designed to improve regulation and assisted reproductive treatment.

The bill also improves compliance and enforcement in the Drugs, Poisons and Controlled Substances Act 1981, the Health Services Act 1988, the Non-Emergency Patient Transport and First Aid Services Act 2003, the Public Health and Wellbeing Act 2008, the Radiation Act 2005 and the Safe Drinking Water Act 2003. All these changes, including to the Assisted Reproductive Treatment Act, have a purpose of improving the regulation of health services by ensuring greater compliance and oversight of the risk mitigation strategies deployed. For these regulatory functions to be applied effectively, regulators are being equipped with modern and accurate guidance strategies which are fit for purpose. These include the powers to issue improvement notices, prohibition notices, information or document production notices and infringement notices and to accept enforceable undertakings. By granting the health regulator a variety of options to choose from, it provides the flexibility to tailor their response depending on any specific context or conditions which may be relevant.

Having the ability to respond to breaches of law reactively and prevent any potential breaches proactively means that there is significant opportunity to minimise or prevent risks and potential dangers. This government also understands that with extended powers comes a greater responsibility for oversight and safeguarding mechanisms, and that is why this bill includes detailed safeguards as to how and when these new powers can be used. There are appropriate thresholds to limit when powers can be used as well as an accountability measure to determine whether reasonable grounds have been established to justify the exercise of any power.

In mentioning the specifics of this bill I want to take a moment to reflect on the Allan Labor government's proud record of supporting our healthcare system in the eastern suburbs of Melbourne. Many residents in the east are serviced by one of the biggest medical facilities in our state, the Monash Medical Centre. This government understands how critical it is to maintain and improve this significant piece of infrastructure. That is why in the most recent budget an overall package of \$572.5 million was committed for the Monash Medical Centre, and this includes for major works, which will expand capacity and modernise the facility for more efficient care. A new intensive care unit will be built as well as new birthing suites and operating rooms as part of an expansion of the emergency department.

I will just take a moment to thank the people down at the Monash Medical Centre, where my daughter Orla was born. We went in hoping for a nice, easy birth. Unfortunately it was 25 hours later in an emergency C-section that our beautiful daughter Orla arrived into this world. The treatment that she received down there was just amazing. We had to then take Orla to the children's hospital right next

door to get some antibiotics, and the treatment she got there was great as well. Thank you, Monash Medical Centre.

This investment will facilitate an additional 7500 more surgeries and 2400 more births annually, saving lives and giving the gift of many more. These investments are, quite literally, life changing. We understand that there are structural challenges because of the pandemic that need to be addressed. Additional pressure was put on our infrastructure and our workforce, which has impacted capacity and service delivery provisions. We also understand that these issues are multifaceted, which is why we are taking a multilayered approach to supporting our healthcare system. This is part of the \$8.8 billion in this year's budget to fund our hospitals, giving them certainty and security for the long term.

Strong and secure hospitals mean that patients can access quality care at a hospital nearby. However, as a consequence of the pandemic, there are systemic pressures on our hospitals and those who work in them. There is no point in having hospitals if there are no staff inside. I sat down just today with the mental health nurses of the Health and Community Services Union, and I want to thank them for sharing their stories with me.

Investing in our healthcare workforce is as important as investing in the physical infrastructure of hospitals, and that is why the Allan Labor government has funded nursing and midwifery scholarships. As part of a \$28 million investment, resources have been committed to supporting further training and development initiatives on top of the scholarship programs. Encouraging our youth to learn these skills and join the workforce is a generational commitment to fostering their talents and ensuring that they are equipped to serve our communities.

Further, to ease the pressure on hospitals and general practitioners, this government has stepped in with our transformative priority primary care clinics. In partnership with the federal government, we are continuing to deliver 29 of these centres, free at the point of use and open seven days a week. I and my community are lucky to be served by not one but two priority primary care centres located in my electorate. Glen Waverley district residents know that if they require urgent yet not life-saving care, they can pop down to 476 Blackburn Road in Glen Waverley from 10 am to midnight every day or they can attend the Forest Hill PPCC, which is open from 8 am to 10 pm and is located at 490–524 Springvale Road in Forest Hill.

I would again like to acknowledge the incredible work of the teams down at the Forest Hill and Glen Waverley priority primary care centres. Our community knows the important role they play in treating the ill and taking the pressure off our GPs and hospitals. When I was moving house to Glen Waverley over summer, my sister Christina, who was giving me a hand, unfortunately got her hand jammed between the door of the truck and the wall. We were fortunate to be able to head straight to the Glen Waverley Priority Primary Care Centre, where she got seen to straightaway. They are a great service and I thank them for all the work that they do.

We have also funded \$146 million in this budget to support Ambulance Victoria. We are backing the secondary triage service and medium-acuity transport service, freeing up ambulances to help those in urgent need.

For far too long women's health has been ignored, and this government is changing that with \$18 million that has been provided to 12 women's health organisations to support the incredible work they do. From preventative health services such as breast screening to community outreach and information campaigns, women's health is a priority for this government. I would like to take a moment to thank the member for Northcote, the Parliamentary Secretary for Women's Health, for visiting my electorate to discuss various topics at a women's health forum that we held with my constituents. I would also wish to give a special shout-out to the member for Mulgrave. Alongside many colleagues in this chamber and beyond, I was honoured to attend her Cancer Council fundraiser recently. It was a great event. I have so much more to say; however, I commend the bill to the house.

Nicole WERNER (Warrandyte) (12:48): I rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. This bill is especially close to my heart as it carries significant implications in the field of fertility and especially IVF and assisted reproductive technology. It is something that I really did want to speak to because, as many members know, I recently announced that my husband and I are expecting our first child in January 2025.

Today I am 19 weeks pregnant. It is very exciting, and it is at about this point in time that typically people will have a gender reveal. If you will indulge me, there are ones where people have a party where they shoot confetti cannons and it is the specific colour of the gender of the baby. I have been to ones where you bite into a cupcake and it is blue or pink. I even went to one where it was a golf ball and you had to putt the golf ball and it either was blue or pink dust that it exploded into. Again, if you would indulge me, it is at this point in time that people typically do share what the gender of their baby is. I thought there is no more privileged a place than this chamber, with all of my fellow parliamentarians across both sides of the aisle, for me to share what we are having, whether it is a little girl or a little boy. I am very pleased to announce today, at 19 weeks, that we are in fact having a little boy, which is very exciting. We are due in January 2025. We are very much looking forward to it. It has been a journey for us, and I am very pleased to announce it today in this place – breaking news. There we go. Thank you to my colleagues for being here with me for that. It is actually quite special.

There has been a bit of a baby boom in Parliament. The member for Mildura, I saw on one of my posts, said she would stop drinking the water in Parliament because she was afraid that she might catch what is going on in Parliament. In fact next year by January there will be five new babies here in the Parliament, and there will be three from the coalition side and two on the other side. That is just in the lower house, so who knows, and who knows what could happen between now and then. Very exciting indeed. Very fun. In fact it is a welcome change from where we were as a Parliament in 2003 under former Premier Steve Bracks. Victorian Labor MP Kirstie Marshall was a brave woman and brought her 11-day-old into Parliament, would you believe, and she was actually ejected from the Legislative Assembly all those years ago for breastfeeding her child in the Parliament. It is a long way that we have come since then to now having this baby boom in Parliament with all of these parliamentarians about to have babies. It is very exciting. I am glad that this is now a place that is family friendly, that allows and permits women to be working mums, and I am looking forward to being one myself.

At the heart of this bill is the proposed abolition of the Victorian Assisted Reproductive Treatment Authority, VARTA. While it is very unlike a Labor government to abolish a government entity, because they usually prefer to create more – they love a bit of red tape – it is a welcome change of pace. I just want to echo the member for Nepean, who did speak to the fact that across both sides of the house we want to make it as easy as possible for people who want to start families to be able to start families. That is absolutely what we are here to do and something that we want to support. As I mentioned earlier, my husband and I have been public about our fertility journey. In fact infertility affects one in six Australian couples, and those are the ones that we know of. I am sure the statistics are much higher than that. It is something that does impact a lot of people – a lot of couples, a lot of individuals. Whether your journey involves endometriosis or polycystic ovarian syndrome, PCOS, like me, whether it is unexplained infertility or whether it is that you have to go through an IVF journey to be able to start your family, we in this Parliament are supportive of that. We want to say that you are not alone in your journey and that we want to be legislators that make it easier for you to have your family.

We shared our story, and we spoke about how it was a diagnosis of PCOS for me that meant that there was a bit of a journey that we went through to be able to start our family, and we are really privileged and excited to be able to do that now. But coming out and sharing our story – the reason we did that was because we wanted to normalise the conversation around fertility journeys. It is so common and it is something that is, I do feel, not spoken about enough, so I am so pleased that we were able to do that. I am so pleased we were able to raise awareness in that space. Since then I have had so many families and so many individuals reach out to me and share with me their fertility journey, their road

to starting a family. There are so many out there that have been impacted by that, so to every family that has reached out, our thoughts are with you. To every family that shared with us their IVF journey, whether it is five or 10 years, and to every couple that has come and spoken to me about their unexplained infertility, whatever it is, I am so pleased that we were able to have that conversation and normalise this conversation around fertility, and I want to say again to you that you are not alone.

Fundamentally, though, this bill does not go to the heart of the problem facing women and their fertility issues. The member for Laverton was excited to say she was wearing her Labor red to show off Labor's great record on IVF, but the truth is, unfortunately, that the Labor Party does not have a great record on fertility. In the most recent budget the government has cut public IVF services by \$42 million, and we know that the moment delivering IVF is not convenient it actually gets dropped by those opposite because IVF is not one of their high priorities. Let us not forget in early 2022 Victoria was the only state or territory in the whole country to implement a code brown that suspended surgery and IVF services. It is surprising that those opposite state that they are so proud of their record on IVF when they were the only jurisdiction in Australia to suspend it. According to the Fertility Society of Australia and New Zealand, the Andrews government in 2022 and their singular decision to ban IVF meant some families will not achieve a pregnancy at all. I know that feeling of going through that process of hoping and praying and wanting to start a family but not being able to. I know that process of having those tests that you take – again, month in, month out, and being disappointed and going through that feeling of disappointment. I can only imagine the feeling of those families in 2022 when that code brown was issued. As I have said here before, there are families that are broken today because of that decision of those opposite, and I will not stand by and let them tout their support of IVF when I know that because of their cruel cancellation of IVF services there are pregnancies that unfortunately never happened and children that were never born.

The member for Laverton went on to say: why haven't members mentioned people in their electorate that are desperate for IVF? Certainly there are many that have reached out to me as we have come out with our story, and many locals that have talked to me. In fact I received an email today from the president of one of our local cricket clubs, who said that his daughter has been on an IVF journey for 10 years and they have just received good news that they are expecting their first child. There are many stories out there in all of our electorates on both sides – happy stories, sad stories and difficult stories of challenges that people have had. I think when the member said that, she might have said the quiet part out loud.

Victorians are desperate for IVF. They are desperate because the waitlists get longer and longer and desperate because Labor has ripped out fertility services from our rural and regional communities. So I say to those opposite: Victorians are desperate because the government has cut \$42 million from IVF services, which does make the waitlist longer. There are locals that have reached out to me from my electorate who have said that they have been on the waitlist for a long time, and unfortunately the public IVF system only permits them to have two rounds of IVF. I recently had a friend from within the electorate reach out to me and say that they at great cost had to fund three rounds of IVF which were unsuccessful then finally were able get onto the public IVF waitlist and undergo IVF through that system and have the two rounds of IVF that again were unsuccessful. It is so disappointing for those families. Victorians should not have to be desperate for IVF services, and we should not hold up the desperation as a badge of honour. I certainly would not come to this place and say that.

In closing, it is a bill that we support. We do want to make it as easy as possible for families. For all of those who are on their own fertility challenge or journey, our heart goes out to you, and we in this place support you.

Paul HAMER (Box Hill) (12:58): I will only have a short time before lunch before being able to continue after the break, but I do want to just start by saying that I strongly support this bill and acknowledge all the work that has been done and that the Minister for Health and her department and office have put in to create this important reform. I also want to acknowledge all the previous speakers. A lot of people have spoken really personally about their journey. At this stage I am probably not

going to be reflecting too much on my personal experience, but I know how important some of these issues are at an individual level and obviously how that translates into the wider community. Because if it is very reflective of the Assembly members, then it is obviously very reflective of the population at large. I do want to thank everyone for making their personal contributions.

The bill itself makes quite a number of reforms to a number of pieces of legislation. It changes regulatory frameworks across seven acts, including the Assisted Reproductive Treatment Act 2008; the Drugs, Poisons and Controlled Substances Act 1981; the Health Services Act 1988; the Non-Emergency Patient Transport and First Aid Services Act 2003; the Public Health and Wellbeing Act 2008; the Radiation Act 2005; and the Safe Drinking Water Act 2003. A lot of the reforms were announced back in December 2023 when the minister announced the establishment of the health regulator within the Department of Health.

Sitting suspended 1:00 pm until 2:03 pm

Business interrupted under standing orders.

The SPEAKER: I acknowledge the former member for Warrandyte in the gallery today.

Questions without notice and ministers statements

Suburban Rail Loop

John PESUTTO (Hawthorn – Leader of the Opposition) (14:03): My question is to the Premier. When did the government hire lawyers to advise on altering Suburban Rail Loop contracts?

Members interjecting.

The SPEAKER: The member for Sunbury can leave the chamber for half an hour.

Member for Sunbury withdrew from chamber.

Jacinta ALLAN (Bendigo East – Premier) (14:04): I am delighted to confirm for the Leader of the Opposition that, yes, there are lawyers working on the Suburban Rail Loop, just as there are construction workers working on the Suburban Rail Loop and there are designers. There are a whole range of people working on delivering the Suburban Rail Loop.

Members interjecting.

The SPEAKER: The member for Lara can leave the chamber for half an hour.

Member for Lara withdrew from chamber.

James Newbury: On a point of order, Speaker, on relevance, the Premier is being evasive. The question specifically asked about altering the contract.

The SPEAKER: The Premier was being relevant to the question.

Jacinta ALLAN: When you deliver important and transformational projects like the Suburban Rail Loop, you need a team of people to work on the delivery of these projects, to do a whole range of tasks. By 2026 there will be 4000 people working on the Suburban Rail Loop, and there will probably be a few lawyers in that mix.

John Pesutto: On a point of order, Speaker, on relevance, we just want a straight answer from the Premier. Has the government engaged lawyers to alter Suburban Rail Loop East contracts?

The SPEAKER: Points of order are not an opportunity to ask a question again.

James Newbury: Further to the point of order, Speaker, the Premier is required to be direct. Clearly the Premier is being evasive in not answering the question. The Premier is required to be direct in answering the question.

The SPEAKER: I cannot direct or compel the Premier how to answer the question, but the Premier was being relevant in relation to the question that was asked in relation to government hiring lawyers.

Jacinta ALLAN: Of course we are not the only one in town hiring lawyers at the moment. There is a lot of activity.

Members interjecting.

The SPEAKER: Minister for Transport Infrastructure, this is a warning.

John Pesutto: On a point of order, Speaker, this is the largest infrastructure project in Australia's history by way of blowouts. We are asking serious questions about the engagement of lawyers to alter those contracts. The Premier is mocking this chamber and mocking the purpose of this Parliament. Can the Premier just for once provide a straight answer?

The SPEAKER: The Leader of the Opposition can raise a point of order in the way of the form of a point of order. That was not the way to raise a point of order. The Premier to come back to answering the question.

Jacinta ALLAN: In terms of delivering the Suburban Rail Loop, we are absolutely engaging a whole range of Victorians to get on and deliver this transformational project.

John PESUTTO (Hawthorn – Leader of the Opposition) (14:07): The Premier hid the fact that she secretly talked with lawyers before cancelling the Commonwealth Games and hid the latest negotiations about the Metro Tunnel blowout. Why is the Premier again hiding the fact that she has sought legal advice, this time on the Suburban Rail Loop East project?

Jacinta ALLAN (Bendigo East – Premier) (14:08): The Leader of the Opposition finished his question referring to an allegation that I had hidden the fact that we had engaged lawyers to work with us on the Suburban Rail Loop project. I answered that in your very first question. I said in the answer to your substantive question that, yes, we had lawyers working with us on the delivery of the Suburban Rail Loop project. We absolutely do because we are determined to get on and deliver this project, with the thousands of jobs it will support, the delivery of better public transport, the cars it will take off local roads and the homes it will deliver in local communities. I will take my direction from –

James Newbury: On a point of order, Speaker, on relevance, previous Speakers have made it very, very clear that answers have to respond to the substance of a question, not generally. The Premier is abusing this place.

The SPEAKER: What is your point of order?

James Newbury: Relevance. The Premier is not dealing with the question.

Mary-Anne Thomas: On the point of order, Speaker, there is no point of order. The Premier has been very clear and direct in answer to both the substantive and this supplementary question. I ask that you rule the point of order out of order.

The SPEAKER: I believe the Premier was being relevant to the question in that it was about seeking legal advice on the Suburban Rail Loop East project. The Premier has concluded her answer.

