The Parliament of the Commonwealth of Australia

Diseases have no borders

Report on the inquiry into health issues across international borders

House of Representatives
Standing Committee on Health and Ageing

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Canberra

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Foreword

The movement of people across international borders is increasing rapidly.

As the numbers travelling to and from Australia rises, so too does the risk for transmission of infectious disease across international borders. One thing is certain: infectious diseases do not respect international borders. What is less certain is whether Australia is equipped to respond to emerging infectious disease threats of national concern.

Infectious diseases take many forms and spread in many different ways. In a rapidly changing environment, it is difficult to predict when the next pandemic will occur, how severe it will be or how long it will last. Based on available evidence, countries around the world, including Australia, are preparing to respond to another influenza pandemic. Other emerging disease threats of national and international concern are slower to progress, but equally of concern to infectious disease experts. Such threats include the emergence of antimicrobial resistant diseases both in Australia and abroad, such as multi-drug resistant tuberculosis in Papua New Guinea. In this inquiry, the Committee considered how Australia responds to the challenges posed by emerging infectious disease threats. The Committee reviewed health screening measures implemented at Australia's borders; Australia's ability to respond to a national or global health crisis; and Australia's role in controlling the spread of infectious disease within the Asia-Pacific region. The Committee also considered the porous border between the Torres Strait Islands and Papua New Guinea, and how this impacted on Australia's ability to control the spread of infectious disease from international sources.

Lastly, the Committee debated a question looming large among infectious disease experts in Australia – should Australia have a national centre for communicable disease control? In attempting to answer this question, the Committee considered what role such a centre would play, what structure the centre could take, and how such a centre could improve national oversight of infectious disease issues.

On behalf of the Committee, I extend thanks to all of the roundtable participants. Your insights and knowledge of emerging disease threats in Australia was invaluable in assisting the Committee with its inquiry.

The Committee thanks representatives of DIAC, the Christmas Island Hospital and IHMS for providing the Committee with a tour of the health facilities at the hospital and within the immigration detention centres on Christmas Island. A number of these individuals also took time away from their busy schedules to participate in the roundtable discussion.

The Committee also thanks the Administrator of the island, Mr Jon Stanhope, Councillor Kelvin Kok Bin Lee and other representatives of the Shire of Christmas Island for their assistance regarding the Committee's visit to the island and participation in this inquiry.

Ms Jill Hall MP
Chair

Membership of the Committee

Chair	Mr Steve Georganas MP (*to 27/11/12*)	
	Ms Jill Hall MP (*from 27/11/12*)	
Deputy Chair	Mr Steve Irons MP	
Members	Mr Mark Coulton MP	Mr Geoff Lyons MP
	Ms Deborah O'Neill MP	Mr Ken Wyatt MP

Committee Secretariat

Secretary	Dr Alison Clegg
Inquiry Secretary	Ms Renee Toy
Research Officer	Ms Belynda Zolotto
Administrative Officers	Ms Fiona McCann
	Ms Kathleen Caruso

Terms of reference

Increasing globalisation and climate change pose unique challenges for population health. Growing global interconnectedness and close proximity to regional neighbours increases Australia's exposure to imported infectious diseases and to the risk of epidemic or pandemic disease outbreaks.

Recognising the need to protect Australians, the Committee will inquire into and report on screening, surveillance and control practices for infectious diseases, with a particular focus on:

a) screening, surveillance and control processes that are applied to:

   i. Australians travelling to and returning from overseas;

   ii. international visitors entering Australia, including asylum seekers;

b) Australia's preparedness to respond to a national or global health crisis involving the spread of infectious disease, including:

   i. how Australia's planning processes compare with World Health Organisation standards and recommendations;

   ii. how Australia plans and manages drug and vaccine stockpiles to respond to epidemic or pandemic infectious disease outbreaks;

   iii. Australia's role and responsibility for coordinating with regional neighbours and other countries to prepare for and respond to the threat of epidemic or pandemic infectious disease outbreaks.

In examining each of these issues, the Committee will consider the roles and responsibilities of Commonwealth, state and non-government agencies and coordination of their activities.

List of recommendations

2 Infectious disease policy framework

Recommendation 1

The relevant government agencies that have a significant role in managing the biosecurity threat develop a coordinated approach which addresses the health threats to Australians and recognises the impact on the economy.

