



**CRIME AND CORRUPTION COMMISSION**

**TRANSCRIPT OF INVESTIGATIVE HEARING**

10 **CONDUCTED AT LEVEL 2, NORTH TOWER, 515 ST PAULS TERRACE,  
FORTITUDE VALLEY WITH RESPECT TO**

**File No: CO-19-1209**

**OPERATION IMPALA  
HEARING NO: 19/0006**

20 **DAY 7 - TUESDAY 19 NOVEMBER 2019  
(DURATION: 40 MINS)**

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proceedings.**

**LEGEND**

30 **PO Presiding Officer – ALAN MACSPORRAN QC  
CA Counsel Assisting – JULIE FOTHERINGHAM  
HRO Hearing Room Orderly – FALLON SMITH  
W Witness – ROSEMARY O'MALLEY  
LR Legal Representative – N/A**

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HRO All rise. This hearing has now resumed.

CA Good afternoon, Chair. I call Rosemary O'MALLEY.

PO Good afternoon. Would you prefer to take an oath or affirmation?

W Oath is fine.

PO Thank you.

10

HRO Place your right hand on the Bible and repeat after me. The evidence which I shall give.

W The evidence which I shall give.

HRO In these proceedings.

W In these proceedings.

20

HRO Shall be the truth.

W Shall be the truth.

HRO The whole truth.

W The whole truth.

HRO And nothing but the truth.

30

W And nothing but the truth.

HRO So help me God.

W So help me God.

CA Good afternoon, Ms O'MALLEY.

W Good afternoon, Counsel.

40

CA You were provided with a notice to attend today?

W That's correct.

CA Yes. I'll just show you a copy of the notice. Is that the notice?

W It is.

CA I tender that document.

PO Exhibit 137.

ADMITTED AND MARKED EXHIBIT 137

CA And you also provided a submission for the purpose of Operation Impala?

W That's correct.

10 CA I'll show you a copy of that submission. Is that the submission?

W It is.

CA I tender that document.

PO Exhibit 138.

ADMITTED AND MARKED EXHIBIT 138

20 CA So you are the Chief Executive Officer of the Domestic Violence Prevention Centre on the Gold Coast?

W That's correct.

CA Otherwise known as DVPC, and have been in that position since 2016, and you commenced working for DVPC in 2009?

W Yes.

30 CA And you were the manager of the Men's Domestic Violence Education Intervention Program from 2009 to 2016?

W That's correct.

CA And your academic background is in criminology?

W Yes.

40 CA You previously worked for many years at Probation and Parole. And your publications include contribution to articles in professional journals, and a chapter of the book entitled Domestic Violence - Working with Men - Research, Practice Experiences and Integrated Responses?

W Yes.

CA In 2011, you travelled to the United States to investigate good practice regarding men's programs, fathering programs and integrated responses?

W Yes.

CA And you deliver workshops as well as speaking at conferences throughout Australia on collaborative practice?

W Yes.

10 CA And you have a particular focus on finding a common purpose and framework by which government agencies and non-government agencies can work together to improve the safety and wellbeing for those living with or leaving domestic violence?

W That's correct.

CA Thank you for that. So could you explain some of the functions that DVPC performs for women affected by domestic violence?

20 W Certainly. So we're the original DV service on the Gold Coast. We operate from Beenleigh to the border, to the New South Wales border. The last 27 years, we've provided crisis and ongoing counselling for women, children and young people experiencing domestic violence, as well for the last 20 years providing, in collaboration with Probation and Parole, a Men's Domestic Violence Intervention Program.

30 The partners and ex-partners of the men in those program would be some of the most vulnerable women that we work with. We also provide court support at the Southport Specialist Court. For the last 23 years, we've coordinated the Gold Coast integrated response to domestic violence. So that's the inter-agency collaboration to respond to – particularly to high risk cases of domestic violence. We also provide groups for women, both as victims and those identified as respondents, through the DV court system. And we deliver programs in three women's prisons in Southeast Queensland to women who are in prison for a variety of reasons, but over 90% of whom are victims of domestic violence or sexual assault.

40 CA Thank you. Now when private and confidential information of the women whom you help is – when that information is disclosed to their ex-partners in circumstances where they're concealing their details, what impacts have you seen flow from that misuse of information?

W The impacts are so significant that I'm going to have trouble naming them all, but I'll have a good go at it.

