# PORTFOLIO COMMITTEE NO. 2 – HEALTH AND COMMUNITY SERVICES

**Thursday 6 September 2018** 

Examination of proposed expenditure for the portfolio areas

# HEALTH AND MEDICAL RESEARCH

# **UNCORRECTED**

The Committee met at 14:00

# **MEMBERS**

The Hon. Greg Donnelly (Chair)

The Hon.Wes Fang
The Hon. Paul Green
The Hon. Courtney Houssos
Mr Scot MacDonald
The Hon. Dr Peter Phelps
The Hon. Walt Secord
Ms Dawn Walker

# **PRESENT**

The Hon. Brad Hazzard, Minister for Health, and Minister for Medical Research

# CORRECTIONS TO TRANSCRIPT OF COMMITTEE PROCEEDINGS

Corrections should be marked on a photocopy of the proof and forwarded to:

Budget Estimates secretariat Room 812 Parliament House Macquarie Street SYDNEY NSW 2000

**The CHAIR:** Welcome to the public hearing for the inquiry into Budget Estimates 2018-19. Before I commence, I acknowledge the Gadigal people, who are the traditional custodians of the land, and pay my respects to elders past and present of the Eora nation and extend that respect to other Aboriginals present or joining us via the internet. I welcome Minister Hazzard and accompanying officials to this hearing. Today the Committee will examine the proposed expenditure for the portfolios of Health and Medical Research.

Before we commence, I will make some brief comments about the procedures for today's hearing. Today's hearing is open to the public and is being broadcast live via the Parliament's website. In accordance with the broadcasting guidelines, while members of the media may film or record Committee members and witnesses, people in the public gallery should not be the primary focus of any filming or photography. I remind media representatives that they must take responsibility for what they publish about the Committee's proceedings. It is important to remember that parliamentary privilege does not apply to what witnesses might say outside their evidence at the hearing. I urge witnesses to be careful about any comments they may make to the media or others after they complete their evidence as such comments would not be protected by parliamentary privilege if another person decided to take an action for defamation. The guidelines for the broadcast of proceedings are available from the secretariat.

There may be questions that witnesses could only answer if they had more time or certain documents to hand. In these circumstances, witnesses are advised that they can take a question on notice and provide an answer within 21 days. Any messages from advisers or the Minister's staff seated in the public gallery should be delivered through the Committee secretariat. Minister, I remind you and the officers accompanying you that you are free to pass notes and refer directly to your advisers seated at the table behind you. A transcript of this hearing will be available on the website tomorrow. To aid the audibility of this hearing, I remind both Committee members and witnesses to speak into the microphones. In addition, several seats have been reserved near the loudspeakers for persons in the public gallery who have hearing difficulties.

Finally, I ask everyone to turn their mobile phones to silent for the duration of the hearing. All witnesses from departments, statutory bodies or corporations will be sworn prior to giving evidence. Minister, I remind you that you do not need to be sworn as you have already sworn an oath to your office as a member of Parliament. I also remind Ms Koff from NSW Health that she does not need to be sworn, as she has been sworn at an earlier budget estimates hearing today.

**DOMINIC MORGAN**, Chief Executive, NSW Ambulance, affirmed and examined

KERRY CHANT, Chief Health Officer and Deputy Secretary, Population and Public Health, NSW Health, affirmed and examined

SAMUEL SANGSTER, Chief Executive, Health Infrastructure, NSW Health, sworn and examined

SUSAN PEARCE, Deputy Secretary, System Purchasing and Performance, NSW Health, sworn and examined

PHIL MINNS, Deputy Secretary, People, Culture and Governance, NSW Health, sworn and examined

ELIZABETH KOFF, Secretary, NSW Health, on former oath

**The CHAIR:** I now declare the proposed expenditure for the portfolios of Health and Medical Research open for examination. As there is no provision for a Minister to make an opening statement before the Committee commences questioning, we will begin with questions from the Opposition.

**The Hon. WALT SECORD:** Thank you. Minister, I would like to take you to health in rural and regional New South Wales. Are you aware of a case involving Dr Emil Shawky Gayed?

Mr BRAD HAZZARD: In what regard?

**The Hon. WALT SECORD:** Are you familiar with the activity of the formerly registered obstetrician and gynaecologist, and his activity in rural and regional New South Wales?

Mr BRAD HAZZARD: I am aware there was a Dr Gayed working in the regional hospitals.

**The Hon. WALT SECORD:** Yes, he was working in Manning Base Hospital. He used to be the visiting medical officer in the maternity and gynaecological division at Manning Base Hospital in Taree. He was a Cairo-trained gynaecologist and has been dubbed by patients and the community as the "butcher of the mid-North Coast". He has ruined the lives of dozens of women—perhaps hundreds of women. Are you now familiar with Dr Gayed?

Mr BRAD HAZZARD: I said I was familiar with him before.

**The Hon. WALT SECORD:** Are you aware that on 18 June the Health Care Complaints Commission [HCCC] prosecuted a complaint against Dr Gayed before the NSW Civil and Administrative Tribunal?

**Mr BRAD HAZZARD:** I am aware that Dr Gayed has been dealt with through disciplinary proceedings, but that is a matter that is being dealt with by the independent bodies that are appropriate to that task.

**The Hon. WALT SECORD:** The complainant alleged that Dr Gayed was guilty of unsatisfactory professional misconduct in relation to clinical examination and management of at least seven patients over a three-year period. Has NSW Health apologised to any of the patients affected by the butcher of the mid-North Coast?

Mr BRAD HAZZARD: That is a title that you have applied to the doctor, and while there are investigations underway—

The Hon. WALT SECORD: You do not agree with that title?

Mr BRAD HAZZARD: I am saying that is your title and you—

The Hon. WALT SECORD: I will call him "Mr Gayed".

**Mr BRAD HAZZARD:** Standing Order 65 requires you to comply with certain requirements for questions. I am asking you to comply with those requirements.

**The CHAIR:** Minister, you are not chairing this meeting.

Mr BRAD HAZZARD: No, but if you want to go back over that, I read very closely the standing orders and I am sure—

**The CHAIR:** I hoped this was not going to be the case, but we are starting almost identically as we did last year. Before we even get five minutes into the hearing you are telling members what to do. I remind you that there is a Chair for the hearing this afternoon—

Mr BRAD HAZZARD: Thank you for reminding me.

**The CHAIR:** —and that is myself. It is not for you to be directing members who ask you questions what to do. Okay?

**Mr BRAD HAZZARD:** I ask you to direct the member to comply with Standing Order 65.

**The CHAIR:** No, I am not directing the member to comply with that standing order—

The Hon. WALT SECORD: Mr Chair, to speed along proceedings I will comply. Perhaps the secretary would like to answer the question. Has NSW Health apologised to any of the patients affected by Emil Gayed?

Mr BRAD HAZZARD: What I will indicate is that there is a full inquiry being undertaken at arms length by Gail Furness. The fact that that person has been appointed, the fact that disciplinary proceedings have been taken and the fact that the HCCC is involved all indicate that there is a high level of concern about Dr Gayed—you are well aware of that. To my understanding, NSW Health has been seeking to contact various patients to make sure that they have support. If you know of anybody who has not been offered that support, please let me know and I will make sure it happens.

The Hon. WALT SECORD: Thank you, Minister. Referring to the ministerial inquiry you referred to, when will the ministerial inquiry be delivered to NSW Health?

Mr BRAD HAZZARD: That is obviously in the hands of Gail Furness, but she has been asked to progress that as quickly as possible. I am quite happy to let you have a copy of the report when it is made available.

**The Hon. WALT SECORD:** Would it be safe to say that it is imminent? I understand, from viewing a documentary on *A Current Affair*, that it is expected to be presented to you this month.

Mr BRAD HAZZARD: I have just asked the secretary and she has indicated to me that she does not know, and I do not know when that is likely to happen because that is up to Gail Furness. But certainly from my point of view as Minister, Dr Gayed's activities were such that NSW Health took a very strong action with regard to Dr Gayed. One anticipates that the report will be obtained as soon as possible and then, of course, the appropriate activity will be taken.

The Hon. WALT SECORD: Will it be released in full?

Mr BRAD HAZZARD: I would think it would be. I do not see any reason why it would not be—yes,

sure.

The Hon. WALT SECORD: Will the report be released to the public and to former patients in full?

Mr BRAD HAZZARD: I will take that question on notice, because I am not sure of the implications for witnesses who might be giving evidence. The problem is that when you are doing these investigations there are sometimes witnesses who do not want their names released. It will depend on the nature of the report, but my inclination is always to release openly and transparently reports on such matters. Let me take advice in due course, because I know that you would share the concerns that it would be problematic for any of the witnesses who do not want their names to be released.

**The Hon. WALT SECORD:** Minister, you may or may not be aware that on 18 July there was a meeting of the lower mid North Coast medical staff council at Manning Base Hospital, Taree. At that staff meeting three issues were discussed.

Mr BRAD HAZZARD: Is this still on Dr Gayed?

**The Hon. WALT SECORD:** Yes. Three issues were discussed: the announced upgrade to Manning Base Hospital, the need for kidney dialysis, and Emil Gayed. Are you aware that at that meeting—and I am quoting directly from minutes from the meeting—the activity of Dr Gayed were said to be "common knowledge" at the hospital and that Dr Osama Ali, who is head of clinical services, was challenged at that meeting saying that the administration was "very aware of the activity of Dr Gayed for a long time". I am quoting from minutes from the staff council on 18 July.

**Mr BRAD HAZZARD:** The answer to your question is obviously that I am not aware of that. Secondly, if you have that sort of information, you should make it available to Gail Furness or you should make sure that whoever has given that information also assists Gail Furness in making sure that it is properly addressed.

The Hon. WALT SECORD: These are staff medical council minutes from the hospital itself, activity that occurred under your local health district. Are you confident that you are not going to repeat the mistakes of the David Currow inquiry into chemotherapy dosing, where doctors, nurses and other health workers were not interviewed for the inquiry? Will you ensure that all doctors—

Mr BRAD HAZZARD: I am not sure that is actually right, Mr Secord.

The Hon. WALT SECORD: That is accurate. Dr Currow admitted in evidence here in this very room that all doctors, nurses and allied health workers—in fact, the Hon Paul Green was Chair of that Committee—were not compelled to participate in the section 122 inquiry, which I understand was called by your secretary, who is sitting next to you. Will you ensure that all doctors and nurses are being interviewed or have been interviewed for the inquiry?

Mr BRAD HAZZARD: As the health Minister, obviously I would want that, if they have something to contribute to the evidence that Gail Furness needs to address. Whatever it takes to get to the bottom of Dr Gayed's activities should be pursued. I am entirely supportive of that, but in the end we can only recommend that to Gail Furness, and there are proceedings through the various disciplinary bodies that work in the normal course and will be talking to those people and getting their evidence. If you think there is some other evidence that they are not getting or are not aware of, of course I will take it.

The document you have at the moment is indicative of the need to have a look at whether all that is being done. But that document is simply someone's record of minutes of a meeting long after the event. Whether or not it assists, I do not know. You need to actually understand, as I am sure you do, the need for somebody who is conducting the inquiry to conduct it in a way that the evidence is substantive and considered. But I support completely the concept of getting any appropriate evidence—of course, yes.

**The Hon. WALT SECORD:** I will quote something else directly from the minutes of the very meeting at the hospital. Staff said they were surprised—

Mr BRAD HAZZARD: This is the one at Manning Base Hospital?

**The Hon. WALT SECORD:** I will provide you with a copy of it, if you wish.

Mr BRAD HAZZARD: Sure, after the hearing.

**The Hon. WALT SECORD:** I have a copy with my personal notes on it. To quote directly, staff were "surprised to hear that doctors would not be interviewed" for the ministerial inquiry. The staff raised concerns with the head of clinical services at the hospital in which this doctor operated. A member of the medical staff said that there were "wider failings of hospital governance such as the supervision of registrars at the hospital".

Mr BRAD HAZZARD: The methodology that is used is exactly the same as what was used under the former Labor Government for 16 years. I do not think that everything that was done under the former Labor Government in regard to these sorts of matters was absolutely perfect, but that is because it is a human system. If you think that there is something that is being missed out—

The Hon. WALT SECORD: Very clearly, very clearly from the staff minutes that the staff—

Mr BRAD HAZZARD: To be honest, I am not sure why you are raising it here. If it is an issue—

**The Hon. WALT SECORD:** Because you administer the health and hospital system. We have a doctor who has butchered—

Mr BRAD HAZZARD: I have a list of letters here you have sent to me, and I have responded to every one of your letters. If you have something that you genuinely think is a cause for concern, by all means raise it. You have, and I have responded. I am saying to you—

**The Hon. WALT SECORD:** Minister, you do not think that this is important?

Mr BRAD HAZZARD: Of course I think it is important. What I am saying to you—

The Hon. WALT SECORD: You have doctors—

Mr BRAD HAZZARD: —is you should not be making political points out of something that goes to people being seriously hurt by a doctor, and there are investigative procedures that were in place under Labor. All I am saying to you, Mr Secord, is do not politically grandstand on this. Give me the documents and if you think there is something wrong then write to me. I will do what I have done for you every time, and I have all the letters

here from you that I have responded to. You have always had a substantive response; give it to me and I will follow it up.

The Hon. WALT SECORD: Minister, will you investigate claims—

Mr BRAD HAZZARD: I have answered it. I have answered it. Next question.

The Hon. WALT SECORD: No, you are not chairing the meeting. Minister, will you investigate claims—

Mr BRAD HAZZARD: Well, I have just answered the question.

**The Hon. WALT SECORD:** Minister, will you investigate claims by doctors and nursing staff at the hospital that doctors and nurses are not being interviewed for an inquiry by NSW Health into Dr Emil Gayed?

Mr SCOT MacDONALD: Can I take a point of order, Chair?

The CHAIR: You can, yes; go for your life.

**Mr SCOT MacDONALD:** Point of order: I think we have a procedure that the Minister can answer the question as he sees fit. He has indicated that he has answered it.

**The Hon. COURTNEY HOUSSOS:** To the point of order: In the same way that the Minister is entitled to answer the question as he sees fit, equally the member is entitled to ask a question as he or she sees fit. If the member seeks further clarification then he is well within the standing orders to do so.

**The CHAIR:** That is exactly right. The Minister is not obliged to answer the question in any particular way; that is a matter for him. But the question was quite clearly in order.

**Mr BRAD HAZZARD:** Can I just say that I am looking at section 122. Again, Mr Secord, you and I could have talked about this separately and got it done satisfactorily, collectively for the health system, rather than grandstanding. Section 122—

**The CHAIR:** Minister, you raised the issue of making political points in your previous few comments and now you raise the issue of grandstanding. You are editorialising this whole thing. This Committee process works this way: The question gets posed to the Minister or, by reference, to one of the officials, and the answer is provided. We go back and forth—that is how budget estimates works.

Mr BRAD HAZZARD: Yes, and I am entitled to answer in any way that I like.

The CHAIR: I ruled on that about two minutes ago.

Mr BRAD HAZZARD: And I am answering it. As I was saying—

The CHAIR: Hang on. I indicate that you are—

Mr BRAD HAZZARD: You are wasting his time, not mine.

**The CHAIR:** Minister, I reiterate to you that you are not the Chair of this hearing. The question is posed, you answer the question in the way you see fit, and the next question will get posed.

**Mr BRAD HAZZARD:** As I was saying, section 122 of the Health Services Act, which I am sure you are familiar with—or I hope you are familiar with—does not empower the forcing of witnesses to give evidence.

**The Hon. WALT SECORD:** Do you not think that is a deficiency in the legislation? This came up in the David Currow affair. There is no compulsion; you cannot compel doctors and nurses to participate in the inquiry.

Mr BRAD HAZZARD: Mr Secord, that legislation is your Labor Party's legislation, 1997.

The Hon. WALT SECORD: You have been in government for eight years.

Mr BRAD HAZZARD: You guys put the legislation in.

**The Hon. WALT SECORD:** Stop looking in the rear-view mirror.

Mr BRAD HAZZARD: Stop playing politics. Seriously.

The Hon. WALT SECORD: Minister, this is a serious subject.

Mr BRAD HAZZARD: Whether or not the chairman wants to save it or not—

The Hon. WALT SECORD: This man butchered women.

**The CHAIR:** Order! The way this hearing proceeds—and I will keep repeating this—is the question gets posed, the Minister then responds. That is the way it goes. The question gets asked, the Minister responds. If the Minister is going off track, I will intervene. But let us play the game.

Mr BRAD HAZZARD: Or if he is going off track.

**The CHAIR:** Minister, it is not for you to formulate his questions.

Mr BRAD HAZZARD: It is not for you, either, to tell me how I should answer the questions.

**The CHAIR:** I am not telling you how to answer the questions. I am trying to have a rhythm develop where we have questions and answers.

Mr BRAD HAZZARD: I am giving an answer, which is the legislation was under the Health Services Act 1997. As I started to say to you, legislation, which your Government put in place, does not force people to give evidence, as I understand it, but it does empower people who want to give evidence to give evidence. That is certainly the current law. I am happy to look at whether or not that is a satisfactory arrangement. If I know the Labor Party is now going to agree to amendments—

The Hon. WALT SECORD: I would support that. I would support a change to that legislation.

**Mr BRAD HAZZARD:** You have not written to me about that; you have not told me that. You are playing games here.

**The Hon. WALT SECORD:** Minister, does it not concern you that doctors have not even been approached by the so-called inquiry? They expressed at the 18 July staff meeting that doctors had not even been approached. Doctors concerned about this spoke out at that meeting.

Mr BRAD HAZZARD: Were you at the meeting?

The Hon. WALT SECORD: I am going by minutes of the meeting that were leaked to me.

