



LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

2020–2021–2022–2023

MINUTES OF PROCEEDINGS

No 90

WEDNESDAY, 28 JUNE 2023

- 1 The Assembly met at 10 am, pursuant to adjournment.
- 2 The Clerk having informed the Assembly that the Speaker was temporarily absent, the Deputy Speaker (Mr Parton) took the Chair as Acting Speaker and made the following acknowledgement of country in the Ngunnawal language:

Dhawura nguna, dhawura Ngunnawal.

Yanggu ngalawiri dhunimanyin Ngunnawalwari dhawurawari.

Nginggada Dindi wanggiralidjinyin.

This is Ngunnawal country.

Today we are all meeting on Ngunnawal country.

We always pay respect to Elders, female and male.

The Acting Speaker asked Members to stand in silence and pray or reflect on their responsibilities to the people of the Australian Capital Territory.

3 **SILICA DUST SAFETY REFORMS UPDATE—MINISTERIAL STATEMENT—PAPER NOTED**

Mr Gentleman (Minister for Industrial Relations and Workplace Safety) made a ministerial statement concerning the implementation of silica dust safety reforms in the ACT, in response to recommendation 3 of Report 7 of the Standing Committee on Economic and Gender and Economic Equality entitled *Inquiry into Annual and Financial Reports 2021-2022*, and presented the following paper:

Silica Dust Safety Reforms Update—Ministerial statement, 28 June 2023.

Mr Gentleman moved—That the Assembly take note of the paper.

Debate ensued.

Question—put and passed.

4 APPLICATION AND ASSESSMENT PROJECT UPDATE—MINISTERIAL STATEMENT—PAPER NOTED

Ms Vassarotti (Minister for Homelessness and Housing Services) made a ministerial statement concerning the implementation of the new application and assessment method for social housing in the ACT by Housing ACT and presented the following paper: Application and Assessment Project Update—Ministerial statement, 28 June 2023.

Ms Vassarotti moved—That the Assembly take note of the paper.

Question—put and passed.

5 CORONERS ACT—REPORT OF CORONER—INQUEST INTO THE DEATH OF JOSHUA—GOVERNMENT RESPONSE—MINISTERIAL STATEMENT AND PAPERS—PAPER NOTED

Ms Davidson (Minister for Mental Health) made a ministerial statement concerning the Government response to the report of the Coroner on the inquest into the death of Joshua and presented the following papers:

Coroners Act, pursuant to subsection 57(4)—Report of Coroner—Inquest into the death of Joshua—

Report, dated 10 February 2023.

Government response, dated June 2023.

Ministerial statement, 28 June 2023.

Ms Davidson moved—That the Assembly take note of the ministerial statement.

Question—put and passed.

6 FORMAL RECOGNITION OF WAR WIDOWS DAY

Ms Davidson (Minister for Veterans and Seniors), pursuant to notice, moved—That this Assembly:

- (1) designates 19 October annually as War Widows Day;
- (2) recognises that:
 - (a) for generations, the sacrifices, contributions and service of war widows has been significant to our nation's story;
 - (b) the ACT is home to a large and diverse community of veterans and their families, including war widows;
 - (c) in grief and bereavement, war widows have grown a strong and resilient community through Australian War Widows, formerly the War Widows Guild of Australia;
 - (d) the Australian War Widows—ACT plays a critical role in the support, companionship, advocacy and recognition of war widows in our local community;

- (e) the families of veterans are a pillar of strength and support for veterans in the ACT; and
 - (f) veterans' families require unique services and supports responsive to their specific needs; and
- (3) notes that:
- (a) 19 October is the birthday of Jessie Vasey, founder of the War Widows Guild of Australia (now Australian War Widows Inc); and
 - (b) the ACT Government will commemorate War Widows Day annually and mark the occasion with a community event, held in conjunction with Australian War Widows—ACT.

Debate ensued.

Question—put and passed.

7 GAMING MACHINE (CLUB REFUGE) AMENDMENT BILL 2022

The order of the day having been read for the resumption of the debate on the question—That this Bill be agreed to in principle—

Debate resumed.

Question—That this Bill be agreed to in principle—put and passed.

