



# ***LAW, JUSTICE AND SAFETY COMMITTEE***

**Members:**

Ms B.G. Stone MP (Chair)  
Mr J.P. Bleijie MP  
Mr A.P. Cripps MP  
Mr S.A. Kilburn MP  
Hon. D.M. Wells MP

## **HEARING INTO ALCOHOL RELATED VIOLENCE**

### **TRANSCRIPT OF PROCEEDINGS**

**FRIDAY, 16 OCTOBER 2009**

**Townsville**

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### Committee met at 8.32 am

**CHAIR:** I declare this hearing for the inquiry into alcohol related violence open. I acknowledge the traditional owners of the land upon which we meet here today and the custodians of the sacred lands of our state. Thank you for your interest and your attendance here today. Before proceeding I would like to introduce the members of the committee present: the Hon. Dean Wells, member for Murrumba; deputy chair, Mr Andrew Cripps, member for Hinchinbrook; Jarrod Bleijie, member for Kawana; and Mr Steve Kilburn, member for Chatsworth. I am Barbara Stone, the chair and member for Springwood.

The Law, Justice and Safety Committee is a statutory committee of the Queensland parliament and, as such, represents the parliament. It is an all-party committee which adopts a non-partisan approach to its inquiries. I know, Mr Savage, that you are aware of the terms of reference that we have received.

**Mr Savage:** Yes.

**CHAIR:** We have advised the public of the inquiry by advertising in the print media and also by writing directly to a number of individuals, organisations and government departments. The committee released an issues paper on 31 August 2009 and invited submissions from the public through advertisement and by writing directly to a large number of stakeholders. We will be considering the submissions, plus any other material such as the reporting today, and providing an interim report to the parliament by 26 November and a full report by 18 March 2010.

I remind everyone, members in particular, to switch off their mobile phones or put them on silent mode. If there is an unlikely event and we need to evacuate, please follow the directions of the staff. I remind people that this is a formal hearing so members of the public cannot interrupt the hearing; they can observe. The committee is not swearing in witnesses, but I do remind witnesses that it is a formal process of the parliament and so we ask you to respect that. Hansard will be making a transcript and therefore I ask that you identify yourself and speak into the microphone and speak clearly and at a reasonable pace.

We will now begin the hearing. I ask Mr Eddie Savage from Murrie Watch Townsville if he would like to give us a statement. Would you like to start with that?

### **SAVAGE, Eddie, Coordinator, Murrie Watch Program, Townsville**

**Mr Savage:** I will just introduce myself. My name is Eddie Savage. I am the coordinator of the Murrie Watch program here in Townsville. We also coordinate the Cell Visitors Program within Townsville—that is within the Townsville watch-houses—and also just recently on Palm Island. Our Murrie Watch program is auspiced through Murri Watch, which is a Brisbane organisation. They got the tender to run the program within the Townsville area. Just as a bit of background on that community patrol program, the community patrol program in Townsville has been in existence for about six to seven years. It first started with CDEP. We had all Indigenous participants working on the program. Once CDEP finished up in Townsville, I think about two to three years ago, it was taken on and just funded by different government organisations. Currently, we are funded by the Department of Communities.

The community patrol program works with the public drunkenness and homeless situation in Townsville. The main job that we are trying to do is make sure that the people who are in the parks who are homeless do not get locked up in the watch-houses, or try to keep them out of harm's way. The main way that we do that is by providing transportation for them to get to a safe place or an identified safe place. The safe places that are mainly preferred are our diversionary centre, which is out at Bohle, which is about 20 kilometres out of town, and also family members' or friends' places that they recognise as being allowed to go to those houses.

With our Cell Visitors Program we go into the watch-houses with clients and just offer any assistance that may be needed for them to get messages out to family members. The main role that we are doing is to give them a bit of peace of mind even though they may be incarcerated there. That way they are not feeling a bit more pressure on them for whatever reason that they are in there.

We have only just currently taken over Palm Island as of, I think, two months ago to coordinate the Cell Visitors Program over there. We are in the very early stages of getting an office lease and that there. Palm Island is a bit different to the Townsville set-up by being a community orientated area. So the process has been a bit slow but, hopefully, working with the Palm Island Council and that there, we will come through and offer a really good service over there.

**CHAIR:** I will open it up to questions. Deputy chair, would you like to start?

**Mr CRIPPS:** Yes, I would like to start. Good morning, Eddie, and thanks for coming this morning to share with us some of your views in terms of the issues that our committee is tackling regarding alcohol fuelled violence. In terms of Murrie Watch's experience in Townsville, the individuals that your program is

giving assistance to on a daily basis, could they be identified as people who are local Townsville residents or are they visitors to the area. Are they itinerant people to the area? Do they have family connections to the area?

**Mr Savage:** We have a bit of both. Most of our clients are here but, depending on circumstances—like, for example, we have had our Townsville All Blacks Carnival, the big rugby league carnival on the weekend—we will still have a big lot of itinerants who have just been left behind or who are still visiting family members but congregate in our park areas. A lot of itinerants come in because of medical reasons and then they get stranded within the area. What normally happens is they have transportation to get home but they end up missing that transportation, whether or not they are visiting family and friends and then just missing it, and then they actually become stranded here and homeless. Hopefully, the other services that are out there can provide that assistance for getting them home. Mostly, yes, we have both types of clients—locals and also itinerants who come in from other areas.

**Mr CRIPPS:** Eddie, my second question relates to Murrie Watch's extension to Palm Island. You may have some difficulty answering my question because of the short time frame that your program has been operating on Palm Island, but have you got any knowledge, from speaking with Palm Islanders, in particular the council, about statistics relating to alcohol fuelled violence on Palm Island or by Palm Islanders on the mainland before and after the alcohol management plans being implemented?

**Mr Savage:** I probably will not be able to speak on any part of that for Palm Island, but just in relation to the Townsville area we have had a great influx of residents from Palm Island come over because of the alcohol management plan. It just seems pretty general, sort of thing, you know, that has come up and then all of a sudden we have got an extra 20 or 30 clients a week visiting and congregating in our parks and using our services. One of the main areas that has caused a bit of problem with is our diversionary centre. There is only a certain amount of beds and when you have an influx of other clients coming into the area, then there is just not enough beds out there. Who actually gets those beds? Are they your local area people or should it be first in, best served? That has been a problem. There has been a big influx of residents from Palm Island since the alcohol management plans were put in place.

**Mr CRIPPS:** Thank you, Eddie. Just to be clear, even though your program, Murrie Watch, has had only a recent introduction to Palm Island, you can give evidence to the committee that the introduction of the alcohol management plans on the island have affected the running of your program anyway because you have experienced an influx of clients coming from the island to the mainland?

**Mr Savage:** Yes, definitely, in Townsville here.

**Mr CRIPPS:** Thank you.

**Mr BLEIJIE:** Thank you, Eddie, for coming. I am Jarrod. I have just a couple of questions. Statistically, how many people per night on average—or per week—do you help get off the streets and get to home and things from the main centre?

**Mr Savage:** Our statistics are monthly. We have about 200 or 220 clients who we give transportation to. At least 60 to 80 per cent of those are to the diversionary centre. The diversionary centre can fit 30 clients in: 15 male and 15 female. On most nights they get up to at least 25 plus, so there are not too many beds. Hopefully, they should be able to show their statistics. We get about 220 transportations per month.

**Mr BLEIJIE:** Is the diversionary centre somewhere where they can cool off? Is that what it is for? Do they spend a night there?

**Mr Savage:** It is only a temporary 24-hour overnight stay. Most of the time it is just to get a bit of shelter. They have a bath, they have a bit of a feed and then they get brought back into town in the morning at nine o'clock.

**Mr BLEIJIE:** My last question is with respect to Murrie Watch and your 220 or so people who you are helping. Is there a process or a program where you are doing something proactively before that to actually stem the alcohol related incidents to reduce the number, the 220, down? Are there any programs or systems?

**Mr Savage:** Yes. Probably one of the programs that we are actually a part of is a case coordination group that meets weekly here in Townsville. With that we have about 14 service providers ranging from Centrelink, housing, alcohol, tobacco and other drugs—ATODS—and homeless outreach teams. Their main job, like ours, is transportation but they are out there to case manage these clients. So, any area of advice that we can give them, maybe even just letting them know where clients actually are or giving them numbers, say, 'Okay, we do have an influx of clients coming from Palm Island'—all that sort of information that we can get to them—hopefully, they can case manage our clients and that way deal with the social issues or related offences that are happening or even the chronic alcohol or drug abuse that they are having. Hopefully within that group—and that is what they specialise in, the case management side of things—they are having an effect. There have been some positives come out of it. A good couple of wins. We have had people who have been put into housing. They have been living in the parks for over 10 years. Even though it may seem an uphill battle we have had a few good positives, good wins sort of thing come out of some of our clients.

**Mr BLEIJIE:** You just mentioned the drug use. We are not specifically looking at drug use in our inquiry but it is something that keeps popping up its head, I guess. In terms of your experience in the Townsville community, is that prevalent as well as the alcohol?

**Mr Savage:** Yes, definitely. Probably that has got to be anywhere. If there is any type of social gathering with alcohol comes drugs and whatever. It has got to be everywhere. I reckon it is just part of it. One goes with the other. You are not going to find too many places that are having alcohol with somebody else not participating in drugs or other stuff.

**Mr BLEIJIE:** Thanks, Eddie.

**CHAIR:** Eddie, in which area in particular do you find your clients? Would you say that Flinders Street East, or what you might call the entertainment precinct area, is where you are finding most of your clients? Or is it public drinking in other places—so, therefore, bottle shops that are supplying alcohol?

**Mr Savage:** Yes.

**CHAIR:** What would you say?

**Mr Savage:** Most of our clients are not in the Flinders Street East area. At least 85 to 90 per cent of our clients come from the park areas, probably not even the bottle shops. They are only just walking to the bottle shops and then they are going to all our park areas. So very little do we have clients from Flinders Street East.

**CHAIR:** Would you say the bottle shops are supplying alcohol to people who are already in a drunken state—they are not showing any duty of care in their supplying of alcohol?

**Mr Savage:** Probably for some of the clients. With our clients, even though I think the bottle shops open 10 or 11 o'clock here, so they are not intoxicated—not as intoxicated when they are purchasing their alcohol. So when they are buying two or three casks, which probably lasts them for the day, they only just need a bit of a top-up for the day so they are not actually going back there at eight or nine o'clock at night because they will be staggering around. By that time, like, they are buying enough grog to support them for the whole day. So when they are going in there they are not intoxicated. The diversionary centre drops them back in town at nine o'clock. They have had a few hours sleep and that and are at their most sort of stable they are going to be.

**CHAIR:** Is the problem that you have nothing to take them to—no programs or no other sort of place after nine o'clock and, obviously, you are just funded for that night service? Is that one of the problems?

**Mr Savage:** Definitely, if they can find something for them to do during the day. Hopefully, that is part of the case management team to provide that assistance. Probably the main thing is where they have that window of opportunity while they are out at the diversionary centre—that our services get out there and have a talk with them there. It is a bit funny, sort of thing. Like, for our clients, some of our criteria is that they have to be intoxicated. Whereas when you work with government agencies, they do not work with any clients who are intoxicated. So there is only that opportunity for them to visit. They come in at nine o'clock. So unless they want to start their work before nine o'clock in the morning, they do not actually get to see them in a state where they actually know what they are saying.

**CHAIR:** That is very interesting, thank you. Mr Kilburn?

**Mr KILBURN:** We are particularly looking at alcohol fuelled violence. I would be interested to hear how much actual violence is involved when you are doing your patrols. How much the drinking in the park leads to violent episodes and the effect that that is having on people?

**Mr Savage:** There is heaps of it—especially, like, there is a lot of domestic violence. Most of the time when we get there the violence is not actually occurring. We have security that is operating around Townsville. But you can see the evidence of violence that has happened: women walking around with busted lips, black eyes, or even the men fighting, you can see all blood all over their shirts and that. Then we will ask them, 'Do you want any assistance? Do you need an ambulance?' Nine times out of 10 they will say no. So, it has probably got to do with if the police are there at the time when the incidents are occurring that is when something can be done. I do not know whether that means putting cameras up around the parks. They have got them in East Street, which has curbed a lot of the violence because all the patrons know that there are cameras watching them so if they are going to have a fight that does give you a little bit of a 'Wait there. There's going to be cameras, even though I can't see police around now.' So whether putting cameras around the park areas where they congregate—there are only about four or five properly identified areas of hot spots that we deal with—I do not think it would take too much to have a camera there. That way the next day when they are viewing them, they can try to deal with some of those violent episodes. The main thing that wants to be in the back of their minds, I reckon, is if they know there is a camera watching them they would hold back on a lot of all the violence that they were doing.

**Mr WELLS:** Eddie, thanks very much for coming to advise us. You have been doing this for quite a considerable period of time, I understand?

**Mr Savage:** Yes, I have, yes.

**Mr WELLS:** I remember you being active in the early nineties; is that correct?

**Mr Savage:** Yes, before the community patrol program started, even with the PLOs. Are you talking about the community patrol?

**Mr WELLS:** Yes.

**Mr Savage:** The actual community patrol, it was CDEP. I am not too sure if it was in the nineties. Was it that far back?

**Mr WELLS:** Anyway, you have been observing these things happening for a long time.

**Mr Savage:** Yes.

**Mr WELLS:** What has changed?

**Mr Savage:** The thing that probably has changed is the consumption of what they are actually drinking. They are not drinking methylated spirits anymore. We hardly find any. I probably have not seen any of that for a long time—you know, a few years.

**Mr WELLS:** So what are they drinking?

**Mr Savage:** Cask wine, spirits, cans of spirits. That probably came about when they had that big push to not sell methylated spirits in the supermarkets because that is what they were consuming. That is a real big thing that has changed that you will notice now. They are chronic alcoholics yet they are sitting down drinking top-shelf spirits. You are thinking if they are only on their pension or only on unemployment how can they still afford to buy cartons of UDL cans, which are \$80 or \$90 a hit. Whereas before you could say, 'They were drinking methylated spirits,' which is very cheap. So you could assume park people drink that, but now when people do look at them and residents outside of Townsville, their family members, they come into the parks and they see them drinking that they say, 'Look, they are having a bit of a social gathering.' It is not triggering off in their brains that these people have an alcohol problem—'How do we deal with it?'—they think they are just gathering and having a good time. But they are actually doing it every day. Family members might come in here once a week and say, 'That's all good,' but if they came in every day and seen them doing exactly the same thing every day, then they would know that there is actually a problem. But that is the main thing. They have changed from methylated spirits.

**Mr WELLS:** Does that lead to a behaviour change? The people who you used to observe on methylated spirits, did they behave differently from the people who you are observing currently on UDL?

**Mr Savage:** No, I think it is still the same. I still think there is domestic violence. If anything, it may have dropped off. That is probably the way domestic violence is perceived now and probably because police can actually take out domestic violence orders now, it does not need to be the perpetrator who takes out the domestic violence order. Before you actually needed the woman to actually put the domestic violence order in place; whereas now police can actually take it upon themselves to take it out.

**Mr WELLS:** For the Murri people who you are dealing with, they are actually better off now because methylated spirits is gone; is that correct?

**Mr Savage:** If you could put it that way. Maybe health wise their stomach is probably not deteriorating as quickly as it was if they were drinking methylated spirits as to wine.

**Mr CRIPPS:** The lesser of two evils, Eddie?

**Mr Savage:** Yes.

**Mr WELLS:** Yes, and their behaviour is not as bad as it was; is that what you are saying? The behaviour under methylated spirits, was that worse than the behaviour under UDL?

**Mr Savage:** I still think it is the same.

**Mr WELLS:** It is the same. So, the kind of violence that you witness mainly is domestic violence?

**Mr Savage:** Domestic violence and assaults upon each other.

**Mr WELLS:** Last weekend in this town there were two blokes fighting it out with broken bottles. You have not been talking to us very much about that kind of thing; you have been talking to us mainly about domestic violence.