Ministers statements: LGBTIQ+ community

Ben CARROLL (Niddrie – Minister for Education, Minister for Medical Research) (14:10): Wear It Purple Day strives to foster supportive, safe, empowering and inclusive environments for LGBTIQ+ people right around our great state. This is particularly important to me as the Minister for Education. Tomorrow our schools will be encouraged to participate in Wear It Purple Day. On this side of the chamber we are very proud of our Respectful Relationships initiative as well as our Safe Schools initiative. Our nation and our state are at their best when we embrace and celebrate diversity and strengths. It is who we are and who we love that matter most. Wear It Purple Day across the Education

State will be a very important initiative tomorrow. We will never back down from supporting our rainbow community. We are Victorians first.

I want to put on the record that I stand with the Minister for Equality in the other place in expressing my displeasure with the federal government for not including questions on gender identity and sexual orientation in the census in 2026. The federal government must not diminish and ignore hundreds of thousands of people from this community. We are proud to stand with the LGBTIQ+ community. Australian democracy depends on the census. We know on this side of the chamber that better data leads to better policy outcomes, and we are calling on the Commonwealth government to stick to their platform and stick with their promise and make sure the census delivers for all Victorians, particularly with those health interventions, those dedicated services and the dedicated funding to every part and every corner of our great state. Data from the ABS itself shows that people from the LGBTIQ+ community suffer double the rates of poor mental health compared to the heterosexual community. That is why we are getting on with the job to make sure the Commonwealth does everything in its power to make sure that every Victorian and every Australian is represented in the 2026 census and that they count.

Suburban Rail Loop

John PESUTTO (Hawthorn – Leader of the Opposition) (14:12): My question is to the Premier. On Tuesday the Premier said that:

Our government has committed to the Victorian community at two elections to deliver the Suburban Rail Loop East by 2035, and we are on track to deliver on that commitment.

Given that lawyers have now been hired to potentially change or cancel Suburban Rail Loop East, why has the Premier misled this house and the Victorian people?

Jacinta ALLAN (Bendigo East – Premier) (14:13): In answer to the second part of the Leader of the Opposition’s question, I did not, and in answer to the first part of his question, he is incorrect.

John PESUTTO (Hawthorn – Leader of the Opposition) (14:13): How much has been spent on Suburban Rail Loop East to date?

Jacinta ALLAN (Bendigo East – Premier) (14:13): I direct the Leader of the Opposition to budget paper 4, which was released in this house just a couple of months ago. The budget is updated in the usual way.

John Pesutto: On a point of order on relevance, Speaker, I asked the question on behalf of the opposition because the costs we are seeking to ascertain were buried behind the acronym TBC and in the contingency fund.

The SPEAKER: That is not the way to raise a point of order. The Premier has concluded her answer.

Ministers statements: health system

Mary-Anne THOMAS (Macedon – Leader of the House, Minister for Health, Minister for Health Infrastructure, Minister for Ambulance Services) (14:14): I rise to update the house on the Allan Labor government’s support for Victorians to access urgent care where and when they need it. This morning the Premier, local member Minister Erdogan in the other place and I joined Access Health and Community in Richmond to mark a huge milestone: half a million presentations to priority primary care centres since they opened. They now have a new name, urgent care clinics, making it easier for Victorians to navigate our health system. Urgent care clinics are there when you need to access medical attention but it is not a life-threatening emergency. Think cuts, burns, breaks, infections and other common illnesses and injuries. Across Victoria 29 clinics, including nine in rural and regional Victoria, are easing pressure on our busy emergency departments.

Patient surveys tell us that almost half of those people who have presented to our urgent care clinics would otherwise have gone to an emergency department, so that is hundreds of thousands of trips to

our EDs that have been saved for Victorians. We also know that 38 per cent of the patients accessing care are children and that 45 per cent of admissions happen after hours, so this is an initiative that is delivering for families. Our government's commitment has always been to help families where and when they need it most.

It should not be that difficult to see a doctor when you need to see one, but we know, after almost a decade of neglect from the former federal Liberal–National government, that Medicare is broken. What did those on the other side of the house have to say when the Medicare rebate was frozen?

James Newbury: On a point of order, Speaker, it is inappropriate for the minister to be attacking the opposition in a ministers statement again.

The SPEAKER: I ask the minister to come back to her ministers statement.

Mary-Anne THOMAS: The point is that, while those on the other side of the place have done nothing to advance the healthcare interests of Victorians, those on this side – *(Time expired)*

Suburban Rail Loop

John PESUTTO (Hawthorn – Leader of the Opposition) (14:16): My question is to the Premier. The Premier has previously said that she does not 'cut and run'. Why is the Premier cutting and running on the Suburban Rail Loop?

Jacinta ALLAN (Bendigo East – Premier) (14:17): I am absolutely delighted that our government is getting on and delivering the Suburban Rail Loop. The Leader of the Opposition might be desperate at every twist and turn to distract everyone's attention from that big date in September. It is not *Up There Cazaly*; it is 16 September.

James Newbury: On a point of order, Speaker, the Premier is debating the question.

The SPEAKER: The Premier will come back to the question.

Jacinta ALLAN: I was asked about our government delivering the Suburban Rail Loop, and I am delighted to inform the Leader of the Opposition, the house and the Victorian community that our government will absolutely honour our commitment to the Victorian community to deliver the Suburban Rail Loop.

I had a great conversation yesterday with my colleagues the member for Ashwood and the member for Glen Waverley. We spoke about how the local communities in their electorates are looking forward to the delivery of the Suburban Rail Loop, because they understand why it is so important. It is important because, if you want to go to Deakin University in Burwood or you want to go to Monash University in Clayton, you currently cannot catch a train to those really important education institutions, those really important centres of learning, centres of opportunity and places where tens of thousands of people go to work every single day.

When it comes to Monash University, it is our nation's largest research institute. That centre, that precinct around Monash University, does not just have a university; it has got a synchrotron, it has got Moderna, it is close to the heart hospital and it has got a big manufacturing precinct. You cannot currently get a train to this big and busy and important part of not just Melbourne and Victoria's economy but our state's economy. We know that whether you are a worker or a student or a healthcare professional, if you can catch a train to your place of work –

James Newbury: On a point of order, Speaker, the Premier is required to be direct in dealing with the question and relevant to it. The Premier is straying very far from the question.

The SPEAKER: The Premier answered the question directly at the commencement of her response. She is being relevant.

Jacinta ALLAN: We know that people want to be able to have the choice of using public transport to get to a place like Monash University, and the Suburban Rail Loop is going to deliver exactly that. But even more than that, around the six station locations of the Suburban Rail Loop East we have the opportunity to deliver 70,000 homes for Victorians close to public transport, close to jobs and close to services, exactly the places we know where Victorians want to live. That is why investing in the Suburban Rail Loop is an investment in our city, our state and our nation's economy that we simply cannot afford not to build, and we are absolutely determined to get on and build it.

John PESUTTO (Hawthorn – Leader of the Opposition) (14:21): Last Thursday the Premier said:

... when it comes to delivering the Suburban Rail Loop this is a project that the state simply cannot afford not to build.

Is this still government policy?

Jacinta ALLAN (Bendigo East – Premier) (14:21): The answer is absolutely yes. I draw the Leader of the Opposition's attention to the business case that was released in August 2021 that demonstrated that we simply cannot afford not to build the Suburban Rail Loop. I hope in the last two questions the Leader of the Opposition has this week that he continues to ask me about the Suburban Rail Loop. I hope in his last questions in question time for this month, maybe for the year – who knows what is coming up in September – he continues to ask me questions about the Suburban Rail Loop, because we are absolutely proud of our investment in infrastructure projects that are creating jobs right now. I tell you what, when you build nothing, like those opposite did when they were in government, you send the economy backwards and you take people out of work.

James Newbury: On a point of order, Speaker, the Premier was debating the question.

The SPEAKER: The Premier has concluded her answer.

Ministers statements: manufacturing sector

Vicki WARD (Eltham – Minister for Prevention of Family Violence, Minister for Employment) (14:22): The Allan Labor government's priority workforce projects are delivering jobs for Victorians. The latest project placed 111 jobseekers into engineering and manufacturing jobs. The member for Bayswater and I recently visited his local business NuForm, where we thanked owner Greg and Chisholm Institute for supporting seven new workers – workers like Naomi, who could not fulfil her dream of being a pilot due to health issues, instead finding a much-loved job as a fabrication apprentice. She is also completing a diploma of building and construction.

We are providing training and work opportunities in Victoria's booming manufacturing sector. We are supporting people facing barriers to employment. We are helping employers find the workers they need. We are charging ahead with the women-in-manufacturing work. We are helping employers find the workers they need. Employers and workers are benefiting from our government's work.

Manufacturing and engineering businesses have jumped at the chance to sign up jobseekers, like the Hardman group in Clarinda, Active Precision in Narre Warren North, Chelgrave in Hastings and Matthews Fabrication in Pakenham, who are working with us to deliver for Victorian jobseekers. We have also supported Rapid Machining in the seat of Croydon, which I am sure is welcome news for the Shadow Minister for Employment. These projects have helped more than 7400 people into employment in key sectors like aged care, construction and the clean energy economy. All employers are working with us.

Under the Allan Labor government, workers continue to secure employment, helping to address skills shortages. On this side of the chamber we have created 850,000 new jobs. In contrast, one in eight manufacturing jobs were lost in the first three years of that dismal government opposite. They only created 39,000 jobs in – *(Time expired)*

Melbourne City Council

Ellen SANDELL (Melbourne) (14:24): My question is to the Minister for Local Government. Council elections are coming up in October, but here in the City of Melbourne the voting system is deeply undemocratic. In the City of Melbourne, residents get one vote each while businesses get two votes each. That includes national and overseas business owners who may have otherwise never set foot in our city. It means residents living in our city get much less say on how their city is run than multinational corporations. In fact residents make up just 40 per cent of all votes in the City of Melbourne. Minister, will the Labor government finally fix this undemocratic voting system and bring back the commonsense principle of one resident, one vote?

Melissa HORNE (Williamstown – Minister for Casino, Gaming and Liquor Regulation, Minister for Local Government, Minister for Ports and Freight, Minister for Roads and Road Safety) (14:25): I thank the member for her question about local government elections. I appreciate the Greens have got a keen interest in the upcoming local government elections, because after all that is where they do tend to play most of the time. I do not know if the member is aware that recently we amended the Local Government Act, and that was to improve a vast array of protections to ensure there is a uniform code of conduct, there is mandatory training for local councils and there are a number of other –

Sam Hibbins: On a point of order, Speaker, the member for Melbourne asked a question that went specifically to the City of Melbourne Act. The minister is talking about the Local Government Act. They are two separate pieces of legislation, and I ask, on relevance, that the minister actually answer the question about the City of Melbourne Act.

The SPEAKER: I ask the minister to come back to the question.

Melissa HORNE: The answer is no.

Ellen SANDELL (Melbourne) (14:27): Minister, is the real reason Labor will not change the undemocratic voting system in the City of Melbourne because Labor relies on votes from big corporations and property investors and, if only residents voted, they might actually elect someone else, like the Greens?

Members interjecting.

The SPEAKER: Order! Member for Melbourne, could you repeat the last half of your question, in silence.

Ellen SANDELL: Is the real reason Labor will not change the voting system because Labor relies on votes from big corporations and property investors and, if only residents voted, they might actually vote for someone else, like the Greens?

Melissa HORNE (Williamstown – Minister for Casino, Gaming and Liquor Regulation, Minister for Local Government, Minister for Ports and Freight, Minister for Roads and Road Safety) (14:28): That is a fantastic question. I really thank the member for her question, because there is nothing that smacks more of desperation than trying to get your own candidate up in the upcoming local government elections. This is a democratic process. We look forward to the results in October 2024.

Ministers statements: renewable energy

Lily D'AMBROSIO (Mill Park – Minister for Climate Action, Minister for Energy and Resources, Minister for the State Electricity Commission) (14:28): I am delighted to update the house on how today, the International Day Against Nuclear Tests, we are reaffirming our commitment to deliver a cheaper, cleaner renewables future. Our 95 per cent renewable energy target will create 59,000 jobs for Victorians and investment and of course ensure Victoria continues to have, continuously, the lowest wholesale electricity prices in the country. Today the market operator confirmed how important our plan is. AEMO's annual 10-year reliability forecast says that with our government's commitments we will deliver the energy reliability that Victorians need well into the future, and we have met every

single renewables target that we have set. That tells you that we will absolutely get this work done. We are fast-tracking approvals. I call out the massive 350-megawatt battery that the Minister for Planning approved just this week, and the SEC of course continues to accelerate the build of new projects.

Why are we doing all of this? Because it is the quickest, cheapest way for us to rebuild our energy system. Meanwhile, the Mine Land Rehabilitation Authority, independent experts that provide advice to government and the community on what is safe and what is not safe for the Latrobe Valley coalmines, said in July that it would take decades to make sites safe. The lead times required to construct and commission nuclear facilities and the extensive studies that would be required to ensure the sites are fit for purpose and have adequate risk mitigation measures in place are both massive barriers to nuclear. It would take decades, which no-one has or can afford. On this International Day Against Nuclear Tests the opposition should basically go back and retest their policies, because they are a failure. We cannot afford the delay and disruption.

Government performance

John PESUTTO (Hawthorn – Leader of the Opposition) (14:31): My question is to the Premier. Strike 1 against the Premier was the \$600 million cancellation of the Commonwealth Games. Strike 2 against the Premier was her paying at least another \$888 million to settle unspecified issues with the Metro rail project. Strike 3 against the Premier was her decision to call in lawyers to alter the \$216 billion Suburban Rail Loop. How can Victorians ever trust this Premier again?

Members interjecting.

The SPEAKER: Order! Minister for Transport Infrastructure, this is your second warning.

Jacinta ALLAN (Bendigo East – Premier) (14:31): I do have a confession to make. I have enjoyed quite a bit watching the flurry of question time riding over the desk here during the last few minutes as they desperately try and pull together a whole grab bag of fabrication to deliver a question for the Leader of the Opposition. Maybe a little bit more time on QT prep than court prep would be in order for the Leader of the Opposition.

James Newbury: On a point of order, Speaker, on relevance, this question went to trust in the Premier. I understand why the Premier does not want to deal with the question, but that was the question.

The SPEAKER: The Premier will come back to the question.

Jacinta ALLAN: Can I say, when it comes to delivering the projects Victorians voted for, we will absolutely get on and deliver them. As I have said in this house previously, whether it was the Metro Tunnel or level crossings or the West Gate Tunnel or the North East Link and now the Suburban Rail Loop, those opposite have opposed them every step of the way.

Peter Walsh: On a point of order, Speaker, the Premier is debating the question. People also voted for the Commonwealth Games, and they are not being delivered.

The SPEAKER: The Premier was being relevant. She was not debating the question.

Jacinta ALLAN: Victorians know that on this side of the house we will continue to invest in the productive infrastructure, the frontline services and the jobs that Victorians rely on. As I said earlier, when you build nothing, like those opposite did when they were in government, you send the economy backwards. We will continue to focus on supporting jobs and Victorians.

James Newbury: On a point of order, Speaker, the Premier is defying your ruling.

The SPEAKER: The Premier has concluded her answer.

John PESUTTO (Hawthorn – Leader of the Opposition) (14:34): At every opportunity the Premier has publicly doubled down on Suburban Rail Loop East but has secretly called in lawyers to alter contracts. How is this the action that Victorians would expect from an honourable leader?

Jacinta ALLAN (Bendigo East – Premier) (14:34): I say in reference to the proposition put in the Leader of the Opposition’s question that it is wrong. It is absolutely wrong, and if I have not made that clear to the Leader of the Opposition in my answers to his first question, his second question, his third question and now his fourth question over the course of question time today, I do not know what else I can do. I do not know what else I can do to assist the Leader of the Opposition in telling him he is wrong.

John Pesutto: On a point of order, Speaker, on relevance and in response to the Premier’s comment, this is the fourth occasion this afternoon that I have simply asked about lawyers being hired to advise on altering contracts. The Premier can answer that question very easily: yes or no. The Premier has not answered that.

The SPEAKER: I cannot direct or compel the Premier how to answer a question, but she is being relevant to the question that was asked.

Jacinta ALLAN: I will say it for the fifth time: the Leader of the Opposition is wrong. The Leader of the Opposition asked a question. The Leader of the Opposition asked about honourable behaviour. What is not honourable is not standing up for people, refugees seeking support here in Victoria, against his federal leader. What is not honourable –

John Pesutto: On a point of order, Speaker, I ask the Premier to withdraw that comment.

The SPEAKER: I ask the Premier to withdraw.

Jacinta ALLAN: To assist the house, I will withdraw.

Ministers statements: Suburban Rail Loop

Jacinta ALLAN (Bendigo East – Premier) (14:36): Our government is getting on and delivering the Suburban Rail Loop, which will forever change the way Victorians move around our city and state. I have already mentioned the train connection to Deakin University Burwood and Monash University Clayton. I should acknowledge the great work of the member for Clarinda as well. He works very, very hard. By 2026 there will be tunnel-boring machines in the ground. There will be 4000 Victorians working on this project as we get on and deliver a project that is not just a transport project; it is a project that is going to deliver the opportunity for 70,000 homes around those six new station locations, exactly in the right place, exactly where Victorians want to live – good, affordable, livable homes connected to good, strong public transport.

