PORTFOLIO COMMITTEE NO. 2 – HEALTH AND COMMUNITY SERVICES

Thursday, 6 September 2018

Examination of proposed expenditure for the portfolio area

MENTAL HEALTH, WOMEN, AGEING

CORRECTED

The Committee met at 9.00 a.m.

MEMBERS

The Hon. Greg Donnelly (Chair)

Miss Cate Faerhmann
The Hon. Paul Green
The Hon. Courtney Houssos
Mr Scot MacDonald
The Hon. Dr Peter Phelps
The Hon. Penny Sharpe
The Hon. Bronnie Taylor
Ms Dawn Walker

PRESENT

The Hon. Tanya Davies, Minister for Mental Health, Minister for Women, and Minister for Ageing

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

CORRECTED

The CHAIR: Welcome to the public hearing of Portfolio Committee No. 2 for the inquiry into the Budget Estimates 2018-2019. Before I commence I acknowledge the Gadigal people, who are the traditional custodians of this land. I pay my respects to elders past and present of the Eora nation and extend that respect to other Aborigines present or who might be joining us on the internet. I welcome Minister Davies and accompanying officials to this hearing. Today the Committee will examine the proposed expenditure for the portfolio of Mental Health, Women, and Ageing.

Before we commence I will make some brief comments about the procedures of this morning'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 galley should not be the primary focus of any filming or photography. I remind media representatives that you must take responsibility for what you publish about the Committee's proceedings this morning. It is important to remember that parliamentary privilege does not apply to what witnesses may say outside of the evidence of the hearing. I urge witnesses to be careful about any comments you may make to the media or to others after you complete your 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 Committee secretariat.

There may be some questions that a witness could only answer if they had more time or with 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 staff members 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. Transcripts 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 loudspeaker for persons in the public gallery who may have hearing difficulties. Finally, I ask everyone to please turn their mobile phones to silent for the duration of this morning's hearing. All witnesses from departments and statutory bodies or corporations will be sworn to give evidence this morning. 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 advise Mr Coutts-Trotter and Ms Mulkerin from the Department of Family and Community Services that you do not need to be sworn as you were sworn in proceedings yesterday.

ELIZABETH KOFF, Secretary, NSW Health, sworn and examined

MURRAY WRIGHT, Chief Psychiatrist, NSW Health, sworn and examined

CATHRYN COX, Acting Deputy Secretary, Strategy and Resources, NSW Health, affirmed and examined

KARIN LINES, Executive Director, Mental Health Branch, NSW Health, sworn and examined

MICHAEL COUTTS-TROTTER, Secretary, Department of Family and Community Services, on former oath

DEIDRE MULKERIN, Deputy Secretary, Commissioning, Department of Family and Community Services, on former oath

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

The Hon. COURTNEY HOUSSOS: Minister, do you agree with Julie Bishop that there is a problem with bullying in the Liberal Party?

Ms TANYA DAVIES: My role as Minister for Women in New South Wales is to represent the more than 3.9 million women and young girls in New South Wales. In relation to matters of the Liberal Party, they are for the Liberal Party to determine.

The Hon. COURTNEY HOUSSOS: Minister, the Federal Minister for Women has made some quite significant comments about what is happening in the Liberal Party. Do you want to reflect on those as well?

Ms TANYA DAVIES: All I will say to members of all political parties is that if they have grievances there are avenues that they can take up those grievances through. My roll is to represent the more than 3.9 million women and lead change across government to support them towards economic opportunity, advancement and health and wellbeing.

The Hon. COURTNEY HOUSSOS: You said that there are mechanisms within the parties to take up those grievances. A key issue that is being challenged at the moment in Canberra is that there are no mechanisms in the Liberal Party if people are being bullied, in particular women.

Ms TANYA DAVIES: Again, we are before this Committee to discuss the Government's policy and the portfolio responsibilities that I have as Minister for Women. That is the line of questioning you are going down. To that point, we have recently released the NSW Women's Strategy to target economic opportunity and advancement for women in New South Wales.

The Hon. COURTNEY HOUSSOS: We will get to the women's strategy later. I am asking you about bullying in the Liberal Party. You are the Liberal Minister for Women and I am asking what you think about bullying within the Liberal Party?

Ms TANYA DAVIES: Again, my role as a Minister of the Government is to advance the status and the cause of women right across New South Wales through government policy and expenditure. That is what my firm commitment is. To that end, we have recently released a women's strategy which is the first whole-of-government strategy to support women's economic advancement and opportunity.

The Hon. COURTNEY HOUSSOS: Minister, we will get to the women's strategy later. I am asking you do you think there is a problem with bullying in the Liberal Party?

The Hon. BRONNIE TAYLOR: Point of order: As the Minister has clearly stated, we are here to discuss the remit of her portfolio. The member keeps asking the same question a different way. The Minister has succinctly answered the question and I suggest the member moves on.

The Hon. PENNY SHARPE: To the point of order: Bullying of women, no matter where they are in New South Wales, is definitely within the remit of this Minister. She can try not to answer the question but I believe that the question is definitely in order.

The Hon. BRONNIE TAYLOR: To the point of order: The Minister has clearly answered the question.

The Hon. PENNY SHARPE: No, she has not.

The Hon. BRONNIE TAYLOR: Yes, she has. The Minister clearly stated that she is speaking within the remit of this Committee today.

The Hon. PENNY SHARPE: Bullying is within the remit of this Committee today, whether it is happening here in Parliament House or anywhere across New South Wales.

The Hon. Dr PETER PHELPS: To the point of order: Is it bullying when the Whip comes and informs you that you have to vote in a certain way on a certain issue or else you lose your preselection?

The Hon. PENNY SHARPE: There is no point of order there, Chair.

The Hon. Dr PETER PHELPS: It is an interesting hypothetical though. Is it bullying when you sign a pledge to join a particular party—

The Hon. PENNY SHARPE: If you want to take up our time—

The Hon. Dr PETER PHELPS: —which says that you must vote in a particular way—

The Hon. PENNY SHARPE: If you want to take up our time about an irrelevancy it is up to you, Dr Phelps.

The Hon. Dr PETER PHELPS: —irrespective of your conscience? Is that bullying?

The Hon. PENNY SHARPE: Chair, I ask you to ask the Hon. Dr Peter Phelps to cease.

The Hon. Dr PETER PHELPS: Your party institutionalises bullying through the pledge.

The CHAIR: Does anyone else want to make a contribution?

The Hon. PENNY SHARPE: No, but I would like Ms Houssos to keep asking her questions.

The CHAIR: I must rule first. We are here to ask questions of the Minister in respect of her portfolio responsibilities. The question does deal with bullying and it needs to relate specifically to her portfolio. The member may continue to ask her questions, but the Minister can answer as she sees fit. The member can prosecute her questions as long as she likes.

The Hon. COURTNEY HOUSSOS: Thank you, Mr Chair. Minister, a number of Federal Liberal women are speaking out about bullying in the Liberal Party. Concerns have been expressed about the influence of the New South Wales Liberal Party in Canberra. Are you concerned about bullying within the New South Wales Liberal Party?

Ms TANYA DAVIES: My concern relates to bullying wherever it may occur. Bullying is a matter that needs to be dealt with appropriately and accordingly no matter where it occurs, whether it is in Parliament, the workplace or in the schoolyard. In my role as Minister for Women, I am championing a cause to empower women across New South Wales, largely articulated through our NSW Women's Strategy 2018-2022. Further matters in relation to the Liberal Party are for the party to address.

The Hon. COURTNEY HOUSSOS: So you do not see any role for yourself as the Liberal Minister for Women in addressing these bullying allegations?

Ms TANYA DAVIES: My role as Minister for Women is to support and to focus on the interests of the women of New South Wales, including the young women. Women still face significant challenges within our communities. They include gender equality in many areas and the high prevalence of their being victims of domestic violence and sexual assault, older women having significantly less superannuation, the growing cohort of older women at risk of homelessness-

The Hon. COURTNEY HOUSSOS: I look forward to hearing what your Government is doing about all of those things later in the hearing.

Ms TANYA DAVIES: I look forward to you asking me a question.

The Hon. COURTNEY HOUSSOS: However, I am asking you whether you agree with the comment Julie Bishop made overnight that there is a question about workplace culture. Do you think there is an inappropriate workplace culture?

Ms TANYA DAVIES: Again, thank you for the question. I again state that my role as Minister for Women is to support the more than 3.9 million women in this State.

The Hon. PENNY SHARPE: Can we clarify this? Allegations of bullying have been made within your political party. Given that a lot of it has come out of the New South Wales Liberal Party, have you taken no action or given no thought to this perhaps being a problem in this workplace? Have you done nothing as a result of the allegations being made in Canberra because you do not believe there is an issue here in New South Wales?

Ms TANYA DAVIES: I explained in my answer to Ms Houssos that whether bullying occurs in Parliament, in the workplace, in the schoolyard or in the community, it is a concern and it must be addressed.

The Hon. COURTNEY HOUSSOS: So what have you done?

Ms TANYA DAVIES: Matters within the Liberal Party are matters of internal operations and they should be dealt with by the party.

The Hon. COURTNEY HOUSSOS: What have you done about these allegations of bullying within the Liberal Party?

Ms TANYA DAVIES: I will not canvass what I have done personally about that. These are matters for the Liberal Party to determine.

The Hon. PENNY SHARPE: Have you done anything? Have you taken some action?

Ms TANYA DAVIES: Indeed, in terms of my role as Minister for Women, I am standing up and speaking up on behalf of the 3.9 million in New South Wales and progressing policies, a budget and a whole-of-government approach to support—

The Hon. PENNY SHARPE: I am talking about this specific allegation. Are you saying that you have taken some action to address this matter?

Ms TANYA DAVIES: Again, this particular matter relates to the Liberal Party and it is its responsibility to investigate. I again urge every member who may be listening to the hearing and every member of the community who may read the transcript to work on behalf of all of our communities to stamp out bullying. It is unacceptable wherever it may occur.

The Hon. COURTNEY HOUSSOS: Federal Liberal Minister Kelly O'Dwyer has said that she is deeply concerned about these things and that she will be taking action. Will you be doing anything to provide a grievance process for Liberal Party members of Parliament or Liberal Party women if they have similar issues?

The Hon. Dr PETER PHELPS: Point of order: This goes directly to the internal operations of the Liberal Party and its internal dispute mechanisms. The member might not be aware that an internal disputes panel has been established within the party. I can confirm that it does exist and that it operates quite effectively. The member is now moving into territory relating to the internal operations of the Liberal Party, which is clearly outside the Minister's portfolio area, and there is already a disputes mechanism.

The Hon. COURTNEY HOUSSOS: To the point of order: The Minister said that she sees it as her role to stamp out discrimination against women wherever it occurs. I am asking whether it is occurring in her own party here in New South Wales.

The Hon. Dr PETER PHELPS: Why do you not ask her if she has ever been bullied or felt discriminated against in her own party? Why do you not ask her that direct question?

The Hon. COURTNEY HOUSSOS: If you wanted some Government time you could have asked for it.

The CHAIR: Order!

The Hon. Dr PETER PHELPS: I know Tanya Davies, and no-one bullies her.

The CHAIR: Order! That last question specifically went to the internal machinations within the Liberal Party. It is clear that that is getting towards the boundary of the remit of this hearing. The member can ask the question again, but I think the Minister has given her answer.