**Mr Savage:** You hear around that there is always going to be those stabbings and that, but mainly the sort of thing that we have been dealing with is domestic violence and the physical assaults without using bottles and that. But they do come up. You are always going to hear probably once a month somebody being stabbed and that is in your park areas and that is with bottles—whatever empty bottles that they have.

**Mr WELLS:** Has that changed since the earlier days when you were working with Murrie Watch and on patrol?

**Mr Savage:** There is probably more of them now because before they probably would have had one flagon whereas now there is a carton of bottles. There is more opportunity for 24 bottles to be lying around, whereas before they would have had a big flagon bottle, which is only one. So there is actually more access for empty bottles to be lying around whereas if they were drinking methylated spirits they would only have a little plastic bottle more than likely. That has probably gone up—the actual stabbings and that—only because there is more access to more bottles that are lying around the parks.

**Mr WELLS:** You said that wherever there is one there is the other—wherever there are drugs there is alcohol and wherever there is alcohol there is drugs. Is that pitching it too high?

**Mr Savage:** Yes, I reckon there is.

**Mr WELLS:** You do not know any people with a drinking problem who do not do drugs and you do not know any druggies who do not have a drinking problem; is that right?

**Mr Savage:** Like if somebody is an alcoholic that they only have an alcoholic problem they do not have both?

**Mr WELLS:** No, no, I'm saying it always goes together, like a horse and a carriage; is that right?

**Mr Savage:** Not per person, but if you have got a gathering of 20 or 30 people who are having a beer, or whatever, I would be saying I would be putting at least 85 to 90 per cent chance that a couple of them in there would be participating in drugs.

**Mr WELLS:** Whereas in the nineties there would not be so many participating in drugs, would there?

**Mr Savage:** No, I reckon it would probably be the same but there were different types of drugs. There may have only just been marijuana but now you have amphetamines and that there, which is a bit more sort of easier to hide and to distribute. Whereas before it may have just been marijuana, these days it is a lot more different drugs.

**Mr WELLS:** Have you noticed a change in behaviour correlating with that change in drug of choice?

**Mr Savage:** With marijuana I thought it was more of a—it was supposed to be a—mellowing type of drug, whereas the other drugs now are actually supposed to be hyping yourselves up and actually making your adrenaline rush a bit more. Whereas one drug was supposed to be to bring you down, to calm you down or whatever, and the other is actually to try and bring you up, to make you more alert, more pumped up, as they say.

**Mr WELLS:** That has led to more violence?

**Mr Savage:** I reckon it has, yes.

**CHAIR:** I have another question. You said before you felt security cameras were a way to deal with this issue. I am just wondering what else would you recommend to the committee? If we said to you, 'What do we need to fix this up?', what would you tell us we needed?

**Mr Savage:** In our area more housing, more diversionary centres or cooling-off areas that they could be taken to when they do start arguing out there, whether it is for an hour or two. Whereas now our diversionary centre is only there for an overnight. Both the couples cannot go there. If we have not got a place for them to go, the only other place to go is to the watch-house. For them to go to the watch-house they actually have to do something. So instead of them just verbally arguing that is going to lead to them actually going out and assaulting. I reckon they just should have some more venues for cooling-off periods.

The watch-house is used as the same sort of thing when they hold them in for four hours for public drunkenness or arguing in the street. They still have that cooling-down process of four hours. So I think they should have something for people who are homeless or itinerants who are in our park areas to have that venue to actually access.

**Mr CRIPPS:** As was alerted to by the member for Murrumba, Dean Wells, earlier, you have been observing these particular types of issues for many years in Townsville. Can I ask you about the emerging behaviour of the next generation of Indigenous people in this area? Are you concerned or encouraged by behaviour in terms of alcohol abuse and alcohol fuelled violence in relation to the generation of young Indigenous Queenslanders coming through in the Townsville region?

**Mr Savage:** Probably a bit of both. It is very daunting, sort of thing, when you see them in the park areas when you are going around and you have got kids who are over the age of 18 and they are actually just visiting their uncles and maybe even their parents who are in there. In that way you can see that revolving door cycle, where they have seen their parents go through, growing up in the parks, maybe even their grandparents. So they think it is socially acceptable to be drinking in the parks on a daily basis. But then you have the next generations who are coming through who are aware—and I do not know whether that is all the ads that are on TV about responsible drinking. So it has been effective. I have noticed probably even within my own family—we have a pretty large family here, you know, with the kids who are coming through—they are a bit more smarter. When they are out at parties they seem to be a bit more aware of the effects of alcohol and what it can lead to. I think the main area that should be looked at is within the schools. It does not even have to be at high school; I think it should start at a lower level than that. Because you will notice that kids who are growing up who are ending up in our parks are actually being affected at a very young age. So do not wait until they are at high school when they access the alcohol because they are around alcohol at a very young age. That education should start at a primary school level and not wait until they are at high school level, even though they are going to the parties. They are actually around alcohol at a very young age.

**Mr CRIPPS:** Does Murrie Watch keep any formal records in relation to the names and particulars of the clients who come into your program?

**Mr Savage:** Yes, we have monthly stats that we send through to the Department of Communities and funding bodies. That is with the names, the areas that we pick them up, areas that we drop them off, the times that we pick them up. We have got all our stats. That gets reported to the Department of Communities monthly.

**Mr CRIPPS:** Eddie, you had a conversation earlier with the earlier for Murrumba, Dean Wells, in relation to the types of alcoholic products that are being purchased by your clients in terms of a movement away in earlier years from the use of methylated spirits to a situation now where I think I heard you list products such as cask wine, UDLs, bottles of spirits; is that correct?

**Mr Savage:** Yes.

**Mr CRIPPS:** Certainly, one of the issues that we have been charged with looking at is the most effective way of dealing with the types of products that are consumed—whether or not we should be using policy tools to try to encourage the consumption of low-alcohol drinks through taxation or regulation in terms of alcohol content of products sold. I suppose my question goes to the conversation that you were having earlier about you being confused at how your clients are affording to purchase these more expensive products. That goes back to management of their income in terms of what you mentioned earlier about people either being on unemployment benefits or on a particular pension. Are you aware of the trial programs that the Queensland government has introduced in Cape York communities in relation to the Family Responsibilities Commission, where people's incomes are regulated by the commission in terms of if they come into contact with the law?

**Mr Savage:** I am not aware of it, but I have heard just little bits. Like, if they have been arrested for alcohol offences and they are not managing their money properly, that somebody is actually managing it for them, making sure that they use it for the right reasons.

**Mr CRIPPS:** There is a range of things. How do you feel about that type of program?

**Mr Savage:** I think just to an extent sort of thing—we do not want to take away, you know, all their rights for dealing with their own moneys. But depending on the responsibilities that they have I reckon it should be that it is justified whether it has to be managed by somebody to make sure that they are paying their rent, that their children have got food in the fridge, all the schooling expenses that come with that are met. They should be the first priorities. If they are not making those correct decisions. But maybe depending on who is actually managing it—maybe not so much government. If they could have somebody else more acceptable to the person whose money it belongs to, whether it be a family member, some type of Indigenous organisation. It just goes to showing them a little bit of onus. Like, 'It is not the government that is against you; we are actually trying to do this for yourself to benefit yourself and your kids or your community.' So whoever is actually dealing with that money may take a lot of the perception out of, 'Okay, the government is running all my money.' But if you have family members that can take that responsibility on, I think it would work a lot better.

**Mr CRIPPS:** The observations that you have made during the course of the morning have been related to the increased cost of purchasing those products. Certainly, you have indicated that in the Murrie Watch program you would keep the particulars of those people—your clients—who continue to come into your program. Certainly, in terms of the trial program that is being undertaken by the Queensland government in those communities in Cape York, there is an independent commission that is involved in managing their affairs. So, in terms of that interaction between the purchasing of these expensive products, which may take up a lot of their income—which is usually, as you indicated, low and fixed if they are on a pension or receiving unemployment benefits—we really have to go to the heart of the problem in terms of them having responsibility for the management of that income vis-a-vis their use of alcohol and their engagement in your program.

**Mr Savage:** I think a lot of that has to do with the case management side of things. The main thing that they have to do for them to be case managed is that they have to actually give consent. Before they give consent they actually do not get any assistance, even though we can see what the problems are and how they should be addressed or the best way to try to address them. Without that consent there is not too much that anybody can do. Either they are going to want that within themselves—to be able to give up drinking or to deal with whatever anger management problems that they have got—until they actually go through court, or maybe give them a court order to say, 'Go through our quitter programs or our drug courts' and that there for them to go and get that assistance to be able to maintain or whatever their alcohol problem. That is probably the one thing that is needed to open their eyes about what they are actually doing. It may not happen in this generation here, but by educating the younger kids who are coming through—I think we may have missed the run with this generation here, but there is a big chance if we do start it off in primary schools that that change will come through in the next 15 to 20 years.

**Mr CRIPPS:** Thank you, Eddie.

**Mr KILBURN:** Eddie, the problem of people drinking in parks, is it just a random park or do they specifically target places that have access to public toilets or things like that? I suppose what I am getting at is, do you think that if you had places where they could feel safe, where there were some sort of amenities, that they would be more likely to go to that place, or is it still going to be, do you think, just random?

**Mr Savage:** I think it probably just random. We have got Happy Valley set up here and you can actually consume alcohol in there. The thing that we have found—because we have asked our clients and I think council is even talking about whether they wanted to build extra dongas or shaded areas for them to consume their alcohol and they were saying they are actually different groups of people. There might be more residents from Palm Island stay in Happy Valley and that means that your local area clients are in

town. As for the random parks that they go to, most of the time they are shifting parks because the police actually move them on. Once they congregate in one area for a certain period of time—you know, so many days—then the police will get phone calls from businesses and that saying, 'Look, we have a group that has been drinking in the parks or across the road from us or even outside our shops for the last week'. So that is why they move from that area to another area. They normally try to get to areas where there are the facilities of public toilets and that. The drop-in centre seems to be an area for a few generations. That was the main congregating area. One thing about that is when family or residents or itinerants come into town, that is the main area that they come and see to find out where their family is around Townsville. It is like a gathering for any residents who come in or who get released from watch-houses or Stuart Prison. They normally end up there.

**Mr KILBURN:** Are you saying that, if people were directed into one spot, it might cause more problems because of interaction between different groups? They are better off being separated?

**Mr Savage:** Yes, I reckon they are better off, because they have their own little communities within their own mob, whether it be from Palm Island, Yarrabah or Cherbourg. I think it would be good if they did have their own, like, wet area, in effect. That is what Happy Valley is, more or less. It is set up to be a wet area where they can consume, whereas the diversionary centre is for those who—you are not allowed alcohol on the premises, but if there was another area where they could, for a long-term period, maybe three months or whatever, have accommodation there but actually be able to consume alcohol there also I think that would work—if they had an area to be able to gather and also an area where they can drink.

**Mr BLEIJIE:** Eddie, getting back to the member for Hinchinbrook's issue about education, I think you touched on the education of the young generation. Murrie Watch and the diversionary centre are very reactionary to the point on the night. You have got your 220 cases or people you are moving through diversionary centres, putting them back at home or with their families and so forth. We are looking at how we stem alcohol related violence and these sorts of issues. I think it gets back to the broader issue of alcohol itself. I have not heard of this Happy Valley that you have just mentioned but if we are engendering a culture where they can just go and drink, what happens when they leave Happy Valley? Do they then go on to the streets and is that where the violence is created because we have put people who are intoxicated back on the streets? I want to take it back a step. How do we stem or curb the alcohol issue itself? Rather than giving them wet areas and Happy Valleys and reactionary measures such as diversionary centres, in your opinion what do we need to do as a society to stop the issue from happening and therefore not have to be so reactionary to these issues?

**Mr Savage:** It still comes back to that educational side of things, making sure that they are aware of the effects of alcohol and the repercussions of being violent while you are affected or just violent itself. I still think it comes back to trying to educate this next generation of young people coming through. It is no use going into our parks here today telling them about the effects of alcohol and telling them that they are damaging their livers and whatever. It has to start soon. They do have sex education and all of that implemented in the curriculum at school.

**Mr BLEIJIE:** If we were to educate the young generation they would certainly, I would feel, be mentored by their family members and if we do not do anything about the family members then the influence on the kids will override the education, I would think.

**Mr Savage:** Indigenous kids are growing up with that anyway. There is alcohol around them from day one. When kids are born they have the biggest parties. Then they ask when they are coming over and then they have a house warming party for the baby coming over. I suppose it is socially acceptable for that type of atmosphere. As they are growing up it is not a big thing for kids to be watching TV and then having a big party outside and then a big fight happening. They probably would not even jump off their seat to go out and have a look because it is just normal. I think once they are at school, maybe for Indigenous kids because they are around that atmosphere 24/7, there should be that education that they are doing harm to themselves by drinking daily and it is wrong to be violent and to abuse other people. Sometimes that is even happening in our parks. Somebody will get hit and they will say that it is okay as long as you have not been hurt badly—you have not been knocked out so it is not too bad that you have been hit a few times. I still think that the education part of it would be really beneficial.

**Mr BLEIJIE:** Thanks, Eddie, that is all the questions I have.

**CHAIR:** If there are no further questions, thank you, Eddie, for your information and being here today. I would just like to declare this part of the hearing over. We will have a few minutes to change witnesses. To the other observers in the room, we are running on time so I will go straight into the next witness. However, at 10 am we will be having a break and we are happy to talk to you then. Thank you.

**Proceedings suspended from 9.14 am to 9.15 am**

**CONNORS, Brian, Inspector, Townsville Police District, Queensland Police Service**

**CHAIR:** Before I proceed I just want to introduce the members of the committee to you. We have the Deputy Chair, Mr Andrew Cripps, the member for Hinchinbrook; Mr Jarrod Bleijie, the member for Kawana; Mr Steve Kilburn, the member for Chatsworth; and the Hon. Dean Wells, the member for Murrumba. I am Barbara Stone, the member for Springwood and Chair of the committee.

We are a statutory committee of the Parliament of Queensland and as such represent the parliament. It is an all-party committee which adopts a non-partisan approach to its inquiries. You would have seen a discussion paper which has our terms of reference in it. It is on the desk there for you as well. We released the issues paper on 31 August 2009 and have invited submissions from the public through advertisement and by writing directly to a large number of stakeholders. We will be considering the submissions as well as other material obtained in today's hearing and then providing an interim report to the parliament by 26 November and a full report by 18 March 2010.

I remind those people who have just joined us to put their mobile phones off or on silent. If in the unlikely event we need to evacuate I ask you to please follow the directions of the staff. I remind members of the public here that they are here to observe the hearing and may not interrupt.

Inspector, I just wanted to ask you how you would feel if the media turned up? Would you like the hearings to be with or without the media?

**Insp. Connors:** I would be guided by you, Madam Chair.

**CHAIR:** If the media turn up we will probably just allow recording and let them go through with it. The committee is not swearing in witnesses. I remind all witnesses that these hearings are a formal process of the parliament and as such we ask you to respect that. I also remind you that Hansard will be taking a transcript of proceedings so I ask that you talk into your microphone, identify yourself and speak at a clear and reasonable pace for them. Now, I would like to begin. I see the submission that you have put in front of us so I will get you to start.

**Insp. Connors:** Thank you. My name is Inspector Brian Connors from the Townsville Police District. I have been a police officer and attached to the Queensland Police Service since 1986. This morning I will provide you the Townsville police submission to the parliamentary inquiry into alcohol related violence in Queensland. My intention is to basically go through this document that I have provided you a copy with and then answer any questions at the conclusion or during the process, if that is what you wish to do.

The Townsville area is obviously one of Queensland's largest regional centres, with the majority of the population principally spread from the Burdekin to Hinchinbrook and west to Charters Towers. Whilst that population is quite spread, the vast majority of people live and work within the Townsville City Council area and, consequently, they focus their recreational activities in that same area. The estimated resident population for the Townsville City Council area as of 30 June last year was about 175,000 people, which is an increase over the previous year. That has come from Office of Economic and Statistical Research figures. In terms of the future and future growth, Townsville city is projected to have the largest growth outside South-East Queensland, with an increase of an estimated 105,000 people in the next 25 years, taking us up to 2031. So there is a significant future for the population base in this area.

