

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000012**

**Question Number: 03**

**Question Subject:** Australian Health Sector Emergency Response Plan

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

Can a copy of the "Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)" be provided. On what date was it activated. Why was it activated on this date.

**Answer:**

A copy of the Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19), activated on 27 February 2020, is available at

<https://www.health.gov.au/resources/publications/australian-health-sector-emergency-response-plan-for-novel-coronavirus-covid-19>

Australia began closely monitoring the development of COVID-19 in January 2020. Initial preparedness and response measures were guided by Australia's existing pandemic plan, the Australian Health Management Plan for Pandemic Influenza (AHMPPI).

Following the declaration of a Public Health Emergency of International Concern by the World Health Organization on 30 January 2020, Australia conducted an initial workshop with modellers and key stakeholders to determine the most appropriate measures for Australia to implement. These experts agreed that the approach taken in the AHMPPI was still highly relevant to the current outbreak of COVID-19, however some changes would be required to address the differences in characteristics between influenza (the focus of the AHMPPI) and COVID-19.

The COVID-19 Plan was developed and then endorsed by the Australian Health Protection Principal Committee on 12 February 2020.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000016**

**Question Number: 07**

**Question Subject:** Declarations under the Biosecurity Act

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

Can all COVID-19 declarations under the Biosecurity Act be provided.

**Answer:**

The following legislative instruments have been made under the *Biosecurity Act 2015* in response to the COVID-19 pandemic:

- *Biosecurity (Listed Human Diseases) Determination 2016*, made under section 42 (commenced 21 January).
- *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) Declaration 2020*, made under section 475 (commenced 18 March).
- *Biosecurity (Human Health Response Zone) (North West Point Immigration Detention Centre) Determination 2020*, made under section 113 (commenced 3 February; repealed 20 March).
- *Biosecurity (Human Health Response Zone) (Royal Australian Air Force Base Learmonth) Determination 2020*, made under section 113 (commenced 3 February; repealed 20 March).
- *Biosecurity (Human Health Response Zone) (Howard Springs Accommodation Village) Determination 2020*, made under section 113 (commenced 8 February; repealed 20 March).
- *Biosecurity (Human Health Response Zone) (Swissotel Sydney) Determination 2020*, made under section 113 (commenced 25 March; repealed 1 May).

- *Biosecurity (Exist Requirements) Determination 2020*, made under section 45 (commenced 26 March, amended 2 April).
- *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Emergency Requirements) Determination 2020*, made under section 477 (commenced 18 March, amended 27 March).
- *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Overseas Travel Ban Emergency Requirements) Determination 2020*, made under section 477 (commenced 25 March).
- *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Emergency Requirements for Remote Communities) Determination 2020*, made under section 477 (commenced 26 March, amended 8 April and 23 April).
- *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Emergency Requirements—Retail Outlets at International Airports) Determination 2020*, made under section 477 (commenced 28 March).
- *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Essential Goods) Determination 2020*, made under section 477 (commenced 31 March).
- *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Emergency Requirements—Public Health Contact Information) Determination 2020*, made under section 477 (commenced 25 April).

These instruments are all available on the public register of legislative instruments <https://www.legislation.gov.au/>.

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**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000017**

**Question Number: 08**

**Question Subject:** Acting Chief Medical Officer

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

Who was the Acting Chief Medical Officer on 1 January 2020.

**Answer:**

Professor Paul Kelly was the Acting Chief Medical Officer on 1 January 2020.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000019**

**Question Number: 10**

**Question Subject:** Personal Protection Equipment (PPE) Taskforce

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

On what date was the PPE taskforce established in the department. What are the functions of the taskforce. Who are the members of the taskforce.

**Answer:**

The PPE Taskforce is a unit of the Department of Industry, Science, Energy and Resources.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000021**

**Question Number: 12**

**Question Subject:** PPE Procurement

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

Can details of all PPE procurement by the Australian Government since 1 January 2020 be provided.

**Answer:**

The National Medical Stockpile is a highly strategic reserve of drugs, vaccines, antidotes and protective equipment for use in the national response to a public health emergency and exists to supplement holdings of state and territory health authorities to support continuity of service provision.