Mr BRAD HAZZARD: You said you were not at the meeting.

**The Hon. WALT SECORD:** Are you disputing the minutes of the meeting?

**Mr BRAD HAZZARD:** I do not know about them. You are relying on them as if they are gospel and putting your own interpretation, for I do not know what reason.

The Hon. WALT SECORD: Minister—

Mr BRAD HAZZARD: I am telling you quite clearly that under section 122 of the legislation that the State Labor Party put in in 1997—your party, when you were advising Bob Carr—what actually occurred was that it was not made compulsory but they can come forward and do it. I would encourage absolutely everybody to come forward.

**The Hon. WALT SECORD:** Minister, do you not think that you owe it to the women who were maimed by this man to have a full, thorough, independent external inquiry—

Mr BRAD HAZZARD: I just said I would encourage everybody to come forward and give their evidence, yes.

The Hon. WALT SECORD: You are not compelling doctors or nurses or allied health—

Mr BRAD HAZZARD: Did you hear what I just said? The legislation does not require that.

**The Hon. WALT SECORD:** Do you not think it should? Do you not think there should be a proper investigation into this?

Mr BRAD HAZZARD: I have answered the question. Sorry, move on. I am not answering any more questions on this.

The Hon. WALT SECORD: This is a very serious issue.

Mr BRAD HAZZARD: Yes. You know what?

The Hon. WALT SECORD: This man operated at Taree hospital—

Mr BRAD HAZZARD: You should not be taking advantage.

The Hon. WALT SECORD: —Grafton, Kempsey, Cooma, Mona Vale Hospital.

Mr BRAD HAZZARD: Let me say that in terms of the Government, the Government is outraged around what Dr Gayed may have done. But he has got to go through the process, and the process was the process that your Government—the Labor Government—put in play. We are complying with that. But if there are any folks who have in any amount or shape or form any evidence they would like to give and they feel that they in some way have been denied that, then I would say to them, "Tell me", and I will do what I do whenever I get a phone call from anybody or a letter from you, Mr Secord. I actually call; I actually ring them and I actually make sure that they—

The Hon. WALT SECORD: I know you do.

**Mr BRAD HAZZARD:** Thank you. I will make sure they do get heard. But that is really all I can say to you. You can beat it into oblivion and waste your time if you want to; that is up to you.

**The Hon. WALT SECORD:** Do you think a three-year disqualification is acceptable for a person like this?

Mr BRAD HAZZARD: My personal view is not what is relevant. My personal view I am not going to express. But a person who does anything that hurts anybody else in the medical environment deliberately or, for that matter, for any other reason needs to be dealt with through the appropriate processes. The appropriate processes are laid out in legislation that both sides of the House agreed upon. In this case, your Government actually set the legislation. Labor is the problem.

**The Hon. WALT SECORD:** Ten minutes ago an internet search showed that he is still listed as operating a Dee Why practice. Can you or your department assure the community—

Mr BRAD HAZZARD: What practice at Dee Why?

**The Hon. WALT SECORD:** It says "Dee Why practice" on Dee Why Parade. A Google internet search shows that he is listed there still. Can you assure the community that he is still not practising?

Mr BRAD HAZZARD: My understanding is that he is not practising. But there is no public hospital or facility in Dee Why so I am not quite sure to what you are referring. If you have dug up some old website, well, fine. But do your checking before you come here. How about you just see me? It is a serious issue and you are trivialising it in an estimates committee. Do what you do other times, Mr Secord. You have written to me—

**The CHAIR:** Minister, you are reflecting on the member's question.

Mr BRAD HAZZARD: Yes, I am.

The CHAIR: It is not for you to do that.

Mr BRAD HAZZARD: I am sorry. I am entitled to answer a question whatever way I like—

The CHAIR: Yes, but not reflect on—

Mr BRAD HAZZARD: —and I am answering.

**The CHAIR:** You are entitled to answer it, I agree.

Mr BRAD HAZZARD: Thank you.

The CHAIR: But you are not entitled to reflect on members asking questions. You know that.

**Mr BRAD HAZZARD:** I am reflecting on the fact that the member knows full well—because he has had ample opportunity to work with me over the past 18 months—that whenever he has had a serious issue I have responded to it.

The Hon. WALT SECORD: Minister—

Mr BRAD HAZZARD: I am saying do not play silly games in here. Give me the substance.

The Hon. WALT SECORD: Minister—

Mr BRAD HAZZARD: And do not do a Google search 10 minutes ago and tell me that he is still there.

**The Hon. WALT SECORD:** Minister, why will you not conduct a full, thorough and independent investigation where witnesses are compelled to participate in this? Why will you not call a full inquiry?

Mr BRAD HAZZARD: We have appointed, in accordance with the Health Services Act section 122, what can be done. And it is being done in accordance with the legal framework established by the former Labor Government—

The Hon. WALT SECORD: No, no.

Mr BRAD HAZZARD: —by Premier Carr, of which you were an adviser at the time.

The Hon. WALT SECORD: Could I ask a question of the secretary?

Mr BRAD HAZZARD: No. Direct it to me.

**The Hon. WALT SECORD:** Has NSW Health estimated the number of patients who have been affected by Emil Gayed? Grafton hospital, Kempsey hospital, Cooma Hospital, Manning and Mona Vale Hospital—is there an estimate or a calculation of the number of patients?

Mr BRAD HAZZARD: Affected by, did you say?

The Hon. WALT SECORD: Affected by or reviewed as part of this inquiry.

Mr BRAD HAZZARD: That will be part of what Gail Furness looks at.

The Hon. WALT SECORD: Elizabeth Koff, who I think is sitting next to you, called the inquiry.

Ms KOFF: Yes.

Mr BRAD HAZZARD: I will do the answering.

**The Hon. WALT SECORD:** Is there an estimate? Is it hundreds? Is it thousands? Is it dozens?

**Mr BRAD HAZZARD:** That information will become part of the report that Gail Furness does. She needs to go through and establish—it is not a matter of how many people a doctor sees. It is a matter of how many people he did inappropriate or deleterious things to or actions to.

The Hon. WALT SECORD: He left a trail of destruction.

Mr BRAD HAZZARD: Those things will be looked at through the inquiry.

Ms DAWN WALKER: I have had some quite concerned people approach me about healthcare accommodation for relatives. As I understand it, country patient accommodation for patients and their relatives was available at Royal North Shore Hospital, Prince of Wales Hospital and Royal Prince Alfred Hospital and it is no longer there; there is no country accommodation. Can you confirm that?

Mr BRAD HAZZARD: In any of the new hospitals that we are building—for example, the Liberal-Nationals Government is spending nearly \$700 million on Blacktown Hospital—accommodation is being established for mums, dads and family members in the actual room of the patient. There is a lot of evidence to indicate that having family members nearby or engaged is generally a positive or has been generally a positive. After consulting with consumers, with patients, the new designs of our new hospitals are taking into account the issue that you are raising. For example, the brand-new paediatric intensive care unit [PICU] at John Hunter Hospital has also been built with appropriate accommodation to allow a mum or dad to stay overnight. I am not sure what accommodation that you are talking about was at those three hospitals that you have raised but if you want to send me some details I will pursue it for you.

Ms DAWN WALKER: It was onsite accommodation that enabled patients from regional New South Wales and their carers to have accommodation on site.

Mr BRAD HAZZARD: I can say that there has been no decision that I have taken which would allow that to occur. There is certainly no diminishment of accommodation from my point of view. I think that if we can have accommodation as part and parcel of a health precinct that is a really positive thing. But if you can have them with the patient, in certain circumstances that is a positive thing. But I will take the rest of the question on notice if that is all right and I will get you a detailed answer.

fMs DAWN WALKER: Can I clarify, though, that you are not aware that the country accommodation

was—

Mr BRAD HAZZARD: No.

Ms DAWN WALKER: —available at the hospitals and is no longer available?

Mr BRAD HAZZARD: I am not aware. I have not taken any decisions on that. What I am saying is I share the concern to try and make sure we do have accommodation for families nearby. But if there has been something taken along the—I mean, it may have been but I do not think it has been. But let me find out for you.

Ms DAWN WALKER: While you are finding that out, if you could perhaps also let us know what has happened to the buildings and what they are being used for now and whether they are still owned by the Government.

Mr BRAD HAZZARD: Sure.

Ms DAWN WALKER: Thank you.

Mr BRAD HAZZARD: Can I say that in some areas—for example, out in Westmead, I think it is, or out in the Western Sydney local health district—there is Ronald McDonald House, which if patients are going to be requiring care for a certain number of days or if the patients' families have to drive, I think, more than 100 kilometres each way then there is generally accommodation available. But obviously accommodation is subsidised and certainly Ronald McDonald House takes the view that, as much as we all want to help, there should be some guidelines around how that would operate. But let me have a look more broadly for you and I am happy to give you some information on that.

Ms DAWN WALKER: I would appreciate that because I am receiving a representation that what it now means is that country patients can no longer afford to access health services that they need. It is preventing them from getting the health services they need. Some are being forced into debt; some are being forced to sell assets. Some are not actually going ahead with the hospital service because they cannot afford to stay in Sydney.

**Mr BRAD HAZZARD:** One of the issues I recollect from when I was in opposition was that this was also a problem under the former Government. But our Government, the Liberal-Nationals Government, has recently doubled what is called IPTAAS. Are you familiar with that?

Ms DAWN WALKER: The Isolated Patients Travel and Accommodation Assistance Scheme?

Mr BRAD HAZZARD: Yes. Off the top of my head, I think those figures have gone from somewhere in the order of about \$12 million to maybe about \$25 million. If people and families do comply with the requirements—so if they have got a long way to travel or they have got to come back—it would be worth them making an application. Certainly that helps a lot of patients with their accommodation here in Sydney if they are coming from regional areas. Having said that, could I say this: one of the things that our Government, the Liberal-Nationals Government, has done is spend \$1 in every \$3 on regional redevelopments of hospitals. We are trying to make sure that the families do not have to do those long distances. At the moment we have rebuilt Tamworth Hospital. It is an amazing hospital. We have rebuilt Wagga Wagga with stages one and two, and building stage three at the moment.

Ms DAWN WALKER: Will they have accommodation?

Mr BRAD HAZZARD: No, but I was with a mum one day this week in Wagga Wagga in the burns unit; a little baby, Junior—a little cutie—who is 10 months old, and his mum, Angela. I was talking about this sort of issue because normally a little baby like Junior, who had burned his right hand falling into his grandparents' fireplace, would have to be transported to Westmead children's. The methodology that is now being used—which the mum, Angela, was saying was just unbelievable for her—was that there are nurses and others trained at Wagga Wagga in their burns unit, and if they need specialist help on any particular issues, they were doing it through digital connection back to the Westmead children's.

**Ms DAWN WALKER:** Minister, can I just interrupt you, because I appreciate that it is an important story, but—

Mr BRAD HAZZARD: It is a changing practice. That is all I am saying.

Ms DAWN WALKER: I understand what you are saying and I am sure that is appreciated, but we still obviously have a serious issue where country patients are not able to access accommodation at these big city

hospitals. You have mentioned the subsidy. Just for your interest, the subsidy is at the rate of, for a private stay, \$20 per patient. If they stay in an Airbnb, they will also only get \$20 per night per person. If they stay in for-profit accommodation, they get reimbursed \$43 per night. So I think we can all appreciate that that goes nowhere near covering the cost of accommodation in Sydney. So these people from the country have not only got the stress of needing medical attention, they have also got to negotiate Sydney rental prices and the only assistance they have got is \$43 a night. That goes nowhere near addressing the issue of our country people when they need to come and access services in the city. So I do appreciate that you will take that on notice and we can talk about that further when you get some information.

Mr BRAD HAZZARD: Could I also say very clearly that I do not have any knowledge of the closure of any facilities, but I will look into it, as I said. I am aware though that at the Royal North Shore Hospital there are 18 beds for care accommodation in the Douglas Building. But I do think it is a big issue. It is like people talk about the number of beds that are available. That is relevant, but it is not the be-all and end-all these days when you are looking at a changing medical practice in the way patients are treated. As I started to say to you, that mum was saying that, instead of her having to travel back and forth or find accommodation, she was able to just come in. She was from Tumut, so she was travelling to Wagga—which is still a bit of a distance—but she was coming in and she said it has made such a difference to their life.

**Ms DAWN WALKER:** And that is what we are hearing as well. But that service is not available in the way it was previously, and obviously there is a great need to support country patients when they are coming to the city to get medical services.

Mr BRAD HAZZARD: Let me have a look—

Ms DAWN WALKER: Can I move on to ambulance services?

Mr BRAD HAZZARD: Sure.

**Ms DAWN WALKER:** I understand there is a new system that has been introduced in the paramedic response network, which is known as the superstations. I am wondering if you could elaborate on how you are finding the superstations, particularly in regard to the response times?

Mr BRAD HAZZARD: When the superstations were first invented there was, I think it is fair to say, concern from some of the paramedics about whether or not it would be an advantage for them or it would be a plus. I have attended the opening now of about half, or about five, of the superstations. And of course the opening usually occurs sometime after the staff have moved in and got it going. The staff who are in those superstations love them because they have a whole lot of advantages. A lot of the old ambulance stations were pretty dark and dingy, often no meeting rooms, often no recreation rooms, no capacity for anybody else to do the re-equipping of the ambulances.

They now have teams at each of these superstations who are often paramedics in training, and they are actually learning a lot because they are equipping the ambulances that they will later be working in once they have done their qualifications. They all love them. The waiting times, the actual response times as I understand it, have been improved in some areas but there are other issues where we need to look at each individual case. There are also, can I say, not just the superstations. There is usually another smaller station which is allied to it, maybe a number of kilometres away, so they can have a team that actually drops in there as well, which also addresses the issue of making sure they can respond fairly quickly. I had better finish off on that and I will come back to it if you like, but I do not want to disappoint Mr Secord or Mr Green.

The CHAIR: You will be disappointing someone even more important, and that is the Hon. Paul Green.

**Mr BRAD HAZZARD:** Can I say, Mr Donnelly, I actually entirely agree with that statement. I am happy—very happy—to respond at all times.

**The CHAIR:** We know the Government can count two votes, so we understand that exactly.

**Mr BRAD HAZZARD:** No, no. It is just that some people do not take political advantage. Off you go, Mr Green. I am looking forward to your question.

The Hon. PAUL GREEN: I know that I am not important, but my vote is. I appreciate that.

Mr BRAD HAZZARD: That is not true.

The CHAIR: And the other one.

Mr BRAD HAZZARD: That is not true.

**The Hon. PAUL GREEN:** Minister, given yesterday's *Telegraph* article on transgenderism, are you concerned about the use of puberty blockers and cross-sex hormone therapy in children—given that their brain and body is still undergoing a massive development? Are you concerned about that?

**Mr BRAD HAZZARD:** You would be surprised to know I did not read yesterday's *Telegraph*, so tell me more about what was happening. What is it?

The Hon. PAUL GREEN: There was a front page story talking about schools and the Education portfolio. My colleague will address that.

Mr BRAD HAZZARD: I am sorry, I am not familiar with it. So tell me what it is about.

The Hon. PAUL GREEN: It is about children under the age of between five and upwards undergoing transgenderism—

Mr BRAD HAZZARD: Five?

The Hon. PAUL GREEN: —and opportunities to grow into their gender choice, and of course one of the greatest concerns of that is the puberty blockers and cross-sex hormones that would need to be introduced at some stage to achieve that outcome. Minister, how many children under the age of 10 years have been referred to gender clinics in New South Wales?

Mr BRAD HAZZARD: I will have to take that on notice.

The Hon. PAUL GREEN: I understand that.

**Mr BRAD HAZZARD:** I obviously need to read the *Telegraph* more and find out about it. But those issues are issues for—

The Hon. PAUL GREEN: It was on yesterday's front page and today's page 9 with the Prime Minister.

**Mr BRAD HAZZARD:** I saw my front page today and I saw page 3 when I was there, but I have not actually seen the others. Sorry about that.

The Hon. PAUL GREEN: That is okay.

Mr BRAD HAZZARD: One of the issues, can I say—

The Hon. PAUL GREEN: Yes.

Mr BRAD HAZZARD: —is anything to do with transgender issues or—

Dr CHANT: Gender dysphoria.

Mr BRAD HAZZARD: —gender dysphoria are obviously very challenging issues for family and parents and medical practitioners. In fact, I am very familiar with the fact that it is also very challenging for people who are carers—so foster carers of children who may actually have or be diagnosed with gender dysphoria. And there is a whole continuum of responses, including having to have, I think it is, the Family Court involved to make decisions about children in care, for example. But I always took the view—

**The CHAIR:** That is no longer the case, Minister. The Family Court is out of it now.

Mr BRAD HAZZARD: Is it? When did they stop doing it?

The CHAIR: Last year.

Mr BRAD HAZZARD: Last year? The CHAIR: Anyway, continue.

**Mr BRAD HAZZARD:** Who is doing it now then? Is the court not involved at all? Okay. But, anyway, those issues are a continuum of essentially clinical decisions which I certainly would not, as the Minister, get involved in. I think those are matters that are best left to the clinicians.

**The Hon. PAUL GREEN:** I think one of those things is health care, which is your portfolio. But, of those, how many children under 10 years—

Mr BRAD HAZZARD: I just said that. I think that the clinicians—

The Hon. PAUL GREEN: I acknowledge gender dysphoria issues are very complicated. I have got no problem with that concept. How many children under 10 years have been prescribed puberty blockers or cross-sex hormone therapy in the gender clinics? I know you are going to take that on notice. I will come back to something that you are probably more familiar with. Minister, about a fortnight ago you attended at my invitation the Shoalhaven Roundtable, along with me and the member for Kiama, Gareth Ward, and Shoalhaven Memorial District Hospital staff.

