



Australian Government

Department of Health and Aged Care

Chief Medical Officer

The Hon Mark Butler MP
Minister for Health and Aged Care
PO Box 6022
Parliament House
CANBERRA ACT 2600

Dear Minister Butler

I am writing to provide advice to assist your considerations of various response options with respect to the significant wave of COVID-19 infections currently being experienced in China.

Background/Context

China has been rapidly relaxing its strict public health COVID-19 policies since early December 2022, moving away from their 'COVID zero' policy to 'living with the virus'. Notable changes include:

- ending regular mandatory testing for most people;
- ceasing requirements to show a recent negative COVID-19 test result to enter most public venues, apart from places with added health risks (e.g. care facilities);
- ceasing lock downs of apartment complexes if a positive COVID-19 case is found inside;
- ending requirements for people with confirmed COVID infections to enter state quarantine, instead allowing them to recover at home; and
- deactivating the state-mandated COVID-19 tracking app that had been used for the last three years to monitor people's movements.

Surveillance data from China remains scant, but media reporting suggests very significant waves of infection being experienced across the country, as predicted by public health experts. This is not unexpected, noting relatively low population immunity in China from both previous infection and vaccination.

Health experts in China are predicting three winter waves of COVID-19 transmission, with the current spike in transmission predicted to run until mid-January 2023, and subsequent waves predicted in late January and late February/early March – associated with the Lunar New Year celebrations and returning to work respectively.

Summary of International Response Settings

Some countries have moved to reinstate or implement border measures in response to the evolving COVID-19 situation in China. A summary of international settings (as at 31 December 2022) is provided below:

India	From 24/12/22, international arrivals from China, Japan, South Korea, Hong Kong and Thailand are required to present RT-PCR test results. Those with positive results to be quarantined on arrival.
USA	From 5/1/23, all travellers from China are required to present a negative test result prior to boarding (or documentation of recovery if positive more than 10 days prior to travel). Increased surveillance.
Japan	From 31/12/22, requires a negative test result for travellers from China. Those who test positive are required to quarantine for 7 days, with samples sent for genomic sequencing.
South Korea	Requires a COVID-19 test for all arrivals from China.
Taiwan	From 1/1/23, requires a COVID-19 test for visitors from China.
Malaysia	Increased surveillance measures.
Spain*	Requires travellers from China to present evidence of a negative test result or proof of vaccination status.
France*	From 1/1/23, requires travellers from China to present evidence of a negative COVID-19 test result before flying. Masks will also be required when on the plane, and tests will be carried out on arrival.
England	From 5/1/23, requires travellers from mainland China to present evidence of a negative COVID-19 test result before flying.
Italy*	Requires testing and sequencing of samples from all travellers coming from China.

* - note that Spain, France and Italy have implemented border measures, notwithstanding advice from ECDC, which states that “given higher population immunity in the EU/EEA, as well as the prior emergence and subsequent replacement of variants currently circulating in China by other Omicron sub-lineages in the EU/EAA, a surge in cases in China is not expected to impact the COVID-19 epidemiological situation in the EU/EEA.”

As summarised above, there are various approaches being adopted in response to the evolving situation in China. A key issue of concern among the international public health community is the limited information being published by China, which has highlighted some gaps in global surveillance. In discussions with international counterparts (including those that have moved to implement border measures and those that have not) in recent days, all are giving very active consideration to ways in which to enhance both global and domestic surveillance capabilities targeted at the early detection of emerging variants, building on identified strengths and existing mechanisms.

Also of note, each of the countries that have moved to implement response measures are in the northern hemisphere winter, with several currently experiencing significant waves of COVID-19 and other respiratory virus infection which places additional stress on healthcare systems. At present, no southern hemisphere country has announced border measures.

Assessment of Potential Impact on Australia

Based on available information, and in the absence of a specific threat from a variant with increased pathogenicity and immune escape, I do not believe that there is sufficient public health rationale to impose any restriction or additional requirements on travellers from China (including any measures available to you in the *Biosecurity Act 2015*), noting the current Australian context:

- very high levels of vaccination – especially among those most at risk of severe illness
- high levels of immunity from both prior infection and vaccination (hybrid immunity)
- ready access to treatment and testing for those most at risk of severe illness
- strong surveillance mechanisms, including genomic sequencing and wastewater testing – which can be used to inform any necessary adjustments to the management approach in response to emerging variants of concern
- the BF.7 Omicron sub-variant that appears to be a key driver to the outbreak in China has been present in Australia for some time, and has been superseded by other circulating sub-variants
- it is currently summer in Australia (as distinct from those countries who have chosen to implement enhanced border measures in recent days), which reduces the risk of transmission of respiratory viruses.

I discussed the situation with state and territory Chief Health Officers and public health officials from New Zealand via the Australian Health Protection Principal Committee on 30 December 2022, and there is strong consensus that implementation of any restrictions to travel from China at this time would be inconsistent with the current national approach to the management of COVID-19 and disproportionate to the risk.

Notwithstanding, should you wish to explore in further detail the powers available to you as Health Minister under the *Biosecurity Act 2015*, I will ask that formal legal be prepared for your consideration.

We continue to monitor the situation very closely, and are proactively engaging with international counterparts to obtain as much detailed information about the evolving situation as possible.

Recommended Response

While I do not believe that there is a sufficient public health rationale for imposing restrictions on travellers from China or any other country with a high burden of COVID-19 cases at present, I recommend consideration be given to enhancing Australia's existing surveillance capabilities with a particular emphasis on international arrivals. Pending your agreement, I suggest consideration and

assessment of the following four proposals to further strengthen Australia's capacity to detect and rapidly respond to emerging variants of COVID-19, and contribute to strengthening global surveillance capacity.

1. Explore the feasibility of implementing an aircraft wastewater testing program.
 - a. While Australia has strong existing wastewater testing regimes in the community, the testing of aircraft wastewater may lead to earlier detection of emerging variants of concern of international origin.
2. Implementation of a program of voluntary sampling of incoming travellers on arrival
 - a. This would draw on learnings from a model implemented by the US Centres for Disease Control and Prevention (CDC), and may lead to increased early detection of emerging variants as well as more detail about the origin of those variants.
3. Increase coverage of existing community sentinel wastewater testing
 - a. This would ensure greater capture across Australian jurisdictions, and provide increased confidence in the capacity to detect emerging variants quickly, and ahead of any associated clinical presentation.
4. Enhancing national consistency in follow-up of people who test positive to COVID-19 and have a history of overseas travel in the preceding 14 days.
 - a. This would provide a basis for the collection of consistent case and symptom information which may assist in development of clinical advice as well as add information on likely variant origin.

Should you agree, I will further develop the above proposals for your detailed consideration in coming days.

Yours sincerely

A handwritten signature in black ink, appearing to read 'PKelly', with a long horizontal flourish extending to the right.

Professor Paul Kelly
Chief Medical Officer

31 December 2022