The Hon. COURTNEY HOUSSOS: The #MeToo movement has been a significant global phenomenon that has allowed many women to share their experiences of sexual harassment or assault for the first time. Would you agree?

Ms TANYA DAVIES: Certainly. It has opened the door for many women to relate their personal experiences.

The Hon. COURTNEY HOUSSOS: Given the global support for the #MeToo movement, why is there no mention of sexual harassment or sexual assault in the NSW Women's Strategy 2018-2022 that you released last week?

Ms TANYA DAVIES: Thank you for asking me a question in relation to my portfolio. The women's strategy—

The Hon. COURTNEY HOUSSOS: Now let us hear you answer it.

Ms TANYA DAVIES: I now have a question and I am happy to answer it. The NSW Women's Strategy 2018-2022 that we released is a whole-of-government strategy. As you would also understand, the arrangement within the Cabinet is that there is another Minister with responsibilities in this area. Minister Pru Goward appeared at a budget estimates hearing yesterday. The work the Government is doing to support all women is spread across two portfolios and two Ministers. Minister Pru Goward has the primary lead in terms of the Government in addressing domestic violence and sexual assault.

In fact, it was this Government that established the first Minister to tackle sexual violence in this nation. We are leading in this area. However, the role that I play in terms of supporting women and young girls across the State is in the remit of economic advancement, opportunity, health and wellbeing, participation and empowerment. They are the key areas. Work on domestic and family violence, social housing and sexual assault are in the remit of Minister Pru Goward.

The Hon. COURTNEY HOUSSOS: So it is not within your role as the Minister for Women to address sexual harassment or assault?

Mr SCOT MacDONALD: Point of order: That question was asked directly of the Minister and she answered it directly. She could not have been any clearer. Mr Chair, I ask you to bring this line of question to a conclusion. The Minister has answered as she sees fit.

The Hon. PENNY SHARPE: We have 20 minutes. Members opposite have now interrupted three times.

The CHAIR: I was listening very carefully to the answer. I do not think the answer makes the following question illegitimate; I think it follows on. The member may proceed.

The Hon. COURTNEY HOUSSOS: Thank you, Mr Chair. Minister?

Ms TANYA DAVIES: Can you repeat the question?

The Hon. COURTNEY HOUSSOS: Are you saying that as the Minister for Women you have no role in the prevention of sexual harassment?

Ms TANYA DAVIES: I am saying that the Government sees the advancement and safety of women to be of such importance that there are two Ministers working in this space. Minister Goward has released three separate pieces of work—the Domestic and Family Violence Blueprint for Reform 2016-2021, the NSW Sexual Assault Strategy and NSW Homelessness Strategy 2018-2023—to support vulnerable women and to tackle domestic and family violence and sexual assault.

The Hon. COURTNEY HOUSSOS: I refer again to the #MeToo movement. It explicitly recognises that there is a connection between sexual harassment and the economic empowerment of women. Do you acknowledge that?

Ms TANYA DAVIES: What I acknowledge is that at the end of their working life a large cohort of women are significantly financially worse off than men.

The Hon. COURTNEY HOUSSOS: We can talk about women's superannuation later. I am asking you about the #MeToo movement and whether you acknowledge that sexual harassment in the workplace plays a role in stopping women's economic empowerment. Do you agree?

Ms TANYA DAVIES: I do not agree that there is a role for sexual harassment in the workplace. Absolutely not. What I acknowledge—

The Hon. COURTNEY HOUSSOS: So why does your women's strategy not address sexual harassment in the workplace?

Ms TANYA DAVIES: I have already explained that there are two Ministers in this space. The Government also released four specific documents dealing with this issue. It has also released the NSW Mentally

Healthy Workplaces Strategy 2018-2022, which is a \$55 million strategy to tackle mental wellness and health in the workplace. People who have experienced sexual harassment are experiencing advanced—

The Hon. COURTNEY HOUSSOS: Minister, I am going to stop you there. You said that this is a whole-of-government approach for women. One of the biggest movements globally for women has been the #MeToo movement, and you are saying that you are not addressing sexual harassment in your whole-of-government strategic approach. Is that correct?

Ms TANYA DAVIES: I am saying that the Government has two Ministers. We have released four—

The Hon. COURTNEY HOUSSOS: You are pushing it off to another Minister.

The Hon. BRONNIE TAYLOR: Point of order—

The Hon. COURTNEY HOUSSOS: This is supposed to be a whole-of-government approach.

The Hon. BRONNIE TAYLOR: We all know that when a question is asked the Minister needs to be given the opportunity and the respect to answer it and not to be constantly interjected over the top of with more and more questions when someone is getting an answer they do not like. I ask the Chair to call the member to order and allow the Minister to finish answering the questions when she has been asked them.

The CHAIR: I will not call the member to order. What I will say is that these proceedings best unfold when there is a question and an answer, and an exchange takes place. The Minister must be able to answer the question and then that can be followed by the next question.

Ms TANYA DAVIES: Again, this Government has two Ministers working to support women within New South Wales. There are now four—

The Hon. COURTNEY HOUSSOS: I do not dispute that, Minister. I am going to stop you there because I have very limited time. I have five minutes left. You said that you released a whole-of-government approach. It does not address sexual harassment and now you are pushing it off to another Minister.

Ms TANYA DAVIES: You seem to not actually be hearing my answer. My answer is that there are two Ministers. We have four whole-of-government documents. My particular Women's Strategy is targeted in the areas of economic advancement, health and wellbeing, and empowerment and participation. Minister Goward's documents are targeting domestic and family violence, and sexual assault.

The CHAIR: Minister, if this helps, the question is about sexual harassment in the workplace. That is the gist of the question and that is what is being directed to you. I do not think there is an answer coming back in that regard. I think that is why the exchange is going on. I do not know whether you have anything further to add, but that is what I understand the question is about.

Ms TANYA DAVIES: What I will add, though, is that the role of government is to empower women. That is my strategy. It has empowerment and economic opportunity as a key theme of one of the three themes.

The Hon. COURTNEY HOUSSOS: You do not see sexual harassment addressing—

Ms TANYA DAVIES: Mr Chair, can I please answer the question?

The Hon. COURTNEY HOUSSOS: Minister, I have 20 minutes to question you on the portfolio of women. Your government members have interrupted me five times now. That is why I am stopping you answering—

The Hon. BRONNIE TAYLOR: We would not interrupt you if you were doing the right thing.

The Hon. COURTNEY HOUSSOS: And now they are speaking over me as well.

The CHAIR: Yes.

The Hon. COURTNEY HOUSSOS: I want to ask you: Do you see sexual harassment as impeding women's economic participation.

The CHAIR: That is the question. So allow the Minister now to answer.

Ms TANYA DAVIES: Thank you, Mr Chair. I will go back to what I was trying to answer in the last question, because you cut me off from allowing me to finish my answer. The answer is that my key theme of the strategy is economic empowerment. We understand and we know that one of the key forms of violence and intimidation is financial control. That is why if we can empower women to enable them to be financially strong

and independent then they get a level of empowerment that they may not have had before. That is a significant key objective of the Women's Strategy.

The Hon. COURTNEY HOUSSOS: Why then in your year one action plan is the term "sexual harassment" not mentioned once?

Ms TANYA DAVIES: Because again I will say that we have four key documents working across government: a sexual assault strategy that Minister Goward has released, a \$380 million package to target sexual assault; we also have a domestic violence blueprint that she has released—

The Hon. COURTNEY HOUSSOS: I am not asking about sexual assault. I am not asking about domestic violence. I am asking about sexual harassment in the workplace. It is a key inhibitor to women's economic empowerment. You acknowledge in the initial document of your Women's Strategy that it is an inhibitor and that it disproportionately affects women. In your blueprint for year one it is not mentioned once.

Ms TANYA DAVIES: That is why the strategy we have released is a four-year whole-of-government strategy. The targets that we have set in the year one action plan are as you would have read. A key theme, however, is to empower women. We want to educate women, show them role models, indicate to them how they can economically advance themselves, empower them with knowledge, show them mentors, give them that mentorship capability—the networking that women right across New South Wales told us that they are needing. Those are the key flavours that have been woven through the Women's Strategy and the action plan.

The Hon. COURTNEY HOUSSOS: Minister, that does not answer my question, which is: How is your Government addressing sexual harassment for women in the workplace in year one? You acknowledge that it is a problem and you acknowledge that it is an inhibitor, and you are doing nothing to assist them.

Ms TANYA DAVIES: There are already ways and means for women to put forward their grievances in the workplace. The Secretary for Family and Community Services could explain, perhaps, what avenues are available in his department in the public service for women who feel that they have experienced sexual harassment. They are already in place and they are already available.

The Hon. COURTNEY HOUSSOS: That is fine. I am going to ask you one final question, which is: How many people have registered for the new flexible work jobs register?

Ms TANYA DAVIES: I would have to take that on notice. But flexibility is a key theme of this Government. We have a goal of ensuring that every government role by 2019 will be deemed flexible on the basis of, "If not then why not?" Because we recognise that flexibility is a key component to enable women to maintain their commitment to the workplace.

The Hon. COURTNEY HOUSSOS: You do not have to spruik the benefits of flexible work to me. I am there with you.

The Hon. Dr PETER PHELPS: You strongly endorse government policy.

The Hon. COURTNEY HOUSSOS: In fact the Government adopted my policy. I am waiting for you to adopt the final part of it. But I am interested in how many people and what initiatives you have in place. Your own document acknowledges that this will break down because of a lack of managerial understanding. How many people have signed up to the jobs register in your department and across the Government?

Ms TANYA DAVIES: For sure. As I said, in terms of the exact number we will take that on notice. I am not acutely aware.

The Hon. COURTNEY HOUSSOS: For your department and across the Government.

Ms TANYA DAVIES: Certainly—that is fine—but you also asked another question in relation to that in terms of what we are doing. We have set the Premier's Priority, which is a priority across all government by 2019, so that is coming up very quickly. All government roles will be deemed flexible on the basis of, "If not then why not?" The public sector commission is working with government in terms of upskilling our workforce, particularly managers. Many agency managers and department heads have signed an agreement that outlines six key themes that successful organisations employ in order to assist to change the culture, change the understanding and educate their wider community as to the benefits and the advantages of flexibility. It actually retains people in the workplace and it brings people back so it is a very positive goal and one that this Government is very proud to be championing.

