

**VETERINARY PRACTICE BILL 2021**

*Second Reading*

Resumed from 12 May.

**HON COLIN de GRUSSA (Agricultural — Deputy Leader of the Opposition)** [5.05 pm]: Before I begin, I note the existence of supplementary notice paper 11, issue 2. This has come out today and has some very good amendments that address some of the concerns that I had with this bill.

I start by saying that the modernisation of the regulation of veterinary practice in WA is overdue and that is why the opposition supports many of the elements of the Veterinary Practice Bill 2021, especially those that facilitate mutual recognition of veterinarians who are registered in other jurisdictions; that is a good thing. The registration of veterinary nurses is also a good thing. That makes Western Australia the first Australian jurisdiction to do so. I also indicate that I am the lead speaker on this bill, which I should have done earlier.

The facility for the Veterinary Surgeons' Board to deal with impairment separately from unprofessional conduct matters is also a good step. The reinstatement to the board of the power to deal with minor disciplinary matters is another good thing. Also, I realise that the ability for non-veterinarians to own and operate veterinary practices, potentially, causes some conflict. However, in the opposition's view, it is a good step and should allow more veterinarians to own practices and successful businesses.

The mutual recognition aspect of the bill brings WA into line with other Australian states. The veterinarians who are registered interstate will not be able to practise in WA without Western Australian registration unless they move their principal place of residence to Western Australia. Veterinarians will be required to maintain primary registration in the jurisdiction where they reside. A veterinarian registered in one jurisdiction is deemed registered in other jurisdictions without the need to register with the secondary jurisdiction's veterinary practice board. Veterinarians will be subject to the same conditions, restrictions or limitations that apply to their primary place of registration.

The registration of veterinary nurses is well overdue. It will enable regulatory oversight of what is a very important function insofar as providing a formal legislative framework for the veterinary practice board to address issues of unprofessional conduct or impairment in alignment to those that are also applied to veterinarians. This recognises and reflects the significant responsibilities that veterinary nurses discharge.

As I said before, addressing impairment separately to matters of conduct is a good step. Although the role of a veterinarian can be an exceptionally rewarding job, it can also be very, very challenging and involve very long hours and result in a very poor work-life balance. Ordinarily, veterinarians and veterinary nurses choose their profession due to their love of animals and their ability to ensure their continuing welfare. Sadly, this can result in what is termed "compassion fatigue", a syndrome that, if left unresolved, can have a devastating impact. As a result of both those factors, there is evidence that veterinarians experience higher than average levels of depression, anxiety, stress and burnout compared with the general population. At present, the only option available to the Veterinary Surgeons' Board to deal with mental impairment is to refer the matter to the State Administrative Tribunal as a complaint. Obviously, a disciplinary process is clearly not the most appropriate way to manage medical impairment issues that do not involve any element of professional misconduct, particularly when it may result in punitive action being taken. The opposition supports the approach proposed in the Veterinary Practice Bill 2021, which is aimed at a more sympathetic and constructive process, predicated on supporting the mental and physical health of veterinarians and veterinary nurses, while also reducing the risk of negative outcomes.

Under this legislation, the board will regain the power to deal with minor disciplinary matters, which it lost when the State Administrative Tribunal was established back in 2005. The present system has the potential to cause veterinarians to incur significant costs and suffer professional reputational damage that is disproportionate to the alleged misconduct. From that perspective, of course, the opposition supports the two-tiered system for handling unprofessional conduct, with lower tier matters to be dealt with directly by the Veterinary Practice Board and more serious misconduct matters to be dealt with in the upper tier, being referral to the State Administrative Tribunal.

The opposition has concerns, however, with some aspects of the legislation, particularly around the livestock industry and the provision of particular animal procedures in situations in which it may not be possible to gain access to a veterinarian, a veterinary nurse or an authorised person. Circumstances in which a procedure can be performed without a veterinarian being present are prescribed under section 26(3) of the current legislation. The bill before the house does not appear to contain a similar provision; perhaps it is contemplated that those circumstances will be provided for by way of regulation. Perhaps the minister can respond to that in her reply to the second reading debate. I hope that similar provisions will be contemplated in regulation, because it is an incredibly important issue in the livestock industry. Procedures that are critical to the welfare of animals are carried out in very remote areas where it is simply not practicable to have access to a veterinarian or even a veterinary nurse. Such procedures are often time-critical and need to be provided as quickly as possible, so the option to authorise people to provide such procedures under regulations would be very welcome. Various industry bodies have made representations to the

opposition and, I am sure, to government. In fact, I know that the Australian Veterinary Association submission to government covered this issue also. I am sure the minister is well aware of it, and I hope we can get a good response on that particular issue.

Another of the opposition's very serious concerns is with regard to powers of entry, which are covered under clauses 113 and 114. Notwithstanding the fact that there are some proposed amendments to those powers of entry provisions on the supplementary notice paper, inspectors are obviously going to need access to premises to investigate legitimate complaints. The legislation will give very wide powers to inspectors to access premises and remove items from those premises once they have gained entry, although those powers of entry do not really align with those used in the medical profession, for example, under the Health Practitioner Regulation National Law (WA) Act 2010. That act grants powers of access to inspectors at the consent of the owner, under warrant or if the premises are in a public place. The relevant provisions of the Veterinary Practice Bill 2021 mirror the first two elements, but instead of referring to public places the bill makes reference to veterinary premises at any reasonable time.

Significant parts of a veterinary practice are not usually accessible to the public; hence, the broader wording seems to give a greater level of access to premises than in the human health situation. Also, no distinction is made in the bill between the use of this power when the inspector simply enters the premises during any reasonable time and when they enter with an entry warrant. Further to that, the powers of the inspector will include the ability to remove samples or gather evidence without the consent of the occupier, unless the terms of a warrant allow for that or it is possible that the removal of these items could seriously impact the legitimate business activity of the veterinary practice. In fact, as the bill is currently constructed, inspectors will be able to enter veterinary premises for absolutely no reason at all and demand whatever documentation, record or samples they wish without limit and without oversight. However, veterinarians will have no recourse in circumstances in which those powers are exercised unreasonably, other than to face prosecution and mount the defence that they had a reasonable excuse for failing to comply with the direction. This is a common theme that we have seen in other legislation—extensive powers of entry and evidence gathering. The industry has certainly raised concerns about those particular powers of entry and evidence gathering. There does not seem to be any accountability or appropriate oversight to ensure that those powers will be exercised in accordance with the principles of natural justice.

Having said all that, the opposition supports this bill. As I said earlier, we note the amendments that have appeared on the supplementary notice paper. They certainly address the concerns we had around the membership of the board, as well as a number of other issues that have been resolved. We would like a response from the government on the issues around powers of entry and the other issues we have raised, particularly with regard to whether the regulatory framework will allow for those procedures to be carried out in areas where it is impossible to get access to a vet or a vet nurse.

In closing, I reiterate that the opposition supports the legislation. I am sure my colleague Hon Dr Steve Thomas will make a contribution to the second reading debate at some point. With that, I defer to my colleagues.

