

The Estimates Committee convened at 8 am.

**Mr CHAIR:** Good morning, everyone. I formally declare the hearing of the Estimates Committee of the Legislative Assembly re-opened. I extend a warm welcome to everyone.

I acknowledge that we gather this morning on the land of the Larrakia people and pay my respects to the elders past and present.

We have a COVID-19 safety plan. I assure the Health Department we are aware of that. It has been signed off by the Chief Health Officer. The plan includes room restrictions on the Litchfield, Elsey, Ormiston and Nitmiluk rooms. The Litchfield Room has a limit of 20 persons. There are 16 seats in here, which means there should be no more than four other people in the room at any one time. The plan also provides that only the staff of the agency currently before the committee will be on level 3. Staff from the next agency to appear before the committee can wait on level 4. I ask that agency staff leave promptly. There will be a short break between each agency or different ministerial area.

## MINISTER FYLES' PORTFOLIOS

### DEPARTMENT OF HEALTH

**Mr CHAIR:** Minister, good morning and welcome to the Estimates Committee. I invite you to make a brief opening statement. I will then call for questions relating to the statement. The committee will consider any whole-of-government budget and fiscal strategy-related questions before moving on to output-specific questions and finally non-output specific budget-related questions.

I will invite the shadow minister to ask their questions first followed by committee members. Finally, other participating members may ask questions. The committee has agreed that other members may join in on a line of questioning pursued by a shadow minister rather than waiting until the end of the shadow's questioning on the output.

Minister, do you wish to make an opening statement regarding the Department of Health?

**Ms FYLES:** Mr Chair, I do. I also inform the committee that although my voice is a little croaky and it may come and go, I have been COVID-19 tested and am negative. If you hear me not sounding so great, I feel fine but am COVID-free. I appreciate the efforts of the committee in acknowledging this year as an unusual year, with estimates in December. I know the efforts that have gone into the COVID-19 plans were not straightforward.

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**Mr CHAIR:** Minister, just a brief reminder to everyone that DLA officers have done a fabulous job to date. One of the officers injured himself—we will not name names but Mr Keith injured himself early in the piece so he is here under sufferance and doing a fabulous job.

They have reminded me to ask ministers, guests and members to turn on your microphone otherwise Mr and Mrs Hansard do not get the question or answer and we cannot backtrack. Please put your microphones on.

**Ms FYLES:** The NT Health officials with me today are Professor Catherine Stoddart, our Chief Executive; Mr David Braines-Mead, the Deputy Chief Executive, Finance Support Services; and Adjunct Professor Joanne Norton, Deputy Chief Executive, Health System Policy and Strategy.

We have just summed it up: 2020 has certainly challenged Territorians and been a challenge around the world. The Department of Health has shone through this. Over the past 11 months, the agency has worked tirelessly with our partner stakeholders to establish the legislative, administrative and clinical frameworks to enable a coordinated response to the pandemic and ensure the safety of all Territorians. COVID-19 has tested us, as an agency, in many ways. It tested our health and community service systems, preparedness for disaster and emergencies, ability to respond whilst continuing to provide an essential service and ability to work with other government agencies and private sector partners. Our personal resilience was pushed to the limit at times.

You just spoke about one of your staff members here today. It has been a personal challenge for many people within Health and I acknowledge that.

Throughout the year the NT Health provided border protection screening delivered mandatory quarantine activities and responded to public health needs. The Department of Health continued its focus on strategic policy development, governance and regulatory functions while prioritising the NT COVID-19 pandemic response under the Public health emergency which was declared in March.

The Department of Health and services function in an extremely complex environment, influenced strongly by the public health response that continues to demand strengthened hazard management and essential clinical service adjustments to ensure that all Territorians can maintain high levels of confidence in their health system.

The department and health services will undergo further changes in 2020–21 as the system adjusts to the new normal and the consequences of the ongoing risks of COVID-19, even as we see a vaccine rolled out. We saw the first vaccines issued overseas today.

I acknowledge the staff at all levels who have kept the health system going and worked collectively to keep the NT safe during these unprecedented times. The pressures from the pandemic are not over by any means and our staff remain ready to respond if required. NT Health, including the Department of Health and health services, continues to strengthen readiness through a strong focus on preparedness and response. Planning forms an essential role in pandemic management, which includes a range of key plans for activation during urban, remote and aged-care outbreaks.

Health services have created flexibility and responsiveness in service configuration across hospitals and primary and community care to assist with any future occurrence of COVID-19. The NT Health system has not only contributed to the Territory's response to COVID-19, but led and participated at a national level. Our broader health system contribution includes the establishment of the quarantine facility at Howard Springs, which provides a service for interstate and overseas workers under an NT Government quarantine program; and the newly established Centre for National Resilience that is enabling Australians overseas to be repatriated home after months from being separated from loved ones.

NT Health contributed to the national review of hotel quarantine where the NT was commended by the panel chair, Ms Jane Holton, for the systems and processes introduced across the Northern Territory. It is a credit worth noting that as a result of all involved in the systems and processes, along with the strong collaboration, we effectively managed the early crisis and have zero cases of community transmission to date.

Our clinicians and epidemiologists have participated in the national contact tracing and testing review in October, led by Dr Allan Finkel. The NT's contribution was focused on safe practices to support remote and vulnerable communities that have been protected throughout the pandemic.

Given there has been a need to prioritise this work to keep Territorians safe, I will highlight the consequences of COVID-19 impacting broadly on our health system. Elective surgery was suspended under a National Cabinet directive between April and June. This impacted on the availability of operating theatres in NT acute hospitals, with some patients experiencing longer than usual time frames for surgery. I assure the panel that there is increased focus on individual assessment across each clinical system to ensure that patients experience minimal delays to care.

Some primary healthcare services were also suspended during initial weeks, including oral health services; however, emergency care continued during the shutdown. A range of indirect support functions were placed on hold as staff were relocated to the emergency response. Relocation of vital human resources meant that acute services, the public health response and the quarantine requirements were adequately resourced. Staff identified as vulnerable were relocated away from the frontline roles and tasks and the coordination of staff was managed by a centralised system. As of the 25 November this system had over 570 registered participants.

Other impacts of COVID-19 responses include the effect on the mental health and wellbeing space. The social and economic stresses have caused disruption and distress for many Territorians. We have aligned our mental health services in response. We increased the link between hospital and community services and telehealth services were provided to remote communities during the biosecurity lockdown. We worked with the Commonwealth Government on the telehealth services and I thank them for their support.

We developed information material and messages to support people's wellbeing, including advice about phone support lines and web forums. We funded the new local initiative, TeamTALK run by TeamHEALTH, which is available every day between 11 am and 11 pm. It is too early to tell how the overall community

wellbeing has been impacted by COVID-19 but a secondary effect has been on the mental health need of our community.

In Budget 2020–21, the investment of \$1.87bn into the health budget for 2020–21 is a record investment for the health of Territorians. The budget delivers on our commitments to invest in communities, infrastructure and creates jobs. We are investing in things that Territorians rely on, including health and investing in the future. The NT Health budget is expected to increase in the coming months after the negotiation for a number of tied funding agreements are finalised, along with Commonwealth election commitments. These include \$25.7m for the Alice Springs Hospital ambulatory centre, \$30m for the new Royal Darwin Hospital adult mental health inpatient facility and \$3m for staff accommodation at Tennant Creek Hospital, just to note a few.

There are a number of key programs in NT Health that we will continue to deliver on, including the focus on children. Our investment in child health pays off in the long term. As a government we provided funding for the implementation of the maternal early childhood sustained home visiting program, or MECSH, as it is more commonly known. This is working in partnership with four Aboriginal community-controlled organisations: the provision of screening: the Healthy Under 5 Kids, partnering with families program in urban and remote primary healthcare centres in the Territory; the employment of four community hearing worker positions in the Department of Education and Families as First Teachers program; and a grant to Menzies School of Health Research for the Hearing for Learning program in 20 remote communities.

This government has led a number of initiatives and ground-breaking reforms on alcohol policies and will continue to implement the Riley review recommendations to create a safer, healthier community.

This budget continues the government's investment in youth alcohol and other drug treatment and care services across the NT, including \$2m for residential rehabilitation; \$1.5m for counselling, education information activities; and small grants programs to enhance youth alcohol drug rehabilitation for young people.

We established two specialist positions in Alice Springs with non-government organisations, to enhance the interventions using a trauma informed care model. We are supporting Miwatj to provide treatment and care options for clients and their families to reduce volatile substance misuse. We are using a community-based approach in collaboration with Health and Education agencies in East Arnhem. We will fund the Council for Aboriginal Alcohol Program Services for service enhancements to improve client wellbeing and safety.

This budget highlights that this government takes mental health seriously. We recently saw the release of the report from the Productivity Commission, which made a number of recommendations for priority actions across all levels of government. In this budget you will see action from our government on this area.

We have worked with the PHN to improve access to whole-of-life community mental health services through the adult mental health facility. We are trialling a co-responder model in Darwin for 000 mental health-related callouts working with Police and St John Ambulance. Earlier reports indicate excellent success from that program.

We will focus on partnerships with other providers and mental health services, including the Darwin Private Hospital mental health unit and the Veteran Wellbeing Centre, when operational. We will also establish alternative models to emergency department mental health presentations at Royal Darwin Hospital.

Our government is also committed to local decision-making and community control in Aboriginal communities. Budget 2020 continues to invest across the Top End and Central Australia and the Department of Health for pathways to a community-controlled program. This funding facilitates the services to implement a framework that supports Aboriginal community control in the planning, development and management of primary healthcare services.

We will continue to work with Mala'la Health Service Aboriginal Corporation, Red Lily Health Board and the Central Australian Aboriginal Congress to support the transition of primary healthcare services and programs in West Arnhem, Maningrida and Central Australia to community control. We passionately believe in this and will continue this work. It is highlighted in Budget 2020.

As of 1 July this year the primary healthcare services within the Darwin youth detention centre were transferred to Danila Dilba. We will continue to work with Territory Families and Congress in relation to the services in Alice Springs Youth Detention Centre transferring across.

In Budget 2020–21, the infrastructure program for Health is close to \$100m at \$97.9m, including money for repairs and maintenance, new capital works, minor works and capital grants. This will include a number of new projects, such as the Alice Springs multistorey car park, upgrades to the mental health inpatient unit at Royal Darwin Hospital and a number of multiyear projects across Gove District, Alice Springs and Tennant Creek hospitals.

The budget also highlights the Acacia system, which is the clinical information services. That will see over 4000 clinicians now accessing patient information in a single digital resource.

Territorians have been kept safe from Coronavirus, which remains a key priority.

I will conclude my comments there, as my voice is failing.

**Mr CHAIR:** I will highlight a few procedural points before we get started for the day. The agenda for consideration of output gives that order of the outputs to be considered. I remind the members to seek clarification from the minister at the beginning of a hearing if they are unsure of which output the matter falls under.

Importantly questions on notice are each given a number and repeated so its terms are clear. I will gently interrupt whenever a question is taken on notice to ensure this occurs. I may also interrupt when answers are given from the minister to clarify the question number it refers to. Questions on notice must be answered by 22 January 2021 and under the Assembly's resolution the committee is not able to accept any answers after this date.

Thank you, minister.

**Ms FYLES:** I have one point of clarification, Mr Chair. The Chief Health Officer is available and is here. As you can imagine he is extremely busy. He does not specifically have an output, but obviously the response to Coronavirus is the key part of this budget. If I could seek the committee's advice on when you may like him to appear. Of course, he will stay all day if that is what you need, but I thought I would ask that question so that we could perhaps let him get back to more important matters.

**Mr CHAIR:** Thank you minister, one moment.

**Mrs LAMBLEY:** I have some questions about COVID and the charges that modelling, or the way in which people are charged to quarantine. I am not sure if that needs to go to the Chief Health Officer?

**Room discussion** microphones off.

**Mrs LAMBLEY:** Even when I am asking a question?

**Room discussion** microphones off.

**Mr CHAIR:** I just wonder whether we get all those questions done in the first half an hour to an hour, then let the CHO go?

**Mrs LAMBLEY:** Does the CHO decide how much people are charged? If he does, you might need him to answer some questions.

**Mr CHAIR:** Members, I think it is resolved that the Chief Health Officer will be required for some questions. I suggest that we proceed to ask questions of the Chief Health Officer prior to 9 am to allow him to go and do the really good work that he is doing. If everyone is in agreeance with that, we will proceed and, with the indulgence of the shadow minister, the Member for Araluen may have questions. We may break the line of questioning during the first 45 minutes of the day. Are we happy with that? Thank you, let us proceed.

Are there any questions relating to this statement?

**Mr YAN:** Thank you, minister, for your address. I thank all the public servants here today and all who have done the phenomenal amount of work that sits behind estimates. I know what is required to put together the estimates brief for a department, so I thank them as well. I would also like to thank the health staff for the work they have done this year on COVID. The work done by our health professionals and health team has been phenomenal; it is a great service to all Territorians.

Also, I take the opportunity to thank the CEO of Health, Professor Stoddart. I learned yesterday that you are leaving us. I would like to thank you for your four years of service to the Territory and Territorians. You will be sorely missed by us in the Territory so thank you for your service.

Yesterday it was reported on radio that Central Australian Health Service, the Department of Health and Top End Health Service would be merged. I have not heard anything of this officially from the Department of Health. Can you confirm this, minister?

**Ms FYLES:** NT Health plans to integrate the services and reform work is being undertaken. I guess the disruption of COVID has shown us the opportunity to do things differently and to make sure we provide services in the regions. Through COVID we saw a wonderful opportunity where clinicians thought outside the box.

We were not able to have interstate clinicians come in to support us at points in time. We sought innovation from within Health. That got us thinking. The Department of Health has started a body of work—we have engaged support to do that—where health services will be integrated so we have a far more integrated model. Expertise based in Central Australia will come to the Top End and provide those services and expertise from the Top End will go to Nhulunbuy. This is part of keeping people in their communities, closer to home receiving care.

**Mr YAN:** I suppose COVID has certainly highlighted the way we can do business better in the Territory through health and across government. I would think that having people who are experts in their area or specifically living in their regions would be best placed to be making decisions rather than centralising and merging some of those services into the Top End.

**Ms FYLES:** It is not a centralisation; it is having an integrated medical service. We have seen the opportunity to embed regional leadership within a system-wide governance and decision-making framework. We have clear lines of accountability and can have collaboration within our services. We have clinicians who want to go into the regions and those who want to live in the regions and come to the centres and be involved. This is an opportunity. The integrated health service would deliver stronger regional and clinical leadership to allow for that innovation.

We have seen telehealth—in a positive way, COVID jumped us ahead years, because we were forced and challenged to deliver health services in a different way. When we had biosecurity measures in place, we were not able to access clinicians from other places. It forced us to challenge our thinking. We want quality and safety at the centre of that system. We want clear accountability for local communities and a collaborative and integrated structure across the regions and the workforce to make sure we have an innovative and sustainable health system.

We have been working within Health across the Territory, talking to clinicians. We know that change makes people anxious and we have certainly seen that, but at the same time, this is an exciting step for health within the Territory. I can hand to Professor Stoddart to provide you with more detail if you would like.

**Mr YAN:** Thank you, yes.

**Professor STODDART:** This is an opportunity for us. Out of COVID a range of opportunities arose, including the movement of our clinicians across the NT to give them experience. The mechanisms we have currently do not allow that to be as fulsome as we would like.

We have been very fortunate to receive some funding for a rural generalist model which allows GPs to work in all different regions and do extensive additional work. This will also help in that process.

One of the other aspects of COVID and the system we have is that we can see that we need consistency of access to services for all parts of the system and this will allow us to do it. It has been a big journey and we hope the disruption of COVID will allow us to do make bigger transformations.

We hope this integration will increase is things like virtual care. Virtual care is not just telehealth, it is providing additional services through AI and a range of other ways using the new Acacia system. We need the consistency and coordination to do that and maximise it. That does not belie the fact we feel very strongly that we need regional leadership and strong regional clinical leaders as well.

**Ms FYLES:** Just to add a further point to that. In the new structure, each of the five regions and hospitals will have their own governance. We know that each region needs structure for community engagement and input

and equally with clinicians. It will allow for cross-regional information sharing and expertise-sharing that I was just talking about.

It will still allow local challenges to have local solutions. When I first became minister, one of the measures implemented with Professor Stoddart was a clinical senate. That brings clinicians from across the Territory together to a space in which they are safe, comfortable and can talk freely about the challenges, ideas and innovations that they have.

On Monday I launched the digital health technologies, which is partnering with the federal government and AMSANT. We are seeing this level of innovation and our current structure will not allow us the flexibility to drive that home.

This is an opportunity for people—and we have regions: Central Australia, the Barkly, the Arnhem and Katherine region and the Top End with hospitals and clinicians they know. Professor Stoddart spoke about the rural generalist model. We saw a shift in health many decades ago to a very specialist model, and there is a role to play, but we also need good-quality care in communities that people can access and interface with specialists or develop specialist pathways. Someone in Nhulunbuy, for example, could be known as a rural generalist who has a particular passion for burns; someone in Central Australia will have a different passion.

It is an exciting opportunity for Territory Health to build upon COVID—we have the Acacia system, worth \$259m, which will have a point of care from community-based care through to the acute ICU setting, where the information will be available to clinicians. This is bringing all that work together.

**Mr YAN:** Just following on from that, I listened to a radio report last night. A representative from AMSANT in Central Australia was not supportive of the changes. He was saying it may take some input away from the people in that region. A couple of things I took from listening to that—it sounds like this change in model to bring everything in under NT Health will give NT Health the ability to start moving people around the regions.

I agree that it is probably good to move specialists around. Will this be done as a collaborative move, or will they be required to go ...

**Ms FYLES:** I am not sure what you mean in your questioning. Of course, no one will be forced to go anywhere they do not want to go. Generally, with health, people will go out to provide a service. They may go to Nhulunbuy and provide a clinical service for a period of time then come back to Darwin. People with expertise in Central Australia might do a list in the Top End, for example. That is the type of work you would see.

I am not sure who from AMSANT would have been commenting; I did not hear that interview. We have advisory structures in the regions. There would be a continuation of some local input group. Once we have this new system we would see what would be best embedded in that.

Our partnerships with the Aboriginal medical organisations have gone from strength to strength. We have seen the transition of services across to community control and are continuing to work in partnership for that. We believe in local decision-making in a remote community. They should be in charge of their health outcomes; we set the system up to succeed in the delivery of that.

**Mr CHAIR:** Member for Namatjira, can we stay on this line and let the Member for Araluen expand a bit?

**Mrs LAMBLEY:** Is integration just another word for centralisation? I noted in your opening statement that you talked about your commitment to community control; is this not a step away from community control? You said you are setting up five regions. What power will the regions have, as opposed to the centralised body that will be integrating and coordinating services across the Territory?

**Ms FYLES:** They are two separate issues. Community control is where we transition what is currently a government health service across to an Aboriginal medical organisation. I outlined in my opening statement the number of communities where we have transitioned services. I have been working with the Commonwealth on the continuation of that, noting that the Commonwealth is the main provider of funding for primary healthcare services.

This is about looking at the model within NT Health—a structural model—to have an integrated model that sees us working together. We acknowledged from COVID—when our borders were shut and we could not get specialists from Adelaide or Brisbane, we had to become innovative. This is building upon that to deliver services.

We have hospitals in Nhulunbuy and Tennant Creek. I want to see as many services as possible delivered in those hospitals. There is tele-innovation, you can use video technology. How can we give the skills and resources to the communities?

**Mrs LAMBLEY:** Is that not happening already?

**Ms FYLES:** The current structure does not allow for the full integration we want to see. These are changes to that structure so we can see, for example, patients from the East Arnhem region getting services in Nhulunbuy. I know the clinicians are happy to travel across for a short period of time and do lists there.

We have resources in communities as you know, being a former Health minister. We should use them.

**Mrs LAMBLEY:** Is this not just about Darwin wanting to control the rest of the Northern Territory?

**Ms FYLES:** No!

**Mrs LAMBLEY:** Centralising services in Darwin? We have seen this before, minister. It is history repeating itself.

**Ms FYLES:** No, absolutely not. It is about people getting care close to home. When you are not well and need medical care, you want to be as close to home as possible. If we have a hospital in Tennant Creek, why are we not delivering services there? That is what this is about.

**Mrs LAMBLEY:** The Central Australia Health Service Health Advisory Committee only found out about these changes a few days ago. Why was the advisory committee not included or consulted in this decision?

**Ms FYLES:** They found out through the consultation that we are providing. We have been in this space and have started to consult with people. In my comments to the Member for Namatjira I said that we have current systems and will look at what this new structure allows for and which systems will be best. We want the advisory level process provided information and be involved in the process going forward. It is about what the final structure lands on and the make-up of it.

**Mrs LAMBLEY:** How much will this restructure save the Northern Territory Government?

**Ms FYLES:** In Health we have the single-largest component—it is a record budget of over \$1.8bn this year—but in the Territory and nationally budgets are limited. The more resources we can push into frontline health services, the better. That is what we are aiming to achieve.

Under Professor Stoddart's leadership our budget has been a priority. We have worked hard, not to save money but to put the money back into health services.

**Mr CHAIR:** In light of the CHO being here at 9 am, can we move on or perhaps go back to the shadow?

Member for Namatjira, do you have a question for the CHO?

**Mrs LAMBLEY:** Yes, I do.

**Mr CHAIR:** We will hear a question from the Member for Namatjira and then have Dr Heggie in the room.

**Mr YAN:** Minister, with the amalgamation of the Top End Health Service and the Central Australian Health Service into the Department of Health, how will it affect the budget of the involved entities? What will be the total cost in making those changes?

**Ms FYLES:** Can you be more specific? Do you mean in terms of a budget allocation to achieve this? Or what it will achieve?

**Mr YAN:** There are two parts to the question. How will it affect the budget of the involved entities—those three entities I suppose? What will be the total cost of making those changes?

**Ms FYLES:** They will still have their own budget but it will be one financial report because of the system changes. It is to ensure that every precious dollar we have in Health is going to where it is best directed.

**Mr YAN:** Thank you.

**Mr CHAIR:** I welcome Dr Heggie, thank you for your time today. I imagine you heard via the telecast that we have tried to get you in so that you can go and do the great work that you have been doing for months now for Territorians and Australians. We will try to focus the next half an hour or so on questions to you, or the minister and you. Then you can go back to work.

**Mrs LAMBLEY:** Thank you, Dr Heggie, for joining us. I know you are incredibly busy and I personally thank you for keeping us all safe over the last nine months.

It is not clear to Territorians how the quarantine facilities in the Northern Territory operate, who is paying for what—federally and the NT Government—and how the cost of quarantining is worked out. How is the charge for quarantining is determined?

**Ms FYLES:** Quarantine fees were introduced by the Chief Health Officer from 4 April. The quarantine fee for an individual is \$2,500 for the full 14-day period. For a family of two or more people it is \$5,000 for 14 days. For quarantine less than 14 days—there were instances, such as a few weeks back when the Adelaide hot spot was declared but then revoked within a period of time—it is charged on a pro rata basis of around \$175 for individuals and \$350 for families. Australian permanent residents on a low income may apply for a 50% reduction to those fees. There is a low-income threshold of \$52,000 for singles and \$68,000 for families. Our fees are due to be paid 30 days from the invoice. Payment plans can be established for fee recipients who are unable to provide the full amount in one transaction.

Member for Araluen, that is the fee structure ...

**Mrs LAMBLEY:** How was it worked out? Could you explain to Territorians how those charges were derived?

**Ms FYLES:** Of course. It was based on an estimate of accommodation, food—three meals a day for 14 days. It excludes the health checks, the staffing and those wraparound government services ...

**Mrs LAMBLEY:** It excludes?

**Ms FYLES:** It excludes those, so it is very much based on the accommodation, three meals a day and the running of the facility. It is not wraparound health checks and the staffing of those services. I hope that provides some clarity for you.

**Mrs LAMBLEY:** The actual cost of running the quarantine service from a Northern Territory Government perspective really is not reflected in the charges put to people in quarantine. That is not reflection of the actual cost?

**Ms FYLES:** We have been quite clear about the charges. That charge was there to cover the costs I pointed out, but it is not the full cost of the service to the Northern Territory. But we have to look at the cost of not having quarantining and potentially allowing COVID-19 into the Territory.

**Mrs LAMBLEY:** Can you provide the per person cost for mandatory quarantine in Alice Springs and Howard Springs?

**Ms FYLES:** We would have to take that on notice.

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#### Question on Notice No 5.1

**Mr CHAIR:** Member for Araluen, please restate the question for the record.

**Mrs LAMBLEY:** Can you provide the per person cost for mandatory quarantine in Alice Springs and Howard Springs?

**Ms FYLES:** We are happy to take that on notice because I would hate the member not to get the information she wants. I know her well. I also suggest you ask that question of Territory Families, which is running those facilities ...

**Mrs LAMBLEY:** I intend to, yes.



**Ms FYLES:** But ask it of us as well. We are happy to.

**Mr CHAIR:** Minister, do you accept the question?

**Mr CHAIR:** The questions asked by the Member for Araluen has been allocated number 5.1.

**Mrs LAMBLEY:** Can you also provide the per person cost for international arrivals forced to quarantine at Howard Springs?

**Ms FYLES:** The Howard Springs facility is being run completely separate. It has a separate cost code within NT Health. That was a sub-agreement we signed under the National Health Reform Agreement we signed with the Commonwealth. The Prime Minister approached the Chief Minister, asking if the Northern Territory would take the people who have been caught up overseas. There are some horrific stories of four-year-olds who have not seen their parents for 10 months and things like that. We had a facility.

As we have seen through the revues into hotel quarantining, it is an ideal facility and uses the expertise of the AUSMAT team. That is a completely separate financial agreement. We made sure that the Territory taxpayer would not be bearing any cost, as much as we all have an obligation to the national interest. It is a separate sub-agreement under our National health Reform Agreement.

**Mrs LAMBLEY:** It is not costing Territorians anything to keep the international arrivals at Howard Springs?

**Ms FYLES:** No. We are been financially remunerated for that. Individuals at Howard Springs pay the same fees that the Territory charges, but that is being recouped from the Commonwealth.

**Mrs LAMBLEY:** What is the total cost of providing quarantine to date?

**Ms FYLES:** I ask you to ask this question of Territory Families. The cost for NT Health that we have incurred is the border screening; the border exemption team and call centre; the quarantine facility; medical and health support; the health facility screening; the preparedness coordination and support for compliance staff; the pandemic clinic; and the COVID-19 hotline. Of course, additional PPE, freight, patient screenings are an actual cost of \$41m for 2019–20 and an estimate of around for \$109m for 2020–21.

**Mr YAN:** Minister, how many people have we had through our quarantine centres across the Territory?

**Ms FYLES:** I know the international side is 1,300 to date. We have had over 6,500 people in mandatory quarantine, which is around 5,800 in Howard Springs and about 800 in Howard Springs—and then the 1,300 I just spoke about internationally.

**Mr YAN:** Sorry, 800 would be for Alice Springs?

**Ms FYLES:** Seven hundred and eighty-eight is the number for Alice and 5,870 in Howard Springs. That is at 24 November.

**Mr YAN:** What are the dates on the 1,300 internationals? What is your commencement date for reporting those numbers?

**Ms FYLES:** That was since we started quarantine until 24 November.

**Mr YAN:** Which was mid-March?

**Ms FYLES:** That is mandatory quarantine, 4 April.

**Mr YAN:** Out of those numbers, the 5,870 and 780 Alice Springs or 778, how many people required to pay—were charged a fee for quarantine?

**Ms FYLES:** The figures are not aligning exactly because some of them might not have been invoiced. The 24 November was when the Adelaide hot spot matters happened. There have been 5,558 invoices issued and around 1,200 have applied for a reduced fee because of hardship. They are the invoices that have been sent to date. Some of those are families, of course.

**Mr YAN:** Yes, I understand. Of those 5,558 invoices issued, how many have paid?

**Ms FYLES:** I will hand to Mr David Braines-Mead who will provide some detail on those specifics for you.

**Mr BRAINES-MEAD:** On those numbers, the 5,558 invoices have been raised to date. That will not always equate to the number of people in quarantine because obviously there are family invoices, where there is more than one person. These numbers are up to 30 November. Of that 5,558, \$15.4m has been raised with just over \$8m paid to date. There has been around \$1.6m where the financial hardship 50% reduction has been offset against the initial fees. There is also a number on payment plans. At 30 November, of the \$15.4m that has been invoiced, there is about \$5.7m outstanding.

**Mr YAN:** My question was, how many had not been paid. I thank you for the actual figures. Would you have the numbers of how many of the 5,558 invoices have been paid or have not been paid?

**Mr BRAINES-MEAD:** Of the customer payments, there have been 3,034 paid in full and 411 on payment plans and have therefore partially paid.

**Mr YAN:** I am very aware of Dr Heggie's time so I am not going to eat up my time talking about figures.

**Ms FYLES:** It is important to remember that we need to recoup some costs for the Territory taxpayer. We have provided those facilities but we need to remember the cost potentially of not having mandatory quarantine. We have been through quarantine reviews and been given the gold standard with our facilities and what we have done. It is very important the cost potentially of not doing this—we will try to recoup every taxpayer dollar that we can. It is the same as every other government charge or fine. The potential of having open borders or no mandatory quarantine is a far greater risk to the Territory.

**Mr YAN:** From your opening statement, and this is specifically about COVID, you mentioned that yesterday we have had the initial roll-out internationally of some vaccines. What plans are we looking at for the Territory of a roll-out of possible vaccinations?

**Ms FYLES:** Just before I hand to our wonderful Chief Health Officer, I will just acknowledge that we have had 73,600 tests conducted by 8 December, including me. I encourage anyone if you are not feeling quite right, it is super easy to get that test. It is really important that we are vigilant with people getting tested, particularly as the borders open up within Australia. We do not have community transmission but could only be one case away from that.

In terms of vaccination, we have established a pandemic vaccination working group, which has members of NT Health, the Primary Health Service and the Aboriginal Medical Services Alliance. The working group is currently looking at workforce with immunisation training, identifying requirements to allow legal administration of a COVID-19 vaccine and the current risks and opportunities with vaccine delivery across the NT.

As soon as that vaccine is available, we want to be able to participate in that. Some vaccines need to be cold-stored to a certain point so we will continue to work on this and prepare a communication plan as well as working with our Commonwealth counterparts. I will hand to Dr Heggie, who will give you far more clinical detail.

**Dr HEGGIE:** The Northern Territory is the safest place in the world, except Antarctica. We have had no community transmission. Some of our approach has been very much recognised and we have a very large vulnerable population and other vulnerable populations.

Having been a research pharmacologist 50 years ago, the time from a discovery, as in a chemical or an agent, to actually administration or access across a population was typically 10 years. So here we are, it has been 10 months and collaboration nationally and internationally has achieved that. Governments, health authorities and pharmaceutical companies, which I have worked for in the past a long time ago—it has been that collaboration that has achieved that.

We have about 100 agents, of which some are disease-modifying drugs. Some are to reduce serious symptoms because there is well and truly emerging evidence of the significant permanent damage done to people, including young people and the risk of sudden death from different complications.

There are 50 or so vaccine candidates, with 10 really at the front in their phases of study and gathering data. That is, they have been given to a large population and now that evidence or data is available. Now it comes down to administration across a larger population looking for, importantly, any benefits and measuring the

longer view of the vaccine, which could be longer, or it could be a year where you need boosters. There is one vaccine that requires two separate doses.

With the front runners at the moment, they will not necessarily have vaccinated a large number of Aboriginal people and also people with specific conditions—unusual ones that maybe you could have a reaction as some people do, such as people with multiple sclerosis or autoimmune diseases such as rheumatoid arthritis or lupus—also the medicines that modify your immune systems.

About two weeks ago at the Australian Health Protection Principal Committee, we had a discussion about vaccine production, supply, distribution and administration in Australia. I will be on the national working group for that. At the same time in that week, we established a project board to explore the delivery of vaccines here and the distribution. We have a very good—in fact, well-recognised—immunisation program in the Northern Territory covering vulnerable persons. We have electronic health records across many of our services that assist in identifying those people.

The plan is, nationally and locally, determined by the Commonwealth—vulnerable and aged person, including those in residential aged and disability care facilities; and frontline workers, including healthcare workers, particularly those in emergency departments and intensive care where there is higher risk when treating people with the disease—or potentially with the disease.

Our meetings with the Commonwealth have been fruitful because one of the vaccines requires minus-80°C refrigeration. That really is a problem in supplying us with the vaccine, getting it with the cold chain intact, storing it here and distributing it, particularly if it has to be done by small aircraft—we are talking about liquid nitrogen.

The Commonwealth has agreed that it would probably be better for us and other parts of remote Australia to have the vaccine that only requires normal cold-chain requirements. The distribution to the vulnerable groups will take place in the second quarter of 2021 and the rest of the population in the second half of next year.

What is really important, though, is we have a very strong approach to any medicines through the TGA—Therapeutic Goods Authority—and ATAGI—which is the one that looks at vaccines—because we want to be sure that this new and novel vaccine does not cause any unexpected or sudden serious reactions. It will need to be given under medical supervision. It can be given by others but there are some legislative requirements for that. It needs to be done in an environment so that if people have a reaction it can be dealt with quickly and effectively. I look forward to holding the line, nationally. If we have what is called 'elimination' at the moment and our biggest risk is international travel, we need to get to that point. We have production occurring in Australia already to test production lines and have pre-ordered a significant amount of several vaccines for Australia.

**Mrs LAMBLEY:** I have two questions. One relates to the cost of quarantining in the Northern Territory—in 2019–20 \$41m and 2020–21 an estimated \$109m. Where is that money coming from? Is it from within the existing Health budget?

**Ms FYLES:** Some of it is from within the Health budget and some from agreements with the Commonwealth for some aspects I spoke about before, where there is opportunity for funding.

**Mrs LAMBLEY:** What proportion or how much is from within the Health budget?

**Ms FYLES:** Professor Stoddart will provide you with more detail.

**Professor STODDART:** The \$109m reflects the costs that are also supporting Territory Families. They will be able to speak to some of that. There is a proportion from NT Health. We received some fix costs related to this, which were supported through the Commonwealth agreements we have. There are internal costs for redirection of activity.

The exact numbers for that at this stage are not known because it is an estimate, but we can get additional information to you if required.

**Mrs LAMBLEY:** Could you provide information on the cost to the NT Government and the Health budget from within the financial year 2019–20? Is that possible?

**Professor STODDART:** The 2019–20 is the \$41m. Just so I am sure, you are after detail ...

**Mrs LAMBLEY:** How much of the \$41m has come from the Health budget?

**Professor STODDART:** Okay.

**Mrs LAMBLEY:** Could you provide a breakdown?

**Ms FYLES:** Out of the \$41m from 2019–20 some was for the hospitals for screening—we had nurses and clinical staff and some screening needed separate emergency department sections. If someone comes in, sounding like me, with respiratory symptoms—I am COVID-19 free, I want to reiterate that—they need to be treated COVID-19 positive until the test returns.

In theatres, a room had to be set up as if someone had COVID-19, which makes it difficult for general theatre. There have been incidental costs occurring that people do not think about or are aware of. They are important if we were to see an outbreak and had to perform surgery on someone—we would need a negative-pressure theatre. There have been many aspects in the \$41m.

We are happy to break it down further if you would like. Some is from the Health budget and some we are able to get back on activity-based funding from the Commonwealth because it is part of everyday business.

**Mrs LAMBLEY:** None of this was planned for, obviously, so the money has been allocated to the new or additional services to address the COVID-19 demand. I wonder how much exactly has come out of the Health budget—the existing budget.

**Ms FYLES:** We saw elective surgery and a number of services stopped. The budget prepared last year was thrown into disarray because there were aspects which we could not deliver and other things we had to do. It is swings and roundabouts.

**Mrs LAMBLEY:** You did need a Treasurer's advance or additional money to ...

**Ms FYLES:** The Chief Minister, the then Treasurer and the current Treasurer were closely aware of these costs. We were having SEMC meetings on a regular basis, so they were getting updated on the things being postponed and deferred and the other measures that were put in place. We got some money from Treasury—\$8m.

The Commonwealth also provided funding for additional COVID impact. Some of that was for mental health and telehealth services, from memory—certainly PPE. There was a number of different supports available, but from a health perspective we did not go, 'Oh, my gosh, this is our budget for the year, we now have this massive pandemic, we have to deliver all of this, we are not going to have enough money'. There was never a feeling of that. It was—this has stopped.

When the virus initially hit we bunkered down. I think we all thought it was going to sweep through and by now we would all be travelling into Bali, but it has clearly panned out very differently. The initial shutdown between April and June and the resumption of some services, but in a COVID-safe way, has played havoc for the people behind the scenes with the budget. But an enormous amount of effort went into preparation and then some things did not eventuate, so we have this balance. Like I said before, we have theatres prepped for outbreaks and we had to care for people. I hope that helps you have a bit of an understanding.

Our travel costs decreased significantly. As you can imagine there was no interstate travel for a period of time.

**Mrs LAMBLEY:** You are suggesting that it all balanced out?

**Ms FYLES:** Yes.

**Mrs LAMBLEY:** Pretty much.

**Ms FYLES:** Yes.

**Mrs LAMBLEY:** Okay. There were savings and there were extra costs but at the end of the day, it balanced out with no Treasurer's advance.

**Ms FYLES:** With an \$8m Treasurer's advance and the Commonwealth provided additional resources funding.

**Mr CHAIR:** Thank you, minister.

**Mrs LAMBLEY:** I just have one more question ...

**Mr CHAIR:** I am conscious that the Member for Namatjira has some questions for the Chief Health Officer as well.

**Mr YAN:** Minister, we were just speaking about the vaccine and the rollout looking into the second and third quarters of next year. We stood up a lot of services for COVID and were required to stand up a lot of services on short notice and do a lot of things. What are we looking as our step-down plan? Are we looking at a step-down point? Where are we looking at into the future in line with the rollout of a vaccine?

**Ms FYLES:** If you can tell me the point where we are stepping down, I am looking forward to that.

**Mr YAN:** I would like to know if we have a step-down plan. I know from my planning in government previously, we stood up but we also had a step-down plan and could move it quite quickly to meet the needs of a facility. I am asking if we have something similar for the Territory?

**Ms FYLES:** Yes. Coming to the point I was just speaking about with the Member for Araluen, we stood up in March and April—we were bunkering down. Then by June it became obvious that the virus was not going to impact us as it impacted other jurisdictions around the world. We started to see the resumption of some normal services, although in a COVID-safe manner. I do not think we will deliver services the same again, I think will have a prism of Coronavirus even once the vaccine is rolled out. We have to know that people are vaccinated. We have to know that the virus has not mutated and changed and that the vaccine does not work.

We all now have a new respect for public health and infection control measures. Some of the measures from this pandemic will stay with us forever. What you have seen is the initial period where we stopped elective surgery and reduced services. Acute emergency was being provided for and then we had a resumption of services.

Oral health is a good one. We stopped oral health services that were non-emergency to begin with because we need to preserve the PPE—a very close environment. As we have learned more about the virus and not had community transmission—I could be a bit cheeky and remind you that your leader was going to open the borders in June—the Territory responded by trying to provide the services back into the community as much as possible.

We do not have an end date for this. Once the vaccine rolls out we need to make sure people are vaccinated. I am sure the Chief Health Officer can provide a little more detail on how he sees—from his expertise with being on the AHPPC—that when a vaccine is rolled out how will the virus play out in our community.

**Dr HEGGIE:** The Northern Territory was well prepared for this in the sense that we did have a pandemic plan. We have annual weather events that we have to work through. As part of that there is business continuity and recovery. We also have done other simulations on bio-terrorism and such.

Because of that, already at the beginning we were thinking about what we would do when we move into this stage of potentially a vaccine. We are not to be complacent about this because we have taken a different approach in the Northern Territory than other jurisdictions. We went with principles of how the virus is transmitted, how you can acquire it and the things that would mitigate the risk. Because of that we had only a soft lockdown and a quick recovery.

It is going to take a while for the vaccine to be distributed to the whole of the community in all parts—we have done a lot of partnering with industry and community about this. We will prioritise the vaccine for those who need it most and report back to the Commonwealth specifically and electronically for those people who need the virus, got the virus and any consequences and the side effects or reactions.

Unlike the other jurisdictions, we did not go with numbers. That proved to be a problem for others and there is some disparity. If I was to look to the future, I would start by looking back. We were expecting a pandemic—in fact it was predicted to occur several years ago. If you look back to what occurred with the Spanish flu, all that we are doing—without them knowing even what the virus was—are the same things. They learned to mitigate the risks by behaviours.

I suppose the question is the effectiveness of this vaccine: how long it lasts, given that around the world people, populations and countries have been severely tested by their ongoing outbreaks and huge loss of life and disability. My biggest anxiety is peoples' behaviours. Sometimes that is a breach of infection control, not a breach of quarantine, for instance. We have behaviours of people who become, in my view, at times complacent here because they have not seen the lockdown elsewhere and they have not totally recognised the harm being done in other countries.

**Mr COSTA:** My question is to the minister. As you know we have a lot of interstate and international arrivals coming from all over the country. Being a remote bush member, I often get asked when I am out there about what remote preparedness is being done for communities out in the bush in regard to health services if there were to be an outbreak or a case. What is being prepared with the health clinics and all that type of stuff? Could you give us a quick summation?

**Ms FYLES:** Protecting the most vulnerable Territorians—our Aboriginal community members—has been a key task for the Northern Territory. The work we have done has been about saving lives and because we have not seen community transmission there can be a bit of complacency, perhaps. It absolutely is all based on saving lives.

We acted early and decisively to keep Territorians safe. We declared the public health emergency on 18 March. Our CHO directions were based on daily national expert health advice. You just heard the Chief Health Officer talk about how he landed on that information.

We established the Emergency Operations Centre and SEMC, which is the Security and Emergency Management Committee of Cabinet. I think that has been a keen part of keeping Territorians safe, particularly those in remote communities. We had those structures based around weather events. We transitioned that to a much longer time frame around a public health emergency. We rolled out extensive communications in Aboriginal languages and main cultural languages. The Public Health Director led the public health pandemic planning with hospitals, health centres, aged care and disability. We had the key strategy to trace, test and contain.

The pandemic clinics were established and we had the remote point-of-care testing, which is still in place across many remote communities in the Northern Territory so we can, if someone presents and we may have reason to believe that it is COVID—we saw some concern early on when there was an outbreak in the Kununurra-Kimberley region. We made sure that the clinics close by—even though the borders were meant to be shut, if there had been any travel—were on heightened alert if anyone presented with respiratory symptoms. We can turn point-of-care tests around within an hour. That is really important in a remote community.

In regard to preparedness for our remote communities, we have the overarching emergency operations centre, which I spoke about. There is a remote community outbreak management plan and we have done scenario testing up and down the track and worked with AUSMAT, which has clearly shown its expertise around Australia and internationally.

We did not want to leave plans just to wait and see how those plans worked when we had an outbreak. We did scenario testing. We have a strong plan in place for remote communities. If we were to see cases, we would take it centre by centre, location by location—what would be the best for that community. Clearly we would lock that community down and influx a number of resources. NT Health is certainly prepared to lead that.

We have worked closely with our Aboriginal medical services alliance partners. There has been a Public Health Advisory Group that meets every fortnight and I have had regular and robust communication with representatives from the non-government medical services around the Territory. We cannot leave it and go 'what if?' We have to be prepared.

Remote Territorians—any of your remote community members listening, can be very reassured that there are strong plans in place and they have been identified depending on the community, location, population size and the number of outbreaks we see and what that scenario might be.

**Mrs LAMBLEY:** Are there any consequences or repercussions for people not paying their quarantine bill, if they are deemed to be capable of paying it?

**Ms FYLES:** As I have said publicly before, it is the same as any other debt owing to the Northern Territory. It is the same as if you have been fined or had another government service provided to you. You owe the Territory that money so there are measures in place. You cannot just decide that you do not want to pay it.

**Ms FYLES:** I publicly thank our Chief Health Officer and all members of his team for their efforts. Dr Heggie is in close proximity. If we get into a line of questioning, we can pause and I am sure he would be happy to come back. I appreciate the committee's kind words and support to him and allowing him to leave the building to make sure we are kept safe.

**Dr HEGGIE:** I thank you for the opportunity to be here and answer questions. Member for Arafura, I have lived and worked in many Aboriginal communities over the last 20 years. That was my first anxiety and concern. We have our APRO plans, which have been socialised with the communities. They have also a communication plan as does the urban plan and the aged care plans and others. People will know what we are doing and why we are doing it on a regular basis. It will be short, sharp and localised and it will not go for very long until we sort out what is going on.

**Ms FYLES:** We have talked a bit about international, but Len Notaras is also here, so if there are any questions for Len, we are happy to talk through any of that. He is also very busy. I mentioned that in my opening statement, so if anyone wants any questions from him?

**Mr CHAIR:** For members, and those watching online, Mr Len Notaras is heading up the Howard Springs red zone on behalf of the Commonwealth.

**Ms FYLES:** Yes, he is from the National Critical Care and Trauma Response Centre.

**Mr CHAIR:** Are there any questions relating to that? Is it worth allowing him to go?

**Ms FYLES:** There is an output group for the trauma centre. We are in the committee's hands.

**Mr YAN:** Any of my questions relating to the trauma centre can be answered by the group here.

**Ms FYLES:** I am glad you have such trust in our ability.

**Mr MONAGHAN:** Maybe the minister can answer this—about the NT Government support to Australians through the Centre for National Resilience. I am happy to leave it for later.

**Ms FYLES:** It might be worthwhile getting Mr Notaras in quickly, because he can talk about that relationship and reassure Territorians that the expertise and leadership is a strong partnership and will benefit the Territory.

**Mr MONAGHAN:** My question is about what the NT Government is doing to support Australians through the Centre for National Resilience.

**Professor NOTARAS:** It is great to be here again; estimates has always been an interesting time for me. Having said that, the National Critical Care and Trauma Response Centre, the NCCTRC—the Centre for National Resilience is a partnership that was forged in association between the Chief Minister and the Prime Minister of Australia, our Health minister, Minister Fyles and our federal Health minister, Minister Hunt.

As a result of some good work Minister Fyles did late last year, 2019, prior to the COVID issue, the centre became involved in something like 14 or 15 deployments up to this time. They are significant and range from Samoa, with the measles outbreak, to our current COVID-19 responses.

It is critical that it is a close partnership presided over by the Prime Minister and federal Health minister, as well as Minister Fyles and Chief Minister Gunner. That said, the Centre for National Resilience at Howard Springs emerged as a result of our success during the evacuation of Wuhan, China—which was a super-hot zone at the beginning of this year—and the evacuation of the Diamond Princess in Okinawa.

They are benchmark events internationally, not just here; they are recognised by WHO and international governments. We have continued that stellar performance to this point.

The Member for Namatjira asked Dr Hugh Heggie about the safety of communities. We are extremely committed to ensuring that the community is safe. Since the PM announced this other initiative, the Centre

for National Resilience, and committed something like \$54.7m towards that, our first objective was to keep the NT community safe—that is, the vulnerable communities as well as the immediate community in Darwin.

I have to say that the Howard Springs facility is iconic in the way it is set up. Across the nation it is recognised as the benchmark for any response. It is better than the hotel quarantine ideas that are in other places. In fact, with absolute respect to Victoria, had it had something like this, it is unlikely that the tragedy of the events that unfolded there would have occurred.

That said, the PM decided, in conjunction with the Chief Minister, that there were a lot of vulnerable Australians overseas suffering hardship as well as with co-morbidities—other illnesses and so on—trying to get back home. As Minister Fyles said earlier, they had been trying since January, February, March of this year. Families were disrupted, care was disrupted—a host of things were disrupted—and they could not get out of the place as there were no international flights and there were the risks involved in bringing people back, particularly from zones that were rife with COVID-19.

The PM, through the Chief Minister, decided that he would come back to the Territory and look at the Howard Springs facility. As has been described, in the special services of the medical world, we are in a sense, the medical forces unit. There is the AUSMAT unit and the NCCTRC. Their primary objective is to ensure the safety of the community, the staff who work within the facility and the people we bring back to the facility and, indeed, the building-capacity of the Territory and our reputation.

One of the premises we have been working towards is, for want of a better word, shopping and buying locally. We are using groups like Karen Sheldon Catering, which is doing our catering and doing a fantastic job. We have employed just on 76 individuals, some of whom—something like 25—had been displaced as a result of COVID-19 from the hospitality industry, from Qantas and other places. We have been using them in a range of very safe and calculated areas so that they can enhance the product we are giving.

There are COVID-19 cases in the facility now. I am glad that the minister has been COVID-19 tested; I am sitting at a safe distance from her. A number of COVID-19 cases have been detected. Of the 33 or so who have come through, 20 remain at Howard Springs in the hot zone or isolation area. They are well-managed by the AUSMAT staff, who are recognised internationally and nationally as the special forces of the medical world. The Prime Minister and the Health minister both articulated that well.

Howard Springs has had 1,311 travellers through since 23 October this year, which is quite remarkable considering they have come from Great Britain, New Delhi and India. Some of those areas, particularly India, are high risk. To ensure the community is comfortable and safe, the travellers are screened two days prior to leaving, on arrival in Darwin and at day 11 as a minimum—that is, three days before they are due to finish—to ensure they are COVID-19 free.

As well as that we are using rapid antigen testing for testing staff and travellers and doing other testing if we feel there is symptomatology. The number of people we have seen through the facility who come up with a COVID-19 positive result have either been old cases that still had traces of COVID-19 from some months prior to them coming, or conversely kids' parents who are asymptomatic. They are not actually sick. This is where our vigilance comes in and part of this vigilance involves the innovation occurring here with a telehealth and telehospitality facility located at our headquarters near the airport.

Any of you are welcome to visit out of session to have a look at it. We have 20 telehealth and telehospitality individuals who monitor, on an hourly basis, the people in the facility at Howard Springs on the international side. They are monitoring them with special armbands, which the minister has enjoyed looking at and trialling. The armbands are worn by the individuals in the facility at all times. They record oxygen saturation, temperature, blood pressure, pulse rate and a host of other things. They do not track them, they are not tracking devices as we might use in corrections, but they constantly relay information back to our telehealth facility. As a result, we have real-time information that is efficient and saves money.

The Member for Araluen asked earlier about the costs in terms of the other side—that is the domestic side or the NT side. Our side—the Centre for National Resilience, or the international side—is fully federally funded and the good news is that it has provided experience for local, national and international clinicians. A number of Centralians have come up from the Alice Springs Hospital to assist. When I say a number, I mean two or three.

