

# Chief Health Officer Advice – Status of the Public Health (COVID-19 Management) Declaration Extension 2022 and associated COVID-19 Management Directions

11 January 2022

I, Dr Kerry Coleman, Chief Health Officer of the Australian Capital Territory, provide the following advice to the Australian Capital Territory Executive on the status of the Public Health (COVID-19 Management) Declaration 2022 (the Management Declaration). This advice is provided in accordance with Part 6C of the *Public Health Act 1997*.

## Scope of a Public Health (COVID-19 Management) Declaration

The Public Health Act 1997 establishes a regulatory framework for protecting the public from risks to public health presented by COVID-19. The Executive may make a Public Health (COVID-19 Management) Declaration (COVID-19 Management Declaration) where there are reasonable grounds for believing that COVID-19 presents a serious risk to public health.

In forming a belief on reasonable grounds that COVID-19 presents a serious risk to public health, the Executive must –

- a) consider whether a material risk of substantial injury or prejudice to the health of people has happened or may happen because of COVID-19; and
- b) take into account the following:
  - i. the number of people likely to be affected;
  - ii. the location, immediacy and seriousness of the threat to the health of people;
  - iii. the nature, scale and effect of any harm, illness or injury that may happen;
  - iv. the availability and effectiveness of any precaution, safeguard, treatment or other measure to eliminate or reduce any risk to the health of people.

A COVID-19 Management Declaration may only be in force for a period of up to 90 days at a time and can be extended by the Executive on one or more occasions for a period not longer than 90 days on each occasion.

During a period when a COVID-19 Management Declaration is in force, I am required to provide advice to the Executive every 30 days in my capacity as Chief Health Officer about the status of the risk presented by COVID-19.

Under the *Public Health Act 1997*, the implementation of a COVID-19 Management Declaration enables the implementation of specific Ministerial (Division 6C.3), Chief Health Officer (Division 6C.4) and Executive (Division 6C.5) directions to protect the public from the public health risks presented by COVID-19.

## Status of the risk presented by COVID-19

### Current epidemiological situation in the ACT

Following an increase in the number of reported COVID-19 cases in the ACT in the lead up to the summer holiday and new year period, COVID-19 cases have begun to decline. In the week ending 5 January 2023, the ACT recorded 1,436 new COVID-19 cases. This is a decline of 31.1 percent from the previous week ending 29 December (2,085) and is a 52.4 percent decrease in cases from the week ending 15 December 2022 (3,018), when COVID-19 transmission was at its highest point in recent weeks. Most of the 1,436 reported cases (in the week ending 5 January 2023) were identified by rapid antigen test (RAT = 973; 67.8%), with the remaining cases identified by polymerase chain reaction test (PCR = 463; 32.2%). The number of reported cases each week remains low relative to peak Omicron transmission experienced in the week ending 3 July 2022, when there were 8,680 new cases reported.

As of 4pm, Thursday 5 January 2023, there were 73 inpatients with active COVID-19 infection<sup>1</sup> across ACT hospitals, seven of whom were admitted to the ICU with one ventilated. The number of inpatients with active COVID-19 infection across ACT hospitals, while elevated, has remained relatively stable over the summer holiday period (64 inpatients as at 4pm, 29 December; and 81 inpatients as at 4pm, 15 December 2022). The elevated number of inpatients with active COVID-19 infection is expected, given the corresponding rise in case numbers throughout December 2022.

Between 1 December 2022 and 5 January 2023 (inclusive), the lives of nine ACT residents who were COVID-19 positive were lost. Two individuals were in their 70s and all other individuals were aged 80 years or older. The total number of lives lost since the beginning of the pandemic is 144.

The number of active outbreaks being managed in residential aged care facilities (RACFs) has also increased reflecting increased case numbers during the current COVID-19 wave. As at 6 January 2023, there were nine RACFs with active COVID-19 outbreaks<sup>2</sup>, relatively consistent with the previous two weeks when there were 8 active outbreaks (29 and 22 December 2022). Despite an increase in the number of sites managing active outbreaks, there was a decline in the total number of RACF residents testing positive for COVID-19 during this time. As at 4 January 2023, there were 32 RACF residents testing positive for COVID-19, compared with 76 on 28 December 2022.<sup>3</sup>

### Whole Genome Sequencing

Throughout 2022, ACT Health prioritised Whole Genome Sequencing of specimens from outbreaks in high-risk settings, hospitalised cases, deaths, and a small proportion of other community cases.