CA Yes.

W They include – is it best to go to an example or just to give a general?

CA If you could just go through-

W Speak generally.

CA -a list and then you could elaborate on an example.

W Sure. So if there is a new address, once they've left domestic violence, if their new address is inadvertently disclosed to the perpetrator, they may have already paid removalist costs, broken bonds, real estate bonds, and had to set up again. Often they've had to relocate children to new schools, disrupt their connection to friends and peer support and their education. Many women have to change employment, leaving behind long service leave accruals, sick leave accruals, interrupt their whole career path. And those are the material sort of aspects to it.

10  
20 The emotional and psychological is significant. First of all, the trauma of experiencing violence abuse or coercive control, and then knowing that a system that you've gone to that is set up to increase your safety has actually been responsible for making you and your children so much less safe. The impact of that is of significant loss and trust, and a greatly reduced likelihood of engaging with that system again to improve your safety.

In some circumstances, women have returned to the abusive relationship because the uncertainty of not knowing whether a system can keep her safe is so significant that she would rather have some control over that by trying to get back on side with the perpetrator. So she's actually stuck in the very relationship she was trying to leave.

CA So we've had an example, which is an along those lines where there was a  
30 [REDACTED] woman attending the Gold Coast Hospital, and her details were provided to her ex-partner. We've heard that they ended up reconciling. So what are the risks that you see in that sort of circumstance where the information's disclosed and then they end up reconciling as any – is there any escalation likely of violence the more they reconcile? What in your experience and any impact on – in this case she stopped having her medical care [REDACTED]  
[REDACTED], as you've touched on, not wanting to go back to the agency where the misuse has occurred?

W So, just to clarify, she returned to that relationship post the disclosure being made to him of her new address?

40 CA Yes.

W Right. Look, the impact would be significant. The research shows that domestic violence increases are actually the very first physical assaults [REDACTED]  
[REDACTED]. So there's, you know, over 25 years of research now showing that. And so her returning to that – she's left that relationship due to either violence or coercive control or intimidation. Her returning to that relationship, as a result of that disclosure being made, and trying to have some control over her safety,

by returning and aligning with the perpetrator, [REDACTED], would significantly impact on her risk. If we were doing a risk assessment, that would be given a heavy weighting and move her into a high risk assessment through the South Australian tool.

CA Would you like to elaborate on what that tool comprises of?

10 W Yes. So the South Australian risk assessment tool is a tool our agency uses. It is an actuarial tool, so it comes up with a score, and so it takes into account the static risk factors, so the historical things that can't be changed, and they get a certain weight. And then the things that are occurring now, the dynamic risk factors are given a higher weighting.

20 So some of the high risk factors that are given, even the static risk – these are static risk factors, are given a high rating, include leaving the relationship, which greatly increases the risk of domestic violence. [REDACTED] is definitely in there. And I don't know the details of that case, but if she had reported experiencing violence, particularly strangulation, she would be getting very high up in that South Australian risk assessment. If it was on the Gold Coast, we would be instigating the integrated response to wrap some safety around her [REDACTED]

CA And you mentioned the – when you were mentioning the different impacts on women having their details disclosed, one of them was emotional for them, and if they are emotionally compromised to, say, a heightened degree, what impact does that have on the ability to parent their children when the children are present as well?

30 W Yes, the research shows, and we know from running mothering groups for a few decades now, that they don't get to parent or mother in the way that they would want to. So much energy is taken up just maintaining safety, keeping everything calm in the house, that they're not able to pay the attention that they would want to pay to the children involved. And quite often – and again, we've been working with children and young people for, you know, 2.5 decades now, the impact on children of that is, you know, feeling disconnected from the non-offending parent. The one that they are connected to, feeling concerned about her safety.

40 There's great research that shows the impact on children's education, where especially for young boys, who feel very protective of mum, who will stay away from school in order to be around to protect mum. And for the young girls, the research shows the incidents of self-harm and negative concepts of themselves. There's often cutting, attempted suicides in the young girls. And mum's ability to handle all of those unintended consequences of the violence, everything is impeded. In many ways, you know, for children, their developmental progress stops at that moment when mum starts experiencing violence. Can I just go back to that, the woman [REDACTED] -

CA Yes.