Detail Stage

Bill, by leave, taken as a whole—

On the motion of Mr Rattenbury (Minister for Gaming), by leave, his amendments Nos 1 to 3 (see [Schedule 1](#)) were made together.

Paper: Mr Rattenbury presented a supplementary explanatory statement to the Government amendments.

Bill, as a whole, as amended, agreed to.

Question—That this Bill, as amended, be agreed to—put and passed.

8 HUMAN RIGHTS COMMISSION AMENDMENT BILL 2023

The order of the day having been read for the resumption of the debate on the question—That this Bill be agreed to in principle—

Debate resumed.

Question—That this Bill be agreed to in principle—put and passed.

Leave granted to dispense with the detail stage.

Question—That this Bill be agreed to—put and passed.

9 MOTOR ACCIDENT INJURIES AMENDMENT BILL 2023

The order of the day having been read for the resumption of the debate on the question—That this Bill be agreed to in principle—

Debate resumed.

Question—That this Bill be agreed to in principle—put and passed.

Detail Stage

Bill, by leave, taken as a whole—

On the motion of Mr Steel (Special Minister of State), by leave, his amendments Nos 1 to 11 (see [Schedule 2](#)) were made together, after debate.

Paper: Mr Steel presented a supplementary explanatory statement to the Government amendments.

Bill, as a whole, as amended, agreed to.

Question—That this Bill, as amended, be agreed to—put and passed.

10 QUESTIONS

Questions without notice were asked.

11 BAIL AMENDMENT BILL 2023

Dr Paterson, pursuant to notice, presented a Bill for an Act to amend the *Bail Act 1992*.

Paper: Dr Paterson presented an explanatory statement to the Bill.

Title read by Clerk.

Dr Paterson moved—That this Bill be agreed to in principle.

Debate adjourned (Mr Cain) and the resumption of the debate made an order of the day for the next sitting.

12 RESTORATIVE JUSTICE REFORMS

Dr Paterson, pursuant to notice, moved—That this Assembly:

- (1) notes that:
 - (a) within the ACT Government, there are a number of programs and initiatives underway to work towards making Canberra a restorative city;
 - (b) a “restorative city” is based on the principles of “restorative practice”. According to the 2019-2020 ACT Restorative City Vision, restorative practice is “all about recognising that relationships are central to our wellbeing, community and society. Restorative practices can be used as a shared approach to problem solving based on equal respect, accountability and support.”;
 - (c) restorative justice is a process used across the world as a process of independent, facilitated contact, which supports constructive dialogue between a victim and a person who has harmed, arising from an offence or alleged offence;

- (d) restorative justice can work alongside the criminal justice system, or as an alternative pathway to the formal criminal justice system. It is often noted that restorative justice offers a process that is empowering for victim-survivors of crime;
- (e) the most common forms of restorative justice programs operating in Australian criminal justice systems are victim-offender mediation, conferencing (for both adult and young offenders) and circle sentencing;
- (f) the ACT was the second jurisdiction in Australia to introduce restorative justice for prosecutable offences in 1994, primarily for youth offenders (aged 10-17 years old);
- (g) restorative justice is legislated in the ACT through the *Crimes (Restorative Justice) Act 2004* (the Act). The Restorative Justice Unit (RJU) is part of the Justice and Community Safety Directorate and administers the Restorative Justice Scheme in collaboration with other referrers, including courts, policing, corrective services and victim support;
- (h) the Act allows for less serious offences to be referred as a diversion or in conjunction with criminal charges. It limits the referral of serious offences to only after criminal proceedings have commenced and once the offender pleads or is found guilty of the offence;
- (i) the current Restorative Justice Act (2004) applies to a serious offence committed by a young offender or an adult offender if the offender:
 - (i) is charged with the offence; and
 - (ii) either pleads guilty to the offence; or
 - (iii) is found guilty of the offence (whether or not the offender is convicted or sentenced for the offence);
- (j) since 2018, the RJU has accepted referrals for cases of sexual assault and family violence. In order to be eligible for restorative justice, a matter currently must be referred to the RJU at some point along the criminal justice system journey, including at the point of police caution, in court at the pre-sentence stage, or post sentence;
- (k) the 2021 *Charter of Rights for Victims of Crime* requires justice agencies to advise victim-survivors at multiple points in the criminal justice system about their rights and options around accessing a restorative process;
- (l) the needs of all survivors are diverse and multi-faceted and change over time. Work by advocates and survivor-led initiatives demonstrates a widely held desire for a restorative justice option;
- (m) in cases of sexual assault, it is critical to have a survivor-centred and trauma-informed approach to restorative justice;
- (n) the *National Plan to End Violence against Women and Children (2022)* recommends including restorative justice as an option for survivors of sexual abuse and family violence; and

