Friday, 27 March 2020 12:35 PM

Premier will announce we will put all inbound passengers and take htme to hotel rooms and

required to quarantine for 14 days

Paul Eunis, taking care of logistics, cleaning, getting htem from airport to hotels When they arrive, check in, suitable, disability access, families, doubles, singles During the period they are fed, medicated if required, doctors available, clothing,

Logistical, mastermind -

Midnight Saturday night

Clarifying questions:

- International only? Of domestic too?
- Number of likely arrivals?
- How will their confi

What do we need to know before they arrive to house them

- What data is required
- What is the process for how the information will be gathered and when
- When can they provide it
- Match them instantly

Map the types of needs for

All international arrivals

Reciprocal arrangements with other states, we are looking after them

ersonal Infa and / or ADF will pick them up and get them to their airport

I will responsible for the whole process

Everything

Sanitation, food services, health care, security

They need to be safe, but we need them to stay where they are

Simon will call Graeme Ashton, need a regime that makes sure they adhere to their quarantine

Whole program

Avalon is over

in the first instance this will be metropolitan, later we can place them closer to home

Concentrate the effort to increase the ease of service provision

Major hotels that can give up their entire premises, rooms of more than 100

CBD 6970 rooms

Metro 1697

Some have disability access

The moment the announcement happens go and get the rooms

Buy more rooms than we need.

What's the minimum viable prodcut tha

Dot point on plan of attack

Overshoot the target Connect with Jerone The logistics of room matching The hotels themselves should provide everything that they need Medical, food, sanitation If any need additional services Would like the hotel to provide everything Full suite of service That may change the rack rate People picking up supplies Personal Infort's airport, working on forward projections Simon will get from the Premier's DHHS - Breadon Hogan, (relief, Red Cross) Emergency management -Personal Information combined agency group PPE for drivers Premier is announcing at 3pm Mandatory from midnight Saturday But if people have an urgent need can stand up a service before then They can contact a number and tell us what Can he say at 3pm that people that are arriving earlier can be accommodated Want a regional People can choose: Bendigo, Geelong, ballart and one in the south east Or Melbourne Overflow option(Geelong, Jorquay, Aitken Hill, Marysville (whole hotels) People at the airport immediately with information If you Until Saturday night midnight they can g Budget issue, then put it in the document, ask From 6pm Midnight tomorrow, quarantining all arrivals in hotels, for the two weeks of their mandatory isolation They will be quarantined where they arrive, not in their home state CTM Travel (accommodation options if not already tapped into) Police - (Personal Information

- Post customs to buses, then the checking in process fits within the remit of Victoria Police and their taskforce,
- Securing the hotel venue so that people can't leave it

Transport

Who is going to be the key contact for the hotel allocation information

- Matching of people to rooms
- Skybus

Part of the critical response team

- Broder force
- Concierge
- Qantas person, matching people to hotel
- Skybus (or DOT)

Make it as simple as possible, while we iron out the bugs, they're having to change all processes at the airport

Get through the first 48-72 hours and then easier when we're in the routine

New team that is being stood up

Any passengers coming off the plane -

As each plane load comes in, they will be moved to a separate area, not mingling between different areas, put through manual customs process, not automated, taken downstairs, go to a check desk, todl

Ambulance at the airport

Quarantined in an appropriate hotel, in the suburbs, where possible regional hotels Fuller briefing tomorrow morning

- planning, steps,
- All of our hotels are

Who will pick them up

Will there be exemptions

Under the directions of the CHO, legal document

We need to connect with Personal Information, at DHHS, in the CHO, to understand

What directions will people be detained and transported under, that will help us understand what the security contact will look like

Will require an authorised officer will need to be involved in requiring compliance including bio secruity

Police and security

SCC

- Provide information to the airport making clear that transport

Direction under the health and wellbeing act (TBC) or the Commonwealth quarantine legislation

	Flight crew are exempt
	Melbourne airport
	- 100% of passengers will have a health checked
	To a mathematical and a second
	- Iwo pathways Screened out, taken to the hospital Some will have exemptions, they will be screened out pre-flight The rest will be enter the baggage area, take luggage, marshalled to a specific point where the hotel details will be sorted out Two questions will be asked - Are you aware that you need to - Do you have somewhere to self isolate ABF will need to pass people to Vic Pol Three flights coming tonight 6.15, 8.30, 10.30 We need
	Companyill have a companying a thoroughly be accompanyed out one flight
	Some will have exemptions, they will be screened out pre-fligth
	The rest will be enter the baggage area, take luggage, marshalled to a specific point
	where the hotel details will be sorted out
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	16 DE
	Two questions will be asked
	- Are you aware that you need to
	- Do you have somewhere to self isolate
	- Do you have somewhere to sen isolate
	ABF will need to pass people to Vic Pol
	Three flights coming tonight
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Claire and Unni – Skype – at the airport

Friday, 27 March 2020 1:06 P

Claire and unni - skype

New taskforce - enforced quarantining. Personal Informativill announce Mid Sat - states will quarantine all international arrivals. ADF will do logistics. Personal Info

Unni to find metro hotels - want every room. Unni has 6975 rooms, 1697 rooms in metro. Some have disability.

All international arrivals - including Australians.

Claire will be responsible for the DJPR process. hotels to provide sanitation, health, security, catering. Medical support, concierge support. They need to provide a full suite of service. They cannot go out and wander. SP to call Graham Ashton. Need to ensure they abide by their quarantine.

Simon to call Personal In- we're doing 1500 hotels.

SP to get report contacts - work with the system - point person reports to claire. Work on system for advance notification of

SP to get start date from PPO.

Unni 30 day advance purchase of 1300 immediately SP to get the start date.



Extraction Report



Participants





U010NLATB7T

Conversation - Instant Messages (624)



UGGTM4ZJ4 Personal Information Any update on Personal Inf mobilising workforce? Will they be at airport in person? (edited) 27/03/2020 3:40:43 PM(UTC+11) UGGTM4ZJ4 Personal Information And <@claire.febey674>, are you speaking with DHHS? Can they play case manager role? 27/03/2020 3:41:33 PM(UTC+11) Let's stand up support for them through Beyond Blue and EAP 27/03/2020 3:41:59 PM(UTC+11) UG2SCAD8E claire.febey674 Dedicated lines for these people over next 3-4 weeks. Lifeline, Beyond Blue, EAP UG2SCAD8E claire.febey674 Let's get priority access line establihsed. UG2SCAD8E claire.febey674 In the information they get when they arrive we need to give them these numbers and the covid hotline we will need scripts for the call centre about quarantine UGGTM4ZJ4 Personal Information Ok will get Comms on scripts and will call Personal Information to EAP etc. 27/03/2020 3:45:54 PM(UTC+11) UCMB3A4GZ Personal Information Hey Personal Info when you've got a moment can you add us back onto a call? We can't call you on do not disturb 27/03/2020 3:49:46 PM(UTC+11) UG2SCAD8E claire.febey674 Personal Informa · can you please also commission an information pack from

UG2SCAD8E claire.febey674 This is something that we provide to the airport (or hotel might be better) to give to every person when they arrive. It should include basic information about what is happening and why, how they'll be supported, where they can call to access help and support, and what to do if they or a family member show symptoms / get sick. 27/03/2020 3:53:32 PM(UTC+11) Team, what is Personal Information
<@UGGTM4ZJ4> <@UQCUG6FTJ> UGGTM4ZJ4 Personal Inf 27/03/2020 3:55:06 PM(UTC+11) UG2SCAD8E claire.febey674 UGGTM4ZJ4 Personal Information Ok Personal Informa team calling EAP to set up a line, as well as triage process between EAP/Beyond Blue and Lifeline. All this will be referred on by coronavirus DHHshotline. 27/03/2020 4:02:37 PM(UTC+11) UGGTM4ZJ4 Personal Informa A 4:02:41

A 5:02:41

A 6:02:41

A 7:02:41

A 7:02:41 *DHHS hotline 27/03/2020 4:02:41 PM(UTC+11) UG2SCAD8E claire.febey674 The order will cover ships and private flights. 27/03/2020 4:06:12 PM(UTC+11) UGGTM4ZJ4 Personal Informatio From Personal Info we have a lead contact from Melbourne Airport and Qantas who will help coordinate on the ground. They need to know who VicGov contacts are for airport presence, transport and hotels. So we can give them Personal Information and Unni's details. UGGTM4ZJ4 Personal Information We also need a letter from Vic to Border Force to get access to passenger manifests 27/03/2020 4:10:28 PM(UTC+11)

UGGTM4ZJ4 | Personal Information Personal Inf is drafting letter, but not sure who this needs to be from. Asking SCC now. 27/03/2020 4:10:45 PM(UTC+11) We will likely need:
Private security on buses (TBC)
Additional security at hotels (please raise with Unni that we require this as part of full Police on call to enforce where there is non compliance Authorized officers (health system) to direct security. 27/03/2020 4:18:57 PM(UTC+11) UG2SCAD8E claire febey674 We will get more information on the scc call UGGTM4ZJ4 Personal Information <@claire.febey674> Ports website shows nothing coming in until May. Trying to find contact to confirm 27/03/2020 4:21:50 PM(UTC+11) UGGTM4ZJ4 Personal Information <@claire.febey674> Anything you need to prep for SCC call 27/03/2020 4:23:45 PM(UTC+11) -ONTINE COPY TO PHER PURPOR. I.S. P. O. P. P. I.S. P. O. P. P. I.S. P. O. P. I.S. P. O. P. I.S. P. O. P. I.S. P. I.S UG2SCAD8E claire.febey674 all good <@Personal Information > can you please mute and take she bells yo Simon said we can engage BCG as surge support if that would help. 27/03/2020 4:30:23 PM(UTC+11) Personal Informatics <@UGMB3A4GZ> can one of you pls lead on answers to the DPC amp;A and figure out what their timing is and let me knwo UQCUG6FTJ Can do Claire 27/03/2020 4:31:53 PM(UTC+11)

SWITH STANDING LEAVE ONLY WAL.

UQCUG6FTJ Personal Info

Update on other things: (1) DHHS will send through numbers for Beyond Blue and Lifeline. Personal Informas spoken with EAP

27/03/2020 4:33:50 PM(UTC+11)

UGGTM4ZJ4 | Personal Information

EAP: we can surge them to do welfare checks over the 14 days. They can also take in calls from people via coronavirus hotline, but depends on volume. If too much, divert to beyond

27/03/2020 4:34:42 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Corporate is working out contract now

27/03/2020 4:34:50 PM(UTC+11)

UQCUG6FTJ Personal Informati

I have spoken to someone at the DHHS COVID hotline, 've let them know that we will be feeding some scripts to them shortly.

Personal Information

Indicative passenger numbers from melb airport thru Persona: Only 8-10 flights expected over the weekend, with 90-100 passengers per flight

27/03/2020 4:35:46 PM(UTC+11)

UGMB3A4GZ Personal Information

Airport has asked if Red Cross can do concierge service as they are experienced in disaster management

27/03/2020 4:36:32 PM(UTC+11)

UGGTM4ZJ4 Personal Information

oh that's good

27/03/2020 4:36:37 PM(UTC+11)

UGMB3A4GZ Personal Information

Once passengers come in, border force will triage them and undertake health checks. They will then be separated into groups, with unhealthy people going to hospital/doctors. Other passengers will go through a manual customs process, taken to get bags in the standard process, then taken to a desk where they will be allocated a hotel and ushered onto buses.

27/03/2020 4:38:29 PM(UTC+11)

UGGTM4ZJ4 Personal Information

<@claire.febey674> No flights at Avalon, but need to check private flights. Nothing coming through on ports.

27/03/2020 4:39:04 PM(UTC+11)

UGMB3A4GZ Personal Information Still trying to get through to cathy on private flights 27/03/2020 4:39:30 PM(UTC+11) UGGTM4ZJ4 Personal Information Need to also get letter to Border FOrce to get passenger manifest. Need VIctoria to write perhaps SCC 27/03/2020 4:40:01 PM(UTC+11) UGMB3A4GZ Personal Information Personal in is getting back to me with border force contact, I can then get info on him on who the request needs to come from/what it includes 27/03/2020 4:40:38 PM(UTC+11) UG2SCAD8E Personal Information So you want me to request that SCC write to Border Force requesting the manifest, which will tell us how many people what flights? UGMB3A4GZ Personal Information Letter will need to specify concierge service will have access to manifest 27/03/2020 4:41:08 PM(UTC+11) UGGTM4ZJ4 Personal Information We not sure who needs to write this. Open question, But that is the advice from Melbourne Airport. They can't share without Border Force CONTROL SERVES HE RICHTS TO PAIL TO PA 27/03/2020 4:41:24 PM(UTC+11) UG2SCAD8E Personal Information can you capture actions pls 27/03/2020 4:42:01 PM(UTC+11) UG2SCAD8E Personal Information UG2SCAD8E Personal Information We will need governance on project and information sharing 27/03/2020 4:43:52 PM(UTC+11) UG2SCAD8E Personal Information Rob Holland will help us set up the reporting



UGGTM4ZJ4 Personal Information To her 3 questions: assume yes 2. need to make sure only one set of comms. Claire will be calling Personal Info 3. Ph number is coronavirus hotline - are we giving them the scripts? 27/03/2020 5:07:45 PM(UTC+11) UGGTM4ZJ4 Personal Information there are passengers on the ships? I must have bad info from Ports. 27/03/2020 5:10:39 PM(UTC+11) UQCUG6FTJ Personal Inform Thanks Personal Infor 27/03/2020 5:10:43 PM(UTC+11) UG2SCAD8E claire.febey674 Personal Information UQCUG6FTJ Personal Inform Claire - will you be available for a call with Border Force Melbourne airport at 5:30? 27/03/2020 5:13:00 PM(UTC+11) UG2SCAD8E claire.febey674 Personal Information 27/03/2020 5:14:40 PM(UTC+11) UGMB3A4GZ Personal Inf No information on number of crew members on the 2 cruise ships, just they want to refuel, restock and change crew - coming from border force 27/03/2020 5:16:07 PM(UTC+11) UGMB3A4GZ Personal Information Personal Information ports probably didn't count them because they're not 27/03/2020 5:16:43 PM(UTC+11) Thank you. While we finish this call and join the adf one, i need someone to run point on immediate tasks / deliverables, and someone to form the team.

9

27/03/2020 5:16:46 PM(UTC+11)

we need to move quickly to mobilise other people around us to break up the streams for action tonight /tomorrow UQCUG6FTJ Personal Informati I can run point on the tasks that I am aware of.<@Personal Information will you be able to join 27/03/2020 5:18:19 PM(UTC+11) UGGTM4ZJ4 Personal Informatio Yeah there are a few coming out from SCC call. Personal Info already 27/03/2020 5:18:41 PM(UTC+11) I thnk Personal Int is on next call with me, so rob why con't you run point on tasks and Personal Info stand up team UGMB3A4GZ Personal Information Personal Inf has organised four people to help us, including Personal Information and Personal Informat from global vi from precincts UGGTM4ZJ4 Personal Inform Okay I'll relay my points to 27/03/2020 5:19:09 PM(UTC+11) UGMB3A4GZ Personal Information He wants t know how many people you need? 27/03/2020 5:19:12 PM(UTC+11) or flip. you guys decide what is best. UOCUG6FTJ Personal Inform <@ Personal Information give me a call when you are done 27/03/2020 5:23:34 PM(UTC+11) UGMB3A4GZ Personal Information Possibly 10 and 13 crew members on the two ships 27/03/2020 5:23:56 PM(UTC+11)

UGGTM4ZJ4 Personal Information <@claire.febey674> We referred to reception plan before - is this reception at airport, or at hotel? 27/03/2020 5:25:37 PM(UTC+11) UG2SCAD8E claire.febey674 that was for hotel arrival but we really need a plan for each step 27/03/2020 5:25:58 PM(UTC+11) UGMB3A4GZ Personal Information <@ Personal Information > Doug just texted- unni has asked him to be contact point for arrivals to allocate to hotels, he wants to know if we want him to do that role, can you touch base with Personal and work this into your team stand up 27/03/2020 5:27:19 PM(UTC+11) UGGTM4ZJ4 Personal Information Actions from SCC call

Personal Ir — are there cruise ships

Claire — confirm Avalon closed and location of private flights cargo ships - are they in scope?

- coordinate information on passenger details as central repository – and via critical response team at Melbourne Airport who collates, owns and shares – to be worked out

Personal Inform / Claire – psychological first aid providers in DHHS, we need to check overlap with EAP Claire – what is involvement of AFP at airport(2) SCC - putting together broader plan Claire – need a plan for each stage of DJRR involvement and intersection with others 27/03/2020 5:32:00 PM(UTC+11) UGGTM4ZJ4 Personal Informatio <@claire.febey674> Is the ground at airport? still putting together a workforce? Were they meant to be on 27/03/2020 5:33:11 PM(UTC+11) UG2SCAD8E claire.febey674 pls invite <@cameron.nolan> to our meeting about team / next steps UF277RHM0 cameron.nolan <@cameron.nolan> has joined the group 27/03/2020 5:33:39 PM(UTC+11) UG2SCAD8E claire.febey674 <@ Personal Information > can you pls call Personal Information

27/03/2020 5:33:52 PM(UTC+11)



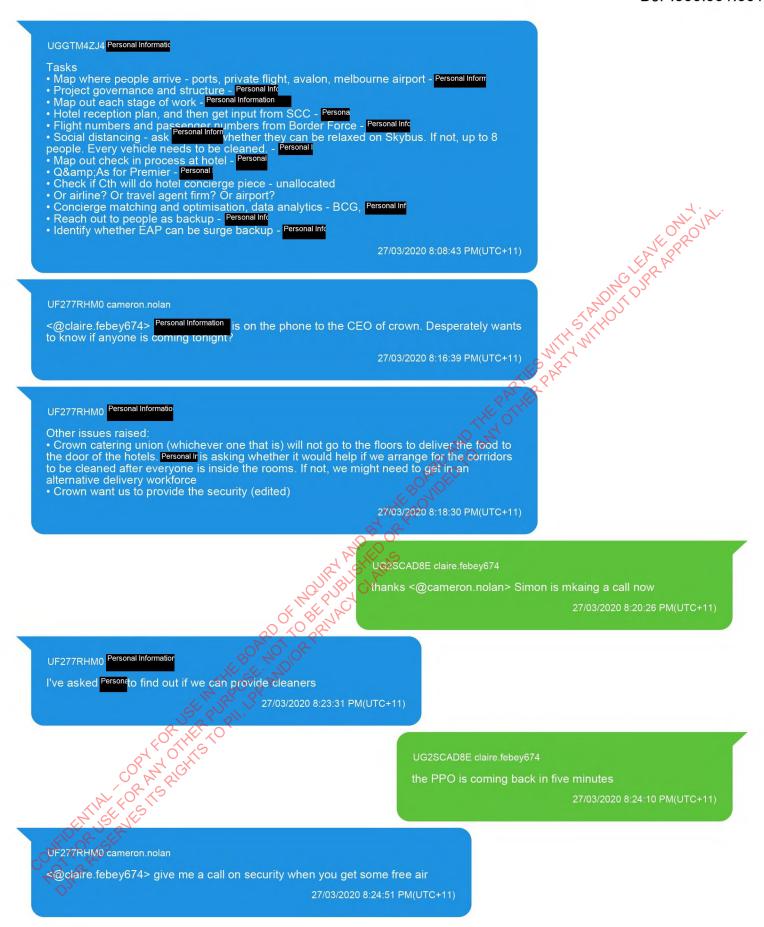
UQCUG6FTJ Personal Information I'm free 27/03/2020 5:40:41 PM(UTC+11) <@Personal Information /> if we provide information on stock (in an up to date and dynamic way) can the matching be done by the airport / airline 27/03/2020 5:42:56 PM(UTC+11) I think this is a critical gap, and i'm not confident that Unni will deliver what we need. 27/03/2020 5:43:13 PM(UTC+11) UG2SCAD8E claire.febey674 Could CMT, the government travel booker do this? 27/03/2020 5:43:23 PM(UTC+11) Perhaps get as much information as you can on what they can do at Mebourne airport and how it interacts with the sky bus offening, then we can understand and address the gap. For tonight it is optional 27/03/2020 5:44:54 PM(UTC+11) UG2SCAD8E claire.febey674 UG2SCAD8E claire.febey674 given flight arriving in 30 minutes are we happy with it? 27/03/2020 5:46:22 PM(UTC+11) UGMB3A4GZ Personal Information <@Personal Information > if the point person/number issues have been resolved 27/03/2020 5:46:59 PM(UTC+11)



