

2022

**THE LEGISLATIVE ASSEMBLY FOR THE
AUSTRALIAN CAPITAL TERRITORY**

**Chief Health Officer Update on Status of Public Health Emergency – Report 23
February 2022**

**Presented by
Rachel Stephen-Smith
MLA Minister for Health
8 February 2022**



ACT
Government

ACT Health

Ms Rachel Stephen-Smith MLA
Minister for Health
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London Circuit
CANBERRA ACT 2601

Dear Minister

CHIEF HEALTH OFFICER REPORT ON THE STATUS OF THE PUBLIC HEALTH EMERGENCY DUE TO COVID-19 – 5 FEBRUARY 2022

Please find herein my report to you, as Minister for Health, in relation to the declaration of a public health emergency in the ACT due to COVID-19.

Section 119 (4B) of the *Public Health Act 1997* provides that if the “COVID-19 declaration has been extended or further extended under subsection (4), the chief health officer must advise the Minister at least every 30 days about—

- (a) the status of the emergency; and
- (b) whether the chief health officer considers the declaration is still justified.”

Minister, my advice is that COVID-19 continues to pose a public health risk to the ACT community, and in particular due to the significant transmissibility of the Omicron Variant of Concern. My recommendation to you, as of 5 February 2022, is that the public health emergency declaration in the ACT be extended for a further 90 days until 12 May 2022.

My recommendation will continue to be reviewed every 30 days to ensure that it remains appropriate and proportionate to the risk that is being managed. I note that there is a Bill before the ACT Legislative Assembly that provides a stepped down approach to managing certain aspects of the pandemic in the ACT, when appropriate to do so, and that this legislation is likely to be debated in the first half of 2022.

I understand that all Australian jurisdictions are maintaining public health emergency status or similar at this time and continue to be focused on managing COVID-19 transmission in the community and reducing the risk of negative health outcomes across the population.

Yours sincerely

Dr Kerry Coleman
Chief Health Officer
7 February 2022

CHIEF HEALTH OFFICER REPORT ON THE STATUS OF THE PUBLIC HEALTH EMERGENCY DUE TO COVID-19 – 5 FEBRUARY 2022

Declaration of a public health emergency in the ACT

A public health emergency declaration is in force in the ACT due to the public health risk of COVID-19 to the ACT community. As Chief Health Officer, I recommend to the Minister for Health that the public health emergency declaration should be extended for a further 90 days due to the ongoing public health risk COVID-19 presents.

The public health emergency declaration enables me, as Chief Health Officer, to take necessary actions to reduce threats to public health, including issuing public health directions that aim to limit the spread of COVID-19 in our community. These directions include, for example, the requirement for diagnosed cases to self isolate, the implementation of public health social measures to mitigate virus transmission, including setting of density limits and use of Check in CBR, particularly in the current environment, and mandatory vaccination requirements in certain high risk settings. .

The ACT's public health response to COVID-19 is guided by the advice of the Australian Health Protection Principal Committee (AHPPC) and National Cabinet.

Global situational update

Globally, as of 4 February 2022, there have been 386,548,962, confirmed cases of COVID-19, and sadly 7,705,754 deaths reported to the World Health Organization (WHO)¹.

WHO has reported that the weekly number of new cases across the world in the week of 24 to 30 January 2022 remained similar to the previous reporting week, however the number of deaths increased by 9 per cent. The United States of America (USA), France, Germany and Brazil reported the highest number of new cases for the week.

The Omicron Variant of Concern (VoC) continues to be the dominant VOC in many countries across the world including the USA, the United Kingdom and Australia. Evidence shows that the Omicron VoC is more transmissible than the Delta VoC, with a doubling time of two to three days.

National situational update²

As at 9:00pm on 5 February 2022, there have been a total of 2,343,639 cases of COVID-19 reported in Australia and 4,156 deaths. Nationally, there were 12,433 new locally acquired cases reported in the past seven days and 67 overseas acquired cases, with a further 219,612 under investigation. All Australian jurisdictions continue to report high daily case numbers due to the Omicron VoC, with the vast majority of locally acquired cases recorded in NSW and Victoria. Across Australia, there is currently an estimated 310,841 active cases and 4,256 cases currently hospitalised, with 304 in intensive care units.