- **Ms CATE FAEHRMANN:** Minister, it is estimated that half of all pregnancies in Australia are unplanned and that half of those are terminated. It is also estimated that between one-quarter and one-third of Australian women will experience an abortion in their lifetime. New South Wales and Queensland are the only States in Australia in which abortion remains a criminal offence. All other Australian jurisdictions have modernised their laws. Ours was written in 1900, 118 years ago. Have you had any briefings from your department about the impact of the criminalisation of abortion on women and their doctors?
- Ms TANYA DAVIES: As you would understand, based on your own statistics, the ability for women to procure an abortion is freely available in New South Wales. There is case law that sets the guidelines for how a woman can receive an abortion if that is her choice, and there are a number of women who take up that choice.
- **Ms CATE FAEHRMANN:** What is stopping a woman from being prosecuted under section 82 of the Crimes Act?
- Ms TANYA DAVIES: As I said, there are provisions for enabling a woman to procure an abortion. That is with the involvement of the medical profession. As you would understand, a doctor needs to be involved in that decision. There are a number of classifications in terms of ensuring that a woman understands exactly the course of action she is taking and that on balance it is posing a risk to her in her health and, with the doctor's concurrence, that is undertaken.
- **Ms** CATE FAEHRMANN: Technically what is stopping a doctor from being prosecuted under section 83 of the Crimes Act for administering an abortion?
- **Ms TANYA DAVIES:** As you would understand, the Crimes Act is in place, but there is also case law that gives the boundaries, the explanation and the guidance. That is what is enabling significant numbers of women to take that choice for themselves, and very few prosecutions. Prosecutions occur when people have broken those guidelines.
- **Ms** CATE FAEHRMANN: It is very confusing, though, is it not? You have been talking about 3.9 million women, I think, within New South Wales. The abortion laws in New South Wales are very confusing for them because technically it is criminalised.
- **Ms TANYA DAVIES:** I do not understand that because you have quoted the fact that hundreds of women each day are securing abortions.
- **Ms CATE FAEHRMANN:** So why do you think we still have that in the Crimes Act? Why is it still a criminal offence technically?
- **Ms TANYA DAVIES:** Again, in terms of the availability of services for women, if that is what they choose it is there for them. That is what the health system provides. In terms of the details around the Crimes Act, that is a matter for the Attorney General and those matters need to be raised with him.
- **Ms CATE FAEHRMANN:** I think one of the strands that you are responsible for in your women's strategy is economic independence but of course there is also health and wellbeing. Do you see a role for you as Minister to ensure that the laws are not as confusing as they are currently? Women do think that it is a crime in New South Wales to procure an abortion.
- **Ms TANYA DAVIES:** Again, I come back to your own statistics. There are significant numbers of women every day procuring an abortion, so it seems to be operating satisfactorily.
- **Ms CATE FAEHRMANN:** But, unlike the other States, it is not an abortion on demand. They have to show that their mental health is at risk, their physical health is at risk.
- **Ms TANYA DAVIES:** There is an evaluation of that, yes, but in terms of the ability of a woman to procure an abortion, that is available to women in New South Wales if they choose that.
 - Ms CATE FAEHRMANN: Surgical abortion is a rebatable procedure under Medicare. Is that right?
 - Ms TANYA DAVIES: I might refer to the Health secretary for that information.
 - Ms KOFF: I will take that on notice.
- **Ms** CATE FAEHRMANN: It is. Some women can claim some of the costs of abortion under Medicare, yet here within New South Wales it remains a criminal offence—basically in a code, I think, written in 1900 by men who are not alive now. It is all a bit ridiculous, isn't it, Minister?

Ms TANYA DAVIES: Again, I come back to your own statistics that demonstrate that women every day are procuring abortions and that that is occurring—

Ms CATE FAEHRMANN: Considering they are procuring abortions every day, why are we not in New South Wales making the law facilitate that and decriminalising abortion?

Ms TANYA DAVIES: The Crimes Act is a matter for the Attorney General.

Ms CATE FAEHRMANN: You are the Minister for Women. You have responsibilities for 3.9 million women and you said you are looking at strategies in relation to their health and wellbeing. Surely one of the key issues affecting women in New South Wales is that abortion remains a criminal offence in a code written in 1900.

Ms TANYA DAVIES: We have more recent case law that sets the parameters for this medical procedure. That is why it is important to have the involvement of the medical profession. It is a medical procedure.

Ms CATE FAEHRMANN: With respect to the health and wellbeing part of your strategy, will you be looking into ways in which you can make it less confusing for women in New South Wales who are seeking to terminate their pregnancies? It is a very confusing situation because technically it is a criminal offence. You are quoting case law but I do not think the average 18-year-old who finds herself pregnant will be able to readily access that case law to understand. The first thing you see is that it is technically a criminal offence in this State.

Ms TANYA DAVIES: Again, I come back to your own statistics which show that there are significant numbers of women who are procuring abortions. So it is functioning; it is working. To your question about the strategy, as you said, one of the key themes of the strategy is health and wellbeing. While the strategy is a whole-of-Government four-year commitment, we have annual action plans that delve into more detailed, specific activities, programs and targets. One of the benefits of having annual action plans is that as we progress in Government and—

Ms CATE FAEHRMANN: Thank you, Minister. That is fine. I needed to ask specifically about abortion, not general action plans.

Ms TANYA DAVIES: I was framing my answer—

Ms CATE FAEHRMANN: I am just trying to get to my next question. In relation to violence against women and gender equality, violence against women starts with gender inequality. I think Minister Pru Goward acknowledged that yesterday. As the Minister for Women, will you look at ensuring that the New South Wales Government introduces legislation to ensure that government departments, the public sector and local governments achieve gender equality through quotas, action plans and reporting?

Ms TANYA DAVIES: I am really glad that you asked me about gender equality. It is an extremely significant issue within our community. We know that there are many vulnerable groups within our communities and many vulnerable groups are often made up of women. Within the ability of our Government to lead in this area, our own Government has set a gender equality target for women in senior leadership to be 50 per cent by 2025. Unfortunately, under Labor it was a target of 35 per cent. So our Government is committed to genuine equality for women in senior leadership roles.

The Hon. Dr PETER PHELPS: Hear, hear!

Ms TANYA DAVIES: Thank you. We have set in place a strategic framework in order to progressively work towards achieving that. We have not only the Premier's Priority, which is stated as being such, but we have also a mechanism involving the Public Service Commission. We also have training and education being delivered to our senior managers around how to look for, facilitate and mentor women up into leadership roles and also deliver training in terms of the unconscious bias that may occur when women are putting themselves forward for jobs as well as to help people put themselves forward for jobs. So we are taking gender equality in this one particular example very seriously but it also goes across a number of other areas of government.

Ms CATE FAEHRMANN: What role do you see yourself as having as the Minister for Women when it comes to driving a cultural change in sexist behaviour in New South Wales?

Ms TANYA DAVIES: Can you just clarify in terms of sexist roles? What do you mean?

Ms CATE FAEHRMANN: A cultural change throughout the whole of New South Wales society. What role do you as the Minister for Women see yourself having in terms of driving that cultural change to change sexist behaviour in New South Wales?

Ms TANYA DAVIES: Not in the Government but in the State of New South Wales?

Ms CATE FAEHRMANN: Generally.

Ms TANYA DAVIES: One of the powers of the New South Wales Government is its ability to lead and to influence. The New South Wales Government employs 10 per cent of the working population in New South Wales. With the goals that we set and the level of expectation in terms of measurement of targets and training, the Government can be an incredibly strong leader in this area. We have set ourselves a number of targets to elevate the status of women within government. In doing so, we are setting an example. We are leading. The reality is that there is a significant amount of heavy lifting that must be done by the private sector as well as not-for-profit organisations, schools and the whole community.

We are leading by influence. One of the key things that I am particularly passionate about is ensuring that young women have role models and mentors that they can see either through visual social media or through the provision of workshops so that they can see how women can take themselves from being in a position of disadvantage or vulnerability and transform their lives. That role modelling is one of the key passions that I have to ensure that we are bringing cultural change at the youngest level we possibly can.

The CHAIR: Thank you, Minister.

The Hon. PAUL GREEN: Minister, given the general consensus that women tend to live longer than men and that taking time off from paid work to have a baby or to care for someone or working part time can impact their superannuation, what is your department doing to solve the gender gap in terms of its impact on superannuation?

Ms TANYA DAVIES: The gender pay gap, yes, it is a very real concern. Again, in relation to Ms Faehrmann's earlier comment about gender equality, the New South Wales Government can lead substantially in terms of influencing and addressing the gender pay gap. I am pleased to advise the Committee that the gender pay gap within the New South Wales government is now 0.3 per cent, which is a significant advancement. The trajectory is advancing towards where it ought to be, which is zero. Unfortunately, the gender pay gap in the latest data indicates that across New South Wales it is still at 14.3 per cent. It is still unacceptably high and women are, unfortunately, severely impacted in terms of that gender gap. There are a number of strategies that the New South Wales Government is implementing to address that. I think it is important that we look at it in two tranches. The first one is in relation to older women who are at that particular phase of their lives right now. We cannot go back and adjust their careers or their lives to change what it is.

So what we are doing now is we have a substantial amount of government support, programs and assistance to help women when they are older in life to lead healthy, safe and active lives. You may have asked Minister Pru Goward, Minister for Social Housing, questions around the Social and Affordable Housing Fund, but tranche two of that is actually asking the community to come to government with innovative ideas to assist older women who are facing homelessness. That is one particular avenue of government that we are taking. We are also providing increased support for women through the discounts and the savings available through our Seniors Card program.

The Hon. PAUL GREEN: I will ask about that shortly.

Ms TANYA DAVIES: Okay.

The Hon. PAUL GREEN: This is more specific to suit the impact on superannuation. Is your department doing anything to solve the gender gap and its impact on superannuation?

Ms TANYA DAVIES: That was my first tranche. I will go to the second one, which is about young women, those who are commencing their career. We do know that there is still a large number of industries that are dominated by male employees. They tend to be in the engineering, science, construction, mathematical and law areas, and in the trades and apprenticeships. The Government is working hard to encourage women to consider pursuing careers in the science, technology, engineering, mathematics fields, as well as taking up apprenticeships and traineeships. I was pleased to see the recent data released on apprenticeships and traineeships—on Monday this week actually—and those that measure the uptake of apprenticeships and traineeships show a 5 per cent growth in the number of women who are taking up apprenticeships and traineeships.

The Hon. BRONNIE TAYLOR: Exciting.

Ms TANYA DAVIES: As a department we have doubled the funding of our Investing in Women grant to now \$400,000. Those grants are targeted at programs assisting women and young girls to consider science, technology, engineering and mathematics [STEM], helping women to remain in construction fields of work, supporting and mentoring them in a range of areas around entrepreneurship and personal businesses.

The Hon. PAUL GREEN: I want to come back to the Seniors Card comment. I am sure the Minister would be aware that there is an increasing number of older Australians who are working longer before retiring. Many of those work in low-paid jobs such as retail, charitable organisations and even those who work in the church. The Seniors Card obviously provides great support for seniors to help them stay active in meeting their everyday living costs. However, it is only for those working fewer than 20 hours a week. Have you considered reviewing the eligibility for the Seniors Card to allow those working full time but on low incomes to access this card?

Ms TANYA DAVIES: That is a really good question. We do have an ageing population. The projections are for the last 10 years that our ageing population is going to increase now to 16.3 per cent. As a government we are taking that very seriously. We know that older people want to continue to engage as much as they can within our communities and the value that they provide to our communities in being healthy, active and socially connected is incredibly important because it goes a long way to keeping them healthy as well as mentally healthy. We have been looking closely at, how as a government, we can support our older population.

In relation to the Seniors Card, I do not know whether you saw—I will give them a plug—channel 7 news last night. They did a story again announcing even further businesses and deals available to our Seniors Card membership. In terms of the eligibility, I have asked my department to conduct some work looking at the status of the eligibility criteria around the New South Wales Seniors Card and compared that with other States and Territories across Australia. I have recently looked at some data that the department has prepared. There is a lot of variation in how different States provide the eligibility for their Seniors Card.

The Hon. PAUL GREEN: Is ours the most generous?

Ms TANYA DAVIES: It is up there.

The CHAIR: How old are you, Deputy Chair? Perhaps you should declare an interest? I think you are hitting a threshold.

The Hon. PAUL GREEN: I am far from being a senior, Mr Chair.

Ms TANYA DAVIES: You are nowhere near that. You look very young.

The Hon. PAUL GREEN: Thank you, Minister.