- (o) the 2021 *Listen. Take Action to Prevent, Believe and Heal* report noted that existing protections, designed to ensure family violence and sexual assault matters did not escape the oversight of the courts, limited victims' choices in when and how they can access a restorative justice option. It recommended expanding restorative justice processes to address this;
- (2) further notes that:
 - (a) in response to the 2021 *Listen. Take Action to Prevent, Believe and Heal* report, the Government will research and pilot an expansion of restorative justice processes for sexual violence. The ACT Government is committed to supporting the expansion of victim-survivor options to have their needs met in the aftermath of sexual violence, and as a result will engage a researcher to investigate what this could look like and what is happening in other jurisdictions, making recommendations to government about the best ways to do this;
 - (b) the ACT Government has also partnered with the Australian Institute of Criminology to perform a process and outcomes evaluation of the ACT Restorative Justice Scheme's operation with respect to family violence and sexual assault, including quantitative and qualitative methods; and
 - (c) the ACT Attorney-General is commissioning a review of the ACT Restorative Justice Scheme, with terms of reference currently under development, noting that 2024 marks 20 years since the passage of the *Crimes (Restorative Justice) Act 2004*; and
- (3) calls on the ACT Government to:
 - (a) in the work set out above, consider possible reforms including:
 - (i) amending the qualifying criteria to access restorative justice in the ACT;
 - (ii) options for expanding restorative justice services as an alternative pathway to the criminal justice system;
 - (iii) the potential for community-based restorative justice services in the ACT;
 - (iv) options for developing survivor-led and survivor-oriented restorative justice practices for sexual violence; and
 - (v) opportunities for greater awareness and education around access to restorative justice, what it means, and victims' rights in the ACT; and
 - (b) provide an update to the Assembly on progress of this work by the last sitting day of 2023.

Debate ensued.

Question—put and passed.

13 A.C.T. HEALTH WORKFORCE—SUPPORT FOR NURSING AND MIDWIFERY WORKERS

Ms Castley, pursuant to notice, moved—That this Assembly:

- (1) notes that:
 - (a) 2021 ACT Government evaluation of recommendations and outcomes from nurse practitioner reviews between 2002 and 2018 found that almost half of the recommendations had not been met and that advice to the Minister acknowledged that “These barriers are leading to workforce uncertainty and unhealthy workforce growth.”;
 - (b) in 2023, 59 Australian National University (ANU) Medical School graduates commenced with Canberra Health Services (CHS) despite CHS offering 94 spots;
 - (c) the *Medical Training Survey 2022* shows the ACT had the lowest rating of all jurisdictions on every top-level measure of trainee doctors’ feedback about their workplace;
 - (d) nurse-to-patient ratios are still not compliant across both public hospitals;
 - (e) since 2018-19 to 2021-22, there has been a 28 percent increase in work health and safety incidents despite having the *Work Health and Safety Strategy 2018-2022* in place;
 - (f) the Australian Nursing and Midwifery Federation (ANMF) recently said that improvement in CHS’ workplace culture in recent years had been “minute”; and
 - (g) evidence given by the University of Canberra (UC) during the Inquiry into Recovery Plan for Nursing and Midwifery Workers (IRPNMW) stated that “There is a shortage of midwives, and the number of midwifery graduates is insufficient to meet the demand for new graduate positions.”;
- (2) further notes, at a time when CHS’ staff are overstretched, the compulsory acquisition of Calvary Public Hospital is causing more disruption to the ACT’s front-line health workforce, with many staff not expected to transition to CHS, putting even more pressure on already overstretched front-line staff;
- (3) acknowledges that:
 - (a) the ACT Government failed to implement phase 1 of nurse-to-patient ratios by their own deadline of 1 June 2022;
 - (b) the ANMF said during the IRPNMW that they have been calling for a workforce strategy for “6-7 years”;
 - (c) the Australian Medical Association said during an interview on 2CC that they have been calling for changes for junior doctors for “some time now”;
 - (d) the ACT Government in 2021, had still not met recommendations from as early as 2002 to increase nurse practitioners’ scope of practice;
 - (e) less students are choosing to study nursing and midwifery at UC and fewer ANU medical graduates are accepting offers from CHS;