¹ <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports> Coronavirus disease (COVID-19) Weekly Epidemiological Update published 28 December 2021, accessed 6 January 2022

² <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-current-situation-and-case-numbers# covid19-summary-statistics> Coronavirus (COVID-19) at a glance – 5 January 2022, Australian Government Department of Health, accessed 6 January 2022

In NSW, as at 5 February 2022, 3,556 new cases and 28 deaths were reported in the previous 24 hour period. There are 89,861 active cases across the state with 2,321 COVID-19 cases in hospital and 147 of those cases in intensive care units.

The large increase in COVID-19 cases across Australia has seen all public health teams and hospitals come under significant pressures. These pressures have related to a combination of large numbers of patients being hospitalised, either with or from COVID-19, as well as workforce pressures arising from COVID-19 exposures.

ACT situational update

As at 8:00pm on 5 February 2022, there have been a total of 38,432 cases recorded in the ACT since the start of the pandemic and sadly, 28 people have died. There are 2,623 active cases across the ACT with 60 COVID-19 cases in hospital and 2 of those cases in intensive with one requiring ventilation.

An online registration form was published on the ACT Government COVID-19 website on 12 January 2022 to enable ACT residents to register their positive RAT result. This registration provides ACT Health with a better understanding of transmission within the community and the level of risk that is being managed. ACT Health now reports daily case numbers using positive PCR and RAT results received up until 8pm each day. It is important to note that the ACT's case numbers no longer taking precedence in daily reporting, and that our health system capacity and vaccination figures remain of the utmost importance.

As at 30 January 2022, the 7-day rolling average of cases remained between 600 and 800 cases per day. This includes cases confirmed via PCR and those identified through voluntary self-reporting of positive Rapid Antigen Test (RAT) results.

Over the pandemic, PCR test positivity rates initially peaked at 1.3 per cent on 20 October 2021, then reached an all-time high of 28 per cent on 11 January 2022. These rates have dropped to 18 per cent as at 30 January 2022.

New cases per 100,000 in the 7 days up to January 2022 was 1159. This incidence rate combined with a PCR test positivity rate of 18 per cent put the ACT in the category of *high* community transmission, according to the US Center for Disease Control and Prevention.

As of 4 February 2022, 100 high risk sites were impacted by COVID-19, including 19 active outbreaks in aged care facilities and 65 disability service providers with staff exposures to COVID-19. There are staff and detainee cases at both ACT correctional facilities under management.

As at 8:00pm on 5 February 2022, a total of 832,937 negative COVID-19 tests have been recorded in the ACT.

Since the start of the pandemic, the number of daily negative tests peaked at 8,482 (19.6 per 1,000 population) on 20 August 2021.³ After a drop in testing numbers from mid-October, the next peak occurred on 22 December 2021 at 6,738 (15.6 per 1,000 population).

³ The 16.12.2021 Australian Bureau of Statistics' estimated resident population of 432,266 was used. This is located at [National, state and territory population, June 2021 | Australian Bureau of Statistics \(abs.gov.au\)](https://www.abs.gov.au/national-state-and-territory-population-june-2021)

As of 9:00am on 5 February 2022, there are 1,090 close contacts in quarantine in the ACT being supported by ACT Health. This includes people directed by ACT Health to quarantine, or people who are household contacts of cases confirmed by PCR or identified via RAT.

