



# ***ECONOMICS AND GOVERNANCE COMMITTEE***

**Members present:**

Mr LP Power MP—Chair  
Mr MJ Crandon MP (virtual)  
Mrs MF McMahon MP (virtual)  
Mr RA Stevens MP  
Mr A Tantari MP

**Staff present:**

Ms L Manderson—Committee Secretary  
Ms R Mills—Assistant Committee Secretary

## **PUBLIC HEARING—INQUIRY INTO THE PUBLIC HEALTH AND OTHER LEGISLATION (FURTHER EXTENSION OF EXPIRING PROVISIONS) AMENDMENT BILL 2021**

### **TRANSCRIPT OF PROCEEDINGS**

**MONDAY, 19 JULY 2021**

**Brisbane**

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### **The committee met at 10.32 am.**

**CHAIR:** Good morning. I declare this public hearing open. I respectfully acknowledge the traditional custodians of the land on which we meet today and pay our respects to elders past and present. We are extremely fortunate to live in a country with two of the oldest continuing cultures in Aboriginal and Torres Strait Islander peoples. My name is Linus Power, the member for Logan and chair of the committee. Other members of the committee joining me today are: Ray Stevens, the member for Mermaid Beach and deputy chair; Adrian Tantari, the member for Hervey Bay; Michael Crandon MP, the member for Coomera, joining us via videoconference; and Melissa McMahon MP, the member for Macalister, joining us via teleconference. The member for Ninderry is unfortunately unable to be with us for today proceedings and sends his apologies.

The purpose of today's hearing is to assist the committee with its examination of the Public Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill 2021. We thank all of our many submitters to this inquiry and the input they provided, including a significant number of individuals who may have been contributing to a parliamentary inquiry for the very first time. We appreciate the public's keen interest in the matters we are examining. The hearing is being recorded and broadcast live on the parliament's website and a transcript of the hearing will be available in due course. Providing you are not joining us this morning via videoconference connection on your mobile phone, I ask all those participating to please turn off mobile phones or switch them to silent and also to place microphones on mute unless you are speaking. This will prevent audio interference and background noise.

### **GRACE, Ms Sara, President, Queensland Chapter, Australian Lawyers Alliance**

**CHAIR:** Good morning and thank you for joining us today. I invite you to make an opening statement after which committee members may have some questions for you.

**Ms Grace:** Good morning. The Australian Lawyers Alliance welcomes the opportunity to appear before this committee this morning. The ALA is a national association of lawyers, academics and other professionals dedicated to protecting and promoting justice and human rights. We estimate that our 1,500 members represent up to 200,000 people each year in Australia. The ALA is represented in every state and territory in Australia. In Queensland, the ALA has approximately 450 members. The ALA has a number of national policy special interest groups, one of which is the criminal law special interest group which has been particularly concerned about the issue which is the subject of this submission.

As noted in our submission, the ALA's concern and focus is for the need for legislative protection of the data collected through the Check In Qld QR code contact tracing app. The ALA submits that there is a need to provide greater legislative protection to ensure that all personal data collected through that app is properly, safely and securely used for the advertised purpose, particularly that such data is not used for other purposes such as by police in the course of criminal or other investigations.

The ALA considers that widespread use of the QR code contact-tracing app such as the Check In Qld app is a crucial part of the strategy to prevent community spread of COVID-19. However, widespread adoption of such apps is dependent on members of the community having absolute confidence and trust that, when using these apps, their data will not be used for some purpose other than for what has been advised—namely, used only to assist with contact tracing for the purposes of responding to the pandemic. The ALA considers that using the data for other purposes is a misuse of data that has been based on information provided by individuals on the understanding that it will be used for a specific purpose. For example, as noted in our submission, the ALA submits that public confidence in the QR code system will be weakened unless access for police acting under a court warrant is removed so that no agency other than the relevant health department can use the data.

The ALA does not consider it sufficient protection that the Queensland police must obtain a lawfully issued search warrant to access the data from the QR code app. The ALA also considers that the new QPS policy that directs officers not to apply for a search warrant in relation to data  
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gathered for public health purposes collected by COVID-19 tracing apps, except in extraordinary circumstances, is inadequate. It will not provide the public with confidence that their data will only be used for the purposes intended for managing the COVID-19 pandemic.

The ALA welcomes the West Australian government's passing of legislation to prevent police accessing data from the SafeWA app to gather intelligence, even for serious criminal investigations. The ALA considers that similar provisions should be included in the bill currently under consideration to prevent police from accessing data from the Check In Qld app.

**CHAIR:** We will now move to questions.

**Mr STEVENS:** I understand that your job in representing the ALA and your constituency is to protect the innocent. I suppose that means making sure that lawfully obtained warrants by the police are not a methodology used to help convict clients. What if that information could be lawfully collected to protect your clients' innocence? Would you then be still against the police collecting that information under a lawful warrant?

**Ms Grace:** I take your point. The issue is about the confidence in the app, there being protection so that the public can use the app as intended and that they can trust that it will not be used for any purpose other than contact tracing. To answer your question, regardless of the purposes the data might be used for, it is about the public confidence that it is not going to be used for anything else other than contact tracing.

**Mr STEVENS:** Is the only issue you have that the police would have access under a lawful warrant? Is that the only issue that you have with the extension of this period through to April next year?

**Ms Grace:** Essentially, what we are saying needs to be put in place is something that gives the public confidence that it is not going to be used for anything other than the contact tracing. I do have some suggestions here in terms of what provisions could be made to legislation, if you would like to hear those?

**Mr STEVENS:** Certainly, with the chair's permission?

**CHAIR:** Certainly, Ms Grace.

**Ms Grace:** We suggest to amend or insert a provision in chapter 7 part 1 of the Police Powers and Responsibilities Act whereby a warrant will not be issued to access the data. We could insert a provision in the Privacy Act 2009 to specifically address this issue of digital data collected for contact tracing or we could amend or insert a provision in the Evidence Act 1977 to specifically exclude evidence that has been extracted from the database. Section 130 of the Evidence Act is a blanket provision giving judicial officers discretion to exclude it. However, it is unknown how judicial officers may approach this particular topic and, therefore, to ensure public confidence a specific section in the Evidence Act may be required.

**Mr TANTARI:** In relation to your call for amendments to be introduced into the Queensland legislation that mirrors those implemented in WA to prevent police accessing data, have any other Australian jurisdictions legislated to specifically protect the data collected by any of their COVID related check-in apps? Further, what is the situation internationally? Are you aware of any countries that have legislated protections for their contact tracing systems?

**Ms Grace:** Not that I am aware of, but I will have to take that question on notice and come back to the committee.

**CHAIR:** This is reasonably anecdotal, but I know that in the electorate of Logan people are quite confidently using the apps and providing that information should there ever be a site declared an exposure site. Is there much research or evidence that suggests that there is a problem with the public perception about using the check-in code?