I'm going to be on this call for some time. It's very detailed but important. <@Personal Informed <@UGGTM4ZJ4> can you please convene a meeting with core and team members we want to grab for 6.30pm

27/03/2020 6:20:34 PM(UTC+11)

Let's get the BCG PM or whoever Personal Inforcement on the call. UGGTM4ZJ4 Personal Informat How many other people do we need from the longer list of DJPR people? I've only spoken to Persona so far 27/03/2020 6:21:44 PM(UTC+11) UGGTM4ZJ4 Personal Informati Just been dealing with a few other things 27/03/2020 6:22:23 PM(UTC+11) UG2SCAD8E claire.febey674 <@ Personal Information can you capture all final details and questions / actions from this 27/03/2020 6:24:37 PM(UTC+11) UQCUG6FTJ Personal Information also just on a call 27/03/2020 6:25:59 PM(UTC+11) UGMB3A4GZ Personal Information I'm out of the call 27/03/2020 6:33:47 PM(UTC+11) UGGTM4ZJ4 Personal Information see skype call invite 27/03/2020 6:34:11 PM(UTC+11) UGGTM4ZJ4 Personal Informati we're in there now 27/03/2020 6:34:15 PM(UTC+11) UGMB3A4GZ Personal Information Personal Informa Passenger numbers: they don't know until people get on the plane, but approx 1,000 tomorrow and 1,000-1,500 on Sunday 27/03/2020 7:31:53 PM(UTC+11)



UGMB3A4GZ Personal Information

Hi all, (esp <@Personal Informate and <@UF277RHM0>) called Personal Information on the ADF role question after the Q&,A confusion - ABC has published ADF will nave a role nationally, but Personal advised this may not apply in a Victorian context, as ADF presence here is more made up of logisticians than infantry men that would be suitable for security processes, which would explain why as a state we would rely more on Vic Pol and private security.

Personal is making some calls to see if anyone has heard anything more definitive and if we can confirm.

27/03/2020 8:29:00 PM(UTC+11)

UG2SCAD8E claire.febey674

Ok i'm off call, who is it most urgent that i speak with first? I think <@ Personal Information and then <@UF277RHM0> but let me know. Just getting glass of water.

27/03/2020 8:37:28 PM(UTC+11)

UF277RHM0 Personal Information

One sip only!

27/03/2020 8:37:55 PM(UTC+11)

UGMB3A4GZ Personal Information

<@|Personal Informa Personal Informal
<@UF277RHM0> Apparently on 4:30pm telecon with Personal Information
Assistant Commissioner Personal Information said there would be no boots on ground ADF support in Victoria. They are happy to accept ADF's assistance in terms of advice and logistics, but want to avoid military presence except in the case of a terrorist threat and would prefer to rely on VicPol. COP ANY OF THE PURPLE TO PILL TO PILL

27/03/2020 8:39:14 PM(UTC+11)

Personal lis still chasing answer on voluntary

27/03/2020 8:39:26 PM(UTC+11)

UG2SCAD8E claire.febey674

he will call ppo again if nothing back in five

UF277RHM0 Personal Information

Does anyone know anything about the DHHS authorised officers? Like how many there are and what roles that are performing? Are there heaps out in the field telling people what to do? Or are they sitting in the SCC but not actually out in public? Cause if they're a whole army we'll want them at the airport by coline the whole operation (i.e. the buffer between police and the concierge nice people). (edited)

27/03/2020 8:39:46 PM(UTC+11)

UF277RHM0 Personal Information

Just to foreshadow that if voluntary tonight becomes an option, we shouldn't tell them it's

27/03/2020 8:41:12 PM(UTC+11)

UF277RHM0 Personal Information Alex says he can get as many cleaners as we need by tomorrow night 27/03/2020 8:55:24 PM(UTC+11) UQCUG6FTJ Personal Inform I'll call DHS about this now SWITH STANDING LEAVE ONLY VIAL. 27/03/2020 9:00:28 PM(UTC+11) UQCUG6FTJ Personal Inform I need to talk to Personal Info about the PPO questions so I'll tack this question on to that call 27/03/2020 9:01:56 PM(UTC+11) UQCUG6FTJ Personal Inform There is a limited number of authorised officers, but they are looking to delegate that to Vicotira Police so they can issue infringements on their behalf. They will be out and about with VicPol. 27/03/2020 9:08:30 PM(UTC+11) UQCUG6FTJ Personal Inform As for the airport - there may be AOs on standby to issue notices/infringements 27/03/2020 9:08:59 FM(UTC+11) UG2SCAD8E claire.febey674 Everyone - there will be no voluntary quarantine through this program. Everything starts from 11.59PM tomorrow night UG2SCAD8E claire.febey674 Team, who is working on the next round of Q& As for DPC / PPO? 27/03/2020 9:12:04 PM(UTC+11) Is is you <@|Personal Information DOCUGERT | Personal Inform ram working on it with assistance from <@ Personal Information 27/03/2020 9:15:58 PM(UTC+11)

How can i help? UQCUG6FTJ Personal Informat <@claire.febey674> I will need to run it by you 27/03/2020 9:16:23 PM(UTC+11) UQCUG6FTJ Personal Inform We don't have definitive answers to these so will need to be vague 27/03/2020 9:16:37 PM(UTC+11) UQCUG6FTJ Personal Inform <@claire.febey674> we need to speak to you about the Q&As 27/03/2020 9:21:38 PM(UTC+11) UF277RHM0 Personal Information FYI Person is speaking to Personal In and Personal Information about using labour hire to get security guards. Thinking one per floor. But they have to get trained in COVID and inducted by the hotel UG2SCAD8E claire.febey674 Team - Message from PRO, they send their thanks. They asked to pass on their gratitude for your dedication and hard work to turn this around so quickly. 27/03/2020 9:59:23 PM(UTC+11) You're doing an amazing job team - thank you so much. 27/03/2020 9:59:40 PM(UTC+11) UGMB3A4GZ Personal Information Hi all, I am logging off. If there's anything else I'm needed for please text me, otherwise I will be back online tomorrow morning. 27/03/2020 10:07:39 PM(UTC+11) UG2SCAD8E claire.febey674 Thanks so much <@ Personal Information Nothing from me.



are ready 28/03/2020 8:26:43 AM(UTC+11) UGMB3A4GZ Personal Information ARD AND ANY OFFILE PARTY WITHOUT DIPR APPROVAL On concierge: Melbourne Airport has 300 staff (not clear if post-letting people go), mostly contract managers, lawyers etc. All on the ground services are contracted, e.g. Border force, private security. They have said outright they will not do the concierge piece and a service will need to be contracted. <@Personal Information > would be good to consider and test the Red Cross option 28/03/2020 9:25:57 AM(UTC+11) UF277RHM0 Personal Information <@release

Personal Information could you get BCG and Cathy to give a quick estimate of how many hotel floors we will have - a running total for each day? That will inform how many security guards we should be contracting 28/03/2020 9:30:06 AM(UTC+11) UF277RHM0 Personal Informatio Looking for best estimate not precise figures UGGTM4ZJ4 Personal Informa <@ Personal Information |> I've reached out to <@UP7D1BN7M> to get in touch with the team, and to be the lead with you. 28/03/2020 9:34:27 AM(UTC+11) UQCUG6FTJ Personal Infor <@ Personal Information > <@UGGTM4ZJ4> do we have contacts at the hotels? And do we know which hotels we will be using after Crown reaches capacity? 28/03/2020 9:36:40 AM(UTC+11) UGGTM4ZJ4 |Personal Informal Unni had a list last night, which he then retracted 28/03/2020 9:37:06 AM(UTC+11) UQCUG6FTJ Personal Inform Afright dowe have a contact at Crown then? UGGTM4ZJ4 Personal Informati <@ Personal Information > has a crown contact? I;II also check in with Unni 28/03/2020 9:43:03 AM(UTC+11)

UG2SCAD8E claire.febey674

<@ Personal Information > we can't dial you in - it says you are in a call. Let me know when you

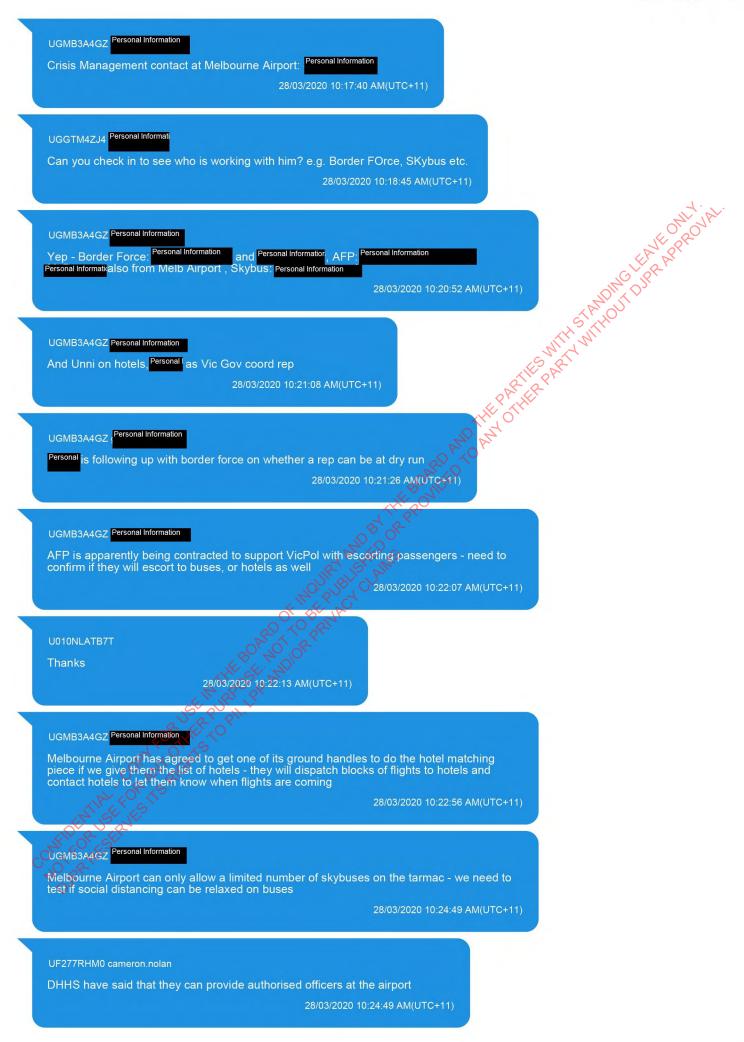
UGGTM4ZJ4 Personal Informat Personal Informa, <@UGMB3A4GZ> Some people from your teams are being reallocated to assist with the dry run. Personal Informatio will lead and map out this process at the airport through to hotel. Once Personal agame plan, I will share and we can link into his work. 28/03/2020 9:44:32 AM(UTC+11) UGMB3A4GZ Personal Information AND THE PARTIES WITH STANDING LEAVE ONLY VAL. Thanks <@ Personal Information > I've indicatively scheduled a catch up with our team at 10AM, should I flag this with them then or hold tight? 28/03/2020 9:45:34 AM(UTC+11) UGGTM4ZJ4 Personal Information Yes, flag with them. They can still be a connecting point into your work, as any process they work out with Perso's work will drive what you do as well. 28/03/2020 9:46:23 AM(UTC+11) UGGTM4ZJ4 Personal Informa > <@UGMB3A4GZ> Thread for SCC call. 28/03/2020 9:50:38 AM(UTC+11) UGGTM4ZJ4 Personal Informa Issues to resolve: We need passenger manifest data. Need to know family composition, number of children What confidentiality issues need to be resolved? Will passengers be informed about this quarantine process at point of departure? What is the chain of custody? Who is the authorised officer at each step? Role of ADF? Aside: we have to work out who will be the non-authorised officer staff to be the friendly faces upon passenger arrival (conceierge arrival team) How do we get PPE for hotel staff and concierge arrival team? 28/03/2020 9:50:55 AM(UTC+11) UGMB3A4GZ Personal Information Appears no private flights scheduled but Melbourne Airport is confirming with Melb Jet Base will message here if we get an update. 28/03/2020 9:52:00 AM(UTC+11) UGGTM4ZJ4 (Personal Informati Provide information back Avalon closed Other private airports - < Personal Information > to Cargo ships - < UF277RHM0> to get answer Hotel reception plan - underway > to get answer 28/03/2020 9:52:27 AM(UTC+11)

UGGTM4ZJ4 Personal Informatio

<@cameron.nolan> can you please authorise access to BCG for this channel. YOu should have got an email

28/03/2020 9:56:02 AM(UTC+11)





UGGTM4ZJ4 Personal Informati Personal Inform from DHHS has advised can have bus at half capacity 28/03/2020 10:25:23 AM(UTC+11) UGMB3A4GZ Personal Information BY THE BOARD AND THE PARTIES WITH STANDING LEAVE APPROVIDED TO ANY OTHER PARTIES PARTY WITHOUT DIPPER APPROVIDED TO ANY OTHER PARTY WITHOUT DIPPER APPROVING THE PARTY WITHOUT DIP Do we know how many people that is indicatively or do we need to check with 28/03/2020 10:26:25 AM(UTC+11) UF277RHM0 Personal Information Hotels need to be close as possible to testing centres 28/03/2020 10:39:11 AM(UTC+11) UQCUG6FTJ Personal Info Does anyone have a number for Personal Information 28/03/2020 10:39:46 AM(UTC+11) UGGTM4ZJ4 Personal Informati Check in with Personal Information on this. 28/03/2020 10:40:01 AM(UTC+11) UGGTM4ZJ4 Personal Informatio Personal Information 28/03/2020 10:40:47 AM(UTC+11) UGGTM4ZJ4 Personal Informati SCC call actions Action: Get info from Border Force re passengers via airport crisis mgmt team
Action: relay back who is on Airport crisis mgmt team
Action: share back the dry run plan into SCC • Action: other leads send through info requirements on passenger details. DJPR to put together questionnaire Action: schedule and run meeting with other groups and crisis mgmt team on dry run U010M8GBP4K Looks like we are all on slack now 28/03/2020 10:49:07 AM(UTC+11) <@ Personal Information can you give me a call, may have an option with Jetstar / Qantas to provide support. 28/03/2020 10:52:14 AM(UTC+11)

UGMB3A4GZ Personal Information <@cameron.nolan> the telecon we are having this morning at 11:30 with melb airport will include VicPol and AFP - do you want to be included from a security perspective? UF277RHM0 cameron.nolan THE BOARD AND THE PARTIES WITH STANDING LAND AND TH 28/03/2020 10:55:52 AM(UTC+11) That spreadsheet of hotels says that Crown don't need security - this is wrong 28/03/2020 10:57:33 AM(UTC+11) UGGTM4ZJ4Personal Information <@Personal Information > see above, points 1,2,4 relate to you 28/03/2020 11:00:49 AM(UTC+11) UGGTM4ZJ4 Personal Information Personal Inwill assist Unni - not able to do dry run UGGTM4ZJ4 Personal Information reallocated back to Personal Ir UF277RHM0 Personal Information we need DHHS on that call to confirm how many authorised officers < @ Personal Information will be provided on the ground throughout the process 28/03/2020 11:02:37 AM(UTC+11) UF277RHM0 Personal Informatio <@U010NLATB77> My reading of this is that they can leave the hotel?! What do you think? must not leave the place, except: for the purposes of attending a medical facility to receive medical care; (ii) in any emergency situation; or in circumstances where: the person proceeds directly to exit the designated premises; and does not enter any other building; and upon returning to designated premises, proceeds directly to the place; and (D) at all times when the person is outside the place, takes all reasonable steps to avoid coming within 1.5 metres of another person. 28/03/2020 11:04:48 AM(UTC+11) UF277RHM0 cameron.nolan Nurses take temperature at the aiport 28/03/2020 11:05:32 AM(UTC+11)

UF277RHM0 Private security guards shouldn't be taking temperatures UG2SCAD8E claire.febey674 WITC+11)

A THE BOARD AND ANY OF HER PARTY WITHOUT DIPLATED TO ANY OF HER PARTY OF Can we have Personal Information and Personal Information from Vic Pol U010NLATB7T It sounds like they can leave the hotel as long as they stay outdoors and within 1.5 metres of other people at all times U010NLATB7T so they can't leave and go home to pick up something for example or enter a shop 28/03/2020 11:08:26 AM(UTC+11) UF277RHM0 cameron.nolan Eight authorised officers in DHHS 28/03/2020 11:10:02 AM(UTC+11) UF277RHM0 cameron.nolan Maybe one VicPol in foyer 28/03/2020 11:10:47 AM(UTC+11) If they can go outside, Security may need to put in place some kind of sign in and out system to keep track 28/03/2020 11:12:42 AM(UTC+11) UGMB3A4GZ Personal Information <@cameron.nolan> any contacts for dhhs to invite? 28/03/2020 11:13:36 AM(UTC+11) UGGTM4ZJ4 Personal Information Personal Information Hey Personal II, can we get estimate on how many hotel floors we will have a running total for each day? Need to help Cam work out how many security guards we need. 28/03/2020 11:14:26 AM(UTC+11) Good point - can you add that to the list of responsibilities?,

U010NLATB7T

will do

28/03/2020 11:22:58 AM(UTC+11)

U010YNB5V24

<@U010YNB5LRW> and I will build into the model / data base. How soon do you need this?