One of the areas of course that we are delivering this in is Cheltenham, which is exactly a place with great schools, public transport and public health care. This is a little bit like the community a little bit further down the road in Brighton – another very well connected community. I want to acknowledge the hardworking Minister for Planning, who has just approved a brand new two-storey development of 84 new homes in exactly the right location. We all know how thrilled to the back teeth the member for Brighton is about this development, how much he knows it is important for young families in Brighton to live close to their loved ones, close to good public transport and close to jobs. That is exactly what we will continue to deliver: public transport and homes for more Victorians.

The SPEAKER: I acknowledge in the gallery former MLC Jan Kronberg.

Constituency questions

Polwarth electorate

Richard RIORDAN (Polwarth) (14:39): (790) My question this afternoon is for the Minister for Agriculture in the other place. The question I have for my constituency of Polwarth is: Minister, are

you prepared to come and provide the level of planning support through your department to determine the area of land that is required to support the dairy industry in the region? Since the department closed the native hardwood forests, the hardwood industry now requires extensive plantations right across Victoria. My question is: has your department done the necessary planning required to ensure there is enough viable land in Victoria to maintain both a solid and viable dairy industry and a solid and viable hardwood chip industry? That is an important question that the Corangamite shire requires – *(Time expired)*

Tarneit electorate

Dylan WIGHT (Tarneit) (14:40): (791) My question is to the Minister for Multicultural Affairs, and it goes to the \$3 million investment that the minister announced in November last year for initiatives to combat Islamophobia. Minister, how has this funding supported the Islamic community in my electorate of Tarneit? Islamophobia has no place in our state and no place in Tarneit. I am proud of the diverse and welcoming electorate that I represent. The government is committed to supporting and celebrating our multicultural and multifaith communities. Programs like these go a long way towards building a vibrant, cohesive, safe, inclusive and thriving community. The Melbourne Grand Mosque in my electorate is one of the organisations that has received a share of this investment, and they make vital contributions to this state and to my community. I want to commend MGM and other Islamic community partners across the state for the work that they undertake. I look forward to the response from the minister.

Gippsland East electorate

Tim BULL (Gippsland East) (14:41): (792) My question is to the Minister for Environment, and the information that I am seeking on behalf of a number of farmers in my electorate is whether there are plans to put any additional resources into feral pig control in East Gippsland. We have a situation where the impact not only on the environment but also potentially on farms is significantly increasing as these populations make their way south. As we know, this feral species is a vector of disease on top of the environmental damage they cause. It is a problem that we are not getting on top of; it is out of control. I ask the minister for any information on what plans he has to increase control measures.

Thomastown electorate

Bronwyn HALFPENNY (Thomastown) (14:42): (793) My constituency question is for the Minister for Jobs and Industry, Minister for Women and Minister for Treaty and First Peoples. The question I ask is: when will the Victorian Women in Manufacturing Strategy be released? The electorate of Thomastown has been the heartland of manufacturing. Whilst its reliance on manufacturing has reduced, there are still many new manufacturing businesses setting up shop and the minister has visited many. The strategy will support women to enter the manufacturing sector in greater numbers, addressing longstanding barriers for women, such as workplace culture and baseless assumptions, helping to address skill shortages and providing opportunities for well-paid and secure jobs.

Brighton electorate

James NEWBURY (Brighton) (14:43): (794) My question is to the Premier, and I ask: when will the state Labor government accept that its kindergarten policy is having a detrimental effect on providers based in metropolitan Melbourne? We know that the first years of life are the most important for learning and development. Sessional kindergarten offers quality preschool education to both three- and four-year-old children. Bayside's community kindergartens recently met to talk about the future of services in our community and the need for council to communicate better, improve delivery of infrastructure upgrades and improve long-term strategic planning. The group also discussed the importance of a sustainable funding model. Adequate funding will ensure that our kindergartens can continue to provide high-quality services. For Melbourne kinders, the cost of rent and overheads is greater than the government's funding model, and by blocking providers from seeking support from

parents to fill the shortfall Labor is risking the medium-term viability of quality Melbourne kindergarten providers.

Pascoe Vale electorate

Anthony CIANFLONE (Pascoe Vale) (14:44): (795) My constituency question is for the Minister for Environment, who is in the chamber. How is the rollout of the Victorian Labor government's landmark container deposit scheme progressing in my community of Pascoe Vale, Coburg and Brunswick West? The CDS scheme is of course all about taking that real action on the environment – sustainability, recycling, moving towards a circular economy and keeping our streets, parks, creeks and waterways clean. Since commencing in November 2023 residents across Merri-bek have been enthusiastically collecting their bottles, cans and containers to obtain that 10-cent refund, which as of July has equated to over 6.7 million bottles and cans being recycled and over \$670,000 in refunds have been provided to locals. Since commencing I have been pleased, with the minister, to secure and unveil eight local reverse vending machines across my community at Dairy Drive in North Coburg; 59 Sydney Road, Coburg; 801 Sydney Road, Brunswick; 10 Moreland Road, Brunswick; and 21 Domain Street, Hadfield. Three news sites were just recently unveiled in Brunswick West at Union Square, AG Gillon Oval and Dunstan Reserve. I have been really happy to get out to local schools, including Pascoe Vale North Primary and Pascoe Vale South Primary, to provide them with the free CDS bags to collect their cans.

Prahran electorate

Sam HIBBINS (Prahran) (14:45): (796) My question is to the Minister for Housing, and I ask on behalf of residents who reside in public housing: when will the government implement the recommendations laid out in the Ombudsman's report on the social housing complaints handling system? Two years have passed since the Ombudsman's investigation report and the public housing complaints system remains broken. Public housing residents in the Prahran electorate regularly contact my office about a range of issues, be they maintenance requests or security concerns, but a key source of frustration is a lack of a clear pathway for their issues to be reported, escalated and, if necessary, resolved. They are encouraged to call their local housing office, but when they do, it is so under-resourced that the calls often go unanswered or unreturned with requests not being followed up, leaving residents feeling frustrated and helpless and often reaching the point where their health and safety are at risk. The Ombudsman has subsequently released a progress report noting that the Victorian government has not yet taken any clear action to implement the recommendations. Given the government has now had well over a year to actively consider these – *(Time expired)*

Laverton electorate

Sarah CONNOLLY (Laverton) (14:46): (797) My question is for the Minister for Industrial Relations. Just a few weeks ago the Premier announced that as part of a suite of reforms our government will be banning the use of non-disclosure agreements, or NDAs, to prevent people, especially women, from disclosing sexual assaults and other forms of sexual harassment in the workplace. These agreements, which are by design intended to protect industry and trade secrets, have for far too long been used to silence women who have been the victims of sexual assault and to protect employers who engage in this reprehensible behaviour. As the minister knows, our government has a commendable track record on protecting victim-survivors of sexual offences, including making it easier for victim-survivors to control their own story and who gets to tell it, recent laws prohibiting police reports from being subject to defamation proceedings and of course the introduction of a positive consent model for sexual offences. All of these things are aimed to crack down on sexual offences and protect people from this behaviour. My question for the minister is this: what will the banning of NDAs mean for women like those living in my electorate of Laverton?

Shepparton electorate

Kim O'KEEFFE (Shepparton) (14:47): (798) My question is to the Minister for Police, and the information that I seek is what is being done to address the rise of crime in my electorate. Last weekend two men armed with a machete and a piece of wood tried to break into a Shepparton home before fleeing when they were startled by a resident. I know a 71-year-old woman who lives alone who was woken up to find a stranger by her bed. He demanded money and jewellery. Fortunately, she was not harmed, but you can imagine how horrifying that was for that woman and the ongoing impact that has had on her life. Residents should not have to live in fear. There has also been a significant increase in businesses being broken into. I have met with several businesses which are overwhelmed and dismayed. Gina, owner of Bicaró's restaurant, which has been broken into numerous times, said they did not go through their insurance a third time because if they did their insurance premiums would go through the roof. I also met with the owner of another business, which has only been operating for a short period of time, who said he has been broken into twice in the past week. Something has to be done.

Broadmeadows electorate

Kathleen MATTHEWS-WARD (Broadmeadows) (14:48): (799) My question is for the Minister for Public and Active Transport.

Interjections from gallery.

The SPEAKER: Clear the gallery. Members will remove themselves from the chamber. The house is suspended.

Public gallery cleared.

Sitting suspended 2:48 pm until 2:54 pm.

Kathleen MATTHEWS-WARD: My question is for the Minister for Public and Active Transport, and I ask: what can be done to improve safety for residents accessing Jacana station. I have been contacted by local resident Jacob Cummings, who often uses Jacana station at night. The 2022 budget included over \$1 million to improve access and safety at Jacana station, including CCTV. I am pleased that this has now been completed. I am also pleased that safety on Electric Street has recently been improved for pedestrians accessing the station from the east thanks to my advocacy and that of local resident Michael O'Connor. The installation of speed cushions and a zebra crossing have helped slow traffic and improved visibility of pedestrians crossing the road; however, safety and lighting for pedestrians accessing the station from the east also need to be improved, particularly for people accessing the station at night. Jacob has requested the installation of lighting and CCTV in the underpass to increase safety and perceptions of safety, and I believe the investigation of this suggestion and other potential mitigations such as leasing adjacent government land for food trucks – *(Time expired)*

Tim Bull: I have a point of order on some unanswered questions, and they are questions 1296 to the Minister for Government Services and questions 1104, 739 and 698 that are all to the Minister for Housing in the other place. Speaker, they are very important questions for people in my electorate, and I would welcome your assistance in getting them answered.

James Newbury: On a point of order, Speaker, the ongoing incidents that are occurring in the chamber are obviously a concern to all members. I know that the Parliament and the Presiding Officers have been working on trying to resolve those issues; however, in this particular instance the delay in arrival of security was very concerning for the house, and I would appreciate having a conversation with you about that.

The SPEAKER: That is not a point of order, member for Brighton. You know the procedure. If you have concerns, you are welcome to come and see me in my office or put it in writing.

*Rulings from the Chair***Constituency questions**

The SPEAKER (14:56): In relation to constituency questions from yesterday, I have reviewed them. The member for Bass asked the minister to provide an update on a matter, and the member for Mornington asked the minister to provide information, both of which ask the minister for an action. I therefore rule those members' questions out of order.

*Bills***Health Legislation Amendment (Regulatory Reform) Bill 2024***Second reading***Debate resumed.**

Paul HAMER (Box Hill) (14:57): I will continue from where I left off prior to the lunch break. We are talking about the Health Legislation Amendment (Regulatory Reform) Bill 2024, and I just wanted to, as some of the other speakers have spoken about, just talk a little bit about the health services in the Box Hill area and surrounds and the enormous investment that the Andrews and Allan government have actually put into the health services, not just locally but throughout the state. Obviously in our area particularly some of the recent investments are in relation to the priority primary care centre, and I note the Minister for Health in question time did note that those centres have been changing their name to 'urgent care centres'. The one in Forest Hill, as the member for Glen Waverley pointed out, is very proximate to the Box Hill electorate and one that I have frequented, and they do provide a fantastic service for the community, particularly out of hours.

The other facility that I wanted to mention was the Blackburn Public Surgical Centre, which is undergoing renovations as we speak. It is already undertaking quite a number of public surgeries. We know how much public surgeries were impacted by the pandemic, and it is great that the government was able to secure this facility and bring that online as part of the Eastern Health suite of services that they offer to provide more public surgery to patients in the eastern suburbs. It is really a credit to the entire health workforce – how hard they are working and how many hours they are putting in.

In relation to the bill itself, this is really talking about modernising and streamlining compliance and enforcement powers to support a graduated, proportionate and risk-based approach to regulation. Back in December of last year the minister did announce that there was the establishment of a health regulator within the Department of Health, and this was about making our health regulators more responsive and ensuring that Victorians can be kept safe and making sure that they have a modern health regulator that can look out for them.

It has sometimes been described as creating a superteam of regulators, ready to respond to matters across the health sector in consolidating resources where their needs are most important. The amendments that have been proposed in this bill will beef up the powers of the health regulator to clamp down on those not meeting the required standards. It will also give the regulator the power to issue improvement or prohibition notices, information or document production notices, infringement notices for prescribed offences and to accept an enforceable undertaking. I think that all Victorians would appreciate those reforms to assist in the regulation of our health system.

Another key element of the bill is to amend the Assisted Reproductive Treatment Act 2008. As many speakers have previously mentioned, the journey to starting a family can be a very difficult one and often does require assistive reproductive treatment. I really want to again thank all of the members who have shared their stories. It is a very personal story. For many it is a very draining time, not just emotionally but physically as well, to go through that process. Those members who shared that, I really want to call all of them out. I also want to put on record my thanks to this government for actually seeing the need for having public IVF services. I think it is such a huge game changer. IVF services and assisted reproduction should not just be accessible to those who have the money but

should be accessible to all. We know from the evidence that it often is not first time lucky; for many people it can take years until a successful conception can happen. As I was saying before, it is physically and emotionally draining, but it can also be financially draining by having all of those repeated treatments, so the public access to that is so, so important.

Australia and Victoria do have a really long history in the IVF space. The first Australian IVF baby was born in Victoria in fact in 1980, and that achievement was a collaboration with doctors from Monash University. It really paved the way for an amazing string of successes and Victoria being a world leader in IVF. In 1983 Monash IVF achieved the first ever baby born from an embryo frozen prior to transfer. Then in 1989 the first IVF surrogate birth in Australia happened here, again in Victoria, really showing that Victoria has for decades been leading the way in assisted reproduction. I think we would all agree that that is for the betterment of the state. Anything that we can do to encourage and assist families and women who wish to conceive and wish to start a family I think is something that really should be celebrated.

Victoria was also the first jurisdiction in Australia to recognise the needs of people who were conceived through donor treatment procedures to have access to information about their genetic heritage. We have seen how important that is for people in terms of genetic diseases, understanding what treatments are available and understanding that for their own future. We have come to the stage now where in 2021 there were almost 20,000 births in Australia which were a result of IVF treatment. It is a terrific initiative, and I commend the bill to the house.

Natalie SULEYMAN (St Albans – Minister for Veterans, Minister for Small Business, Minister for Youth) (15:05): I move:

That the debate be now adjourned.

Motion agreed to and debate adjourned.

Ordered that debate be adjourned until later this day.

Justice Legislation Amendment (Integrity, Defamation and Other Matters) Bill 2024

Council's amendments

The ACTING SPEAKER (Daniela De Martino) (15:05): I have received a message from the Legislative Council agreeing to the Justice Legislation Amendment (Integrity, Defamation and Other Matters) Bill 2024 with amendments.

Ordered that amendments be taken into consideration immediately.

Message from Council relating to following amendments considered:

1. Clause 50, page 50, line 4, after “64(6)” insert “of the **Freedom of Information Act 1982**”.
2. Clause 108, page 85, lines 24 to 26, omit all words and expressions on those lines and insert –
 - (k) disclosure for the purposes of making a complaint to the Integrity and Oversight Committee; or
 - (l) disclosure as is otherwise authorised or required to be made by or under this Act.

Note

See also sections 39 and 40 of the **Public Interest Disclosures Act 2012**.”’.

Anthony CARBINES (Ivanhoe – Minister for Police, Minister for Crime Prevention, Minister for Racing) (15:06): I move:

That the amendments be agreed to.

In speaking to these amendments, can I just say that the Integrity and Oversight Committee can accept complaints about the Victorian Inspectorate in very limited circumstances in relation to the committee’s monitoring and review function. The intention of the offence provision is not to displace this function but to ensure that the intent of the offence is clear. The Council passed a house

amendment to clause 108 of the bill to explicitly provide an exception to the offence for disclosure to the Integrity and Oversight Committee – that is the parliamentary committee – for the purposes of making a complaint about the Victorian Inspectorate. The IOC can also receive, handle and investigate public interest disclosures about the Victorian Inspectorate. The Public Interest Disclosures Act 2012 is clear that a discloser is not bound by a provision of any act that imposes a duty to maintain confidentiality with respect to a matter or any other restriction on the disclosure of information. The bill does not amend these protections in the Public Interest Disclosures Act. The house amendment passed by the Council references the relevant rights under the Public Interest Disclosures Act in sections 39 and 40 to ensure that this is clear.

I would like to thank members of the Integrity and Oversight Committee for their consideration and feedback on the integrity amendments in this bill, particularly the member for Brunswick, who is the chair of the Integrity and Oversight Committee. I will leave my comments there for other members to make contributions. I commend the amendments to the house.

Michael O'BRIEN (Malvern) (15:08): The opposition is pleased to support these amendments given that they are in the exact same terms as amendments that we circulated in this house when the bill first came before us a number of weeks ago. I am pleased to see that the government accepted the wisdom that was inherent in the amendments that we circulated. They were drafted by the Office of the Chief Parliamentary Counsel, and I will take this opportunity to thank the Office of the Chief Parliamentary Counsel for the great work they do. They not only work with governments, as I know from when I was a minister, but also work with the opposition, independent members and crossbench members of Parliament. They do an excellent job. Thank you very much to the OCPC for all your great work.