**Ms Grace:** I would have to take that question on notice. Anecdotally, there is certainly concern that the app might be used for other purposes, especially in light of the details in front of me. There was the instance where the police did access contact tracing further up north when the taser was stolen. It is those sorts of situations that make people ask the question. The point here is that we want people to be using it always, so they have to have absolute confidence that they can do that safely and securely.

**CHAIR:** I guess the question is whether that has any effect on the public's behaviour or use of it. I thank you for your answers.

**Mr STEVENS:** The Commonwealth government's COVID Safe app has a legislative protection for its data. Is the ALA supportive of the level of protection provided by the Commonwealth legislation?

**Ms Grace:** Yes.

**Mr STEVENS:** Totally, yes.

**CHAIR:** Your submission and your evidence was reasonably clear. We thank you very much for your appearance here and appreciate the submission from the Australian Lawyers Alliance. Thank you for your time.

**Ms Grace:** Thank you.

**Mr STEVENS:** Chair, we have Ms Grace's suggested changes to the legislation? We will get it through *Hansard* anyway.

**CHAIR:** Yes, that is correct. Thank you for appearing before the committee today. There were no questions taken on notice.

**Proceedings suspended from 10.43 am to 10.54 am.**

**CORNFORD-SCOTT, Ms Angela, Chair, Succession Law Committee, Queensland Law Society (via videoconference)**

**DUNN, Mr Matthew, General Manager, Advocacy, Guidance and Governance, Queensland Law Society**

**SHEARER, Ms Elizabeth, President, Queensland Law Society (via videoconference)**

**CHAIR:** We now resume our proceedings and welcome representatives from the Queensland Law Society. Thank you very much for joining us today. I would like to invite one of you to make an opening statement, after which committee members will have some questions for you.

**Ms Shearer:** Thank you for inviting the Queensland Law Society to appear this morning. In opening, we would like to acknowledge the traditional owners and custodians of the land on which this meeting is taking place and pay deep respects to elders past, present and emerging. The Queensland Law Society has welcomed the opportunity to work with the government in respect of legislative measures to respond to the pandemic. The measures that relate to the use of technology to facilitate the execution of legal documents and the conduct of legal proceedings have been widely welcomed by our members and we continue to work with the government in relation to the permanency of the appropriate measures.

You have our submission but I would like to draw your attention to two issues. The first is the important issue of access to lawyers for people in aged care, hospitals and other accommodation subject to restrictions on visitors. Under earlier directives, legal practitioners were permitted to visit clients in these settings. Currently we are not. The provision allowing for the remote execution of wills has expired, so the effect of this is that a lawyer cannot attend upon a person living in one of these settings to take instructions for and arrange execution of a will. This is a serious and urgent issue that requires immediate remedy.

The second issue is the need for improved scrutiny and oversight to ensure that the limitations placed on human rights by the emergency response remain justifiable and proportionate. Legislation was passed urgently in an emergency period which imposed significant restrictions on fundamental human rights, such as the right to freedom of movement, the right to enjoyment of property and the right to humane treatment in detention. The usual system of checks and balances has been suspended. Effectively, the rule of law has been suspended because a range of decisions of executive government have been put beyond challenge.

The extension proposed by this bill would see that suspension continue for more than two years, and this is not appropriate. There is no doubt that the public health threat from the pandemic is present and evolving, and executive government does continue to need the capacity to respond swiftly and flexibly. However, it is time that some important elements of the rule of law are reinstated. We have had the opportunity to review the submissions made to this inquiry and we support the submissions of the Queensland Human Rights Commission generally and in particular the need for further safeguards, the need for a review process for people issued directions to isolate and the need for humane treatment in detention.

Finally, we call for better scrutiny and oversight over all COVID-19 related legislation and executive action by a parliamentary committee. This committee should be able to inquire into these matters without a specific referral from the government and should be able to receive submissions by the public. As you know, I am joined by Matt Dunn and Angela Cornford-Scott and we are happy to take the committee's questions.

**CHAIR:** Thank you. The deputy chair has a question.

**Mr STEVENS:** You raised a matter that this legislation will extend what you indicated was a breach of the rule of law for two years. Could you explain to the committee what areas so far in our 18-month period of this extended strong legislation to respond to the pandemic and the crisis as it were that were necessary for this legislation? Could you identify those issues in the past 18 months that this legislation has raised?

**Ms Shearer:** I think the issues are very succinctly explained in the Human Rights Commission's submission, but the ones of particular concern are the freedom of movement, the property rights and also the treatment of people in detention. They are the three that I would highlight. It is all a matter of balance. In extraordinary times in a democracy, we accept that the executive government can do things that in other times would not be appropriate, but as the situation evolves and it becomes I guess still a very serious situation but without the need to do things as quickly as

were done in response to the emergency, no, we would say that it is time for some of those checks and balances to be reinstated. In particular, there are decisions of executive government now that are not subject to any review. One of the usual hallmarks of a democracy like ours is checks and balances subject to review for decisions, and that is not able to occur at the moment.

**Mr STEVENS:** We have had a presentation already of the Queensland Law Society from the Australian Lawyers Alliance. It is the old joke: one lawyer moves into town, goes broke, but two make a profit. Could you comment one way or the other on the submission from the Australian Lawyers Alliance about stopping police under a properly legally issued warrant from accessing information provided by the app that everyone is signing in on? Could you comment on whether or not they should be able to access that information?

**CHAIR:** The deputy chair is making reference to the Check In Qld app.

**Ms Shearer:** We share the concerns raised by the Australian Lawyers Alliance about appropriate privacy protections for that data and it not being used for other purposes. I do not know if you want to add anything to that, Matt.

**Mr Dunn:** Certainly, in terms of giving the public confidence about being able to check in at every location they go to, I think that is one of the parts that plays into this concern—that there should be some degree of privacy around that information. I would also probably note for the committee that metadata from telecommunications systems is available under the metadata retention scheme that the Commonwealth manages and deals with. For warrant access and law enforcement access, there are a number of methods to be able to access that information. I guess one of the concerns is to not disincentivise people to check in at every place they go to through some concern that the police are going to trawl through the records to find out where someone was at any particular point in time. It is that balance that the president spoke to—around achieving the right public health outcome versus the curtailment of liberties—and ensuring that we get that balance right in that circumstance.

**CHAIR:** So the Queensland Law Society is concerned about the health efficacy of using the Check In Qld app. That is your primary concern—about whether it reduces people participating. It is really about a public health initiative that you are giving your policy suggestion about?