We are not placing pressure on the local facilities.



**Mr CHAIR:** Professor Notaras, I am interested in the armbands. Could you expand more on that? We could probably use them in estimates to keep our oxygen and attention levels up. I am interested how that works.

**Professor NOTARAS:** They work through the Wi-Fi. They are electronic devices that are connected to an Apple computer. The minister has experienced this first hand, if you like ...

**Ms FYLES:** We took one to Canberra to show Minister Greg Hunt. It is a comfortable armband, like an Apple watch on the armband. We are not tracking them but it provides vital information. This is the largest cohort utilising them. They were used in Hong Kong and Singapore.

It provides clinical data which the professor noted into what may predict COVID-19 before it presents. The opportunities for this moving forward in public health and aged care—if you could monitor people and pick up 48 to 36 hours before they presented unwell and isolate them, this would reduce the spread and impact. This is where the Territory has been able to turn managing COVID-19 into world-leading opportunities.

I will hand back to the professor.

**Professor NOTARAS:** If there was a change in the pulse rate, oxygen saturation or temperature of the individual, we can pick it up immediately and monitor it. We can use it as a honing device to show that an individual seems to be becoming unwell. As the minister said, it is recorded and we are using the recording for research as well as the clinical purpose.

We were cognisant months ago of the risk of our vulnerable communities. That concerned me. We have now covered 76 communities from here to the South Australian border. We have provided our AUSMAT teams with training to prepare for the prevention of further incidents of COVID—not just preventing, but if it should occur, god forbid, how to respond to that event.

Should that occur we have teams on standby with mobile intensive care and everything else we send nationally and internationally to respond if we need to. That has been successful on two levels. South Australia approached and asked us to send our team to Coober Pedy and a couple of other areas in the northern parts of South Australia to train people in that area and prepare them.

Right at this moment I have a team in Tasmania who are leading the Tasmanian response with international arrivals. They have seen, as of today, six COVID positive cases after just three days. Our team is playing a critical response role there as well.

It has been so successful that the federal Department of Health approached us to look after the aged-care facilities in Darwin and throughout the Northern Territory, so we are bringing them up to speed because they are the vulnerable populations. That is the tragedy we saw in Victoria, which we aim to prevent. You can never say never in these situations, as we knew at the beginning of this year, but we are leading the world and continue to lead it.

I hope that gives some sort of a snapshot. If there are any questions, I am only too pleased to answer them.

**Mr MONAGHAN:** I have a follow-up question to that. This is amazing, this AUSMAT. One of my concerns, though, is about the security of the facility. I would suggest that is a critical component of what you are doing out there. Can you talk us through that security arrangement?

**Ms FYLES:** Yes, of course. We made sure the local community—there is a school nearby—and the local mayor—the National Critical Care and Trauma Response Centre did a lot of work initially when we had the Wuhan and Diamond Princess evacuees at the facility. Before we stepped forward into this new space of national resilience and having Commonwealth arrivals, we communicated with those representatives so they understood what was happening.

The whole facility is overseen by police, and that comes back to the structure at the Emergency Operations Centre. Commissioner Jamie Chalker, as our Police Commissioner, is the head. There is a clear point of accountability from the SEMC structure. The work being done with federal police—I will ask Professor Notaras to expand on those points.

**Mr NOTARAS:** That is a critical point, thank you, minister. The security is of paramount importance, as the minister just outlined. When we brought the folk from Wuhan and the Diamond Princess, there was a lot of liaison as well as a lot of concerns by the folk in the surrounding regions of Humpty Doo and so on. There is

a school not too far from the back of the Howard Springs facility, and the residents there had appropriate concerns.

A number of our AUSMAT staff from the Territory live there—they find it is one of the best areas to live and enjoy the rural surrounds. That said, security is of paramount importance. We are not expecting the folk on our side, the international travellers, to try to leave. That has not been an issue for us, but they are aware that they are mandated to remain within the facility for 14 days, or until they are cleared of any risk of COVID.

We have Australian Federal Police and Australian Border Force working with us; it is all overseen by the NT Police. Commissioner Chalker and his deputy and assistant commissioners and commanders have been extremely helpful. We meet pretty much on a daily basis. They have their officers and members on-site at the facility on a 24-hour basis.

My main concern in regard to security—what has happened in other places a worker who has another job or goes home and has not observed the full PPE requirements may have become exposed to the virus. We take a very serious view on ensuring that does not happen. I guess that is how we have forged our international relationship.

As I said a little earlier, World Health Organisation and others actually have taken ours as the template for what they do. That remains to this moment. I was with WHO earlier this year; our people advised the world. We are part of its global outbreak committee and the infectious disease committee as well.

You can be very proud that evolved here in Darwin and the rest of the nation, AHPPC and so on—which I am a member, as well as the Chief Health Officer—see us as the gold standard on response and maintaining that response.

**Mr MONAGHAN:** Following that, how many Australians still abroad want to return? And will we expect this facility to expand?

**Ms BOOTHBY:** Point of Order, Mr Chair. Standing Order 110. We have limited time to ask questions and, with all due respect, can we just have non-government members ask these questions? We can have this briefing at any other time?

**Ms FYLES:** A question has been asked, we are happy to answer it. If you have questions you want to go before?

**Mr CHAIR:** Currently, we are trying to expedite the Chief Health Officer and Professor Notaras. We will continue this line of questioning; I think it is really important.

**Ms BOOTHBY:** I think it is really important. I just want to be mindful of time, thank you.

**Mr CHAIR:** Certainly. Minister, can you please respond to the question?

**Ms FYLES:** In terms of the facility, the question was specifically about expanding potentially, or the number of Australians overseas. That number has grown. The Commonwealth initially estimated around 30,000 vulnerable Australians overseas registered through DFAT, trying to get home. I believe that number has increased. As I spoke about earlier, the pandemic has not rolled out how we thought it might.

With that initial number, I know of a case of a Darwin family caught in Germany. They were family so they thought initially they would just ride it out there; they had a safe space. But as it enters another year, they are keen to get home.

We have seen an increase in the numbers of Australians registered with DFAT. Foreign Affairs manage these passenger lists and who gets on the flight. People are screened before they come home. We have seen an increase in that and had a request from the Commonwealth; we are working to expand the capacity of the facility.

As we know, Howard Springs has 3,500 beds in a quarantining-type facility that is less and we have the different zones and fencing out there. We are really keeping people separate and it is isolated, so that does have a factor. We do have the ability to expand our capacity. It is based on risk as well.

The flights coming out of the UK have had fewer positive cases than the flights out of India. It is highlighting why this quarantine is very important. As Len said, some of the cases are residual cases, they come back with a positive reading but it was from some time ago, it is a low level. Others are quite active cases.

We will continue to work with the Commonwealth to bring home vulnerable Australians. We have seen the stories of people being forced into business-class tickets, having flights cancelled and people stuck in one port and they do not necessarily want to go to another port to fly to Australia. It has been difficult for people. If they get a ticket on this flight, it is guaranteed and they know they can safely get home.

There have been conversations between the Chief Minister and the Prime Minister, led by the expertise of Professor Notaras and his team, on expanding that capacity. Presently we have 500 rolling through and we could potentially double it. We will work with the Commonwealth. Qantas has done an extraordinary job in terms of managing these flights.

A member of my community was caught in India early on and were able to get on a commercial flight. It was absolutely heartbreaking working with that family. A young person in their early twenties, stuck in a foreign country and they did not know for how long.

Back to your point, the number of Australians identified has increased and we will work with the Commonwealth. Len, do you have something to add?

**Professor NOTARAS:** It started off at about 20,000 overseas and now is closer to 50,000 all seeking passage back to Australia. As the minister just said, some of the stories are quite heartbreaking. Some families went to India prior to or at Christmas last year and took their children with them; the children remained with the grandparents for an extended holiday when the parents came back. There have been unaccompanied four-year-olds with good Samaritans and they are well-shepherded by Qantas and so on. By the same token, we had to make special arrangements to accommodate those. It is not 'if' there will be an increase, it is 'when'.

It is important to recognise that the Howard Springs facility is the gold standard in this nation. If every other state had one of these, they would be in a very good shape as well. There will be more; we have agreed upon 1,000 per month at this stage. It looks as though it will be a greater number than that. We will see that form in negotiations between the Prime Minister and the Chief Minister.

**Mr YAN:** I really value your input and insight into what is taking place out at Howard Springs, Professor Notaras. As far as that output goes, I do not have any questions that will require Professor Notaras to answer. They could be answered by the people here. I thank you for your time; I know your time is extremely valuable.

**Mr CHAIR:** We will take a quick two-minute break and come back once we have reset the room.

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The committee suspended.

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**Mr CHAIR:** Are there any questions on the opening statement?

**Mr YAN:** Yes. Luckily enough, some of my questions have already been answered by Dr Heggie and Professor Notaras, which is good. Back to the merger of the health services, between Top End Health Service and the Central Australia Health Service into NT Health, what staff changes will be made as a result of this amalgamation? Will there be any loss of staff or will any staff be moved?

**Ms FYLES:** As I answered in the previous question, no staff will be moved. If staff—and we very much feel that this will happen—want to work in other areas and provide services and expertise, that will happen. It is not aimed to cut staff. Health is ever-changing and this year has shown us with the delivery of health services using technology and delivering services more efficiently, changes in service delivery, the shape of health is constantly changing.

**Mr YAN:** I am not specifically speaking about the health professionals at the coalface delivering services, I am speaking more about the administrative and executive services that sit within Top End Health Service and Central Australia Health Service. There are a number of positions that do similar roles. Are you going to be duplicating these roles, will they be amalgamated or will they possibly be shifted?

**Ms FYLES:** It is designed around building capacity within the regions and regional leadership being strengthened. Health is the biggest agency in terms of the budget component within the NTG. There are always changes and evolving measures but it is not designed as a measure to cut positions. There will be changes but it is focused on building off that leadership.

**Mr CHAIR:** Sorry, minister. I hate to interrupt. Please turn on your microphone.

**Ms FYLES:** Sorry. It was such a good answer, too. Now I need to try to remember it.

It is about building up regional leadership and capacity. Within the Department of Health, we have been very efficient in terms of staffing. The health dollar is limited and we need to ensure it is driven into clinical services. There have been changes and there always are, but it is not seen as a measure to reduce staff. It is about the delivery of services and the supports needed to deliver them.

**Mr YAN:** I understand the reasoning for it. Based on that answer, if the system is working now and we are delivering these services, why is it that the things you talk about cannot be achieved through the current system? If you are not talking about changing your staffing structure, particularly leadership, could these services be delivered under the current structure?

**Ms FYLES:** It is about consistency in clinical service delivery and ensuring people receive that across the Northern Territory. From COVID-19 we have learned that the integrated model is the best way to take services forward with Territory health. It is focused on regional leadership, which I spoke of earlier. This is the best model going forward but is still being worked through. It is in its early stages. We need to talk about it to bring people on the journey and this is where the questions are coming from. We are working with everyone in Health so we can have the integrated structure moving forward.

**Mr YAN:** You were saying that the consultation has only just started, which is why it has been released in the media. What is your consultation strategy moving forward? When are you looking to implement these changes?

**Ms FYLES:** This is a journey we see being ready for 1 July next year. It will be many months of bringing people on the journey and explaining to them why we are doing this. What do they want to see? It is not all about the Department of Health, it is about what the people on the ground want to see. My guess is that they want to see as many services as close to home as possible and the highest level of clinical care. How can we deliver that?

I spoke about the clinical senate we put in place, which has been an open space for people to talk freely, test new ideas and be robust. We want to see the same process through this structure so that at the end of it, we have the highest quality of care as close to home as possible in strong regions.

**Mr YAN:** I have a vested interest, being from Central Australia. Being in government for a number of years, I have seen changes over the years including the amalgamation of services and machinery of government changes. Unfortunately, I have witnessed a lack of services in those regions once things are moved centrally. For myself, Central Australians—particularly those in health—and those who use the health services would like some reassurance that we will see service delivery to people in the community.

**Ms FYLES:** Absolutely. We have a track record of delivering that. We are transitioning to community control. At the most basic primary level health service we are transitioning back to the community so they can control that. We have achieved the commitments we made and are working on more. What you have seen—particularly the renal service which is needed across the Territory—is that we are working with the Commonwealth and had the Medicare item increased to a realistic figure to provide those services on country.

These are the elements in primary healthcare that we have been focused on. Our track record shows that we will deliver that. We have hospitals in Tennant Creek, Nhulunbuy, Katherine and want to see as many services delivered there as possible. It is best for the patient and their family that they are getting the service close to home.

If we can take the clinicians there to deliver those services—there are models where it has worked. In the Territory we want to expand on that and learn the lessons. They are happy to go and do it, as they enjoy the experience. Clinicians want to provide services as close to home as possible. I reassure you that this is focused on regions and a good way to delivery services.

**Mr YAN:** One part is around the governance structure. The governance structure for the services currently has a CE of an area and a chief operating officer under that. With this change, how will that governance structure look, going forward?

**Ms FYLES:** That is a very important point. In this consultation, we are asking the leaders across Health in the Territory what they would like to see as a model so that leadership in communities comes through. When I talk about an integrated model—that is a key part of it. We want them to have the opportunity to have their leadership, because we know there are people who want to be in the regions. Many of our clinicians could be on the world stage; they could be working in a hospital in Sydney or Melbourne. They do not want to do that; they want to work in the Territory—whether it is at Royal Darwin Hospital or Alice Springs. We want to give them the pathway so that they are in charge of that leadership. That is very much what this is about.

**Mr YAN:** The consultation has only just recently started. The first way a lot of people within Health found out about it is through the media. Is there any reason the Department of Health did not announce this earlier to people in Health who will be affected, rather than them finding out through the ABC or their own investigations?

**Ms FYLES:** That may be how you found out about it. There was a video done within Health. We very much want to bring people within Health on that journey and change people who are always anxious about change. There is such an opportunity from the lessons we have learned from COVID-19. Where we are in the delivery of health services has rapidly changed. There is a real opportunity. I see this as an exciting opportunity to see that leadership in the regions, either empowered or placed there so they can get services.

**Mr YAN:** Minister, I am well versed on change management and change. I am certainly a proponent of it. I hope, for the sake of Territorians and those who have accessed the health service that this change is for the better and is managed appropriately so we still see good health service in the regions.

**Ms FYLES:** This will bring us an integrated, resilient, innovative and sustainable health service. I know you will keep me on my toes over the next few months, as will the Member for Araluen. We are excited about this opportunity. COVID-19 has shown Territorians we can lead; we can not only be national leaders but world leaders. We have shown that through COVID-19 so we want to build upon it. We just cannot keep doing things the same we have been doing. This is an opportunity across the regions I spoke about.

We have the acute hospital setting, but not every service. We will not suddenly be doing intricate surgery in Nhulunbuy, but there are a lot of services that can be provided and a lot of pathways for people in communities to have clinic care closer to home. Also, the care we can provide when they have to come to an urban area.

The digital health strategy we launched in partnership with the PHN and the Aboriginal Medical Services earlier in the week is really exciting. We have chosen Arnhem as a trial site. When you are chosen as a trial site by the Commonwealth Government, you can piggyback off it and lead. A lot of infrastructure can come with things like that. The new Acacia \$259m investment—one clinical record. Presently, somebody who is being cared for in a primary setting is on a different system than an acute setting and you cannot see that intricacy. If a patient comes from Alice Springs to Darwin, there are records. We have put the ground work in place and it brings all of this together at this point.

**Mr YAN:** Speaking about remote areas and how we are providing services out there, I know that some remote clinics have been closed or, only now, minimally staffed. Rather than having a nurse full-time, the nurse pops in ...

**Ms FYLES:** Just a point. I am not sure of any remote community clinics that are closed presently. If you have community names, I would be happy to ...

**Mr YAN:** I know, for instance, that the clinic at Bonya, which was permanently staffed with a nurse, now only has a nurse attend one day a week for about six hours from Orrtipa-Thurra ...

**Ms FYLES:** Which clinic was that, sorry?

**Mr YAN:** Orrtipa-Thurra is the name. It had a permanent health presence, now it is only serviced once a week. Has there been any closures or reduction in services to our remote health clinics in this reporting period?

**Ms FYLES:** I am seeking advice. We have 80 remote community clinics across the Territory. About 50 are run by the Northern Territory Government; the others are delivered by Aboriginal Medical Services and organisations. One thing I want to talk about is that last summer we saw some clinics having temporary closures, but the Department of Health worked very hard. We saw resources from the Top End go into Central Australia to keep those clinics open.

What happens through the Christmas period is that remote agency nurses who have worked throughout the year take an opportunity to have a break and go back to the east coast with family. Then we have difficulties staffing those clinics. The department said that was not good enough and that we need to support remote clinics. We worked across clinics and services and got people out there to keep clinics open.

I have been asking, in preparation for this Christmas period, to keep the clinics open and keep providing services. From time to time there may be an incident that requires the nurses to be removed from the community, and that has a structure around it. From time to time there is staff illness or unexpected issues that might have an impact.

We have stepped away from relying on agency nurses and the default of shutting the clinic. We know how important those services are.

**Mr YAN:** I understand the intricacies of manning remote clinics.

**Ms FYLES:** I am happy to take the question on notice about the reduction in services because we do not believe it is an NTG clinic; it may be one of our partner clinics in an Aboriginal medical service.

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#### Question on Notice No 5.2

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** How many clinics have had a reduction in service in the reporting period? Specifically, the clinic at Orrtipa-Thurra, more commonly known as Bonya.

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The number asked by the Member for Namatjira has been allocated the number 5.2.

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**Mr YAN:** Following on from that question, where we see issues with service delivery in remote communities and clinics, what work has been done to bolster or improve our telehealth services in those communities?

**Ms FYLES:** We have done an enormous body of work on telehealth and staffing to make sure we have sustainable staffing measures. As I mentioned previously, we are shifting away from a reliance on agency nurses, which comes at a higher cost to Territory Health. We want people who are part of that community.

We have also done work to ensure remote area nurse safety. Second responders are available for after-hours call-outs so we have a more sustainable service in those remote clinics. We have focused on recruitment and retention of staff, which is an ongoing issue. We have provided extra clinical support to the level 3 nurse program to aid recruitment and retention of level 3 nursing staff and to upskill them to become a level 4 nurse.

We have clinical nurse educator support and child health postgraduate nurses in training. We have the nurse practitioner roles being developed. We have made sure that Aboriginal health workers and practitioners have an EBA—we are acknowledging the profession of their role in remote community healthcare. There is no single answer.

In regard to the specifics of telehealth, we have seen a significant increase in hospital in the home—as you would most likely expect off the back of Coronavirus impacts. We have focused on that. In the Top End we have seen an increase in hospital in the home by 50%, and telehealth has increased by nearly 30%. That is more than 4,000 receiving care closer to home, which has an impact on them being able to stay at home and in community, but they also do not need patients to travel out of that community.

In Central Australia we have seen an over 70% increase in episodes of telehealth. We have actually seen, in Central Australia, a reduction in medevac retrievals, particularly in categories 3, 4 and 5. That is indicating patients are being managed in community, with support, and making sure they are getting appropriate care rather than retrieving them. All this works together.

People need healthcare in the primary health setting. We need to focus on primary healthcare and avoid acute and hospital presentations because there is such a flow-on effect from that. It means people are healthier, they can stay in community and stay home. We are also using an acute hospital bed which is expensive.

I hope some of those figures provide you with information. I am happy to go into more specifics.

**Mr YAN:** Some of the specific detail I am interested in is that a number of the remote communities across the Territory are on the edge of a Telstra service—they do not have a mobile phone connection. The best that some communities and outstations have, if they are lucky, is a telephone box. The community council may have a data line in, and it is hit-and-miss, through to any clinics or across the community.

Are you looking to invest further into some of that infrastructure to provide appropriate access to data to be able to provide effective telehealth services?

**Ms FYLES:** Absolutely. The reliability of the telephone and Internet connections is a key part of this. We cannot simply say to a community this will be a key part of the delivery of health services for you without the reliability. We work with both the department responsible for that and Telstra. There can be services such as a satellite on a clinic, for example, which means that clinic can have a reliable telehealth service.

It is a key issue but we certainly have seen a rollout of more Internet services and better technology in remote communities. Off the back of that we can deliver those telehealth services.

**Mr YAN:** I note that the community I speak about, Bonya, does not have satellite services, they are struggling to get those services. I have been working with that community on increasing their capacity for telehealth and they would like it. I figure they are not alone, there are probably many other very remote communities and outstations with similar circumstances.

**Ms FYLES:** There is a map upstairs in one of the offices and it is Telstra services in 2005—I am not sure why we still have that framed picture map—which highlights the advancements in 15 years and we certainly need to continually make sure that more and more Territorians have access to high-quality communications.

**Mr YAN:** During your opening statement, you spoke about mental health and your increases for mental health. Mental health is a huge issue across the Territory. I agree with the statements that have been made about COVID that it has probably exacerbated our mental health issues because people have felt alone and vulnerable.

I picked up on the \$30m for mental health for RDH, could you expand on exactly what that \$30m is going to provide to Territorians?

**Ms FYLES:** Absolutely. Mental health is an area of health that, for me, has been a key priority in the last term and continuing on this term. It is a complex multifaceted area of healthcare which challenges our community and health system. It has a flow-on effect into the broader community and we see interactions with the justice system.

What I have been focused on is working across government and government agencies as well as with the Commonwealth, our primary healthcare and community providers to see a real change and shift in mental health services.

The Australian Government has provided us with additional funding, through our National Health Reform Agreement—we signed up to that earlier this year. From that we got \$30m for a new inpatient facility at Royal Darwin Hospital and that will be modelled around a transition unit.

We see people who come into contact with the acute mental health system who, after 72 hours, need to be sectioned. Often those people could perhaps be stabilised and cared for back in community. That is when family has had enough and is at breaking point, or is it an individual not taking medication. Alcohol and other drugs can be a key factor in a crisis episode.

We have the Joan Ridley and Cowdy Ward units. There is money in this budget to make changes to those facilities. Flowing on from that there is \$30m for a new inpatient facility. Additionally, there is \$20m for a community adult mental health facility comprising \$5m for infrastructure and \$15m operational funding over five years. We are working with the PHN on the delivery of that.

We have headspace, which provides services into the youth space. I very much believe there is a gap in mental health—a facility for adults that can be a one stop shop for them. They can go there and have interactions with their clinicians, get the support they need and access services. We are talking about very vulnerable people and making it easy for them to maintain their mental health so that we do not see acute presentations.

As I mentioned in my opening statement, we have launched a trial of the co-responder model which is St John Ambulance, mental health and police co-located at Casuarina. This is a trial but the early signs are very promising.

When a call mental health-related call comes through to 000 this team will assess it. Of course, if someone is acutely unwell or something has taken place and they need an ambulance and care, that will be provided. Equally, if police need to respond from a safety perspective they will, but often you will see these calls at crisis point and this is the last resort to call 000.

This team intensively works with these individuals and they have been able to avoid hospital presentations significantly, which takes the pressure off the emergency department, it takes the pressure off the first responders of police and St John Ambulance. We are putting in a number of measures for mental health.

In terms of the \$30m, we are exploring the short-stay transition unit options and that could allow for people to receive up to 72 hours inpatient treatment before being released into community care. We have wonderful community care providers that can provide a safe space, or people can go home back to their family at that point.

The \$20m adult mental health facility will be developed with the PHN. This is in consultation presently along with the \$10m enhancements.

A review of the *Mental Health and Related Services Act* is being undertaken. The review is a commitment under our Mental Health Strategic Plan 2019–25, which aims to ensure that our legislation backs up our facility.

There is not one answer to solve these issues but Territorians can be reassured that we have put significant investment and effort into this. The discussion paper on the Mental Health Act has been reviewed by NTG agencies and been updated on agency feedback. We will then have a discussion paper to generate broader discussion.

The co-responder model runs until April 2021, but already from what has been presented to me I have had conversations with Professor Stoddart about increasing it, whether by teams or by area. I have spoken to the police, mental health nurses and the St John paramedics involved in that team. They are really proud to support someone and give them the pathway to the care they need without an emergency department, an ambulance ride or police interaction. That saves the resources that are already busy in our community. It is a key priority for us.

Looking at the alternative models of care in the community, he had the HASI program, which is public housing tenants supported if they are identified as a mental health. If they are a patient, we can support them to maintain a tenancy. There is significant work in this space.

The Mental Health Association of Central Australia, MHACA, is trialling a housing accommodation support initiative. The Darwin-Palmerston one has supported about 80 people since December 2017. Menzies is evaluating that program. I know these seem like really small numbers but that is 80 people not becoming homeless or causing significant angst for their family and themselves, not going through trauma or presenting to our mental health facility.

We are also funding mental health providers through the transition to the NDIS period, which is really important—Minister Worden has responsibility now. That transition has been identified for people with mental illness or a disability.



I acknowledge the work of the private hospital. I have been there a couple times. It has an 18-bed unit that will come online early next year. There are a number of things, both infrastructure and policy, that support Territorians living with a mental health illness.

**Mr MONAGHAN:** You mentioned quickly—something dear to my heart—about the disability sector as we transition to the NDIS. What specific initiatives are we looking at to support people with mental health issues in the disability sector?

**Ms FYLES:** I may hand to Professor Stoddart, as my voice is wavering. The first step was to fund the service providers. Whether an individual ends up on a NDIS plan and has funding to continue supports—or if they do not—we need to ensure they are supported in the interim. We cannot say that we think they are NDIS and that is all. I have met with our community-based providers in pockets of the community that you would not expect. They go quietly about their business and provide for vulnerable people to keep them out of acute hospitals, avoid homelessness and provide supports to their families. It is vital.

We said that we will fund those service providers whilst we go through the transition of NDIS so there is certainty and stability for them. I will hand to Professor Stoddart to elaborate further.

**Professor STODDART:** In terms of the NDIS and what is termed ‘psychosocial supports’—which I think is the area you are talking about—we transitioned to the full scheme of NDIS in July 2019. The NT has done a great job in doing that. We have contributed \$103m per annum to the NDIS. The NT Government has extended funding to community-managed mental health services for five years in order to support some of that activity and their providers. They provide services to the general community and to disability requirements.

We have a bilateral agreement with the National Psychosocial Supports Measure Program and have contributed \$1.8m to that. The Northern Territory Primary Health Network is leading that on our behalf. We offer grants to other providers to spread it out. That is for four years, from 2017–18, and will provide psychosocial supports for disability clients. Through the PHN the Australian Government is extending those programs until at least June next year when there is full transition of most sites.

Overall, we have some infrastructure we are supporting through NTG and some in partnership with the Commonwealth. Over time the transition to psychosocial supports through NDIS will occur. We have put the money in through our base funding for NDIS.

**Ms FYLES:** The Way Back Support Service is an evidence-based support service for those who have attempted suicide. It is an Australian Government and Northern Territory Government initiative that provides up to three months community follow-up support for someone who may have presented to Royal Darwin Hospital. The Australian Government, through the PHN, has identified the greater area of Darwin as an Indigenous National Suicide Prevention Trial site. They have allocated \$4m over four years. I have been privileged to co-chair that with Minister Ken Wyatt from the federal government.

The trial has been extended for a year and evaluations are taking place. These are some of the community-based programs. I do not want to name them because they are all amazing, but they present to that and ensure there is collaboration. They talk about the little programs that pick up five or 10 people here and 20 people there, then all of it starts to build. Not one measure will solve these issues. We need to ensure there is support from the community and resilience through to our acute infrastructure.

**Mr YAN:** Following on from mental health, I note the \$30m investment in the Top End, which is welcomed by people in the region. What about investment in Central Australia?

**Ms FYLES:** When we talk about the integrated service model, Central Australia has embedded some of these mental health programs and does not see the impacts on the hospital in Alice Springs that we see in Darwin. It is something the department and I have spoken about and I have asked them to explore why that is. They are clearly caring for people in community and not seeing acute presentations. From a Top End perspective, we are trying to learn the lessons of what is going so well in Central Australia and the collaboration they are seeing.

They have the HASI program, so we have funded that in Central Australia. That is supporting people to maintain their tenancies. They have the collaboration for living well on country, the Arrernte country program and the places of care committee. There are programs within Central Australia that support people with mental health issues. When you look at presentations to an acute setting, you see a point of difference

between Central Australia and the Top End. I think that going forward we cannot operate—we are one Territory and we are all Territorians, so we need to learn those lessons.

**Mr YAN:** I have witnessed the delivery of mental healthcare in the region firsthand. While it works well for some people, it certainly does not work well for others. I have been at a number of coronials where mental health services in Central Australia have been criticised for their ability to deliver and service their clients. I raise this to ensure that we are getting specific service delivery to the people of Central Australia.

**Ms FYLES:** As with any coronial there are recommendations and government agencies need to look at those. It is a tragedy when it takes a coronial for there to be recommendations. In Central Australia there is a cohesive delivery of service—not to say there are things that cannot be done, but there are programs in Central Australia and support, such as the HASI program, which was trialled in the Top End. We saw its value and rolled it out in Central Australia.

**Mr YAN:** The Coroner was recently quite critical of service delivery into remote areas after the suicides of a number of youths. What strategies have you implemented to support mental health of youths in the remote areas of the Northern Territory?

**Ms FYLES:** The services I have spoken about in the centres support people from remote areas. We have a team within mental health services that does remote outreach programs. We have seen the work of Miwatj in the East Arnhem region focused on mental health support. The opportunity for telehealth—through COVID we were able to expand upon that.

I spoke with Minister Hunt in the last couple of weeks to say that it has been a success. There was a Medicare item provided for mental health and telephone counselling support. I would like to see that stay in place because it clearly has a benefit away from COVID in the Northern Territory with regard to distance and people accessing support and services by telepresence.

For young people and remote Territorians there is a key focus on providing those mental health services.

**Mr YAN:** In the NT Suicide Prevention Strategy Framework 2018–2023, which was launched in 2018, it states an increase in regional planning. What progress has been made in regional suicide prevention planning across the NT? Are there any plans in place yet for some of those regions?

**Ms FYLES:** Yes. I will ask Cecelia Gore, who is responsible for this area, to join us at the table. While we wait—in February 2017 federal Minister Greg Hunt announced that there would be a major suicide prevention trial funded by the Australian Government. It would be extended to include four PHN regions. Darwin is one of those sites, so we have seen that trial transition from the NT PHN to Danila Dilba Aboriginal community-controlled health service, which is working collaboratively with stakeholders to plan and implement a tailored approach to meet local suicide prevention needs.

We also have post-intervention services. There is the StandBy response service, which is support after suicide or attempted suicide; the National Indigenous Critical Response Service, which provides a 24/7 contact line; the Mental Health Access Team is a 24-hour, seven-day-a-week hotline for anyone experiencing an emergency mental health crisis.

There are a number of programs available. The government funds a range of NT-wide suicide prevention activities focused on the provision of training and education of the signs, symptoms and promotion of awareness of suicide and suicidal behaviours. This includes working with a number of NGO partnerships to roll-out programs.

There are a number of services. I can hand to Cecelia to provide you with a little more detail. Could I ask you to repeat your question so she could hear it?

**Mr YAN:** The Suicide Prevention Strategic Framework 2018–23, launched in 2018, states that there would be an increase in regional planning. What progress has been made in regional suicide prevention planning across the NT? Are there any regional plans in place yet?

**Ms GORE:** The strategic framework that you mentioned described the opportunity for communities to take control so that it is not all service driven. Over the last 12 months, 14 dedicated suicide prevention regional networks were established across the NT. Most of those are in remote centres. Some are built on existing life promotion networks that were supported by Wesley for a while. Increasingly, they are groups of people coming together in places as diverse as Katherine, Nhulunbuy and Santa Teresa et cetera.

We have also been able to use the community suicide prevention grants program. They are small grants annually available for communities that want to take action. Those grants allow communities to see their plans become real. If a group of people meets for a period of time and wants to focus on young people's awareness—perhaps organise a walk through town or do something at the school—they can apply to get money to do that, which consolidates the work and gives them things to work on together.

In the first two years, we were able to provide \$200,000 a year for those programs. This financial year we have made \$300,000 available, so we now have 92 different projects across the Territory with people taking action and own initiative to really address this problem.

**Ms FYLES:** The second 12-month progress report card of the implementation plan was released on 10 September which, as you would know, coincides with World Suicide Prevention Day. There is a range of work happening. It is a key priority for me, as a Minister and for Health, from infrastructure to supporting communities to have resilience to provide their community with support. It is a really difficult issue across Australia and the world but we are very committed to addressing it.

**Mr YAN:** I also read the second report card. I welcome the increase in funding from \$200,000 to \$300,000. In that second report card there is reference to NT Health-funded services of non-government service providers, which I think was about \$1.9m for delivery across the NT. Can you provide a breakdown of this funding to the various NGO service providers?

**Ms FYLES:** Yes, I will provide a comment and Cecelia can add to that. The NT Government funds a range of NT-wide suicide prevention activities focused on the provision of training and education of the signs, symptoms and promotion of awareness of suicide and suicidal behaviours. This includes Lifeline's applied suicide intervention skills training, Anglicare's training, the Mental Health Association of Central Australia's suicide story training, MATES in Construction's mental health awareness training as well as a number of other smaller NT-wide priority groups targeted to suicide prevention awareness activities.

As Cecelia said, it is a range of programs across the Territory targeting different communities geographically. It is also different sections of our community. MATES in Construction targets people who might not want to talk about these issues and how they can look out for their colleagues on a work site in the construction industry. Sadly there have been a number of suicides where the background of the individual is from that area. It is looking at how we drill down and provide resources in a way that they will be open and responsive to listening to them.

**Mr YAN:** On the report card—and you spoke about the grants earlier—we are looking at 41 grants for this report in the upcoming reporting period. Are you able to give details on the 41 projects listed for 2020–21?

**Ms GORE:** Every year we have published, on the NT Health website, a full list of all the grants and the things that they are for. As you would appreciate, with 92 projects, it would take a huge amount of the committee's time if I went through them all. That information is publicly available. This year's should be up there already.

**Mr YAN:** Not when I last checked; that is why I am asking the question.

**Ms GORE:** We can make sure they are up. My understanding was that they had been put up. They range from opportunities for youth groups to run barbecues—we provided support to the veteran community this year and there are fishermen who want to do work with their mates. It is very much the principle of what we know prevents suicide: connection; cultural connection; opportunities to have relationships; and diversionary activities to help people feel like they are part of something and there is some purpose and hope.

We rely on communities to tell us what they need. What Katherine community or young people need could be quite different from the issues in Borroloola or Alice Springs. The strength of those programs is that we are getting four times as many applications as we could possibly find resources for, which means the awareness of this issue is growing and people are really keen to take some action.

**Mr CHAIR:** Member for Namatjira, would you like it taken on notice and then you can get the full list of the 41? Rather than search it yourself, someone will get it for you.

**Mr YAN:** Yes, that would be good, thank you.

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**Question on Notice No 5.3**

**Mr CHAIR:** Member for Namatjira, please restate the question.

**Mr YAN:** As far as grants go, as listed in the second report card, can you provide detail on the 41 projects listed for 2020–21?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes, we can do that.

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated number 5.3.

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**Mr CHAIR:** Members, we will take a quick break. There is some morning tea outside. I would hate for you all to miss out on that. We will take a short break and resume at about 10.40 am.

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The committee suspended.

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**Mr CHAIR:** We are still on the questioning of the opening statement. I draw your attention to the fact the outputs are many and varied. We have Top End hospitals as well. If there are any specific ones—albeit we have covered Output Group 4, National Critical Care and Trauma Response, and Output 4.1, National Critical Care and Trauma Response.

If there are specifics, we would hate for someone—especially for instance, the Member for Araluen—to miss out on something.

**Mr YAN:** I only have a few questions left on the opening statement. I am covering some of my outputs during the opening statement anyway so the Senior Director for Mental Health, Alcohol and Other Drugs may get an early mark.

We have may have covered this already as we just spoke about the grants. On the second report card it speaks about youth and Indigenous connection to culture. It mentions the NIAA has committed \$5m for cultural activities in selected communities over 2024. Could you advise which communities have been selected?

**Ms FYLES:** That is the Commonwealth Government's program. We are supportive of that investment and it goes straight from the Commonwealth Government into community programs. We would be happy to seek information for you, but we do not have that at hand.

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**Question on Notice No 5.4**

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** Page 15 of the second report card mentions 'Indigenous youth connect to culture' and that NIAA has committed \$5m for cultural activities in selected communities over 2024. Can you advise which communities have been selected and on what basis?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes. The National Indigenous Australians Agency is Commonwealth; however, we are happy to accept the question.

**Mr YAN:** I raised it because it is in our second report card so I figured the NT would have some input into it.

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated number 5.4.

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**Ms FYLES:** For the committee members and those listening, the NIAA sits on our committee. That is why it is in the report card. It is the partnership with the Commonwealth.

### **Agency-Related Whole-of-Government Questions on Budget and Fiscal Strategy**

**Mr CHAIR:** There being no further questions, the committee will now proceed to consider the estimates of the proposed expenditure contained in the Appropriation (2020–2021) Bill as they relate to the Department of Health.

There are no questions. That concludes consideration of agency-related whole-of-government questions on budget and fiscal strategy.

### **OUTPUT GROUP 1.0 – COMMUNITY SERVICES** **Output 1.1 – Community Services**

**Mr CHAIR:** The committee will now proceed to Output Group 1.0, Community Services, Output 1.1, Community Services.

**Mr YAN:** Could you advise on the 2019–20 actual expenditure for this output? I note the estimate for this year is \$13.273m.

**Ms FYLES:** The budget from 2019–20, as you would be aware, was \$18m approximate allocation. The actuals from our annual report is \$15m, which shows a \$3m underspend. This variance primarily relates to delays in contract negotiation, delivery and timeliness of invoices and recruitment challenges. I am also advised by the chief executive—and am happy to hand to her to provide more detail—that we are working with our non-government organisations to ensure we have five-year funding. That was a key priority for us coming into the 2016 election.

Some one-off grants do not qualify for a five-year grant so it is about the timeliness of grants being delivered and negotiating new grants. I will hand to the chief executive to provide further explanation.

**Professor STODDART:** There is a range of factors that affect that reduction. There is delivery of the service that can be related to COVID and the capacity to deliver on some of the elements; recruitment requirements, which can mean a delay in the spending on the grant; and the element where an NGO or Aboriginal community-controlled organisations are not obliged to take a five-year grant. It may have ceased during part of the last financial year. Does that answer the question?

**Mr YAN:** Yes, thank you. Your 2019–20 budget was \$22.335m allocated for community services. In your 2020–21 budget, you have only allocated \$13.273m. Are you able to explain the \$9m shortfall?

**Ms FYLES:** Is this from Budget Paper 3?

**Mr YAN:** Yes.

**Ms FYLES:** Our figures are slightly different to yours. As I just said, it was \$15m actually spent and BP3 shows \$13m. I am not clear where you are getting the \$9m from?

**Mr YAN:** I might have to go back through my budget papers.

**Ms FYLES:** While you are looking up your figures, that variance for us of the \$18m budgeted for in 2019–20 to BP3, which is showing \$13—the \$5.6m mainly reflects some of the grants being transferred to the two health services. From our perspective the money is still there, it is just where it is accounted for.

**Mr YAN:** Yes, I think the figure I have might not be correct.

**Ms FYLES:** That is okay. The advice I have is that the variance reflects support functions to the health services.

**Mr YAN:** Community services 2019–20 is \$22.335m. I am not sure where that figure is coming from. Is that coming from BP3?

**Ms FYLES:** The figure I have before me is the \$18m in the budget in 2019–20. The actual was \$15m and that difference was \$5.6m variance from BP3 in 2020–21—it reflects those services.

**Mr YAN:** I am happy with that, minister. Have there been any additional health clinics transferred to Aboriginal community control since last estimates? Are you able to advise of locations and the names of the managing organisations?

**Ms FYLES:** Yes. This is Pathways to Community Control, which was a key election commitment for our government in 2016; it remains a key priority. We want to see the transition of remote primary healthcare to Aboriginal community control. This also underpins our local decision-making, which is a whole-of-government framework.

Territorians want and deserve access to high-quality services located close to home. Local control of health services helps the community respond to the services based on their priorities and takes responsibility for their health. As a government we believe that building, supporting and investing in strong Aboriginal governance is necessary to ensure that local people drive these solutions.

Pathways to Community Control is a shared policy of the NT Aboriginal Health Forum and comprises AMSANT, NT Health, the Australian Government and the NT PHN. Building on the success of Aboriginal community-controlled health services such as Danila Dilba, Miwatj, Katherine West, Sunrise and Congress, we continue to work with local communities and health boards to support the pathway.

The current priority areas are West Arnhem Red Lily Health Board—it was wonderful to be in Jabiru recently, meet with the Chair and see transition at the Jabiru clinic. Some of the emergency services are still provided by NTG but we have transitioned some of the primary healthcare functions to Red Lily and they are working out of the same building, which is great to see. The priorities also include Maningrida Mala'la Health Service and Central Australia with Congress.

We will continue work to identify new priority areas. I have spoken to the Commonwealth Government Minister for Health and Minister for Indigenous Australians, Greg Hunt and Ken Wyatt respectively. This is a key priority for them.

In April 2019 Red Lily Health Board commenced providing the rural primary health service in Jabiru and West Arnhem, including health promotion, prevention, programs in alcohol and other drugs, and chronic disease. The board is planning the transition in Minjilang, which will be in April next year, followed by Warruwi, Gunbalanya and Jabiru by 2023.

The time frame was modified by Red Lily Health Board due to the impacts of COVID-19. It comes back to the point of sustainability. We do not want to set these services up to fail. We do not want to say, 'Here you go, tick a box and transition'. We have to support them throughout this journey. We will continue to work with them. It is exciting to see them take it on board and work it through.

In July 2019 Miwatj completed the transition of the East Arnhem. That is the north clinics, Lake Evella—which is Gapuwiyak—and Ramingining health centres. An evaluation of the Milingimbi transition was completed in 2016. A process for the evaluation of the Gapuwiyak and Ramingining is under way. In October 2019 Mala'la Health Board transitioned to providing for children's and men's health, outstations and the rheumatic heart disease program in Maningrida. The remaining primary healthcare functions program transitioned in July 2020.

We said that early next year we will have the full transition of acute services, so that is exciting for communities. Over the four years they have built up the capacity, understanding and governance to do that.

Member for Namatjira, I know you represent the whole of the Territory in questioning today, but you have a particular passion for Central Australia. Central Australian Aboriginal Congress is working with NT Health to progress the planning for the transition of primary healthcare services in Imanpa, Docker River and Yulara.

This also shows—when we talk about structural changes—that we are looking at and working across the Territory. Transitions of healthcare clinics is a part of that.

We want community control; we want primary healthcare clinics run by community control with the health services coming in under that. We are looking at the five regions and how we can have regions directly into the chief executive.

As I mentioned earlier, Danila Dilba commenced services at Don Dale. It was really pleasing to see them take on the services; they can provide the transition for young people. They can care for them whilst they are in that facility and make sure that the transition of health services takes place once they leave.

We have done a lot of work in this situation across East Arnhem, West Arnhem and in Central Australia. We will continue to work with the Aboriginal medical organisations and the Commonwealth Government. I spoke to Ken Wyatt about the success of the transition of these programs and he agrees that it is a key matter of importance for him. We are considering other services that we could transition; it would depend on the community's interest and engagement but our door is open. It is wonderful to see the conclusion of the work that has taken place over many years.

**Mr YAN:** The Renal Services Strategy 2017–22 identifies care closer to home as a key priority area. What progress has been made in 2019–20 to increase the number of renal care patients receiving care on country and in which communities?

**Ms FYLES:** We know that renal disease in the Northern Territory and the burden of the disease—the rate for Aboriginal Territorians is disproportionately higher, particularly for those who live in rural and remote areas. When the CLP was in government it completely ignored renal. There was no infrastructure planning, we built the Palmerston Regional Hospital without any—we did not see it built, we saw holes dug ...

**Mr YAN:** Minister, I am asking about what ...

**Ms FYLES:** Well, this is renal, there was no renal plan for that hospital. To plan to build a hospital and not have renal really is ignorance. We put in place the Renal Services Strategy 2017–22, which sets the future direction for renal services. We now are working on the action plans focused on measuring identifying measurable improvements.

Since we launched that plan, we transitioned and provided services on community. Currently approximately 700 people require renal dialysis; it is estimated that by 2023 more than 1,000 Territorians will require renal dialysis. That is why the plan is so important.

As a government we rebuilt the Nightcliff Renal Unit and have increased the capacity of chairs. The Palmerston Regional Hospital has since had a renal unit put in and we have done work in Central Australia. Pirlangimpi has a renal chair that is being utilised by self-care.

We will continue to work with the Commonwealth Government. We saw a big step forward in terms of the Medicare item for nurse-led renal care being increased significantly to more accurately reflect the cost of delivering those services.

In Central Australia we have the expansion of the Tennant Creek Renal Dialysis to 17 chairs, which allows Tennant Creek to care for around 65 clients. There was an expansion in Alice Springs for the Gap Road facility, which had 16 new chairs providing care for 60 more clients. It now caters for over 140 patients. They operate a night shift service for people who may have missed their schedule time.

**Mr YAN:** For clarification minister, sorry to interrupt, 16 new chairs on top of existing?

**Ms FYLES:** Yes. There are 16 new chairs on top of the existing, which means that 64 more clients can access care and that increases the service. Gap Road now cares for over 140 patients. Additionally, people miss their treatment; it is just what happens. We need to be realistic. The nightshift allows people to get that care if they have missed a scheduled appointment, rather than becoming unwell and becoming an acute hospital presentation. Those measures have also eased the pressure, not only on the Alice Springs emergency department but on Flynn Drive.

The funding in this budget and working with the Commonwealth—the ambulatory care facility, which is a fancy name for outpatients and is the clinical word they use these days, will provide more chairs and eventually replace Flynn Drive—certainly strong plans there.

We are also working with Menzies, AMSANT, the ACCHOs and the Primary Health Network on an integrated clinical information system to support early identification and improve management of people with kidney disease. I am sure Menzies will provide you with a briefing; you may have already had one.

This is a fantastic system that incorporates an automatic data extracted from health services and consolidates it with individual records across multiple government agencies and non-government health services. It

facilitates the integrated care and identifies patients at various stages of disease progression with clinical decision support, based on evidence-based primary guidelines from renal specialists, ensures that our primary health conditions are provided with timely and relevant specialist support.

It literally maps an individual and predicts when they may start to need acute care so we can better plan and care for them. They can be on community close to home. It helps us plan our infrastructure services and their level of care can be provided accordingly. You can predict it without an emergency situation. Territory Kidney Care is an operational application of research and findings in the real world. There is certainly a lot happening in this space.

The western desert Purple House has commenced new services at Docker River, Papunya and Mt Liebig and is expanding services with nurse-assisted dialysis in Utopia, Ampilatwatja, Kalkarindji and Ernabella. Early last year, the NTG gifted the renal truck to Purple House to enable it to expand its mobile service. I know you would be familiar with that.

Further expansion of remote-base modelling is being explored with an NT working group with NT Health and AMSANT representatives. It is not only about where the patients are but if they have the ability to self-care, if it needs to be nurse led and the infrastructure required, noting it is not only the chairs but also the water that is a big factor to renal care. We will continue to work in this space and acknowledge the leadership of the Aboriginal medical organisations, Menzies—and the Commonwealth Government with the Medicare item.

**Mr MONAGHAN:** Minister, the Territory government has the early childhood development plan, Starting Early for a Better Future. Can you please provide an update on the implementation of this plan—in particular about the hearing health—as well as the NT Maternal Early Childhood Sustained Home-visiting program?

**Ms FYLES:** This is a key program for us as a government. Investment in the early years pays off in the long run because you have someone who is healthier, they have less interactions with the medical system and they can be more productive in society. It takes leadership from a government to invest because you are investing in something that you will potentially not see the results of potentially in your term or terms of government.

I think it is the analogy from the Member for Blain—would you not plant a tree because you are not going to see it grow and sit under the shade of that tree? Of course you would plant that tree. This is an investment so that in years to come we do not need to be talking about expanding renal chairs because we have set up kids early to give them the best start in life.

We are investing in the brighter future for our children with expanded health and family supports. There are two programs available in the Northern Territory, as you alluded to. There is the Australian Nurse Family Partnership Program, which we acknowledge the Commonwealth Government is funding, and the Maternal Early Childhood Sustained Home Nurse-visiting program or MECNH, which I spoke about.

The two programs have wide-ranging positive benefits for the enrolled clients and the wider community. We see improved child health and development outcomes. We aim to improve child wellbeing over the life of the course. We link families with support services in their communities and provide families with improved transition to parenting. It is not easy being a parent. I think all of us in the room are parents—I left the house at 7.15 am and by 7.26 am I had a phone call.

It is giving everyone the resources and skills to support their children and give them the best start. It acknowledges all of community in that and links in with Families as First Teachers, which is a successful program ensuring kids are ready for school on day one. Budget 2019 allocated \$5m for expanding the sustained home nurse-visiting program and of that \$3.2m was for investment into Aboriginal community-controlled health services.

When I was in Katherine recently, I met with one of the community-controlled organisations and heard firsthand the benefit of the program and the families they work with. We might not see the benefits in this or the next term of government but for decades to come Territorians will be set up. It is a challenge for governments when budgets get tight. The federal government's budget is tight and ours is extremely tight. It is a challenge not to cut these programs because you do not see the impact of a cut straight away, you see it in time.

Equally, there is opportunity if we make these investments to see the payoff in budgets to come as well as safer and happier communities.



**Mr CHAIR:** That concludes consideration of Output Group 1.0.

**OUTPUT GROUP 2.0 – DISEASE PREVENTION AND HEALTH PROTECTION**  
**Output 2.1 – Disease Prevention and Health Protection**

**Mr CHAIR:** The committee will now move onto Output Group 2.0, Disease Prevention and Health Protection, Output 2.1, Disease Prevention and Health Protection. Are there any questions?

**Mr YAN:** Minister, in the 2019–20 budget there was an allocation of \$22.333m for disease prevention and health protection. This budget is a reduction of approximately \$1.6m. Considering our current situation with COVID-19, can you explain why you would decrease funding in this critical area?

**Ms FYLES:** It is not a real decrease; it is a timing of payments from the Commonwealth under national health reform agreements. This is not uncommon. The further funding is anticipated to come through in Budget 2020–21. It was just at the time of going to print.

I am happy to hand to Mr David Braines-Mead to further elaborate on that for you.

