

**EDUCATION AND HEALTH STANDING COMMITTEE**

*Fifth Report — Annual report 2022–23 — Tabling*

**MR C.J. TALLENTIRE (Thornlie)** [9.56 am]: I present for tabling the fifth report of the Education and Health Standing Committee, titled *Annual report 2022–23*.

[See paper [2349](#).]

**Mr C.J. TALLENTIRE:** May I take this opportunity to highlight some of the work of the Education and Health Standing Committee from this reporting period. The house would already be aware that we made a decision during the reporting period to inquire into the level of support in the education system for autistic children and young people in schools. That work is already well underway.

During the first half of the reporting period, we tabled the fourth report, titled *Report of the Inquiry into the Esther Foundation and unregulated private health facilities*. It was quite notable that almost immediately upon tabling that report the government made a commitment to adopt our recommendation 5, which was about banning the gay conversion therapy practice that some establishments had embarked on. I know that there has been much support for that recommendation and the subsequent decision to adopt the recommendation by the government. That, indeed, is very welcome. The other recommendations in the fourth report are all at varying stages of adoption.

It is very important that we review and look at the regulatory framework around private hospitals and health services. It is notable that the act that governs these establishments goes back to 1927; therefore, it is well and truly time for the legislation to be reviewed. It was very evident to us during the inquiry that when things go wrong in private health and allied services establishments, especially those of a residential nature, that cater for people who are physically or mentally ill or who have drug and alcohol and other problems, they will turn to government and say, “What are you doing to regulate and police these sorts of establishments?” The advice we have is that the scale of activity of these establishments is quite large. From conversations with our constituents, we frequently hear of people with family members and friends who are in need of some form of help, especially with drug and alcohol rehabilitation. They need assistance. There is a demand for establishments that can help people on their journey away from those sorts of problems or to cope with a particular form of mental illness. The demand is there, but it is incumbent on the government to make sure that the regulatory framework is in place to look after people so that the broader community can be assured that these establishments are assessed and licensed.

That goes to the heart of recommendation 1. It was very heartening to see the very favourable commentary around that in the government response to our recommendations. There was similar commentary on the recommendation about a complaints procedure, which is separate from the licensing arrangements. The complaints procedure is currently handled by the Health and Disability Services Complaints Office. We recommended that the scope be broadened so that HADSCO has the power to deal with not just individual healthcare workers, but also individual establishments. From all this, we can see that the regulatory framework for establishments that look after people’s wellbeing in a very detailed and intimate way is properly established, and, indeed, that is most welcome.

Another issue that the committee explored concerns matters of governance at our four public universities. This followed a hearing with the Chief Scientist, Professor Peter Klinken. It is very encouraging to know that the Minister for Education has announced that the state government has commissioned the university sector review panel, which is currently examining the structure of WA’s public university sector. From the various bits of information that we have been able to gather, I think the sector will be most appreciative of that. It is very pleasing to note that the work of that panel, chaired by Emeritus Professor Sandra Harding, is well underway.

Turning to another matter, we had the privilege of holding a hearing with Nobel laureate Professor Barry Marshall. We had the opportunity to visit the Marshall Centre for infectious disease research and training at the University of Western Australia. One striking area of the presentation to us was the issue of antimicrobial-resistant infections. What was particularly concerning was the projection that in the next 30 years, antimicrobial-resistant infections will be responsible for more deaths than anything else in our hospitals. They could become the most common cause of deaths in our hospitals over the next 30 years. That is the projection from the Marshall Centre and other organisations that are addressing the matter of antimicrobial resistance. It is an important issue for us to have in our considerations and deliberations. It is on the horizon. It is something that a committee such as the Education and Health Standing Committee has the capacity to bring to the attention of members to ensure that we can anticipate the various risks and the likelihood of this and that we are across it and are prepared to deal with it in a manner that can keep people well.

On the matter of wellness, a very succinct way of describing what so many people involved in our health services sector see as their primary driver is: to enable Western Australians to live as well as possible for as long as possible. If we can achieve that, it will be a good thing. Much of the idea of living as well as possible for as long as possible is down to incredible luck. If someone has the right genetic make-up or they are born into the right economic circumstances, they will be well on the journey. Anyone living in Western Australia will have access to the right

economic circumstances, although some groups are being left behind, and it is our job to lift up those people who are being left behind. Essentially, Western Australia has the capacity to provide the right environment for people to live as well as possible for as long as possible. However, that leaves things to the individual. There is an element of personal responsibility here. There are three controllable elements that people can take care of in endeavouring to live as well as possible for as long as possible: eating, sleeping and exercising well. If someone is eating, sleeping and exercising well, and has a good genetic make-up and fortunate circumstances in the environment in which they live, they will really be ticking all the boxes for living well for as long as possible.

One area in which the committee is pursuing things further is the matter of eating well. Thanks to a hearing we had with Professor Dora Marinova, who is a professor of sustainability at Curtin University, the committee was enlightened on the issue of alternative proteins and the development of the alternative protein sector. All kinds of health benefits can come from the use of alternative proteins. There are potentially environmental benefits. Indeed, there is the opportunity to reduce our reliance on intensive animal production systems, thereby also improving animal welfare outcomes. It was a very interesting area for us to look at. There is potential for us to have an affordable supply of healthy, tasty alternative proteins that can deliver good health outcomes, good environmental outcomes and a reduction in the reliance on intensive animal production systems. There are some very interesting opportunities there, and the committee has committed to delivering a discussion paper on the subject of alternative proteins.

In conclusion, I would like to thank the other members of the committee: the deputy chair, the member for Maylands; the member for Dawesville; the member for Hillarys; the member for Pilbara; and also the member for Scarborough, who was co-opted onto the committee for the duration of the inquiry into the Esther Foundation and unregulated private health facilities. On behalf of all of us, I would like to especially thank our principal research officer, Catie Parsons; our acting principal research officer and research officer, Sylvia Wolf; and our research officer, Franchesca Walker.

With that, I commend this annual report to the house.