

**Queensland Government Response**  
**Health, Communities, Disability Services and Domestic and Family  
Violence Prevention Committee**  
**56<sup>th</sup> Queensland Parliament**  
**Report No. 43: Interim Report – Inquiry into the Queensland  
Government’s health response to COVID-19**

### **Background**

On 22 April 2020, the Legislative Assembly referred an inquiry into the Queensland Government’s health response to COVID-19 (the Inquiry) to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee (the Committee). The Terms of Reference for the Inquiry required the Committee to report to the Legislative Assembly by no later than three months after the conclusion of the Public Health Emergency declared under the *Public Health Act 2005* regarding COVID-19.

At the request of the Committee, both Queensland Health and the Department of the Premier and Cabinet (DPC) provided written submissions to the Committee responding to Terms of Reference 1 and 2. Queensland Health’s submission outlined the agency’s role and work in leading the health response to COVID-19 in Queensland. DPC’s submission provided advice on the Federal Government’s health response to COVID-19 in relation to a number of specific matters, including border and quarantine arrangements, pandemic mapping and preparedness, support for hospital and health care, and the issuing and enforcement of Public Health Directions. The DPC submission also incorporated information provided by the Queensland Police Service and attached responses from the former Department of Communities, Disability Services and Seniors, and the former Department of Child Safety, Youth and Women, as requested by the Committee.

The Committee called for submissions until 3 July 2020, followed by public hearings in July and August 2020. On 23 June and 3 July 2020 respectively, the Committee held public hearings with senior representatives from Queensland Health including the Chief Health Officer, Dr Jeannette Young, and with senior officials from DPC.

On 6 October 2020, the 56<sup>th</sup> Queensland Parliament was dissolved by proclamation, and with that dissolution, the Inquiry into the Queensland Government’s health response to COVID-19 lapsed. It remains a requirement that the Queensland Government Response be tabled within three months of the tabling of the original Committee report.

### **Overview**

The committee tabled its *Report No. 43, 56th Parliament – Interim Report: Inquiry into the Queensland Government’s health response to COVID-19* (Report No. 43) in the Legislative Assembly on Wednesday 16 September 2020. Report No. 43 is an Interim Report in the context of the ongoing COVID-19 pandemic noting that some issues raised in the Inquiry will warrant further careful consideration once the public health emergency has passed.

While the quick and decisive actions of the Queensland Government have put Queensland in an enviable position compared with other jurisdictions and countries around the world, the Queensland Government remains vigilant in implementing effective and responsive health measures to protect the health, safety and wellbeing of Queenslanders.

The Queensland Government therefore supports or supports in-principle all six recommendations from Report No. 43, and provides its response in two sections:

- Responses to recommendations directed to the Premier (Recommendations 1, 5 and 6)
- Responses to recommendations directed to the Deputy Premier and Minister for Health and Minister for Ambulance Services (Recommendations 2 and 3)

The Queensland Government notes and supports the referral of Recommendation 4 to the Federal Minister for Health, noting the Federal Government's oversight of the National Medical Stockpile and responsibility for access to PPE for general practitioners, aged care facility staff and allied health workers. To this end, the Queensland Government will write to the Federal Minister for Health.

### **Responses to recommendations directed to the Premier and Minister for Trade**

**Recommendation 1: *That the Queensland Government formally acknowledges frontline workers in Queensland Health and other agencies across the government for their contributions to the government's health response to COVID-19.***

Supported.

The Queensland Government acknowledges the contribution of health care staff across Queensland to the Government's health response to COVID-19. In recognition of this contribution, on 14 September 2020 the Queensland Government announced a Health Heroes Week commencing Saturday 26 September. The dedicated week allowed the public to acknowledge and thank Health Heroes for their role during the COVID-19 pandemic.

Further, the Queensland Government has announced the provision of up to two days additional leave to health professionals and support staff involved in the pandemic response. The additional two days leave applies to permanent and temporary full-time health care staff (excluding executives) across Queensland Health, including the Department of Health, Hospital and Health Services and Queensland Ambulance Service. Part-time staff are eligible on a pro-rata basis. Eligible staff are able to take the pandemic leave from 1 November 2020 and within two years. Pandemic leave and other arrangements have also been announced for police and teachers.

In acknowledging the vital role of key leaders from across Government, and their staff in supporting the health response to COVID-19, the Premier has also written individual letters of thanks, including to the Chief Health Officer, Dr Jeannette Young, and the State Disaster Coordinator, Mr Steve Gollschewski.

**Recommendation 5: *That the Premier seeks support through the National Cabinet for the Australian Government to provide ongoing funding through the provision of permanent Medicare item numbers to support the extension and availability of telehealth services in Australia beyond 30 September 2020.***

Supported in-principle.

The Queensland Government will explore the most appropriate and effective mechanisms to advocate for these measures as required.

The Queensland Government supports the flexible delivery of health care that is responsive to the needs of Queenslanders. Telehealth enables patients to receive quality care closer to home via telecommunication technology, improving access to specialist health care for people in regional communities and reducing the need to travel for specialist advice. The Queensland Government acknowledges the increased uptake of telehealth and related virtual health services during the COVID-19 pandemic.

It is noted that on 18 September 2020, the Federal Government announced the extension of Medicare-subsidised telehealth services for a further six months, to 31 March 2021, and a subsequent announcement on 27 November 2020 that the arrangement would be made permanent. It is understood patients will continue to have access to Medicare-subsidised telehealth for general practitioner, nursing, midwifery, allied health and allied mental health services. Telehealth is also being extended for essential specialist services, such as consultant physician, geriatrician, and neurosurgery services. Bulk billing will continue to be available and regular billing practices will apply to all of these services.

