

Record of email advice from Chief Health Officer 16 February 2022

From: Brett Sutton (Health) [REDACTED]
Sent: Wednesday, 16 February 2022 1:48 PM
To: Euan Wallace (Health) [REDACTED]
Cc: Nicole Brady (Health) [REDACTED]
Subject: RE: OFFICIAL: Fw: Pandemic health advice

Dear Euan,

Thanks for passing on this request.

I appreciate the Minister providing me with the additional context he received from CMC colleagues. I have considered the points they raised and advise that it would be reasonable for the Minister to factor these points into his decision-making on the QR-code and COVID Marshal settings.

I am particularly mindful that the Minister's proposed changes to the settings still align with the fundamental components of my advice, which is to remove QR code requirements in low-risk settings and retain them in high-risk settings. For the remainder of settings, it would be reasonable for the Minister to take the feedback on operational impacts and social license into account, especially the risk that more complex changes may impede understanding of and compliance with the Orders. I recommend that communications support these changes, including where penalties do and do not apply.

Additional advice on hospital visitors

I would like to also raise an issue was brought to my attention this morning regarding exemptions for visitors to hospitals who would ordinarily be excluded (because they are COVID-positive, for example). On this matter, I provide the following advice to you for consideration in changes:

The current circumstances under the Pandemic (Visitors to Hospitals and Care Facilities) Order 2022 (No. 2) that enable a person to be exempted (with approval) from ordinary visitation exclusions is not sufficiently broad. For example, it does not enable appropriately qualified delegates to consider exempting a COVID-positive birth partner to be present for the birth of their child. While it is important to maintain a case-by-case approval process by an appropriately qualified person, the discretion available to the decision-maker is currently too narrow.

I recommend that you broaden the circumstances that a person may be considered for exemption to align more closely with the circumstances under which ordinary hospital visits are allowed.

Regards,

Brett

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Victorian Chief Health Officer

Victorian Chief Human Biosecurity Officer

Public Health Division & COVID-19 Response Division

Department of Health

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