

GOOD NEWS FROM AUSTRALIA REGARDING BOTH VAPING AND BORDER CONTROL

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MARK BUTLER, MINISTER FOR HEALTH AND AGEING, MINISTER FOR DISABILITY

AND THE NDIS: Thanks very much for coming along this morning, and thanks to Border Force for hosting us all here at Customs House in Port Adelaide. I'm here with my state colleagues, Chris Picton, the Minister for Health in South Australia, and Andrea Michaels who has responsibility for enforcement here in South Australia. Also joined by Assistant Commissioner Tony Smith from the ABF and Professor Becky Freeman from the University of Sydney who's been a leading researcher in tobacco control and, more recently, vaping now for many years as well. And we'll be hearing from all of my colleagues today.

When we came to Government three years ago, vaping was exploding as a public health menace, particularly for young Australians, including children and teenagers. Year on year, vaping rates were increasing at alarming rates. School communities were telling us that vaping had become the number one behavioural concern for school communities, with suspensions climbing and schools having to put in place really quite startling arrangements to try and clamp down on vaping, including, for example, rostering teachers to stand inside school toilets during recess and lunchtimes to try and get a handle on this.

Nothing had happened over the previous five or six years as this thing had really exploded in Australia and, frankly, in other countries around the world. The previous government had done nothing to try and get a handle on this. To his credit, Greg Hunt tried to put in place import controls on the import of disposable vapes. We know these vapes were targeted at young people. You only had to look at them, some of them are behind us now, the bubblegum flavours, the comics, and the pink unicorns on the vapes.

Nothing was done, though, at the end of the day to start to slow down or stop the import of those vapes. Nothing was done to put a handle on the explosion of vape stores that popped up all over the country. Nine out of 10 of them were in walking distance of schools because they knew that was their target market.

When we came to Government, we were determined, particularly after talking to experts like Professor Freeman and also state colleagues like Chris Picton, to start to deal with this. The better time would have been five years earlier, but the second best time was to deal with it when we started to do that a couple of years ago.

First of all, we put in import control to ban the import of disposable vapes. And the work that Border Force and the TGA have done in particular has been exemplary. Today, we can say that more than 10 million vapes have been seized by those two Commonwealth agencies, and I want to thank the officials at Border Force and TGA for their hard work. We have resourced them to do that job, and they have provided a great return to the community on that investment and I thank them for it.

But we also started to outlaw the sale of vapes through retail settings. This was supposed to be a therapeutic good, so it should be accessed in a therapeutic setting, not local convenience stores or vape stores. In this electorate that I represent, the eight or nine or 10 vape stores that before that law came into effect are now all closed. But we still see the sale of vapes through convenience stores, through tobacconists, and other settings like that. Getting a handle on that requires close cooperation between the Commonwealth and state and territory governments.

I'm delighted to be here in South Australia, my home state, not just because it's my home state but because we know South Australia has led the way on this. A report card earlier this year puts South Australia right at the top of all of the jurisdictions in its enforcement activity. It's making a very real difference and Minister Picton and Minister Michaels will talk more about that.

More broadly though, and most importantly perhaps, the research that Professor Freeman and some others have done is showing that this is making a difference for young Australians. As I said, vaping rates were exploding year on year when we were coming to Government. We can now say that the peak of vaping is behind us, and most research is showing that fewer young people are vaping and fewer young people are smoking as well. Professor Freeman will talk about the latest wave of the research she leads out of the University of Sydney, research that's supported by the Commonwealth Government as well as the New South Wales Government and the Cancer Council.

Finally, before I hand over to my colleagues and to Assistant Commissioner Smith and Professor Freeman, can I just say that when we embarked upon this tough world-leading program of action I made it really clear, and I know Chris has as well, that we know this is a tough fight. We know that we're up against two very strong opponents, Big Tobacco on the one hand and serious organised crime that is determined to continue to make money from these very dangerous products, vaping but also illicit tobacco as well.

We know it's going to be a tough fight. We know there's a lot more to do, and we have to do that in close concert between the Commonwealth and the state governments and

territory governments. But I'm really pleased to say that it looks like we have turned the corner and at least stopped the explosion in vaping among young Australians that was emerging as one of the most significant public health challenges for our community.

I'll now hand over to Minister Picton and Minister Michaels, and then we'll hear from Assistant Commissioner Smith and Professor Freeman. Thank you.