Ms TANYA DAVIES: In terms of the eligibility, it is something that we are looking at more closely, knowing that there are different regimes operating across the State. Of course I want to make sure that at any given time the New South Wales Government is delivering the most we can possibly deliver to support our ageing population.

The Hon. PAUL GREEN: The point for me is that there are a lot of seniors contributing to volunteer work and we need not make a rod for their back, but ensure we help them deal with their costs of living to assist them to continue the wonderful volunteering that they do?

Ms TANYA DAVIES: Indeed.

The Hon. PAUL GREEN: Minister, how does your department ensure women have adequate information and training tools to recognise slavery, human trafficking and labour exploitation?

Ms TANYA DAVIES: To that particular subject matter I commend you on your work for the Modern Slavery Bill. I know that you spent a considerable amount of time working that through and getting it passed through the Parliament.

The Hon. PAUL GREEN: Thank you.

Ms TANYA DAVIES: I want to congratulate you on that, but as to the specific work that the department is doing, could I please take that on notice and get back to you?

The Hon. PAUL GREEN: Yes. Minister, it is well documented that women often carry out primary responsibility for the unpaid work of household tasks and caregiving throughout the world. The invisibility and low social value of this work means that women who are primary caregivers are described invariably in public, clinical and domestic discourses as "not working" or having given up work. How does your department try to address the stigma and name "unpaid work" and recognise the impact of occupational fatigue where the home is the workplace?

Ms TANYA DAVIES: Great question. Speaking from personal experience as a mother—

The Hon. PAUL GREEN: I would like to, but I do not do the primary duties; my lovely wife does and she carries a big burden with six children and a husband, whom she calls her seventh child.

Ms TANYA DAVIES: A very big burden. As a working mother of two young children, an 11-year-old and a nearly two-year-old—they are beautiful children—it is a juggle. Let us be frank about it: It is tough for all families. Whether you have a mum and dad, partners or whether you are a single parent, it is tough and that is why the New South Wales Government is doing what we can to support our families. I think one of the key themes where we are showing support and ensuring that our government roles will be deemed flexible by the end of 2019 is on the basis of "If not then why not?" because we recognise that women predominantly provide the vast majority of caring and housework but we also recognise that men play a key role.

Often, if you are looking at raising a family and working, there are other layers of complexity to that, including taking on additional study to advance a professional career but also caring responsibilities. We have an ageing population so caring responsibilities for parents or grandparents are also increasing, so as a government we want to ensure that we are providing an environment that supports people to balance their work and their personal lives.

The Hon. PENNY SHARPE: I will be asking questions about mental health. Following the review of the seclusion restraint and observation of people in NSW Health done by Dr Wright there was a commitment that all mental inpatient services would have 24/7 onsite supervision. Has that been delivered?

Ms TANYA DAVIES: Thank you for raising that. It is a really important piece of work because as Minister for Mental Health I am absolutely wanting to ensure that the quality and the environments whereby our very vulnerable mental inpatients are cared for are the best they possibly can be.

The Hon. PENNY SHARPE: That is terrific, Minister. Does every health facility now have 24/7 onsite supervision?

Ms TANYA DAVIES: I know that of the 19 recommendations, I can confirm that two of them have been delivered. In relation to that particular one, I will get clarification from the secretary.

Ms KOFF: And I will refer it to Dr Wright.

Dr WRIGHT: The Ministry has developed an implementation plan for all of the recommendations arising from the review and that plan obviously includes addressing that particular recommendation.

The Hon. PENNY SHARPE: You are aware that originally it was committed that it would be done by June of this year?

Dr WRIGHT: I am aware of that, yes.

The Hon. PENNY SHARPE: Are you saying to me that it has not been implemented? How many of the health facilities have 24/7 supervision?

Dr WRIGHT: To give you an accurate answer to how many are doing that as of today I would have to take the question on notice.

The Hon. PENNY SHARPE: Can you take that on notice and can you also tell me what the time frame is for fulfilling that commitment? It is a very serious commitment. I understand that there has been additional funding for 1,370 staff—doctors, nurses and allied health professionals. How many of the 1,370 are mental health staff?

Ms TANYA DAVIES: Are you asking in relation to this current budget's additional staffing target?

The Hon. PENNY SHARPE: It is clear that you are not meeting your commitment for 24/7 supervision across the mental health facilities and—

Ms TANYA DAVIES: No, we have to get back to you to confirm if that is the case or not.

The Hon. PENNY SHARPE: It sounds to me from what Dr Wright said that it is not yet in place in every facility. I want to know how much funding you are providing for additional staff and for mental health staff?

Ms TANYA DAVIES: The mental health budget this year is \$2.1 billion dollars—the biggest budget we have seen in mental health.

The Hon. PENNY SHARPE: Most of that goes to the non-government sector. I am very aware of that. My question is: Within your own facilities, how many extra mental staff will be put on? You can take it on notice if you do not know.

Ms TANYA DAVIES: What I will say is that I reject your statement that most of it goes to community mental health. I do not support that. In terms of the component of that that goes to staffing, I will refer to the secretary.

Ms KOFF: I cannot confirm the exact number that went to the workforce and the enhancement but the budget increase for the year was significant for the whole of Health, of which, as the Minister mentioned, \$2.1 billion went to mental health. As of June 2018, we have a medical workforce of 890 full-time equivalents, a nursing workforce of 5,150 full-time equivalents, an allied health workforce of 1,660 full-time equivalents and an other areas of mental health workforce of 1,700 full-time equivalents. It is a large proportion of our workforce that provides important healthcare delivery in the mental health area.

The Hon. PENNY SHARPE: To avoid placing mental health patients into seclusion or being restrained, have you hired additional security guards?

Ms TANYA DAVIES: No, because, as Dr Wright's report indicated, the number one goal from the 19 recommendations of the report was that a change of culture and leadership was critical to ensure that the level of aggression and seclusion and restraint was decreasing. He also highlighted in his report that the need to train mental health staff in de-escalation techniques was also a key thing.

The Hon. PENNY SHARPE: That is terrific Minister, but I am asking about the number of security staff. You are saying that there are no additional security staff being hired within the government mental health facilities?

Ms TANYA DAVIES: We will take that particular question on security staff on notice, but if you need security staff to manage mental health inpatient units it is going in the wrong direction. There needs to be therapeutic, trauma-informed models of care, which we are delivering the training for.

The Hon. PENNY SHARPE: I am very pleased to hear you say that. Can you confirm that the security guards that are on staff are not being increasingly asked to monitor patients because you are trying to avoid restraints and seclusions and there are not enough clinical staff on the roster?

Ms TANYA DAVIES: The rate of seclusion and restraint under this Government is decreasing. We have set a further decrease target of 25 per cent from the last year's target, as built into the service-level agreements [SLAs] between the local heath districts [LHDs] and the Ministry of Health.

The Hon. PENNY SHARPE: That is terrific but I am actually asking about how you are managing bodies on the ground and the very unwell people in our facilities. Can you confirm that they are not being cared for by security guards? Security guards do a terrific job but they are not clinical staff and I want to understand whether they are being asked to do more supervision, rather than clinical staff, because, as you just admitted, you do not have 24/7 supervision in place as yet?

Ms TANYA DAVIES: We will confirm with you whether we have achieved that. It may very well be the case. What I am saying to you is that the rates of seclusion under this Government are decreasing. Under Labor they were increasing. What we are implementing in terms of the workforce—our numbers, our staffing and the training—is working to achieve our goal, which is less seclusion.

The Hon. PENNY SHARPE: I do not think you have answered my question but I am going to move on. Could you take on notice whether there has been an increase in the number of security guards and whether there has been a change in some of the activities that they have been asked to undertake because of the lack of clinical staff? Having said that, you have now said that there are reducing rates of seclusion and restraint, which is good news. Will you provide that information publicly and regularly so that we can understand that better?

Ms TANYA DAVIES: What are you asking to be provided?

The Hon. PENNY SHARPE: Whether you are going to provide the information on restraints and seclusion publicly?

Ms TANYA DAVIES: They are. That is how you can see that under this Government they are decreasing and under Labor they were increasing.

The Hon. PENNY SHARPE: Minister, if you want to go back eight years you can do that; I am asking what is happening now. You have just admitted that you have not fulfilled your basic commitment, which was 24/7 supervision of people in mental health facilities. That is fine. What is happening to children under the age of 18? How many have been restrained and how many have been placed in seclusion since the report was delivered?

Ms TANYA DAVIES: I will check with the secretary to see if there is data readily available. Training our staff on therapeutic models of care actually decreases—

The Hon. PENNY SHARPE: Minister, that is not my question. You cannot take up all my time by reading what would be dixers. If you wanted to do that you could have got the Government members to ask you questions. These are very specific questions. I want to know how many people under 18 with mental health issues in our facilities are being placed in seclusion or are being restrained? You should be able to provide that information and if you cannot perhaps Ms Koff or Dr Wright can.

Ms TANYA DAVIES: We will take it on notice but the rate is decreasing, which is very good news.

The Hon. PENNY SHARPE: I am glad it is decreasing, but will you take that on notice?

Ms TANYA DAVIES: The particular data you were asking for, yes.

The Hon. PENNY SHARPE: Terrific. According to a Productivity Commission report from 2018, the number of direct care staff in specialised mental health services in New South Wales is the lowest in Australia. Do you have plans to address that gap?

Ms TANYA DAVIES: Can you explain what you mean by "number of direct care staff"? Are you talking about mental health nurses?

The Hon. PENNY SHARPE: Correct. I am talking about the way it is reported within the Productivity Commission Report on Government Services 2018. The words that the report uses are "direct care staff in specialised mental health services". New South Wales had the lowest number across Australia.

Ms TANYA DAVIES: I will take the question about comments in that particular report on notice. But our focus is on supporting people in the community. Evidence shows that when you support someone with a mental illness in the community they do better and live a healthier life. Admission into a mental health unit is a last resort. While we are supporting our mental health units in terms of investment and ensuring that staff are adequately trained, we also have significantly more investment in our community mental health services.

The Hon. PENNY SHARPE: The Productivity Commission report showed that the percentage of people being discharged from community care who have significantly improved has decreased between the years of 2011-12 and 2015-16, which was when the data was measured, while the number of those being discharged with significant deterioration has increased. Why are we discharging more people whose mental health has deteriorated?

Ms TANYA DAVIES: The decision to discharge an individual from care is a clinical-based decision and is, more often than not, done in collaboration with family and carers and the person themselves. If there are concerns around the clinical decisions that have been made there are avenues for those clinical decisions to be reviewed.

The Hon. PENNY SHARPE: But are you not concerned that basically people are being discharged when they are not ready and when their situation has deteriorated?

Ms TANYA DAVIES: What I can confirm with you is that, within the health service level agreements between the LHDs and networks and the Government, the level of community follow-up is closely monitored in those contracts and there are set targets.

The Hon. PENNY SHARPE: Is that improving? Are those targets being met? Are you able to provide that information to the Committee?

Ms TANYA DAVIES: We have set a target of 70 per cent follow-up. It cannot be 100 per cent because we know that some people choose to go to private psychiatrists or they move interstate or they do not want to re-engage with the health system. We have set a target of approximately 70 per cent and that is being closely monitored.

The Hon. PENNY SHARPE: Will you report to the Committee whether that target is being met across the providers?

Ms TANYA DAVIES: I can confirm the seven-day follow-up rate of our Community Mental Health Services went from 47.6 per cent in 2010-11 up to 73.7 per cent.

