

The Hon. Scott Morrison MP
Prime Minister

MEDIA STATEMENT

Monday 28 June 2021

NATIONAL CABINET STATEMENT

The National Cabinet met today to discuss Australia's COVID-19 response, recent outbreaks of COVID-19 and the Australian COVID-19 Vaccine Strategy.

National Cabinet continues to work together to address issues and find solutions for the health and economic consequences of COVID-19.

Across Australia a number of new community outbreaks have appeared in Greater Sydney, Brisbane, the Sunshine Coast, the Darwin region and the Perth-Peel region. Concerningly a number of these outbreaks are linked to the delta variant which has significantly higher transmissibility.

Health measures put in place by National Cabinet throughout the pandemic have been effective in bringing outbreaks under control and reducing the severity of the health impacts. While there are now over 270 active cases in Australia (166 in NSW, 45 in Vic, 40 in Qld, 9 in SA, 8 in NT, 3 in WA), there are only 2 cases in ICU and no Australian is on a ventilator.

Since the beginning of the pandemic there have been 30,528 confirmed cases in Australia and, sadly, 910 people have died. More than 20.4 million tests have been undertaken in Australia. Testing has increased nationally over recent days with 628,000 tests reported in the past 7 days.

Globally there have been over 181 million cases and sadly over 3.9 million deaths, with 318,555 new cases and 6,422 deaths reported in the last 24 hours. The COVID-19 pandemic continues to surge in many countries around the world.

Australia's COVID-19 vaccine rollout continues to expand. To date 7,374,666 doses of COVID-19 vaccines have been administered in Australia, including 48,346 doses in the previous 24 hours. In the previous 7 days, 783,925 vaccines have been administered in Australia. To date 28.6 per cent of the Australian population aged 16 and over have now had at least a first dose of a COVID-19 vaccine, including over 68.1 per cent of over 70 year olds.

COVID-19 vaccinations are working to reduce transmission. National Cabinet noted that in a recent exposure event in NSW, of the 30 people that were at the event, 24 unvaccinated people have now tested positive for COVID, but six vaccinated people who attended the event have not been infected at this stage with the COVID-19 virus.

National Cabinet agreed on the imperative to work together to administer COVID-19 vaccinations to Australians as quickly as possible.

Chief Medical Officer Professor Paul Kelly provided an update on current outbreaks of COVID-19 in a number of locations and of both the Alpha and Delta variants.

National Cabinet noted the importance of national coordination and that the Commonwealth Department of Health National Incident Centre will continue to coordinate action across Australia.

Lieutenant General John Frewen, Coordinator General of Operation COVID Shield, provided a detailed briefing on the vaccination program.

Lt General Frewen reaffirmed that all states and territories are provided COVID-19 vaccinations on a proportional population basis, as agreed by National Cabinet. To date over 10.8 million doses have been allocated to states and territories, general practices (GPs), Aboriginal Community Controlled Health Organisations (ACCHOs) and community pharmacies. Lt General Frewen noted that there are more than 2.6 million doses of AstraZeneca currently available to be administered. National Cabinet encouraged the 2.3 million Australians aged 60 years and over who have not yet been vaccinated to come forward and be vaccinated now.

Around 221,000 second doses of AstraZeneca were administered last week, the week after the latest ATAGI advice.

An additional 236 GPs have been brought online to administer COVID-19 vaccines, bringing the total number of GPs administering the vaccine to 5,085 across Australia. Community pharmacists are also being brought online to support the rollout in regional Australia.

National Cabinet noted that Lt General Frewen will commence a wargaming process with states and territories to ensure that the distribution channels and access points are sufficient once the supply of vaccines further increases.

National Cabinet agreed to meet next on Friday 2 July 2021.

Mandatory Vaccinations for Aged Care Workers

The National Cabinet agreed to mandate that at least the first dose of COVID-19 vaccine be administered by mid-September 2021 for all residential aged care workforce.

The National Cabinet agreed that COVID-19 vaccinations are to be mandated for residential aged care workers as a condition of working in an aged care facility through shared state, territory and Commonwealth authorities and compliance measures.

This is the third time AHPPC has considered this matter. They will continue to look at the issue to ensure we do not encounter any unintended consequences as an outcome of this decision.

The Commonwealth will support this decision through an employee vaccination support grant.

Residential Aged Care COVID-19 Employee Vaccination Support Grant

Residential aged care workers will be supported to be vaccinated through an \$11 million program to enable them to attend off-site vaccination centres and GPs.