The Commonwealth has procured masks, respirators, gloves, goggles/face shields, and gowns in the response to COVID-19. Consistent with previous advice, the Commonwealth does not disclose actual stockpile numbers.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000024**

**Question Number: 15**

**Question Subject:** Ventilators

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

How many ventilators has the Australian Government purchased in 2020.

**Answer:**

As of 30 April 2020, the Department of Health has contracted 5,000 non-invasive and 3,040 invasive ventilators for the Australian Government in response to COVID-19.

The Department is considering further ventilator contracts.



**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000027**

**Question Number: 18**

**Question Subject:** Date of Legislation

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

On what date did Ms Edwards become aware the Australian Government intended to introduce legislation related to the COVID-19 tracing app.

**Answer:**

Ms Edwards was aware that legislation was an option being considered during development of the COVIDSafe app. Following consideration by Government, the launch of COVIDSafe, together with intention to introduce legislation, was announced on 26 April 2020.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000028**

**Question Number: 19**

**Question Subject:** National Cabinet

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

With reference to evidence by Ms Edwards on 23 April 2020 that "to be clear, the Department of Health doesn't feed directly into the national cabinet": (a) Why not and (b) Which departments provide advice to the national cabinet.

**Answer:**

a) The Minister for Health is not a member of the National Cabinet. The Department of the Prime Minister and Cabinet oversees the National Cabinet process and may ask the Department of Health to provide input to advice for the National Cabinet, but the Department of Health does not provide advice directly to the National Cabinet.

The Chief Medical Officer attends National Cabinet in his capacity as chair of the Australian Health Protection Principal Committee (AHPPC). This role is separate and in addition to the AHPPC's ongoing role to advise the Australian Health Ministers' Advisory Council on health protection matters and emerging health threats related to infectious diseases, the environment as well as natural and human made disasters.

The AHPPC was appointed a sub-committee of the National Cabinet on 17 March 2020. Advice from the AHPPC is provided directly to the National Cabinet for consideration.

b) The Department of the Prime Minister and Cabinet is best placed to provide information on how advice is provided to the National Cabinet.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000029**

**Question Number: 20**

**Question Subject:** Acting Health Minister

**Type of Questions:** Question in Writing

**Questioner:** Senator Gallagher

**Question:**

Did any minister act as Minister for Health in January 2020. If so, which minister/s for which dates.

**Answer:**

No Minister acted as Health Minister in January 2020.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000030**

**Question Number: 21**

**Question Subject:** Elimination of the Virus

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

Is eliminating the virus a plausible goal in Australia, if we maintain social distancing and keep the borders closed? What is the evidence that elimination is or isn't possible?

**Answer:**

If there remains a high level of public adherence to all social distancing measures currently in place then there is a high possibility that there will be extremely low levels of the virus circulating in Australia.

Borders are closed with the exception of returning Australian citizens and residents who are undertaking mandatory 14-day quarantine. In the absence of a vaccine, there remains the possibility of the virus being imported in the future as long as there are ongoing outbreaks occurring globally.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000031**

**Question Number: 22**

**Question Subject:** Contact Tracing

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

What's the plan B for contact tracing, if we don't get the required level of take up for the coronavirus app to work properly?

**Answer:**

Current manual contact tracing carried out by public health officials will continue notwithstanding the role of COVIDSafe take-up. Contact data obtained via the App user will augment and quicken the process.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000032**

**Question Number: 23**

**Question Subject:** Corona Virus App

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

What are the oversight mechanisms on the design and use of the coronavirus app, and the way the data it gathers gets handled?

**Answer:**

Oversight of the design is provided through the Department of Health's governance and assurance processes. Administration of the App by the Department is subject to oversight by the Auditor-General and the Commonwealth Ombudsman.

In addition, the Office of the Australian Information Commissioner can investigate any act or practice by the Department that may constitute an interference with a person's privacy.

If a person is concerned about the operation of the App they can contact the Department. They can also contact existing regulators, such as the Office of the Australian Information Commissioner and the Australian Human Rights Commission. States and Territories also have a range of human rights, privacy and health information protection regimes.

The Government has committed to the introduction of legislation to enshrine protections for COVIDSafe data.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000033**

**Question Number: 24**

**Question Subject:** State Health Officials Use of App Data

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

How can state health officials use the app data stored on someone's phone? What processes do they have to follow to maintain the privacy of people who use the app?