We do think it is important that integrity bodies have appropriate abilities to receive disclosures in a way which encourages people who want to blow whistles to come forward. We did think that this was a gap in the bill as it was originally drafted by the government, so we are pleased to see that these additional opportunities for disclosure to the Integrity and Oversight Committee have been put into place. I note that there has been a change to the membership of the IOC. The member for Mulgrave has understandably stepped away and the member for Tarneit I think has come on board, so there will be more three-piece suits and Carlton supporters on the IOC, and that can only be a good thing I am sure.

We were slightly disappointed that some amendments that were moved by my colleague Mr Mulholland in the other place did not receive the support of the other place. There were amendments because the government drafted in this bill the ability for the Premier to receive advance copies of all integrity agency reports before they are tabled in the Parliament. I just wonder why it is that the Premier feels that she needs to have advance notice of what integrity agencies report. The Premier is first among equals, but she is among equals. Why shouldn't the Premier be receiving this information at the same time as everybody else? This seems to be a case of the government choosing to stack the deck with integrity reports to guarantee the Premier can receive advance notice of what is coming. Given that we are talking about a 10-year-old government, the chances are that integrity reports are not likely to be about the opposition and are not likely to be about crossbenchers; they are far more likely to be about members of the government of the day. We understand the politics of this, but I do not know that it really enhances the integrity of the process at all. Having said that, the particular amendment we are considering is one that was drafted and initiated by the opposition, and to that extent we certainly support it. We wish the rest of the bill a speedy passage.

Motion agreed to.

The ACTING SPEAKER (Daniela De Martino): A message will now be sent to the Legislative Council informing them of the house's decision.

Health Legislation Amendment (Regulatory Reform) Bill 2024*Second reading***Debate resumed on motion of Mary-Anne Thomas:**

That this bill be now read a second time.

And Tim Read's amendment:

That all the words after 'That' be omitted and replaced with the words 'this house refuses to read this bill a second time until an expert panel comprised of representatives from the legal sector, specialist counsellors, people with lived experience of donor conception and assisted reproductive technology, and people with other relevant expertise has examined the implications of the dissolution of the Victorian Assisted Reproductive Treatment Authority and that the findings of this panel are tabled in both houses.'

Kim O'KEEFFE (Shepparton) (15:12): Today I rise to make a contribution on the Health Legislation Amendment (Regulatory Reform) Bill 2024. Firstly, it was so wonderful to hear the member for Warrandyte's announcement that she is expecting a baby boy. There is quite a baby boom happening in the chamber at the moment. We are very much looking forward to news from the member for Euroa and the member for Kew. Obviously births are coming along very soon.

I will get back onto the bill. I would like to thank the member for Warrandyte for sharing her personal experiences. We will get to some of the IVF and other difficult conception stories along the way, but sharing her story not only with us here in this place but also more broadly helps others that are going through conception challenges. I thank all the speakers on the bill that have shared their own experiences, including some of the men in the chamber. It is really great to have the men included and hear a diverse range of experiences.

The bill will make amendments to regulatory frameworks in seven acts to modernise and streamline compliance and enforcement powers to support a graduated, proportionate and risk-based approach to regulation by the Department of Health to prevent or minimise harm to the health or safety of Victorians. In addition, the bill also seeks to amend the Assisted Reproductive Treatment Act 2008 to abolish the Victorian Assisted Reproductive Treatment Authority and improve the regulation of assisted reproductive treatment by transferring the regulatory function to the Secretary of the Department of Health and strengthening compliance and enforcement powers. Further, the bill also seeks to transfer the management of the donor conception registers to a new donor conception registrar employed by the Department of Health.

The Department of Health has a diverse range of regulatory responsibilities, including child safety, communicable disease, medicines and poisons, legionella risk management, pest control, radiation safety, food safety, private hospitals, day procedures, non-emergency patient transport and first aid providers, tobacco, e-cigarettes and safe drinking water. Some health regulation schemes have not kept pace with modern best practice regulation design and do not include common midrange compliance and enforcement powers, limiting the ability of the regulator to take graduated, risk-based and proportionate regulatory action to prevent harm. The bill improves compliance and enforcement powers across a number of regulatory schemes. The bill includes powers for the regulator to issue improvement and prohibition notices and will enable the health regulator to choose the right tool at the right time, respond to noncompliance proactively as well as reactively and prevent or minimise the risk of harm to health and safety.

One of the main purposes of the bill is to amend the Assisted Reproductive Treatment Act 2008 in relation to abolishing the Victorian Assisted Reproductive Treatment Authority, VARTA, by providing for the employment of a donor conception registrar and transferring certain functions and powers from VARTA to the Secretary of the Department of Health and the donor conception registrar. VARTA, since its establishment, has been providing independent information and support to Victorians and health professionals regarding fertility, infertility, assisted reproductive treatment and the best interests of children born. In addition VARTA regulates the provision of fertility treatment in

Victoria to help people understand what they can do to improve their chances of conceiving and support those involved in donor conception to get the information they need and achieve their preferences. It can be a very complex process, as we know, and over time, with increasing demand for this way of conception, we are sure people will need more support as the need continues to grow.

Working in my business for many years, my clients were predominantly women, and I saw firsthand the struggles and tribulations that many women go through trying to conceive. I can also remember when I conceived my first child. One of my clients was struggling at the time to conceive. She and her husband were having tests and trying to find out why they could not conceive. It was hard to share my joy when I knew what they were going through. Going through IVF can have an enormous effect on a couple and their families, their life, their relationship, their finances and their careers.

I also saw firsthand the process of IVF when a friend's daughter had turned to IVF to help her conceive. The lead-up to this decision can be such a stressful time, with the couple wanting to start a family but having issues trying to conceive. Most couples tend to think that when they want to start a family it will automatically happen, and it can be such a shock when it does not happen or does not in the timeframe they were hoping for. It can cause a range of emotions. Correct support and medical advice do play a significant role, and in some cases counselling is needed. The couple I knew did end up turning to IVF, but it was not successful the first time. It can be heartbreaking for all of the family; her mother is a very close friend of mine. It was also very costly. Fortunately on their second try they did conceive, and now they have a beautiful daughter, who recently turned six. We need to ensure that everyone has access to IVF, should they require it, and that it is affordable.

The first Australian IVF baby was born in Victoria in 1980 – Candice Reed, only the third IVF baby born in the world at the time. Assisted reproductive treatment has become an increasingly common way for Victorians to grow their families, so it is important that we as a state have specific regulations for this sector, in particular for donor conception treatment, and especially that we have in place safeguards for children who may be born as a result of treatment as well as for donors, surrogates and those undertaking treatment.

As VARTA currently regulates assisted reproductive treatment in Victoria, to address certain recommendations in the Gorton review the amendments that the bill makes include changes to the functions currently performed by VARTA under the Assisted Reproductive Treatment Act. Further, the management of the donor conception registers will be transferred to a new donor conception registrar under the bill. This will be located within the Department of Health and will be administered separately from the regulatory functions. Counselling before information is accessed from the registers or a contact preference is lodged will transition from mandatory to voluntary, ensuring the rights of individuals to make an informed choice about their needs are respected. Counselling will continue to remain mandatory before consenting to treatment or consenting to be a donor. The Assisted Reproductive Treatment Act will also continue to require that people are provided with the information that they are entitled to from the donor conception registers in a supportive way and that they also have access to resources to help them make informed decisions.

Referring back to the Gorton review, the amendments listed in the bill will seek to reduce the unnecessary regulatory barriers to the movement of donor gametes or embryos that are formed from them into or out of Victoria, while maintaining safeguards and existing requirements. As such, a requirement to have pre-approval from the regulator before moving donor eggs or sperm into or out of Victoria will be replaced with the requirement to certify that specific criteria are met, providing additional clarity and reducing delays. A donor conception advisory group will be established, which will include experts and people with lived experience, to assist with the implementation of these changes by providing ongoing advice and expertise in relation to donor conception. More details need to be provided about this new advisory group in terms of what the membership will look like, the amount of people sitting on the group and other determined details.

Donor conception is an increasingly common method of family formation, and it can present with unique challenges and complexities for those involved. The proposed reforms include plans to deliver funding for an appropriate organisation with suitably qualified and experienced counsellors to deliver quality, culturally safe counselling for those involved in accessing the registers and those who wish to access counselling. The welfare and interests of persons born or to be born as a result of treatment procedures are paramount. It is acknowledged that assisted reproductive treatment raises issues that are not common to other health services for those accessing treatment, for people conceived through donor treatment procedures and for donor surrogates and that these issues may require specific legal protections.

In addition, the bill makes minor or miscellaneous amendments to a number of acts. The bill seeks to amend the Drugs, Poisons and Controlled Substances Act 1981 to allow for the minister to amend the Victorian Poisons Code to remove, substitute or incorporate amended provisions from the poisons standard relating to the supply or possession of certain scheduled medicines. The bill also corrects an error in the general immunity provision in the Public Health and Wellbeing Act 2008.

It is critical that health is a priority, and we need to ensure that every Victorian has access to health. On that final note, I really need to stop and remind the chamber that we need to provide perfect health services for all communities. GV Health in my electorate is still waiting for funding for stage 2. Stage 1 was funded. Stage 2 includes an integrated cancer centre, and we know that when people are going through cancer they need to have access close to home. We also have a helipad as part of stage 2. As you can imagine, in the growing region in which I live we do not have a helipad. Having a helipad means that people can have immediate support. Also, at the moment we do not have enough car parking around our hospital, and that includes for our medical staff.

This government needs to stop and ensure that all Victorians – all people within all communities – are supported. This government is not supporting all of our communities when it comes to health, and I urge the government to stop and think about what that means to all Victorians.

Nina TAYLOR (Albert Park) (15:21): I am very pleased to rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. It is certainly, I have to say, a very emotional subject matter to speak to. It was very moving to hear from those who have, certainly in the chamber, shared quite candidly about having endured some fairly difficult and heart-wrenching processes to be able to get to the point of pregnancy and to deliver babies, which they probably had dreamed for many years of being able to do. I am really grateful to those who have been able to share in the chamber. I certainly think it adds to the experience of Victorians who may be watching or may read the debate afterwards or may simply hear of the legislation to know that we can connect with that particular vulnerability.

I have to say, on a lighter note, it is lovely to have a number of pregnancies in the chamber. It is innately positive, and it also shows changing times. We are in a different era. Once upon a time, once you got pregnant that was it: you stopped your job and it was the end. I have to say it is also a real positive in that sense for all the right reasons. Enough of that topic, but I just wanted to say it only enhances the workplace that we are in.

Coming back to the core premise of the bill, really it is about strengthening health regulation to better protect Victorians – at the end of the day that is what this is doing – including those who are accessing or born through assisted reproductive treatment. It also made me reflect. I remember a friend in senior school who had gone through cancer. She was confronted with potentially never being able to have children, a very difficult decision at any stage of life where you are able to have children, but for someone in her senior years of high school it was particularly difficult. But thanks to scientists, thanks to their magnificent ability to develop this technology, she was able to have her eggs harvested and put aside, and that meant that she had hope for the future. I am very grateful and thank scientists for their continuing work in supporting this amazing technology that is already delivering so many – I am going to say magical – outcomes, because obviously every birth is a miracle. It is a wonderful thing.

A couple of things I did want to pick up on are that there have been no cuts to public IVF, and we are getting on with delivering our commitment to establish public fertility services in Victoria. Why is this important? Because it is easing the financial pressure on families during what is already a difficult experience. The 2021–22 Victorian budget delivered \$70 million in funding to create an Australian-first public IVF system as well as an egg and sperm bank. The 2023–24 budget invested a further \$49.9 million to expand and extend the public fertility program, and the 2024–25 Victoria budget builds on this investment with an additional nearly \$2 million in funding for a public egg and sperm bank. When fully established, this over \$120 million program, funded and delivered over five years, will have the capacity to support up to 5000 Victorians every year to access these services, helping them save up to \$10,000, which is significant. It is certainly inspiring to see that so many Victorians will be able to access this very important technology.

A couple of other matters that I do want to speak to are the SafeScript elements. I am just going to divert here and then come back to some other elements of the bill, but they are actually part of the bill. We are looking at strengthening the regulations, not the least, I should say, by enabling the health regulator to ensure that clinicians are complying with the mandatory requirement to check the SafeScript clinical decision-making support tool, helping to protect Victorians from accidental prescription drug overdoses; better monitoring and rectification of noncompliance, with safe storage requirements for schedule 4 and schedule 8 medicines; and prohibiting the use of unsuitable vehicles for non-emergency patient transport until safety issues have been rectified. There were some concerns, naturally, about persons who might go to a number of doctors, unfortunately nurturing a very unhealthy intake of medication. Overmedication is essentially life-threatening, and it can potentially have devastating consequences, hence the imperative for these regulations to better strengthen the power of the regulator to monitor and protect Victorians in that regard.

With regard to the counselling elements, which of course are very, very important – I am coming back to the issue of assisted reproductive technology – we are supporting choice and informed decision-making by making counselling requirements for disclosure of information on the register voluntary instead of mandatory. But I would very much like to emphasise that what this legislation is doing is still making sure that people can access the counselling. The actual counselling services are not being withdrawn as such, and I think that is a very important point. It is important to note that counselling remains a fundamental and important safeguard of the act. All other counselling requirements in the act will continue as mandatory. For example, donors and recipients will still be required to undertake counselling before they consent to the use of donated material in a treatment procedure.

We know that whilst donor conception is an increasingly common method of family formation, it can present unique challenges and complexities for those involved. I think that goes without saying, and it has been well articulated in the chamber to date. This might include donor-conceived people who find out they are donor-conceived later in life or donors who donated under the previous conditions of anonymity. You can see inherently the complexity and the emotional turmoil that could be connected with these aspects of being a donor or a child who is born through donated gametes. Many stakeholders, particularly donor-conceived people, have told us how valuable counselling was for them personally, so we absolutely are backing in the counselling.

To ensure these important supports remain available to Victorians, we will deliver funding to an appropriate organisation with suitably qualified and experienced counsellors, focusing obviously on high-quality counselling, to deliver quality, culturally safe counselling, because that has also been emphasised as being understandably very important for those who wish to access it. In addition, the new donor conception registrar will be required to provide explanatory material to anyone who applies for information from the registers or who can lodge a contact preference under the act. I should say, very importantly, that this material will be developed with specialist input from experts and deal with matters currently covered during mandatory counselling, such as rights and duties of the parties, the potential implications of disclosure and where to access support. We can see how this is also providing better protection for Victorians.

Another point: I did think it was a little unusual before that there were some comments made about mental health and our backing in of mental health. I do remember once upon a time the opposition being rather reluctant to back in financial aspects of mental health reform. It is vivid in my memory.

Members interjecting.

The ACTING SPEAKER (Daniela De Martino): Order! Member for Lowan, you are not in your seat.

Nina TAYLOR: I am just saying I did think that that was a little unusual in the context of what we are discussing here.

However, coming back to the bill, noting that counselling is an important aspect of the bill, I certainly commend the minister and all the hard work of all the stakeholders who have had input and continue thanking, as I was saying from the outset, the scientists who continue to deliver this amazing technology that is helping to deliver beautiful babies for Victorians and of course internationally as well where such technology is supported. I trust that better regulation will ensure that Victorians have better protection into the future in this very vulnerable and very delicate but very important space when it comes to delivering children for our great state of Victoria.

Jade BENHAM (Mildura) (15:31): I am more than happy to rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024 today. I am more than happy to speak on anything that helps to assist with positive health outcomes in this state, and there is a fair bit in this bill. I know that there have been many members in this place today sharing their personal stories, which I appreciate because it does add humanity to things like this, to regulatory reform. Obviously the member for Euroa has –

Kim O’Keeffe interjected.

Jade BENHAM: Yes, she has had to leave the building because of her delicate situation and some occurrences during the week, so we wish her all the best. I will put on the record that I am predicting that that baby is coming sooner rather than later, and it will be a boy.

A member interjected.

Jade BENHAM: No, it is not going to be a wombat. But also of course the member for Kew – being pregnant is obviously one of the miracles of life. I have said to both of them over the last week to take it easy – ‘You’re growing elbows and shoulder joints and brain matter, and those things are complicated.’ I will come back to that later, because I have a little story of mine to share as well.

When going through this bill, there is a fair bit to it. I am always full of stories, and I did think of a few while I was going through this. One of them was the Safe Drinking Water Act 2003 that this bill makes amendments to. I am very, very lucky in that where we live we live off rainwater – we are not connected to town water at all. In tropical north Victoria, out where we live in a farm zone, we live on rainwater. But as a child growing up in the 1980s we were encouraged to take fluoride tablets. You might remember this, Acting Speaker De Martino. They were little coloured tablets. Apparently they paid off. I was at the dentist last week and she said ‘You must be a fluoride tablet baby’ because of my still perfect teeth. It may have something to do with my Mediterranean background; I do not know. But safe drinking water obviously is very important. I was talking to a couple of Rotary clubs over the last couple of months that are doing projects to help provide safe drinking water overseas, which is one of the great things that Rotary clubs right around the world do. That got me thinking about that.