Under the grant, Residential Aged Care Facilities (RACFs) will be paid for the following three categories of eligible expenditure:

- Casual staff going off-site for vaccination – a flat fee of \$80 payable per staff member, per dose;
- Paid leave for casual staff who become unwell after vaccination and do not have other leave entitlements – one day's paid leave (at a rate of \$185) for up to a quarter of the provider's total number of casual staff; and
- Facilitation of off-site vaccination for employees – up to \$500 per site in flexible vaccination facilitation costs per site, which may be used for activities like: transport services, arranging groups of staff to be vaccinated and or any other reasonable expenses that incentivise staff to get vaccinated.

Quarantine

National Cabinet agreed to changes to Australia's quarantine arrangements based on AHPPC advice:

1. National Cabinet endorsed the AHPPC advice: **Minimising the risk of transmission from high risk international travellers in managed quarantine facilities**

The AHPPC recommends accommodating international quarantine residents, or other high infectious risk quarantine residents, separately from other lower risk residents. This may involve designating different facilities or zoning through allocating separate areas in a facility (i.e. designated floors for international or other high risk travellers). In the event that international quarantine residents share a facility, zoning may be implemented by putting groups in cohorts according to level of risk and ensuring that staff do not work across zones.

2. National Cabinet endorsed the AHPPC advice: **Testing travellers once they leave managed quarantine**, and requested that AHPPC work on implementation to mandate post quarantine testing and specifications for this.

AHPPC reinforced advice that all travellers leaving managed quarantine must get tested and isolate until they receive a negative test result if they develop symptoms at any time in the 14 days after leaving quarantine.

AHPPC agreed that all international travellers should get tested at days 16 or 17 following quarantine, if there have been potential exposure sources within the quarantine facility, regardless of whether they have symptoms. Options are being explored to support post-quarantine testing at the national level. AHPPC will continue to explore the management of persons post-quarantine to reduce the risk to the community whilst testing is being undertaken.

3. National Cabinet endorsed the AHPPC advice: **Vaccinating and testing quarantine workers** to require vaccinations and testing for quarantine workers including those involved in transportation.

Protecting quarantine workers is an essential part of reducing the risk of transmission and incursion into the community. The primary mechanisms through which this can be achieved is vaccinating all quarantine workers and undertaking regular routine testing of workers to identify transmission events should they occur.

Vaccinations: All quarantine workers and their household contacts are eligible for COVID-19 vaccination.

All quarantine workers should be strongly encouraged to undergo vaccination, and jurisdictions may implement requirements for quarantine workers to receive vaccinations. This includes those directly employed in quarantine facilities under Commonwealth, state or private arrangements. Importantly, this also includes anyone who works in a red zone.

Given recent incursions, Delta variants and the current epidemiology of clusters occurring around Australia, the AHPPC recommends mandatory vaccination for all quarantine workers.

Testing: In November 2020, the AHPPC recommended regular testing of quarantine workers. In response to the increasing risk posed by Variants of Concern, since February 2021, daily testing of quarantine workers has been implemented nationally. However, to date this has been limited to those directly involved in managed quarantine programs.

In response to lessons learned from recent transmission events, current epidemiology and discussion through the Continuous Improvement Framework, the AHPPC recommends extending this requirement to all workers directly and indirectly involved in managed quarantine. This includes workers involved in transport of quarantined individuals.

4. National Cabinet agreed that travellers who have been through 14 days hotel quarantine in one jurisdiction will be able to enter another jurisdiction without having to go through another 14 days quarantine. These travellers will still be required to take a post quarantine COVID-19 test at day 16 or 17.

National Cabinet further reaffirmed that managed quarantine for international arrivals continues to play a vital role in Australia's public health response to COVID-19. Through the [Continuous Improvement Framework](#), the Australian Health Protection Principal Committee (AHPPC) regularly considers lessons learned in managed quarantine including the outcomes of evaluations, audits and reviews. This supports a process of continuous quality improvement in line with the [National Principles for Managed Quarantine](#).

Indemnity arrangements for COVID-19 vaccinations

National Cabinet noted that the Commonwealth will establish a COVID-19 professional indemnity scheme to provide additional certainty to healthcare practitioners who are providing advice to people in relation to COVID-19 vaccination. The scheme covers COVID-19 vaccines approved by the TGA and approved for use in the vaccine program.

National Cabinet noted that GPs can continue to administer AstraZeneca to Australians under 60 years of age with informed consent and that this measure will provide confidence to medical practitioners to administer both AstraZeneca and Pfizer vaccines to Australians.

Aviation, interstate freight transport and mining (FIFO) workers

National Cabinet agreed to seek advice from AHPPC on COVID-19 vaccinations for aviation, interstate freight transport and mining (FIFO) workers.

[ENDS]