**Answer:**

Only the minimum amount of personal information required to perform contact tracing (mobile number, name which can be a pseudonym, age range and postcode) is gathered by the app. The information is uploaded to a highly secure information storage system. Only authorised state and territory health officials will have access to the contact information. State and territory health officials will only have access to view the contact information collected by people from their state or territory diagnosed with COVID-19.

In accessing and using the uploaded data, health officials will be required to comply with the Australian Privacy Principles and all applicable data protection and information security obligations. It will only be able to be used for alerting individuals if they have come into contact with a person who has contracted coronavirus.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000034**

**Question Number: 25**

**Question Subject:** Health response until we have vaccine or better treatments

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

Until we have a vaccine or better treatments for COVID-19, the public health response could aim to either:

- a. 'flatten the curve' by keeping the infection rate above zero but at low levels; or
- b. eliminate the virus from Australia while keeping the borders closed to prevent it from getting back into the community.

**Answer:**

Currently, the strategy is to continue one of suppression (ie 'flattening the curve'), with the potential for elimination in some areas of the country, for a short period of time.

Suppression and elimination are two strategies along the same continuum and are not mutually exclusive. The public health measures that have been implemented thus far have achieved very low levels of COVID-19 case numbers, with the potential for elimination in some areas.



**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000035**

**Question Number: 26**

**Question Subject:** Modelling of costs and benefits of elimination

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

Has the Department modelled the costs and benefits of eliminating the virus from Australia completely, compared to keeping the infection rate hovering at low levels?

**Answer:**

The Department of Health has not specifically modelled this, however we work closely with Treasury on a whole of government response, to better understand the societal, economic and health impacts of public health measures.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000036**

**Question Number: 27**

**Question Subject:** Flattening the Curve Strategy

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

What is the evidence that 'flattening the curve' is a better strategy for Australia than elimination? Is flattening the curve still the goal, or are we pursuing an elimination strategy?

**Answer:**

The National Cabinet has endorsed a strategy of suppression noting that this may result in the potential for elimination in some geographic areas. The evidence that this strategy is working well to suppress transmission of the virus in Australia is the significant decrease in new infections over the past few weeks.

Further evidence of low transmission is demonstrated in the low rates of positive tests notwithstanding a very high rate of testing. A suppression strategy allows for an earlier phased easing of restrictions while accepting that low levels of virus may continue to circulate in the community. Control of this low level transmission will be through extensive testing and contact tracing and allows for a safe management of current and future infections within our health system. A suppression strategy also acknowledges that it is difficult to be entirely sure that the virus has been eliminated from circulating due to the potential for asymptomatic transmission.

Suppression and elimination are two strategies along the same continuum and are not mutually exclusive. The public health measures that we have implemented thus far have achieved very low levels of COVID-19 case numbers, with the potential for elimination in some areas.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000037**

**Question Number: 28**

**Question Subject:** Model Elimination

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

**Question:**

Did the Department model elimination as a potential public health strategy for Australia to respond to the coronavirus in late February / early March? If so, were the outputs from this modelling reported to the National Cabinet?

**Answer:**

The main scenarios and strategies initially modelled by the Doherty Institute were comparing the unmitigated scenario with a variety of mitigated scenarios where the goal was to slow and suppress spread.

National Cabinet was established on 15 March 2020. The outputs of the initial modelling were reported to the National Cabinet after its formation.

This modelling was first made available to the public on 7 April 2020 and can be found at the following link:

<https://www.doherty.edu.au/news-events/news/covid-19-modelling-papers>

# PARLIAMENTARY INQUIRY QUESTION ON NOTICE

## Department of Health

### Senate Select Committee on COVID-19

#### Australian Government's Response to the COVID-19 Pandemic

Thursday 23 April 2020

PDR Number: IQ20-000038

Question Number: 29

**Question Subject:** Evidence for timeframe for Vaccine

**Type of Questions:** Question in Writing

**Questioner:** Senator Lambie

#### **Question:**

Most Australians have heard that it will take 18 months to get a vaccine for COVID-19. Is there solid evidence for this idea? What plans do we have in place if it takes longer for a vaccine to be developed, or if it isn't possible to develop a vaccine at all?