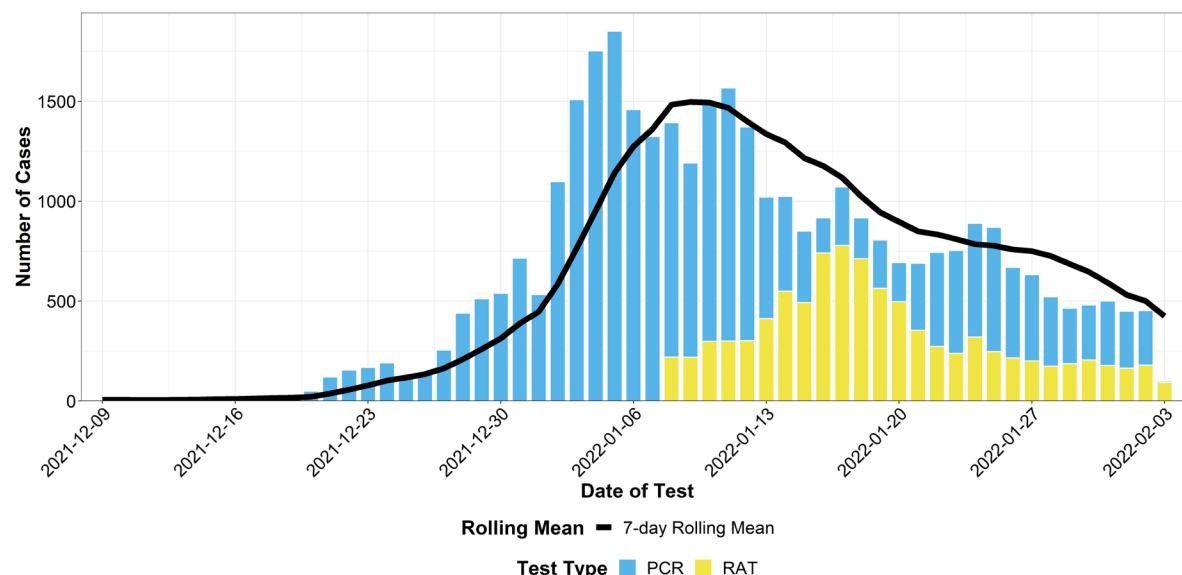
ACT Health operates the ‘Lazaretto’ quarantine and isolation facility at the Australian National University which provides accommodation for confirmed cases and contacts who are unable to safely isolate or quarantine at home. The accommodation facility provides residents with a range of clinical, social, community and cultural supports.

The commencement of term 1 at ACT schools from 31 January 2022 and the associated return to work following the summer period, may see a lack of decline or an increase in case numbers in the coming weeks. This increase is anticipated in the context of potential increased transmission due to greater community interaction in school settings and workplaces.

Hospitalisations due to COVID-19 remain stable. Between 24 and 30 January 2022, 33 new hospitalisations were reported, compared to 60 new admissions in the previous week (17 to 23 January 2022), and 55 in the week before (10 to 16 January 2022). ICU admissions have remained consistent.

Active outbreaks are continuing to be managed for the ACT, including in residential aged care facilities and early childhood education and care services.

Figure 1: COVID-19 cases recorded in the ACT by date of test, last eight weeks – 9 December 2021 to 3 February 2022



Source: ACT Health Data Repository (SunQuest) and ACT Health REDCap Database.