Minister, we acknowledge the money that has already been invested in the Shoalhaven District Memorial Hospital in the past five years. However, at least more than \$300 million is still required for upgrades in order to provide the services demanded by the greater Shoalhaven population. Of course, the Christian Democratic Party has supported the Government with our value balance of power and brought economic prosperity to our State. With this in mind, can the Minister give an undertaking to the people Shoalhaven that at least \$300 million will be announced and invested into the Shoalhaven District Memorial Hospital upgrades, and when do you see this happening?

Mr BRAD HAZZARD: First of all—

The Hon. PAUL GREEN: And if you could maybe elucidate also on the master plan.

Mr BRAD HAZZARD: You were there for that.

The Hon. PAUL GREEN: No, I nicked out for a funeral.

Mr BRAD HAZZARD: You nicked out for the funeral? Okay.

The Hon. PAUL GREEN: I had to. Sorry. Mr BRAD HAZZARD: Okay. All right.

The Hon. PAUL GREEN: I did send my apologies for that moment.

**Mr BRAD HAZZARD:** And I explained why you were away. First of all, thank you to you and Gareth Evans for inviting me down.

The Hon. PAUL GREEN: Gareth Ward.

Mr BRAD HAZZARD: Gareth Ward.

**The Hon. WALT SECORD:** You were thinking of New York. **The Hon. Dr PETER PHELPS:** That will make the blooper reel.

The CHAIR: Let us move it along.

The Hon. PAUL GREEN: When are we getting a new hospital in the Shoalhaven?

Mr BRAD HAZZARD: We are working on that, and can I say the purpose of the attendance which you invited me for, was to—and I thank you and Gareth again for that—bring together about 45 local physicians and others who were interested in the future of the Shoalhaven District Memorial Hospital. As you would be aware, they are currently working on the clinical services plan to determine exactly—the way it works is that the physicians have to come together to work out the clinical services plan, given that that also occurs with the assistance of the local health district and also the ministry and health infrastructure.

When they have worked out what services they think should be there as part of the network of hospitals, because no hospital is an island—and that is what we were talking about while you were out of the room that day—the master planning then proceeds once we know that; once we work out what is happening. I would be hopeful that that would progress very soon. Hopefully the doctors can work it out. We discussed a whole lot of issues about sensible requests for what services are reasonable, having in mind the proximity to other provisions and also the growing community. You recollect they were talking about the fact that the community there is growing quite rapidly?

The Hon. PAUL GREEN: Yes.

**Mr BRAD HAZZARD:** I think when they finalise that clinical services plan we will then go to the master planning and that is a very public process. Once that is done then we can get a better idea of the total cost. You asked for \$300,000 million, was it?

The Hon. PAUL GREEN: At least.

Mr BRAD HAZZARD: At least. That is better.

The Hon. PAUL GREEN: At least—not a baseline.

Mr BRAD HAZZARD: Can I say sometimes you can work with a lot less, sometimes you need a lot more? It depends on whether it is a brownfield site, a greenfield site. That particular site is a fairly constrained site and that presents certain difficulties. You could be underselling; you could be overselling your community. All I will say at this stage, Mr Green, is I think you are right to be a strong advocate, and you are—as is Gareth Ward. Well done to both of you for bringing the relevant community members together. But also we can now engage the broader community as well through that master planning process once the clinical services plan is complete. I do not think it is helpful to jump in and put a figure or an immediate time line on that because you create expectations that probably could not be met by the actual doctors themselves and by the master planners.

**The Hon. PAUL GREEN:** Thank you for that. My opinion is very clear: We should be rebuilding a new hospital at the university and starting from scratch and building a state-of-the-art hospital, centre of excellence for research and opportunities.

Mr BRAD HAZZARD: And you would know that my door is always open to you and you are welcome to come and chat about that any time. I would value your input more, because I did not get to talk to you much that day on it.

The Hon. PAUL GREEN: No.

Mr BRAD HAZZARD: For obvious reasons.

**The Hon. PAUL GREEN:** I am trying to be a vessel for the healthcare workers there in the city.

The Hon. WALT SECORD: A former nurse. Mr BRAD HAZZARD: Thank you for that.

The Hon. PAUL GREEN: Former nurse, that is right.

The Hon. WALT SECORD: Former—underline "former".

The Hon. Dr PETER PHELPS: Declaration of interest.

The CHAIR: You are never a former nurse.

**The Hon. PAUL GREEN:** That is another system I have to fix.

The Hon. Dr PETER PHELPS: Still got your ticket?

The Hon. PAUL GREEN: No, it is just a degree on the wall and basically I can no longer practise, sadly.

Mr BRAD HAZZARD: We could probably get you a scholarship.

The Hon. PAUL GREEN: That is right.

**Mr BRAD HAZZARD:** I better not do that, I will end up in the Independent Commission Against Corruption. Sorry.

The Hon. PAUL GREEN: That is a good question, Minister. That leads into one of my questions: How many scholarships are being taken up that the Government is offering for those women and men across New South Wales who are not in Sydney who have to travel here and renew their licences because they have not practised for 10 years?

Mr BRAD HAZZARD: Can I take that on notice and get back to you?

The Hon. PAUL GREEN: Yes, you can. Are you aware of the downgrading of the Griffith Hospital in terms of maternity services, I think from memory? Do you have a comment about that?

Mr BRAD HAZZARD: I have visited Griffith Hospital—in fact, on three or four occasions—and Griffith Hospital is very much getting a lot of support from the Government. Our local, relatively new member of Parliament has been talking to me about those issues. The Government has committed approximately

\$200 million—maybe a little bit more than \$200 million—to work being done at that hospital and at no point has anybody indicated to me that maternity has closed.

The Hon. PAUL GREEN: Or closing?

**Mr BRAD HAZZARD:** That is a complete anathema because we are spending a fortune, which the former Government never—

**The Hon. PAUL GREEN:** I may be off the mark. I tried to get an email to me that was a representation from someone about Griffith Hospital. I might be off the mark with the maternity issue. My understanding is about downgrading at the hospital.

**Mr BRAD HAZZARD:** One of the difficulties with regional hospitals, particularly the smaller ones, is getting obstetricians. It has been that way for 20 years.

The Hon. PAUL GREEN: Yes, and psychologists.

Mr BRAD HAZZARD: A lot more than that—a lot more than that actually. Almost everybody who specialises is quite challenging to get into regional areas. But we do generally have general practitioner obstetricians, and particularly I understood that was the case, I thought there were two currently in Griffith, but I will—

The Hon. PAUL GREEN: I will check it out while you are answering some other questions.

Mr BRAD HAZZARD: Check it out and I wait to continue that discussion.

**The Hon. WALT SECORD:** Following up, I was not going to go down this line of questioning until my colleague the Hon. Paul Green referred to it—talking about planning for regional hospitals and Shoalhaven Hospital.

Mr BRAD HAZZARD: All hospitals.

**The Hon. WALT SECORD:** All hospitals—the importance of planning. You stressed that and I tend to agree with you on that.

Mr BRAD HAZZARD: That is twice in one day. You agreed with me on the ABC this morning; I was ecstatic.

The Hon. Dr PETER PHELPS: Where is the real Walt, and what have you done with him?

**The Hon. WALT SECORD:** I had a good night's sleep. I now refer to the 1 June announcement by the Premier involving Manning Base Hospital. Are you familiar with that announcement—1 June?

Mr BRAD HAZZARD: I am familiar with Manning Base Hospital.

**The Hon. WALT SECORD:** And the 1 June announcement? I think you were there with the Premier and the local member of Parliament, Stephen Bromhead; the Manning Base Hospital General Manager, Jodi Nieass; and Hunter New England Health Chief Executive Officer Michael DiRienzo. Are you familiar with that announcement? You were there; it was \$20 million.

Mr BRAD HAZZARD: I am familiar with Manning hospital. I am not only familiar with Manning hospital, I also understand the importance of the Manning hospital as part of the network for that whole Hunter and Upper Hunter area through the John Hunter Hospital and the Maitland Hospital. So, yes, I am familiar with it.

**The Hon. WALT SECORD:** Are you familiar with the details of the announcement that was made on that day?

Mr BRAD HAZZARD: The press release was issued, yes.

**The Hon. WALT SECORD:** What will the extra \$20 million that you announced on 1 June actually do?

Mr BRAD HAZZARD: There is already work underway on—I get a bit disoriented as to whether it is north, south, east or west—I think it is the eastern side of the hospital, and it is fantastic. There are new buildings going up. They are pretty well complete. Those buildings will have the new imaging equipment.

The Hon. WALT SECORD: It is coming back to you.

Mr BRAD HAZZARD: What is coming back to me?

The Hon. WALT SECORD: It is coming back to you. You said you were scrambling there.

The CHAIR: No, the Minister did not say that; he did not say that at all.

**The Hon. WALT SECORD:** I am sorry.

The CHAIR: Let the Minister answer the question.
The Hon. WALT SECORD: Okay. Sorry, Chair.

Mr BRAD HAZZARD: The imaging equipment will go into the building, which is, as I said, connected by a couple of walkways and I think on the second level there is a connection. The imaging equipment at the moment is on the ground floor, which is near the back entrance to the hospital. That imaging equipment will move over to the new buildings. Some of that \$20 million—the additional \$20 million—will assist with some of the refitting of the old areas. One of the issues they would like is more beds and more room. There will be \$20 million available for the refitting of the old area. The area is quite dark down where imaging currently is and they are looking at that at the moment to try to work out how best the local hospital management and Michael DiRienzo considers that \$20 million should be used. I am not quite sure, it was all welcomed and I think it is a great outcome for the local community. The Taree community is delighted about it. Do you have a problem with it?

The Hon. WALT SECORD: No.

**Mr BRAD HAZZARD:** Do you not want to spend the money? Does Labor not want to spend \$40 million in Manning?

**The Hon. WALT SECORD:** Minister, I will take you to the 18 July lower mid North Coast medical staff council meeting that discussed, as I said earlier, three issues: the need to read kidney dialysis—

**Mr BRAD HAZZARD:** Is this off the same thing you had before?

The Hon. WALT SECORD: It is the same thing.

**Mr BRAD HAZZARD:** That is exciting; you have one document on which to run the whole budget estimates hearing. That is fantastic.

The Hon. WALT SECORD: I hope so.

Mr BRAD HAZZARD: I am delighted.

The Hon. Dr PETER PHELPS: Loaves and fishes.

Mr BRAD HAZZARD: It is fabulous. You used to have so much, but now so little.

The Hon. WALT SECORD: The second item was Dr Emil Gayed, and third item was the planning behind the \$20 million announcement. Are you aware that Jodi Nieass told the full staff council meeting that the \$20 million had "occurred unexpectedly" and that she was told "only minutes before the announcement was made"? You said earlier that planning is being undertaken. She went on to say at the meeting that "as a consequence no preparation has been made for this sudden input and no planning has been undertaken involving the \$20 million".

Mr BRAD HAZZARD: I spoke to Jodi Nieass when I was there. I do not think she has been there very long. She was delighted to have the money and she said they would be doing all they could to make the maximum use of it. What she may or may not have told staff, I cannot account for that. In a sense, who cares? The money is there and it is going to be spent wisely and carefully for the people of Taree. If you are worried about that and if you are telling me the Labor Party will not spend the \$20 million extra—

The Hon. WALT SECORD: I am not saying that.

Mr BRAD HAZZARD: —just say it clearly. I will issue a press release this afternoon saying, "Walt Secord says he is not happy about \$20 million being spent at Manning Base Hospital."

The Hon. WALT SECORD: That would be untrue.

The CHAIR: Minister, I am being patient.

Mr BRAD HAZZARD: Actually, you are being extraordinarily patient today and I thank you for that.

The CHAIR: You know how I can flip over.

Mr BRAD HAZZARD: I prefer to think of it as animated, enthusiastic involvement.

The CHAIR: I do not wish to cut into the Hon. Walt Secord's time. Let us continue.

**The Hon. WALT SECORD:** It is clear that the staff medical council and the head of the hospital were all surprised by the \$20 million.

Mr BRAD HAZZARD: Pleasantly.

**The Hon. WALT SECORD:** We all welcome the injection. However, her point was that there was no planning and she did not know how they would implement it. She also wished they had learned the lesson when five years earlier the planning was unsuccessful and the development—

Mr BRAD HAZZARD: I am loving this. We have a \$23 million budget plus \$8 million for infrastructure, and you are going on about someone being a bit surprised about \$20 million landing in their pocket for work at the local hospital. This is fabulous. If this is what you have as shadow Minister, it is no wonder it is so boring every morning. It is terrible. I have answered the question.

The Hon. WALT SECORD: What about the Nita Reed Community Dialysis Centre at Manning Base Hospital?

Mr BRAD HAZZARD: What about it?

The Hon. WALT SECORD: What is the status of the facility?

Mr BRAD HAZZARD: You just said: It is there. What do you want to know?

The Hon. WALT SECORD: Is it correct that on 18 July staff were told that kidney dialysis at the Nita Reed centre was to cease?

Mr BRAD HAZZARD: If they were told that, I am not familiar with it. That might be local planning talking about it. I know nothing about it, but I can find out. The State Liberal-Nationals Government has generally been expanding the number of dialysis chairs and facilities across the State. You mentioned Griffith before. A whole new section is going up on the campus to the south of the building. Wherever I go I ask how many chairs they need and whether they are doing enough for people. As Ms Dawn Walker said earlier, it is a problem if people have to travel. I am doing everything I can, on behalf of the State Liberal-Nationals Government, to make up for the failings of the Labor Government by getting renal dialysis chairs into those departments. As far as I am aware, the centre is staying. If it is not, if you give me copy of the minutes I will look to see who has been told what.

The Hon. WALT SECORD: What proportion—

Mr BRAD HAZZARD: There is a legal concept called "hearsay". I have witnessed it regularly from you, Mr Secord.

The CHAIR: Pose a question to the Minister.

The Hon. WALT SECORD: What proportion of healthcare complaints are about dental treatment?

Mr BRAD HAZZARD: To whom?

The Hon. WALT SECORD: To the HCCC or to NSW Health. Perhaps one of your advisers—

**Mr BRAD HAZZARD:** Would you like to ask a scattergun question and find out about every complaint to absolutely everyone?

**The CHAIR:** Come on, Minister. The question was asked and you are now, may I say, putting on a bit of a performance. That is not the answer. Will the member pose the question again to the Minister? If he does not know the answer, he can take it on notice or defer to one of his—

**Mr BRAD HAZZARD:** I want to be as cooperative as I can—particularly with you, Mr Chair, because you are such a good chairman. However, if I am asked a question about the number of complaints, I want to know where the complaints have been directed. Is it to the local hospital, the staff complaints council, the Health Care Complaints Commission or the Australian Medical Review Centre?

The CHAIR: Order!

Mr BRAD HAZZARD: That is the problem.

**The Hon. WALT SECORD:** I am treating the Minister with courtesy and respect, and I am not raising my voice.

The CHAIR: I understand that. If the Minister does not know the answer to the question—

The Hon. WALT SECORD: He can take it on notice. If you do not know, Minister, can one of your advisers—

Mr BRAD HAZZARD: No, I will answer by saying that the HCCC received 7,083 complaints in 2017-18, but those complaints are not broken down in the records I have. The member will have to write to the HCCC, which will give him the figures as an independent body. From the New South Wales Government's point of view, the focus on dental services has been at the front of mind. In fact, I think that in June next year the dental agreement that was implemented two years ago between the State Government and the Federal Government will expire. I think the children's agreement expires at the end of the year. We are busy trying to negotiate improved dental funding as we speak. In fact, I took that issue to the last Council of Australian Governments meeting and your Labor colleagues from around the country supported getting those new agreements in place. I am sure you looked closely at what the Council of Australian Governments had to say. We are all focused on that—Labor and Liberal.

**The Hon. WALT SECORD:** My question was about healthcare complaints and dental treatment. Is it legal in New South Wales to provide dental services in a patient's home?

Mr BRAD HAZZARD: I will take that question on notice. I would not have thought so, but I will check.

The Hon. WALT SECORD: Does NSW Health investigate the provision of dental services at home?

Mr BRAD HAZZARD: You know what, because you are being so good, I will ask Dr Chant to answer that question.

The Hon. WALT SECORD: Is it legal to provide dental services in your home?

Mr BRAD HAZZARD: Not "your" home, in someone's home.

**Dr CHANT:** In terms of an allegation that a dentist is providing services in a patient's home—is that the scenario?

**The Hon. WALT SECORD:** Can you put out a shingle and provide dental services in someone's home? Can you be an Uber dentist?

**Dr CHANT:** As you are aware, the majority of dental services are provided in the private sector. Dental services are not covered under Medicare, apart from the Child Dental Benefits Schedule, which New South Wales is keen to see continued. Complaints about dental practices are a matter for the Health Care Complaints Commission. There are professional standards and guidelines for dental practices. Dentistry is a complex business and it requires the appropriate infrastructure. If you have a particular case, we would be happy to connect you with the Health Care Complaints Commission or to take it on board.

**The Hon. WALT SECORD:** Given recent controversy about cosmetic surgery and cosmetic surgeons, has NSW Health investigated do-it-yourself dentistry?

Mr BRAD HAZZARD: What does that mean? Do you mean by a registered dentist? If you are going to ask a question—

The Hon. WALT SECORD: I ask the questions.

**Mr BRAD HAZZARD:** You can ask them. However, I am pointing out that I will have a professional person answer the question when one is put in a form that a professional person can understand.

The Hon. WALT SECORD: Does NSW Health—

**The CHAIR:** Minister, I will not accept your talking back like that. The member asked a question about do-it-yourself dentistry.

Mr BRAD HAZZARD: What does that mean? Do you know what that means?