CHRIS PICTON, SA MINISTER FOR HEALTH AND WELLBEING: Thank you very much, Mark. We know prevention is better than cure, and that's why action in this area is so important. A few years ago, vaping was completely exploding, completely out of control across the country, and now that is becoming much more under control and we are seeing those rates reduce.

We were told when vapes first came on the market sort of 10 years ago that they weren't going to be attractive to kids and that they weren't going to have health effects, and now, both of those things have been proven to be completely false.

We're seeing more and more evidence of the health effects of vaping, all of the different chemicals and toxins that people put in their lungs through vaping. Secondly, we can see how much these products are targeted directly at kids and getting kids addicted to nicotine. Nicotine is one of the most addictive substances on the planet, and I've met parents who are absolutely distraught by the fact that their 13-14-year-olds are addicted to nicotine, can't concentrate at school, can't concentrate at home, and constantly thinking about the next hit of nicotine vape that they need to get.

That's why action was so needed. I really want to pay credit to Mark for leading this work around the country, which is really world-leading. We are now seeing the results of that here in South Australia and across the country. We are seeing the rates of vaping reduce, particularly here in South Australia. We've seen excellent results through our research in SAHMRI. About a third reduction in the number of South Australians who are vaping is a really pleasing result early on in terms of us taking action on this issue. We're also seeing the impact of our schools reducing as well. This was a huge problem for schools across the state, where suspensions were going through the roof because of vapes in our schools, and we've now seen a big reduction there too.

There's of course, more to do, but we have taken a leading approach here in South Australia and invest heavily in enforcement, which Andrea will talk about, but also of strengthening our laws. We've got the strongest laws anywhere in the country to tackle this problem, which has seen South Australia get independently assessed as the best in the country on the scorecard of states and territories for taking action on vapes and

cigarettes. We are of course, we know that there's more to do but we are proud that we've seen some improvements already, and we're confident that continuing this approach is going to see more improvements and, ultimately, save lives well down the track for Australians and South Australians.

ANDREA MICHAELS, SA MINISTER FOR CONSUMER AND BUSINESS

AFFAIRS: Thanks, Chris. And thank you to Minister Butler for having us here today. I'll talk to the enforcement piece here in South Australia, that's what I'm responsible for. Of the 10 million vapes that have to come off the market in Australia, in South Australia our state agencies taken over 100,000 vapes here in South Australia. So, over \$4.5 million worth of vapes have been taken off the streets in the last 12 months since we've had responsibility and we've set up the CBS illicit tobacco and vape task force. As part of that, we've taken off \$35 million worth of product between CBS and SAPOL in the last year, and we do work very closely with Border Force and TGA in our efforts. So it is very much a state-federal collaboration in this.

But we have here in South Australia some of the toughest laws in the country and, as Chris said, we're seeing those results with really significant decrease rates of vaping here in South Australia amongst our young people. I think that is off the back of the work that we are doing here in South Australia. We have some of the toughest penalties. I now have the ability to shut stores for 28 days. I've only had that ability since 5 June when those laws came into effect, and we've already closed almost 20 stores for 28 days.

These are the sorts of things that South Australia is doing; getting illicit tobacco and vapes off our streets, targeting the organised crime element that's certainly embedded in this, and tackling the health aspects as well which is, obviously, good for our state and for our country as well to get that under control. That's what we're doing here in South Australia for the compliance, and I'll hand over to Border Force and Tony Smith.

TONY SMITH, ASSISTANT COMMISSIONER, AUSTRALIAN BORDER FORCE: Thank you, Minister. I'd first like to start with recognising the outstanding efforts of The Australian Border Force officers who have contributed in a major role to the 10 million vapes that have been seized to date since the prohibition commenced on 1 January 2024.

The Australian Border Force leads Australia's enforcement response in tackling illicit vapes and illicit tobacco products. We work closely with our partner agencies to target these goods at every opportunity; from offshore, from out the border, at our ports, and across that domestic distribution network.

While the ABF is stopping record volumes it's important to recognise that every vape and every cigarette that is illegally purchased fuels the black market. It's a market that targets our communities, including our children, and sends profits into the hands of organised crime. Profits that are used to cause further harm through intimidation tactics, arson, firearms, drugs and even cybercrime. Equally, these goods are having flow-on effects impacting our vital community services, such as health and education.

Our primary focus in the Australian Border Force is disrupting the illicit trade far from our borders, seizing these goods offshore, and our strong international partnerships have delivered significant results for Australia. For example, eight recent referrals contributed to the seizure of over 630,000 vapes from reaching our borders and, importantly, reaching our communities.