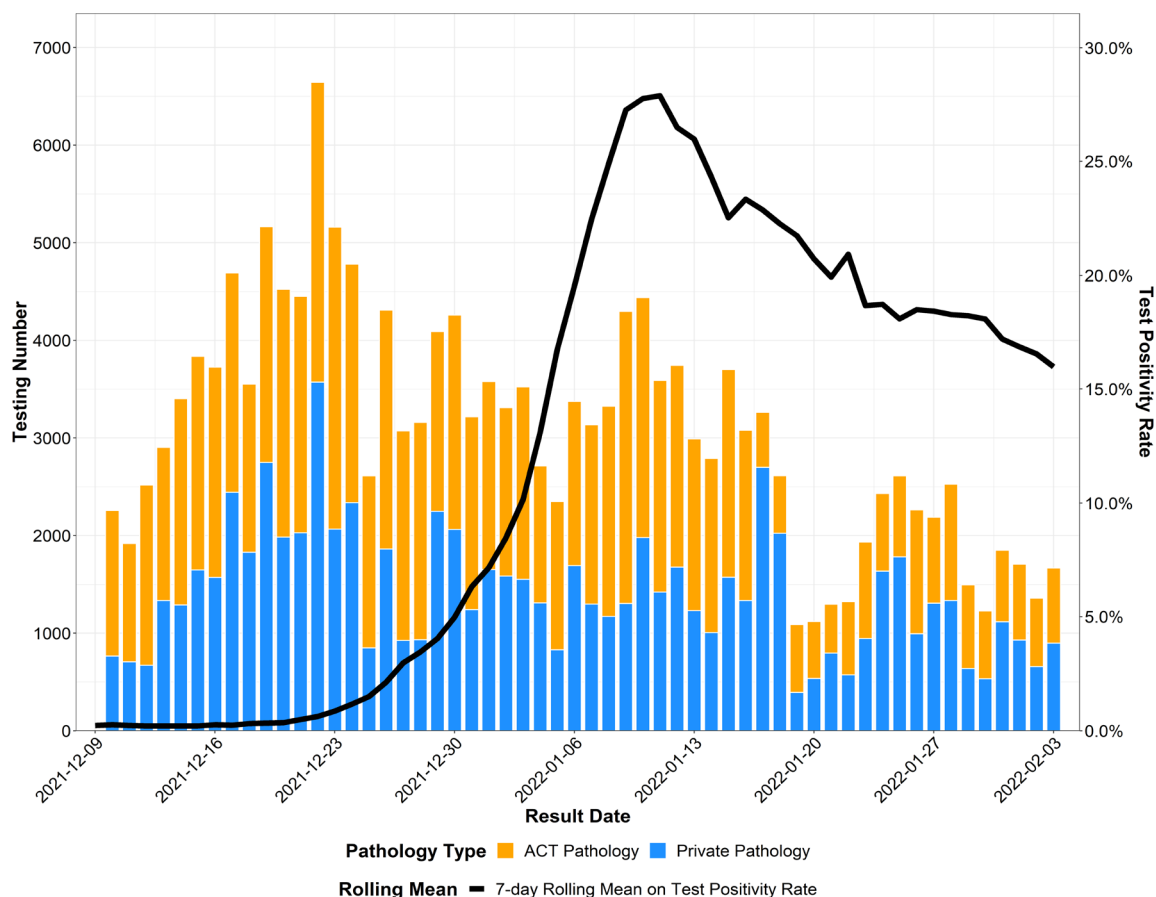
Notes:

DATE OF TEST refers to specimen collection date for PCR test or the date of the Rapid Antigen Test (RAT).

For cases confirmed by PCR and RAT tests reported to ACT Health.

A small number of cases are missing specimen collection date and therefore are not included in the graph.

Figure 2: Negative testing by result date and pathology type (with test positivity rate) in the ACT, last eight weeks – 9 December 2021 to 3 February 2022



Source: ACT Health Data Repository (SunQuest & Pathology)
 Notes:
 The test positivity rate is subject to the variability of data collection.
 The number of test results are for PCR tests only.

Public Health Social Measures

As outlined in the ACT’s COVID-19 Pathway Forward, Public Health Social Measures (PHSM) in the ACT have gradually been eased to align with the National Plan to Transition Australia’s National COVID-19 Response and the approach of NSW and Victoria, where possible. The ACT is operating with low level PHSM which balance the need for low level restrictions to reduce the risk of outbreaks while allowing businesses and the wider community to operate under COVID normal conditions.

Currently, most businesses and venues across the ACT are permitted to have 25 people across an indoor venue before density limits of one person per two square metres applies for indoor spaces. Additional restrictions were introduced for hospitality businesses and licensed venues from 12 noon on 8 January 2022 to further reduce transmission and outbreaks in response to the prevalence of the Omicron VoC. These venues must adhere to the following restrictions:

- Patrons must be seated while eating and drinking;
- Dancing is not permitted; and
- Nightclubs are permitted to operate as a bar, within existing density limits.

On 7 January 2022, in view of increased pressure on frontline health workers, the ACT Government announced a ceasing of Category 2 and 3 elective surgeries at Calvary Public Hospital for approximately 6 to 8 weeks. This decision was taken to enable additional health care staff to be redeployed to respond to the COVID-19 outbreak. There were no changes announced to elective surgeries at Canberra Hospital or in the ACT's private hospitals.

