



The Hon. Scott Morrison MP
Prime Minister

STATEMENT

Friday 15 May 2020

UPDATE ON CORONAVIRUS MEASURES

The National Cabinet met today to further discuss Australia's current COVID-19 response, easing restrictions in the coming months, helping Australians prepare to go back to work in a COVID-Safe environment and getting the economy moving again.

The Chief Medical Officer, Professor Brendan Murphy, provided an update on the measures underway, the latest data and medical advice in relation to COVID-19.

There have been over 7,000 confirmed cases in Australia and sadly 98 people have died. There are now less than 1,000 active cases in Australia, and over the past week, daily infection rates have remained low. Testing remains high, with more than 950,000 tests undertaken in Australia.

We need to continue to have the right controls in place to test more people, trace those who test positive and respond to local outbreaks when they occur. These are precedent conditions to enable Australia to relax baseline restrictions and enable Australians to live and work in a COVID-19 safe economy.

National Cabinet again encouraged Australians to download the COVIDSafe app to ensure that we can protect Australians and continue to ease baseline restrictions.

More than 5.7 million Australians have already downloaded the COVIDSafe app. This is an enormous achievement but more is needed.

National Cabinet noted that the Governor-General extended the human biosecurity emergency period for three months from 17 June 2020 to 17 September 2020.

This will enable the Minister for Health to continue to exercise the emergency powers under the Commonwealth Biosecurity Act to prevent or control the spread of COVID-19.

The Chief Medical Officer, Professor Brendan Murphy, also provided an update on epidemiological modelling and the rare conditions - paediatric inflammatory multisystem syndrome (PMIS-TS) and

Kawasaki disease. Professor Murphy advised that there were no cases of PMIS-TS or Kawasaki disease related to COVID-19 in Australia.

National Cabinet also received briefings from Treasury Secretary Steven Kennedy, Reserve Bank Governor Philip Lowe and the Australian Prudential Regulation Authority Chair Wayne Byers on the economic and financial situation.

National Cabinet will meet again on Friday 29 May 2020.

Mental Health

National Cabinet endorsed the Mental Health and Wellbeing Pandemic Plan developed by the National Mental Health Commission, in conjunction with teams from New South Wales and Victoria.

The Plan acknowledges the significant impact that COVID-19 has had on the mental health and wellbeing of so many Australians, including mental health impacts from economic downturn through loss of income and job losses.

We have seen these impacts in increased calls for help to our crisis and support services, with Beyond Blue, Lifeline and Kids Helpline together receiving over 130,000 contacts in the last month, an increase of between 25 and 56 per cent for each service, compared with the same time last year.

The Mental Health and Wellbeing Pandemic Plan has three core objectives to:

1. Meet the mental health and wellbeing needs of all Australians to reduce the negative impacts of the COVID-19 pandemic in the short and long term;
2. Outline seven key principles and 10 key priorities to inform the jurisdictions as they respond to the challenges of COVID-19 during the response and recovery from the pandemic; and
3. Define governance, coordination and implementation requirements across jurisdictions to facilitate informed planning and decision making

National Cabinet noted that the Commonwealth will invest \$48.1 million in the plan focused on:

- Improving data and research with more immediate monitoring and modelling of mental health impact of COVID-19, including boosting national capability in monitoring, anticipating and reacting to mental health impacts of the pandemic; expanding the national self-harm and suicide monitoring systems; and investment in the National Suicide Prevention Research Fund;
- Supporting vulnerable groups, by supporting services accessible in homes, workplaces, aged care, schools and other community sites - with a specific focus on vulnerable groups - aged care, carers and indigenous mental health support; and
- Better coordination and communications - more connectivity through improved service linkage and coordination, including a national mental health communication campaign to manage anxiety and encourage mental wellbeing and systems to guide the onward care of people contacting federal digital and telephone support services by connecting them to appropriate local services that provide outreach care in the home.

National Cabinet further noted Victoria's investment of \$19.5 million, announced today, to deliver mental health reforms and additional resources, staff and programs, as more people seek support as a result of the COVID-19 pandemic.

All governments agreed the need for each jurisdiction to ensure Australians receive the mental health services and support they require at this time, and in the coming phases of recovery and rebuilding.

Strong mental health will be a foundation stone as we move ahead, not just to productivity and the economy, but to family wellbeing, social cohesion, community functioning and national resilience.

Elective Surgery

All governments have been monitoring public and private hospital activity, and have reviewed the current situation in light of the restoration of elective surgeries and found:

- The spread of the COVID-19 outbreak has slowed, with new cases decreasing nationally since the restoration of elective surgeries;
- There is currently still unused hospital capacity in all jurisdictions across both public and private sectors, and harm to patients can be reduced by taking further steps to restore elective surgery; and
- PPE supplies need to be carefully managed and while there is a need to continue to actively monitor this and manage availability, supply lines are firming.

Given the current situation and Australia's response to COVID-19, it is now considered safe to reopen elective surgery activity in an incremental and cautious way, while maintaining necessary ICU capacity for any localised outbreaks of COVID-19.

National Cabinet agreed to reopen elective surgery, by removing restrictions and restoring hospital activity involving 3 stages.

It is a decision of each jurisdiction to determine which stage applies to its circumstances, the timeline for implementation and the level of normal surgical activity is safely restored in line with the agreed principles. The stages are:

Stage 1 – up to 50 per cent of normal surgical activity levels (including reportable and non-reportable);
Stage 2 – up to 75 per cent of normal surgical activity levels (including reportable and non-reportable);
Stage 3 – up to 100 per cent of normal surgical activity levels (including reportable and non-reportable) or as close to normal activity levels as is safely possible.

Private Hospitals should mirror their own state's approach to surgical activity unless agreed otherwise with the relevant state.

The level of elective surgery will be reviewed monthly from May 2020 by the Australian Health Ministers' Advisory Council (AHMAC), to ensure that it remains safe and sustainable, and in line with the agreed principles.

Remote Communities

National Cabinet agreed to a framework to inform decisions around lifting remote area travel restrictions as we move through the three-step plan for a COVIDSafe Australia.

This will help remote communities and governments manage risk and respond to cases early. It also recognises that the different circumstances across communities will require different approaches.

Our key concern is ensuring that appropriate arrangements are in place to minimise the risks of transmission and manage any cases or outbreaks that may occur. The restrictions in place in remote communities have followed requests from communities, organisations and leaders, including Aboriginal and Torres Strait Islander leaders.

National Cabinet acknowledged the success with no reported cases of COVID-19 among Aboriginal and Torres Strait Islander people in remote communities.

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