**Mr Dunn:** No, not at all. What I was suggesting is that we are concerned about police being able to access that information and the effect that may have to reduce people buying into the public health initiative.

**CHAIR:** So that is why it is a public health concern that you have?

**Mr Dunn:** In that particular context, that has a public health—

**CHAIR:** Not necessarily a privacy concern, because you have noted that the police would easily be able to access the self-owned tower data. It is more about public health that you are concerned that there may be a reduction in people participating in it.

**Mr Dunn:** I would think the government would want to incline people to engage in that particular activity—

**CHAIR:** But that is your primary concern—public health?

**Mr Dunn:** It is the privacy aspects and the public health aspects together.

**Mr STEVENS:** Does that mean that the Queensland police can access that federal metadata of the telecommunications without any issues crossing borders under a warrant?

**CHAIR:** If I could put the question again. The police would be able to look at the telephone of a suspect which had the Queensland check-in app on it and see which towers it accessed at a particular time as part of their normal investigations and the powers they have once they get that warrant?

**Mr Dunn:** My understanding is that that is the data that is available through the Commonwealth metadata scheme—all of that metadata with respect to which towers were available. I am not an expert in the cooperation arrangements between the Federal Police and the state police. I understand there are some arrangements in place, but I am not an expert in that particular area. Certainly all of that information with respect to towers and connections is available to the Australian Federal Police and there is a system to deal with that. We could come back to you, if you would like, around what type of sharing arrangements there might be in place, although we are not the experts in inter law enforcement agency sharing arrangements.

**Mr STEVENS:** I would like the information back if I could, Chair, in terms of whether the state police have undeniable access to federal telecommunications matters for their own legal purposes under warrant.

**Mr Dunn:** I am happy to take that on notice.

**CHAIR:** If you could get back to us. In the previous session the deputy chair put forward the scenario that if someone is seeking to defend themselves against a charge and wished to assert they were in a particular place and that the check-in app would reveal that, would the defendant then be able to access that data from the Check In Qld app database?

**Mr Dunn:** I am sorry, Chair, could you repeat the question?

**CHAIR:** This is usually when the police would access that data, but if a defendant felt that the data held by the Check In Qld app might exonerate them or prove they were in a different location, would the defendant be able to access that data?

**Mr Dunn:** From a technical point of view is the system capable, or should it from a policy point of view?

**CHAIR:** Would you recommend that the defendant not be able to access the data about their movements?

**Ms Shearer:** I think the privacy issue does not arise if it is a defendant seeking to produce data about where they have been. The privacy issue arises if this app, which is developed for public health reasons, suddenly turns into a law enforcement tool without proper scrutiny and protection.

**CHAIR:** Before we asked the question about whether this was something to do with privacy or more to do with people's confidence. You were suggesting as a policy decision that the Check In Qld app should be enhanced for better health outcomes, so that is why I asked that question earlier.

**Ms Shearer:** I think our concern is both privacy and public health. Privacy does not arise as an issue if it is somebody seeking to access their own data. The concern arises if it is a third party seeking the data.

**CHAIR:** You are asserting that the individual should be able to access Queensland Health data if it helps establish a defence because it is their data.

**Ms Shearer:** Yes, I am saying there is no privacy issue with that.

**Mr STEVENS:** Moving to another area that you mentioned, access to aged-care facilities, hospitals—and I suppose correctional facilities come into that as well for the signing of wills or whatever—are you aware of any other Australian jurisdictions that are allowing people in lockdown in these aged-care facilities, hospitals et cetera to be accessed by their lawyers?

**Ms Shearer:** I am not sure what is occurring in other states, but previously in Queensland we had access. It is only with the latest public health directive with the lockdown from a few weeks ago that that access has been constrained.

**Mr STEVENS:** But that access would have been enabled from the original legislative matters. You say it was been in place for 18 months and it is only now that we have gone into that lockdown period that they are denied that access, is that correct?

**Ms Shearer:** No, I am saying that in the first lockdown last year we had access but we do not now.

**Mr STEVENS:** So the legislation has been changed?

**Ms Shearer:** Yes. It is a bit complicated. We had a letter from the Chief Health Officer that made it clear that lawyers had an exemption for hospitals last time.

**Mr STEVENS:** And aged care?

**Ms Shearer:** There was not a letter about aged care, but until 30 June this year we also had the facility for the remote witnessing of wills. We had two things: we had access and we had remote witnessing, and now we have neither of those. I am not sure if you want to add anything to that, Angela.

**Ms Cornford-Scott:** Yes, that is correct. There were times when we have not had access to aged-care facilities, but of course we previously had legislation that enabled us to witness documents via videoconference facility so that we could, in those urgent circumstances, facilitate the execution of an enduring power of attorney or a will. Those regulations have expired, and of course around the time they were expiring we enjoyed a period of time where we did not have any lockdowns nor concerns about that. Since the regulations have expired we obviously have encountered some more difficulties. In the absence of having either the ability to witness those important documents by some remote means or having access into those institutions, we are not able to give effect to instructions from people who need to put in place those important documents.

**Mr STEVENS:** That regulation could be put back in place within this legislation, is that correct? It was a regulation you were talking about, as I understand it, that allowed for it. It has expired, but could that regulation not be put back in place again under this particular legislation?

**Ms Cornford-Scott:** That is my understanding, yes, it could be put back in place.

**CHAIR:** Has the QLS engaged in consultation to see that regulation put back in place?

**Ms Cornford-Scott:** My understanding is that there has been some discussion. I might ask Matt if he is able to elaborate on that.

**Mr Dunn:** These particular witnessing provisions were removed or came to an end on 30 June. The Queensland Law Society was one of the organisations that asked for that to occur. At the particular time those submissions were made the delta variant was not something that had graced our shores and caused the problems that it has at this point in time and things were looking quite good. It looked as though access to these sorts of residential and aged-care institutions would be sufficient in order to achieve this. Capacity is obviously one of the significant issues of witnessing these types of documents as well as ensuring that duress and fraud are not present. They are slightly more complex than other types of affidavits, deeds, statutory declarations and things. There is a different order of magnitude in that particular place.

This has only just recently come off. QLS has talked to the department very briefly around where the thinking is with respect to this, but it does take a little while to turn these regulations around and there is a significant amount of work for the department in this. It is just about determining the balance to get the matters right, to have an appropriate kind of response. It is either a matter of reinstating the regulation or, alternatively, dealing with access to the facilities, especially if we are going to go into a further lockdown or there is a significant prolonged restriction process that could occur.

**Ms Shearer:** If I could just add that it is not just lockdown either, because when the rest of the community comes out of lockdown access to these facilities remains impossible. Currently we are not in lockdown but there is still no access to these facilities until the directive eases, so it is a longer period than you might think just in terms of the short, sharp lockdowns. This restriction tends to go on for a number of weeks.