#### **Answer:**

Vaccine development is an uncertain process. The emergence and spread of SARS-CoV-2 has, however, focused global research and development efforts on to developing a vaccine for prevention of COVID-19.

To develop a vaccine within 18 months requires all the steps of the vaccine development pipeline to succeed and for some steps to be completed in parallel. These steps include laboratory-based testing, pre-clinical testing in animals, clinical testing in humans, regulatory approval and manufacturing of a safe and effective vaccine. The usual timeframe for the development of a human vaccine from concept to regulatory approval can be 15 years or more<sup>1</sup>.

As at 29 April 2020, the World Health Organization has identified over 80 vaccines in development, of which seven are indicated as in Phase 1 or Phase 2 human clinical trials.<sup>2</sup>

The Australian Government has invested in a range of research efforts to address COVID-19, including:

- public health responses such as increased and improved diagnostic capabilities to quickly and accurately identify who is infected;

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<sup>1</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3146780/>, accessed 4 May 2020

<sup>2</sup> <https://www.who.int/who-documents-detail/draft-landscape-of-covid-19-candidate-vaccines>, accessed 29 April 2020.

- to find antiviral treatments that can be given to people who become infected;
- to identify treatments that can be given to support recovery of patients who develop severe disease.

IQ20-000034 (Q25) addresses the health response until we have a vaccine or better treatments.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000041**

**Question Number: 32**

**Question Subject:** Lead authority for the CovidSafe app

**Type of Questions:** Question in Writing

**Questioner:** Senator Patrick

**Question:**

Who does the Department understand to be the lead authority for the app? Please indicate if this has changed over time, and if so, why?

**Answer:**

The Department of Health is the lead authority for the development of the COVIDSafe app, working closely with the Digital Transformation Agency and Attorney-General's Department.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000042**

**Question Number: 33**

**Question Subject:** Development of the CovidSafe app

**Type of Questions:** Question in Writing

**Questioner:** Senator Patrick

**Question:**

What involvement has the Department (or its portfolio agencies) had in the design/development/procurement of the app?

**Answer:**

The Department of Health led the design of the Application as a health-based initiative and oversaw the policy and design elements of the technical development which was conducted by the DTA. It also led the development of a Privacy Impact Assessment, negotiated agreements with the states and territories, and supported legislative instruments for the protection of privacy.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000043**

**Question Number: 34**

**Question Subject:** Advice relating to the CovidSafe app

**Type of Questions:** Question in Writing

**Questioner:** Senator Patrick

**Question:**

Which Government Departments/Agency have provided the Department with advice relating to the app?

**Answer:**

All relevant government departments and agencies were consulted, including the Office of the Australian Information Commissioner and the Human Rights Commissioner.



**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000044**

**Question Number: 35**

**Question Subject:** Contracts relating to the CovidSafe app

**Type of Questions:** Question in Writing

**Questioner:** Senator Patrick

**Question:**

What contracts has the Department let in relation to the application (including development/data storage etc)? For each contract:

- a. When was the tender released?
- b. What procurement method was used?
- c. If a limited tender was used:
  - i. What was the reason for choosing a limited tender?
  - ii. What date was the tender issued?
  - iii. Which entities were invited to tender?
  - iv. How was clause 4.7 of the Commonwealth Procurement Rules assessed?
  - v. On what date were the tender responses received?
  - vi. Which officials were involved in the decision to award a tender – please provide a name if the official was a member of the Senior Executive Service
  - vii. What date was the contract signed?
  - viii. What is the scope of work?
  - ix. What is the contract value?
  - x. What is the term of the contract?
- d. Does the contract award accord with Digital Transformation Agency and Government principles as enshrined in DTA's Whole-of-government Hosting Strategy"?  
<https://www.dta.gov.au/our-projects/whole-government-hosting-strategy> )

**Answer:**

Contract with Maddocks for Privacy Impact Assessment. *Austender contract reference CN 3675294.*

- a. This Contract was not subject to a separate tender process. See response to question b. below.
- b. Pre-qualified tender under Whole of Australian Government Legal Services Panel Arrangements (SON3622041).
- c. This contract was not procured under a limited tender so the response to all subquestions i) to x) are "Not Applicable"
- d. Not Applicable. DTA's whole of government Hosting Strategy is not directly relevant to this contract for legal services. However, the standing Head Agreement for the Legal Services Panel does include appropriate obligations to ensure the legal services provider complies with the government's security requirements, including information security requirements.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000045**

**Question Number: 36**

**Question Subject:** Increase in online gambling

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Is the government monitoring whether there has been an increase in online gambling related harms, including harm to mental health?  
If so how are you monitoring this?