3 Screening, surveillance and control of infectious disease

Recommendation 2

The Department of Health and Ageing review the existing evidence base to evaluate the cost-effectiveness of its policy to use heat scanners at ports of entry as a measure to mitigate the risk of infectious disease importation.

Recommendation 3

The Australian Department of Health and Ageing work with the states and territories to provide a uniform notifiable diseases list across Australia, with consistent reporting requirements across each state and territory and consistent public health information on infectious diseases disseminated to the public. This work should be a priority of Australian Health Ministers' Advisory Council (AHMAC).

Recommendation 4

The Australian Government work with the state and territory governments to assess the viability of providing a centralised refugee and migrant health service in each state and territory, which would automatically refer people who move from immigration detention into the wider Australian community.

Recommendation 5

The Royal Australian College of General Practitioners provide resources and training to general practitioners on the complex health needs of migrants and refugees, with a focus on identifying infectious diseases which are notifiable in Australia, or diseases which are of specific concern to refugee and migrant communities.

Recommendation 6

The Australian Government, coordinated by the Department of Health and Ageing and in consultation with the wider Australian community, develop a national public awareness campaign to better inform and engage the travelling public about infectious disease issues.

This campaign should cover the risks associated with travelling overseas, preventative measures that can be undertaken to minimise these risks, and screening measures used at the border to prevent the importation of infectious disease.

Subject to consumer input and feedback, this campaign could include a range of materials and platforms, including:

- videos, which could be published via YouTube, Smartraveller, international flights and/or other relevant access points;
- reading material such as brochures which can be provided at travel agencies, passport offices, on international flights and other relevant access points; and
- targeted ongoing engagement with consumers via social media and on travel websites.

4 International cross-border issues

Recommendation 7

Having regard to the terms of the Torres Strait Treaty, the Department of Health and Ageing, Queensland Health, AusAID and the Papua New Guinea Government:

- establish a set of protocols and procedures for the identification and treatment of tuberculosis and other infectious diseases in Papua New Guinea and the Torres Strait Islands; and
- consider what clinical services should be available in both Papua New Guinea and Australia for the identification and treatment of tuberculosis and other infectious diseases.

Recommendation 8

The National Health and Medical Research Council, in conjunction with key stakeholders, work collaboratively to provide more support for initiatives to increase international infectious disease research collaborations and build research capacity, particularly with neighbouring countries in the Asia-Pacific region.

5 Pandemic planning and preparedness

Recommendation 9

The Australian Government test Australia's ability to respond to a widespread outbreak of infectious disease other than influenza, by undertaking a pandemic exercise across the relevant Commonwealth, state and territory government agencies.

Recommendation 10

The Australian Government, in consultation with consumers and other relevant federal, state and territory agencies, develop a national communication strategy for consumers to be used in the event of an infectious disease outbreak.

Recommendation 11

The Australian Department of Health and Ageing consult with members of the general public or representatives of health consumers in the pandemic planning process, including in pandemic exercises designed to test the ability of government to respond to a pandemic event. Consumer involvement should include testing the ability of any communication strategy designed to inform and engage consumers about a pandemic event.

Recommendation 12

The Commonwealth Government support the growth of vaccine development and production capacity for vaccines in Australia, to enhance Australia's preparedness to respond to outbreaks of infectious disease in Australia, and in particular, pandemic influenza.

Recommendation 13

The Australian Government coordinate the development of a highly skilled workforce which can respond effectively to a sustained pandemic in Australia.

6 Does Australia need a national centre for communicable disease control?

Recommendation 14

The Australian Government, in consultation with state and territory governments, conduct a comprehensive national audit and mapping exercise to:

- identify all of the agencies (not limited to those within the health portfolio) and expert committees/working groups involved in managing infectious disease risks;
- clarify roles, responsibilities and map hierarchies and lines of communication;
- identify all relevant infectious disease policies and plans, explain how these operate in relation to one another;
- identify any duplication and present options for streamlining; and
- identify any policy or response gaps that need to be addressed.

The outcomes of the audit and mapping exercise should be made publically available.

Recommendation 15

The Australian Government, in consultation with state and territory governments, commission an independent review to assess the case for establishing a national centre for communicable disease control in Australia.

The review should outline the role of a national centre and how it might be structured to build on and enhance existing systems. It should examine different models, considering a range of options for location, governance and staffing. The review should incorporate a cost-benefit analysis for each of the models presented.

The outcomes of the review should be made publically available.