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Australian Health Protection Principal Committee (AHPPC)

Emergency Teleconference

Novel Coronavirus (2019 – nCoV)

Friday 31 January 2020 - 1400 - 1530 AEDT

Outcomes

Outcomes	
Members attending	
Prof Brendan Murphy	Commonwealth Chief Medical Officer
Prof Paul Kelly	A/g CMO
Ms Alison McMillan	Chief Nurse and Midwifery Officer of Australia
Dr Andrew Robertson	Chief Health Officer, Western Australia
Dr Chris Lease	South Australia
Dr Brett Sutton	Chief Health Officer, Victoria
Dr Kerry Chant	Chief Health Officer, New South Wales
Dr Jeremy McAnulty	NSW Health
Dr Jeannette Young	Chief Health Officer, Queensland
Dr Mark Veitch	Chief Health Officer, Tasmania
Dr Hugh Heggie	Chief Health Officer, Northern Territory
Dr Kerryn Coleman	Chief Health Officer, Australian Capital Territory
A/Prof Dianne Stephens	Deputy Chief Health Officer, Northern Territory Medical Director, NCCTRC.
Caroline McElnay	Director Public Health, New Zealand.
R/Adm Sarah Sharkey	Surgeon General, ADF
Mr Joe Buffone	Emergency Management Australia
Invited Experts	
Dr Sonya Bennett	Chair, Communicable Disease Network Australia
Dr Ben Howden	Chair, Public Health Laboratories Network
Dr Mike Catton	VIDRL
Prof Jodie McVernon	University of Melbourne
Prof James McCaw	University of Melbourne
Professor Alan Cheng	Director, Infection, Prevention and Healthcare Epidemiology Unit, Alfred Health
Professor Lyn Gilbert	Director, Infection Prevention and Control, Institute of Clinical Pathology, University of Sydney
Department of Health	
Ms Celia Street	First Assistant Secretary, Office of Health Protection
Ms Rhonda Owen	Assistant Secretary, Health Emergency Management Branch
s22	s22
Prof Allison McMillan	FAS, Chief Nurse and Midwifery
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Prof Murphy welcomed Members and provided a brief update and called on Dr Bennet to provide an update from CDNA.

CDNA

Dr Bennett noted there is still limited evidence of pre-symptomatic transmission and wants to be cautious with wording. CDNA supports the definition of the infectious period commencing at onset of symptoms, with a reference to assessing emerging evidence of potential infectious period up to 48 hours prior to onset of symptoms. CDNA determined to use the '48hr rule'.

Members discussed a definition of 'close contact' during the infectious period. It was agreed that close contacts should include those exposed to cases during the 48hr period prior to onset of symptoms.

CDNA asked that the Secretariat do further research with international partners on their position on defining close contacts during the pre-symptomatic period.

Members further discussed whether it would be appropriate to reduce the pre-symptomatic period to 24 hours (rather than 48 hours) prior to the onset of symptoms. Members agreed to reduce to 24 hours.

ACTION: CDNA Secretariat to undertake further international research on the presymptomatic period.

e-sym act remains ACTION: Members agreed to reducing the pre-symptomatic period from 48 to 24 hours while leaving definitions of close and casual contact remaining the same.

Case Updates s47F

s47C

Data Requirements

Ms Street requested early notification of confirmed cases from jurisdictions, noting these are used for daily Sit Reps being published by the NIR but also for information gathering.

She advised the data requirements from other Government agencies to enable contact tracing of passengers who had arrived in Australia from Hubei Province in the past 14 days. s47C

Ms Street noted the need to clarify what the information would be used for to ensure this would be justifiable under privacy legislation.

Ms Street agreed to provide advice to AHPPC on what information may be passed to state and territories but that it would be limited to Health departments not to be disseminated further.

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ACTION: Ms Street to provide advice to AHPPC on content

Prof Murphy asked Members to advised if the novel Coronavirus has been listed as a nationally notifiable disease in their jurisdiction:

A.C.T: in train Tasmania: from 6 Feb Northern Territory: from 6 Feb Queensland: as at 30 January NSW - about a week ago Western Australia: as at 27 January South Australia: as at 28 January Victoria: in place

Masks

Professor Gilbert advised that advice remains the same as yesterday: P2 masks should be used for respiratory specimen collection only as part of appropriate PPE for these procedures.

Members agreed that the use of hand held thermometers inconsistent with advice on evidence that that it is being done during Chinese exit screening

ed th er discus Members discussed access to masks. It was agreed that more information on the global supply situation would be gathered before further discussion.

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A planning workshop has been organised by CDNA to be held in Canberra on Monday which would look at the need to enhance the case definition and therefore border measures.

Meeting was closed at 1530.

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