The Hon. PENNY SHARPE: That is very good, except people are in worse shape according to the Productivity Commission. How are you dealing with that issue?

Ms TANYA DAVIES: Again, the decision to discharge is a clinical decision. Perhaps—

The Hon. PENNY SHARPE: Minister, are you aware of the Productivity Commission report?

Ms TANYA DAVIES: I am familiar with it. The Hon. PENNY SHARPE: Have you read it?

Ms TANYA DAVIES: Not every page but I am familiar with the summary.

The Hon. PENNY SHARPE: What action have you taken to address the very significant issues that are raised in this report?

Ms TANYA DAVIES: I think the important response is that as a government we are significantly increasing the contribution to our community mental health system. In this budget we have increased the contribution to purchased activity in the community by 4.3 per cent compared to—

The Hon. PENNY SHARPE: But you are not specifically addressing the very important issue that it is all well and fine to be discharging but if they are in a worse state than when they came in and they are being discharged you are not doing anything to address that, as was raised by the Productivity Commission.

Ms TANYA DAVIES: Yes, we are doing a significant amount in terms of the direction of our investment. As I said, 4.3 per cent purchased activity in the community compared to 0.4 per cent purchased activity in acute and subacute. We are also providing community supports in our Housing and Accommodation Support Initiative [HASI] funding, that is, around \$48 million to provide housing and increased support for people with very serious mental illness. Over 1,100 people are supported under that model of care.

The Hon. PENNY SHARPE: Let us cut to the chase. I have a very specific and very distressing example and I will be careful in the way I talk about it. I am aware of a young boy who was admitted to a hospital outside of Sydney recently with issues relating to depression and anxiety. He was there for five days. The boy decided that he wanted to go to school for the morning, which he did. When he returned his belongings were packed up and he was told to leave, against the advice of the social worker. That child is no longer with us. What are you doing to monitor particularly vulnerable young people when they leave your facilities?

Ms TANYA DAVIES: That is a very tragic story that you have conveyed and I do want to extend my condolences to that family. We want to ensure that the mental health system that is being delivered across New South Wales is the very best that we can possibly deliver. There are a whole range of activities that we are delivering to achieve that goal, not only the record budget but we also-

The Hon. PENNY SHARPE: Minister, who makes the decision about whether a child is going to be discharged? I am particularly interested in cases where a social worker has said that they should not be discharged. Who makes the final decision? Perhaps one of your public servants can respond.

Ms TANYA DAVIES: As I mentioned, it is a clinical decision, so I might refer to the secretary.

Ms KOFF: Who will refer to Dr Murray Wright.

Dr WRIGHT: I am unable, obviously, to talk about a specific case.

The Hon. PENNY SHARPE: Yes, and I am not asking you to do that.

Dr WRIGHT: I appreciate that. I will talk in generalities. Any time that there is a tragic incident like this there is a very detailed and very thorough internal investigation by the health service using a root cause analysis. In a case like this, a substantial amount of care has occurred within a health system and they also may use external expertise to get the best understanding of where things might have gone wrong. Again, that would also involve collaboration with a police investigation and/or coronial investigation. We take absolutely seriously the importance of trying to understand if and where our services might have been able to do better in some of these cases but you cannot pre-empt what that might have been. On the question of decisions about discharge, it is one of the most critical decisions that we make. I would argue that the more critical decision is the decision to admit, and both of those decisions ought to be done with a lot of careful consideration and consultation. We do promote multidisciplinary care and we promote multidisciplinary decision-making. Decisions aboutThe Hon. PENNY SHARPE: Are they team decisions?

Dr WRIGHT: They ought to be team based.

The Hon. PENNY SHARPE: Who makes the final call?

Dr WRIGHT: I think there is an admitting consultant if someone is an inpatient and it is the ultimate responsibility of the consultant.

The Hon. PENNY SHARPE: If there is a disagreement amongst the team, does the admitting consultant make the final call?

Dr WRIGHT: You would hope that there would be a process of trying to resolve any conflict within the team. In some of our services they have actual processes to resolve disagreements around not just admission and discharge decisions but also decisions about leave.

The Hon. PENNY SHARPE: I will go back to your review, Dr Wright, and the commitment around recruiting and training new peer workers. My understanding is that these peer worker roles were supposed to be in place by July 2018. Are they?

Ms TANYA DAVIES: The role of peer workers is incredibly important to the rehabilitation of our mental health inpatient units and we—

The Hon. PENNY SHARPE: Yes, that is why I am asking about them. I have a very specific question.

Ms TANYA DAVIES: I will check with Dr Wright in terms of an update on that particular matter. This Government is committing to recruiting additional peer workers across the services.

The Hon. PENNY SHARPE: Yes, you committed to have them in place by July 2018. How many do you have?

Ms TANYA DAVIES: I will check with the Secretary of Health or Dr Wright.

Ms KOFF: I cannot give you those numbers.

The Hon. PENNY SHARPE: You can take it on notice if you need to.

Ms KOFF: I will take it on notice.

Dr WRIGHT: Can I just frame the response. There is a key additional comment in the report that says that we would prefer that the process of properly training and supporting those peer workers be in place before we actually do the recruitment. It was an observation of the review team that in some places the peer workers did not necessarily have the adequate preparation for the roles they were expected to do. That is why we have commentary around a requirement for certificate IV training whilst also having professionalised job descriptions, supervision, performance reviews.

The Hon. PENNY SHARPE: Are there any in place, Dr Wright?

Dr WRIGHT: Are there any peer workers? Yes, there are.

The Hon. PENNY SHARPE: New peer workers.

Dr WRIGHT: Again, I cannot give you an up-to-date answer to that. We would have to take that on notice.

The Hon. PENNY SHARPE: Action 3.1 of the review talks about restructuring senior executive structures to integrate directors of mental health. Has that occurred?

Ms TANYA DAVIES: My understanding is that the secretary has written to all chief executives and advised them of that requirement. Do you have an update on that, Ms Koff?

Ms KOFF: Yes, it was discussed at the senior executive forum last Friday. From my recollection—and I will take the exact numbers on notice—all districts had complied bar three, and we were pursuing the reasons why the three had not.

The Hon. PENNY SHARPE: A quick follow-up please, Mr Chair.

The CHAIR: Very quickly.

The Hon. PENNY SHARPE: Is it ultimately up to the districts themselves to decide whether they will do that? You cannot direct them to do them to do that?

Ms KOFF: No, we have made a directive quite explicit in correspondence, carbon copied to the board chairs, that it was a requirement from the review that the mental health director of the district must comply with.

The Hon. PENNY SHARPE: Which three have not complied?

Ms KOFF: I will take that on notice. I cannot remember.

The Hon. PENNY SHARPE: Thank you.

Ms DAWN WALKER: Between 2012 and 2015 four teenage boys from a local north coast high school took their lives. As someone who is part of that community, I can tell you that it was a terrible shock and it continues to be a shock for the community. The community is still finding ways to deal with those deaths. We know from evidence given at the recent parliamentary inquiry into youth suicide prevention that young men between 15 and 24 years of age are the highest proportion of youth suicides. While we are waiting for recommendations from that inquiry, I am interested in what measures are being taken in high schools to prevent that sort of tragic loss.

Ms TANYA DAVIES: Yes. Every suicide is an absolute tragedy and I am very sorry to hear that it has reached even you personally. I think it has a significant impact across communities and evidence says oftentimes it can be up to 40 people around that one person who are directly impacted by that suicide. So we are taking the role of addressing suicide in our community very seriously. It is a core function of health services that they are operating in every way and means possible to address suicide in our community.

In terms of schools, I briefly mention to you that we have increased the funding of our School-Link coordinators that are operating within schools. They perform a role whereby they work with the teachers and the principal of the school to help them identify students at risk. They also then provide the supports to the school and the student to direct them to support networks as appropriate. We also are funding 60 child and adolescent mental health service providers who are working across primary schools in terms of our Getting On Track In Time program, or Got It!, which is an early intervention behavioural identification program. That is working with the school, the child, but more importantly with the family around that child. Again, it is early intervention.

We also are rolling out a Project Air Strategy for schools. Project Air Strategy is a different way of treating people with personality disorders. We know that people with personality disorders do not receive a response to their condition by traditional methods of treating mental illness, such as drugs et cetera. They require a different approach. Recognising that is the case and that there is a significant number of our population, young people, who are affected by personality disorders, we are supporting Professor Brin Grenyer to roll out the Project Air Strategy for schools, which is an investment in our schools and in our workforce at schools to assist, again, teachers and principals to be able to recognise the signs and empower them to know where they can provide supports.

Ms DAWN WALKER: Some of the evidence given at the inquiry by the chief executive officer of suicide programs suggested that there are still significant gaps in youth suicide prevention. One of those was in the schools again, where they find that it is more likely that a young person would tell a friend rather than an adult. Have you looked at any programs to assist other students deal with that relationship with a young person who is in need?

Ms TANYA DAVIES: What the Government is working on at the moment is in collaboration with the Ministry of Health and the Mental Health Commission of NSW to develop the strategic framework for suicide prevention for New South Wales. That framework has been a piece of work that has been underway all this year and it is working with the various stakeholders in mental health within our communities as well as those voices specifically focusing on preventing suicide. The framework is very close to being completed and what that will do is establish—we have identified six key principles of a framework that once implemented will go a significant way to tackling the scourge of suicide.

The framework is also going to enable local communities such as your community to be able to customise those key principles to suit the particular requirements of that local community. It has been done in such a way so that the essential elements of what will be a strategic framework to prevent suicide—it will be done in such a way that the unique qualities of our communities can be reflected in their response to suicide. We know that within perhaps the Sydney metropolitan area there is a higher prevalence of lesbian, gay, bisexual, transgender, questioning and intersex people. We also know that those individuals have a higher prevalence of depression,

anxiety and suicide. So the framework that will apply to that community will look very different to the framework that may be applied in our far west regions, our farmers, where drought is affecting.

Ms DAWN WALKER: We know that there is a strong association between unemployment and youth suicide, particularly in young males, and we know that we have a youth unemployment crisis at the moment, particularly in regional areas. For example, in the Shoalhaven area youth unemployment is at around 29 per cent. Is the Government putting extra resources into those areas with high rates of youth unemployment?

Ms TANYA DAVIES: Can I also add to your previous question that we are working with the Department of Education to roll out YAM, which is Youth Aware of Mental Health. That is working with the Black Dog Institute and a various number of trial sites. In fact, it is an internationally acclaimed program that is part of the LifeSpan trial sites. So that is further information for your previous question. In relation to youth unemployment, again the targets around that for my role and my portfolio is around assisting, particularly as the Minister for Women, young girls to support them to continue their education also into areas that are traditionally male-dominated. We want to encourage them and show them role models that they can take up these occupations, apprenticeships and traineeships but also show them role models of how they can do it.

I also know that a lot of work is being done by the Government at large in terms of our \$84 billion infrastructure pipeline which is providing significant opportunity for people to gain employment. In fact, youth unemployment in Western Sydney has decreased under this Government. We also are supporting our young people into apprenticeships and traineeships through the finances to them—there are free apprenticeships available. So across portfolios or government, we are working really hard wherever we can to encourage young people to get their foot in the door in terms of a job and a career.

Ms DAWN WALKER: Are you liaising with, say, the Assistant Minister for Skills specifically on mental health issues?

