Your Ref: Our Ref: Contact:

The Honourable Mark McGowan MLA
Premier of Western Australia
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Dear Premier

VICTORIAN CONTROLLED BORDER ARRANGEMENTS

On Saturday 14th November 2020, Western Australia (WA) transitioned from a closed border arrangement to a safe and controlled border arrangement to allow for safe travel into WA from interstate and New Zealand. On 16 August 2021, I recommended changes to the 'Trigger Points for Reviewing Border Controls' table that set out the different risk levels, the point at which they would apply to other jurisdictions and the conditions that would be placed on travellers (Attachment 1). These additional restrictions, including the rationale for each change and how they would mitigate the risk to the WA population, were outlined in my letter. The amendment of the conditions applied to the 'high risk' category included:

- 1. the requirement to provide proof of a negative COVID-19 Polymerase Chain Reaction (PCR) test in the 72 hours prior to departure;
- 2. proof of receipt of at least one dose of COVID-19 vaccine, where eligible;
- 3. a mandatory requirement to use the G2G Now App on arrival in WA, unless exempted by an authorised officer;
- 4. testing at days 2 and 12;
- 5. a 200 km limit on the distance that may be travelled to a place of self-quarantine on arrival in WA, with a requirement that the traveller/s travel directly to that place without stopping other than as required by law or for fuel, unless modified by an authorised officer;
- 6. the requirement for any other individual in the suitable accommodation to quarantine for 14 days from the date the traveller left a 'high risk' jurisdiction, undertake Day 12 testing and use the G2G Now App; and
- 7. removal of the requirement for mandatory hotel quarantine.

Given the situation in New South Wales (NSW) at the time, with 392 cases per day on a five-day rolling average and 312 cases per day on a 14-day rolling average, I recommended that NSW should move to the revised 'high risk' category, which was

implemented on 17 August 2021. On 20 August 2021, I advised that NSW should move to the 'extreme risk' category, which came into force on 26 August 2021.

Victoria

On 16 July 2021, I recommended that Victoria move from the 'low risk' category to the 'medium risk' category. Two clusters had originated from travellers infected with the COVID-19 Delta variant returning from Sydney. Further cases were detected, and, by 16 July 2021, the total number of detected cases was 24, with cases known to have been active in the community while infected, resulting in nearly 120 identified exposure sites.

The outbreak in Victoria is ongoing and has continued to grow despite extensive lockdowns, with the Victorian Department of Health and Human Services (DHHS) reporting 72 new cases on 30 August 2021. DHSS also reported that 49 cases are now hospitalised, with 15 in intensive care and 11 on ventilators. Of the 72 local cases recorded, 32 cases are linked to current outbreaks, 20 are linked household members of unlinked cases and 20 cases are under investigation. In addition to Melbourne, Victoria has a major outbreak in Shepparton, with 9 new cases reported on 30 August 2021. Victoria now has a 5-day rolling average of 77.6 cases per day and a 14-day rolling average of 60 cases per day. Unfortunately, this outbreak has yet to peak, with case numbers doubling every 10-12 days despite lockdowns. There are some indications that these measures are starting to flatten the epidemic curve and will lead to reduced case numbers, but is unlikely to have significant impact for some weeks. While the numbers of travellers entering WA from Victoria are currently low, the risk posed by individual travellers continues to rise as COVID-19 becomes more widespread in Greater Melbourne and regional areas of Victoria.

Current modelling shows that WA in Phase 5, which removed the final restrictions on physical distancing and significantly increased the numbers and mixing at high risk venues, including at bars, nightclubs, music venues, stadiums and events, is the most susceptible of all the jurisdictions to a major outbreak, due to the increased numbers of people moving around in our society and the mixing between non-family groups. This susceptibility has continued to increase in recent modelling. The emergence of the highly transmissible Delta variant increases this susceptibility further, particularly among household and work groups. While vaccine uptake is starting to reduce this susceptibility, with over 32% fully vaccinated, WA's susceptibility to a major outbreak is expected to remain very high over the next three months.