- (f) a “holistic and robust” health workforce strategy has not been delivered because “Current health workforce data in the ACT is inconsistent and insufficient for health planners to have a clear understanding of the current workforce.”; and
 - (g) the ACT Government failed to achieve a 30 percent reduction in musculoskeletal and general incidents as listed in the *Work Health and Safety Strategy 2018-2022*; and
- (4) calls on the ACT Government to:
- (a) acknowledge that it has failed to improve the necessary conditions to attract and retain a health workforce and provide adequate public healthcare services for the Territory; and
 - (b) table by the end of the sitting week:
 - (i) a table tracking the implementation or progress, to date, of all budgetary measures for the health and wellbeing portfolio since 2014; and
 - (ii) the most recent Parliamentary and Governing Agreement and Election Commitment Reporting for the health and wellbeing portfolio.

Mr Davis moved the following amendment: Omit all text after “That this Assembly”, substitute:

- (1) notes that:
- (a) e-Petition 19-22 requested the Assembly to call on the Government to develop a recovery plan for nursing and midwifery workers, including:
 - (i) substantial and beneficial workforce planning;
 - (ii) improvements to workplace safety including ensuring safe staffing and meeting Mandated Minimum Nurse/Midwife-to-Patient Ratios;
 - (iii) practical and effective well-being initiatives; and
 - (iv) real and constructive improvement to workplace culture;
 - (b) e-Petition 19-22 received 2,697 signatures, the largest petition to date in the 10th Assembly;
 - (c) Johnathan Davis MLA sponsored e-Petition 19-22 (Recovery Plan for nursing and midwifery workers), tabled in the Legislative Assembly on 3 August 2022;
 - (d) the Standing Committee on Health and Community Wellbeing resolved on 9 August 2022 to inquire and report on e-Petition 19-22 (Recovery Plan for nursing and midwifery workers);
 - (e) the Standing Committee on Health and Community Wellbeing received 15 submissions to its inquiry into a recovery plan for nursing and midwifery workers and conducted public hearings on 14 June 2023; and

- (f) the Standing Committee on Health and Community Wellbeing is currently deliberating on the evidence it received as part of the inquiry and will present its report to the Assembly in due course;
- (2) further notes:
- (a) in the lead up to the 2020 ACT election, all ACT Greens and ACT Labor candidates signed the Australian Nursing and Midwifery Federation (ANMF) ACT pledge *Nurse and Midwife Ratios Save Lives*, while no Canberra Liberals candidates signed the pledge;
- (b) successive ACT budgets have committed funding to health workforce initiatives including:
- (i) \$50 million to implement phase one of Mandated Minimum Nurse/Midwife-to-Patient Ratios, fully funding 90 full-time equivalent positions;
- (ii) \$16.3 million to expand the allied health workforce;
- (iii) \$8.5 million to deliver better support to Junior Medical Officers;
- (iv) \$3 million to expand the Nurse Practitioner workforce in ACT nurse-led Walk-in Centres;
- (v) \$8.7 million to establish a co-designed Wellbeing and Recovery Fund;
- (vi) \$7.2 million to embed a positive safety culture; and
- (vii) \$8.1 million for health workforce planning and clinical governance;
- (c) the framework for Phase two of ratios is currently being negotiated with the ANMF ACT as part of the Enterprise Agreement process;
- (d) the *ACT Health Workforce Strategy 2023-2032* sets out the Territory-wide approach to building a sustainable health workforce in the ACT and the 2023-2024 Budget includes almost \$2.2 million for strategy implementation; and
- (e) all health workers are highly valued and need to be supported during the current international health workforce shortage;
- (3) further notes:
- (a) on 10 May 2023, the ACT Government announced that it would build a new more than \$1 billion northside hospital on the current Calvary Public Hospital site in Bruce;
- (b) on 31 May 2023 the Legislative Assembly passed the *Health Infrastructure Enabling Act 2023*, enabling the ACT Government to acquire the Calvary Public Hospital land and transition existing Calvary Public Hospital staff and assets to the Territory;
- (c) acquisition of the public hospital will occur on 3 July 2023 with the transition of staff and assets to the Territory occurring up to and following the acquisition;

