Objective | Build on the ‘3-Step Framework for a COVIDSafe Australia’, to nationally reopen to a state of ‘COVID Normal’, wherever it is safe to do so, by Christmas 2020

Open Australia

Restrictions put in place through 2020 have successfully operated to slow the spread of COVID-19. However, the Australian economy, community and industry have been heavily impacted as a result.

The aim of this framework is to provide consideration and guidance for a reopening of Australia whilst managing the health impacts and severity of COVID-19.

It is acknowledged that states and territories have the decision making authority in relation to public health measures. The national strategy is suppression with a goal of no community transmission.

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Components of Public Health Preparedness

For more information on the current health advice, refer to Page 4

“Quarantine constitutes a first line of defence in preventing the importation of COVID-19. While the quarantine system should be managed to limit breaches, the robustness of elements of the second line of defence (testing, contact tracing in the community) are also crucial as it will not be possible to manage a quarantine system that is completely error free. And must be backed by a third line of defence – physical distancing, hygiene and health system capacity.”

- National Review of Hotel Quarantine, 2020
### PROTECTING THE WELLBEING, HEALTH AND SAFETY OF ALL AUSTRALIANS

#### KEY PRINCIPLES

**Measures that are proportionate** | Use of COVIDSafe plans, effective testing and contact tracing, strong guidance to individuals around their responsibilities, and targeted restrictions, including around gatherings and activities. Response measures and decisions are proportionate to the risk of harm and transmission, with a commitment to a nimble, targeted and localised response as informed by clear health advice, data and modelling.

**Consistent approach** | Commit to a national approach between state and territory jurisdictions to the opening up of the economy and removing border restrictions, while continuing to implement the agreed COVID-19 suppression strategy, towards the goal of no community transmission.

**Protect national wellbeing** | Decision making accounts for minimising displacement of workers and long-term damage to career paths, and considers the long term effects on mental health and wellbeing due to unemployment, social isolation and the protracted pandemic.

**Well communicated** | Community expectations are managed through clear communication of risk, balanced with messages to increase public confidence where risk is low. Ensure the public (with attention to culturally and linguistically diverse communities) and business understands and complies with the rules through consistent and timely messaging, targeted government support and appropriate enforcement.

**Support confidence to allow economic activity to continue and/or restart** | Support economic activity through community and consumer confidence. Ensure businesses understand their obligations to manage the health and safety risks that their operations present, and build business confidence and adaptive capacity through the recovery.

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| Physical distancing (1.5m), maintaining good hand hygiene, staying home if unwell and getting tested for COVID-19 if symptomatic | Outbreaks are managed through a swift public health response, in line with advice from the Australian Health Protection Principal Committee | Removal of domestic border restrictions to facilitate free movement of people and freight consistent with the virus suppression strategy and local health advice. | All businesses have a COVIDSafe Plan in place | States and territories have the decision making authority in relation to public health measures. The national strategy is suppression with a goal of no community transmission. |
1. Surveillance
   - A streamlined system of daily reporting of cases and clusters *
   - Robust epidemiological data around cases and clusters *
   - Routine wastewater testing to identify undetected disease in a mix of regional and metropolitan areas *
   - Data for the Common Operating Picture (COP) and revision of metrics to inform the response *
   - AHPPC monthly review of innovative and novel testing platforms, including international experience and published literature to enable setting-appropriate detection of disease

2. Quarantine and isolation
   - Best practice quarantine and isolation practices in line with the findings of the Halton review
   - Daily epidemiological data about individuals and disease detected in quarantine *

3. Testing and contact tracing
   - Continue communication strategies to encourage testing uptake to detect disease in people with acute respiratory illness *
   - Enable a surge laboratory capacity of 3 tests per 1000 population per day
   - Measure test turnaround times and respond as suitable to delays of over 2 days
   - Detect all chains of transmission by contact tracing downstream and upstream contacts with all close contacts notified within 2 days *

4. Outbreak responsiveness
   - Rapid deployment of skilled outbreak management teams *
   - Plans to scale up the response *
   - Support detection of disease outside of the immediate response zone e.g. local government areas or local health networks
   - Ensure an embedded Aged Care Response Centre in each jurisdiction

* Note: Halton and Finkel reviews are subject to separate National Cabinet considerations.