On this basis, I recommend that Victoria move from the 'medium risk' category to the 'high risk' category. Given the requirements to have a negative COVID-19 PCR test in the 72 hours prior to departure and to have had at least one dose of COVID-19 vaccine, where eligible, prior to arriving in WA, I would recommend that there be at least 5 days from announcement to allow this testing and vaccination to occur. Consequently, I recommend that Victoria should be moved from the 'medium risk' category to the 'high risk' category on or after 0001 hours on 06 September 2021.

Introduction of a requirement for PCR testing for 'medium risk' jurisdictions

PCR testing remains the gold standard for identifying both asymptomatic and symptomatic cases of COVID-19. The testing is also readily available in all jurisdictions at public and private clinics. The introduction of the requirement for international travellers to have a negative PCR test within 72 hours of flying to Australia has been highly effective in reducing the number of cases seen in WA's hotel quarantine facilities. The recent introduction of this requirement to travellers from 'high risk' or greater jurisdictions, initially in NSW, has provided greater certainty of the non-infectious status of travellers arriving in WA and is also anticipated to reduce any in transit infections. This requirement should be now be applied to all adults and to children 12 years and older in the 'medium risk' category, noting WA already has PCR testing requirements at days 2 and 12 in self-quarantine. Given the well-established testing processes in all jurisdictions, 72 hours is anticipated to be enough time to get a negative result prior to travelling to WA. To allow these processes to be put in place and for the affected people to be tested, it is recommended that this also be implemented on or after 06 September 2021.

I am happy to re-consider the above advice should there be significant changes in the public health situation.

Yours sincerely

Dr Andy Robertson

CHIEF HEALTH OFFICER

31 August 2021

Attachment 1

Trigger Points for Reviewing Border Controls - Revised

Risk of importation from affected jurisdiction (as at 16 August 2021)	Trigger Point for Review	Proposed amendments to current conditions	Recommended review date and proposed action
Extreme Risk	Greater than 500 new community cases per day, on 5-day or 14 day rolling average	 Hotel quarantine for travellers Negative COVID-19 PCR test Receipt of at least one dose of COVID-19 vaccine, if eligible Exemptions restricted to Commonwealth, State and specialist functions only Testing at days 1,5 and 12 	2 weeks. If risk falls to a high risk, implement high risk conditions
High Risk	Greater than 50 new community cases per day, on 5-day or 14 day rolling average	 Negative COVID-19 PCR test Receipt of at least one dose of COVID-19 vaccine, if eligible Home quarantine for travellers Mandatory use of the G2G Now app Limited travel to a place of self-quarantine The requirement for any other individual in the suitable accommodation to quarantine for 14 days, undertake Day 12 testing and use G2G Now app Exemptions restricted to Commonwealth, State and specialist functions only Testing at days 2 and 12 	2 weeks. If risk falls to a medium risk, implement medium risk conditions
Medium Risk	5 to 50 new community cases per day, on 5-day or 14 day rolling average	 Home quarantine for travellers Limited travel to a place of self-quarantine Testing at days 2 and 12 Exemptions restricted to Commonwealth, State and specialist functions only 	2 weeks. If risk falls to a low risk, implement low risk conditions
Low Risk	Less than 5 new community cases per day, on 5-day or14 day rolling average	 Home quarantine for travellers. Limited travel to a place of self-quarantine Testing at day 12. 	2-4 weeks. If risk falls to a very low risk, implement very low risk conditions

Risk of importation from affected jurisdiction (as at 16 August 2021)	Trigger Point for Review	Proposed amendments to current conditions	Recommended review date and proposed action
		General exemptions may be considered if community cases are still occurring	
Very Low Risk	No community cases, from either an unknown source or where the contacts of a case were not in quarantine, for 14 days	 No quarantine or testing required. Declaration that visitor has been in a very low risk jurisdiction for last 14 days Health screening. 	4 weeks. If all jurisdictions meet the very low risk criteria, implement the negligible risk conditions
Negligible Risk	No community cases, from either an unknown source or where the contacts of a case were not in quarantine, for 28 days in all jurisdictions	Open all interstate borders	