



AMA STATEMENT ON NATIONAL CABINET'S DRAFT FRAMEWORK FOR REOPENING

On 19 October 2020, the AMA released a Communique calling on National Cabinet to review its May 2020 COVID-19 Roadmap, considering the lessons from overseas and local experience. Our Communique set out a range of measures that would support ongoing economic recovery without putting the health of the community at risk. The overwhelming evidence from here and overseas is that prioritising health and the containment of COVID-19 is essential to supporting a sustainable economic recovery.

Our Communique stated that the current goal of zero-community transmission of COVID-19 set by National Cabinet is appropriate and achievable. Plans and policy settings must ensure that, even in circumstances where zero community transmission is achieved, outbreaks can be effectively managed in a decisive and timely fashion.

With the number of infections growing rapidly overseas, we cannot expect quarantine arrangements to keep COVID-19 outside of our international borders for the duration of the pandemic, which is still in its early stages. Living with the threat of the virus means that sensible restrictions need to remain part of our lives for the foreseeable future, working to protect the community in concert with quarantine, surveillance, testing, tracing and improved health system capacity.

National Cabinet subsequently released its draft Framework ('draft Framework') for reopening on 23 October 2020 and the AMA has reviewed this against the criteria set out in our Communique. Our overall assessment of the draft Framework is that it represents a significant change in direction by governments, emphasising the economy over health.

This change in policy approach increases the risks of large COVID-19 outbreaks and gives rise to the prospect of more lockdowns. Step three in the draft Framework is not compatible with the agreed goal of zero community transmission set by National Cabinet.

The draft Framework is also incomplete. While it outlines plans for reopening, it lacks any meaningful plan for outbreak management. This is a critical omission that further highlights the emphasis on the economy over health. As our Communique stated, Australia needs a COVID-19 alert system, like New Zealand, that details the steps that will be taken when outbreaks happen.

The community should not be asked to embrace a document that does not properly acknowledge the increased potential for outbreaks or outline how these will be managed.

While the AMA acknowledges plans in the draft Framework to improve surveillance, testing and contact tracing, and outbreak management, step three of the draft Framework remains too ambitious. It proposes to dismantle many of the restrictions that still exist in many parts of the country, despite the experience of New South Wales showing that quarantine, testing and contact tracing work best when they are supported by sensible restrictions that limit movement and contact in the community.

Permitting much larger gatherings, allowing venues to have many more people indoors, promoting a wholesale return to workplaces and putting more people on public transport, where social distancing is not possible, creates an environment where small outbreaks of COVID-19 can rapidly escalate. This is the experience of many other countries around the world.

When outbreaks inevitably happen, it is likely that States/Territories will quickly resort to border closures to protect their populations from these, rather than having a suite of nationally agreed measures in place that make them resilient and provide sufficient confidence that other jurisdictions can quickly extinguish outbreaks. This is the approach that the States and Territories have taken since the start of the pandemic and nothing in the draft Framework suggests that this will change.

The language of the draft Framework and the changes it proposes will also fuel complacency in the community, something that we know is already a problem. Despite this growing problem, the draft Framework aims to remove the bulk of the checks and balances that have helped to protect us from the impact of complacency.

National Cabinet also proposes that these changes will be fully implemented by Christmas, coinciding with the summer holiday period. We know from the experience of overseas jurisdictions that similar policy approaches and timings have led to significant growth in infections, even in countries where the virus was thought to be well under control. Australia cannot afford to make the same mistakes and surrender the gains that we have made. This would have a devastating impact on our health and also our economy.

The AMA assessed the earlier Roadmap released in May 2020 by National Cabinet as being overly ambitious. Even now, some jurisdictions have been unable to relax aspects of restrictions to the extent envisaged in that Roadmap and it was only on 1 November that Australia was able to record its first day of zero community transmission since 9 June 2020. The new draft Framework is even more ambitious and, based on the Australian and overseas experience, gives unrealistic emphasis to the achievement of 'normal.'