28/03/2020 11:30:14 AM(UTC+11)

U010M8GBP4K

PARTIES WITH STANDING LEAVE ONLY VIAL. Will this be each day over coming weeks? I think we will pretty quickly need estimates of incoming passengers beyond Sunday is we don't have them

UGGTM4ZJ4 Personal Information

We will need numbers for next 1-2 days asap to inform what security staff we need

28/03/2020 11:33:50 AM(UTC+11)

U010M8GBP4K

For Sunday, if we need to use Crown first then all passengers should fit in Crown (700 rooms) and there are 51 floors across the two hotels. So 1 per floor would mean 51 at a time, potentially 153 if you need to split across 3 shifts

28/03/2020 11:35:05 AM(UTC+11)

UQCUG6FTJ Personal Inform

Personal Information > <@UF277RHM0> From our first discussion with Crown, their main question is: what time will guests be arriving? Are we able to arrange for this information to

28/03/2020 11:40:20 AM(UTC+11)

> was DHHS invited and can we get them on the call if not

UGMB3A4GZ Personal Information

They were, but I haven't heard them on the call - we only got the contact quite late

28/03/2020 11:54:53 AM(UTC+11)

UGMB3A4GZ Personal Information

Personal Information

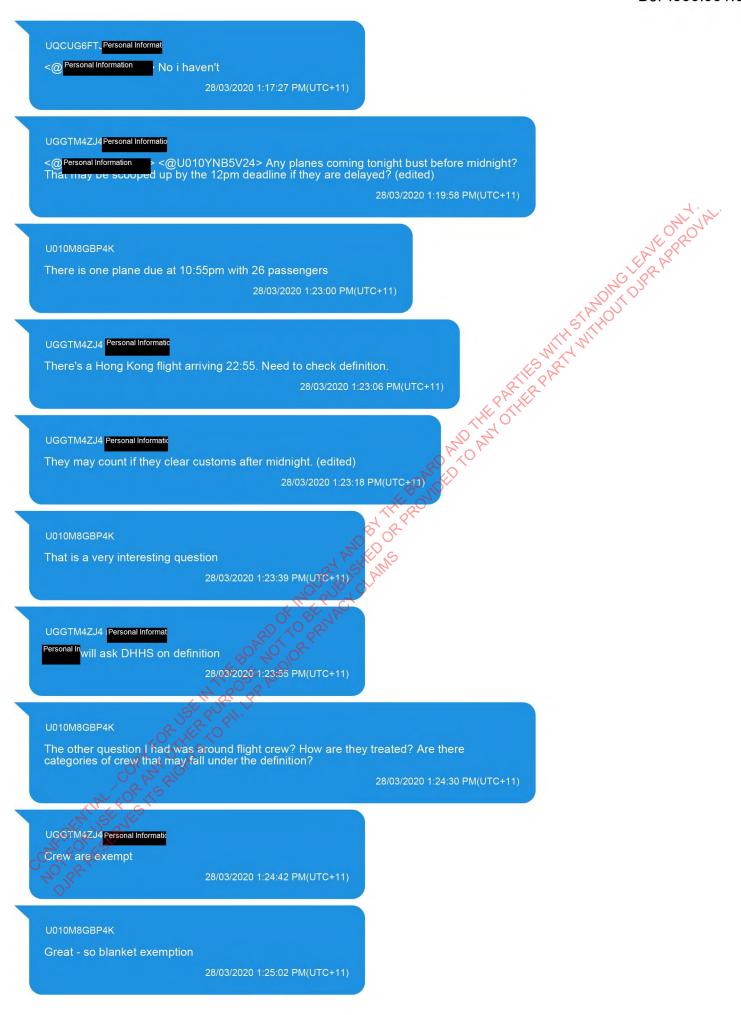
28/03/2020 11:54:58 AM(UTC+11)

UF277RHM0 Personal Information

Q Personal Information did I hear that VICPOL will be on the bus?

28/03/2020 11:55:54 AM(UTC+11)





U010M8GBP4K Next latest flight tonight is 8:50, so that seems safe barring a very big delay 28/03/2020 1:25:28 PM(UTC+11) UGMB3A4GZ Personal Information <@cameron.nolan>can you add braedan to your 2pm meeting? He said he wasn't on it. Also apparently Michael Nefflin is the DHHS manager of operations - his mobile is Personal Information 11) Relies With Standard Director of the Relies of the Rel 28/03/2020 1:26:03 PM(UTC+11) UGGTM4ZJ4 Personal Informat Ok definition: disembark from the plane 28/03/2020 1:27:17 PM(UTC+11) UF277RHM0 cameron.nolan Personal Inforis on the call. I'll add Personal Info but note it's with the actual security company 28/03/2020 1:27:28 PM(UTC+11) UGGTM4ZJ4 Personal Information might change to time of landing UGGTM4ZJ4 Personal Information let me know what you need from me after that call 28/03/2020 1:28:56 PM(UTC+11) UGMB3A4GZ Personal Information DHHS has been in discussions with Personal Information from Vic Pol. At this point, they will only have 1 or two DHHS AOs at the airport, and none at hotels. Vic Pol apparently has powers to issue similar orders, so they are going to be relying on them to do that. Process once people land will be current practice where ABF goes onto plane and issues direction, agency workers then perform health checks. Need to check with Personal Information DHHS ops manager for further details on process. 28/03/2020 1:29:27 PM(UTC+11) UGMB3A4GZ Personal Information Do you have Personal in s email Cam? I can't find him on directory. 28/03/2020 1:30:34 PM(UTC+11) UF277RHM0 Personal Information Personal Information (DHHS) &It;<mailto:|Personal Information | @dhhs.vic.gov.au| | Personal Information | @dhhs.vic.gov.au>>

UGGTM4ZJ4 Personal Information

<@Personal Information | <@UGMB3A4GZ> <@UF277RHM0> Can I get a quick status update on how we are going? Any red flags or critical issues to resolve / escalate through SP/PPO? Do you need more help?

28/03/2020 2:13:44 PM(UTC+11)

UGGTM4ZJ4 Personal Information

AND THE PARTIES WITH STANDING LEAVE ONLY VAL. <@ Personal Information Personal Information
<@UQCUG6FTJ> Just got a text from Personal Into that we are going into individual detention order territory - so can't leave room. Can you check in with Personal on what this means for security and hotel procedures?

28/03/2020 2:29:32 PM(UTC+11)

UGMB3A4GZ Personal Information

Do you want to do this on a group call Personal In

28/03/2020 2:31:07 PM(UTC+11)

UGGTM4ZJ4 Personal Information

I've just spoken to Ill just call individually

28/03/2020 2:31:34 PM(UTC+11)

UF277RHM0 cameron.nolan

Team - security company and Crown desperately want to know how many people are coming and at what time. What's the latest on getting this info?

28/03/2020 2:36:30 PM(UTC+11)

U010M8GBP4K

Specifically for tomorrow? I think <@U010YNB5V24> could make a good estimate based on arrivals and passenger numbers for tomorrow. Don't know things like family groups yet

28/03/2020 2:38:41 PM(UTC+11)

UF277RHM0 cameron.nolan

Yep estimates on numbers is fine. Most important thing is when they will arrive. replied to a thread: Team - security company and Crown desperately want to know how many people are coming and at what time. What's the latest on getting this info?

28/03/2020 2:45:40 PM(UTC+11)

UF277RHM0 cameron nolan

Yep estimates on numbers is fine. Most important thing is when they will arrive. replied to a thread: Team - security company and Crown desperately want to know how many people are coming and at what time. What's the latest on getting this info?

28/03/2020 2:45:40 PM(UTC+11)

UGMB3A4GZ Personal Information

ABF advised they do not collect data on things like family groups. People at the dry run were going to discuss and trying to resolve how to manage this while face to face

28/03/2020 2:45:43 PM(UTC+11)

U010M8GBP4K

Ok <@U010YNB5LRW> with the model you have and flight arrivals for tomorrow - could you get Cam rough numbers and arrival times? <@UGMB3A4GZ> interested what people come up with at dry run

28/03/2020 2:47:45 PM(UTC+11)

OARD AND ANY OFFILE PARTY WITHOUT DIPARTY ON THE PARTY OF Estimates based on rough passenger numbers, allowing 2 hours to from landing to arrival at Crown are as follows:

~9:00am: 20 people between 10:30am - 13:00pm: 275 passengers (across 4 flights ~45 mins apart each) ~20:30pm: 200 passengers

28/03/2020 2:51:33 PM(UTC+11)

U010YNB5V24

Can someone with the right permissions add <mailto! Personal Information @bcg.com | Personal Information @bcg.com > to the channel? Thank you!

28/03/2020 4:29:40 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Prep for 6pm SCC meeting (edited)

UGGTM4ZJ4 Personal Information

Attendees:

Department of Transport

Personal Information &It;<mailto Personal Information @ptv.vic.gov.au Personal Information @ptv.vic.gov.au> Personal Information | Amailto: Personal Informati@transport.vic.gov.au | Personal Informati@transport.vic.gov.au

Febey &It;<mailto:Personal Informa @ecodev.vic.gov.au Personal Informa @ecodev.vic.gov.au>>

Rob Holland

<<mailto: Personal Inform)@ecodev.vic.gov.au | Personal Informat@ecodev.vic.gov.au>> Department of Health and Human Services

&It; <mailto Personal Information @dhhs.vic.gov.au Personal Information @dhhs.vic.gov.au> VICPOL

Personal Infor

<<mailto:Personal Information @police.vic.gov.au Personal Information @police.vic.gov.a

u>> Personal Inform

<<mailto Personal Information @police.vic.gov.au Personal Information @police.vic.gov.au>

Department of Premier and Capine

Personal Informati <mailto Personal Inform@dpc.vic.gov.au| Personal Inform@dpc.vic.gov.au> Emergency Management Victoria

(ADF), < mailto: Personal Information Personal Information

@scc.vic.gov.au|sccvic.stratplan@scc.vic.gov.au>

@scc.vic.gov.au|sccvic.stratplan@scc.vic.gov.au>

28/03/2020 4:55:49 PM(UTC+11)

UGGTM4ZJ4 Personal Informati

Update on operational planning to date and debug issues

28/03/2020 4:56:34 PM(UTC+11)

33

UF277RHM0 cameron.nolan

Advice from United Security following the briefing is that they will stand up 20 tomorrow morning but anticipate larger numbers because of the configuration of the buildings. They may need to double this at each site to cover exits. They are also going to be doing meal delivery and collection. Person at US had already thought of the fire evacuation scenario and was working on this with Crowne security. Apparently they have a procedure whereby they first check if an alarm goes off and then they evacuate floor by floor. They would have enough staff to accompany them.

28/03/2020 5:44:22 PM(UTC+11)

UF277RHM0 cameron.nolan

Katrina is in discussions with Wilsons to stand up security at next batch of hotels

28/03/2020 5:44:40 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Personal Information > Urgent things to resolve:

- Ask DHHS when they will issue order
 Ask DHHS whether order can exclude room number Personal Hooking into this
 Confirm when Border Force transfers custody to AFP at the concierge desk or at the bus
 Confirm comms approach at hotel DJPR comms (Person provided) or DHHS (who are still concerned around drafting the order) concerned around drafting the order)

 • Confirm what is happening re airport concierge - looks like Jetstar is on hold due to union
- /labour hire issues.

28/03/2020 6:42:44 RM(UTC+11)

UGGTM4ZJ4 Personal Information

Prep for 8.15 meeting with SP

UGGTM4ZJ4 Personal Information

Requiring approval tonight from callout:

• Q&A for hotels - Personal Information working on it Personal Information

· What is provided at hotels, \$100 grocery youcher

28/03/2020 8:04:51 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Map of new roles and responsibilities and what is being handed back: https://vicgov.sharepoint.com/:p://s/VG000923/EZyYQOgk7M9MpAEMxXsx_0oBlpTkEl8Sn-TY5MxlycJHdg?e=dbuuks/Chain of custody.pptx>

28/03/2020 8:05:28 PM(UTC+11)

SWITH STANDING LEAVE ONLY VIAL.

UGGTM4ZJ4 Personal Information

Agenda format:

- Provide update on decision to pull back DJPR responsibility
 Outline new roles and responsibilities, confirm what is being handed over and progress
 Overarching control to DHHS confirmed
 Concierge staff by SCC, not Dnata subject to your conversation with SCC
 PPE going back to DHHS. We have asked to be supplied to hotels.
 Passenger data we only look after matching. Data colection done by SCC. Data integration by DHHS

 Share any updates from day rup that is relevant to any other.
- Share any updates from dry run that is relevant to our roles

Office the latter of the latte

UGGTM4ZJ4 Personal Informati Update from Gonul: At airport: • Information to be provided from team at airport in advance around composition of groups on each bus Buses to be staggered to allow smooth arrival at hotels. Maximum 20 per bus. Buses 20 minutes apart. When bus arrives · Vicpol to restrict access to area • GV (?) staff member to enter bus and advise people of process noting an AFP person will be on board bus SWITH STANDING LEAVE ONLY VIAL. Groups to be staggered when disembarking from bus to allow social distancing to be maintained and to facilitate smooth check in process First off: children, elderly, special needs, families with children Next: any couple or groups likely to be staying in same room Final: singles • No more than 9 groups off the bus at a time; room for 9 in check in process to maintain social distancing Security will load luggage off bus into hotel foyer. Individuals to then pickup luggage after check in and proceed to lift Process for check in: • GV/crown staff member allocates to room and records room on Crown system. Persoto record duplicate details If needed. • GV/crown staff takes passport / licence details GV/crown staff provides letter from crown and other information • Security to escort up to room - 3 people per lift & amp; 1 security guard (4 total maximum Additional x 3 security guards on each floor and at loading bay Protocol for allocation of hotels/rooms: · Whole flight needs to be allocated to one hotel, not split across hotels Flights should be grouped by floor Layout of people at Crown hotels for tomorrow X1 AFP arrives on bus X5 GV person per hotel (10 total) X20 Security per hotel X5 Vic Pol per hotel Likely questions: Can my family members visit me during my stay: unfortunately to adhere to the direction, visits will not be possible throughout the quarantine period Am I allowed to smoke: a smoking area will be made available. Am I allowed to smoke: a smoking area will be made available. Am I allowed to exercise: unfortunately to adhere to the direction, exercise will not be allowed nor will there be access to the gym How long am I required to stay: 14 day quarantine period How will I eat: meals will be provided 3 times a day. The content of the Mini Bar as stocked on arrival can be consumed free of charge. Additional orders from the Mini Bar can be made Can I order food or other deliveries: unfortunately to adhere to the direction this will not be possible. I have dietary allergies: these will be noted on your arrival and observed throughout your stay (please note allergies only, not preferences) • Laundry: linen replaced every three days individual items can be laundered also. • What if I need special medical supplies Access to essential medical needs will be facilitated throughout your stay • What happens if i become sick while in quarantine: TBA Can I have items delivered from my house. 28/03/2020 8:14:41 PM(UTC+11) UGGTM4ZJ4 Personal Information <@IPersonal Informati <@UGMB3A4GZ> <@UF277RHM0> 28/03/2020 8:14:59 PM(UTC+11) UGGTM4ZJ4 Personal Information Action: CF resolve hotel comms with Gonul and Personal Information | Action: CF give | Personal Information | details (Dnata, Personal Information | to advise on roles and responsibilities between hotel/DHHS/DJPR, embed into hotel comms and inform Gonul Action: role and responsibility - Persoto give disability issues to DHHS Action: Person comms strategy to deal with social media complaints Action: going to DHHS to ask about anaphylaxis, and Personal Inf

Action: CF send Personal Info airport concierge model design

28/03/2020 9:28:36 PM(UTC+11)

36

UF277RHM0 cameron.nolan Confirming that Global Victoria will be lead contact for security on the ground in the hotel. So Personal Infrand Personal will hand over the relationship to Gonul once they are contracted to deliver the service and assigned to a hotel (edited) 28/03/2020 9:33:19 PM(UTC+11) UF277RHM0 cameron.nolan AND THE PARTIES WITH STANDING LEAVE ARPROVAL team to agree on staffing levels and start onboarding 28/03/2020 9:38:05 PM(UTC+11) UQCUG6FTJ Personal Informa Team - other than helping Personal In with her work tonight - anything else I can assist with? 28/03/2020 9:52:29 PM(UTC+11) UGGTM4ZJ4 Personal Information Nothing from me 28/03/2020 9:54:25 PM(UTC+11) Aside from comms, email backlog and concierge, what's on my list 28/03/2020 9:56:43 PM(UTC+11) Personal Information UGGTM4ZJ4 checked through my notes for the day. That should be it! (28/03/2020 9:59:34 PM(UTC+11) UG2SCAD8E claire.febey674 Wow thank you! 28/03/2020 10:00:09 PM(UTC+11) UGGTM4ZJ4 Personal Information Others have/will resolved other issues or SCC/DHHS coming in supersedes it. 28/03/2020 10:01:01 PM(UTC+11) UF277RHM0 Personal Information Small but important on the Uber Eats thing. Ideally we could sort this out later, but if it's going to be a firm 'no food deliveries' in the pack given to guests then it will be hard to backtrack. I think it will be the no 1 complaint after day 2. So Rob H is going to talk to to find out who made this decision and if it's set in stone. 28/03/2020 10:16:50 PM(UTC+11)

UGMB3A4GZ Personal Information

Signing off team - will follow up on charter flights tomorrow AM before our 10AM catch up - see you all then and good luck with the comms piece!

28/03/2020 11:22:35 PM(UTC+11)

UGGTM4ZJ4 Personal Informatio

Me too! I've asked Personal to book in call with exec team around 10.30-11. Our catchup is at 10. Speak in the morning.

28/03/2020 11:34:49 PM(UTC+11)

UGGTM4ZJ4 Personal Information

And <@U010YNB5V24>, DHHS has now contracted Dnata and their crew as ground concierge staff and we've passed on your model design. Thanks so much for your work on this - very impressive!

28/03/2020 11:36:27 PM(UTC+11)

UGMB3A4GZ Personal Information

Hi all, have heard back from Personal and melb airport - the charter flight from Singapore is apparently air freight, not passenger

29/03/2020 8:17:00 AM(UTC+11)

UG2SCAD8E Personal Information

Just saw that <@ Personal Information know.

that's good news. I'll let Personal Info and DOT

29/03/2020 8:17:54 AM(UTC+11)

SMITH STANDING LEAVE ONLY WAL.

UGGTM4ZJ4 Personal Information

https://www.sbs.com.au/news/australians-in-quarantine-at-sydney-hotel-describe-prison-like-conditions In case you missed this

29/03/2020 9:03:40 AM(UTC+11)

UQCUG6FTJ | Personal Inform

https://www.theage.com.au/national/victoria/live-coronavirus-victoria-updates-cases-worldwide-surpass-600-000-20200328-p54euj.html

29/03/2020 9:17:45 AM(UTC+11)

UQCUG6FTJ Personal Inform

Buses arriving - already in the media

29/03/2020 9:18:00 AM(UTC+11)

UGMB3A4GZ Personal Information

Concierge update and issues thread: Checked in with Personal briefly - she is just about to send the latest round of numbers to Perso and will call me back for a longer debriefing, but said without the 17 staff from Dnato there this morning everything would have hit the fan, and they've learned a lot this morning.

29/03/2020 9:37:01 AM(UTC+11)

UGGTM4ZJ4 Personal Informatio

Other issues/priorities for 10am update meeting. (edited)

29/03/2020 9:54:25 AM(UTC+11)

UGGTM4ZJ4 Personal Information

BCG work - to be scoped with leads

- How to support data integration from airport to hotel to inform plane/hotel allocations and staffing required
- Ask Personhow BCG can be of assistance
- · What else?