**The CHAIR:** That was the question put.

Mr BRAD HAZZARD: What does it mean?

The CHAIR: If you do not know the answer, you can take the question on notice.

**Mr BRAD HAZZARD:** I may well know the answer, but I do not understand the question. If you are going to get emotional about it—

**The CHAIR:** I am not getting emotional. I asked you not to talk back to the member.

Mr BRAD HAZZARD: As a teacher, I learned that you ask the question and you answer the question.

**The CHAIR:** That is right.

Mr BRAD HAZZARD: It is precise. As a lawyer, I understand exactly what the question is and what the answer is.

**The CHAIR:** He asked a question.

**Mr BRAD HAZZARD:** But you have to ask a question that is sufficiently precise to be answered. That question means nothing. It is a bit of "uru guru garbo". The member should ask a question that he actually wants answered, and we will answer it.

The Hon. WALT SECORD: Does NSW Health have any concerns about a Warriewood businessman who boasts that, although he is not an orthodontist by trade, he operates a delivery service that allows patients to have their teeth fixed at home without hopping into an orthodontist's chair? Is that legal in New South Wales?

Mr BRAD HAZZARD: I will let Dr Chant answer that one. I have no idea.

**Dr CHANT:** I would be happy to look at that. The focus that NSW Health has had is really improving access to public dentistry. As you are aware, for dental services NSW Health runs a safety net service for pensioners, for children up to 18 and for health care cardholders. Our focus that NSW Health has had is about improving the efficiency and we have also contributed additional money. I would encourage anyone that is finding it hard to access dental services to call. I will provide some intake numbers and I would be very keen that patients ring those intake numbers. They are assessed according to clinical priority. I would be very concerned if someone felt that they could not access urgent care if they were in need and could not afford access to dentists.

**The Hon. WALT SECORD:** Dr Chant, would you look at an organisation called EZ SMILE Pty Ltd. They describe themselves as "dental disrupters". They say that they have 5,000 applications on file at the moment and they provide dental services for \$2,500 which would normally cost \$8,000 and they will mail out the materials and you can do your own dental activity.

**Dr CHANT:** We will certainly follow that up.

The Hon. WALT SECORD: Thank you very much. Minister, I take to you a recent matter in Tumut involving Tumut Hospital and the death of Naomi Williams. Are you familiar with the case?

**Mr BRAD HAZZARD:** I think I might be. What is the aspect?

**The Hon. WALT SECORD:** She was a Wiradjuri woman who died on 1 January 2016 after attending Tumut Hospital.

Mr BRAD HAZZARD: And what is the issue that you—

The Hon. WALT SECORD: The issue is have protocols and procedures been changed at Tumut Hospital since the incident?

Mr BRAD HAZZARD: First of all, can I say my sympathy to her family because I know it was unexpected and a very adverse outcome. Secondly, as I understand it there has been work done through a root cause analysis being looked at in terms of the procedures. Thirdly, I think it is also currently before the Coroner. The issues that will be considered are the range of issues that might have contributed to her passing. My understanding is that there has been some work done at the local health district level to get an understanding of what needs to be different but I will get some more details for you from the local health district after this hearing. In other words, I will take it on notice as to the detail around that.

The Hon. WALT SECORD: Thank you. Minister, I take you to—

Mr BRAD HAZZARD: Can I just say something before you go? You asked before about Dr Gayed and the website that someone did a quick search on. You always have to look at another website because they leave the websites up. Probably a good one for you as a shadow Minister is to always spend some time in the morning looking up on the Australian Health Practitioner Regulation Agency [AHPRA] website. Go for it. On 7 April 2018—four or five months ago—Dr Gayed surrendered his registration and it is up on the AHPRA website.

The Hon. WALT SECORD: Are you confident that he is no longer practising in New South Wales?

**Mr BRAD HAZZARD:** I am confident that he has surrendered his registration and if he is practising it is a criminal activity.

The Hon. WALT SECORD: Thank you very much. Minister, Wagga Wagga Base Hospital—

The Hon. Dr PETER PHELPS: It is magnificent, isn't it? It would not have been built under you guys.

The Hon. WALT SECORD: I have been there several times.

Mr BRAD HAZZARD: What were you saying?

**The Hon. WALT SECORD:** Are you happy with the elective surgery waiting lists at Wagga Wagga Base Hospital?

**Mr BRAD HAZZARD:** What I am particularly happy with is the amazing, incredible work that, as Dr Phelps has just observed, would definitely not have happened under a Labor government.

The Hon. WALT SECORD: He is not a medical doctor, I remind you.

**Mr BRAD HAZZARD:** I appreciate that but he gives great insights into matters of significance. The Wagga Wagga Base Hospital, as you would perhaps like to forget, was not even on your last policy document. Very disappointing.

The Hon. Dr PETER PHELPS: Despite being promised by Labor and never delivered.

The Hon. WALT SECORD: Are you happy with the elective surgery waiting lists?

The CHAIR: Order!

**Mr BRAD HAZZARD:** What I can say is that stages one and two are very happy. It does not matter—[*Interruption*]

The CHAIR: Order!

The Hon. PAUL GREEN: Sorry, Mr Chair, my phone was turned off but the volume was not.

The Hon. Dr PETER PHELPS: It sounds like Luke Foley. Is that Foley?

Mr BRAD HAZZARD: This meeting is deteriorating, Mr Chair.

The CHAIR: The question was very specific about elective waiting lists.

Mr BRAD HAZZARD: Yes, and I am answering it. As you have correctly said a few times, I can answer it whichever way I like. An amount of \$420 million is being spent on stages one, two and three of Wagga Wagga Base Hospital. Can I say to you, a measure of just how great a hospital is how the staff feel. The staff love that hospital. Daniela or Jacqui who are on the front reception on separate days have told me it is absolutely incredible to work in that hospital. Dr Michael Payne, who conducts the surgical exercises in the theatres—

The Hon. WALT SECORD: Minister—

Mr BRAD HAZZARD: Coming to your answer.

The Hon. WALT SECORD: Minister, this is where we differ. I talk to patients. Do you talk to patients?

Mr BRAD HAZZARD: Yes, I do. I just gave you details of that. And good luck if they can understand what you are on about most of the time. But anyway, back to the topic at hand, there are eight theatres in the Wagga Wagga Base Hospital. It has been built for the future. There are currently just under six theatres being operational and that is because of what is considered to be an appropriate use of those theatres. Michael Payne is

the doctor in charge. I have spoken personally to him. He has confirmed that the only limitations in that hospital are the difficulty of getting some theatre staff—

[Interruption]

I will happily consider it and continue. I love it. You ask me as much as you like about Wagga and I will rip snort. I love it.

The CHAIR: Minister, you have time to finish your answer. That is the way we operate.

The Hon. WALT SECORD: He is cutting into my time.

Mr BRAD HAZZARD: He will have more questions, so I will go to the next one. That is fine.

**Ms DAWN WALKER:** Minister, I want to take you back to superstations. You mentioned that they are working well in some areas and not so well in others—

Mr BRAD HAZZARD: No, I did not say that.

Ms DAWN WALKER: Well, that is how I—

**Mr BRAD HAZZARD:** Ms Walker, what I said was I believe they are working well everywhere but before they came in, when I first became Minister, there were only two that were operational at that stage and I did have some paramedics saying to me that they were a bit concerned about it.

**Ms DAWN WALKER:** Would that have been in Western Sydney? Because I have had paramedics speak to me about that as well. In Western Sydney they are saying that because there were four stations that were closed in order to create a superstation they are seeing response times of over 20 minutes.

**Mr BRAD HAZZARD:** I do not believe that is right. Across Sydney I think the average response time is about 7.4 minutes. I do not think that is right.

Ms DAWN WALKER: The paramedics are referring to that area as the "rectangle of death", so they are quite concerned.

Mr BRAD HAZZARD: That is very dramatic. Which area are you talking about?

Ms DAWN WALKER: This is Western Sydney.

Mr BRAD HAZZARD: But which one? Is it Blacktown—

Ms DAWN WALKER: The closure of Tregear, Colyton, Fairfield, Auburn stations—

Mr BRAD HAZZARD: Is this individual paramedics or is this one of the two associations?

Ms DAWN WALKER: I am asking you whether you are aware that there is over a 20-minute wait—

**Mr BRAD HAZZARD:** Well, I have said no and I am asking you which paramedics. Is it individual paramedics or is it one of the two associations that are making these assertions?

Ms DAWN WALKER: What I am asking you, Minister, is are you aware—

Mr BRAD HAZZARD: I have said no.

**Ms DAWN WALKER:**—that there are paramedics that are saying there are wait times of over 20 minutes and that they are characterising this particular area as the "rectangle of death"?

Mr BRAD HAZZARD: I do not know who is using that sort of inflammatory language. It has never been used to me. That proposition has never been put to me. If there were some failing, then I would be demanding answers from NSW Ambulance and I will certainly, as you have raised it. But I would like you to put it in writing and tell me which paramedics. It is pretty inappropriate to make assertions with that sort of language and putting patients in fear of their lives unless you can attribute that conversation or assertion to someone. Otherwise it would be very unfortunate that you could be seen to be simply putting people in unnecessary fear. I think that is a really big issue and I would have expected more from you—perhaps not from the Labor Party but from you I would have.

Ms DAWN WALKER: I am sorry, Minister, I have received—

The CHAIR: Minister, can I just pause please. Another piece of gratuitous lecturing from you again, Minister.

Mr BRAD HAZZARD: Yes. I am here to help.

The CHAIR: Ministers are to receive questions and answer them and we just go back and forth.

Mr BRAD HAZZARD: I think that is what we are doing: we are going back and forth.

**Ms DAWN WALKER:** Minister, can I assure you that I am very confident of the source that this has come from.

Mr BRAD HAZZARD: Well, can you answer the question then?

Ms DAWN WALKER: I appreciate your concern but I think the concern should be directed more to—

Mr BRAD HAZZARD: I do not believe that.

Ms DAWN WALKER: —the issue of the response times—

Mr BRAD HAZZARD: I have never had that put to me.

Ms DAWN WALKER: —rather than who actually provided me with this information.

Mr BRAD HAZZARD: I have never had—

Ms DAWN WALKER: I am here—

**The Hon. Dr PETER PHELPS:** Point of order: Ms Dawn Walker is now making statements rather than asking questions. If she could be directed towards questions that would be useful.

Ms DAWN WALKER: To the point of order: I am simply responding to the assertions made by the Minister about where I got the information for this question. I am responding to that and I am assuring the Minister that I got the questions from a reputable source, from people on the ground who know exactly what is going on and are concerned enough about this to approach me and to ask these questions of you so that we can get a response. Can I move on, Minister, to another issue of concern in the community, which is in Tweed Heads where—

**Mr BRAD HAZZARD:** Before you move on, can I say that I am not happy about the way you presented that question but if there is a substantive issue—

Ms DAWN WALKER: I think you are not happy about the substance of the question, Minister.

Mr BRAD HAZZARD: No, what I am saying to you—that is just silly—

Ms DAWN WALKER: Minister, it is not silly.

Mr BRAD HAZZARD: It is silly. Let me say—

Ms DAWN WALKER: Minister, I am sorry—

Mr BRAD HAZZARD: I am trying to be helpful. What I was about to say is—

Ms DAWN WALKER: You are not being helpful. Can I have it on the record that you are not being helpful. Thank you.

Mr BRAD HAZZARD: You can put it on the record or do whatever you like, but if you send me details in writing I will follow it up because my obligation as health Minister in this State is, no matter where the assertions come from, to make sure the health system is working as best as it can. If you have some facts give me the facts, not the assertions.

The CHAIR: You are reflecting on the member's question, Minister. You do know that.

**Ms DAWN WALKER:** Minister, can I move on, because I only have a very short amount of time. I want to move on to another issue of great concern to the community of Tweed Heads where your Government is looking to build a much needed hospital—not on the site that you have been working on for years—

The CHAIR: Pause please. Stop the clock until the Minister pays attention.

Mr BRAD HAZZARD: I am paying attention.

The CHAIR: No, the clock will stop.

**Mr BRAD HAZZARD:** It can stop for half an hour as far as I am concerned; I am enjoying it. **The CHAIR:** It will stop. You are showing disregard for the question being asked, Minister.

Ms DAWN WALKER: Are you right now, Minister?

The CHAIR: Are you right, Minister?

Mr BRAD HAZZARD: I was right all along. I was listening to both your questions.

The CHAIR: No, you were not.

Mr BRAD HAZZARD: Yes, I was.

The CHAIR: The clock will be restarted.

**Ms DAWN WALKER:** It is very difficult to ask an important question on behalf of the community when all I can see is your back. In fact, this community feels that that is all they have received from you as well. We have a situation in Tweed Heads where we need a new hospital, yet your Government has decided—

Mr SCOT MacDONALD: Point of order: There is an insinuation about the behaviour of the Minister.

**The CHAIR:** I do not detect that insinuation. The question is in order. Please proceed.

Ms DAWN WALKER: Minister, I would like to turn your attention to Tweed Heads, a community that is in great need of a new hospital; a community where a new hospital was to be planned on the existing site. Yet in March 2017, less than three months before the announcement of the new hospital, all of a sudden this hospital is now going to be placed on State significant farmland. I ask the Minister what was the trigger that changed this Government's plan from redeveloping the Tweed Heads Hospital to now placing it on State significant farmland in the community of Kingscliff, with very little consultation?

Mr BRAD HAZZARD: Yes.

**Ms DAWN WALKER:** Could the minister please explain what it was that changed the decision from having the redevelopment in Tweed Heads to putting the hospital in a small coastal village of Kingscliff.

Mr BRAD HAZZARD: Sure. When I became Minister, the very good National Party member Geoff Provest asked me to attend. Contrary to what you just said about me not listening, I think it was the first regional visit I ever did as health Minister. I went to the Tweed and I met the doctors on site and the board members. What I was told was that they had been happy at the previous election that there was to be \$48 million of renewed work, particularly around the emergency department, but they felt that that that was not going to be satisfactory for the growth of the Tweed.

I left that meeting with a very clear impression that a lot more needed to be done. The local member—a very good local member, Geoff Provest—said to me that he needed to get what his community needed, not any less than what the community needed. I then went away and asked for details from Health Infrastructure NSW as to what the issues were around the Tweed Hospital. What I was told, after it was looked at, was that the hospital did have constraints around its current usage going forward and that the \$48 million may not do the job that the doctors had forecast was actually needed, and the community.

As a result of that, a lot of work was done to look at whether or not it was possible to redevelop the site and to use taxpayers' moneys wisely on a very constrained site. There, Ms Walker, is the difficulty when you are building hospitals—and the Liberal-Nationals Government has been building them all over the State. Health Infrastructure actually knows a lot more than what was ever known by the former Labor Government because they built next to nothing when they were in government, supported by the Greens. We were advised by Health Infrastructure that to build on a hospital site such as the existing Tweed Hospital would be completely unsatisfactory. It would not be a good use of money and it would also have real impacts, potentially, on the delivery of services during the construction phase.

I then gave instructions to Health Infrastructure to look at the possibility of a greenfield site. They then went about calling for expressions of interest for people who may wish to put up properties for that purpose. There were over 30 submissions to that process. The one that Health Infrastructure chose was a site at Cudgen. That site is 23 hectares but, contrary to what you just said, it is not all agricultural land. There are approximately four hectares of residential—two or three hectares of residential—and the balance has been designated, back in 2010

or so, as agricultural land. What then occurred was that some of the community—no doubt the ones who had been in your ear—were saying, "We're not sure that this site is a good site because the site is being used to produce sweet potatoes."

I then contacted the person who was working in the area and had proposed the site to come forward. The advice that came from Health Infrastructure was that that particular person had gone to Bundaberg because he could do broadacre farming in Bundaberg and he could produce the products far better. When I spoke to other farmers in the immediate area I was told there had been all sorts of difficulties in that particular agricultural land because of the impacts of nematodes and the use of heavy chemicals on the land. There were limitations. The fellow who put his land forward—or the parties that put their land forward—as part of the expressions of interest failed to tell their relatives who were still doing piece farming on the property that they had put it forward. That is what caused the original concerns.

I then gave consideration, in concert with Geoff Provest. Geoff Provest was very keen to make sure his entire community had the opportunity to hear and understand exactly what had gone on at that site but also to look realistically at whether there were any other options as hospital sites. Again, Geoff Provest was doing his job as a number one, fair dinkum, local National Party member. I then went back and said to Health Infrastructure, "I am hearing the doctors saying that they actually want this work done now. But I am also hearing the community saying they want it re-looked at. I think, on balance, if we reopen the expressions of interest for six weeks that is not unreasonable." Health Infrastructure went about that. They had a number of more properties put. One of those was a developer who happens to have a large property at Kings Forest. He then ran a massive campaign, which apparently The Greens are now supporting, to try and have a hospital on that site. What we ended up with was a recommendation from Health Infrastructure—

**Ms DAWN WALKER:** Excuse me, Minister. Can I just interrupt? I am fascinated with this but can I just make it very clear that The Greens are not supporting the Kings Forest location.

Mr BRAD HAZZARD: You just said that you think it should be at Kings Forest.

Ms DAWN WALKER: No, I did not say that.

**Mr BRAD HAZZARD:** Where do you think it should be?

The CHAIR: Order!

**Ms DAWN WALKER:** I thought it should be where you thought it should be, which is in the Tweed Heads area. It has been part of the Government's North Coast—

Mr BRAD HAZZARD: Cudgen.

Ms DAWN WALKER: No, you want to put it in Cudgen. It has always been and the Government's North Coast Regional Plan identified it should be in Tweed Heads. Tweed Heads is the regional city. Kingscliff is a tiny little coastal village. Cudgen is red soil—

Mr BRAD HAZZARD: If you were familiar with that site—

Ms DAWN WALKER: —State significant farmland—

Mr BRAD HAZZARD: Let me finish, please. If you want me to finish, I will finish. If you do not, you can tell me what you think.