**Answer:**

As per Portfolio responsibilities, we ask the Committee to refer this question to the Department of Social Services.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000046**

**Question Number: 37**

**Question Subject:** Increase in online gambling

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Has on-line gambling increased? If so by how much?

**Answer:**

As per Portfolio responsibilities, we ask the Committee to refer this question to the Department of Social Services.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000047**

**Question Number: 38**

**Question Subject:** Gambling sites

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Are you able to track how much of this gambling is on sites registered in Australia and how much on overseas sites?

**Answer:**

As per Portfolio responsibilities, we ask the Committee to refer this question to the Department of Social Services.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000048**

**Question Number: 39**

**Question Subject:** Impact of gambling related harms

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

What is the government putting in place to reduce the impact of gambling related harms linked to online gambling?

**Answer:**

As per Portfolio responsibilities, we ask the Committee to refer this question to the Department of Social Services.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000049**

**Question Number: 40**

**Question Subject:** Superannuation and online gambling

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Is the government putting any safeguards in place to prevent people from using their withdrawn superannuation on online gambling?

**Answer:**

As per Portfolio responsibilities, we ask the Committee to refer this question to the Department of Social Services.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000050**

**Question Number: 41**

**Question Subject:** Credit cards and online gambling

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Is the government considering restricting the use of credit cards in online gambling?

**Answer:**

As per Portfolio responsibilities, we ask the Committee to refer this question to the Department of Social Services.



**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000051**

**Question Number: 42**

**Question Subject:** Prevention of gambling related harms

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

What other regulatory reforms is the government considering to prevent gambling related harms during coronavirus?

**Answer:**

As per Portfolio responsibilities, we ask the Committee to refer this question to the Department of Social Services.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000052**

**Question Number: 43**

**Question Subject:** Number of people used Telehealth Psychology Services

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

How many people have used the MBS items for Telehealth psychology services?

**Answer:**

Between 13 March and 19 April 2020, there were 314,491 telehealth services processed for 237,144 patients.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000053**

**Question Number: 44**

**Question Subject:** Additional Funding for Beyond Blue and Lifeline

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

How much additional funding has been provided to Beyond Blue and Lifeline during Coronavirus?

**Answer:**

On 29 March 2020, the Government announced as a part of a \$74 million COVID-19 mental health package the following additional funding for BeyondBlue and Lifeline:

<b>Organisation</b>	<b>Funding</b>
BeyondBlue	\$10 million
Lifeline	\$5 million

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000054**

**Question Number: 45**

**Question Subject:** Mental Health Support Providers

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Which other mental health support providers have received additional funding to provide support during Coronavirus?

**Answer:**

The following organisations have received additional funding to provide mental health support during the Coronavirus pandemic:

- Beyond Blue
- Lifeline
- Kids Helpline
- headspace
- Gayaa Dhuwi (Proud Spirit) Australia
- Perinatal Anxiety and Depression Australia
- Australian Psychological Society

Additional organisations being funded under the 'Supporting the mental health of Australians through the Coronavirus pandemic' package will be announced in the coming weeks.

The Community Visitors Scheme component of the package will be rolled out through existing providers of the program.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000055**

**Question Number: 46**

**Question Subject:** Mental health services and support

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

What specific mental health services and support are these organisations being funded to deliver?