29/03/2020 9:55:08 AM(UTC+11)

UGGTM4ZJ4 Personal Information

Issues raised last night

- Recreation policyUber eats policy
- Ensure enough resourcing for Gonul and IPers to scale up
- Need to get projections of flights potentially from DFTA via
 Personal Information

29/03/2020 9:55:30 AM(UTC+11)

UGGTM4ZJ4 Personal Information

Other potential issues

- Communication between Personal Information Gonul Personal Inform DHHS about hotel allocations
 How much in advance is the "1 plane = 1 hotel" allocation made?
- · What is the process for this?

- What is the process for this?
 Who holds the integrated data?
 What is role of DHHS data integration with DJPR and SCC?
 Support Personal to wind down, and to ensure proper handover to SCC.

29/03/2020 9:56:52 AM(UTC+11)

UGGTM4ZJ4 Personal Informati

<@U010M8GBP4K> <@U010YNB5V24> Let's continue chatting today about how best you can support us over the coming days. I've sent an email out to DJPR leads at airport and hotels to ask the question, but also keen on your thoughts.

29/03/2020 9:58:30 AM(UTC+11)

UG2SCAD8E claire.febey674

- CONFIDENTIAL FOR ITS RIGHTS TO CONFIDENTIAL FOR ITS RIGHTS Great list <@|Personal Information> to add:
 • service expectations / agreement with DHHS
 • staffing model and scale up through labor hire for Gonul (not just Vic Gov resources) can

29/03/2020 9:58:44 AM(UTC+11)

SWITH STANDING LEAVE ONLY VIAL.

UG2SCAD8E claire.febey674

<@U010M8GBP4K> <@UGGTM4ZJ4> <@U010YNB5V24> I think our ongoing staffing and delivery model at the hotels would be a good focus. But will talk with the team at our catch

29/03/2020 9:59:48 AM(UTC+11)

 Agree a 'telephone tree' to ensure we don't overwhelm our people on the ground with different contact points

29/03/2020 10:00:30 AM(UTC+11)

UGGTM4ZJ4 Personal Information Notes from meeting 29/03/2020 11:05:57 AM(UTC+11) UGGTM4ZJ4 marcus.leong Airport debrief from Personal Personal Info • DHHS only sent 4 staπ incl. 3 AOs PARTIES WITH STANDING LEAVE ONLY WAL. • Dnata was a godsend - need them to be maintained DHHS/Border Force giving inconsistent messaging inconsistent - e.g. that they can transfer • No mental health support at airport or hotel; Red Cross only providing through the hotline · A lot of groups of backpackers - upsetting to be alone Newborn babies need more nappies • Lots of questions from passengers - Personal is keeping a record for Q& As to be improved People with claustrophobia People demanding balconies Angry about not exercising outside
Hotel people under-resourced; need to slow down the buses 29/03/2020 11:06:05 AM(UTC+11) UGGTM4ZJ4 Personal Informatio Concierge (Perso) Personal I wants logs of people in room numbers - surge in the lull 29/03/2020 11:06:15 AM(UTG+11) UGGTM4ZJ4 Personal Information Common script for DHHS, Border Force, DJPR
 Send Q& As to Cathy - Personal Info has sent latest version
 Support Gonul; Get DPC protocol staff; Dial up Dnata staff via Personal Information. Determine that DHHS is in command with escalation and delegation protocols - via Personal In
 Check that hotel and security staff have PPE - Personal In
 Prepare security for Crown Plaza Melbourne (400), Pan Pacific (370), Royal Park MA (190) Need advance teams to prep for each hotel - site manager and staff at this site, with Gonul as lead. Accountability of DHHS at all site. Dependent on what resourcing the hotel has 24/7. 29/03/2020 11:07:04 AM(UTC+11) UGGTM4ZJ4 Personal Informat <@claire.febey674> 29/03/2020 11:07:11 AM(UTC+11) UGMB3A4GZ Personal Information Who is best person to talk to about getting details from hotels on their facilities now? Is it Unni; <@cPersonal Information >? Rec policy likely to vary significantly depending on what facilities/outdoor areas/notel layout is available 29/03/2020 11:49:35 AM(UTC+11) UF277RHM0 cameron.nolan Yep its unni or donna 29/03/2020 11:51:36 AM(UTC+11)

40

UGMB3A4GZ Personal Information

Recreation policy: I will keep looking at options to make this happen, but note Personahas concerns best way to keep people safe is to make sure they stay in their rooms. For comparison, Corrections Vic is putting all incoming passengers into quarantine for 14 days, and not allowing visits or outside time. Instead they are providing additional in-room resources: Prisoners in these units will be supported with access to in-cell phone calls, video-based visits, books, education material, printed exercise routines and TVs.Prison and health staff, including Aboriginal Liaison Officers and specialist mental health services, will regularly check in and monitor the health and wellbeing of all prisoners, including vulnerable and high-risk people.

29/03/2020 11:56:44 AM(UTC+11)

Thanks for the update <@Personal Information > can you look at what can be provided for them to safely exercise in room, and wnetner we can mobilse unemployed fitness instructors via Working for Victoria to give advice on in room fitness options (with proper risk management

29/03/2020 12:30:37 PM(UTC+11)

For example they could provide tailored body weight programs and do an individual online consultation.

29/03/2020 12:31:09 PM(UTC+11)

UG2SCAD8E claire.febey674

Assuming appropriate quals etc

UGMB3A4GZ (Personal Information

I also know as part of the active april discussions that tim burke was already looking at possible providers to help them develop the free assets?

29/03/2020 12:36:17 PM(UTC+11)

UGGTM4ZJ4 Personal Informat

<@cPersonal Information > Your actions from last call: Claire

- Check in with Person on Q& As and redistribution. Personal Information will send updates
 Give clarification questions in writing to Person on issues with DHHS Q& As
 With TRO
- Need to get projections of flights potentially from DFAT via Personal Informati
 Need consistent comms DHHS/Border Force giving inconsistent messaging

29/03/2020 12:42:53 PM(UTC+11)

UGMB3A4GZ Personal Information

Spoke to Personal In- they are launching WfV website on Tuesday at which point people can register their details and they can sort them into labour pools. If fitness people register, they could have a list identified by end of next week (WC tomorrow), so potentially people on board to support hotel guests early the week after that (WC 6 April)

29/03/2020 12:44:08 PM(UTC+11)

Personal Information * there is an SCC call at 1pm. Can you please capture a list of the critical need to raise (beyond what is above in your list).

UGGTM4ZJ4 Personal Informatio

- With RH escalate with SCC that they need to watch over ports and Avalon flights (Israeli flight TBC)

 • Need to get projections of flights - potentially from DFAT via

 • Need consistent comms - DHHS/Border Force giving inconsistent messaging

· Management of Dnata staff & Dnata Staff &

UGGTM4ZJ4 Personal Information

Additional issues:

- Passengers will need support to assist with connecting flights at end of stay.
- Skybus need more buses currently taking more time than expected to drop off passengers at hotel. People waiting 3 hrs for a bus at airport.
 With RH need access to PPE for hotel and security staff ASAP. Some hotels threatening
- to pull out.
- What is process for DHHS to hold all data. How does DJPR access? How do we feed in? (Note BCG will help map this out).
 Need contact list of all airport people across SCC, DHHS, BF for continuity if there. We will do the same for hotel.

29/03/2020 12:50:54 PM(UTC+11)

UGGTM4ZJ4 Personal Information

· We will arrange for hotel comms pack to be available at airport in future

29/03/2020 12:52:00 FM(UTC+11)

29/03/2020 12:54:05 PM(UTC+11)

or insulting frankling UG2SCAD8E claire.febey674

On Skybus, I think the issue is backlog of processing at hotels so they're holding. Different view?

UGMB3A4GZ Personal Inform

<@claire.febey674> Spoke to Personal Int to try and get health advice to support recreation plan - he said their public health team is already doing some thinking around this and I need to email semc@dhns with my request - wouldn't give me a contact person, so I'm going to try emailing

UF277RHM0 Personal Information

Crowne Plaza

29/03/2020 1:19:49 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Sorry missed this. I may have misunderstood. (edited)

29/03/2020 1:20:34 PM(UTC+11)

UGGTM4ZJ4 Personal Informati <@claire.febey674> <@UF277RHM0> BCG needs more time to develop model. ETA 30 mins. 29/03/2020 1:23:33 PM(UTC+11) UF277RHM0 Personal Information 1) REPARTES WITH STANDING LEAVE ONLY VAL. Team this prep meeting is happening at 4pm with the Crowne staff, Wilsons, VicPol, the Dnato site manager and someone from Gonul's team. I'll probably go as well. Biggest question will be how many people arriving and when? <@|Personal Information> <@UGMB3A4GZ> if we have any info at, say, 3:30 on this, please feed it through to me. Doesn't have to a promise, but we should let them know what our best prediction is and when we will give them confirmation (i.e. how far in advance of arrivals). Note as well, Unni is speaking with Crown (Packer not Plaza) about getting more capacity. So that might delay the need to overflow to Crowne Plaza. So please check in with one of his team this afternoon as well. 29/03/2020 1:24:01 PM(UTC+11) UGGTM4ZJ4 Personal Information Can you check in with Personal? Don't think I can answer this. 29/03/2020 1:25:02 PM(UTC+11) UGMB3A4GZ Personal Information I will see if they have indicative allotments for Crowne Plaza yet 29/03/2020 1:27:03 PM(UTC+11) UG2SCAD8E claire.febey674 Arrivals29/03/2020Orgin AirportSTAETAATAAircraft Type GatePax QR99430/03/2020OHL 070077W948 CZ32130/03/2020CAN 094033360 MF80330/03/2020XMN10157888TBC NZ12330/03/2020AKL 105032Q7281 UL60430/03/2020CMB15403336297 QR90430/03/2020DOH 18303519103 Total478 We have also been advised of a potential 4am arrival with 60 passengers and seeking 29/03/2020 1:29:32 PM(UTC+11) UGMB3A4GZ Personal Information

<@claire.febey674> THese are all for Crown Group not Crowne plaza

29/03/2020 1:30:09 PM(UTC+11)

UGMB3A4GZ Personal Information

IS that right?

29/03/2020 1:30:20 PM(UTC+11)

UGMB3A4GZ Personal Information Sorry I have just seen they are for 30 Mar, ignore me 29/03/2020 1:30:35 PM(UTC+11) UGGTM4ZJ4 Personal Information Team, is this the type of phone list that will be helpful? If so, can get teams to fill it up and keep it as a shared document. list.docx (edited) 29/03/2020 1:39:39 PM(UTC+11) From Unni: We have just secured additional rooms at Crown.
Current allocation(across both Crown Promenade and Crown Metropole)- 700 rooms
New allocation effective Monday this week- 950 rooms (for 30 days). UGMB3A4GZ (Personal Information I will let Personal I know Claire to support her convo with Personal Informa about hotel/flight 29/03/2020 1:52:49 PM(UTC+11) UGGTM4ZJ4 Personal Information Need to quickly cook some lunch 29/03/2020 237:00 PM(UTC+11) UGGTM4ZJ4 Personal Information <@claire.febey674> Any decision on the what things we do/don't pay for in the hotel (Personal Infos email?) There has also been another question around laundry services - which I think we should pay for, given it is an essential service and not that costly. (edited) 29/03/2020 3:03:08 PM(UTC+11) UG2SCAD8E claire.febey674 Let's set a reasonable per person limit on laundry Personal Information to capture as an action, we need someone to work with Personal Information agree comms with hotels whose stock we are not yet using

Personal Informati UGGTM4ZJ4 <@cameron.nolan> can you add Rob Holland to slack? 29/03/2020 3:07:25 PM(UTC+11) UGGTM4ZJ4 Personal Informati What is this referring to? I'm going to update you! 29/03/2020 3:30:54 PM(UTC+11) UGGTM4ZJ4 Personal Informati <@ Personal Information > Woolies vouchers? Can we pay for it <@UQCUG6FTJ> Then we can put it up to SE in consolidated request for approval (edited) 29/03/2020 3;34:39 PM(UTC+11) U010ZGJDVRB rob.holland <@rob.holland> has joined the channel 29/03/2020 3:45:47 PM(UTC+11) UF277RHM0 cameron.nolan Thank gawd 29/03/2020 3:46:08 PM(UTC+11) UF277RHM0 cameron.nolan I think we've got an issue here where Personal is assuming all our hotels are ready to go. Instead we need to tell Personal which hotels have been activated and she can decide on allocations from there. 29/03/2020 3:49:10 PM(UTC+11) UF277RHM0 cameron.nolan At the moment the only activated hotels are Crown Group's two sites. We are finding out if Crowne Plaza can be activated for tomorrow. 29/03/2020 3:49:54 PM(UTC+11) UGGTM4ZJ4 Personal Information <@cameron.nolan> BCG has sent through some slides and an excel sheet to come up with resource needs over different hotels. Thoughts? 29/03/2020 3:52:43 PM(UTC+11)

Team - Persons getting a lot of calls about food and dietary requirements not being met. <@ Personal Information can you find the right way / person to escalate this for resolution and report pack. Reconstitution as much pressure of Personal Reconstitution and report pack. perhaps via Personal In 29/03/2020 3:59:50 PM(UTC+11) Personal Information Can you also please set up a call for around 5-5.30pm so that we can he 4pm site meeting and agree plan for tomorrow. UGMB3A4GZ Personal Information Personal Information | For when you speak to Donna | Person | said everyone records their requirements on paperwork when arriving and that is used to inform meals - may be an issue of people not filling out forms right, or this information not translating to food prep/room 29/03/2020 4:02:05 PM(UTC+11) <@U010YNB5V24> <@UGGTM4ZJ4> one other point of improvement for your brilliant work on DHHS roles and responsibilities, can you please make clear that DHHS needs to take all decisions that relate to exercising the order (e.g. going out of room to smoke) and that DJPR is making operational day to day decisions. 29/03/2020 4:03:33 PM(UTC+11) UG2SCAD8E claire.febey674 it would be good to capture this in the team set up and governance map UG2SCAD8E claire.febey674 I think we'll need more on the call ^{Pers}. to discuss. . We need to make some decisions. I'll give you a call 29/03/2020 4:04:48 PM(UTC+11) UGGTM4ZJ4 Personal Information Ok, Donna following up with Crown 29/03/2020 4:06:49 PM(UTC+11) UGGTM4ZJ4 Personal Information Ok. update in live link: ttps://vicgov.sharepoint.com/:p:/s/VG000923/EfoQr0X707JPsHyQdLsrxEcByj4mliDnncfGzkYmbr1MaQ?e=VCii4o|20200329 - Hotel governance and staffing plan v1.pptx> 29/03/2020 4:11:27 PM(UTC+11) U010YNB5V24 <@re>Personal Information can you please grant <@U0110V0P955 and I access to the doc 29/03/2020 4:20:54 PM(UTC+11)

UGGTM4ZJ4 Personal Informat

Hi Personal In It's in the sharepoint folder link I sent earlier. Having trouble sending the link of the individual file, but you should find it in the folder. Have also given access to <@U0110V0P955> and <@U010YNB5LRW>

29/03/2020 4:27:40 PM(UTC+11)

UGGTM4ZJ4 Personal Informatio

Who else to invite, <@claire.febey674>?

29/03/2020 4:30:27 PM(UTC+11)

UQCUG6FTJ Personal Inforr

<@claire.febey674> <@UGMB3A4GZ> <@UGGTM4ZJ4> see email inbox for proposed laundry allowance

29/03/2020 4:45:13 PM(UTC+11)

UG2SCAD8E Personal Informatio

Personal Informa <@UGMB3A4GZ> can we please talk about recreation and smoking on the planning cair, both issues will need to be resolved with DHHS.

H STANDING LEAVE ONLY VAL

UGGTM4ZJ4 Personal Information

Prep. Key issue is to check everything is in order for tomorrow's flights:

- confirm flights
- confirm hotel allocations

- confirm sufficient staffing and security at all locations
 confirm comms material at all locations
 confirm SCC, DHHS, DOT/Skybus are aware. (edited)

29/03/2020 5:34:52 PM(UTC+11)

UGMB3A4GZ Personal Information

Key issue and escalation point around information flow from DHHS - lots of requests and issues that there has been limited/no communication on including the provision of nurses and mental health support at hotels, now this will work and when they'll be available and advice on smoking and recreation

29/03/2020 6:12:43 PM(UTC+11)

UGGTM4ZJ4 Personal Informat

<@Personal Information > <@UG2SCAD8E> Have made the list of responsibilities more exhaustive. Will need your advice if there are more specifics required. <@UQCUG6FTJ> <@UGMB3A4GZ> <@U010ZGJDVRB> - feel free to add.

https://viogov.sharepoint.com/:p:/s/VG000923/EfoQr0X707JPsHyQdLsrxEcByj4mliDnncfGzkymor/MaQ?e=v4sEN6|20200329 - Hotel governance and staffing plan v1.pptx>

29/03/2020 6:14:50 PM(UTC+11)

UGGTM4ZJ4 Personal Information

- Escalations to DHHS <@ Personal Information > <@UF277RHM0>
 Need protocols on how to access nurse and psychosocial support. Perso's team has requests for Valium, Ventolin etc. and no process to link to medical supplies and health services

- advice on smoking and recreation.
 at least one DHHS officer there 24/7 security guards need to take direction from DHHS.
 need PPE for hotel and security staff at minimum need surgical mask and hand sanitiser
 need consistent comms between DHHS/Border Force and DJPR (edited)

29/03/2020 6:40:28 PM(UTC+11)

Personal Information have you seen any more data for the next three hotels? If we can get the following , <@U010YNB5LRW> and I can help forecast staffing : For the next three hotels, confirmation of: Cleaning req'd? Food delivery support req'd? fof floors that will be in use For each resource type: RESULTATION DIPREMENTAL STANDING LEAVE ONLY WITH STANDING LEAVE ONLY ON THE STANDING LEAVE O # of people to be supported by each 'Concierge' during check-in # of rooms / people to be supported by each 'Concierge' during the stay (peak, off-peak) # of nurses required per X number of people 29/03/2020 6:59:43 PM(UTC+11) UGGTM4ZJ4 Personal Information <@claire.febey674> <@UF277RHM0> <@UGMB3A4GZ> <@UQCUG6FTJ> Can I get your help to fill this out 29/03/2020 7:16:49 PM(UTC+11) UQCUG6FTJ Personal Inform Team - i'm taking a 30 minute break to clear the head and start again. Call on mobile if im needed. 29/03/2020 7:20:13 PM(UTC+11) UGMB3A4GZ Personal Information > I've filled out what I can 29/03/2020 7:23:42 PM(UTC+11) UGGTM4ZJ4 Personal Informatio Yeah my operational capacity is very much declining. 29/03/2020 7:31:02 PM(UTC+11) UGMB3A4GZ Personal Information Me too. Would be good to check in about what needs to be done tonight when people are able. 29/03/2020 7:39:06 PM(UTC+11) Thanks <@Personal Information

> check in with Personal In about actions but I think the key things are: escalate to பннь, and document and agree overnight plan.

29/03/2020 7:40:18 PM(UTC+11)

UG2SCAD8E claire.febey674

Let me know if you have urgent deliverablee tonight otherwise rest.

