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Australian Government
Department of Home Affairs

Submission

For information
PDMS Ref. Number MS20-000130
Date of Clearance: 22/01/2020

To **Minister for Home Affairs**

Subject **Coronavirus, ABF op preparedness and response**

Timing At your convenience

Recommendations

That you:

- 1. note the information about the Department of Home Affairs' response to the current outbreak of coronavirus in China. noted / please discuss

Minister for Home Affairs

Signature.....

Date:...../...../2020

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Minister's Comments				
Rejected Yes/No	Timely Yes/No	Relevance <input type="checkbox"/> Highly relevant <input type="checkbox"/> Significantly relevant <input type="checkbox"/> Not relevant	Length <input type="checkbox"/> Too long <input type="checkbox"/> Right length <input type="checkbox"/> Too brief	Quality Poor 1.....2.....3.....4.....5 Excellent Comments:

Key Issues

1. Following the outbreak of a new coronavirus (nCoV) strain in China, the Department of Home Affairs is working closely with the Departments of Health and Agriculture to manage the risk of the virus coming through Australian borders.
2. There are no confirmed cases of nCOV in Australia.

ABF Operational preparedness and response

3. The ABF routinely receives information from the Department of Health related to matters at the border. There has been no request for increased measures for the ABF and Department of Agriculture at this time. However the ABF remain prepared should there be such a request.
4. There has been two possible or suspected cases in Australia.
5. s47F Health tested s47F for 2019-nCoV who returned from travel to Wuhan, China with respiratory illness. s47F sought medical attention post travel and was confined to home isolation until s47F symptoms are resolved.
 - On 22 January, the Department of Health confirmed that the initial suspected case in s47F has been released from isolation, as they are now asymptomatic. It has been 16 days since onset of illness, beyond is understood to be the virus's duration and infectious period.
 - A final test will be conducted (2019-nCoV specific assay), which is being conducted for the first time in Australia. The previous pancoronavirus assay on a sample from this individual was negative, so it is also likely that this test will be negative.

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6. On 22 January 2020, an Australian national suspected to have 2019-nCoV arrived into Melbourne Airport. As of 10:20 am on 22 January 2020, on the direction of the Department of Health the passenger was transported to Royal Melbourne Hospital. The ABF has not received the outcomes of testing the individual for 2019-nCoV. The potential health risk was identified on 21 January 2020, and the Departments of Agriculture and Health, and the Australian Border Force (ABF) put measures into place to manage the incoming flight and mitigate unnecessary exposure.
 - The Department of Health advised that the Australian national was highly unlikely to have contracted the nCoV, however precautions were still to be undertaken. Full Personal Protective Equipment was not required with Officers advised to practice normal hygiene and wear masks, gloves and goggles.
 - Department of Agriculture officers met the plane and escorted the traveller to their health room for initial assessment prior to processing by ABF Officers.
 - Primary line processing for the flight was limited to four ABF Officers.
 - Processing of the individual suspected to have 2019-nCoV was managed in a quarantined area. Pre-arrival processes (such as downloading relevant material) limited the ABF Officers direct exposure to the passenger and his original travel document.
 - A separate marshal point was arranged for the flight.
7. On a weekly basis, there are three direct flights from Wuhan, China to Sydney Airport. The ABF and the Department of Agriculture has enforced a heightened response to manage the potential health risks associated with these flights.
8. The ABF and the Department of Home Affairs is working collaboratively to analyse extended and indirect flight routes from Wuhan to Australia, and will provide the Department of Health data on the frequency of flights and numbers of passengers traveling from China (including Wuhan) to Australia and any risk assessed with those flights.
9. Chief Medical Officer and Surgeon General, Dr Parbodh Gogna has consulted with Professor Miles Beaman, Consultant Microbiologist Home Affairs Independent Medical Advice Panel. Professor Beaman's advice is consistent with that which has been provided by the Department of Health. Professor Beaman noted a definitive test is available and this will allow for diagnosis and mapping the spread. This contrasts to other corona virus outbreaks, where it took time to develop a reliable test.
10. The Department of Home Affairs Health Services Division is actively engaged with international partners to appreciate the threat and response being adopted elsewhere.

Frontline Officer Safety

11. ABF Officers will continue to support actions at the border to ensure all travellers, or those at risk, are identified and referred to authorities as appropriate. The ABF has provided information and advice to officers in respect of the current health warning in order to ensure our workforce is vigilant and alert to the risks arising and identify any travellers of concern and ensure their appropriate referral.