**Answer:**

The Australian Government is providing the following extra mental health support to Australians as a result of the COVID-19 pandemic:

- Dedicated Coronavirus digital resources and a 24x7 phone counselling services led by Beyond Blue and staffed by accredited mental health professionals to help people experiencing stress or anxiety associated with the impacts of the pandemic, such as health concerns, employment changes, business closures or family pressures.
- Funding to bolster critical phone and online support services, including Lifeline and Kids Helpline, ensuring they can meet anticipated increased demand and providing job opportunities for Australians to be trained as counsellors. Extra funding will bolster other existing services including digital peer-support to people with urgent, severe and complex mental illness who may be experiencing additional distress.
- A dedicated mental health and wellbeing program for frontline health workers to provide online and phone services, giving frontline workers support when and where they need it.
- Expansion of the Community Visitors Scheme with funding for extra staff and volunteers to ensure older people receiving aged care support, stay connected on-line and by phone even though they may be physically separated from others.

- Expansion of headspace digital work and study service, to help younger Australians stay on track in their education and training and prepare them for the workforce.
- For First Australians, new culturally appropriate mental health and wellbeing resources will be developed by Gayaa Dhuwi (Proud Spirit) Australia for delivery across a range of platforms.
- Increased funding for Perinatal Anxiety and Depression Australia to bolster its free national helpline (1300 726 306), and produce new targeted resources. These resources will provide clear and consistent information for expecting and new parents about managing any increased stress and anxiety they may be experiencing and new toolkits which will link health professionals to the most up to date information on perinatal mental health.
- Funding to continue to deliver psychosocial support to Commonwealth community mental health clients for a further 12 months. This will provide additional time for people with severe and complex mental illness to complete their applications and testing for support under the National Disability Insurance Scheme.
- A targeted mental health communications campaign as part of the broader Coronavirus communications campaign. This will include wide-ranging advertising, social media engagement, education and awareness initiatives to keep the conversation going about mental health as the full impacts of the Coronavirus pandemic emerge.
- Continued expansion of the resources provided on the Government's digital mental health gateway Head to Health ([www.headtohealth.gov.au/covid-19-support](http://www.headtohealth.gov.au/covid-19-support)), giving people access to trusted mental health information and services.
- Extra investment in the Australian Psychological Society's Find a Psychologist website, to ensure people can connect with a psychologist if they need one, no matter where they are around Australia.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000056**

**Question Number: 47**

**Question Subject:** Mental Health services and support

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

What mental health services and support are being provided, and by who, to health workers on the frontline?

**Answer:**

As part of the Australian Government's \$74 million package to support the mental health and wellbeing of Australians, essential frontline health workers will be able to access a dedicated online and phone mental health and wellbeing program through digital platforms. These platforms will provide advice, social support, assistance in managing stress and anxiety, and more in-depth treatment without having to attend in-person sessions.

The Department of Health is finalising arrangements with the selected provider for this service. The service is expected to go live on 7 May 2020.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000057**

**Question Number: 48**

**Question Subject:** Support programs for young unemployed adults with mental illness

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Given young adults are being disproportionately impacted by unemployment during this crisis, is the Government considering a full national rollout of the Individualised Placement & Support program delivered by headspace to assist young unemployed adults with mental ill-health?

**Answer:**

The Individual Placement and Support (IPS) trial is administered by the Department of Social Services (DSS).

DSS has advised that the trial was launched in November 2016 and implemented in 14 headspace centres across Australia. In January 2019, the then Minister for Families and Social Services, the Hon Paul Fletcher MP, announced additional funding of \$17 million for a two-year extension of the trial, as well as an expansion to a total of 24 headspace locations nationally.

An independent evaluation of the initial IPS trial was completed by KPMG in June 2019 and will be updated to include consideration of the additional ten sites. Any further expansion of the IPS trial will be considered by Government based on the evidence from the final evaluation.



On 29 March 2020, the Prime Minister announced \$6.75 million for headspace National to help younger Australians stay on track in their education and training and prepare them for the workforce through the headspace Digital Work and Study Program and eheadspace. Mentors and headspace vocational specialists working in an integrated team will offer technical and life skills, providing a comprehensive digital support service for young Australians during the COVID-19 pandemic and after.

The additional funding for headspace National will be administered by the Department of Health.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000058**

**Question Number: 49**

**Question Subject:** Community Mental Health State by State Breakdown

**Type of Questions:** Question in Writing.

**Questioner:** Senator Siewert

**Question:**

Can you please provide a state by state breakdown of which community mental health service providers have received additional funding to deliver ongoing psychosocial support for people with complex mental ill-health who have not yet transitioned to the NDIS?