**HON STEVE MARTIN (Agricultural) [5.17 pm]:** I did not anticipate getting to my feet quite yet, but I will do my best to make a contribution to the second reading debate on the Veterinary Practice Bill 2021. I start by making the obvious point about the value of the veterinary profession and vet nurses to agricultural industries in Western Australia. They are absolutely vital in all parts of the ag industry. When something goes wrong, you give someone like Hon Dr Steve Thomas a call. Vets are crucial across all parts of the agricultural sector. It is usually one o'clock in the morning, six degrees and raining when you give the vet a call if there is a caesarean required on a cow, so I appreciate the contribution the veterinary profession has made to the ag sector.

As we heard from Hon Colin de Grussa, the opposition will be supporting this bill. There are a number of good parts to this legislation, including mutual recognition across the states and territories, which is lacking at the moment. For example, if that recognition was available, vets would be able to move back and forth between the Northern Territory and the Kimberley. This bill will remedy that situation; we are pleased that that will be covered. Obviously, the Northern Territory and Darwin have more to do with Kununurra than they do with Perth or Adelaide. It also talks about the regulation of veterinary nurses in Western Australia. They provide a very significant input to this sector.

I hope the minister gets a chance to respond to some of the concerns that were raised by Hon Colin de Grussa and the industry. I have a submission from the Australian Veterinary Association dated June 2020, and I would like the minister to address some of its concerns in her response. I appreciate that some amendments to the bill were presented late last week and earlier today. I have not checked whether they address some of these concerns, particularly about impairment. We have heard this bill will address some of that issue and the way the State Administrative Tribunal process takes place, as opposed to the changes that will allow the board to do some of that work. The AVA has some very strong views. Its submission states —

While legislation needs to provide a way to ensure that a veterinarian's impairment does not endanger any animal's health, safety or welfare, the Board should not have the ability to make such a decision without

due process ... If the Board believes a veterinarian or veterinary nurse may have an impairment, it should not be able to refuse application—rather it should be required to perform an appropriate investigation and compile relevant evidence for a SAT ruling.

The AVA has a level of concern about how this impairment process will take place. It is particularly concerned about the board's ability to make what in effect will be a medical decision about whether a vet is impaired. The AVA submission also states —

There should also be substantial evidence—based upon which the Board can justify, directing a veterinarian or veterinary nurse to undergo a health assessment for registration or renewal to be granted. Again, this should not be able to occur without an appropriate investigation and hearing before SAT.

The AVA makes the point in relation to the health assessment that the board does not include a general practitioner—a doctor. I believe that the eight members of the board will somehow make an assessment of the impairment or otherwise of a vet. I share some of those concerns and I hope that the minister gets a chance to reply. The AVA is calling for a GP or someone with similar qualifications to be on the board. Could we get a response on that, minister?

I have a couple of other questions about the report that was recently handed down by the Standing Committee on Uniform Legislation and Statutes Review. The committee made a number of recommendations. I assume some of them deal with the issue I spoke of, but I have not had a chance to seek advice. Could the minister please provide a response? A number of other findings of the committee deal with Henry VIII clauses. Fellow new members of Parliament, I googled “Henry VIII clauses” just to make sure I knew what I was talking about, after we were told about them in our induction. I believe there are a number of those clauses in the bill. I think some of the amendments deal with them, but I would be keen to hear the response on that.

Obviously, with a vet in the room, I will defer to my more senior colleague to make some further remarks about this piece of legislation. It will bring a number of issues in the sector up to Australian standards. As Hon Colin de Grussa said, the opposition will support the bill. I thank the minister for the steady stream of amendments, which I think will go some way towards sorting out our concerns. I welcome the opportunity to have made a brief contribution.

**HON DR STEVE THOMAS (South West — Leader of the Opposition)** [5.23 pm]: I thank my various colleagues for their contributions to this second reading debate on the Veterinary Practice Bill 2021. I suspect I may talk a little longer on this bill. I want to relate some of the history and experience of the veterinary profession. I am still a registered veterinary surgeon, and I have remained a registered veterinary surgeon for my entire political career.

**Hon Alannah MacTiernan:** Given how volatile it is, that is probably not a bad idea!

**Hon Dr STEVE THOMAS:** That is exactly right, minister! We digress slightly, but in 2008 my seat was redistributed out of existence by the Labor Party with its one vote, one value legislation in the house that shall not be named.

**Hon Tjorn Sibma:** They are trying to get you again!

**Hon Dr STEVE THOMAS:** Yes, it is trying again! The attempt to curtail my political career in 2008 did not quite come off as planned, so the Labor Party is having another go at it to see whether it can manage it permanently in 2025, by the time we get there!

Several members interjected.

**Hon Dr STEVE THOMAS:** Yes, yes. We shall see.

**Hon Kyle McGinn:** The Liberal Party is still here!

**Hon Dr STEVE THOMAS:** We are still here! We are still active!

It is absolutely the case that I might want to keep my registration! Veterinarians occasionally get elected to Parliament, but there have not been that many of us over time. Most tended to leave the profession well and truly before they ascended to the lofty heights of Parliament. Certainly, the ones who I knew were generally no longer practising and were no longer registered, and there are probably a few reasons for that. After 2008, I went back to vetting for a little while, amongst other jobs. I say to members that when the redistribution of the upper house comes along, losing a seat in Parliament is a pretty brutal affair, because once you have nailed your political colours to the mast, often a lot of businesses do not want to employ you. There was a stage when businesses would tell me that they did not want anyone from politics, because what would happen if there was a client of another political persuasion? I tried to convince them on occasions that in regional areas there are almost none of those! That might look a little bit different now! It is very difficult.

The veterinary profession is a difficult profession to work in. It often amuses me, because veterinarians often like to think that, as a rule, we study and work harder than general practitioners. I know this is an ongoing competition for the GPs in the room. In fact, a bragging-rights competition occurs. Members might be amused to know that in Britain, for example, GPs were referred to as “Dr” and surgeons were referred to as “Mr”. It caused GPs in Britain no end

of angst that veterinarians, who were both medicos and surgeons, all started using the title “Mr” just to one-up GPs! I thought that was a fairly hilarious outcome to be honest! That is an ongoing process. There are many similarities. We obviously learn medicine, surgery, pharmacology and all of these things. In the veterinary profession, we potentially learn a little more about genetics and epidemiology, given the sheer numbers we deal with. But there are many similarities between the two professions. The thing that most people probably discover is that the glamour that exists in the medical profession after graduation disappears very rapidly for those who graduate to the veterinary profession. I was part of a survey when I was in practice. I ran a practice in Donnybrook from 1991 and I sold it in 2006 when I got elected to Parliament, so I spent 17 years running a veterinary practice. That was after some years of working elsewhere. It is an interesting process to go through.