During the month of December 2022, the most frequent variants detected in the ACT were subvariants of Omicron, consisting of BN (13%), BQ (21%), and BR (26%). The variety of new variants and subvariants is consistent with national and international observations.

### Vaccination

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<sup>1</sup> This figure represents all persons admitted to an ACT hospital for any reason and does not differentiate between a person admitted for COVID-19, or for other reasons. It may include those with a residential address outside of the ACT.

<sup>2</sup> An active COVID-19 outbreak consists of two or more residents testing positive within a 72 hour period for COVID-19 at the same facility/site.

<sup>3</sup> Data sourced from the Department of Health Coronavirus case numbers and statistics site [Coronavirus \(COVID-19\) case numbers and statistics](https://www.health.act.gov.au/coronavirus). Retrieved: 9 January 2023.

There remains limited movement to COVID-19 vaccination coverage in the ACT. Two dose vaccination coverage in children aged 5 to 15 years, and fourth dose vaccination coverage in persons aged 50-years and older have continued to increase slowly. As of 6 January 2023, 76.5 percent of children (5 to 15) have received their full two-dose vaccination course, and 65.7 percent people aged 50 years and older have received four or more COVID-19 vaccine doses. The Australian Technical Advisory Group on Immunisation (ATAGI) has been monitoring the evolving National epidemiological situation and has made no new recommendations regarding COVID-19 vaccine boosters.

## Oral COVID-19 therapeutics

Using Pharmaceutical Benefits Scheme (PBS) data, the estimated rate of dispensed oral therapeutics for COVID-19 positive persons aged 70 years and over remains very high in the ACT. Estimated dispensing to people with COVID-19 in this age group was consistently higher than 100 percent<sup>4</sup> throughout December 2022. The PBS eligibility for people with COVID-19 in other age categories requires specific risk factors for severe disease to be able to prescribe antivirals. This makes it difficult to accurately estimate the denominator of potentially eligible individuals for other age ranges.

## National epidemiological situation<sup>5</sup>

Nationally, there has been an overall decline in the total number of COVID-19 cases being reported each day, following a peak in early December 2022. As at 3 January 2023, the National 7-day rolling average number of COVID-19 cases reported was 8,950 cases; a 23.3 percent decrease from the previous week. This reflects a decline in the total number of COVID-19 cases reported across all jurisdictions for this period, except for the Northern Territory, which had a 7-day rolling average of only 59 cases (a 2% increase from the previous week). Following a peak in the 7-day rolling average on 12 December 2022, of 16,040 cases, there has been a general decline in the average number of COVID-19 cases being reported across all jurisdictions.

Nationally, the total number of COVID-19 associated deaths experienced each day has also declined over time, following a peak in early December 2022. As at 3 January 2023, the provisional<sup>6</sup> rolling 7-day average number of deaths reported was four; compared to the peak of this wave at 31 on 5 December 2022. Consistent with the ACT, the National hospitalisation numbers for patients presenting with COVID-19 is also elevated. As at 3 January 2023, there were 3,514 inpatients presenting to Australian hospitals with COVID-19, an increase of 2 percent on the previous week. Of these, 120 inpatients were receiving treatment in an ICU, an increase of 11 percent on the previous week. Longer-term trend data suggests that Australia has reached a peak in the total number of hospitalisation (refer [Figure 1](#)).

