Mr HIBBINS: I want to ask about the hard lockdown of public housing towers in Kensington and North Melbourne. When you announced the lockdown on Saturday, 4 July, at around 4.20, you stated that:

Residents will be supported with onsite clinical care, as well as food delivery and care packages.

Mr HIBBINS: I am not questioning the lockdown. I am asking about the plan in place—

Mr ANDREWS: And it is important that I give you some context for this, and that is what I am attempting to do. There is no alternative but to accept the advice of the Chief Health Officer, and part of the advice of the Chief Health Officer was to have an immediate lockdown—not a lockdown three days hence, when you have had the benefit of many, many hours to provide additional planning time—

MR HIBBINS: Can I ask: what exact time were you provided with that advice?

Mr ANDREWS: I had a press conference in the middle of the afternoon—it could even have been as late as 2.30 or 3 o’clock. We had been in discussions with the Chief Health Officer throughout the late morning, through lunchtime and into the early hours of the afternoon. I am happy to come back to you with some more definitive times—it was some time ago—but it was certainly in the 2 to 3 hours before we made the announcement that it had been confirmed by the public health team that there was simply no alternative but to lock those towers down.

Answer:

On Saturday 4 July, 34 cases of COVID-19 were confirmed in the public housing estates in North Melbourne (21 cases) and Flemington (13 cases). The situation appeared to be escalating rapidly with the number of confirmed cases increasing significantly in the previous four days.

Crisis Council of Cabinet met at 1.30pm on the afternoon of 4 July to consider the issue. At around 4pm that day, I announced that residents of the nine towers in Flemington and North Melbourne were subject to a direction by the Chief Health Officer to remain in their homes — effective immediately — until the completion of COVID-19 testing of all residents.
Questions taken on notice and further information agreed to be supplied at the hearings

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**MR LIMBRICK**: With regards to the government’s response to the pandemic, the government has spoken a lot about saving lives, which is effectively: the disease causes a reduction in a certain cohort’s life span and therefore the actions are to try and prevent that. However, the government actions themselves can also cause a decrease in life span, I would put it to you—things like poverty, things like mental and physical health issues caused by the government actions, things like suicide and all of these other things that cause decreases in people’s life expectancy.

Therefore the claim that the government is saving lives can only be proven to be true if the actions of the government are not causing more damage to people’s life expectancy. What evidence or modelling is the government using to look at these harms that are caused by the government actions and therefore to have confidence that you are in fact saving lives overall by the actions that the government is taking?

**MR ANDREWS**: We have got years and years of data, and I am happy to come back with some further details on that, of the number of people who cannot wait. They are absolutely the sickest patients. And if all the ICU beds, even if you have doubled, tripled or quadrupled them, are all full, then those people finish up waiting, and if you wait, you die. So that is part of the challenge also.

**Answer:**

The Victorian Government recognises that the introduction of the current restrictions are very challenging for many Victorians. These decisions were not taken lightly, and we understand that the restrictions impact every Victorian and the way we live our lives. Following advice from the Chief Health Officer, our Government made a judgement that significant measures needed to be implemented to reduce the transmission of COVID-19.

International examples have demonstrated that exponential growth of COVID-19 cases could result in a public health crisis. Without these restrictions, Victoria’s hospitals could have become overrun and the fatality rate from COVID-19 could have been catastrophically high.

Modelling developed by the Victorian Department of Health and Human Services, Monash University and the Peter Doherty Institute for Infection and Immunity, (based on the same transmission model used by the Commonwealth Government) found that if Victoria had
only enforced quarantine and isolation measures (i.e. isolation of confirmed cases, quarantine of their contacts and quarantine of returning travellers) in April, without the broader restrictions we put in place, Victoria would have been managing up to 58,000 infections per day at the peak of the coronavirus (COVID-19) pandemic.

The impact on the state’s health system would have been profound and exceptionally difficult to manage with up to 9,200 coronavirus (COVID-19) presentations to hospital per day. In line with other countries where coronavirus (COVID-19) has spread more widely and rapidly, the death toll would have been substantial at 36,000 in total, with up to 650 deaths per day at the peak.

We recognise the difficulties caused by these restrictions and we are committed to supporting Victorians who are experiencing hardship during this time. It is important to note that even under the current restrictions, all Victorians are able to access medical care, including emergency medical care, and to leave their homes if they, or their children, are at risk of family violence.

Our Government understands the challenges associated with the implementation of these restrictions. We are working hard to support all Victorians during this difficult time.
Questions taken on notice and further information agreed to be supplied at the hearings

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Relevant text:

**MS VALLENCE**: Secretary, has the department engaged in any legal representation for the purposes of responding to the Coate inquiry?

**MR ECCLES**: Yes, it has.

**MS VALLENCE**: It has? Can you advise the committee how much money has been spent by the department on legal fees in response to the Coate inquiry so far?

**MR ECCLES**: I do not have that information with me.

**MS VALLENCE**: Well, can you take that on notice?

**MR ECCLES**: Yes, indeed. I am certainly happy to take it on notice.

**Answer:**

As at 11 August 2020, the Department of Premier and Cabinet (DPC) had incurred $190,714.84 (inclusive of GST) in external legal costs in relation to the Inquiry. A very substantial amount of work has already been undertaken in responding to the Inquiry, especially in relation to Notices to Produce documents. DPC’s insurer has confirmed it will meet the reasonable costs of DPC’s external lawyers in accordance with DPC’s insurance arrangements.