In the last financial year ABF officers made on average 120 detections a day, contributing to 10 million vapes just announced, and including 2.5 billion cigarette sticks and 435 tonnes of illicit tobacco. We remain resolute in our mission to prohibit these dangerous goods from breaching our communities and equally determined to break the business model of organised crime. We hope that the announcement today serves as a strong deterrent to those involved in the illegal trade, the criminals who target Australians, and also those that trade in illegal vapes believing that it's a victimless crime. Thank you.

BECKY FREEMAN, PROFESSOR UNIVERSITY OF SYDNEY: Thanks so much for having me here today. Young people were sold a lie. They were told that vapes were harmless, they were fun, they were part of a young person's lifestyle, and they didn't need to worry about any impacts on their health. That was a lie.

We know that young people now, when they look at vaping, their attitudes have changed. Just a few short years ago when we started the Gen Vapes study, young people thought, you know, everyone vapes. "It's something just young people do. It's for us, it's not like your grandfather's stinky cigarette." When we talk to young people now, those attitudes have shifted. They're almost ashamed of the fact that they're addicted. They can't believe that something that they were just using at parties for fun on the weekends, that they were told if they took to music festivals or used with their friends at parties would be a great way to enhance their good time.

Now their wellbeing is being impacted. They're waking up with a vape under their pillow. They can't believe they can't go all day at their lectures or at school without having a vape. I think it's really important to remember those public health impacts.

I am so happy to know that the peak vaping rates appear to be behind us. We have about 15 per cent of young people who are still vaping, though. We need to ensure that we continue with our efforts, not only in enforcement, but education, mass media campaigns, and of course, all that important support to help young people to quit who have become addicted because they were sold a lie.

The Gen Vape project, when we started, we couldn't believe the explosion in use. We were quite smug in Australia. We were very successful in tobacco control, rates were going down, we were world leaders. And then e-cigarettes snuck in and changed all that. We always have to be mindful of the tobacco industry tactics and what product they're going to bring in next. We know that they are not going to give up on this market, and we need to continue our efforts. Thank you.

JOURNALIST: Going off when vaping first started, it's much more heavily stigmatised now. Is there a chance that young people just aren't admitting to it as much as they were before?

FREEMAN: Look, I think the way we set up the Gen Vape study, they're anonymous. They have a chance to fill out these surveys without parents looking over their shoulder or having to say who they are. And we also surveyed thousands and thousands of young people from across Australia, 3,000 young Australians.

That stigmatisation isn't one of necessarily not wanting to admit that they vape. It's that they can't believe it has gone from something that was just fun and they were in control of, because they didn't understand addiction. They didn't understand that nicotine rewires your brain. It makes it so you can't feel normal. You can't feel well. You can't feel settled unless you have it in your system. If I was a young person and I was told this was like a fun, good time, and then all of a sudden my well-being is at risk, I would feel some stigma around that too.

JOURNALIST: How hopeful are you that you can defend against a counterattack from the tobacco industry?

FREEMAN: We always have one against the tobacco industry. We have public health on our side. We have transparency on our side. The tobacco industry has decades and decades of lying about what they're trying to do. The very fact that they claim that e-cigarettes are to help middle-aged smokers who've tried everything they can to quit, and yet the people who use these products are young people who've never smoked.

Frankly, they don't have truth on their side, and I know that parents in particular are very concerned about this issue and they want to see public health triumph in this. They want all of the support being given to public health. Yes, the tobacco industry is a threat, but they are not insurmountable.

JOURNALIST: I know there's a lot of contributing factors to this reduction, and how frequently it's happening. Is there one that's standing out? Because we know we're reducing the availability, we're increasing education, and there's probably a bit of judgement from peers as well if you're still relying on one base. Is there anything that's really influencing these young people's decisions?

FREEMAN: Look, I would love to say, do this one simple trick and you'll end vaping forever, and unfortunately public health is very boring that way. You have to do all the things all of the time rather than one simple trick. I will say though that, unlike other countries around the world, we are the only country who requires vapes to be sold in pharmacies to people who are using them to quit smoking. No other country has taken that approach. It is essential that we evaluate and monitor how that impacts on youth vaping rates and also how it impacts on adults who are using these products to quit.

JOURNALIST: So you're saying that approach is what's leading to this rapid decline over the past four years?