UGGTM4ZJ4 Personal Information

Hi <@U010YNB5V24>, I think all fine for tonight - please don't stay around. I will follow up with <@UF277RHM0> on the numbers - we spoke earlier about this. Will touch base with you in the morning

29/03/2020 7:48:09 PM(UTC+11)

UQCUG6FTJ Personal Inform

I don't want be a downer, but Sydney are a few days ahead of us on the hotel quarantine thing and here are some of the things people are complaining about:

29/03/2020 8:17:46 PM(UTC+11)

UQCUG6FTJ Personal Inform

https://www.smh.com.au/national/no-chance-of-fresh-air-sydney-airport-arrivals-escorted-to-hotels-20200329-p54f0s.html

29/03/2020 8:17:48 PM(UTC+11)

UGMB3A4GZ Personal Information

Signing off for tonight all! I've made some updates to the action tracker in sharepoint to show status of some of the things in there, and I've also put a doc on there with some details on each of our priority 4 hotels to show what function rooms/outdoor facilities are available across each. Have a good night, and good luck for those still online:slightly_smiting_face:

29/03/2020 8:24:44 PM(UTC+11)

UG2SCAD8E claire.febey674

<@Personal Information > @UGGTM4ZJ4> you guys ok with the overnight plan? Need support?

29/03/2020 8:31:24 PM(UTC+11)

SWITH STANDING LEAVE ONLY WAL

UGGTM4ZJ4 Personal Information

I've just started it. Will try to also do a diagram showing roles and escalation points.

ocwLpw?e=e3aaMk|Overnight plan.docx

29/03/2020 8:32:22 PM(UTC+11)

dot points on a page is fine!

29/03/2020 8:32:41 PM(UTC+11)

UG2SCAD8E claire.febey674

doesn't have to be pretty!

29/03/2020 8:32:45 PM(UTC+11)

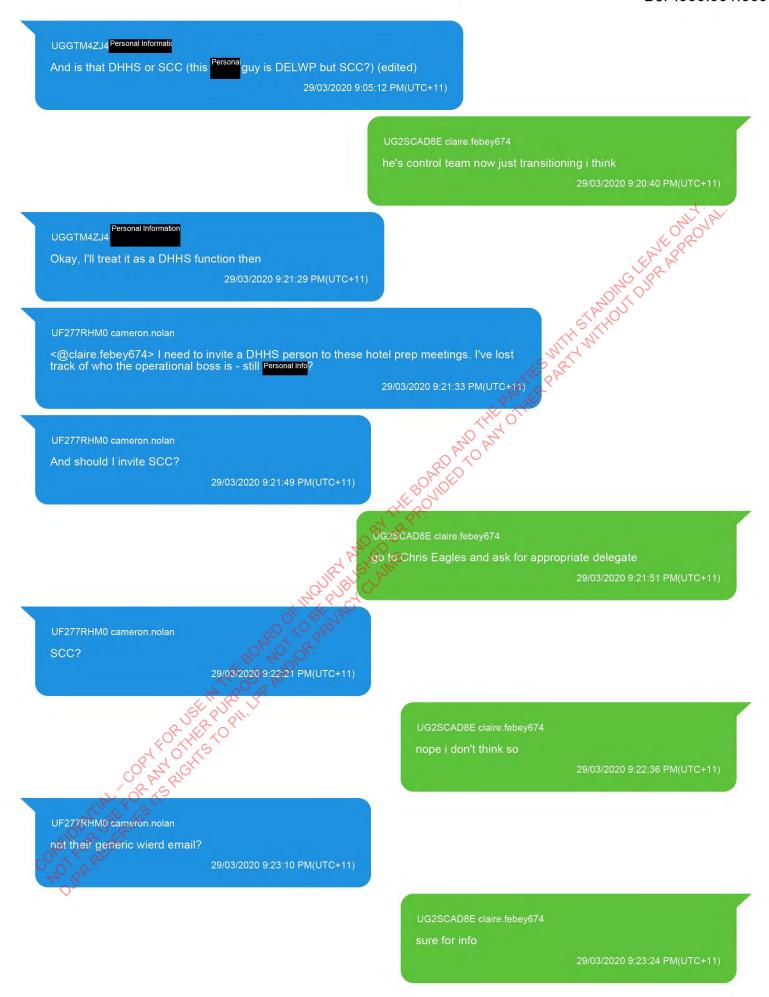
UGGTM4ZJ4 Personal Information

In that case, it's done!

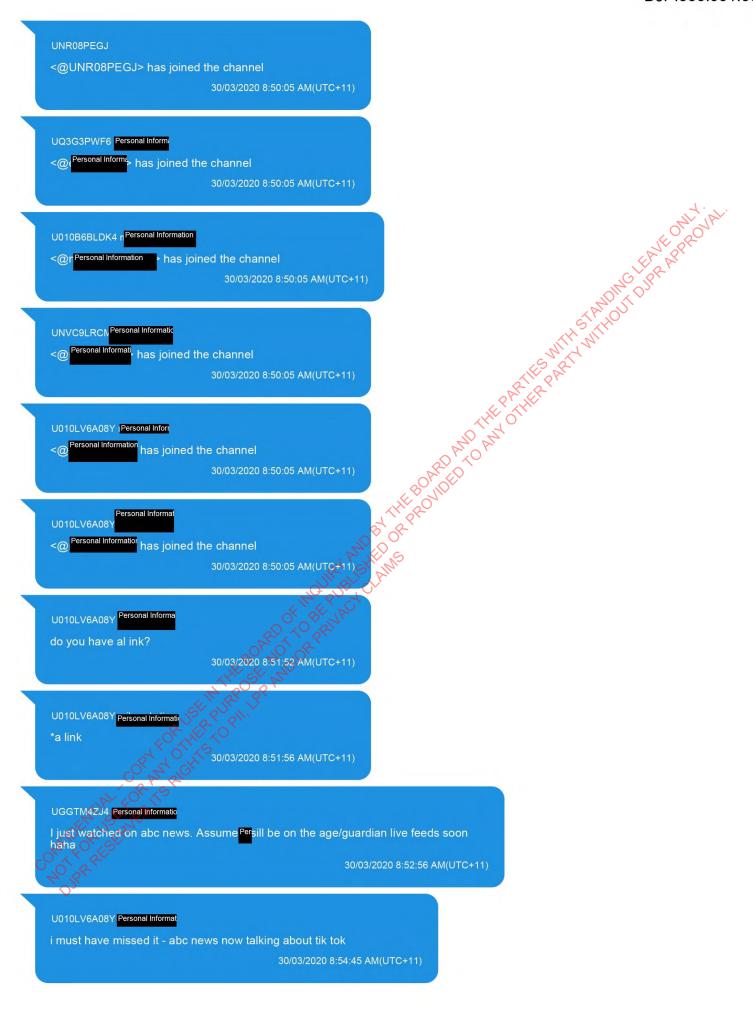
29/03/2020 8:36:54 PM(UTC+11)

49





UGGTM4ZJ4 Personal Information Should Chris/delegate also be the main contact for hotel issues? 29/03/2020 9:24:52 PM(UTC+11) and chris as the contact by name is this overnight plan good to go? UGGTM4ZJ4 Personal Informatio i believe so, if you're happy with it 29/03/2020 9:25:20 PM(UTC+11) UG2SCAD8E claire.febey674 And it sounds like you're putting toghter the numbers to send with? UGGTM4ZJ4 Personal Information it's still incomplete - but can include if you would like 29/03/2020 9:28:15 PM(UTC+11) UGGTM4ZJ4 Personal Information who is it for? - if broader group, please send live link not static copy (edited) UGGTM4ZJ4 Personal Informatic Andrews speaking now 30/03/2020 8:43:23 AM(UTC+11) UGGTM4ZJ4 Personal Information On the spot fine of \$1600 if you breach the 2 person limit on gatherings



UGGTM4ZJ4 Personal Information

Team <@Personal Informg><@U010LV6A08Y><@UNR08PEGJ> <@U010B6BLDK4><@UNVC9LRCM>, our documents are saved here: https://vicgov.sharepoint.com/:f:/s/VG000923/EhnhYogpHb5BkUv3GHAYHMQBF8uel3TTa

99NGOWc9PdexQ?e=dujhaK> (edited)

30/03/2020 9:32:30 AM(UTC+11)

UGGTM4ZJ4 Personal Information

- <@claire.febey674> Urgent list for DHHS
- Unaccompanied minors
- Smoking policyRecreation policy
- Confirm with CHO: can passengers book international flight and leave before 14 day quarantine

30/03/2020 10:58:01 AM(UTC+11)

UGGTM4ZJ4 Personal Information

FYI <@ Personal Information <@UNR08PEGJ> <@UQCUG6FTJ> <@U010LV6A08Y> Actions

recorded from our meeting:

Personal In Unaccompanied minors - age, do they have anyone meeting you on the other end?

• Personal Inf Smoking policy

- Dropoff and deliveries
- Recreation
- **Evacuation policy**
- Woolies voucher and laundry Problem solving with Persor
- PersoData collection process, including incident data Data for 2pm EB meeting

- Jata for 2pm EB meeting
 update governance map
 Structure of team, with finance
 Brief BCG on data work and steady state governance
 Speak to Personal Information
 Record of decisions
 Record of decisions

- Personal in needs an escalation channel and roster of who is working; consider general email for escalations (edited)

UGMB3A4GZ Personal Information

<@claire.febey674> <@UGGTM4ZJ4> <@UNR08PEGJ> DHHS is on top of unaccompanied minors. The father has agreed to be detained at the hotel with the children. VicPol has advised it will not be possible for the father to be connected with the minors at the airport, and he will instead meet them at the hotel. DHHS are working out the process for the minors to be accompanied to the hotel, Personal will update me once this is resolved.

30/03/2020 11:18:06 AM(UTC+11)

Thank you <@ Personal Information Thank you <@ Personal information Is it worth pressure testing the Vic Pol advice. Different view was given by ABF on Saturday and it's their jurisdiction.

SWITH STANDING LEAVE ONLY VIAL.

Team - confirmed with legal at CHO that all people are required to complete 14 days. There is no option to book international travel and leave. Can you please work with 'Person' / Comms to update comms as a matter of urgency and recirculate immediately as PDF and arrange for new printing to go to hotels. <@ Personal Information >

54

UGMB3A4GZ Personal Information

<@claire.febey674> <@UNR08PEGJ> Hi Claire, checked in with Personal - she is going to check with DHHS and then go straight to ABF if they are not helptul. DHHS is currently seeking legal advice around the ability to issue detention orders to minors without their parents there. Their planned process was that dnata security would accompany them to the bus, where they would be handed over to VicPol

30/03/2020 11:48:52 AM(UTC+11)

UGMB3A4GZ Personal Information

Hi all, Persona has asked if anyone has done a comparison between Qld, NSW and Vic approach to traveller quarantine - I'm telling him no and to go ahead with one - shout out if I 'm wrong and one of you have done this

30/03/2020 11:51:35 AM(UTC+11)

UG2SCAD8E claire.febey674

nobody has Person

30/03/2020 11:51:46 AM(UTC+11)

UG2SCAD8E claire rebey 674

Tell Person THANK YOU

30/03/2020 11:51:53 AM(UTC+11

UF277RHM0 cameron.nolan

This is the sort of thing we can get PwC to help with once they are on poard in the next 24 hours

30/03/2020 11:52:34 AM(UTC+11)

UG2SCAD8E claire.febey674

Thank you My recommendation is that they go airside and meet the children as they leave the supervision of the airline.

30/03/2020 11:52:36 AM(UTC+11

UGGTM4ZJ4 Personal Information

<@cameron.nolan> <@UG2SCAD8E> Front page updated again to reflect DHHS data role and role at airport

https://vicgov.sharepoint.com/:p:/s/VG000923/EfoQr0X707JPsHyQdLsrxEcByj4mliDnncfGzkymbr1MaQ?e=kJpLnU|20200329 - Hotel governance and staffing plan v1.pptx>

30/03/2020 11:56:01 AM(UTC+11)

CONTRACTOR SELECTION

UG2SCAD8E claire.febey674

<@ Personal Information \rightarrow <@UNR08PEGJ> Please ensure that grocery vouchers are sourced from both Woolworths and Coles. Please close this off with Rachaele May.

30/03/2020 11:56:04 AM(UTC+11)

UG2SCAD8E claire.febey674

<@Personal Information > <@UNR08PEGJ> we have been receiving calls to our call centre from people isolated in WA Crown Casino. Can you please find COVID-19 hotline details from each state so that we can provide these to the call centre. Please provide diercity to Person

30/03/2020 12:05:37 PM(UTC+11)

UNR08PEGJ

Will do now

30/03/2020 12:06:10 PM(UTC+11)

UG2SCAD8E claire.febey674

<@Personal Information · looks great. can you add to DHHS role briefing staff on PPE use /

UGGTM4ZJ4 Personal Information

FYI <@claire.febey674> Request from PPO media adviser via comms:

- Can I please get an update on expected arrivals today (in form of Person's excellent table from yesterday - below)
- Please provide details of which hotels they are going to today.
 Ongoing, it would be great to get the daily arrivals table at a set time each morning. Say 9am. Can you arrange that?
- I'd love to have a consolidated one-pager (or two if need) which steps out the key moments from touch down to check-in and beyond (details including what sort of medical test on plane, AFP escorts on SkyBuses, social distancing on buses, masks in transit, exercise options at hotels etc. This will help with incidental inquiries which we are getting pretty regularly. Be good to get this by end of day (may well be specific information required during the day – in that case, we'll let you know.)

30/03/2020 12:12:51 PM(0TC+11)

UG2SCAD8E claire febey674

And managing the checkout in terms of authrosing departures.

UGGTM4ZJ4 Personal Informati

- I'll provide the arrivals table and hotel allocation (once confirmed they are all going to
- I'll relay that we can give a forward look, but it will be volatile
- I'll put a dot point summary of process and get it checked off by our team and leads.

30/03/2020 12:14:23 PM(UTC+11)

UG2SCAD8E claire.febey674

Note that we are responsible for theoverall package of support for daily items rather than listing the grocery package specifically

30/03/2020 12:14:29 PM(UTC+11)

The whole process is DHHS.

Let's only do our section please

30/03/2020 12:15:32 PM(UTC+11)

UF277RHM0 Personal Information

Spoke with Gonul. Can use Plaza today - but they need to sort out scaffolding issues going forward. She thinks using DPC events people for on the ground support will be more trouble than it's worth - better to rely on Dnata staff. But she is open to the idea of using them for data collation purposes. She will first check the capacity in her own team and then let us know what she needs.

Let's set up a process where Person has the information that she needs e.g. passenger numbers so that she can support directly.

30/03/2020 12:16:09 PM(UTC+11)

We should not support PPO comms directly this is a matter for Personal

30/03/2020 12:16:28 PM(UTC+11)

UGGTM4ZJ4 Personal Informatio

Yep, I'll just feed through the information to Person and check that she is on the mailing list for the info.

30/03/2020 12:17:15 PM(CTC+11)

UG2SCAD8E claire.febey674

That's great thanks <@cameron nolan> Just noting that the data quality is urgent for today, but won't be as high priority for her. So can you check in again if not answered in 30?

UG2SCAD8E claire.febey674

Perfect <@Personal Information and draw a line around what is ours.

30/03/2020 12:17:54 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Yeah sorry I wasn't super clear - intention was always to relay info to Person to deal with.

no worries of course, just worried you were being too helpful because you are generous

:slightly_smiling_face:

UG2SCAD8E claire.febey674

thanks <@UNR08PEGJ>!!

Hey team a couple of updates from Gonul: Personal Inform & Personal Information & Per 30/03/2020 12:43:52 PM(UTC+11) Personal Information <@UNR08PEGJ> 30/03/2020 12:44:02 PM(UTC+11) UGMB3A4GZ c Hi <@claire.febey674> when I spoke to Person about this earlier she said she just wanted some time to think through it and put it together, does she now want us to get in contact with her to help develop it? 30/03/2020 12:53:33 PM(UTC+11) UGGTM4ZJ4 Personal Information <@claire.febey674> <@UQCUG6FTJ> Numbers for flights/passengers/hotel guests in your inbox (edited) 30/03/2020 1:42:50 PM(UTC+11) UGGTM4ZJ4 Personal Informati And FYI another 270 travellers in today's travellers excluding the first flight which is already accounted for 30/03/2020 1:45:13 PM(UTC+11) UF277RHM0 Personal Information Can I get this? replied to a thread: <@claire.febey674> <@UQCUG6FTJ> Numbers for flights/passengers/hotel guests in your inbox 30/03/2020 1:57:27 PM(UTC+11) UF277RHM0 Personal Information Can I get this replied to a thread: <@claire.febey674> <@UQCUG6FTJ> Numbers for flights/passengers/hotel guests in your inbox 30/03/2020 1:57:27 PM(UTC+11) SSC call actions / updates <@rob.holland> UG2SCAD8E claire.febey674 <@Personal Information > <@UNR08PEGJ> we will need to engage Vic Pol in the delivery

policy before it is finalised



UGMB3A4GZ Personal Information

<@ Personal Informa pretty sure global vic team has made sure mini bars have been emptied of any alcohol. There is a meeting this afternoon for everyone involved on deliveries to discuss process, I've asked for Personal Information from VicPol to be included to get their input.

30/03/2020 2:37:26 PM(UTC+11)

UGMB3A4GZ Personal Information

On groceries and vouchers <@claire.febey674> and <@UQCUG6FTJ> RM's team is looking at a reimbursement schedule rather than providing people with vouchers, and only doing ad hoc groceries through Woolies at this point

SWITHSTANDING LEAVE APPROVAL 30/03/2020 3:38:14 PM(UTC+11)

UQCUG6FTJ Personal Info

<@claire.febey674> <@U010ZGJDVRB> I'm still working with Personal In and Person from BCG on the individual-level data, as requested by VicPol. Please call me for an update, my view is it will be read to share with them tonight, and we will be able to establish data collection protocols by tomorrow.

30/03/2020 3:46:24 PM(UTC+11)

UGGTM4ZJ2Personal Information

Just briefed up finance and procurement. Connecting them with leads to ensure purchase orders are paid, contracts signed asap etc.

30/03/2020 3:50:08 PM(UTC+11)

Personal Information UGMB3A4GZ

Delivery process has been developed and agreed with VicPol. Personal Irs team will summarise and send out to everyone for confirmation. Outstanding issues to escalate with DHHS <@claire.febey674> are health advice on how to handle packages and deliveries and for their legal team to draft a release form for guests to sign waiving state responsibility if they get sick after accepting package (adited) get sick after accepting package (edited)

30/03/2020 4:37:04 PM(UTC+11)

Thanks <@ Personal Information

> can we escalate to DHHS before we send?

30/03/2020 4:37:30 PM(UTC+11)

UGMB3A4GZ Personal Information

Yep <@claire.rebey674> Outstanding issues to escalate with DHHS are health advice on how to handle packages and deliveries and for their legal team to draft a release form for guests to sign waiving state responsibility if they get sick after accepting package (edited)

30/03/2020 4:46:34 PM(UTC+11)

Thank you do you have a doc i can send?

UNR08PEGJ

<@claire.febey674> On evacuation procedures - I have drafted a one-pager that details the arrangements but am still waiting to hear back from Donna Findlay and Personal Information on contact details for duty managers.

- Outstanding questions for DHHS are:

 Proper and efficient use of PPE for staff (i.e. who needs to wear in what context)
- · Whether we advise physical distancing and putting on masks in emergency scenarios (i.e.