**Mr BRAINES-MEAD:** This output, as you would expect, is the main output to which costs are allocated for the COVID-19 response. The difference in the figures is a reflection of the timing of funds from the Commonwealth: when it was spent, the crossover between what has been spent in 2019–20 and what is being spent in 2021. There is also a reallocation between what has been allocated to this output group and to services provided by Top End and Central Australian health services for the COVID-19 response. It is not a drop in funding or response as far as COVID-19 goes.

**Mr YAN:** Hopefully we will see an increase over the next few months.

**Mr BRAINES-MEAD:** I am sure we will. It comes back to earlier figures that the minister mentioned regarding last year and that we spent \$41m on COVID-19. This year we are anticipating we will spend \$109m on COVID-19 activities for a range of things including public health, services in the hospital and testing people et cetera.

You will see a significant increase overall in the costs that we are incurring due to COVID-19 this financial year compared to previous.

**Mr YAN:** Minister, have you included a budget line or allocated for possible vaccination? I understand the feds may be covering some of this but what would the NT's contribution be? Have you factored this into your future estimates?

**Ms FYLES:** We have a strong vaccination program in the Territory, which I am sure you are familiar with. The Commonwealth Government has indicated that it would pay for a vaccination to date. It is a key priority for us and we could utilise resources. It relates to what Dr Heggie was speaking about earlier regarding the time frame, what it looks like—is it one or two, is it one every year—and the rollout of the vaccine. For us it is a key priority. We are hoping, wishing and very much want to see a vaccine very soon. We would roll that out, as we have strongly with other vaccination programs.

**Mr YAN:** It leads on. Apart from COVID-19 what is the status of the current NT's vaccination program?

**Ms FYLES:** We know that vaccinations can save lives. They can also stop the spread of severe illness and injury. The Northern Territory participates in the national immunisation program. There are a number of national vaccines that are delivered to children particularly. There is also a program about the flu. We have the meningococcal vaccine. ACYW vaccine was added to the national immunisation schedule in July 2018 for infants and in April 2019 for adolescents. Prior to that the Northern Territory, in response to an outbreak of meningococcal W in Central Australia, added that to the NT schedule in August 2018. We were responsive on a Territory-based issue.

More broadly, we follow that national immunisation program's schedule of vaccines for young people. We also have the influenza vaccine, which occurs usually around April to June every year. This year that was a key priority identified by the Australian Government as a public health measure during the pandemic. We saw with the flu vaccine this year delay in the initial roll-out. There was delay in getting the vaccine and distribution during the pandemic.

The Territory was, as you know, affected by dramatic changes in flights and freighting options across the Territory. NT Health really stood up to make sure not only that vaccine but other vital medical equipment could arrive in the Territory in a timely manner.

I am not sure if you have any more specific questions about vaccines?

**Mr YAN:** I was interested in the meningococcal B being included in the program as well, so that actually answers the questions for me, minister, thank you.

**Ms FYLES:** Sorry, I spoke about ACYW. Meningococcal B—we are part of a trial so this is an issue I have been very well-briefed on. We have seen some tragic deaths of young children, not only in the Territory but around Australia. The trial is starting in early next year for meningococcal B. Let me seek some advice.

The meningococcal B is now on the national immunisation program, or NIP, for all under two-year-olds. There is a trial for adolescents. A number of families have taken that step to vaccinate their children. There is a trial based in South Australia that we are participating in—it was COVID-19 impacted—to roll out to any adolescent who may not be vaccinated to date. Meningococcal B has a prevalence in preschool-aged children and then again in the 15 to 19 years age group.

It is about understanding how we can provide coverage to the community from the severe harmful effects of meningococcal B.

**Mr YAN:** Regarding the recent disease cluster in Gunbalanya, Kakadu. I refer to the final report and investigation. When exactly did the CHO initiate this investigation and when was the report commissioned?

**Ms FYLES:** We released the final report just a week or so ago. The Chief Health Officer initiated the investigation in 2014 into the apparent higher occurrence of cancer and foetal deaths occurring in the Aboriginal population in the Gunbalanya and Kakadu area.

At that time, in 2014, there was also the proposal to expand the Ranger Uranium Mine to underground operations. As noted in the media statement that went out just a couple of weeks ago, the investigation confirmed that the occurrence of head and neck cancers, lung cancer and foetal deaths were higher for Aboriginal residents of the Gunbalanya Kakadu area than for the rest of the Aboriginal population in the Top End. They had a detailed investigation into the cancer risk factors including investigating the possible impacts of environmental iodisation of the radiation from the mining activities that were undertaken.

The investigation found that the prevalence of modifiable risk factors—so this is where you look at smoking, alcohol consumption and poor diet—was higher in this population than other Aboriginal populations in the Top End. However, it noted the limitations on the available data that these factors could not fully explain the excess of cancers and foetal deaths in the region.

They found that there was no evidence that the environmental ionising radiation was responsible for the excessive cancer deaths or foetal deaths. It was unable to fully explain the reasons for the higher occurrence of these cancers and can only partially explain the reasons for a higher foetal death rate in these communities.

These are really tragic findings. Reading that out in a very clinical manner does not sound compassionate but, of course, our compassion is with the people of these communities in the Kakadu Gunbalanya region. The investigation was conducted by staff and epidemiologists from the Department of Health—the population and digital health branch—and was overseen by an independent reviewer of one of Australia's most experienced cancer epidemiologists, Professor Bruce Armstrong, and another expert, Professor Elizabeth Sullivan, who provided independent advice on the investigation into the foetal deaths.

It is an issue that was taken very seriously. The final report takes into consideration the findings of the three stages of the investigation conducted over four years. NT Health is committed to working with the Red Lily Health Board and the Gunbalanya and Kakadu residents to promote and support access to health services but also information to help prevent—having a healthy diet, cessation of smoking and managing alcohol use. We will continue to monitor that. I hope that is some information for you on that report; you asked when it was initiated back in 2014 and what took place.

**Mr YAN:** If it was initiated in 2014, and we did not receive the completed report until 2019, that is five years. That is quite a bit of time.

**Ms FYLES:** With due respect, that was planned for because there were three stages of the investigation, which was planned for over that four-year period and then the evaluation. It will be ongoing. We are not simply closing the door on just because that report has concluded.

**Mr YAN:** I agree, minister, because the data shows that cancer rates in this community are over double the rates of the general population. That is of huge concern, certainly to the people of that community and the Territory overall.

Has there been any additional health screening services put in place for people in that community?

**Ms FYLES:** Part of that monitoring process is additional screening. Work was done in accumulating the report and this is one of the organisations we have transitioned the primary healthcare services to. We are listening to the community and letting them be in control of their primary healthcare in this space.

**Mr CHAIR:** That concludes consideration of Output Group 2.0.

### **OUTPUT GROUP 3.0 – COMMUNITY TREATMENT AND EXTENDED CARE** **Output 3.1 – Alcohol and Other Drugs**

**Mr CHAIR:** The committee will now move onto Output Group 3.0, Community Treatment and Extended Care, Output 3.1, Alcohol and Other Drugs. Are there any questions?

**Mr YAN:** Can you advise of the actual expenditure for this output in 2019–20?

**Ms FYLES:** The figure for actual expenditure for 2019–20 in the annual report is just a tad over \$32m.

**Mr YAN:** The 2019–20 budget provided \$33.447m for alcohol and other drug activities. Considering that levels of antisocial behaviour and offending are directly related to alcohol and other drugs, it seems odd that funding in this area has been reduced to \$27.81m for this financial year. I understand the government has to be fiscally responsible based on current debt levels but something as important as AOD should be appropriately funded.

**Ms FYLES:** Yes. This was similar to the question you asked before. It is not an actual decrease in those services. Some support functions were moved to the health services and, regarding a national partnership agreement, due to COVID-19 travel restrictions into remote communities, some of the funding was transferred into 2021-22.

Cecelia Gore again joins me. She can provide some more detail on that. There are no actual cuts, it was just regarding when the budget papers were printed.

**Mr YAN:** It would have been nice if the budget papers had the explanation in them. I might not have been here asking these questions.

**Ms FYLES:** Yes, we see this each year. There is explanation provided in those papers. I apologise that it is not so clear cut to you.

**Mr YAN:** Minister, can you provide an update to the committee on the effectiveness of the minimum floor price on alcohol since it was implemented in October 2018?

**Ms FYLES:** As a government we put in place a range of measures to tackle alcohol harm that occurs in our community. It is an issue that various Territory governments have tried to address. We saw some reforms in the mid-1990s—the Living With Alcohol campaign when Marshall Perron was the Chief Minister.

As a government we very much want an evidence-based approach, so we had the Riley review, which was handed to government in 2017. Part of that was a minimum floor price. We would have liked to see a volumetric tax, but that would be in the domain of the Commonwealth Government and we have been unable to convince them of that and it was unlikely. So we have the Riley review. A total of 75 of the recommendations were completed in the first year, 70 of the recommendations were addressed with the new liquor bill which was introduced in 2019, and the remaining recommendations have been actioned over the time period to now. Some are involved with evaluations.

Regarding the minimum floor price, we worked with Professor Peter Miller from Deakin University. That was a review of the first 12 months of the floor price, which was released in April this year. The report shows a

wide range of benefits to the community, including significant declines in total wholesale alcohol supply per capita, alcohol-related assault offences, protective custody episodes, alcohol-related ambulance attendances, alcohol-related emergency department presentations and alcohol-related road traffic crashes resulting in injury or fatality. We have also seen a decrease in the number of child protection notifications, protection orders and out-of-home care cases.

The report noted that the floor price works within the suite of reforms. Although there was a staggered implementation there have been benefits noted in all the regions. As we well know, the floor price was introduced on 1 October 2018. For Territorians listening in, it targets the cheap product that is consumed by heavy drinkers. It is aimed to stop the harms associated with that.

The majority of Territorians drink responsibly. They would have a beverage to celebrate or add vibrancy with family and friends. But for those who misuse alcohol, the cheap grog they use purely to get intoxicated has such an huge impact on our community.

As we know there are a couple of beer products that floor price of \$1.30 impacts. It targets that cheap cask wine people use purely to get intoxicated.

**Mr YAN:** Has there been a reduction in alcohol-related harm since its introduction?

**Ms FYLES:** The report that Professor Miller released in April showed significant declines. I read out those points; I will not read them again in the interests of time. It showed decreases, but it said that this is a suite of measures. We know that not one measure would tackle alcohol-related harm issues in the Territory. We need treatment, support and rehabilitation. We need point-of-sale intervention and measures that reduce access to content.

If you compare 2019–20 to a baseline of 2017–18 you see a 24% decrease in high-range drink-driving, a 21% reduction in alcohol-related assaults and a 14% decrease in alcohol-related presentations to NT hospital emergency departments.

We cannot stop and need to be agile. If we have one measure which works, there are other measures. We have been working with police on secondary supply. We will continue to have an evidence-based approach, be agile, look at the evidence and perform evaluations. The Riley review components that we are currently implementing are evaluations.

There is a technical review of the act due early next year to make sure the *Liquor Act 2019* is acting as intended. We will keep driving this work as it provides safer communities and we see savings in terms of police callouts and emergency presentations. We based evaluation on emergency departments in Alice Springs and Darwin so we can understand alcohol-related presentations. Then we can target policies to stop harm.

**Mr YAN:** On the figures you noted from 2018–19 to 2019–20, would they be skewed because of the COVID-19 community lockdown? There were a number of figures regarding crime and offending that were also reduced during that period.

**Ms FYLES:** When comparing 2018–19 to the 2017–18 figures—acknowledging that the figures I read out previously ended in June so there were three or four months of COVID-19—there was a 27% decrease in high range drink-driving a 23% reduction in alcohol-related assaults and a 17% reduction in alcohol-related emergency department presentations.

We need to be agile because these figures have plummeted. These are world-leading alcohol reforms. Drinking is an addictive behaviour and hard to quit. As we respond and have protective measures for the community, so do those who are doing the wrong thing. We will continue to be responsive in this space. You can see in the 2018–19 figures there were significant reductions compared to the baseline in 2018–19. We acknowledge the COVID-19 lockdown.

**Mr YAN:** What are the current figures for people undertaking alcohol treatment in the Northern Territory?

**Ms FYLES:** From 30 June 2019 to 1 July 2020 nearly 2,000 assessments were completed. There were 3,500 treatment episodes commenced. There is a structure for people if they have an alcohol problem including detox, sobering up and treatment pathways. We have the Banned Drinker Register and there are pathways for people to be referred onto a banned drinker order, which gets them on the BDR.

There are a number of pathways for people to access alcohol support and drug treatment care services. We provide significant investment into this and are in partnership with NGOs across the Territory. Alcohol is the principal drug of concern across all treatment types and accounts for 63% of all treatment episodes in non-government services.

Cannabis remains the main illicit principal drug of concern with around 17% of all non-government service episodes. We have information in further detail and if you have questions, Ms Cecelia Gore is here and can answer them specifically.

**Mr YAN:** I am happy with that answer, minister. The follow-up question to that of course is what are the figures for those successfully completing alcohol treatment? You were saying there were 2,000 assessments and 3,500 treatment episodes commenced. What are the successful completions for those 3,500?

**Ms FYLES:** There is a layer before that as well. There is funding across the Territory for 96 beds in sobering-up shelters across the five major centres and there were over 18,000 admissions into the sobering-up shelters in 2019–20. That was a significant increase compared to 2018–19, being up by around 30%. Then there is the co-location of the facilities and those pathways. In terms of completion, I will hand to Cecelia to provide you with some more detail.

**Ms GORE:** We commissioned a demand study into alcohol treatment in the Territory, which was reported in 2019. It showed that residential rehab beds only represent about 11% of the total treatment accessed in the Territory. The overwhelming majority of people are dealing with their alcohol and other drug problems through counselling, brief intervention, group programs and other things. It is really difficult to describe completion in that context.

One of the statistics they presented was that in the given year, there were 42,000 total episodes of care to about 8,000 people, which represented between 5.3 and 6.7 episodes per person per year. For some people, treatment or trying to deal with their drug use or alcohol use is an ongoing issue and they may be seeing a psychologist or attending a group program for over a period of time.

The study also showed that people enter specialist treatment programs while also getting support from their general practitioner. Some people access support through the Aboriginal medical services through social and emotional wellbeing programs as well as ongoing counselling, group programs and family-oriented programs.

There are lots of different things that people do. Even if someone appears at a residential rehabilitation, they then might continue to have, if you like, maintenance over the next couple of years, seeing counsellors or using peer support like Alcoholics Anonymous. It is a really difficult question to answer—when treatment is completed, if you like.

**Mr YAN:** I have seen some figures in some documents somewhere, I do not have them at hand at the moment, but the successful completions of people entering into treatment is less than 50%. I suppose that is where I am trying to get to. If someone is going into a rehab facility here in the Territory, whether it be run by the Northern Territory Government, a private provider or an NGO, of those people entering treatment facilities, how many successful completions are we seeing?

**Ms FYLES:** We know that successful alcohol treatment with a community-based provider, which the evidence around the world shows is the best model, takes many times. It is not easy to break those habits. We have the supports, pathways and information in the community. The mental health facility in the private hospital in Darwin is also looking at what alcohol and other drug treatment services they can provide.

This is not just an issue affecting one community or one section of our community; it affects people across the spectrum. They can be highly functioning but the impact that alcohol particularly has—we see in our health system day-in day-out—increased cancers and heart disease. It has a huge impact.

As a community it is fine to have a drink and to celebrate. We support that and we have a very vibrant hospitality industry. But when people's drinking starts to cause harm—drink-driving and traffic accidents—it is a huge cost to the community. We know about the economic harms. In 2015–16, the data we had shows that it costs the Territory close to \$1.4bn each year. The Territory has the highest per capita alcohol consumption in Australia and amongst the highest in the world. That high rate of risky drinking—it is lifetime patterns. There is not one measure that will stop it; there is not one treatment program. It is difficult.

I know in your previous occupation and in your current role—those community-based providers, it is not easy. We are committed to that work and having those pathways as accessible as possible.

**Mr YAN:** When you consider the suite of services we are providing to Territorians for alcohol treatment, we are heavily investing in this and seeing increases in alcohol-related harm which, as you have just said, goes across the Northern Territory as far as police, business and everything else. Are we doing it right? Could we be doing it better? Will you review what we are doing to see if we can provide a better service to try to reduce some of these issues?

**Ms FYLES:** Absolutely. One of the key recommendations from the Riley review was the evaluations. They are taking place and it will take time to see that work. The review into the minimum floor price was released earlier this year. These independent reviews are really important to look at what is in place and what can be adjusted.

We have continued to work with businesses on these reforms because there might be a measure that has a slight impact but has a huge impact on business—something relatively small in business and those in the sector can see a big impact around harmful drinking levels. We will continue to be agile and respond.

To just give you a snapshot of the evaluations, we have done the minimum floor price review; the BDR has had six, 12 and 24-month evaluations; we have done a treatment demand study; a sobering-up shelter review; and work on the social and economic costs of alcohol.

The evaluations still to come are the technical review of the *Liquor Act*, looking at the way that act is rolled out and if we need to make any legislative changes; the Australian Research Council—we received a grant through Deakin University to look at the alcohol reforms—the BDR, which is a three-year evaluation; the minimum floor price, which also has a three-year evaluation; and the *Liquor Act* has a three-year review.

There is certainly more work to reassure you in that space.

**Mr YAN:** As I said earlier, are we going—you may have touched on it—to do a review of the programs we are providing for alcohol treatment? If we are, when can we expect to see an outcome of that review?

**Ms FYLES:** From that treatment demand study, there is a whole-of-government coordination group that has been set up and they will report back early next year—off that study, what has been put in place across government and what can be done. Cecelia can provide you with some more detail if you would like?

**Mr YAN:** I am happy to catch up with Cecelia at another stage rather than take up the time of the committee. I will happily receive a briefing on that at a later stage, thank you.

In the Chamber, you have heard me mention FASD: Fetal Alcohol Spectrum Disorder. I have a very strong interest in this area. I note that you launched the government's Fetal Alcohol Spectrum Disorder strategy. What budget has been attached to deliver the initiatives in the strategy for 2020–21?

**Ms FYLES:** The Northern Territory, as I understand, is the only jurisdiction that has a specific state jurisdictional FASD strategy and it aligns with the National FASD Action Plan 2018–2028. The other states rely on the national plan. Of that plan, around 80% of the initiatives are being managed within existing resources. It is looking at what we are doing and how we can put it under that banner.

Prevention is clearly the main focus of that strategy. There are four levels of prevention detailed within the Territory FASD strategy, which you would be aware of. It is broad awareness-raising across the entire community. The initiatives focus on adolescent females and women during child-bearing and pre-pregnancy. Grants were available, improving the availability of treatment for alcohol treatment for women, pregnant or not; working with primary healthcare providers; and support for mothers once a baby is born, through the maternal MESCH program and the Family Nurse Partnership program.

In terms of the finance there is \$0.5m for CAAAPU to deliver a day residential alcohol treatment program for pregnant women in Central Australia. There is \$340,000 for FORWAARD to deliver a similar program in the Top End. There are FASD regional activity coordinators in Darwin, Katherine and Nhulunbuy to coordinate the FASD activities in their regions. That is around \$80,000 each. There is also the multidisciplinary assessment clinic within the Central Australian Aboriginal Congress in Alice Springs and the FASD regional activity coordinators to coordinate FASD activities in the Alice Springs region.

Within government programs we incorporate that information and the strategy driving it, but there are also the specifics I provided for you.

**Mr YAN:** Thank you. I appreciate that.

**Mrs LAMBLEY:** How much have you allocated to the Congress FASD activity?

**Ms FYLES:** It is \$140,000.

**Mrs LAMBLEY:** You said something about activity officers.

**Ms FYLES:** That is in addition to the funding they receive from the Commonwealth. They have the PATCHES program, which is the multidisciplinary assessment clinic within Congress and the FASD regional coordination. It is that position.

**Mrs LAMBLEY:** Can I ask a question about alcohol rehab? Your government cut the COMMIT program, and you were asked about it last week by the media. You expressed your disappointment at that decision. This program provides support and supervision, I think it is termed, for people who have suspended sentences, and the money is largely being given to alcohol and other drug services to provide that support.

You are disappointed in that, and I do not blame you. I think a lot of us are very disappointed in that, particularly in the Barkly region, which loses 37% of its funding—BRADAAG is losing 37% of its funding—that includes 10 alcohol and other drug rehabilitation beds. You were obviously a part of that budget Cabinet decision to cut COMMIT. You say you are disappointed but that does not really wash; you are part of the decision-making process of Cabinet.

You were part of the decision to cut alcohol rehabilitation services. What is your explanation? I find it inconsistent with what you have been saying for four years.

**Ms FYLES:** The Department of Health funds the majority of alcohol and other drug treatment programs across the Northern Territory. In regard to the COMMIT program, which was funded by the Department of the Attorney-General and Justice and commenced in 2017 as a two-year trial, it targets offenders with complex issues involving alcohol and other drug use. I understand the Attorney-General is appearing this afternoon, so she would be best placed to answer that for you.

**Mrs LAMBLEY:** Surely you work with your colleagues in making budget decisions in a budget process. You have talked quite a lot over the last few months about not working in silos and having a whole-of-government approach. I want an explanation as to why you and your colleagues have cut this important alcohol rehabilitation funding.

**Ms FYLES:** It is not a cut. There was a two-year program in place. As a team we do work together. They give us iPads now, not books, because members used to throw the budget books at each other, I heard. They give us iPads so we behave—in a sense.

**Mrs LAMBLEY:** You can still throw an iPad.

**Ms FYLES:** I can assure you that we do not throw iPads. As I have taught my children, they are very expensive.

**Mrs LAMBLEY:** That was eight years ago; you have a fabulous memory.

**Mr DEPUTY CHAIR:** Member for Araluen, please allow the minister to answer the questions, as humorous as it is.

**Ms FYLES:** The Attorney-General is looking forward—we have given her a heads-up that the question is coming. I am sure she will answer that for you this afternoon under the correct budget output.

**Mrs LAMBLEY:** You do not want to talk about cuts in alcohol rehabilitation beds ...

**Ms FYLES:** I could talk about CLP cuts to health services, which you made, but you probably do not want to talk about those either.

**Mrs LAMBLEY:** ... and cuts to rehabilitation treatment options across the Northern Territory. The minister for alcohol services does not want to talk about those cuts. In fact, this government does not want to talk about any cuts, from my experience.

**Mr DEPUTY CHAIR:** Member for Araluen, can we please get to the question? Are there any more questions?

**Mrs LAMBLEY:** That is all I have.

**Mr DEPUTY CHAIR:** This concludes consideration of Output 3.1.

### **Output 3.2 – Mental Health**

**Mr DEPUTY CHAIR:** I now call for questions on 3.2, Mental Health.

**Mr YAN:** Most of the mental health questions have been answered earlier. I just have one more. It relates to FASD and trauma. I have been doing quite a bit of research lately on how trauma can affect an individual and how that trauma can then lead to passing on of tendencies to certain things to offspring. To address this—and it can be reversed, and there are studies that go back to the American Civil War and to people held in concentration camps in Germany during the Second World War that identify these issues.

One of the things in mental health—I know this from my previous experience—is that cognitive behavioural therapy is like our bread and butter for solving many issues. It is about making the right decisions and making the right choices. We probably do not have enough cognitive behavioural therapy treatment in the Territory.

Based on this knowledge about the prevalence for issues to be transferred through the genome and RNA of people, are you considering looking at increases in CBT across the Territory and in the future?

**Ms FYLES:** It is great to hear that you have a passion. It would be something clinical and so I would not be able to provide you with commentary today. Certainly, there is emerging evidence on this and I would be happy to offer a briefing and you could hear thoughts from clinicians.

**Mr YAN:** I would be happy to receive a briefing, thank you. I have no further questions on that output. I think we covered everything earlier.

**Mr DEPUTY CHAIR:** That concludes consideration of Output 3.2 and Output Group 3.0.

## **OUTPUT GROUP 4.0 – NATIONAL CRITICAL CARE AND TRAUMA RESPONSE**

### **Output 4.1 – National Critical Care and Trauma Response**

**Mr DEPUTY CHAIR:** I think we covered Output Group 4.0 under Professor Notraras. Are there any other questions we would like to come back to?

That concludes consideration of Output Group 4.0.

## **OUTPUT GROUP 5.0 – HEALTH SERVICES**

### **Output 5.1 – Top End and Central Australia Health Services**

**Mr DEPUTY CHAIR:** The committee will now proceed to Output Group 5.0, Health Services, Output 5.1, Top End and Central Australia Health Services. Are there any questions?

**Mr YAN:** What are the current overtime costs carried out by clinical staff at the Northern Territory's five main hospitals?

**Ms FYLES:** Michelle McKay from Top End Health Service will join us at the table; we also have Naomi from Alice Springs Hospital.

This has been a specific focus for us, and the work under Professor Stoddart is to reduce the need for overtime and also for agency staffing costs. We see this as a way to drive the health dollar further. The department had done a lot of work on the two health services over the last couple of years. For quite some time we have not had to rely on agency staff at high cost and high unreliability.

As I spoke about earlier, some staff in remote clinics work for an agency. Sometimes we can get them and sometimes we cannot. When they are our teams we can plan better. For some specialised staffing we have



had to utilise agency staff but we have done a lot of work to step away from agency staff and the overtime which throws the budget. That is the work you can see in the Health budget coming back.

I do not have a specific figure. There was some information in the written questions for you, but specifically on overtime, Michelle can provide information for you. It is a difficult question to answer.

**Ms McKAY:** I was entering the room so I heard part of what the minister said. We avoid, where we can, overtime for our staff. It obviously increases opportunity for fatigue, which is not something we are keen to do. We do as much as we can to recruit and roster our staff so that it is not needed. However, on occasion it will be so that we can ensure that services are provided and are safe.

In terms of a particular figure, I do not have that available right now but we could take it on notice.

**Mr YAN:** I would like to put the question on notice. I know that agencies record their overtime religiously.

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### Question on Notice No 5.5

**Mr DEPUTY CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** What are the current overtime costs carried out by clinical staff at the Northern Territory's five main hospitals?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms FYLES:** It is an enormous amount of work. We are happy to provide that. The work we have done getting sections of Health to stick to their budget and shifting away from reliance on agency staff to have better planning—when we see lists build up to do a blitz on that specific area to work with their colleagues. This past year is difficult because we had the COVID impact so there was a huge gap where there were no services.

We had a situation back in March-April when the private hospital was taken over and they cancelled their surgeries. We will provide what we think is reasonable but I am not going to have the agency chasing down burrows. That overall global figure of health and budget is important and the work done within that is very operational. We will provide information and we are happy to provide a briefing to the shadow minister.

**Mr DEPUTY CHAIR:** The question asked by the Member for Namatjira has been allocated number 5.5.

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**Mr YAN:** Recently, I was lucky enough to get a walk around RDH and spend some time in A&E. I was very impressed with the staff in particular. What plans are in place to upgrade and improve A&E facilities at RDH?

**Ms FYLES:** The Royal Darwin Hospital and Alice Springs Hospital emergency departments have seen significant upgrades in recent years. Presently the ED at RDH is running as two emergency departments; I spoke about this earlier. Someone like me, although we all know I am COVID negative, would present with my slightly scratchy throat and be treated as COVID positive. Essentially running two EDs within that one ED has put pressure on our emergency department.

Hopefully, once the vaccine rolls out in the post-COVID world we are all looking forward to, there will be a shift back to normal operating procedures. One area that puts enormous pressure on the emergency department at RDH is mental health, which is why that investment in the transition unit is so important.

I have been to the ED; I have two small children who like to add extra burden to the health system even though I am constantly telling them it would be embarrassing for me to take them to the hospital when they do silly things. In all seriousness, having that transition unit with the mental health beds and getting the flow-through of ED—often we see the solution as potentially. I think the figures we have seen in recent times do not truly reflect the emergency department operations because we are running in a COVID environment.

It is not necessarily about more emergency department beds. Emergency is your gateway into the hospital in an emergency situation. It is the flow-through within the hospital. An enormous amount of work has been done by Michelle and her team to have bed availability. This is why we want to try to keep people out of hospital and, when they do get into hospital, we need all those resources focused so that the length of stay is as short as possible so that beds are available.

We acknowledge the mental health pressure on ED; that was there before COVID. That is why the work in the mental health space is so important as well. I am not sure if you think we should build a new ED? I am not sure where that has come from. It is not something that has been raised with me by the clinicians specifically. We have the Palmerston ED, which is relatively new and that operates as a part of the Royal Darwin Hospital ED.

**Mr YAN:** You are saying that there are no specific plans to upgrade or improve the A&E at RDH?

**Ms FYLES:** I wonder where the question is coming from, because it is a relatively new facility. It is one of the busiest emergency departments in the country. We acknowledge that. The Palmerston ED has alleviated some pressure. It is not necessarily about extra capacity within the emergency department. I point to two instances: the bed flow-through in the main hospital; and the pressures that mental health applies on ED.

I am happy if you can provide some basis for the question to perhaps delve into it.

**Mr YAN:** Minister, on my recent visit there, there were two people in a cubicle. The privacy and possible transference of disease—or whatever it happens to be—between patients is critical. I have not seen that before and I have spent quite a bit of time in hospitals. I am accident prone and so are my children. I have spent a lot of time in hospitals over the years. Rarely—or I could say never until I went to the A&E at RDH—have I seen the conditions the staff were dealing with, with two patients in one cubicle with one set of machinery—that is, suction, oxygen—for one patient. That was a little confronting for me, so that is why I raised the question.

**Ms FYLES:** We work intensively. I meet regularly with the college of emergency department doctors. The points you are talking to are about access to beds. They are access to care within the hospital. There are a number of systems. We have RAPU and identify that, we can bring some people into EMU, deal with them quickly and get them back out the door. We put the CT scanner in the emergency department to help with diagnosis so it can be quicker.

The issue you are talking about—the ED is, basically, the boarding lounge for the hospital. It is not necessarily about the ED, it is about the flow-through in the hospital. That is a body of work we have been undertaking, to look at the flow-through and make better availability. When you have people sitting around in a bed waiting for a script or a discharge letter—how can we speed that up? That three or four hours here or there suddenly becomes 12 or 24 hours until there is more bed availability.

I will get Michelle to provide information. Simply throwing in more ED beds is not necessarily the answer. It is about the resources behind the ED we need to invest in. That is the work we are undertaking.

**Ms McKAY:** The staff of the Royal Darwin Hospital have been very focused for much of this year on the COVID-19 response that you have heard about extensively, but also on strategies to improve flow within the hospital.

We are very fortunate to have great clinicians across our services. They are working very hard together on how to improve flow through the hospital. Largely, in the points the minister made, there are different models of care at the front door so people may be able to avoid a traditional inpatient bed altogether or their length of stay and flow through the hospital can be decreased safely to ensure we bring people up from the emergency department.

An important change made in the last couple of months is a daily hospital huddle. It involves all our lead clinicians looking at expected patients coming in for the day, the number being discharged and how they need to work together effectively to make sure that the time for people waiting on a bed is decreased as much as is possible.

**Mr YAN:** From this line of questioning, I would like to be able to provide some clarity to Territorians, particularly those in Darwin who are accessing RDH, that there are some processes in place behind the scenes to reduce this issue we are seeing in A&E. It is not an ideal environment for patients. It is certainly not an ideal environment for staff. I would like to be able to go back to those people and say that there will be something taking place and we will see an alleviation of the issues we are currently seeing.

**Ms FYLES:** There are some key points. At the moment, there are essentially two. There is respiratory and non-respiratory as you enter the emergency department. We have identified some factors in bed flow-through in the main hospital, but also mental health that puts additional pressure on our emergency department.

It is also looking at policies that stop people from having car accidents, stopping alcohol-related abuse and assaults and those types of things. It is people taking care of themselves. It is a range of factors.

We need to make sure there is investment across the Health budget and community to keep people safe and keep them out of needing acute care. It is investment into primary healthcare and the Territory kidney program to monitor renal disease so we do not see someone in the middle of the night needing to be evacuated or needing an ambulance ride to hospital.

That is why it is important that we work strongly with the PHN, which provides the primary healthcare services. It is complex, there is not just one simple answer that will solve these issues. It is a lot of work and that work is being undertaken. We have an evidence-based approach and are listening and working with our clinicians and the ideas that they have.

There is certainly an opportunity, I think. Michelle and the team at Top End Health Service have done a great job in looking at the entrenched activities and culture that has been there for many years and challenging it. That is the positive opportunity from COVID to change the way we do things. I appreciate the question.

**Mr CHAIR:** Members, it is 12 pm, we will break for lunch and return at 12.30 pm.

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The committee suspended.

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**Mr CHAIR:** Welcome back. We are proceeding with Output Group 5.0, Output 5.1 Top End and Central Australia Health Services.

**Mr YAN:** Minister, can you advise on the RDH and the ASH master planning? When can we expect to see the results of that master plan?

**Ms FYLES:** We have done work on clinical service planning, looking at the clinical needs of the population of the Northern Territory. I spoke earlier about the prediction of around 300 additional renal patients by 2023. Once we did the clinical planning, we did master planning work for Alice Springs and Royal Darwin Hospitals.

We have seen significant investment in both hospitals over many years by all sorts of governments—Commonwealth and Territory of all persuasions—so it needed to be a coordinated approach. The main tower at Royal Darwin Hospital is about 40 years old, but there has been investment in other areas. We are doing that planning ourselves. We put in the PET scanner, expanded the chemotherapy chairs and are working in the area of mental health.

The document is with the department and Cabinet at the moment. In regard to releasing an overall plan—it is a strategic infrastructure plan which will present investment opportunities over the next 20 years. It matches the clinical service plan. There are master plan reports for Darwin and Alice Springs as well as Katherine, Gove and Tennant Creek. There is also NT Health remote infrastructure baseline planning.

This is making sure we have the plans and can identify what infrastructure investment we might need over time. It not only provides for potential new infrastructure and clinical needs, but also a maintenance plan so they can maintain those capabilities. It is important operational work that the Department of Health and DIPL have a centralised model with.

The work is well under way, and we will continue to see investment from this government into health and our hospitals.

**Mr COSTA:** Minister, as you know, I am passionate about Aboriginal health workers. Since I have been travelling my electorate, a lot of Aboriginal health workers have come up to me to inquire about their wages. Some of these mob are currently studying and have been doing Aboriginal health work for a number of years, but their pay has stayed at the same rate. They keep asking, 'When do we go up to the next increment?'

It is also to do with their contracts. Some Aboriginal health workers have been working for four or five years, but they only get a six-month contract. It is probably happening across the Territory, but it is something we need to fix. I at least advocate on their behalf. Instead of having a six-month contract to renew every six months, what they would like is a full-time contract, which they are probably entitled to depending on their qualifications, so that they can go for a home loan and that type of stuff.

I am advocating on their behalf in regard to what we can do to fix it and make things better for Aboriginal health workers. When I visit my electorate I see young Aboriginal health workers doing the administration and driving patients to and from. In order for them to go to the next level to become a registered Aboriginal health worker they have to study. That is the question out there. They feel deflated that they are on the same wage or salary. That is a question to you, minister, and your staff.

**Ms FYLES:** I acknowledge your leadership in the Aboriginal health space, the work you have done and that you continue to advocate. We believe in community control and Aboriginal people deciding upon and providing health services. We have professionalised Aboriginal health workers with a career structure. There are opportunities for study. We have signed up to an enterprise bargaining agreement through the union with Aboriginal health workers. This occurred last year and provided opportunity to have a pay structure.

NT health supports the NT public sector Aboriginal Employment and Career Development Strategy. There was a refresh for 2015–20 and has specific strategies to work towards the target of 16% Aboriginal workforce and 10% Aboriginal representation in senior roles. We have the continuation of special measures in recruitment and it applies to all advertised positions.

NT Health employs 24 Aboriginal school-based and four full time trainees to undertake vocational education training qualifications. We have supported 11 Aboriginal employees to undertake the Aboriginal employment development program and the final cadet supported by the co-funded Indigenous cadetship, who graduated from a Bachelor of Nursing, is now employed within the Top End Health Service as a registered nurse. We have implemented a self-funded and managed NT Health Aboriginal Cadetship Program and we are supporting two cadets.

We implemented a scholarship scheme which provides financial incentive and vacation employment for Aboriginal students undertaking their first year of an undergraduate health degree. This is linked to a job skills shortage. There are scholarships for students studying a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Healthcare Practice.

The completion of the pilot program is a pathway for Aboriginal and Torres Strait Islander primary healthcare and is bridging the gap for Aboriginals with lower levels of literacy and numeracy to a higher level of Aboriginal and Torres Strait Islander primary healthcare studies. Five graduates received a Certificate I in Skills for Vocational Pathway and four graduates received a Certificate II.

We are funding the NT Aboriginal Health Academy program with eight students completing in December 2019 and six students successfully awarded a Certificate II in Allied Assistance within their Year 12 certificate. We will continue to coordinate the Aboriginal and Torres Strait Islander Health Worker and Practitioner Excellence Awards. Last week I hosted that at Parliament House. It recognises the profession, an honour roll and student awards. It professionalises and provides opportunities and pathways.

The enterprise bargaining agreement I spoke of was the inaugural one. It professionalises it and has a clear pay structure for anyone working. It will provide support to upskill and develop all Aboriginal employees. I was at Pine Creek clinic recently and there was a story of a young person who had been the clinic driver and graduated into being an Aboriginal health worker and practitioner.

As part of our overall strategic role for having services and care close to home there is a role for Aboriginal leadership. If an individual feels they are rolling from contract to contract, they should reach out to their manager, union or corporate services—if they do not feel comfortable talking to their manager—because there should be a pathway and be able to understand if their role is permanent. Some positions are casual but there may be the ability to make them permanent.

Workers from community should be afforded the same supports as someone who might fly in to deliver a service. If we grow our own, which is what the programs aim for, they will stay in the Territory and in those communities.

**Mrs LAMBLEY:** I put a question about the 10-year Top End aeromedical retrieval contract which is, I believe, about to expire. It is up for renewal. I distinctly remember 10 years ago in estimates the whole of the Health section of estimates which went for hours was all about this highly-controversial tender. It is one of the biggest, if not the biggest in the Northern Territory Government, maybe not now, but it was then. It is always of great interest, not just for Top Enders but for people across the Northern Territory.

When will the tender be advertised? How will this major tender be managed and determined?

**Ms FYLES:** Since commencing the role as Minister for Health in 2016, I have a declared conflict of interest for any matters relating to CareFlight. In my first term, Minister Manison handled any relevant briefings and decisions. This term there is a formal arrangement by memo with the Chief Minister to declare that conflict, and he is the responsible minister to undertake any briefings or decisions relating to CareFlight.

I clearly articulate this position to anyone in the public. It is because my partner is a pilot for CareFlight. I will hand to the Chief Executive and move back from the table, if that is appropriate.

**Professor STODDART:** The Top End medical retrieval service contract commenced on 1 January 2013 for a period of 10 years. It is a contract service that looks at overall aeromedical management, clinical services, high and low acuity fixed-wing and helicopter services, engineering and logistics. It is fully funded through the Northern Territory.

The budget allocation for the 2019–20 year we are talking about was \$37.8m, with an actual expenditure of nearly \$38m.

It has four major agreements. We are talking about hitting the halfway mark, as you say, in 2018. We have a service agreement for the provision of fixed-wing services and one for rotary-wing services. We also have a tripartite agreement which involves the NT Government, Westpac and CareFlight and a multiparty agreement with the airport. It is a complicated structure, like many of these things.

The aircraft agreement and the hangar lease provides steps in rights to the NT Government that can take over should there not be an extension. Management of the contract is quite robust. In that process we have an assessment and review point that has happened at the five-year mark. We continue to do that. Obviously, we will continue the agreement for the period of 10 years. I hope that answers your question.

**Mrs LAMBLEY:** What you said before, minister, is the first time I have ever heard you declare your interest. I have been listening to you intently for four years. I thank you for that declaration of your interest.

**Ms FYLES:** To reiterate, Member for Araluen, there was a formal arrangement in place in the last term. Even if I will be talking to someone unrelated, I let them know he is a pilot there so people feel comfortable. There is nothing more awkward than walking away from a meeting. The chief executive knows that. I also have spoken to other stakeholders so they know and can go to another minister about this to make sure there is no perceived conflict. I work hard to make sure there is no conflict, but even the perception is important to me.

**Mrs LAMBLEY:** We are just halfway?

**Professor STODDART:** Just over halfway, as 2023 is the end of the 10-year contract.

**Mrs LAMBLEY:** But it was determined well before January 2013, I recall. Anyway, it does not matter if it is just halfway. I was of a mind that it was closer to finalisation.

**Professor STODDART:** It is about seven years in. It is a very long process of review because we want to reshape whatever contract we have to manage what is a contemporary aeromedical service. That will take some time. We have commenced some of those processes, looking at what contemporary models are.

**Mrs LAMBLEY:** When will you start tendering?

**Professor STODDART:** It is approximately two years out from that process. We are not far off—next year.

**Mrs LAMBLEY:** Thank you.

**Professor STODDART:** I would also like to comment on the record that any briefings, et cetera related to CareFlight go through another minister from our office. We are very clear that is the process we follow; it has always been the case.

**Mr CHAIR:** That concludes consideration of Output Group 5.0.

**OUTPUT GROUP 6.0 – CORPORATE AND SHARED SERVICES**  
**Output 6.1 – Corporate and Governance**

**Mr CHAIR:** The committee will now move onto Output Group 6.0, Corporate and Shared Services, Output Group 6.1, Corporate and Governance. Are there any questions?

**Mr YAN:** I note there are significant changes in the budget line here from last financial year to this financial year. I take it that is the move under the MoG changes. In effect, how many FTEs have been transferred out of Health under these changes?

**Ms FYLES:** Can you specifically reference which budget line?

**Mr YAN:** Sorry that is \$31m in 2019–20 and \$6.894m in this financial year: Corporate Shared Services 6.1.

**Ms FYLES:** Yes, the Corporate and Shared Services centralisation. Some staff went across to DIPL, for example. If it was infrastructure, some staff went to the old DCIS et cetera, so you are correct in that assumption.

I do not have the FTE at hand. I have some figures but we will take that FTE on notice. We are happy to provide that to you.

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**Question on Notice No 5.6**

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** How many FTEs have been transferred out of Health under the MoG changes?

**Mr CHAIR:** Minister, do you accept the question?

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated the number 5.6.

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**Mr YAN:** Minister, what budget has been allocated for the Patient Assistance Travel Scheme for those in the Top End and Central Australia?

**Ms FYLES:** The Patient Assistance Travel Scheme supports people who need to travel into an urban area to get medical treatment, or alternatively travel interstate from the Northern Territory. I know that there was a review done in recent years on that service. It is designed to assist patients. It does not cover all their costs; we certainly acknowledge that. There is sometimes commentary on the distances that someone must be from a service and the fact the inconvenience and cost to an individual, but they may not be eligible for that scheme.

In this year's budget we did not utilise the full amount because of COVID. With the biosecurity measures, people were unable to travel into the urban areas and equally people were unable to travel interstate at some points. Measures were in place for emergency situations that were worked through. In terms of the actual budget, we do not have a specific level, but happy to take that question on notice.

It is important with patient travel to note that this is an area we have working on. It is an area of complaint. Some people feel frustrated they were not supported as much as they could have been. The bookings—obviously we need the clinical appointments in place. Some people feel their travel can be booked well ahead of time so they know their plans, but we are still waiting for confirmation on appointments. It is a complex area.

We have a budget allocation but, of course, if we are delivering those services and go beyond that, we will do that, it is not a hard-and-fast figure. I have some figures. I will read these and see if helps—no, I will take the question on notice, if you can provide any specific areas of breakdown, such as Top End, Central Australia, intrastate or interstate. Perhaps we can provide some information and if you would like further information on patient travel, we can provide a briefing.

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**Question on Notice No 5.7**

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** What budget has been allocated for the Patient Assistance Travel Scheme for those in the Top End and Central Australia, and can I have a breakdown within those regions of which are intra and interstate?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes, we will endeavour to get that information.

**Mr CHAIR:** The question asked by the Member for Namatjira is allocated the number 5.7.

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**Mr YAN:** Minister, I note that you said that sometimes these budgets go over. Historically, do we see a regular overrun on the budgets for the Patient Assistance Travel Scheme?

**Ms FYLES:** Not this year, with COVID-19. It is a difficult scheme because it does not fully cover the costs for an individual heading into an area for treatment. We try to provide that support and for accompanying people. There are different hostels in the Territory and interstate that can provide accommodation for an individual or family if receiving treatment.

We have some time frames around that treatment. If someone is interstate for 12 months, they generally cannot get PATS beyond that, but sometimes people need that assistance. We try to be as compassionate about that as we can. That comes back to your question on the budget. There is an allocation—it is taxpayer dollars, so we need to be respectful of that, but we also need an element of compassion. A population of 250,000-odd people—we have amazing services here. We can both personally speak to that. At times people need to access treatment options away from the Territory or within the Territory but away from home, so we try to provide that support.

We listen to clinicians as well. For example, if a young child is involved—generally the rule of thumb is just one person accompanying them, but at different times they will allow for other family members. This comes back to the digital strategy and telehealth. If we can keep people from having to travel, and only make travel for specific appointments, it allows the budget to go further. We saw through COVID the innovation—assessments you previously had to go interstate or to Alice Springs for. All of a sudden there was a bit of innovation and we could have professionals working with someone in a clinic providing information back to the other clinical professional, avoiding the need for travel.

For all the members here today, and those listening in and representing their communities, it is a difficult space but the department tries to be as fair as possible when allocating that.

**Mr CHAIR:** That concludes Output 6.1.

**Output 6.2 – Shared Services Received**

**Mr CHAIR:** The committee will now consider Output 6.2, Shared Services Received. Are there any questions?

That concludes Output 6.2.

**Output 6.3 – Shared Services Provided**

**Mr CHAIR:** The committee will now consider Output 6.3, Shared Services Provided. Are there any questions?

That concludes Output 6.3 and Output Group 6.0. Are there any non-output specific budget-related questions?

The committee will move on to consider the Top End Health Services budget line.

### TOP END HEALTH SERVICE

**Mr CHAIR:** Minister, I invite you to introduce any officials accompanying you and to make an opening statement regarding Top End hospitals.

**Ms FYLES:** Thank you, Mr Chair. Michelle McKay, Chief Operating Officer for the Top End Health Service has again joined us at the table.

**Mr CHAIR:** Would you like to provide an opening statement?

**Ms FYLES:** In the interests of time, I am happy to go straight to outputs.

### OUTPUT GROUP 7.0 – TOP END HOSPITALS

**Mr CHAIR:** Interestingly, Top End Hospital's outputs is not in front of me. Are there any questions?

**Mr YAN:** We have asked a lot of questions on Top End hospitals already. I have a few specific FTE questions. At RDH what are your FTEs today, or at your latest assessment, and how does this compare with 2019? I am happy to take those on notice.

**Ms FYLES:** We have the information here. I am just getting it to hand.

**Mr YAN:** I have a few more as well.

**Ms FYLES:** I have them as Top End Health Service not hospital. Did you ask Top End Health Service?

**Mr YAN:** Hospitals actually, yes.

**Ms FYLES:** The pay period 26 on 30 June 2019 in the Top End Health Service there was the full-time equivalent of 4612.25. Then the March 2020, pay period 19, are not quite an exact replication but fairly close. It was 4729.

**Mr YAN:** In effect, for the Darwin hospital, if every position was filled—if you filled every FTE component what would ...

**Ms FYLES:** They are all filled.

**Mr YAN:** Are they? What would your staffing be if all your positions were filled?

**Ms FYLES:** It is tricky when you say the Darwin hospital. Do you mean the main tower, palliative care, mental health—there are a number of services based on the hospital campus. There are people who presently work at the Palmerston Regional Hospital. Royal Darwin is one hospital but two locations. It is ever-changing. Was there something specific in terms of casuals that we can try to help you get information?

**Mr YAN:** I was trying to get how many FTEs at the Darwin hospital and the Palmerston hospital and just checking to make sure that positions are filled or are there any gaps?

**Ms FYLES:** We can talk to recruitment, the work that has been done on stepping away from a casual workforce. I will hand to Michelle. She will provide some explanation and you can jump in with questions.

**Ms McKAY:** We have focused a great deal this year and over the past years on recruitment and retention of our staff. The minister spoke earlier about moving away from agency nurses at the Royal Darwin Hospital, as a specific example, and that we are employing people rather than via an agency. We have not needed to use agency staff at the Royal Darwin Hospital for many months now as a result of that strategy.

Exact numbers are a little difficult because of the mix of staff that we use, including full-time, part-time and casual. We talked a little earlier about overtime and how FTEs are calculated. As a general point, through this year we have had quite an interesting recruitment mix because of the COVID restrictions and the inability of people to join us from interstate, either on short-term arrangements or to move here. Equally, we had the reverse where people who live interstate chose to stay with us for longer than their current contract. We have had a degree of variability this year which has been COVID-19 affected.



Getting exact FTEs for each of the different sites and service groups is a challenge, but we can get you some information that might be of assistance.

**Mr YAN:** I am happy with the figures you have provided for Top End Health across the board. That includes Katherine hospital?

**Ms FYLES:** Yes.

**Mr YAN:** Thank you. I request the same figures for Central Australia.

**Ms FYLES:** Remote area nursing positions are sometimes difficult to fill as well as mental health nursing positions. These are focus points for us.

In terms of highly specialised areas, we have wonderful clinicians within our hospitals who are part of professional bodies and colleges. They use telehealth.

We have seen innovation. The plastic surgeons have a rotation where interstate plastic surgeons are coming to the Territory for a period of time with their families. They are working alongside our surgeons and plastic surgeons to develop their skills. This forms a relationship so when there is an interesting or complex case, they can speak with them. It gives them some professional development.

There is innovation from within the colleges and bodies of medicine to allow for—this is not specific to the Northern Territory, but our regional and remote areas. It comes back to the point the chief executive made earlier regarding funding from the federal government for rural generalist positions. A generalist is someone who has a general skillset and for specialised complex cases may need support. Can they be supported remotely? Or can we utilise resources that come in for a period of time? It can range from a week to go through a list to a period of two or three months where they may relocate their family and enjoy our lifestyle.

Coming back to the integrated model across the Territory, there is specialisation in Alice Springs Hospital such that if they came for a period of time to the Top End it would help us get through lists. We are working through the resources needed and utilising the Palmerston Regional Hospital. We are making sure there is the best clinical care and at the same time getting the most out of every dollar.

**Mr YAN:** I will move to aged care. What outcomes have been realised in attracting private investment into aged care facilities across the Top End?