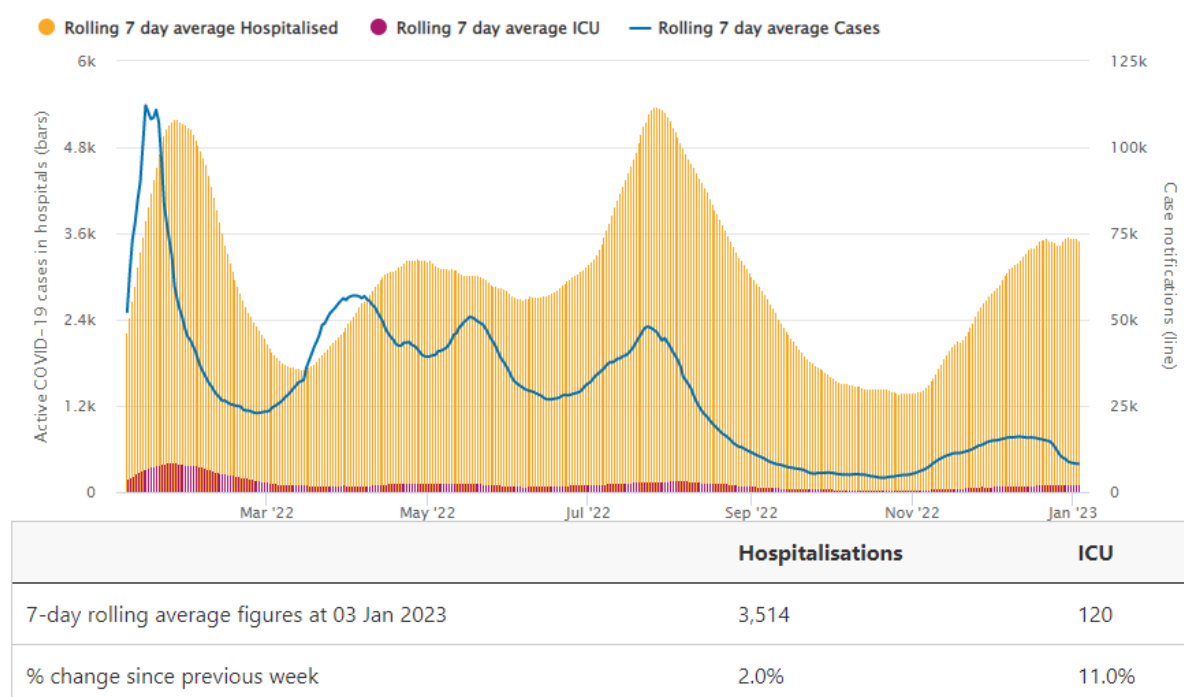
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<sup>4</sup> This information is based on aggregate Pharmaceutical Benefit Scheme data showing scripts dispensed in the ACT with ACT case numbers approximating coverage in this age group.

<sup>5</sup> Coronavirus (COVID-19) case numbers and statistics produced by Australian Government Department of Health and Aged Care. Retrieved from: [Coronavirus \(COVID-19\) case numbers and statistics](#)

<sup>6</sup> Mortality data may have a delay of up to two weeks in confirming death notifications publicly reported by States and Territories. A period of two weeks post notification is permitted, during which time data is considered 'provisional', to allow the Commonwealth to confirm the jurisdictional data reported.

Figure 1: Weekly COVID-19 cases in hospital and ICU, and case notifications, Australia



## Advice to the Executive on the COVID-19 Management Declaration

In considering the epidemiological situation, I am of the view that it is proportionate for the ACT Government to continue to provide a framework to enable the implementation of targeted public health requirements. I recommend that the COVID-19 Management Declaration be maintained for the purpose of:

- appropriately monitoring COVID-19 community transmission
- supporting Canberrans that are at higher risk of severe health outcomes associated with COVID-19, and
- readiness to act to reduce the burden on the public health system, should the ACT again experience a period of increased COVID-19 transmission.

The ACT continues to actively transition to the management of COVID-19 like other similar notifiable respiratory diseases, such as influenza, under the [Strategic Framework for Transitioning COVID-19 Measures](#). Consistent with the framework, ACT Government balances proportionate measures that target population cohorts who are at-risk of severe disease and death, with fostering a capacity building environment that reduces the reliance on government interventions.

Community transmission is likely to continue in a cyclical fashion in response to emerging variants and waning immunity. While there has been a reported decline in the number of COVID-19 cases in the ACT and Nationally, reporting rates may be affected by altered testing and reporting behaviour over the summer holiday period. Throughout 2022, the ACT regularly saw a pattern of reducing COVID-19 testing and reporting during weekend and holiday periods. Hence, there continues to be a level of uncertainty surrounding community transmission, particularly as ACT residents return to work and educational arrangements throughout January 2023.