The consumption of alcohol in the area should be considered to be generally consistent with the levels of other regional centres. However, the Queensland Police Service has not statistically investigated this assertion. The use of alcohol is widely accepted and generally not considered to be of significant concern to the wider community. The 2007 National Drug Strategy reported that only one in 10 Australians aged over 14 thought it was a problem drug or as part of a drug problem; 42 per cent approved of the regular use of alcohol; and a further 33 per cent did not oppose the regular use of alcohol.

In terms of alcohol use in the broader community of Townsville, Townsville police recognise the following issues: the decision to consume alcohol is solely a personal choice; it is recognised that peer pressure may be an issue in the younger age group who come into contact with alcohol; licensed premises are commercial businesses that rely on income generated from volume sales, amongst other things; anyone over the age of 18 years is legally able to purchase alcohol from licensed premises; and anyone over the age of 18 years is legally able to consume alcohol at licensed premises. In terms of harm or effects of alcohol, it is readily recognised that alcohol impairs judgement, slows down reaction times, inhibits coordination and reduces inhibitions.

Townsville has a relatively small conglomeration of licensed premises, with the focal hub being the Flinders Street East entertainment precinct. Whilst acknowledging that there are a variety of other licensed premises, hotels, restaurants and cafes right across the region, the Flinders Street East area is indicative of the habits, concerns and alcohol related problems generally associated with these types of precincts. In terms of trading hours, the Townsville postcode area of 4810 comprises 129 licensed premises. This postcode comprises nine suburbs, only five of which contain these premises. The adjoining postcodes in the metropolitan area of Townsville comprise an additional 50 licensed premises or venues.

In relation to the impact of late opening hours and how they have impacted on the incidence of alcohol related violence, over the past 20 years there has been a significant shift in the trading hours of licensed premises and this change has effectively resulted in a number of things. It has resulted in a greater availability of alcohol, with an increase in the number of hotels, pubs, clubs, restaurants, cafes, Townsville

bottleshops and related premises that sell alcohol on a retail basis; a longer period of each 24-hour day or night cycle—so a longer period of that 24-hour cycle in which alcohol is available to be purchased for consumption; there is local anecdotal evidence suggesting there is a willingness of some people to consume alcohol at private locations before visiting licensed premises or entertainment precincts—that is, they drink elsewhere prior to coming in; there is also anecdotal evidence to suggest there is a desire by some younger people not to go out to these venues until 11 pm, or midnight, or later because they are open and they will be for a number of hours after that time.

In a specific area of Townsville known as the entertainment precinct, Flinders Street East and nearby, in terms of bars, hotels and nightclubs, there are currently eight 5 am traders, three 3 am traders and three 2 am traders. These venues have an accepted maximum occupancy level of around 5,500 patrons. That is them operating at capacity obviously—all of those venues. In the nearby suburbs of the Townsville metropolitan area there are currently eight 2 am traders and there are 31 hotels that trade until midnight.

What has been the impact of the 3 am lockout on the incidence of alcohol related violence? As outlined above, with venues being open until late some patrons often attend after other functions or parties and they have preloaded on alcohol prior to arriving in the entertainment precincts. The late arrival time and the commencement of lockouts at 3 am provides a relatively busy window of time for those people to move about between venues and on the street and then to settle down somewhere, basically after the lockout commences. Whilst there were some studies conducted into the effectiveness of lockouts in 2004, 2006 and 2007, a comprehensive study based on current data would be most beneficial to all current parties to revisit those issues at this point in time.

What other impacts has the 3 am lockout had on patrons, venues and other stakeholders? The greater level of intoxication correlates to an increased chance of an individual becoming an offender or a victim of crime. The effect of alcohol is recognised as lowering judgement and decision making and, as a result, people commit street offences and nuisance offences because their behaviour is altered and they use poor judgement and make poor decisions, essentially. Licensed venues employ security staff to deal with patrons within their premises and these staff generally refuse entry to persons who are intoxicated or who are demonstrating poor behaviour. This period requires operators to show a greater diligence with patrons attempting to enter venues.

Dispersal of the crowds within an entertainment precinct relies heavily on public transport. The availability of public transport during peak times is problematic. However, the use of a line monitor and security staff should be considered essential in these types of precincts for user safety. The conditions of the lockout are subject to enforcement and policing attention—that is, by the Police Service and obviously by the Office of Liquor and Gaming.

What changes, if any, should be made to opening hours and alcohol service strategies within those hours to reduce alcohol related violence? I would like to point out that the Townsville police has a responsibility to the community to ensure their safety and security and to act in a way that is consistent with community standards. Licensed traders have a legislative responsibility to ensure responsible service of alcohol—RSA—practices are employed. Any reduction in trading hours has a potential to alter patron behaviour and see a drift back to patterns where people visited these precincts much earlier in the evening. The late trading times also have a spillover type effect, where some people remain intoxicated well into that day. The consequences of this can be people affected by alcohol driving later in the day while still over the legal limit, people going to work whilst affected by alcohol and also fatigue related issues.

In terms of the flow-on issues for emergency service workers, police and front-line health workers, what is the impact of alcohol related violence on police and other emergency service workers and health workers? Obviously, police officers and other emergency services personnel are routinely subjected to physical assaults and verbal abuse by persons who are affected by alcohol—I would say drugs there also, obviously. In addition, emergency services personnel assist persons who have overindulged and who, as a result, are exposed to bodily fluids such as vomit, blood, urine, faeces, et cetera. That is not limited to entertainment precincts, that can happen anywhere—private venues, public places—but it is more prevalent in these areas simply because of the higher volume or the larger number of people frequenting these areas. Ambulance and Queensland Health staff are obviously also directly impacted by alcohol related violence in that they are committed to providing a service to members of the community directly affected by violence. It is often the case, however, that medical or first-aid assistance is provided with varying levels of resistance from the obviously injured person. A lot of times people who are injured are actually fighting and abusive and aggressive and do not want to be cared for or attended to, et cetera.

Historically, entertainment precincts have a high demand for police and emergency services in terms of calls for service. The challenge for policing is to continually analyse those calls for service, observe the trends and identify the patterns and the patron levels in those areas to best deploy the available resources for maximum efficiency. The QPS employs an intelligence-driven policing model for entertainment precincts. We deploy our staff at the peak times to meet those calls for service and the needs in those areas. A significant amount of Police Service time is expended providing a policing response in entertainment precincts and often the level of demand has a direct impact on the delivery of services in other areas.

How can the negative impacts on these workers be reduced? The impacts can potentially be reduced by a reduction of the trading hours of licensed premises. This provides a reduction of times when historically alcohol related violence occurs. An accompanying and complementary legislative amendment to existing state laws of prohibition of convicted offenders of acts of violence, drink-driving and public disorder offenders from licensed premises from anywhere in the state may prove a deterrent for these matters. This is an extension of the strategies being used by some liquor accord areas, where patrons are banned from a specific venue or a specific area by participating members of the accord, but that has scope for escalation or expansion on a much wider scale.

In terms of education campaigns and their role in cultivating effective social change in terms of community attitudes to alcohol consumption, how do we change the drinking culture and create a culture of individual responsibility? That is not just an issue for alcohol consumption; that is an issue across many areas of the community. Drug and Alcohol Services South Australia outlines that over 70 per cent of prisoners convicted of violent assaults have drunk alcohol before committing the offence and more than 40 per cent of domestic violence incidents involve alcohol. The QPS's responsibilities in regard to alcohol use in the community have a diverse focus. These responsibilities start at one end with enforcement, diversion, de-escalation and, obviously, education programs.

What education programs or campaigns are currently in place? Obviously, Walk Away Cool Down is one that is new to Townsville. It has only been initiated in the last month or so. We have quite a bit of interest from licensed venues to participate in that campaign and the One Punch Can Kill campaign, obviously the Drink Rite Program, the Party Safe initiative and the participation in liquor accords and the contribution to community debate in forums like this, licensed traders' meetings, community safety meetings, et cetera. How effective have they been? They are obviously whole-of-service initiatives generally and analysis would be conducted at the state level. How could they be improved? The American Center for Disease Control defines alcohol abuse as a pattern of drinking that results in harm to a person's health, relationships or ability to work. The CDC's manifestations of alcohol abuse include failure to fulfil major responsibilities at work, school or home; drinking in dangerous situations, such as drinking while driving or operating machinery; legal problems related to alcohol, such as being arrested for drinking while driving or for physically hurting someone while drunk; continued drinking despite relationship problems; or long-term alcohol abuse turning into dependence. Education campaigns need to focus on the issues associated with casual drinking, social drinking and binge drinking. That is the so-called causal factors. They also need to provide a consistent message delivered to the community across all levels of government and non-government agencies. In terms of those dot points there from the CDC, the critical ones for the Queensland Police Service would be dot point 2, drinking in dangerous situations—that is, drinking while driving—and, obviously, the legal issues associated with people being arrested for drinking while driving or physically hurting somebody, that is, the involvement in violence.

In terms of the role of parents in influencing community attitudes towards alcohol consumption, how are parents influencing the attitudes of young Queenslanders? As I have outlined above, the majority of the adult population does not consider the use of alcohol to be a significant cause for concern. Evidence from medical authorities and health departments in particular clearly show that excessive alcohol use causes significant problems to the wider community and the risk to persons who drink is significant. Consistent with the scope of this committee, obviously, is harm reduction, harm minimisation. Drug and Alcohol Services South Australia provides details that alcohol is responsible for around 30 per cent of road accidents, 44 per cent of fire injuries, 34 per cent of falls and drownings, 16 per cent of child abuse, 12 per cent of suicides and 10 per cent of industrial accidents. There is a flowover, obviously, in the incidents that police deal with. The majority of alcohol related violence would appear in that falls and drownings category. These levels need to be further publicised so that people can make far more informed choices. Parents need to recognise the change in attitudes towards the consumption of alcohol and the education process itself.

How can parents be assisted in instilling responsible attitudes to drinking? That is not specifically an area that the Townsville police district has any expertise in or can provide advice to the committee on. What is the economic cost? We all know that there are significant economic costs associated with it. There are a number of papers and studies that are freely available that have been conducted across Australia and other states that directly outline the estimated costs in terms of lost time, productivity, injuries and recovery from alcohol related misadventures or incidents. Based on that fact, it is not a matter the Townsville police could provide any expertise to the committee on. The same goes for reducing that cost or impact. Obviously, logically speaking, the reduction in those incidents that lead on to that lost time, lost productivity and those costs, is the ultimate aim and, obviously, is how the costs can be reduced overall.

**CHAIR:** Thank you very much for that comprehensive submission that you have given us. I have 20 million questions for you right now, but I will be fair to the committee and allow us all to have the opportunity to ask you some questions. I was interested in what you were saying about the trading hours. I am thinking that if I go out from 11 o'clock until five o'clock it is the same as if I went out from six o'clock until midnight or one o'clock. Are you saying that you believe the incidence of drinking before you go out may decrease and, therefore, the alcohol consumption would decrease in reality?

**Insp. Connors:** Without having done any in-depth analysis and from only talking to people on the street and people who we deal with routinely, there is this perception that people go to a party or go to a function or do whatever prior to going out on the town. If that was not an option, perhaps it may be the case

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that people would go out on the town in the first place rather than going somewhere else beforehand and then going on the town. Whilst it could be understood that that may be the case, I have nothing to support that other than the fact that it is an option now that you can do your late-night shopping, go to a party, go to a movie or whatever and then go out at midnight or 1 am because there is still four or five hours left of trade—that you could have your night, as you yourself said, that you could have had from seven until midnight. It would require further analysis, obviously, to take that a step further, but it does make sense if it is considered logically.

**CHAIR:** What numbers of people are we talking about who would come into the Flinders Street East precinct on a Friday or a Saturday night?

**Insp. Connors:** It would vary. We could talk probably fewer than a thousand on some nights, but generally quite often up to or around capacity. There is no hard and fast rule. It is difficult with precincts like this to keep a head count, if you like, because the venues may be full which, as I said, is around 5,500, but you could have 2,000 more out on the street or you could have 50 more out on the street waiting to get in but cannot because the venues are full, technically speaking.

**CHAIR:** One of the issues that we hear about is drugs. Some will say it is the drugs and not the alcohol and others will say it is the alcohol and not the drugs. When a serious offence happens, do you do both alcohol testing and drug testing? Do the police do drug testing?

**Insp. Connors:** It would depend on the nature of the offence. Routinely and generally speaking, no. Drug testing is, generally speaking, for drug-driving under the drug-driving legislation. But specifically for other offences, no. We ask the questions. Whether the people who we deal with are open and honest and would admit to drug consumption is another story, but we certainly ask those questions. I for one would not tell the committee that drugs are not a component part of it. I am simply saying that the greatest volume of issues for us are alcohol related simply because of the fact that the majority of people are going there to consume alcohol and you have a majority of venues selling alcohol.

**CHAIR:** Of the people who have been arrested for alcohol related violence—I am not too sure how much of a correct answer you would give on this one, either—how much of the alcohol consumed has been from a bottle shop and being fuelled up on that first before going to the licensees?

**Insp. Connors:** Sorry, I do not quite understand.

**CHAIR:** We are talking about people going to parties and so forth getting fuelled up before they go out.

**Insp. Connors:** Yes.

**CHAIR:** How much of it is just under-age people going to bottleshops? Are you hearing more and more people saying that they have been to the bottle shop, got drunk first, then went out and had the fight or whatever? Are bottleshops allowing very easy access to alcohol?

**Insp. Connors:** I guess, without singling out bottleshops or off-site premises that sell alcohol—

**CHAIR:** Takeaways.

**Insp. Connors:** Takeaways, I would say that it probably is a factor, but in terms of us recording it and the people who we deal with, in places like the entertainment precincts we routinely record where was the last place they had a drink. So if it is someone who has come into the area intoxicated and has not been to a venue they would be telling us that they had a drink at a party or a drink at home. So you would be able to, I suppose, establish some link to a drink outside those venues or those precincts. In other cases, people may come in, may go to a venue and one drink may be enough to push them over the edge. It is difficult to quantify. It probably is an issue but it would require further investigation to take you down that path. As I said, I am not simply here to say that the licensed venues are trading inappropriately or doing anything wrong; I am simply here to say that alcohol in those precincts is a problem. People who drink alcohol in those precincts do cause problems. The assertion whether that alcohol has come from those venues or it has come from elsewhere is a problem for us and it is a problem that we are endeavouring to deal with through the process of collecting statistics, doing liquor incident reporting and recording the place of last drink and 'Where have you been tonight?' and that sort of thing—gathering intelligence to try to identify trends.

**CHAIR:** You do not just ask the question of your last drink? That is just one question?

**Insp. Connors:** That is just one in a series—'Where have you been tonight?'—routine questioning, but it depends on the offence obviously.

**CHAIR:** Yes, because I was going to say if you are only getting where the last drink was had, you are not getting the full intelligence.

**Insp. Connors:** No.

**CHAIR:** Along the lines of support agencies helping you at night, we just heard from Murrie Watch. Are there services that you can call on if you want to cool things down or just want someone to come in and help? For example, are Child Safety available for the under-age drinking incidents and so forth? What other services are there to support you at those hours when this escalates?

**Insp. Connors:** Generally, outside of normal business hours in the 24/7 environment I would have to say that the primary responders are the police. We are there and we are called upon, we are accessible, so we take action and we become involved. In terms of tapping into expertise and support services from other departments, we certainly have those contacts. How successful they are I am not in a position to advise the committee. But generally it is the police. Generally, if we can resolve a situation or assist in terms of a diversion or a placement we take that action. If we cannot or it requires a level of expertise, then we would use our contact network to tap into departments and other agencies for support.

**CHAIR:** That would not be possible from 12 to 5 am.

**Insp. Connors:** I am not saying it is not possible. We would have after-hours contacts. I am just saying I cannot tell you how successful those contacts are in the historical context.