There is an ongoing and potentially increased risk of introduction of COVID-19 from overseas. In addition to strong quarantine and isolation, we need ongoing cooperation of the public to undertake activities in a COVIDSafe manner and to continue to present for testing. Australia’s response and continued work is based on the science and evidence around transmission of the disease. To be COVIDSafe requires continuous evaluation of the effectiveness and implementation of the plans. Measures to identify and manage localised outbreaks should be driven by public health advice, with a focus on vulnerable populations such as indigenous communities, aged care and people with a disability.
The following provides a snapshot of the sectors that have been severely impacted by the implementation of COVID-19 restrictions, including border restrictions, limits on business and social distancing measures. While COVID-19 continues to have significant impacts on Australian businesses, these impacts continue to evolve in response to changes in restrictions and policy announcements including the Federal Budget. This does not form part of the framework and is for context only. **Industry impacts vary across jurisdictions.**

### Sectors CRITICALLY AT RISK from COVID-19 restrictions.
- **Aviation** at major airports is down more than **95 per cent** on pre-COVID levels.
- Non-food sales in Victoria up to **65 per cent lower** than a year ago. Melbourne’s main retail location vacancy rates are **50 per cent higher** than two years ago.
- **126,000** arts, sports and entertainment services workers are expected to lose their jobs.
- Australia's **universities** are forecast to lose between $3.1 billion and $4.8 billion in revenue over the remainder of the year due to the fall in international student tuition fees and other income.
- The number of **tourism** industry jobs fell by 109,000 over the year to 611,700 in the June quarter. This is the lowest number of tourism jobs since 2014.

### Sectors AT RISK from COVID-19 restrictions.
- **Independent food and beverage** retailers expected to reduce service levels by up to **65.4 per cent**.
- **Hospitality** industry expects **30 per cent** of businesses will close permanently this year.
- The **manufacturing** sector continues to be dependent on recovery in other sectors, particularly construction. Demand is expected to be down **15 per cent** nationally.
- The COVID-19 pandemic could cut demand for **housing** in Australia by between 129,000 and 232,000 dwellings over the next three years.
- **Many small businesses** operating on extremely slim cash reserves, with funds for **three months or less**.

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Framework for National Reopening | Summary and Analysis PAGE 5

**Sticking to National Cabinet’s Three Step framework, managing health risks effectively and supporting the economy**

- National Cabinet's May 2020 3 Step Framework for a COVIDSafe Australia was based on public health advice and intended to mitigate the significant risk of COVID-19 and has informed this framework.
- There are widespread concerns from industry that inconsistencies between state/territory approaches to reopening continue to destabilise businesses and consumers.
- These sectors are crucial enablers and have economic links with other activities – restrictions impacting them will hit the supply chain downstream and upstream.
Workplaces must meet the relevant COVIDSafe planning and implementation obligations of state and territory jurisdictions. Each jurisdiction has published approaches on their respective websites for either a COVIDSafe Plan or COVID Safety Plan, noting these are functionally the same.

Generally, COVIDSafe Plans set out how workplaces are prepared to protect staff and customers to prevent infection, respond to a COVID-19 case and business recovery. Plans should address the advice of Safe Work Australia regarding identifying and controlling infection hazards, assessing and controlling risks, and case-notification steps. Work health and safety requirements depend on workplace circumstances and state and territory regulations, but should address:

- a specific COVID-19 risk assessment and implementation of measures to manage identified risks
- information on requirements for physical distancing and measures to ensure appropriate distancing
- guidance on how workers and others can maintain good hygiene in the workplace
- guidance on cleaning and disinfecting the workplace to protect workers and others from the risk of exposure to COVID-19

Industry-specific guidance that may assist with determining the risks of COVID-19 is available from Safe Work Australia. Each jurisdiction provides information on their website by industry.

Safety practices can mitigate the need for restrictions where local conditions allow.

Where risks can be managed through health and safety practices (COVIDSafe Plans), costlier action is needed less.

If state and territory health authorities judge COVIDSafe Plans not enough for certain activities, tailored ‘High Risk COVIDSafe Plan’ requirements could impose stricter standards while still allowing safe businesses open their doors.