**Ms FYLES:** Aged care is the domain of the Commonwealth Government. The Minister for Seniors would best answer that. The department of Business has been looking at work regarding accommodation but I am not sure.

**Mr YAN:** I note an output of \$5.561m for aged care within health.

**Ms FYLES:** The Aged Care Assessment Team does the assessments. We are funded by the Commonwealth to do that.

**Mr YAN:** Thank you. The health annual report stated that your department will develop an NT ageing policy. Can you provide an update on its progress?

**Ms FYLES:** If you want to move on to your next question, we can come back to that. We just need some information we do not quite have at hand.

**Mr YAN:** Sure. I will move on to primary healthcare. I notice in recent media that we have lost private speech pathology capacity in Darwin. How many speech pathologists are currently in operation within the public system?

**Ms FYLES:** If the recent media that you are thinking of is what I am aware of ...

**Mr YAN:** The private hospital. Sorry, it was a private clinic, I believe.

**Ms FYLES:** My understanding is that an individual has relocated to Katherine and they will continue to offer their services in Katherine. Other providers—and this is mainly shaped by the NDIS—are now offering those services. Carpentaria pops to mind; it is offering more speech pathology services.

I will get some information on the services. They are provided through the child development team in the Top End—pre-NDIS perhaps. Then Territorians access the NDIS. We spoke before about the over \$100m investment that the Northern Territory Government puts into the NDIS, then Territorians access services. They can choose which services they access and where they are located.

I raised with the Commonwealth, when I held that ministerial portfolio, about what they refer to as 'thin markets', and how we can support providers to provide those services across the Territory. Sometimes Alice Springs and Darwin can have enough of a base of market to provide a service.

Speech pathologist are generally offered through the Top End Health Service for adults, but it is mainly in the child development team space. An individual would transition to an NDIS plan if they need it.

**Mr YAN:** Are those speech pathologists FTEs of Health, or ...

**Ms FYLES:** The one you were just speaking about?

**Mr YAN:** No, I am not worried about the one who has relocated. Does the Territory have any speech pathologists on its books?

**Ms FYLES:** Yes, we absolutely have a team of allied health specialists. They would work, for example, in Palmerston hospital in the rehabilitation ward. We can take that on notice and get you an answer about speech pathologists. But it is also important to note that it is a service provided mainly through the NDIS. We have seen growth, which we know of. We know of people who have gone to those positions. We do not have specific oversight. Definitely, the service providers who work within the NDIS have recently increased their services to Territorians.

That is not just for speech pathologists, but occupational therapists and a range of those allied health professionals.

We have about 240 FTE who are speech pathologists—or allied health, sorry.

**Mr YAN:** Have we had any luck on the report?

**Ms FYLES:** Yes. Territory Families is currently finalising the NT Seniors policy: the key social policy document for older Territorians. It will be released in 2020–21. It includes references to accessible health services.

Our annual report includes a commitment for the Department of Health to develop a policy which focuses on making services provided by NT Health more accessible to older Territorians. We will develop this policy. It will be informed by the release of the findings of the Royal Commission into Aged Care Quality and Safety, which is, I think, at this point touted for February 2021. The preliminary findings of the Royal Commission into Aged Care Quality and Safety highlight the need to improve the interface between health services and ageing and care services. That is the reference in our annual report where Territory Families is taking the lead on the policy work.

**Mr TURNER:** Something important to my electorate, which has been discussed, is the Palmerston Regional Hospital. As do the Member for Namatjira and you, I have lots of young children and I am a regular customer at the Palmerston Regional Hospital.

There are frequent questions from my electorate regarding the service rollout at PRH. Could you please let us know over the foreseeable future what services are going to be rolled out at PRH?

**Ms FYLES:** The Royal Darwin Hospital operates as the Top End's specialist tertiary hospital. Palmerston Regional Hospital offers low acuity services. From a technical point of view, we manage them as one hospital over two campuses. Patients needing critical or emergency surgical care are stabilised at Palmerston Regional Hospital and transferred to RDH.

We were proud to deliver Palmerston Regional Hospital. It was talked about by a lot of people; a few holes were dug, a few holes covered in and there was a lot of media hype. I note Professor Catherine Stoddart's leadership. When delivered, it was the first new hospital in nearly 40 years. It has an emergency department with 22 acute bays and eight extended emergency beds. There were over 30,000 presentations in 2019–20.

The general medical ward has 24 inpatient beds, which has increased by four beds since earlier this year. It has the Geriatric Evaluation and Management unit, or GEM as it is more commonly referred to. This unit has 24 inpatient beds with eight being secure. It has a rehabilitation ward with 24 inpatient beds and a 20-bed interim-care ward, which was opened in April. This ward is for long-stay medical patients who may be awaiting placement in other locations. It has elective surgery, which caters for two surgical lists and four overnight beds in a medical ward.

In terms of maternity services, prenatal and antenatal medical services and clinics are offered at the Palmerston Regional Hospital. There are also a number of outpatient clinics including surgical, medical, gynaecological, paediatric, pre-admission and rehabilitation. There are now eight chairs for the renal unit located at Palmerston Regional Hospital.

We are doing work to plan and recruit surgical staff to relocate some of the elective surgery medical procedure unit from RDH to Palmerston. That would see further available beds. We are looking at a 48-hour model of care there which would include surgical patients who might need a couple days of follow-up care. Having spoken to the surgeons, they are excited about that opportunity and to get more theatre time. We are getting the nursing staff who would support them.

We added the hydrotherapy pool, which opened in June 2019. It is available for inpatients and rehabilitation outpatients to receive care. There is a working group to review service delivery models so we can maximise the utilisation and expand access to community groups, this regards the pool specifically.

There is lots happening at the hospital and it has been a fantastic addition to Royal Darwin Hospital. For people in Palmerston and the rural area it is care closer to home and takes pressure off Royal Darwin Hospital. Everything is delivered in a clinically appropriate manner.

**Mr TURNER:** Something else that comes up regularly in my electorate is the Alan Walker Cancer Care Centre. Can you please update us on how the expansion of that is helping Territorians?

**Ms FYLES:** We delivered the PET scanner for Royal Darwin Hospital and have expanded the Alan Walker Cancer Care Centre. A decade ago, this centre was established; prior to that people had to travel interstate or receive oncology services within the main tower of RDH. We expanded the service and provided an upgrade to a more inviting place to receive treatment.

In February 2019, an additional 12 chemotherapy chairs were established in the Alan Walker Cancer Care Centre. Eight of those chairs are now open and four more will open, with funding already provided to see this occur. It will accommodate an extra 300 patients per year.

We are also able to participate in a number of clinical trials. The expansion of the new chemotherapy chairs, the waiting area, the treatment room, consulting rooms, medication room and additional supports allowed that.

I was there recently for the first breast cancer clinical trial for us to participate in; we announced that just a couple of weeks ago. That is great, because previously patients who may be eligible for a clinical trial had to choose between receiving mainstream treatment in the Top End, or at one of the outreach clinics, or had to choose to pack up their lives and travel interstate.

Clinical trials, as we know, are for when someone has an advanced state of cancer. We were really proud to deliver the extra chemotherapy chairs and the funding that goes along with the supports. Through telemedicine our clinicians can work with world leaders and Territorians can get access to innovative clinical trials that can extend their quality of life for as long as possible.

We were pleased to celebrate the 10-year anniversary of the Alan Walker centre with all the staff and acknowledge all their efforts particularly during COVID, a difficult time to have to deliver and receive cancer treatment.

**Mr COSTA:** Minister, can you give us an update on the Nightcliff Renal Unit, how it is being utilised now and all that stuff?

**Ms FYLES:** I remember I spoke a little earlier about the Nightcliff Renal Unit. We completely rebuilt the unit; it was an old centre that was once a maternal health clinic. It was very ad hoc in its design. Sadly, the number of Territorians who need renal treatment is growing at a rate of around 6% per annum. The renal unit cost \$10.5m to be completely rebuilt, providing a modern area for staff to work in and for patients to receive

treatment. It was an enormous effort to rebuild on the same site, while at the same time providing clinical care and life-saving clinical care. I acknowledge all involved in that. We will continue to make sure we have renal services that match that sadly growing need.

**Mr GUYULA:** My question is on alcohol and drugs. Minister, what has been provided in this budget to allow people to attend drug and alcohol rehab on country? I would like to see a centre in my region so that we can truly start and address the issues for the people with addictions? This is a fair and cheaper option than urban centres and we will get better outcomes for people to be healed on country with their own elders.

**Ms FYLES:** We were talking, I think before the luncheon break, about the significant impact of alcohol and other drugs. I know that some of your communities have already been impacted by that.

The Department of Health has funded a youth volatile substance abuse and alcohol and other drugs community drive response, being led by Miwatj and the Arnhem Land Progress Aboriginal Corporation, ALPA, for a substantial increase in local community-based staff.

We need all the service providers working together and sharing their expertise to address the needs of youth and their families. I acknowledge the tragic deaths of young people. Recent coronials highlighted the consequences where there have been gaps in services.

A review of the VSA clinical practice guidelines has been completed and plans are in place to implement key directions in the service development and workforce planning.

TEHS, Top End Health Services, has also undertaken an audit of clinician compliance with guidelines and is developing an urgent action plan to ensure full compliance and enhance clinical governance. That is specifically taking place in your community. Treatment can be mandated by a court. That is where someone may have had interaction with the justice system and can be offered a pathway alternative to imprisonment by treatment, but voluntary treatment is more frequent.

We have seen disruption this year through COVID. Travel to the remote communities has been disrupted.

In terms of residential rehabilitation services across the Territory, in Central Australia there is BushMob, which has a facility for young people 12 to 24 years of age; DASA has a service, Mount Theo; and in the Top End the CAPS service provides a program for young people in that age group as well.

The funding of community-based responses is important and I am happy to continue to work with you, Member for Mulka. I know this issue is important to your community members.

**Mr DEPUTY CHAIR:** That concludes consideration of Top End hospitals.

On behalf of the committee, I thank the officers who have provided advice to the minister today.

## **CENTRAL AUSTRALIA HEALTH SERVICE**

### **OUTPUT GROUP 8.0 – CENTRAL AUSTRALIA HOSPITALS**

**Mr DEPUTY CHAIR:** The committee will now consider the Central Australia Hospitals business line. I invite the minister to introduce the officials accompanying you and to make an opening statement regarding the Central Australia Hospitals.

**Ms FYLES:** Mr Deputy Chair, I introduce Ms Naomi Heinrich, who is head of Alice Springs Hospital. She joins me at the table. We provided an overview in our opening statements so, in the interests of time, I am happy to go straight to questions.

**Mr DEPUTY CHAIR:** The committee will now proceed to the set of questions regarding Central Australia hospitals.

**Mr YAN:** Minister, pardon my ignorance but could you explain what a weighted activity unit is?

**Ms FYLES:** I will to ask Naomi to do that.

**Ms HEINRICK:** A weighted activity unit is part of the activity-based funding model. It is how funding is provided to us through that unit measurement.

**Ms FYLES:** (Inaudible.)

**Mr YAN:** Thank you, no. I will leave it at that for now.

**Ms FYLES:** It is important though; it is how we get money out of the Commonwealth.

**Mr YAN:** I figured it was quite important. I said I will do a bit of a follow up because I read it through a number of the different papers.

I know that each agency is required to put in place 10-year plans on capital minor new works and R&M. What is the projected cost of R&M and other works at Alice Springs Hospital over the next 10 years?

**Ms FYLES:** That will be a question for DIPL about centralisation of those services.

**Mr YAN:** As I said, I am happy to pass it on to DIPL. I note a marked reduction in R&M funding. Of course, Alice Springs has some aging infrastructure. I would like to know what strategies are being implemented for R&M in the region.

**Ms FYLES:** In terms of repairs and maintenance, as we do works on remote communities and put in new clinics, obviously that decreases the need for R&M. We have seen a number of long-term projects in Central Australia. There was the Alice Springs Hospital hybrid operating theatre and the electrical upgrades. We make sure we put in our bids with DIPL about what needs to be upgraded. It is exciting at the Alice Springs Hospital with the multistorey car park and the ambulatory care.

Since I have been the minister, there have been significant upgrades. Even prior to me, there was the palliative care unit opening. There have been a number of upgrades—ED for example. It ebbs and flows; as new infrastructure is put in it might reduce repairs and maintenance. Equally, we make sure that things are kept in a safe manner.

**Mr YAN:** I will follow up with DIPL on some of those questions. As I asked for Top End hospitals, what are the current FTEs for Central Australia, which would include Barkly?

**Ms FYLES:** The Central Australian figures—that same pay period 30 June 2019, pay period 26—were 1,866.25 and the 31 March 2020, pay period 19, was 1,889.09.

**Mr YAN:** Nearly a full FTE. Are there any specific gaps in staffing components at the Alice Springs or Tennant Creek hospitals?

**Ms FYLES:** No, I am advised—apart from when I spoke earlier about some of that remote nursing. We have done a lot of work on shifting away from a reliance on agency nurses to our own resources and how we can have a more sustainable structure going forward.

I acknowledge the remote team based in Central Australia. They make an enormous effort in planning and making sure those clinics stay open and receive services throughout the year.

**Mr YAN:** Specifically for Alice Springs Hospital, how many beds are currently being used by aged care patients who would be better suited to an aged care facility? I know the continuous care ward holds significant numbers of these types of patients.

**Ms FYLES:** There are 208 beds in Alice Springs Hospital. The figure is approximate and may vary. There are about five beds used by people awaiting an aged care placement.

**Mr YAN:** I used to know the figure off the top of my head; I do not know it at the moment. What is the average cost of keeping a patient per day in hospital?

**Ms FYLES:** It would vary—where they are in the hospital, what treatment they are getting ...

**Mr YAN:** Just an average. I knew that there was an average cost per day for a patient in Alice Springs. If you could provide that figure that would be fine.

**Ms FYLES:** We will endeavour to provide that before the end.

**Mr CHAIR:** Minister, would you like to take it on notice?

**Ms FYLES:** Yes.

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**Question on Notice No 5.8**

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** What is the average cost per patient per day at the Alice Springs Hospital?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated number 5.8.

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**Mr CHAIR:** There being no further questions that concludes consideration of Central Australia Hospitals and all that related to the Department of Health. On behalf of the committee, minister, I thank you and the officers who have provided you advice today.

Professor Stoddart, thank you very much. Congratulations and good luck in whatever you are doing in 12 months' time.

The committee will now consider the minister's portfolios of Tourism and Hospitality, Major Events and Racing, Gaming and Licensing.

**Ms FYLES:** Before we conclude I acknowledge the efforts of staff today. It is an enormous effort to prepare all this information. We will endeavour to get timely responses to members on those questions. I acknowledge Professor Stoddart, her service to health in the Territory and I thank her. I acknowledge Ms Sue Korner from the Central Australia Health Service, who is retiring in a couple of weeks.

Across the Territory we have wonderful health professionals, clinicians and people who support them in administrative roles. There has been some changing of the guard but everyone's efforts during 2020 are appreciated.

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The committee suspended.

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**DEPARTMENT OF INDUSTRY, TOURISM AND TRADE**

**Mr CHAIR:** Minister, I welcome you and invite you to introduce the officials accompanying you and to make an opening statement regarding your portfolios of: Tourism and Hospitality; Major Events; Racing, Gaming and Licensing; and Alcohol Policy.

**Ms FYLES:** I introduce the Chief Executive Officer for Industry, Tourism and Trade, Mr Shaun Drabsch; and Mr Andrew Hopper and Ms Joanna Frankenfeld. I will provide a short opening statement.

The year 2020 has been unique. We just had questions about how we kept Territorians safe and, in doing so, we have been able to reopen quicker than any other jurisdiction. This means that the Territory is not only the safest place to be in Australia, it is the best place to work, live and do business. At a time when the full impacts of COVID-19 continue to be realised, there has never been a more important time to achieve economic growth. The tourism and hospitality sectors have a major role to play moving forward.

It has been a tough year and support has been required to rebuild our visitation post COVID-19. The Northern Territory led the country in tourism with the delivery of support programs. The Territory was the first jurisdiction to implement tourism resilience packages, comprising a range of support programs. We delivered the Tourism Fast Track support program to help 62 businesses through a partnership with the Business Enterprise Centre NT.

We partnered with KPMG to deliver immediate and targeted business support to ensure that tourism operators were ready to welcome visitors back when the time was right. The hardworking team at Tourism NT delivered weekly tourism power-up webinar training programs to upskill businesses during the downtime. We delivered four rounds of the \$1.5m Visitor Experience Enhancement Program, which enabled the tourism industry to improve its customer experience so that more visitors would recommend the Territory to others—we know the power of word-of-mouth.

The Visitor Experience Enhancement Program has provided more than \$6m through four funding rounds. There was an additional private investment of \$15m in grants awarded to 239 businesses for projects to improve the visitor experience. Based on research and insights into changing consumer sentiment and travel behaviour the 'Never Have I Ever' consumer promotion and travel incentives for Territorians, offering a remarkable tourism voucher of up to \$200 bookable through Territory Tourism Experiences, was launched. We were the first in Australia to initiate a tourism voucher to help intra-Territory travel, an important initiative to support the sector, which was subsequently replicated in various forms by other jurisdictions.

At the end of round one of the tourism vouchers, Territorians had spent over \$9.5m on tourism products. So far in round two, 11,780 vouchers have been redeemed with \$4.7m in sales. Territorians are spending strategically with local tourism products.

As a part of Budget 2020, a range of Territory small business initiatives will be implemented to support jobs and the economy. The CX Grant will provide \$5m towards one-off funding to small businesses looking to enhance their customer experience in the Territory, for locals and visitors alike. A \$4m package to help improve our wayside inns and roadhouses as we grow our tourism drive market, will also encourage visitors to stay extra nights in our regions.

We know the Territory is the safest place in Australia. We have resources in place to keep Territorians safe, including our hot spots policy, testing and track and trace methods to suppress any potential cases. Hot spots, as we know, will be added or removed as the situation in other states and territories constantly evolves. It is because of these policies that we are now in a position to welcome friends and family as well as holiday-makers into the Territory.

In response to monitoring of the interstate traveller, a national recovery marketing campaign, 'The Territory is the answer', was implemented from June 2020. That campaign is supported by a cooperative sales campaign with Holidays of Australia, Wotif, Expedia, Helloworld and BIG4, to generate bookings to all Territory regions.

To address low visitation rates that we traditionally see during the summer period, the biggest summer campaign ever undertaken by Tourism NT was instigated. The NT Summer Sale is incentivising Australians to visit the Territory from October 2020 through to March 2021. The activity is encouraging demand for the Territory over the summer period, offering consumers \$200 off every \$1,000 spent on a Territory booking made through campaign partners, with up to a maximum of \$1,000 discount. Over \$8.6m in sales was generated in the first two months with 51% of sales to the Top End and 49% in Central Australia, providing taxpayers with a return on investment of \$4.36 to every \$1.

To further boost and motivate summer travel to the Territory, traditionally a down period, and to get interstate visitors here and offset the loss of international travellers, the department has partnered with global travel platform, 10 Travlr to deliver a summer campaign aimed at changing travellers' perceptions of holidaying in the Territory during the warmer months. We all head overseas to Bali and Thailand, so why not come to the Territory. From November 2020 to April 2021, Territory experiences will be promoted by Network 10, supported by 10 Travlr sales campaign.

Focus consumer research has been conducted that highlights the opportunity in the drive markets, specifically experiences sought by these markets and the ways in which travellers are consuming that information. Given the importance of the drive market to the Territory with over 50% of all visitors travelling throughout in their own or hired vehicles, the department is developing a drive tourism strategy to grow and increase visitation from this market.

The drive tourism strategy is under way with KPMG and will set out activities for the government and industry to develop and maximise opportunities. Due for completion in early 2020–21, the strategy will be an important link with the recently completed Regional Destination Management Plans for Alice Springs and the MacDonnell Ranges, Barkly, Big Rivers and Lasseters regions.

The drive strategy will identify infrastructure requirements, including roads, bridges, signage, wayside stops and product opportunities to cater for the market and effective marketing initiatives to grow the drive market. Indications are that the drive market will be considerable post-COVID-19 as families revert to traditional holiday travel as a family unit. An increased drive market could present business opportunities including accommodation, attractions and services that will generate employment and economic growth.

The Northern Territory Business Events Support Fund has been instrumental in attracting and securing business for the Territory in the events space. Since its inception in 2018, \$2.6m was allocated to 75 confirmed business events. Further detail regarding the fund beyond 2020 is that the \$1.6m committed to 42 confirmed events will generate \$32m in estimated delegate expenditure between 2020 and 2025, with visitation from over 12,000 delegates. We also will see \$56,000 committed to 10 confirmed events for delegate boosting.

The NT Business Events teams are pivoted by providing virtual incentive experiences, including a dot painting class and a yoga session presented by Voyagers, both receiving positive feedback and good domestic trade media coverage.

It has certainly been a tough year and we acknowledge the innovation and adaptation that we have seen, not only within the sector but within the department. For the tourism sector, 2021 will be a pivotal year. The department is focused on supporting operators, industry, regional tourism organisations and partners towards accomplishing outcomes and approaches contained in our strategic plans. The NT Tourism Industry Strategy 2030, the Aboriginal Tourism Strategy 2020 – 2030 and the Long-term Business Events Strategy. These strategies will be supported by other recent initiatives, including regional destination management plans and the soon-to-be-released tourism drive strategy, cruise strategy and youth education tourism strategy.

We have also seen 2020 an interesting year, to say the least, for our frontline licensing staff. The effects of the global pandemic have impacted their work in a way never imagined with the closure of hospitality venues and the cancellation of large events. The licensing officers were seconded to assist the larger Health response. They have now taken back the role of providing support to the hospitality industry as we reopened. They are making sure there is safety for staff and patrons. They have teamed up with environmental health officers to assist and monitor venues when trading restarted ensuring compliance with social distancing, hand sanitising and signage.

The Director of Liquor Licensing invoked his emergency powers, usually reserved for cyclones or floods, to further assist the industry. Venues have been given special dispensation to expand their footprint onto footpaths and verges to meet physical distancing requirements.

The have worked closely with police. In terms of licensing work, they continue to implement the recommendations relevant to them from the Riley review and they will continue to work on its reforms. Most notably, undertaking the 12-month technical review of the *Liquor Act* to address any anomalies or unintended consequences.

The racing and gaming industries did not escape the impact of COVID-19 with closures, cancelled race meets and reduced gatherings as part of the landscape. To protect jobs, the Racing Commission—upon request—approved employees from several Territory sports bookmakers to work from their home under strict conditions that ensured all calls were recorded and were taken in the Territory.

The Racing Commission is supported by Licensing NT and is responsible for licensing and regulating the 21 Territory sports bookmakers and bet exchange operators wagering products under the *Racing and Betting Act 1983*. There are also 10 licensed on-course bookmakers in the Territory. These are individual bookmakers licensed to conduct the business of a bookmarker at a licensed premises or racing venue.

The Community Benefit Fund, which supports many Territory community organisations, was impacted by COVID-19. This fund was established under the *Gaming Control Act 1993* to consolidate and manage the community benefit fund levy collected from the operation of electronic gaming machines in casinos and licensed hotels.

We saw the closure of the venues for two months and the waiving of a month's contribution to assist venues to survive the COVID shutdown, resulted in three months of community benefit levy not being received so there was a \$2.7m reduction in the amount of funds available for a range of amelioration, research, development and equipment upgrade grants.



The restrictions for public gatherings meant the postponement of around two of the major community events grants program, impacting the amount of grant funding paid out this year. The Community Benefit Fund is an important grant avenue for not-for-profit organisations and the return of full trade will likely see the revenue return to pre-COVID levels.

We also have responsibility within this portfolio and this agency of the occupational licensing and associations. There are more than 1600 associations in the Territory and they range from large organisations down to very small groups.

Licensing NT will continue to work with these groups to ensure that they have the advice they need on governance, financial accountability and helping members understand their responsibilities.

We were having twice-yearly sessions, although face-to-face information was interrupted by COVID. In terms of the responsibilities of occupational licences under 12 pieces of legislation, these are the licences for occupations that keep the Territory economy ticking over, including electricians, plumbers, architects and real estate agents. Licensing NT's core business is to provide a balance policy and regulatory framework that supports industry, business and the community.

I would like to thank all the staff within these agencies and I thank them for the further preparation they have provided me. I thank those accompanying me at the table today.

Tourism and hospitality have been particularly challenging in 2020, and we must step through this together. This year has taught us that we can do things differently and think differently. We look forward to building and working together into the future.

**Mr CHAIR:** Are there any questions on the opening statement?

**Ms BOOTHBY:** Page 80 of Budget Paper No 3 refers to a key performance indicator of 235,000 intra-Territory and 200,000 interstate holiday visitors. Can you explain what this number is and how it is determined?

**Ms FYLES:** It is based on previous tourism data and looking at the potential moving forward. The 235,000 intrastate and 200,000 interstate are the numbers of people traveling.

**Ms BOOTHBY:** The 235,000 intra-Territory is almost the population of the Northern Territory. Are you suggesting that almost the entire population will travel somewhere else intra-Territory?

**Ms FYLES:** It is per overnight trip. It would be one individual but potentially multiple trips. I will hand to Mr Andrew Hopper to provide more detail if you would like?

**Mr HOPPER:** Further to the minister's comments, it is how many nights one travels. On average people might travel four nights, so it is not 235,000 people traveling once. You could divide that by four or five depending on the average to get the number of people traveling. People do multiple trips in a 12-month period.

**Ms BOOTHBY:** Is that the same for the number of interstate travellers? The 200,000?

**Ms FYLES:** It is the same basis.

**Ms BOOTHBY:** Can you tell me who is a tourist? How do you define a tourist as opposed to a business traveller and differentiate between the two? How do you measure that?

**Ms FYLES:** There is a national dataset and it provides the categories: the leisure traveller; the business traveller; and people visiting family and friends. There are definitions. There are tourists and subcategories of those tourists.

**Ms BOOTHBY:** Is one of those subcategories a business traveller? Can you confirm that?

**Ms FYLES:** Correct.

**Ms BOOTHBY:** How do you measure that for intra-Territory and interstate tourists?

**Ms FYLES:** Tourism Research Australia measures that through surveys they undertake.

**Ms BOOTHBY:** Does the Northern Territory Government pay for that research?

**Ms FYLES:** Yes. We contribute funding. It is on a split model. We provided a pro rata amount as do other jurisdictions to get that information.

**Ms BOOTHBY:** When you say other jurisdictions, do you mean in Australia?

**Ms FYLES:** The other states and territories.

**Ms BOOTHBY:** Can you provide what that amount is?

**Ms FYLES:** We do not have that with us but are happy to take it on notice.

**Ms BOOTHBY:** Yes, please.

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#### Question on Notice No 5.9

**Mr CHAIR:** Member for Brennan, please restate the question for the record.

**Ms BOOTHBY:** Minister, can you provide what the Northern Territory Government pays for the research out of Tourism Research Australia?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Brennan has been allocated number 5.9.

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**Ms BOOTHBY:** How many visitors have arrived in the Northern Territory since the borders opened?

**Ms FYLES:** It is not a figure that we hold; it is a figure from the border forms that people have been filling in. I think it is about 180,000 since the borders reopened.

**Ms BOOTHBY:** The Northern Territory Government does not keep statistics on who arrives ...

**Ms FYLES:** No, not this government agency. The figure you are referring to has been quoted in the media, of how many people have arrived in the Territory since the borders reopened. That border form is kept by the EOC, the Emergency Operations Centre. Police would be able—I am happy to take that on notice, though. I just have not seen a figure in the last couple of weeks. I can probably get it.

**Mr CHAIR:** Member for Brennan, I am comfortable and confident that it was covered earlier in the week. I think it was covered by Commissioner Jamie Chalker ...

**Ms FYLES:** It would have been, yes.

**Mr CHAIR:** ... on the border controls. Off the top of my head—and I will find it for you in my notes—I think it was about 196,000 to date. But I will double check that, because I am not the minister. Would you like it taken on notice?

**Ms FYLES:** I think we can get that figure for you.

**Ms BOOTHBY:** That would be great.

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#### Question on Notice No 5.10

**Mr CHAIR:** Member for Brennan, please restate the question for the record.

**Ms BOOTHBY:** How many visitors have arrived in the Northern Territory since the borders opened?

**Mr CHAIR:** Minister, do you accept the question.

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Brennan has been allocated number 5.10.

**Ms BOOTHBY:** What was the number of visitors over the same period the year before?

**Ms FYLES:** The figures we talked about—the 180,00; the 196,000—are how many people we know have entered the Territory, because of our border forms. We obviously have tourist-specific information but we did not collect those border forms pre-COVID-19, so I would have to seek advice on what information might be available.

**Ms BOOTHBY:** I would like to know how many tourists came in over the same period the year before. That would have been the March to date the year before.

**Ms FYLES:** I am advised that an average of 160,000 per month come to the Northern Territory. Of course, we would see quite different variations in that figure per month depending on the season. The average is 160,000 tourists per month pre-COVID-19, but we are not comparing apples with apples. Those border crossing forms are utilised to make sure we have information for contract tracing and to enforce the hot spot policy. They should not be used as information for tourism data.

**Ms BOOTHBY:** That is okay. I just needed to put that period. Minister, we are heading into our Wet Season. How many visitors are you expecting for the season?

**Ms FYLES:** We know that the Wet Season—the summer, as we prefer to call it in tourism talk, because Central Australia is a huge part of the Territory. We traditionally see a significant decline in tourists coming to the Territory, but we know there are opportunities from COVID-19, with people not being able to travel internationally. Only this week have we seen the borders opening within Australia so people can travel to some destinations within Australia freely.

That is why we have the Summer Sale campaign—to get people over the line to support tourism in the Territory. We know that supporting, hopefully, our stronger-than-normal summer season will not make up for the loss of international travellers and the Dry Season, but that point-of-sale marketing campaign reducing the cost to come to the Territory—\$200 per \$1,000—was designed to get Australians to come to the Territory away from the time of year they normally come.

**Ms BOOTHBY:** You have not quite answered my question, though. How many visitors are you expecting for the season?

**Ms FYLES:** When you say ‘the season’ do you mean from October to March?

**Ms BOOTHBY:** The summer season, as you referred to it.

**Ms FYLES:** We are not forecasting any figures as there are too many uncertainties. We saw what happened a couple of weeks ago, when Adelaide was declared a hot spot. We are hoping we do not have to declare any hot spots over the next few months and that people can freely travel.

We are doing everything we can within intra-Territory tourism. As soon as the borders started to open we worked with the jurisdictions that could come to the Territory—non-hot spots—making sure there was marketing and getting people to think into the future about coming to the Territory.

We do not shy away from the facts. It has been very difficult for the tourism and hospitality sector, particularly in the Territory. Even if we see strong travel in the Territory at a time of year that is usually low, it will not make up for the Dry Season we did not have or the international visitation we are not seeing.

**Ms BOOTHBY:** Can you clarify, you have KPIs expecting 235,000 intra-Territory holiday visitors and 200,000 interstate holiday visitors. Do you not have a breakdown of the summer season versus the other seasons in the Northern Territory as a forecast?

**Ms FYLES:** I just explained—this year it is too unpredictable. There are too many variables at the moment. We are focused on supporting businesses to stay afloat, keep their doors open and stop them from shutting up shop. That is why as a government we rolled out a huge amount of support.

We are trying to help them to enhance their visitor experience going forward. We are not predicting—we are grateful for every tourist who comes to the Territory. There are too many uncertainties for us.

**Ms BOOTHBY:** The number you have put on page 80—would that be an overestimation or an underestimation? It goes to the intra-Territory number of 235,000 and interstate number of 200,000.

**Ms FYLES:** That is based on previous years. As I said previously in my comments, that is based over a 12-month period.

**Ms BOOTHBY:** I would like to move on, if I could, to the Tourism Rebound Taskforce. It was established in May. What is the current status of the task force?

**Ms FYLES:** That was time limited. The recommendations from that group were put into the TERC report we saw last week. A key focus of that is the opportunity to grow the tourism economy in the Territory.

**Ms BOOTHBY:** It has now been discontinued, is that correct?

**Ms FYLES:** It was a time-specific analysis at that point, and that information fed into the TERC report.

**Ms BOOTHBY:** Of the specific task force that fed into the report, have the task force's members been remunerated?

**Ms FYLES:** I will hand over to Andrew Hopper to provide you with clarity on that.

**Mr HOPPER:** Those members were not remunerated.

**Ms BOOTHBY:** How much of the budget in the tourism line has been allocated to contractors or staff, abroad or interstate, who are responsible for bringing tourists to the Northern Territory?

**Ms FYLES:** We are happy to take that question on notice. Of course, we try to support local businesses and want to keep as much of that in the Territory as we can. At the same time, we are working in interstate markets to get people to the Territory so we can have the tourism dollar come in, which can be multiplied out.

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#### Question on Notice No 5.11

**Mr CHAIR:** Member for Brennan, please restate the question for the record.

**Ms BOOTHBY:** How much of the budget in the tourism line has been allocated to contractors or staff, abroad or interstate, who are responsible for bringing tourists to the Northern Territory?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The number asked by the Member for Brennan has been allocated the number 5.11.

**Ms FYLES:** Mr Chair, I have an answer to a question on notice.

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#### Answer to Question on Notice No 5.9

**Ms FYLES:** The shadow minister asked a question about Tourism Research Australia. We provide \$254,000 including GST. That is for the national visitor survey, the international visitor survey—when we have international travel—and other services.

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**Ms BOOTHBY:** Going back to the allocated contractors or staff who are abroad or interstate, up until the closure of the Australian borders due to COVID-19, does your data reflect that those contractors or staff were achieving the desired results?

**Ms FYLES:** Not based in the Territory? Based overseas?

**Ms BOOTHBY:** Yes, that is right. I am going back to the ones who are abroad or interstate.

**Ms FYLES:** We do not have any staff based overseas. We have a small team in Sydney and Melbourne.

**Ms BOOTHBY:** Of the contractors?

**Ms FYLES:** Yes, contract representatives.

**Ms BOOTHBY:** Who are responsible for bringing tourists to the Northern Territory?

**Ms FYLES:** Yes, correct.

**Ms BOOTHBY:** Up until the closure of the Australian borders due to COVID-19, does your data reflect that they were achieving the desired results?

**Ms FYLES:** Yes.

**Ms BOOTHBY:** Is that in comparison to the set KPIs?

**Ms FYLES:** As a government we invested \$165.8m over four years into Turbocharging Tourism which included \$54m in marketing to attract visitors, \$53m for enhanced visitor offerings—particularly in our parks—and \$40m for festivals and events. There were stimulus grants for tourism-related businesses to drive additional private investment.

According to pre COVID-19 statistics, tourism provides 8,500 direct jobs and 15,500 indirect jobs. This is 11.8% of the Territory's employment. There was a record total of 2,000,000 visitors in 2019, which has a return on investment of \$2.6bn in visitor expenditure. The Turbocharging Tourism investment was paying dividends until the COVID-19 global pandemic hit.

**Ms BOOTHBY:** What is the current arrangement with travel journalists or Instagram influencers interstate and abroad to promote the Northern Territory?

**Ms FYLES:** We have various arrangements. Tourism marketing is not the traditional Crocodile Dundee with an ad campaign that we saw in the 1980s and 1990s. Influencers have huge ability in the social media space—the Member for Brainting is nodding at me because he is from that generation, but I prefer to go to the travel agent and get the tourism book. We have commercial-in-confidence arrangements. I am happy to get you a global figure on notice but we would not have a breakdown.

We work with various arrangements. It is another form of marketing that is different for some of us who are older. They are valuable and we see the benefits from those campaigns. I would be happy to take a global figure on notice.

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#### Question on Notice No 5.12

**Mr CHAIR:** Member for Brennan, please restate the question for the record.

**Ms BOOTHBY:** What are the current arrangements with travel journalists and/or Instagram influencers or any social media influencers, interstate and abroad, to promote the Northern Territory?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Brennan has been allocated the number 5.12.

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**Ms BOOTHBY:** With the strategy being implemented with travel journalists and influencers, interstate and abroad, is there some information you can give us around the strategy?

**Ms FYLES:** It is one of the non-traditional marketing strategies within the Tourism 2030 document.

**Ms BOOTHBY:** The funding agreement between Tourism Central Australia and the Northern Territory Government to manage the Battery Hill Centre expires in May 2021. Will this service be advertised so that other organisations have the opportunity to tender for the services?

**Ms FYLES:** There is currently a feasibility study being undertaken on the Battery Hill facility which will shape what happens going forward.

**Ms BOOTHBY:** What is the sum of funding available to deliver and operate the Battery Hill Mining Centre?

**Ms FYLES:** We are getting that figure for you. Everything is obviously on hold and the feasibility study is being undertaken, but we are doing maintenance work to maintain the facility. We will dig that figure up for you, I do not know whether you want to hold or move on and we will come back to it?

**Ms BOOTHBY:** Can we put that one on notice?

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**Question on Notice No 5.13**

**Mr CHAIR:** Member for Brennan, please restate the question for the record.

**Ms BOOTHBY:** What is the sum of funding available to deliver and operate the Battery Hill Mining Centre?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Brennan has been allocated the number 5.13.

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**Ms BOOTHBY:** Minister, with the Small Business Roadhouse to Recovery grants, do they also apply to caravan parks?

**Ms FYLES:** Yes, is the short answer. In that process people lodge their application outlining what they would like to do with it. There is a criteria they will be assessed against. They are welcome to apply but it will be a competitive process based on that criteria.

**Ms BOOTHBY:** The criteria that the applications will be measured against—there will be some applications that may not be approved, say, if it is a caravan park?

**Ms FYLES:** There is \$4m allocated. Once all the applications are received there is a competitive process. There are factors such as remoteness. We want to see our investment drive those tourism dollars to get people to stay longer in the Territory, particularly in our remote and regional areas.

**Ms BOOTHBY:** Do you have the details of the criteria to receive this funding based on that competitive process?

**Ms FYLES:** It is published on the website.

**Ms BOOTHBY:** Will owners of roadhouses who apply be seen ahead of the line, if you like, compared to caravan parks?

**Ms FYLES:** As I just said, it is based on the criteria. There is a number of elements they are looking for, making sure that we get a significant tourism return on investment. It is based on location and remoteness. Criteria needs to be met, which is available on the application.

It might be the services operating there, like visitor information. It will really depend. We want to get people spending more nights in the Territory. We have some great examples across the Territory of locations that

capture people. They provide information and services so that people spend more nights in the Territory versus others that are simply providing a service.

On the Tourism NT website you can see that they are open to wayside inns and roadhouses across the Territory. They must submit a business case that includes clear identification and evidence of the customer experience, problem or challenge, or the gap faced by the business and how it might be improved, and how funding will resolve that.

Applications will be assessed on that competitive basis, with priority given to remote premises. We will provide \$3 for each \$1 spent for a business up to a maximum of \$150,000. A business could invest \$50,000 and we will provide \$150,000, so they will see \$200,000. Businesses are encouraged to read the guidelines carefully. Of course, there are people supporting them in those applications.

**Ms BOOTHBY:** I am glad you are on the website because the last time I looked it did not refer to caravan parks specifically. We are concerned that people who have caravan parks may not realise that funding is also for them as well.

**Ms FYLES:** We have communicated the program to the whole industry, so everyone is aware. It really is designed for wayside inns. We think there are some wonderful examples that capture and inspire people to stop off at other locations and spend more time and dollars in the Territory, versus some that provide a bed and a feed and that is it.

Caravan parks are not ruled out, but we have been providing this information to the whole sector. As I have outlined in the criteria, it will be a competitive tender process. Sometimes, we do not want a definition to stand in the way of someone being eligible or not. That is why the criteria have been applied.

**Ms BOOTHBY:** Can you explain how Tourism NT consults with Parks and Wildlife regarding specific tourism attraction openings and closures? As an example, I refer to the yearly opening and closure times of destinations like Wangi Falls, Florence Falls and Berry Springs.

**Ms FYLES:** We work closely with Parks, so the teams are in constant contact. We understand the importance of that information, but from an operational perspective Andrew can provide a bit more detail.

**Mr HOPPER:** We have a very good working relationship with the team at Parks in the Northern Territory, and that has been formed over many years when we have been in similar departments and when we have not. That communication flows regularly and there is a set pattern to when those parks are opening. If there are any anomalies to that we engage very well. That working relationship is tremendous, from my perspective.

**Ms BOOTHBY:** Can you explain the process of what determines a destination like Wangi Falls, Florence Falls or Berry Springs to be closed and reopened?

**Ms FYLES:** That would be a question for Parks. They provide the information to us—obviously Tourism is a key partner—but that is an operational decision for them, which the minister can provide a response to later.

**Ms BOOTHBY:** The new \$12m grandstand at the Darwin Turf Club was completed this year. How is the success of this spend measured?

**Ms FYLES:** That would be a question for DIPL, which provided that funding. We know that racing in a traditional year, a non-COVID year—people come to the Top End for the racing carnival, as they do to Central Australia. That is highlighted when on Darwin Cup weekend you struggle to get a hotel room in the Territory.

In regard to economic activity, government provides a range of supports and a lot of the work we are doing in the tourism space is designed to help grow that economic activity. That question would be best placed with DIPL, but that is a small snapshot.

**Ms BOOTHBY:** In relation to tourism, how many additional visitors to the Territory do you anticipate will visit Darwin from intra-Territory and interstate to attend an event or something else at the new grandstand at the Darwin Turf Club?

**Ms FYLES:** That would be a question for the operator. We look at the overall intra and interstate tourism, and have a range of supports provided to that, but that question is specifically for the operator.

**Ms BOOTHBY:** What involvement does Tourism NT or the government have with the marketing of this new events facility?

**Ms FYLES:** We have assisted the operator in terms of marketing through a broader trade opportunity in the Territory. As part of a broader package that can be one element.

**Ms BOOTHBY:** From a tourism perspective, has the new grandstand been successful or is it anticipated to be successful?

**Ms FYLES:** It is another offering in the Top End. We know that the event tourism opportunities in the Territory in regard to facilities or businesses coming here and running events—business tourism is certainly important. It is another offering. From our perspective we would say it is a success.

**Ms BOOTHBY:** Can you please advise what the budget was in 2019–20 for tourism?

**Ms FYLES:** The budget final in 2019–20 was \$41.2m.

**Ms BOOTHBY:** The 2019–20 budget for the previous Tourism and Culture output was \$2.985m. In the 2020–21 budget, sport and active recreation, and Arts, Culture and Heritage—both now in Territory Families, Housing and communities agency—shows \$39.461m and \$44.838m respectively. If you add the 2020–21 budget of \$68.352m for the tourism output the total is \$152.651m. Can you please explain the difference in funding this year of \$48.334m?

**Ms FYLES:** Sorry, I did not follow all the figures that you read out, but there was Parks as well. I am not sure if you included that, so there was a number of elements of that agency.

The best thing would be to take that on notice because that is machinery-of-government changes. The tourism component, the sports component, arts component—but I would say that there are some other elements of the previous agency. I am certainly happy to provide that.

**Ms BOOTHBY:** Yes, I would like to put that on notice please.

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#### Question on Notice No 5.14

**Mr CHAIR:** Member for Brennan, please restate the question for the record.

**Ms BOOTHBY:** The 2019–20 budget for the previous Tourism and Culture output was \$2.985m. In the 2020–21 budget, sport and active recreation, and Arts, Culture and Heritage—both now in Territory Families, Housing and Communities agency—show \$39.461m and \$44.838m respectively. If you add the 2020–21 budget of \$68.352m for the tourism output the total is \$152.651m, can you please explain the difference in funding this year of \$48.334m?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes, and the officials here have just told me that the Waterfront, for example, was incorporated in that previous agency. We will take that on notice and provide that information.

**Mr CHAIR:** The question asked by the Member for Brennan has been allocated number 5.14.

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**Mr BURGOYNE:** Minister, does the Road Transport Hall of Fame in Alice Springs fall under your Tourism department?

**Ms FYLES:** It is an association. It is not responsibility of a government agency; it is an incorporated association body in the Territory.

**Mr BURGOYNE:** Which minister would be overseeing the current predicament it finds itself in with special administration?

**Ms FYLES:** There are 1600 associations in the Territory. Licensing has a role to play in terms of compliance with the *Associations Act*, but that is an individual organisation. I understand the predicament that they are



in right now, but there is a statutory responsibility under Licensing. Right now that would be the only responsibility of government.

**Mr BURGOYNE:** Has the Department of Tourism ever marketed Mount Gillen as a tourism opportunity in the Northern Territory?

**Ms FYLES:** My officials are advising me not that they are aware of.

**Mr CHAIR:** Are there any further questions on the opening statement?

### **Agency-Related Whole-of-Government Questions on Budget and Fiscal Strategy**

**Mr CHAIR:** The committee will now consider the estimates of proposed expenditure contained in the Appropriation Bill 2020–21 as they relate to Tourism and Hospitality; Major Events; and Racing, Gaming and Licensing. Are there any related whole-of-government questions on the budget and fiscal strategy?

That concludes the consideration of agency related whole-of-government business on budget and fiscal strategy.

Output Groups 9.0 and 10.0 are the responsibility of other ministers, so we will skip them.

### **OUTPUT GROUP 11.0 – TOURISM AND EVENTS** **Output 11.1 – Tourism**

**Mr CHAIR:** The committee will now move onto Output Group 11.0, Tourism and Events, Output 11.2, Tourism. Are there any questions?

**Mr MONAGHAN:** Minister, can you outline what you are doing to sustain the tourism industry during this changing time?

**Ms FYLES:** In terms of Northern Territory Government support, not only did we act early and keep people safe, we were able to provide support to small businesses of which many are tourism. These included:

- the immediate survival payment, which was an initial lump sum directed to businesses to help offset immediate cost pressures at the time and provide time to plan
- the rapid adaptation payment, enabling the offset of costs incurred while adapting their current business model to suit the restrictions
- the operational boost payment, which was an immediate cash boost to affected businesses to offset the cost of continuing to maintain their business
- the operational support payments, which were fortnightly based on FTEs to enable ongoing employment of Territorians
- the rebound support grant for new activities that adapt or rebound to the business.

Even though these were more for business, we also had the Immediate Work Grants and other grants in different areas. We are working with the Commonwealth Government, have provided as much support as we could from a business perspective and provided tourism initiatives such as the tourism vouchers. We reacted quickly to keep businesses afloat.

**Ms BOOTHBY:** The Chief Minister has advised Territorians that the best health advice is to stay in the Territory this Christmas. Has the health advice changed or is there one standard for the Chief Minister and another for Territorians?

**Ms FYLES:** That would have been a question for my portfolio this morning for Health.

**Ms BOOTHBY:** Not related to Tourism?

**Ms FYLES:** You asked a question on the health advice and they were in the portfolio outputs this morning.

**Ms BOOTHBY:** The Chief Minister could choose to be an intra-Territory visitor to other places in the Territory but he is choosing to go elsewhere. Is that a double standard?

**Mr TURNER:** A point of order, Mr Chair! Standing Order 109: asking a minister for an expression of opinion.

**Mr CHAIR:** Thank you, Member for Blain.

**Ms BOOTHBY:** May I ask what the travel advice is?

**Ms FYLES:** You just asked a Health question. We have just finished all the Health outputs; they were this morning.

**Ms BOOTHBY:** Has the travel advice changed for Territorians?

**Ms FYLES:** The question is in the wrong output, Mr Chair.

**Ms BOOTHBY:** You do not want to answer that question in this output? It is Tourism and travel.

**Mr CHAIR:** The minister has been clear that it is under a separate output.

**Ms BOOTHBY:** Okay.

**Mr CHAIR:** That concludes consideration of Output 11.1.

#### **Output 11.2 – Events**

**Mr CHAIR:** The committee will now consider Output 11.2, Events. Are there any questions?

**Mr BURGOYNE:** Minister, with all these machinations and changes in government processes and budget lines, I am keen to get a grip on the budget for 2109–20 for events and the actual spend for the last financial year.

**Ms FYLES:** The final budget for 2019–20 was \$25,652,000 and the budget allocation in 2020–21 is \$28,449,000.

**Mr BURGOYNE:** Minister, I was after the budget for the last financial year, then the actual spend for that financial year.

**Ms FYLES:** I have the figures I just read out. For the actual I will seek some advice. I am happy to take that on notice.

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#### **Question on Notice No 5.15**

**Mr CHAIR:** Member for Braitling, please restate the question for the record.

**Mr BURGOYNE:** I am chasing the actual spend for the Department of Major Events for 2019–20. The budget figure—am I correct that was read out before, is \$25.652?

**Ms FYLES:** Yes.

**Mr BURGOYNE:** I am after the actual spend for Major Events for the 2019–20 financial year.

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Braitling has been allocated number 5.15.

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**Mr BURGOYNE:** The Northern Territory Major Event Corporation undertook a review of its brand strategy and developed a new corporate logo. What was the cost of this review and ongoing costs implementing the new logo?

**Ms FYLES:** Major Events is a corporation. It is a government-owned corporation but it is set up to provide those opportunities for government. We provide that budget, we can talk about the events they do, but they are questions that would be commercial-in-confidence for a corporation.

**Mr BURGOYNE:** To develop a new logo is commercial-in-confidence?

**Ms FYLES:** It is an entity that is set up to operate at arm's length from government. That is their structure.

**Mr BURGOYNE:** Fair enough. What was the final cost to government on Bruce Munro: Tropical Light exhibition, including electricity costs?

**Ms FYLES:** There were a number of variations with Bruce Munro. We are happy to take that on notice. I am not sure I can get you the specific breakdown to the electricity costs, but we will endeavour to do our best.

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#### Question on Notice No 5.16

**Mr CHAIR:** Member for Braitling, please restate the question for the record.

**Mr BURGOYNE:** What was the final cost to government of Bruce Munro: Tropical Light exhibition, including electricity costs if possible?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Braitling has been allocated number 5.16

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**Mr BURGOYNE:** The Red CentreNATS. It is estimated that the total expenditure stimulus in Alice Springs during the Red CentreNATS is \$5.41m. What were the total costs for this event?

**Ms FYLES:** Mr Chair, these are questions for this corporation. We provided a grant specific—I do not have that and I am happy to take that element on notice. But Major Events is set up to organise and promote a number of events to operate in a commercial space to bring these events into the Territory that governments tend not to. I am happy to take on notice the specifics of the grant.

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#### Question on Notice No 5.17

**Mr CHAIR:** Member for Braitling, please restate the question requesting the grant information.

**Mr BURGOYNE:** Yes. The government spending in relation to these events is important. I will restate the question if I can and see whether the minister is happy to take it.

