Public Accounts and Estimates Committee

Inquiry into the Victorian Government's Response To The COVID-19 Pandemic

Martin Foley MP
Minister for Health
COVID-19 in Victoria

- **10 Jan:** Chief Health Officer issues first alert
  - Masks or face covering required – metro Melbourne and Mitchell Shire

- **22 July:**
  - State of disaster, Stage 4 Metro

- **9 July:**
  - Stage 3 restrictions – metro Melbourne and Mitchell Shire

- **4 July:**
  - Nine public housing estate lockdown. Two postcodes added to Stage 3 restrictions

- **25 Jan:**
  - First case of COVID-19 in Vic

- **13 March:**
  - First community transmission

- **1 July:**
  - Stage 3 restrictions – ten postcodes

- **2 Aug:**
  - Stage 3 restrictions in regional Victoria

- **5 Aug:**
  - Roadmap for easing restrictions released

- **16 Sept:**
  - Regional Victoria Step 3

- **28 Sept:**
  - Melbourne Step 2

- **18 Oct:**
  - Easing of some social and business restrictions released

- **26 Oct:**
  - Melb recorded zero cases for the first time since 9 June

- **27 Oct:**
  - Melb moved from Stage 4 to Third Step

- **22 Nov:**
  - Last Step

- **8 Nov:**
  - Further easing of Third Step restrictions – no travel restrictions, restricted household visits

**Legend:**
- Acquired in Australia, unknown source
- Contact with a confirmed case
- Travel overseas
- Under investigation
The Andrews Labor Government has provided over $2.9 billion in health initiatives to support the State’s COVID-19 pandemic response, including:

**First wave**
- Invested $1.9 billion early on:
  - new hospital beds
  - accelerated projects for early completion
  - increased critical care capacity to protect the health system.

**Second wave**
- Stage 4 restrictions
  - 26 August – $14.7 million for 17 medical research projects dedicated to fighting coronavirus
- Steps out of restrictions
  - 7 November – $9.8 million for a healthcare worker wellbeing package
  - 13 November – $155 million to establish an Australian Institute for Infectious Disease in the renowned Parkville biomedical precinct
  - 14 November – $120.9 million for delivery of hospital services in patients’ homes
Beating the second wave – testing, tracing and isolating

3,593,321 COVID-19 tests processed since 1 January (as of 2 December)

A network of around 200 fixed COVID-19 testing facilities – at community health services, drive-through and walk-through retail sites, hospital and GP respiratory clinics and pathology collection sites.

Mobile testing to manage outbreaks, respond to COVID-19 risks and surveillance testing.

Surveillance testing higher-risk industries – including aged care, food supply and seasonal horticulture.

Improved testing turnaround time – more than 98 per cent of tests results returned in less than a day.

Sewage wastewater testing sites in 55 locations boost surveillance efforts.
Beating the second wave – testing, tracing and isolating

Our contact tracing system has helped Victoria go from over 700 cases a day to over a month with zero cases – a standout achievement globally.

More than 2,400 public health response teams and contact tracers working to stop the spread of the virus.

100 per cent of cases interviewed within 24 hours – the majority within the first four hours.

Average time of test-to-quarantine of close contacts now 38 hours – exceeds the national standard.

Six new COVID regional public health units rolled out in July – contact tracing, monitoring and support for people who test positive in regional areas.

Six local public health units established in September – contact tracing, monitoring and support for people in metropolitan Melbourne.

In-person door-knocker visits to those in isolation and quarantine.

New digitised contact tracing system – captures test results, interviews, phone calls and the management of cases and contacts.
Protecting our health system

The Victorian Government has worked closely with public and private hospitals since March to deliver system-wide responses and retain capacity to provide health care to Victorians.

$1.9 billion committed for a staged response to meet demand, buy ventilators and personal protective equipment and train the healthcare workforce.

1590 ICU spaces available across Victoria, with around 2500 available for surge (increased from 500 pre-COVID-19).

2,000 ventilators available for immediate use (increased from 1,100 pre-COVID-19).