Strong testing and contact tracing systems and outbreak management, increase our capacity to identify and handle cases of community transmission.
INDUSTRY PREPAREDNESS, RESTRICTIONS AND RISK MITIGATION ACTIVITIES FOR BUSINESS

COVIDSafe Plans

All jurisdictions have requirements for either a COVIDSafe Plan or a COVID Safety Plan for businesses. Requirements vary by jurisdiction including specific industry plans, digital registrations, templates, fact sheets or flexible to pre-defined criteria and COVID Marshals. A high level summary is provided below. The role of industry in supporting the national strategy is critical.

COVID Industry preparedness by jurisdiction

The information below summarises each jurisdiction’s approach. There are no metrics on the number of plans created/endorsed by each state/territory.

Victoria | From 13 September 2020, it is mandatory for every Victorian business to have a COVID Safe Plan. High Risk industries must create a ‘HIGH RISK COVIDSafe plan’. Link

NSW | The NSW government provides sector based guidance, including checklists, for COVID Safety Plans for business. Link

QLD | The QLD government provides approved sector based COVIDSafe Industry Plans including checklists and roadmap. Link Roadmap

ACT | The ACT government provides guidance for COVID Safety Plans for business. The ACT does not require the use of a standard template when developing a COVID Safety Plan. Link

SA | The SA government provides guidance and online submissions. Link

NT | The NT government provides guidance for COVID Safety Plans for business including checklists. Link

WA | The WA government provides guidance including sector specific information. Link

TAS | The TAS government provides guidance for COVID Safety Plans for business including checklists. Link

Businesses operating under a COVIDSafe plan should be unrestricted outside standard capacity or density caps. Activities are limited/restricted based on highest-risk and lowest economic impact, with input from evidence-based health advice and industry consultation.

Activities and venues identified in the AHPPC statement on very high risk environments may continue to be restricted or require additional safety measures including:

- night clubs
- dance venues and events
- large unstructured outdoor events, such as:
  - music festivals
  - food festivals
  - schoolies graduation festivals
  - carnivals
  - some community sporting events
  - other unticketed spectator events

Community and industry communications strategies should be developed that considers consistency with previous public messaging and includes the below considerations regarding ongoing business activity.

A staged reopening can expand the role of safety practices over time. Industry will be critical to self regulating and enforcing their COVIDSafe Plans in order to operate.

This risk-based framework is a consistent approach that can adapt to changing circumstances and tolerance for risk. As we move through the steps, COVIDSafe Plans and risk assessments can become the benchmark for activities that were previously specifically restricted. Equally, should outbreaks emerge, tailored plans or restrictions may be needed for higher-risk activities in these places.

Certain activities will continue to require targeted requirements beyond COVIDSafe Plans during this reopening phase based on assessed risk.

Freight protocol

The Freight Movement Protocol and Code should continue to apply when border controls are in place. Changes to border control measures will influence the application of the enforceable measures contained in the Freight Protocol and Code.

State and territory jurisdictions are responsible for enforcement of the measures included in the Code and are likely to reduce or remove measures when border controls are removed. While variation to the Freight Movement Protocol and Code is likely, there is an enduring role in ensuring national consistency for freight when releasing restrictions.
**PROPOSED STEPS AND TIMINGS - SUMMARY**

Regional responses that are more restrictive may apply for localised outbreaks. This framework is intended to apply only to areas that are not being treated under other conditions in response to an outbreak requiring health intervention. Health imposed restrictions will supersede any step in this framework for the defined region. **All steps are subject to change based on expert health advice.** States and territories can implement changes based on their COVID-19 conditions, however steps should be sequential.

All operating businesses must have a COVIDSafe Plan | Physical distancing at 1.5 metres | Stay at home if unwell | Effective testing and contact tracing | Frequent cleaning and disinfection | COVIDSafe Plan auditing

<table>
<thead>
<tr>
<th>STEP 1: Limiting group interactions and movement</th>
</tr>
</thead>
<tbody>
<tr>
<td>New locally acquired cases indicator on the Common Operating Picture is green for 14 days AND &lt;3 cases in either high transmission settings or hard to reach populations.</td>
</tr>
</tbody>
</table>

**Work**
- Work from home if able.

**Gatherings**
- Occupancy of venues, indoor and outdoor gatherings, and events are capacity limited to specific numbers.