**Mr CHAIR:** Member for Braitling, please restate the question for the record.

**Mr BURGOYNE:** What were the total costs involved in holding the Red CentreNATS event?

**Mr CHAIR:** Minister, do you accept the question.

**Ms FYLES:** I am happy to find the government grant figure.

**Mr CHAIR:** The question asked by the Member for Braitling has been allocated number 5.17.

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**Mr BURGOYNE:** This year, thanks to the COVID-19 pandemic, the BetEasy Darwin Triple Crown and CoreStaff Darwin SuperSprint were held over back-to-back weekends in Darwin for the first time since the inception of the event. Will the Supercars go back to a three-day event or is this change permanent?

**Ms FYLES:** No, we announced that a couple of weeks ago. We had the Black Friday ticket sales—you could have grabbed yourself a bargain. We announced the program going forward incorporating a number of events and that information is public.

**Mr BURGOYNE:** The Alice Springs Masters Games—obviously very dear to my heart being from Alice Springs. I know that it has been set with new dates, has there been funding allocation for the Masters Games, not only for the 2022 event, but also going forward?

**Ms FYLES:** I would hope that they are dear to your heart because you are from Alice; not because you are an eligible contestant, you are far too young for that.

**Mr BURGOYNE:** I think I might be in swimming.

**Ms FYLES:** I will challenge you to a swimming race. The rescheduling is under way. In the Top End, the Arafura Games and in Central Australia the Masters Games, have certainly been impacted by COVID. We are not sure of the long-term on how long that impact will be. With Major Events, it is a flag event for us. They are focused on the rescheduling but it is difficult with those events. I think we all thought when the Olympics were deferred to next year that that seemed crazy, but now I think some of us are questioning whether the Olympics will even happen.

**Mr BURGOYNE:** Are there any plans to cancel the Masters Games?

**Ms FYLES:** We certainly do not have plans to cancel the Masters Games. What impact COVID has into the future, I cannot predict. I would love to be able to, we know how important they are, not only to Central Australia but to the Northern Territory.

**Mr BURGOYNE:** What was the cost of the new agreement to secure the Gold Coast Suns and Melbourne Demons games in Darwin and Alice Springs until 2024?

**Ms FYLES:** Commercial-in-confidence around that agreement. I apologise to push back on that line, but that is the reality.

**BURGOYNE:** That is okay, minister. I understand these things happen at times. I have no further questions for Major Events.

**Mr CHAIR:** Are there any further questions relating to Output 11.2? Group 11.0.

Output Groups 12, 13 and 14 are now the responsibilities of other ministers.

#### **OUTPUT GROUP 15.0 – REGULATORY SERVICES Output 15.1 – Licensing NT**

**Mr CHAIR:** The committee will move onto Output Group 15.0, Regulatory Services, Output 15.1, Licensing NT. Are there any questions?

**Ms BOOTHBY:** Minister, with the introduction of the new digital IDs, are the new licences made in the Northern Territory?

**Ms FYLES:** The license question would be for the minister for transport.

**Ms BOOTHBY:** Do you have an output that would have been under?

**Ms FYLES:** No, the MVR provides drivers' licences.

**Mr TURNER:** For reference, those questions were asked last night and they would be on the parliamentary record.

**Ms BOOTHBY:** With the introduction of the new digital IDs, have the issues been fixed where they did not work properly on the BDR scanners?

**Ms FYLES:** My understanding is that the new licence has to be laid down in a different way and that has been resolved.

**Ms BOOTHBY:** Having to be very precise with laying down a driver's licence on a BDR scanner for the staff of those businesses who need to do it—is that an extra burden and cost of training et cetera for those businesses?

**Ms FYLES:** We work with all businesses so that they understand their responsibilities and obligations and we provide as much support as we can. As the new licences started to filter out businesses had some technical questions, but I believe they were quickly resolved early on.

**Ms BOOTHBY:** Is it just another burden to those businesses and another layer of complexity they need to think about?

**Ms FYLES:** The reason we have the Banned Drinker Register is to stop the supply of alcohol. We know that the CLP does not support it; that they would scrap the BDR, which would allow hundreds of Territorians to access alcohol and that would be a bigger burden on the community, having grog in the community causing harm.

**Ms BOOTHBY:** Does the BDR recognise the digital licences from South Australia and New South Wales?

**Ms FYLES:** No.

**Ms BOOTHBY:** Do you know how many visitors come from South Australia and New South Wales to the Northern Territory each year?

**Ms FYLES:** I believe these questions went through last night in regard to the new licences rolling out, so I do not believe they are relevant to this section.

**Mr CHAIR:** Are we talking about visitation, Member for Brennan?

**Ms BOOTHBY:** I am talking about drivers' licences of South Australia and New South Welch, for them to be able to purchase alcohol in the Northern Territory and somehow put those digital licences on the BDR scanner.

**Mr CHAIR:** Minister, did you say they are recognised?

**Ms FYLES:** These questions were dealt with last night. They are not in this output.

**Ms BOOTHBY:** I would have thought that visitors from South Australia and New South Wales would be impacted by not being able to purchase alcohol if they cannot scan on the BDR.

**Ms FYLES:** I have answered the question.

**Ms BOOTHBY:** Are all new liquor applications and variations required to be advertised in the *NT News*?

**Ms FYLES:** They are required to be advertised but not necessarily in the *NT News*. When someone lodges an application there is a process they are provided with. I think it is a green sign for a liquor licence. They have to place that up at the premises and make sure they meet all the advertising with that.

**Ms BOOTHBY:** What do they need to meet to be able to advertise their application or variation?

**Ms FYLES:** They have to put up the green sign and show Licensing that they have provided a summary of application for a licence to the community. In a remote community, for example, it may be acceptable that a notice was put up in the shop to let people know. In Katherine and where you do not have a local newspaper, perhaps a letterbox drop to surrounding residents. Licensing will make sure the application has been widely broadcast to that specific area and that medium might vary from an urban area such as Darwin to a smaller regional area.

**Ms BOOTHBY:** If they were in a larger regional area, like the Top End, how would those expectations be met by Licensing?

**Ms FYLES:** They may well advertise in the *NT News* if it is a Darwin-based area. Licensing has to fully believe that the local community has been notified of that intent of licence.

**Ms BOOTHBY:** Do you have any other examples, say in the Top End, for if they do not advertise in the *NT News* where else they could advertise?

**Ms FYLES:** For the Top End they generally use the *NT News*, but in smaller regional areas they may not use the *NT News*. Licensing would not hold that against them. It would look for activity, such as if it is a small community, a notice at the shop; if it is a smaller area, a letterbox drop. They will look for that activity to show the community has been notified.

Generally, in the bigger areas, the newspaper is utilised, but the act reflects that is because there is not a local newspaper in every area.

**Ms BOOTHBY:** Applicants do not need to advertise in the *NT News*?

**Ms FYLES:** The reason the legislation does not stipulate that it must exclusively be the *NT News* is that, for example, Katherine does not have a newspaper. If you were to stipulate 'in the local newspaper' there is no medium for them to do that.

Most of the time in the Top End it is the *NT News*, but there are some exceptions. I have given examples of where it might not be in a newspaper and Licensing would say whether that is sufficient or not. It is the summary of application, so they have their full application and there is a shorter document of around eight or 10 pages, which is the summary.

**Ms BOOTHBY:** What is the current wait time from advertising to a hearing?

**Ms FYLES:** It would vary enormously. It would depend on whether it was a change of licence condition or a full new licence. It could be as short as 30 days, but it could be some years.

**Ms BOOTHBY:** Is there an average wait time?

**Ms FYLES:** No. Being more agile for business is accepting the documentation that they lodge and acting upon it. Sometimes you have a situation where an individual will try to lodge something and an agency will say, 'We need more information'. If the applicant believes it is their full application it can be lodged and go through that process. There needs to be a timely manner in which that is responded to. That is about cutting red tape. Of course, we need to uphold processes, but at the same time, making sure we are efficient in getting back to business. If business feels that it is their full application and they would like to submit it, we should accept that.

**Ms BOOTHBY:** How many licences would be considered on an average day?

**Ms FYLES:** An application could be as simple as changing the name of the manager on the licence—something very straightforward. Obviously, there needs to be some checks on that individual but that is very straightforward.

An application for a new premises is a significant alteration in licence condition. It really varies. To give you a figure, if it was 10 name changes, that is a lot more straightforward than 10 significant changes.

This agency, under the leadership of the Director of Licensing, is trying to work with business and be agile whilst upholding the laws we have. The *Liquor Act* rewrite came out of the Riley review.

**Ms BOOTHBY:** Minister, how often does the commission meet?

**Ms FYLES:** It is important to be clear. There is the Director of Licensing and then there is the Liquor Commission—it is a separate body. When you ask if the commission meets, I am not sure what you mean.

**Ms BOOTHBY:** I would like to know both, please.

**Ms FYLES:** The Director of Licensing is Phil Timney, who is here with us today. He heads up a government agency. If someone says they called Licensing, this is the government agency they call. The Liquor Commission is a separate body set up away from government that assesses some licences.

**Ms BOOTHBY:** How often does the Liquor Commission meet?

**Ms FYLES:** The Liquor Commission is made up of a number of representatives. They then have a quorum as you see with a number of government bodies. That quorum would meet as many times as they need to hear different matters.

**Ms BOOTHBY:** How many times did they meet in the last 12 months?

**Ms FYLES:** Shadow minister, to give you a bit of an overview and understanding, the Liquor Commission was established in February 2018 after the commencement of the *Liquor Commission Act 2018*. The commission, supported by Licensing NT, which receives and investigates permit and licence applications, investigates complaints, monitors licensed venues, enforces liquor laws and compiles data and information.

Licensing NT licensing and compliance officers appear before the commission in public hearing matters. As I was saying, Licensing is a government agency that sets this up; the commission is independent.

During 2019–20, 84 matters were referred to the commission for consideration. That gives you an indication of the number of matters. There were 49 public hearings and five private hearings held.

The types of referrals could be from a complaint or disciplinary matter through to an application for variation of licence conditions, material alteration, transfer of licence or major event authority. There are thresholds. Some can be dealt with by Phil and the team and others need to go to the Liquor Commission.

Licensing NT provides the secretariat, administrative and investigative support, but the commission sits as an independent body.

**Ms BOOTHBY:** Minister, what is the due date for the Dan Murphy's final decision, as well as the decision on the other three licences affected by the Liquor (Further Amendment) Bill 2020?

**Ms FYLES:** That would be a question for the Minister for Small Business tomorrow, I believe.

**Ms BOOTHBY:** You will not answer any licensing question about the other three licences affected?

**Ms FYLES:** That is a question for the Minister for Small Business tomorrow.

**Ms BOOTHBY:** You are not answering any licensing questions? Such as the other three licences which are affected?

**Ms FYLES:** That is a question for the Minister for Small Business.

**Mr BURGEOYNE:** On the requirements for advertising, if I were applying for a liquor licence on a greenfield site and want to find out what the requirements are, can I put up sign with a summary of the application on it? Would that be considered that I have advertised the application? I am trying to work out the requirements to advertise.

**Ms FYLES:** The requirement under the act is that it is published but it does not stipulate exactly what that would be.

**Ms BOOTHBY:** I return to the due date of those final decisions. You are the Minister for Racing, Gaming and Licensing. Why have you referred that question to the Minister for Small Business?

**Ms FYLES:** Because that minister brought that legislation into parliament and it was passed under them.

**Ms BOOTHBY:** Does the Director of Licensing come under you, as Minister for Racing, Gaming and Licensing, or the Minister for Small Business?

**Ms FYLES:** He is an independent statutory officer. Although he sits here in terms of the regulatory services of Licensing NT, he is independent. That minister introduced a bill and the question is in relation to that bill. I am sure we can give you the date if you want it.

**Ms BOOTHBY:** Are you refusing to answer the question on liquor licensing?

**Ms FYLES:** It is 20 December. I am pointing out the relevant minister for that bill.

**Ms BOOTHBY:** You have answered that question. Is it the same date for the three affected licences?

**Ms FYLES:** There are four in total, and yes.

**Ms BOOTHBY:** Dan Murphy's, plus the three others.

**Ms FYLES:** Yes.

**Ms BOOTHBY:** Great. Will any decision be final or can we expect to wait longer as additional legal challenges play out?

**Ms FYLES:** It subject to judicial review and I cannot predict that.

**Mr BURGOYNE:** How many other applications in the last financial year would have come under other ministers' portfolios?

**Ms FYLES:** None.

**Ms BOOTHBY:** Given your comments about the Minister for Small Business as the lead, is the Director for Licensing going to appear with the Minister for Small Business tomorrow during estimates?

**Ms FYLES:** No, as I said he is an independent statutory officer.

**Ms BOOTHBY:** Thank you. I am glad he is here today.

For the three licences that are not Dan Murphy's do you know whether the Director for Licensing will be taking community impact into consideration?

**Ms FYLES:** It is a process under review and considering it may be subject to judicial review it will be inappropriate for me to provide commentary on that, Mr Chair.

**Ms BOOTHBY:** Will the Director of Licensing be taking community impact into consideration?

**Ms FYLES:** Mr Chair, it would be the same response I just provided.

**Ms BOOTHBY:** What was so broken with the system of the licensing application process that led to a change in legislation to ultimately change the process from a group of people within a commission to one commissioner making this decision?

**Ms FYLES:** As I have spoken about in the media, a decision was made by the Minister of Small Business to provide certainty for community and businesses regarding those amendments. It was the ability for the Director of Licensing to fix the process based on historical matters.

**Ms BOOTHBY:** Can I just go back to the Director of Liquor Licensing—you mentioned it is independent. He can sit at the table and answer our questions independently, is that correct?

**Ms FYLES:** In regard to these matters today, a bill was introduced to allow a decision to be made—to force a decision to be made—on four historical liquor licences. He will do that in due time; we have given the time frame when that will be provided.

**Ms BOOTHBY:** Given that he is independent, can he sit at a table like this and answer questions? We would like to ask the independent Director of Liquor Licensing the questions.

**Ms FYLES:** He is here today to provide answers on operational matters of Licensing NT, not his role as the independent Liquor Commissioner.

**Mr TURNER:** A point of order, Mr Chair! Can we direct the Member for Brennan to 4.3 in the Estimates Committee information manual? The Member for Brennan may ask questions of the minister. If the minister wants to speak to her agency officers to provide relevant information she can, but the questions must remain asked to the minister.

**Ms BOOTHBY:** Can I clarify then, minister, are you dictating to the independent Director of Liquor Licensing what he can and cannot do?



**Mr TURNER:** A point of order, Mr Chair! Standing Order 109; manner and form of questions. I direct to the Member for Brennan that the question should not contain statements of fact, arguments, inferences, imputations, insults or hypotheticals, not ask the minister for an expression of opinion. She might want to reword her questions.

**Ms BOOTHBY:** Can I just point out that on Monday we had the independent statutory officers here to speak, so I am not sure why we cannot have the independent Director of Liquor Licensing speak.

**Ms FYLES:** I just explained that he is here in his capacity as Director of Liquor Licensing and is happy to take questions on that, but he will not be answering questions on his role as the Liquor Commissioner.

**Mr BURGOYNE:** How many amendments to liquor licences have been approved in the last financial year?

**Ms FYLES:** There are 532 active liquor licences in the Territory. Just to give an indication, there are 65 in Alice Springs and 214 in Darwin city. I would have to take that on notice, because there are matters being dealt with by the Liquor Commission in terms of licences and variations. I do not have that before me—it could be as simple as a name change right through to a material alteration. I am happy to take that on notice.

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#### Question on Notice No 5.18

**Mr CHAIR:** Member for Braitling, please restate the question for the record.

**Mr BURGOYNE:** How many amendments to liquor licences have been approved in the last 12 months?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The number asked by the Member for Braitling has been allocated the number 5.18.

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**Mr BURGOYNE:** What is the approval process?

**Ms FYLES:** In some cases, if it were just a name change, for example, they would lodge the paperwork with Licensing and it would make sure they are a fit and proper person. Some of the matters are referred to the Liquor Commission for variations to licence conditions if it is temporary or permanent. It would vary greatly, what those matters may be.

**Mr BURGOYNE:** I think it goes back to the question we asked earlier: is there an average time for approvals? I understand that some take weeks and some take months or years. Do we have an average time of approvals for liquor licences?

**Ms FYLES:** I was unable to provide that response; I have not suddenly found the answer.

**Mr BURGOYNE:** How many new licences have been approved in the last 12 months—in the last financial year?

**Ms FYLES:** I can take that on notice. There is a moratorium on takeaway licences in the Northern Territory, but there is no saying we would not have seen restaurant licences, for example. A licence could be a one-off community event. We will endeavour to get that information and a bit of understanding and context to you.

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#### Question on Notice No 5.19

**Mr CHAIR:** Member for Braitling, please restate the question for the record.

**Mr BURGOYNE:** How many new licences have been issued in the financial year 2019–20?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Braiiling of the minister has been allocated number 5.19.

**Ms BOOTHBY:** Minister, do you support the licensing of a Dan Murphy's store in Darwin?

**Mr TURNER:** Point of Order, Mr Chair! Standing Order 109, she is asking the minister for an expression of opinion.

**Ms BOOTHBY:** In that case, can I ask the minister if the evidence supports the licensing of a Dan Murphy's store in Darwin.

**Mr TURNER:** Point of Order, Mr Chair! Standing Order 109, the matter is still before the director, so I believe that would fall under asking for a legal opinion.

**Ms BOOTHBY:** Can I ask: does the evidence, prior to the new legislation coming in, support the licensing of a Dan Murphy's store in Darwin?

**Mr TURNER:** Point of Order. This will still technical be sub judice. I do not think it would be parliamentary for us to comment on that while the decision is waiting finalisation.

**Mr CHAIR:** I think even if it is taking in evidence, it is still asking for an opinion.

**Ms BOOTHBY:** Okay, I will try something else along a different line. Minister, has your position as Licensing minister been undermined by having the Small Business minister introduce the legislation?

**Mr TURNER:** Point of Order. I direct the Member for Brennan to Standing Order 109. Rather than me keep reading points of order, it might be worth having a read of it. I mean that in the politest way possible. It says:

*(b) arguments*

*(c) inferences*

*(d) imputations*

*(e) insults, or*

*(f) hypothetical matter.*

*Questions should not ask Ministers:*

*(a) for an expression of opinion*

*(b) to announce new policy of the government, but may seek an explanation regarding the policy of the government and its application, or*

*(c) for a legal opinion.*

**Ms BOOTHBY:** Minister, how many infringement notices and letters of warning were issued to licensees by the Director of Liquor Licensing in the past financial year?

**Ms FYLES:** During 2019–20, there were 881 operational visits undertaken in compliance activity on licences. During these visits compliance officers checked venues for compliance with licence conditions and relevant legislation, including the *Liquor Act 2019*, the *Private Security Act 1996*, the *Gaming Machine Act* and the *Tobacco Control Act*. Compliance activities always include that educative approach and advice. There were non-scheduled visits to ensure that venues comply with their licence conditions.

Between 1 July 2019 and 30 June 2020 there were 52 complaints received and actioned.

**Ms BOOTHBY:** How many harm-minimisation audits have been carried out by Licensing NT in the past year, under Division 4 of the *Liquor Act 2019*? How were they carried out? How are the licensees identified and what are the penalties for failing an audit?

**Ms FYLES:** The harm minimisation has not commenced yet, just the 881 compliance audits.

**Ms BOOTHBY:** Sorry, can you repeat that?

**Ms FYLES:** They have not commenced the harm minimisation visits. The compliance audits I just read out are what has taken place to date.

**Ms BOOTHBY:** No harm minimisation audits yet?

**Ms FYLES:** It has not commenced yet.

**Ms BOOTHBY:** When is it expected to commence?

**Ms FYLES:** Within the next 12 months.

**Mr BURGOYNE:** Minister, are there any plans for increased restrictions?

**Ms FYLES:** Do you mean from a COVID or non-COVID perspective?

**Mr BURGOYNE:** Non-COVID-19 perspective.

**Ms FYLES:** We have the *Liquor Act 2019*. As I outlined in my opening statement, the technical review of that act is taking place, but it is very much aimed at making sure the act is working as we intended. Whether there was anything out of that—but there is nothing intended at this stage. The only thing would be under the emergency powers if we were to see an outbreak of COVID-19 and potentially, if Police, Emergency Services and Health requested something of the director.

**Mr BURGOYNE:** Based on the current crime issues, are there any considerations to the current restrictions. I guess that is what I am trying to get at—not COVID-19 related, in relation to current crime.

**Ms FYLES:** The Director of Licensing works closely with police—if there was a measure that police felt would help give them another tool in the toolbox, potentially. But we have a range of measures. We have seen the Police Commissioner enact section 48B about cease of trading. There are certainly a number of measures that police have if they believe the crime is fuelled by alcohol and they would need to enact them.

**Mr BURGOYNE:** If a previous application has been refused, what is the proper process to have that approved? If an application has been refused how does it then become—do they have to go back through the process?

**Ms FYLES:** The process would be a review by NTCAT.

**Ms BOOTHBY:** Minister, risk-based licensing is set to come into force at the beginning of the year. Is that correct?

**Ms FYLES:** Yes, correct. That was one of the key elements to the *Liquor Act 2019*. The Northern Territory, as I understand, is the only jurisdiction that does not charge an annual fee. So, we brought in the risk-based model. There have been intensive consultations with industry and key stakeholders. It is very much an incentive-based model.

We know that if we can stop the alcohol going to people who cause harm, we will have safer communities. The Member for Braitling just talked about crime.

The fees are calculated on a tier-based system that factors in a risk-based fee. We know that some sale of alcohol is riskier than other sales—and the volume of pure alcohol sales and hours of operation. There are incentives and a reduction in the fee for good compliance and having additional harm-minimisation measures in place.

Therefore, on the other side, infringements will attract additional fee loadings. In October, businesses were advised of their potential fee. I think the highest fee for a takeaway is \$4,000. That is for a takeaway outlet that would be selling quite a volume of alcohol. Businesses can reduce that by having those harm-minimisation measures. The notification of those fees was sent to businesses in October. They have certainly been provided with that information.

We have been working closely with them on the implementation of this. From our perspective, we do not want to raise revenue from this; we want good compliance so that we do not have harm in the community. Those licence authorities—there is the liquor licence and under that is an authority. There are 25 different authorities. They range from \$50 per annum to the very high risk one, as I said, which is \$4,000.

**Ms BOOTHBY:** Minister, what feedback has Licensing NT had on the risk-based licensing scheme? What will be the administrative burden for the department and retailers of this scheme?

**Ms FYLES:** This has been worked on and consultation was held for many years. As I said, we sent out those notices in October so businesses are well aware. We have been working with businesses. There were measures in place to help them make their businesses safer and reduce the harm to community.

The \$360,000 estimated that the risk-based licensing will collect will go back into education, monitoring and evaluation of initiatives designed to reduce the alcohol-related harm. From the government's perspective we do not want to be collecting this revenue; we want to see harm reduction. We know that most licensees do the right thing. They can reduce those fees.

I meet with industry stakeholders regularly. There has not been negative feedback about this.

**Mrs LAMBLEY:** Could I ask a question, please, Mr Chair?

**Mr CHAIR:** Member for Araluen, welcome back.

**Mrs LAMBLEY:** Thank you. I had a lovely break. About a month ago you introduced suspicious transaction reporting into Central Australia. It only comes into effect when the PALIs are not there, so presumably the PALIs have been there all the time because I know that is a policy of your government. How many people have been reported to the police and how many grog-runners have you caught through this mechanism?

**Ms FYLES:** That would be a question for police; they hold those figures. That was something the Liquor Commission brought into place and they worked with local retailers, who initially wanted a mechanism—but I understand police have those figures.

**Mrs LAMBLEY:** Under duress from the Liquor Commission. You do not have those figures? It is purely in the hands of the police, thank you.

**Ms BOOTHBY:** Minister, what is the funding this year for the Banned Drinker Register and can you explain what is covered by those costs?

**Ms FYLES:** The Banned Drinker Register aims to improve community health and safety by reducing alcohol-related harms. It reduces alcohol supply by stopping the supply to those who have caused harm. In terms of the Banned Drinker Register, I do not have the specific figure here, but it provides for the equipment which was rolled out a few years ago. It provides for the upkeep and support of that equipment. I am happy to take that specific on notice.

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#### Question on Notice No 5.20

**Mr CHAIR:** Member for Brennan, please restate the question for the record.

**Ms BOOTHBY:** What is the funding this year for the Banned Drinker Register and can you explain what is covered by those costs?

**Mr CHAIR:** Minister, do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Brennan has been allocated the number 5.20.

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**Ms BOOTHBY:** Minister, what is the current outage rate for BDR equipment? What happens on the retailer side when BDR machines do not operate?

**Ms FYLES:** If there is a telephone or power outage, retailers are able to still sell product. Once the system is re-established it will notify the register that someone has breached the Banned Drinker Register and they will then act upon that saying there was a breach. The system flags a red or green screen at the point-of-sale, but from time to time we will see if telecommunications or power are down, they are unable to utilise that. The retailer can sell the product and if there has been a breach, we chase that up with the individual later on.

**Ms BOOTHBY:** You are saying that if there is a power outage or the phone lines go down, then they can still scan the IDs?

**Ms FYLES:** They manually input the information and once it all comes back online, they will look at that and if there has been a breach, it can be dealt with.

**Ms BOOTHBY:** Are there any plans to upgrade the BDR equipment in the near future?

**Ms FYLES:** There are no specific plans but as technology continues to evolve, we want to be responsive to business and provide as much information. We will look at that.

**Ms BOOTHBY:** Minister, what is the status of the Code of Practice for Responsible Promotion and Advertising of Liquor and when will that be in place? What stakeholder consultation has taken place and what feedback has licensing had?

**Ms FYLES:** There was a lengthy period of consultation and it is already in place.

**Ms BOOTHBY:** When did that take effect?

**Ms FYLES:** A few months ago.

**Ms BOOTHBY:** Do you have the date, minister?

**Ms FYLES:** I do not, this has been a long year.

**Ms BOOTHBY:** What stakeholder consultation took place?

**Ms FYLES:** There was significant consultation. It was around two years with industry.

**Ms BOOTHBY:** Industry. Anybody else?

**Ms FYLES:** Community and industry. People knew we were doing it; it was not like we were sneaking around trying to avoid any scrutiny.

**Ms BOOTHBY:** Minister, are the draft community impact assessment guidelines for the liquor applications publicly available for consultation?

**Ms FYLES:** No, not yet. I understand they are still with the commission.

**Ms BOOTHBY:** Are there plans to have them made public for consultation?

**Ms FYLES:** Yes. The commission is just working through some final aspects of it. Once they come back to us there will be community consultation.

**Ms BOOTHBY:** And when would that happen?

**Ms FYLES:** We are in the hands of the commission on that one, but I would hope in the next few months.

**Ms BOOTHBY:** Have they provided you a report on when that will be?

**Ms FYLES:** We are aware that they are looking into some elements of it but they have not given us a fixed time frame.

**Ms BOOTHBY:** Minister, under codes of practices promulgated under section 79(a) of the *Gaming Control Act 1993*, is it permissible for lottery tickets to be distributed in convenience stores or service stations?

**Ms FYLES:** Yes, this is an issue that has been brought to my attention recently. Traditionally you see those lottery tickets sold only at newsagents but I understand that some of those products are now trying to shift into other areas. I have been made aware of that and spoken with the department about the fine balance between having people accessing a product they want but at the same time, understanding that a lottery product, as innocent as it may seem, can potentially cause harm—so what protections need to be in place.

**Ms BOOTHBY:** Minister, how many convenience store lottery licences have been applied for?

**Ms FYLES:** It is not something that is specifically licensed; it is a commercial arrangement with those providers.

**Mr BURGOYNE:** Minister, how many liquor licences have been suspended in the last financial year?

**Ms FYLES:** I have that but I just have to find it under this mountain of paperwork. I think this comes back to the question I took on notice because I have some figures but I do not have all of them. I only have the Liquor Commission's; I do not have all the complaints. The shadow minister already asked that and we took it on notice.

**Mr BURGOYNE:** In relation to the number of licences that were suspended?

**Ms FYLES:** Or complaints, sorry. I am happy to take that on notice.

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#### Question on Notice No 5.21

**Mr CHAIR:** Member for Braitling, please restate the question for the record.

**Mr BURGOYNE:** How many liquor licences have been suspended in the financial year 2019–2020. Can I please have the figures for the previous financial year 2018–2019?

**Ms FYLES:** To provide some clarity, there have been some short suspensions of trading if a licensee has breached their condition, but we would be happy to provide that to the committee. I also have a response to a previous question taken on notice.

**Mr CHAIR:** Minister do you accept the question?

**Ms FYLES:** Yes.

**Mr CHAIR:** The question asked by the Member for Braitling has been allocated the number 5.2.1.

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#### Answer to Question on Notice No 5.20

**Ms FYLES:** The answer is that the funding sits with DCDD, which is the old DCIS as it moved with the machinery of government changes digital technology. I think that is Minister Kirby tomorrow. We will see if his team is listening in.

**Mr BURGOYNE:** How many members make up the Liquor Commission?

**Ms FYLES:** There are 15 members, but not all have to be present. As I said before some are allocated to a hearing and others are not.

**Mr BURGOYNE:** How many members are there currently? Are there vacant positions on the Liquor Commission?

**Ms FYLES:** Not that I am aware of: 15 filled positions.

**Ms BOOTHBY:** Minister, what is the status of the review of the *Racing and Betting Act 1983* and will the draft of proposed legislative changes be made public?

**Ms FYLES:** There is some work under way but nothing has been made public yet. But there are certainly plans to do so in terms of the review of that act.

**Ms BOOTHBY:** Is there a time frame of that review?

**Ms FYLES:** No, not confirmed.

**Ms BOOTHBY:** What is the current cap on community gaming machines and how many of those machine spots are currently allocated?

**Ms FYLES:** The current cap on gaming machines is 1,699, which is down from 1,734 in 2019. Since we came to government in 2016, we have been progressively—every time people hand back licences, we have been reducing the cap. The breakdown is 886 for clubs and 722 for hotels and taverns currently approved. Some have been allocated and they may not be using them. Over time hand they are handed in, then we reduce the cap even further.

**Ms BOOTHBY:** It is currently 1,699?

**Ms FYLES:** Yes, which is down from 1,734.

**Ms BOOTHBY:** And all of those machines are currently allocated?

**Ms FYLES:** There are 1,608 approved to be used across 76 licences in the Territory, which is at 66 venues. For example, a premises not operating might be the Darwin RSL—just to open another wound.

**Ms BOOTHBY:** Minister, how much foregone revenue was recorded as a result of the waiver of community gaming machine and casino taxes in March 2020 to provide relief during COVID and how long will this concession be expected to last?

**Ms FYLES:** I provided some of that information in my opening statement. I am just trying to remember what I said now. It was foregone revenue as well as taxed waived. There was \$2.7m incurred on the Community Benefit Fund that we believe they missed out on because the venues were shut and we did not collect that revenue.

**Ms BOOTHBY:** Minister, on the Community Benefit Fund levy, with revenues fallen since last year, is that difference attributable to COVID entirely?

**Ms FYLES:** Yes, it was when the gaming venues were closed and therefore the machines were not in operation. But we did see one component of the CBF, the events grants did not go ahead. We just a couple of weeks ago rolled out the major grants and the minor grants program is open all year round for up to \$15,000. We endeavour to get those back to community groups within a four-week turnaround.

I have the answer to another question too, Mr Chair.

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#### **Answer to Question on Notice No 5.21**

**Ms FYLES:** There were four licences suspended and they varied from 48 hours to 28 days.

**Mr BURGOYNE:** In 2019–20?

**Ms FYLES:** Yes.

**Mr BURGOYNE:** And 2018–19?

**Ms FYLES:** Sorry.

**Mr CHAIR:** We will leave that one on notice, shall we?

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**Mr CHAIR:** Thank you, members. That concludes the time we have today with the minister, unfortunately. That concludes consideration of the outputs relating to Tourism and Hospitality; Major Events; and Racing, Gaming and Licensing. On behalf of the committee, I thank the minister for appearing today—who, by my notes, took 172 questions. I thank the agency officers and everyone else who has assisted the minister.

The committee will now move to consider the Department of the Attorney-General and Justice. We will take a short break to allow for the staff to change over.

**Ms FYLES:** In conclusion, I thank the committee for the opportunity to appear today. I also thank the staff who have given up their time in preparation and for attending today.

**Mr CHAIR:** Thank you everybody. We will return after a short break.

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The committee suspended.

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## MINISTER UIBO'S PORTFOLIOS

### DEPARTMENT OF THE ATTORNEY-GENERAL AND JUSTICE

**Mr CHAIR:** Welcome back to the Estimates Committee hearing. Now we have the Department of the Attorney-General and Justice. I welcome you, Attorney-General and Minister for Justice and invite you to introduce the officials accompanying you. I will then invite you to make a brief opening statement.

I will then call for questions relating to the statement. The committee will consider any whole-of-government budget and fiscal strategy-related questions before moving on to output-specific questions and, finally, non-output-specific budget-related questions. I will invite the shadow minister to ask their questions first, followed by committee members. Finally, other participating members may ask questions. The committee has agreed that other members may join in on a line of questioning pursued by a shadow minister rather than waiting for the end of the shadow's questioning on the output.

**Ms UIBO:** I acknowledge the Larrakia people who are the traditional owners of this beautiful country we are able to conduct business on today at Parliament House in Darwin. I acknowledge the Larrakia elders past, present and future.

I will introduce those sitting at the table with me from the Department of the Attorney-General and Justice. I have with me the Acting Chief Executive Officer of the Department of the Attorney-General and Justice, Ms Gemma Lake; the Acting Deputy Chief Executive Officer, Mr Craig Smyth; and the Chief Operating Officer, Ms Alecia Brimson. I also advise the committee that directors who are responsible for each output group will join me at the table as required.

I will now make a brief statement in relation to the portfolio of the Attorney-General and Justice.

The department focuses on delivering legal services to government, supporting the government's legislative program, providing support to victims of crime and administering a strong and responsive justice system in the Territory. In addition, the department promotes community safety through correctional interventions and regulates workplace health and safety. It also plays a key role in protecting the rights and interests of Territorians through a number of independent offices.

The department encompasses seven output groups, the first being Legal Services, which provides government with quality legal advice, representation and policy development. It also supports victims of violent crime and conducts important research into the criminal justice system. The department continues its work in the area of law reform, including court reform, criminal procedures, vulnerable witnesses, corrections reform and victims of crime reform. The department will also embark on legislative reform to support the recommendations of the Territory Economic Reconstruction Commission.

Legal Services also administers a number of grants, including funding to the Northern Territory Legal Aid Commission and the Northern Australian Aboriginal Justice Agency, NAAJA, and some other smaller grants that were previously funded directly by the Commonwealth. This will ensure the commission and NAAJA can continue to provide appropriate and timely representation for Territorians in the justice system.

The Correctional Services output group provides a safe, secure and humane custodial service that targets reoffending through focus rehabilitation programs, education and training. Correctional Services is responsible for monitoring and supervising community-based offenders to ensure compliance with orders of the court and Parole Board of the Northern Territory for whom they also provide secretariat support.



NT Correctional Services continues its focus on reducing reoffending and producing better outcomes for prisoners through targeted rehabilitation programs to support improved community integration. The Court and Tribunal Support Services output group provides administrative support services to enable delivery of justice to the Territory community by courts and tribunals.

In October this year I opened the newly refurbished Local Court in Alice Springs, which will provide improved services and safer court facilities for children and a specialist approach to domestic violence and vulnerable witnesses. A milestone was reached this year on the Aboriginal Justice Agreement when I opened the first alternative to custody centre based in Alice Springs. This centre is the first of its kind in the Territory and has been established for Aboriginal women to provide tailored rehabilitation services that target underlying causes of offending. A similar facility is planned for young men based on Groote Eylandt.

It is important to note that while the CEO is the accountable officer under the *Financial Management Act 1995* and the *Public Sector Employment and Management Act 1993* for the administration of the department, many of its arms are independent in the delivery of the functions by virtue of statutory appointment. The Director of Public Prosecutions is one such statutory office. The DPP continues to provide an independent public prosecution service to the Territory and support the witnesses and victims through the criminal justice process.

The Independent Officers output group, which includes a range of independent statutory bodies, continues the important role of protecting the community's rights. The NT WorkSafe output ensures that businesses and workers meet the responsibilities under the law in regard to workplace, health and safety. NT WorkSafe also provides assistance to businesses and workers to meet their responsibilities, through workplace visits, advice, audits and inspections. WorkSafe continues to work on implementing the recommendations from the Lyons review, which aims for further improvement in workplace health and safety.

The Corporate and Governance output group continues to deliver high-quality support services to the department with continued focus on increasing efficiencies and streamlining internal service delivery. The reform associated with the Northern Territory Government centralisation of corporate services will see significant change to this particular output.

The most significant change to the operations of the department this year is the transfer of Licencing NT to the new department of Industry, Tourism and Trade following the recent Northern Territory Government restructure.

I will now gladly welcome questions from the Estimates Committee.

**Mr CHAIR:** Thank you, Minister. Are there any questions on the statement?

**Mrs FINOCCHIARO:** Minister, why has the Ombudsman not been provided a copy of the Paget review?

**Ms UIBO:** The Paget review has been under consideration in regard to the release. I note that the former Attorney-General had committed to provide this document release of the report. To my knowledge my office has not received a request for a copy from the Ombudsman but I am aware that a copy has been requested by the Department of the Attorney-General and Justice. I will pass to the Acting Chief Executive Officer, Ms Gemma Lake.

**Ms LAKE:** Yes, the Paget report was initially embargoed and was not able to be released. The Ombudsman has only just written to me as of yesterday to request a copy of that report. There is a process in this legislation that we need to go through in order to provide that to him. The department is working through that process with the intention that he will be provided with a copy.

**Mrs FINOCCHIARO:** Why was it embargoed?

**Ms LAKE:** It was embargoed due to security matters but that might be a better question for the Correctional Services output for the Commissioner.

**Mrs FINOCCHIARO:** Who made the decision to embargo it?

**Ms UIBO:** Opposition Leader, this has been under consideration from Cabinet based on legal advice from the Department of Public Prosecutions in regard to the ongoing criminal matters currently in court for those involved in the incident the report relates to.

**Mrs FINOCCHIARO:** Cabinet made the decision to embargo the report based on legal advice it received from the DPP?

**Ms UIBO:** Yes, Opposition Leader.

**Mrs FINOCCHIARO:** Will that report be made public?

**Ms UIBO:** Based on legal advice, once the court proceedings have been completed for those who have been involved in proceedings, I intend to release the report and executive summary.

**Mrs FINOCCHIARO:** To the public?

**Ms UIBO:** Yes, it will be based on the legal advice we receive and reconsider as a Cabinet.

**Mrs FINOCCHIARO:** On 20 June 2020, the Chief Minister and Police minister put out a glossy press release, 'Cutting Youth Crime and Supporting Our Police'. It had a laundry list of tough talk the government was going to do to address crime. They have indicated this fit within your remit, Attorney-General. I wanted to go through each of them and ask how they are going.

The first is clear and immediate consequences for repeat offenders. Where is that up to?

**Ms UIBO:** I am pleased this body of work is under way since we retained our Labor government. There are particular areas the Department of the Attorney-General and Justice is looking at and one of those is introducing legislation to target adults who recruit youths to commit criminal acts. We are looking to introduce that early next year to parliament.

**Mrs FINOCCHIARO:** Sorry, I do not think I heard you correctly.

**Ms UIBO:** What we are looking to do is introduce new laws to parliament early next year to target adults who recruit youths to commit criminal acts. The colloquial term used to refer to this is ringleader legislation.

**Mrs FINOCCHIARO:** Okay, so that is on the ringleader point and early next year we should expect to see ringleader legislation in the parliament?

**Ms UIBO:** That is correct, Opposition Leader.

**Mrs FINOCCHIARO:** Under 'Clear and Immediate Consequences for Repeat Offenders', it says:

*...including the establishment of a community work program that will see offenders cleaning graffiti and clearing weeds and landscaping.*

When will that legislation be before parliament?

**Ms UIBO:** Opposition Leader, can I clarify if is this is in regard to adult or youth? There is a distinction.

**Mrs FINOCCHIARO:** Perhaps you could tell me? It is in regard to the glossy puff-piece before the election.

**Ms UIBO:** Would you be happy to table that? I do not have a copy with me.

**Mrs FINOCCHIARO:** I will not table it because it is what I am referencing, but I am sure someone from your team could print off the press release from government of 20 June 2020. I will be going through it so it will be helpful to you. Can someone just google it on NT Newsroom?

This is a promise from your government to establish a community work program that will see offenders cleaning graffiti and clearing weeds and landscaping. What work has progressed on that commitment?

**Ms UIBO:** Opposition Leader, I believe that would be directed to the output related to Community Corrections, which is output 2.2.

**Mrs FINOCCHIARO:** This is an Attorney-General's. It is not corrections, it is law-making.

**Ms UIBO:** Sorry, can you please repeat the question?

**Mrs FINOCCHIARO:** It is titled, 'Clear and Immediate Consequences for Repeat Offenders', but the actual part is:

*...including the establishment of a community work program that will see offenders cleaning graffiti and clearing weeds and landscaping.*

Presumably there has to be legislative changes for that.

**Ms UIBO:** It is my understanding that is written in relation to the *Youth Justice Act* and youth offenders so that would be better directed to Minister Worden whose responsibility is with that act.

**Mrs FINOCCHIARO:** This all becomes very unclear because whenever I ask questions in parliament, they all point to you. When I ask questions of you, you point to them. They all say, 'Well, that is the Attorney-General's; we are working with Attorney-General on that'. Either your department is supporting Territory Families to prepare—perhaps there is no legislation, I do not know, but your agency must have some hand in this policy delivery.

**Ms UIBO:** Opposition Leader, to clarify, when the Department of the Attorney-General and Justice works with agencies, they are the client agency. Again, if it is specific to an agency and a department, it would be better directed to that agency or department to answer. As I have mentioned, this one is related to youth justice and would go to Minister Worden who has carriage of that. The Attorney-General and Justice works on the reform and legislation side, but client services would be the Department of Territory Families, Housing and Communities.

**Mrs FINOCCHIARO:** Would Territory Families be developing the policy or would it be Attorney-General's?

**Ms UIBO:** Opposition Leader, I do not have a copy of the media release you have in your hand.

**Mrs FINOCCHIARO:** I am sure someone has found it by now. They are all sitting up there listening.

**Ms UIBO:** My understanding, Opposition Leader, is that is a range of agencies. Again, Attorney-General and Justice provides for client services across all of government. Included in that media release you have are the agencies of Territory Families, which is now Territory Families, Housing and Communities; the Attorney-General and Justice, which I have carriage of; and Police, Fire and Emergency Services. There is a range of different agencies as a part of whole-of-government measures looking to support safer communities in the Northern Territory.

**Mrs FINOCCHIARO:** That is why I am asking who does the policy development? Who develops the policy that ...

**Ms UIBO:** The policy would be developed by the lead agency. In this case ...

**Mrs FINOCCHIARO:** It is Territory Families.

**Ms UIBO:** Yes, correct.

**Mrs FINOCCHIARO:** Here, it arrives. Thank you; that was a bit slow. Policy developed by lead agency. Thank you, Attorney-General. That was dot point one.

Dot point two—you answered ring leader legislation. That will be early next year.

Dot point three—tough bail and monitoring conditions, increasing compliance checking of youth bail to reduce repeat offending through additional staff in Police and Territory Families, along with increased funding for alcohol and the drug testing.

**Ms UIBO:** This media statement, which the Opposition Leader is referring to, clearly has on the title 'Cutting Youth Crime and Supporting Our Police'. I believe the majority of the questions that she will refer to are based on the dot points from the copy I have that was released on 20 June 2020. It is related to cutting youth crime, which would therefore lie with Territory Families, Housing and Communities ...

**Mrs FINOCCHIARO:** That is why we are going through this process, minister.

**Ms UIBO:** ... under the minister for Territory Families.

**Mrs FINOCCHIARO:** That is why we are going through the process. I will ask you and if that is the case, you can let me know.

**Mr TURNER:** A point of order, please, Mr Chair! Scope of questions. The questions should be going to the operations or funding of positions of the departments and agencies seeking funds in estimates, complying with Standing Order 109.

**Mr CHAIR:** Thank you, Member for Blain. Opposition Leader you have the call.

**Mrs FINOCCHIARO:** Minister, if that is the case, that is fine. But I would like to go through them to work it out, of course, if it does fall to you. If I do not ask you, then no one else will be available for me to ask these questions. By your logic, the Chief Minister would have answered my questions because his name is at the top of the media release. But I asked him these questions and he refused to answer anything about this media release. Forgive me if they are not strictly within the Attorney-General's, but if you can point me to exactly where they are that will be very helpful.

**Ms UIBO:** Opposition Leader, I can save you a bit of time and just give you the two that will be under carriage of me as the Attorney-General and Minister for Justice. That is, targeting ring leaders and the legislation and work in that space and, on page 2, penalties for property crime—we are working with police. We can talk to those two as the Department of the Attorney-General and Justice. The rest are for other agencies and other ministers.

**Mrs FINOCCHIARO:** Can you tell me the other agency they are for please? Are they all Territory Families?

**Ms UIBO:** They would all be Territory Families unless, for example, it is clearly stated remote policing. That would be for police. Supporting our police would be for police.

**Mrs FINOCCHIARO:** Yes, All the rest are Territory Families?

**Ms UIBO:** Correct. Penalties for property crime and ring leader legislation are the two related to the Attorney-General and Justice on that media release and statement.

**Mrs FINOCCHIARO:** Excellent.

**Mr CHAIR:** Thank you, Attorney-General. That is very helpful.

**Mrs FINOCCHIARO:** Much more helpful than the Member for Blain.

Penalties for property crime—reviewing of penalties for all property offences, including unlawful entries and unlawful use of motor vehicles.

**Ms UIBO:** The reform and the work we are doing as a Labor government to ensure that we have safe, strong, healthy and thriving communities is an area of high community interest and concern. This is something we want to act on very quickly in this second term of government. I will pass to the Acting Chief Executive Officer, Gemma Lake, for an update in that area of the legislative reform work we are doing with AGD.

**Ms LAKE:** On the penalties for property crime, our legal policy area has already commenced reviewing the property crime offences and penalties in the Criminal Code and we will continue work on that. We have met with Police and Territory Families and will work with them through that process.

**Mrs FINOCCHIARO:** Will there be a public consultation period for reviewing the penalties for property offences?

**Ms LAKE:** We are in the early stages of that reform and we always go through a consultation process of sorts with all of our legislative reform. I expect there will be, but we have not arrived at that level of detail yet because it only got under way recently.

**Mrs FINOCCHIARO:** How long is this review process set to take? How long will the review of the penalties for property offences take?

**Ms UIBO:** We do not have a time frame at hand because we are collating some of the bigger pieces of work in terms of reform through the agency. Once we have that we will be able to take that question on notice, in

terms of time frame. There is a larger body of work. Making sure that the reform in legislation is complimentary to other legislation that we have or are developing will be very important.

Mr Chair, we can take that question on notice.

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**Question on Notice No 6.1**

**Mr CHAIR:** Opposition Leader, please restate the question for the record.

**Mrs FINOCCHIARO:** When will the review for penalties for all property offences be complete?

**Mr CHAIR:** Minister do you accept the question?

**Ms UIBO:** I accept the question. I just want to point out that the Minister for Police, Fire and Emergency Services is putting this as a high priority. We will work through that time frame with her agency as well.

**Mr CHAIR:** The question asked by the Opposition Leader has been allocated number 6.1.

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**Mrs FINOCCHIARO:** I have to say I am pretty alarmed by the fact there is no fixed time frame for this review. I would have thought it an immediate priority of this government, given how crime is such a big issue across the Territory. Property offending is leaving behind victims, no matter where you go. Reviewing the penalties and understanding whether or not they are adequate is key to governing and ensuring community safety. So how there is no fixed time frame around this really shows your government's lack of commitment to addressing this issue.

**Mr TURNER:** Point of order.

**Mrs FINOCCHIARO:** The ministerial saviour: the Member for Blain.

**Mr TURNER:** I can raise another point of order for interrupting members if you would like?

**Mrs FINOCCHIARO:** He is going to use some random standing order that is not going to apply and then I will ask the next question. Alright, let us hear it.

**Mr TURNER:** Standing Order 109, the question should not ask the minister for an expression of opinion and that was a comment rather a question.

**Mrs LAMBLEY:** Point of order Mr Chair. I observed the minister just about to answer that question and she was actually interrupted by the Member for Blain, saying that she should not answer the question. Surely, the decision to answer the question should be up to minister herself.

**Mrs FINOCCHIARO:** Yes, you would think so.

**Mr TURNER:** Point of order.

**Mr CHAIR:** I will just deal with this point of order first, Member for Blain.

Member for Araluen, I agree the minister can answer the question as she sees fit—absolutely. She is the Attorney-General and minister. The Member for Blain is also allowed to raise a point of order. I am sorry that they collided or intersected.

Point of order, Member for Blain?

**Mr TURNER:** As you said, members can interrupt to raise a point of order.

**Mr CHAIR:** Minister, Attorney-General, you have the call.

**Ms UIBO:** Thank you Mr Chair, it will be a very lively seven hours. I am going to enjoy it. I appreciate the comments.

**Mrs FINOCCHIARO:** He wears thin on you, do not worry.

**Ms UIBO:** I appreciate the comments from the Opposition Leader, but I want to reiterate what I have said previously, that this is a priority and a large body of work. What seemingly sounds like it is a simple thing to do in regard to amending legislation or looking at property offences, is actually quite complex, which is why the work has already started.

The Opposition Leader incorrectly said we have not started, and that we are delaying it—asking why it is not an issue. It is absolutely an issue, we recognise that. This is why work is under way. There are complexities with the legislation.

It leads into a larger piece of work, which is tied into community safety in the Territory. Our communities, individuals and businesses alike deserve to be safe, so we are looking at complementary pieces of legislation. We are also looking at drafting new legislation. That takes time. I am sure you aware that we have very skilled and talented people in the department and the Office of the Parliamentary Counsel, who are drafting legislation.

We want to make sure the pieces of legislation we are either amending or drafting to introduce are complementary, tie in and do not butt heads against one another. It is all work that is done properly, concisely and in a timely manner.

I do not want to put out false time lines when we have bigger pieces of legislation that will need to work together in the space of community safety. I acknowledge that this is a priority for our government; it is already under way. When we see the time is right, we will give realistic time frames so we do not have high expectations if things take longer than expected. I will flag it as a priority and that we have people working on that area.