The amendments to the Non-Emergency Patient Transport and First Aid Services Act 2003 allow me to give a shout-out to the wonderful work of the Royal Flying Doctor Service, who are very active in our community both with their GP service that they have acquired over the last few years and now with their community transport. Robinvale is an hour away from Mildura Base Public Hospital and

that health precinct there. It is very important that people can get from Robinvale to Mildura. They have come together in the Northern Mallee Integrated Partnership, which I talk about often.

The Royal Flying Doctor Service does a great job between those two and also Mallee Track Health and Community Service. There are three of them: Mallee Track Health and Community Service, which is a multipurpose service; Robinvale District Health Services, which is also a multipurpose services; and the subregional hospital, which is Mildura Base Public Hospital. They have all come together in what is known formally as the Northern Mallee Integrated Partnership, which allows them to share resources. There is a huge amount of work that has gone into this, with such positive outcomes for service delivery, particularly in those smaller towns serviced by RDHS and Mallee Track, with them being able to offer virtual acute care again, being able to offer some radiology services potentially and expanding that care that we hear is so important to deliver close to home.

Noting how well the Northern Mallee integrated partnership is working and has worked whilst maintaining individual governance for each health service and individual administration, of course being able to share some of those back-of-house resources allows a more cohesive service right throughout the region, which is geographically huge. It has worked so, so well. I was reading the health services plan over the last week or so, noting that the Mallee network, which is now an option on the table, is essentially a more formal agreement between these three health services, really formalising that partnership between the three health services. That in my mind, again, allows us to maintain the local governance, the individual boards and the individual administration but to share resources both clinical and back of house. That in my mind is a no-brainer. That is where this should go to avoid being sucked up into a much, much larger network that is hours and hours away and geographically so hard to get to for people in our region. The Mallee health network is a no-brainer rather than being absorbed into Loddon Mallee, which I think would end up – I mean, who is to say? If we use Grampians Health as example, and that is the direction, it would be a disaster. The Mallee health network, given that it is essentially, from my understanding, a rebranding of the Northern Mallee integrated partnership, which again has worked so well up to this point, I think again is a no-brainer.

The member for Shepparton mentioned before the need for GV Health to have a cancer centre. Mildura has a cancer centre, Icon Cancer Centre. They launched 18 months ago, I think. It has completely changed the landscape of cancer treatment in regional Victoria. It really has. We have a radiation bunker there now. We have the ability for people to have radiation treatment onsite, close to home – but, again, geographically huge. Mildura Health Foundation at the moment are of course building accommodation, a suite of self-contained apartments, so people that are travelling from Robinvale, Underbool, Walpeup and Murrayville over near the South Australian border can actually stay quite comfortably while they are having their radiation and cancer treatment. In fact I am doing a fundraiser. I will be running again the Melbourne half marathon in a bid to add hopefully a significant amount of money to that project. The slab is down and the frames are up, so it is happening. But I am running the half marathon, doing the kays so patients do not have to. If anyone wants to donate, then head to my socials.

Coming back to the assisted reproductive treatments that a lot of people have spoken about, with the 2 minutes I have left, it is wonderful to see lots of pregnancies around this place at the moment. It stirs something in you, I think, as a female. I love babies, but my journey to motherhood was not so smooth. IVF certainly was not an option like it could be now. The Mildura Base Public Hospital was the first to offer public IVF in the state.

My eldest, who is nine years old, was in fact my sixth pregnancy, so he is my rainbow baby. It was at the tender age of 35, so it was not easy. I did not love pregnancy; I loved the outcome of the pregnancies. After six goes at it and finally getting one through to the keeper, I could not have been happier. Then after that, it set something off, and another one came along unplanned a few years later. It is a wonderful, wonderful thing to see so many babies due to arrive soon in this place. The clucks are getting very loud, I can tell you. But at the tender age of 44, it is off the cards, and I have stopped. The member for Warrandyte said earlier that I had commented on her Instagram that I have stopped

drinking the water in this place. This is true – just in case. I know that it is safe drinking water, and it will only get safer, but just in case.

Again, I am more than happy to speak on any reform that improves positive health outcomes for Victorians, and positive health outcomes allow those that have had a difficult journey to parenthood a much easier journey. That has got to be a good thing.

Dylan WIGHT (Tarneit) (15:41): It gives me great pleasure this afternoon to rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. Just before I do I would like to echo the sentiments of the member for Mildura and acknowledge some of the fantastic contributions that have come before me today, particularly the contribution from my friend the member for Point Cook. I think contributions like we have heard today do bring a human element to this place, which at different times, particularly between 2 pm and 3 pm in the afternoon, is significantly lacking.

The Allan Labor government is committed to better health outcomes for all Victorians. That is why we are taking decisive action through this legislation to strengthen health regulation in Victoria and in doing so are ensuring better protection for all Victorians. There are several different ways that we do that. There are several different ways that we strive for those better outcomes for all Victorians. I understand that this piece of legislation amends seven different acts.

What I would like to do and what I think is incredibly important to do, given the tone of the debate this afternoon, is recognise the incredible work done by several hospitals and the nurses and medical staff providing IVF services around the state. They are services that are so incredibly important to so many Victorian families and so incredibly important to so many people trying to conceive, like my brother Jarrod and his wife Kylie, who now have two absolutely gorgeous children thanks to IVF services in this state. If you will indulge me just for a second, my brother's first child Ines was conceived through IVF. My brother had a fantastic idea for a name and that was to call Ines 'Ivy Frances,' which he thought was hilarious, so she would have the initials 'IVF'. Initially, his wife loved the name – until she figured out what was going on. They ultimately settled on Ines. But it is thanks to IVF services and the fantastic work done by health professionals in Victoria that I have two absolutely gorgeous nieces. I would like to give a particular shout-out to those workers at Western Health and at the Sunshine Hospital that deliver some of those services.

On that topic – and we have heard it from even those opposite – we are getting on with delivering on our commitment to establishing public fertility services in Victoria, which eases the financial pressure on families that are trying to conceive and going through that difficult experience. IVF until now, until public IVF services, was something that was incredibly expensive, without any guarantee that you would get the desired outcome from the investment that you had made in those services. Public IVF is not just fantastic for all of the reasons that we understand it is, but it is fantastic so that all Victorians, irrespective of how much money they have in their bank account, get fair and equal access to those incredibly important services.

In the 2021–22 Victorian budget we delivered \$70 million in funding to create an Australian-first public IVF system as well as an egg and sperm bank. The 2023–24 budget invested a further \$49.9 million to expand and extend that public fertility program, and then we built on that investment with an additional nearly \$2 million in funding for the public egg and sperm bank as well. When fully established this program, which is now worth over \$120 million, will be funded and delivered over five years and will have the capacity to support up to 5000 Victorians each and every year to access these services, which helps to save them \$10,000 – which was the cost before these services were available.

As I said, it is a priority for this government to deliver better health outcomes for each and every Victorian. There are several ways that we are doing exactly that. If you were to come out to my part of the world, out to the western suburbs of Melbourne, you would see the significant investment that this government is making in public health. You could come out just next to my electorate – I think it

is actually in the Treasurer's electorate, but it certainly borders my electorate – and look at the very beginning of construction on the expansion of the Werribee Mercy Hospital and its emergency department. This expansion will double the hospital's emergency department's current capacity and allow for an extra 25,000 presentations each and every year. The upgrade will also feature four new resuscitation bays, 16 short-stay beds and 36 emergency care cubicles. I cannot overstate how incredibly important that piece of infrastructure and the redevelopment of that emergency department are to my community. Wyndham is one of the fastest growing areas in all of Australia, and making sure that we have the health infrastructure to support that growing community is absolutely paramount, particularly when you have such a diverse community, a community that perhaps does not have the knowledge of Australia's health system or Victoria's health system as would someone who was born and raised here from childhood. Making sure that we have that extra capacity and that we have those improved health outcomes for that community is so incredibly important.

The Werribee Mercy upgrade builds on an earlier upgrade in 2018, which also delivered new inpatient beds and new critical care beds. The state government has an incredibly important and fantastic partnership with Mercy Health, and delivering those outcomes to my community is something that I know the member for Point Cook, the member for Werribee, the member for Laverton and I are so incredibly proud of. I could not believe this when I first became the member for Tarneit, but there are 110 babies born in Wyndham each and every week. That gives you a little bit of an idea why we are one of the fastest growing areas, not just in Victoria but in all of Australia, and as we continue to grow we are going to have to continue to invest in those primary health facilities.

We also have the Joan Kirner and Sunshine hospitals just up the road. I was lucky enough in recent months to go out to the hospital for a visit and go through the facilities that they have. That is not just a good piece of health infrastructure. The Joan Kirner hospital is a world-class health facility built exclusively for people in the west. To be able to go through and talk with the health professionals – to be able to talk with nurses and with doctors – and meet with the committee or the board and talk about the fantastic work that they are doing there, including, as I said, delivering those outcomes with IVF treatment, was an absolutely amazing experience for me. I do note that some in my community use that hospital as well, just because of how absolutely amazing it is.

As I said at the beginning of my contribution, the Allan Labor government is committed to delivering better health outcomes for all Victorians, whether that be Victorians looking to conceive their first child or whether that be Victorians presenting to emergency. We are committed to that and always will be.

Richard RIORDAN (Polwarth) (15:51): I will take the opportunity this afternoon to make some comments on the Health Legislation Amendment (Regulatory Reform) Bill 2024, which is an omnibus bill. It has ticked off lots of various acts along the way that it is making slight amendments to, and I will just mention a couple of them because they are relevant in the contribution I wish to make today. They are the Health Services Act 1988, the Non-Emergency Patient Transport and First Aid Services Act 2003, the Public Health and Wellbeing Act 2008, the Safe Drinking Water Act 2003, the Assisted Reproductive Treatment Act 2008 and quite a few other health-related acts.

I guess I will start my contribution today with this: it is not often I reference the member for Tarneit's contributions, because his part of the world bears very little resemblance to mine; however, he brought out an interesting fact about 110 births a week in Werribee. That western suburb of Melbourne is well known for its rapidly growing population and the health pressures that no doubt that part of town feels. However, it actually leads into one of the contributions I want to make today, and that is about the enormous pressure the health services have on them all the way further west of Werribee. It concerns me greatly what occurred on six occasions this year – can you believe that, on six occasions – when people having a baby anywhere up to 200 kilometres west of Werribee ended up having to be on bypass and were transferred to Werribee. If Werribee is already a very busy and stressed health service, at 110 births, it does not make sense that women and families and children are not able to access proper health services in Camperdown, in Colac and in Geelong – and Geelong did have, until this

government failed to assist them last year, three world-class hospitals they could have had maternity services in; but we have seen one lost, so we are down to only two in Geelong. But on six occasions every single one of those health services was on bypass, sending unsuspecting families all the way through to Werribee.

I support the member for Tarneit in his quest to have better support for Werribee, but not only do we need better support for Werribee, we have actually got to put the basic, fundamental support into the health services in all those major health services further west than Werribee, because it does not make sense to families at this point in their lives. We very rarely get the privilege of knowing when that little bub is going to turn up, and if you are all the way down in the bush to the south of a place like Cobden or out in the bush in Gellibrand or Lavers Hill – quite remote places at the best of times – it is a very, very long way to go for what is essentially one of humanity's most basic services, and that is a world-class, safe maternity service.

About three weeks ago this government's continual lack of commitment to providing sustainable funding for health services in regional Victoria came to light when another one of my hospitals announced, without having liaised with any of its GP obstetricians or GP anaesthetists, that it had cancelled maternity services. This was Camperdown Hospital. For nearly a week this government was unrepentant and not prepared to step in and say, 'No, a hospital like Camperdown that has successfully delivered babies for 100-odd years absolutely must be supported to keep that service.' It had a GP workforce, a maternity workforce and the facilities there to continue that service. It took a public outcry and the threat of petitions to get the government to walk back from that.

People in country Victoria understand that you cannot offer maternity services unless you have got the key staff and services there. Bypasses of maternity services are a risk that country communities live with but are prepared to live with because it is in their best interests. However, it is not sustainable, and it is not good management of those scarce resources when Camperdown, Colac, St John of God, Barwon Health and University Hospital in Geelong are all bypassing through to Werribee. Unfortunately this bill is not designed to solve that issue, but it is one of the most critical outstanding health issues in regional Victoria in the seat of Polwarth.

I would also like to draw attention in dealing with this part of the bill and this act to the non-emergency patient transport. That is a really critical service in providing good quality health care in regional Victoria. For a long time I was part of a hospital board and in recent times I have been heavily involved in a health foundation in my community. We call it the Long Road Appeal. The Long Road Appeal is about shortening the long travel times that country people face. Any services that can over time be provided as close to home as possible absolutely aid in quick recovery and better health outcomes for families.

Many people revealed stories today, and I will reveal probably one of the most heartbreaking health stories that I dealt with in the last week, and that is around eating disorders. Eating disorders are silent health conditions, mental health conditions that affect families for years and years. Unfortunately our system does not treat mental health and eating disorders as one illness; they treat them as two. When they treat them as two and you live in a country town, the effect is catastrophic for families. The group of mums I met with last week, three mums, have given up their careers and given up their lives and have been full-time carers for their late adolescent and young adult children. There are no other options for them because there are not the mental health services and there are not the eating disorder health services.

What was particularly disturbing in dealing with this is that one of regional Victoria's most pre-eminent eating disorder specialists comes once a week to my community, Colac, not wearing their eating disorder hat but a mental health hat. In wearing the mental health hat instead of the eating disorder hat that practitioner is not allowed to deal with those families. In this day and age that defies logic and does not make sense. Once again this bill is not designed to solve that problem, but it is a crucial part of getting a system that is fair and equitable and provides the services that people need

closer to home, which is absolutely a theme for any good government in managing its health services and making the tweaks and reforms that are required to provide better outcomes for the community.

When we talk about non-emergency patient transport, anything that provides a service closer to home is going to be better, particularly in my electorate. It is a relatively older electorate. It has a lot of people having to seek care services for conditions later in life. Whether it is hips, hearts, legs, arms, cancers, old age or whatever the condition may be, you often have to get to the big smoke. You have to get to Melbourne, you have to get to Geelong for the primary interventions that can later be served at home.

It disturbed me also recently to learn from constituents about the system for non-emergency patient transport. That is often done by the Red Cross, but many communities have their own volunteer organisations that help also. There have been some changes there, too, which have not made people's lives easier; they have made them more difficult. One of the great anomalies in it is that the system has not been designed to be the lowest-cost, easiest-to-operate service. Someone sitting in a call centre in Melbourne does not necessarily understand where someone lives or how to get to them quickly, efficiently and at the best times when they are out on a farm or down a country road and they need to be transported to and from there, but those things can be easily organised at a local level. Patients are telling me that under the old system they could liaise directly with the driver and organise pick-up times and drop-off times because often people might want to be taken back to a son or daughter that lives in another part of the community and not back to the same address. These sorts of nuances should be taken into account if we are truly providing patient-focused, patient-centred care services. I worry that the cuts to resources and cuts to funding in the health sector, particularly in regional Victoria, will continue to dilute and make these services not the services that they could be. We are not talking about spending extra money or a lot of extra money. We are talking about listening to the needs of patients, listening to the needs of the community and making sure that those really key services are focused on that and providing the services that are needed to make sure we keep as many people in country Victoria as safe as possible.

Anthony CIANFLONE (Pascoe Vale) (16:01): I too rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. I would like to begin by acknowledging, like others have, the vast array of contributions and experiences that have been shared in the chamber today throughout this debate, particularly those from the member for Bellarine, the member for Laverton and the member for Point Cook, who is in the chamber as well – those deep personal stories and experiences that I think we can all acknowledge and sympathise with. At the other end of the debate spectrum, we have seen the member for Warrandyte give a gender reveal. I think that is a first for the chamber. That builds on, let the record show, the member for Preston's marriage proposal at the start of this parliamentary term. So we have had a marriage proposal and we have had a gender reveal. I do not know where this is leading, but there have been a couple of feats in this Parliament that we have experienced.

I would also like to commend the Minister for Health and her team, her department and the relevant stakeholders for bringing this bill to the house. I would also like to commend, of course, as we are here speaking, all the health workers that are proudly keeping our health sector running. Many of them are represented by the Australian Nursing and Midwifery Federation, the ANMF, and the Health and Community Services Union, who are in the building as we speak – HACSU. I would like to acknowledge all the health workers across my community. There are almost 13,000 residents across Merri-bek in my community, including Pascoe Vale, Coburg and Brunswick West, that work in the health sector, social sector or community sector. Almost 14 per cent of local residents work in health or community services. It is the largest employment sector in my community, and they do an absolutely incredible job, particularly those at Merri community health, which I would like to touch on as part of this contribution.