**Answer:**

Primary Health Networks receive Commonwealth Government funding under the National Psychosocial Support Transition measure to commission community mental health service providers to deliver services to people with severe mental health conditions who have not yet transitioned to the NDIS. [Attachment A](#) provides the names of community mental health service providers commissioned by Primary Health Networks to deliver services as at 29 April 2020 for 2019-20.

On 29 March 2020, the Australian Government announced additional funding of \$28.4 million in 2020-21 to continue to support remaining clients under the National Psychosocial Support Transition measure. A state by state breakdown by community mental health service providers for 2020-21 is not yet available.

**Attachment A**

STATE	Primary Health Network	National Psychosocial Support- Transition service providers as at 29 April 2020
NSW	<b>Nepean Blue Mountain</b>	Aftercare Parramatta Mission Flourish Australia
	<b>North Coast</b>	New Horizons CHESS Connect Mission Australia Momentum Collective
	<b>Central and Eastern Sydney</b>	Aftercare Anglicare Flourish Mission Australia Neami National New Horizons Wayside Chapel
	<b>Northern Sydney</b>	Community Care Northern Beaches Primary and Community Care Services New Horizons One Door
	<b>Western Sydney</b>	Aftercare Mission Australia Wise Employment Flourish Australia Parramatta Mission
	<b>Western NSW</b>	Aftercare Mission Australia Richmond PRA Limited (Flourish) The Benevolent Society Catholic Care Wilcannia-Forbes Centacare New England North West Marathon Health
	<b>South Western Sydney</b>	One Door Macarthur Disability Services Flourish Australia Catholic Care Aftercare The Benevolent Society
	<b>South Eastern NSW</b>	Flourish Australia
	<b>Murrumbidgee</b>	Centacare Lambing Flats Enterprises
		<b>Hunter New England</b>

STATE	Primary Health Network	National Psychosocial Support- Transition service providers as at 29 April 2020
QLD	<b>Brisbane North</b>	Aftercare Brisbane Youth Service Community Footprints Institute for Urban Indigenous Health Neami National Open Minds Richmond Fellowship Queensland (RFQ)
	<b>Brisbane South</b>	Aftercare Benevolent Society Brook RED Canefields Clubhouse Gallang Place Harmony Place Neami National Open Minds Richmond Fellowship Queensland Stepping Stones Clubhouse
	<b>Western Queensland</b>	Centacare North Queensland CatholicCare Social Services Toowoomba North and West Remote Health Aftercare Cunnamulla
	<b>Gold Coast</b>	Richmond Fellowship QLD Aftercare CURA
	<b>Central Queensland, Wide Bay, Sunshine Coast</b>	Anglicare Bridges Closed 10-02-20 Community Solutions Emerald NC Impact Live Better Lutheran Services Red Cross OZ Care RFQ STEPS Suncare
	<b>Darling Downs West Moreton</b>	Toowoomba Clubhouse Jacaranda Clubhouse Richmond Fellowship Queensland Darling Downs CLOSED 18.03.20 RHealth Limited Rural and Remote Mental Health Limited Aftercare Neami National Open Minds Carbal Medical Centre Lifeline Darling Downs Impact Community Services

<b>STATE</b>	<b>Primary Health Network</b>	<b>National Psychosocial Support- Transition service providers as at 29 April 2020</b>
<b>QLD</b>	<b>Northern Queensland</b>	Aftercare Apunipima Centacare Far North Queensland Selectability Worklink/Thrive
<b>ACT</b>	<b>Australian Capital Territory</b>	Catholic Care Wellways Woden Community Service Belconnen Community Service Mental Health Foundation
<b>SA</b>	<b>Country SA</b>	Skylight Mental Health Centacare Catholic Country SA Ltd Anglicare SA Ltd Uniting Country SA Mission Australia Life Without Barriers Australian Red Cross Society Centacare CatholicCare NT Uniting SA Country and Outback Health Neami National
	<b>Adelaide</b>	Life Without Barriers Neami National Anglicare Centacare Skylight Mental Health Uniting SA SYC Mind Australia
<b>VIC</b>	<b>North Western Melbourne</b>	Breakthru Cohealth DPV Health Merri Health Mind Neami National St Mary's House of Welcome
	<b>South East Melbourne</b>	Ermha Wellways Mentis Assist Launch Housing Star health EACH Uniting Prahran Stepping Up (Odyssey House) Jo Co Employment
	<b>Gippsland</b>	Within Australia Wellways Mind Australia