Once we have the hotel contacts we will also need to get information from them re: their evacuation plans and PPE monitoring

30/03/2020 4:49:49 PM(UTC+11)

UNR08PEGJ

Doc can be found here

https://vicgov.sharepoint.com/:w:/s/VG000923/EY5JPdetrlhImT83E6RFdP8BDqBVgDq_WKXEoTvpOq602A?email=claire.febey%40ecodev.vic.gov.au&e=v3VK3b|Evacuation Procedures Fact Sheet.docx>

30/03/2020 4:50:35 PM(UTC+11)

UGMB3A4GZ Personal Information

<@claire.febey674> Just spoke to Personal Information about the UAM to see how it went and if DHHS/VicPol/ABF had agreed on a process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was their or invited in the process going forward - DHHS told her it was the process going forward - DHHS told her it wa jurisdiction and not for her to be involved in, so we have no sight over what happened today on this or what the process will be going forward, unless others have received separate updates <@U010ZGJDVRB>

30/03/2020 4:50:36 PM(UTC+11)

UGMB3A4GZ Personal Information

Persor's team is writing the process up, then they will send it through.

30/03/2020 4:51:34 PM(UTC+11)

UGGTM4ZJ4 Personal Informati

<@cameron.nolan> <@UG2SCAD8E> Personal Information has drafted Q&As for potential hotels, as many are hungry for information around what will be expected of them (particularly regional ones). Sacha will then put it through Comms. Not sure what our approach here should be. I've revised the Q&As with information that I'm aware of, but there are some gaps. Let me know what you think.

https://vicgov.sharepoint.com/w:/s/VG000923/EXwfBreu2blMuoSNpX4TVkQB7l6bj5zvCkg vhxYWITVmxg?e=YIWQcS|Advice for hotels in Victoria assisting with the 14-day quarantine period.docx>

30/03/2020 5:10:58 PM(UTC+11)

UGGTM4ZJ4 Personal Information

<@UNRO8PEGJ> May have to revise the Q& A here around evacuation.

30/03/2020 5:11:23 PM(UTC+11)

UGMB3A4GZ Personal Information

Melbourne Airport has confirmed that they will waive any overstay fees associated with 14 day quarantine. I have passed this on to comms for the FAQs. MA has also said that if we are able to capture these concerns through a spreadsheet of impacted parkers, they will proactively reach out to ensure refunds are processed.

30/03/2020 5:22:41 PM(UTC+11)

SWITH STANDING LEAVE ONLY VAL

UNR08PEGJ <@ Personal Information > updated 30/03/2020 5:25:12 PM(UTC+11) UGGTM4ZJ4 Personal Informa <@claire.febey674> Team structure diagram here. FYI procurement and finance people in place and briefed up. They'll work directly with leads to get all their paperwork done. https://vicgov.sharepoint.com/:p:/s/VG000923/Ef_3ZYmDqP9JsAXjG8CmylEBdp1erAqvERNvGWUCb3PphQ?e=wwPnni|DJPR">https://vicgov.sharepoint.com/:p:/s/VG000923/Ef_3ZYmDqP9JsAXjG8CmylEBdp1erAqvERNvGWUCb3PphQ?e=wwPnni|DJPR team structure.pptx> 30/03/2020 5:35:17 PM(UTC+11) UG2SCAD8E claire.febey674 <@Personal Information > <@UNR08PEGJ> evacuation document looks great team. Should i send to DHHS now for input or wait for the final additions? UNR08PEGJ <@claire.febey674> Should be fine to send now. Other updates won't impact DHHS input. 30/03/2020 5:37:18 PM(UTC+11)

UG2SCAD8E claire.febey674

Great will do

30/03/2020 5:37:29 PM(UTC+11)

30/03/2020 5:35:54 PM(UTC+11)

UG2SCAD8E claire febey674

In addition to this can you please work with Hotel Command team to ensure that contractors on the ground and our staff are aware of ordinary evacuation procedures. I would like confirmation of how we are managing the risk of a high volume of staff working in a new environment and that the Duty Manager in each hotel is taking this responsibility on.

30/03/2020 5:40:29 PM(UTC+11)

UNR08PEGJ

Can do. Who is best contact @hotel command team?

30/03/2020 5:41:10 PM(UTC+11)

UG2SCAD8E claire.febey674

Can you log in email to Gonul cc Donna and ask <@ Personal Information > to include on agenda for our next debrief with leads which if possible would happen this evening (e.g. 6.15 or 6.30).

UGGTM4ZJ4 Personal Information

<@claire.febey674> <@UNR08PEGJ> <@UGMB3A4GZ> Another one to ask DHHS: is the rubbish general waste or bio hazard waste? This came from Crown via Donna.

30/03/2020 6:09:53 PM(UTC+11)

UGGTM4ZJ4 Personal Information

6.15pm debrief meeting <@claire.febey674> <@UF277RHM0> <@UGMB3A4GZ> <@UQCUG6FTJ> <@UNR08PEGJ> <@U010LV6A08Y> (edited)

30/03/2020 6:55:18 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Issues for DHHS

- · Discuss their role on how to deal with food allergies as it is a health issue
- What are DHHS requirements for the hotel (e.g. room for nurse, scanners etc.)
 Is rubbish general waste or biohazard waste Crown wants to know
- Existing issues
 Smoking
- Recreation
- Roles and responsibilities, including DHHS AO role in directing security staff
 On-site VicPol presence (edited)

30/03/2020 6:58:20 PM(UTC+11)

UG2SCAD8E claire.febev674

Can you quickly recap follow ups and i'll quickly recap

UGGTM4ZJ4 Personal Information

- A meeting with Gonul/Personal Information on hotel requirements and allocation process
- How to deal with alcohol at Crowne Plaza
- Persoland others to continue to map delivery process
 Meeting with Gonul/Donna to close the loop on dietary requirements
- Need to action how to increase food capacity for staff/security (Rob Houggest Sandwich Company catering is looking for work)

 Need clearer line of sight of managing Dnata

 Set reasonable timeframes for updating Q&As (edited)

30/03/2020 7:04:43 PM(UTC+11)

UG2SCAD8E claire febey674

Core team - what is urgent for tonight? I'm keen to support <@ Personal Information <@UQCUG6FTJ> <@UGGTM4ZJ4> to log off as quickly as possible. The one issue that I absolutely need an answer on is data (sorry Person) What else?

30/03/2020 7:11:56 PM(UTC+11)

UGGTM4ZJ4 Personal Information

<@claire.febey674> Note - updated DHHS escalation list above

30/03/2020 7:13:59 PM(UTC+11)

UGGTM4ZJ4 Personal Informatio

Nothing urgent for tonight. Just to kick on with escalating things to DHHS. Some docs for review - team structure ans Q&As for Personal

Also need to touch base with BCG tomorrow to talk more about their engagement post immediate data priorities.

30/03/2020 7:14:36 PM(UTC+11)

UGMB3A4GZPersonal Information

Yep, nothing urgent from me. Based on Person's update the delivery process document may come overnight. Let me know if you need something tonight to escalate with DHHS or happy to send to them tomorrow.

30/03/2020 7:16:20 PM(UTC+11)

UG2SCAD8E claire.febey674 Awesome thanks team. Clock off. UG2SCAD8E claire.febey674 But sorry not you quite yet <@Personal Information SWITH STANDING LEAVE ONLY VAL. UGMB3A4GZ Personal Information Night all - good luck and hope you can all log off soon! :star: 30/03/2020 7:35:28 PM(UTC+11) U010ZGJDVRB rob.holland <@claire.febey674> Just got a text from Personal Informatiq saying "_Just a quick one to say thanks for your help this week. What your team have done is incredible. A huge piece of work. Well done_." He's substantively DPC but seconded into SCC so good to see that regardless of other power plays your amazing work is getting recognised. 31/03/2020 8:57:27 AM(UTC+11) UG2SCAD8E claire.febey674 Thanks <@ Personal Information but snaps to the whole team <@UF277RHM0> <@UGMB3A4GZ> <@UQCUG6FTJ> <@UNR08PEGJ> <@UQ3G3PWF6> <@U010LV6A08Y> and special thanks to <@UQCUG6FTJ> and friends on data (edited) 31/03/2020 9:14:48 AM(UTC+11) UGGTM4ZJ4 Personal Information 9 am WIP <@Personal Information > <@UG2SCAD8E> <@UNR08PEGJ> <@U010LV6Auo r > <@UQCUG6FTJ> (edited) 31/03/2020 9:32:32 AM(UTC+11) UGGTM4ZJ4 Personal Information Attachments: Size: 0 File name: image.png Path: https://files.slack.com/files-pri/TF22A08KE-F01150M06PR/download/image.png 31/03/2020 10:19:02 AM(UTC+11) UGGTM4ZJ4 Personal Information New sharepoint link to our folder restricted to just our team + BCG https://vicgov.sharepoint.com/:f:/s/VG000923/EhnhYogpHb5BkUv3GHAYHMQBXIJ3oPEW x4e3i7w7XqlWMQ?e=fORyL7> 31/03/2020 10:32:53 AM(UTC+11)



U010LV6A08Y Personal Information <@claire.febey674> very roughly *20 under 5*, *20 5-12* and *10 12+*. I would suggest to Personal Info bumping up by about 50% to be safe - let me know if you would still like me to email her 31/03/2020 1:09:00 PM(UTC+11) That's great thanks so much <@ Personal Informat > i'll SMS I'll ask her for indicative numbers \$\$ 31/03/2020 1:11:19 PM(UTC+11) UG2SCAD8E claire.febey674 Expect \$4,500 on toys UG2SCAD8E claire.febey674 \$600 on Easter Eggs (the reset donated by Cadbury) UF277RHM0 cameron.nolan I've had a go at it - still a few gaps. Might be worth sending to someone in Global Vic to sense check and add any more questions that they think hotels will ask ahead of time? U010LV6A08Y | Personal Informa Team I am managing an urgent issue please text me directly if I have missed something that is urgent for escalation thanks <@Personal Information > <@U010LV6A08Y> UGGTM4ZJ4 Personal Informatio *Updates / issues for 5.30pm debrief meeting* <@claire.febey674> <@UF277RHM0> <@UNR08PEGJ> <@U010LV6A08Y> <@UQCUG6FTJ> (edited) 31/03/2020 3:37:07 PM(UTC+11)

UGGTM4ZJ4 Personal Information

DHHS escalations

- Smoking policyRecreation policy
- Advice on what can be delivered, packaging restrictions, cleaning requirements
 Roles and responsibilities, including DHHS AO role in directing security staff
- On-site VicPol presence
- Is rubbish general waste or biohazard waste? Crown wants to know

- How long does it take to do a "gastro clean" of a hotel room?
 Ensure we have sufficient PPE for hotel and contracted staff
 Need more nurses at the hotel (suggestion: using Nurse on Call when nurse is occupied)

31/03/2020 3:46:41 PM(UTC+11)

UGGTM4ZJ4Personal Information

Food issues are getting resolved - from Personal is notes:

- Guests can already order alcohol from the hotel menu
- They will get grocery vouchers soon for non-perishables, but including fruit and excluding alcohol
- Sticker placed on rooms to indicate dietary requirements with lists on requirements being shared with front desk staff as well
- A limited menu for ordering outside of standard meals is being provided tonight for orders tomorrow
- · Crown pushing back on Uber Eats deliveries, including because of contamination risk (edited)

31/03/2020 3:53:20 PM(UTC+11)

U010LV6A08Y Personal Informa

<@claire.febey674> will need to talk you through where Person and i are up to on the costs piece when you have a moment

31/03/2020 4:07:15 PM(UTC+11)

UNR08PEGJ

<https://vicgov.sharepoint.com/:w:/r/sites/VG000923/Documents1/COVID-</p>

19%20Quarantine/Standard%20Policies/Recreation%20Policy%20-%20Option%20One.docx?d=w3ad503c62f684ec99aa898bf18575e0e&csf=1&e=s

VbMHZ|Recreation policy - no option>

31/03/2020 5:05:19 PM(UTC+11)

UNR08PEGJ

<https://vicgov.sharepoint.com/:w:/r/sites/VG000923/Documents1/COVID-</p> 19%20Quarantine/Standard%20Policies/Recreation%20Policy%20-%20Option%20Two.docx?d=w778991c5513f4e279b94326dfd378cac&csf=1&e=k oQb9c|Recreation policy - yes option>

31/03/2020 5:11:04 PM(UTC+11)

UNRO8PEGJ

Update on deliveries

- Process has been agreed by team members
- Personal Information in comms in putting together a product that will be sent out to returned
- travellers in quarantine outlining the new process

 Food delivery (UberEats) outside of organised supermarket delivery not being accepted at this stage
- Have flagged that may need to revisit if this doesn't rectify high call centre traffic re: food
- All final process and comms documents will come to you <@claire febey674> to approve before being sent out
 Personal Information will give further update on comms in 5.30 meeting
- Felicia Cousins will give further update in 5.30 meeting (edited)

31/03/2020 5:18:48 PM(UTC+11)

SWITH STANDING LEAVE ONLY WAL.

UGGTM4ZJ4 Personal Information

- Demand for hotel rooms for quarantine
 BCG first-pass analysis: 2,250-2,600 rooms ongoing assuming 150-200 new passengers a day; consistent with our back fo the envelope figures. This is likely an overestimate, as
- numbers likely to continue falling.

 BCG to do more detailed analysis tomorrow for different assumption around Australians returning back at higher rates

 • Using cost model from Personal Informati, work out ongoing running costs (edited)

31/03/2020 5:27:26 PM(UTC+11)

Smoking update

- Awaiting input from Person and Person on operations
 Awaiting DHHS advice generally

31/03/2020 5:30:09 PM(UTC+11)

UGGTM4ZJ4 Personal Information

New actions:

- guests

31/03/2020 6:30:00 PM(0TC+11)

U010ZGJDVRB rob.holland

Skype / teleconference bingo tomorrow

Attachments:



Size: 0 File name: Image from iOS.jpg Path: https://files.slack.com/files-pri/TF22A08KE-F0115V0M1C6/download/image_from_ios.jpg

31/03/2020 10:55:53 PM(UTC+11)

U010ZGJDVRB rob.holland

<@Personal Informs > <@UG2SCAD8E> <@UGGTM4ZJ4> - may have already been dealt with but just following up on the actions I captured in the SCC meeting yesterday. We committed to sharing evacuation procedures with EMV and Police SPLO email. We were also going to follow up with hotels and then report back at the 1:30 SCC meeting today

UNROSPEGJ

Hey Rob just sent you an email about this

1/04/2020 11:04:54 AM(UTC+11)

UNR08PEGJ

<@claire.febey674> I have passed on plans through Person about evacuation yesterday and just cc'd you in an update to <@U010ZGJDVRB>. Pls call to discuss if this does not acquit the action.

SWITH STANDING LEAVE ONLY WAL.

UG2SCAD8E claire.febey674

Oh no <@ Personal Information >!

UG2SCAD8E claire.febey674

On State Control Call they're saying that DHHS is working on a daily newsletter for people in quarantine / isolation <@ Personal Information > please let |Personal know

UNR08PEGJ

<@claire.febey674> <@UGGTM4ZJ4> Just an FYI - on advice from Gonul and team, I have updated the smoking policy to say it is not going to be allowed but we will need to feed through to inform the FAQ/info doc etc. Can chat further about this when we all have a sec

1/04/2020 4:55:29 PM(UTC+11)

UGGTM4ZJ4 Personal Information

Updates / issues for 5.30 debrief meeting - please comment in thread <@ Personal Inform <@UNR08PEGJ> <@UG2SCAD8E>

UGGTM4ZJ4 Personal Informati

DHHS escalations

- Smoking policy
- Recreation policy
- · Roles and responsibilities, including DHHS AO role in directing security staff
- On-site VicPol presence
- Is rubbish general waste or biohazard waste? Crown wants to know

- How long does it take to do a "gastro clean" of a hotel room?
 Ensure we have sufficient PPE for hotel and contracted staff
 Need more on-site DHHS resources e.g. nurses and admin support

1/04/2020 5:04:34 PM(UTC+11)

UGGTM4ZJ4Personal Information

- Safety and wellbeing
 Rachaele May will provide resources to help us roster and work in the rhythm of an
- emergency management team
 We are setting up shared mailboxes in central team to support rostering
 Will share resources on fatigue management
- HR will reach out to members on the frontline for welfare checks need people to tell us who is in their teams (edited)

1/04/2020 5:04:47 PM(UTC+11)

UGGTM4ZJ4Personal Information

Governance and team structure

- Work underway to determine what ongoing roles and responsibilities should look like for teammembers in different teams
- Operational model for getting the call centre to work more closely with on-site hotel teams (led by Dnata manager) and resolve more issues on-site is underway, with support from BCG - will work with leads

 • Will be used to inform rostering

- Will be used to inform rostering
 https://vicgov.sharepoint.com/:p:/r/sites/VG000923/Documents1/COVID-19%20Quarantine/DJPR%20team%20structure_v2.pptx?d=w2f4b8fbff12f485bb29eb6a6f78 46a01&csf=1&e=rtPyXa|DJPR team structure_v2.pptx> (edited)

1/04/2020 5:09:08 PM(UTC+11)

UGGTM4ZJ4 Personal Information Actions <@Personal Information Provide roster of who is on each site to DHHS - I believe this is what Personal Information is doing Per hotel specifications - need to be written up for call centres - needs to be allocated • From SP: Write up all the things/supports hotel guests get, and how much this costs - for 1/04/2020 7:25:26 PM(UTC+11) ESWITH STANDING LEAVE ONLY VAL. U010LV6A08YPersonal Informati <@claire.febey674> i think we need a quick meeting to get DJPR/DHHS (including both comms areas) on the same page about getting delivery comms out today - can you be involved or want me to run it? 2/04/2020 12:31:50 PM(UTC+11) UQCUG6FTJ Personal Inform From SCC Meeting 2/04/2020 1:47:23 PM(UTC+11) UQCUG6FTJ Personal Inform DHHS exemptions - need to ensure that we work together on the checkout process and obtain information on the passenger details 2/04/2020 1:48:13 PM(UTC+11) UQCUG6FTJ Personal Inform • This includes people attending funerals and receiving offsite medical attention 2/04/2020 1:48:40 PM(UTC+11) UQCUG6FTJ Personal Inform Determine whether PPE is being provided by DHHS for all DJPR staff and 2/04/2020 1:51:20 PM(UTC+11) UQCUG6FTJ Personal Infor · Request from DHHS the report on exemptions 2/04/2020 1:54:26 PM(UTC+11) UQCUG6FTJ Personal Infor Need to speed up the provision of report 2/04/2020 1:56:18 PM(UTC+11) UNR08PEGJ <@claire.febey674> have provided a ppe update on Trello, namely Personal In now djpr contact and monitoring agent across all hotels. May need to still escalate initial request to dhhs for

2/04/2020 2:21:12 PM(UTC+11)

70

SWITH STANDING LEAVE ONLY WAL.

UF277RHM0 cameron.nolan

Apparently there are 21 cruise ships in Australian waters right now...