I would like to say as well that I am proud to be part of a Labor government and indeed a labour movement that has always fought and stood up for universal access to health care and the health and wellbeing of every Victorian. Regardless of postcode, bank balance or circumstances, Labor has

always been a strident defender of the community's right to access public health care, medicines, treatments and supports. Whether it be through the creation of Medibank under the Whitlam government, the creation of Medicare under the Hawke government, the establishment of the NDIS under the Rudd–Gillard government or laying the foundations for today's modern pharmaceutical benefits scheme under the Curtin Labor government back in 1944, access to health care is really ingrained in the DNA of the labour movement.

It is also at a state level that Labor has continued to work, including through this bill, which I will turn to in a moment, to invest in and support the public's access to health care, treatment and support via our public health system. Since 2014 we have invested almost \$60 billion to deliver world-class health care, better facilities and the latest equipment across our entire health system and invested a record \$20 billion in Victoria's hospitals. This year alone it makes up more than 25 per cent of the state budget. Recently, as well, we announced an additional \$1.5 billion towards supporting our hospital system. That is on top of upgrades for the Northern Hospital and the Austin Hospital – \$813 million for construction of a new emergency department at the Northern and \$275 million to expand the capacity of the Austin Hospital with a new expanded emergency department and paediatrics unit as well.

Our public surgery waiting lists are now the lowest they have been since the pandemic, with almost 210,000 planned surgeries performed this financial year, driving the waitlist down by 33 per cent since 2022. Since coming to office we have also grown our health workforce by 40 per cent – that is 60 per cent more doctors and 36 per cent more nurses and midwives in our hospitals. We made it free for 10,000 students to study nursing and midwifery, and we are implementing a stronger nurse-to-patient ratio across the public system. We have established priority care clinics, now known as urgent care clinics, to relieve pressure on hospital emergency departments, which are averaging 7000 patient visits a month through the urgent care clinics. That is 500,000 patients they have seen and treated since their inception. Of course we have also reformed Triple Zero Victoria, we have sustained the Nurse-on-Call hotline and we have established the Victorian Virtual Emergency Department as well. Many of them are being trained out of La Trobe University. We have supported community pharmacies and rolled out the pharmacy pilot, and all of this is helping to relieve pressure on GPs, hospital emergency departments and of course our hardworking emergency services.

This bill before us today will help us continue to build on this work to build a better and fairer health and wellbeing system for all Victorians. This bill, as we have heard, contains a number of provisions. It is an omnibus bill. It will essentially enable the health regulator to more effectively minimise risks to the health and safety of Victorians via a number of things, including amending the Drugs, Poisons and Controlled Substances Act 1981, the Public Health and Wellbeing Act 2008, the Epworth Foundation Act 1980 and the Safe Drinking Water Act 2003. We heard the members for Mildura and Yan Yean, I believe, speak substantively with respect to that, so I will refer members to those contributions to hear and learn more about those changes. There are also quite a number of other technical and minor amendments to reflect machinery-of-government changes.

Perhaps the most substantive and meaningful reforms contained in this bill, which will impact many Victorians today and in years to come, relate to the changes to the Assisted Reproductive Treatment Act 2008, which will improve the regulation of assisted reproductive treatment to better protect Victorians, simplify access to information from the donor conception registers and reduce unnecessary barriers relating to accessing donor gametes, including sperm, eggs and embryos. Victoria has long been a leader, as we have heard, in the provision and regulation of assisted reproductive treatment. The first Australian IVF baby was born here in Victoria back in 1980. Just recently, in 2020, four years ago, the Royal Women's Hospital celebrated the 40-year anniversary of the first IVF baby, Candice Reed – a major milestone in science and fertility for this country. The pioneering team at the Women's hospital – where I was born as well, mind you – led by the late Dr Ian Johnston, who ran the hospital's infertility clinic, was able to achieve Australia's first IVF pregnancy in 1979, which led to Candice's birth on 23 June 1980.

I have done a little bit of research here, but these are the figures I can bring together here with the time I have. I understand that well over 200,000 children across Australia have been conceived or born via IVF, with a previous University of New South Wales report finding that around one in 20 babies across Australia are born via IVF. That is around one child in every classroom. The stats also show that the overall live birth rate per embryo transfer is just over 27 per cent, and that has increased from 24 per cent on previous years. So that illustrates that for every successful IVF birth there are still roughly around three or four unsuccessful IVF cycles that families and parents do sadly experience. Like I said, I acknowledge and commend families who have gone through and continue to go through the IVF process to conceive and start a family, and I acknowledge all those contributions from those respective members who have done so.

Victoria was also the first jurisdiction in the country to provide legislative safeguards for individuals undertaking assisted reproductive treatment through the Infertility (Medical Procedures) Act 1984. It was also the first Australian jurisdiction to recognise the need for people conceived through donor treatment procedures to have access to information about their genetic gametes – again, with respect to sperm, eggs and embryos. Building on these previous landmark reforms, the Michael Gorton review, which began in 2018 and was completed in 2019, 10 years after the passage of the landmark Assisted Reproductive Treatment Act 2008, basically formed the basis for a lot of these changes here today. That legislation was quite landmark. It gave legal access to treatment in Victoria for single women and same-sex couples to enable altruistic surrogacy, and the legacy of these law reforms is clear, with thousands and thousands of Victorians since being helped to start families. But the 2008 act itself had a long and difficult story. It began in 2000 when leading fertility specialist Professor John McBain challenged restrictions to Victorian legislation that limited IVF to married women, and ultimately in 2002 the High Court agreed that the act was discriminatory.

In response, the Victorian government asked the Victorian Law Reform Commission to review these laws, and from 2004 to 2007 it provided the foundations for the 2008 bill, which was presented to the Victorian Parliament in mid-2008 by then Attorney-General Rob Hulls. The bill was passed by one vote in the upper house on 4 December 2008. The reforms contained in this bill will also build of course on our commitment to deliver public IVF through a \$70 million commitment and our work through the women's pain inquiry as well.

In the time I have I would like to commend of course our community health workers at Merri community health. On 6 August I had the pleasure to catch up with CEO Tassia Michaleas and chief operating officer Amy Jackman to get an update on their fantastic work to keep our community healthy, resilient and safe. It is one of the longest running community health organisations in Victoria, established over 45 years ago, and is operating across a number of sites across Merri-bek, employing 400-plus health and community workers. Merri Health and their team do an amazing job in looking after our local wellbeing. They provided over 266,000 service instances in the last financial year, supported over 17,000 carers across Victoria, provided dental care for children – over 1000 children – provided mental health and wellbeing support to older residents and launched a new School Ties program for young people impacted by COVID. I have previously had the Minister for Health actually come along and visit to have a look at their work to support and assist with chronic pain. I have also welcomed the former Minister for Mental Health and the Parliamentary Secretary for Mental Health and Suicide Prevention, Minister Williams and Tim Richardson, previously to look at their work in mental health. It is in that spirit that I truly commend this bill to the house on behalf of our local workers.

Martin CAMERON (Morwell) (16:11): I too rise today to talk on the Health Legislation Amendment (Regulatory Reform) Bill 2024. From everyone that I have heard speak in the chamber when I have been in here or while listening to it down in my office, there have been a lot of fantastic contributions, and it is amazing the stories that you do hear about people's travels into parenthood. Some people have it nice and easy, so to speak, and have children unassisted, but some other people

have a lot of trouble conceiving. I think to be able to make changes with this bill to help those people that do struggle to conceive and those that are wanting to start a family is great.

I am very lucky to have three healthy children – well, adults now – but at the start of my former wife's and my journey to parenthood we did go through three miscarriages along the way. When you actually go through that, there is a lot that does play on your mind as to why. We were very, very lucky that after those three miscarriages we were able to have three healthy children. We went to a doctor – because obviously after a miscarriage your wife or partner needs to be checked out – and they are virtually the only people you talk to about that. It did have a little bit of a – not a stigma, but it was something that was not spoken about very much back in the day. Once you – if you ever did – raised it with other people, it was amazing how many people had been on that journey also with either having miscarriages or having a great amount of trouble to be able to conceive to start their family. As I said, we stand in this chamber I think united, all of us, that we can actually have a pathway forward for all Victorians who are wanting to start a family to be able to do that.

I have two close friends, being part of the Traralgon Football Netball Club, Kate and Beth, two girls that got married and went on their journey to start a family. Luckily for them, it happened virtually straight away, so both Kate and Beth have now had two little boys who are healthy, and they are a loving family. But I did not realise how expensive it was to actually go through the process if you decide to go down the track of IVF – not that they would ever complain at all. When I did speak to them about it, I was actually shocked at the amount of money that they had to pay to be able to go on the journey of being able to start a family. As they relayed to me, they are the lucky ones that were actually pregnant – both of them – the first time, virtually, where others go on a longer journey over many, many years, as we have heard, of being able to conceive.

I think when we are younger and we are growing up we take for granted that we are going to be able to start a family and raise that family through to adulthood, like I have done. But along the way there are not roadblocks but little mishaps here and there, so nothing is ever straightforward. We see this bill – there are a few other bits and pieces to the bill, which I will touch on later – actually making the journey a lot easier. It is lucky that we can stand in this chamber and make those changes and differences to people's lives and their family lives.

It is great to see all the expectant mums in the chamber also. We are going to have a busy 2025 in the chamber, which is great, because when you stand and you want to become an MP you do it for the young families and young kids that are being born, to give them a better life moving forward. It was one of the reasons I stood to be an MP, to be able to make people's lives better. I think it will keep everybody in the chamber on their toes once 2025 rolls around, and we wish everybody a safe journey through that pregnancy. My love for young kids – when they are bawling their eyes out I have a knack of being able to stop them crying, so, member for Kew, keep that in mind when your child is in here and crying and you need to stand up. I will be able to stand up, take charge and make sure that everything is fine. That is wonderful.

Being part of a sporting fraternity that does have both football and netball, very regularly when you are growing up inside the football club there are no children there, then all of a sudden you get an influx of 10 to 15 children running around. It really is enlightening being able to sit down with everybody and talk about their journey of how they got there, about how some families conceive easily, as I said before, but also the trials and tribulations of others that really have to take a journey to be able to become pregnant – those who need to use sperm donors, for argument's sake – and go through that IVF treatment to end up with their family. As we said at the start, this is a great bill where we can actually work together collaboratively to make sure that it does happen.

There is some stuff there we spoke on before – health regulation compliance. The bill amends the regulatory frameworks in a couple of other matters, one being cooling towers under the Public Health and Wellbeing Act 2008. Although I love talking about families and children, I also love talking about plumbing stuff and cooling towers. Through my journey as a former plumber, I have had a fair bit to

do with cooling towers. You would think a cooling tower is a straightforward structure that sits on top of the roof of a building, and you never have to worry about it ever again. Well, it is one of the hardest things to get right. One of the things that you need to make sure, with these regulatory changes that they are bringing in, is that there is a checklist to make sure that everyone stays healthy inside that building. It is great to see that they are doing some work on the cooling towers. Our local water firm down in the Latrobe Valley, Gippsland Water, who have a wide reach right across greater Gippsland and into Melbourne too – they reach into the peninsula and stuff like that – are making sure that our water is safe and drinkable. We are very, very lucky that we do have such fantastic drinking water in Australia and particularly here in Victoria. I have just come back from being in Kokoda, where their water is, well, let us say it is questionable to be suitable to drink. They do not have a lot of running water out in the villages. They derive all their water out of the river, and in that river they also bathe, and they use it for sanitary purposes. We are very, very lucky here in Australia that our drinking water is first class.

Non-emergency patient transport under the Non-Emergency Patient Transport and First Aid Services Act 2003 – this bill also cleans up a few bits and pieces there. Pest control operators under the Public Health and Wellbeing Act 2008; private hospitals, day care procedure centres and mobile services under the Health Services Act 1988; medicines and poisons under the Drugs, Poisons and Controlled Substances Act 1981; radiation sources under the Radiation Act 2005 – we can see there are a lot of bits and pieces that we are making sure are right in this bill so that moving forward we can have a better outcome for everybody in the state of Victoria. I started by talking about being able to have our children born safely and being lucky enough to have them healthy, and I am glad we are not opposing this. I commend the bill to the house.

Pauline RICHARDS (Cranbourne) (16:21): Acting Speaker Lambert, I am very pleased to be able to contribute to debate on this, and I am pleased to see you in the chair, always ably and conscientiously fulfilling the tasks that need to be undertaken in this place.

Before the member for Morwell leaves I do need to reflect that on hearing about that offer of being able to get babies to sleep I think there might be a little bit of work coming his way. We have got obviously the member for Kew, the member for Ripon and many, many other members who will be looking to the member for Morwell to check availability. I know that there might be a roster. I am not sure how we going to manage priorities – I do wish everyone the best – but we will need to have a roster for the work undertaken by the member for Morwell in the task of keeping babies asleep or putting babies to sleep.

I am very grateful to the Minister for Health for the important reform work that is being undertaken. This is an area of great passion for the minister and a reform that speaks to the heart of the need to make sure that, from the cradle to the grave, this week the Allan Labor government is really working on ensuring Victorians have their decent and hardworking members of Parliament contributing to debates that do make changes to the Victorian community. Of course, health is our bread and butter. I often reflect that I wake to the sound of children in the streets. Cranbourne has a great deal of growth and many, many children. I know that for many people the journey to parenthood is not exactly the way they had anticipated or expected, and I do want to say how honoured I am to actually be in this chamber to hear the many contributions that have been extraordinarily heartfelt. In particular I want to thank the member for Point Cook for the generosity that the member showed in sharing stories and also cautioning people who are tuning in to Parliament that there are topics and discussions that are had here that can be difficult and complex. I think that we saw the best of our chamber here this afternoon. I do say again how grateful I am to the member for Point Cook for that extraordinary generosity.

This bill amends health regulatory frameworks across seven acts of Parliament. As we have heard this afternoon, it affects the health portfolio across governing medicines – we know SafeScript has been a really key reform of this government – making sure that we are getting ahead of any changes that need to be made. Poisons, private hospitals, day procedure centres, first-aid services, safe drinking water

and assisted reproductive treatment – I think it is terrific that so many members in the government and those opposite, many of whom have faced life-changing medical challenges themselves, are advocating and campaigning every day to make sure we invest in the right places and make the necessary changes that will ensure Victorians have a higher standard of medical care. We have heard that this bill is designed to modernise and enhance the regulatory framework governing our health sector. Reform is essential. The health sector is dynamic place, and we are making sure that all new and emerging healthcare standards are met in a way that is appropriate.

I am going to take the opportunity as well, with a bit of indulgence, to reflect on the member for Mulgrave, and to consider the remarkable support that we have seen in evidence again across the chamber for the member for Mulgrave. At the recent morning tea that was held at Killester College many, many members of Parliament came to support the member for Mulgrave. The member for Mordialloc was a terrific MC, and of course the Minister for Government Services in her capacity as the member for Dandenong and as a good friend made a decision to shave her hair off as a way of raising funds. The member for Point Cook travelled across to Killester to support the member for Mulgrave in those endeavours. We had an extraordinary number of other important friends and relatives there, including the member for Narre Warren North, the member for Pakenham and so many others – Mr Tarlamis in the other place and Mr Galea. It was just extraordinary.

I am conscious of the thoughtful contributions that have been put forward, but I am also conscious that the genesis of this legislation was an independent review of assisted reproductive treatment undertaken by Michael Gorton AM. This bill makes amendments to reduce barriers to accessing donor gametes while maintaining safeguards and simplifying access to information. I was reflecting again on the genesis of the bill and the work that was undertaken by my previous boss the then member for Altona in her capacity as the Minister for Health, when she undertook to organise a review of assisted reproduction. I went back to have a look at what was said at the time:

The Andrews Labor Government will review Victoria's assisted reproductive services for the first time in a decade, and strengthen current laws to provide more safeguards and support to women accessing these services.

Tick. This is something that was committed to in 2018. It has been an iterative process, and this legislation before us today is part of that process. Again, quoting:

The review of the *Assisted Reproductive Treatment Act* will ensure women and families using assisted reproduction are supported through their entire treatment ... make sure they are receiving realistic information when it comes to their reproductive journey.

Assisted reproductive treatment is often an extremely vulnerable and trying process ...

I was also interested to look back and reflect on the words that were spoken at the time, which were: 'Everyone knows somebody who has a story of assisted reproduction.' There are stories of joy, but there are many experiences that end in heartbreak. I think we have heard that today in the contributions this afternoon. I do want to thank Michael Gorton for the work that was done and the leadership that was undertaken by somebody with Mr Gorton's eminence to ensure that where we are today is again stepping in the right direction.

Just to take a slight step change, I was reflecting on this legislation while watching some of the speeches at the Democratic National Convention, and I am sure, Acting Speaker, you might have been similarly tuned to Coach Walz. If Coach Walz is watching, I would say that it was an extraordinary speech. I did notice the way that the new vice-presidential nominee spoke about his journey and the way that his family was formed. He did speak about the pain of those calls they received as they attempted to form a family. I did think that I would not use this example, because the tone of this debate has been very important, but at some time I might reflect on how occasionally the conversation can turn weird as people go to places where I think governments should not be. But that is not the conversation that I think is appropriate today.