**CHAIR:** Thank you. Deputy Chair?

**Mr CRIPPS:** Good morning, Inspector, and thanks for making yourself available this morning. My question relates firstly to opening hours or trading hours. In your submission the Townsville police note that local anecdotal evidence suggests that there is a willingness of some people to consume alcohol at private locations before visiting licensed premises or entertainment precincts and that there is anecdotal evidence to suggest that younger Queenslanders do not go out until 11 to midnight because they can be out in open licensed premises until early in the morning. But then later on in your submission on page 5 it says that the impacts can potentially be reduced by a reduction in the trading hours of licensed premises and that this provides a reduction of times when historically alcohol related violence occurs. Townsville police is obviously forming a view about trading hours, because it is keeping some sort of record in terms of when alcohol related violence is occurring. Why would patrons of licensed premises—I think on page 3 you refer to it as preloading—not simply preload earlier?

**Insp. Connors:** They may. I am simply making the point that it has become acceptable now over the last 20 years that people go out later and drink until later. If that trend was reversed and reduced back there would still be that same amount of time available, but you have people with work commitments, social commitments, probably a lot of other optional activities that they choose to engage in that they would not engage in if there was no other option, I guess is what I am saying. I am simply putting forward the suggestion that it may be a way. If you reduce those hours, you still keep that window of opportunity open, I suppose, for people to access those venues or access entertainment, meals or gaming, or whatever. But it also scales back the time of impacting across two days—impacting the early hours of the morning, taking away all of the issues about an alcohol lockout at 3 am. All of that is therefore dissipated, I suppose, if we scale that back. I am simply saying it is a matter worth considering, that is all.

**Mr CRIPPS:** Is it quite possible that if they preload earlier, say between three o'clock and six o'clock before they are going out at six o'clock if licensed premises in the future may close at midnight—if we took on board the suggestion to reduce trading hours—say if patrons eventually start preloading earlier, do you have any historical information or data indicating that alcohol related violence previously occurred between 9 pm and midnight when licensed premises closed at midnight?

**Insp. Connors:** No, I do not, but in saying that I have not done any in-depth analysis personally to be able to support that assertion. I see your point about the preloading issue. I am simply saying that, if it was scaled back, I presume the majority of the population that have other commitments or have other things on during daytime will not have the ability to start drinking at one o'clock or two o'clock because they will have other commitments. I acknowledge your point that there is that window of opportunity and it does reduce it back and it may have an impact on people's lives, I am simply saying it still provides that window for people to visit venues and for venues to trade, but it reduces it back and probably knocks out some of the optional issues. If people are really committed to going it might knock out some of those optional issues. I am simply saying I would submit that it would need further examination, but it is an option.

**Mr CRIPPS:** The assertion that there is this preloading, which I agree occurs, I think might relate a lot to some policy initiatives of governments, particularly in relation to taxation arrangements on certain types of products. In your submission you identify in particular younger Queenslanders as people who might participate in preloading activities and the types of products they may choose to purchase when they are out at a licensed premises. There have been some public policy initiatives by the federal government to tax particular types of products aimed at limiting alcohol intake by certain demographics.

**Insp. Connors:** Yes.

**Mr CRIPPS:** Leaving that to one side, I want to talk about the part of your submission which dealt with the impact on front-line emergency service workers. I note that you strayed from your text just for one moment to mention drugs. Drugs were discussed when you were talking with the chair a moment ago. I want to talk about the relationship between the consumption of alcohol products and the use of drugs in that entertainment precinct or in licensed premises generally speaking. It is difficult to know, because of the reasons you outlined earlier in that you do not do any specific testing for drugs unless it is in relation to drug-driving. Does the Townsville police have any basic data or information that would indicate the relative prevalence of offences relating to drug use as opposed to alcohol use where they have not been combined, because in many cases the use of alcohol and drugs has been combined?

**Insp. Connors:** I am not aware of any specific data along those lines, but I can say as part of our approach to policing this entertainment precinct, and not just Flinders Street East but the Thuringowa area, that we have done a number of operations where we have used plain-clothes or covert police to observe Townsville

patrons and patron behaviour in an effort to identify persons taking illegal drugs or supplying illegal drugs. We have also progressed on and done operations where we have taken drug detector dogs under the relevant legislation and walked the street and gone through venues to detect persons in possession of drugs. Whilst we have detected some people, we certainly have not detected a lot of people. I am not saying that that is an indication generally that there is not a lot of drugs; I am simply saying that on those occasions where we ran those operations that we did not detect a lot of drugs. But I can say those operations were not widely publicised. They were done with no notice. It was not a case of anyone becoming aware or being advised that it was going to happen. They were done cold so the opportunity or the chance to uncover a significant amount was there, but it did not pan out.

But again I do not say that drugs are not a contributing factor; I am simply saying that the majority of people who are going there are going there to consume alcohol, have a lot greater access to alcohol, are more open to discussing their alcohol use and are not open to discussing their drug use.

**Mr CRIPPS:** That might be a reflection of the fact that consumption of illicit drugs is illegal and consumption of alcohol on a licensed premises is not.

**Insp. Connors:** But in saying that, when we deal with these offenders who are generally affected by alcohol they quite often have no inhibition. They do not hold back—in some cases, not all.

**Mr CRIPPS:** I know it is not part of your submission, Inspector, but are you able to offer an opinion about whether or not Queensland police are resourced enough to do the type of operation that you just talked about—that snap operation where a licensed premises was attended by police to try to focus on drug use?

**Insp. Connors:** I guess the answer, obviously, is that everyone would like more resources. The simple fact of the matter is that everyone could do with more resources. We do the best we can with what we have got. I think we have adequate resources to deal with it. The difficulty is that, as the licensed precincts become more popular, as the population grows, as the centres for liquor supply are increased, as it expands, there is more and more demand. That is the difficulty, or that will be the problem. It is like having, I suppose—what is an analogy—roads for the future or hospital capacity or whatever. It is just simply creating a demand, building these precincts and then having to police them or to provide medical assistance, or whatever, down the track.

So, yes, we could always do with more. I believe we do have sufficient, but in saying that we need to look to the future and look at what we need to have in place, what we need to set up in terms of resourcing for the expansion in the entertainment and liquor industry. That is not just hotels; that is restaurants that provide meals, casinos that provide gaming—the whole gambit. As I said, we have a significant interest and investment in the community's safety in these precincts. We provide a visible presence, we interact with the community and I believe that we work in quite well with the licensed traders. In saying that, I can see our role becoming busier and busier as these places become more and more popular. It is good for the local economy and it is good for the community.

**Mr KILBURN:** There is a liquor accord in operation up here, is there?

**Insp. Connors:** Yes.

**Mr KILBURN:** Are all the licensed premises in that city precinct involved in that?

**Insp. Connors:** Most are. I believe you are going to be hearing from a couple of participant members a little bit later on.

**Mr KILBURN:** From a policing perspective, do you see that they are a valuable way of working to try to reduce incidents of alcohol fuelled violence, et cetera?

**Insp. Connors:** I think they are. I say that with the experience of having previously been the officer in charge of Fortitude Valley police for three years. The interesting thing there is that I like to say to the traders and advise the traders that their participation or their drive in terms of a liquor accord shows the community a certain degree of goodwill. It shows that not only do they participate to the letter of the law in terms of legislation but also they take their participation to a high level, where they undertake to morally support the practices in the area to provide assistance and advice to engage the community and offer a safer place to be in, which I think is fantastic and is what I have told the groups that I have been involved with is what they need to do. The danger comes from participants in those liquor accords who participate simply to say they are involved and they are part of it. They provide no input or benefit; they simply are a member. By association they say, 'We are responsible because we are part of this accord,' but they take no active role. I think there is a danger there. Those accords do tend to become stale. After a certain period of time they need a fresh set of eyes, they need fresh direction and guidance. But I think it is an excellent initiative that police do participate in those accords and licensed traders generally support them and generally do well. As I said, I just think the danger comes from complacency over time or token participation.

**Mr KILBURN:** Earlier on we heard from Eddie Savage from Murrie Watch talking about the problems of people drinking in parks, et cetera, and the associated violence that goes along with that. Is it right to say it is illegal to drink in parks?

**Insp. Connors:** It is illegal to drink in a public place.

**Mr KILBURN:** We heard that people ring up and say people have been drinking in the park for three days. What is the problem with doing something about that? We have heard in other places from police that the problem is if they go down there they have to know where to actually take these people to other than just watch-houses. Is the reason you cannot just go down and continuously move people that you have nowhere to put them?

**Insp. Connors:** I suppose I can explain that by stating that we have a raft of responsibilities. I imagine it is like a slice of the pie, so to speak, starting at one end with enforcement, and that is attending down there proactively or in response to complaints. Where we find people drinking alcohol we tip it out. We can issue a ticket for consuming liquor in public. We can move on people who are causing annoyance or interfering with someone's business, or things along those lines. We can choose to provide assistance to people who want it and divert them to a place of safety, that is, we take them to a friend or relatives, we take them to a diversionary centre, we call in another resource, like Murrie Watch to come and take them and go wherever. The third thing is that we go there for a complaint of drinking, which escalates into something else—an assault, a verbal disturbance, offensive language or public nuisance offences—and then we take action, we arrest them and we either give them a notice to appear and leave them there or we take them to the watch-house and process them through the watch-house and then they are released to go back. The principal issue there is that the majority of those people—or a number of those people who are there—are there by choice. They wish to be there. They do not wish to be anywhere else. They are quite well serviced in terms of support and assistance that comes to them in those locations or comes nearby. I think in terms of people frequenting those areas, I do not think that will change until the desire for those people to move elsewhere changes.

In answer to your suggestion, yes, we do take action. We do tip out alcohol, we do seize alcohol and we do move people on where they are causing a public nuisance. If people are sitting there quietly simply enjoying the public space, then it is not an issue for us. The unfortunate thing is that some people just do not like the look of it and complain. The difficulty or danger is that if young or inexperienced police turn up and detect they are doing nothing wrong, talk to the group, find out who is there, make sure everything is in order and then the police leave, we invariably get the complaint that the police have not done anything or have not done the job. I guess the interpretation from younger police is that they are under public pressure or expectation to do something when there is technically nothing that they should do. Yes, it becomes a difficulty.

One more point on that is that Townsville is a trial district for the issuing of public nuisance infringement notices, which is essentially a traffic ticket, if you like, for a public nuisance offence. Rather than arresting someone and putting them through the watch-house or giving them a notice to appear for court, we give them an infringement notice for the behaviour. It is generally done for behaviour that is not likely to be repeated—urinating in the street or skylarking or things along those lines, or disobeying a direction—in a circumstance that has no violence associated with it. It is done as a de escalation tool and to move people on. It is effective. It is a very valuable tool for the district.

**Mr BLEIJIE:** Thanks, Inspector, for coming today. I do not know if my question is a question, a statement or seeking your opinion on it, but I am sure you will work it out by the time I finish. With regard to the younger generation—and I still consider myself one of them—you mentioned in your submission that particularly over the last 20 years something has changed. You talk about kids preloading. As we are moving around the state we are hearing that. A lot of people I talk to say it is too expensive to drink at the clubs and pubs anymore so they fill up at home—preload, as you refer to it. There has been talk of restricting licensed premises from operating within certain hours, bringing it back to the last 10 years where a lot of clubs shut at two o'clock, and people are also suggesting higher taxes. I am seeking some sort of opinion in terms of what conversations you have had with young people around Townsville. If you restrict the licensees, hoping to stem the issue of preloading and then others look at the taxation issues and it all gets too expensive for these kids to go out and drink, are we then shifting the issue somewhere else? They will not go to the clubs at all, they will just sort of break out in the suburban streets and buy alcohol from the alcohol shops. I am not saying that we should make it cheaper for people to go and drink, but through touring the state I have certainly seen a lot of the clubs with good security and good relationships with the police and I think sometimes it is probably best to have these people actually drinking in these establishments where there is the proper security rather than out in the streets where you are getting complaints from the public. Taxation is an issue, but I feel if we put more tax on alcohol it will increase the preloading at different times. I think perhaps we could potentially restrict licensees operating but still have the business for them by looking at the taxation issue and by potentially limiting it we can keep these kids in a confined area.

**Insp. Connors:** I guess all I can say in general terms is matters to do with cost or pricing or taxing or levels of tax on products is not an area that I can provide any expertise on. In terms of dispersion or realignment or readjustment of a problem from one area to another, it is certainly possible. It would be something that would have to be considered as part of any research in regard to a shift in times to bring that back to earlier closing to examine the issues of whether it will force people to go elsewhere and other places.

In terms of cost, I cannot give you anything—whether alcohol is more expensive or less expensive or what the issues are going to be there. I think there will always be a demand and demand will continue regardless of price. But that is a personal opinion of mine; that is not an opinion of the Police Service or in general terms.

**Mr BLEIJIE:** In your opinion, why are people preloading or predrinking before going to the clubs? Why are they doing it? Are they telling you it is too expensive to go out to the clubs?

**Insp. Connors:** I have heard that. I have also heard that it is just because they like to sit around at home and chat first. They are on the computer, they are sending text messages, they are watching a DVD and then they decide to go out. There is probably a whole raft of issues. Without some sort of more compelling data I would not be prepared to put all my eggs in one basket and say that is the reason, but I think it is certainly worth exploring to see what the attitudes are. Again, is it something that has come about as a matter of convenience? You could not shop after six o'clock at night 10 years ago. Now you can shop any time. You could not go to buy takeaway alcohol on a Sunday before 2 pm. Now you can buy it at nine o'clock. It is just a matter of convenience. Has it come around because of convenience? I do not know, but it is possible.

**CHAIR:** I found your comments on the accord very interesting. I am involved with the Logan liquor accord. One of the things they have always said to me is once you make it compulsory it does not work because they just put down their name just to show they are a member. Having those people who really want to come along to those meetings—we get 60 people to a meeting—and who want to actually be involved and actually want to work with the other licensees I can certainly say has done a lot of positive things for Logan, definitely.

I wanted to ask you about penalties. We often hear it is not a great deterrent. The fine for under-age drinking is \$300. What are your thoughts on that? The licensees often get a large fine.

**Insp. Connors:** Without having the data in front of me in terms of the specific fines, there certainly is a bigger stick, so to speak, for operators than there is for individuals. Perhaps that is an issue worth exploring in terms of individual responsibility. We talk about people not taking responsibility. Maybe it is something worth following through in that regard.

**Mr WELLS:** Thanks very much, Inspector, for the time and effort you have put into the preparation of this very helpful submission. I am interested in the criminological aspect. Have you noticed a change over time in the pattern of alcohol fuelled violence?

**Insp. Connors:** I guess from a personal perspective I would say that as alcohol has become more available, and as it is very accepted and its use is very accepted, people do not think it is an issue. Honestly, people do not think the consumption of alcohol is an issue or a problem. So I would suggest that, yes, over time I would personally say I think it is becoming more of an issue.

**Mr WELLS:** In that it is more prevalent? You are suggesting that it is more prevalent than previously it was?

**Insp. Connors:** I would think so, yes. As I say, that is a personal perception because you have got a far greater population, you can go to far more venues to drink alcohol if you wish or buy alcohol if you wish and I would think that the use of alcohol, looking at some of the medical statistics, has increased across the community in general. In terms of Townsville, I cannot specifically tell, though.

**Mr WELLS:** Personal perception is sometimes the best data you can get. Is there a difference in the intensity of the alcohol fuelled violence that you used to see earlier on in your policing career?