W -that you gave me the example. One of the other things, one of the risk factors would be that if she stopped going for her [REDACTED] treatment. One of the things that is a safety factor [REDACTED] is women engaging with medical practitioners, going into rooms where the perpetrator is not present, and being able to talk openly. And it is often that those systems are able to liaise with collaborative responses, such as the integrative response we have on the Gold Coast. If she's not accessing that, she's so much more isolated and so much more at risk. Let alone the [REDACTED] health and [REDACTED] during that time.

CA And you mentioned having to relocate when contact details that are being concealed are disclosed. And the option of using the services of refuges, is it the case that that's usually somewhere far away from where they're currently living?

W Yes, it often can be. Refuges prefer to not take women from the local area, because of the risk posed to them and the other – well, other residents there, of the perpetrator visiting the refuge. So it is often the case that women will, from the Gold Coast, will be sent far out west to refuge or far up north.

I can think of an example where we'd relocated a woman to Brisbane as an interim measure. She was waiting to go interstate. And he found out the address where she was staying, and she actually was moved 700 kilometres from that. And she, with three children, she had to get on a bus, on a train and on another bus. And it was 16 hours in total with three young children in tow just to relocate from that first refuge to the second refuge. So it is significant.

CA And just talking about the agency where the victim has had the information disclosed from, that leads to the victim not feeling safe to go back to that agency. Is that a certain – is there a nomenclature in result of that?

W Is there, sorry?

CA Is there a name for that type of system issue?

W The name for the system, whether the woman use-

CA Unconscious ally?

W Yeah, sorry. Thank you. So one of the things that's been identified particularly over in the States, when the system is no longer a source of safety for her and, in fact, is increasing her lack of safety and adding to it and increasing her risk, they talk in America about the system becoming an unconscious ally with the perpetrator. And that's the worst of all possible outcomes when she's gone to a system that is supposed to enhance her safety and ends up being less safe. That

completely destroys women's trust in that system. And they're very unlikely to reengage with it.

CA And that – we've used the example of the Gold Coast Hospital here, but in relation to if it was the Queensland Police Service say, for example, then what types of risks would there be for the victim not wanting to engage with the Queensland Police Service if there were future instances of violence with the perpetrator?

10 W She'd be very unlikely to report breaches. They would remain invisible to the system. It depends how that information was disclosed to the perpetrator. If it was a result of an integrated response, she may no longer trust or engage with a service such as ours, she may completely go invisible and be living in a state of significant risk from thereon in.

CA And you mentioned integrated response. Could you just explain which agencies comprise of the integrated response?

20 W Certainly. So since 1996, it's been, on the Gold Coast, Police, Probation and Parole, Child Safety, ourselves, the Gold Coast Hospitals, the three refuges on the Gold Coast, Department of Justice and Attorney-General, through the local courts, Housing, Centrelink, and there's also some other not-for-profits, non-government agencies who run another men's program.

CA And with each instance of reconciliation, is the risk of the severity of the violence increasing? Is there an increased risk every time there is the cycle of abuse and the reconciliation? Could you explain a little bit about that?

30 W There is research to certainly indicate that. And, again, it depends on the static factors or the pattern of domestic violence in that relationship. So if there's been an ongoing pattern over a number of years and the woman has left and returned, and left and returned, the pattern, as certainly we've seen it with men on the program that we've been running for the last 20 years, that violence does increase, or certainly can, and in some cases does increase quite significantly depending on how many times she's attempted to leave.

40 CA And so the – when the information – the contact details that are concealed are disclosed to the perpetrator, there's not only the risk that the perpetrator will go to find the victim and cause physical and/or emotional harm, but there's also the risk that that will lead to the vulnerable victim reconciling with the perpetrator and then escalating the violence to, maybe, from emotional abuse, to physical abuse, to, in the worst case, death?

W Absolutely. That is a continuum. And it can take a woman seven to 15 times to leave an abusive relationship. And the impact of continue – and the reasons for returning are complex. But quite often it is the systemic challenges that she faces. And that can be resource challenges, just not being able to be resourced

to be able to leave successfully. And often, sadly, it can be that the system has actually made her less safe and she doesn't trust engaging with it.