**CHAIR:** We are very aware of that. As MPs we often deal with people who are restricted from meeting loved ones in aged care. We have a very strong awareness of this. This is not something that the committee is unaware of. It is good that you have brought this up as a concern. This was something that was dealt with before by consultation on regulation and it will probably be dealt with again through consultation on the regulation.

**Mr CRANDON:** Touching on some of the things that have already been spoken about—you mentioned privacy concerns et cetera—is it correct that Queensland police are able to access, for example, credit card records? When we are checking in at various places, we tend to be checking in because we are going to be buying something. We tend these days to be buying by credit card. Could it be just as easy for those privacy concerns of yours to be undermined because they are able to access credit card records, as opposed to worrying about whether or not the person has checked in on the app? I bring this up from the perspective of a police officer was investigating a matter where someone had breached COVID laws, and they were trying to prove that they had in fact breached the law, as opposed to some other criminal offence perhaps.

**Ms Shearer:** If I understand the question, it is that because other data about that person might be obtainable, what is the problem with making this attainable, too? Is that the question?

**Mr CRANDON:** Sorry, somebody else was speaking over the top. Could you say that again?

**Ms Shearer:** Is your question that because somebody visits a restaurant, for example, there will be credit card data potentially about that, there will be mobile phone data potentially about that, so what is the harm in allowing this access?

**Mr CRANDON:** No, I am not suggesting what is the harm; I am asking if you have concerns around privacy with regards to those other ways of accessing the data. I was particularly referencing a matter where police perhaps are investigating a breach of COVID regulations, they would typically ask for credit card records. Is that of concern to you as well, or is that something that is taken as a given, that those sorts of things are available?

**Ms Shearer:** I think the access that police currently have to data is something that has been worked through in a legislative process that has granted them that. Our concern is that this is something for a different purpose and we are concerned that it should not suddenly become a law enforcement tool without appropriate—



**Mr CRANDON:** I take your point on that. You mentioned aged-care facilities et cetera, but you also mentioned prisoners. Have you seen an improvement in the videoconferencing technology available so that lawyers are able to properly work with their clients across videoconference? I have been to many prisons around Australia and there was always the issue of room to be able to set up videoconferencing. Have you seen an improvement in that regard?

**Ms Shearer:** I do not think I can say there are not any constraints. There are still capacity constraints in the system, but our members are not reporting widescale problems.

**Mr CRANDON:** I believe one of your colleagues touched on affidavits, but I was writing notes when he was talking so I was not properly listening. You talked about the witnessing of wills not being available at the moment. I wonder if that also applies from 1 July to the witnessing of affidavits et cetera. I heard the word 'affidavits' mentioned before, so it may have been covered in a previous answer. Are witnessing of affidavits et cetera still available via video link?

**Ms Shearer:** The special arrangements for statutory declarations and affidavits continue, so there is not a problem there. The problem is with enduring powers of attorney and wills.

**Mr CRANDON:** Would that stretch as well to advance health directives and things of that nature?

**Ms Shearer:** I am not sure. Angela may know whether it covers advance health directives. I think so.

**Ms Cornford-Scott:** It is specific to enduring documents. There were specific provisions for advance health directives that I think enabled nurse practitioners to witness instead of medical practitioners. I am not sure if that has continued. That may have come to an end as well.

**Ms Shearer:** I think that one has continued.

**Ms Cornford-Scott:** Has it? Okay.

**Mr Stevens:** There was one other issue I was looking for explanation of—perhaps from Matt. The QLS considered the further extension of some of the measures relating to bodies corporate as unnecessary, including some of the financial relief packages, flexibility for arrangements of meetings and inspection. Just explain why the QLS is of that belief, please, Matt?

**Mr Dunn:** We had a discussion this morning on these very points so we could answer this particular question. The point that we are raising is that there is a number of measures that are about the financial contribution to the sinking fund—the amount of money that the bodies corporate need to maintain and the ability of bodies corporate to be able to take loans. Those measures are the ones that we are talking about as being probably appropriate to cease in September. Those measures were brought in to ameliorate the financial impact of lockdowns and restrictions on the community. The counterbalance of this particular thing is to make sure that bodies corporate have enough money in them to be able to do the maintenance work and to be able to do the structural capital work that might occur to those particular buildings without having to make a special levy down the track.

If you reduce the level of contributions people are making into sinking funds, you are reducing the capacity to be able to do the work that needs to be done; what you are doing, in effect, is pushing off a special levy to down the track which will be a larger impost. We are saying that, on balance, it is probably time to start to look to make sure that those funds are appropriately healthy and prudentially managed so that they can meet the spending needs of the particular bodies corporate.

The other material we are talking about with respect to meetings and facilities and premises, we are not suggesting those should come to an end but be continued because they are important management tools. Bodies corporate need to be able to do work to be able to deal with things, especially if we are having lockdowns and other restrictions—they need to be flexible. But there certainly is a balance to be achieved with respect to the financial aspects, especially of sinking funds and financial management, to make sure that bodies corporate are not under-resourced in order to be able to fulfil their maintenance obligations and the structural obligations and other sorts of work obligations that need to be done on the properties that they own.

**CHAIR:** There being no further questions, I thank the QLS very much for their submission. I also note that it seems extraordinarily fast moving that even since 7 July when the submission was submitted, the events we have seen in New South Wales with the new strain of the virus and how it has made such a big impact on Sydney has been quite profound even in that short time. With that, we will briefly suspend proceedings so we can establish the new section and allow us to get the videoconferences in place. Thank you very much.

**Proceedings suspended from 11.23 am to 11.25 am.**

**COSTELLO, Mr Sean, Principal Lawyer, Queensland Human Rights Commission (via videoconference)**

**McDOUGALL, Mr Scott, Human Rights Commissioner, Queensland Human Rights Commission**

**CHAIR:** We now resume our proceedings and welcome representatives from the Queensland Human Rights Commission. Good morning. Thank you for joining us today. I would like to invite you to make an opening statement after which the committee members will have some questions for you.

**Mr McDougall:** Good morning, committee. In Queensland's dialogue model of human rights protection, the parliamentary committee process performs a critical role in protecting human rights through the scrutiny of new laws. Inquiries like this one assessing if a bill is potentially not compatible with human rights and if a statement of compatibility accompanying the bill is adequate are particularly important when the relevant legislation limits human rights in a significant way.

To ensure that a strong human rights culture is maintained, it is open to a committee to identify when a minister's statement of compatibility requires further justification for any limitations on human rights proposed in a bill. This might occur, for example, when the statement of compatibility does not adequately address the less restrictive options available to achieve the purposes of the bill. In our submission, we respectfully suggest that several aspects of the bill require further justification. While the departmental response is helpful in gaining further understanding of the nature and the purpose of the human rights limitations, we suggest further justification should be sought.