**Travel**
- Free movement between areas with no community transmission of COVID-19 should be permitted.

**STEP 2: Larger gatherings, more movement**
New locally acquired cases indicator on the Common Operating Picture is green for 14 days AND no cases in either high transmission settings or hard to reach populations.

**Work**
- Work from home if and where it suits you and your employer.

**Gatherings**
- Occupancy of venues and gatherings are limited to one person per two or four square metres (as determined by the jurisdiction).

**Travel**
- Removal of domestic borders - Free movement between areas with no community transmission of COVID-19 should be permitted. Initial international student and seasonal worker pilots underway.

**STEP 3: COVID NORMAL**
All indicators on the Common Operating Picture are green for 14 days.

**Work**
- Return to your workplace (unless otherwise advised by public health advice).

**Gatherings**
- People should maintain social distancing of 1.5 metres and stay at home if unwell and get tested. Some density limits will remain for events and large venues.

**Travel**
- Interstate travel is open and there are no domestic border restrictions in place. International travel partnerships and pilot programs in place. Quarantine free international travel between New Zealand and other low risk international partners.

Step aligns with the Third Step within the Victorian Coronavirus (COVID-19) roadmap to reopening. It will currently only apply to Victoria as other jurisdictions have already progressed beyond this step. Including another step between Step 1 and 2 in this framework is at the discretion of the jurisdiction’s local health advice.

Jurisdictions who are beyond the restrictions outlined in Step 2 and have no COVID-19 cases are not expected to step back into further restrictions as a result of this framework.
## NEW 3 STEP PLAN TO SUSTAIN A COVID NORMAL AUSTRALIA

### STEPS RELY ON THE EFFECTIVE IMPLEMENTATION OF HEALTH ADVICE, LOCAL EPIDEMIOLOGICAL DATA AND INDIVIDUAL OUTBREAK MANAGEMENT AND ARE SUBJECT TO STATE AND TERRITORY COVID-19 CONDITIONS

<table>
<thead>
<tr>
<th>All operating businesses must have a COVIDSafe plan</th>
<th>Physical distancing at 1.5 metres</th>
<th>Stay at home if unwell</th>
<th>Effective testing and contact tracing</th>
<th>Frequent cleaning and disinfection</th>
</tr>
</thead>
</table>