**Insp. Connors:** I guess what I would say there is that there seems to be far less consideration of consequence than there ever was before. The consequences of an assault, or a king hit, or a punch, obviously, are now recognised to be far greater than they ever were. They have probably always been just as dangerous, but it would seem the ferocity or the intensity of some of these stoushes—perhaps unprepared stoushes, people are unprepared for them—the end result would appear to be, yes, probably greater and we do hear more about it. That is for a number of reasons. There is probably now a greater propensity for people to report violence against them. In the past you would hear anecdotal stories of people sitting in a meal room or around the lunch table talking about how they got into a dust-up over the weekend at a nightclub and everything was all right. They would be at work with a shiner. It was a bit of a badge of honour. They shook hands at the end and sort of walked away. Whereas now there tends to be that intense ferocity and rather than it being a 40-second or 50-second wrestle it is now one or two punches and the incident is over with tragic consequences. So, yes, there is quite a severity and does it get down to the fact that there is a desensitisation towards violence I do not know and I cannot comment, but I do hear public comment quite a bit that people do not think just how serious their actions are or the consequences of their actions are. That goes hand in hand with the effects of alcohol. It inhibits or your inhibitions, it interferes with your judgement. We do not let people drive cars or operate machinery or work on mine sites or heavy industries once they are beyond a certain limit because we know it impairs their judgement. I think it is just simple recognition that the message that the consequences of your actions here and now does not get through once the alcohol starts to interfere with your judgement and reasoning.

**Mr WELLS:** The desensitisation that you refer to, you do not want to speculate as to what might be the cause of that, or you do not want to tell us about any incidents that you are particularly aware of where you know what the desensitisation is caused by?

**Insp. Connors:** No, I am not in a position to provide the committee with specific examples or supporting data in regard to it. I make it just as a broad statement based on public affairs comment and general comment in the wider community and in newspapers on the internet, et cetera, about this, I suppose, greater acceptance of violence and things like that. I make it as part of a general community debate, that is all.

**Mr WELLS:** Has anybody in your organisation access to longitudinal information about offenders such as would tell us what caused the desensitisation in their case?

**Insp. Connors:** I do not know whether we would have access to data such as that and I do not know whether it could be made available in terms of identifying a person working back in time and looking at a series of offences and looking at an escalation and then having a researcher or a third party speak with that person to try to ascertain their perspective on it. It is not something that I am aware of. It probably could be done but I do not know and I cannot provide the committee with any additional assistance to look back in time in those issues, but I believe there are quite a number of examples of people who have come to police attention over a long period of time where alcohol has been an issue from the first offence to the most current offence. When I say that, I talk of examples over five, 10, 15, 20 years worth of offences—nuisance offences, low-level offences but alcohol related just the same, with the occasional offence of violence thrown in.

**Mr WELLS:** Do you have the names and addresses of people who, over the last period of years, have committed glassings and other alcohol fuelled offences?

**Insp. Connors:** I personally do not.

**Mr WELLS:** They would be known to police?.

**Insp. Connors:** They would be known to the service, yes.

**Mr WELLS:** Would you be able to provide that information to the committee?

**Insp. Connors:** I believe the Police Service would provide that on the request of the committee chair, yes.

**Mr WELLS:** Thanks very much.

**CHAIR:** I will close the hearing at this point in time to go to a break. We all have many more questions for you but I know that we will be speaking with you at a later time so we will ask those questions then. Thank you very much for preparing this submission and thank you very much for being here today. We are breaking until 10.30, probably 20 minutes.

**Insp. Connors:** Thank you for the opportunity.

**Proceedings suspended from 10.10 am to 10.30 am**

**JEBB, Steve, Owner, Sovereign Hotel**

**CHAIR:** I declare the inquiry into alcohol related violence open. I will now introduce the members of the committee: deputy chair and member for Hinchinbrook, Mr Andrew Cripps; Mr Jarrod Bleijie, member for Kawana; Mr Steve Kilburn, member for Chatsworth; the honourable Dean Wells, member for Murrumba; and I am Barbara Stone the member for Springwood and chair of the Law, Justice and Safety Committee. We are a statutory committee of the Queensland parliament so as such we represent the parliament. It is an all-party committee which adopts a non-partisan approach to its inquiries. I know that you have prepared a statement for us today.

I remind members of the public to turn off their mobile phones or put them on to silent mode. In the unlikely event that we need to evacuate please follow staff directions. I remind observers that they are here to observe the hearing and not to interrupt. Are you happy for members of the media to record your evidence? Thank you. Although we are not swearing you in, I do remind you that it is a hearing of a formal process of the parliament so we would like you to respect that. It is a serious offence if you are intentionally misleading the committee.

I remind you that Hansard will be taking a transcript of the proceedings and I therefore ask you to identify yourself, say where you are from and speak clearly and at a reasonable pace. I would ask you to start with your statement.

**Mr Jebb:** My name is Steve Jebb. I am from the Sovereign Hotel. My business partner and I have owned the hotel for 11 years and we are a late night trader. We cater for a young audience, partly the gay audience. It is more of a boutique market in some ways. We do not have a lot of incidents but we are not exempt from the Y-generation violence that is going on. They do not really respect themselves let alone anyone else in some cases where they go out and they drink and they cause all sorts of problems.

The penalties are one thing. They get let off with a slap on the wrist and 100 hours community service and no conviction recorded. It is commonplace. Every time you turn a TV on and every time you look at anything it is people smashing things up. It seems to have become just commonplace and accepted behaviour now that if something upsets you, you just smash it all up. We need to address the problem, I think, by banning individuals from the licensed premises on some sort of statewide basis. They all know the difference between right and wrong. Every measure that seems to have been implemented has not worked. The lockout has not worked. The fees and charges that we have to pay are really putting a lid on us operating our businesses now. We cannot keep our renovations up. We are having trouble making ends meet with the fees and charges. It still has not stopped this alcohol related violence from these young people.

**CHAIR:** Just looking at your submission, you mentioned Operation Amazon was in force. Was that something that was once in a while or every weekend?

**Mr Jebb:** I was running a business in Cairns as well as this one at the time. I watched what happened. I knew a lot of the venue operators there. The lockout was on and off about two or three times in Cairns. But when the lockout was on Operation Amazon was in force. I think Cairns was one of the regions used, and the figures from Cairns, to justify bringing the lockout in. Cairns, and I think the Gold Coast I read, was used to justify that. Well, from what I could see Cairns was being manipulated in those figures. When the lockout was halted for periods of time Operation Amazon ceased.

The lockouts cause various problems. As I say in my submission, we cannot let people back in to use the toilets and it is contributing to antisocial behaviour on the streets.

**CHAIR:** We actually don't know what Operation Amazon is. Does anyone know?

**Mr KILBURN:** It was a police operation where they flooded the city centre.

**CHAIR:** But that was only done once in a while? It wasn't a regular operation?

**Mr KILBURN:** It was during the trial for the three o'clock lockout. The argument is being put that the evidence was that crime had decreased because of the lockout whereas, in fact, it was because it coincided with the police operation.

**CHAIR:** Thank you.

**Mr CRIPPS:** Mr Jebb, thanks for coming along this morning and providing us with your evidence and your submission. In your evidence and in your submission you have specifically identified generation Y as being responsible for an escalation in alcohol fuelled violence on licensed premises. I assume that you base this evidence and your submission on your experience in the industry over a long period of time. Can you specifically tell me how you can substantiate what type of violence is associated with generation Y at licensed premises presently and how that is different from any violence taking place in licensed premises in previous years?

**Mr Jebb:** I have watched a general increase in the ferocity of the violence. Three and a half weeks ago I had a plate fitted to my arm because I threw a couple of guys out for bad behaviour on the Friday night. One of them came back with his mates and attacked me the next night. I think that there is an argument for mandatory sentencing to try to stop these people who are likely to get 100 hours community service and no conviction recorded and a small fine for doing this sort of thing. This sort of alcohol fuelled violence is getting worse. Over a period of years I have observed it getting worse. The care factor is just not there any more.

**Mr CRIPPS:** Is it your view that both the frequency and the acuteness of the violence has increased in recent years?

**Mr Jebb:** Yes.

**Mr CRIPPS:** Or just the frequency or just the acuteness?

**Mr Jebb:** Both, for sure. As I say in my submission there, these people—and it is a small number of people. In the vast majority of people who go out it is just a small number of people who cause these problems. We need to go down the road of banning these people from licensed premises rather than all of the fees and charges and lockouts and things because nothing seems to have worked. The glassings and the alcohol fuelled drama is still increasing. All the measures that the government have done up to this point have not worked.

**Mr CRIPPS:** What would work, Mr Jebb?

**Mr Jebb:** I have seen in the Northern Territory an ID scanning system where it identifies people, as I say there, who have had a public nuisance written out against them or gone through a court or even a local ban from a local venue. Some sort of system like that to keep the troublemakers out of the venues so everyone else can enjoy themselves is what we need. Ultimately you need to go to the root of the problem. Out of every 100 people there is only one or two who will get drunk and want to go out and fight. Some people set that task on themselves: to be drunk on closing and to try to get into a fight. Unfortunately, and it is only a small amount of people, that is the cause of all this violence.

**Mr BLEIJIE:** Thanks, Steve, for coming in today and thanks for your honesty in your submission as well. Are there no public toilets around the area or are they shut at a particular time?

**Mr Jebb:** There is none. That is an issue that is before council at the moment. I believe there is going to be public toilets and that sort of thing in the nightclub precinct, but I am not really familiar with where that is at the moment.

**Mr BLEIJIE:** In terms of public disorderly urination and that sort of thing, are they doing it in the streets because they don't have access to amenities. When we went and toured The Valley in Brisbane there was one public toilet for 50,000, 60,000 people.

**Mr Jebb:** There is one in the CBD of Cairns near the taxi rank. There is none in Townsville. I would say for sure that does contribute to some of the problems here.

**Mr BLEIJIE:** The ID system that you referred to, do no clubs in Townsville have this ID system?

**Mr Jebb:** I believe the clubs in Mackay have them. We haven't had them. We have talked about them at meetings.

**Mr BLEIJIE:** In your submission you refer to some assistance. On the Sunshine Coast where I am based, 90 per cent of the clubs are running the ID system where they scan the licences and one particular club scans it out the back with security and each photo is recorded. If the patron does not want the licence scanned they are not allowed access. You are saying, essentially, to take it a step further, that if they are banned from your club, because some sort of registration takes place then they are also banned from other clubs as well to engender that responsibility issue.

**Mr Jebb:** There is no money left. We have paid the government so much money in licensing fees. I suggest that we have something that is subsidised by the government. We are all online with our gaming machines and everything on a statewide basis to the gaming office. Can't we have some sort of system where it scans IDs and is subsidised and controlled by the government and regulated that way so that it protects us from the troublemakers. As I say, I haven't researched the cost of one of those systems, but I would assume that it is out of our reach at the moment.

**Mr BLEIJIE:** You would be looking at implementing that but just need some assistance to do that?

**Mr Jebb:** Yes.

**CHAIR:** We will now take a couple of minutes break so that the next witnesses can get ready. Thank you for appearing.

**Mr Jebb:** Thank you very much.

**Proceedings suspended from 10.55 am to 10.59 am**

**PELLEGRINI, Greg, Spokesperson, Townsville City Licensees Safety Association**

**FLYNN, Steven, President, Townsville City Licensees Safety Association**

**CHAIR:** Good morning. I declare the hearing into alcohol related violence reopened. Before proceeding I will introduce the members of the committee present today. Our deputy chair, Mr Andrew Cripps, member for Hinchinbrook is outside with the media. You probably know him. Mr Jarrod Bleijie, member for Kawana; Mr Steve Kilburn, member for Chatsworth; the honourable Dean Wells, member for Murrumba. I am Barbara Stone, the state member for Springwood and also chair of the Law, Justice and Safety Committee. The Law, Justice and Safety Committee is a statutory committee of the Queensland parliament and as such represents the parliament. It is an all-party committee which adopts a non-partisan approach to its inquiries. I note that you have our discussion paper in front of you there which has our terms of reference and the referral from the parliament that we received.

The committee released an issues paper on 31 August 2009. We invited submissions from the public through advertisement and by writing directly to a large number of stakeholders. After considering submissions received and other material, as well as today's hearings and other hearings that we will be having around the state, the committee will report to the parliament. An interim report will be given to the parliament by 26 November and a full report by 18 March 2010.

I remind those in the audience to switch off their mobile phones or put them on silent mode. If we do need to evacuate for any reason please follow staff directions. I remind members of the public that you may not interrupt the hearing; you are here to observe. Are you happy as witnesses to have the media take down transcripts or record you? Yes. Although the committee is not swearing in witnesses, I do remind all witnesses that these hearings are a formal process of the parliament and as such any person intentionally misleading the committee is committing a serious offence. I also remind witnesses that Hansard will be making a transcript of the proceedings and therefore I ask you to talk into the microphone, identify yourself and who you are representing and speak clearly and at a reasonable pace.

With that I hand over to you and ask if you would like to make a statement to the committee. Thank you

**Mr Pellegrini:** My name is Greg Pellegrini. I am spokesperson for the TCLSA. My colleague here is Steven Flynn. He is president of the TCLSA. I would like to explain our body. The TCLSA is made up of inner-city licensed operators with a common goal of looking at alcohol related violence, improving transport and any issues that affect any customer or clients in the city. We have an open relationship with council and police and have done for many years. Our body is the first body, I believe, in Queensland that has for over a period of 10 years provided security to a public area. We provide security to the public area in the area of Flinders Street East which sees a congregation of late night venues. We chose to do that many years ago on a recommendation from the previous mayor with regard to a supposed objection to our 3 am trading. That initiative won an award from Griffith University with regards to an inner-city program. I forget the actual program. We have seen violence reduced on its introduction by 700 per cent in its first year.

The committee objected to the government's introduction of the 3 am lockout. Our submission has seen the lockout and the committee accepting our findings twice, only to see the government legislate a change which has seen our third submission of appeal. The basis of evidence for our submission was a report, which I tried to find the documents to submit, but will in our submission find them, that stated that the lack of amenities in a concentrated area of licensed venues is a factor contributing greatly to violence in those areas. The factors are, to take a simple example of the issues here in Townsville, initially a lack of toilet amenities. We have a street which sees a patronage of some 10,000 plus people over a week with no toilets after lockout. We have tried to get the attention of all stakeholders with regard to this issue, including the women's lobby group, and that with lockout we have seen women put at risk because there are no toilets. We still have no toilets. Urinating in public is a great concern. It is a problem and we cannot believe that that issue is still there.

Our submission also seen a document which Alan Jones sort of highly promoted a few years ago with regard to the fact, once again, of amenities: transport. In Townsville we have a problem with cab companies. Security is provided at the cab rank. We asked for the possible introduction of late night licences for cabs. We had many cab drivers who did not want to work the inner city, and I think that may be the case in all centres where they believe they may be a victim of assault. We asked for late night licences to be issued, so the fact that someone was considering buying a late night licence permitting him to work between only 6 and 6 based on the rules of that licence would be looked at. We have seen once again the common goal of where he who controls the statistics controls the outcome. Statistical evidence by the cab company on evidence of times that we believe to have been not relevant were accepted by the bodies and these licences were not submitted. Many people out there would like to buy these types of licences and take the pressure off these inner city areas.

The amenities issue was accepted by the tribunal at the time with regard to assaults at cab ranks and the fact that the lockout itself saw great pressure put on those amenities and still does today. The lockout sees the unnatural tide of people leaving a venue become apparent at one time. May I explain a little bit further what that means. If we are in a late-night venue and we are trading normally until five o'clock, we see people normally leave between two and three, three and four, four and five. As with any party, when the numbers of a party reduce, the atmosphere of that party diminishes and people leave.

Lockout sees people leaving, not being reintroduced into the venue, subsequently seeing a greater portion of people leaving the venue than normally would leave between three and five thus putting a greater pressure on the amenities between three and five. If you understand the taxi system, I don't know how it works elsewhere, but in Townsville the taxi system sees many cab drivers do their change around at four o'clock in the morning—at peak time. I think this also is the case in other provincial areas. We try to discuss this peak hour transfer between the drivers and asked that at least on Friday and Saturday nights that there be an alteration to that. They also then leave the inner city to address the airports, which are a big part of their business and we understand that. So the cab drivers then choose to either work at an inner-city destination or take the businessman and families to the city. Obviously their choice is the latter.