For almost 18 months now, COVID-19 has placed immense pressure on various parts of our society, including our democratic system. It is of fundamental importance to our democracy that we do not allow what could be described as compatibility fatigue to breed a level of complacency with respect to upholding foundational liberties and freedoms and fundamental legislative principles. The immediate urgency of the pandemic may have justified the extraordinary powers in the suite of COVID legislation that has been passed to date. With the advent of vaccines, however, we should be able to identify the measures required to move beyond the state of emergency and the laws that are needed to implement those measures.

Whilst it is no doubt expedient for parliament to delegate legislative power to facilitate swift responses to emerging developments—and I take the chair's comments about the recent developments of the delta strain—there are some measures that clearly warrant the scrutiny and the authority of the parliament and should be enshrined in primary legislation. A good example of such a measure is the recent decision of the Chief Health Officer to mandate vaccinations for health service employees, QAS employees and contractors working in COVID-19 wards. We suggest further justification is necessary to explain why such a significant power should be exercised without a clear parliamentary mandate.

In light of the anticipated decision to extend the mandate to aged-care workers, we submit that this power should be narrowly tailored in primary legislation, introduced, debated and scrutinised in the usual way. Such a process is likely to identify appropriate safeguards and protections and confirm that parliament does indeed consider that the power should exist. Similarly, the modification framework may have been necessary at the outset of the pandemic to allow legislation to be quickly amended, but we suggest those amendments that remain necessary should now be made in the usual way through parliament.

The nature of the pandemic may mean that many restrictions continue to be made by public health directions. Nonetheless, we suggest that the community would benefit if there were a requirement for the Chief Health Officer to publish her consideration of human rights, much like a statement of compatibility or a human rights certificate, within three to five days of the direction. Similarly, we have recommended that there should be a process for seeking a review of a direction to isolate, as has been introduced in Victoria, and, at the very least, a requirement to provide a statement of reasons to individuals when exemption decisions are made. Above all else, it is critically important that the government continue to adequately justify each and every limitation on rights that arises from legislation such as this and demonstrate that public health measures remain the least restrictive, most reasonable and proportionate way of responding to the pandemic. My colleague, principal lawyer Sean Costello, is with me to answer any questions, thank you.

**CHAIR:** Thank you, Mr McDougall. We now turn to questions.

**Mr STEVENS:** Scott, my question is to you as commissioner. This legislation obviously is to address a very serious worldwide crisis. Basically, there are many breaches of normal fundamental legislative rights and human rights concerns. We are aware of that. I think it is difficult to say that the

time for reconsideration of that is over, as you termed it. This legislation extends to 30 April next year, but we have quite a deal of uncertainty with the new strain that seems to be spreading quite rapidly in the southern states and we do not know where we are at today or even tomorrow. In terms of human rights considerations and people's willingness to accept these unusual restrictions on human rights, would it be more appropriate for a set of rules to be put in place for lockdowns that people understand? For example, if we had 10 cases then we have to lock down or whatever. Would it be far more acceptable to cop human rights breaches if there were a road map to say when, how and to what level restrictions would be put in place? Would that put the breaches of human rights into perspective?

**Mr McDougall:** I start by saying that, when you refer to human rights breaches, I would not characterise all of the measures as breaches. Whether it is an unlawful breach it has to be an unjustifiable limitation to get to that point. Overall, I think that most if not all of the limitations that have been put in place to date would be justifiable. The main point that we have been making is, I think, the point behind your question about public confidence in decision-making. The human rights framework does provide a really good framework for decision-making and justifying limitations on human rights. There is an opportunity to strengthen public confidence in the decisions that are being made by incorporating a requirement, for example, on the Chief Health Officer to publish a statement setting out her human rights analysis when she does make a public health direction. I think that would go a long way to building and maintaining the community confidence that Queensland clearly does have in our Chief Health Officer.

**Mr STEVENS:** When I said 'breaches', I said that in normal circumstances they would be breaches.

**CHAIR:** Without relevant justification, yes. Mr McDougall, at the beginning you said you thought this was a reasonable process. In that way is the Human Rights Commission making a health or epidemiological judgement about the status of vaccines and strains of the virus and, therefore, you have made a health judgement that the nature of the emergency has changed?

**Mr McDougall:** No, not by any means, Chair. I would not pretend for a moment to have any expertise to put the commission in a position where it was attempting to second-guess health decisions made by the Chief Health Officer. I think we have made that clear in our approach to the pandemic from the outset. I know that right at this point New South Wales and Victoria are in dreadful situations and we are not far away from being in that exact same situation. The point I would make is that some of those decisions are of such significance that there would appear to be sufficient time for parliament to debate them and I think that parliament should.

**CHAIR:** In your evidence this morning, you talked about the advent of the vaccine as a proviso, which obviously is making commentary about its role in health. The UK, which is far advanced in its rollout of the vaccine, on Saturday had 54,000 cases. Is there not a danger that the Human Rights Commission is actually making judgements about the nature of the emergent health situation, the role of the vaccine rollout, its efficacy and the nature of any new strains and their behaviour and spread within the community?

**Mr McDougall:** No, certainly not and I repeat that I would not attempt to do that. At some point there will be a process for leading out of the pandemic.

**CHAIR:** We hope.

**Mr McDougall:** It will be incumbent on the government to be able to justify the continued restrictions. Whether that is December or April we did not address that issue in our submission for the reason that we are not in a position to make those judgements, but it will certainly be up to the government to justify the continuing restrictions.

**Mr STEVENS:** Sean, Scott mentioned the human rights issues around a declaration that health workers have to have vaccinations. There are major issues with health workers not being vaccinated. In normal circumstances it may be a breach of human rights considerations that someone has to have a vaccine when they may be an anti-vaxxer or whatever. In the overall scheme of things, we are trying to control this pandemic and obviously the health worker section is where a lot of it has emanated from. I suppose there are matters in terms of labour rights that would have to be argued through legally in terms of enforcement, such as no vaccination, no work type of thing. Can you give me the legal view on whether you believe that forcing health workers to have a vaccination in a pandemic—even under these circumstances—is still a breach of a human right?

**Mr Costello:** I will confirm that the commissioner is happy for me to take that question.

**Mr McDougall:** Yes, I am happy.

**Mr Costello:** I will answer in two parts. Firstly, I will clarify that in our submission we are not seeking to assess whether it is a reasonable and proportionate limitation on rights to mandate the vaccine in various situations. We are simply saying that it would create greater legal certainty and certainly clarify that the justification is lawful if that were in primary legislation. For example, if the Public Health Act made it very clear that the Chief Health Officer could in certain circumstances mandate vaccination.

