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## **AMA RELEASES STATEMENT ON THE COVID-19 NATIONAL PLAN**

*AMA Federal Council calls for pause and assess periods to ensure strong control of new infection numbers is maintained*

The AMA’s Federal Council has released a statement on the National Plan to transition Australia’s National COVID-19 response.

Federal Council – the AMA’s peak decision and policy making body – has said National Cabinet’s strategy must not rely solely on vaccinations and is calling on National Cabinet to approach the easing of public health measures outlined in the National Plan progressively and with caution, with pause and assess periods to ensure strong control of new infection numbers are maintained.

Dr Khorshid said the updated Doherty modelling released late Friday underlines the need to be cautious when easing restrictions.

“When implementing the National Plan we must be realistic, careful and test each change and the impact of measures before moving to the next phase, given that there are thousands of COVID-19 cases in the community,” said Dr Khorshid.

“It must also take account of vulnerable communities, such as Indigenous and those in regional and rural areas, because the Plan is only as good as the vaccination rates in those vulnerable communities.”

Dr Khorshid said the Doherty modelling does not show the impact on hospitals, which are already under extraordinary pressure.

“The health system needs to be much better prepared to deal with the growing burden of COVID-19, as well as be able to deliver non-COVID-19 related care,” he said.

“Federal Council considers the Doherty modelling to be an aid to decision making, which will need to be reviewed and updated as our understanding of COVID-19 develops, including the impact of COVID-19 on children,” Dr Khorshid said.

Dr Khorshid said the AMA Federal Council was calling on National Cabinet to:

- Beyond the achievement of targeted vaccination rates, commit to the maintenance of sufficiently robust public health restrictions to keep the number of people going to hospital and dying at a minimum, and support the achievement of the ‘Optimal TTIQ’ projections outlined in the Doherty Report.
- Approach the easing of public health measures in the national plan with caution. They must be eased progressively, with ‘pause and assess’ periods to ensure that strong control of new infection numbers is maintained.
- Work to deliver equitable access to vaccines and acknowledge that vaccination targets must be achieved across all relevant age groups and demographics, including

vulnerable groups such as Aboriginal and Torres Strait Islander and rural and remote communities.

- Require those jurisdictions that are dealing with significant outbreaks of COVID-19 to bring these under control by either keeping high impact public health measures in place for longer, and/or easing these measures at a slower pace than other parts of the country.
- Recognise that those jurisdictions, where there is currently no community spread of COVID-19 and few or no restrictions in place, may need to reinstate some restrictions as borders open and the virus starts to circulate in the community.
- Provide more detailed advice on what public health measures would be eased or modified as each vaccination target is achieved and clearly outline what actions will be taken if infection numbers are likely to overwhelm testing, contact tracing and quarantine capacity.
- With respect to the Doherty modelling, ensure that it is reviewed and updated on a regular basis and, in relation to the transition to the final phase of the national plan, incorporates vaccination targets across all age groups and demographics including children.
- Adopt nationally consistent public health orders that mandate COVID-19 vaccinations for all health care workers and extend legal protection to employers that wish to mandate vaccination for their own workforces.
- Reach agreement on the necessary measures and funding required to boost the capacity of our health system to manage the ongoing impact of COVID-19, address the health care backlog that COVID-19 has created and meet the usual health care needs of the community.

"We need to do everything we can to avoid our hospitals collapsing from opening up too early. We need planning, not just around ICU beds, but around staffing and how the primary health sector, including GPs, can support critical Covid care. We don't want to see the healthcare system become the handbrake on the economy and our ability to open up," Dr Khorshid said.

[AMA Statement on National Plan to Transition Australia's National COVID-19 Response](#)

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