FREEMAN: Look, I know people really want me to pin down one thing that's making this happen, but honestly, let's look at tobacco control, right? We used to have 30 per cent of people smoking in the '90s, and now we have less than 10 per cent of people smoking. It's not because we did one thing. We did all of the things. We have to do that with vaping as well. We can't cut mass media. We can't cut education. We can't just let the law stand on its own. It requires a whole-of-government approach, and it requires us to do both legislation and these other, what I would call slightly softer stuff as well.

JOURNALIST: Can I just ask, you mentioned that you're working with overseas partners to stop the importation here. Which overseas partners are you working with? And where are these vapes actually coming from? Where are they being made?

SMITH: Yeah, certainly multiple partners across internationally. We've got customs administrations that we have longstanding partnerships with that also share that fight with us, and the ability to be able to control the supply chain is one of our key initiatives. But certainly, across South Asia and Southeast Asia, we've ramped up our engagements. We've got ABF officers that have deployed now across to the UK, to Thailand and also through to Hong Kong as well to work with those international partners to be able to

stem the flow of vape products coming to Australia.

We are seeing them coming across from places like China, from the UAE, for example, Singapore, but we're also seeing vape products coming across from other locations such as the UK as well.

JOURNALIST: How resourceful are these smugglers getting to try and get them into the country?

SMITH: They're incredibly agile, but that's something that the Australian Border Force is well attuned to as well. And in all of the commodities that we focus on, we're focused on our targeting capabilities to pick up on trends and behavioural trends, and we're seeing that shift in the vaping products coming through. Where previous to the prohibition, a little less brazen in terms of the way that they were approaching the importations. We'll see them moving through air cargo, sea cargo, but our focus at the moment is probably primarily sea cargo. That's our methodology. And they'll use methods such as mis-declaration or mis-description of goods to be able to bring the vaping products into the country. So, if you look at things like vaping liquids, easily disguised as flavourings coming into the country as well.

JOURNALIST: Is there something specifically in the vapes that allows you to discover them easier? Is there a way that you guys can really clamp down in that aspect?

SMITH: Yeah, certainly we're using a lot of technologies that we have available to us at the border to be able to detect goods. From an actual ingredient that sits within vapes, we don't have a specific target that we look for. There's a number of different chemicals that runs across vaping products, a lot of dangerous and harmful chemicals. But certainly, our x-ray capabilities and our 3D x-ray technologies give us that ability to be able to identify goods that are being concealed in amongst other harmless goods.

JOURNALIST: Out of that 10 million vapes number, how many of those are making it into the country, and how many of those are being stopped at the ports and offshore?

SMITH: It's a hard measure to describe, because the prohibition's only been in for just over a year now to understand. But it's fair to accept the fact that there's a level of leakage, because we do see vaping products at our stores and our tobacconists that we have to work with our partners to be able to disrupt. But in itself, the 10 million vapes being detected at the border is 10 million vapes less that are on our streets and in our communities, so that in itself is success.

BUTLER: Can I just add to that as well? From the time we put this ban in place, we never pretended we'd be able to stop every vape coming in. It's long been illegal to import cocaine and heroin and a whole range of other illicit drugs. That doesn't mean that there's not leakage, despite the best efforts of hardworking ABF officials. But we do know that it is harder to get your hands on a disposable vape. We do know that that's led to a very significant increase in the price of vapes where they are still accessible, and that's having a positive impact on young people.

JOURNALIST: The reduction of people smoking is quite small in the scheme of things. Are you confident that can reduce?

BUTLER: Are you talking about -

JOURNALIST: Vaping -

BUTLER: The Gen Vape research? The really pleasing thing about the latest wave of research from Gen Vape is it shows fewer young people are vaping and fewer young people are smoking. When we introduced this package of measures in concert with Ministers like Chris Picton, there was a concern that if we stopped young people vaping that they might turn to smoking cigarettes. And I think the really pleasing thing we're seeing from a number of different pieces of research is that twin achievement of fewer young people vaping and fewer young people smoking.

Now, again, I say and I stress this fight is far from over. We still have a long way to go. The explosion in illicit tobacco around the country, cheap, illegal cigarettes, is probably now, I think, the biggest threat we have to our most important public health objective, which is to stop people smoking. It's still the biggest preventable killer of Australians, 60 or 70 Australians will die today and tomorrow and the day after because of cigarettes. We've got a lot more to do to get to those very, very low rates of smoking that are set out as targets in the National Tobacco Strategy across all age cohorts, including young Australians. But the fact we haven't seen smoking rates increase markedly as we've started to clamp down on vaping rates among young people, I think is one of the really heartening things that comes out of Gen Vape. I'm not sure whether Professor Freeman wants to add to that.