To answer your question as to whether that is reasonable, it probably comes back to the commissioner's point regarding public health directions being accompanied by a human rights analysis so that when those directions are made we all have some understanding of how that balancing of rights is identified and has been undertaken in a particular situation. As you say and as we have already seen, some issues have arisen in certain settings where people are COVID positive. In those situations do we require vaccination and what safeguards are in place? Already, we should note that those public directions do require some exceptions where someone may have some sort of complication potentially from the vaccination so cannot be vaccinated. We should know that the directions have been reasonable in that situation. It is just providing that clarity and certainty about how those rights are justified.

**CHAIR:** Obviously, without getting into health judgements, a vulnerable person in an aged-care setting has the right to have treatment where all safeguards have been taken to ensure that they are not going to be infected and especially balancing those rights where the evidence seems to be clear that seniors in those circumstances are very vulnerable to significant illness and even death. Obviously we have to balance between those rights, Mr McDougall?

**Mr McDougall:** Yes, obviously there are competing rights in that situation and the rights of patients and people residing in aged-care centres is clearly a significant one.

**Mr CRANDON:** Chair, you have just asked one of my questions in relation to the people on the other side. Often there are competing human rights on each side of the equation and, of course, then there is the common good aspect of it as well, which Mr McDougall might like to comment on. I think it would be fair to say that every member of parliament, certainly in Queensland, has probably had at least one case of special circumstances. I have had many and I am sure my colleagues at the table have had many as well. It seems as though even though someone goes through the proper process, provides all of the proof and information, the standard response in the first instance seems to come back. Even in the second instance the standard response seems to come back. It seems that it is only when someone gets high visibility through the media that we get some sort of a win for the individual. I am dealing with several cases at the moment. I cannot believe that we keep getting the same response from the Chief Health Officer's staff. Could Mr McDougall give his thoughts on whether or not some strengthening is required as far as special circumstance situations are concerned?

**CHAIR:** I take it that the member is referring to situations where people are attempting to, for instance, travel from Sydney to Brisbane because of extreme compassionate circumstances and those making the health assessment do it in a very prescriptive way based on the risks to other Queenslanders rather than on the difficult circumstances of the individual?

**Mr CRANDON:** Yes.

**CHAIR:** What direct question is there for Mr McDougall? Can you clarify the question?

**Mr STEVENS:** How would they be better served, I think is the question.

**CHAIR:** Is there something that the Human Rights Commission could add to how that process could be better served?

**Mr CRANDON:** And does Mr McDougall have any concerns in relation to some of the material that he may have seen? Obviously he would not be receiving all of the detail, but we would all be able to provide some very good examples of cases where the matter simply has not ever been able to be resolved; it has come to an end. Some feedback from Mr McDougall in his role would be great.

**Mr McDougall:** Yes, I do have concerns about this issue. I think transparency would be improved if there were a requirement for a statement of reasons to be given to a person who has been refused an exemption, as a starting point. I have been concerned. I have to say that I am not in a position to comment about the outcomes of particular matters because I am certainly not privy to the details in the applications.

I am concerned that it does seem to be the case that sometimes when some matters are brought to the attention of the national media, for example, they are resolved. It does raise issues as to what criteria are being used in the decision-making process. Sean might be able to talk more to

this, but there is a very low number of successful applications; I think it is in the order of 15 per cent. There may very well be good health reasons underpinning that statistic. Again, transparency and public confidence would be served if there were a requirement for reasons to be given to a person when they have their application refused. Are you happy for Sean to answer?

**Mr Costello:** I only wish to say that awareness of the percentage of exemptions is based on media reports; we are not privy to that information generally. We mentioned this in our written submission for hotel quarantine. Victoria has recently created a review system through what they are describing as a senior lawyer process so there is some form of review for decisions made around hotel quarantine.

**Mr CRANDON:** That could be a potential step. If this goes on—and none of us know when it is going to end—there is a suggestion that there could be a second look at something that takes it outside of the Chief Health Officer's staff, who I am sure are being swamped with requests on an ongoing basis.

**Mr McDougall:** To add to my earlier response, it is my understanding that prior to the pandemic it was possible for a person to seek a review to a magistrate. It depends on the basis upon which an order is made currently as to whether that review is still in place. It seems that it may not be and that the only option available to a person is, therefore, to make a judicial review application to the Supreme Court, which is a very inaccessible and expensive jurisdiction. A review process similar to what they have introduced in Victoria would be highly desirable.

**CHAIR:** In this case the health department obviously takes a very strict criteria about the potential risk of spread. However, is human rights even a useful criterion? There is not a human right to condolence or compassion or expression of grief. This is what is very affecting for us as MPs to deal with people in these circumstances. Human rights is not necessarily a clear answer to that.

**Mr McDougall:** A lot of the rights that are engaged are very broad. The right to privacy is a very broad right that actually protects the integrity of a person including, in some cases and according to some judges, the emotional and psychological integrity of a person. It goes to the state of mental health. There is also the right to family and to protect families. We have seen some really tragic scenarios, as I am sure you are all aware, where people have been denied the right to grieve in really traumatic circumstances, in some cases.

**CHAIR:** We know that the health department is examining the possible impact of grief on other families if those were relaxed as a general rule.

**Mr McDougall:** What the human rights analysis does do is it requires a decision-maker to look at reasonably available alternatives. Again, without being in a position to put myself in that decision-making process, if there were a way of facilitating access that was reasonably available, was not a health risk and was financially viable for the department, then it is something that the decision-maker should prioritise.

**CHAIR:** Again, fundamentally, it is a health decision, not a human rights decision.

**Mr McDougall:** It is both.

**CHAIR:** But at its base it is a health decision.

**Mr TANTARI:** Mr McDougall, in relation to the humane treatment in detention, you note within your submission around hotel quarantine or quarantine generally that it is a federal matter; they drive the policy area for detention. With the current use of hotel quarantine remaining in place because of that, is there a minimum standard of accommodation that the commission thinks should be required around the hotel quarantine?

**Mr McDougall:** Yes. We have published a report with recommendations about hotel quarantine and the standards ideally that would be put in place. We recommend that rooms should have access to open windows and balconies and, ideally, people would have the ability to have some form of access to exercise as well. We appreciate that the Chief Health Officer has ruled that out for health reasons. That is the position that we have put. I understand last year the police were able to secure enough rooms with balconies and/or open windows such that 59 per cent of hotels did have that access. We continue to receive some complaints about hotel quarantine, so it is clear that not all rooms have that access.

**Mr TANTARI:** What you are stating is that the purpose-built facilities, as recommended by the Premier and by the state, are probably the best way to go rather than just having people put in hotel quarantine?