TCLSA is very concerned about all issues. People like myself, and I probably introduced that, started in late night industry at the age of 26 in 1987. So we have vast experiences on the trends that have happened over the last 22 years. We are concerned about our youth of today. I will quote some statistics: 80,000 children do not live with their mothers today because they are drug affected. This inquiry to me, without the mention of drugs in this situation, is a waste of time. You are wasting your time, panel, because the problems are not to do with alcohol, they are to do with drug related issues. I submit that 60 per cent of people who frequent the late night industry take drugs. Are you aware of that? I have had that confirmed by operators in other provincial centres. It is an epidemic. You have imposed on the liquor industries 3 am lockout. You have imposed cameras with recording for 30 days, you have imposed RSAs, RMLVs, approved managers. In our case you have imposed a condition that we provide security to the city. Nothing has changed. Please take the message back that these things have done nothing. To remove glass is another stab in the wrong direction.

It is unfortunate that everyone dodges this subject, including the police. Drug related issues are the cause of many of the issues. In the last four years it has become quite apparent to myself and to my security officers. We have kept statistics of the percentage of people we refuse at the doors at our venues because we believe that the person is affected by drugs. We are tired of the police lack of response to drug related issues. How can I prove that? A member of the Drug Squad said to me three years ago at Easter time that they watched one person in Flinders Street East sell 1,800 pills. We watched their lack of response when a drug related venue took 18 months to be closed down.

In the last month I have had a fellow member say to me, 'I pointed out to a police officer in a street that a guy had offered me \$3,000 a week to close an eye to him being in my venue.' He pointed it out to police. He provided police with evidence of where he had the discussion. Three weeks later that information gets acted on. Personally, I have had my son glassed in a venue—not my own. Still today the perpetrator has not been charged. We have taken it as high as we can in Townsville and we will be following that through. We got badgered by the police and boxed around and threatened with the fact that we have got a responsibility to provide a safe venue and the fact that we weren't coming forth with information about drug dealers and drug activity was something they could threaten us with. I took that threat seriously and engaged my security officers with regard to removing what we believed to be drug-affected people. The work was complimented by the Drug Squad. My security officer was threatened. He left his employment. My driveway was fire bombed with brake fluid and petrol. My garage door was graffitied with 'dog' on it.

I have taken my responsibilities seriously with regard to the issues but I believe that the time has come to become very vocal and public on the issue. My members are very responsible members. We do not condone the activity of drugs. We do not deny that alcohol is a contributing factor but it is very minimalistic. It is a cocktail of drugs and alcohol. It has become an epidemic among our youth to take drugs not when they go to work, not when they attend a cricket match or a football match; it has become an epidemic to take drugs when you are out socialising and that happens to be in the vicinity of our businesses, which is unduly bringing the wrong reputation to our industry.

Late night trading evolved because in the seventies when we closed venues at 12 o'clock police resources were exhausted in attending to noise complaints in the residential suburbs. That is why the government chose to leave people to trade longer to one o'clock. Then one o'clock was not enough and we have seen trade continue until 5 am. Removing and reducing licences will undoubtedly only see the circle come round, as does fashion: long skirts, short skirts, long hair, short hair. The fact is that there has been no study done into drug activity. Experienced operators like myself see it quite clearly. It is plain as day. Please, as politicians, stand up, be responsible. The community will not judge you. Every family has got a story to tell of drug activity in their family. Stop hiding. Get the message back, please. Our youth needs our help. As politicians, as community leaders, stop hiding. Please. You are heading in the wrong direction.

**CHAIR:** Have you finished?

**Mr Pellegrini:** I would just like to mention the drug raids that happened and another example of statistics. Once again we see statistics head the wrong way. There were 14 people detained for drug activity and 28 for alcohol. The fact is the street was riddled with pills. It was like a jellybean fest.

**CHAIR:** Where was this?

**Mr Pellegrini:** In Flinders Street East. I think it was the drug activity that the previous person was talking about where police came up from Brisbane with drug dogs on a Friday night. The statistics showed 14 drugs, 28 alcohol. The media will show you photos of plastic bags which contained drugs everywhere.

**CHAIR:** They are dumped. That is what happens in those operations. They see the police and they will dump them. It is so resource intensive. Unless you have got lots of investigators watching who has dumped it.

**Mr Pellegrini:** The fact is that 28 alcohol offences were recorded. We have seen the statistics. The 3 am lockout has seen police do their job and badger the statistics. They went out with a zero tolerance just to make the statistics stack. I think the police are underresourced as well and the majority of police have got great intentions. I do not think there is any corruption in the police. I think that like ourselves they are tired and they are limited as to what they can do.

I would like to close with the comment that I know the Drug Squad wanted the budget to contain \$300,000 to train two drug dogs for Townsville. That was refused. I commend the fact that you immediately found \$500,000 for the One Punch Can Kill campaign. I think the campaign is great and I support the youth of today. I have spent all my time working with youth and in my retirement I will spend time giving back to the youth. This today is my first plea on behalf of the youth that they need help.

**CHAIR:** Just along the lines of what I call the stuck and drunk, you are talking about putting on more public transport but when I have spoken to young people or people who are frequenting night entertainment precincts, they don't want buses, they don't want trains, they want taxis. You were talking about changeovers in shifts. When I have spoken to the taxi industry, if someone has made enough money on that night they are going to go home no matter what. Even if you made the changeover time three, four, five, whatever, it does not matter. That is the reality. I would like to hear your views on what you wanted for those stuck and drunk, as I call them? Is it public transport? Is it taxis? What is it that you want to see?

**Mr Pellegrini:** I think the majority of people try to share cab rides, but the fact is that they do want to be able to get a cab at that peak time. The fact is that the introduction of night licences will see not that cab driver go home because he has made enough money but will see the guy who has bought a six to six licence, who only makes his money working six till six, being very vigilant in staying on the beat until six o'clock in the morning.

**CHAIR:** I saw last night on one of the Townsville television channels that there was, I think, \$56 million being spent on the mall and the Flinders Street East area.

**Mr Pellegrini:** Redevelopment of the mall and Flinders Street East.

**CHAIR:** Yes. What safety measures, amenities and measures are being put into that plan to assist you in this role?

**Mr Pellegrini:** TCLSA is pushing for a police beat. There is a block of land that is owned by council in the condition that that should see a police beat there. It is sad to see the police beat that was put on The Strand closed up the majority of the time. That is sitting there. It would be great if we could just pick it up and put it on the back of a truck and move it to where it is really needed. But obviously the community cried out loud and got one there.

I give Cavill Avenue a pat on the back. Limousines being allowed into particular areas are a great luxury today. People do want that. We are all becoming a little bit more private in our lives. Lining up in a cab line is sometimes not appropriate for clientele aged over 30. If you look at Cavill Avenue, I can walk out of any venue straight into a limousine—red, white, green, yellow, black—with my girlfriend, with my partner, with my friends. Yes, it is \$10 more, but we don't care. That gets immediate response.

**CHAIR:** I would imagine that \$56 million is not going to include amenities such as toilets that you are talking about?

**Mr Pellegrini:** There are no plans for it.

**CHAIR:** Who was part of looking at redevelopment of that area and what is needed for that area?

**Mr Pellegrini:** It was the architects, the council and an advisory committee which I sat on. We pushed as much as we could to have those amenities. Flinders Street East is basically seeing the steel structures removed, garden beds changed and possibly discussions with regard to some of these issues, but the budget will not allow it.

**CHAIR:** I have had raised with me the issue of toilets and amenities. I have had a couple of people say to me that from now on anyone who opens up a restaurant, wine bar or club must have a certain number of toilets in them. I know that doesn't help the 3 am lockout. However, it could be another way to go. What are your views on that?

**Mr Pellegrini:** More toilets? Look, the document that we will be submitting that was part of our evidence shows that the concentration of licensed venues in an area puts pressure on the amenities and amenities are a key factor. Looking at places like Flinders Street East you have to be very careful when you are asking for more licences. Townsville is growing. To issue more licences means you are going to draw more people here. Putting extra pressure on an area that is already under pressure is an issue. More consideration has to be given, when licences are being considered, to how the amenities are going to be affected. If we open up another late night venue and it is all flash and new and it is going to attract another 500 people a week, are the amenities—toilets, transport, safety, police, security—able to attend to that demand?

**CHAIR:** I suppose you are asking for an environmental impact study to be done before any more licences go out?

**Mr Pellegrini:** Also an amenities strain. Are the amenities able to handle the extra business that you are going to be generating.

**Mr KILBURN:** Greg, you said you were the spokesperson for the Townsville City Licensees Safety Association. Are you a licensee?

**Mr Pellegrini:** I have been a licensee since the age of 26. I presently own two nightclubs in the city, a nightclub that caters for an average clientele of 21. We own a gentleman's club upstairs and also we have just opened a tavern in the suburbs that is only three-months old catering for a family market.

**Mr KILBURN:** You are quite passionate in your claims that the problem is drugs. Are you putting to this committee that alcohol is not a major contributing factor to the social problems in the city area; is that what you are saying?

**Mr Pellegrini:** That's correct.

**Mr KILBURN:** So you think that alcohol plays very little part in the problems in this city.

**Mr Pellegrini:** When 60 per cent of people go out on drugs—

**Mr KILBURN:** What are you basing that on?

**Mr Pellegrini:** I am basing it on the fact that we are on the ground and seeing people all the time and basing it on management.

**Mr KILBURN:** We have spoken to other people who are on the ground and they would argue that 60 per cent of all people who are out, as you are saying, are on drugs.

**Mr Pellegrini:** 60 per cent at times on certain nights are drug affected, yes. That is how high it is. I know it is a shock, but it is true.

**Mr KILBURN:** You have no evidence at all that 60 per cent of people are actually on drugs, whereas there is quite a bit of evidence that just about everyone who is out is on alcohol. That is a fact we know because it is sold. Your assertion that people are on drugs is purely your opinion based on what you may or may not have seen. That is your opinion. There is no evidence that 60 per cent of people are on drugs, is there?

**Mr Pellegrini:** That's correct.

**Mr KILBURN:** Given that you own a licensed establishment, there would be an argument that it is in your interest to try to make sure that alcohol is not seen as something that is causing a problem in society.

**Mr Pellegrini:** I defend that. It is in my interest to ascertain at all times that the environment in which my business trades is sustained in a safe manner. Your argument, sir, with all due respect, is based on evidence that is just drummed up. We have seen statistics drummed up to suit government inquiries like yours. That is where I will leave it. If 22 years of running a late night venue means nothing well, mate, I am saying it.

**Mr KILBURN:** I am not saying it means nothing.

**Mr Pellegrini:** I could probably go out and take a study myself based on the experience we have got and prove that for you.

**Mr KILBURN:** Your statement is that it is based on drummed up evidence. I am putting to you that that same argument could be made about your assertion that 60 per cent of people are on drugs.

**Mr Pellegrini:** I will still continue to tell the committee that 60 per cent of people who go out are on drugs, that's correct. That is an assumption that is quite prominent among other operators and security officers. It is not just me.

**Mr KILBURN:** Given that 60 per cent of people are on drugs, you still assert that the drugs cause the problems not alcohol.

**Mr Pellegrini:** Look, if you look back and did research with regard to the serious offences that have occurred, it is only in the last three years that we have seen the serious crimes of glassings. It is only in the last three years where we have seen the serious assaults of people kicking people's heads in. It is only the last three years. Honestly, it also relates to the bikie activity. When the bikie gangs of Australia met in New Zealand some seven years, which was (inaudible). It was quite common knowledge to people like ourselves that the hard core on the street, having an association with all different types of peoples, that the bikies worked very, very well doing what they had to do. We in Townsville were isolated to that. It is so funny that once we have seen the introduction of certain bikie people on the street that the drug activity started to happen.

Drugs coming into our community, with all due respect, was something we never saw five years ago. We were probably a bit isolated. We were a good test case. Once we saw drug activity come into our community through different channels—it also came through the Air Force, through military people. It was very easy to fly drugs in. It was well known. I am sure you know all of these things that happened. Drugs also came in from military people who could get them in without going through customs. It still does happen.

**Mr KILBURN:** We have had some people make submissions about the ability to ban people by having some coordinated system of scanning, whether it is licences or some other item. Do you think, as a licensee, that it would be a useful tool for licensees to have some sort of ability to keep track of people.

**Mr Pellegrini:** I would like to add a comment and also comment on your comment. We as a group tried to have implemented—with police support as high as the OC at the time, Dale Lars—the barring of recidivists, repeat offenders. There is a small group of people who fall into the line of boxers, fall into the line of hardened criminals, who once, twice, maybe three times a year are involved in serious offences that occur; the big fights, the bashings, the serious grievous bodily harms. We wanted to identify these recidivists and with the support of the council, which we had, the support of the police as far as the OC, we wanted to introduce a program (inaudible) a recidivist would receive, the fact that had you gone before the judge on your third grievous bodily harm in a late night precinct, and that became a condition. It is no different to when a woman puts out a DVO. We had great response from the police but we got that squashed.

**Mr KILBURN:** By who?

**Mr Pellegrini:** Police. To answer your question about the scanning, it was in one of our submissions about six years ago when the focus was then again on drink spiking and the fact that spiking was something that was questioned. Even at that inquiry I made a statement that drink spiking was not as bad as it was; it was self inflicted. Later on the health commission came up and saw that. I got a bit of credibility when that inquiry came out. Because I was targeted all the time, 'Greg, drink spiking is happening in your industry', and I said, 'Mate, two out of five are genuine and three out of five self inflicted and alcohol related to a degree.' But the scanning devices today, and I was speaking to Louis Bickle the other day in Brisbane, are, I believe, very useful tools. Yes, I do agree.

**Mr WELLS:** You said that three years ago the glassing began, three years ago the head kicking began and five years ago or thereabouts the drugs started to flow. What you are saying to us is that Townsville was pretty much drug free until about five years ago?

**Mr Pellegrini:** Probably three years ago.

**Mr WELLS:** After its introduction there became a culture of accelerated violence associated with going out on the town.

**Mr Pellegrini:** A drug addict said to me it is easier to get drugs in Townsville than it is to get them in Melbourne.

**Mr WELLS:** What drugs?

**Mr Pellegrini:** Pills. Any other forms of drugs. There is speed, cocaine. It is all here. The drug dealer who moved, he said he moved from Melbourne to clean his act up and came to Townsville. He openly admitted to me the fact that it is quite easier. His problem has been exacerbated by living here because drugs are so much easier to get a hold of.

**Mr WELLS:** Do you know any of the offenders? Have you been, for example, familiar with any regular who on a day, surprisingly, became an offender?

**Mr Pellegrini:** Is the question am I aware of recidivists, repeat offenders?

**Mr WELLS:** I am thinking more about the case where you have known a client for a period of time and then to your surprise that client commits an offence. I am thinking more of that case.

**Mr Pellegrini:** We are very surprised with our youth. My managers tell me that someone taking pills today is a very placid person, having a good time, dancing, enjoying his night until something makes him click. That is what surprises us. The change in reaction in our young clientele after a certain period and what triggers that is an altercation, an altercation that me and you could handle or discuss, but the fact is that 60 per cent of people on certain nights are on drugs and we are quite adamant that that is the case. I will stick by that—high water.

**Mr WELLS:** What I am trying to find out is your acquaintance with particular incidents of this. You would be aware of particular incidents of glassing, particular incidents of beatings, particular incidents of violence that have occurred. What I am asking you is: has this ever happened in circumstances where a person was a regular and you would have thought you could trust and then something clicked within that person and an incident of violence occurred?

**Mr Pellegrini:** We have seen the change in attitude. Like I said, drug taking, especially in our community, is referred to as an epidemic. It surprises me the change in attitude of people, yes. It surprises me that that much drug activity is happening. It does surprise me that the attitude of certain people does change. Managers have reported to me that, hey, Billy Smith over here is a client of ours, but as of recently we have seen his attitude and his behaviour change and it was surprising to see him involved in that incident. Then again, if we look at the group of people that he is starting to hang around with and understand the type of people who openly today discuss drug taking—drug taking is discussed in our type of business very commonly today. It is not like the old days where you hushed up about it. It is very common for youth to talk about how many pills they take. They start taking one pill. They are now taking three to four pills to get the same excitement. That sort of discussion level is quite open. It is not hidden. The fact that people take drugs, and 60 per cent of people are taking drugs on certain nights, is quite an open discussion.