2/04/2020 7:17:33 PM(UTC+11)

UQCUG6FTJPersonal Informa

Read this at your peril: https://www.theage.com.au/national/victoria/rocket-with-a-bit-of- cheese-on-it-life-with-food-allergies-in-quarantine-20200401-p54g6b.html>

3/04/2020 1:29:36 PM(UTC+11)

UGMB3A4GZ Personal Information

Gonul has provided feedback on DHHS' service model. The document itself is very confusing to review and provide detailed comments on, but from a high-level perspective on roles and responsibilities her comments were:

- Thought needs to be given to exit arrangements next week, particularly around DHHS' role authorising people to leave.
- DHHS should be taking responsibility for their questionnaires around wellbeing, health and special requirements, including dietary and smoking needs, not DJPR staff as is currently happening. DJPR should be responsible for managing sites and escalating issues to the

3/04/2020 3:54:11 PM(UTC+11)

UF277RHM0 cameron.nolan

It's on! https://www.theage.com.au/national/mercy-flights-thousands-of-stranded-outstell-september-2000-10-6 australians-to-fly-home-20200403-p54gy4.html|https://www.theage.com.au/national/mercy-flights-thousands-of-stranded-australians-to-fly-home-20200403-p54gy4.html

3/04/2020 9:37:37 PM(UTC+11)

UF277RHM0 cameron.nolan

Also worth a read: Behind the scenes of DFAT's efforts to bring Australians home http://www.abc.net.au/news/2020-04-05/dfat-work-repatriating-australians-covid-19-coronavirus-pandemic/12122338

5/04/2020 6:45:01 AM(UTC+10)

UGGTM4ZJ4 Personal Information

NSW quarantine exemptions under criticism https://www.theguardian.com/world/2020/apr/05/hotel-quarantine-a-disaster-and-vulnerable-people-should-be-allowed-home-doctor-says

6/04/2020 10:24:22 AM(UTC+10)

UGMB3A4GZ Personal Information

<@claire.tebey674> <@U010LV6A08Y> Would we be comfortable emailing DJPR Mail Services with a proposal for regional deliveries for them to test with AusPost to see what they can offer?

6/04/2020 1:28:48 PM(UTC+10)

UG2SCAD8E claire.febey674

Good from my perspective <@ Personal Information

6/04/2020 1:29:13 PM(UTC+10)

71

UGGTM4ZJ4 Personal Information <@claire.febey674> <@UF277RHM0> Spoke to DHHS on costs and demand - their thinking on this is very early stage. They haven't really thought through the eligibility of vulnerable cohorts or what services they need. I shared the fact that total costs for quarantine is many multiples of just the room costs. I think this clarified their thinking that they need to tighten eligibility. On costs, I've asked for breakdown of DHHS costs for hotel quarantine as the most critical thing we are after - but no promises from them that this will come today. 6/04/2020 4:35:54 PM(UTC+10) SWITH STANDING LEAVE APPROVAL UGGTM4ZJ4 Personal Information <@cameron.nolan> I'm keen to test the individual line costings with leads. I've played around with it today with Personal Information . Let me know if any issues. 6/04/2020 5:22:01 PM(UTC+10) U010LV6A08Y Personal Informa key updates from the debrief meeting Personal Information are working with DHHS on the strategy to exit people from quarantine Gonul + Personal on 3rd hotel recce of the day (Four Points) - Holiday Inn (Airport) was suitable, Novotel Collins St only for small groups Gonul + Personal have asked for support to identify a Vic Gov site manager for the Trevelodge Docklands - I will email Chuck • <@(Personal Information > has connected PPO with Personal about info they need to ensure security for new notes • <@UG2SCAD8E> | Personal flagged that the SCC wants to stand up the Holiday Inn but we are hoping to save it for a large repat flight • I flagged discussions first thing tomorrow with leads around rostering 6/04/2020 5:42:58 PM(UTC+10) UG2SCAD8E claire.febey674 two quick but big things: UG2SCAD8E claire febey674 The Sydney repatriation flights will be redirected to Melbourne (or potentially Brisbane or Cairns). CONFIDENTIAL COPY TO ANY OF HER PUT Can you please Nine up a meeting for you, me, Gonul, Personal and a team member to talk about hotel • schedule a meet with you, me 1 Personal I and RM on operation scale up 7/04/2020 3:06:46 PM(UTC+10) U010LV6A08Y Personal Informat 7/04/2020 3:08:02 PM(UTC+10) U010LV6A08YPersonal Informa <@claire.febey674> will it work if we meet with Personal In and RM first or not really? 7/04/2020 3:22:07 PM(UTC+10)

U010LV6A08Y Personal Informa and i ready to chat now SWITH STANDING LEAVE ONLY VIAL. 7/04/2020 3:33:11 PM(UTC+10) U010LV6A08Y Personal Inform Skype meeting in your calendar 7/04/2020 3:35:08 PM(UTC+10) U010LV6A08Y Personal Informa key updates from the debrief meeting: process for managing exits still being finalised - Personal Ir to share work to date
 <@claire.febey674> + Person to discuss increasing contact center hours - currently receiving 50-100 messages overnight • need to clarify roles with DHHS regarding PPE provisions (<@UGGTM4ZJ4> - did you lead on this before?) - does not appear to have been provided to Park Royal - awaiting advice from Personal on how we can support on Park Royal specifically 7/04/2020 9:57:57 PM(UTC+10) UGGTM4ZJ4 Personal Information Don't forget your flu shot! https://intranet.djpr.vic.gov.au/news/all-news/changes-to-our- flu-program> 8/04/2020 2:16:03 PM(UTC+10) U010ZGJDVRB Personal Inform Hopefully none of these in Melbourne - https://www.abc.net.au/news/2020-04-08/man-rule coma-with-coronavirus-after-hotel-quarantine-at-crown-perth/12133386> 8/04/2020 8:34:51 PM(UTC+10) UGGTM4ZJ4 Personal Informatio Summary of today's priorities from WIP <@Personal Informats <@UGMB3A4GZ> <@UNR08PEGJ> <@UG2SCAD8E> **Priorities** Personal Information • Structure and roster; as well as supporting Gonul to identify resources Exit planning and escalations (e.g. Exit data) - Persona
 2 site visits - Persona
 Plan for arrivals on Saturday across two hotels Backlog Hotel activation process - Personal Information
Intake process - Personal Information
Confirm day to day management process - Personal Information
Personal Information
Personal I Regional deliveries - Personal Information Inboxes - Personal Inf Follow up on firm mattresses - Personal Info
 Evacuation plans - Personal Info Dietary requirements - Personal Information
 Data reconciliation - Person (edited) 9/04/2020 9:36:11 AM(UTC+10)

UG2SCAD8E claire.febey674

Either way is fine

U010ZGJDVRB rob.holland

https://medium.com/@jemmaxu/day-0-covid19-quarantine-in-melbourne-ab1699411b5e>

On the little for the

74

From: Rob Holland (DEDJTR)

Sent: Sat, 28 Mar 2020 12:00:18 +1100

To: Simon Phemister (DEDJTR)

Subject: Journey map and action plan

Attachments: Journey map and action plan.docx

I've also shared a link to the live version if you can access in SharePoint

ATHE SORED TO BE PUBLICIANTS

Key details:

 3pm meeting wit SCC meeting 10 Airport meeting 2	h Simon – phys am	r.sharepoint.com/:f:/s/VG000923/EhnhYog sical dry run through / step-by-step process	s locked in	TIMES SUBJECT TRUST TO SUBJECT	dexQ?e=wzE0gb		
	Sub-			Actio	on plan		Outstanding
Journey	journey	Proposed process	Owner	Next 24hrs	Next 24 – 48hrs	48hrs +	issues
DRY RUN FOR 3PM Tim Sullivan		Confirm roles and responsibilities, and process from airside to hotel		Hold meeting with agencies: VicPol, SCC, ADF, Border Force, Airport, Skybus, DHHS, DOT Agree process	•	•	 Schedule meeting asap
		All agencies prepare operational plans	RIBLIANS OFF	•	•	•	•
		All agencies ready at 3pm for dry run	RARELLINS RIPL CLAIMS	•	•	•	•
PEOPLE DEPART DESTINATION Lead:		Define scope: All international arrivals from 11.59pm Saturday 28/3, all points of entry	Personal Information	 Map out points of entry, including for private flights Identify whether it applies to cruise ships and cargo 	•	•	 Does it apply to cargo ships and crew? What about unaccompanied minors? Do we need a contingency plan

Laviman	Sub-	Duam accid museus	0	Acti	Action plan		
Journey	journey	Proposed process	Owner	Next 24hrs	Next 24 - 48hrs	48hrs +	issues
				c with	TANDIT DI		from Hong Kong with ~30 pax)
	Pre-check-in	Collect information from airlines on passenger configuration (ideally)	Personal of companies	Get hold of flight and passenger number manifest - approach Melbourne Airport crisis mgmt, team to get through Border Force Other agencies to provide passenger details that they need, DJPR to compile questionnaire	• Can detailed passenger data (incl. family, special requirements, final destination) be collected using plane wifi, Border Force requirement?	•	 Are there confidentiality issues with sharing data that need to be resolved? Passenger information e.g. how many children / families? What info passengers will have at departure?
		Send data to BCG as soon as available (to enable matching)		Define process to capture data (BCG team)	•	•	 What are the personal data implications / storage requirements?
	Check-in	Collect missing data at point of check-in	Personal Information	 Develop a questionnaire for passenger information Connect with airlines on how missing data can be collected 	•	•	•
	CIDENTIAL CONTROL	Inform families	Peteonal Information	Define process and owners for contacting families	•	•	•

						Wipl.	
Journey	Sub-	Proposed process	Owner	Acti	on plan	12 CO	Outstanding
country	journey 110posed process	Troposcu process	Owner	Next 24hrs	Next 24 - 48hrs	48hrs +	issues
	Pre- matching with hotels	Inform hotels of impending arrivals and how many rooms of what size is required		Identify process for concierge – BCG Determine how much can be done in advance	TREDIT DIP		
PEOPLE ARRIVE IN MELBOURNE Team lead:	Disembark	Conduct passenger health check	Present Information DHHS	Confirm process for health check and what happens to sick passengers. DHHS staff to deal with sick passengers – DHHS	•	•	
Airport crisis management team: The second		 Explain to people they are detained and give information on process (propose ~15 people per Concierge) On-site translation service at airport provided by Translating and Interpreting Service (TIS National) for non-English speakers and the National Relay Service for passengers with hearing or speech impairments (on the phone tonight as part of their 24/7 service, but onsite later) 	Border Force / Concierge (TBC)	Need to have staff on the ground to provide information and answer questions – what about airline staff + authorised officer Identify who will perform concierge roles Brief staff / concierge team on what they need to do Agree protocol with Airport on who does what		•	 Check if Cth is doing concierge role Who will do this VicPol? Check chain of custody Decide if on-site translation support needed on-top of phone line Do we need to provide concierge team with PPE?
	Meet Meet	Collect/confirm information from passengers on their hotel needs (i.e. what size room) - check off against 'matching' list (provided by BCG team) Inform BCG team of any changes / updates required to hotel config.	Concierge (TBC)	Identify process for concierge – BCG Identify inputs to Concierge team, e.g., passengers lists, scripts, process, etc. Quickly manually match first two days of flights to	•	•	How do we pay Concierges?

laurmau	Sub-	Drawagad wysess	Owner	Acti	on plan	100°	Outstanding
Journey	journey	Proposed process	Owner	Next 24hrs	Next 24 - 48hrs	48hrs +	issues
		 Confirm with hotels of impending arrivals and how many rooms of what size is required 		blocks of available hotels, ensuring enough flexibility for families – work with hotels to match to individual rooms (BCG)	TANDIT DIP		
	Guide	 Chaperone people (group of ~15) through border checks, customs, and baggage reclaim 	essonal information	Identify number of concierge roles required? (BCG) Identify process for concierge – BCG	•	•	 Can taxi's / private vehilkce be used for overflow?
TRANSPORT Lead: Personal information social information	Bus ready	 Skybus is ready and waiting at airport when each flight arrives Buses know where they are going Bus can hold 15-20 people. Full social distancing does not need to be observed (Braeden Hogan, DHHS). 85 buses available. 	RTANDET CLAIMS	Provide flight schedule and number of people to Skybus and see whether they can meet the need - i.e. do we have enough buses Confirm contractual arrangements	•	•	Are there limitations on shifts?
	Drive to hotel	 People (and bags) are escorted on Skybus vehicles by XX, with 1 authorised person per bus Alternate transport available (taxi) for special needs 	Perropal Information	Ensure sufficient authorised persons available	•	•	 Who is the authorised officer? People who parked their car at the airport?
		Support services will be needed on the bus a learning to the		•	•	•	Test whether this is really required
	Clean and reuse	Transport vehicles are cleaned before reusing		Confirm contractual arrangements with Skybus	•	•	How long will cleaning take before bus is available for nex trip?

						Mark.	
Journey	Sub-	Proposed process	Owner	Action plan			Outstanding issues
, and the second	journey	, , , , , , , , , , , , , , , , , , ,		Next 24hrs	Next 24 - 48hrs	48hrs +	issues
HOTEL CHECK IN Lead: Cam Nolan Tom Nolan Herodal etchnolon Tim Menon Tim Sullivan BCG -	Hotels ready	 Hotels are booked and paid for prior to arrival Hotels need to be close to testing centres where possible 	Personal information	 Procure hotels in metro and regional (X required) Update list of hotels booked Can hotels 'pre-check-in' arrivals? (what would they need to do this?) 	• Procure hotels in metro and regional (X required)	Procure hotels in metro and regional (X required)	Do we have sufficient rooms? How to scale up?
To assist Unni:		 Hotels are briefed beforehand and understand their role and the overall processes, know who to call if there are problems etc. 		Call hotels/ provide info pack	•	•	•
	Check in	 Passengers disembark the transport vehicle one by one and are checked in to the allocated hotel with their bags 	Tim THE	Need more detailed check in procedures e.g. confirm what identity checks are needed at hotel	•	•	•
STAY IN HOTEL ROOM Lead: Rob Leith Tim Sullivan Felicia Cousins	Basic supplies	 Hotel to provide food, toiletries, Wi-Fi, entertainment, laundry, sanitation (limited cleaning services). Need to ensure safety/hygiene for hotel staff. 	Prosent information	 Ensure sufficient hand sanitiser etc. Determine what hotel staff will and won't do 	•	•	 Do hotel staff get PPE? Will hotel staff clean rooms? If not, Lisa Buckingham could engage Spotless.
Rob Holland	Special supplies	Case manager to provide workforce) is a relationship manager and coordinates everything else: Daily check-ins Food and groceries, pharmacy supplies, education supplies, clothing.	Felicia Rob H (groceries)	Determine how much of this could be done by hotel instead Get in touch with Woolworths (Rob H) Case manager role – liaise with	•	•	•

Journey	Sub-	Proposed process	Owner	Action plan			Outstanding
ocuey	journey	Proposed process	Owner	Next 24hrs	Next 24 – 48hrs	48hrs +	issues
		 Other: childcare assistance, work from home needs etc. 		Buckingham to mobilise workforce Lock in EAP arrangements if required – talk to	NEXT 24 - 40HS		
	Health and wellbeing	DHHS ultimately responsible for health and wellbeing Case manager to provide workforce) is a relationship manager and liaises with DHHS to: Connect with mental health needs – connect into DHHS Medical - need access to doctor - on-call doctor service with some mobile GP organisation	Personal Information	Define accountabilities, role and responsibilities of DHHS – get sign off asap by Secretaries. See link with security and return to home.		•	• Confirm need EAP
	Recreation	 Provide access to courtyard / recreation once daily, staggered to ensure social distancing. Separate from any other regular hotel guests. Special provision for families with kids to relocate to regional venue with more space. 	Personal Information	 Give certainty that they will have recreation Check if we meet with Charter of Human Rights write this up – check this with CHO directions 	Recreation policy – by Tues/Wed – Venue specific, access to open space or outside of their room.	•	•
	Cleaning	Specialist COVID cleaning after people go for recreation	Personal information	Engage specialist cleaning contract Use City of Melbourne contract (************************************	•	•	•

In the second se	Sub-	Dren good process	Owner	Action plan			Outstanding
Journey	journey	Proposed process	Owner	Next 24hrs	Next 24 - 48hrs	48hrs +	issues
	Access	Families not allowed to make contact except on exceptional circumstances	Personal Information	Need to brief hotel security about this policy	AND THE DIFF	•	•
	Relocation if required	 Special provision for families with kids to relocate to regional venue with more space. – how to enact this? 		· LE PARTIE PART	•	•	•
RETURN HOME Lead: Ferconal information Leadin Information	Official sign off	DHHS/ confirmation process required to confirm that they are fit to leave	Cam Nolan	Need to have answer on what the process is, but not implement it Check with DHHS	•	•	What is role of health officers check them off
	Transport	Transport back to their house - taxi service managed by hotel to their residence Arrangements for interstate residents or airport	Ferroral orientation Ref. E. H. L.	 Need to have answer on what the process is, but not implement it Who does this? Hotel arrange taxi? \$ for lost flights? 	•	•	•
SECURITY / CHAIN OF CUSTODY Lead: Cam Nolan	Airside	Airside – security managed by ABF and AFP	MAS	Determine chain of custody	•	•	 Who is the authorised officer?
Personal Information	Groundside	Groundside – at airport lobby – managed by Vic Pol and airport security TBC	•	 Determine chain of custody Ensure sufficient authorised officers 	•	•	Who is the authorised officer?Role of ADF?
	Transport	• On the bus - TBC	•	 Determine chain of custody Ensure sufficient authorised officers 	•	•	 Who is the authorised officer?