### Gatherings and Work

<table>
<thead>
<tr>
<th>Education and Childcare</th>
<th>Retail and Sales</th>
<th>Cafes and Restaurants</th>
<th>Entertainment and Amusement Venues</th>
<th>Sport and Recreation</th>
<th>Accommodation</th>
<th>Weddings, Funerals and Religious Services</th>
<th>Hair and Beauty Services</th>
<th>Domestic Travel</th>
<th>International Travel</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childcare centres open</td>
<td>Retail stores open</td>
<td>Retail stores and shopping centres managers have COVIDSafe plans</td>
<td>Auditoriums can have gatherings of up to 10 outdoors, recording contact details. Private inspections by appointment only</td>
<td>Outdoor venues and events subject to pre-approved plans</td>
<td>Outdoor contact and non-contact sport for 18 years and under</td>
<td>Outdoor gatherings of up to 10 people</td>
<td>Outdoor contact and non-contact sport only for adults, with gathering and density limits</td>
<td>Outdoor fitness for 10 people</td>
<td>Venues record contact details of all patrons for tracing purposes</td>
</tr>
<tr>
<td>Primary and secondary schools open as per state and territory plans</td>
<td>Retail stores open</td>
<td>Retail stores and shopping centre managers have COVIDSafe plans</td>
<td>Auditoriums/open homes can have gatherings in accordance with 2 or 4 square metre rule, recording of contact details</td>
<td>Events are ticketed, venues record contact details of all patrons</td>
<td>All accommodation venues open</td>
<td>Outdoor gatherings of up to 10 people</td>
<td>Up to 5 visitors at specified accommodation in addition to normal residents</td>
<td>Venues record contact details of all patrons for tracing purposes</td>
<td>Accommodation venues record contact details of all patrons for tracing purposes</td>
</tr>
<tr>
<td>Universities/technical colleges to increase face-to-face where possible and prioritise hands-on, skills based learning</td>
<td>Retail stores open</td>
<td>Retail stores and shopping centre managers have COVIDSafe plans</td>
<td>Auditoriums/open homes can have gatherings in accordance with 2 or 4 square metre rule, recording of contact details</td>
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<td>All events and venues open</td>
<td>Outdoor gatherings of up to 10 people</td>
<td>Venues record contact details of all patrons for tracing purposes</td>
<td>Accommodation venues record contact details of all patrons for tracing purposes</td>
<td>Adheres to 2 or 4 square metre rule, stay home if unwell and get tested</td>
</tr>
<tr>
<td>Jurisdictional cap on numbers</td>
<td>Retail stores open</td>
<td>Retail stores and shopping centre managers have COVIDSafe plans</td>
<td>Auditoriums/open homes can have gatherings in accordance with 2 or 4 square metre rule, recording of contact details</td>
<td>Events are ticketed, venues record contact details of all patrons</td>
<td>All events and venues open</td>
<td>Events are ticketed, venues record contact details of all patrons</td>
<td>Events are ticketed, venues record contact details of all patrons</td>
<td>Accommodation venues record contact details of all patrons for tracing purposes</td>
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<td>Events are ticketed, venues record contact details of all patrons</td>
<td>Accommodation venues record contact details of all patrons for tracing purposes</td>
<td>Jurisdictional cap on numbers</td>
<td>Service providers closer than 1.5m wear masks.</td>
</tr>
<tr>
<td>Universities/technical colleges to increase face-to-face where possible and prioritise hands-on, skills based learning</td>
<td>Retail stores open</td>
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<td>Accommodation venues record contact details of all patrons for tracing purposes</td>
<td>Service providers closer than 1.5m wear masks.</td>
<td>Record contact details</td>
</tr>
</tbody>
</table>

### STEP 1: Limiting group interactions and movement

- **Outdoor gatherings of up to 10 people**
- **Up to 5 visitors at home in addition to normal residents**
- **Work from home if able**
- **Avoid public transport in peak hour**

### STEP 2: Larger gatherings, more movement

- **All gatherings adhere to 2 or 4 square metre rule**
- **Work from home if and where it suits you and your employer.**
- **Avoid public transport in peak hour**
- **Jurisdictional cap on numbers**

### STEP 3: COVID NORMAL

- **No restrictions on gatherings, stay 1.5m apart, stay home if unwell and get tested.**
- **Unless otherwise advised by public health advice return to your workplace.**

### Target Date: Christmas 2020
Ongoing COVID identification and management

**COVID Testing, monitoring and reporting** | information on ongoing clinical testing and clinics is available through jurisdictional websites and the Department of Health. Ongoing reporting and epidemiology form part of a suite of data to inform the national strategy.

**Wastewater testing for COVID-19** | various jurisdictions are undertaking wastewater testing, analysis and monitoring as part of a surveillance strategy, particularly for outbreaks and an early warning tool to alert communities to infections.

**Genome sequencing and tracing** | leading research institutes are undertaking genome sequencing to track COVID-19 including viral mutations and provide early warning signals of emerging strains and detection. Australia’s Medical Research Future Fund (MRFF) has provided a $3.3 million grant through UNSW Sydney’s School of Medical Sciences to establish the network.

**COVID-19 vaccine development and testing** | the Department of Health lead the COVID-19 Vaccine and Treatment Strategy which supports access to, and delivery of safe and effective COVID-19 vaccines and treatments, as soon as they are available.

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**National Review of Hotel Quarantine**

The findings from the National Review of Hotel Quarantine, led by Jane Halton AO, will be considered at National Cabinet in parallel with this framework.

All jurisdictions should consider the recommendations of the review and implement them as part of their reopening process.

**Roadmap to reactivating live performance**

The roadmap for reactivating live arts and entertainment events, under development by the Office for the Arts and Department of Health through the COVID-19 Arts and Health Advisory Committee will be provided for the consideration of the AHPPC and National Cabinet.

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**Finkel Review | Coordinating public health response**

Dr Alan Finkel AO, has been appointed to lead a review of the systems and operations in all jurisdictions to strengthen capacity and capability to effectively test, trace and isolate COVID-19.