There is some information about the difficulty of veterinary practice that members should probably be aware of. Around when I departed the profession, there was a survey of veterinarians, and one of the results of that survey was that the average full-time working life of a veterinarian was in the order of five years. That is interesting when we consider that the shortest training period for veterinarians is five years and the longest is six years. It is absolutely the case that what happens when a vet graduates does not necessarily reflect the glory of the course, and there are a number of reasons for that. First and foremost, of course, is that there was a much greater financial limit—there certainly was in my day—placed upon the ability to practice medicine than the human medicos would ever countenance. Just to give members a bit of an indication of how governed the veterinary profession is by finance, when I started my business, it was probably 50 to 60 per cent cattle work—the predominance of my business. I ended up employing three other vets. It was a modest-sized practice; it was not anything the size that we see out of the corporate model that exists today, particularly interstate. I always had a general rule that I think was one of those universal rules of life, and that is that the farming community in particular was generally prepared to gamble with about two-thirds of the price of an animal for treatment before they would say, “No, it’s just easier to shoot it.” Obviously that does not generally occur in the medical profession, as far as I am aware, and it would make the state health budget look a bit interesting if it did! I do not know how many caesarean sections I did in my years of practice. I think my record was something like eight or nine in one day on a particular stud. Unless it was a stud animal, in most years a caesarean section cost a total of around \$350. I could bowl them over in an hour.

For those who are involved in human surgery, the actual surgery component is actually reasonably quick and adept; it is not a complicated surgery. It is always more complicated with vets, because as far as I am aware the medical profession does not have the same restraint issues that we have. But it is a complicated and dangerous piece of surgery. It is more dangerous because we often do it in some very dangerous circumstances. I will come back to dangerous circumstances because it is incredibly relevant to this bill going forward.

There was a limit of price. In an average year when a cow might be worth—let us say in round figures—\$500, and a calf on the ground might be worth \$100, that is a \$600 unit when it dropped. If a farmer could spend two-thirds of the price on that, a farmer would pay \$400 for a caesarean. If I charged him \$600 for a \$600 unit, they would generally figure that they were no better off and that a bullet cost a dollar. It is incredibly price sensitive, at least partially less so today, and it has always been less so in a couple of industries, particularly small animal work. Unfortunately, I date myself now—I am amongst the older members of my profession—but in the early days a lot of domestic pets were not the subject of great expenditure. Some dogs that were family pets were. I have to say that as a rule, the poor old felines did not enjoy the same sort of economic support, so they tended to have a price put on them as well. But it is incredibly financially limiting, so much so that a survey was done towards the end of my time in private practice on the financial return for veterinarians in the mid-2000s. I forget the exact year; apologies for that. It was about 15 years ago, at the beginning of the mining boom in that 2003–04, 2004–05 and 2005–06 kind of range.

The average wage for a graduate veterinarian with 10 years’ experience in 2005 was \$80 000 a year. That was slightly higher than the mean wage. It was effectively no better than somebody who was on a decent trade assistant wage. This is the first thing that members need to understand about the veterinary profession, because I understand that the average wage today for veterinarians is more like \$85 000 a year instead of \$80 000. It has not risen. I am not sure what the average wage is for a full time general practitioner, but I suspect not many GPs would be working for less than \$200 000 a year. I would say that if they are on any sort of reward for work, they are probably getting more towards \$300 000. It is in that price range. Not too many pharmacists would be working in that sort of price range and this is part of the problem. The veterinary profession seems like a wonderful and glamorous profession. There are some very good parts about it, but financial reward is not one of those.

Those who go out and start their own practice, as I did, obviously find that the financial rewards can be better. After they build up for a while, they certainly are, and some practice owners make significantly good incomes. But that is not the rule. Part of the problem is that the financial reward available is not always worthy of the work that is required to get there. I have to say that when running my business, there were plenty of years when my staff took home a greater wage than I did. Those who run a small business would know that that is not an uncommon situation. They are the first to arrive, they are the last to leave and they are always on call, because if something goes wrong with an employee, they are responsible for picking up those pieces. That in itself is something we will come

back to in a bit, honourable members, because I have seen people take on roles when they were not supported in the veterinary industry and had their lives destroyed over the first six to 12 months. It is absolutely the case that people have been used as an income source and abandoned. That, today, again, is much rarer and I am very thankful for that. It is absolutely a tough industry to be in.

The first thing we need to note is that for the vast majority, the financial reward in the veterinary profession is below what most people would expect. People often ask, “Why don’t you go back to vetting? Gee, the money must be good; I had my dog fixed and it cost \$1 000.” Here’s another thing that the human medical profession does not have to deal with. When someone sets up a veterinary practice, nobody provides them with extra services on the side. A GP writes a prescription for the drugs that somebody needs. They send people off to be X-rayed and to have an ultrasound. Someone in a veterinary practice has to buy all that equipment themselves. They buy their own anaesthetic machines and they buy their own stock. They are a pharmacist as much as they are a surgeon as much as they are a general practitioner. All that is an incredibly expensive process. Not only are the rewards fairly low, but if someone wants to set up a practice, the costs are incredibly high.

What happens at that point? When I first started in the veterinary industry, we were seeing a shift in people who wanted to take up the role. I spent a lot of time training undergraduates and graduates, and having a lot of schoolkids through on work experience. Everybody loved to be a vet. I did work experience in a vet practice. That was many, many decades ago now. It was immensely good fun. Here is one of the other things that we need to be aware of. For some reason, sometime in the 1980s, perhaps as early as the 70s, but particularly in the 80s and the 90s, the vet course and the veterinary profession got incredibly popular. We always thought it was the result of a few great television shows like *All Creatures Great and Small*, which was quite realistic. We could see James Herriot, who I think from memory was actually named Alf Wight, who would throw off his shirt and roll around at the back end of a cow in the mud, grime and rain.

A member interjected.

**Hon Dr STEVE THOMAS:** It will get worse, member, do not worry. We are just warming up yet. Take a deep breath.

That was reasonably realistic. I can still hear the music as he drives down the road. That was not a bad show. We also had *A Country Practice*. I remember looking at it one day when a vet was called out to vaccinate some sheep. I was sitting there with my farming family saying, “I don’t know any farmer who would ever vaccinate their sheep or have a vet out”, because it costs an absolute fortune. They would vaccinate the sheep themselves.

**Hon Dan Caddy:** With a drenching-gun.

**Hon Dr STEVE THOMAS:** They would get the drenching-gun out. Would they call the vet out and pay them \$300 an hour to drench their animals?

The interesting thing is, Acting President (Hon Jackie Jarvis)—she has a rural background and probably understands much of this—that if you travel overseas to places where the animal is worth a lot more, the world changes. I went to have a look. A friend of mine from Boyup Brook and I did a gentleman’s drinking tour of England and Ireland. It was one of my few holidays when I was vetting. It was absolutely great. We did the classics. We kissed the Blarney Stone. I think it broke in half when I kissed it; it was one of those things! We stayed on farms. We saw the prices that people got for cattle and sheep. At that point, an Australian prime steer was potentially selling for, let us say, \$A800. A steer in Ireland, because of subsidies, was selling for £1 a kilo. An \$A800 steer was probably 400 kilograms. Therefore, at £1 a kilo, with an exchange of three to one—so, \$A3 a kilo—that was \$A1 200. They got a nearly £800 additional subsidy on top of that in three tranches. The animal was worth an enormous amount of money. Guess what happened? I could not believe it. We stayed on a dairy farm for something like a week and visited the local Irish haunts—where the locals go, not where the tourists go. It was brilliant. But they called out the vet to vaccinate their stock and to treat all the things that farmers in Australia would treat themselves. If a dairy cow had mastitis, they would call out the vet. We would have made a fortune if the same rules applied here!

