



Speech by

Dr Alex Douglas

MEMBER FOR GAVEN

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PERSONAL PROPERTY SECURITIES (ANCILLARY PROVISIONS) BILL

Dr DOUGLAS (Gaven—LNP) (3.15 pm): This bill is the second personal property securities bill. As stated by all speakers, these registers are in transition to the Commonwealth. So it is a consequential bill. In general, the bill introduces consistency across the nation on the issue of credit and property. In a global world that is built on credit, getting the detail right is critical. This bill embraces matters of certainty across borders and enshrines the national electronic register, that is, the Personal Property Securities Register—the PPS register—commencing on May 2011.

The initial bill had some issues raised from it that were quite concerning when one considers what is given up when moving to a national scheme. I made the very fair point that the financial offset to the state was a cheap buyout. I do not say that the state did not bargain hard enough, but when one is in such a parlous financial position one has to accept whatever bid is on offer. In fact, if you have to put in a bid—and they only accept the lowest bid—you have to take what is on offer. I think that is what happened and the consequences will have to be assessed over time.

COAG has agreed to unified national laws. As a federation of states, we have to be sensible and practical and this bill reflects that. Interestingly, the bill closes down the REVS—that is the Register of Encumbered Vehicles—the Register of Cooperative Charges and the Bills of Sale Register, including the Register of Liens on Crops of Sugar Cane. As one register closes, the other is launched. Data is migrated from the state register to the national register. Critically—and this is in the opt-out clause—mining leases, exploration permits, energy licences, casino licences, operating authorities, gaming machine entitlements, liquor licences, wine producers and merchant of wine licences are not included in the transfer to the Commonwealth. As I say, these are the opt-out groups and I will discuss one of those.

In his second reading speech the minister stated—

The national personal property securities reforms aim to increase the availability of finance and reduce costs by providing less complicated arrangements for securing interests in personal property.

Minister, the evidence in the most significant area of transition to the Commonwealth has shown that this aim of the bill does not deliver on cost savings in its implementation in those areas. If it costs the public more, why are we doing it? Who is getting the extra funds on top of the savings by having all the states in unity? Honourable members, I will tell you. The Commonwealth pockets these funds and it will go on pocketing these funds with annual index-driven increases in perpetuity. That is why the federal government knows that it could offer a sweetener to get the states' attention. And members, yes, where is that evidence? Look no further than the new national medical register—AHPRA.

The transition for the average Queensland general practitioner was a 40 per cent increase in annual fees and a fine of greater than 50 per cent of that fee for not registering on time. You had six weeks to transition. It is no wonder that over 30 per cent of GPs across the nation have neither paid to register nor have logged on to the site, as one has to do in the transition. The AHPRA registrar tried the heavy-handed approach, was rebuffed and is now moaning about how mean GPs are. In other words, they are running a campaign against general practitioners, largely through an advertising program. Have those in charge of

the register considered how most doctors feel about having been betrayed by the ministers offering the same platitudes as this Minister for Tourism and Fair Trading is offering today?

Minister, if you state that the charges will fall, they should do so. If they do not, and even rise, it is your job to reconsider your decision or reconsider your position. The experience currently facing all doctors in Australia is an outrageous abuse of power, and every doctor in Australia is currently looking at both you and the health minister—because this bill is on in our parliament at the moment—and at every health minister in the nation on this issue. If the current trend continues, the whole process could and will most likely begin to unwind.

As admirable as the aim is, if the delivery does not match the sentiment then no-one will support that transition process. Specifically, the REVS scheme is uniformly and massively accessed. If we see price gouging by the registry then the industry and the public will find another way or demand change. The PPS Register will be treated in the same manner. The users of the register do not care how good the transition is. They will want to see the cost savings handed on to them and their businesses.

The current evidence from the most recent changes is that they can expect three things: one, higher charges; two, less service; and, three, greater difficulty of access. I am sorry, but I do not understand—nor do the majority of my colleagues—why, if these bills are meant to achieve the opposite of these outcomes, we are pursuing these legislative changes until the problems can be fixed. I do accept that both the credit and the property interests are significant. The current problem particularly is one of having to register in multiple registers. This is unacceptable in a modern world. Theoretically, having one place of register and a reference point would make these instruments far easier to manage and access. We have to trust that the contracting body can deliver that. The Attorney-General feels that it can and will be delivered, but this is a serious risk.

The genesis of the whole bill was with the Attorney-General's committee's proposals in 2006. We have come along and parallel with the transition to Commonwealth registers and schemes formerly administered as state managed, funded and recorded schemes. In general terms these aspirational goals are very worthy, but, as I detailed earlier, if they are not accompanied by less cost, greater service and greater access then they are not worthy of support. Sometimes revolution is not a positive evolution. One might really have good ideas that cannot be implemented. The evidence in a very straightforward area seems to suggest that the Commonwealth are not good at this. They want to be seen as professional, but this is a new area for them and their culture is orientated differently and their corporate knowledge is lacking in the area.

One must never assume anything. I believe we all falsely believe that the ease of access and consistency we seek may take a longer time to achieve. In other words, we do have to be patient, but the transition step does not necessarily allow that. If AHPRA, the new medical registration structure, shows anything to all of us it is that Canberra certainly does not have the answers and certainly it does not have what it believes are all the answers, and referring all powers and questions and cost recovery to it is potentially dangerous. Until we can achieve those three key goals of less cost, greater service and greater access, good intentions mean nothing without proper implementation.