Ms TANYA DAVIES: Yes, we did work together in relation to—we have co-funded the Start Talking initiative by the Gidget Foundation: a \$270,000 commitment that was funded from my portfolio and his portfolio.

The Hon. BRONNIE TAYLOR: Hear, hear! I love that foundation.

Ms TANYA DAVIES: So do I. It is a program that provides telehealth functionality to reach into the regions for women who have just had a new baby and may be experiencing perinatal depression or anxiety. Where it is appropriate, of course, Ministers will work together to either develop our programs or to fund programs. Another example of cross-portfolio work is the work that I have done with Minister Kean in the Mentally Healthy Workplaces initiative. So that is a cross-portfolio initiative as well.

Ms DAWN WALKER: You mentioned the drought. Obviously, along with all the other issues that it raises suicide is one of them, tragically. What steps is your department taking to ensure that drought-affected families have access to mental health support? More particularly, are you coordinating with the Minister for Regional Water to ensure that farming families are receiving mental health support?

Ms TANYA DAVIES: Yes. The Minister for Primary Industries is the main leader for Government in terms of being the coordination point for all the various agencies and departments who are funnelling resources. At this point in time, the New South Wales Government has funded a \$1 billion additional commitment to support our drought-affected areas. What I announced on Father's Day was the mental health component of our response to the drought-affected areas of our communities: a \$6.3 million boost to mental health support services. I think it is important to understand that already the Government is funding the Centre for Rural and Remote Mental Health. That is already in place; it is already being funded. That also leads to what we call RAMHP workers: Rural Adversity Mental Health Program workers.

There are 14 of those particularly targeted mental health workers already working across our regions. The funding that I announced was boosting that by an additional five workers as well as then providing additional supports in terms of farm gate counsellors. There are people who will go to the farm, they will go to the family. Whether it is at the farm gate or whether it is at the kitchen table, they will talk to them and provide that counselling service. The coordinators that we are boosting are there to provide workshops in the community to break down the stigma of mental health to encourage farmers, who are incredibly resilient individuals, to be honest and open about where they are at so that help can be given to them. That was our recent announcement.

The Hon. Dr PETER PHELPS: Has the department done any modelling in terms of mental health issues? Has it done any modelling on the effectiveness of special religious education in allaying mental health issues in youth and assisting them?

Ms TANYA DAVIES: That is a very targeted question. I would have to take that on notice.

The Hon. PAUL GREEN: I am sure it is. If you would like to take it on notice, that would be great.

Ms TANYA DAVIES: Yes.

The Hon. PAUL GREEN: Minister, the population of New South Wales is ageing rapidly, with regional areas seeing the biggest growth in our older people. It is predicted but that by 2021 there will be more people over the age of 65 living outside Sydney than people under the age of 16. What initiatives do you have in place to ensure the provision of appropriate care and support for older people living in rural, regional and remote areas?

Ms TANYA DAVIES: In terms of mental health support, under our Government we have boosted the mental health budget into our regions significantly. In terms of the exact number, it is a substantial component of the mental health budget which is purely diverted to our rural and our regional areas. Again, I would like to spend some time talking about the Seniors Card. Again, that is a program that is designed to support our older population to encourage them to be active outdoors, healthy and physically connected with the community. We now have more than 8,000 available opportunities to save money, to encourage people to get involved.

We also are targeting older people's mental health, so in the recent budget we announced Australia's biggest single mental health infrastructure program, which is a \$700 million program. As part of that, we identified the need to provide specialised mental health services for older people as well as for children, adolescents, and mums and bubs. We are also committing more than \$7.7 million in community mental healthcare support under our reform program. That will fund 46 full-time equivalent clinical positions, which are delivering significant increased client care contacts.

The Hon. PAUL GREEN: Minister, in terms of mental health of older people and particularly grandparents—who are one of the largest groups providing kin care to children, providing up to 75 per cent of all kin care in New South Wales—do you provide benefits or services specifically to these grandparents so they can continue to assist their children and their grandchildren? Have you got any programs going or anything that you fund them with?

Ms TANYA DAVIES: Grandparents play an incredibly powerful role in our communities directly to families, but also have wider volunteers across the community space. Where would working mums and dads be without their parents helping out from time to time?

The Hon. PAUL GREEN: That is right.

Ms TANYA DAVIES: This Government recognises the ageing population, and that is why our Government, when we were first elected, accepted and adopted Grandparents Day, which is the last Sunday of every October, and would be celebrating Grandparents Day, because we recognise and we want to reflect and encourage communities to celebrate the contribution that grandparents make to our communities. When I became Minister for Ageing last year, one of my passions was to continue to break down the intergenerational divide which often is still occurring between young people and older people and the ageist attitudes that are at play. As part of Grandparents Day, I asked the department if they would also run a concurrent grandparent competition in photography, whereby a young person would take a photograph of a significant older person in their life. That started just last year and it is also rolling out this year. In terms of additional further specific programs, I might refer to the secretary to provide further information.

Mr COUTTS-TROTTER: I am more than happy to provide details of where grandparents formally have parental responsibility for children or are formally relative or kin carers, there are a range of supports. We work quite hard with our colleagues in the Commonwealth to try and get the Commonwealth to better explain in simpler language the supports that are available from the Commonwealth social support system because they are complex and we get a lot of feedback that people do not know what supports are available to them. We have been asking for the Commonwealth to set up dedicated channels for relative and kin carers and particularly grandparents in that role to help navigate that system.

The Hon. PAUL GREEN: Yes, because they are the ones I am talking about. I am not talking about the grandparents that just become secondary babysitters for their grandchildren by their children workers.

Mr COUTTS-TROTTER: Yes, full-time workers.

The Hon. PAUL GREEN: I am talking about the ones that never thought they were going to be parenting again and next minute they find that they are parenting their grandchildren, and the services that they need. We need to make sure we are supporting them, especially on the back of—we talk about women over

55 having not a lot of resources. A lot of them are picking up the slack of being parents to their grandchildren. I would like some information on that.

Mr COUTTS-TROTTER: Yes.

The Hon. PAUL GREEN: Minister, we were talking yesterday to one of the other portfolios, but do you provide any services in terms of mental health and wellbeing for the 12,000 Iraqi and Syrian refugees that have gone out to Fairfield and Liverpool? Do you deliver any services out there?

Ms TANYA DAVIES: Absolutely. It was a wonderful moment when the former Premier announced that the New South Wales Government agreed to take a substantial number of those refugees. I was out at the STARTTS organisation—the Service for the Treatment and Rehabilitation of Torture and Trauma Survivors—at Fairfield. I was there to announce the commitment of the Government to provide specialised supports for those individuals. It is awful to think that you have to leave everything that you have ever known and go to a foreign land. We made a commitment of \$8 million over four years in 2016-17 to support the important work of the STARTTS organisation, which is part of a \$32 million investment in health services to cater for that intake of humanitarian refugees. When I was at that facility last year, I announced an additional \$4.8 million in recurrent support for mental health psychosocial support targeted at refugees.

The Hon. PAUL GREEN: These aged-care beds in hospitals. Minister, could you advise the Committee as to whether there is a mental health staff to patient ratio, and how do you aim to improve staffing numbers in mental health units across New South Wales?

Ms TANYA DAVIES: The ratio that the New South Wales Government uses is the nursing hours per patient bed day formula, and the role of determining whether a particular number of staff are at work on a particular given day is at the leadership and the responsibility and the accountability of the local health district. The benefit of the nursing hours to patient day formula is that they are able to provide flexibility in the number of staff and the staffing mix that they deliver on their rosters, measured to the acuity level of the patients that are there at any given time. That is why that formula we use is so important, because it gives the flexibility to ensure that we can provide additional staff where they are needed. Perhaps the secretary for health may be able to add something further.

The Hon. PAUL GREEN: I have not got long, so I just want to add one—

The CHAIR: Forty-six seconds.

The Hon. PAUL GREEN: Forty-six seconds, and I want to get this in. **The Hon. Dr PETER PHELPS:** But they will be a quality 46 seconds.

The Hon. PAUL GREEN: It will be a powerful 30 seconds.

The Hon. PENNY SHARPE: You have just wasted 25.

The Hon. PAUL GREEN: This is very important if everyone will let me finish. I have still got time. Minister, would you agree that better ratios save lives?

Ms TANYA DAVIES: What I would agree is that the current formula for placing nursing staff on roster takes into account the needs of the patients and the acuity level of the patient, which enables the flexibility to ensure the nursing staff—

The Hon. PAUL GREEN: I am not talking about caseload. I am talking better ratios save lives.

Ms TANYA DAVIES: Again, I reiterate that the current formula for putting patients in and supporting them with the staff meets the needs of the patient, the acuity levels, and the volumes of patients that fluctuate from time to time.

The Hon. COURTNEY HOUSSOS: Minister, how many calls were made to the Elder Abuse Helpline & Resource Unit in 2017-2018?

Ms TANYA DAVIES: I will get the number for you, but there were more than 2,000. I know that from when we commenced that service there have been 10,020 calls to the Elder Abuse Helpline & Resource Unit. The exact number is 2.971.

The Hon. COURTNEY HOUSSOS: That is a significant increase on 2016-2017, which you said at last year's budget estimates was 2,120.

Ms TANYA DAVIES: Correct.

The Hon. COURTNEY HOUSSOS: What is the forecast number of calls for 2018-2019?

Ms TANYA DAVIES: We do not do forecasting. The increase that you have seen would no doubt be as a result of the extensive amount of education and training the Elder Abuse Helpline & Resource Centre staff are conducting right across New South Wales in terms of educating frontline workers about what is elder abuse and the signs and symptoms, and then how to report that.

The Hon. COURTNEY HOUSSOS: I stop you there, Minister, because I have limited time. You are telling me that you do no forecasting for the preparation of the budget. How do you formulate a budget if you do not forecast the numbers?

Ms TANYA DAVIES: We have committed to a three-year funding agreement for the Elder Abuse Helpline & Resource Unit, which is just under \$700,000 per annum. In addition to that we are supporting a trial of the case coordination role. That was a recommendation from the Committee's view of the elder abuse situation in New South Wales. That trial is—

The Hon. COURTNEY HOUSSOS: I will get to that in a moment. You were saying the funding is \$690,000 per year. That is an increase of almost a third on last year. Is there any additional funding?

Ms TANYA DAVIES: As I said, the contracts have been established and it was rolled over for a three-year contract. I might ask the secretary to comment on the calculation component.

Mr COUTTS-TROTTER: Simply that we actively manage it. We have expectations of service and response times, and if demand meant that those service and response times were significantly degraded, then we would look again at resourcing levels.

The Hon. COURTNEY HOUSSOS: Minister, is there a specific time of the year where there are spikes in the number of calls?

Ms TANYA DAVIES: The Elder Abuse Helpline & Resource Unit publish data.

Mr COUTTS-TROTTER: There is a dashboard, but I am not sure that the dashboard goes to that level of detail, Minister, but I am happy to take it on notice.

Ms TANYA DAVIES: They do publish data, but whether it is that level of data, we will take it on notice and get back to you.

The Hon. COURTNEY HOUSSOS: Do you have procedures in place if there are spikes at particular times of the year? How does the Elder Abuse Helpline & Resource Unit manage during a busy period?

Ms TANYA DAVIES: There is a provision for a message to be left and the call centre staff when available take that message and call the person back.

The Hon. COURTNEY HOUSSOS: How many messages were left last year?

Ms TANYA DAVIES: I would have to take that on notice.