Do those rules not apply in Western Australia because people care less about their animals? I do not think that is the case. The difference is purely the economic value placed on them. When an animal is worth significantly more and there is more money in the system, the vet can charge at an appropriate level. If veterinarians charged an hourly rate similar to doctors for their services, we would all go broke because no-one would use us. There would be a vet practice or two probably in the leafy western suburbs where people could afford it, but for the most part they would not exist.

What happened? We have a glamorous representation of vets and veterinary life, and the reality does not meet the glamorous image. It did not then and it does not now. That is why, at the time, the working life of vets was on average five to six years, having done a five or six-year course. Lots get out and go and do other things. I have known vets who go into teaching. In Western Australia, if a 10-year graduate vet is getting \$85 000, they are probably earning less than a teacher who studied four years instead of six and who is not on call every second weekend for the rest of their life. That has an enormous impact, as it does with the human medical profession. When I first started, a vet

in a regional area was required by law to provide an after-hours service, and of course there is no hospital. The vet cannot say, "Send them up to the emergency department and someone in the hospital will take care of them." They either had to provide that service themselves or have a veterinary practice that would pick it up and provide that service. Effectively, they would be referring clients to another business. That took an enormous toll.

What does the veterinary profession look like? I explained once that it looks a bit like this: the best bits of the veterinary profession are a bit like the best bits of most other jobs; the best bits are great and the worst bits are terrible. What is the veterinary profession like? If I got called to a calving at three o'clock in the morning, from Donnybrook I might travel for an hour. I would go out the back of Greenbushes and visit a guy called Jim Vallelonga. He will not mind me mentioning him. I not even sure that he is still alive now; he would be very old—well into his 90s. He immigrated to Australia and worked in forestry for a couple of years. He paid off his farm with two years of forestry cheques. He is an absolute worker. I would go there at three o'clock in the morning. He loved his cattle. When you went to his farm, you would know it was fresh and had not been messed with. There was some shelter and a reasonable set of yards. In the early days, I would go there, pull out a calf and then have probably one or two red wines or whiskies too many! Jim is the man who taught me how to drink red wine—good Italian red. He had a brother in the Swan Valley. We now know that Margaret River and great southern reds are better than those from the Swan Valley, but it was not a bad starting point.

That is the best part about veterinary science. The vet drives out, there is a cow, there is a calf and everybody is happy. What is the worst part of veterinary science? The vet drives out at three o'clock in the morning and the rain is pouring down. The cow tried to calf a week earlier, perhaps overnight and perhaps with a farmer who was not necessarily neglectful but just did not recognise at the time that the cow was calving. After a couple of hours of trying to give birth, the cow stopped. A week later, that calf is dead. It is about 50 per cent bigger because of gas and expansion than it was a week earlier. The cow is on the ground in the mud and in the rain. The guy has finally realised it is calving and has attached a calf pull or a tractor to the back end to try to tug it out. The vet has to lie down at the back end of that and the only solution at that stage is to do a caesarean section, but doing major abdominal surgery on a cow lying in the mud is high risk. The farmer wants it fixed for \$400. At three o'clock in the morning, rolling around in the mud, the vet has to say, "I don't think that's realistic."

The biggest issues I had as a vet was when things went wrong and I tried to do things in a dangerous situation. Most people do not realise this. I will describe one. One of the biggest issues I had was when I lost a patient. I went to geld a horse. That is a pretty standard operation. It is pretty simple. I arrived at the place and there was no yard and no place to restrain the horse; they were running loose in the paddock. We went up to them with a bucket of grain. Of course, the horse came up to us and we got a halter on him. Because it was summer, we tried to do a standing castration. We had to sedate the animal sufficiently, but not have him lying in the dirt because that would increase the risk to the animal. I asked if it was a nice quiet animal that we could do this with. I was told, "Yes; it's never bitten, kicked or put a foot wrong." We loaded up the animal with significant levels of sedative so it was wobbling on its feet. For members who do not know what a twitch is, it is a piece of rope that gets twisted around a horse's nose to the point that it cuts off the blood supply and causes pain. It is commonly used in the equine industry because it distracts the horse sufficiently for a person to do what they need to do and move forward. This horse was sedated so that it could barely stand. It was twitched. I went to infuse local anaesthetic into the appropriate area, which I will not describe graphically, and the next thing I noticed was a movement and two hooves whistled over the top of my head. That was potentially a fatal event, and it is not unusual in the veterinary profession when vets take on things they should not necessarily take on. At that point, I should have driven away and said, "This horse is unrestrained. The risk is too great. I need to move away." But I was in the veterinary profession and there is a price attached to everything, so we knocked the horse down—chemical restraint is a wonderful thing. I know the medical profession do not get to use it all that often—a little bit but nothing compared with us—but it is a very useful thing. Having kicked his way around a yard with me trying to do this standing up with a local anaesthetic, the horse dropped to the ground. I proceeded with the operation, but he picked up an infection because it was performed in the dust. The horse picked up a clostridial disease and did not survive.

We have gone through that the hours are ridiculous and vets are generally on call in regional areas. That has got better, and the provision in the amendment bill that corporatises veterinary surgery will potentially make that better. One of the biggest issues that a veterinarian has is that they are not making a lot of money for putting their life at risk not irregularly. Members would be amazed how often I have had to rope animals and try to hold them so that I can get a sedative into them. Here is another example. I am not going to apologise for the barnyard analogies because it is important that you people understand the risks involved in this industry.

I went to see a lame bull, the owner of which is a lovely guy; he was excellent, and none of this was necessarily his fault, but the bull was lame. It was a Limousin bull so it probably weighed 900 kilograms. Let us say it is a mile and a half to two miles, so four kilometres, from the set of yards we could have tried to get it in so that we could look at it. As we often do, we probably should have walked away and waited until it got better. But I said, "Let's have a go; maybe we can tie it to a tree to examine its lame leg." I have to say, honourable members; I am not a cowboy—

I am not perfect at throwing a rope. Sometimes I get them first throw; sometimes it is a few throws down the track, but I had a very long rope for this purpose. It was one of my best shots ever. The bull stood probably as far away as the other side of the chamber. As I said, it was a very long rope, which I dropped on its head with the first throw. As it turns out, the bull did not like having a rope dropped on its head and immediately looked at me and charged, so I immediately turned around and ran. As brave as I think I am, 900 kilos is probably a bit on the large side. I was reasonably quick in those days. I was pretty active; I ran state titles in 800 and 1 500 metres. I was not a sprinter, necessarily, my legs were a bit short, but I could do a reasonable 400 and 800 metres and got better as the lengths got longer. I went like blazes. I must have run for a couple of hundred metres and I thought, "Okay, he must have stopped by now." Theoretically, you could hear, but the blood was pumping in my ears at that point, and I felt a wetness on the back of my calf, which was the bull's nostril and its snot and saliva. I thought: "Maybe I'll keep running." It finally occurred to me then to change direction. Bulls are not bad because as they think they are getting you, they close their eyes. They are used to crashing into each other at great rates of knots, so they close their eyes. Generally, when they are that close, you can change direction because he has his eyes closed and will go past you. It is not the same with the clever cows, particularly up north. The Brahman cows in particular are very, very good. They keep their eyes open. They want to get you big time. They do not close their eyes for the actual killing shot. They watch you very carefully to make sure they get you all the way through but this bull closed his eyes. Luckily at that point I swerved and he went past.