**Ms DAWN WALKER:** I am sorry, but you are miss-characterising the position that we have on this. I do need that corrected for the record.

Mr BRAD HAZZARD: Okay. The Health Infrastructure people reopened the process and they had a number of other properties they looked at, including a wonderful gentleman who has cancer who proffered his property not far away. He was prepared to give it to us for nothing, which was very attractive to me, I must say, as the health Minister but Health Infrastructure advised me that, in fact, wonderful as his offer was, it was still not the appropriate site. Cudgen was chosen. It is directly opposite the TAFE site. It provides all sorts of opportunities for a health and education precinct. Every ounce of my energy was given. Can I say to you that Dr Michael Lindley-Jones and Dr Rob Davies of the hospital have been out publicly supporting this site. They want to get on with it, and The Greens and the small group of people who are busy trying to say, "Don't build our hospital because we want a few spuds," need to just take a good long lie down, have a Bex and let us get on with building a new hospital.

The CHAIR: I call the Deputy Chair, the Hon. Paul Green.

The Hon. PAUL GREEN: Thank you for that comprehensive answer to such a very important question.

Mr BRAD HAZZARD: I forgot to say Labor was backing the developers too but, nevertheless, that is

okay.

The Hon. WALT SECORD: You took the \$1,000 donation from that bloke.

Mr BRAD HAZZARD: I did?

The Hon. WALT SECORD: Peter Lawless, who is running your—

Mr BRAD HAZZARD: Sometimes you are more nutty than you normally are.

Ms DAWN WALKER: You should all get out of the way and put it in Tweed Heads, which is a regional

city.

**Mr BRAD HAZZARD:** Lovely bloke, but nutty as a fruitcake.

The Hon. WALT SECORD: Peter Lawless—

Mr SCOT MacDONALD: Point of order—

Mr BRAD HAZZARD: Mr Headline.

**Ms DAWN WALKER:** Stop playing headlines with the north.

The Hon. PAUL GREEN: Chair, this is my time.

**The CHAIR:** I know. This is turning into a bit of a circus.

Mr BRAD HAZZARD: Sorry, Mr Green.

**The Hon. PAUL GREEN:** I want to say, Minister, that if they cannot work out where to put a hospital bring it down to the Shoalhaven on the green site next to the university. We know where we need it.

Ms DAWN WALKER: We know exactly where the hospital should be.

**The Hon. PAUL GREEN:** Minister, can you update the Committee on the actions taken to date to deal with the issue of suicide and junior medical doctors?

Mr BRAD HAZZARD: Thank you for that really serious question. When I first became health Minister there was actually an article, I think it was in the *Medical Journal of New South Wales* or it could have been the Australian Medical Association's magazine, I am not sure, highlighting the fact that a young lady who was a junior medical officer had committed suicide. When I started looking into that issue what I found was that there was a view amongst junior medical officers [JMOs] and some senior medical officers that the pressure that was on them across a whole range of areas was making them vulnerable to suicide.

Those issues were, and are still, very concerning. It became apparent to me that it was not just one issue; it is a combination of factors. There are the obvious ones, like being put under pressure when you are trying to do your registrar training and you are busy trying to prepare for exams but the hospital you are working in does not perhaps give sufficient consideration to the fact that you should not be working 18 hours a day when you are supposed to be preparing for exams. I took the steps I could take here in New South Wales and gave directions to all hospitals about limiting the hours of physicians but also asking them, in writing, to take those sorts of issues into account—to try to be reasonable to our young doctors, to help them and take the pressure off a bit.

I have had numerous meetings on it with the young doctors. I have been to forums with them and done everything I can humanly do but there is one other big issue and that is that there are provisions in our legislation. Back in 2011 when the Australian Health Practitioner Regulation Agency was established and what have you, there was a provision put into the legislation, mirrored from Queensland—it changed a little bit but basically is the same off the legislation in Queensland. What it really required was that if you as a young doctor, or any doctor, went to see a doctor and expressed the fact that you had mental health issues or you felt that you had suicidal ideation, basically, you would have to be reported to AHPRA. That has been a struggle for me as health Minister in New South Wales because I wanted that legislation to be changed far quicker than it has been.

But in the end, talking to my Labor and Liberal colleagues across the country, it became obvious that we needed to have a national approach because doctors these days cross borders. Since 2010-11 they can practise

anywhere. To make sure that they had legislation that was consistent has been a really tough road to try and get. The Minister in Western Australia, Roger Cook—a very nice man, a wonderful man; Labor, but nevertheless a very good man—has a different system that came from the previous, I think, Coalition government, which was basically an ethical model. So there is no legislation there that requires that reporting. Here in New South Wales, Queensland, Victoria, South Australia and Tasmania it is much more challenging. In order to get to a position I took a position to the Council of Australian Governments [COAG] about nine months to a year ago in Canberra and we almost had it there; we almost had an agreed form of words. We are so close and the Australian Medical Association [AMA] was supportive of the form of words, but then there were issues within COAG.

We have a consensus position so I will not say much more than that; there are issues to be worked through and it is being worked on currently by the various jurisdictions and we have almost agreed—we pretty well have agreed—on a form of words that has to go back to COAG now for final approval, and I am hoping it will come up in the October one but I am not sure yet.

**The Hon. PAUL GREEN:** In the briefing, task force or presentation down on the dock with the medicos some time ago put on by NSW Health one of their major issues was about a culture change, given the fact that previous specialists, surgeons and all sorts of people said, "That's the way I was brought up so that's the way you've got to be". What do we do to change the culture and expectation that it was okay in the 1950s but it is unacceptable in 2018?

**Mr BRAD HAZZARD:** I might ask Deputy Secretary Minns to respond to that issue. Can I just say that I think the culture issue is huge?

The Hon. PAUL GREEN: Yes.

Mr BRAD HAZZARD: It is very, very difficult when you have particularly older doctors who think, "That's the way it was done for me."

The Hon. PAUL GREEN: Exactly.

**Mr BRAD HAZZARD:** "It should happen to you; toughen up." I think that is completely inappropriate. Women or men should not have to be putting up with that. But with the feminisation of the workforce in the medical area in the last 25 years, I think it is about time they all woke up to it.

**Mr MINNS:** Just a couple of observations about Health and its current position in terms of underlying culture. We participate in the Public Service Commission People Matter Employee Survey every year. This year our engagement index, which is the headline number of progress, has gone up by a point; but when you are surveying, in our case, 46 per cent of 117,000 employees, one point is hard to get. We have moved to 65 per cent on the engagement index, which is on par with the whole New South Wales public sector. We have also been tracking a Health culture index that goes back to, I think, 2004 and it has moved up 13 percentage points in that period of time.

It has been a long-term focus and a particular focus in the last two years with the secretary and with the Minister. If we talk specifically about junior medical officers, because the issue of underlying culture and possibility of bullying occurring was raised and talked about at some length, we have got several strategies that have been implemented in the last 15 months to try to address that. So there is an Anti-Bullying Management Advisors program that has been created in every one of the districts and the networks. The point of that is just to have local expertise in each district that is focused particularly and precisely on the issue of strategies to eliminate bullying. We have done a lot of work with the Health Education and Training Institute to ensure anti-bullying practices feature in all of our training programs. We have a confidential anti-bullying advice line. We have reissued and updated the prevention and management of unacceptable workplace behaviours, particularly for JMOs. There is a JMO module in that policy. All organisations that employ JMOs have appointed a dedicated JMO complaints officer.

**The Hon. PAUL GREEN:** The Minister probably wants this to go through him. So if a junior medical officer is having the sorts of trouble of the young lady who committed suicide, are they able to ring that hotline and tell them?

Mr BRAD HAZZARD: Yes. As Deputy Secretary Minns mentioned, that hotline works on the basis that if they make a call, they get a call back. I would like it to happen quicker but I am told that it happens within 24 hours. Then what happens is they get not only the counselling and support but they can get a mentor. So they can get somebody outside their local health district because it does not necessarily help them to be making—

The Hon. PAUL GREEN: So they will not be judged for their mental health state?

Mr BRAD HAZZARD: Yes, exactly.

**The CHAIR:** We move now to the Opposition and the Hon. Courtney Houssos.

**The Hon. COURTNEY HOUSSOS:** Minister, I am going to say this name incorrectly, but what is the status of the fake doctor Shyam—

Mr BRAD HAZZARD: Acharya?

The Hon. COURTNEY HOUSSOS: Thank you, Minister. What is his status? Where is he at?

Mr BRAD HAZZARD: The last I heard—and it has been a while since I heard—the police think that he has bolted and is out of the country. I was trying to get anybody and everybody to try to recover some money from him, but I understand that is now tied up in some matrimonial family proceedings.

**The Hon. COURTNEY HOUSSOS:** Okay, so you have not found him and think he is overseas. Did you put out a reward for—

Mr BRAD HAZZARD: That is not something I would do. That is not appropriate for a health Minister.

The Hon. COURTNEY HOUSSOS: Did the Government consider doing that?

**Mr BRAD HAZZARD:** That is not something for the New South Wales Government. As a former Attorney General I can say that rewards are done on the basis of advice from the Justice department or the police. That is not something that the Health Minister has ever done or would ever logically do.

**The Hon. COURTNEY HOUSSOS:** Okay. Have you seized the house yet? In 2017 you said you were going to.

Mr BRAD HAZZARD: No, what I said to you was that if given a choice to do that I would have. That is what I asked the ministry to try to do. This is going back more than a year, but my recollection is that the police wanted to conduct their investigations and there had to be a decision on who was going to have the lead on it and it was the police that had the lead.

The Hon. COURTNEY HOUSSOS: Do they update you regularly on what they are doing?

Mr BRAD HAZZARD: No, they do not.

The Hon. COURTNEY HOUSSOS: Have you asked for an update?

Mr BRAD HAZZARD: Yes, of course. Every now and then the ministry will get something and I will be told, but I have not been told recently. But I am absolutely certain that if they had found Mr Acharya I would know about it. They have not found him. What I do know though is that he had one house. I went and did the title search on it to find it, which is a bit more than most Ministers would do. When I found that there was a property that he had I handed that over. But then his wife was actually still here, which we did not know initially. There are now Family Court proceedings, as I understand it. I think there is an order that stops the property being sold while the Family Court proceedings are underway.

**The Hon. COURTNEY HOUSSOS:** At the conclusion of those Family Court proceedings, will you be pressing for the house to be sold?

Mr BRAD HAZZARD: I think we would all like the house sold and the money to come to the Government. The purpose was that taxpayers paid for this fellow to work in our hospitals as a doctor—

The Hon. COURTNEY HOUSSOS: When he was not qualified to do so.

**Mr BRAD HAZZARD:** —when he was apparently not qualified to do so. My view was that we should pursue him for the money. Of course, the joys of the Family Court are that his wife and at least one child—it is a matter for the Family Court to now determine and I cannot intervene in that.

**The Hon. COURTNEY HOUSSOS:** You have obviously made inquiries of his wife or former wife—whatever the status is there? She has no idea where he has taken off to?

Mr BRAD HAZZARD: Me make inquiries?

The Hon. COURTNEY HOUSSOS: The department—whoever is investigating.

The Hon. WALT SECORD: You just said you did title searches and did investigations.

**Mr BRAD HAZZARD:** I can still do that—I am sorry, that is not something that the Minister should be doing. No, I have not.

The Hon. COURTNEY HOUSSOS: Has his partner been asked if she knows where he is?

**Mr BRAD HAZZARD:** The police are actually making those inquiries. I am fairly confident, but I do not know that. Police have an entitlement to investigate as they consider it appropriate. They are doing that and I am not privy to that and nor should I be and nor should you.

The Hon. COURTNEY HOUSSOS: The trail has gone cold. At what point do you give up?

Mr BRAD HAZZARD: I never give up—ever.

The Hon. COURTNEY HOUSSOS: Have you given up?

**Mr BRAD HAZZARD:** Never. I am far too enthusiastic. I want to make sure that I never give up and that Labor is crushed at the next election—Sorry, I got carried away.

The Hon. COURTNEY HOUSSOS: That was not my question.

Mr BRAD HAZZARD: I was just trying to help.

The Hon. COURTNEY HOUSSOS: If only you could find this Mr Acharya.

Mr BRAD HAZZARD: Well, if you have any inspiring ideas with your skillsets, let me know.

**The Hon. COURTNEY HOUSSOS:** Minister, what is the status of Dr Grygiel? Is he allowed to practice as a medical practitioner today in New South Wales?

Mr BRAD HAZZARD: No, he has been—when was he struck off?

Ms PEARCE: Many months ago. The matter was settled.

Mr BRAD HAZZARD: It was settled. But I will give you the details. I will take it on notice.

**The Hon. COURTNEY HOUSSOS:** Has he been struck off or was it a voluntary thing?

Mr BRAD HAZZARD: I will take it on notice.

**The Hon. WALT SECORD:** Minister, before the time ran out you were talking about Wagga Wagga Base Hospital and that there were eight theatres, six of which were operational—eight minus six is two. What is happening with those two theatres?

Mr BRAD HAZZARD: The big difference between—

The Hon. WALT SECORD: No, no, what is happening to—

Mr BRAD HAZZARD: The big difference between—

The Hon. WALT SECORD: No, what is happening to those two theatres?

**Mr BRAD HAZZARD:** The big difference between the Liberal-Nationals Government is that we are actually building hospitals on site for the future and we are doing that all across the State. Every hospital that is being built has capacity built into it on the basis of an expectation going through to at least 2031 for development.

The Hon. WALT SECORD: So these are not ghost wards?

Mr BRAD HAZZARD: They would have been if Labor had been in government, but they certainly are not and the doctors in charge are extremely happy that they have that built-in capacity. Any sort of silly language like that is just you carrying on because you have a by-election that you know you are not going to win.

The Hon. WALT SECORD: What is happening with those two empty theatres?

Mr BRAD HAZZARD: They are built for the future. It does not matter what hospital you go to in New South Wales—well, actually, you cannot go, thank heavens—every hospital that is built across New South Wales is built for the future.

**The Hon. WALT SECORD:** What is the status of those operating theatres? Are they just mothballed and covered in dust? What is happening? What is in those theatres?

Mr BRAD HAZZARD: They are built for the future.

**The Hon. WALT SECORD:** What does that mean? Does that mean they are completely sealed up, are empty and nothing is happening in them?

**Mr BRAD HAZZARD:** They can use them. A lot of the hospitals are built with adaptability around them. They might have a particular area that is currently being used for administration even, but they know they can, as population increases, expand. Those ones are available for surgical needs if they need it, but the advice from the doctor who is currently running the theatres there is that they do not need it.

**The Hon. WALT SECORD:** But you are then instead sending operations and procedures to private facilities nearby, rather than using the two empty theatres. Why is that occurring?

Mr BRAD HAZZARD: I am sorry, what was that question?

**The Hon. WALT SECORD:** Using your comments that they are for future capacity, future use or future needs, why then are you sending patients to private facilities nearby to undertake procedures that should occur in those two empty theatres?

Mr BRAD HAZZARD: They need not necessarily occur there. In fact, what is happening in Wagga Wagga hospital is that there has been a 22 per cent increase in elective surgery in just the past few years since Labor was out. We have increased the number of patients going through there. But as recently as two weeks ago I was told that because we have a magnificent new hospital in Wagga Wagga—and it is magnificent—the peripheral areas have had a downturn of about 13 per cent in terms of presentations. In that local area there would be close to 30 hospitals, most of which are obviously smaller peripheral hospitals.

The Hon. WALT SECORD: Back to my original question—

Mr BRAD HAZZARD: Hang on, let me finish. You do not want know, do you?

The Hon. WALT SECORD: You just segued off into something else—

Mr BRAD HAZZARD: No, I am just telling you that there has been a 13 per cent reduction in those peripheral hospitals because the view of the locals at Wagga Wagga hospital—the medicos and the allied health staff who are talking about this—is that because folks want to come to a big, shiny new hospital that the Liberal-Nationals have given them, they are coming to that hospital in preference to the smaller ones.

**The Hon. WALT SECORD:** Then why are two operating theatres dormant and you are sending patients to private facilities nearby? Would it not make sense to commission those two operating theatres to provide procedures and operations, rather than sending them to private hospitals nearby?

Mr BRAD HAZZARD: What I was advised—because I asked the same question—by the doctor who runs the theatres is that one of the limitations they still have, even though it is a bright, shiny, new and fantastic hospital, is that for skillsets required of nurses in particular but also the support staff in the theatres means that they have to be dedicated theatre nurses, and they just cannot get them. What they are saying is that there are three local private hospitals, one of which has some of those theatre staff, and it has been asked to support some of the additional surgeries. In any case, they are already doing 22 per cent more than you were so they are doing pretty well.

The Hon. WALT SECORD: Minister, you just said it was due to staff shortages or lack of staff.

Mr BRAD HAZZARD: No, I said it was due to getting the technical staff, the trained staff. There are assistants in nursing, enrolled nurses [ENs] and registered nurses [RNs]. RNs who are specialised in theatres are very, very hard to get. Mr Secord, if you read any of the literature—spent a little less time reading silly things and read that—you will find that there is a worldwide shortage.

**The Hon. WALT SECORD:** Minister, why are local private hospitals in Wagga able to get nurses and operating theatres staff but Wagga Base Hospital cannot?

Mr BRAD HAZZARD: Wagga Wagga has a lot of staff—

The Hon. WALT SECORD: No, why cannot—

Mr BRAD HAZZARD: Wagga Wagga has a lot of staff who are doing their job. I am really—

The Hon. WALT SECORD: You just said that you are unable to get staff.

