



Australian Government

Department of Health

Chief Medical Officer

The Hon Greg Hunt MP
Minister for Health
PO Box 6022
Parliament House
CANBERRA ACT 2600

Dear Minister

I am writing to recommend an extension to the current human biosecurity emergency period regarding 'human coronavirus with pandemic potential' (COVID-19). The current human biosecurity emergency period is scheduled to end on 17 June 2021.

I last provided you with advice to extend the declaration in February 2021.

The Biosecurity Act 2015

On 18 March 2020 the Governor-General declared a human biosecurity emergency in relation to COVID-19 under section 475 of the *Biosecurity Act 2015* (the Act). This enabled you to determine requirements and give directions under the Act that are necessary to prevent or control the entry, emergence, establishment or spread of COVID-19 in Australian territory or part of Australian territory.

Under section 476 of the Act, the Governor-General may vary a human biosecurity emergency declaration to extend the human biosecurity emergency period for a period of up to three months on the condition that you are satisfied that:

- a) the listed human disease (COVID-19) is continuing to pose a severe and immediate threat or is continuing to cause harm to human health on a nationally significant scale; and
- b) the extension is necessary to prevent or control the entry into, or the emergence, establishment or spread of COVID-19 in Australian territory or a part of Australian territory.

The Determinations made under section 477 of the Act include:

1. Conditions for passengers and aircrew entering Australia to have worn a mask for the duration of flights to Australia; to not have been exposed to a person who tested positive for COVID-19 72 hours before the flights departure; for passengers to provide a negative Reverse Transcription Polymerase Chain

- Reaction COVID-19 test result prior to departure; and airline operators to take all reasonable steps to ensure that the measures are complied with;
2. Restrictions on the entry and movement of cruise vessels within Australian territory;
 3. Restrictions on outbound international travel for Australian citizens and permanent residents; and
 4. Restrictions on trade of retail outlets at international airports.

Provided the human biosecurity emergency period is extended until 17 September 2021, these Determinations under section 477 of the Act will continue to have effect for the duration of that period or until such a time that they are no longer deemed appropriate for managing the threat posed by COVID-19 and can be revoked.

Before determining a requirement under subsection 477(1), you must be satisfied that the requirement is likely to be effective in, or to contribute to, achieving the purpose for which it is to be determined, that the requirement is appropriate and adapted to achieve the purpose for which it is to be determined, that the requirement is no more restrictive or intrusive than is required in the circumstances, that the manner in which the requirement is to be applied is no more restrictive or intrusive than is required in the circumstances and that the period during which the requirement is to apply is only as long as is necessary. In determining emergency requirements, I have provided health advice addressing these matters below.

Medical advice supporting the extension of the human biosecurity emergency period

The number of new cases of COVID-19 recorded globally continues to rise at an alarming rate. Variants of SARS-CoV-2 have emerged internationally, and new variants will continue to emerge. As at 27 May 2021, a total of 168,040,871 cases of COVID-19 have been reported globally, including 3,494,758 deaths. The five countries reporting the highest numbers of new cases in the last seven days are India, Brazil, Argentina, the United States of America and Colombia.

As at 27 May 2021, there have been 30,063 cases of COVID-19 reported in Australia, including 910 deaths. There is currently an outbreak in Victoria, with the first case being identified on 24 May 2021, and 26 active cases overall. The outbreak is linked to a case reported by Victoria on 11 May 2021, and associated with an international arrival who acquired their infection whilst in hotel quarantine in South Australia. Genomic sequencing has confirmed the strain of the virus detected in several of the Victorian cases matches the strain of the South Australian case (Indian variant of concern sub-lineage B.1.617.1). Epidemiological links between the South Australian case and the Victorian outbreak cases continue to be investigated.

While current case numbers are low, cases and clusters from high risk settings continue to emerge. Also of particular concern, New South Wales and Western Australia have recently seen COVID-19 transmitted in hotel quarantine facilities, as well as community transmission cases. In one particular instance, two sets of guests, in rooms opposite each other, had the same sequence of virus, despite arriving from different countries at different times. In another instance, a hotel security guard tested positive and infected two other people. Each new case identified in quarantine increases the risk of leakage into the Australian community through transmission to quarantine workers or other quarantined returnees and subsequently

into the Australian community more broadly. This quarantine 'leakage' presents a significant risk to the largely non-immune Australian community.

All international arrivals are required to quarantine for 14 days at a designated hotel, unless an exemption applies (non-cruise maritime crew and aviation crew). As at 21 May 2021, Australia has had 346,546 international air arrivals since 28 March 2020. Since hotel quarantine measures were implemented on 28 March 2020, approximately 1.1% of international arrivals have tested positive for COVID-19. ^{47C, 47E(d)}
^{s47C, s47E(d)}

On the basis of this international and domestic evidence, COVID-19 is continuing to pose a severe and immediate threat to human health on a nationally significant scale.
^{s47C, s47E(d)}

The four Determinations made under section 477 of the Act remain necessary for a further three months to prevent or control the entry/spread of COVID-19 as follows:

1. Safe Air Travel Determination

- In January 2021, additional requirements were put in place to give effect to the Safe Air Travel recommendations of AHPPC in relation to pre-departure testing and mask wearing for international flights. Passengers and air crew on international flights must wear a mask for the duration of the flight, with limited exemptions, and at Australian international airports. Passengers travelling to Australia must provide a negative Reverse Transcription Polymerase Chain Reaction COVID-19 test result prior to departure.

^{s47C, s47E(d)}

- 47C, 47E(d)

2. Cruise Ship Determination

- 47C, 47E(d)

3. Overseas Travel Ban Determination

- Under this Determination, Australians are unable to travel overseas without an exemption. 47C, 47E(d)

- 47C, 47E(d)

4. Retail Outlets Determination

- Designated retail outlets still cannot trade in international airports unless an exemption applies. The 'exceptional circumstance' exemption under the Determination gives the designated airports opportunity to seek an exemption from the Department of Infrastructure's Secretary 47C, 47E(d)
- This Determination prevents arriving international passengers, who may be infected with COVID-19 and who have not yet completed quarantine, from passing that infection on to retail workers who may then infect their families and the broader community. 47C, 47E(d)

In my capacity as Director of Human Biosecurity, I am satisfied that extending the declaration of the human biosecurity emergency period in relation to COVID-19 by a further three months to 17 September 2021 is necessary. 47C, 47E(d)

. I am satisfied this time period is suitable and appropriate to manage the medium and longer term response requirements for COVID-19.

Yours sincerely



Professor Paul Kelly
Chief Medical Officer
Director of Human Biosecurity
28 May 2021

THIS DOCUMENT HAS BEEN RELEASED UNDER
THE FREEDOM OF INFORMATION ACT 1982
BY THE DEPARTMENT OF HEALTH