FREEMAN: I fully agree. The only thing I would add is let's remember that vaping is actually a risk factor for future smoking as well. We know from the Gen Vape study that young people who vape are at five times the risk of going on to smoke. So if you can prevent vaping, you're also going to prevent future smoking. And this is why you can't really consider them as separate behaviours, really, as well. Let's remember, it's the same

industry often behind these products as well. There's a great quote from the study from a young person. She said: "you know, when I was a young teen, I absolutely hated smoking. I could not believe anyone would smoke. I'd had it drilled into me from a very young age, those gross packets. And then I tried vaping, and it sort of loosened me up. And I thought, oh, well, if I'm going to vape, maybe I could smoke too." So I think that prevention of vaping and prevention of smoking together is super important.

JOURNALIST: I'll quickly grab Minister Butler, while you're there. Just on behalf of my Canberra colleagues, what's your response to the court findings this week about the Torres Strait Islands being ravaged by climate change, and they're facing a bleak future without action? Will the Government fund adaptation measures to protect the Torres Strait Islands and their culture of people going forward?

BUTLER: The first thing I'd say is the Labor Party has always been very cognisant of the threat that climate change poses to low-lying islands in our own region, in the Pacific more broadly, but particularly the Torres Strait Islands, which are part of Australia, a really important part of our community. We take that seriously, we always have. We didn't particularly need a federal court case to tell us that climate change is threat. That has been a core part of Labor Party policy for decades. Since we came to government three years ago, we have put in place a range of really important climate change mitigation measures. We're backing the global fight against climate change. We've got a Climate Change Act that has clear emissions reduction targets and a pathway to get there, whether that's through the safeguards mechanism of capping and reducing emissions from industry, whether it's our plan to roll out renewable energy. Where again, South Australia is a lead jurisdiction, or whether it's our plan to reduce emissions in transport. We're very, very cognisant of the threat that this poses to low-lying islands like the Torres Strait Island, and our need to support those communities. But we're getting on with the job that we were elected to do in 2022, which is to get Australia back at the table in the global fight against climate change.

JOURNALIST: Is the Federal Government any closer to declaring the algal bloom a national disaster?

BUTLER: I've only this morning had a long conversation with the Deputy Premier about this. I can say as a South Australian, obviously, and someone who represents the coastal sea, that I'm deeply concerned as I think so many Australians are about this emerging issue in South Australian waters and on the South Australian beaches. I walked along our beach over the weekend and saw dead sharks, saw dead rays, saw dead fish, dead cuttlefish in a way I've never seen before on Adelaide beaches. This is obviously a very, very serious issue. I want to make sure that our government is working closely with the

South Australian Government to determine what our response to it. At the end of the day, it reflects a perfect storm, if you like, of environmental issues that have come together over recent months here in South Australia that we obviously can't control. But we are sending, as the Commonwealth over the course of this week, the head of the oceans division from our Department of Environment down to South Australia to meet with officials here, to start to understand the depth of this and where it might head over coming weeks and months, and how we can work together to respond to it.

JOURNALIST: But at what point does this get declared a national disaster? Is the amount of dead fish washing up on our shores not enough?

BUTLER: That's not really a matter directly for the Health Minister. As I said, this is something that I want to make sure our two governments are working closely together on. I am very concerned about what's happening in South Australian waters and on South Australian coasts. I want to do everything I can, and I'm sure my other south Australian colleagues feel the same to make sure that that message is heard in Canberra. We're returning to Parliament over the coming couple of weeks, and I'm sure there'll be a number of conversations we all have about that. But as I said, we want to ensure that we understand at an official's level exactly what is happening here, which is why our leading oceans expert is coming to Adelaide this week to talk with the South Australian Government.

JOURNALIST: Do you think if this was occurring on Bondi Beach or anywhere along the eastern coast that it would garner more attention from the Prime Minister?

BUTLER: The important thing to say about this is we've never really seen an issue like this in Australian waters before, certainly not of this scale or of this duration. This is quite new for Australia, and understanding the shape of it and what it means for communities, whether they're in South Australia or New South Wales or any other part of the country, something I think we all have to work through because it is quite a new challenge. I don't buy into that commentary which I've seen around a bit. There are senior members of the government here in South Australia. I know my cabinet colleagues Rishworth, Farrell and Wong feel strongly about this as well, and we'll be making sure that the message around this is heard very loudly in Canberra.