**Mr BRAD HAZZARD:** You can dress it up in whatever political way you want but I am telling you the specialist in charge told me only two weeks ago that that is the issue. You know what? That is it.

The Hon. WALT SECORD: Why do you not simply operate the two operating theatres?

**Mr BRAD HAZZARD:** I dread the day that you might end up—I share the AMA former president's view on you that you really do—

The Hon. WALT SECORD: Let us not talk about your mate.

Mr BRAD HAZZARD: I think you need to—my mate?

The Hon. WALT SECORD: Your mate, the former AMA president, and I underline "former".

Mr BRAD HAZZARD: Anyway, I was not going to go into the details, so don't worry.

The Hon. WALT SECORD: You can if you want to open up that box; I am ready.

Mr BRAD HAZZARD: You really want to think about it. Stick to the facts. I have given you the honest to goodness facts as were conveyed to me. You just dig away hoping that I will change. I cannot. Those are the facts.

**The Hon. WALT SECORD:** I want to take you back to something you introduced to the proceedings earlier, which is elective surgery waiting lists at Wagga hospital. I take you back to the case this morning of Mr James Tongue. You called him this morning, gave him some good news. Is that correct?

Mr BRAD HAZZARD: No.

The Hon. WALT SECORD: You called him last night then?

Mr BRAD HAZZARD: You are telling me the facts.

**The Hon. WALT SECORD:** I asked the question, so a yes or no will be fine. Mr James Tongue is a 71-year-old pensioner who resides at Darlington Point, which is about 150 kilometres west of Wagga. Is that correct, Mr Fang?

Mr BRAD HAZZARD: It is interesting you have to ask The Nationals that. Labor does not know the first thing about the regions, does it? He is the shadow Minister and he does not know exactly the distance. The Nationals know; Labor does not know, yet again.

The Hon. WALT SECORD: He should be your candidate, not—

The CHAIR: Order! Help the Minister understand—

**Mr BRAD HAZZARD:** Thank God you are not the candidate for the Labor Party. You would be dead in the water absolutely everywhere across New South Wales.

The Hon. Dr PETER PHELPS: Actually, Dan is a pretty nice guy.

The Hon. WES FANG: Dan is a lovely man.

Mr BRAD HAZZARD: Is that the Labor guy? He is a nice bloke.

The Hon. Dr PETER PHELPS: He is a nice bloke; a psychologist, I think.

Mr BRAD HAZZARD: Imagine what he would do with Walt.

The Hon. Dr PETER PHELPS: He would be set for life.

**The Hon. WALT SECORD:** I will outlast you, Brad. Minister, back to elective surgery waiting lists at Wagga hospital. Why was—

Mr BRAD HAZZARD: Lasting in opposition is not much.

The Hon. WALT SECORD: You were in there for 18 years, were you not, of 21 years?

Mr BRAD HAZZARD: No, 16 it was held. Thank you for reminding us.

The CHAIR: You are not helping your cause. Let us get on.

**The Hon. WALT SECORD:** Mr Tongue was told that he would have to wait 365 days for elective surgery. I think the Bureau of Health Information said that the average or median wait was about 215 days.

Mr BRAD HAZZARD: I think 222.

**The Hon. WALT SECORD:** Good, I gave you the benefit of the doubt. What changed from yesterday until today involving his case?

Mr BRAD HAZZARD: What do you mean by "changed"?

**The Hon. WALT SECORD:** Changed—why was he suddenly communicated with today?

Mr BRAD HAZZARD: He was not.

**The Hon. WALT SECORD:** He is misleading the Committee? He did not receive a call from you?

**Mr BRAD HAZZARD:** Are you saying I spoke to him? Is that what you are saying? That is what you put in your press release. I read your press release. I had nothing much to do today. I was listening to the battle—anyway, that is an aside.

**The Hon. WALT SECORD:** Minister, elective surgery may be a subject of mirth for you but it is very serious for people who are waiting and who cannot see, who stumble in their homes because they are blind.

Mr BRAD HAZZARD: What I am more concerned about is that you mislead people, Mr Secord. I will give you the story. You wrote to me—

**The CHAIR:** Order! I will stop the clock. This hearing is to be conducted without abuse, sarcasm and all the rest of it. Can we proceed in that way?

Mr BRAD HAZZARD: I am happy to do that but if I am going—

**The CHAIR:** Minister, that is why I have stopped the clock. That is not the way you are conducting yourself.

Mr BRAD HAZZARD: I think I am being very patient considering Mr Secord is putting things to me that are not true.

**The CHAIR:** No, Minister, you keep trying to talk over people. That is your modus operandi but it is just not acceptable. It is a question followed by an answer.

**Mr BRAD HAZZARD:** How would you like me to answer wrong questions, questions that are not factually correct? You give me a direction and I will follow it.

The Hon. WALT SECORD: Mr Chair, he was going to—

**The CHAIR:** No, we will sit here. Minister, every time from now on that you respond with sarcasm and the rest I am going to stop the clock.

Mr BRAD HAZZARD: That is fine. Who is going to make the assessment on that?

The CHAIR: I am.

Mr BRAD HAZZARD: I think under standing orders that is not actually something—

**The CHAIR:** We can go till 8 o'clock tonight; I am happy to do that.

Mr BRAD HAZZARD: I am happy to stay. With the level of questions, it is clear that he has nothing to add.

The CHAIR: This is what I mean. You simply blunder through. You know better, Minister.

Mr BRAD HAZZARD: I think you and I know that when you ask something genuine of me, as you did on one occasion, I work with you. But if I am having things put to me that are rubbish then I am entitled to respond.

The CHAIR: Minister, there you go again. You cannot help yourself. You are a serial offender.

Mr BRAD HAZZARD: No, I am a serial observer.

The CHAIR: Serial offender.

Mr BRAD HAZZARD: Observer. I will have a cup of tea and when he is ready to continue I will deal with it.

The CHAIR: I am saying that I will continue to stop the clock and we will take as long as it takes every time you respond with sarcasm and in a dismissive tone to the questions presented to you. Do you understand that?

**Mr BRAD HAZZARD:** Mr Chairman, I have been here 28 years and I know how a chairman should conduct a committee like this. You have every right to conduct it within the standing orders and I have every right to respond in the way I wish to respond. I am doing that. If and when Mr Secord is ready to continue and you are ready to continue, I am sitting here waiting to continue.

The CHAIR: It has nothing to do with Mr Secord.

Mr BRAD HAZZARD: I am sitting here, when he wants to ask me a question, continue.

**The CHAIR:** No, it has nothing to do with him; it is between you and me.

Mr BRAD HAZZARD: I am not going to engage anymore on that. I will wait for the question, okay?

**The CHAIR:** As long as everyone is clear, including the media, that we will stop proceedings when the Minister persists with his childish behaviour.

**Mr BRAD HAZZARD:** If you start using adjectives about me, I will start using adjectives about you. So be very careful on that.

**The CHAIR:** Do not threaten me, Minister. That is what we will do if the childish behaviour continues, okay?

Mr BRAD HAZZARD: If your childish behaviour continues then we will not have a hearing.

**The CHAIR:** Minister, you can threaten all you like, but I am telling you that the difference in the completion of this hearing today is that we will conduct the hearing with appropriate demeanour and the respect that it deserves.

Mr BRAD HAZZARD: I agree with that.

The CHAIR: Start the clock.

The Hon. WALT SECORD: The Minister was going to detail the events involving Mr James Tongue.

Mr BRAD HAZZARD: No, I was going to wait for your question.

**The Hon. WALT SECORD:** You said, "Okay, I will tell you what happened". I invite you to explain what happened.

Mr BRAD HAZZARD: You put out a press release today that was inaccurate, but you wrote me a letter and the letter indicated that the gentleman, whose name is James Robert Tongue actually, believed that he had to wait 365 days. Cataract surgery is always a challenge for governments across Australia because it is the most frequent form of surgery that occurs in this country. It has all sorts of implications to do with comorbidities and so on as to the speed at which the surgery can be dealt with, and the precise clinical decision is left entirely to the clinicians. In fact, I held a forum on how to deal with cataracts here only two weeks ago, or 1½ weeks ago, with about 60 of the top experts in New South Wales. I am more than passing familiar with this topic.

When I got your letter, I looked at the letter and wondered why you were saying what you are saying. It seemed to me that you did not understand, and nor did the gentleman, that it is not 365 days and it also seemed to me that he needed some clarification around that. There are three classifications for cataracts, the ones that may or may not have comorbidities and other complexities. Category one is a 30-day response, clearly an urgent response. Category two is usually a 90-day response. Category three is up to 365 days—each of the categories is up to 30 days, up to 90 days, up to 365 days—not 365 days. So I rang him to talk to him because the tone of your letter, I thought, was being constructive. I did not realise it was some sort of political exercise on your part. And I rang him and—

The CHAIR: Stop the clock. Minister, you are reflecting on the member. We will start the clock again.

Mr BRAD HAZZARD: As I was saying, I rang him and I spoke to—not him, contrary to what you put in your press release today. It did not occur this morning, contrary to what you said in your press release today. What I said to a person who answered the phone was that I thought from the tone of your letter that you had been told that the gentleman thought he had to wait 365 days.

**The Hon. WALT SECORD:** That is what the correspondence from the Murrumbidgee Local Health District [LHD] says.

Mr BRAD HAZZARD: I explained to the person who answered the phone that it was up to 365 days. I did what should be done: that is, I explained to him that if he thought that there was some worsening of his condition, he should take the opportunity to go back to his doctor and have it clinically assessed and that the clinical assessment—if it varied from the last clinical assessment, hopefully he would be put on a higher priority. That person was a lady, and the lady said that he was down seeing his general practitioner at the time; I think it was about 4.30 yesterday afternoon. I dealt with it just as I would deal with anybody who as one of my colleagues—Liberal, Labor, Greens—had written to me about. I did what I should do.

**The Hon. WALT SECORD:** Is it customary for you to call up the residences of individual patients? Will you be calling up all 2,538 patients—

Mr BRAD HAZZARD: If I think—

The Hon. WALT SECORD: —waiting for elective surgery in Wagga Wagga?

Mr BRAD HAZZARD: That is a dumb question; a really dumb question.

The Hon. Dr PETER PHELPS: Point of order—

**The Hon. WALT SECORD:** No, it is not a dumb question.

The CHAIR: A point of order has been taken.

Mr BRAD HAZZARD: Stop the clock. Stop the clock.

**The Hon. Dr PETER PHELPS:** Section 65 (1) (f) of the standing orders prohibits questions containing ironical expressions.

The Hon. WALT SECORD: It was not an ironical question.

**The Hon. Dr PETER PHELPS:** Are you seriously suggesting the Minister is going to call up thousands and thousands of people? There is no irony in that? Are you serious?

The CHAIR: Order!

**The Hon. WALT SECORD:** No. I was asking it completely straight down the barrel; absolutely dripping with sincerity.

The Hon. Dr PETER PHELPS: That is a very interesting—

The Hon. WES FANG: I think that in and of itself was a breach of 65 (1) (f).

Mr BRAD HAZZARD: That sounds a bit ironic.

**The CHAIR:** Let us see if you can ask the question again in the same form or a slight variation and let the Minister answer it.

**The Hon. WALT SECORD:** Given that you called and took a personal interest in the case involving James Robert Tongue—and I quote directly from the correspondence from the Murrumbidgee Local Health District, signed by Sonia Lewis, acting surgical patient flow manager:

The approximate waiting time is 365 days from when your name is placed on the waiting list. Your doctor has determined the critical priority of your admission.

You intervened in his case. You made a call to his carer or to his home—

Mr BRAD HAZZARD: No, I did not. I gave him advice.

The Hon. WALT SECORD: Will you then provide similar advice to the 2,538 patients—

Mr BRAD HAZZARD: I really hope—

**The Hon. WALT SECORD:** —who are waiting for elective surgery?

**Mr BRAD HAZZARD:** No, sorry. I am not allowed to be—what is it? What are the words, whatever I am not allowed to be?

The CHAIR: You know, Minister.

Mr BRAD HAZZARD: Mr Secord, you would be surprised to know that in my office yesterday—just yesterday—I had two separate families, one of whom was severely damaged by you last year in this estimates period by doing things you should not have done. Those families come and see me and talk to me because I ring them and I talk to them. This gentleman from your letter seemed, to me, to be under a misapprehension. I also, by the way, agree with you—I do agree with one little aspect and that is that the letter that was sent out by the Murrumbidgee LHD was, in my view, not good. It had words that were there. First of all, the letter had in, I think, the second sentence—which disturbed me when I saw it—"approximately 365 days". I thought that was inappropriate because it is not what the clinical guidelines are: It is up to 365 days. The second matter, I also noticed that it had reference to—I think even the grammar further down: "you do something" rather than "your". Both of those things I thought were inappropriate.

I rang the chief executive, Jill Ludford—again, what other Ministers might not do but I do. I rang her and I said, "I have spoken to this gentleman and made sure that he has clarity that it is up to 365 days. But one of my colleagues, Mr Secord, has indicated this gentleman may need earlier treatment. Can you make sure that he has someone contact him to let him know that if he has a clinical reassessment, then he may be eligible for whatever the doctor decides?" So the fact that you wrote to me was sufficient to get me to do it. And on occasions, that is exactly what I do when colleagues write to me—Labor or Liberal. I have a whole host, if you would like—but I will not do it—of your colleagues, one of whom rang me today again about a particular issue. I am seeing another colleague, a Labor colleague, tomorrow. I do not play politics; I do not do that. But I do play a very genuine role trying to make sure the patients of New South Wales are well looked after. Heaven help them if the Government changes.

Ms DAWN WALKER: Minister, can I turn your attention to the HCCC? I am interested in if there has been any increase in the complaints received by the commission in, say, the past five years.

Mr BRAD HAZZARD: On what?

Ms DAWN WALKER: Complaints on all manner of things. Have there been a number of—

Mr BRAD HAZZARD: I do not have the figures with me at the moment. I would say to you that my general understanding is that yes, they have increased. I think that is partially due to a greater awareness of consumers that they do have a right to bring—sorry?

The Hon. WALT SECORD: Sorry, Minister. We were just tabulating the time. Apologies.

Mr BRAD HAZZARD: I think consumers in the health area—certainly what I have seen in the past 18 months is consumers feel empowered to make complaints. My understanding would be that there has been an increase in the numbers. My chief medical officer is looking very enthusiastic with her—well, enthusiastic is appropriate—with some figures. What have we got? The HCCC has received—I said this before—7,083 complaints in the past year, which is an 11.7 per cent increase over the previous year.

Ms DAWN WALKER: Over the previous 12 months, yes.

Mr BRAD HAZZARD: Over the previous 12 months. I think that reflects what I was saying: They feel empowered to be able to do it, which is good.

Ms DAWN WALKER: Which is great. However, I suppose the flipside of that is: Has the commission received additional funding to deal with this increased workload?

Mr BRAD HAZZARD: The HCCC received, I think, nearly another \$2 million just in the last budget to help with the workload. I have got to say I think that there is a lot more that probably needs to be done with the HCCC. The staff there work really hard—really hard—and I think the whole organisation works under pressure as a result of that greater empowerment of consumers under our Government. We have been time and time again saying, "If you have concerns, please use the HCCC to let us know about your concerns." The issue, I guess, is this: that in determining the budget across the whole health system, it is getting towards roughly one in three dollars is already going to health and trying to divide that up is very tough. The entire budget this year is about

\$25 billion and there are a whole lot of areas which, given the choice—I mean, one of them was raised either by Mr Secord before or Mr Green about dental. If I had my choice—

The Hon. WALT SECORD: It was me.

Mr BRAD HAZZARD: Was it Mr Secord? Okay. I would like to see a lot more money going into dental. But at the moment, that is a Federal—

The Hon. PAUL GREEN: Going to need it for the ageing population, Minister.

Mr BRAD HAZZARD: Yes, they do. I better not get sidetracked, Ms Walker; do not even talk about that. So I think that there are a number of areas which—I share the concerns of other Labor and Liberal Ministers around the country. We would all like to get more money, but there has to be some way of carving up the pie.

Ms DAWN WALKER: Do you have the figures of the average turnover rate for staff of the commission?

Mr BRAD HAZZARD: No, I do not.

Ms DAWN WALKER: Are you able to take that on notice?

Mr BRAD HAZZARD: Yes, sure.

Ms DAWN WALKER: Thank you. Can I turn to—

**Mr BRAD HAZZARD:** Are you suggesting there is a cultural issue at the HCCC or that they are working under pressure? What are you actually saying?

**Ms DAWN WALKER:** I understand that 2016-2017, only 64.5 per cent of complaints received actually were assessed. The target is 100 per cent, which is terrific, but it does not seem to be being met. I think there is a concern there as to whether that is because, with the increase of complaints the funding has not reflected that, or perhaps there is a higher staff turnover and they are not being replaced?

Mr BRAD HAZZARD: They are not being replaced?

Ms DAWN WALKER: No, I am asking you. You are the Minister.

Mr BRAD HAZZARD: I understood they are, and I understood they have actually increased their staff. That is why they have the increased budget. I will have a look at it because, it has just been pointed out to me, as I said to you, I empirically thought that there would have been an increase in complaints. In 2017-18 the HCCC had an increase of complaints by about 19.2 per cent over 2016-17. It is exactly as I thought it would be, and I think there has been a longer period in trying to turn it around. I think the HCCC is seeing a lot more complaints, but I will take on board what you are saying. If you have somebody that is actually indicating that they need more staff, I will have a look at that.

Ms DAWN WALKER: I appreciate that.

Mr BRAD HAZZARD: Thanks for raising it because the HCCC needs to be very viable.