And if we think about the number of homicides that we've seen in recent years, the vast majority of those is when a woman leaves a relationship. So it's not – I know it seems counterintuitive to return to a relationship where you're experiencing violence and abuse, but it may be safer to do that than to continue ending the relationship. There's – recently, I think, in the last week, hasn't there been a case of a murder-suicide, and the children murdered as well, as she tried to leave. So these aren't something in women's heads, these cases do happen.

10

CA And with respect to remedies available for when there's disclosure, could you explain about Victim Assist?

W Certainly. So Victim Assist can offer interim support. There is a process involved. And what more likely happens is agencies, such as ours, who are funded around Queensland to provide support, if it was – things had to happen quickly, such as removalist costs, or paying a bond, or transport cost to a new location, it's quite often that DV Services will cover that and then get reimbursed from Victim Assist, and then, I believe, Victim Assist have longer term financial compensation for women who have experienced, or men who have experienced, domestic violence.

20

CA Do you see any gaps or need to improve that system at all by way of the timeframes involved, or the application process or the amounts of monies available?

W Yes, it is difficult because it is on a case-by-case basis. And when the imperative is safety, I don't think, given the processes involved and how Victim Assist make those determinations could be any shorter. It is – you know, it's money that has to be held accountable for. So not in terms of-

30

CA How short is their timeframe?

W It really depends on the circumstances. You can sometimes get things approved within two weeks, but that will be too long for some women who need to leave today. And sometimes it can be several weeks or months before things are approved.

40

CA So they'd have to have gone well and truly before then?

W Yes, exactly.

CA And how do they do that without the assistance?

W And that's where a lot of the onus is on the woman to tap into resources that she has and in her network. The problem behind that is one of the aspects of domestic violence, one of the strategies that is used, is isolation and quite often

victims of domestic violence don't have widespread networks to draw upon to do that. So yeah there's a risk during that time that she'll return to the relationship rather than face homelessness with her children.

CA And you mentioned the statewide network. Could you explain in a little bit more detail the makeup, the structure, of that network across Queensland to assist, like DVPC does, victims of violence?

10 W Certainly. I believe there's 19 funded services across Queensland. And they provide a similar range, not exactly the same, but it would be along the same lines of DVPC, which is supporting women and children and young people to safety providing ongoing counselling groups. Most areas have some sort of integrated response or high-risk teams. So in every region of Queensland there is some version of those support services being available to the women and children.

PO Could I just ask you, Ms O'MALLEY, with so many separate entities involved, is there an effort to try and coordinate those responses so you don't have doubling up for the response to individual cases?

20

W Across Queensland?

PO Yes.

30

W Yes, absolutely. There's warm hand overs. We share risk assessment. So the woman doesn't have to repeat her story over and over again. The woman would usually have a copy or we can electronically send a safety plan, the planning that we've already done and they can use that to inform their service delivery or add to it and make it better. Absolutely it's a close working relationship between the services.

PO And I suppose one of the risks you face in necessarily sharing that information is the sort of thing we're talking about here, unauthorised access and disclosure.

40

W 100%. And that is one of the tricky aspects. We're a consent-based organisation as are the majority of those other services, if not all of those other services. We collect information for a particular purpose and we're very clear. We get informed consent so that a woman will know what the unintended consequences might be of us passing on that information. We pass on risk assessments to other DV services with her consent. Always understanding that there can be – once it leaves our organisation there can always be – if another agency is working within a structure called a high-risk team there's different imperatives there that, you know, that that DV service might be compelled to share information that was collected. So we're always very clear that it's never – well once it leaves DVPC we have got no control over what happens.

PO Can I just ask you do you receive government funding?

W Yes, we do.

PO And is that a set amount per year or just on an application basis for the amount?

W It's five-year contracts.

PO And can I ask what the amount is?

10 W At the moment, I believe for the next 5 years, it is 17.5 million.

PO Thank you.

CA Do you think that the current remedies are sufficient?

W For women who have been impacted by information being disclosed?

CA Yes.

20 W It is very hard for me to sit here and say. I haven't had to uproot. I think what Victims Assist does is fantastic. I think when it pays for the removalist costs or the relocation costs, the transport, and the compensation for the injury, it's fantastic. But if you've had to, if you've had to move and then had to move again, give up employment, uproot your children, all of their connections and that's really hard if your children are, you know, 10 years or older and have smartphones and cutting them off from social media. I don't know how you remedy all of that and the long-term impacts of all of that. But certainly what Victims Assist does offer, I think women would be in a much more detrimental position without what's already there.