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12. Department of Home Affairs Health Services Division are responsible for the health and safety of ABF officers and are engaged with the Department of Health and the Consultant Microbiologist to ensure appropriate responses are implemented.
13. The ABF has undertaken internal planning focused on prevention and contingency planning for a health related response that positions it to meet requirements under a whole of Government response and will enact this upon advice from the Department of Health. ABF will continue to work with the Department of Agriculture and Health to implement these measures, as necessary.

Background

14. On 9 January 2020, the World Health Organisation (WHO) reported that Chinese authorities had made a preliminary determination of a novel (or new) coronavirus (2019-nCoV), identified in a hospitalised person with pneumonia in Wuhan, Hubei Province, China. Coronaviruses are types of viruses that typically affect the respiratory tract of animals and humans. Symptoms can include fever, difficulty breathing, cough, sore throat and pneumonia.
15. As of 21 January 2020, the Department of Health has reported 221 confirmed cases of 2019-nCoV have been detected across the globe, and four deaths reported. Of the 221 cases:
 - 198 have been reported from Wuhan, China.
 - 19 cases have been reported in other regions of China (5 in Beijing and 14 in Guangdong Province).
 - 4 exported cases have been reported in Thailand (2), Japan (1) and South Korea (1), all with reported travel to Wuhan.
 - Of the 198 confirmed cases in Wuhan, 29 have recovered or been discharged, 125 have mild illness, 35 are listed as severe and 9 are in a critical condition.
 - The recent significant increase in the number of cases has been partially due to increased surveillance and testing of cases.
 - There have been no reports of cases in children, however there is insufficient information to assess whether children are being tested.
16. At the border, the Department of Agriculture is the Australian Government lead for managing traveller health matters. ABF Officers provide support and assist as required with directing passengers identified by the Departments of Health and Agriculture.
17. There are four laboratories in Australia able to effectively test for 2019-nCoV. These laboratories are located in New South Wales, Queensland and Victoria.

Health Advice and Prevention Initiatives

18. The WHO is reporting evidence of limited human-to-human transmission, given some cases have reported no exposure to the Huanan seafood wholesale market (the initial suspected origins of the virus).

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19. The WHO does not currently recommend any travel or trade restrictions.
20. The Department of Health, in consultation with the Department of Agriculture is the lead agency in determining Human Biosecurity Measures at Australia's Border, where a communicable disease may pose risk to the Australian community through international travellers.
21. As the agency lead, the Department of Health provides risk assessment advice to the Department of Home Affairs and the Department of Agriculture, which determines the need to implement any changes to visa and border measures, including additional screening of travellers.
22. On 21 January 2020, 'Human coronavirus with pandemic potential' was added as a Listed Human Disease (LHD) under the Biosecurity Act 2015, enabling the use of enhanced border measures.
23. These measures include an amendment to the Traveller with Illness Checklist to specifically screen unwell travellers for the novel coronavirus, and the development of targeted communications to be rolled out at international airports.
24. Electronic signage and banners on this new coronavirus are in development and will be issued to first points of entry in coming days.
25. The Department of Health does not currently recommend mass screening of passengers at airports, including thermal scanning, due to the limited evidence of effectiveness.
26. The Department of Health, through the National Incident Room, is closely monitoring this situation in collaboration with the WHO and the states and territories, and providing updated advice to the Department of Home Affairs. Assessment of the risk to Australia and Australians is ongoing.

Other countries

27. Entry screening is being conducted in 11 countries, including those bordering China, as well as Canada and the United States of America. This includes temperature screening, recording of passenger information and health checks of symptomatic passengers.
28. Travel advisories have been issued by ten countries including Canada, the United Kingdom and the United States of America.
29. The United States (US) of America Centres for Disease Control and Prevention (CDC) commenced entry screening of passengers on direct and connecting flights from Wuhan, China to the three main ports of entry to the United States (San Francisco, Los Angeles and New York) on 17 January 2020. The CDC issued an updated interim Health Alert Notice Advisory to inform state and local health departments and health care providers about this outbreak on 17 January 2020. The CDC has developed a test that can diagnose 2019-nCoV. Currently, testing for this virus must take place at the CDC, but in the coming days and weeks, the CDC will share these tests with domestic and international partners through the agency's International Reagent Resource.