Outputs from the review will inform a national approach to:

- Streamlining and measuring national testing, contact tracing, quarantining and isolating, and outbreak management
- Exchanging data between jurisdictions in a timely and transparent way that supports nationally supported contact tracing and outbreak management
- Enabling a national standing surge capacity
- Determine the state of preparedness for an open society and fully-active economy by Christmas.
# Common Operating Picture

The COP needs to be flexible to report the most appropriate metrics for the ‘type of epidemic of the day’.

- When cases are low in Australia, international cases and waste water testing is important.
- When cases are high in Australia, ICU and bed capacity is important.

---

## Metric

<table>
<thead>
<tr>
<th>Case Source of Acquisition</th>
<th>National</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>Qld</th>
<th>SA</th>
<th>Tas</th>
<th>Vic</th>
<th>WA</th>
</tr>
</thead>
<tbody>
<tr>
<td>New community acquired cases within state and under investigation in the past 7 days compared to week prior</td>
<td>8</td>
<td>15</td>
<td>0</td>
<td>0</td>
<td>8</td>
<td>8</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>New interstate acquired cases in the past 7 days compared to the week prior</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>New overseas/quarantine acquired cases in the past 7 days compared to the week prior (if zero, days since last case)</td>
<td>61</td>
<td>54</td>
<td>0</td>
<td>32</td>
<td>29</td>
<td>3</td>
<td>5</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td>Regional and remote cases in the past 7 days compared to the week prior</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

## Testing

| % positive in the past 7 days | 0.03% | 0.00% | 0.04% | 0.11% | 0.01% | 0.08% | 0.00% | 0.00% | 0.06% |

## Aged Care

| Mean tests per 1,000 population per day in the past 7 days | 1.5 | 1.0 | 1.8 | 1.6 | 0.7 | 1.5 | 0.8 | 2.3 | 0.7 |

## Capacity

| Average number of hours from specimen collection to notification of results | 0 (0%) | No cases | 0 (0%) | No cases | No cases | No cases | No cases | No cases | No cases |
| Average number of hours from specimen collection to notifying close contacts to quarantine | 0 (0%) | No cases | 0 (0%) | No cases | No cases | No cases | No cases | No cases | No cases |

## TIP

| Modelled state-wide transmission potential – based on current settings and behaviours | Not applicable | 1.27 | 1.12 | 1.50 | 1.20 | 1.25 | 1.22 | 0.79 | 1.37 |

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Please refer to page 2 for further details and resources.
Traffic light classification for cases

<table>
<thead>
<tr>
<th>Metric</th>
<th>Green</th>
<th>Amber</th>
<th>Red</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>New locally acquired cases per day nationally, limited geographic spread Rate ≤0.2/100,000 population per week calculated into number for each state</td>
<td>≥0.06 cases per day nationally</td>
<td>≤0.06 cases per day nationally</td>
<td>Rate &gt;0.2/100,000 population per week calculated into number for each state</td>
<td>Managing a very small number of new COVID-19 infections is possible, however as numbers increase, intervention is required to ensure new cases do not outstrip testing, tracing and health system capacity. Any new locally acquired or under investigation case is concerning</td>
</tr>
<tr>
<td>New locally acquired cases per week compared to the week prior</td>
<td>≤0.06 cases per day nationally</td>
<td>≤0.06 cases per day nationally</td>
<td>Rate &gt;0.2/100,000 population per week calculated into number for each state</td>
<td>Managing a very small number of new COVID-19 infections is possible, however as numbers increase, intervention is required to ensure new cases do not outstrip testing, tracing and health system capacity.</td>
</tr>
<tr>
<td>New overseas acquired cases per week compared to the week prior</td>
<td>Rate ≤0.04/100,000 population per week calculated into number for each state</td>
<td>Rate ≤0.04/100,000 population per week calculated into number for each state</td>
<td>Rate &gt;0.04/100,000 population per week calculated into number for each state</td>
<td>Seeding of cases is more likely with a higher rate of importation. The rate is lower than above because arrivals are in supervised quarantine.</td>
</tr>
<tr>
<td>Regional and remote cases per week compared to the week prior (Based on ABS area classification mechanism, includes very remote, remote, and outer regional postcodes)</td>
<td>Rate ≤0.04/100,000 population per week (Representing ≤10 cases nationally)</td>
<td>Rate ≤0.04/100,000 population per week (Representing ≤10 cases nationally)</td>
<td>Rate &gt;0.04/100,000 population per week (Representing &gt;10 cases nationally)</td>
<td>Threat of outbreak – outbreak is extending and covering a greater geographical area.</td>
</tr>
</tbody>
</table>