30 CA And, moving forward, can you think of any additional victim-centred initiatives that could be undertaken?

W In terms of?

CA In terms of financial support, counselling, any extra protections for victims, the vulnerable category of domestic violence victims, protecting their information?

40 W I think one of the things that we need to exercise a lot more caution around is the Domestic and Family Violence Act 2012 got amended in 2016 with some information guidelines part A and part B.

CA Sorry, information?

W Information Sharing Guidelines.

CA Yes, yes.

W Part A and part B and the sector as a whole is extremely – not – and the broader service system around DV, not just DV services but the non-specialist services, the government agencies, were excited about part A of those Information Sharing Guidelines which say you may share information. And it seemed to loosen up everything for information to be shared. There seemed to be a belief previously that we couldn't share information, when in fact under all Acts if it's a risk and safety you could share information.

10 And while you know that has its benefits, I don't think that part B of those Information Sharing Guidelines has been taken up in the same way. Or certainly hasn't been demonstrated. And part B is you must take into account the unintended consequences of sharing that information. And the thinking behind those guidelines is really strong that it's not just a matter of sharing information, which sometimes – and this is a personal opinion, that it's about discharging organisational risk and not focusing on the safety of the women and children.

20 So you may share information but you must take into account the unintended consequences. I don't see widespread demonstration that people know how to map out those unintended consequences. So if I was going to make any recommendations about how to improve things, is that it would be a much more rigorous rolling out of training and monitoring and that people are actually doing part B of the Information Sharing Guidelines.

CA Yes.

PO Sorry, just if I could ask you, are those guidelines – are they in the Act itself or are they a separate policy guideline?

30 W They're part of the Act. They're incorporated. They were an amendment to the Act. So they're inclusive, yes.

PO We should probably tender a set of those at some point if we can. It doesn't have to be done now, but whenever we can get a hold of them.

40 I understand your concerns, Ms O'MALLEY. We've had some evidence from Dr WAKEFIELD, the D-G of Health, the new D-G of Health, who made the point correctly that it's a very delicate balancing exercise to allow information sharing for clinical necessary purposes but at the same time ensure that privacy and confidentiality are appropriately managed.

W Right.

PO And that's the acute problem you face, as you say, with those part B guidelines that it's wonderful to share it because sometimes it's only by sharing the information that you can achieve the outcome. But once it leaves your hands and control you have no control over it and you're in the hands of someone else who may not understand the risks involved.

W And even there's the immediate risks and then there's the long-term ones especially if it's put into Government databases and it's there in perpetuity. Depending on what that information is that's shared, it can affect future responses that she gets from systems agencies. So it's a gift that keeps on giving and she lives with the consequences of that for a very long time.

10 But, yeah, I appreciate the tension by my colleague in Health. Those are tensions every single day. In DVPC we have an ethical decision making process that we run through to map out the unintended consequences before we're sharing, especially on those very rare occasions where the risk is so significant that we have to share without consent. And again we're transparent about sharing that and we try to talk through the unintended consequences. Sometimes you just can't. When it's a matter of – we're not selling washing machines or fridges; these are people's lives on any given day. And sometimes it is necessary to share. But you have to have the ethics behind sharing it, the intention behind sharing and trying to mitigate those unintended consequences to the absolute minimum and not just sharing information because the organisation doesn't want to hold the risk.

20 PO Exactly.

CA Now, one of the two case studies that you have to speak about today is something that can be spoken about in the open forum.

W Yes.

CA And directly relates to the subject matter the Chair was just asking you about.

30 W Yes.

CA Unintended consequences of information sharing if it's not rigorously monitored and ensure that the procedures are complied with. So would you like to speak to now that case study in relation to Probation and Parole?

40 W Certainly. So our organisation was assisting a woman who lived in our region. Her ex-partner was in another region in Queensland being supervised by Probation and Parole, and as part of his supervision was not allowed to attend the Gold Coast in order to protect her and the children. And she provided some information to our service that she thought would be important for Probation and Parole to know in their supervision of him and in order to inform their risk assessment of him. And she gave consent for that information to be shared with Probation and Parole in the other region, but not for it to ever be obviously shared with the perpetrator.