**Recommendation 6: *That the Premier seeks support through the National Cabinet for the Australian Government to make permanent the temporary changes to prescribing contained in the Australian Government's National Health (COVID-19 Supply of Pharmaceutical Benefits) Special Arrangement 2020 to allow emergency dispensing arrangements and dispensing based on digital images of prescriptions.***

Supported in-principle.

The Queensland Government will explore the most appropriate and effective mechanism to advocate for these measures as required.

Queensland Health supports retention of the Continued Dispensing (Emergency Measures) arrangements.

For medicines that are not on the Pharmaceutical Benefits Scheme (PBS), currently only a three-day emergency supply may be given by a pharmacist (apart from oral contraceptives). Further consideration would be required if these current emergency arrangements were to be changed for non-PBS medicines.

Queensland Health also supports expanded options for electronic communication of images of paper prescriptions, provided the current safeguards in the arrangement are retained to:

- authenticate the prescription
- reduce the risk of fraudulent access to medicines associated with abuse and illicit use (for example, by requiring the doctor to send the image directly to the pharmacy and not via the patient)
- ensure original prescriptions are kept for audit, investigation and enforcement purposes.

The Queensland Government notes that electronic prescriptions are a preferred alternative to emailing, faxing or texting of digital images. Generating, sending and dispensing electronic prescriptions using software that conforms with the national requirements is more private and secure and more administratively efficient than sending digital images, and from the patient perspective, the repeat prescriptions are portable. As noted in Queensland Health's response to submissions, the requirements for dispensers and prescribers to lawfully use electronic prescribing methods in Queensland have been determined, and the first lawful electronic prescription was prepared and dispensed in Queensland on 27 July 2020.

### **Responses to recommendations directed to the Deputy Premier and Minister for Health and Minister for Ambulance Services**

***Recommendation 2: That Queensland Health continues to engage with stakeholders to provide information about future Public Health Directions and other changes to government policy related to the COVID-19 health response.***

Supported.

As noted in Queensland Health's response to submissions, Queensland Health has an extensive stakeholder network that allows it to engage with stakeholders whenever a Public Health Direction or a policy change is likely to have a significant impact.

Queensland Health will also continue to work with industry, and with DPC and other agencies to provide specific and tailored information to relevant stakeholders, with as much advance notice as possible.

Queensland Health has relied upon the technical and industry knowledge of other Queensland Government agencies throughout the pandemic, and this has been instrumental in ensuring that public health risks and requirements are able to be explained in a way that is meaningful to industry stakeholders.

While in some instances changes to directions are made at short notice (for example, to respond to an emerging group of COVID-19 cases), Queensland Health seeks to provide advance notice of changes whenever it is possible. This was evident, for example, when changes have been made to the Border Restrictions Direction to allow people to enter Queensland from specific states and territories.

The Queensland Government has also sought to transparently provide information on anticipated changes to measures through publication of the Queensland Government Roadmap to easing restrictions, which has been updated as the COVID-19 response evolved. These Roadmaps are available on the Queensland Government COVID-19 website at [www.covid19.qld.gov.au](http://www.covid19.qld.gov.au).

**Recommendation 3: *That Queensland Health ensures its public health messaging platforms are diversified and developed to ensure cohorts of Queenslanders with complex health issues, or increased vulnerability to COVID-19, receive tailored advice to suit their information needs and addresses how they can stay safe during the pandemic.***

Supported.

Queensland Health supports the recommendation to ensure its public health messaging platforms are diversified during the pandemic.

The quality and diversity of Queensland Health's communications have been a vital part of the public health response to the COVID-19 pandemic.

Queensland Health has greatly increased its public presence during the pandemic, and public messaging is disseminated through various channels such as digital and social media, paid advertising, traditional media, regular press conferences and posters. Queensland Health also works closely with a range of community and non-government organisations to ensure vulnerable groups, such as people from culturally and linguistically diverse (CALD) backgrounds have access to current, culturally appropriate and translated COVID-19 information.

Queensland Health has developed tailored information, which is disseminated through these channels, for groups most at risk of suffering serious illness from COVID-19 such as:

- First Nations people
- Older Queenslanders
- People with a compromised immune system
- Pregnant and breastfeeding women
- People with disability and their carers
- People from culturally and linguistically diverse backgrounds (including a suite of translated and simple English materials).

Ensuring our content is accessible to as many users as possible, the Queensland Health website has been designed and developed:

- for people with disabilities who may use assistive technologies
- for people with slower internet connections (including some rural and regional users) or less than state-of-the-art equipment
- to include links to the Translating and Interpreting Service (TIS National).
- to include information and extensive Questions and Answers to help people understand Public Health Directions.

Further to this, where possible, each press conference is attended by an AUSLAN interpreter.

Queensland Health is committed to ensuring people can access advice specific to their circumstances. To this end, Queensland Health established the Health Care Support Service, as part of Queensland's Health Directions Enquiry Service. This call centre capability is supported by dedicated emergency medical dispatchers, nurses, social workers, paramedics and other specialists and provides accurate information to people, from a COVID-19 hotspot or overseas, seeking access to essential health care in Queensland.

These actions ensure that all members of the Queensland community receive timely, practical and engaging communications.