The Hon. COURTNEY HOUSSOS: Can you then tell me what the response time was to that? How many messages were left and how long on average did it take to get back to people?

Ms TANYA DAVIES: The standard is that they return the call by the next business day.

The Hon. COURTNEY HOUSSOS: I want to know what percentage of the time that was met?

Ms TANYA DAVIES: We will take that on notice.

The Hon. COURTNEY HOUSSOS: Does the helpline have any provision for extra staff? They have a certain number of staff and if the call line is busy it goes to the message bank and that is it. Do they have any provision for additional staff?

Ms TANYA DAVIES: The Elder Abuse Helpline & Resource Unit was the very first visit that I took when I was newly appointed as Minister for Ageing—

The Hon. COURTNEY HOUSSOS: You told us that last year, Minister. I want to know: Do they have provision for extra staff?

Ms TANYA DAVIES: During that visit I asked the department if they would find a mechanism to provide additional mental health and emotional support to the staff. I know that there is provision when there is increasing need that we would always go back and have a look at what is occurring to ensure that the level of standard we are providing to our community is the highest. As the secretary has said, when the growth of calls is occurring, as it is, that is an opportunity for the Government to have a look at the resourcing requirements of that service.

The Hon. COURTNEY HOUSSOS: Have you made submissions to either the Cabinet or within government that you need more resources for the Elder Abuse Helpline & Resource Unit?

Ms TANYA DAVIES: There is a three-year contract in place. That contract is still underway. Again, if there were a significant—

The Hon. COURTNEY HOUSSOS: But there has been a significant increase in the number of calls over the past 12 months. It is an increase of one-third. It went from 2,120 calls in 2016-2017 to nearly 3,000 calls in 2017-2018. Do you not then say, as Minister for Ageing: We need to ensure that these response times are being met?

Ms TANYA DAVIES: Absolutely. With the data around that, I said earlier we would take that on notice and go back and find that data for you. I reiterate that the Elder Abuse Helpline & Resource Unit is not a crisis line. If anyone is at immediate risk of life or limb they need to call 000. They need to ring the emergency authorities. The resource centre and the helpline is established as an information source, a referral source under the recommendations from the upper House parliamentary inquiry. We are trialling a case—

The Hon. COURTNEY HOUSSOS: It was an excellent inquiry. It was the first parliamentary inquiry into elder abuse in the country. Minister, you are seeing the implementation of the report. You have said that is underway. There has been a dramatic increase in the number of calls. Did you not, as the Minister say, "We need to check whether the calls are being met and we need to see whether we need some more resources"? You did not take any of those steps?

Ms TANYA DAVIES: We have a contract in place.

The Hon. COURTNEY HOUSSOS: I heard you say that the contract was in place. I am asking you whether you sought any additional resources to allow the helpline to function?

Ms TANYA DAVIES: We have delivered additional resources in accordance with the upper House parliamentary inquiry. We as a government recognise the issue of elder abuse and that is why our government, the Liberal-Nationals Coalition, established the Elder Abuse Helpline & Resource Unit to begin with and we have funded additional capacity as a result of this Committee's recommendation, which is trialling the case manager coordination role.

The Hon. COURTNEY HOUSSOS: I come now to the issue of provision of case management, which was recommendation 6 from our upper House inquiry. Given the number of telephone calls being made to the Elder Abuse Hotline & Resource Unit, why do you still only have a pilot program in place for case management?

Ms TANYA DAVIES: Thank you for your Committee's report. We have a case trial underway. It is a trial. We have coordinated and completed case files on 10 particular cases and 15 are currently underway. It is also important to understand—

The Hon. COURTNEY HOUSSOS: I stop you there: 10 cases have been completed. Is that in the past 12 months?

Ms TANYA DAVIES: Since the trial commenced.

The Hon. COURTNEY HOUSSOS: When did the trial commence?

Ms TANYA DAVIES: March.

The Hon. COURTNEY HOUSSOS: It seems Ms Mulkerin knows the answer to that.

Ms MULKERIN: March 2018.

The Hon. COURTNEY HOUSSOS: Since March there have been 10 cases completed; 10 out of 2,971 have been case managed, is that right?

Ms TANYA DAVIES: Again, it is important you understand that the helpline is an information source. It is a referral source. It is not the place where people experiencing elder abuse necessarily go to, to have that

resolved, because that requires police, often times Health, involvement. That is why your report recommended the case coordination trial for those unique cases—

The Hon. COURTNEY HOUSSOS: No, Minister, I will stop you there. The recommendation is that the New South Wales Government expand the role of the New South Wales Elder Abuse Helpline & Resource Unit to include the provision of case management and coordination. There have been nearly 3,000 calls from people seeking information—that is a nice way of putting it—and 10 cases have been completed.

Ms TANYA DAVIES: With all due respect, I reject your assertion that "that is a nice way of putting it", to use your words. That is not the case. The helpline is not a crisis line. The helpline is designed as an information and referral source. They provide a lot of training to our frontline workers working with older people to help them understand what elder abuse is. After the Committee's recommendations were handed down we adopted that recommendation and we are funding \$150,000 into this trial. It is a case coordination role. In relation to that piece of work, there are also broader at work matters relating to elder abuse. Recently the Law Reform Commission of New South Wales review into the guardianship laws was tabled in Parliament. We are working through that with the Attorney General. That was a significant piece of work. There is also its broad national prevalence agenda, which is examining elder abuse, understanding it and the Government—

The Hon. COURTNEY HOUSSOS: This is clearly an emerging issue and a lot is happening at both the Federal and State levels. However, I am deeply concerned that only 10 cases have been managed when the upper House inquiry made an explicit recommendation, and you have just spent a significant part of your testimony saying how valuable it was. Why has more casework not been undertaken? Why has this been so slow?

Ms TANYA DAVIES: Again, as a government, we want to ensure that valuable taxpayer dollars are spent carefully and without duplication. While we are trialling this case management role there are concurrent inquiries and investigations underway into elder abuse both in New South Wales and nationally. We are implementing the recommendation with the case coordination trial. I reiterate to anyone who may be listening that the NSW Elder Abuse Helpline and Resource Unit is not a crisis telephone line. If people are in crisis—

The Hon. COURTNEY HOUSSOS: These are very vulnerable people who are seeking information and who require case management. That was recognised by the parliamentary inquiry. Your Government has also clearly recognised there is a role because you are doing a pilot program. However, you have completed only 10 cases in six months when 3,000 calls have been made.

Ms TANYA DAVIES: I reiterate that the calls are largely seeking information or direction for referral. These are not urgent and immediate cases that require coordination of government services either to mitigate or to resolve.

The Hon. COURTNEY HOUSSOS: I refer to the NSW Steering Committee for the Prevention of Elder Abuse. You can take this question on notice. Can you provide a copy of the terms of reference and the membership?

Ms TANYA DAVIES: Yes, I can.

The Hon. COURTNEY HOUSSOS: Has the committee met this year?

Ms TANYA DAVIES: Yes, it has.

The Hon. COURTNEY HOUSSOS: How many times has it met?

Ms TANYA DAVIES: It last met in August this year, and it meets quarterly. The first meeting was in July—

The Hon. COURTNEY HOUSSOS: Have any meetings this year failed to achieve a quorum?

Ms TANYA DAVIES: I will take that question on notice.

The Hon. COURTNEY HOUSSOS: What action resolutions arose from the July, August and November 2017 meetings?

Ms TANYA DAVIES: I will take that question on notice.

The Hon. COURTNEY HOUSSOS: Have you sought advice about how the Government can model best-practice women's superannuation strategies? I noted your answers to my colleague's earlier questions.

Ms TANYA DAVIES: Can you repeat the question?

The Hon. COURTNEY HOUSSOS: Have you sought advice on how the Government can model best practice to increase women's superannuation in the public sector?

Ms TANYA DAVIES: As you would appreciate, superannuation is largely controlled in the Federal sphere.

The Hon. COURTNEY HOUSSOS: I am worried about New South Wales government workers. Have you sought any advice about how you can implement best practice to increase women's superannuation in the New South Wales public sector?

Ms TANYA DAVIES: Again, that area requires a cross-portfolio approach. I am happy to take that question on notice. In terms of supporting women, we recognise that women need to be supported in their employment. Again, superannuation comes down to government contributions and voluntary contributions, and also the role that a person is performing.

The Hon. COURTNEY HOUSSOS: That is an excellent point and it leads into my next question. You have said that the Government is modelling best practice in flexible working arrangements, and I acknowledge that. However, I am interested in whether you will model best practice when it comes to addressing women's superannuation. As the Minister, have you investigated whether the New South Wales Government could pay superannuation to its workers who are taking parental leave?

Ms TANYA DAVIES: A number of options are available to the New South Wales Government. We have recently released the NSW Women's Strategy 2018-2022, a key component of which is economic empowerment.

The Hon. COURTNEY HOUSSOS: What specific measures in that strategy address women's superannuation?

Ms TANYA DAVIES: Again, we have 44 actions within that strategy. It is not an all-encompassing strategy; it cannot take on everything in year one. However, it will—

The Hon. COURTNEY HOUSSOS: You said it is a whole-of-government approach.

Ms TANYA DAVIES: But it is impossible for any government to tackle everything in its first year.

The Hon. COURTNEY HOUSSOS: It is not tackling much at all.

Ms TANYA DAVIES: I am looking forward to having further conversations with the Federal Minister for Women and my Cabinet colleagues, particularly the Treasurer and the Minister—

The Hon. COURTNEY HOUSSOS: So that is a no—you have not sought advice and you are not aware of other things that are being modelled. Some organisations are looking at paying junior staff an extra 1 per cent in superannuation and they are paying superannuation for staff taking parental leave and for part-time staff as if they were full-time workers. Have you investigated any of these options for implementation by the New South Wales Government?

Ms TANYA DAVIES: I raised a number of matters in a meeting I had with the then Federal Minister for Women. Again, I look forward to having further discussions about additional strategies the Government can investigate in terms of supporting women and their superannuation.

The Hon. COURTNEY HOUSSOS: But you have not sought any advice from your department about how you can do that?

Ms TANYA DAVIES: From the department, no. However, I am conducting my own research and having other discussions. We have the NSW Council for Women's Economic Opportunity, which meets with me regularly. Its role is to inform the Government, through me as the Minister for Women, about what we can do in terms of women's economic opportunity. We plan to talk with the council about superannuation—

The Hon. COURTNEY HOUSSOS: So you have sought advice on women's superannuation?

Ms TANYA DAVIES: As I said, the Council for Women's Economic Opportunity was—

The Hon. COURTNEY HOUSSOS: Yes or no?

Ms TANYA DAVIES: —formed to provide me with updated information—

The Hon. COURTNEY HOUSSOS: My time has expired.

Ms TANYA DAVIES: I look forward to raising that matter with the council.

The Hon. PAUL GREEN: Given the relatively high levels of post-traumatic stress disorder [PTSD] among war veterans, how much mental health funding has been allocated in this year's budget to deal with this specific issue?

Ms TANYA DAVIES: That is another cross-portfolio issue.

The Hon. PAUL GREEN: I understand that.

Ms TANYA DAVIES: The Minister for Veterans Affairs and the Minister for Health are responsible for this area. In June last year the Government announced an allocation of just over \$340 million to redevelop the Concord Repatriation General Hospital. A component of that announcement was the redevelopment of the Rusty Priest Centre for Rehabilitation and Aged Care and the first-of-its-kind National Centre for Veterans' Health Care. That is targeted not only at Australia's returned veterans but also New South Wales emergency services personnel and their families. There is also a funding arrangement between the New South Wales Government and the Federal Government in terms of veterans affairs issues.