And, for an unknown reason, his Probation and Parole officer took it upon themselves to share that information with him. The impact of that was significant. So, firstly, she started experiencing threatening phone calls. She knew he'd been attending the Gold Coast. She'd seen his car parked outside her

house and now she was aware that he was aware that she was providing information to the agency supervising him. So her level of fear obviously escalated significantly. She received threatening phone calls regarding her and the children. We had to relocate her temporarily. So, again, her and the children were uprooted from their place where they had been for some time whilst he had been in custody.

CA How old were the children?

10 W I'm sorry, I can't recall off the top of my head. They were school-aged children. I'm going to say pre-teen. And so obviously there's all the material aspects of having to relocate her and the children. And, again, children not having access to their phones, social media, all of those things, disconnection from family because they weren't sure who he might intimidate to get more information.

And, in that particular case, to use that phrase "unconscious ally" again, it wasn't just the system but that particular Probation and Parole officer who it was perceived then by the perpetrator as an unconscious ally. And you know what sits behind that, I'd be interested to know what the impact on his recidivism would be if he sees the very person supervising him actually aligning and providing information that's been you know very bluntly told not to share and he has shared it. And then the threaten that he poses to other women because he's left being – being not held to account for that behaviour.

20

But so there's also the fear that she provided that information to DVPC, we have said, "No, there's a process, and that it won't be disclosed." And it's now disclosed. She's lost trust in the organisation who she's been reliant on for providing support not just around safety and risk, but emotional support and psychological support and counselling for her children. So she disconnects from that level of support.

30

There's workplace safety concerns for our advocate who provided that information because that name was also provided. Only the first name, but, you know, it's possible to be linked to that person. So you know we had to provide safety measures in the workplace and in her personal home around that advocate.

So organisationally there's consequences for that. That advocate you know could have decided to leave this work because of the threat that this particular person posed to her. Which means that, you know, again, more broadly less woman get the support of a very experienced and passionate advocate. But for that woman and her children it was all those things that we've talked about. The uprooting, the psychological, the increase in fear, the psychological harm, and those children and her living with that uncertainty. And it is the uncertainty that it is actually the undoing of many DV victims and their children.

40

PO Do you know whether any action was taken against the Probation and Parole officer who inappropriately disclosed that information?

W We raised the concerns through our local Probation and Parole and they took it up internally. I'm sorry, I couldn't furnish you with any further details around that.

CA And do you think it's important that the victims' perspectives need to inform the remedies?

10 W Absolutely. So that's at the centre. It's not – it's imperative that they are involved in those remedies because what we think is a good remedy actually can make things worse in many ways. Are you talking financial remedies or you're talking about integrated responses?

CA Just all available remedies. So, responses, yes. All types of assistance to deal with the impacts. All of the different types of impacts of that information.

20 W She has to be held. If it is only the system doing safety planning, that can be hugely unsafe for women because the system will never understand all the complexities that she's trying to juggle. It is imperative that she's held at the centre and says, "No, that will make me safe." Or, "That will make me less safe." And that she gets to have the biggest say in that because it's her life and she has to determine what's going to have the largest impact.

30 Yes, definitely she has to – her and the children have to be held at the centre. That's why it is important for funded services such as ourselves to keep going back saying, "These are the things that we we can offer. This is the integrated work that we can do to wrap safety. Is this going to make you safe or is this going to make you less safe?" And checking those out and continually adjusting and trying to think of new ways of doing things collaboratively.

CA We are obtaining a copy of that portion of the Domestic Violence – that should be here pretty soon. But I do also have some questions that are of a sensitive nature for the witness, so I'd be seeking the closure of the hearings for that. Would you like to take a short break, Chair, just while we obtain the portion of the domestic-

PO No, I think we can tender the Guidelines tomorrow in-

40 CA Yes.

PO -the public hearing if that's satisfactory to you, Ms O'MALLEY.

W Yes.

PO You're aware of them. We've discussed them.

W Yes.

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PO I'll just formally tender them tomorrow. And if you're ready for the continued questioning-

CA Yes.

10 PO -I'll adjourn the public hearing until 10am tomorrow. And if we stop the live streaming as from now and we will commence the private hearing when that's done and you can continue to question Ms O'MALLEY. This means that this will be in a private setting and it won't be published to anyone at all except us present.

W Great, thank you.

PO So are we off air at the moment? Off the line. Thank you. Just let me know when we are and we can carry on.

END OF PUBLIC SESSION