Canberrans were also encouraged to continue to work from home, where it suits both the employee and employer, throughout February 2022. This advice is not enforced under a public health direction, rather employers and employees are advised to determine whether this is appropriate for their workforce and for staff wellbeing.

In light of the current epidemiological situation in the ACT, current public health social measures were extended to 25 February 2022, unless a review in the week of 14 February 2022 indicates they are no longer required for the level of risk being managed.

Considerations have also been underway in relation to the future use of the Check in CBR App, to ensure that it reflects the ACT's current public health situation and response, and to future proof the App going forward. It is planned to wind back the Check in requirements to only require high impact businesses to use the Check in CBR app, including nightclubs, licensed pubs and bars, registered clubs and strip clubs and brothels. In addition schools and early childhood education centres (ECECs) will be asked to continue to require staff and visitors to Check in, in accordance with the Health Guidelines for Schools and ECECs.

People attending organised events in the ACT will only be required to check in if the event is not ticketed or pre-registered.

Other businesses and settings will no longer be required to display their QR codes or to ask visitors and customers to check in. However, they will be encouraged to continue to display QR codes for voluntary use by customers and visitors who want to keep a record of where they have been.

COVID-19 measures for the return to school

The ACT Government has released the *ACT Public Schools return to school plan* (the Return to School Plan) which was developed in line with advice from AHPPC and the ACT Government *Health Guidelines for Schools and Early Childhood Education and Care (including out of school hours care)* (the Guidelines).

The Return to School Plan and the Guidelines provide information for staff, students and families on the COVID smart operation of schools, including check in requirements for staff and visitors, physical distancing and hygiene, cleaning, and ventilation.

In addition to this support for schools and their communities, the ACT Government is providing all school-based staff and students, across all school sectors, with two free RATs per week for the first week of Term 1, 2022. The provision of RATs to ACT Schools and Early Childhood Education and Care settings will assist in the early identification of cases and prevent high impact exposures and outbreaks in the Territory's education settings.

ACT Health and the ACT Education Directorate will provide support and advice to school communities as the term progresses to ensure students, staff and communities are equipped to minimise the risk of contracting COVID-19.

Standing Exemption for Essential Workers

Workforce and supply chain pressures have been experienced across Australia due to the sharp increase in COVID-19 cases and exposure across the country. The furlough of essential workers due to isolation and quarantine requirements has impacted a range of industries and resulted in workforce shortages.

In response to this emerging issue, National Cabinet agreed to the implementation of a standing exemption in all jurisdictions to permit asymptomatic 'close contact' essential workers in priority industries to return to work.

The ACT has implemented the Standing Exemption for Essential Workers, under the *Public Health (Diagnosed Persons and Household Contacts) Emergency Direction 2022*, with effect from 11:59pm on 27 January 2022.

Under the current standing exemption, an essential worker will only be eligible to return to work if they:

- Are employed in an industry specified as essential under the standing exemption;
- Have advised their employer they are a household contact and are approved to return to work;
- Consent to returning to work;
- Are unable to perform their duties from home and the employer has determined their absence from the workplace creates a high risk to critical service delivery;
- Are asymptomatic and have returned a negative COVID-19 test result since becoming aware of their status as a household contact; and
- Continue to undertake daily rapid antigen tests until the end of their quarantine period.

Eligible essential workers who return to work must comply with a set of conditions.

They must:

- Travel directly between their quarantine premises and place of work;
- Not attend public places other than for work purposes or an emergency;
- Wear a face mask when leaving their premises in accordance with public health directions; and
- Continue to comply with existing quarantine and testing requirements under the Direction when not at work.

In addition to these conditions, employers are required to adhere to their work health and safety obligations and undertake a range of actions if they seek to use the standing exemption to return workers to the workplace.

Consideration will be given to extending the standing exemption to workers in other priority industries, as agreed by National Cabinet, should workforce shortages be experienced in

these industries in the ACT.

ACT COVID-19 Vaccination Program

Primary Vaccination coverage

The ACT's primary COVID-19 vaccination coverage remains exceptionally high at 98.5 per cent of persons aged 12 years and older having received two doses of an approved vaccine.