I did want to put on the record, though, that there have been some claims made by those opposite that there have been cuts to public IVF funding. I think it is important to record that there have been no cuts to public IVF. We are getting on with delivering our commitment to establish public fertility services in Victoria and we are easing the financial pressure on families when they are enduring what is a difficult experience. The 2021–22 budget delivered \$70 million in funding to create an Australian-first public IVF system as well as an egg and sperm donor bank. The 2023–24 budget invested a further \$49.9 million to expand and extend the public fertility program and the 2024–25 budget built on that investment with an additional nearly \$2 million in funding for the public egg and sperm donor bank. I think it is really important to make sure that we record that, that we know that there is absolutely a commitment from this government to those services.

This idea that there are long waiting lists also needs to be challenged. We have established a brand new, nation-leading service. Quality, patient-centred care has been a priority for this government. This includes establishing new public labs, partner sites and the egg and sperm bank. There is so much going on in this really important area of reform. The contributions have been extraordinary from across the chamber, but there is no doubt that it takes a Labor government to undertake the sorts of reform that we are seeing. I commend this bill, and I am really grateful to everyone for the contributions they have made.

Jess WILSON (Kew) (16:31): I too rise for probably what will be a brief contribution, because my lung capacity seems to be limited by the day at the moment, on the Health Legislation Amendment (Regulatory Reform) Bill 2024. I echo the comments of the member for Cranbourne about the powerful speeches that have been made today on this piece of legislation. It can be a very difficult discussion and difficult process when talking about what can be very personal fertility journeys, and I think having a number of members share their own only helps others who are going through that difficult journey to understand that there are others out there going through that experience and there is support available.

This legislation before us today will make a number of amendments to the regulatory frameworks to essentially modernise, streamline and look at the compliance enforcement powers around health regulation in the state, particularly by the Department of Health's regulator, and look at making sure that our regulation that supports our health system and the Department of Health is minimising risk and promoting health and safety for all Victorians. It does come off the back of the Gorton review, which looked into assisted reproductive treatment, and it proposes changes to enhance compliance enforcement tools across a number of pieces of health regulation and a number of schemes, including, as the member for –

A member: Morwell.

Jess WILSON: The wonderful member for Morwell, who is going to do a lot of babysitting. I should not forget that as we pass the babies around the chamber.

The member for Morwell went into great detail and provided a good understanding for all of us around cooling towers under the Public Health and Wellbeing Act 2008; drinking water under the Safe Drinking Water Act 2003; first-aid services under the Non-Emergency Patient Transport and First Aid Services Act 2003; non-emergency patient transport under the Non-Emergency Patient Transport and First Aid Services Act; pest control operations under the Public Health and Wellbeing Act 2008; private hospitals, day procedure centres and mobile services under the Health Services Act 1988; medicines and poisons under the Drugs, Poisons and Controlled Substances Act 1981; and radiation sources under the Radiation Act 2005. All of those consequential amendments under this piece of legislation will look at strengthening the regulation of our health system, ensuring that we are minimising risk for Victorians.

But as has been spoken about at length today, the bill does see the abolition of the Victorian Assisted Reproductive Treatment Authority and the transfer of its responsibilities for regulation of assisted

reproductive treatment. We know the current functions of VARTA include the registration of assisted reproductive treatment providers and monitoring compliance; management of the registers that hold donor conception information in Victoria – essentially the central register – including providing counselling to people who seek to access and store information on those registers; consideration of applications to bring donated embryos from them into and out of Victoria; and importantly – and something that I know that a number of stakeholders have pointed to in the drafting of this bill and making sure that this continues post the introduction of this legislation – public education and promoting research about fertility and reproductive services here in Victoria.

On this side of the house, while we will not be opposing the bill before us today, we do note a number of concerns with the drafting and just want to ensure that we are putting forward legislation that does at all points in time minimise risk and promote the health and safety of all Victorians and particularly the need for specialist expertise and whether the health department will maintain the level of knowledge and expertise in this complex area that has been previously provided by VARTA and I know has been extremely valued over the course of the existence of VARTA. There are also concerns around removing mandatory counselling for donor register access. People accessing donor information are very vulnerable and may face unexpected and confronting information such as discovering the parent or child has passed away, has criminal convictions or has mental health issues, and there is a need for adequate support in that space. I know that stakeholders have stressed the need for specialised counselling to safeguard individuals' wellbeing in this space and that counselling remain mandatory for treatment of donor consent.

In particular we have heard in our own work – and can I commend the member in the other place the Shadow Minister for Health for her immense work with stakeholders in consulting on this bill – when speaking to Monash IVF, they certainly shared their concerns around mandatory counselling for donor registers, particularly around opposing the removal of that mandatory counselling, highlighting the importance of counselling in managing the identity and, importantly, the expectations and the relationships of those accessing donor registers. They are on the record pointing to the potential psychological harm and trauma without that proper support. We do want to see as part of the work that the Shadow Minister for Health has done her proposal around a review when it comes to looking at this legislation in a few years time, ensuring that that counselling does remain available and that it does form part of the new role that the Department of Health will have when it comes to administering the reproductive and IVF services here in Victoria to make sure that we are putting forward the support for those accessing donor information in particular.

The other concern that we have spoken about and that we on this side of the house have is the removal of the legislative requirement for research and education in this bill. Previously there were requirements as part of the legislation that there would be access to reliable, independent information on current research about infertility and donor conception, and the change with this piece of legislation is that is no longer a legislative requirement under the bill. The government have said that they are committed to providing that ongoing service. It has been acknowledged the role that VARTA has had previously in providing that service to ensure that particularly that independent information is available when trying to make important decisions in this very specialised area of care, and we want to make sure that those educational resources do not cease without that legislative framework sitting around them. That is something where once again Monash IVF have expressed their concerns and just expressed their disappointment that that ongoing educational role of VARTA's will not be replicated in this piece of legislation before us today, calling on the government to commit more broadly to not only providing the education and ensuring that it is available and accessible into the future but outlining their clear plan to do so, continuing to provide that reliable and independent fertility information that so many Victorians have relied on in the past and should be able to rely on into the future.

The opposition has a range of other concerns with the piece of legislation before us, including the lack of clarity on the future of the data being published by VARTA in its annual report and just the process by which the public consultation took place. It was indeed a very short time, limited to written

submissions only, and those submissions were not made publicly available to ensure that stakeholders who work every day in this space, who are experts in this space, were actually able to put their feedback on the record and that the bill before us today is fit for purpose and is meeting the expectations not only of the Victorian community but of those stakeholders who work in the space every single day.

As I said, the opposition will not be opposing this bill. It does seek to put in place a number of regulatory changes and streamline a number of regulatory changes in the health system, and I am thankful for the opportunity to speak on it today.

Bronwyn HALFPENNY (Thomastown) (16:41): I also rise to speak on the Health Legislation Amendment (Regulatory Reform) Bill 2024. The bill that we are debating today and the legislative changes it proposes really came about as a consequence of the Minister for Health's announcement back last year that there would be strengthening and reform of health regulation and that that would include the establishment of a health regulator, and some of the legislation that is to be amended within this bill is around including the health regulator as the body to oversee and regulate various aspects of the health practices and system.

In terms of the Assisted Reproductive Treatment Act 2008 changes that we are also looking at today, which include certain aspects of it coming under the health regulator, that was also subject to considerable consultation. The views of those with the lived experience and those in the industry were of course all taken into account. But the purpose of this bill today is actually to strengthen the rights of the participants or those that will be accessing these health services. We want to make sure that the rights of those people are foremost and, most importantly, protected. We know, though, that the IVF program, for example, prior to the Allan government introducing public IVF treatments, was mostly in the private domain. We always need to ensure when there is profit involved that we have strong regulation to preserve the rights of donors and those using the services to ensure that everybody is protected.

I will just quickly go through some of the changes. I think there are seven pieces of legislation that will be amended, including those to do with the health regulator and strengthening powers. We are looking at things like the power to issue improvement notices, where the regulated entity will have to take specific action to remedy noncompliance. These are very practical steps to ensure that there is compliance, to ensure that quick action is taken and to determine the type of action that is required in order to be compliant; to issue prohibition notices, which prohibit a regulated entity from engaging in a particular activity that may pose a risk of harm to health and safety; and to issue information or document production notices. Of course it is so important when it comes to compliance and regulation that access to information is very clearly stated, and this again is what is being proposed in this bill.

There is the issuing of infringement notices. There is no point having requirements and regulations to comply if there is not some sort of penalty that is issued in the event that there is not compliance. There is the imposition of fines for noncompliance in appropriate circumstances. Also, there are enforceable undertakings. Binding, formal and legally enforceable agreements are to ensure that health services or bodies can reach agreement. There might be a little bit more flexibility in those sorts of legal undertakings, but they are just as important and just as strong as compliance notices or offences. Those agreements are enforceable by law, and penalties apply if they are not followed.

This, again, is about protecting Victorians and making sure that services are provided. We all know that with services in the area of health in particular, often people are using these services because they are life-changing or they are life-saving. In the case of IVF treatments, there is so much at stake. We have heard today from many previous speakers with experiences of issues around fertility, around family and around children. In those situations you are not always focusing on how it is that you are going to have that service delivered or what is expected of the provider, so it is so important that there is regulation to support and strengthen and carry people through the journey that they are about to go on so it can be as good as it possibly can be as an experience rather than a difficult experience because

of the way the provider is treating you or acting, or even due to differences of opinion or whatever it might be later on down the track.

The opposition were making some claims about cuts to funding and waiting lists. I know that at the Northern Hospital there is a great partnership with the Royal Women's Hospital, and there is a public fertility clinic there. I have not spoken to everybody that has been using that service, but the few people I have spoken to have really given me great feedback – that it is a great place with lots of support. Also, I think it was only a couple of months ago, when I was last speaking to representatives at the hospital, that there were actually some vacancies, so people could still go to receive the treatment. So I do not know where this idea or this fallacy about waiting lists has come from, but it certainly is not accurate when it comes to the northern suburbs of Melbourne and the programs and the fertility clinic that is in operation there.

The other thing in terms of the details of this proposal and the health regulator is that we are trying to accommodate all circumstances and also provide flexibility. I have been here for some years now. Whenever legislation is put up and changes are made, there are always those that try to get around them. There might be changes to technology or there might be changes to the way we operate, and therefore legislation continues to need updating. The amendments that we are talking about today are about doing that updating as well as providing additional strengths and imposing additional penalties for offences. Again, this really fits in with the Allan Labor government and our absolute commitment to and support for the health of Victorians in the state of Victoria.

The Northern Hospital has gone from strength to strength. It was the hospital that developed the virtual emergency department. The feedback you get from people, including my family who have used that service, really demonstrates its great commitment and how innovative it is and how it can actually change the way people seek emergency medical treatment and advice.

I know there has been incredibly good feedback around the paediatric services within that virtual emergency department, and just this morning I co-hosted with a member in the other place Gaele Broad the Parliamentary Friends of People Affected by Diabetes, and we were celebrating the virtual emergency department that has now established a diabetes clinic within that service. Anybody that has the misfortune of having type 1 or 2 diabetes will have heard of really difficult experiences of going into the public hospital system through the normal emergency and there not being the staff there that really understand the illness. Another thing of course was the announcement, which I did earlier this year with the Minister for Health and other members from the area, such as the member for Yan Yean, who is in the chamber, and the member for Mill Park, of another \$235 million to support and expand the virtual emergency department. It services the whole state. It is not just for those that live in the north, but of course it does operate through Northern Health. They really do a fantastic job. This legislation is important, vitally needed and hopefully will give more peace of mind to those using health services.

Katie HALL (Footscray) (16:51): I am delighted to make a contribution – the last contribution – in today's debate of the Health Legislation Amendment (Regulatory Reform) Bill 2024. I do so with some personal experience that I have spoken about in this place before, in that my beautiful now eight-year-old girl Matilda McCrone is a child who came to me through IVF. It is really not an easy journey, and I would like to acknowledge the contributions from across the chamber today. We have had some really beautiful and thoughtful and very personal contributions from people. I would like to acknowledge in particular the member for Point Cook and the member for Laverton, who are in here. The member for Laverton is always really generous with her sharing of her experience, and also the member for Point Cook. There have been really deeply moving contributions from a range of people today, and I think that is the Parliament at its best.

There is one thing that I find really compelling about this bill. Something that I remember very well is that I was required to go to counselling before I embarked on the IVF journey. I remember thinking at the time – and I know that the counselling is a really important opportunity for people, because every

journey is different – that for me at that point in my life it was the last thing I wanted to do. I did not want to go to counselling and explain why I wanted to have a baby or the circumstances where I was going to have a baby, so if I had been offered the choice, I would have really liked to have opted out of that. I was sick of explaining to people at that point in time why I did not have a baby yet, and I just wanted to get on with it. I went through that process. It was not for me; that does not mean it is not for other people. I think giving patients choice is a really, really important thing, especially in the very challenging experience of IVF, so I am pleased that we are introducing these reforms.

The bill gives effect to reforms announced last December that will strengthen and reform health regulation in Victoria and provide greater consistency to regulation across the health system through the newly established health regulator. Of course that is a really important role in contributing to the public health and wellbeing vision where Victoria is free of the burden of diseases and injuries so that all Victorians can enjoy the highest attainable standards of health, wellbeing and participation at every age.

Many of the contributions today have focused on assisted reproductive treatment, and I know for a lot of people in my community the Allan Labor government's reforms to introduce public IVF have been absolutely life changing. I have friends who have spent a house deposit on trying to fulfil their dreams of having a child. I am very pleased that high-quality public health care that includes access to public IVF services is available for women and their partners at Sunshine Hospital, close to my electorate of Footscray.

We are embarking on a very substantial period of reform in health infrastructure and health service delivery in Footscray. It is something that will transform the access for many people in the western suburbs through the delivery of the \$1.5 billion new Footscray Hospital. It has an additional 200 beds, and it will see an extra 20,000 emergency department admissions each year. We are building the infrastructure we need across the state, the high-quality public infrastructure. I noted before the member for Mildura's contribution where she spoke about public IVF at a public hospital. Well, we are also very proud to have brought that hospital back into public hands, because equity of access is something we believe in. IVF should not depend on how much money you have.

I know that this announcement – I believe it is \$120 million now, as a commitment to public IVF – is really changing the lives of Victorians who perhaps otherwise would not be able to afford what is a very expensive treatment. I know for my cycle it was around \$10,000, which at the time we could ill afford, but it was something that we had to do, and at that time public IVF was not available to us. So these reforms are really important – and the regulatory reforms that go with them. I think making sure there is accountability and transparency in the system and making sure that choice is centred for patient care are really important things.

I would just like to acknowledge, with the time I have remaining, the work of the late Sarah Carter in our community. IVF and access to IVF and our public IVF reforms were something that she really championed. She was very open about her struggles with trying to conceive a child, and I know that she would be very proud of these reforms, because they deliver on a safer, fairer and more accessible ART system for Victorians, including people seeking and receiving donors and surrogates.

The bill amends health regulatory frameworks in seven acts across a whole range of sectors. Obviously the focus today has been predominantly on ART, but there are a range of different reforms that will improve the regulatory environment and framework for Victorians. I am very pleased to have been able to make a contribution to this bill, and I am very proud to be part of a government that is delivering improved equity of access for all Victorians, whether it be through beautiful new infrastructure, like the new Footscray Hospital, or through public IVF.

The SPEAKER: The time set down for consideration of items on the government business program has arrived, and I am required to interrupt business. The house is considering the Health Legislation Amendment (Regulatory Reform) Bill 2024. The minister has moved that the bill be now

read a second time. The member for Brunswick has moved a reasoned amendment to the motion. He has proposed to omit all of the words after ‘That’ and replace them with the words which have been circulated. The question is:

That the words proposed to be omitted stand part of the question.

Those supporting the reasoned amendment moved by the member for Brunswick should vote no.

Assembly divided on question:

Ayes (72): Juliana Addison, Brad Battin, Jade Benham, Roma Britnell, Colin Brooks, Josh Bull, Tim Bull, Martin Cameron, Anthony Carbines, Ben Carroll, Anthony Cianflone, Sarah Connolly, Chris Couzens, Chris Crewther, Jordan Crugnale, Lily D’Ambrosio, Daniela De Martino, Steve Dimopoulos, Paul Edbrooke, Matt Fregon, Ella George, Luba Grigorovitch, Sam Groth, Bronwyn Halfpenny, Katie Hall, Paul Hamer, Martha Haylett, Mathew Hilakari, David Hodgett, Melissa Horne, Lauren Kathage, Emma Kealy, Sonya Kilkenny, Nathan Lambert, Gary Maas, Alison Marchant, Kathleen Matthews-Ward, Tim McCurdy, Steve McGhie, Cindy McLeish, Paul Mercurio, John Mullahy, James Newbury, Michael O’Brien, Kim O’Keeffe, Tim Pallas, Danny Pearson, John Pesutto, Pauline Richards, Tim Richardson, Richard Riordan, Michaela Settle, David Southwick, Ros Spence, Nick Staikos, Natalie Suleyman, Meng Heang Tak, Jackson Taylor, Nina Taylor, Kat Theophanous, Mary-Anne Thomas, Bill Tilley, Bridget Vallence, Peter Walsh, Iwan Walters, Vicki Ward, Kim Wells, Nicole Werner, Dylan Wight, Gabrielle Williams, Belinda Wilson, Jess Wilson

Noes (4): Gabrielle de Vietri, Sam Hibbins, Tim Read, Ellen Sandell

Question agreed to.