JOURNALIST: On health, the government last year commissioned a review of the PBS. Some members of that working group say that they recommended speeding up the approvals for new medicines. Will the government act on this recommendation?

BUTLER: You're referring to the Health Technology Assessment Review, the first in 30

years, that reported last year. This is a really important review to make sure that our world leading medicine system is fit for purpose for the next several decades. We're seeing a very significant change in technology for medicines and other therapeutics, which are overwhelmingly a good thing. We're seeing cures and treatments for conditions that were thought only some years ago to be relatively incurable or untreatable come onto the market. We want to make sure that Australians get quick access and affordable price to those, which is something the PBS has delivered for 75 years or more.

I've set up an implementation group that involves a couple of industry reps, a couple of patient group reps, some clinician representation as well. It's doing its work. Now I expect an interim report on that over the coming couple of months. I've made it clear this is a priority for a second term Albanese Government. The PBS is one of the best medicine systems in the world, which is why we've been so clear that there's no way it would be up for negotiation in trade negotiations with any country around the world. But we do have to recognise that the tsunami of new therapeutics that are coming onto the market might require a slightly different approach in terms of assessment, approval and reimbursement to get into patients as quickly as possible. I'm really looking forward to getting my teeth into that work over the coming months.

JOURNALIST: Of the 20 stores that have been hit with the 28 day closures, what kind of stores are we talking about? Are they just convenience stores or is it a variety?

MICHAELS: Most of them have been convenience stores. We've done from CBD right through to regional South Australia, and some of those closures are convenience stores. Most of them are convenience stores, 28 days. Like I said, that's been in place for the last five weeks now and we'll see the results of that in due course.

JOURNALIST: Is 28 days enough time to sort of send a clear message to these stores that what they're doing is wrong?

MICHAELS: What we had before was 72 hours under our legislation. That was also quite novel for around Australia. We've extended that to 28 days. It's a fine balance between me being able to do that in court. We can go to court now, Magistrates Court, and get up to 12 months closure order. And some of those go through system as well.

JOURNALIST: Have any of them breached the 28 day closure and what's the consequences if they do?

MICHAELS: Not that I'm aware of. At this point in time, not that I'm aware of.

JOURNALIST: And if they do breach the 28 day closure, what's the consequence?

MICHAELS: There are penalties of in the millions of dollars for those sorts of offences, up to \$6.6 million for subsequent offences. We certainly have the toughest penalties around the country in tackling this.

JOURNALIST: Minister, I just wanted to ask, I understand that there was actually one of the stores that didn't close for a full 28 days because they were relatively new in the store themselves. Have they since reopened?

MICHAELS: So the one that you're talking about is a balance. I can either do 72 hours, 28 days, or go to court, or a combination of those. The one that you're talking about was recently open, and we haven't had complaints about that. I issued a 72 hour one on that to give them fair warning that we'll be back, and that work is being done by CVS.

JOURNALIST: Have you gone to a magistrate to seek a 12 day ban on any of these stores?

MICHAELS: We have and I think there's one or two that have gone through the system and more are going on.

JOURNALIST: We've got the nurses' union standing up later today on what they call internal ramping. First of all, is it appropriate that, or acceptable actually, that nurses say they're treating patients in corridors?

PICTON: We don't accept that terminology from the trade union, what they're saying, but we want to work constructively with them and all of our union partners in terms of what we can do to make sure that we can meet this very significant demand that we're facing. We know that we need more beds and that's why we're building more beds across our hospital system at the moment. We're going to see over 180 extra beds being built, coming online and open in the next six months. Record numbers of doctors and nurses being hired across our system, and we are throwing literally everything that we can in terms of making sure that we've got the capacity to meet the very significant demand that our hospitals are seeing.

I'm very happy to continue to talk with the nurses' union about what strategies that we can do to make sure that we can meet that very significant demand for patient care.

JOURNALIST: You don't acknowledge that terminology, but is internal ramping or these

practices being used as a strategy to alleviate external ramping?

PICTON: What SA Health does is that they follow the policies that are in place, and there's demand escalation policies that have been placed for SA Health for some time and they make sure that they follow those policies to provide safe care for patients within our hospital system, and I certainly don't at all believe that terminology is appropriate or accurate for what is happening in our hospital system. But we are no doubt dealing with a very significant spike in flu cases, very significant demand on our hospital system while we're building additional beds and hiring additional nurses and doctors to meet that demand.