**Mrs FINOCCHIARO:** Can you explain what the complementary legislation is which is causing the lack of time frame on the completion of the review of penalties?

**Ms UIBO:** As I said, and you pointed the media statement that was released on 20 June, we have new legislation being introduced, which my agency and I have carriage of, which is targeting ringleaders. We will make sure that what we do with new legislation is complementary to any legislation we are amending or looking to prioritise in the new year.

**Mrs FINOCCHIARO:** The reason there is no time frame for the review of penalties into property offences is that you need to see if it clashes with your ringleader legislation, which targets adults who recruit youths to commit offences—which you say will be in the parliament by early next year.

**Ms UIBO:** No, that piece of legislation—I will pass to Acting Chief Executive Gemma Lake. On paper you would expect it is seemingly simple. It is actually quite a complex body of work, so we are working through the time frames so we can prioritise them.

**Ms LAKE:** Opposition Leader, as you would know, the Criminal Code is a complex piece of legislation. It is big and there are many complex issues in there, so each time we amend it we have to be really careful to make sure we get it right and that everything balances together. Part of the ringleader legislation and the review of the penalties for property crime will be a careful and considered process.

**Mrs FINOCCHIARO:** No one wants it not to be careful or considered, but the government of the day sets the policy framework, then our terrific public service has to implement the policy.

Gemma, this is certainly not a question directed at you; you are implementing what is required of your agency. If the government wanted to fast-track this issue of penalties, you would say to the department, 'I want a review of penalties for property offences and I want it done in three months, six months or five years. Whatever you want you would say how you want it to be delivered to have an open-ended review time frame. And do not forget that the review comes before any legislation is done. We are talking about a long-protracted period of time. To have no time frame around the review lacks conviction to get anything done.

**Ms UIBO:** We have prioritised this and will do it at the earliest possible time as a priority of the Labor government. We have taken the question on notice in regard to the time frame.

**Mrs FINOCCHIARO:** It is very disappointing that you have no time frame for work and if the work goes as slow as you guys do everything else, then god help us.

**Ms UIBO:** Too fast; too slow (inaudible).

**Mrs FINOCCHIARO:** What do you do too fast? I would love to know.

**Mr CHAIR:** Members, can we do the estimates thing with nice questions and answers?

**Mrs FINOCCHIARO:** Given AGD is the holder of information in IJIS, which is what we have been advised, how many youth offenders were arrested last financial year?

**Ms UIBO:** I will have to pass to the department in regard to the IJIS system, noting that some information may also need to be collated manually. If we are unable to answer today, we will take it on notice. I will pass to Gemma Lake.

**Ms LAKE:** That is not a level of detail I have on hand. We would have to take that on notice.

**Mrs FINOCCHIARO:** Attorney-General, I have asked these questions in parliament and estimates and have put out statements about them. It is unbelievable that government—and it is not just you, the Police minister was not prepared for these either. Perhaps we will take that on notice.

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#### Question on Notice No 6.2

**Mr CHAIR:** Opposition Leader, please restate the question for the record.

**Mrs FINOCCHIARO:** How many youth offenders have been arrested in the last financial year?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** We will.

**Mr CHAIR:** The question asked by the Opposition Leader has been allocated number 6.2.

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**Mrs FINOCCHIARO:** How many of those youths were bailed?

**Ms UIBO:** Just to remind you, the *Youth Justice Act* sits under Kate Worden, the Minister for Territory Families and Urban Housing.

**Mrs FINOCCHIARO:** But this is Attorney-General data.

**Ms UIBO:** You are asking about the data? Your question was about the numbers of youths bailed.

**Mrs FINOCCHIARO:** Yes. How many youths have been bailed? The number.

**Ms UIBO:** We will have to take that on notice.

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#### Question on Notice No 6.3

**Mr CHAIR:** Opposition Leader, please restate the question for the record.

**Mrs FINOCCHIARO:** In the last financial year, how many of the youths who were arrested were subsequently bailed?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, we will.

**Mr CHAIR:** The question asked by the Opposition Leader has been allocated number 6.3.

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**Mrs FINOCCHIARO:** Attorney-General, how many youths who were arrested were refused bail?

**Mr CHAIR:** Opposition Leader, do you want to specify the time?

**Mrs FINOCCHIARO:** Yes, for the last financial year.

**Ms UIBO:** The IJIS system carries a huge amount of data; we do not have the data on hand, so we will take that questions on notice. Note that it would most likely be manually extracted so it will take time to collect that data.

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**Question on Notice No 6.4**

**Mr CHAIR:** Opposition Leader, please restate the question for the record.

**Mrs FINOCCHIARO:** For the last financial year, how many youths who were arrested have been refused bail?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, we will.

**Mr CHAIR:** The question asked by the Opposition Leader has been allocated number 6.4.

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**Mrs FINOCCHIARO:** Attorney-General, how many youths in the care of Territory Families were arrested last financial year?

**Ms UIBO:** Because that is directly related to Territory Families department, it is better directed to Minister Worden in her session tomorrow.

**Mrs FINOCCHIARO:** I hope her team is listening because that is what the Police minister said. Now I have asked two of you and the buck will stop with Minister Worden. Or will it? How many youths were given a verbal or written warning last financial year?

**Ms UIBO:** A verbal or written warning in what sense?

**Mrs FINOCCHIARO:** Of diversion.

**Ms UIBO:** My understanding is that would either sit with Police or Territory Families, not the Attorney-General and Justice.

**Mrs FINOCCHIARO:** Thank you. How many youths were arrested for new offending while on bail?

**Ms UIBO:** Again, unfortunately, that would sit with either Police or the Minister for Territory Families.

**Mrs FINOCCHIARO:** Can I ask why that is different? If you have the information of how many have been arrested, why would you not have the information of how many have been arrested while on bail?

**Ms UIBO:** I have just sought clarification. If it is in the IJIS system we will be able to extract that data, so we will have to take that on notice.

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**Question on Notice No 6.5**

**Mr CHAIR:** Opposition Leader, please restate the question for the record.

**Mrs FINOCCHIARO:** How many youths were arrested for new offending while on bail for last financial year?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, we will.

**Mr CHAIR:** The question asked by the Opposition Leader has been allocated number 6.5.

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**Mrs FINOCCHIARO:** How many youths undertook community service, cleaning graffiti or landscaping?

**Ms UIBO:** That would be better directed to the Minister for Territory Families who is responsible for the *Youth Justice Act*.

**Mrs FINOCCHIARO:** I wanted to circle back to a couple of your answers. You said some of that information would have to be manually extracted. This concept of manual data collection came up with the Police minister yesterday as well, which is hugely alarming. Obviously with youth crime we are trying to get to the bottom of it; we do not want it to happen and we want young people to make good decisions and be great contributors to your community, there is no question. No one wants to see young people just locked up for no reason and we all want them to have a great childhood and a great adulthood.

But, if we are not willing to capture the data needed to get to the bottom of this, we are going to keep putting band-aids on the solution. How is it—and everyone says repeat offending is key—that it is a few young people who do most of the crime, et cetera. It does not seem to me like we are properly electronically capturing the issue of bail and whether or not people are being repeatedly bailed or, whilst on bail, reoffending. That is huge.

Can you talk us through what is electronically captured and what is manually captured? If it is manually captured it says to me that we are not actually looking at that very important data about repeat offending.

**Ms UIBO:** We are talking in terms of the detail there. I have been advised in terms of outputs that would be better directed to Output 1.4, Criminal Justice Research and Statistics. We have the appropriate official who can appear in that output if you would like to save the question and direct it to that output.

**Mrs FINOCCHIARO:** Questions about manual extraction of data or electronic data—that person will be ready to answer my question?

**Ms UIBO:** Yes.

**Mrs FINOCCHIARO:** Wonderful. In terms of sentencing, which is data that AGD has, how many youths for the last financial year were sentenced to boot camps?

**Ms UIBO:** We would need to take that question on notice.

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#### Question on Notice No 6.6

**Mr CHAIR:** Opposition Leader, please restate the question for the record.

**Mrs FINOCCHIARO:** For last financial year, how many youths were sentenced to boot camps?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, we do, thank you.

**Mr CHAIR:** The question asked by the Opposition Leader has been allocated number 6.6.

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**Mrs FINOCCHIARO:** For last financial year, how many youths were sentenced to victim conferencing? Or is that purely that you are diverted to victim conferencing? Or is it both?

**Ms UIBO:** Considering your questions, if we are talking about diversion, it would be under the *Youth Justice Act*, through Territory Families.

**Mrs FINOCCHIARO:** But would that not be captured in IJIS?

**Ms UIBO:** If we are talking in regard to victim-offender conferencing, it would sit under Territory Families for youth.

**Mrs FINOCCHIARO:** If it is diversion, but not if it is sentencing? Sentencing would be AGD?

**Ms UIBO:** I am advised not for youth.

**Mrs FINOCCHIARO:** I will ask this question and you might need to take it on notice. Broken down into sentencing categories, please categorise how many youths were sentenced to each of the sentencing categories. It might be actual imprisonment, boot camps, video conferencing if it is part of that—whatever alternatives to sentencing programs you have.

We will have to take that on notice.

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**Question on Notice No 6.7**

**Mr CHAIR:** Opposition Leader, please restate your question for the record.

**Mrs FINOCCHIARO:** For last financial year, please break down the sentenced youths into sentence type categories for example, boot camp, victim conferencing, incarceration or any alternative sentencing options available.

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Opposition Leader is allocated the number 6.7.

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**Mrs FINOCCHIARO:** I have asked for numbers of arrests for last year, but I wanted to ask about numbers for conviction. How many youths were convicted last financial year?

**Ms UIBO:** We will have to take that on notice.

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**Question on Notice No 6.8**

**Mr CHAIR:** Opposition Leader, please restate your question for the record.

**Mrs FINOCCHIARO:** How many youths were convicted last financial year? How many of the youths convicted had one or more convictions? What was the average amount of time served of those convicted?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Opposition Leader is allocated the number 6.8.

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**Mrs FINOCCHIARO:** I wanted to ask about the age of criminal responsibility. Is that something your agency is leading?

**Ms UIBO:** This is being discussed at the national level, with the Council of Attorneys-General, with some of the reforms directed by National Cabinet. It has remained a ministerial group meeting virtually, which many people have been doing this year due to COVID.

Because of the national conversation, if there were any legislative changes in the Northern Territory, the Department of the Attorney-General and Justice would work closely with the Department of Territory Families, Housing and Communities.

**Mrs FINOCCHIARO:** Labor is walking away from its changes to the age of criminal responsibility and raising the criminal age. Will it now see what other jurisdictions do?

**Ms UIBO:** No, the conversation is happening at a national level. What we do in the Northern Territory will be what is best for the Northern Territory so we will be working in that space. It is important that the Northern Territory has a seat at the national table to see what other jurisdictions are doing. As far as other jurisdictions,

only one has made any legislative changes in this space. The Northern Territory will continue to look at its context but be very closely linked to having those conversations at the national level as well.

**Mrs FINOCCHIARO:** Is it still the government's policy position that it will raise the age of criminal responsibility?

**Ms UIBO:** The policy work is something that we are still looking at as a government but the actual work and the body of work will sit with the NT Department of Territory Families.

**Mrs FINOCCHIARO:** Was this not an election commitment from 2016?

**Ms UIBO:** Again, conversations have happened at a national level and the AGD will work closely with the client agency, which is Territory Families.

**Mrs FINOCCHIARO:** It was an election commitment in 2016. I think a couple of weeks ago one of your ministers was saying you would not be raising the age to 14, you would be raising it to 12, is that correct?

**Ms UIBO:** In regard to the royal commission—the Member for Araluen mentioned this as well—and the recommendation, the Northern Territory is looking at and committed to raising the age to 12. The big conversation nationally is age 14. That is what I want to make clear in terms of the Northern Territory's work, which will be led by the Department of Territory Families, Housing and Communities. The questions can be directed to Minister Worden tomorrow for that as the lead agency.

**Mrs FINOCCHIARO:** Abolishing mandatory sentencing, again was a 2016 commitment that has been on go-slow coming on for five years now and I can completely understand why. I do not know why you would make that commitment in the first place. But nonetheless, after being under the radar on this one, there was some very quiet consultation which turned into public consultation that closed on 25 November. What is the status of your consultation on abolishing mandatory sentencing?

**Ms UIBO:** The Law Reform Committee has been conducting a body of work on reforms, particularly in stopping and preventing crime, reducing offending and reducing incarceration rates. We are taking a whole-of-government approach. We are looking at measures to make safer communities as a result of investment in education and the investment in housing in the Northern Territory. When we talk about reforming justice, we referred to the experts with the Law Reform Committee.

I am not sure that many people know the Law Reform Committee is made up of expert volunteers in the profession. This has been a big body of work they have undertaken. I thank the Law Reform Committee and the members who have undertaken to produce a report to the government by March 2021. The public submissions to the Law Reform Committee conducting this report into mandatory sentencing closed on 25 November this year. We look forward to receiving that report in March next year.

**Mrs FINOCCHIARO:** How many submissions were there?

**Ms UIBO:** This was not a government submission process. The submissions would have gone directly to the Law Reform Committee.

**Mrs FINOCCHIARO:** The Law Reform Committee conducted the consultation, not the government?

**Ms UIBO:** The Law Reform Committee is conducting the report into mandatory sentencing which is independent of government. They will produce a report that will be provided to me as the Minister for Attorney-General and Justice and our government in March 2021.

**Mrs FINOCCHIARO:** The Northern Territory Government does not have in its possession or control the submissions to the review that closed on 25 November?

**Ms UIBO:** That is correct. It is through the Law Reform Committee, which is a body of volunteers from the legal profession, conducting the report and receiving that information directly from the public.

**Mrs FINOCCHIARO:** And when the Law Reform Committee provides its report in March next year, will it be made public?

**Ms UIBO:** As a government we will consider the report and take appropriate action once we receive the report.

**Mrs FINOCCHIARO:** When can Territorians expect your government to take a position on what mandatory sentencing it will abolish?

**Ms UIBO:** I know this is a high-interest area for our community, so we would look to make sure—in the reform we are doing in the space of justice across the Northern Territory we will consider that properly. The Law Reform Committee is made up of legal professionals. We will take the advice in the report and consider it properly. I would not like to hypothesise about time frames. We thank the Law Reform Committee and its volunteers for working on that report.

**Mrs FINOCCHIARO:** Is it still the Gunner Labor government's policy to abolish all mandatory sentencing?

**Ms UIBO:** We referred this area to the Law Reform Committee because of its expertise in being able to collate community submissions and interests directly and look at it from the point of view of the legal profession. We will consider that report next year.

**Mrs FINOCCHIARO:** It sounds like you walked away from the policy and are happy to take advice. Will government accept all the recommendations of the report?

**Ms UIBO:** We are talking about a report that will be received next year from the Law Reform Committee to our government. I am not talking about walking away from anything. When we do something in the space of reform, we want to do it properly and in a considered manner. We do not want to make rash decisions, because we see bad mistakes like we did with former CLP governments.

**Mrs FINOCCHIARO:** I see. We are going back to that old chestnut—interesting, given that mandatory sentencing and abolishing it as well as raising the criminal age of responsibility are both 2016 election commitments. I know it is hard for your government to acknowledge the errors of its ways, put itself on a new path or simply say, 'We are making a different decision'. But you are happy to drag this out to March. I guess in March we will see what, if anything, your government does.

**Ms UIBO:** I do not think we can criticise the Law Reform Committee, which is made up of volunteers in the legal profession and ...

**Mrs FINOCCHIARO:** I am not criticising the Law Reform Committee at all.

**Ms UIBO:** Saying the words, 'dragging out', is not fair to the people doing this body of work so we can make considered and appropriate decisions based on the best interests of the Northern Territory. I think it is derogatory to then pull down and say, 'dragging the time line out to March' when we are talking about volunteers from the legal profession—esteemed volunteers doing this large body of work with the community.

**Mrs FINOCCHIARO:** I have never said anything disparaging towards the Law Reform Committee. I have said that your government is dragging the chain on this.

Has the Law Reform Committee been working on this constantly since you made the election commitment in 2016? The answer is no, because it only just closed and opened consultation a couple of months ago. But I cannot wait to hear the answer. Has the Law Reform Committee constantly been preparing this report, that we will receive in March, since 2016?

**Mr TURNER:** Whilst the Leader of the Opposition is asking and answering her own questions, is the question asking the minister for an expression of an opinion?

**Mrs FINOCCHIARO:** No, I am not. That is asking her for an absolute fact answer.

**Mr CHAIR:** Thank you, Member for Blain. Opposition Leader, I suggest that you wait for the answer.

**Mrs FINOCCHIARO:** I will, thank you. I am very interested.

**Mr CHAIR:** The commentary is great; I would just wait for the answer.

**Mrs FINOCCHIARO:** I think the answer will be even better.

**Mr CHAIR:** But you are not Nostradamus, so let us wait for the answer.

**Ms UIBO:** I consider the interests of the committee members in this topic. The terms of reference were provided and worked through with the Law Reform Committee in 2019. As we know, 2020 has been quite an unusual year in the way people have been able to conduct business. Acknowledging that, an extension has been provided so we can receive the Law Reform Committee report regarding mandatory sentencing in March 2021.

**Mrs FINOCCHIARO:** Since 2019—which is entirely understandable and in no way reflects the committee dragging the chain, only your government. Member for Blain, you can post me an apology post card or something a bit later.

I would like to move on to police assaults, Attorney-General. How many people were convicted of assaulting police last financial year?

**Ms UIBO:** Opposition Leader, we will take that question on notice.

**Mrs FINOCCHIARO:** I have an extra part two, so do you want me to just ask it?

**A member:** She said she was taking it on notice.

**Mrs FINOCCHIARO:** I have two parts to the question, so I was just asking the Attorney-General if she would like me to.

**Ms UIBO:** Yes, I will.

**Mrs FINOCCHIARO:** See she is fine. You guys do not have to defend her. She is a very capable woman. She does not need the three of you defending her. It is alright, thank you.

**A member:** (Inaudible.)

**Ms UIBO:** Mr Chair I am happy to take the question from the Opposition Leader without the extra commentary ...

**Mrs FINOCCHIARO:** Thank you, see. It is fine. No issues. You are very protective.

**Mr TURNER:** Love the dramatics.

**Mrs FINOCCHIARO:** Like papa bears over there.

**Mr CHAIR:** I am just waiting for quiet.

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#### Question on Notice No 6.9

**Mr CHAIR:** Opposition Leader please restate the question for the record.

**Mrs FINOCCHIARO:** For last financial year how many people were convicted on assaults on police and what was the actual time served?

**Mr CHAIR:** Minister, do you accept the question.

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Opposition Leader has been allocated number 6.9.

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**Mr EDGINGTON:** I thank the minister for the opening statement I take the opportunity to acknowledge the hard work of Greg Shanahan. I wish him all the best as he enters the next chapter of his life after many years of diligent and dedicated service to the Northern Territory Government and the Department of the Attorney-General and Justice. These are certainly exciting time for the department. The Aboriginal Justice Agreement is progressing. There are a number of challenges that will need to be tackled in a number of areas. This will be an ongoing effort by everyone involved and we thank everyone in AGD for those efforts.

Minister, if we take out Licensing NT and I think—I am not sure about IJIS. The AGD budget for last year was \$362m compared to a total budget this year of \$393m. That is a considerable increase in overall funding, including legal policy, which has nearly doubled from \$24.749m in 2019–20 to \$43.201m in 2020–21. Can you step out the changes and responsibilities that will attach to those increases in funding?

**Ms UIBO:** Thank you, Member for Barkly, for your comments and also your interest as the shadow Attorney-General and shadow minister for justice.

The work the department does and the professionalism it provides—not just within our own agency but across to other government agencies—absolutely needs to be commended, particularly this year with COVID. Some of the urgent legislation that has been before the parliament in the previous Assembly was put through very professionally and of course was much needed because of the uncertainty, and continued uncertainty, in regard to COVID-19.

I have Alecia Brimson here, who will be able to speak to any variations in regard to the Attorney-General and Justice department. If there are any parts that we need repeated we will ask that, too, Member for Barkly.

**Ms BRIMSON:** In response to your question on the variation to the budget for 2019–20 to 2020–21, there were significant variations across a lot of our outputs, not just the movement of Licensing NT to the Department of Industry, Tourism and Trade. The department received an additional \$18.3m from the Commonwealth for legal services grants, largely in relation to NAAJA. Correctional Services received an additional \$3.4m for electronic monitoring. We also transferred money for ICT and Infrastructure to the Department of Infrastructure, Planning and Logistics, so Corrections lost \$2.916m.

Courts and tribunals transferred \$4.5m for the IJIS and Veritas programs to the Department of Corporate and Digital Development and \$2.2m for to repairs and maintenance transferred to DIPL.

We transferred the output for licensing—\$39.89m. In relation to corporate and shared services, \$4.862m was transferred to the Department of Corporate and Digital Development and the Department of Infrastructure, Planning and Logistics. There was a variation in relation to the free-of-charge services that those agencies passed back to the department, which was \$17.045m. It is not a cash number; it is a notional fee for the department.

They are the significant budget variations.

**Mr EDGINGTON:** How many full-time equivalents did AGD have last year and how many additional FTEs will the department have this year?

**Ms UIBO:** I will hand to Alecia for the detail. I am sure she has it quickly at hand. I note that there are many different roles for those sitting in the department.

**Ms BRIMSON:** As at pay 26 for 2019–20, the department had 1,464.27 FTEs. We had significant movement of FTEs out of the department, as you can appreciate, between last financial year and this financial year in relation to machinery-of-government changes. Forty FTEs transferred out. We had additional cohorts of Correctional Services officers who come in large tranches. The overall variation at the end of the financial year was a reduction of 9.34 FTEs.

We do not have the FTEs at this point in time.

**Mr EDGINGTON:** Can we take that on notice?

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#### Question on Notice No 6.10

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** How many full-time equivalents did AGD have last year and how many additional FTEs will the department have this year?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.10.

**Mr EDGINGTON:** Any functioning justice system requires funding levels for the DPP commensurate with the demands in increasing caseloads. In the last year there were 9,300 new matters, which is an increase of over 300 from the year before. However, the budgeted appropriation for the DPP this year is \$175,000 lower than last year. How can the DPP continue to ensure justice is served when they continue to be asked to do more with less?

**Ms UIBO:** I will pass to Alecia Brimson for some details. There have been some changes in regard to transfer of funds which Alecia can talk to in detail.

**Ms BRIMSON:** Changes to our funding to DPP primarily only relate to the transfer of funding a small component to the Department of Corporate and Digital Development in relation to their ICT platforms. They are now responsible for their maintenance and upkeep. There is also a small component of funding for infrastructure. They are the predominant variations in relation to their budget.

**Mr EDGINGTON:** Can you advise what the cost of the corporate services to AGD were last year and how much the overall expenditure on repairs and maintenance was last year?

**Ms UIBO:** We would need to take that question on notice.

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#### Question on Notice No 6.11

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** What was the total amount of funding expended on corporate services and repairs and maintenance in AGD last year?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.10.

**Mr EDGINGTON:** Minister, in your opening statement you spoke about community safety, focused rehabilitation and supervising community offenders. The COMMIT program that was introduced by the CLP and codified in the last term was designed to address all of these issues. Have you walked away from this successful initiative? If so, how deep do the funding cuts go?

**Ms UIBO:** Yes, it was originally a CLP initiative. It was funded for two years and there was no funding following that two-year commitment. We have continued it without any extra funding through Attorney-General and Justice. It is an area we want to look at—the effectiveness of programs and sustainable funding and long-term outcomes of those programs particularly on community safety, health and wellbeing.

This is an area we are very interested in. Because of the funding allocation not being extended after that original two years, and us taking it on because of the programming and the benefits of the program, we have looked to extend funding for COMMIT. It is not an allocated budget line, it something we have taken on through AGD until 31 March 2021. This will align with the routine budget process. As we are aware, this year is very unusual and unique. The uncertainty of COVID has affected the normal budget process, hence estimates being held in December instead of June.

We would have been able to have more idea about the longevity of COMMIT and other programs that would have gone through the normal budget cycle. We have extended COMMIT to 31 March 2021 to align with the routine budget process which we expect will commence for next year.

**Mrs LAMBLEY:** Originally the funding ceased on 31 December, is that correct?

**Ms UIBO:** Yes, there is actually no extra funding so it is something the Department of Attorney-General and Justice has been accessing and doing internally as opposed to allocated funding. Because of no extra

funding, we were expecting that the program would cease on 31 December. We have since looked to try to get some certainty through the budget process through to 31 March.

**Ms LAKE:** Member for Araluen, the grant agreements were due to cease on 31 December; it was the actual grant agreements.

**Mrs LAMBLEY:** Originally it went for two years, but you extended it for another year, is that correct?

**Ms LAKE:** That is correct.

**Mrs LAMBLEY:** You are now extending it for another three months?

**Ms LAKE:** That is correct, yes.

**Mrs LAMBLEY:** At the end of March, all those programs will cease?

**Ms UIBO:** Member for Araluen, we have extended it, so it can go into the normal budget cycle, which will be February/March next year for a May budget. We would have gone through this cycle this year. Unfortunately, because of COVID-19, the normal budget cycle of government did not occur, hence we are doing this process in December. We would have had an idea of where our programs sit—longevity, sustainability and evaluation of any programs ...

**Mrs LAMBLEY:** I am not clear. Are you saying the program might continue beyond 31 March? Perhaps with the next budget cycle ...

**Ms UIBO:** The next budget has to go through the normal process—which it would have done this year, except for not having a budget process this year until just recently.

**Mrs LAMBLEY:** There will be confusion about this. I have spoken to a lot of the non-government organisations that have received COMMIT funding and they, as of last week, were of the view their funding was finishing in three weeks' time—31 December. Have you informed them of this change?

**Ms UIBO:** We have been speaking with the people on those programs. It has been something of concern. I know you put out a media statement last week ...

**Mrs LAMBLEY:** Correct.

**Ms UIBO:** We would have been happy to provide you with a briefing.

The timing is unfortunate this year, with urgent areas being addressed and looking at what happened with some of our programs having the extensions ceasing at a strange time. Normally it would be in line with a financial year. We will put that program through the normal budget process early next year. The extension is to allow for it to go through that process so we can provide certainty to that program or not.

I cannot say what is going to happen in the budget cycle and process, but the extension will provide certainty until 31 March at least.

**Mrs LAMBLEY:** Minister, you have come under a lot of pressure to continue the funding beyond 31 December for this program. That is fair enough; it is an excellent program. Since talking to a number of the non-government organisations, I have learned a lot about it in the last couple weeks.

I am surprised with your commitment to instituting alcohol reforms and looking at reducing recidivism rates within prisons you would even touch this program. But you are saying these organisations—one of which was BRADAAG from the Barkly region looking at a 37% cut to their services, which is profound. That is up to 20 people losing their jobs; they now have a reprieve until 31 March.

At that point those cuts might come into effect, is that correct? What you said before is that you cannot guarantee funding will continue beyond 31 March. Three months later than what we understood last week. You have made a concession, minister, is that correct?

**Ms UIBO:** The COMMIT program adds 25 beds to the 219 beds offered by the Department of Health. In order to complement the program, the Department of Health offers to Territorians who need ...



**Mrs LAMBLEY:** Significant, yes, it is very good.

**Ms UIBO:** In terms of the COMMIT funding, it is for 25 beds which contribute to an additional need for the 219 beds Department of Health hold. It is complementary and a top-up to the bigger program offered by the Department of Health.

**Mrs LAMBLEY:** Minister, it sounds like you are trying to minimise the fact there are only 25 beds, but a third of the alcohol rehabilitation beds in the Barkly region are going to be scrapped if you do not continue to fund this program beyond 31 March. This is very significant for a town completely dominated by alcohol; we all know the impact of alcohol in Tennant Creek. To reduce alcohol treatment options in a place like the Barkly to that extent is really bad news—bad policy.

**Ms UIBO:** Again, this is an additional contribution to the bigger programs that are offered across the Northern Territory with the Department of Health. I will pass to the Acting Chief Executive, Gemma Lake, in regard to how that grant funding works. But again, to reiterate, this is something we have extended to the end of March because we want to make sure it goes through the regular budgetary cycle which, unfortunately, we missed out this year due to COVID-19.

**Ms LAKE:** I can elaborate a little on what the minister has said, which is that it currently is not a funded output or line item for the department, so we have been managing that within. It was to be part of the budget for this financial year; however, that was only in COVID-19-related items, as we know. Now we have extended it.

The COMMIT program would continue and does continue. The legislation is still in place to allow the Parole Board to put people onto COMMIT parole. That will continue.

**Mrs LAMBLEY:** Are you saying that because of COVID-19 you were not able to continue the funding for this program? Oh, you were not able to put it into a budget?

**Ms UIBO:** Budget line.

**Mrs LAMBLEY:** That makes no sense. You are the minister. Budget Cabinet can do anything it likes. I am ...

**Ms UIBO:** We did not have Budget Cabinet until—normally it would be that February/March cycle. We did not have it until October/November because we ...

**Mrs LAMBLEY:** Oh, yes, you have because the Chief Minister told me on Monday that you had the normal budget cycle. He told me that. I specifically asked him that question.

**Ms UIBO:** The process we have had to undergo this year—because we have been saving lives and jobs during the COVID-19 pandemic. This is something the rest of the country is going through; it is not unique to the Northern Territory or Australia; it is happening globally.

We will be looking at all programs. Again, this is something we will put into the routine budget cycle, which will be at the regular timing next year. We anticipate that will be February/March for a May budget.

**Mrs LAMBLEY:** But at this stage the program will be cut on 31 March instead of 31 December?

**Ms UIBO:** At this stage, Member for Araluen, it has been extended to 31 March, so it can go through the budget cycle it missed out in 2020. It can go through that process for 2020–21.

**Mrs LAMBLEY:** But with no guarantee there will be funding for this program?

**Ms UIBO:** It will go through the budget process it was anticipated for 2020, which we missed out due to COVID-19.

**Mrs LAMBLEY:** The organisations and communities which rely heavily on the COMMIT program to provide important alcohol treatment options for people with alcohol problems have had as three-month reprieve. Thank you.

**Mr YAN:** I have a bit of an understanding of the COMMIT program. I have been involved with it since its inception. I have got there eventually.

I am not specifically questioning about beds or dollars; I am going back to the treatment value of COMMIT. I have seen the figures. The COMMIT program provides treatment services for people on parole. I spoke to the media about this during the week. The people on parole have an immediate consequence for an action, particularly whilst they are undergoing treatment. The figures flesh out that those people who are on COMMIT parole are more likely to complete a parole order than those who are not on it. Also, those who are offered COMMIT parole are more likely to take up an option of parole than those people who are not offered the option of COMMIT parole.

In effect, we see COMMIT parole providing the opportunity for people to undertake parole where they are, then monitored in the community. They are offered treatment services to action those criminogenic needs and other addictive needs that they have, hopefully providing a person who comes out at the end of parole treated and less likely to commit further offences against the community, less likely to see recidivist action and come back into the correctional centre or back into the justice system.

Why would we consider ceasing commit knowing it produces effective outcomes even though it is an unfunded liability? My thoughts are that we would dig into every pocket to find the dollars to continue this program, not specifically the jobs out in the communities and the areas that are very important, as the Member for Araluen has said, but the wider option for treatment services to people on parole far outweighs that because it provides community safety to those people, their families and to wider Territorians.

**Ms UIBO:** Member for Namatjira, I acknowledge your past profession and the work you have done in that space with the Correctional Services. I know this is an area you are keenly interested in and have been advocating for. This again is something we are very keen to look at. Not just this program, but other programs. It does cost money so we need to look at it in terms of the budget process.

Some of the outcomes with the Correctional Services and social outcomes are that we are trying to reduce offending and reoffending. This would be an area that we could discuss in more detail in terms of operations through Output Group 2, Correctional Services. We have the Commissioner for Corrections here and available for any questions or operational detail.

It costs money for programs. I am not just talking about this one but in general. That is why we have a budget process. The extension of the COMMIT program to 31 March 2021 will allow the program and other programs to be considered and other government initiatives and policies will be considered as whole of government through the budget process. I am not saying that it not any less frustrating for anyone because of the timing but it needs to go through that process.

**Mr YAN:** For everybody else in the room, and for those people listening, those who take part in COMMIT parole, are they more likely to succeed in completing a period of parole than those who are not on COMMIT parole?

**Ms UIBO:** Member for Namatjira, I would need to take that question on notice or you could ask it in Output Group 2, Correction Services, when we have the Commissioner with us.

**Mr YAN:** It is not specific although I suppose it is for the Commissioner of Correctional Services But if it sits with Community Corrections it might be easier to take it on notice now.

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#### Question on Notice No 6.12

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** For those offenders who are afforded the opportunity to participate in COMMIT parole, are they more likely to complete orders of parole than those offenders who are not on COMMIT parole?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated the number 6.12.

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**Mr EDGINGTON:** Minister, just picking up on some of the words said, there has just been a budget process. Where is the money coming from to extend it to March next year?

**Ms UIBO:** It is as I have stated. It does not have a budget line; it was funded for two years and it did not have any extra funding after that. We have extended it, so it is internal and we are running at a deficit by funding it through the Department of Attorney-General and Justice.

**Mr EDGINGTON:** Another program that reduces reoffending is the Sentenced to a Job program, which includes prison industries. Can you please outline what has been cut from this program and what, if any, portions of the Sentenced to a Job program remain?

**Mr UIBO:** Would you like to ask the question when we have the Commissioner for Corrections present in Output Group 2?

**Mr EDGINGTON:** Yes, I can.

Is it correct that Katherine no longer has a full-time Local Court Judge and that currently a judge from Darwin is visiting Katherine on a fortnightly basis? Is this meant to be a temporary measure or a permanent arrangement?

**Ms UIBO:** We have an output group related to this, which is Court and Tribunal Support Services. My understanding, and I will make sure that we have this correct, is that the Katherine court runs on a 12-month rotational basis with the court house and the judges. We will look at perhaps recruiting a longer-term judge in Katherine, which is my home town. Currently it runs on a 12-month basis with a judge being appointed as the lead judge. We can clarify that in Output Group 3.0.

**Mr EDGINGTON:** In the 2020–21 budget, there is an efficiency dividend of 1% for certain frontline service delivery agencies and 3% for all other agencies. What is the specific amount of efficiency dividend for your agency for 2020–21?

**Ms UIBO:** I will pass to Alecia Brimson for this. As everyone would be aware, all financial operations this year have been affected because of COVID. We are looking at efficiency dividends from the root-and-branch report, which was in 2019, and continuing on that. Obviously, this year has been affected by a global pandemic.

**Ms BRIMSON:** The department has a 3% efficiency dividend. Correctional Services has a discounted efficiency dividend; it is two-thirds discounted.

**Mr EDGINGTON:** How will these efficiency dividends be achieved?

**Ms BRIMSON:** The process will be undertaken now in the department. The budgets have only just been handed down, as you would be aware. It was a late process this year. Cash flowing is occurring now in the department. The application of those efficiency dividends and how they might affect the budget will be worked through in the next couple of months.

**Mr EDGINGTON:** There has not been any opportunity to work through all of that at the moment?

**Ms BRIMSON:** No, not yet.

**Mr EDGINGTON:** Are there any plans to reduce red tape in the agency?

**Ms LAKE:** It is always good to look for any opportunities to reduce red tape. The department is working with all other agencies in government, looking at legislation and our own legislation as part of the Territory Economic Reconstruction Commission report. A lot of that work goes to looking at simplifying processes and cutting red tape. That is a process we are currently well into.

We are reviewing all legislation and also working with every other government department looking at their own legislation to identify opportunities for reform in that space.

**Mrs LAMBLEY:** In your opening statement, minister, you mentioned crime victim's services and victim support. Are you able to take a question on that now?

**Ms UIBO:** Yes.

**Mrs LAMBLEY:** According to the Ombudsman in his 2019–20 annual report—he did not say this but what he says indicates quite clearly that this service is in a bit of trouble. ‘Under-resourced and over-burdened’ is probably an understatement. He talked about how, at the time he wrote and issued his report there were still 1,700 outstanding applications. The cost of these compensation claims is spiralling. We get a lot of inquiries in my Araluen electorate office about victims’ compensation, with victims telling us that they have been told that there is no money. We have been hearing that for quite some time—at least the last 12 months, probably even longer.

Could you tell us what is going on in this important service? Have you run out of money still, or have the coffers been filled up again? What are you doing about this rather large backlog of applications?

**Ms UIBO:** It is something we consider a priority. This Labor government is making sure we put victims of crime first. We are looking at reforming the legislation and the victims’ charter, which is really important to note, based on your question.

In regard to the numbers you outlined, there is a backlog. We acknowledge that. As of 8 December—yesterday—there are just under 1,700 active applications. Not all of these are considered to be part of the backlog as applications always take some time to process. It is just the general nature of what, unfortunately, has to go through that procedure.

As of yesterday, 8 December 2020, there are currently 703 outstanding applications that were lodged prior to 2018, compared to 1,010 at the same time last year. The current pre-2018 backlog numbers are as follows: 2012 there is one delayed due to a lack of contact by the applicant, now waiting for medical reports for additional injuries claimed; 2013 there are five; 2014 there are 37; 2015, 135; 2016, 209; and 2017, 314.

In terms of breaking down some of the figures, the CVSU has been tackling the backlog for some years and reporting to the Ombudsman regularly in regard to the last three years of that data. We acknowledge the working space, but we still consider it a priority to support the victims of crime. But the process can, unfortunately, take some time so it can be done properly.

**Mrs LAMBLEY:** Have you run out of money? Is there money to pay victims of crime? This is a problem. People are coming into my office and, as I said, have been coming for quite some time, saying they have been told by the office that there is no money to pay the compensation that they would normally be entitled to.

**Ms UIBO:** I want to put on record that in regard to the reasons for the backlog, the resourcing issues are varied, including difficulties in obtaining records, some of the complexity of the applications that are lodged, the need to arrange independent medical assessment—which is part of the process—and difficulties in maintaining contact with applicants.

It is not just a matter of money or dollar figures, there is also the process and, unfortunately, the time that it takes to do the process properly, which causes some of the backlog.

**Mrs LAMBLEY:** But once the application is accepted and assessed, can you guarantee that there will be money to pay these people, because they are being told in Alice Springs, I presume—is there an office in Alice Springs? I am not even sure of that. They are being told by someone within the Northern Territory Government, ‘There is no money. Do not even bother, you are wasting your time.’

**Ms UIBO:** That would be a huge concern if people are saying that ...

**Mrs LAMBLEY:** They have been saying it for a long time.

**Ms UIBO:** We would be looking to correct that information. I will pass to the chief executive for the specifics of Alice Springs.

**Ms LAKE:** It is a concern if people are saying that. There is a process under the act, and once a person’s application is assessed they have a right to be awarded compensation. In terms of the backlog, it is not an issue of funds, it is an issue of process and processing. The backlog developed over a few years.

I am pleased to say the Crime Victims Services Unit has made some real inroads into the backlog in the last year. It has reviewed processes, changed what it does and made inroads. There is still some way to go—we all acknowledge that—but it is very much a matter of process in terms of time. It is not a matter of funds.

**Mrs LAMBLEY:** What is the resourcing for this service across the Northern Territory? Where do you have your offices and how many people are spread across those offices? I am sure this is of great concern to people living in Tennant Creek, Katherine and other regional centres apart from Alice Springs.

**Mrs LAMBLEY:** I note that is of concern, particularly in the community you represent. Territorians who have been victims of crime—this is a serious concern and a big issue. We have an output specifically for this section, which is Output 1.3, Crime Victims Services Unit. Do you want to direct it through that output?

**Mrs LAMBLEY:** I asked at the beginning if I could ask this question now.

**Ms UIBO:** You have also asked several questions that are now on operational details. We can get the appropriate official to answer directly.

**Mrs LAMBLEY:** Will they be able to provide me the answers to the question I just asked?

**Ms UIBO:** They are listening right now. In regard to operations, we are happy to take up that detail with the correct officials.

**Mr CHAIR:** The committee will now consider the estimates of proposed expenditure contained in the Appropriation (2020–2021) Bill as they relate to the Department of the Attorney-General and Justice. Before we do, we will have a quick break.

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The committee suspended.

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**Mr CHAIR:** We were finishing up with the committee considering estimates of proposed expenditure contained in the Appropriation Bill 2020–21 as they relate to the Department of the Attorney-General and Justice.

#### **Agency-Related Whole-of-Government Questions on Budget and fiscal strategy**

**Mr CHAIR:** Are there any agency-related whole-of-government questions on budget and fiscal strategy?

There being none, that concludes consideration of agency-related whole-of-government questions on budget and fiscal strategy.

#### **OUTPUT GROUP 1.0 – LEGAL SERVICES Output 1.1 – Solicitor for the Northern Territory**

**Mr CHAIR:** The committee will now consider Output Group 1.0, Legal Services, Output 1.1, Solicitor for the Northern Territory. Are there any questions?

**Mr EDGINGTON:** Minister, at estimates last year you provided that in the period 1 July 2018 to 31 March 2019, the Solicitor for the Northern Territory was aware of 25 proceedings filed: 17 in the Supreme Court and eight in the Federal Court. Currently before the court are 19 proceedings: 11 in the Supreme Court and eight in the Federal Court. In the period 1 July 2017 to 31 March 2018, the Solicitor for the Northern Territory was aware of 19 proceedings filed: 13 in the Supreme Court and six in the Federal Court. Currently before the court are 10 proceedings: 4 in the Supreme Court and six in the Federal Court.

How does that compare to this year? How many legal proceedings have been brought against the Northern Territory Government, a department or employee thereof in the Supreme Court? How does that compare to the previous year and how many of those matters are currently before the courts?

**Ms UIBO:** Thank you, Member for Barkly, for your very detailed question, we might have to get you to repeat that so we can take on notice.

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#### **Question on Notice No 6.13**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** At estimates last year you provided that in the period 1 July 2018 to 31 March 2019, the Solicitor for the Northern Territory was aware of 25 proceedings filed: 17 in the Supreme Court and eight in the Federal Court. Currently before the court are 19 proceedings: 11 in the Supreme Court and eight in the Federal Court. In the period 1 July 2017 to 31 March 2018, the Solicitor for the Northern Territory was aware of 19 proceedings filed: 13 in the Supreme Court and six in the Federal Court. Currently before the court are 10 proceedings: 4 in the Supreme Court and six in the Federal Court.

How does that compare to this year? How many legal proceedings have been brought against the Northern Territory government, a department, an employee, thereof in the Supreme Court and how does that compare to the previous year?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, I do Mr Chair. And I just want to say thank you to the Member for Barkly for the question. We may need to go through some of the information manually to get the right information.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.13.

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**Mr EDGINGTON:** Minister, what dollar figure has the Northern Territory Government spent in the last year settling legal matters, paying judgement and/or satisfying cost orders in past year?

**Ms UIBO:** We are just seeking some clarification. I will hand to Gemma Lake to give some detail.

**Ms LAKE:** When the Solicitor for the Northern Territory acts for government and client agencies in matters, and when those matters settle and how much they settle for, they come from the budgets of the individual client agencies. So that is not something we record in particular. They would record that against their specific budgets.

**Mr EDGINGTON:** Are you saying that information is not available within your department even though it is costed back?

**Ms LAKE:** Let me just seek clarification. It is not information that we collate, we would have to look at individual files where we had acted for agencies, and because that is not data we record. In addition to that we would only have information if we had acted for the agency. Some matters are outsourced to private law firms and so we would not necessarily have that information at all. I am not sure if that answers your question.

**Mr EDGINGTON:** I will leave that one for now. Minister, how many administrative law actions were brought against the Northern Territory Government in the past year?

**Mr CHAIR:** Member for Barkly, the past financial year or past calendar year? Just in case this needs to go on notice as well.

**Ms UIBO:** Member for Barkly, we will need to take that one on notice. It will probably weave into your previous question in regard to the content. I will pass to Gemma Lake for clarification so we can seek the right information for the answer.

**Ms LAKE:** We will need to take it on notice. Is it Supreme Court actions you are after or any particular administrative law actions? There are a number including judicial reviews and other—if we can get some clarity on the particular question that would be good.

**Mr EDGINGTON:** All of those: any actions by employees; the environment; the Mining Act; all of those sorts of actions around administrative decisions.

**Ms LAKE:** Court actions relating to administrative law?

**Mr EDGINGTON:** Yes.

**Ms LAKE:** It is likely to be a subset of that other question about all of the matters that have been filed against the Northern Territory.

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**Question on Notice No 6.14**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** How many administrative law actions were brought against the Northern Territory Government in the past financial year?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.14.

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**Mr EDGINGTON:** How many actions are pending against the Northern Territory Government relating to the *Mineral Royalty Act 1982*?

**Ms UIBO:** Thank you, Member for Barkly, we will need to take that question on notice.

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**Question on Notice No 6.15**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** How many actions are currently pending against the Northern Territory Government relating to the *Mineral Royalty Act 1982*?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.15.

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**Mr EDGINGTON:** Have any royalty-related actions been settled or finally adjudicated in the past year? If so, what was the nature of those actions?

**Ms UIBO:** Thank you, Member for Barkly, we will need to take that on notice.

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**Question on Notice No 6.16**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Have any royalty-related actions been settled or finally adjudicated in the past financial year? If so, what was the nature of those actions?

**Ms UIBO:** We wanted to check with Member for Barkly and clarify whether it was in regard to mineral royalties?

**Mr EDGINGTON:** Yes.

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.16.

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**Mr EDGINGTON:** Are there any actions pending against the Northern Territory Government concerning the *Petroleum Act 1984*?

**Ms UIBO:** Member for Barkly, we will need to take that on notice.

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**Question on Notice No 6.17**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Are there any actions pending against the Northern Territory Government concerning the *Petroleum Act 1984* for the last financial year?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.17.

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**Mr EDGINGTON:** How many legal matters are pending concerning compensation for losses incurred as a result of the citrus canker eradication program?

**Ms UIBO:** Member for Barkly, we will take that on notice.

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**Question on Notice No 6.18**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** How many legal matters are pending concerning compensation for losses incurred as a result of the citrus canker eradication program?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.18.

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**Mr EDGINGTON:** How many claims have been made against the government under the National Redress Scheme?

**Ms UIBO:** I have been advised that we are not able to disclose the number of claims due to privacy. It is protected information.

**Mr EDGINGTON:** Under what legislation would that be protected?

**Ms UIBO:** I have been advised that it is protected information under the Commonwealth act, which is the national redress act.

**Mr EDGINGTON:** We are just after numbers, not names or anything that would divulge the personal information of individuals.

**Ms UIBO:** I understand, but we are operating under the guidelines of the Commonwealth act. I have been advised that it is protected information.

**Mr EDGINGTON:** The number of claims?

**Ms UIBO:** We will take it on notice, but just be aware that we might not be able to answer it.

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**Question on Notice No 6.19**

**Mr CHAIR:** Member for Barkly, please restate your question for the record.



**Mr EDGINGTON:** How many claims have been made against the government under the National Redress Scheme?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes. I will add, from the national Council of Attorneys-General, the Northern Territory has been leading a paper in regard to an Aboriginal and Torres Strait Islander communications strategy. We are finding that unfortunately Aboriginal and Torres Strait Islander Australians are not necessarily accessing the redress scheme.

We are looking at collaboration with Western Australia and Queensland to make sure we have recommendations for the Commonwealth so we can have a strong communities strategy to allow for Aboriginal and Torres Strait Islanders to access the scheme across the country. We have seen low representation, but in the Northern Territory over 50% of people who have looked at claims are of Aboriginal and Torres Strait Islander background. It is an area we need to address, but I am proud to say the Northern Territory is leading the paper in that space.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.19.

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**Mr EDGINGTON:** I am not sure, but this one may need to go on notice as well. How much money to date has been paid out on behalf of the government under the National Redress Scheme?

**Ms UIBO:** We will take that on notice.

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#### Question on Notice No 6.20

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** How much money to date has been paid out on behalf of the government under the National Redress Scheme?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.20.

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**Mr EDGINGTON:** Minister, what is the status of the lawsuit filed by the Australian Lawyers for Remote Aboriginal Rights Group on behalf of the residents of Laramba and what is the nature of those claims?

**Ms UIBO:** The Department of the Attorney-General is supporting the client agency with that work. The question would be better directed to Chansey Paech, Minister for Remote Housing.

**Mr EDGINGTON:** Minister, last year the High Court awarded traditional owners in Timber Creek \$2.5m under the *Native Title Act 1993*. What is the status of that action and has compensation been paid?

**Ms UIBO:** Member for Barkly, that one would sit under my portfolio with the Office of Aboriginal Affairs so if you could re-ask that question when we get to that portfolio, we can answer or attempt to answer. Hopefully, the officials are all listening in now so we can get that for you in that output group.

**Mr EDGINGTON:** Following the Timber Creek ruling, have any similar actions been brought against the Territory under native title?

**Ms UIBO:** Member for Barkly, that will sit under my other agency, Office of Aboriginal Affairs.

**Mr EDGINGTON:** How many matters are being outsourced, either in part or whole, to private law firms that the Solicitor for the Northern Territory does not have the capacity to respond to? What is the cost to the Territory for outsourcing those matters?

**Ms UIBO:** We will take that question. I will pass in a moment to the Acting Chief Executive Officer, Gemma Lake. Appreciating that the Northern Territory is quite a small jurisdiction, sometimes there are reasons such as conflict of interest and things are outsourced. Also in terms of capability and specific talents, for lack of a better word, a specific case may be outsourced to a private law firm if we do not have that expertise whether it is in the Territory or in a particular area of the public service.

**Ms LAKE:** The legal services output does manage the Northern Territory legal services list and we do outsource work for client agencies under that list. In the 2019–20 year there were 332 matters outsourced to private law firms.

**Mr EDGINGTON:** Of those matters that are in the hands of external solicitors or barristers, how many are assigned to legal counsel outside of the Territory?

**Ms UIBO:** We will need to take that question on notice. Sorry, we do have that answer. I will pass to Gemma Lake.

**Ms LAKE:** I was not sure if you meant legal counsel as in barristers or law firms. What I can tell you is that of the 332 that were outsourced, 306 were outsourced to Northern Territory firms.

**Mr EDGINGTON:** My sum is 26.

**Ms LAKE:** There were 306 for Northern Territory firms and 26 went to interstate firms. I can do some quick math and tell you that that means 92% of the work went to Northern Territory law firms, mostly because it is written in front of me.

**Mr EDGINGTON:** What would be the reason for those to be sent interstate?

**Ms LAKE:** The primary reason is generally expertise; a particular expertise is sought that is not available in the Northern Territory.