That story has a good outcome on two levels: first, I did not die, which was definitely on the cards. Second, that bull recovered and lived to serve and service for some years down the track. We eventually got him and treated him and he was all right. But that is the sort of risk a vet takes. I could give members hundreds of stories about the risks that veterinarians take, particularly in large animal practice. However, it does not happen in just large animal practice. A lot of vets often get bitten. Small animal practice is not safe either, but it is generally wonderful. You are indoors and pets generally come to you but it is not always safe. I have seen vets bailed up by very large dogs and that is when you stand still in case because if you move a hand or a finger that is the bit you will lose. You need to be very cautious in small animal practice as well.

What have we learnt about vet practice so far? It is dirty, it is messy, it is incredibly dangerous far too often and it does not pay well. To anyone who is thinking about changing professions at the moment, I can recommend the veterinary profession! It is not a profession for the faint-hearted. What happens as a result of that? The first thing is a lot of people do not stick with the industry because there are only so many jobs available in the safer sections. Australia has some of the highest veterinary populations in the world. At one point, south east Queensland had the singularly most concentrated number of vets because, basically, everyone set up on different street corners and there was immense competition and the weather was nice. If you wanted to be a vet anywhere, being a vet in south east Queensland was the place. The only place at that point where there were more vets per head of population was Cairo because in Egypt you did not have to have a degree to practice as a vet; you could just hang out your shingle, so there were more vets in Cairo.

Veterinary practice is immensely competitive. What happens in this process? It is a tough job. It is not easy. You have to throw yourself into it. People compensate in all sorts of weird ways. My first graduating colleague took his life two years out. For many of the veterinary profession, suicide is an easy option basically because you have the wherewithal facilities for a very easy manner. We have euthanasia drugs sitting on the shelf. The ease and capacity with which vets do it is scary. The surveys I looked at towards the end of my days in practice, in the 1990s, showed that veterinary practice was the second worst small business for success in the country. I never asked what was the most dramatic but certainly veterinary practice was the second worst. It is usually in the top two or three suicide rates of businesses. There has been a bit of media publicity about that lately. It is because the stress and pressure of the job combines with the ease and capacity with which they can take that terrible ultimate solution. It is a tragedy. I have known a number of vets who have gone down that path. It is a dreadful place to find yourself.

I hope I have given everybody a realistic view rather than *A Country Practice* view of what veterinary practice is really like. The joys of it are fantastic. I do not want to suggest that there are no joys involved in practising as a veterinarian. There certainly are. The ability to save life and to heal is a joy. It is a joy we probably share with the medical profession. Heaven knows, in many cases I probably rate animal life and welfare as highly as I do that of humans and in many cases I prefer interacting with animals.

**Hon Alannah MacTiernan:** You're in the right party!

**Hon Dr STEVE THOMAS:** I thought the minister was going to say, "We're in the right place.", but I was going to be kind to her. I was looking in her direction at the time, but that was purely by accident so nobody should read anything into it. There are lots of great things about veterinary science.

I will come to the bill before us, which has the capacity to make some improvements. As the previous speakers have said, the opposition will support the bill. After the last comment, I should take this back, but we appreciate the collegiate attitude of the Minister for Agriculture and Food on this. We have had some fruitful and frank discussions

around this industry, the profession and the bill. The amendments I think the minister has put forward are an improvement and I thank her for her consideration of what is, hopefully, constructive input.

Let us run through some of the requirements of the bill. I could wax lyrical about the profession forever but I probably will tell some stories about the original Veterinary Surgeons' Board and its functioning. The bill will do a number of things. The first, obviously, is it will provide for national recognition of veterinary registration, which is absolutely essential as it is for most other industries. It is not just because a veterinarian might like to travel from New South Wales to Western Australia to do particular specialist work and return, although that happens on occasions. More important, it is because in some areas around the country, we cross borders naturally. There are Northern Territory veterinarians who service clients in Western Australia in the pastoral region and Western Australian veterinarians who do the same in reverse. The same occurs around South Australia, so there is a need for national recognition of veterinarians.

The argument might come up about the standard of veterinary practice but it is enough to say that the standard of veterinary practice coming out of Australian universities is very high. It was actually my whole alma mater at the University of Queensland, which dropped its bundle for a little while, but it has regained its status; therefore, there is generally acceptance that graduates of any of the universities in Australia will come out roughly equivalent. Certain areas probably have certain strengths. Melbourne still probably provides the best equine teaching and Queensland probably the best cattle teaching. In Perth, Murdoch University was very sneaky because when it set up—it was one of the later universities to set up—it stole the best people from everywhere else, which is an incredibly clever way to set up an academic profile, so Murdoch is probably a good generalist, so the standard is very high.

I have had a look at some of the examination requirements for international veterinarians. I am sure Hon Brian Walker would be able to talk about the medical one, but most practising veterinarians would not get within a bull's roar of passing the international accreditation test that veterinarians get put through. It is an incredibly complex examination. When I looked at it, I was a veterinarian practising in the south west with three other vets working for me and I could not have passed it. It is an immensely difficult process to qualify for. I think having a national accreditation standard makes sense. The days of having individual state bodies with individual state registration need to be gone. I have always thought it was a bit bizarre. I have only ever been registered to practise in Western Australia, but it should be a national registration. I think that is an obvious amendment, and I commend the government for doing that.

Some comments have been made around impairment, and I will probably come back to that. I do not have much more time left. The bill will allow a corporatisation model for veterinary practices. A corporatisation model needs to be looked at because in my day you had to be owned by a vet, run by a vet and managed by a vet. Nobody could give an instruction to someone who was not a vet, although people tried to. I could give examples of that as well. It meant that vet practices were very small.

*Sitting suspended from 6.00 to 7.30 pm*

**Hon Dr STEVE THOMAS:** In the very brief time I have left I will try to get through some of the remaining parts and key details of the bill. I do not propose to spend a bunch of time on the impairment component; other members have spoken about the mental and physical health of veterinarians and veterinary nurses. I mentioned some of the stresses involved and want to get to some the other bits as a matter of urgency.

Let me start with the ownership of veterinary practices and the business. When I was a newly graduated vet—many, many years ago now—only a vet could own a veterinary practice. That remains the case in Western Australia despite the fact that that has changed in many other jurisdictions. That has meant that it is very hard to put in a corporate model. In the medical profession for humans, a corporate model was introduced and put into place and it resulted in a major shift from little traditional one or two-doctor practices, particularly in regional areas, to the super clinics that exist today, where there are, even in reasonably sized regional centres, practices of 20 or 30 doctors. I could spend some time talking about Parkinson's law and how it applies to the medical profession and the automatic expansion of work to fulfil however many doctors are put in place; that is, if there are three doctors in a country town, the books will be full and if six doctors are put in the same place, the books will be full with repeat visitations. That is what happens in a system in which people do not necessarily pay for visits, or the majority of their visits. That does not apply to the veterinary profession. That is why the corporate model of ownership can apply to the veterinary profession more than in a lot of others because there is pressure to try to operate in little practices, as we used to, and because vets are on call. When a vet is on call on their own for a year, they feel it. When a vet employs their first vet—in my case it was after only about six months—it is a huge relief. Suddenly a vet can share the after hours' load. When two or three vets are employed, it feels like magic—it really does. I sold my practice in 2007 but I still wake up at night, on occasions, thinking that I am on call and looking for my pager. It has an enormously profound impact. It is the case that someone could operate a corporate model as long as they are a vet.