**Mr McDougall:** Yes. We identified very early on that hotels were not fit for purpose for quarantining people. That has been our position from a very early stage—that all levels of government should be working toward establishing quarantine facilities because it was clear that they were going to be required for some time. It is a shame they have not been built already.

**CHAIR:** There being no further questions, I appreciate the submission that you have put forward. I also really appreciate you making yourself available today to answer the questions. This will inform our report and our feedback to the parliament. Thank you very much. With that, we will have a short break. Proceedings will resume at 12.30 pm.

**Proceedings suspended from 11.52 am to 12.30 pm.**

**COPE, Mr Michael, President, Queensland Council for Civil Liberties**

**CHAIR:** I now welcome our final witness for today. Good afternoon, Mr Cope. Thank you for making yourself available today. I invite you to make an opening statement after which committee members will have some questions for you.

**Mr Cope:** Thank you for the invitation today and thank you for allowing me to be a bit later. I want to first of all make some comments about the departmental response, particularly at page 11. The Chief Health Officer's power is to make directions as she reasonably believes is necessary to assist in containing or responding to the spread of the virus. That is an extraordinarily broad power. The High Court has made it clear on numerous occasions, including in the Malaysian refugee swap case, that the expression 'reasonably believes' can only be challenged on the basis that the opinion is unreasonable or illogical. It is very difficult to challenge in administrative law terms such a decision.

Secondly, I want to comment on committees. I cannot remember whether it was this committee or the other committee that I raised this issue before at the last bill. It must have been the other committee, was it?

**CHAIR:** In that case, Mr Cope, it would have been the health committee. We are the Economics and Governance Committee.

**Mr Cope:** Our view is that there should be a select committee. We note that there is no specific reference anymore to this committee or the health committee about this topic, and we remain of the view that that should be the case. That is what I wanted to say about the departmental response.

I also want to pick up some issues raised by the Human Rights Commissioner. In general terms, we endorse everything that the Human Rights Commissioner says. One interesting issue that the Human Rights Commission raises and which they have said on the previous extension legislation is that it is their view that just because the health emergency comes to an end, the powers do not come to an end. I must say that I have always thought that section 362A had that effect, but clearly the Human Rights Commission does not agree, and we would then agree with them that any doubt about that should be cleared up.

Secondly, I want to talk about hotel quarantine, which we omitted from our submission. Once again, we join with the commission in its concerns about fresh air and ventilation for people staying in hotel quarantine. Finally, also in relation to hotel quarantine, we repeat the position that we have taken all along which is that these people are being detained there for everybody's benefit, therefore we should be paying unless there is some good reason they should be paying, such as they are going overseas to earn an income in which case that is the price of doing business. Those are the specific comments I wanted to make.

**Mr Stevens:** Thank you very much, Mr Cope, for your presentation. I hope that in your assertion that we needed a select committee to discuss this matter that it is not an aspersion on this particular Economics and Governance Committee.

**Mr Cope:** No, I did not mean that. I just meant we should have what the Senate has.

**Mr Stevens:** In terms of the matter you have just raised with people returning being forced to quarantine, is it not the fact that we are not forcing people to return? Of their own volition, they are returning, creating an impost on the wider Queensland community and that is why they should be paying for their own decision-making in this process?

**Mr Cope:** No, because if they are Australian citizens, they have a right to return, is our view.

**CHAIR:** Mr Cope, his point is reasonably valid in that they presumably also have a right to be in other places as well. They are choosing to return to Australia.

**Mr Cope:** We do not know that. As I say, the starting point is that they should not pay. There may be other reasons other than they are going over there to do business. You see people in the media all the time whose jobs or contracts have come to an end. They have no source of income over there; they have to come back here. I do not see why they should be paying for it. As I say, they have a right to return. These measures are here to protect the community. They have not committed an offence. They are not in jail.

**Mr Stevens:** In terms of civil liberty, though, we agree entirely with you that they have a right to return, as Australian citizens. What we are questioning is the fact that you, as the representative of the civil liberties people, are saying, 'We do not have to pay'; that is your assertion. Under the hotel quarantine system, you mentioned that they needed balconies and fresh air et cetera, and that was an impediment—I do not know how much a part of it has been the particular new strain. I am not an expert, but I understand that the delta strain is exceptionally contagious. If people were chatting to

each other around the balconies and hotels, for instance, I would imagine that that would be another reason people would contract the virus from people returning. Most of the virus that we have circulating has come from people using their civil right to return from infected areas, which we have supported. Can you give me a justification for your assertion that they should not have to pay?

**Mr Cope:** My justification is that they have a right to return. They are being compelled to stay in these places for the benefit of the community, not for their own benefit. As I say, it is a starting point. There may be other examples beyond the ones that I have given you, but if you have been overseas, as in the example that I just gave before, and your job has come to an end—you have no choice; you have no work there—what other choice do you have?

**Mr Stevens:** Can you also deal with the balcony issue?

**Mr Cope:** The starting point is that a basic matter of principle—and it comes out of section 30 of the Human Rights Act—that people are entitled to be treated with dignity and detained in appropriate conditions. Locking people up without access to fresh air, in our view, does not meet that criteria. You are saying that—well, I have not heard any cases of people chatting on balconies. They are outside in the fresh air which everybody still seems to accept is a much less risky thing to do. They are catching the virus through the air conditioning system. Until somebody points me to multiple examples of people catching the virus from chatting to one another from a balcony of a hotel room, then we might want to think about it again, but at the moment I do not see any basis for that.

**Mr TANTARI:** Mr Cope, I looked at your submission and your submission suggests that the temporary powers in regards to legislation be to 31 December 2021 rather than April 2022, with your recommendation being based on the Commonwealth government's assurance that every Australian will be offered a vaccine by that date. Given that only around 10 per cent of the population is currently fully vaccinated against COVID-19, is your council confident that the federal government will meet this assurance, and if not, is it not a suck-and-see approach risking the greater community's health, particularly with the more virulent variants now taking hold in the community—for example, like in Victoria and New South Wales?

**Mr Cope:** No, it is not, because the submission makes it very clear that the situation should be reviewed in December, and if the Commonwealth has not lived up to its statements, then we would be open to a discussion about whether it should be further extended. The submission makes that very clear. We are not saying that 31 December is the drop-dead date because we do not know with the current circumstances, with all due respect. The submission makes that bluntly clear. We do not say that 31 December is absolute, never going to be extended again. We say these powers are extraordinary emergency powers. As a matter of human rights law principle, they should only exist for the maximum amount of time necessary. We say that that is connected with the vaccination of the community.