My managers some two years ago started to report—I have got a system of reporting in my business where at the end of the evening you leave me a three-minute verbal report: trading, opposition, incidents. In my role as a spokesperson for the TCLSA, I like to be quite aware by first thing in the morning of an incident that may have occurred so I can look at reports and be able to discuss certain issues with the

media. Automatically they started to say use this terminology 'chemically affected'. The town was chemically affected by this point; the town was not chemically affected because the word on the street is that there is a lack of supply; the word on the street is there is some good gear getting around and it is smashing them. That is terminology that is happening in all areas. That is reality. That is the truth and that is what is happening.

**Mr WELLS:** I am very interested in what you are saying. I am also interested in your general impressions. But what the committee would be most interested in would be something specific. So, what I was asking you was—

**Mr Pellegrini:** More specific than telling you that my—

**Mr WELLS:** Just let me explain to you what we are looking for. What would be most useful would be if you or one of your managers was aware of a case like this: client A, nice guy, always behaved well for a certain period of time. Then on an occasion turns into a glasser or a head kicker and everybody is surprised. We are looking at the particular. Client A, on examination, turns out to have just started taking drugs in addition to alcohol which he used to take without the added mixture of drugs. Something as specific as that would be very useful for the committee to hear about. So, I am asking, if you or any of your managers know of any such specific cases, whether you could write us a letter. It would not necessarily need to contain the names. But if we had specific evidence that would count more for us in trying to establish what you are trying to establish—that is, the connection between drugs and alcohol as the cause of the violence rather than merely a change in alcohol consumption. You see, there are many confounding variables, as the social scientists call them. There is a change in the pattern of drinking that has occurred. Binge drinking has taken different forms in recent years and it would be possible to attribute the glassings and the head kickings and the lack of inhibitions to that. Now, you are giving us a particular causal story and your particular causal story is, no, it is drugs taken in connection with alcohol. That could very well be so, but what we are looking for is specific evidence that tends in that direction. If you can help us with that that would be very useful to the committee.

**Mr CRIPPS:** Mr Pellegrini, thank you for coming along to our inquiry today and giving your evidence. Can I ask you a specific question? I listened to you carefully and I thank you for putting your views forward very strongly in relation to the influence that drugs have to violence near or in licensed venues.

You said that it is your belief that on certain nights up to 60 per cent of patrons might be drug affected. There is, of course, the other 40 per cent and on other particular nights it may be more. In relation to public policy measures that have been implemented over time to try to address the issue of alcohol fuelled violence or violence at licensed premises in general, can I ask you to think, as the spokesperson of the Townsville City Licensees Safety Association, about the public policy measures that have been most effective in addressing violence at licensed premises. In particular, can you tell me if you think that moving the trading hours has been effective in any way? Can you tell me if requiring licensed premises to increase the number of security personnel has been effective? Can you tell me if you think that government policies to tax particular types of alcoholic beverages in one way and other types in another has been effective? A range of different policy initiatives have been implemented by governments over time in response to specific issues in licensed premises.

Thinking about all of those different types of measures holistically, can you nominate if you think any of them have been effective either in the short-term or the long-term? Coming back to the point that you made earlier, a range of policies have been brought out over time to try to address issues at licensed premises and yet the evidence that we have heard from a number of different stakeholders today is that alcohol fuelled violence or violence in general at licensed premises continues to be an issue.

**Mr Pellegrini:** The answer to that is quite simple. We would not be here having this inquiry if any of the measures that have been implemented were effective. The fact is that the government is concerned about the increase in violence amongst our youth around late night areas. The implementation of lockouts has done nothing. The introduction of cameras, and the fact that evidence has got to be kept for 30 days, assists the police so they have the information there longer. RMLVs educate our managers and that doesn't hurt. But the fact is that none of the measures have helped to curb it to any degree. The implementation of amenities obviously is of great concern. Policing is of great concern. I think there is a lack of motivation amongst the police force because they are tired. They are tired of the judicial system and the lack of response they get and the strenuous way that they have to do their paperwork with regard to any offenders. I think that addressing these recidivists, these repeat offenders, in our courts is very, very appropriate. I could be instructed by the police behind me, but I think they can get a restraining order on the perpetrator by the judge while he is going through court. I think that does happen. I don't know if it still does happen. The fact is that, apart from the general violence with regard to the drug taking and the effects of drugs and alcohol, alcohol does contribute a certain percentage, but not to the percentage that it has been perceived. In respect of identifying these repeat offenders: if I, Greg Pellegrini, am before the courts on a charge of being in Flinders Street East, a late night area, with three GBH charges I have obviously got a problem when I am out socialising. Maybe I am just an alcohol drinker and I don't take drugs but I am a fit type of person with a bit of aggression at certain times. It should be identified that maybe one of my custodial penalties would be that I am not allowed into these premises, because you seem to have your grievous bodily harm assaults at 12 o'clock at night when you are out instead of behaving yourself and enjoying the community and the people; you seem to want to take on a fight.

**Mr CRIPPS:** Is it your view that moving trading hours, increasing the number of security staff, responsible service of alcohol programs, taxing different types of products in different ways, are totally unproductive and ineffectual policies or is it your view that they have been effective to a certain degree and if they had not been implemented issues of violence in licensed premises would be even more significant than they are now?

**Mr Pellegrini:** Apart from the camera system. I think the biggest thing as an operator is that I can use it as a tool. If I am refusing entry to this gentleman, I can say, 'Sir, please, a camera is watching you. You will be in jail. You don't want to spend the rest of the night in jail'. The introduction of CCTV monitoring and CCTV monitoring also by the councils in these areas is a very, very good tool. I think that the police and the authorities use them quite well. They are the biggest tool that has been good, but the rest of them have had minimal to nil effect. We are allowed to trade to 5 am one night a year, New Year's eve. No problems, no incidents, no lockout, no problems. That in itself shows that it is a waste of time. The fact is that when people like ourselves get older we fail to understand why our youth want to party until late. It is simple: retail—the word retail. When you, sir, were going out hairdressers stopped work at 12 o'clock and one o'clock on a Saturday. They had the time to go home and pretty themselves up and spend time with their friends and then prepare themselves for a night out. Today this gentleman here works at Bunnings. He used to finish work at 12 o'clock. He now works at Bunnings. He finishes at five o'clock on a Saturday. He is rostered back on Sunday morning at nine o'clock so he chooses to go home, have a rest, have a few quiet drinks, sit on the couch, watch a DVD, have a snooze, then he comes out at midnight. Then he stays up all night and then he goes to work straight away the next day. Retail never did that. Retail has had a small influence on the way the youth of today want to act.

**Mr BLEIJIE:** Thanks, Greg, for coming today. I am Jarrod, the member for Kawana. I have two relatively quick questions. No doubt you are aware that the federal government introduced a tax on alcopops. What has that done? I know you have briefly touched on it before in terms of its effectiveness as a general policy but in this inquiry we have received submissions in relation to putting the tax up on alcohol. We have also talked about the issue that you cannot tax drugs. I haven't had any experience with drugs but what I am hearing is you can get drugs cheaper than alcohol on the streets.

**Mr Pellegrini:** Yes.

**Mr BLEIJIE:** Specifically with that policy, because that is something the committee is looking at, is that something that the industry obviously rejects because of the ineffectiveness of the current policy?

**Mr Pellegrini:** When I hear of the tax being increased on alcohol it only brings one signal back to its opposition, the drug industry. They are out there applauding and rubbing their hands together because you can see the demand on pills. We only have to look at the big intake of pills that happened in Griffith, where \$500 million worth of pills came in from Italy. That alone shows the demand in the community of pill takers. I feel that the drug industry would be out there saying to the politicians, 'We will keep voting you in because if you keep taxing alcohol you are just putting money in our pocket.'

Like I said, I was personally attacked when I went in to do my job. That is a fact. It was reported to the police. There are photos to prove it. We then pulled back, obviously. I did catch up with who I believed were the people and had a chat to them, but I am not going to risk my family's safety and continue to do the work of the government of today with regards to a social problem that we have in our areas. If we continue to tax alcohol, you are only putting money into the drug dealers and you are only continuing to fire up the problem. It is cheaper to go out and buy two pills than to go out and have a night out on alcohol. Ask any youth of today; they will tell you that. We should get out of our comfortable lounge chairs and our comfortable homes and our nights socialising in the restaurants and see what our youth today has become. I feel sorry for the youth of today because peer pressure, as all of us know, made us or made me certainly do things I wouldn't have done. I am very concerned about the youth. As I said, my call here also is not just for myself and my industry but for the youth. We need to understand that alcohol and taxing it is driving the problem greater.

**Mr BLEIJIE:** Finally, I am not sure what the security system is up here but in The Valley I understand they have employed one company that employs the security guards for all the clubs and pubs and it seems to be sort of working effectively in terms of the coordination and communication between them. What happens up here?

**Mr Pellegrini:** We were the first to do that 10 years ago at the cost of about \$70,000 a year. We still do that. We have Security 1, which comes on to the street and coordinates the heads of security. We said, 'Look, we have just removed a guy from a venue. He is wearing a blue and white striped shirt'. We evicted him from these premises because he has been involved in an incident. We automatically then bar you from that precinct. We try to get our Security 1 to come over, calm you down, because you have probably seen your girlfriend out with another guy. We understand that. So we then try to get a priority security cab for you home so that you can go away. We try to pacify it. We have been doing that for over 10 years.

**CHAIR:** Thank you very much. I will close this part of the hearing. Thank you for appearing here today.

**Proceedings suspended from 11.47 am to 11.49 am**

## **EELES, David, Assistant Commissioner, Queensland Ambulance Service**

**CHAIR:** I reopen the inquiry into alcohol related violence. Before proceeding I will introduce the members of the committee present today: Mr Andrew Cripps, member for Hinchinbrook and deputy chair; Mr Jarrod Bleijie, member for Kawana; Mr Steve Kilburn, member for Chatsworth; and Hon. Dean Wells, member for Murrumba. I am Barbara Stone, state member for Springwood and chair of the Law, Justice and Safety Community. The Law, Justice and Safety Committee is a statutory committee of the Queensland parliament and, as such, represents the parliament. It is an all-party committee which adopts a non-partisan approach to its inquiries. I believe you have sent in a submission to the committee and have looked at the discussion paper and issues of the committee. We will be considering submissions and transcript hearings from today and other information that we receive before we give an interim report to the parliament by 26 November this year and a full report by 18 March 2010.

I would just like to remind members of the public—I think it may have been the media, and they are not here so I can say this—that when you are talking up the back it is actually coming through the microphone. Hansard is having a bit of difficulty hearing our witness. I ask you to be quiet please. Members of the public are also reminded that they are here to observe the hearing and not to interrupt the hearing.

Although the committee is not swearing in witnesses, I remind all witnesses that these hearings are a formal process of the parliament and, therefore, we ask that you respect that parliamentary process. I also remind you that Hansard will be making a transcript of the proceedings and I ask that you identify yourself when you first speak and clearly speak into the microphone and at a reasonable pace. I will ask you to begin.

**Assistant Commissioner Eeles:** My name is David Eeles and I am an assistant commissioner with the Queensland Ambulance Service. Firstly, thank you very much for the opportunity to provide a statement and some evidence today. We have also received a letter from the committee and we have put a written submission together, which is part of the Department of Communities' safety submission which forms the whole-of-government submission. It will be a few pages within the whole-of-government submission.

In 2008-09 the Queensland Ambulance Service attended or responded to over 744,000 incidents across Queensland. We have 2,500 paramedics and we respond from about 287 locations, of which 231 are full-time and the other 56 are first responders or honorary services. One of the things I want to talk about is what evidence we do have, what evidence we do not have, some of the research findings that we have come across and some of our concerns. I probably want to talk through that, and it has been incorporated into our written submission.

Because of the urgent nature of the contact with patients the problem we have is that the key data elements that we capture on our ambulance report form really relate to injury and illness and the associated treatment that has occurred but not the circumstances of each case. We do not actually collect why something has occurred, if it is related to alcohol or something like that. There is not very much information at all in our databases on that. We do know from the literature that the association is very well established between physical and sexual assault, alcohol consumption and temporal drinking patterns, particularly heavy episodic drinking. In terms of the literature, the profiles of the common characteristics of alcohol related violence are that it tends to involve males as perpetrators and victims, they are often under 30 years of age, occurring between 6 pm and 6 am, occurring at weekends, occurring in bars, pubs and clubs and involving three or more people and often strangers or unacquainted individuals. It is on that basis that we have some data on assaults.

We have looked at our assault data. At the point of a call when someone rings an ambulance, we basically put you into one of 33 categories. One of those categories could obviously be chest pain or a heart attack and another is assault/sexual assault. So we group that together and we can report on that. We have looked at a time series starting from 2003-04 to 2008-09. Over that period between 8 pm and 5 am we have seen an increase of around 76 per cent. Over a five-year period, using 2003-04 as the base year, it has gone up by around 76 per cent. If we then dice that to 12 am to 5 am, the calls for assaults have gone up by around 83 per cent.

**Mr WELLS:** Could you say that last sentence again, please?

**Assistant Commissioner Eeles:** It was 76.2 per cent between the hours of 8 pm and 5 am. Again, this is in our written submission. We also broke it up into 12 am to 5 am, and that has increased by 83 per cent. Over that period, our overall demand for service has increased by around 40 per cent. As you can see, our natural demand for increase over that period of time is, in aggregate, about 40 per cent. The assault codes have gone up 76 per cent between those later hours in the day overall and 83 per cent from 12 midnight to 5 am.

One of the things I want to do is caution people about that. There are weaknesses in our data. A call comes in; people say what they think is occurring; we then code that as an assault if that is what it is. However, there could be other items that someone could ring in that we have coded as unconscious that could be as a result of an assault—who knows. It could be a traumatic injury that it has been coded as, but we do not know—or haemorrhage, lacerations, falls; they are all part of the 33 categories. We have basically looked at the assault category. It could be understated, and then that is difficult.

As you can imagine, you have the point of call in the communications centre where we code that. The officers go there, they fill out their ambulance report form and, as I said before, that is where the difficulty arises for us because we are only going to record from there onwards what the treatment was, not the cause.

Anecdotally though, if we were to get our staff together—and we are constantly hearing things from our on-road staff that alcohol related violence cases and other jobs related to alcohol misuse are increasing and now make up a considerable portion of the workload, particularly on night shifts. From our perspective it may be useful to conduct a series of focus groups with staff to further explore the impact of alcohol misuse on their workload and also on the physical and emotional stresses experienced by paramedics dealing with the increase of this type of work, particularly on night shifts.

We were part of a study in 2005—again, we submitted this in the evidence—which was a joint study by the Crime and Misconduct Commission, QUADREC and our own Australian Centre For Prehospital Care Research. It is called the PADIE study. It looked at 14 consecutive days of people attending an emergency department. There were some interesting findings from that. There were 1,202 people in that study and 26.7 had arrived by ambulance and 21 per cent of the presentations had consumed alcohol in the day prior to presenting to the emergency department. Of these, 35 per cent had drunk at levels described as risky or high risk according to the NHMRC guidelines and 8.3 per cent reported consuming alcohol in the six hours prior to arriving at the ED. However, when you then look at the ED records, only 2.8 per cent of ED presentations during that data collection period were coded as alcohol, using the ICD code 10. It is grossly underreported and that is the key issue that comes out of that.

The other thing that these people admitted to or said had occurred when they did the study is that 17.6 per cent of the males and 7.3 per cent of females reported that they had been physically violent toward another person—an individual—because of their alcohol use in the last 12 months and 37.8 per cent of males in the study and 22 per cent of females reported they had been physically assaulted due to someone else's alcohol use, which is interesting. Again, we concluded from that that there is an underestimation in the data presented to you on the effects of alcohol in terms of ambulance incidents and ED presentations because people report on what the injury is and what the treatment is but not what the cause is. It is very much an understated issue as far as we are concerned.