Ms DAWN WALKER: The other area that I have been approached on its pharmacology, and the question of adverse events related to pharmaceutical drugs. The Minister, in fact, wrote to the Hon. Ben Franklin on 29 June in 2018, noting that there were no medical professionals in the Northern NSW Local Health District that specialised in the field of drug allergies or pharma—

Mr BRAD HAZZARD: —cological? Pharma-something?

**Ms DAWN WALKER:** —pharmacokinetics?

Dr CHANT: Pharmacokinetics.

Mr BRAD HAZZARD: Pharmacokinetics, yes.

**Ms DAWN WALKER:** Which is a reaction to pharmaceutical drugs. Since then, I am wondering if there have been any steps, given you have had this correspondence with your colleague, to address this gap in the local health district?

**Mr BRAD HAZZARD:** Can I just say I think it is a difficulty getting an appropriate specialist in that area, and Ben Franklin, as a good local National Party—

The CHAIR: Candidate?

Mr BRAD HAZZARD: Yes, I was thinking of the right word.

The CHAIR: Candidate.

The Hon. WALT SECORD: Candidate.

Mr BRAD HAZZARD: Not so much candidate, but—

The Hon. WALT SECORD: Candidate.

The CHAIR: I think so.

The Hon. COURTNEY HOUSSOS: He is now.

**Mr BRAD HAZZARD:** —a good Nationals man representing the area of the North Coast around to Ballina and Byron, and he is doing an excellent job on that front.

The CHAIR: "Candidate" is the word.

The Hon. Dr PETER PHELPS: Great man.

The Hon. COURTNEY HOUSSOS: For now, he technically represents all of New South Wales.

The Hon. WALT SECORD: We will be the judge of that.

Ms DAWN WALKER: Yes, let us wait and see whether we are going to get any results.

Mr BRAD HAZZARD: Anyway, he certainly raises issues regularly with me on behalf of the residents of that area, and I am more than happy to take on board your request as well, Ms Walker, and to find out the answer. The specific question, if you could just tell me so I can get the medical people in—

Ms DAWN WALKER: You are just making me say "pharmacokinetics".

**Mr BRAD HAZZARD:** No, do not worry about that. Just the rest of the question. You do not have to say that again because I know it is a tough one; I cannot say that either. What was it? Just ask the question again.

Ms DAWN WALKER: I understand that you have had correspondence with the Hon. Ben Franklin and you have noted that there is no medical professional in the Northern NSW Local Health District that specialises in the field of drug allergies. These questions have been raised also in the Public Accounts Committee parliamentary inquiry into the management of healthcare delivery in New South Wales. We have seen evidence given by Professor Richard Day, who speaks about the importance of specialists to deal with drug allergies. Have you had a look at that testimony, Minister? Are you aware of that testimony?

Mr BRAD HAZZARD: I am aware that there are issues around it and I am aware of the difficulty in getting specialists in that area. I am aware of the difficulty of getting specialists generally in that area. Let me take it on notice and I will get an answer for you in detail, rather than just giving you a high-level answer.

**Ms DAWN WALKER:** I appreciate that. Apparently—and you are not going to like this either—there is an issue about vehicles, paramedics having access to vehicles, particularly in the Penrith area.

Mr BRAD HAZZARD: What sorts of vehicles?

Ms DAWN WALKER: Ambulances.
Mr BRAD HAZZARD: Tell me more.

**Ms DAWN WALKER:** They are saying that they are arriving at a shift and finding they must wait at the station because there are not enough vehicles. Sometimes no vehicles are available for more than an hour.

Mr BRAD HAZZARD: Really?

Ms DAWN WALKER: Apparently.

**Mr BRAD HAZZARD:** Neither the Health Services Union [HSU], nor the Australian Paramedics Association [APA], nor any individual paramedic has ever raised that with me, but if you would like to forward me details, I undertake to you to find out because I want to know the answer to that one.

Ms DAWN WALKER: Good. Okay.

The Hon. WALT SECORD: I might get onto that one, too.

Mr BRAD HAZZARD: Send it to Walt Secord. He will have a great press release out before you know it.

The Hon. WALT SECORD: I will get right onto it.

The Hon. Dr PETER PHELPS: He will write you a letter.

Ms DAWN WALKER: Can the Minister provide details of the budget announcement—we are looking at, apparently, and this sounds terrific—of \$1 billion in funding for ambulance services, including 750 new paramedics. The question is, of these 750 positions announced, how many will be for new paramedics?

Mr BRAD HAZZARD: They are all new. The Government has been working extensively with paramedics, but also particularly the Health Services Union has been speaking to the Government—to me—for quite some time about the need for additional paramedics. Although there has been an increase—I think there were something like 135 new paramedics over the last couple of years—the 750 announcement was off the back of listening to paramedics, listening as well to local members of Parliament of all political persuasions, and also working extensively with the Health Services Union.

In fact, they issued a press release acknowledging that 750 paramedics was an amazing addition to the paramedic workforce. In fact, Gerard Hayes stood next to the Premier and acknowledged that the work that was being done on that was world class. We are aiming to have the first 200 out, I think, in February or so. So it is going really well. Yes, it is about \$1 billion that goes into the ambulance budget currently—just shy of that, I think, but close to it. Is there a specific question you had about that?

Ms DAWN WALKER: I have questions on that, and I will put them in as supplementaries.

Mr BRAD HAZZARD: Later on? Okay.

**The Hon. PAUL GREEN:** In regard to hospital parking across New South Wales, what was the total revenue collected from paid hospital parking in the last 12 months?

Mr BRAD HAZZARD: The hospital car park. I have got to say, whilst getting the patients looked after and getting their families cared for and so on is the primary purpose of health, the issue that I get more frequently asked about is car parking than anything else in the health system.

The Hon. PAUL GREEN: Exactly. It causes great stress for the relatives.

**Mr BRAD HAZZARD:** It does. I am consoled by the fact that every one of my Labor and Liberal colleagues tell me when we meet together that it is exactly the same for them.

The Hon. WALT SECORD: In opposition, too.

Mr BRAD HAZZARD: I am sure. But the New South Wales Government has been doing a lot in this area. There was a wonderful young man called Gideon who came just after I became a Minister, and talked to me about the fact that the charges that were being made in car parks—at Prince of Wales, just as an example—were prohibitive for people who needed to attend regularly for day assistance and for patients. We made some major changes, which were announced publicly at the time and reduced dramatically the amount of money that people paid. When those car parks are built, they are essentially built either with taxpayers' money, which is one model, and generally Treasury—whether you are a Labor or a Liberal Government—requires some sort of recovery of that money over a period. Not always, but mostly.

**The Hon. PAUL GREEN:** What percentage does the Government get out of it?

Mr BRAD HAZZARD: Hang on, let me finish. And then there are others that have been built over the last 15 years both under the former Government and our Liberal-Nationals Government using private money and public-private partnerships, effectively. So the Government would only be recovering—at very best might be recovering—some of the money that has been put into some of those car parks, but it would be a net loss. I am absolutely certain of that. In fact, one of the issues is always in a city it is a little easier because people in the city expect—they know—that we have a rough old city when it comes to car parks and what we pay. I went down to one at Sussex Street the other day.

The Hon. Dr PETER PHELPS: What? Sorry?

Mr BRAD HAZZARD: Just dropping in to see my mates.

The Hon. Dr PETER PHELPS: Your little mates?

Mr BRAD HAZZARD: That is right. It was \$82. It is just crazy. So I left—

The Hon. PAUL GREEN: That is my whole point: about the cost-of-living pressures.

**Mr BRAD HAZZARD:** Yes. I went right over to the other side and parked in one of those new car parks over near the International Convention Centre for \$20. Much better.

The Hon. Dr PETER PHELPS: Queanbeyan has free parking.

**Mr BRAD HAZZARD:** The Government did that. But what I am saying there is that I think people who live in Sydney expect to have to pay something. People who live in regional areas sometimes understand that if they really want it, they have to contribute to some degree.

The Hon. PAUL GREEN: That is my point, Minister. I had a personal situation where a couple of weeks ago I made some pastoral calls to a man in Royal Prince Alfred Hospital who was suddenly diagnosed with terminal cancer and probably died within about a week. Fortunately, I was able to visit him three times, roughly adding up to around \$70 plus, whether I went by taxi or parked. I find that would be reprehensible for relatives. It is fine for me because I can afford it, but what about for those relatives who are visiting where that person needs them close? They could not take a hit from regional areas. That is a lot of money on top of the tolls to get there. What are we doing to give them a break?

Mr BRAD HAZZARD: What I said to you was that the whole structure was changed in June this year. I will send you a copy of the press release and the details.

The Hon. PAUL GREEN: Yes.

**Mr BRAD HAZZARD:** But it is dramatically less than it was. In fact, we are trying in some of the regional areas where there is a particular need, where there is a socio-economic need for it, to also provide taxpayer subsidies or taxpayer completely car parking.

The Hon. PAUL GREEN: It has to be easy and accessible for those people coming to visit.

Mr BRAD HAZZARD: In an ideal world, Paul, it should be free. But it cannot be.

The Hon. PAUL GREEN: I understand that, but I am saying it has to be easier for those people coming to visit their loved ones. They are entitled to some sort of rebate or assistance. It has to be easier. They have to jump all these hoops to get a refund. They are already stressed out of their brain, they are already totally consumed by their loved one's illness, then to have to jump all the hoops to try to get—

Mr BRAD HAZZARD: They can get discounts. I went down to check it myself. I had a look, for example, at St George Hospital. If you look at St George it used to be, prior to our government, the car park you paid full freight. Now, there is a sign—in fact, a number of signs; one right on the actual place you take your card out—saying in certain circumstances, and it lists them all, you can get a discount. People just have to ask for the discount and they get it. They get an arrangement beforehand—

**The Hon. PAUL GREEN:** Where do they get it from though?

Mr BRAD HAZZARD: It varies from hospital to hospital, but it is all there laid out. If you find one where it is not laid out clearly let me know and I will personally pick up the phone—which is what this Minister does.

The Hon. PAUL GREEN: In 2011 Mr Peter Wills, AC, Chair of the NSW Health and Medical Research Strategic Review was quoted as saying that we have a world-class health system, excellent researchers, pre-eminent universities and research organisations, and pockets of excellence in research fields. New South Wales should be a global medical research leader but is currently not fulfilling its potential. Minister, given research can help deliver better treatments and interventions, improve health services delivery, and improve clinical and population health outcomes, how do you ensure that New South Wales has a global reputation as a centre of excellence for health and medical research?

The Hon. Dr PETER PHELPS: It already does.

The Hon. PAUL GREEN: Not according to Mr Wills.

Mr BRAD HAZZARD: Everybody is entitled to their view—except for Mr Secord, everybody else is entitled to their view. The bottom line here is that New South Wales—and Victoria probably—are the two pre-eminent leaders in research in Australia. New South Wales has an amazing array of institutes. We have the Garvan, we have the Ingham, we have the Children's Medical Research Institute, we have the Hunter Medical Research Institute. What is particularly good is that in the last probably two or three years, four years, there has been a lot more focus on working across research establishments. For example, they have the Sydney Partnership for Health, Education, Research & Enterprise and Sydney Health Partners, two different groupings bringing together an aggregation of different universities, different hospitals and different research institutes. And particularly in the areas of immunotherapy and genomics we are doing incredible work.

I have to acknowledge here that our researchers are literally leading the world in a whole host of research areas. In addition to that, the New South Wales Government—and I acknowledge my former colleague Jillian Skinner in this regard—under Jillian Skinner established a fund for medical devices, which again is part and parcel of that research area. I have had the delight of attending two of those presentations to people who are doing the most amazing, cutting-edge development of medical devices as part of the research. Whether it is in immunotherapy, genomics or proteomics—Roger Redell at Westmead Children's Research Institute, that institute has just been given another \$40 million as a result of a negotiation that our government made with Greg Hunt on behalf of the Federal Government, and they got an extra \$20 million from the Federal Government, \$20 million from us. I was out there; all the researchers were absolutely beside themselves with excitement.

I have to say to you that Mr Wills is entitled to his view but a lot of work is being done in this area to make sure that New South Wales is absolutely cutting edge. You can see—this happened last year—she is not nodding this year. She is showing her enthusiasm so I am going to let the Chief Health Officer contribute to this debate

The Hon. PAUL GREEN: I think she just wants you to read the message you are sending to us. It is only one word, I think.

Mr BRAD HAZZARD: When she gets that excited it is just easier to let her do it.

**Dr CHANT:** The review that Mr Wills was commissioned for was undertaken in conjunction with the ministry and we basically worked on implementing the wise recommendations. Mr Wills was supported by a broad group of other eminent people on that review and it recommended things such as better commercialisation initiatives, better collaboration and the need to develop funding programs that promoted that cross-collaboration. It recommended increased funding support to cover the full cost of research in relation to an increase in funding for the Medical Research Support Program. It also identified areas where New South Wales has particular strengths and it was recognised in that review that we had particular strengths in things such as robotics, big data and areas where we can leverage off our science The Minister spoke about the Medical Devices Fund, and I have to say that has been a very pleasing investment and we have seen a return on investment to the Government from some of the successful commercialisations.

**The Hon. PAUL GREEN:** That brings me to the next question: How many recommendations were there and how many have you implemented from Mr Wills' review?

**Dr CHANT:** Unfortunately, Mr Green, I have to refresh my mind from 2011, but there has been a concerted effort in implementing the representations of that and also looking at how the environment has changed and what are the other actual opportunities for us to leverage. The Minister mentioned the genomics work and, in terms of the cancer genomics program, New South Wales is recognised as an international leader, particularly linked with David Thomas at the Garvan. There have been significant developments in genomics. We have also had a strong focus on making our clinical trials processes more streamlined so that we have a competitive advantage in attracting clinical trials.

**The Hon. PAUL GREEN:** Thank you. Can you speak about the security of employment of such researchers and keeping them in New South Wales?

**Dr CHANT:** There has been a variety of programs, such as early- to mid-career research programs, and even just recently the Government announced a \$150 million program to support and strengthen cardiovascular research. A key component of that is workforce initiative to basically make New South Wales a very attractive home. We will be going out in the next week or so with a clinician scientist and a clinician researcher program as part of the consultation around that program expenditure. And making sure that New South Wales is seen as a place for workforce excellence underpins all of our strategies.

**The Hon. WALT SECORD:** Minister, I was going to throw the question to Dr Chant in your absence, but you are back. I take you back to the background to the Norco contract that happened earlier this year. Do you believe that NSW Health and HealthShare take great efforts to procure products and services from New South Wales and Australia?

Mr BRAD HAZZARD: I think it is always a balancing act. HealthShare is part of a very large organisation and it has an obligation to provide products to the various local health districts, without wasting taxpayer dollars—in other words, getting the best value. I think part of the problem in the Norco situation was that, as in every situation in life, there must be a balance. In my view, the balance in that situation was a little too much one way—that is, towards the economic rationalist approach. Taxpayers might say, "Good on you for saving the money." But they might also say, "We would have liked our local area to get our local milk."

Again, this is a worldwide issue; it does not matter where you go. Some interesting work has been done in Wales, which enacted the Well-being of Future Generations (Wales) Act 2015. That jurisdiction requires a focus beyond the economic, and the community is prepared to back it and say that they should look at the broader social issues as well as the economic issues. In fact, they have had some great experiences. I understand that in one area they insisted that the local authority buy produce and milk in the local area, and that had a local economic multiplier effect.

**The Hon. WALT SECORD:** You would have followed the local response to Roads and Maritime Services and Sydney Water engaging overseas companies like Wipro and Tata Services to provide information technology [IT] services. Are you familiar with that?

**The Hon. Dr PETER PHELPS:** Point of order: That is entirely outside the Minister's portfolio responsibilities, unless the honourable member is claiming that it was brought to Cabinet. It would not have been because it is a procurement decision within the individual department. Therefore, the question is out of order.

The Hon. WALT SECORD: Why so defensive, Peter?

The Hon. Dr PETER PHELPS: Because the question is out of order.

The Hon. WALT SECORD: It is not.

**The Hon. Dr PETER PHELPS:** You cannot ask out-of-order questions. Ask the Minister about his own portfolio. You can ask about contracts within his own portfolio area, but you cannot ask him about other Ministers' portfolio contracts.

**The Hon. WALT SECORD:** There are at least four contacts with Tata Services. Roads and Maritime Services and Sydney Water have contracts with Wipro and Tata Services. Are you aware that there are at least four contracts with Tata Services? If you do not know, can a member of your staff elaborate?

Mr BRAD HAZZARD: Four contracts with whom, by whom and for what?

**The Hon. WALT SECORD:** NSW Health, HealthShare NSW, contract EHL31269463, and Tata Services, contract SCN002015805. There are four of them.

Mr BRAD HAZZARD: What are you saying?

The Hon. WALT SECORD: I am asking you about your Government's policy on overseas procurement of services.

Mr BRAD HAZZARD: Procurement of services?

The Hon. WALT SECORD: IT services. NSW Health has four contracts with Tata Services.

Mr BRAD HAZZARD: I did not realise this was where you were heading. But I said at the outset that it is about balance. I well recollect that one of the issues for me as the then Minister for Planning and Infrastructure was that there was no real competitive edge in New South Wales for the 16 years of the Labor Government because there was no infrastructure pipeline. What we saw was a preparedness on behalf of taxpayers to recognise the two needs that industry was telling us about. One was the competitive edge for government and the second was an infrastructure pipeline for industry itself. That means there is a balance, and that balance always has to be dealt with subjectively. Simply naming a company or providing a name is not particularly productive. If you are making some assertion that NSW Health has not been getting an appropriate service or that the taxpayers—

**The Hon. WALT SECORD:** I am asking a question about procurement of IT services involving NSW Health and overseas company Tata Services.