It is funny, I do not watch much reality TV, but I walked past my wife while she was watching some reality TV one night—a show I had not watched before—and I said, "I know that person." It was a show called *Shark Tank*. In that show quite wealthy people get to bid on ideas that people come in with. I was looking at one of the people on



the show and thought, “I know that guy.” Glen Richards is a vet who got into a corporate model of vet science as a vet in Queensland and is now one of the sharks. I do not know whether the show still even exists. He was a friend of mine. We were a year apart graduating. I mention him because he was a particularly good fellow, and the fact that I beat him a couple of years in an athletic competition makes no impact on the fact that I am mentioning his name tonight. But I will send him a copy so he knows that he has been recorded for posterity. There was this thing called the vet mile in which we would run for a mile.

**Hon Jackie Jarvis:** Hopefully not with a bull chasing him!

**Hon Dr STEVE THOMAS:** It was not with a bull; no-one was chasing him, apart from me, and I overtook him.

It is possible for a vet to own their practice, but it can be extremely difficult. More vets have failed in ownership than succeeded. Like I say, veterinary practices have probably been the second worst small business for bankruptcies in Australia for a long time. When I studied in the 1980s, there was only one afternoon of business management in terms of the complete contribution to how we might survive in the business world—one afternoon! If we look at that and all the other pressures a vet is under, no wonder it is a very difficult industry to stay in.

Corporate ownership is coming; it is unstoppable. But we have to keep an eye on it to make sure that corporate profits are not put ahead of both animal welfare and the welfare of the veterinarians who work in the system, in the same way that that would apply to the medical profession. If it is done well, it takes pressure off vets. It tends to result in a smaller number of larger practices and allows vets to share the after hours’ role reasonably well.

I remember doing some locum work in Esperance many years ago, which is where I met my wife. There were three practices in Esperance that instigated the first round of sharing the after hours’ experience. That would have been in 1999, I think. Hon Colin de Grussa probably remembers when there were three vet practices in Esperance, 20-something years ago. I stole my wife, who was a vet nurse, off Swans Veterinary Services. I hope that David has forgiven me after 20-something years!

**Hon Colin de Grussa:** I’m not sure about that!

**Hon Dr STEVE THOMAS:** He probably still holds a grudge—no, he is a good fellow. I have enormous respect for him.

I want to spend much of the rest of the time talking about the complaints and discipline process and the structure of the board. I will make this comment about veterinary nurses: Western Australia is the only jurisdiction to regulate veterinary nurses. Many of the older generation of vets do not want college-trained veterinary nurses; they like to train them themselves, which is an interesting process. I have enormous respect for veterinary nurses. I always paid mine above the award wage because, on average, veterinary nurses receive a pittance for doing a miserable job. They spend a lot of time cleaning up surgical waste and animal manure, and keeping surgeries tidy. It is not a glamorous job. Being a vet is far less glamorous than it looked on *A Country Practice*. I can tell members that being a veterinary nurse is far, far more difficult.

**Hon Sue Ellery:** Stop picking on *A Country Practice*. I loved that show.

**Hon Dr STEVE THOMAS:** Did the Leader of the House? It was unrealistic, it really was.

**Hon Sue Ellery:** I cried when Molly died.

**Hon Dr STEVE THOMAS:** The Leader of the House might have enjoyed the show, but it was completely unrealistic in terms of the veterinary profession. It does not look like that. It has never looked like that.

**Hon Colin de Grussa:** We might find that Father Christmas is not real either!

**Hon Dr STEVE THOMAS:** I know. Okay! He is real for Hon Matthew Swinbourn!

Veterinary nurses do an incredible job, given that they are paid an absolute pittance. To be honest, most of them do it for love than for any other reason. I am not 100 per cent convinced that making them go through a course and making them registered will make them better veterinary nurses, but if it will make them feel better about their profession, let us support that. It will come at a cost. Most of the veterinarians I have known, particularly those in the old days, have sponsored their vet nurses through the course. That was done in recognition that it was a tough job that was poorly rewarded in reality. Apart from the love of animals and the joy of seeing them recover, it is not a job that I would recommend people take on for financial reward or career aspiration; it really is not. We need to make sure that the vet nurses who pick that up have a pathway into the profession that is not exclusively through Joondalup TAFE, which I think is the TAFE that currently offers that course—it is somewhere in the far north.

**Hon Matthew Swinbourn:** It has always been Bentley TAFE.

**Hon Dr STEVE THOMAS:** Bentley, okay. There needs to be other avenues, but Bentley TAFE is doing a great job.

Let us deal with the critical element of the bill, namely complaints about veterinary surgeons, and the construction of the Veterinary Surgeons' Board and how it deals with complaints. Does the member over there need a vet? Just checking! There is a doctor in the house, and a vet. The member can take her choice.

**Hon Sue Ellery:** I know which one I'd choose!

**Hon Dr STEVE THOMAS:** It depends on which one would use more restraint, but anyway!

There have always been issues around the disciplinary actions of the Veterinary Surgeons' Board. I want to talk about my first experience with the board. Members have to remember that when I first started as a vet, the Veterinary Surgeons' Board, and in particular the registrar, and the Australian Veterinary Association were really about protecting an old boys' club. When I say an old boys' club, it really was about old male vets. I wanted to set up my own practice. I had been working in a practice in the same region that had been set up in the back of a house. It was a registered veterinary practice. Theoretically, to be a registered veterinary practice, it had to have a proper pharmacy and a range of facilities. That practice had almost nothing. When I set up my practice in opposition, I made sure that I had three times the level of facilities of the place that I had come from. I had to register my veterinary practice with the Veterinary Surgeons' Board. The registrar came down to inspect my practice. I will never forget this. It was in 1991. I will not besmirch him. From memory, his name was John; I will not name him any further. He walked in and said, "You haven't got this and you haven't got that. I'm not going to register you", and he drove off. Members might struggle to think that I might have been argumentative when I was younger, but, believe it or not, luckily I have mellowed with age. I wrote him a letter and said, "Hang on a minute. You said I had to do this, this and this. I've just walked out of a practice that you have already got registered that had none of those things." It just happened to be a branch practice of an old-time vet who had been there for a long time.

The double standards that applied in those days were horrendous. I have to say that the Australian Veterinary Association was not much better. There needs to be a higher level of professionalism in both the Veterinary Surgeons' Board and the Australian Veterinary Association. Any attempt to professionalise the board is a very good idea, because it has to be better than the example that I started life out with, which was, as I said, literally an old boys' club. The AVA stayed that way for a long time. It has become better, because a new generation of vets have come along. The graduates these days are 75 per cent or 80 per cent female, so the "boys" part has to some degree disappeared, and the "old" part is slowly going as well. Those changes in the AVA are important. They are also important to the board and how it functions.