- (d) on 14 June 2023, following the ACT Supreme Court dismissal of the legal case brought by Calvary Health Care, CEO Martin Bowles said Calvary would comply with the legislation to transition Calvary Public Hospital to Canberra Health Services;
 - (e) by mutual agreement, it was announced on 26 June 2023 that Clare Holland House will transition to Canberra Health Services;
 - (f) as part of the northside hospital early design a freestanding birth centre is being considered; and
 - (g) Ms Jo Clay MLA tabled two petitions and a motion to the Assembly calling for a freestanding birth centre, identifying that the midwife continuity of care model in a freestanding birth centre could help recruit and retain a midwifery workforce;
- (4) calls on the ACT Government to:
- (a) continue engaging in good faith with the Standing Committee on Health and Community Wellbeing’s inquiry into a recovery plan for nursing and midwifery workers; and
 - (b) update the Assembly by the end of the August 2023 sitting week on the progress of the election commitment to implement Mandated Minimum Nurse/Midwife-to-Patient Ratios; and
- (5) calls on Members of the Legislative Assembly to promote supports that are available to staff transitioning from Calvary Health Care to Canberra Health Services.”.

Debate continued.

Question—That the amendment be agreed to—put.

The Assembly voted—

AYES, 15		NOES, 7
Ms Berry	Ms Orr	Mr Cain
Mr Braddock	Dr Paterson	Ms Castley
Ms Burch	Mr Pettersson	Mr Cocks
Ms Cheyne	Mr Rattenbury	Mr Hanson
Ms Clay	Mr Steel	Mrs Kikkert
Ms Davidson	Ms Stephen-Smith	Mr Milligan
Mr Davis	Ms Vassarotti	Mr Parton
Mr Gentleman		

And so it was resolved in the affirmative.

Question—That the motion, as amended, viz:

“That this Assembly:

- (1) notes that:
 - (a) e-Petition 19-22 requested the Assembly to call on the Government to develop a recovery plan for nursing and midwifery workers, including:

- (i) substantial and beneficial workforce planning;
 - (ii) improvements to workplace safety including ensuring safe staffing and meeting Mandated Minimum Nurse/Midwife-to-Patient Ratios;
 - (iii) practical and effective well-being initiatives; and
 - (iv) real and constructive improvement to workplace culture;
- (b) e-Petition 19-22 received 2,697 signatures, the largest petition to date in the 10th Assembly;
 - (c) Johnathan Davis MLA sponsored e-Petition 19-22 (Recovery Plan for nursing and midwifery workers), tabled in the Legislative Assembly on 3 August 2022;
 - (d) the Standing Committee on Health and Community Wellbeing resolved on 9 August 2022 to inquire and report on e-Petition 19-22 (Recovery Plan for nursing and midwifery workers);
 - (e) the Standing Committee on Health and Community Wellbeing received 15 submissions to its inquiry into a recovery plan for nursing and midwifery workers and conducted public hearings on 14 June 2023; and
 - (f) the Standing Committee on Health and Community Wellbeing is currently deliberating on the evidence it received as part of the inquiry and will present its report to the Assembly in due course;
- (2) further notes:
 - (a) in the lead up to the 2020 ACT election, all ACT Greens and ACT Labor candidates signed the Australian Nursing and Midwifery Federation (ANMF) ACT pledge *Nurse and Midwife Ratios Save Lives*, while no Canberra Liberals candidates signed the pledge;
 - (b) successive ACT budgets have committed funding to health workforce initiatives including:
 - (i) \$50 million to implement phase one of Mandated Minimum Nurse/Midwife-to-Patient Ratios, fully funding 90 full-time equivalent positions;
 - (ii) \$16.3 million to expand the allied health workforce;
 - (iii) \$8.5 million to deliver better support to Junior Medical Officers;
 - (iv) \$3 million to expand the Nurse Practitioner workforce in ACT nurse-led Walk-in Centres;
 - (v) \$8.7 million to establish a co-designed Wellbeing and Recovery Fund;
 - (vi) \$7.2 million to embed a positive safety culture; and
 - (vii) \$8.1 million for health workforce planning and clinical governance;
 - (c) the framework for Phase two of ratios is currently being negotiated with the ANMF ACT as part of the Enterprise Agreement process;