Mr BRAD HAZZARD: What are you alleging?

**The Hon. WALT SECORD:** I am asking whether you can guarantee that patient information and information held by NSW Health is remaining in Australia and not going overseas.

**Mr BRAD HAZZARD:** I think the NSW Ministry of Health and the local health districts have frailties—of course they do. But you know what? We have the best health system, the best public servants, the best nurses, the best doctors and the best IT specialists in the world.

The CHAIR: Hear, hear!

Mr BRAD HAZZARD: I will back them 100 per cent in terms of their capacity. I will challenge them as I am—

The Hon. WALT SECORD: That was a nice rah-rah speech. I would like to know whether patient information—

Mr BRAD HAZZARD: So you do not think that about nurses, doctors and other staff?

The Hon. WALT SECORD: I do, but that was not my question.

Mr BRAD HAZZARD: I am entitled to answer.

**The Hon. WALT SECORD:** My question was about patient information and health services going overseas. It was a simple question.

Mr BRAD HAZZARD: Please allow me to finish. I am also very aware—and I hope you know a little about the area you are making assertions about—that any e-platform has risks. However, I am convinced that the e-health experts who operate within the New South Wales health system are world class. They will be doing everything possible to ensure that people's data and information are safe. Having said that, we have heard the recent debate about My Health Record and the possibility of information getting out. Unfortunately, on the advice I have there is no absolute guarantee that when information is handled using modern technology it cannot be accessed. As a health Minister who has seen paper files end up in all sorts of ridiculous places, I know that is always a risk. I do not see what you are getting at.

The Hon. WALT SECORD: You say no in the nicest possible way.

The Hon. Dr PETER PHELPS: Feel the love.

The Hon. COURTNEY HOUSSOS: Three years ago in the budget estimates hearings I asked your—

**Mr BRAD HAZZARD:** I am sorry; I was distracted by your colleague's comment and I was a little lost trying to work it out. What did you say?

**The Hon. COURTNEY HOUSSOS:** Three years ago in the budget estimates hearings I asked your predecessor about the promised upgrade to Cooma Hospital. It was a promise made to the people of the Monaro before the last election. The Minister assured me that the project would be completed before the next election. The budget papers now reveal that less than half of the total project cost will be expended by the next election. What do you have to say to the people of the Monaro?

**Mr BRAD HAZZARD:** What I do have to say is that no matter where you go in the regions of New South Wales if there had been a Labor Government over the past eight years nothing would have been done. That was the history for 16 years.

The Hon. COURTNEY HOUSSOS: With respect, Minister, you have been in government now for eight years.

The Hon. Dr PETER PHELPS: Eight glorious years.

The CHAIR: Eight long years.

**The Hon. COURTNEY HOUSSOS:** It is time for you to talk about your record and what the people of the Monaro—

Mr BRAD HAZZARD: You would like me to talk about our record? Okay.

The Hon. Dr PETER PHELPS: We will talk about the great Queanbeyan District Hospital.

The Hon. COURTNEY HOUSSOS: Labor built Queanbeyan District Hospital.

The Hon. Dr PETER PHELPS: Yes, with flammable cladding.

The CHAIR: Order!

The Hon. COURTNEY HOUSSOS: The people of Cooma—

The Hon. Dr PETER PHELPS: Thank you, Steve Whan.

**The Hon. COURTNEY HOUSSOS:** The people of Cooma went to the last election having been promised that their local hospital would be significantly upgraded.

Mr BRAD HAZZARD: And they are getting it.

**The Hon. COURTNEY HOUSSOS:** They will now go to the next election with less than half of the money allocated for the upgrade having been spent. Do you think that is fair?

**Mr BRAD HAZZARD:** What I do know is that we are spending money that your Government would never have spent.

The Hon. Dr PETER PHELPS: Hear, hear!

**Mr BRAD HAZZARD:** The \$20 million now going to Cooma will make a huge difference. The local member has fought for that—

The Hon. WES FANG: A great local member.

**Mr BRAD HAZZARD:** He is; he is excellent. He is making sure that happens in the same way that Liberal-Nationals members have ensured that Tamworth, Parkes, Forbes, Dubbo, Broken Hill—

The Hon. COURTNEY HOUSSOS: I am not interested in those other places at the moment.

Mr BRAD HAZZARD: You may not be, but I am telling you—

The Hon. Dr PETER PHELPS: And Wagga Wagga.

**Mr BRAD HAZZARD:** Yes, we have some amazing hospitals being built in Wagga Wagga and The Tweed.

The Hon. COURTNEY HOUSSOS: We were told that the Cooma Hospital would be upgraded.

Mr BRAD HAZZARD: As much as I am enjoying the question and the opportunity to recount what the Government is doing in spending almost \$1 in \$3 in the regions—which, again, the Labor Government never did—

**The Hon. COURTNEY HOUSSOS:** Minister, do you understand that when you play politics it does not resonate with the people of Cooma, who were promised a hospital upgrade before the last election that will not be delivered by the time they go back to the polls?

**Mr BRAD HAZZARD:** The work is being done and \$20 million is being spent on Cooma Hospital. That is exactly what should happen.

The Hon. COURTNEY HOUSSOS: Less than half of it will have been delivered.

**Mr BRAD HAZZARD:** It is very easy to throw rocks from the sidelines when you do not know what is going on. When the hospital upgrade went out for consultation, the community said it wanted various areas upgraded. As a result, the scope increased and that slightly delayed the project. However, the people are getting what they want. They would have got absolutely damned nothing from Labor.

**The Hon. COURTNEY HOUSSOS:** I am familiar with the upgrade and I know that you decided not to extend it to the extent the community—

**Mr BRAD HAZZARD:** Seriously, you guys did nothing for years. I am not reflecting on you; you are probably a very nice person. But your predecessors did nothing.

**The Hon. COURTNEY HOUSSOS:** When it went out for consultation, the community asked that it be extended beyond the upgrade that you promised to include a maternity upgrade, which was not included. The scope did change, but it did not include everything the community wanted.

**Mr BRAD HAZZARD:** You are now acknowledging that. So the scope has changed. They are getting far more than what was originally envisaged.

The Hon. COURTNEY HOUSSOS: No, the scope has changed but it will not be delivered as promised.

**Mr BRAD HAZZARD:** It will be delivered as promised in the sense that we promised what you guys failed to do. You did not even mention Cooma. We are doing the work in Cooma as we did in Tamworth, as we did in Parkes, as we did in Forbes, as we are doing in the Tweed—

The Hon. COURTNEY HOUSSOS: You are grandstanding.

Mr BRAD HAZZARD: —as we did in Wagga Wagga.

The Hon. COURTNEY HOUSSOS: The people of Cooma will have plenty to say about your grandstanding.

**Mr BRAD HAZZARD:** Labor does nothing for the regions, has never done anything for the regions. The Liberal-Nationals Coalition has delivered for the New South Wales regions.

The Hon. Dr PETER PHELPS: Hear, hear!

**The Hon. COURTNEY HOUSSOS:** The people of Monaro will have plenty to say about your record at the next election. Minister, has the department done any modelling as a result of the expected population growth from Snowy 2.0?

Mr BRAD HAZZARD: They are constantly revising the work that goes on. I think you have just raised one issue and you have said it is terrible that it has not been delivered absolutely as had been originally forecast—that is what goes on. The health department public servants are constantly working on the forecasts of population growth. That is exactly why before we had your colleague Ms Walker of The Greens criticising us for reviewing the circumstances in the Tweed. It is a constant issue. Health is actually a constant, growing issue for us. The New South Wales Liberal-Nationals are delivering for everybody, whether you live in Sydney or in the regions.

**The Hon. PAUL GREEN:** Minister, I want to come back to a point that you made earlier—something in light of the fact that you are a very compassionate Minister—

Mr BRAD HAZZARD: Was it a good point or a bad point?

The Hon. PAUL GREEN: It was a good point—that you are very compassionate and keen to meet the health needs of people. I bring you to a representation you had via the Hon. Lou Amato on nine-year-old Kaitlyn Spraggon. A request was made to you, I think by Federal Minister Greg Hunt, just for your memory. A request was made that maybe New South Wales could assist with this Queensland nine-year-old child who needs corrective surgery to correct a spinal deformity and removal of extension rods and pins. I note that this is a complicated case because she is on medicinal cannabis but my understanding is that this child in Queensland cannot be on that and concurrently have the operation. The Minister requested that maybe New South Wales could on this occasion help this child who desperately needs this operation, for New South Wales to come to the party being a compassionate State and to outwork its compassion in this particular case for this child.

Mr BRAD HAZZARD: Thank you for raising that, Mr Green. One of the challenges of being the health Minister is that there are cases that come before me presented by colleagues like Mr Secord or any of my Liberal-Nationals colleagues, and in this case one from a Federal Minister that I really want to be able to reach out and try to help, but sometimes it is not that easy. I know the case you are talking about. I am very aware of it. It was quite an impassioned letter that came from Minister Hunt. As a result, I did make a call to the Queensland State Government. Those discussions will remain confidential but, again, as I have indicated during the course of this presentation, politics does not get in the way of Ministers and senior public servants between the various jurisdictions. There might be lines on maps but the senior secretaries around the country and the Ministers around the country in Health all work together.

I am very aware of this issue. I did sign off a letter to this little girl's mum probably in the last few days. It is a really challenging issue because she needs surgery but her mum is, as I understand it, providing what you

referred to as medicinal cannabis. She is certainly providing something which has cannabinoids and tetrahydrocannabinol [THC] in it.

The Hon. PAUL GREEN: That is correct.

Mr BRAD HAZZARD: "Medicinal" cannabis is a word that is loosely thrown around. If I can say this, it is a complex issue. We have currently identified more than 112 cannabinoids. Only about six of those have been analysed worldwide. To understand the impacts of cannabinoids you have to understand also the delivery mechanism: How is it being put into the body? You also have to understand how that individual is responding to those cannabinoids. If you actually allow THC in there then you also have to consider first the cannabinoid, what the quantity of the cannabinoid is, what the particular make-up of the cannabinoid is, what is the amount of THC, how those two things are married together, how they are delivered and how they actually affect the individual patient. That is the challenge around the use of medicinal cannabis.

The Hon, PAUL GREEN: It is in this case. This child will have epilepsy if they take her off that.

**Mr BRAD HAZZARD:** In New South Wales we currently have 80 young children who have been referred by their specialists and put onto trials with Epidiolex. It is heart wrenching to see these little kids; some of them have multiple seizures. There are terrible things that happen.

The Hon. PAUL GREEN: That is right. So surely we can do something to help this one.

Mr BRAD HAZZARD: We are trying very hard here in New South Wales. We removed a lot of the red tape by referring it to the Therapeutic Goods Administration. What was taking months for approvals can now take days, but it still has to meet the clinical needs for the doctors. We cannot, as public servants or as politicians, step in and say, "We know better." So what we have actually said is, "We are happy to work with you, happy to do what we can," but at the end of the day it is going to have to be a clinician-led decision.

The Hon. PAUL GREEN: I understand that.

Mr BRAD HAZZARD: I am not a physician; you are not a physician—you are a nurse though, or were a nurse.

The Hon. PAUL GREEN: I am a nurse.

The Hon. WALT SECORD: Former nurse.

The Hon. PAUL GREEN: Former nurse.

The CHAIR: You are never a "former" nurse.

The Hon. PAUL GREEN: I might go back to it after March.

Mr BRAD HAZZARD: Really? Aren't you?

The Hon. PAUL GREEN: If I do not get elected.

Mr BRAD HAZZARD: Are you up for the next one?

The Hon. PAUL GREEN: Yes.

**Mr BRAD HAZZARD:** I would say: If you are out there in voter land vote for the Christian Democratic Party and Paul Green.

**The Hon. PAUL GREEN:** I will see Dr Chant back on the wards.

The Hon. Dr PETER PHELPS: Hold on. I am also up in March too, thanks, Minister.

**Mr BRAD HAZZARD:** Vote for Peter Phelps too.

**The Hon. WES FANG:** As we all are.

**Mr BRAD HAZZARD:** Just do not vote for the Labor Party, guys, but vote for The Nationals, the Liberals and the Christian Democratic Party.

**The Hon. PAUL GREEN:** Minister, so it is in hand and you are doing something with it. Could the letter be tabled if it is appropriate?

**Mr BRAD HAZZARD:** No, it absolutely cannot because that is not appropriate and you would know that—good lord, literally.

The Hon. WALT SECORD: Put in a Government Information (Public Access) Act request.

The Hon. PAUL GREEN: Yes.

Mr BRAD HAZZARD: And you will not get it because it is private.

The Hon. PAUL GREEN: Can we be kept up to date about where that is going?

**Mr BRAD HAZZARD:** I will tell you what you can do, Paul: Get the authority from the mum, get it written, say that the mum gives you authority to get a copy of the letter and I will give it to her.

**The Hon. PAUL GREEN:** I do not need it necessarily but the thing is we want to try to resolve this terrible situation that this nine-year-old child is in—

Mr BRAD HAZZARD: And I am very happy to have you on board helping.

**The Hon. PAUL GREEN:** —whatever that appropriately means. Last year we talked about this time of the year most of us were sneezing into tissues or who knows where else because of the flu epidemic.

Mr BRAD HAZZARD: It was a shocker last year.

The Hon. PAUL GREEN: It was a cracker. In terms of last year we talked about the opportunity to put some sterilising fluids and sanitising materials on transport, trains and so on. I note that it is not on there but there are some educational materials. Would you like to enlighten us with what you ended up doing for this flu season?

Mr BRAD HAZZARD: As you know, it is not over but it has been far less dramatic. Last year was almost a pandemic. It was terrible, and we had quite a number of people across Australia die as a result of the flu potency last year. There were also some issues around the vaccine—as to whether or not the vaccine was appropriate—but that was a worldwide issue; it happened in Europe and the United States as well. This year we made sure—working with the Federal Government, of course, because the vaccine is obtained and distributed by the Federal Government to State jurisdictions—that we had, by working with them collaboratively, the appropriate strength vaccine. The Ministry of Health also ran a massive education campaign, particularly on social media, to tell people. Wherever you go—if you go into the toilet at the airports you will see that there are posters there telling you what you should do: sneezing into your arm—

The Hon. WALT SECORD: Wash your hands.

Mr BRAD HAZZARD: —or washing your hands and all of those things. There has been a massive education campaign. As recently as when I came back from Wagga Wagga just the other day, there it was in the men's toilet. The posters were there. They have done a lot of work on that. They have also had some vials of hand cleanser that they have been handing out on platforms and so on. You might have missed that, but they had that happening as well. They have done a lot of education this year to try and make sure that people are aware of the danger.

And I have got to say that it has been very successful. We have had far less impact on our health system this year than even in years before last year. It has been a very, very good season. Can I acknowledge the lady sitting to my left, Susan Pearce, Deputy Secretary. She was extraordinary last year. She was actually up until three or four o'clock in the morning directing ambulances and making sure people were getting the sorts of services in all of our hospitals that were needed. I should also acknowledge all my—they are not mine; they are the people's—deputy secretaries and secretaries. They do an amazing job on behalf of the people of New South Wales in regard to health.

The Hon. PAUL GREEN: Thank you, Minister, I only have one minute to squeeze one more question in. Minister, when are we going to lock someone up for abusing healthcare professionals—

Mr BRAD HAZZARD: I cannot lock Walt Secord up!

The Hon. PAUL GREEN: —like nurses and paramedics? It is a very serious issue.

Mr BRAD HAZZARD: It is a serious issue.

The Hon. PAUL GREEN: This abuse of our professional health workers is unacceptable.

Mr BRAD HAZZARD: I totally agree. The commissioner—or chief executive, whatever you want to call Mr Morgan—and I have been out. We had a forum—was it in this place?

Mr MORGAN: No, it was in the city.

Mr BRAD HAZZARD: We held a forum a few months ago. The paramedics were there—about 60 of them—and we talked about the violence issue and we came up with a series of recommendations, which they are all on board with. I made it very clear—and I have repeated it probably half a dozen times since—that paramedics will not go into a place of danger. If they know it is a place of danger, where they could end up being the victim rather than the assister, then they will not go in there. I have made that very clear. So has the commissioner.

Having said that, there was a recent example, a recent situation—in fact, we get them too regularly—of a nurse in a hospital in Sydney. Her first name was Sukhpal; I spoke to her. It was a terrible situation for her where a patient perhaps was not appropriately considered as to whether or not he was ready for transfer to a medical ward. I have asked the Ministry of Health to look at that issue. There was also an issue around the fact that he was able to access a knife from inside a particular room. I have asked them to look at whether or not there should be swipe passes on those rooms. But I cannot say too much more because that particular person is currently subject to criminal proceedings. We are doing a lot of work on it.

**The Hon. PAUL GREEN:** Could you maybe take on notice, and get back to the Committee, how many reports of physical abuse or abuse healthcare workers have made—paramedics and nurses?

Mr BRAD HAZZARD: Sure. I think it is made public somewhere.

The Hon. PAUL GREEN: It may be, but just for the record—

Mr BRAD HAZZARD: I will check it. Whatever it is; there is a lot of work to do.

The CHAIR: That draws our proceedings to a close.

The Hon. Dr PETER PHELPS: No! Say it ain't so!

**The CHAIR:** It is always a great pleasure. I am sorry that we have to draw a line under it. We have gone past the time by one minute. Thank you, Minister, and all of the officers for making yourselves available to come along this afternoon and provide us with the opportunity to ask questions. The Committee has resolved that answers to questions taken on notice have a return date of 21 days. I know some have been taken on notice, and there may well be some additional ones that emerge from members reading *Hansard* tomorrow. The secretariat will liaise with you with regard to those. Once again, thank you for coming along.

(The witnesses withdrew)

The Committee proceeded to deliberate.