**Mr EDGINGTON:** Minister, how many proceedings have been brought against the Northern Territory Government by former detainees and children in care since the Royal Commission into the Protection and Detention of Children in the Northern Territory?

**Ms UIBO:** We will need to take that question on notice.

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#### Question on Notice No 6.21

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** How many proceedings have been brought against the Northern Territory Government by former detainees and children in care since the Royal Commission into the Protection and Detention of Children in the Northern Territory?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.21.

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**Mr EDGINGTON:** In the previous year, solicitors from the Solicitor for the Northern Territory acted for the Territory and the police in a number of significant claims. What was the cost to the Territory in defending those actions and what was the cost of compensation paid in those matters?

**Ms UIBO:** We will need to take that question on notice.

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#### Question on Notice No 6.22

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** In the previous year, solicitors from the Solicitor for the Northern Territory acted for the Territory and the police in a number of significant claims. What was the cost to the Territory in defending those actions and what was the cost of compensation paid in those matters?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.22.

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**Mr EDGINGTON:** In 2019, the Australian Human Rights Commission raised a complaint against the Territory. The Aboriginal residents of Wadeye have commenced proceedings in the Federal Court of Australia claiming discriminatory conduct by the Northern Territory under the Commonwealth *Racial Discrimination Act 1975*. Do you have an estimate of the cost to the Territory in defending this matter and potential costs to the Territory if the proceeding is successful?

**Ms UIBO:** We will need to take that on notice.

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#### Question on Notice No 6.23

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** In 2019, the Australian Human Rights Commission raised a complaint against the Territory. The Aboriginal residents of Wadeye have commenced proceedings in the Federal Court of Australia claiming discriminatory conduct by the Northern Territory under the Commonwealth *Racial Discrimination Act 1975*. Do you have an estimate of the cost to the Territory in defending this matter and potential costs to the Territory if the proceeding is successful?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.23.

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**Mr EDGINGTON:** It is our understanding that a new standard grant funding agreement has been rolled out across all government agencies. Can you tell us how that is going?

**Ms UIBO:** It is my understanding that the grants funding agreement and the work around that is being led by the Department of the Chief Minister and Cabinet. That question would have been better directed to the Chief Minister as the lead agency.

**Mr EDGINGTON:** Thank you. I have no further questions for that output.

**Mr CHAIR:** That concludes consideration of Output 1.1.

#### Output 1.2 – Legal Policy

**Mr CHAIR:** The committee will now move on to Output 1.2, Legal Policy. Are there any questions?

**Mr EDGINGTON:** Minister, can you please advise the 2019–20 actual expenditure for this output?

**Ms UIBO:** I will pass to the Acting Chief Executive Officer, Gemma Lake to answer the question.

**Ms LAKE:** The actual expenditure for the Legal Policy output for last financial year was \$23.223m.

**Mr EDGINGTON:** Minister, the previous Attorney-General said in her maiden speech:

*We know our justice system, as a whole, requires a root and branch reform. It is not possible for us to keep doing what we are doing. To that end our whole-of-government justice framework will be delivered by the end of 2017.*

I note the former Attorney-General also said:

*Our government will not accept blame shifting.*

That would appear to be the last we ever heard of such wide, sweeping reform. Can the current Attorney-General please advise whether a consultant was ever hired to conduct such a review?

**Ms UIBO:** It is something the Labor government does not shy away from when we are talking about bold reform, particularly in the space of justice. Again, we are committed to looking into how we can do reform that is appropriate for the Northern Territory that addresses some of the high rates of incarceration of Aboriginal Territorians and their interactions with the justice.

The work we are doing has been ongoing in the previous term of government. We will continue it through this term of government. A large body of work has been undertaken regarding the reform. As you mentioned in one of your earlier questions, you are aware of the Aboriginal Justice Agreement. We are in the space of finalising that. The bold reform is something we will continue to be committed to.

With the work that has been undertaken in this space, we have had internal work that has occurred through our current resources. I will hand to Gemma Lake, for the detail of the last part of your question in regard to the hiring of a consultant.

**Ms LAKE:** To my knowledge we have not hired a consultant. We have established the Aboriginal Justice Unit which, as the minister said, has been working on the Aboriginal Justice Agreement which looks at all aspects of the justice system and a number of issues, including incarceration rates. The agreement looks at reducing offending and imprisonment rates of Aboriginal Territorians, engaging and supporting Aboriginal leadership and improving justice responses and services to Aboriginal Territorians.

The Aboriginal Justice Unit has been working very hard on that and we are looking forward to the final agreement. That agreement touches across all aspects of the justice space. I hope that answers your question.

**Mr EDGINGTON:** Sorry, going back to that. This was in 2017. When was the Aboriginal Justice Unit established? That comment I quoted was made in the sittings of 19 October 2016, pages 114 to 115.

**Ms UIBO:** We know that reform does not happen in an instant. The comments you referred to by the former Attorney-General in 2017—we are looking for the date you asked about in this follow-up question in regard to the establishment of the Aboriginal Justice Unit.

While we are getting that detail for you, I will say that the huge body of work that has been undertaken by the Aboriginal Justice Unit—we would have loved things to happen quickly and swiftly, but we are about doing things properly, consulting with the community and making sure we have the mechanisms and procedures in place to look at long-term reform.

The Aboriginal Justice Agreement has taken many months, despite having to slow down during COVID in regard to face-to-face and in-person consultations. The Aboriginal Justice Unit has completed 159 consultations across the Territory. That is urban, remote and regional parts of the NT. The work the unit has done is very impressive.

We have some information in regard to when the AJU was established, so I will pass to Gemma Lake for that. Again, things cannot happen overnight, but we remain committed to the reform, specifically in regard to the comments made by the former Attorney-General on behalf of our government.

**Ms LAKE:** I am advised the Aboriginal Justice Unit was announced in late 2016 and established in 2017. It was before my time in these roles.

**Mr EDGINGTON:** Getting back to my original question, there was no consultant engaged in 2017 to conduct a root-and-branch review or reform?

**Ms LAKE:** I am advised that there was a consultant engaged, but I would have to take on notice the details of that question, as it was before my time in this role.

**Mr EDGINGTON:** Thank you, I have some follow-up questions to go with that, which I can state now with the question on notice.

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**Question on Notice No 6.24**

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** The previous Attorney-General said in her maiden speech:

*We know our justice system, as a whole, requires a root and branch reform. It is not possible for us to keep doing what we are doing. To that end our whole-of-government justice framework will be delivered by the end of 2017.*

I note the former Attorney-General also said:

*Our government will not accept blame shifting.*

That would appear to be the last we ever heard of such wide-sweeping reform. Can the current Attorney-General please advise if a consultant was ever hired to conduct such a review?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, we can. But I want to point out that this does not relate to the financial year we are talking about, nor does it relate to the previous beyond that—I think it is three financial years ago the Member for Barkly is referring to. We can answer the question on notice, though.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.24.

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**Mr EDGINGTON:** I have follow-up questions in relation to that, which may also need to be taken on notice.

**Ms UIBO:** Excuse me, Member for Barkly, is it about the Aboriginal Justice Agreement?

**Mr EDGINGTON:** No.

**Ms UIBO:** Okay, I was just going to say that that does have an output.

**Mr EDGINGTON:** If the answer to that question was yes, how much was the cost of the consultant? Where is the review sitting? Was it ever completed? Why were the results of the review ...

**Mr DEPUTY CHAIR:** Member for Barkly, please rephrase your question as you have asked a hypothetical question. Can you please rephrase that so it is not a hypothetical question, understanding that under 109 it cannot be hypothetical?

**Mr EDGINGTON:** How much was the cost of the consultant, where is the review sitting, was it ever completed, why were the results of the review never made available, were any recommendations made and if yes, were any of those recommendations implemented by the government?

**Ms UIBO:** We will take that question on notice but just wanting to point out that this does not relate to the current estimates process.

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**Question on Notice No 6.25**

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** How much was the cost of the consultant? Where is the review sitting? Was it ever completed? Why were the results of the review never made available? Were any recommendations made and if yes, were any of those recommendations implemented by the government?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, we will take it.

**Mr CHAIR:** The question asked by the Member for Barkly is allocated the number 6.25.

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**Mr EDGINGTON:** The draft Aboriginal Justice Agreement was released in September. Public comments and submissions on the agreement closed on 31 July 2020. How many submissions were received?

**Ms UIBO:** This is a huge body of work that we are very proud to be undertaking as a Labor government. Acknowledging there have been delays because of COVID, I acknowledge the work the Aboriginal Justice Unit has undertaken and continues to undertake in this space, including consultations and the establishment of an Aboriginal justice reference committee. There have been further consultations with that committee.

Regarding the formal submissions, the Aboriginal Justice Unit received 50 formal written submissions, mostly from Aboriginal and non-Aboriginal peak bodies—good numbers for the Northern Territory. We also received many individual submissions regarding the work that the Aboriginal Justice Unit was doing in consulting for the Aboriginal Justice Agreement and the draft agreement that we are looking to finalise. There was some great community interest in that sense.

**Mr EDGINGTON:** Will those submissions be made public?

**Ms UIBO:** I am just going to seek some clarification. I will pass to the chief executive.

**Ms LAKE:** The submissions received have been considered by the Aboriginal justice reference committee as part of the work and workshops that have been carried out to work through the draft AJA and the submissions received to pull together the final agreement. That agreement will go to government for review and the release of submissions, I expect, will be part of that process.

**Mr EDGINGTON:** Will they be made public after that process?

**Ms UIBO:** Because the Aboriginal Justice Agreement is still being finalised, that decision has not been made. We can take that question on notice.

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#### Question on Notice No 6.26

**Mr CHAIR:** Member for Barkly, please restate your question for the record.

**Mr EDGINGTON:** Public comments and submissions on the draft Aboriginal Justice Agreement closed on 31 July 2020. Will those submissions be made public?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, thank you.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.26.

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**Mr EDGINGTON:** Minister, we are nearly at the end of the year, so when can we expect the agreement to be finalised.

**Ms UIBO:** Again, this is an extensive body of work which has been undertaken. I commend the Aboriginal Justice Unit and the department for their work in this space. We are looking at several pieces of reform that the Aboriginal Justice Agreement highlights. These are areas that we can improve what we are doing in the Northern Territory.

Ideally, in a COVID-19-free world, we would have already had the agreement finalised and be looking to implement it. Unfortunately, it has been delayed because of COVID-19, so we are looking to have the agreement finalised at the end of this year or early next year and to implement it as soon as possible, acknowledging that there have been many stakeholders consulted in this space. A lot of people are very excited and looking forward to the implementation of the agreement.

Some earlier pieces of the Aboriginal Justice Agreement were guiding some of the initiatives we have done—as I mentioned in my opening statement, the alternative-to-custody model for which we have already opened a facility in Alice Springs is up and running, which is great news for the Central Australian region.

We are looking at the next alternative-to-custody model and program to be implemented and established on Groote Eylandt and the archipelago, which is in my electorate of Arnhem—very proud of that. There is work under way already in the justice space which is not being held up because the agreement is still finalising. The guiding principles, the values of the AJA, as well as the strategies of the AJA will benefit stakeholders, communities and the whole of the Territory once we implement that in the new year—the expected timing.

**Mr EDGINGTON:** How much funding has been allocated to the development and implementation of the Aboriginal Justice Agreement?

**Ms LAKE:** In the last financial year \$2.7m was allocated. That was \$1.6m in grant funding and \$1.1m for the Aboriginal Justice Unit.

**Mr EDGINGTON:** Is there any further funding allocated for the implementation of the agreement?

**Ms UIBO:** That will go through the budget cycle early next year because we will have the agreement finalised and then look at what resources need to be allocated with the AJA.

**Mr EDGINGTON:** There has been no decisions made on what funding will be provided moving forward?

**Ms UIBO:** The agreement has not been finalised; therefore, we do not know what resourcing will need to be allocated. That will go to the budget process next year.

**Mr EDGINGTON:** Minister, you briefly mentioned—I think you used the words ‘alternative to custody’. Can you elaborate a bit further on that?

**Ms UIBO:** The two alternative-to-custody sites—again, this is a recommendation as part of the Aboriginal Justice Agreement draft. There is the trail in Alice Springs for three years. I believe it is \$5.5m over three years to the alternative-to-custody—or some people may use alternative-to-prison—model.

The two sites we have through the Groote Eylandt Local Decision Making Agreement and the Groote Eylandt Archipelago, which is a 10-year agreement—carries over to my ministerial portfolio of Treaty and Local Decision Making.

The work that is happening in the Groote Eylandt Archipelago and the funding arrangements that have been made with the support of the Anindilyakwa Land Council. They are looking to build a cultural rehabilitation centre, which will focus on young Anindilyakwa men between the ages of 17 and 25, to do alternative-to-custody programs. Again, this will be worked through the department and across the judicial system as a mechanism and an alternative for sentencing. They have allocated some of their own funding through Anindilyakwa Land Council and the support of the Groote Eylandt Aboriginal Trust.

They have come to an arrangement so the ALC will fund the establishment and the actual building of the cultural rehabilitation facility on Groote Eylandt, which will be targeting young Aboriginal Anindilyakwa men between 17 and 25, to try to reduce the risk of offending or targeting and reduce the risk of re-offending as an alternative to custody, whether through Darwin Correctional Centre or Alice Springs Correctional Centre or the two work camps, Barkly or Datjala in Nhulunbuy.

There will be the two others. The Alice Springs one, Member for Barkly, is focused and targeted on Aboriginal women, so it is a life skills camp. It is located in the desert knowledge precinct with wraparound support services. That was officially opened at the end of October in Alice Springs. The Groote Eylandt one has been launched and identified but will also include a new facility that the Anindilyakwa people will be funding themselves.

**Mr EDGINGTON:** Will the Northern Territory Government be committing any funding to the Groote Eylandt program?

**Ms UIBO:** Through the local decision-making agreement there are different implementation plans. The first three—this crosses over with my LDM portfolio, but it also relates to justice. Justice, law and order is one, education is the other. Housing is the first area where there has been the most focus and quick traction in transitioning from government services or government funding to local services and local funding.

The Groote Eylandt one has—I guess the seed has been planted, but we will look further to what happens in terms of government resourcing or funding if that is part of LDM agreement. That will be worked out with the Northern Territory Government and the Anindilyakwa people for that facility.

The community justice group, which will be established for the Groote Eylandt Archipelago, will include Groote Eylandt and Bickerton Island. We can work through that once it is further established and then we will be able to answer the question about what type of funding the Northern Territory Government would put towards that model or if it would be supporting and resourcing through various departments. There is nothing concrete in that space but it is moving very quickly, which is very exciting for that region.

**Mr EDGINGTON:** There is no commitment at this point?

**Ms UIBO:** It is a 10-year agreement, Member for Barkly. That is one section of it. But the funding is secured for the cultural rehabilitation centre and that is being self-funded by the Anindilyakwa Land Council.

**Mr EDGINGTON:** Has the government committed any money to that project under this budget?

**Ms UIBO:** Not that I am aware of but I can take that part on notice, Member for Barkly.

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**Question on Notice No 6.27**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Minister, has any funding been committed to the Groote Eylandt 10-year cultural rehab project out of this year's budget?

**Mr DEPUTY CHAIR:** Sorry, just clarifying cultural rehab ...

**Ms UIBO:** I would say government funding because the funding has been committed by the ALC.

**Mr EDGINGTON:** Let me try that again. Has the Northern Territory Government committed any funding to the Groote Eylandt cultural rehab program this financial year?

**Mr DEPUTY CHAIR:** Minister do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.27.

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**Mr EDGINGTON:** Under the proposed strategies, actions and outcomes of the agreement, aim one includes a review and reform to relevant provisions of the *Bail Act*, the *Sentencing Act* and the *Parole Act*. When will these reviews take place?

**Ms UIBO:** I am going to ask one of our officials to attend as we are in the legal policy output. The Aboriginal Justice Agreement sits under 1.2.4 and we have answered some general ones but now we are getting operational. I will ask the appropriate official to attend so you can ask those questions directly.

Mr Deputy Chair, we are joined by Leanne Liddle, Director of the Aboriginal Justice Unit.

**Mr DEPUTY CHAIR:** Member for Barkly, could you please restate the question for Leanne.

**Mr EDGINGTON:** Welcome, Leanne. Under the proposed strategies, actions and outcomes of the agreement, aim one includes a review and reform to relevant provisions of the *Bail Act*, the *Sentencing Act* and the *Parole Act*. When will these reviews take place?

**Ms LIDDLE:** That content is in the draft agreement and there has been a shift from some of those strategies in the final agreement. As the minister identified, they are still being finalised. I am not in a position to advise you of what is in the final agreement at this stage.



**Mr EDGINGTON:** Are you saying that there has been no confirmation that those pieces of legislation will be reviewed?

**Ms LIDDLE:** No. Since we put out the draft agreement, we have relied on the submissions as well as data collection, evidence-based approaches and best practice to inform us as to what needs to happen moving forward. The final agreement is soon to be placed on the table with the minister and she will need to consider that in the final agreement.

**Ms UIBO:** Just reiterating Ms Liddle's comment. Because the agreement has not been finalised yet, any commitment to reform and review into those pieces of legislation that you have outlined, which have been identified through the consultations by the AJU for the AJA, would be subject to the finalisation of the agreement.

**Mr EDGINGTON:** I am moving on to something else. Thank you, Leanne.

**Ms UIBO:** Sorry, Deputy Chair. Can I just check if we were doing just the general output or going to 1.2? We skipped to—in terms of who we may need to have at the table.

**Mr DEPUTY CHAIR:** It is my understanding that we are at 1.2.

**Mr EDGINGTON:** Minister, a number of pieces of legislation are currently under review including the *Anti-Discrimination Act 1992*, the victims of crime legislation and the *Residential Tenancies Act 1999*. Can you advise whether other legislation is currently being reviewed and when you anticipate those reviews will be finalised?

**Ms UIBO:** Just seeking clarification, you are talking about an expected time line for those pieces of legislation?

**Mr EDGINGTON:** Is there any other legislation also being reviewed and when do you anticipate those reviews will be finalised?

**Ms LAKE:** Our department administers about 183 pieces of legislation. We have an extensive legislative review around reform program. There are many pieces of legislation on that program. If you have questions about particular pieces of legislation and time frames, we would need to take them on notice.

**Mr EDGINGTON:** If we could go back to the *Anti-Discrimination Act*, victims of crime legislation and the *Residential Tenancies Act*, when do you anticipate those reviews will be finalised?

**Ms LAKE:** I confirm we are already working on reviewing the *Anti-Discrimination Act*, victims of crime legislation and the *Residential Tenancies Act*. I do not have the particular time frames applying to those in front of me, but I do know they are under way. I know the victims of crime, in particular, is well under way and there is work on its way to the minister. The *Residential Tenancies Act* is under way and has been going for some time. I do not have the time frames here with me, so that piece we will have to take on notice.

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#### Question on Notice No 6.28

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** A number of pieces of legislation are currently under review including the *Anti-Discrimination Act 1992*, victims of crime legislation, and the *Residential Tenancies Act 1999*. Can you advise what other legislations are currently being reviewed? When do you anticipate those reviews will be finalised?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, thank you.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated number 6.28.

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**Mr TURNER:** Minister, the *Victims of Crime Assistance Act* is very close to my heart. I have watched the work going on from my previous profession into my new one. Can you update us on what is being done with

the new *Victims of Crime Assistance Act*, especially in relation where it had damaging provisions conflicting with the *Return to Work Act* by the previous government?

**Ms UIBO:** Member for Blain, I know this is an area close to your heart. Some of it relates to what we were talking about earlier with the Member for Araluen and questions which we will look for some detail this evening. We are working hard to ensure we have the right support for victims of crime. One crime is too many in the Northern Territory. In your former profession you dealt with things at the front line.

In regard to the victims of crime legislation and the victims charter, the work we are delivering on as a Labor government—working across agencies and taking a whole-of-government approach, which is really important—more police. This is a broken CLP promise and something we have been able to look at reinstating. Knowing how much our police do on the ground, and particularly the work they have done during COVID-19—making sure we have more active police working across the Territory. Also, some of the new police stations built through the Labor government commitments: Palmerston; Nightcliff; in my electorate of Arnhem, Ngukurr Police Station is being built; Angurugu Police Station on Groote Eylandt has been completed; and Maningrida Police Station.

Other pieces we have been working on are electronic monitoring, police bail and the Banned Drinker Register are significant areas of alcohol reform that we have been doing within the Northern Territory—and legislative framework for victims of crime seeking assistance, which has been complex and had delays which the Member for Araluen pointed out in her earlier question. We are making sure that we address that and do it in a timely manner because we want to ensure that victims of crime are not re-traumatised by the experience of claiming. It is an important part of legislation, as you pointed out Member for Blain, and we are prioritising as a Labor government.

**Mr EDGINGTON:** In June and, more so recently, the Gunner government stated that family responsibility orders were scrapped under the previous CLP government. I will direct you to Part 6A, particularly section 140J, of the *Youth Justice Act 2005*. Is it true that the legislative ability for a court to require a parent to enter into a family responsibility order still exists, including the ability to impose a monetary fine where that order is not complied with under section 140N of the act?

**Ms UIBO:** Again, that is the *Youth Justice Act 2005* so the question should be directed to Minister Worden, the Minister for Territory Families tomorrow.

**Mr EDGINGTON:** How many FTEs are there in the legal policy unit as of now and how many do you expect to have at the end of this financial year?

**Ms UIBO:** There are 29.31 FTEs for the legal policy division.

**Mr EDGINGTON:** Can you summarise what changes are being made to the review of the *Anti-Discrimination Act 1992*?

**Ms UIBO:** This is an area of work that is much needed. It is an area of reform that we are committed to ensuring it reflects contemporary Northern Territory. I think Territorians deserve it. There have been some delays to the reform because of the work happening at the Commonwealth level, specifically around religious freedoms, which I am sure you would have heard regarding the impact. The Commonwealth work in that space does have an impact on us as the Northern Territory because we are a territory.

The reforms are happening. There are some complexities because we are a territory and there is Commonwealth work happening. Hopefully we are looking at some staged approach for the reforms on the *Anti-Discrimination Act* in the Northern Territory but this will be prioritised in our legislative reform timetable and schedule. I cannot give a time frame right now, but it is definitely a working priority that our community deserves and expects in the Northern Territory.

**Mr DEPUTY CHAIR:** Thank you, minister. We will reconvene in 30 minutes after the dinner break. Thank you everyone.

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The committee suspended.

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**Mr DEPUTY CHAIR:** Welcome back, minister. I hope you are all fed and watered. Are there any other questions on Output 1.2, Legal Policy?

That concludes consideration of Output 1.2.

### **Output 1.3 – Crime Victim Services**

**Mr DEPUTY CHAIR:** I now call for questions on Output 1.3, Crime Victim Services. Are there any questions?

**Mr EDGINGTON:** Minister, can you please advise the 2019–20 actual expenditure for this output?

**Ms UIBO:** I will pass to Gemma Lake, Acting Chief Executive.

**Ms LAKE:** For the Crime Victims Services Unit the actual expenditure was \$3.695m. For crime victims assistance it was \$3.938m.

**Mr EDGINGTON:** How many people are currently on the victims register, and has this increased from last year?

**Ms UIBO:** We are joined by Rosslyn Chenoweth, who is the Director of the Crime Victims Services Unit. If there are any operational questions, we have Rosslyn to assist us. She is just finding the information for us. We recognise that this is a very important area as part of the department—across the NT, making sure we have support for victims is a priority. We will just be a moment while we get that information for you.

**Ms CHENOWETH:** I can confirm I have the data from 19 October 2020. There were 163 people registered at that point, and that has been roughly consistent for the last couple of years. There was a big increase about 18 months to two years ago, from about 100, and now we are stable between 150 and 170 most of the time.

**Mr EDGINGTON:** If a person is registered on the victims register, they are entitled to be told the following information about the offender: if they are transferred to another prison interstate or overseas; if they have applied for parole and whether it was granted; when they are due for release; if they have escaped and any recapture; or if they have died in custody. Have there been any circumstances in the past year where this information has not been provided to the victim?

**Ms CHENOWETH:** Not that I know of. There might be some, when there were short time periods between the Parole Board deciding on a release date and the time through to their release. We do it as fast as possible. I can take that on notice but there is nothing that I am aware of.

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### **Question on Notice No 6.29**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** If a person is registered on the victims register, they are entitled to be told the following information about the offender: if they are transferred to another prison interstate or overseas; if they have applied for parole and whether it was granted; when they are due for release; if they have escaped and any recapture; or if they have died in custody. Have there been any circumstances in the past year where this information has not been provided to the victim?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated number 6.29.

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**Mr EDGINGTON:** How many applications have been made under the *Victims of Crime Assistance Act* in the last financial year?

**Ms UIBO:** The applications received?

**Mr EDGINGTON:** That is right.

**Ms UIBO:** It is 373.

**Mr EDGINGTON:** Of those applications, how many have been finalised?

**Ms UIBO:** We will seek clarification by taking that on notice so I can get you the correct figure.

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**Question on Notice No 6.30**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Of those applications received under the *Victims of Crime Assistance Act* in the last financial year, how many have been finalised?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated number 6.30.

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**Mr EDGINGTON:** How long is it taking to process and finalise those applications?

**Ms UIBO:** This goes to a question similar to what the Member for Araluen raised earlier this afternoon. I will pass to Ros and acknowledge that sometimes the processes can be complicated in regard to gathering the right information so that applications can be addressed properly.

**Ms CHENOWETH:** The average time frame for making decisions under the act is just over three years, but that does not mean all applications take three years. We triage on the basis of complexity and vulnerability of the applicant. Some take a long time to process because there might be complex medical issues. They might be claiming an ongoing disability, in which case we have to wait for that to settle down to assess it. Other cases are fairly straightforward so we can do it within a few months. We triage on the basis of vulnerability, age, sexual assault victims and DV victims. We have a triage process to ensure that the ones with the highest need get dealt with as soon as possible.

**Mr EDGINGTON:** But on average, you are saying it takes three years. On

**Ms CHENOWETH:** For a decision under the act, at the moment, yes.

**Mr EDGINGTON:** Of those finalised applications, how many applicants have been awarded compensation?

**Mr DEPUTY CHAIR:** In what time frame?

**Mr EDGINGTON:** For the last financial year.

**Ms UIBO:** We will seek some information for you. We have some information which Rosslyn can clarify.

**Ms CHENOWETH:** In 2019–20 there were 476 decisions made under the act. I cannot break them down at this stage into who got compensation and who did not, because not everybody subject to a decision gets compensation. Sometimes those decisions are interim payments for emergency situations. I can break down further, if you want, as a question on notice. I can confirm that 476 decisions were made under the act last financial year.

**Mr EDGINGTON:** Can we take that on notice, please?

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**Question on Notice No 6.31**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Of those applications finalised under the *Victims of Crime Assistance Act*, how many applicants have been awarded compensation for the 2019–20 financial year?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.31.

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**Mr EDGINGTON:** What has the cost been to the Territory for that compensation during the last financial year? Is there an overall figure paid out last financial year?

**Ms UIBO:** The figure is \$3.588m within the financial year 2019–20.

**Mr EDGINGTON:** Where there has been compensation awarded to a victim of crime, the Territory may commence a proceeding in the court for recovery of that amount of compensation paid. In the last year, how many recovery proceedings have been commenced?

**Ms UIBO:** We will need to take that one on notice, please.

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#### **Question on Notice No 6.32**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Where there has been compensation awarded to a victim of crime, the Territory may commence a proceeding in the court for recovery of the amount of compensation paid. In the last financial year, how many recovery proceedings have been commenced?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.32.

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**Mr EDGINGTON:** Where recovery proceedings have been commenced, what dollar figure has been recovered from offenders during the last financial year?

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#### **Question on Notice No 6.33**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Where recovery proceedings have been commenced, what dollar figure has been recovered from offenders during the last financial year?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.33.

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**Mr EDGINGTON:** How old is the longest unresolved application on file?

**Ms UIBO:** There is one that is unresolved from 2012; I mentioned it in an earlier answer. This is delayed due to lack of contact by the applicant. We are now waiting for medical reports for additional injuries claimed.

**Mr EDGINGTON:** How are the victims of crime made aware of the assistance program?

**Ms CHENOWETH:** There is a range of ways that people can be made aware of the victims of crime applications. We work with a lot of stakeholders to raise awareness of their rights under the legislation. They may be referred through Victims of Crime NT, which is an organisation the government funds, to—amongst other things—help people with applications. They also do the counselling and the clean-up assistance of a property.

We have a close relationship with them and they get referrals from police immediately after events. They then refer applications for financial assistance to our team. We also work with CatholicCare NT, who we also fund to manage the counselling scheme—so they can refer people. The other way that they will find out is through legal representatives like NAAJA and women’s legal services; they will refer their applicants as well. There is also word of mouth through DPP and Witness Assistance Service. We continually work with stakeholders to raise awareness about the scheme and the entitlements under the scheme.

**Mr EDGINGTON:** Is the scheme promoted through the media as well?

**Ms CHENOWETH:** We do not have any advertising campaigns and that is maybe not appropriate. We do not want to trigger people we want them to be learning—if they are being traumatised by victimisation it is maybe not the best way that they find out about it.

**Mr EDGINGTON:** Further question, in June 2020 in the Supreme Court of the Northern Territory of *Wurramara v An Assessor*, there was an appeal by an applicant regarding the proper construction of the threshold section 38(3) of the *Victims of Crime Assistance Act* and the interaction with the Regulation 18(1) of the Victims of Crimes Regulations where an applicant has multiple injuries. The judge concluded that section 38(3) has been incorrectly applied and should be construed without the addition of the limitations contained in Regulation 18(1). This decision means there may be a larger group of applicants that may be entitled to compensation.

How do you plan to address this potential increase in compensation, where will the additional funding come from?

**Ms LAKE:** A number of people and organisations are aware of that decision and its implications. We will be waiting to see the implications in terms of application numbers and compensation amounts. In respect to funding, we would deal with that either through the normal budget cycle process or through seeking our Treasury’s advice.

**Mr EDGINGTON:** Will there be a review process of applications that have been denied compensation due to this incorrect construction of the regulations?

**Ms CHENOWETH:** We have not been dealing directly with applicants to raise awareness about that. We have been talking to legal reps who are aware of that and they will be notified—sorry was that question about raising awareness?

**Mr EDGINGTON:** Will there be a review process of applications that have been denied compensation due to the incorrect construction of the regulations.

**Ms CHENOWETH:** We did that in regard to things that were in the appeal period. Our legal reps are aware of that. They can apply again through the normal process to determine if there are any potential victims who may be able to claim but could not claim before.

**Mr EDGINGTON:** What about unrepresented victims?

**Ms CHENOWETH:** If they have not made an application before they were made in relation to the previous interpretation of the act, which was accepted for well over 10 years. We made those decisions. If they have not had a decision they can reapply.

**Mr EDGINGTON:** Is there any intention to make those victims aware of the different interpretation of that legislation?

**Ms CHENOWETH:** At this stage there is no plan for that because it is not how you would apply law retrospectively.

**Mr EDGINGTON:** Are there any plans to review that and notify victims of a possibility of reapplying under the new construction of that legislation?

**Ms UIBO:** There are currently no plans in place to the specific question you are asking. The priority for this unit and division is to clear the backlog. As Rosslyn pointed out, there is a process for appeal if a decision is unsatisfactory. The intention and priority is to clear that backlog; we have stated some numbers already.

**Mr EDGINGTON:** You have advised some of the legal representatives to reapply, but my concern is that those unrepresented victims have not been advised of their ability to reapply.

**Mr DEPUTY CHAIR:** Member for Barkly, can you reword that as a question. You have made a statement on what the minister said.

**Mr EDGINGTON:** My concern is that represented victims have the ability to reapply through their legal representatives but unrepresented victims do not have that advantage. Is there some way you will advise unrepresented victims of their ability to reapply for compensation?

**Ms LAKE:** I think we have answered the question. There is no plan in place for that, as such, but we have advised the legal providers of the process. In terms of unrepresented applicants, it would take a significant amount of resources to go back over 12 years and review each of those applications. It is not something we have commenced at this point in time.

**Mrs LAMBLEY:** The government did a review of the *Victims of Crime Assistance Act* in 2018. There were problems then and there was a big backlog, which has gotten worse in the last 18 months. What were the recommendations of that review and how have they been followed up? Was the document made public, the review into this legislation?

**Ms LAKE:** We have been working through that report and are currently in the process, I am happy to say—close to providing the minister with some reform options for the victims of crime legislation. Part of that focuses on process. That is where we are currently. There was a consultation document but the report has not been released publicly.

**Mrs LAMBLEY:** The state of this unit has been brought into focus again by the Ombudsman's report. He is gentle but direct in saying that the way things are operating at the moment is potentially compounding the stress and trauma the victims are facing because of the long delays in getting an outcome to their application. He is now suggesting legislative change. I am wondering if there is any move within your department to bring about some legislative reform to address the problems within the victims of crime unit?

**Ms UIBO:** It is my understanding that body of work is coming up through the department. It has not gone to the acting chief executive yet and therefore has not come to me as minister, but it would be something I will consider along with my cabinet colleagues.

**Mrs LAMBLEY:** What month was the review done in 2018? We are potentially talking over two years since this review as we are at the end of 2020. If the review was done and made available to you in 2018, at least two years have passed.

**Ms UIBO:** We are not sure of the exact date so we will take that one on notice.

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#### Question on Notice No 6.34

**Mr Deputy CHAIR:** Member for Araluen, please restate the question for the record.

**Mrs LAMBLEY:** What date was the 2018 NT Government review into the *Victims of Crime Assistance Act 2006* provided to the government?

**Mr Deputy CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr Deputy CHAIR:** The question asked by the Member for Araluen has been allocated the number 6.34.

**Mrs LAMBLEY:** My last question is a repeat of what I asked earlier and that is around the resourcing, the number of FTEs within this unit, the number of officers and how you are resourced. It might provide some insight as to why you are overburdened.

**Ms UIBO:** The Crime Victim Services Unit has 16.49 FTE equivalent staff.

**Mrs LAMBLEY:** And offices? Where are you based?

**Ms CHENOWETH:** We have one office in Darwin, but again we work with stakeholders to get the message out to other places.

**Mrs LAMBLEY:** If there is someone in Alice Springs, Katherine or Tennant Creek who is a victim of crime, who do they access?

**Ms CHENOWETH:** They often do that through our funded NGO Victims of Crime NT, which can help, and also through legal services they can access over the phone.

**Mrs LAMBLEY:** You only have one physical office, and that is where all your staff are based, 16.49 FTEs?

**Ms CHENOWETH:** Yes.

**Mr Deputy CHAIR:** That concludes consideration of Output 1.3.

#### **Output 1.4 – Criminal Justice Research and Statistics**

**Mr Deputy CHAIR:** The committee will now consider Output 1.4, Criminal Justice Research and Statistics. Are there any questions?

**Mr EDGINGTON:** Can you please advise the 2019–20 actual expenditure for this output?

**Ms UIBO:** I am joined by Carolyn Whyte, Director, Criminal Justice Research and Statistics Unit. We will take a moment and go through to the figure that you requested. I will pass to Gemma Lake.

**Ms LAKE:** The actual expenditure for the Criminal Justice Research and Statistics Unit for the last financial year was \$1.114m.

**Mr EDGINGTON:** Have there been any changes to the manner in which crime statistics are collected, reported or presented in the last financial year, including the way they are reported on the crime statistics website?

**Ms UIBO:** I understand there is one change. I will pass to Ms Whyte for this.

**Ms WHYTE:** There have been no changes to the way the data is collected. The data is collected by police but in terms of what we do with it—the way it is counted and reported—the one thing that we have changed is we adding the data as an open dataset to a public website so people can download unformatted data for research purposes.

**Mr EDGINGTON:** Is the existence of the crime statistics website promoted so that people know it is available?

**Ms WHYTE:** We do not do actively promotion of it. I understand that it is used and accessed by journalists.

**Mr EDGINGTON:** The Criminal Justice Research and Statistics Unit has indicated it will increase its capabilities in the analysis of reoffending statistics through further training in 2021 to support more work in this area. What sort of further training is planned to achieve this? Will this training be outsourced or provided in-house?

**Ms WHYTE:** We have recently undertaken a series of four modules looking at recidivism. That was developed in-house. The senior statistician and I have taken that together and delivered it. We have had four modules beginning in July and finished in October, so then people have prepared projects from that—people who have not been involved in recidivism work before.

**Mr EDGINGTON:** With that recidivism work, what sort of information do you anticipate will be available?

**Ms WHYTE:** The projects varied. Some of them at the current stage are more in the way of internal learning projects and so probably will not be made public. Other types of projects—we have one going for Territory Families on the recidivism of youth, which is something we have not been able to look at before. There is a project looking at reoffending on bail, which is apparently topical; and there is a project looking at the transition of youths from youth detention into adult custody.

**Mr EDGINGTON:** When will that information be made available?



**Ms WHYTE:** The paper for the youths transitioning from youth to adult custody is in the process of working its way up the chain. That project is finished. The paper of youth recidivism is nearly finished. We submitted a draft to Territory Families for their review. The paper on bail is still in progress.

**Mr EDGINGTON:** Minister, will any of that information be publicly available?

**Ms UIBO:** Ms Whyte will speak to the areas that so far will be publicly accessible.

**Ms WHYTE:** Once those papers are finalised—the transition from youth detention into adult custody and reoffending on bail—we would expect those to be publicly available. My understanding is the one on youth recidivism will also be publicly available but that will be subject to Territory Families.

**Mr EDGINGTON:** Minister, do we have a time frame for when that information will be available?

**Ms UIBO:** There is no time line at this stage.

**Mr YAN:** Minister, a follow up question from earlier. I understand crime stats are important and there is a lot of information derived by analysing trends and so on. I note there is a \$200,000 reduction in budget, from—I am sorry, I made a mistake, it is a \$200,000 increase in budget.

The budget output is \$1311m for 2021 and it was \$1114m for the last year. It is my mistake; I note there is an increase in budget so that will help produce some of those statistics as they are going to be very important for us to analyse trends in the coming year.

**Mr DEPUTY CHAIR:** Should we take that as a comment? Note it?

**Mr YAN:** Yes, I am happy to stick my hand up when I am wrong.

**Mr EDGINGTON:** One further question. We spoke earlier on about the manual extraction of statistics. Could you run us through what the manual extraction of statistics involves?

**Ms WHYTE:** In this case, manual might mean there is not a button you press and out comes an answer to the question asked. What we do is write a program or a query, or generally we would revise an existing query, extract the info, apply relevant counting rules and then produce this table for simple statistics. We would undertake that process because the range of questions is usually much broader than anything you would just program into the computer to produce.

Some questions require quite a few checks among multiple tables and even between systems. Earlier there was a question about youth arrested, so that is a fairly straightforward question from IJIS. There was a question about how many of those received bail, then you take one set of data and check it against another. There was a question about how many youths reoffend while they are on bail; that is a separate series of checks. You are getting into quite an involved set of analysis by that time.

Some of the other issues are that to do statistics it is dependent coded data, so some of the questions that may be asked require checks against multiple systems, or especially reviewing text comments. I think that is where it tends to get into manual situation.

There was question about sentencing outcomes, and there are coded outcomes, but there was a question about boot camps. Boot camp itself is not a sentencing order, so to look for that information, if it exists, we will have to read through the text of sentencing orders in terms of the text conditions that are attached to those orders. That is not something we can easily write a program to deal with. Sometimes there are some manual—it is not manual in terms of taking notes but it is a more manual process in terms of comparing outputs in different systems and checking if this situation meets the question that has been asked.

**Ms UIBO:** As you can see, the data analytics are quite complicated. Carolyn and her team work on that for all those questions that were asked earlier.

**Mr EDGINGTON:** Yes, very complex. It sounds like there is some great work going on in there. Well done. I am just thinking moving forward, you talk about coding these systems, given the interest in some of these statistics are you able to re-code the system to be able to make that easier moving forward?

**Ms WHYTE:** Yes, there are certain things we have coded data for. One of the things we are frequently asked is to break down information by region in Northern Territory. The text for location in IJIS is free text, it is not coded to a region. That is where we have historically put in a lot of effort to keep a code of all the text values that may say 'Alice' and then two spaces, then 'Springs'. The computer does not recognise it as Alice Springs. You have to code that value and say when it says 'that' it means 'this'. We have done that work.

In terms of coding ordered text, no, that is usually—the variety of text in the orders is quite substantial. However, with the development of the Odyssey system, which will take over from IJIS, we have identified ordered text as being a critical thing that we get a lot of questions about but cannot satisfactorily address. We have asked for categories of order conditions and things like that. There are certain things you can do with the existing data and certain things you might do in a redevelopment situation.

**Mr EDGINGTON:** Is the Odyssey the new system? If so, when will that be implemented?

**Ms UIBO:** I know the Odyssey system has been ongoing. I will pass to Gemma Lake for some more information, but it is a bit of an ongoing piece of work we are doing AGD.

**Ms LAKE:** The Odyssey system is in place for civil matters. We are still working on the implementation of Odyssey for the criminal jurisdiction and because most of our work is in the criminal jurisdiction it is—there is a lot of data it is more complex, so it is taking time.

It is being worked on in conjunction with police, replacing one system with a new system called SERPRO. We have been working in tandem with police in terms of implementing those systems. In terms of a time frame for implementation I do not have it on me because we are still working through when we can get to going live. But we are working very closely with police. The Department of Corporate and Digital Development is now leading that as they have taken on the IT systems for all of government.

**Mr EDGINGTON:** Is it a simple process to integrate those two systems so that there will be a smooth transfer of information into the Odyssey system?

**Ms LAKE:** Anyone with experience in IT projects would tell you that it is never simple. I wish that I could say that it was simple. We are replacing two different systems and there is an extremely large amount of data to be transitioned across. The IT specialists are continuing to work on that but it is not a simple process. I could not speak to the technicalities of it because I would not do it justice.

**Mr YAN:** Knowing a little bit about the systems, will you have to keep IJIS in place to interface between Odyssey and IOMS?

**Ms UIBO:** We have the whole-of-government approach so that question is probably best placed with the minister responsible—Minister Kirby—tomorrow during his session.

**Mr YAN:** I have this question in there for Minister Kirby.

**Ms UIBO:** They have carriage of it now, through their department.

**Ms LAKE:** It is something that we are working through with police and DCDD. Again, it is complex. The ultimate objective is that IJIS will be replaced but it is a staged process and they will be able to talk to the technical issues around that much better than me.

**Mr YAN:** IJIS has been with us forever.

**Mr EDGINGTON:** Thank you for the explanation of the statistics. Very much appreciated. I have no further questions for that output.

**Mr DEPUTY CHAIR:** That concludes consideration of Output 1.4 and Output Group 1.0.

## **OUTPUT GROUP 2.0 – CORRECTIONAL SERVICES**

### **Output 2.1 – Custodial Services**

**Mr DEPUTY CHAIR:** We will now proceed to Output Group 2.0, Correctional Services, Output 2.1, Custodial Services. Minister, would you like to introduce the new staff who have taken a seat?

**Ms UIBO:** Joining me at the table is Commissioner Scott McNairn, Commissioner for the Northern Territory Correctional Services and Shevaun Palmer, Executive Officer for Corrections.

**Mr EDGINGTON:** Can you please advise the 2019–20 actual expenditure for this output?

**Ms LAKE:** I am pleased to say I have a spreadsheet now with larger numbers on it. For Correctional Services, the actual expenditure last year was \$227.037m.

**Mr EDGINGTON:** What is the current cost per prisoner per day and how does that compare to last year?

**Ms LAKE:** This information is part of the data we obtain. The total operating cost per day, including the capital cost—which includes the capital and release cost—is \$321 per day per prisoner. If you remove the capital cost and just look at the net operating expenditure it is \$211 per day.

**Mr EDGINGTON:** What is the overall funding for correctional industries?

**Ms UIBO:** That has its own output, so we do not have the figures broken down. We will need to take that one on notice.

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**Question on Notice No 6.35**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** What is the overall funding for correctional industries?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.35.

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**Mr EDGINGTON:** Minister if I could just take you back to the previous question, what is the current cost per prisoner, per day and how does that compare to last year, how does that compare to last year?

**Ms UIBO:** Previously it was \$316 per day and under the recent financial year, it is \$322 per day. That is a difference of \$6 per day.

**Mr DEPUTY CHAIR:** Just clarifying that Minister. That was incorrectly \$321 stated, it is \$322?

**Ms UIBO:** It is \$316 compared to \$322. I will pass to Gemma.

**Ms LAKE:** I think the \$322 is a rounded-up figure. The actual figure is \$321.59.

**Mr EDGINGTON:** Minister, just looking at some of the figures in front of me: Custodial Services, the budget paper for 2019–2020 had a sum of \$185.988m compared to the 2020–21 budget paper, which states an allocation of \$184.801m, an overall reduction of \$1.187m. Can you explain that?

**Ms BRIMSON:** Corrections had a number of budget variations over the financial year. Principally they lost some funding to the Department of Corporate and Digital Development for some of their ICT platforms as well as some Infrastructure funding transferred to the Department of Infrastructure, Planning and Logistics.

**Mr EDGINGTON:** Does that equal the sum of \$1.187m?

**Ms BRIMSON:** No, it does not. There were some ons and offs for Corrections. For example, they got additional funding for electronic monitoring. There were some movements between the division as well as the other departments. If you want the detailed breakdown, we would have to take that on notice.

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**Question on Notice No 6.36**

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** In the 2019–2020 budget paper, the allocation for Custodial Services was \$185.988m compared to the 2020–21 budget paper, which states an allocation of \$184.801m, an overall reduction of \$1.187m. Can you please provide a breakdown of the overall reduction and what it accounts for?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.36.

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**Mr EDGINGTON:** The review into Corrections ordered by government and conducted by KPMG in 2019–20 at a cost of \$750,000, outlined a number of critical areas that require improvement, including significant increase in custodial staff and, more importantly, programs delivery for staff. What increase in budget has been allocated to introduce these improvement measures?

**Ms UIBO:** Our government is always looking to improve the work that we do as a whole. We are still working through the report from KPMG and it will be part of the 2021 budget process.

**Mr EDGINGTON:** What are the current prisoner numbers at the Darwin Correctional Centre and the Alice Springs Correctional Centre? What are the average numbers for those facilities over the past year?

**Ms UIBO:** I will pass to the commissioner for the detail in this. In regard to the facilities and being able to accommodate additional numbers if need be, acknowledging there are pressure points during the year—which can be contributed to for various reasons that we cannot control in terms of Corrections.

**Commissioner McNAIRN:** The prison numbers today sit at 1,737 comprising 1,085 in the Darwin correctional facility, 551 in the Alice Springs, 50 in Barkly and 34 or 35—I think—in Datjala work camp. I do not have the average figure over the period. I would need to take that—obviously the minister would need to take that.

**Mr EDGINGTON:** Can we take that on notice? What are the average numbers over the past year?

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#### Question on Notice No 6.37

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Minister, what are the current prisoner numbers at Darwin Correctional Centre and Alice Springs Correction Centre? And what are the average numbers for those facilities over the past year?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, I believe the first half was answered but it is just the average. We can take on notice the last sentence of that.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.37.

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**Mr EDGINGTON:** I should have added to that, how does it compare to last year?

**Ms UIBO:** Member for Barkly, I am just clarifying if that is a calendar year or a financial year? Is it on average?

**Mr EDGINGTON:** It is the financial year.

**Ms UIBO:** Yes, we will take that on notice.

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#### Question on Notice No 6.38

**Mr DEPUTY CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** How does that compare to last financial year?

**Mr DEPUTY CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr DEPUTY CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.38.

**Mr EDGINGTON:** Minister, how many Correctional staff are currently employed?

**Ms UIBO:** Full-time equivalent is 831.43, including Community Corrections.

**Mr EDGINGTON:** And on any given day what is the prisoner-to-staff ratio at the Darwin and Alice Springs centres?

**Commissioner McNAIRN:** It really depends on the prisoner classification. Different classifications require different numbers of staff. If you are an open prisoner there is a lower staff-to-prisoner ratio; if you are high security there is a higher ratio. Each area is different. It is not a blanket approach; every single unit is different. If you want that information I would need to work it out by each area. And again, on any given day the numbers change. You can either drop 50 or you increase 50; it just depends, it is quite complex.

**Mr EDGINGTON:** What is the capacity for numbers at the Darwin Correctional Centre?

**Commissioner McNAIRN:** The original design capacity was 1,048. Last year they put an additional 100 beds in so the operating capacity is 1,148.

**Mr EDGINGTON:** The 1,085 is under the current capacity, is that right?

**Commissioner McNAIRN:** That is correct.

**Mr EDGINGTON:** It was all over the news earlier this year that a riot took place at the Darwin Correctional Centre on 13 May. The cost to repair the damages was estimated at \$40m. What was the actual cost to the Northern Territory Government to repair the damage that resulted from this riot?

**Ms UIBO:** I will foreshadow the answer to this by thanking our hard-working Corrections staff. I was informed by the commissioner when I became the Attorney-General and Minister for Justice that many of our Corrections officers came in the late hours of the night off-duty—and many from leave—to support their colleagues during this serious incident, which occurred on 13 May. I acknowledge the hard work and dedication of those Corrections officers and thank them for their professionalism and service in being able to contain that incident. In regard to the dollar figure, I will hand to Gemma Lake.

**Ms LAKE:** We are still working through the value of the loss. It is with the loss adjustors and assessors as part of the insurance process. We do not have a final figure at this point in time.

**Mr EDGINGTON:** Is there any estimate at this point?

**Ms UIBO:** No, not at this point, Member for Barkly.

**Mr EDGINGTON:** Minister, have all of the required repairs been completed?

**Ms UIBO:** I will pass to the commissioner. There has been significant work in regard to upgrading security and ensuring there are processes in place to prevent any further incidents.

**Commissioner McNAIRN:** We have established a new builder, contractor and sub-contractors aligned to the repair. Repairs have not started yet. We have a company cleaning the accommodation areas that were significantly fire damaged. I am waiting for the planning works within the next week. There has been no physical work other than tidying up, cleaning and making the accommodation safe at this point in time.