Traffic light classification for testing

<table>
<thead>
<tr>
<th>Metric</th>
<th>Green</th>
<th>Amber</th>
<th>Red</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tests (cum) in the past 7 days compared to the week prior</td>
<td>Modelling is underway to determine optimal testing rates for populations with community transmission and populations with no community transmission. Declines in testing rates (7), especially where there is no community transmission, should be interpreted with caution. Testing recommendations currently advise and prioritise testing of anyone with acute respiratory illness (ARI) symptoms; if community rates of ARI are low this will affect the number of people presenting for testing.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% positive ARI in the past 7 days</td>
<td>% positive below 0.25%</td>
<td>% positive 0.25% to 0.5%</td>
<td>% positive &gt;0.5%</td>
<td>Assuming testing rates remain high and well distributed, amber or red indicates that the incidence of COVID-19 in the community is increasing and intervention could be required.</td>
</tr>
<tr>
<td>Mean tests per 1,000 population per day in the past 7 days</td>
<td>Modelling is underway to determine optimal testing rates for populations with community transmission and populations with no community transmission.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Traffic light classification for aged care facilities

<table>
<thead>
<tr>
<th>Metric</th>
<th>Green</th>
<th>Amber</th>
<th>Red</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of cases reported in residents in RACF in the past 7 days compared to the week prior</td>
<td>No facilities with resident cases</td>
<td>The number of cases in residents is not zero. Compared to the week prior, the number of cases in residents has: increased by less than or equal to ten; or decreased by greater than or equal to ten.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of cases reported in staff in RACF in the past 7 days compared to the week prior</td>
<td>No facilities with staff cases</td>
<td>The number of cases in staff is not zero. Compared to the week prior, the number of cases in staff has: increased by less than or equal to ten; or decreased by greater than or equal to ten.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Traffic light classification for capacity

<table>
<thead>
<tr>
<th>Metric</th>
<th>Green</th>
<th>Amber</th>
<th>Red</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number and proportion of outstanding case notifications (&gt;24 hours since health department notified of positive result)</td>
<td>Zero</td>
<td>Proportion &gt;0.5%</td>
<td>Proportion &gt;0.5%</td>
<td>Rapid contact of cases enables disease control by early isolation and quarantine</td>
</tr>
<tr>
<td>Number and proportion of outstanding case interviews (&gt;24 hours since health department notified of a positive result)</td>
<td>Zero</td>
<td>Proportion &gt;0.5%</td>
<td>Proportion &gt;0.5%</td>
<td>Rapid contact of cases enables disease control by early isolation and quarantine</td>
</tr>
<tr>
<td>ICU due to COVID-19 (proportion)</td>
<td>&lt;15% of available ICU beds are COVID patients</td>
<td>15 – 29% of available ICU beds are COVID patients</td>
<td>&gt;30% ICU beds are COVID patients</td>
<td>An indicator of when surge capacity is going to be needed to support patients with COVID-19 in ICU.</td>
</tr>
</tbody>
</table>

Data sources and additional resources

The Communicable Diseases Network Australia (CDNA) and the Australian Health Protection Principal Committee (AHPPC) have informed the traffic light thresholds in the operating picture. Data are sourced from:

- the National Notifiable Diseases Surveillance System (NNDS);
- the Critical Health Resource Information System;
- aged care facility reports;
- modelling; and
- daily reports from state and territory health departments.

Most metrics use a rate or proportion rather than a raw number, to account for variability between state and territory populations. Due to the dynamic nature of jurisdictional daily reports and thus NNDS data, data in this report are subject to retrospective revision and may vary from data reported in published NNDS reports and reports of notification data by states and territories.

Additional resources