In terms of our paramedics, I noted that another item that you probably wanted us to speak about was the impact of alcohol related violence on our workforce. We have recently put in better systems to capture these sorts of events of assault. From 1 July to 30 June we had 107 incidents of reported assault. However, it is a very broad classification. So it could be violence, it could be yelling or all sorts of other things, but it was what the person thought was an assault. We have not been able to find out if the person who was doing the assaulting was actually under the influence of alcohol. Our difficulty has been that.

If you look at the literature, again, there are clear indicators that suggest that ambulance officers experiencing alcohol related violence—for example, there was an Australian study that identified that 38 per cent of metropolitan and rural paramedics in Victoria and South Australia had suffered physical abuse in the course of their employment as paramedics. An additional Australian study concerning workplace violence in the health sector revealed that ambulance officers reported a comparatively high level of exposure to violence and a wide range of high-risk settings, and potential perpetrator groups were identified. Occupational violence was reported to be commonly perpetrated by young males affected by drugs or alcohol. Ambulance officers appeared to be most at risk when called to isolated sites, domestic premises and situations where the potential patients and bystanders were also affected by drugs or alcohol.

An earlier American study identified that exposure to violence and abuse was nominated as the primary occupational stressor for paramedics and noted that 70 per cent believe they were not adequately trained to handle abusive situations. After experiencing assault, paramedics in this study cited feelings of anger, irritation and fear. As a consequence of that and of the increasing number of assaults that are being reported—and, again, we are not necessarily sure that that is because there is a real increase or the reporting systems are now better; it is one of those and it is difficult to actually work that out—here in Queensland we are just about to commence a tactical communication training program, which is a similar one to the Queensland Police Service model. We are actually now training our people to better handle violent situations, which includes tactical communication, situation awareness, conflict dynamics, safety philosophy, threat assessments, open-hand tactics and tactical withdrawal, which is probably very good.

Our problem is that it is very difficult for us to provide very good evidence in regard to alcohol related violence because, put simply, it is very difficult to actually find out someone's blood alcohol content and what they have actually been taking. We do note that there has been a rise in assaults. From our perspective, we will probably do a bit more research into that area to actually get more evidence of what the actual cause is.

**CHAIR:** Firstly, you brought up going through crowds and so forth in areas that may have people on alcohol or drugs. I have to say, I did a night shift with the ambos down my way. We were called to a nightclub. I was appalled at the way no-one would let them through. It was just amazing. I think we see that on our streets when there are sirens blazing and no-one pulls over any more. I think as a society we really have lost that respect for our emergency services that they are on their way to a life-threatening situation

and we should let them through. I certainly understand your statement there. The other thing about Fortitude Valley when we toured there was the amount of ambo or first aid work going on—we talk about police being busy; I have to say I thought the ambulance were just as busy.

**Assistant Commissioner Eeles:** Very much so.

**CHAIR:** It certainly is affecting the ambulance area. I want to put to you in relation to the study—and I do not know if Queensland ambulance has looked at this. In the UK the Police Service undertook a trial where an ambulance staff member patrolled with a police officer. We may as well say the QAS patrol takes control and they have a police officer come along. They were looking at reducing the need for people to go to the emergency departments particularly on Friday and Saturday nights, and obviously having that police officer there looks at the safety side of things. Have we looked at that at Queensland Ambulance Service? Can you comment on that at all?

**Assistant Commissioner Eeles:** No, but I understand. Especially where you have high-density entertainment areas in peak periods it sounds quite a good thing to trial and it is something that we would consider doing. We have not actually done a trial like that before, but it is certainly something we would consider.

**CHAIR:** The other thing I noticed in Victoria was the ambulance officers on push bikes, especially in the city area and at events. Would entertainment precincts such as The Valley because of the large numbers be something to be considered?

**Assistant Commissioner Eeles:** Where bicycles are used it is often in daylight, in large events and more family oriented or big events. I suppose the other side would be it might pose also an unintended consequence of a higher risk to our officers by jumping on a bike in those areas. I still think there would have to be a real understanding of the risk involved in that.

**Mr CRIPPS:** Thank you for making yourself available and coming to our inquiry today to give evidence. I want to take you back to your submission and your opening statement about the data from the 2003-04 year to present in relation to ambulance data that shows an increase in the number of responses by the QAS to assaults or sexual assaults which relate to alcohol. I do not know how long you have been with the QAS. Given that you are an assistant commissioner it might have been a successful career for you and you have been with the QAS for some time. But in terms of a cluster of assaults during those late-night periods when licensed venues are now closing at three, four and five in the morning, is it your experience as a long-serving QAS officer that when licensed premises closed at midnight there was a cluster of call-outs for the QAS between, say, 11 and two and when licensed premises closed at 6 pm decades ago, was there a cluster of QAS call-outs between, say, 5 pm and 9 pm? My question is: do you think it would be effective if trading hours were moved around in response to concerns about alcohol fuelled violence?

**Assistant Commissioner Eeles:** It is a really difficult question to answer because there are lots of other variables that come into play. I am reluctant to give my personal opinion because with these sorts of inquiries the more you can get that is validated by real evidence about it the better. I suppose we chose those time frames to report on because you are putting between eight and 12 and 12 and five. We can break that down by hour of day if the committee would like that. But it is very difficult. The other side of it is that we have only really got good data from 1 July 2003 when we actually put our new CAD into play. So we have actually been able to extract better quality data. Prior to that it was a card system. Getting really good data to base good public policy on is paramount but very difficult for us to provide in that regard. It would really only be anecdotal comments. I certainly believe there will be different views in the service about all of those questions. You could probably get a whole range of responses.

**CHAIR:** I imagine areas would play a part in that.

**Assistant Commissioner Eeles:** Yes.

**Mr CRIPPS:** Our inquiry's referral from the parliament relates to alcohol fuelled violence in relation to licensed premises and in the community. But it would be silly for us not to acknowledge that in our public hearings and in our visits to licensed premises across the state and again today the issue of the relationship between alcohol and drugs at licensed premises has come up. On the ground perhaps the QAS would be the most qualified to give evidence or give a view about the role that drug taking as opposed to the consumption of excessive amounts of alcohol is having in terms of ending up in a QAS call-out to give medical assistance.

It is not part of your submission because your submission today has related directly to the terms of reference that we have asked you to comment on. As a consequence of our inquiries we have heard this other evidence in terms of what relationship drug taking has with these issues. Would you like to offer a view? We take it on board that it is not part of your formal submission, but would you like to offer a view to the committee about the relative prevalence of drugs as an issue that is tied up with violence at licensed venues?

**Assistant Commissioner Eeles:** It is very hard to unravel them. We take a view when we treat patients that there could be a mixture in anybody. They might have had some illicit drugs; they might have had alcohol. We basically treat anyone as if it is a cocktail. That is the real problem. Basically we are focusing on airway, breathing, circulation—making sure they are okay.

**Mr CRIPPS:** You are focused on treating the patient, of course.

**Assistant Commissioner Eeles:** What we are not able to do is then get a blood sample or whatever to actually tie that down to what did they actually take. That is the missing piece of evidence.

**Mr BLEIJIE:** Why can you not get the blood sample?

**Assistant Commissioner Eeles:** We do not have a protocol to take it.

**CHAIR:** Even if you did, it would take time to get that done—

**Assistant Commissioner Eeles:** You need to link it all up.

**CHAIR:**—to get the results back, would it not? You would not know that, anyway?

**Assistant Commissioner Eeles:** At the same time we will take our patients to an emergency department. The emergency department would run a series of tests. They would take a blood sample and run a series of tests to work out what they are dealing with over time. They would do that. It is really then about linking that. When we were part of the PADIE study the issue was that what gets coded is often the person's actual injury but not the cause of the injury as the chief complaint. So the chief complaint is not that they have drunk alcohol; the chief complaint is that they have a broken leg or they are unconscious. That is why the usefulness of this PADIE study was that when all those people were interviewed it was really quite amazing: a large number of people had consumed alcohol and a large number of people had said that they had either been involved in physical violence because of alcohol or they believed they were a recipient of an assault because of alcohol. But it does not end up being as the coded category. We are all of the view that it is very much an understated issue in the data.

**Mr KILBURN:** I was going to ask the same thing that was asked by Mr Cripps. The proposal has been put to this committee—and I know Andrew asked you for your anecdotal evidence. We do roadside random drug testing now. Would it make a difference to the way you treated a patient or would it be handy to know if someone who was in an ambulance had taken drugs?

**Assistant Commissioner Eeles:** It will not change the treatment, but anything that gives you a better understanding of what is the underlying cause of somebody's condition is always good. If you have a look over time, we have introduced many things in the Ambulance Service. Once upon a time you were not able to find out a blood glucose level on a diabetic. Now you can and you then can treat it. The more you know about what someone has taken, the earlier it is you can start the right treatment. However, in the prehospital care environment, the treatment will always be pretty much the same: airway, breathing, circulation, getting them to the ED and the ED would then look at that.

**Mr KILBURN:** I know you do not work for Queensland Health in the hospital environment, but would the hospital keep those records? If they take blood tests from people, would they test for drugs or only if the police have asked them specifically to test for drugs?

**Assistant Commissioner Eeles:** I know that you are probably going to get a witness from the ED. So I was hoping they would answer that question.

**Mr WELLS:** Thanks very much for the information that you have given us. The information is uniquely valuable. I remember in the first year of criminology the teacher said to me, 'You can't get any accurate criminological evidence except the murder rate; you can count the number of bodies lying around but everything else just reflects the level of reportage.' However, what you have given us is something which is not rubbery like that. This does not reflect the level of reportage; this reflects the number of people in need. Your figures between 2003-04 and 2008-09 are that there has been a 76 per cent increase in assault and sexual assault call-outs. That is clearly a valid figure showing an increase. The committee did not have that information, did not have any actual proof that there had been an increase in what we are investigating until we had that figure. Of course, there are newspaper reports and there is anecdotal evidence, and these things have a certain amount of validity. However, the people who are telling those stories have a vested interest in telling the stories, whereas you are giving us statistics which have an independent validity. That is enormously valuable. I note a 76 per cent increase in call-outs in respect of assaults and a 40 per cent increase in overall demand—that 40 per cent increase in overall demand is an enormous increase.

**Assistant Commissioner Eeles:** Yes.

**Mr WELLS:** Why so much?

**Assistant Commissioner Eeles:** There has been a lot of work around that whole issue. In fact, we have a linkage, a grant, and are working with the University of Queensland and others on that exact issue—why is the demand for emergency health services and ambulance services rising? Some of it can be explained through an ageing and growing population, chronic diseases and a whole lot of things like that. It is a very difficult issue to actually have a single answer for. We believe that there are probably 20 or 30 variables at play that are increasing the demand for emergency ambulance services.

Over that period from 2003-04, yes, we have had that. The other variable at play that it is also important to know is that we are only reporting those people who called us. What we could be seeing is a phenomenon where people are actually now calling us more or are actually more open to calling us. It is difficult to say whether that is a real demand increase in actual assaults or it is just that more people are now ready to call us in an environment where, dare I say, you have community ambulance cover? When we did some analysis of different cohorts of age groups before that system was introduced in terms of the

subscriber system, we knew that that particular group was the bulletproof group that potentially did not subscribe. There are so many variables at play. It is very difficult to put your finger on any particular one in terms of a policy driver. Everyone has great difficulty answering that question. If I could answer it, it would be good.

**Mr WELLS:** Nevertheless, the statistically significant point is that the overall increase is 40 per cent whereas the increase in call-outs with respect to assaults is 76 per cent—

**Assistant Commissioner Eeles:** Much larger.

**Mr WELLS:**—and between 12 am and 5 am it is 83 per cent. These are call-outs to victims, not to the perpetrators.

**Assistant Commissioner Eeles:** Correct.

**Mr WELLS:** And you said, nevertheless, that a massive proportion of these people had reported alcohol consumption or that their perpetrator had been consuming alcohol.

**Assistant Commissioner Eeles:** No, what I said was that the literature has established associations between physical and sexual assault, alcohol consumption and time of drinking patterns. So according to the literature, it is reasonable to have an assumption that as people drink more, and if you have assaults on the rise, there is a likely link. What we have not been able to do—and this is the weakness of our data—is that we cannot categorically say to you that that 76 per cent rise in assaults is absolutely alcohol driven. We cannot say that. We do not link it together.

**Mr WELLS:** As you said, you do not have a protocol for taking—

**Assistant Commissioner Eeles:** No, it is not that we do not have a protocol; it is just that the way in which we capture our data will not do that. We are basically saying that, because the literature is fairly clear in terms of drinking and violence—the more you drink, aggression and violence and the rest of it—it is a reasonable assumption to say that as people are drinking and as our rate of assaults is going up, it is likely that there is a link.

**Mr WELLS:** I asked you: did you want a protocol? What I really meant by that was: would it get in the way of emergency treatment to have a protocol that enabled that statistic to be kept?

**Assistant Commissioner Eeles:** One of the good things in the prehospital environment is that when people ring a paramedic they are not ringing the Police Service. So they feel comfortable that the paramedics are there for their welfare. Once you start putting in place mandatory reporting and other sorts of protocols or conditions, then that sometimes has the effect of people not calling. We do not do any mandatory reporting for that reason. We have always resisted mandatory reporting, mandatory taking of bloods or something like that simply because you can actually have the unintended consequence of people not using you.

**Mr WELLS:** That would be quite so. However, if you were to simply ask, 'Have you been drinking? Have you been taking drugs?', the people who were asked those questions might see that as information that would be useful for medical purposes and in the context of their medical treatment they are likely to give you a truthful answer. It could be something that could be undertaken by you with a legal background that ensured that this was not incriminating for them and just went to their medical evidence. The government could do that. Would that be a desirable thing to do?

**Assistant Commissioner Eeles:** We do that. In terms of the ambulance report form there are certain boxes that are coded and then there are free text fields. In the free text field we will elicit the best history possible. All those questions will be asked and it may even be that we might ask third parties. We would then preface that in the documentation. Quite often at those times of an emergency where people are quite scared about their friends they do tell you pretty well what they have had. That is in the free text field.

The earlier issue that I come back to is that what we do not do is take those 600,000-odd patient records per year and then look at the free text fields and try to then come up with some public health evidence. When we do things like that, it is quite resource intensive. If there is funding available to do those sorts of things—that is why we have a prehospital care research unit. However, some of those studies would be quite resource intensive but still necessary and it would be interesting to do those studies to try to link the assault incidents with the patient care records to actually see what the link is and what has been written down to try to get a better understanding of it.

**Mr WELLS:** So then it is not core business of the Ambulance Service. You believe that you have information there that would be of use to the government?

**Assistant Commissioner Eeles:** I think that there is a lot of information in patient care records that, with the right research processes, you can gain very good information for making good policy decisions—definitely. How you go about that—there are the usual ethical considerations and all that sort of stuff. That is why this particular research paper that was done on the Gold Coast is a good example of actually—it is quite intense. Every single consecutive patient for a 14-day period who arrived at the ED was interviewed. You really do get very good information. So when we have done those sorts of research exercises with all the right ethics you get a much better understanding of what the issue is and you have better evidence to make better decisions on—definitely.

**Mr WELLS:** The way we go about it, to answer your perhaps rhetorical question, is that this committee could make a recommendation to the effect that non-identifying information be collected from those data sources in order to determine the extent of alcohol and drug involvement in the events that you were responding to. Thank you very much for what you and your service do for our community.

**Assistant Commissioner Eeles:** We had actually put in the submission that there is a lot of information if there was a separate study done on those sorts of things.

**CHAIR:** I want to raise with you something that has been raised with me by the police. They are saying that they are getting called more and more to go in with ambulance officers to certain situations in regard to assaults and so forth. Would you agree with that? Would you say it has a lot to do with alcohol fuelled violence?

**Assistant Commissioner Eeles:** Again, I will go back to the fact that, anecdotally, if you get a bunch of paramedics and do focus groups and those sorts of things, we are pretty confident that is what they will be saying.

**CHAIR:** Thank you very much. I would like to thank everyone for coming here today, especially our witnesses for making time to speak with us. With that, I declare the hearing closed.

**Committee adjourned at 12.37 pm**