**Mr EDGINGTON:** How much has been expended on the cleaning up of the premises at this point?

**Commissioner McNAIRN:** In the region of \$250,000 has been spent at this point in time.

**Mr EDGINGTON:** Following that incident there was an independent review conducted, what was the cost of the review?

**Ms UIBO:** I am advised \$40,000 for the Paget review into the incident.

**Mr EDGINGTON:** What were the findings of that review and will these findings be made public?

**Ms UIBO:** I know there is interest in this report and it is something we have considered in regard to the release.

We did seek legal advice for what would be appropriate to release in regard to the executive summary. Due to the ongoing criminal cases in regard to the incident, the advice we have received from the DPP is it would jeopardise the criminal matters at this stage. As we do not want to jeopardise the criminal matters, that is the reason behind not releasing the executive summary. We want to make sure they have due course and consequences for any wrongdoing applied in those cases.

Once the legal proceedings are over and subject to legal and security advice, I intend to release the executive summary and recommendations of the Paget report. This is under consideration legal advice is leading this decision.

**Mr EDGINGTON:** Has the Ombudsman asked for a copy of that review? I think we discussed that earlier.

**Ms UIBO:** Yes, he wrote yesterday to the acting chief executive, Gemma Lake.

**Mr EDGINGTON:** Will the Ombudsman receive a copy of that review?

**Ms LAKE:** As I said earlier, we do need to follow a legislative process through the Ombudsman's legislation in regard to release of that report and that requires a number of different processes. One is to consult with the DPP. The intention is that we would give the Ombudsman a copy of that report providing that we are permitted to do so as we go through the legislative process.

**Mr YAN:** Minister, you mentioned before that the report has not been released due to ongoing matters before the courts. Have any of those matters for those perpetrators been finalised as yet?

**Ms UIBO:** I do not have that information. I think that in terms of the independence of the court that process would go through and then look at getting advice from the DPP once they are finished. Are you asking the specific numbers of those cases?

**Mr YAN:** I was wondering. I know that the perpetrators were before the courts and I know that some of the matters have been dealt with and finalised. I am wondering how many of those matters have been dealt with and finalised through the courts?

**Ms UIBO:** I will take that one on notice.

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#### Question on Notice No 6.39

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** Of the perpetrators of the riot at DCC in May—the matters that have been referred to the courts—how many matters have been finalised?

**Mr Deputy CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated the number 6.39.

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**Mr EDGINGTON:** Minister if we can go back to the numbers at Alice Springs. I think we were told 551 at the Alice Springs Correctional Centre. What is the capacity of the Alice Springs Correctional Centre?

**Ms UIBO:** I will hand to the commissioner in a moment. I had the opportunity to walk through the Alice Springs Correctional Centre in October and meet some of the staff. I appreciated the time there in understanding the Darwin Correction Centre and the Alice Springs Correction Centre and thank the Corrections officers for their work in both facilities.

**Commissioner McNAIRN:** The operational capacity for Alice Springs is 650 prisoners.

**Mr EDGINGTON:** Minister, earlier in the week we were advised of the \$400,000 Treasurer's Advance for this portfolio. Can you advise what that was for?

**Ms LAKE:** From the advance received of \$423,000, \$250,000 was for the insurance excess, 'all deductible', as they call it and \$173,000 in what is called Territory damage, under the public private partnership. That is not specific to the disturbance in May itself. That is Territory damage throughout the year, which includes damage by prisoners—\$131,000 for after-hours callouts and \$42,000 for prisoner in-cell learning system monitors.

**Mr EDGINGTON:** Minister, if we could just go back to the Paget review, what reforms were recommended? Have those reforms been implemented? If not, why not? How and when will they be implemented and at what cost to the Northern Territory?

**Ms UIBO:** Consideration of the report is still Cabinet-in-confidence until the legal advice is—as I mentioned in my earlier response, we can look at releasing the executive summary. I would not be able to talk to the recommendations and what is in the report as it is in Cabinet-in-confidence currently.

**Mr EDGINGTON:** There have been no reforms implemented since the riot?

**Ms UIBO:** I can talk to some of the structural work that has been done since the incident—if that is some of the detail—but in terms of the report we cannot discuss that as it is Cabinet-in-confidence. But the commissioner is happy to talk to some of the work that has happened on the facility.

**Commissioner McNAIRN:** There has been ongoing work following the incident on 13 May. That work includes strengthening of secure cages behind the high-security cells. There are 10 exercise yard cages adjacent to the cells that have been strengthened. We have built and produced 96 window covers, which are solid bars to strengthen the low accommodation cells. Sector four, the female sector, has been strengthened in terms of (inaudible) climb fencing. We have also put razor wire throughout the establishment.

**Mr EDGINGTON:** There has been some expenditure since the review was conducted. I think earlier on we spoke about \$250,000 for cleaning the extra work. What is the cost of that extra work?

**Ms UIBO:** We will take that one on notice, please.

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#### Question on Notice No 6.40

**Mr CHAIR:** Member for Barkly please restate the question for the record.

**Mr EDGINGTON:** Earlier, we spoke about \$250,000 being expended for cleaning after the riot at the Darwin Correctional Centre on 13 May 2020. What additional work has been conducted and what is the cost of that work?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes. And just to add that the figure was not just for cleaning, it was also for demountables and some other security fencing installed after the incident.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.40.

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**Mr TURNER:** Just to put it on the public record as a follow-up in the line of questioning, I attended the Darwin Correctional Centre as a member of the police negotiation unit. From what I saw, the response by members of the DCC was absolutely exemplary. They should be commended for their actions. I just thought it would be appropriate to let you know that, commissioner.

**Commissioner McNAIRN:** Thank you.

**Mr EDGINGTON:** The NT Correctional Services reform agenda and strategic direction talks of expanding alternative custodial and Community Corrections opportunities. Can you explain what that means, what sort of Community Corrections opportunities are you talking about and what will be different to the programs already in place?

**Commissioner McNAIRN:** When I was involved in the KPMG review to expand services for prisoners, we looked at a whole bunch of stuff in terms of alternatives to custody, including if we could deliver programs in the community as an alternative to custody and have driver licensing and testing in the community as a method of reducing prisoners coming into the establishment. There was a whole bunch of stuff in there that we were looking to advance on.

I would also like to open another work camp—I know you are familiar with the work camp at Barkly. It is exemplary; it is the best I have seen and Datjala is the same. I am looking at potentially opening a work camp, an alternative to custody, in the Katherine area. These are opportunities we are exploring at this point in time.

**Mr EDGINGTON:** Northern Territory Correctional Services has a performance indicator of 20,475 hours of offender programs to be delivered. This is a new measure. Is this figure for custodial operations or does it include community corrections? If this includes community corrections then it reduces the program delivery to those in prison. Could you please expand on that measure?

**Ms UIBO:** Could you please repeat the figure you quoted?

**Mr EDGINGTON:** Northern Territory Correctional Services has a performance indicator of 20,475 hours of offender programs to be delivered. This appears to be a new measure. Is this figure for custodial operations or does it include community corrections?

**Commissioner McNAIRN:** The figure you quote is only for custodial; Community Corrections is separate to that.

**Mr EDGINGTON:** COVID-19 had a widespread impact and prisoner employment programs were not immune. Economic uncertainty has resulted in less employers participating in the program. What is the government doing to encourage employers to participate in the program for prisoner employment moving forward?

**Ms UIBO:** I acknowledge that COVID-19 affected every part of the Northern Territory, including our Correctional Services. There was a lot of pressure and people worked very hard. Our Correctional officers worked hard to ensure that the vulnerable population in the corrections centres and at the work camps were protected. Northern Territory Correctional Services worked closely with the Department of Health to ensure that there was a pandemic plan and that it was enacted. A lot of things were difficult and there were pressure points in making sure the pandemic plan was enacted.

I will pass to the commissioner for further detail. I thank Correctional staff for doing a great job during the height of the pandemic.

**Commissioner McNAIRN:** Listening on the video earlier, you mentioned Sentenced to a Job figures et cetera. I have information here that is important for you. There has been an economic downturn as you are aware. COVID-19 has had a significant impact in employers employing prisoners. We have high rates of employment as it is in the Territory. We are actively working hard to engage with employers to such an extent that I have employed a regional manager of securing operation who will take carriage of the work camps and all community work.

His sole focus will be to get more prisoners paid and voluntary employment. The number of prisoners in paid employment programs at Darwin Correctional Centre is 14, in Alice Springs Correctional Centre there are six, at the Datjala Work Camp there are 31 and at the Barkly Work Camp there are 10. This makes a total of 61 prisoners.

Regarding voluntary employment, at Darwin Correctional Centre there are 23, at Alice Springs Correctional Centre there are 14, at the Datjala Work Camp there are eight and at the Barkly Work Camp there are 10. This makes a total of 55 prisoners. The overall total figure is 116 prisoners in paid and voluntary employment.



We will focus hard on getting more prisoners into the community. The way the model sits is that we have 60% of prisoners in custody and 40% in the community. I want to reverse that to have 60% in the community and 40% in prison.

**Mr EDGINGTON:** Eligible prisoners engaged in employment programs is at 50%. Even allowing for COVID-19 that seems to be low. What is the reason for poor participation?

**Ms UIBO:** As I am sure you would be aware from your former profession, as will the Member for Namatjira, of the different employment programs and categories we have in Correctional Services. I will pass to the commissioner for more detail.

**Commissioner McNAIRN:** There are a number of variables in terms of prisoners participating in programs. What I have seen, certainly in my tenure over the last two years, is a change in the demographics of the prisoner population. I am seeing more remand prisoners in custody, a 32% remand, and a lot more short-term prisoners under two years. The focus really is to get eligible prisoners who are at high risk and put them through the criminogenic programs, such as sex-offender and drugs and alcohol programs. Part of their form agenda that you alluded to earlier, was actually just touching on the short-term offenders and repeat offenders and those offenders on remand who do not go through the programs. And then COVID-19 has obviously had an impact at the same time.

**Mr YAN:** I suppose my question is for the commissioner. You note that there are high numbers of remand prisoners and lots of short-term prisoners. Do you have sufficient resources to be able to provide appropriate programs for those short-term offenders and for those on remand?

**Commissioner McNAIRN:** As I said before, the majority of the resources focus on high-risk, high-security prisoners. We do a lot of social education programs: social-ed programs for the short-termers—but more than enough for the short-term offenders. That was part of the form plan and will be subject to Cabinet review for the 2021–22 budget.

**Mr EDGINGTON:** Minister, you opened the new life skills camp as prison alternative for Central Australian Aboriginal women. That certainly sounds like a good program, but I just wanted to get some more detail. Are there criteria that Aboriginal women must meet to be accepted into the program? And, for example, will their crime be taken into account? Will women with previous periods of incarceration be excluded?

**Ms UIBO:** As I understand there is a set of criteria for eligibility to be referred to the life skills camp, alternative to custody site in Alice Springs, which targets Aboriginal women. It opened in October this year. We will need to seek on notice the actual criteria. It is considered for the referral—I think already that in place, because some women are already accessing the alternative-to-custody site.

If you would like to repeat the question about the criteria, we can take it on notice. But it is a way for women who are at risk of reoffending—or possibly at risk—to gain access to the wraparound services provided through the life skills camp and the providers who work in partnership with AGD.

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#### Question on Notice No 6.41

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Minister, you opened the new life skills camp as prison alternative for Central Australian Aboriginal women. Are there criteria that Aboriginal women must meet to be accepted into the program? For example, will their crime be taken into account? Will women with previous periods of incarceration be excluded?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.41.

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**Mr CHAIR:** The time being 8.30 pm, we have a number of outputs within AG followed by Treaty and Local Decision Making, and Parks and Rangers. There is a lot to get through. We have had a lot on, but I draw your attention to that in case there are outputs that people need to get to in latter areas.

**Mr EDGINGTON:** Minister, the trial of the program is 18 months; what is the cost of the trial?

**Ms UIBO:** We have \$5.5m allocated to the two sites. That is the Alice Spring trial for three years linked in with the Groote Eylandt one, which we were taking on notice. It is \$5.5m over three years for the trial for the two sites. Would you be interested in the breakdown? If so, we need to take the breakdown on notice.

**Mr EDGINGTON:** No, that is okay, thank you.

**Mr CHAIR:** It is 8.30 pm so we will take a quick break. We will come back in five minutes.

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The committee suspended.

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**Mr CHAIR:** We are at Output Group 2.1, Custodial Services. Are there any questions?

**Mr EDGINGTON:** Minister, we were briefly talking about the new life skills camp in Alice Springs for Aboriginal women. Have the first women commenced in the program? The news release mentioned that the majority of female prisoners are mothers. Are mothers permitted to have their children with them in the program?

**Ms UIBO:** Yes, it has commenced. There have been 16 referrals from numerous providers and wraparound support services as of 25 November this year. There are currently three women with another four referrals expected to be approved next month. The second part of your question regards to family members accompanying the women. In regard to children, we will take that second half on notice.

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**Question on Notice No 6.42**

**Mr CHAIR:** Member for Barkly, please restate the question.

**Mr EDGINGTON:** Minister, in regard to the new life skills camp for women in Central Australia, are the female prisoners permitted to have their children with them during the program?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.42.

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**Mr EDGINGTON:** Minister, how will the success of this trial be measured?

**Ms UIBO:** It is a three-year trial. We will be able to gather evidence and look at the effectiveness of the program, the trial, the referrals and feedback from stakeholders and wraparound support providers as to the effectiveness of the program. We will have to look at what happens over the next three years. At the official launch we saw a lot of excitement about the opportunity it will present, particularly regarding alternatives to custody.

**Mr EDGINGTON:** The Darwin Correctional Centre currently offers a range of programs. The sex offender treatment program, Responsibility Safety Victims and Plans, the violent offender treatment programs and the Recognising Anger and Gaining Empowerment program. Are any of these programs available in the Alice Springs Correctional Centre? If not, are there any plans to introduce these programs into the Alice Springs facility?

**Commissioner McNAIRN:** In Alice Springs Correctional Centre, if there are prisoners required to go through any of the programs you just alluded to, we normally transfer them to Darwin to go through the programs. There are social education programs, education, the QuickSmart Program and vocational programs delivered in Alice Springs.

**Mr MONAGHAN:** I have a supplementary to that question. I had the joy of handing out certificates for some of the programs that culminated for those inmates last week. Can you tell me the effect that has had on the

prison population and the culture of the population, in a sense of the importance to the prisoners—particularly the QuickSmart program?

**Commissioner McNAIRN:** Thanks for attending and handing out some of the certificates. It is a great achievement for Aboriginal prisoners who have very low esteem and an educational deficit. I attended the RAGE program recently. Now I try to get families to come along to their graduations because this is the first time that they have actually had any formal vocational qualification or educational qualification. The pride in some of these guys and women is just phenomenal to watch. They are really proud when someone, like yourself, hands out certificates with a great deal of pride.

I have always said that education is life success and I always try to encourage prisoners once they have attained one qualification to go for the next. We are starting to have a real movement with education and vocational education. We won a top prize last year for a collaboration with the Batchelor Institute. It took the top prize in the NT. We are doing a lot of good work through the Batchelor Institute, the University of England and the QuickSmart Program.

**Ms UIBO:** As part of the finalisation of the Aboriginal Justice Agreement, we will be considering what other programs and support we can provide to at-risk police to try to mitigate the recidivism rates we have in the Northern Territory.

**Mr CHAIR:** That concludes the consideration of Output 2.1.

### **Output 2.2 – Community Corrections**

**Mr CHAIR:** I will now call for questions on Output 2.2, Community Corrections. Are there any questions?

**Mr EDGINGTON:** Minister, can you please advise the 2019–20 actual expenditure for this output?

**Ms UIBO:** We will pass to the Chief Executive, Gemma Lake, for the figure you have requested.

**Ms LAKE:** The actual expenditure for Community Corrections for the last financial year is \$25.117m.

**Mr EDGINGTON:** Minister, how many offenders are currently on parole? How many were granted parole in the past year and how does this compare to the previous year?

**Ms UIBO:** As of 30 October this year, 65 people are on parole with electronic monitoring devices and as of 30 October 149 are under supervision.

**Mr EDGINGTON:** How many parole officers does the department of Corrections currently employ?

**Ms UIBO:** We will take that on notice. We think it is about 152, but we will need the proper breakdown.

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### **Question on Notice No 6.43**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** How many parole officers does the department of Corrections currently employ?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.43.

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**Mr EDGINGTON:** Minister, how many of the people on parole have been fitted with electronic ankle monitoring devices?

**Ms UIBO:** It is 201.

**Mr EDGINGTON:** Do these devices automatically report back to the parole officer when there has been a breach, or are they separately monitored and a call made to the parole officer when there is a breach?

**Ms UIBO:** Yes, it is automatic. There are 93 devices monitoring prisoners across the two work camps. The Barkly Work Camp is 47 and the Datjala Work Camp is 46. That is 93 in total currently.

**Mr EDGINGTON:** How many parolees have breached their conditions while wearing a tracking device?

**Ms UIBO:** We will take that question on notice.

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**Question on Notice No 6.44**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** How many parolees have breached their conditions while wearing a tracking device?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.44.

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**Mr EDGINGTON:** How often are parolees who are subject to alcohol and or drug restrictions subjected to random testing?

**Ms UIBO:** It is my understanding that the high-risk offenders are targeted weekly and the low-risk offenders monthly.

**Mr EDGINGTON:** Can you tell us what happens if they fail a test?

**Ms UIBO:** I will pass to the commissioner for details. It will range, depending on the type of breach.

**Commissioner McNAIRN:** All prisoners under supervision are subject to strict conditions, which include drug and alcohol misuse. It varies in the type of breach somebody does. If it is a late curfew or five minutes late for their curfew, the probation parole officer has the discretion to challenge them and provide a warning. If somebody is caught with drugs or alcohol in their system—again depending on the severity—there would be a referral back to the Parole Board and, potentially, their relocation.

**Mr EDGINGTON:** Are there any particular rules, or is it up to the discretion of the staff member subjecting the person to a test?

**Commissioner McNAIRN:** Drugs and alcohol are very serious for us so there is limited discretion to the provision that parole staff will not be assessed. The less severe breaches are subject to discretion.

**Mr EDGINGTON:** What would a less severe alcohol reading look like?

**Commissioner McNAIRN:** I want to make it clear if a prisoner tests positive for alcohol, he would be referred back to the Parole Board for potential revocation.

**Mr EDGINGTON:** Is that on every occasion or does the testing staff member have discretion to do that?

**Commissioner McNAIRN:** It is my belief that it is on every occasion.

**Mr EDGINGTON:** How much was spent on the COMMIT program last year?

**Ms UIBO:** It is my understanding that it was \$2.1m for the COMMIT program.

**Mr EDGINGTON:** How many persons involved in the COMMIT program over the last three years have reoffended?

**Ms UIBO:** We will take that question on notice.

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**Question on Notice No 6.45**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** How many persons involved in the COMMIT program over the last three years have reoffended?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes, I wanted to check, did you say three years?

**Mr EDGINGTON:** Yes, but how long has the program been going?

**Ms UIBO:** Several years—just thinking in regard to the process of this estimates.

**Mr EDGINGTON:** Over the last three years.

**Ms UIBO:** Yes, we will take that on notice, thank you.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.45.

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**Mr EDGINGTON:** How many offenders are currently enrolled in the COMMIT program?

**Ms UIBO:** It is my understanding there are 50.

**Mr CHAIR:** There being no further questions that concludes consideration of Output 2.2.

**Output 2.3 – Parole Board**

**Mr CHAIR:** The committee will now move onto Output 2.3, Parole Board. Are there any questions?

**Mr EDGINGTON:** Can you advise the 2019–20 actual expenditure for this output?

**Ms LAKE:** The information I have on me only talks to the Community Corrections expenditure; the parole board is rolled up in that. To break it down and give you an accurate answer we would need to take it on notice.

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**Question on Notice No 6.46**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Can you advise the 2019–20 actual expenditure for this output?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.46.

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**Mr EDGINGTON:** How many members are currently on the parole board?

**Ms UIBO:** There are 18.

**Mr YAN:** Do you have a breakdown of who those 18 members are, for example, legal representatives, representatives for Correctional Services, police and community members?

**Ms UIBO:** Yes, we will take it on notice to provide the correct information.

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**Question on Notice No 6.47**

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** Could you please provide the details of who makes up the 18 members of the parole board by police, legal, community or Corrections representatives?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated number 6.47.

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**Mr YAN:** I have one final question for the Parole Board. Do you have the number for the matters that went before the Parole Board for the last financial year or reporting period?

**Ms UIBO:** The figure I have is 1,255 matters.

**Mr CHAIR:** There being no further questions concludes consideration of Output 2.3 and Output Group 2.0.

**OUTPUT GROUP 3.0 – COURT AND TRIBUNAL SUPPORT SERVICES**

**Output 3.1 – Higher Courts**

**Mr CHAIR:** The committee will now move onto Output Group 3.0, Court and Tribunal Support Services, Output 3.1, Higher Courts. Are there any questions?

**Mr EDGINGTON:** Are there any plans to have a Supreme Court Justice based in Alice Springs on a permanent basis?

**Ms UIBO:** The answer is no.

**Mr EDGINGTON:** I have no further questions for that output.

**Ms UIBO:** Mr Chair, I wish to notify the committee that I am joined by Chris Cox, Executive Director of Courts and Tribunals.

**Mr CHAIR:** There being no further questions concludes consideration of Output 3.1.

**Output 3.2 – Lower Courts and Tribunals**

**Mr CHAIR:** The committee will now consider Output 3.2, Lower Courts and Tribunals. Are there any questions?

**Mr EDGINGTON:** How does the visiting judge arrangement impact on the Katherine court, which is normally very busy?

**Ms UIBO:** As there was interest earlier on, I will have Mr Cox talk in detail.

**Mr COX:** There was a question earlier about what was happening to replace the current judge in Katherine. I can advise that the next judicial vacancy will be filled at Katherine in July of next year. We will advertise and send out an expression of interest in March.

That will be different to the current arrangement, which is having a judge rotating through every 12 months. This position will have the judge based and living in Katherine. It will be a permanent arrangement. In between now and then, we will have a temporary arrangement that will kick off in March for three months. We will have judges visiting for the other times.

Currently, there is a full-time judge in Katherine. A judge visits for a number of weeks per month as well. It depends on what the judicial resources in Darwin are like, with leave and that sort of thing.

**Mr EDGINGTON:** Project Zola saw the introduction of videoconferencing facilities established for vulnerable witnesses in civil and criminal proceedings in remote communities. How many proceedings have been held using this technology?

**Ms UIBO:** We will have to take that question on notice.

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**Question on Notice No 6.48**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Project Zola saw the introduction of videoconferencing facilities established for vulnerable witnesses in civil and criminal proceedings in remote communities. How many proceedings have been held using this technology?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated the number 6.48.

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**Mr YAN:** I have a further question on VLUs. During COVID-19 we have seen an increase in the use of VLUs for courts across the Territory. Due to the impost on Correctional Services and police, plus the high cost of moving dependants around the Territory, will there be an increase and push to move video link services out into remote courts?

**Mr COX:** Yes. COVID-19 has shown us different ways of using technology in the courtroom space. With Project Zola, which was mentioned before, we have installed videoconferencing into a number of remote centres. That equipment is very expensive. COVID-19 has taught us that we can have alternative options such as desktop videoconferencing, which is much cheaper than the systems we are placing into those centres.

Essentially, we are reviewing that at the moment. There is an intention to do more matters by video.

**Ms UIBO:** I also add a thank you to our court staff. There was a volume of work over the last few months, particularly to adjust and still be able to access services across the Northern Territory in accessing the justice system. They did an enormous body of work in a short amount of time.

**Mr CHAIR:** That concludes consideration of Output 3.2.

**Output 3.3 – Fines Recovery**

**Mr CHAIR:** The committee will now proceed to Output 3.3, Fines Recovery. Are there any questions?

**Mr EDGINGTON:** Chair, I just have one point to raise, looking at the time it would probably be appropriate to excuse the independent officers under Output 5.

**Mr CHAIR:** I do not think we will get there, Member for Barkly.

**Mr EDGINGTON:** There are some other matters beyond that ...

**Mr CHAIR:** Sorry, if we are not going to get to 5, if we could excuse everyone else.

**Mr EDGINGTON:** No, I am thinking that we will continue beyond that. I am just conscious that some of those independent officers might be waiting. We have no questions for those.

**Mr CHAIR:** Thank you. But you think you have questions for the rest of this?

**Mr EDGINGTON:** Yes.

**Mr CHAIR:** Play it by ear then. Are there any questions for Output 3.3, Fines Recovery?

**Mr EDGINGTON:** Yes. Minister, can you please advise the 2019–20 actual expenditure for this output?

**Ms UIBO:** I will pass to Gemma Lake, the Acting Chief Executive Officer for the Department of the Attorney General and Justice.

**Ms LAKE:** I have misplaced my excellent piece of paper.

**Mr CHAIR:** Minister, while you seek clarification, I think I am going to seek clarification as well. Sorry, Member for Barkly, are you saying that you do not have any questions for Output 5 at all?

**Mr EDGINGTON:** Yes.

**Mr CHAIR:** For outputs 5.1 to 5.7?

**Mr EDGINGTON:** That is correct.

**Mr CHAIR:** Can we put a hold on that question and I will try to do something if Mr Keith says okay. So, can we just quickly ...

**Mr EDGINGTON:** But we will go back to where we were?

**Mr CHAIR:** Yes, we will go back to Output 3.3. Are there any questions for Outputs 5.1 to 5.7?

**Mr EDGINGTON:** We have no questions, Mr Chair.

**Mr CHAIR:** Are there any further questions? I can put a cross through that. Thank you, Member for Barkly and Mr Keith for clarifying that—anyone who had those questions lined up have a good evening and good night.

Member for Namatjira, you are welcome to stay. We will go back Output 3.3, Fines Recovery, and the question was about the 2019–20 expenditure actuals.

**Mrs Lake:** The actual expenditure for the Fines Recovery Unit for the last financial year was \$2,204,000.

**Mr CHAIR:** Member for Barkly, the time is 9.07. If we flick forward to Treaty and Local Decision Making in Aboriginal Affairs, Parks and Rangers, I am wondering whether you have questions lined up for Parks and Rangers, Output Group 10, and Treaty and Local Decision Making, Output Group 8? If we go for another 40 minutes on output ...

**Mr EDGINGTON:** We do have questions under Output 8 and Output 10 but I am not sure I am not sure whether we will make it to Output 10.

**Mr CHAIR:** Thank you for clarification, I just wanted to check. Any further questions for Fines Recovery.

**Mr EDGINGTON:** The name and shame list publishes the names of people who owe more than \$10,000 in fines to the Northern Territory Government. As of 1 December 2020, there are 737 entries on the list. The highest amount outstanding on the list is \$437,966. What is the total amount outstanding in fines owed to the Northern Territory Government?

**Ms UIBO:** The Fines Recovery Unit debt, as of 30 June 2020, is \$110.2m.

**Mr EDGINGTON:** Minister, if a fine remains unpaid there are further penalties available to the Fines Recovery Unit. How many of the following actions have the Fines Recovery Unit undertaken to recover these overdue fines in the past year? For example, how many drivers' licenses have been suspended by the Motor Vehicle Registry?

**Ms UIBO:** We will have to take that on notice.

**Mr CHAIR:** Member for Barkly, can I ask you to please restate the question for the record?

**Mr EDGINGTON:** Just a point of clarity, Chair. There was a list of actions. Would you like me to include those in that question?



**Mr CHAIR:** Minister, that works instead of doing this ten times.

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**Question on Notice No 6.49**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** If a fine remains unpaid there are further penalties available to the Fines Recovery Unit. How many of the following actions has the unit undertaken to recover overdue fines in the past year? How many drivers' licences have been suspended by the MVR? How many vehicles have had their wheels clamped? How many businesses have faced a suspension by the MVR? What is the dollar figure of assets that have been seized and sold? How many people on the name and shame list have had their wages garnished? What figure has the Fines Recovery Unit recovered using these methods?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.49.

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**Mr CHAIR:** That concludes consideration of Output 3.3 and Output Group 3.

**OUTPUT GROUP 4.0 – DIRECTOR OF PUBLIC PROSECUTIONS**  
**Output 4.1 – Director of Public Prosecutions**

**Mr CHAIR:** The committee will now move onto Output Group 4.0, Director of Public Prosecutions, Output 4.1, Director of Public Prosecutions. Are there any questions?

**Mr EDGINGTON:** Can you please advise the 2019–20 actual expenditure for this output?

**Ms LAKE:** The amount of expenditure in the last financial year for the Director of Public Prosecutions was \$12,427,000.

**Ms UIBO:** I advise the committee that I am joined by Mr Jack Karczewski, the Director of Public Prosecutions.

**Mr EDGINGTON:** The volume of work going through the DPP has remained on par with previous years, with the exception of matters in the High Court that saw a significant increase in activity, yet the budget papers indicate a decrease in the DPP budget. Can you explain why there is a decrease when there has been an increase in the workload?

**Ms LAKE:** The budget variances that you see are the result of a transfer of repairs and maintenance funding to the Department of Infrastructure, Planning and Logistics. There is a transfer of IT funding to the Department of Corporate and Digital Development as part of machinery of government changes.

**Mr EDGINGTON:** As mentioned earlier, there is no longer a full-time local court judge in Katherine. What is the effect of that situation on the DPP? Is there a full-time senior summary prosecutor or a junior summary prosecutor in Katherine? How is the DPP managing the caseload if there are fewer sitting days in Katherine?

**Ms KARCZEWSKI:** There are two resident prosecutors in Katherine. The absence of a resident Local Court judge should not affect the activities of the two resident summary prosecutors. There is more than enough work to keep both of them busy. It must be remembered that the court travels out of Katherine and sits on circuit in other areas. There is enough work to keep everybody busy.

**Mr YAN:** How many prosecutors are currently sitting with the DPP?

**Ms UIBO:** The figure we have is 44 FTE.

**Mr YAN:** How many current active cases sit in the remit for DPP?

**Ms UIBO:** We will take that question on notice.

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**Question on Notice No 6.50**

**Mr CHAIR:** Member for Namatjira, please restate the question for the record.

**Mr YAN:** Minister, how many current active cases sit within the remit of DPP?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Namatjira has been allocated number 6.50.

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**Mr EDGINGTON:** Minister, the budget for DPP for 2020–21 is \$12.879m, is that sufficient for the DPP to carry out the current work it is doing? Has the DPP asked for an increase in that budget?

**Mr KARCZEWSKI:** There is never enough money to go around. We always welcome some more money. We received a budget increase last year. We would like to receive additional funding because there is a need for, for example, a full-time witness assistance officer in Katherine where there is an increase in the workload.

Where, specifically, there has been a request of government for an increase in funding—going back through the papers—that would indicate that we have over the years asked for an increase in our budget. We received an increase last year but the budget remains the same this year.

**Mr EDGINGTON:** How many staff are employed in the Witness Assistance Service?

**Ms UIBO:** The figure we have is 8.4 FTEs.

**Mr EDGINGTON:** Can you advise where those staff are located throughout the Territory?

**Ms UIBO:** In Darwin, Katherine and Alice Springs.

**Mr EDGINGTON:** How many staff in Katherine?

**Ms UIBO:** We will take that one on notice.

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**Question on Notice No 6.51**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** Can you please advise how many staff are part of the witness assistance service and where are they located throughout the Territory?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.51.

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**Mr EDGINGTON:** Is that sufficient staff to carry out the duties required under the Witness Assistance Service?

**Ms UIBO:** As the director pointed out, the assessment that there should be an officer in Katherine through that program is something we will look at. This answers your question in regard to the regional support and will be explored through our government budget process.

**Mr EDGINGTON:** Are there any DPP prosecutors based in Tennant Creek?

**Ms UIBO:** No.

**Mr CHAIR:** That concludes consideration of Output 4.1 and Output Group 4.0.

#### **OUTPUT GROUP 5.0 – INDEPENDENT OFFICES**

**Mr CHAIR:** No questions for outputs 5.1 to 5.7.

#### **OUTPUT GROUP 6.0 – NT WORKSAFE**

##### **Output 6.1 – NT WorkSafe**

**Mr CHAIR:** As we have already concluded Output Group 5.0, we will now consider Output 6.0, NT WorkSafe, Output Group 6.1, NT WorkSafe. Are there any questions?

**Mr EDGINGTON:** Can you please advise the 2019–20 actual expenditure for this output?

**Ms LAKE:** The actual expenditure for NT WorkSafe for last financial year was \$7.823m.

**Ms UIBO:** Mr Chair, I want to let the committee know I am joined by Bill Esteves, Executive Director of NT WorkSafe.

**Mr EDGINGTON:** How are compliance and enforcement activities as a new KPI calculated? It is Budget Paper 3, page 147.

**Ms UIBO:** Can I get some clarification to your question?

**Mr EDGINGTON:** I will grab that budget paper.

**Ms UIBO:** While we are getting your clarification, I will ask Mr Esteves to speak to the point with NT WorkSafe.

**Mr ESTEVES:** I believe the question refers to the number of site inspections or the number of inspections.

**Mr EDGINGTON:** Yes, in the budget paper, under 'Compliance and Enforcement Activities', with a footnote telling us there is a new measure. There is \$4,000 allocated to that KPI. To clarify, that is site inspections.

**Mr ESTEVES:** Yes, that is correct.

**Mr EDGINGTON:** In January 2019 a best practice review of workplace health and safety in the Northern Territory made 27 recommendations. The government accepted 23 of those 27 recommendations. What four recommendations were not accepted and what is the current status of the progress of the recommendations that were accepted?

**Ms UIBO:** We have some overarching information about the support-in-principle recommendations. The 23 of the 27 recommendations were agreed, with a three-phase implementation plan. A number of recommendations have already been implemented, including the industrial manslaughter offence under the *Work Health and Safety (National Uniform Legislation) Act 2011*. It commenced on 1 February this year. The model code of practice under the act has been reviewed and either adopted or re-adopted on 4 March 2020.

The guidelines and use of enforceable undertakings were reviewed in 2019, with new guidelines and guides published on the NT WorkSafe website in December 2019. NT WorkSafe is a member of the Regional Safety Committee established by the Australian Maritime Safety Authority, AMSA, to improve communications in the relationship between AMSA and state and territory regulators.

Additional infringeable offences commenced on 29 July 2020. Also, the investigations unit in NT WorkSafe has been established, with three ongoing positions that were filled in August this year. NT WorkSafe is continuing to work through the implementation of the agreed recommendations.

**Mr EDGINGTON:** Do you have the information on what four recommendations were not accepted?

**Mr ESTEVES:** Out of the 27 recommendations, I will work through those which were not supported, bearing in mind that there were some that were supported in principle only.

Recommendation 16 relates to a new independent statutory to be created to exercise all functions in relation to work health and safety prosecutions under the *Work Health and Safety (National Uniform Legislation) Act*

2011 and that the new independent statutory office should be headed by a part-time director of workplace health and safety prosecutions to be appointed by the administering council for a five-year renewable term and be supported by existing staff.

Recommendation 22 relates to the Work Health and Safety Act to be amended to require mandatory training for HSRs within six months of a HSR being elected to the role and refreshed at three-yearly intervals. It also requires persons conducting a business or undertaking to forward to the regulator a copy of all provisional improvement notices issued by HSRs appears to be not supported.

Recommendation 24, as per current arrangements for codes of practice under the Work Health and Safety Act—the appointment of a work health and safety officer should be permissible as evidence that a duty-holder has taken action to mitigate health and safety risks at a workplace. This should also apply to duty-holders whose workplaces have an elected and trained health and safety representative.

Recommendation 26—the status of codes of practice that existed under the Northern Territory Work Health and Safety Act 1995 be restored and the codes of practices in operation in the Northern Territory be regularly reviewed.

**Ms UIBO:** The four that have identified as not being supported, or supported in principle, have alternative solutions that have been identified in most cases.

**Mr EDGINGTON:** Under the *Work Health and Safety Amendment Act*, which commenced on 1 February 2020, introduced industrial manslaughter as an offence. Have there been any prosecutions using this new section of the act?

**Ms UIBO:** Not to date.

**Mr EDGINGTON:** In 2009 a wall collapsed at the Bootu Creek Mine and killed a worker. Allegations revealed that there had been as many as 17 complaints regarding that mine site in the year prior to that incident. What is the status of that matter and what changes have you made to your processes to address the potential issues highlighted in that case?

**Ms UIBO:** The matter of Bootu Creek Mine is an ongoing investigation. The mine has addressed the specific risk of repetition. I will just see if Mr Esteves would like to add anything further.

**Mr ESTEVES:** If I might have a moment just to find my note on this— I do have a note specifically on this, I just need to locate it.

**Ms UIBO:** While Mr Esteves is finding the particulars of his notes—we recognise the work of NT WorkSafe in the Territory. We want to ensure that all workers return home safely. I acknowledge that the member for Johnston has experience in this area and advocated very strongly in this space. He has a strong interest and passion in this area. We are very fortunate to have Mr Esteves and his expertise.

**Mr ESTEVES:** An engineer was engaged by NT WorkSafe to conduct an independent investigation into the cause of the pit wall failure. NT WorkSafe has received a comprehensive draft report relating to that. Importantly, the mine has resumed but operations are limited. This does not include the pit where the incident occurred. It is no longer operational at this time.

Since the incident ground and slave monitoring systems, also referred to as radar monitoring systems, are used wherever workers are in any pit on the mine site, including any maintenance works. This means the risk of repetitions no longer exist in relation to that aspect of concern. Radar monitoring is used to detect movements in pit walls. NT WorkSafe does not currently have any compliance notices issued under work, health and safety legislation for that pit. NT WorkSafe has conducted six mine site visits since the incident, and continues to work with the mine's division of the Department of Industry, Tourism and Trade. The investigation relating to that matter remains ongoing.

**Mr CHAIR:** The issue of work safety has a great deal of significance. It is very important that any death at work is preventable. I am just checking my notes. This morning we had the Chief Health Officer here. He spoke to us about the risk that continues with COVID and said that the greatest issue he sees with COVID—and his anxiety—is about peoples' behaviour and complacency. We have to change the culture of the way we go to work, and the way we work, so that there are no more deaths at work. One death is too many.

**Mr CHAIR:** That concludes consideration of Output Group 6.

## **OUTPUT GROUP 7.0 – CORPORATE AND SHARED SERVICES**

### **Output 7.1 – Corporate and Governance**

**Mr CHAIR:** We will now move on to consider Output Group 7, Corporate and Shared Services, Output 7.1, Corporate and Governance.

There being no questions that concludes consideration of Output 7.1.

### **Output 7.2 – Shared Services Received**

**Mr CHAIR:** We will now move to consider Output 7.2, Shared Services Received. Are there any questions?

That concludes consideration of Output 7.2 and the Output Group 7.

Are there any non-specific budget-related questions?

That concludes consideration of all output groups related to the Department of Attorney General and Justice.

Minister, on behalf of all the committee I thank you and the officers who provided advice to you and your office, everyone today who has worked diligently. I wish you a good evening.

**Ms UIBO:** I know it is a late night and people have been waiting. It has been a long day and I really appreciate the officials who have appeared with me today and all those listening, waiting in the rooms and those listening at home and their offices. I appreciate the work of AGD and am very much looking forward to continuing the strong reform we are doing in our department.

**Mr CHAIR:** We will take a short break to allow for the changeover and we will be back here in about five minutes.

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The committee suspended.

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## **TREATY AND LOCAL DECISION MAKING**

### **ABORIGINAL AFFAIRS**

#### **DEPARTMENT OF THE CHIEF MINISTER AND CABINET**

**Mr CHAIR:** The committee will now move on to consider outputs relating to the minister's portfolios of Treaty and Local Decision Making, and Aboriginal Affairs.

**Mr CHAIR:** I note that funding for Treaty and Local Decision Making, and Aboriginal Affairs, sits within the Department of the Chief Minister and Cabinet. Minister, I invite you to introduce the officials accompanying you and table your opening statement.

Considering the time, we can then jump into it. We have 18 minutes left.

**Ms UIBO:** I begin by introducing the officials who have accompanied me this evening: Mr Andrew Cowan, the Deputy Chief Executive of the Department of Chief Minister and Cabinet; Ms Mischa Cartwright, the Executive Director of the Aboriginal Affairs Strategic Partnerships; Ms Bridgette Bellenger, the Senior Executive Director of the Regional Network Group; and Mr Anthony Shelley, the Executive Director of Strategic Aboriginal Policy.

In the essence of time, I would like to get to questions as they are the focus of this process. We have some strong stories in regard to the work being done across the Office of Aboriginal Affairs and for the machinery-of-government changes. I acknowledge the work being done by our office.

I table the opening statement so we can go straight to questions from committee members.

**Mr EDGINGTON:** I have some questions about Blue Mud Bay. Permit-free access to Indigenous water was set to end on 31 December 2020. In early August it was announced that the government and the NLC had

agreed that permit-free fishing access would be allowed for a further two years until December 2022. Has that commitment been memorialised in any way at this point?

**Ms UIBO:** The Blue Mud Bay Implementation Action Plan commits to the Northern Territory Government and the Northern Land Council through a series of actions to lock in long-term permanent fishing access, new industry and jobs for Aboriginal Territorians. As part of the action plan the Northern Territory Government is providing up to \$10m to support the establishment of an Aboriginal fishing entity to facilitate participation of traditional owners in fishing, aquaculture and other opportunities associated with fishing.

I can go into details of the agreed action plan. I seek clarification regarding your statement of memorialising the work so far.

**Mr EDGINGTON:** Is there an agreement in place that it will continue until December 2022?

**Mr SHELLEY:** It is in the agreement that the Northern Land Council has agreed to consult traditional owners in relation to the extension at their full meeting, which is being held this week. That is as far as it can go with its statutory responsibilities as it is the traditional owners of the areas who have to give them instructions and make the final decision. They have undertaken that they will put a positive recommendation in relation to that course of action given the overall agreement.

**Mr EDGINGTON:** Minister, you touched on the establishment and support of an Aboriginal fishing body. Has that \$10m been paid? Has that agreement been set out on paper yet?

**Ms UIBO:** It is my understanding that, so far, \$500,000 has been put towards the business plan and case to assist in the delivery of that \$10m. I will pass to Tony Shelley for any clarification.

**Mr SHELLEY:** That is correct, minister. There has been an initial amount paid of \$500,000 which covers some consultations with traditional owners around the coast in relation to the overall proposed agreement, the development of the business case and the platforms for the development of the seed company.

The balance of the funds has yet to be paid and there is a draft funding agreement with the NLC which relates to the provision of those funds, setting out what the Territory and the NLC have agreed to do in the next two to three years.

That funding agreement is yet to be finalised; it is still under discussion. The remaining funds at this stage are not to be paid until such time that is signed. The documentation is in process.

**Mr EDGINGTON:** Minister, who is leading the negotiations on the government side? Is it DCM or is the new Department of Industry, Tourism and Trade?

**Ms UIBO:** Member for Barkly, it is the Department of the Chief Minister and Cabinet leading this in consultation with other government agencies, in particular, the Department of Industry, Tourism and Trade.

**Mr COWAN:** In addition to working closely with the Department of Industry, Tourism and Trade, we also have one of its senior executives sitting on the executive working group to ensure we have content knowledge. That is supporting the process with the other stakeholders: the Northern Land Council; AFANT; the guided fishing guys; and the Seafood Council, who sit in that group leading that agreement.

**Mr EDGINGTON:** Minister, I have a couple of questions about the Treaty Commission Office. How many people work in the Treaty Commission Office?

**Ms UIBO:** Thank you your interest in the Treaty Commission Office. I believe there are four, which would be the commissioner, the deputy commissioner and administrative officers supporting the work of the commissioner and the deputy commissioner. I will get Andy to clarify.

**Mr COWAN:** That is correct, minister. There are four staff. We also have had a graduate, through our graduate program, working through the Treaty Commission Office to provide support to the Treaty Commissioner. It is a great opportunity to work on significant policy work for the Northern Territory through that experience.

**Mr EDGINGTON:** Minister, can you advise what the annual budget for that office is?

**Ms UIBO:** The budget for 2020–21 is \$1.943m.

**Mr EDGINGTON:** I have read with interest the discussion paper. Was that written internally or contracted out?

**Ms UIBO:** Yes, that has been done by the Commissioner, Professor Mick Dodson. Also, when the Deputy Commissioner Ursula Raymond was appointed. The discussion paper has been devised through the treaty office as an independent body.

**Mr EDGINGTON:** Under the truth-telling process on page 69 it states that the truth-telling process must begin before treaty negotiations and is urgent. It also mentions what would be the ideal institutional setting. Has there been any progress in finding an appropriate institutional setting for the NT truth-telling institute?

**Ms UIBO:** This is an area that I know the commissioner and deputy commissioner are very passionate about, I think, from their initial stages of independent consultation this has come up as an area where they would like to see fast-tracked as a consideration of government. It is not something we have explored yet, but I know that through the interim report, which will be tabled in parliament—I believe that Friday evening we will get some further information through the work that the commissioners have done so far through the treaty office.

**Mr EDGINGTON:** Will that report be available?

**Ms UIBO:** Yes, it will be deemed tabled Friday evening.

**Mr EDGINGTON:** What is the overall role of the Office of Aboriginal Affairs and what is the budget for the office?

**Ms UIBO:** With the budget information, the role of the Office of Aboriginal Affairs is coordinating the strategic approach of government across all agencies. A third of the population in the Northern Territory are Aboriginal Territorians, including Torres Strait Islanders come under the office covering First Nations people. It is a strategic role in order to get the best outcomes for Aboriginal Territorians and the issues faced in the Territory.

We have two arms of the office. One is a strategic stakeholder engagement arm, which Ms Cartwright heads up in the office; and Mr Shelley, who is at the table this evening. In terms of land and sea and the areas of economic growth and opportunity, it really is an area of tying in government policy and implementing areas through government that could be done better to support Aboriginal Territorians through government. It also works closely and in partnership with the Anindilyakwa, Tiwi, Central and Northern Land councils to get the best outcomes for Aboriginal Territorians.

I will pass to Mr Cowan for some of the budgetary figures.

**Mr COWAN:** Just to add to the structures we have around the Office of Aboriginal Affairs, I am sure you are aware that post machinery-of-government changes we had a couple of significant changes where the previous Department of Local Government, including the Aboriginal Interpreter Services and community development functions, have come into our department. We have merged both those functions along with the Office of Aboriginal Affairs and the regional network.

We have tried to strengthen our reach out in the regions. They are not new resources; they have been brought across from other agencies. That means we have greater effort for implementation of our Aboriginal Affairs agenda, where all the resources that have been brought together will be focusing on delivering key outcomes in the Office of Aboriginal Affairs. I guess key pieces of work are the Aboriginal Affairs strategy and also the national partnership on Closing the Gap.

Alongside that is the work about leadership and governance that we have been doing through our grant funding rounds and where our Aboriginal corporations have identified that they would like to take a stronger role in delivering services.

In regard to budgets, we have our global budget for that output group. I do not have the direct split with the Office of Aboriginal Affairs with me. I am happy to take that on notice. We have \$166.658m in our budget for 2020–21, which is a significant increase from our previous budget without those new functions coming into the department.

**Mr EDGINGTON:** What local decision-making agreements have you entered into over the past year?

**Ms UIBO:** This is a very key policy for the Labor government when we are talking about local decision-making and ensuring that Aboriginal Territorians are front and centre of decisions that affect them, their families and their future families directly.

We are very proud that we have some local decision-making agreements already signed with various communities or Aboriginal organisations. We are able to provide a list of the ones we already have. We also have a series of statement-of-intention agreements about which I will be very happy to offer a brief to go through these in more detail.

Some of the agreements varied. I believe we have five so far that are officially signed. They are in varying degrees of implementation phase. We have a lot of interest where either communities, Aboriginal organisations or corporations are looking at other local decision-making communities or entities, to have a discussion and consultation with government so there is control.

Of course, with local decision-making we are talking about empowering Aboriginal people and our community elders to make the best decisions for their families and communities at a local base. This area is very important for us.

The five agreements that have been signed so far are Yugul Mangi Development Aboriginal Corporation, which is in Ngukurr; the Jawoyn Association, which is based in Katherine; Anindilyakwa Land Council; the Gurindji Aboriginal Corporation; and the Alice Springs Tangentyere Council.

The four statements of commitment so far that have been signed are the Yolngu Regional partnership; the Blue Mud Bay partnership, Thamarrurr region; Karlu Alliance; and the Daly partnership. More will be continued over the next four years in that space.

**Mr MONAGHAN:** You mentioned the Anindilyakwa people on Groote Eylandt, which is dear to my heart, as you know. Can you give me an update on the ongoing process with that one?

**Ms UIBO:** This is probably the most extensive and complex of all the local decision-making agreements that have been signed so far. I mentioned in the previous portfolio that Groote Eylandt has three main areas that have been the priority starters in the LDM. That is law and justice, housing and education. They all have implementation plans attached to them.

They are also looking at local government and provisions for that space. There is a full gamut of areas that the Anindilyakwa people are looking to progress over the next 10 years during that agreement.

**Mr EDGINGTON:** The Alyawarra people have been asking for an Aboriginal-controlled health service model for a number of years. Has there been any progress with this?

**Ms UIBO:** Unfortunately, there is no progress with that, but it something I will undertake, as minister. I am happy to work with you if there is an area of common ground that we can help support to get some local decision-making agreements or intention statements signed.

**Mr EDGINGTON:** Are you able to tell us the cost associated with the local decision-making agreements so far?

**Ms UIBO:** So far, it is within budget. If you want specific numbers—each agreement is different and based on the size and priorities of them—we would need to take it on notice and get you a breakdown of the costs.

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**Question on Notice No 6.52**

**Mr CHAIR:** Member for Barkly, please restate the question for the record.

**Mr EDGINGTON:** What costs have been associated with the five signed local decision-making agreements?

**Mr CHAIR:** Minister, do you accept the question?

**Ms UIBO:** Yes.

**Mr CHAIR:** The question asked by the Member for Barkly has been allocated number 6.52.

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**Mr CHAIR:** That concludes our evening for the Attorney-General. Minister, thank you to all your staff. Mr Cowan, thank you to you and your staff. We conclude for the day. The hearing will recommence tomorrow morning at 8 am with questions for the Minister for Local Government.

**Ms UIBO:** I thank the staff and officials at the Office of Aboriginal Affairs for their work in preparation for estimates. I thank those in the room with me today and those who listened through various outlets. I acknowledge the agency and the portfolio that I was not able to get to this evening—they have been waiting all day—the Department of Environment, Parks and Water Security, with the ministerial portfolio being Parks and Rangers. Unfortunately, they will not be able to answer estimates questions. We acknowledge their work and thank them for their public service.

**Mr CHAIR:** Lastly, I thank staff of the Department of the Legislative Assembly for their hard work and for making this happen.

I look forward seeing you here tomorrow. I will start the day off with a rap, so look out! We will have Mr Chansey Paech in the house.

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The committee concluded

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