



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



HOUSE OF REPRESENTATIVES

COMMITTEES

Health and Ageing Committee

Report

SPEECH

Wednesday, 20 March 2013

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

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Date Wednesday, 20 March 2013
Page 2750
Questioner
Speaker Irons, Steve, MP

Source House
Proof No
Responder
Question No.

Mr IRONS (Swan) (12:02): by leave—This inquiry through the Standing Committee on Health and Ageing was maybe originally initiated by the level of fear within the community in regard to cross-border diseases, particularly related to asylum seekers. Obviously with that in mind the terms of reference took on board the fact that our location in the Pacific meant that we needed to look at all factors of cross-border diseases.

I would like to support the comments the chair has made and also make sure that we define what the actual terms of reference were, before the committee, before I go on to make further comment. Recognition of the need to protect Australia was the reason the committee inquired into and reported on:

... screening, surveillance and control practices for infectious diseases, with a particular focus on:

(a) screening, surveillance and control processes that are applied to:

(i) Australians travelling to and returning from overseas;

(ii) international visitors entering Australia, including asylum seekers;

(b) Australia's preparedness to respond to a national global health crisis involving the spread of infectious disease, including:

(i) how Australia's planning process compares with the World Health Organisation standards and recommendations;

(ii) how Australia plan and manages drug and vaccine stockpiles to respond epidemic or pandemic infectious disease outbreaks;

(iii) Australia's role and responsibility for coordinating with regional neighbours and other countries to prepare for and respond to the threat of epidemic or pandemic infectious disease outbreaks.

The inquiry was wide-ranging and we travelled to many parts of Australia. As we have heard, we visited Christmas Island. We saw that the Australian authorities are doing a good job on Christmas Island in regard to screening of asylum seekers. I think the area where we found we are probably lacking is that, once people are released into the community of Australia, the follow-up procedures are probably not as rigorous as what we or the community might expect.

There were 15 recommendations from the inquiry. I would just like to touch on a couple of those. Recommendation 3 was:

The Australian Department of Health and Ageing work with the states and territories to provide a uniform notifiable diseases list across Australia, with consistent reporting requirements across each state and territory and consistent public health information on infectious diseases disseminated to the public. This work should be a priority of Australian Health Ministers' Advisory Council (AHMAC).

The reason for that recommendation is that there is no national database system at the moment to enhance the collection of information and have that readily available to all relevant stakeholders and authorities across Australia. The committee saw that as a necessary recommendation. I would look forward to seeing that because I think it is a great idea that the committee has put forward.

Recommendation 4 is:

The Australian Government work with the state and territory governments to assess the viability of providing a centralised refugee and migrant health service in each state and territory, which would automatically refer people who move from immigration detention into the wider Australian community.

During the process of the inquiry, we saw that there was little interaction between the states and certain stakeholders. As we know, the health industry is siloed a lot and there is a lot of cross-referencing information that is available but not currently used.

Recommendation 6 was:

The Australian Government, coordinated by the Department of Health and Ageing and in consultation with the wider Australian community, develop a national public awareness campaign to better inform and engage the travelling public about infectious disease issues.

During the hearing we held in Cairns reference was made to my state of WA having now taken on the title of having the most cases of dengue fever diagnosed in the whole of Australia. That was probably due more to the fact that many Western Australians travel to and from Bali and Indonesia, a place where many Western Australians contract dengue fever. Queenslanders at the inquiry were quietly pleased that they had lost the mantle of No. 1 state for dengue fever diagnosis as it had passed to Western Australia. The public awareness campaign that we recommend should:

... cover the risks associated with travelling overseas, preventative measures that can be undertaken to minimise these risks, and screening measures used at the border to prevent the importation of infectious disease.

Recommendation 7 included:

Having regard to the terms of the Torres Strait Treaty, the Department of Health and Ageing, Queensland Health, AusAID and the Papua New Guinea Government:

establish a set of protocols and procedures for the identification and treatment of tuberculosis and other infectious diseases in Papua New Guinea and the Torres Strait Islands;

In an earlier inquiry held by the health and ageing committee, we visited Thursday Island and also Saibai Island. Since that time the clinic that was on Saibai Island has been closed down. During our discussions we felt that it was a necessary health-control centre for not only people travelling from PNG across to Saibai Island but also people who live on Saibai Island. The implementation of recommendation 7 is important because we recognise that there are so many stakeholders within that area and they all need to be involved in setting up a protocol process that will help protect Australia from cross-border diseases.

Recommendation 10 was:

The Australian Government, in consultation with consumers and other relevant federal, state and territory agencies, develop a national communication strategy for consumers to be used in the event of an infectious disease outbreak.

That recommendation was more based against a consumer awareness program and is one that, hopefully, the government of the day, once it has reviewed these recommendations, will take up.

The final recommendation I would like to talk about is recommendation 15, which I think both the chair and I thought was the highlight of the recommendations:

The Australian Government, in consultation with state and federal governments, commission an independent review to assess the case for establishing a national centre for communicable disease control in Australia.

The review should outline the role of a national centre and how it might be structured to build on and enhance existing systems. It should examine different models, considering a range of options for location, governance and staffing. The review should incorporate a cost-benefit analysis for each of the models presented.

The outcomes of the review should be made publicly available.

During the hearings that we held, we heard evidence from one of the witness groups that the movie *Contagion*, which I am sure many members in this place have seen, is very close to what would actually happen in a communicable infectious disease outbreak or pandemic in Australia. The witnesses told us that the makers of that movie must have got information from the CDC in the US to get the reality of that movie correct. Australians who have watched that movie might think, 'That might not happen in Australia,' but the fact is that it could happen in Australia. A pandemic infectious disease within Australia would be an economic disaster for Australia as well as a health disaster for Australia. If this recommendation could be adopted by the government, it would go a long way towards the prevention of a pandemic within Australia.

Along with the chair, I recommend the report to the House. I thank our fellow committee members, who travelled with us to the various hearings around Australia, and also the secretariat, who received so many submissions and had plenty of work to put together this report. There are some vital recommendations in the report that we need to adopt to make sure that we keep Australia safe from pandemic and cross-border diseases. Along with the chair, I again recommend the report to the House.

The DEPUTY SPEAKER (Ms K Livermore): Does the member for Shortland wish to move a motion in connection with the report to enable it to be debated on a future occasion?