Public and private hospitals work as one system to respond to the pandemic and to access vacant private hospital wards.

Extended telehealth usage by Victorian health services – 72,000 video calls made in September alone (compared to 2,000 in February).
Protecting our Healthcare Workers

The Healthcare Worker Infection Prevention and Wellbeing Taskforce and the Protecting our Healthcare Workers plan oversaw the establishment of a range of measures to keep workers safe:

• Reducing patient density in COVID-19 wards and allocating patients to newer facilities with better ventilation systems

• Limiting movement of workers across sites, including financial incentives and ceasing training rotations, including $4 million for limiting movement for 60 Public Sector Residential Aged Care facilities.

• Required daily attestations that staff don’t have symptoms and established asymptomatic testing of staff which identified 4 staff in health services.

• Increased PPE guidance so all workers treating suspected and confirmed COVID-19 patients, wear a P2/N95 respirator no matter the length of time with patients

• Delivered face-to-face PPE training for over 3,500 aged care staff and online training covering PPE and hand hygiene for over 7,800 workers

• Established Respiratory Protection Programs across all health services, with more than 6,670 priority workers fit-tested in past few weeks and 136 machines worth $3 million ordered to date with 77 machines received and more are on the way.
Protecting our Healthcare Workers

Further measures to protect our healthcare workers include:

Funded a $9.8m Healthcare Worker Wellbeing package to:

- **Establish a Healthcare Worker Wellbeing Centre** to provide training and resources to address fatigue and trauma across acute and community-based settings including hospitals, community health, aged and primary care.

- **Expand access to psychosocial support** on the ground in health services and community health.

- **Improve staff rest and recovery areas**

- **Expand access to mental health services** by increasing eligibility for the Better Mental Health Provisional Payments pilot; and **enabled ongoing training in family violence responses**

- Deploying **PPE Spotters in COVID wards** who monitor staff’s accurate application and removal of protective wear

- Guiding health services on the **minimum standards and best practice for ensuring staff rest and recovery areas are safe**

- **Audited COVIDSafe plans** in 40 health services

- Site visits and audits of aged care facilities through the Victorian Aged Care Response Centre

- Funded **$850k for General Practice** infection prevention training and resources

- Further investment in Victorian Doctors Health Program and Nursing & Midwifery Health Program to expand confidential, free counselling and support.
Victoria will continue to have an effective public health response

**Public health intelligence**
System improvements, including timely and accurate data sharing, coordination of responses and targeted resourcing will ensure the health and human services system can respond effectively to new cases as well as providing general healthcare and social supports.

**Workplaces**
Partnership and cooperation with industry is essential to ensure employers are taking steps to reduce risk and stop transmission at work. Workplace obligations ensure that plans and processes are in place to manage risks and respond to outbreaks. Employees, customers and vulnerable cohorts are protected through COVIDSafe plans and compliance and enforcement by WorkSafe.

**Hospitals and sensitive settings**
Risk assessments, COVIDSafe Plans and common response frameworks will improve outcomes for aged care, schools, disability care, residential care and other sensitive settings.

**Testing and pathology**
Evaluation and introduction of new testing modalities like saliva and antigen to maximise symptomatic testing, reduce transmission risk from interstate and overseas, control and prevent the spread of any cases and maintain surveillance testing in workplaces that amplify infection risks. Work continues to assure the capacity, resilience and performance of our pathology sector noting 89 per cent of tests being returned within 24 hours.

**Community engagement**
Extensive, effective and sustained community engagement maximises protective COVIDSafe-behaviours and testing, and minimises misinformation.

**Targeted support for vulnerable cohorts**
Risk-based interventions for CALD, ATSI and places with high transmission risk will reduce transmission among vulnerable Victorians including the deployment of bi-cultural workers and community covid champions.

Test, Trace, Isolate

Testing, tracing and isolating are central to an effective COVID-19 response. Broader community, workplace and system responses are required to prevent, identify and manage outbreaks.