So we have the Commonwealth saying it is going to do X. It might get to 31 December and there is a justification for a further four weeks; I do not know. There might be a justification for post-April; I do not know. However, when we do not know at the moment what is going to happen, we just do not want them extended unless it is absolutely necessary. Parliament can come back in December and extend them if necessary; it is not a big deal, I do not think. It is not a big deal when you consider that these are some of the most draconian powers ever exercised in the history of this state, including wartime.

**CHAIR:** It seems that you are making a health or epidemiological judgement in your submission here. You say the facts of a course have now changed. I put to you that the UK, which has a very high rate of vaccination—

**Mr Stevens:** Some 80 million people as of last week.

**CHAIR:**—on Saturday had 54,000 infections. We saw that the new variations—the facts being now changed, written on 6 July, does not bear up well.

**Mr Cope:** The facts have changed. We have vaccines. That is the fundamental change. The situation in the UK, as I understand it, is that all the cases they are getting at the moment are because they have not—they have only just started vaccinating people between 18 and 30 about three weeks ago. If I were in the UK at the moment, I would not be supporting what they are doing for that reason because I do not think that they have proffered a proper opportunity to people who are in that age group. Secondly, the question always is and always will be: what is the level of hospitalisation and death? You see so many statistics going around about this on the internet, and it still seems that the level of hospitalisations are not growing—certainly not the level of deaths in the UK on some exponential basis like they were last time.



**CHAIR:** You are making health and epidemiological judgements. Firstly, you are saying that the UK should be doing more controls and, secondly, that the 54 deaths that happened yesterday are an acceptable price to pay for—I am not really sure the point you are making about the UK there.

**Mr Cope:** I am responding to your assertion.

**CHAIR:** My critique was that you seem to be making health judgements

**Mr Cope:** What else are we supposed to do? You are wanting to tell me that we should just do what the doctors say?

**CHAIR:** No, I am suggesting that we take the advice of medical professionals who understand the transfer and risks involved.

**Mr Cope:** We have never accepted the position that you should just do what the health advice says because that just ignores the whole range of other factors that need to be taken into account.

**CHAIR:** Which society do you think that ignored health advice like that succeeded in their response to this pandemic?

**Mr Cope:** We have not opposed the current laws. You are proceeding on the basis that we have objected to the current arrangements. We have not objected to the current arrangements. The question is: when does it end? A technocracy is no less an antidemocratic, antipluralistic system of government than a theocracy or an autocracy.

**CHAIR:** With respect, the parliament is not bound to a technocracy in that way. We analyse the advice that we are given, and both this committee and the parliament in general very carefully does that.

**Mr STEVENS:** Chair, if I may add, the parliament's legislation on this matter has a sunset clause, as per this legislation we are discussing today, of 30 April. Whether it is ending there or not I do not know, but this particular legislation will end at that time.

**Mr Cope:** Yes. So what we are saying is—

**CHAIR:** Therefore, it gets back to the point that, seeing as we have collectively supported the existing legislation—which, we acknowledge, places quite strong restrictions on people—how can we say with confidence that the health decisions and the pandemic are therefore over? That is where we find the difficulty with the evidence you have presented.

**Mr Cope:** The submission does not say it is over. As I would have thought is generally accepted by all sorts of people—I see Dr Chant making comments today about levels of vaccination—the availability of vaccines means that eventually society will be able to cope with the pandemic without these extraordinary powers. All this submission says is that we have accepted that logic but that the powers, as Mr Stevens said, are sunsetted. We say they should come to an end as soon as is possible.

**Mr STEVENS:** I think your submission says 31 December.

**Mr Cope:** Yes. If in December the situation is not that the vaccines have been adequately distributed then, as the submission says, we would not oppose a further extension of the powers.

**CHAIR:** Of course, Mr Cope, the alternative is true and that in December the parliament can, after analysing that the population is sufficiently vaccinated and the threat of the pandemic has reduced, also move to change that sunset clause to a date such as you have suggested at that point if we have seen significant change in the nature of the disease. Is that not true?

**Mr Cope:** That is. But our position is, as I say, that the powers should not be extended for any longer than is strictly necessary. At the moment we do not know what is going to happen in December.

**CHAIR:** I think we all agree with that. Member for Coomera, do you have a question?

**Mr CRANDON:** There is nothing from me, thanks. You have covered everything that I would have asked.

**Mr STEVENS:** Mr Cope, this bill was introduced into the parliament in June. We are now halfway through July. It has to go to parliament in August. We have quite a period of legitimate questioning about the right to extend these powers. As we said, the sunset clause is going to take it through to April of next year. If we moved with your council's suggestion of 31 December, then proper parliamentary processes for extending these powers and extending the legislation would have to start in about late October or November to formally inquire as to the right and proper way to extend this legislation further. You and your council understand that whilst we are extending these extraordinary

powers—we have all agreed with what you said and we all understand those sorts of matters—to take it through to December may well require a further process in about two months time. Whilst we love seeing you here making presentations to us, it seems a very short-sighted answer as to where this pandemic is at. As I understand it, the Prime Minister’s commitment was 80 per cent vaccination by the end of the year, which I think is a mountain to climb. As I understand it, even if you have been vaccinated you can still get COVID-19, which is still the issue, and it is still circulating and you can still pass it on to those who are not vaccinated. In terms of your December time line, is that not a little bit short-sighted and unrealistic?

**Mr Cope:** We are not responsible for parliamentary processes. All we can say is that, as I have said, we do not want these laws extended any longer than necessary.

**Mr STEVENS:** Neither do we.

**Mr Cope:** Well, you could have made it 31 December. We made the submission to the minister back in April, so it is not like we have not said this before. A different decision could have been made. We think it is very important to draw a clear line in the sand about this.

**CHAIR:** But you appreciate the laws governing the process of putting a bill before parliament. Unless it were an emergency—and 31 December probably does not qualify—we virtually have to start the process of examination and consultation again. Based on the facts we have at the moment, the minister would have to introduce a bill based on what is happening in Sydney and Melbourne to extend it from the 31st almost immediately after we come back with our recommendation—if we were to do that—to have it expire on 31 December, and the minister would therefore have to accept that.

**Mr Cope:** As I say, the point of the submission is to draw a clear line in the sand about where the thing has to end. It has to end eventually.

**CHAIR:** There being no further questions, we thank you, Mr Cope, for presenting today. We are all looking for an end to this process. We deeply respect those who have brought forward issues regarding the restrictions we have had to place on Queenslanders. The committee feels it very keenly. If any of us felt with great confidence that we could finish this process, we would no doubt be speaking firmly about it in the parliament and proceeding. We thank you for the information you have provided today. Thank you to our Hansard reporters and the parliamentary broadcasters for their assistance. They are off in the distance in their rooms. A transcript of these proceedings will be available on the committee’s webpage in due course. With that, I declare the public hearing closed.

**The committee adjourned at 12.52 pm.**