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**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Inquiry into the Australian Government's response to the COVID-19  
pandemic**

**02 June 2020**

**PDR Number: IQ20-000356**

**Border closures and restrictions**

**Spoken**

**Hansard Page number: 16**

**Senator:** Rex Patrick

**Question**

Senator PATRICK: I want to just move more broadly to border restrictions. Obviously each state has adopted a different approach. Does the Department of Health have any view from a medical perspective as to the effectiveness? Has any modelling been done in and around border closures? It seems to be topical now. There are questions as to whether or not those restrictions should be lifted.

Ms Edwards: The medical advice, which has been provided to the government, is everything that has been agreed by the AHPPC. I'm not aware of any specific view that it has had in relation to state border restrictions, but I will have to take that on notice if there's anything that I'm not aware of.

**Answer:**

The implementation of international border controls, including initially banning passengers arriving from certain countries then subsequently all countries, was applied nationally. These international border measures, including the 14-day quarantine of all international arrivals, along with the implementation of public health measures, have collectively been effective in controlling the introduction of COVID-19 into Australia.

Some state and territory governments have also imposed a range of domestic travel restrictions, including the closing of state borders and requiring people who have travelled to and from some areas to quarantine for 14 days in government-provided accommodation.

Regarding high-level decision making around domestic border closures, it is a longstanding practice not to disclose information about the operation and business of the Cabinet and its committees, including when the matter went to Cabinet, who attended, and what form of submission was provided. The deliberations of the Cabinet are confidential. The business of AHPPC including deliberations, papers and outcomes are considered Cabinet-in-confidence.

The effectiveness of and compliance with international border measures will continue to be monitored as measures are adjusted in line with the Pandemic Health Intelligence Plan (PHIP) reporting requirements. The PHIP is available on the Department's website: [www.health.gov.au/resources/publications/coronavirus-covid-19-in-australia-pandemic-health-intelligence-plan](http://www.health.gov.au/resources/publications/coronavirus-covid-19-in-australia-pandemic-health-intelligence-plan).

Ongoing modelling and assessment of international border measures to inform risk assessment will be important in future considerations around easing of restrictions on international travel, to minimise the risk of importation of cases into Australia.

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There has been recent modelling undertaken to specifically review the effectiveness of domestic border measures. The effectiveness of and compliance with international border measures will continue to be monitored as measures are adjusted in line with the Pandemic Health Intelligence Plan (PHIP) reporting requirements. The PHIP is available on the Department's website:

<https://www.health.gov.au/resources/publications/coronavirus-covid-19-in-australia-pandemic-health-intelligence-plan>

Modelling of international border measures to inform risk assessment will be important in future considerations around easing of restrictions on international travel, to minimise the risk of importation of cases into Australia.