- (d) the *ACT Health Workforce Strategy 2023-2032* sets out the Territory-wide approach to building a sustainable health workforce in the ACT and the 2023-2024 Budget includes almost \$2.2 million for strategy implementation; and
 - (e) all health workers are highly valued and need to be supported during the current international health workforce shortage;
- (3) further notes:
- (a) on 10 May 2023, the ACT Government announced that it would build a new more than \$1 billion northside hospital on the current Calvary Public Hospital site in Bruce;
 - (b) on 31 May 2023 the Legislative Assembly passed the *Health Infrastructure Enabling Act 2023*, enabling the ACT Government to acquire the Calvary Public Hospital land and transition existing Calvary Public Hospital staff and assets to the Territory;
 - (c) acquisition of the public hospital will occur on 3 July 2023 with the transition of staff and assets to the Territory occurring up to and following the acquisition;
 - (d) on 14 June 2023, following the ACT Supreme Court dismissal of the legal case brought by Calvary Health Care, CEO Martin Bowles said Calvary would comply with the legislation to transition Calvary Public Hospital to Canberra Health Services;
 - (e) by mutual agreement, it was announced on 26 June 2023 that Clare Holland House will transition to Canberra Health Services;
 - (f) as part of the northside hospital early design a freestanding birth centre is being considered; and
 - (g) Ms Jo Clay MLA tabled two petitions and a motion to the Assembly calling for a freestanding birth centre, identifying that the midwife continuity of care model in a freestanding birth centre could help recruit and retain a midwifery workforce;
- (4) calls on the ACT Government to:
- (a) continue engaging in good faith with the Standing Committee on Health and Community Wellbeing's inquiry into a recovery plan for nursing and midwifery workers; and
 - (b) update the Assembly by the end of the August 2023 sitting week on the progress of the election commitment to implement Mandated Minimum Nurse/Midwife-to-Patient Ratios; and
- (5) calls on Members of the Legislative Assembly to promote supports that are available to staff transitioning from Calvary Health Care to Canberra Health Services."—

be agreed to—put and passed.

14 ADJOURNMENT

Mr Gentleman (Manager of Government Business) moved—That the Assembly do now adjourn.

Debate ensued.

Question—put and passed.

And then the Assembly, at 4.53 pm, adjourned until tomorrow at 10 am.

MEMBERS' ATTENDANCE: All Members were present at some time during the sitting, except Ms Lawder* and Ms Lee*.

*on leave.

Tom Duncan
Clerk of the Legislative Assembly

SCHEDULES OF AMENDMENTS

Schedule 1

GAMING MACHINE (CLUB REFUGE) AMENDMENT BILL 2022

Amendments circulated by the Minister for Gaming

1

Long title—

after

Gaming Machine Regulation 2004

insert

, and for other purposes

2

Clause 3, proposed new note

Page 2, line 16—

insert

Note This Act also amends the *Gambling and Racing Control (Code of Practice) Regulation 2002* (see sch 1).

3

Proposed new schedule 1

Page 5, line 20—

insert

Schedule 1 Gambling and Racing Control (Code of Practice) Regulation 2002— Consequential amendments

(see s 3)

[1.1] Schedule 1, new part 1.5

insert

Part 1.5 Club licensee obligations—club refuge declarations

1.32 Application—pt 1.5

This part applies to a club licensee if a club refuge declaration is in force for the licensee's club.

1.33 Meaning of *club refuge declaration*—pt 1.5

In this part:

club refuge declaration—see the *Gaming Machine Act 2004*, section 166B (1).

1.34 Club refuge declaration—refuge area

- (1) The club licensee must make an area in the club (a *refuge area*) available to a person who accesses the club as a refuge.
- (2) The refuge area must be separate from the gaming area.
- (3) The club licensee must not serve alcohol in the refuge area.