<b>STATE</b>	<b>Primary Health Network</b>	<b>National Psychosocial Support- Transition service providers as at 29 April 2020</b>
	<b>Western Victoria</b>	Grampians Community Health Karingal St Laurence LTD (GenU) Uniting Wimmera
	<b>Murray</b>	Albury Wodonga Aboriginal Health Services Centacare SWNSW Gateway Health Golden City Support Services Mallee Family Care Mind Australia Nexus Primary Health Northern District Community Health
	<b>Eastern Melbourne</b>	Neami National
<b>WA (3 PHNs)</b>	<b>Perth North</b>	360 Health + Community Health Black Swam Health Anglicare WA Richmond Wellbeing Ruah Community Services UnitingCare West Neami National
	<b>Perth South</b>	Richmond Wellbeing Black Swan Health Neami National HelpingMinds Limited The ORS Group Ruah Community Services
	<b>Country WA</b>	360 Health + Community Chorus Australian Red Cross Society Avivo: Live Life Kaata-Koorliny Enterprise & Employment Development Aboriginal Corporation Wirraka Maya Health Service Aboriginal Corporation Ngaanyatjarra Health Service (Aboriginal Corporation) Yura Yungi Medical Service Aboriginal Corporation LAMP Inc
<b>NT</b>	<b>Northern Territory</b>	Mission Australia Team Health-Darwin Mental Health Association of Central Australia Catholic Care NT Red Cross Sunrise Health Service Miwatj Health Service WYDAC
<b>TAS</b>	<b>Tasmania</b>	Anglicare Mission Australia

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000059**

**Question Number: 50**

**Question Subject:** Bulk Billing Telehealth

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

Why has the Government decided to lift the bulk billing requirement for the COVID-19 Temporary MBS Telehealth Services for Mental Health?

**Answer:**

The Government has been making refinements to the new Medicare Benefits Schedule (MBS) COVID-19 telehealth items since the first tranche was implemented on 13 March 2020, including updating items and the addition of new items. These changes have been made in response to the evolving COVID-19 situation and, in some cases, in response to feedback from stakeholders.

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000060**

**Question Number: 51**

**Question Subject:** Mental Health Telehealth Service

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

How many claims for these temporary Mental Health Telehealth Service MBS items had been made prior to the Government lifting the bulk-billing requirement?

**Answer:**

Between 13 March 2020 and 19 April 2020, there were 314,491 telehealth services processed for 237,144 patients.



**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Australian Government's Response to the COVID-19 Pandemic**

**Thursday 23 April 2020**

**PDR Number: IQ20-000061**

**Question Number: 52**

**Question Subject:** Affordable mental health care

**Type of Questions:** Question in Writing

**Questioner:** Senator Siewert

**Question:**

How will the Government ensure that low income earners and the unemployed will have access to affordable mental health care throughout the COVID-19 pandemic given they are unlikely to be able to afford the gap payment?

**Answer:**

On 29 March 2020, the Australian Government announced a \$74 million package over 2019-20 and 2020-21 to support the mental health and wellbeing of Australians in response to the coronavirus pandemic.

The mental health supports provided through this package are free to access and include dedicated coronavirus digital resources and online and phone counselling services.

The Government continues to provide Medicare rebates for mental health items through the Medicare Benefits Schedule. Some mental health professionals charge patients an additional fee, however a number of mental health professionals bulk bill patients. Patients are able to search for a bulk billing mental health professional via healthdirect's 'find a health service' function' [www.healthdirect.gov.au/australian-health-services](http://www.healthdirect.gov.au/australian-health-services).

In addition, low income earners continue to have access to mental health support through Primary Health Networks (PHNs). While patient co-contributions can be charged, PHNs take into account specific circumstances of client populations and provide low or no cost services where appropriate. Information on primary mental health services provided by local PHNs can be found by visiting the website at [www.health.gov.au/phn](http://www.health.gov.au/phn) and clicking on the Map Locator.