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30. On 22 January 2020, the US provided the following update ^{s. 33(a)(iii)} [REDACTED] :
- US CDC has confirmed one case of 2019-nCoV in Washington state. Entry screening of passengers ^{s. 33(a)(iii)} [REDACTED]. A health declaration form is required to be completed on arrival to the US by all passengers.
 - Passengers will have a hand held temperature check, asked about recent respiratory symptoms, will use public health partners at airports to assist with information cards and if there is further concern passengers will be referred for review and may be required for transfer to hospital for further evaluation and treatment.
31. Dr Gogna requested a copy of all US documentation and ^{s. 33(a)(iii)} [REDACTED] from CDC and ^{s. 33(a)(iii)} [REDACTED].
32. The United Kingdom reported that they have enhanced incoming passenger safety checks, mapped airline movements (85% of arrivals disembark or transit London Heathrow). Airlines will provide advice on arrival on unwell passengers via declaration from the Captain to assist with potential patient identification. This report is provided once cabin doors are open and if there is ongoing concern there will be a further passenger questionnaire, thermal check and using a decision pathway which may escalate to ambulance transfer to specialist hospital. No systematic evaluation of all disembarking passengers, symptom identification on-board and patient self-identification.
33. Canada has reported there are no direct flights from Wuhan, however, airline point of arrival measures have been implemented, including a health declaration questionnaire.
34. New Zealand do not have direct flights but have issued a warning on health cards as it is estimated approximately 7,000 passengers travel indirectly. A health line for travellers has been established to call following their reading of the healthcare information leaflet to capture self-reporting of symptomatic passengers.
35. China has commenced exit screening, which includes temperature screening and temporary isolation of febrile passengers.

Consultation – internal/external (Mandatory Field)

36. Department of Home Affairs Chief Medical Officer and Surgeon General of the Australian Border Force
37. Department of Home Affairs, First Assistant Secretary, Health Services Division , Stephen Hayward
38. Department of Agriculture

Consultation – Secretary

39. The Secretary has been provided with a SCNS Brief – Coronavirus Outbreak

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Sensitivities

Media Talking Points

40. The Department of Health is the lead agency in determining Human Biosecurity Measures at Australia's Border and my Department will continue to engage with the Department of Health to implement whatever additional border measures are determined necessary.
41. Where a communicable disease may pose risk to the Australian community through international travellers, as the agency lead, the Department of Health provides risk assessment advice to the Department of Home Affairs, which determines the need to implement any changes to visa and border measures.
42. No specific measures are recommended for travellers to Australia at this time. This is consistent with the recommendations of the WHO under the International Health Regulations.
43. Australia has well established processes in place for screening of ill travellers arriving at our international air and sea ports. These have been further enhanced following the listing of 'Human coronavirus with pandemic potential' as a Listed Human Disease, under the Biosecurity Act 2015, on 21 January 2020.
44. These measures include an amendment to the Traveller with Illness Checklist to specifically screen unwell travellers for the novel coronavirus, and the development of targeted communications to be rolled out at international airports.
45. Electronic signage and banners on this new coronavirus are in development and will be issued to first points of entry in the coming days.
46. Under Australian legislation, airlines must report passengers on-board showing signs of an infectious disease, including fever, sweats or chills. Airlines reporting ill travellers are met on arrival by biosecurity officers who make an assessment and take necessary actions, such as isolation and referral to hospital where required. These processes are well established.
47. The Australian Border Force (ABF) will act on formal advice, requests or instruction should the concern escalate as part of a whole of Government response.
48. The ABF considers all instructions issued by the Department of Health and Home Affairs Health Services when it comes to officer and public safety. ABF frontline officers assist as required with directing passengers identified by the Departments of Health and Agriculture.

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Attachments:

49. Nil

Authorising Officer
Cleared by: Kylie Rendina Assistant Commissioner, Border Patrol and Coordination Command, Australian Border Force Date: 22 January 2020 Mob: <small>s22(1)(a)(ii)</small>

Contact Officer Kylie Rendina, Assistant Commissioner, Border Patrol and Coordination Command, Australian Border Force Ph: s22(1)(a)(ii)

CC Secretary
Commissioner
Deputy Commissioner, Operations Group
Deputy Commissioner, Support Group

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