As of 3 February 2022, ACT Government clinics have administered 50.7 per cent of all COVID-19 vaccine doses in the Territory, with our partners in primary care administering 46.4 per cent and 2.8 per cent delivered through Commonwealth aged-care programs.

Booster Vaccination

The ACT is focussed on the rollout of booster vaccines to people aged 16 years and older, 3-months after the completion of their primary vaccine course. These vaccine doses are recommended but not essential to be considered fully vaccinated against COVID-19, although the Australian Health Principal Protection Committee (AHPPC) are actively reviewing whether to include a third vaccine dose within the definition of a primary course.

As at 3 February 2022, 51.7 percent of all Canberrans aged 16-years and older had received a third (or booster) vaccine. This compares with a national population coverage of only 40.8% booster uptake. Initially, the ACT experienced strong demand for booster vaccinations, with all available appointments filled. The Airport Precinct mass vaccination site was reopened to help surge in response to anticipated demand for booster vaccines.

However, ongoing demand for booster vaccines has dropped in recent weeks.

As at 3 February almost 155,000 Canberrans (aged over 16) are eligible to receive their booster vaccine but have not come forward to receive it. ACT Health Directorate are reviewing and seeking to address reasons for this decline in booster demand. Such a decline in demand is being experienced by all Australian jurisdictions.

Anecdotal feedback in Canberra, as well as other jurisdictions, is that reduced demand has resulted, at least in part, due to a community view that Omicron is less severe; as well as confusion about when it is appropriate to receive a booster vaccine after recovering from COVID-19. ACT Health are in the process of developing clear messaging for the community about these issues to encourage booster vaccination uptake.

Paediatric (5 to 11-year-olds) Vaccination Program

On 5 December 2021, the Therapeutic Goods Administration (TGA) provisionally approved the Pfizer COVID-19 vaccine for 5 to 11-year-olds. The approved paediatric dose of the vaccine is a diluted formulation of the existing Pfizer Comirnaty vaccine already being administered to people aged 12-years and older. The TGA is also considering the provisional approval of a paediatric Moderna vaccine for 6 to 11-year-olds, although no decision about suitability has yet been made.

Paediatric vaccinations began being administered by ACT Government and primary care clinics from 10 January. As at 3 February 2022, 71.9 percent of ACT children aged 5 to 11 years had already received their first dose of an approved COVID-19 vaccine.

There is an 8-week interval between first and second primary doses of the vaccine for this age group. This means that second vaccine doses will begin being administered in March, with peak vaccine protection reached from mid-April 2022. This interval can be shortened in special circumstances to a minimum of 3 weeks, for higher risk groups (such as those with medical risk factors for severe illness).

Ongoing demand for paediatric vaccines has reduced since the recommencement of the school term on 31 January 2022. Canberra Health Services will continue to offer paediatric appointments to remaining unvaccinated children and have begun offering family appointments for adults who have children in this age group and would like to come forward to receive a booster at the same time. The AIS Arena site is also promoting the “*Superhero Saturday*” clinic on Saturday 12 February 2022 for any unvaccinated children (and their families) wanting to receive their first vaccine dose.

Equity to Access program

The ACT’s Equity to Access Program delivers COVID-19 vaccinations to vulnerable and marginalised community members through in-reach, pop-up, mobile and in-home settings. The Program recommenced on 24 January 2022 and will run until the end of April 2022. Aspen Medical have been re-engaged to support vaccine administration alongside ACT Health Directorate.

The 2022 Program is focussed on delivering third dose and booster vaccines to eligible adults that received their primary course as part of the 2021 program rollout. As at 2 February 2022, the program has administered:

- 41 paediatric vaccine doses to children aged 5 to 11 years across in-reach clinics at Malkara and Cranleigh specialist schools, as well as in-home vaccination appointments; and
- 112 booster vaccination doses, primarily to adults that are homebound and living with disability.