1.35 Club refuge declaration—information about emergencies and refuges

- (1) If the emergency services commissioner gives information to the community under the *Emergencies Act 2004*, section 149B about an emergency to which the club refuge declaration relates, the club licensee must make that information available to people who access the club as a refuge.
- (2) If the director-general for an administrative unit gives information to the club licensee about other places that may be accessed as a refuge while the club refuge declaration is in force for the licensee's club, the club licensee must make that information available to people who access the club as a refuge.

1.36 Club refuge declaration—gambling contact officers

The club licensee must ensure that a gambling contact officer for the club is present in the club.

1.37 Club refuge declaration—direct marketing

The club licensee must ensure a person accessing the club as a refuge does not receive direct marketing about club membership.

[1.2] Dictionary, note 1

insert

- emergency services commissioner

[1.3] Dictionary, note 2

insert

- club licensee

[1.4] Dictionary, new definition of *club refuge declaration*

insert

club refuge declaration, for schedule 1, part 1.5 (Club licensee obligations—club refuge declarations)—see the *Gaming Machine Act 2004*, section 166B (1).

Schedule 2**MOTOR ACCIDENT INJURIES AMENDMENT BILL 2023**

Amendments circulated by the Special Minister of State

1**Clause 2****Page 2, line 3—***omit clause 2, substitute***2****Commencement**

- (1) This Act (other than section 11A) commences on the 7th day after its notification day.

Note The naming and commencement provisions automatically commence on the notification day (see Legislation Act, s 75 (1)).

- (2) Section 11A commences on the later of—
- (a) the 7th day after this Act’s notification day; and
 - (b) the commencement of the *Road Safety Legislation Amendment Act 2023*, section 17.

2**Proposed new clause 11A****Page 4, line 6—***insert***11A****Section 48 (7), definition of *serious offence*, paragraph (c) (i)***substitute*

- (i) section 5A (Races, attempts on speed records, speed trials etc), if the offence is an aggravated offence; or
- (ia) section 7 (Furious, reckless or dangerous driving), if the offence is an aggravated offence; or

3**Clause 12****Page 4, line 7—***omit clause 12, substitute***12****Section 50***substitute***50****Entitlement limited—workers compensation claimant**

- (1) This section applies if a person—

- (a) is injured in a motor accident; and
 - (b) is entitled to defined benefits; and
 - (c) makes a claim for compensation under a workers compensation scheme in relation to the injury.
- (2) A person's entitlement to relevant defined benefits ends on the day the person's claim for workers compensation is—
- (a) accepted; or
 - (b) otherwise settled in accordance with the workers compensation scheme, including on a without prejudice basis.

Example—par (b)

a licensed insurer under the *Workers Compensation Act 1951* settles a claim with the claimant by agreement to make a payment to the claimant without accepting liability for the claimant's injury (see that Act, s 133)

- (3) However, the person's entitlement to relevant defined benefits is revived if the person's claim for workers compensation is—
- (a) withdrawn within 13 weeks after the date of the motor accident; or
 - (b) rejected.

Note See also the withdrawal requirements under s 73 (4).

- (4) Relevant defined benefits are not payable in relation to any benefits paid and not recovered under the workers compensation scheme before the claim was withdrawn or rejected.
- (5) In this section:

relevant defined benefits means the following:

- (a) income replacement benefits;
- (b) treatment and care benefits;
- (c) quality of life benefits.

4

Clauses 17 and 18
Page 5, line 13—

omit clauses 17 and 18, substitute

17

Section 73

substitute

73

Application for defined benefits—notification of claim under workers compensation scheme

- (1) This section applies if—
- (a) an application for defined benefits (the *defined benefits application*) is made under this part—

- (i) by a person injured in a motor accident; or
 - (ii) in relation to the injured person; and
- (b) a claim for compensation under a workers compensation scheme (the *workers compensation claim*) is made in relation to the injury.

Note There is no requirement for both an application for defined benefits and a claim for workers compensation to be made in relation to a motor accident.