The Hon. PAUL GREEN: We know that war veterans have huge mental health challenges on occasion. Will you be playing any part in the Invictus Games, and have you made any investment in the games from a mental health perspective given that it is such a great initiative?

Ms TANYA DAVIES: It is a fantastic initiative. I take this opportunity to encourage everyone to go to a game to cheer on one of the teams from the eight countries participating. The Federal Department of Veterans' Affairs has a role, as does the State Government, in terms of supporting emergency workers suffering PTSD. We have released expert guidelines for the diagnosis and treatment of PTSD that are designed to assist our emergency staff. We have also significantly funded support for our ambulance staff and their families dealing with PTSD.

The Hon. PAUL GREEN: It has been revealed that 54 per cent of homeless people suffer from a mental disorder. That figure is nearly three times the rate of mental health issues suffered by people who are not homeless. What funding has the Government allocated in this year's budget to treat mental health issues among the homeless?

Ms TANYA DAVIES: The homeless are a very vulnerable group in our community. The Government has allocated \$48 million to the Housing and Accommodation Support Initiative [HASI], which provides mental health support and other support to just over 1,100 people. This year's budget provides additional funding of \$1 million to provide support for a further nine individuals. It also funds HASI Plus facilities, which provide support for between 16 hours to 24 hours a day. We are talking about very unwell individuals in our community. We are also funding Community Living Supports which is a program that supports people to live in the community but with wraparound services.

Also approximately 900 of our HASI participants are provided with social housing as well as the other health and mental health support services. As NSW Health, we also provide three targeted programs to prevent people from moving into homelessness. Two of them are delivered by the St Vincent's specialty health network called Way2Home. There is also a very detailed coordinated exit planning from emergency departments which is provided to reduce the number of people who leave an emergency department and may fall into homelessness. The third program is a homelessness mental health program delivered by the Illawarra Shoalhaven local health district.

The Hon. PAUL GREEN: That is a good segue into my next question. I was recently at a roundtable with the Minister for Health. We heard there that the Shoalhaven hospital does not have a resident psychologist or psychiatrist—I am not sure which one. In that situation it seems the surgeons are playing a dual role: they are trying to deal with those mental health issues of their patients plus operate on them. Are you aware of that? Secondly, what actions do you think the Government should take to do something to put a permanent psychologist or psychiatrist in the area? Is there a lack of those professions so that we cannot get one for a region that services up to 300,000 people during peak tourist times?

Ms TANYA DAVIES: The challenge of getting our specialised mental health service delivery out into the rural and regional areas of New South Wales is an ongoing challenge. We are responding in a number of ways, the first of which is to increase the number of declared institutions that can provide that level of assistance. There are over 70 now that are operating across New South Wales. We are also providing access to specialised mental health services through the Telehealth technology system. Perhaps Dr Wright—

The Hon. PAUL GREEN: I would love a comment from Dr Wright.

Ms TANYA DAVIES: Can you see my hand? I am literally just about to refer to Dr Wright to speak about the Telehealth component.

The Hon. PAUL GREEN: I can and I can see him eager and ready to answer it.

Dr WRIGHT: Telehealth specifically is a technology which is incredibly valuable in addressing the geographical mal-distribution of specialist care. Most of what we do as a psychiatrist is interviewing and talking to people. You can actually do almost a complete assessment just using video technology. I have done it myself over many years. It is harder than talking to someone face to face but in trying to resolve issues such as the one you describe in the Shoalhaven, a specialist does not have to be in the same room—

The Hon. PAUL GREEN: But it is better if they are, for sure.

Dr WRIGHT: Of course it is.

The Hon. PAUL GREEN: The ability to assess someone's body image, their fidgeting, their anxiety all that you pick up far better if you are in a room and not via a television.

Dr WRIGHT: My experience, having done it over a number of years, is that it probably takes about 20 per cent to 30 per cent longer to do a proper assessment and it is much more tiring. There are other strategies that you can use such as talking to the staff who are there in the room with the consumer before and after to get additional information. So experienced clinicians can work around. I agree that being there in person is preferable and that is why we are also working to try to improve the engagement of the senior medical workforce in psychiatry across the State. There is a medical workforce plan under development. We have a number of strategies to try to improve the engagement of our psychiatrists within the public sector.

The Hon. PAUL GREEN: How healthy is it to have a major hospital without a major health portfolio such as a psychologist or a psychiatrist to see the patients pre-op or post-op?

Ms TANYA DAVIES: I can address that. As Dr Wright has said, it is more advantageous to have them face to face but we have to face the situation as it is.

The Hon. PAUL GREEN: I understand, but with all due respect we are in the twenty-first century. We are talking about 21/2 hours south of Sydney. We are not being Sydney-centric here. When are we going to see these health professionals decentralised into major hospitals throughout regional and rural New South Wales? With all due respect to you, because this is probably the first time you have heard of this, but it is not acceptable to leave major hospitals without a major health portfolio—psychologist, surgeon, orthopaedic, neurologist or whatever it is. You cannot go years on end without those major health portfolios having a specialist in the hospitals under the Medicare label. I am not talking under private because we know there are private practitioners doing different things. When you have a surgeon who has to play dual roles and in 20 minutes he could probably be ripping out someone's appendix—

The Hon. Dr PETER PHELPS: Hopefully not rip it out.

The Hon. BRONNIE TAYLOR: Surgically excise it.

The Hon. PAUL GREEN: I will rephrase it. When you have a surgeon doing keyhole surgery and removing the appendix in the same amount of time—

The Hon. Dr PETER PHELPS: What is your suggestion? You cannot conscript people. In fact, it is constitutionally barred.

The Hon. PAUL GREEN: Well, we are talking about conscripting immigrants and refugees into regional areas.

The CHAIR: We have had the question; let the Minister answer it.

The Hon. Dr PETER PHELPS: There are indications that a certain amount of money which just—

The Hon. PAUL GREEN: I acknowledge the point of order because the Hon. Dr Peter Phelps puts a—

The Hon. PENNY SHARPE: There was no point of order. It was an interruption.

The CHAIR: There is no point of order. It was an interruption.

The Hon. PAUL GREEN: I want to acknowledge it for a particular reason.

The CHAIR: You do not have to acknowledge it because it is on the record. Just ask the question and we can proceed.

The Hon. PAUL GREEN: Sorry, Minister.

Ms TANYA DAVIES: You are forgiven.

The Hon. PAUL GREEN: Thank you. That is a good place to start. My point is, what is the Government going to do? Shoalhaven cannot do without a psychiatrist or a psychologist, with all due respect for cyber psychologists. That is all well and good but it is much better to have one on the ground for the people of our area.

Ms TANYA DAVIES: I spent some time living in the country and it is a magnificent environment and place to grow up. There are incredible advantages to living outside of Sydney. Part of the role of government is to highlight those advantages. We are doing that in terms of trying to encourage more people to move to our regions to reduce the congestion in Sydney. To the Hon. Dr Peter Phelps's point, you cannot make people relocate, so what we are doing right now is working through a Mental Health Workforce Plan. We are looking at other strategies. We already have strategies to deliver the service—

The Hon. PAUL GREEN: With all due respect, there have been some successful GP programs that have been run in regional universities. We found that the GPs will stay local. Is there not an initiative where we can do that with psychologist and psychiatrist training?

Ms TANYA DAVIES: Again in terms of the strategies that we are doing right now, obviously there is the Mental Health Workforce Plan, but we are also running with a requirement that new psychiatrist graduates are required to have a rotation through the regions—

The Hon. PAUL GREEN: For a five-year period?

Ms TANYA DAVIES: No, three-month rotation. But again, at the end of the day we acknowledge there are significant challenges. In terms of your particular case, if I may just take that situation on notice and investigate that for you.

The Hon. PAUL GREEN: Feel free to, thank you. How much of your funding goes towards increasing support services for women with postnatal depression?

Ms TANYA DAVIES: It is a really important topic. There are a number of pieces of work already underway. We already fund the Specialist Perinatal and Infant Mental Health Services. We have had a boost of that funding which is providing up to 900 women with support in this space. I mentioned earlier the co-contribution between my portfolio and that of the Minister for Skills in terms of the funding for the Gidget Foundation, the Start Talking trial program which is a Telehealth program. Again it is Telehealth but it is a way that right now we can get mental health support to women in our regions who are facing perinatal distress and anxiety.

A component of Australia's largest mental health infrastructure program, \$700 million, which we announced in this budget, is to build New South Wales' first publicly funded mums and bubs unit whereby women who have newly become parents and have a serious psychotic episode and need inpatient hospital admission can do so and bring their baby with them. We are committed to delivering that and I have instructed my department to make that a priority in the rollout of that funding.

The Hon. PAUL GREEN: Thank you. Minister, I went to an Abortion Rethink meeting to do with a bill in the House. One of the testimonies was from an individual who was traumatised by her experience of choosing to have an abortion and that situation. Do you provide any funding to assist women dealing with the trauma of post termination? Are there any current statistics on the resources invested in women post termination, such as counselling and grief support?

Ms TANYA DAVIES: I am aware that under the portfolio of Minister Hazzard there is provision for post-termination counselling. The secretary may be able to provide further details around that.

Ms KOFF: No, not specifically the amount invested. As we discussed earlier, if there is a termination of pregnancy consistent with the guidance required there is full support in the medical facility where it occurs.

The Hon. PAUL GREEN: That was not the case in the testimony we heard. That is why I am asking. If you could take that on notice and get back to me that would be great. Minister, we have just finished a drug

rehabilitation inquiry. How much funding is allocated to refurbishing or renovating existing mental health facilities, especially in rural and regional areas?

Ms TANYA DAVIES: There are a couple of answers to that. The first is in relation to the review Dr Wright conducted into seclusion, restraint and observation.

The Hon. PAUL GREEN: Yes.

Ms TANYA DAVIES: When we announced our acceptance of all 19 recommendations we also announced that \$20 million would be immediately available to assist local health districts retrofit their inpatient facilities to provide more therapeutic environments in which mental health inpatients are treated.

The Hon. PAUL GREEN: Would regional, rural or remote areas get priority on that list?

Ms TANYA DAVIES: In terms of who is going to be successful in that available funding, there is a co-designed panel that has been brought together. So it is not just the Ministry of Health. There has also been the Mental Health Commission and official visitors on that program in order to assess the various applications that are coming through. If you want some information in terms of how they are going to be conducting the assessment, we are happy to take that on notice and get back to you.

Generally, in terms of investing in our mental health services, we have a record mental health budget, which goes towards the recurring staff costs but also investing in our mental health inpatient units. Also, in the general hospital budget it is a massive investment in infrastructure—I think it is \$8.8 billion over four years. A lot of the hospitals which we are rebuilding or building from scratch have a component of the mental health service provision built into them as well.

The CHAIR: Thank you, Minister and officers, for attending today's hearing. That is the end of the hearing for today. The Committee has resolved that answers to questions on notice—there have been some taken—will be returned within 21 days. The secretariat will contact you in relation to those questions on notice. On behalf of the Committee, I thank the Minister and the officers for the most important and very dedicated work that they do for some of the most vulnerable people in the State.

(The witnesses withdrew)

The Committee proceeded to deliberate.