Aboriginal and Torres Strait Islander community

The ACT experienced strong uptake of primary course vaccines from the Aboriginal and Torres Strait Islander population in 2021, with vaccine uptake comparable across the indigenous and non-indigenous community. Unfortunately, demand for booster doses across the Aboriginal and Torres Strait Islander community has not been as strong as that experienced by non-Indigenous persons. Using population figures sourced from the Australian Immunisation Register (AIR), in alignment with a decision of the Commonwealth Aboriginal and Torres Strait Islander Advisory Group, as at 2 February 2022:

- 89.9 per cent of eligible Canberrans who identify as Aboriginal and Torres Strait Islander had received their first vaccination dose, 86.9 per cent were fully vaccinated and 30.0 per cent had received a third / booster dose; and
- 87.4 per cent of eligible non-Aboriginal and Torres Strait Islander Canberrans had received their first vaccination dose, 86.3 per cent were fully vaccinated and 43.4 per cent had received a third / booster dose.

ACT Health Directorate is working closely with our partners to consider additional ways to encourage vaccination across the Aboriginal and Torres Strait Islander community and the

Equity to Access Program will likely play a role in helping to target this population cohort at future clinics.

It is important to note that AIR population figures inflate the ACT population by up to 20 per cent based on health services usage in the ACT as recorded by ACT Medicare addresses, compared to ABS and ACT Treasury population estimates.

Mandatory vaccination of workers

Four public health directions remain in place, which collectively ensure that workers in aged care, disability care, health care and teacher and childcare workers (of children under 12) have received their two-dose primary course of an approved COVID-19 vaccine. The directions target critical and high-risk sectors and are designed to curb COVID-19 transmission and reduce the severity of adverse outcomes associated with virus transmission.

At this time, it is not mandatory for these workers to have received a booster vaccine. This decision may be reviewed pending further advice from the Australian Health Principal Protection Committee and the Australian Technical Advisory Group on Immunisation (ATAGI). I have briefed you separately in relation to this matter and ACT Health Directorate are preparing amendments to relevant public health directions should the AHPPC amend its advice.

Conclusion

The number of confirmed cases in the ACT has stabilised since the sharp increase experienced in December 2021 and January 2022. However, there is still considerable uncertainty around case numbers and potential increases over the coming weeks in view of increased movement across the community and our ongoing transition to COVID Normal.

ACT Health continues to respond to the prevalence of the Omicron VoC and is prioritising the prevention of outbreaks in high-risk settings and among vulnerable cohorts of the population. Public health social measures and test, trace, isolate and quarantine (TTIQ) measures remain vitally important to minimise community transmission as much as possible and protect health system capacity.

The ACT is leading the nation in the uptake of COVID-19 vaccination booster doses and our high booster dose coverage has prevented a significant increase in hospitalisations and minimised the impact of the Omicron variant on health system capacity.

While the ACT continues to record daily case numbers in the hundreds, our current public health control measures remain proportionate. These measures will continue to be reviewed and eased where it is safe to do so.

ACT Health will closely monitor the number of confirmed cases that require hospitalisation due to COVID-19 and the overall impact of the epidemiological situation on health system capacity. As we move to living with COVID-19 and case numbers increase, public health officials will be focused on hospitalisation and vaccination data to understand the impact of the virus on our community and where resources are required within our health system.

Recommendation

As Chief Health Officer, I recommend to the Minister for Health that the public health emergency declaration be extended for a further 90 days due to the ongoing public health risk which is posed by COVID-19, and particularly due to the current uncertain period.

Currently, I am of the view that it remains necessary to maintain effective TTIQ measures and public health social measures to mitigate the risk of widespread transmission of the Omicron variant in the ACT and protect vulnerable Canberrans as case numbers are only now starting to stabilise. The recent decline is in the context of increasing movement in the community after the summer break and relatively low booster uptake (compared with primary course) and low vaccination coverage of 5 to 11-year-olds. There remain a high number of high risk sites impacted by COVID-19 and the 7-day incidence rate of COVID-19 indicates that the ACT is still experiencing high community transmission of the Omicron variant.

This recommendation is consistent with that of other Australian jurisdictions, including the Commonwealth, which are maintaining emergency status or similar at this time and focusing on suppression for the purpose of minimising transmission within high risk settings and among vulnerable population cohorts.