JOURNALIST: Nurses are also calling for discharges to happen over the weekend. They feel like this is one of the reasons why bed block is happening. What do we need to do to make that happen?

PICTON: We have been increasing the number of staff that we've been putting on the weekends to enable discharge to happen. But the sad truth is that it's very hard to be able to discharge people from our hospitals at the moment. It's very hard to be able to get people out of hospital into aged care, into other supported care. Over 260 people in our hospital system at the moment who have been medically cleared for discharge, who've had an assessment for going into aged care, but we can't get them into aged care. We will continue to boost the resources that we can on our weekend to be able to do that, but we don't have the places for people to go out of hospital to enable that to occur.

JOURNALIST: Is the state government any closer to reaching a pay agreement with the doctors' union?

PICTON: We continue discussions with the doctors' union as well as all the other unions that we're having enterprise bargaining agreements with. I think the key thing to say very clearly is that the state government wants to provide a fair offer, which is a real increase above the rate of inflation. That's what we've been able to provide and put forward to all the unions that we're negotiating with. We're really pleased that we're able to reach an agreement recently with the Health Services Union and that agreement being overwhelmingly voted up by those union members for allied health to have their first ever agreement, and we're hopeful that similar constructive discussions with all the other unions will be able to achieve similar outcomes.

JOURNALIST: Would you say that negotiations are progressing well?

PICTON: I would say that they're progressing, absolutely, and we continue to have those negotiations and we're hopeful that we'll be able to achieve outcomes that will be fair for workers and good for the government and the taxpayers and the health system and the workers all overall.

JOURNALIST: Minister, I just want to bring it back to ramping briefly. The other day there was a stroke victim who went to the Royal Adelaide Hospital and was sent home still unable to feel anything on the left side of their body. Does the state government accept that ramping is now actually putting lives at risk?

PICTON: I would obviously have to be very keen to follow up in terms of the exact patient that you're talking about. I would say that our doctors and nurses work incredibly hard to make sure that they provide the appropriate care for patients, and the doctors and nurses in that particular case I'm sure worked very hard to make sure they provided care appropriate, but we'd be very happy to follow up in terms of the specifics of that case.

JOURNALIST: And there was also just another instance where there was a terminal cancer patient that spent three days in the emergency department with no pain pump until the third day. Does the state government think that that's an acceptable standard of care?

PICTON: Is that the case that was in the paper this morning? As the Central Adelaide Local Health Network has put forward already, there was a couple of facts there that weren't quite correct in some of the reporting. But also there's no doubt that our hospitals are under pressure and there was work done to make sure that that patient had care. That I've checked with the Central Adelaide Local Health Network. They made sure that person had an appropriate bed or ward bed in the emergency department, that they were offered food and comfort and support during their time there, and then they were provided a ward bed as soon as they were made available.

But obviously, we don't want anyone to be facing those delays getting access to a ward bed. That's why we're building more beds. We don't want that delay of people being stuck in the emergency department waiting for the ward bed. That's the key pressure point that we face in the health system. That's why we need more beds. That's why we also need to be able to discharge people faster who don't need to be in hospital anymore.

JOURNALIST: Minister, there have been quite a few things over the last few days about the stresses of the workforce, particularly with ramping, but also attacks on staff. What's

your message to the workforce on relieving that stress? What measures are in place?

PICTON: We are adding more beds, more staff, more resources coming into the health system. The first thing I'd say is anybody who attacks one of our healthcare workers is absolutely despicable and deserves to face the full force of the law. Anybody who attacks a healthcare worker should be facing police, should be facing the full force of the law, and that's my expectation right across the system. We are, of course, having to put in additional security, as we have continued to do, but we will take action and we will follow up if there are instances where members of the public attack one of our healthcare workers, which I'm sure everyone would agree is an absolutely despicable act that will not be tolerated. In terms of what was reported yesterday, the police have been very clear in terms of the supposed gun incident that did not occur. The police statement is very, very clear on that front and I'd encourage all media outlets to report very accurately what the police have said in relation to that.

JOURNALIST: In terms of staff turnover as well, do you have a plan on retaining doctors and wider health workforce staff?