I have seen registrars deal with veterinary complaints in a number of ways. I have assisted to a large degree. I think I have only ever had one complaint listed against me. That was the case I raised earlier of a horse that had died after castration. That case was dismissed without complaint given the circumstances. There are certainly vets who do the wrong thing. There used to be a registrar in this state by the name of Dr Andy Keefe. Andy Keefe was a great guy. He was—I hope he will forgive me for saying so—somewhat of an ageing hippy. He saw his role as facilitating good outcomes for both the profession and the clientele it serviced. He was very good at talking to the complainer and the veterinarian about what had gone on, what could be made better and what genuine outcomes they wanted out of the process. He did a fantastic job. His dress and his manner notwithstanding, he was a consummate professional in the way he approached that role. I can tell members that today, the veterinary profession does not consider the current veterinary board in the same light. There are probably a number of reasons for that. The veterinary board has become much more, let us say, bureaucratic in its role, whereas Andy Keefe was very much about how do we facilitate the best outcome. The current board is very much more punitive in its actions. Bear in mind that the current board does not necessarily prosecute; it leaves prosecution for others. However, the manner in which it deals with veterinarian matters is much the same as the manner in which the medical profession board—there are two or three versions of it—deals with doctors. Doctors, like vets, are under enormous stress. There is a way to deal with them when things go wrong that is either positive or very negative. The veterinary profession has seen a shift. It is time to try to make this better.

As I said at the start of my contribution, I appreciate that the Minister for Agriculture and Food has been open to this conversation and is prepared to look at how we can make this better. Unfortunately, this is often an issue of personality and the people who are fulfilling specific roles. It is very difficult to shift that. I remember debates, as will some members, around animal welfare many years ago. The problem was that the leadership of the animal welfare division in the then Department of Local Government decided to take a very punitive approach. When that happens, we miss the opportunity to repair lots of things. It is absolutely an issue that in many cases, complaints can be dealt with in a positive way if the right personnel are in place. That becomes critical. That is why the AVA has asked to retain one member on the board. I would have thought a one-in-eight membership representing the industry body was a reasonable outcome, and the minister has agreed with that position and will allow that to happen. Under the original bill, that would not have occurred. That will now occur, because the minister has an amendment on the supplementary notice paper in her name to allow that to happen. That is positive. The negotiations around the veterinary association are critical. Despite my criticism of what the AVA was, it still has a critical role to play in this legislation going forward and making sure that the profession embraces what is going on. This is a classic

example. If we do not take the profession with us in the administration we put in place at a state level, we will have a disaster on our hands. I am pleased that the minister has picked this up. It is critically important that we do not seek to attack or disempower the veterinary profession as a path to try to lift it to a higher level of professionalism. I am pleased that the minister has picked some of those things up.

The bill before us will allow the registrar and the board to investigate what they call low-level issues. That is exactly what Dr Andy Keefe used to do. He was very good at making sure that they did not progress too far along, and that needs to be continued. That is a good move by the state government, because the reality is that right now cases go before the State Administrative Tribunal. People who have been around long enough will know that SAT was set up theoretically as a more convenient, lower-cost version of the courts. Instead of going to the Supreme Court, things could be sent to SAT and it would not be as onerous. Obviously, SAT simply raised itself effectively to the level of a court. It is not cheap and it is not easy. There is not much difference between going to SAT and going to another court. If people can avoid that system, it is absolutely worthwhile.

The government is to be commended for attempting to allow the lower levels to be dealt with in a different way. The board can hold an inquiry, make orders following a finding of unprofessional conduct, impose fines of up to \$2 000, modify the conditions of registration or issue a reprimand. None of us likes any of those things, and I am sure that there will be vets who will say that they were reprimanded and did not deserve to be. Ultimately, all of these things will be challengeable to a higher court or higher authority. That is a good way at least to attempt to reduce the effect.

In the very small amount of time I have left, let me summarise where we have got to. It is a tough occupation. It is not easy. The conditions are not great much of the time. It requires the skills of a surgeon. I do not know what a surgeon in the medical profession currently gets, but if general practitioners are on a quarter of a million dollars, I do not imagine many surgeons would be on less than half a million dollars, and plenty of them make close to \$1 million a year. Not many vets will get anywhere near that over a long time. It is not easy.

The bill before the house will make some improvements, and I thank the minister for approaching this with the right attitude. She and I not infrequently clash over things but, in this case, I think we have found a reasonable amount of common ground.

I am close to finishing, but I will tell the story of a friend of mine who is a vet who went through a rather painful divorce. The divorce rate in veterinary science is not great; in fact, the practices around mine have some unusual histories. A vet in a practice south of mine in Donnybrook drank himself to death in his mid-50s; he was effectively trying to cope under the pressure of doing cattle work when his body would no longer suffice. Another vet nearby went through a rather messy divorce, which is not unusual in the business. He rang just for a chat and then some advice. He said, “My lawyer has said that we need to value all the assets. What do you think I should put down as the goodwill on my vet practice?” Again, those who have been in business, particularly if they are a bit older, will know that in the old days when goodwill was applied, it was basically the cost of building up a business. When I was a young man, which seems like a long time ago now, goodwill was roughly calculated at the annual turnover of the business. If someone ran a three-vet practice and each vet was turning over 200 grand, the practice turned over 600 grand. When they sold the business, they would sell it for the value of the asset—that is, the building, equipment, stock et cetera—and then add \$600 000 for what used to be called goodwill. That was quite common in the 1980s and 1990s. In the late 2000s, my friend rang me and asked what price he should put on it, but the world had changed. My advice to him was what I would tell most vets now: “The value of your goodwill in your business is zero. Put zero, and if you have any issues with your lawyer, the Family Court judge or the tax man, tell them to ring me and let me know, because the days of easy, free money in this business are gone.” Corporate ownership might fix it a little bit, but it is a tough industry. A lot of people suicide and a lot of people go bankrupt.

The bill before the house is a good bill and I shall enjoy supporting it when we come to the end of the debate.

**HON WILSON TUCKER (Mining and Pastoral)** [7.54 pm]: I rise briefly to support the Veterinary Practice Bill 2021. Unlike Hon Dr Steve Thomas, I cannot stand here and wax lyrical about my experience in the veterinary field; however, I have almost been kicked in the head by a horse and I have castrated sheep in my time. Both were harrowing experiences, so I certainly have a lot of respect for people in the veterinary industry!

This bill seeks to combine several acts and update the terminology, which is a good thing. It also mentions veterinary nurses; I think any bill that mentions nurses in a positive light is a good thing. The clause that I take umbrage with is the one that deals with investigation powers to search premises. Clause 113 deals with the right of the inspector to enter premises, clause 114 deals with the power to search premises and clause 115 deals with the power to compel the handing over of evidence. My general understanding is that within common law, there is a privilege against self-incrimination, and that is what I see in the bill at clause 115. Clause 116 applies to clause 115. Clause 116 states that any evidence must be in relation to the investigation. Clause 116(3) states —

... is not admissible in evidence against the individual in any proceedings other than —

(a) disciplinary proceedings taken by a regulatory authority under this Act ...