- (2) The claimant for the workers compensation claim must give the relevant insurer written notice about the following:
- (a) that the workers compensation claim has been made;
 - (b) whether liability for the workers compensation claim has been accepted or rejected;
 - (c) any amounts paid to or on behalf of the claimant under the workers compensation claim.
- (3) The notice must be given to the relevant insurer—
- (a) if the workers compensation claim is made before the defined benefits application—when the defined benefits application is made; or
 - (b) if the workers compensation claim is made after the defined benefits application—within 3 business days after the workers compensation claim is made.
- (4) However, if the person withdraws the workers compensation claim within 13 weeks after the date of the motor accident, the person must give the relevant insurer for the motor accident written notice of the withdrawal—
- (a) if the workers compensation claim is withdrawn before the defined benefits application is made—when the defined benefits application is made; or
 - (b) if the workers compensation claim is withdrawn after the defined benefits application is made—within 3 business days after the workers compensation claim is withdrawn.
- (5) If a relevant insurer receives a notice under subsection (2) or (4), the relevant insurer may get information about the workers compensation claim from the insurer for the workers compensation claim.

Note A person's entitlement to certain defined benefits ends on the day a workers compensation claim is accepted, however may be revived if the person's workers compensation claim is withdrawn within 13 weeks after the date of the motor accident or if the claim is rejected (see s 50 (3)).

5

Proposed new clause 20A

Page 6, line 28—

insert

**20A Who is entitled to treatment and care benefits?
Section 112 (2) (e)**

omit

applicant

substitute

claimant

6

Proposed new clause 23A

Page 8, line 11—

insert

**23A Who is entitled to quality of life benefits?
Section 132 (2) (g)**

omit

applicant

substitute

claimant

7

Proposed new clause 64A

Page 23, line 11—

insert

64A Section 238

substitute

238 Motor accident claim—notification of claim made under workers compensation scheme

- (1) This section applies if—
 - (a) a claimant makes a motor accident claim in relation to a motor accident; and
 - (b) the claimant has made a claim for compensation under a workers compensation scheme (the *workers compensation claim*) in relation to personal injury or death caused by the motor accident.
- (2) The claimant must, at the time of making a motor accident claim, give the insurer for the motor accident claim notice that the workers compensation claim has been made.

- (3) The claimant must give the insurer for the motor accident claim written notice about the following:
- (a) the name and address of the insurer for the workers compensation claim;
 - (b) whether liability for the workers compensation claim has been accepted or rejected;
 - (c) any amounts paid to or on behalf of the claimant under the workers compensation claim.
- (4) If the insurer for the motor accident claim receives a notice under subsection (3), the insurer may get information about the workers compensation claim from the insurer for the workers compensation claim.

8**Proposed new clause 65A**

Page 23, line 24—

*insert***65A Section 239 (1) (d)***omit*

application

substitute

claim

9**Proposed new clauses 66A to 66C**

Page 24, line 12—

*insert***66A Section 239 (4), definition of *successful application for workers compensation benefits****substitute*

successful claim for workers compensation benefits, by an injured person in relation to an injury, means a claim by the person for workers compensation benefits that—

- (a) has been made at least 26 weeks before the date—
 - (i) the person gives a notice of claim to the insurer for the motor accident claim; or
 - (ii) a WPI assessment is carried out on the person; and
- (b) has been—
 - (i) accepted by the insurer for the claim; or

- (ii) otherwise settled with the insurer for the claim in accordance with the workers compensation scheme, including on a without prejudice basis; and

Example—subpar (ii)

a licensed insurer under the *Workers Compensation Act 1951* settles a claim with the claimant by agreement to make a payment to the claimant without accepting liability for the claimant's injury (see that Act, s 133)

- (c) has not been withdrawn by the injured person.

**66B Application—pt 5.3
Section 240 (1) (a) and (2)**

omit

application

substitute

claim

66C Section 240 (3), definition of *successful application for workers compensation benefits*

substitute

successful claim for workers compensation benefits, by an injured person in relation to an injury—see section 239 (4).

**10
Clause 70
Page 25, line 1—**

omit clause 70, substitute

70 New section 241 (4) (ca)

insert

(ca) section 161 (1) (c) (Final offer WPI less than 5%);

**11
Clause 73
Page 25, line 16—**

omit clause 73, substitute

**73 Compliance with certain provisions
New section 365 (h)**

insert

(h) section 412A (Notice of reportable conduct).