PICTON: We've been able to demonstrate that we've been able to do that, and to point to the fact that we have recruited above attrition, so that means taking out anybody who's left, above attrition we've now got over 2,700 full-time staff compared to where we were three years ago. That's doctors, nurses, allied health and paramedics. That's a huge recruitment that's been able to be done. That shows that not only have we been able to recruit new staff but been able to retain our existing staff and we'll continue to do so.

JOURNALIST: In recent weeks we've seen the paramedics' union, the nurses' union, the doctors' union all speak out against what's going on within the health system. Are you losing the support of the unions ahead of the election?

PICTON: We will continue to work with our unions, and I think that they all understand that we need to continue to invest and that's what we're doing. We need those extra doctors, nurses and hospital beds and that's exactly what the state government is delivering.

JOURNALIST: You've said before that when it comes to bed availability, aged care has been a big issue because there haven't been any place to put them to get them out of hospital, and we're waiting on the Federal Government to communicate on that. Where are we on that point? Are we going to get aged care beds?

PICTON: We have continued to put forward constructive proposals to the Federal Government on how to address this. We know that it is a barrier not just here but right across the country in terms of aged care. Back when I first became Minister, we had about 60 patients who were stuck in our hospital system waiting for aged care. That's now over 260. That's a big increase in that time of people who are waiting to get into aged care. I know Minister Butler has pushed through legislation to reform the aged care system. We welcome that, we welcome those changes. We, of course, would like to see more action on that front as well. We've put forward a number of recommendations for the Federal Government to consider.

JOURNALIST: Minister, you talk about more staff, more beds. It's going to take time for that to happen. Is there any immediate action that the state government is going to take to manage things like ramping and also concerns regarding safety in hospitals and health centres?

PICTON: We're taking every possible action that we can. We have got every single one in our hospital system open. We're employing every single possible staff member that we can to be able to make sure that we can meet that need. And we are building right now beds that are coming online. Within weeks we will have additional beds coming online at the QEH. That's going to be followed by more beds coming online at Lyell McEwin, Noarlunga Hospital, Modbury Hospital over the next few months. That's a big increase in terms of capacity across the system. It's been years in the making because we knew that these beds were needed, we knew that the hospital system needed to be bigger to be able to meet that need, and that's what we're doing.

JOURNALIST: As we've heard, it's obviously very dire here when it comes to bed availability. Those 260 beds would go a long way into making SA a little bit better. What more can the Federal Government do to assist here?

BUTLER: I think Minister Picton is right. this is a national issue, maybe with the exception of Victoria, which has a very significant state run aged care facility system which they're able to use to discharge longer stay elder patients from their hospitals. This is an issue in every other jurisdiction and I've been open about it, but frankly there was not enough done to reform and upgrade the aged care system over the past decade. We've had to compress that decade of reform that should have happened into the past three years. The Aged Care Act that Chris was referring to that passed the parliament just before Christmas, is going to have to unleash a whole lot more investment in the sector. Pretty much every aged care facility that I visit in Adelaide and in every other city across the country is full because there was just not enough investment over the last several years.

That's a problem now, but it's going to become a bigger problem over the coming three to five years, given the aging of the baby boomer generation. The oldest baby boomer is about to start to hit the average age of entry to aged care facilities and we just don't have enough beds. I know Chris has been a forceful advocate for us to do more in this area. Every other Health Minister feels exactly the same and says exactly the same publicly and when we come together in our meetings. Premier Malinauskas, the Treasurer and Minister Picton have put together quite a detailed plan about what they think the Commonwealth should do. They've presented that to me. We're looking at it because as we come to a negotiation, which we will soon, for a longer-term hospital funding agreement, we want to make sure that we're not only funding the operation of hospitals, which is a responsibility of state and territory governments, but we're also thinking about those interfaces between different systems, some of which I have responsibility for, some of which Chris has responsibility for.

Chris understands and other health ministers understand we can't click our fingers and suddenly create a whole lot of new vacant aged care facilities. We've been doing everything we can to unleash that investment to make the investment climate a positive one for aged care operators who frankly have not been opening new beds over the last several years.

JOURNALIST: Is there a timeframe where you could get more beds? Like is it in the next five years?

BUTLER: Those new laws have passed. The signal has been sent to aged care operators. A number of them in the wake of that legislation passing made it clear that the plans that they had on the books but were not able to get finance for were now real plans but it takes a while to build an aged care facility. We want to make sure it happens as quickly as possible. But we've done the most important thing, which is to fix the investment climate in a sector that was seeing no new investment.

Thanks everyone.