The COVID-19 Management Declaration is a necessary requirement for the issue of public health directions that reduce the risk of COVID-19 transmission in the community and is vital for maintaining the *Public Health (Chief Health Officer) COVID-19 Management Direction 2022 (No 3)*.

## **Advice relevant to the Public Health (Chief Health Officer) COVID-19 Management Direction 2022 (No. 3)**

Continued RAT reporting requirements under the Chief Health Officer Direction has enabled ACT Health to collect surveillance information enabling the monitoring of COVID-19 transmission in the Territory. The RAT reporting process also allows diagnosed people to receive advice about symptom management and pathways to oral antiviral access.<sup>7</sup> Individuals that are at high risk of severe disease can self-identify to ACT Health, which enables them to receive targeted support from COVID Care@Home and general advice about symptom management and oral antiviral access.

The ability to require the reporting of positive RAT results, where such tests are self-administered, is subject to the current COVID-19 Management Declaration remaining in place. The Public Health Act does not otherwise allow for mandated reporting of test results by community members outside of a COVID-19 Management or Public Health Emergency declaration.<sup>8</sup>

Maintaining RAT reporting requirements under the COVID-19 Management Declaration is a critical and proportionate measure to ensure that ACT Health can effectively monitor the evolving COVID-19 situation in the ACT. Without this measure, the ability for the Chief Health Officer to provide informed advice to ACT Government about the public health risk presented by COVID-19 may be limited.

## **Advice relevant to the Public Health (Ministerial) COVID-19 Management Direction and Exemption 2022 (No. 3)**

The Ministerial Direction requires that facemasks be worn by persons aged 12 years and older when visiting or working in a high-risk setting or providing disability services to support people living with disability. In my last advice (dated 12 December 2022), I communicated that I no longer considered it proportionate to require that staff and visitors attending high-risk settings wear facemasks, by way of public health direction. For this purpose, high-risk facilities include hospitals, residential aged care facilities, residential accommodation facilities, and in-home settings where older persons and people living with disability require frequent, close personal care. I continue to recommend that this Direction end.

In recommending the end of the Ministerial Direction, I encourage all providers to consider their own policies in relation to mask wearing, based on an assessment of risk and obligations under work health and safety legislation. This gives flexibility to services to determine when it may be appropriate for mask requirements to be implemented, alongside any additional risk mitigation measures in place within the various settings.

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<sup>7</sup> Individuals that choose to complete an online short-form survey when reporting their RAT result are provided with this advice.

<sup>8</sup> COVID-19 is a notifiable condition under the *Public Health Act 1997*. However, as written, the Act only compels medical officer, pathology clinics and identified responsible persons to report positive test results outside of an active COVID-19 Management Declaration or Public Health Emergency.

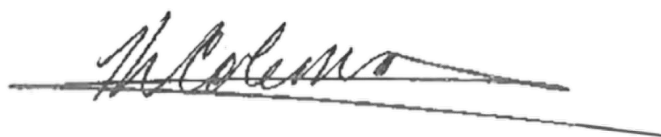
## Recommendation

It is my recommendation that the ACT Executive continue the COVID-19 Management Declaration, subject to the next 30-day review.

The COVID-19 Management Declaration remains a proportionate response to the public health risk presented by COVID-19. Extending the declaration period means that:

- ACT Health can effectively monitor the transmission of COVID-19 in the Territory, and
- ACT Government can respond quickly and proportionately to reduce the burden of COVID-19 on the public health system, should the epidemiological situation deteriorate.

Maintaining the *Public Health (Chief Health Officer) Direction 2022 (No 3)* is critical to preserving the monitoring and surveillance capabilities of ACT Health. In addition, it provides an avenue for triaging and referral of at-risk individuals to appropriate care pathways following notification of their positive status. I also recommend that the Minister for Health allow the *Public Health (Ministerial) Direction 2022 (No. 3)* to end on its scheduled completion date of 29 January 2023. I believe it is appropriate to recommend that affected providers consider implementing their own face mask requirements through individual work health and safety policy settings, if appropriate. In the absence of this directions, ACT Health will continue to work with these providers to offer advice on responding to outbreak and COVID Smart behaviours.



Dr Kerry Coleman  
ACT Chief Health Officer

11 January 2023

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