That means that the bill is tailored in that case to clause 115 and there is a self-incrimination provision in there, which is not the case for clause 114. I will briefly read some of the provisions in clause 114 —

- (c) examine, measure, test, photograph or film any part of the premises or any thing at the premises;
- (d) operate equipment, including (without limitation) a computer, or facilities at the premises or direct a person at the premises to do so;
- (e) take any thing, or a sample of or from any thing, at the premises for analysis or testing;
- (f) make a copy of, take an extract from, or download or print out, any document or other thing at the premises;

And it goes on. This seems to give the inspector extraordinary powers to collect evidence that could itself potentially incriminate. I look forward to speaking on this bill in the Committee of the Whole House, especially because, as far as I can tell, a self-incrimination provision is listed in clause 114.

**HON DR BRIAN WALKER (East Metropolitan)** [7.58 pm]: I also rise to support the Veterinary Practice Bill 2021 and thank the government for introducing it. I will say a few short words on the bill. It is an innovative bill that will make our state the first to register veterinary nurses, which is excellent. I recall from my days as a medical student—in those un-politically correct days—when I was allowed, or, in fact, required, to work as a doctor on the wards. The patients never knew; I wore a white coat and gave injections or took histories. I would go onto the ward and they would say, “Dr Smith’s off sick today; who wants to put their hand up first?” I got half the pay but had to do the job of a doctor, and no allowance was made for being a medical student. I had to learn really quickly, so I asked the nurses what to do and they kept me right. That was the best way of learning, I think. This is the way for nurses to get some practical experience, because in my experience, university-trained nurses do not know what they are doing. One reason that I think it is so difficult to employ graduate nurses now is that they do not have the experience on the wards. That is something that I want to look at.

I also thank Hon Dr Steve Thomas for his speech, because he described precisely what is going on for people who may not have any idea of what a vet does, apart from what they have seen on the television. I have this issue. My wife watches a bit of television and looks at the medical programs. I refuse to look at the programs because they are so much nonsense. Nothing real happens. One program I saw many years ago was a humorous look at doctoring. A patient came in the following day and said, “That’s a terrible program; how horrible.” I said, “I have to tell you, every single thing you saw on that program I have personally experienced.” He was shocked because that was a true-life experience of a junior doctor on the wards. It was a horrible experience. There were many giggles; many horrible things happened. It was the first time I had seen a program that actually showed what doctors go through. I am sure that vets will say the same thing. The program *CSI* is another one that is not real. We heard from Hon Dr Steve Thomas exactly how a vet’s life is. They put their arm up into the depths of something to haul out an animal —

**Hon Dr Steve Thomas:** The other arm.

**Hon Dr BRIAN WALKER:** The other arm; okay. That is not my idea of fun. I have done similar things, not quite so deep—it is not nice.

Having worked in rural WA, often with farmers, and indeed with vets as my patients, I have seen from personal knowledge what is going on. It is a very necessary and wonderful profession, but with miserable remuneration and a tremendous amount of stress. A number of suicides have occurred. There is a lot of alcoholism, drug abuse, marriage breakdowns, bankruptcies; I cannot think why any reasonable person would want to be a vet, especially looking at the qualifications required to enter veterinary education. It is more than for a doctor. It is amazing how much more academically qualified a person needs to be. I think it is so much more difficult, clinically, to be a vet. The closest I have come to that is treating teenagers, who are, at times, as equally expressive as animals. I have to confess that I have two teenagers!

My area of concern is with the veterinary board. I am very dubious. Vets and doctors share a common distaste for all bureaucrats—the ones who sit there passing judgement; the ones who maybe have had an experience in the past of a profession but are now sitting there as the overlords able to judge with hindsight. I will tell a story about my own particular experiences. I have been reported to the medical board a couple of times. I will give no names or places. Once, a nurse had falsified a medical record. She had asked for advice, which I had given. A patient was in pain after a knee replacement and needed some analgesia. This was one week after the operation. Doctors want patients to step down from the opiates. Opiates cause quite a lot of death. The patient was very demanding and wanted the opiates. This was not in my practice. I said, “To step down, we will give anti-inflammatories and a different type of opioid and we will gradually wean you off.” She took no notice of that. When I came back a week later, I found that the nurse had, first of all, hidden the eight pieces of correspondence I had had with her. She had not documented it and someone else had carried on prescribing opiates, to the patient’s detriment. Family members

were so angry that they were going to call the television station to complain that their relative was suffering. The nurse had falsified medical records. That is a big no-no. I had her walked off the premises. I was taken in front of the medical board because I was “unprofessional” in my behaviour in having someone who had falsified medical records taken off the premises. Members might think: what nonsense; chuck that one out. But no, two years went by. I was going for a locum job. Whenever I was asked, “Do you have anything outstanding with the medical board?”, I would answer “Yes.” I was told, “In that case, we can’t take you because you are being investigated for some unprofessional behaviour.” Wow!

Another time, a patient was taken off medication. He had asthma and was taking a beta-blocker. I told him that we would stop that. There was a good reason for that—this particular beta-blocker in combination with asthma can result in sudden death. That is not a good combination. When someone complained about that, they did not go to one of my colleagues and ask why this had happened; they went straight to the medical board and complained that I had stopped the medication without reason. There was a reason, actually—the patient really did not want to die quickly. Again, that process took a long time. The response from the medical board was not, “This was a vexatious complaint; nonsense; sorry for having troubled you; carry on.” No—the response was, “You got away with it this time; be careful.” The insidious suspicion was that I had been investigated because I was unprofessional and “we’re going to keep a close eye on you because you’re a danger to society”. This medical board we have now is responsible for quite a number of doctors committing suicide because of the stresses they are exposed to by simply being investigated, often for vexatious complaints. I am not saying that the board should not investigate doctors, by no means, because it is essential. We have to keep our society safe from people who are unprofessional.

I imagine that the same thing happens in the veterinary business; that is, people are judged and are held accountable until they have been exonerated. It is a very stressful time. When a profession is so at risk of suicide and self-harm, with alcohol and drugs, because of the stresses they are under, I would like our legislation to ensure that those bureaucrats who are in charge of having the very important task of ensuring that our professionals are behaving professionally are also human; that they are reasonable; that they will not judge indiscriminately and put people under pressure; that they will, as Hon Dr Steve Thomas mentioned, look at things with an even eye and allow things to be progressed gently, if need be; and only use the full force of the law if it should be necessary. From bitter experience, I would suggest that we need to be very careful about this because we do not want anyone else to kill themselves.

Members must expect it of course from someone in my position within the party: I would like very much for us to consider the use of certain medications that are used for animals—cannabinoids. Cannabinoids are being used more frequently in veterinary medicine. We know that pets—dogs and cats—with arthritic pain are given cannabinoids. We ought to have this medication more freely available. I put that plug in there because members were expecting it and because it is good medicine. Having said that, I will support this bill and thank the government.

Debate adjourned, on motion by **Hon Pierre Yang**.