Motion agreed to.

Read second time.

Third reading

Motion agreed to.

Read third time.

The SPEAKER: The bill will now be sent to the Legislative Council and their agreement requested.

Residential Tenancies and Funerals Amendment Bill 2024

Second reading

Debate resumed on motion of Mary-Anne Thomas:

That this bill be now read a second time.

Motion agreed to.

Read second time.

Third reading

Motion agreed to.

Read third time.

The SPEAKER: The bill will now be sent to the Legislative Council and their agreement requested.

Melbourne Convention and Exhibition Trust Amendment Bill 2024*Second reading***Debate resumed on motion of Steve Dimopoulos:**

That this bill be now read a second time.

Motion agreed to.**Read second time.***Third reading***Motion agreed to.****Read third time.**

The SPEAKER: The bill will now be sent to the Legislative Council and their agreement requested.

Business interrupted under sessional orders.*Adjournment*

The SPEAKER: The question is:

That the house now adjourns.

Level crossing removals

David SOUTHWICK (Caulfield) (17:08): (811) The matter that I wish to raise is for the Premier, and the action that I seek from the Premier is to come up with a fund for small businesses and traders that have been affected by level crossing removals. Can I say at the outset that level crossing removals are important. I know that there have been a number that I have supported. I want to also make it very clear that this is not a time for politics. This is something that I hope members of Parliament from all sides get on board with. I say that genuinely because there are still a number of level crossings to go. The member for Mordialloc, who is making some comment there, would be aware of that and would be hoping that the 26 level crossings that will be removed will be done in a way that means traders particularly are properly consulted and properly compensated for any problems arising from these level crossing removals.

We know with the number of level crossings that have already been removed that traders have been more than inconvenienced. A number of them have not been able to survive, and the ones that have survived are certainly in a very different place than when those level crossings were first removed. You would think that after a number of these crossings have been done you would finally be able to come up with a model that would ultimately take into consideration many of those traders and many of the communities in which crossings are being removed. I have asked this of the Premier and not the infrastructure minister because the Premier was the infrastructure minister when a number of these level crossings were removed. This is bigger than just an infrastructure portfolio, because many small businesses are affected.

Glen Huntly traders group's Jinny Thoms knows, and she has been part of this. After the level crossing removal there, she has seen a huge reduction in trade, and she is trying to come up with strategies to be able to deal with that. I have met with Helen from Ringwood East, who is going through level crossing removals at Ringwood East. She runs the Coffee Apple toy shop and she is the head of the traders group. She has said that if she knew what she now knows, she would probably have closed during the whole process because her business, her trade, has been shot. A lot of businesses have had to close and they are unsure about what the future might mean for them. The simple answer is to ensure that these traders have a financial plan to help support them both through it and afterwards, that there is some kind of additional incentive to get shoppers back, and also so they are not doing this for the first time and ultimately all traders are supported through the process.

Cranbourne mosque

Pauline RICHARDS (Cranbourne) (17:11): (812) My adjournment is to the Minister for Multicultural Affairs in the other place, and the action I seek is that the minister visit Cranbourne mosque and meet with the community leaders. The Cranbourne mosque is at the heart of Cranbourne, both figuratively and literally. It is ably led by Sheikh Khalil, and I am fortunate to have the gift of the wise counsel and friendship of the wonderful sisters of the mosque. Serving the many thousands of Muslim Victorians across Melbourne's south-east and even people sometimes passing through, the Cranbourne mosque is a wonderful asset to the fabric of our community. I very much look forward to introducing the mosque leadership to the minister and welcome the opportunity to show off the very best of Cranbourne to the minister herself.

Merbein alcohol and drug facility

Jade BENHAM (Mildura) (17:12): (813) My adjournment matter is for the Minister for Mental Health in the other place, and the action I seek is for the minister to visit the community of Merbein to facilitate some community forums around the announced alcohol and other drugs (AOD) rehabilitation facility. A couple of weeks ago the minister was in Merbein to announce the location for this facility. This policy was part of the 2018 election that the member for Lowan had presented in those documents that I have sat with and read through over and over. The location, like I said, was announced at the site of the old Merbein West school a couple of weeks ago. Although it is very well recognised that this facility is needed in the community, the location needs to be community-led. But we know that this is a very positive thing for the Mildura region and the outlying regions as well.

There has been some concern from the community that not much community consultation has taken place. There has been and still is very little information available as to the appearance of the facility, the security measures, the services that will be provided and also the infrastructure surrounding that site. Given that the school buildings themselves were removed many years ago, there is no public transport out to the site, there are no footpaths around the site and it is hard to connect it to the town centre of Merbein. So the community has asked me to seek some community forums and some assistance from the minister or the department. My office of course is more than happy to facilitate these sessions to engage the community of Merbein in informing them of what this means for their community.

Of course, we know the broader benefits that an AOD rehabilitation facility can have on those needing treatment, but the community of Merbein obviously would like to be informed as well, and they have asked me on their behalf to invite the minister to facilitate some community information forums so they can get a greater understanding of exactly what this means for their community.

Laverton electorate food relief services

Sarah CONNOLLY (Laverton) (17:14): (814) My adjournment is for the Minister for Carers and Volunteers, and the action I seek is that the minister come and join me in my electorate of Laverton to visit some of the fantastic food relief services that we have running in our local community. As the minister knows, food relief services and charities play an important role in supporting some of our most vulnerable members in the community, making sure that they do not go hungry. Services like those run at Duke Street Community House in Sunshine and the Braybrook and Maidstone Neighbourhood House provide fantastic support to folks in the Sunshine and Braybrook areas. I have had the privilege of visiting these sites on many occasions, and I can tell you the people that work and volunteer there and their passion and dedication for helping those that are doing it really tough at the moment is nothing short of admirable. Further out west we have got the Laverton Community Integrated Services hub, and this also provides food relief and community lunches on Wednesdays for Laverton and Hobsons Bay residents. We know that at times like this, when we are in a cost-of-living crisis, that a lot of folks are doing it tough. One of the most important questions that they are dealing with is how they put food on the table for themselves and their family. It means that the role of these

support services has never been more important, and it is something that I hear from one end of my electorate to the other.

Thankfully our government is supporting local community relief in this space. The new community food relief program supports local food relief activities and food security initiatives delivered by neighbourhood houses, community and volunteer-led organisations right across Victoria. Applications are currently open for the local grants. That is why I would absolutely love the minister to come and see firsthand the truly life-saving work that some of these community houses and services are doing with some of the most vulnerable in my local community.

Boroondara planning

Jess WILSON (Kew) (17:16): (815) My adjournment is for the Premier, and the action I am seeking is for the government to reopen the public consultation period regarding the draft Boroondara planning scheme amendment relating to the old VicRoads site at 60 Denmark Street in Kew. This site is the former home of VicRoads and lies adjacent to the Kew Junction commercial centre as well as being in close proximity to residential areas and schools. It is a large site in the heart of Kew, which has the potential to reshape the character of our community and greatly impact surrounding residents and businesses.

The limited consultation period ran between 19 July and 16 August. This is simply far too small a window for residents to be able to understand what is being proposed, especially given its significance, and to have their say. I have heard from several local residents who either did not receive a letter notifying them of the consultation period or who received the letter over one week into the four-week consultation period. The Minister for Planning has even admitted that only residents within a 200-metre radius were notified and that the legislation does not actually require a sign on the site itself to advise locals. This is just not good enough, and it indicates that the government is not actually serious about hearing from the community and taking their ideas and concerns into consideration.

Unfortunately this approach is a hallmark of the Allan Labor government, whether it is silencing local voices in relation to planning decisions or ignoring residents affected by the construction of the North East Link. This is a government that consults in name only. How do we know it was a sham consultation? Because in the middle of the consultation period, on 5 August, the *Age* published a story with the headline 'Decision made on future of prized Kew VicRoads site'. The government put out a media release that same day, stating that:

The Allan Labor Government is unlocking surplus government land to create more than 500 homes in Kew ...

Decision made: residents' views ignored. Consultation must be reopened on the VicRoads site to allow greater input from the local community. Residents also need greater clarity and detail provided about the proposed rezoning changes as part of the consultation. The information provided by the Department of Transport and Planning online and via mail to residents lacks sufficient detail and information. There is too much ambiguity around the issue of what sort of land is being rezoned to general residential zones and commercial zones. To give you an example, there is no clarity on what will become of the narrow tail section of the site, which many residents have informed me they feel should not be developed into housing given how limited the space is.

I have written directly to the residents in the area surrounding the site to seek their feedback this week, and overwhelmingly they are telling me that they want to see open space incorporated into the site, especially in relation to a strategic bike path. They have also shared their concerns about the impact on already congested local roads and other infrastructure. It is not unreasonable for them to be able to put these concerns to the Allan government and to seek clarity about how they might be remedied under any redevelopment of the site. So once again I ask the Premier to reopen the consultation on the 60 Denmark Street site.

State Emergency Service Point Cook unit

Mathew HILAKARI (Point Cook) (17:19): (816) My adjournment matter is for the Attorney-General in their capacity as the Minister for Emergency Services in the other place, and the action that I seek is for them to join me in a visit to the SES facility in Point Cook. It is a fantastic facility. It is type C, which is the largest of all SES facilities that we build. It has accommodation for 90 volunteers. It has six motor bays, a training centre, an operations room and a large turnout area. It is actually sensational. I have been there. I love it, and the community loves it. It is so important, particularly at times like this, because the last couple of nights we have seen howling winds across the community that I represent and so many others, and the SES just show their amazing, amazing value to our community. I look forward to the Attorney-General joining me at that facility.

Transport infrastructure

Tim READ (Brunswick) (17:20): (817) My adjournment matter is for the Minister for Public and Active Transport, and the action I seek is that the minister join with me and with bike riders from Brunswick and beyond on a ride from the State Library up Sydney Road on 26 September. Critical Mass is a community-led bike protest calling for better infrastructure for cyclists and other active transport and mobility aid users. Together we will ride as a group, forming a critical mass. This will be one of the only times that many Brunswick cyclists ride on Sydney Road, and for others it will be the safest they feel in doing so, because as it stands riding on Sydney Road is risky, which is why I invite the Minister for Public and Active Transport to join the ride and see for herself what this community needs.

The benefits of bike riding and active transport are well known to many, not least to the minister for active transport herself, I am sure. Besides being a great way to get some exercise on the way to your next destination, bikes reduce traffic congestion, air pollution and carbon emissions by reducing the number of cars on the road. Study after study shows that when you make more space for bikes local businesses get a sales boost. Better bike infrastructure is a worthwhile investment for any government, because a lot of people will not ride if it is not safe. Riders on Sydney Road run the gauntlet of car doors opening and cars turning or pulling in and out of car parks. At peak hour riders are forced onto the rough, potholed edges of lanes designed for cars and most dare not bring their children along as it is simply not safe.

Bisecting Brunswick, Sydney Road contains many of our most used shops, and the excessive car traffic and parking acts as a barrier to active transport in our congested neighbourhood. Footpaths are narrow. The bike lanes, which were repainted after a bike rider was killed almost a decade ago, are mostly obscured by parked cars and are so narrow that the government may as well have painted the words 'thoughts and prayers'. It is great that we have a minister for active transport, and I would be keen to get her views on how we can fix not only Sydney Road but dangerous bike routes across the state. Perhaps these safety concerns do not make for the most compelling invitation. However, I urge the minister not to worry, as the Brunswick community is offering us a unique opportunity to ride down Sydney Road and observe its shortcomings in the safety of a critical mass. I do hope to see the minister there.

Lentara UnitingCare

Kathleen MATTHEWS-WARD (Broadmeadows) (17:23): (818) My adjournment is for the Minister for Government Services, and the action I seek is that she join me in a visit to Lentara UnitingCare in Broadmeadows. I thank the minister for the work she is doing to help address the cost of living, and I also express my deep appreciation to the staff and volunteers at Lentara UnitingCare for all that they do every day to assist local residents who are struggling. Lentara UnitingCare provides financial counselling, no-interest loans, family support services, alcohol and drug services, employment services and food parcels, and I appreciate the minister's support for this important work.

Kiewa Valley Highway

Tim McCURDY (Ovens Valley) (17:23): (819) My adjournment matter is for the Minister for Roads and Road Safety, and the action that I seek is an onsite meeting with Regional Roads Victoria on the Kiewa Valley Highway to discuss options to fix a massive pothole in the road. Mr Ian Franzke of Mount Beauty has raised with me a significant road repair requirement in the north-east of Victoria. Mount Beauty is a beautiful village nestled in the foothills of Bogong and Falls Creek, and the people of Mount Beauty use Albury–Wodonga as their main service centre. The Kiewa Valley Highway is the main route to town. At the 21.5-kilometre mark, just north of Kergunyah Road, there is a significant pothole on the northbound lane. This pothole poses a serious safety risk, as it forces vehicles into the oncoming lane in a 100-kilometre-an-hour zone. Mr Franzke tells me that despite reporting this hazard to VicRoads on four separate occasions no action has been taken to address it. Mr Franzke finds it disheartening that despite the Victorian government’s commitment to road safety through the *Towards Zero* campaign urgent maintenance issues remain unattended. I seek an onsite meeting with Regional Roads Victoria.

Sunbury electorate transport infrastructure

Josh BULL (Sunbury) (17:24): (820) What a sitting week it has been. My adjournment matter is to the Minister for Public and Active Transport. The action I seek is for the minister to meet with me to discuss transport accessibility at the Sunbury township. I want to take this opportunity to thank constituents who keep in touch with me on local transport matters, in particular Graham from the Sunbury Residents Association, whom I met with recently to discuss the potential for improving and futureproofing the Sunbury rail precinct for local residents. Of particular note, I want to acknowledge when talking to residents the incredible excitement that has been generated from a whole range of transport infrastructure projects that have been generated within my community. The Gap Road level crossing is now gone. The Sunbury multideck car park is open. Sunbury Road is duplicated, and next year – I know those opposite will be absolutely pumped about this – the Metro Tunnel will open.

Members interjecting.

Josh BULL: I am overwhelmed by those on the other side. This government delivers for Victorians. We invest in local communities, we get things done and I look forward to the minister having a meeting with me at her earliest convenience.

Responses

Mary-Anne THOMAS (Macedon – Leader of the House, Minister for Health, Minister for Health Infrastructure, Minister for Ambulance Services) (17:26): The member for Caulfield raised a matter for the attention of the Premier, and the action that he seeks is that the Premier develop a fund to assist small businesses that have been affected by level crossing removals. I do have to note of course that the member for Caulfield took the opportunity to revise perhaps the position of his party and support the level crossing removals that are happening within his electorate. The member for Cranbourne raised a matter for the attention of the Minister for Multicultural Affairs, and the member has requested that the minister join her on a visit to the Cranbourne mosque. The member for Mildura raised a matter for the attention of the Minister for Mental Health in the other place, and the action that she sought is that the minister visit Merbein to discuss the development of the well-needed alcohol and other drug facility that the Allan Labor government is delivering in the member’s community. The member for Laverton raised a matter for the attention of the Minister for Carers and Volunteers, and the action that the member seeks is that the minister join her to visit some of the food relief services in her community, which are run by so many passionate local volunteers.

The member for Kew raised a matter for the attention of the Premier. The member requested that the Premier reopen public consultation on the future of the VicRoads site in the member’s electorate. The member for Point Cook raised a matter for the attention of the Minister for Emergency Services in the other place to join him on a visit to what sounds like a fabulous SES facility in the member’s electorate.

I was getting quite envious listening to how fabulous it is. The member for Brunswick extended an invitation to the Minister for Public and Active Transport to join him on a ride down Sydney Road on 26 September with other Brunswick cyclists to form a critical mass on Sydney Road. The member for Broadmeadows raised a matter for the attention of the Minister for Government Services, and the action that she sought is that the minister join her to visit Lentara UnitingCare in the Broadmeadows electorate, to meet with this fantastic community organisation and to learn more about the work that they do providing financial counselling, no-interest loans, family support services, alcohol and drug services, employment services and food parcels. I am sure the minister will look forward to joining the member for Broadmeadows in her electorate.

The member for Ovens Valley again raised a matter for the attention of the Minister for Roads and Road Safety. The action that he sought is that the minister join him at an onsite meeting on the Kiewa Valley Highway south of Mount Beauty. I will make sure that the minister knows about that request. The member for Sunbury, my neighbour, raised a matter for the attention of the Minister for Public and Active Transport to visit Sunbury to basically have a good look at many of the great projects that are being delivered by the Allan Labor government to meet the public transport needs of the good people of Sunbury. Sunbury station, I believe, was the particular request. I am sure that the minister will look forward to visiting Sunbury.

The SPEAKER: I thank the clerks, attendants and staff for their support this sitting week. The house now stands adjourned.

House adjourned 5:30 pm.