•	Sub-			Actio	on plan	201Pr	Outstanding
Journey	journey	Proposed process	Owner	Next 24hrs	Next 24 48hrs	48hrs +	issues
	Hotel	 At the hotel – VicPol hand over to hotel security + escalation through Vic Pol as required DHHS authorised officer to command and liaise with hotel security staff Security for people to remain in rooms and supervise during recreation 	Cam	Determine chain of custody Ensure sufficient private security – David Clements looking into labour hire for private security	RADIT DIP	•	 Who is the authorised officer?
	Return	No security required	•	· 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	•	•	•
COMMUNICATIONS Lead: Tess – CF to contact Team shadow:		Premier to speak in the morning	Personal Information	• Q&As back to DPC	•	•	•
		Passengers are greeted with a comms pack upon arrival Note: DPC	Personal of omasson A SHE HE H	Info pack	•	•	 Intersection with DHHS Comms?
		Passengers can call hotline to ask about the program	Personal Information	Scripts for COVID call centre	•	•	•
		 Comms are provided to families of passengers at airport (or before?) 	Personal information	• TBC	•	•	•
GOVERNANCE / ADMIN Lead: Personal foromation Rob Holland		Governance map of Airport, ADF, Border Force, AFP, VicPol, DHHS, DJPR, Concierge, Skybus, hotel, contracted services	Personal Information	Sketch out roles and responsibilities	•	•	•
	TIA	Coordinate information on passenger details with SCC	Rob H with	Determine what practices need to be in place by when	•	•	•

Journey	Sub- journey Proposed process	Proposed process	Owner			ion plan	
		Owner	Next 24hrs	Next 24 - 48hrs	48hrs +	issues	
		Contract management and payment		•	STANDITO	•	•
They are workingThey need to be in	with DHHS on avolved if some	ride the passenger manifests in advance the initial triage eone is going to be sitting in customs alloo ght with self isolation and handing out flye		notels and buses			

Role of Border Force

Claire Febey Cameron Nolan				
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tatilioon oamol	DJPR	Precincts		S
<mark>Tim Sullivan</mark>	DJPR	Logistics		
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Annie Reeves	DJPR	EAP service		
Braeden Hogan	DHHS	DHHS liaison	_	

SCC notes

Preliminary Actions

- Information of quarantine plan disseminated
 - Individuals
 - Families
 - Contracted solutions
- Quarantine accommodation and contracted transport booked
- Workforce identified and in position to conduct tasks
- · Arrival schedules and manifests confirmed

Phase 1 - Reception

- Department of Transport
 - o Sky bus contract Tullamarine
 - Regional transportation
- Department of Jobs, Precincts and Regions
 - o Reception parties established and coordinated at all entry points
 - Melbourne airport and customs liaison
 - Incoming passenger data
- Department of Health and Human Services
 - Health screening
 - Direction at airports and maritime ports
 - Providing access to psychological support
- VICPOL
 - Land side airport security
 - Liaise with AFP and Border Force

Phase 2 – Transport

- Department of Transport
 - Skybus tasked in accordance with projected arrivals
- Department of Jobs, Precincts and Regions

- o Reception parties established at quarantine accommodation
- Department of Health and Human Services
 - Health support officers embarked on busses
 - Welfare services
- VICPOL
 - Bus escorts to ensure isolation compliance

Phase 3 – Accommodation

- Department of Jobs, Precincts and Regions
 - Management of accommodation contracts
 - Reception parties established to coordinate movement of passengers to quarantine accommodation
 - Management of life support for all passengers including food and amenities
 - Manage private security contract to enforce isolation of quarantine accommodation
- Department of Health and Human Services
 - Health checks conducted
 - o COVID-19 testing conducted
 - Medical care provided
 - o Transfer to health facility if required
- VICPOI
 - Provide security reserve force to support private security if required

Phase 4 – Return to the Community

- Department of Transport
 - Provision of transport to passengers to transit to original destination
- Department of Health and Human Services
 - Conduct of health reviews to allow release back into the community
 - Brief members on responsibilities
 - Psychological support

From: Cameron Nolan (DEDJTR)

Sent: Fri, 27 Mar 2020 22:40:15 +1100

To: Unni Menon (DEDJTR); Alex Kamenev (DEDJTR); Personal Information

(DEDJTR); Katrina Currie (DEDJTR)

Cc: David Clements (DEDJTR);Claire Febey (DEDJTR);Simon Phemister

(DEDJTR);Lisa Buckingham (DEDJTR);Rob Holland (DEDJTR)

Subject: Re: security

Team - Rob and I are talking with DHHS about this in the morning.

Ideal model in my mind would be a supply of security staff from Katrina/David/Alex who work under the direction of an authorised officer in DHHS. This DHHS team would induct the security guards and provide on-call advice about what to do in certain situations and determine if any incidents should be escalated to the authorised officer and/or VicPol.

So Katrina- grateful if you could start working out how we can supply this while Rob and I sort out chain of command with DHHS.

Cam Nolan

Executive Director - Priority Projects Unit Department of Jobs, Precincts and Regions

From: Unni Menon (DEDJTR) < Personal Information @ecodev.vic.gov.au>

Sent: Friday, March 27, 2020 10:19:50 PM

Personal Information @ecodev.vic.gov.au>; Katrina Currie (DEDJTR) < Personal Information @ecodev.vic.gov.au>

Cc: David Clements (DEDJTR) < Personal Information @ecodev.vic.gov.au>; Cameron Nolan (DEDJTR) < Personal Information @ecodev.vic.gov.au>; Claire Febey (DEDJTR) < Personal Information @ecodev.vic.gov.au>;

Simon Phemister (DEDJTR) Personal Information @ecodev.vic.gov.au>; Lisa Buckingham (DEDJTR)

< Personal Information @ecodev.vic.gov.au>

Subject: Re: security

Great thanks Alex

Katrina- are there minimum security requirements applicable to all hotels accommodating quarantined international arrivals 'and or COVID infected persons?

Please advice

Thanks

Unni MENON

Personal Information

From: Alex Kamenev (DEDJTR) < Personal Information @ecodev.vic.gov.au>

Sent: Friday, March 27, 2020 10:17 pm

To: |Personal Information (DEDJTR); Unni Menon (DEDJTR); Katrina Currie (DEDJTR)

Cc: David Clements (DEDJTR); Cameron Nolan (DEDJTR); Claire Febey (DEDJTR); Simon

Phemister (DEDJTR); Lisa Buckingham (DEDJTR)

Subject: security

/Unni – I am putting you in touch with the fabulous Katrina Currie.

She has a couple options of standard security labour hire firms

I am handover over you to source requirements

Cheers

Alex

Alex Kamenev

Deputy Secretary, Precincts and Suburbs

Department of Jobs, Precincts and Regions

Level 12, 1 Spring Street, Melbourne, Victoria Australia 3000

Personal Information

djpr.vic.gov.au



From: Chris B Eagle (DELWP)

Sent: Sun, 29 Mar 2020 20:46:46 +1100

To: Claire Febey (DEDJTR); Jason Helps (DHHS)

Cc: Coralie Hadingham (DHHS);Braedan Hogan (DHHS);Personal@health.vic.gov.au

Subject: RE: URGENT issues for resolution by DHHS tonight

Hi Claire,

I have just spoken to Coralie regarding below.

In relation to over night point of contact, as discussed, Nurses for medical requirements, the DHHS Duty Officer can be contacted on Fersonal Information for any other urgent items. We encourage concierge to email SEMC for any non-urgent items, Coralie and Braedan will at in the morning.

With the security staff, there should be no reason they need to exercise any power of arrest or restraint. We ask they do as they would normally do, and verbally request any traveller who has left their room to return. This can be done under the social distancing principles which will not put guard in any danger.

If the traveller ignores advice or becomes threatening, then the guard should contact Vicpol on 000.

Tomorrow we can go through other items, as well as a few other gaps we have identified. I am keen to start writing this up in an agreed operational plan so everyone has a common operating picture, but also so when people change the service continues.

Cheers,

Chris

Chris Eagle | Deputy Chief Fire Officer | Port Phillip Region

Forest Fire Management Victoria Department of Environment, Land, Water and Planning

609 Burwood Hwy, Knoxfield, Victoria, 3180

@delwp.vic.gov.au

FOREST FIRE MANAGEMENT VICTORIA

delwp.vic.gov.au











From: Claire Febey (DEDJTR)

Sent: Sunday, 29 March 2020 8:02 PM

To: Chris B Eagle (DELWP) Personal Information @delwp.vic.gov.au>; Jason Helps (DHHS)

Personal Information @dhhs.vic.gov.au>

Cc: Coralie Hadingham (DHHS)

Personal Information @dhhs.vic.gov.au>; Braedan Hogan (DHHS)

Personal Information @justice.vic.gov.au>; EMC

Executive Officer < Personal Information @scc.vic.gov.au>; Personal @health.vic.gov.au

Subject: URGENT issues for resolution by DHHS tonight

Importance: High

Chris, Jason, team

Thanks so much once again for your collaboration and support today as we move toward a clear set of roles and responsibilities in the days ahead.

We had an operational debrief this evening to identify any outstanding issues for resolution tonight and plan for tomorrow.

Can I please request urgent action by DHHS to resolve four issues tonight:

Presence of Vic Pol and DHHS at our Crown Promenade and Crown Metropole (and future properties) overnight.

- We request that Victoria Police is present 24/7 at each hotel, starting from this evening.
- We ask that DHHS urgently make that request as the Control Agency
- Private security contractors have no powers to exercise and have been instructed only to monitor and escalate issues to Victoria Police.
- Thus a permanent presence is necessary rather than patrols or an on call presence both immediately and for the duration of the quarantine. DJPR has no powers to negotiate this so request this is urgently managed by DHHS.

• DHHS staffing at each active hotel.

- Today's operational experience has shown us that four DHHS staff are needed at a minimum when people are arriving by groups in transport.
- We estimate a starting team of 12 should be rostered to assist with the registration process as we unload people.
- We also request a DHHS team and senior leader allocated to each hotel for the duration of the guarantine period.
- Each hotel will need to be treated as a standalone operation with appropriate DHHS leadership and escalation points.
- We request DHHS on call contact points (name and mobile numbers) for tonight, and advice tomorrow on ongoing on call and overnight staffing provisions.

Health support and escalation of urgent issues.

- We request that a Nurse be stationed 24 hours a day at each hotel, commencing from tomorrow.
- We note that for tonight direct contact numbers have been provided for two Nurses that are working the evening shift.
- o Can we please have urgent confirmation of ongoing arrangement for escalation of urgent and non-urgent health issues, and how these will be logged and resolved by DHHS.
- Noting that we had three health issues today (including one that was urgent) and no clear way to allocate and resolve these through DHHS.

PPE for staff.

- We need PPE urgently for DJPR staff on the ground in hotels.
- We will not be able to continue staffing this operation if it is not confirmed and provided.
- We also request urgent advice from DHHS on a fair and equitable approach to the distribution of PPE to contractors, including security and hotel staff. Specifically anyone who is interacting directly with arrivals (e.g. at the reception desk).

Finally, a matter for resolution tomorrow. We need to work with DHHS to urgently agree a policy for recreation and smoking.

Team, I'm available to talk each of these issues through as needed, but otherwise requesting your urgent advice and resolution on each issue.

I will send you an update shortly on our overnight staffing arrangements and contact points.

Thanks so much in advance.

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

croonal information

Personal Information ecodev.vic.gov.au

Government of Victoria, Victoria, Australia.

This email, and any attachments, may contain privileged and confidential information. If you are not the intended recipient, you may not distribute or reproduce this e-mail or the attachments. If you have received this message in error, please notify us by return email.

From: Claire Febey (DEDJTR)

Sun, 29 Mar 2020 20:55:06 +1100 Sent:

Chris B Eagle (DELWP); Jason Helps (DHHS) To:

Coralie Hadingham (DHHS); Braedan Hogan (DHHS); semc@health.vic.gov.au Cc:

RE: URGENT issues for resolution by DHHS tonight Subject:

Chris, Coralie

Thank you for your quick advice.

While our recommendation and request is still for Vic Pol (or DHHS) to be onsite overnight; will follow the escalation protocol that you have outlined below for tonight, and we can revisit these issues as you have suggested in more detail tomorrow.

I'm also keen to learn about the gaps that you have identified, and absolutely agree we should formalise this in a shared plan as a matter of urgency.

Finally one point of clarification from our end with my apologies - RPE (masks) was delivered to the hotel today. This information wasn't relayed at our end of day briefing due to key staff still being involved in processing arrivals, and so my advice to you was incorrect. Thank you so much for your efforts to deliver PPE today.

Thanks again for your quick response.

Claire

Claire Febey

Executive Director, Priority Projects Unit Office of the Secretary

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

From: Chris B Eagle (DELWP) < Personal Information @delwp.vic.gov.au>

Sent: Sunday, 29 March 2020 8:47 PM

ersonal Informatic @ecodev.vic.gov.au>; Jason Helps (DHHS) To: Claire Febey (DEDJTR) <d

Personal Information @dhhs.vic.gov.au>

Cc: Coralie Hadingham (DHHS) < Personal Information @dhhs.vic.gov.au>; Braedan Hogan (DHHS)

Personal Information @dhhs.vic.gov.au>; @health.vic.gov.au

Subject: RE: URGENT issues for resolution by DHHS tonight

Hi Claire,

I have just spoken to Coralie regarding below.

In relation to over night point of contact, as discussed, Nurses for medical requirements, the DHHS Duty Officer can be contacted on 1300 790 733 for any other urgent items. We encourage concierge to email SEMC for any non-urgent items, Coralie and Braedan will at in the morning.

With the security staff, there should be no reason they need to exercise any power of arrest or restraint. We ask they do as they would normally do, and verbally request any traveller who has left their room to return. This can be done under the social distancing principles which will not put guard in any danger.

If the traveller ignores advice or becomes threatening, then the guard should contact Vicpol on 200.

Tomorrow we can go through other items, as well as a few other gaps we have identified fam keen to start writing this up in an agreed operational plan so everyone has a common operating picture, but also so when people change the service continues.

Cheers,

Chris

Chris Eagle | Deputy Chief Fire Officer | Port Phillip Region

Forest Fire Management Victoria | Department of Environment, Land Water and Planning

609 Burwood Hwy, Knoxfield, Victoria, 3180



delwp.vic.gov.au



From: Claire Febey (DEDJTR) <caire Febey@ecodev.vic.gov.au>

Sent: Sunday, 29 March 2020 8:02 PM

To: Chris B Eagle (DELWP) Personal Information delwp.vic.gov.au>; Jason Helps (DHHS)

Personal Information @dhhs:vic.gov.au>

Cc: Coralie Hadingham (DHHS) < Personal Information @dhhs.vic.gov.au>; Braedan Hogan (DHHS)

< Personal Information @ dkhs.vic.gov.au>; Andrew Crisp (DJCS) < Personal Information @ justice.vic.gov.au>; EMC

Executive Officer Personal Information @scc.vic.gov.au>; Persona @health.vic.gov.au

Subject: URGENT issues for resolution by DHHS tonight

Importance: High

Chris, Jason, team

Thanks so much once again for your collaboration and support today as we move toward a clear set of roles and responsibilities in the days ahead.

We had an operational debrief this evening to identify any outstanding issues for resolution tonight and plan for tomorrow.

Can I please request urgent action by DHHS to resolve four issues tonight:

• Presence of Vic Pol and DHHS at our Crown Promenade and Crown Metropole (and future properties) overnight.

- We request that Victoria Police is present 24/7 at each hotel, starting from this evening.
- o We ask that DHHS urgently make that request as the Control Agency.
- Private security contractors have no powers to exercise and have been instructed only to monitor and escalate issues to Victoria Police.
- Thus a permanent presence is necessary rather than patrols or an on call presence both immediately and for the duration of the quarantine. DJPR has no powers to negotiate this so request this is urgently managed by DHHS.

• DHHS staffing at each active hotel.

- Today's operational experience has shown us that four DHHS staff are needed at a minimum when people are arriving by groups in transport.
- We estimate a starting team of 12 should be rostered to assist with the registration process as we unload people.
- We also request a DHHS team and senior leader allocated to each hotel for the duration of the quarantine period.
- Each hotel will need to be treated as a standalone operation with appropriate DHHS leadership and escalation points.
- We request DHHS on call contact points (name and mobile numbers) for tonight, and advice tomorrow on ongoing on call and overnight staffing provisions.

• Health support and escalation of urgent issues.

- We request that a Nurse be stationed 24 hours a day at each hotel, commencing from tomorrow.
- We note that for tonight direct contact numbers have been provided for two Nurses that are working the evening shift.
- Can we please have urgent confirmation of ongoing arrangement for escalation of urgent and non-urgent health issues, and how these will be logged and resolved by DHHS.
- Noting that we had three health issues today (including one that was urgent) and no clear way
 to allocate and resolve these through DHHS.

PPE for staff.

- We need PPE urgently for DJPR staff on the ground in hotels.
- We will not be able to continue staffing this operation if it is not confirmed and provided.
- We also request urgent advice from DHHS on a fair and equitable approach to the distribution of PPE to contractors, including security and hotel staff. Specifically anyone who is interacting directly with arrivals (e.g. at the reception desk).

Finally, a matter for resolution tomorrow. We need to work with DHHS to urgently agree a policy for recreation and smoking.

Team, I'm available to talk each of these issues through as needed, but otherwise requesting your urgent advice and resolution on each issue.

Will send you an update shortly on our overnight staffing arrangements and contact points.

Thanks so much in advance.

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary **Department of Jobs, Precincts and Regions**Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

ersonal Information Government of Victoria, Victoria, Australia. This email, and any attachments, may contain privileged and confidential information. If you are not the intended recipient, you may not distribute or reproduce this e-mail or the attachments. If you have received this message in error, please notify us by return email.

From: Claire Febey (DEDJTR)

Sent: Mon, 30 Mar 2020 16:43:28 +1100

To: Chris B Eagle (DELWP)

Cc: StateEmergencyManagementCentre SEMC (DHHS);Braedan Hogan

(DHHS); Coralie Hadingham (DHHS)

Subject: RE: Urgent DJPR / DHHS matters to progress today on hotel quarantine

arrangements

I'm the lead Chris and happy to attend.

But can I still request a resolution today at a minimum on:

- Victoria Police presence overnight;
- Smoking;
- Evacuation planning.

I don't see these as issues that can wait for planning discussions tomorrow.

Claire

From: Chris B Eagle (DELWP) < Personal Informatic@delwp.vic.gov.au>

Sent: Monday, 30 March 2020 4:39 PM

To: Claire Febey (DEDJTR) < Personal Information @ecodev.vic.gov.au>

Cc: StateEmergencyManagementCentre SEMC (DHHS) <semc@health.vic.gov.au>; Braedan J Hogan

(DHHS) < Personal Information @dhhs.vic.gov.au>; Coralie K Hadingham (DHHS)

Personal Information @dhhs.vic.gov.au>

Subject: RE: Urgent DJPR / DHHS matters to progress today on hotel quarantine arrangements

Hi Claire,

I am just with Braedan now he is working on response.

I'll read through the roles and responsibilities this arvo / evening, so we can work through in the morning – when hopefully it will be a bit quieter.

On a slightly separate, but connected note, is it possible for the DJPR agency commander to spend the day in the SCC tomorrow. We are getting a couple of people to process map the entire work flow, and it would save a whole lot of time if direct conversations can be held rather than emails and phone.

Cheers,

Chris

Chris Eagle | Deputy Chief Fire Officer | Port Phillip Region Forest Fire Management Victoria | Department of Environment, Land, Water and Planning 609 Burwood Hwy, Knoxfield, Victoria, 3180

ersonal Information





delwp.vic.gov.au











From: Claire Febey (DEDJTR) < @ecodev.vic.gov.au>

Sent: Monday, 30 March 2020 1:32 PM

To: Chris B Eagle (DELWP) < Personal Informatio@delwp.vic.gov.au>

Cc: StateEmergencyManagementCentre SEMC (DHHS) <semc@health.vic.gov.au>; Braedan Hogan

@dhhs.vic.gov.au>; Coralie Hadingham (DHHS)

@dhhs.vic.gov.au>; Jason Helps (DHHS) <</pre>

Subject: Urgent DJPR / DHHS matters to progress today on hotel quarantine arrangements

Importance: High

Hi Chris

There are a few important things we need to urgently progress together today [actions highlighted for ease].

• Roles and responsibilities.

- As you and Jason (and others) have flagged there is an urgent need to agree roles and responsibilities between DHHS and DJPR in line with your role as the Control Agency.
- We have prepared a first draft for your consideration (attached) that describes roles and responsibilities in the 'current state' of delivery.
- o Please note this is a draft for discussion Im completely open to working through the detailed requirements and arrangements from your perspective. It's just a starting point.
- I recommend that we consider this as the possible arrangement for the next 7-10 days.
- We will also prepare a 'steady state' option that we can move to for ongoing implementation which I expect would increase the control and delivery of this function by DHHS.
- o Can you please review this and provide your feedback as soon as possible today.

Hotel complaints

- We have prepared some advice on how to manage complaints at the hotel.
- Please review and update the two sections requiring DHHS advice.

Data collection / management.

- We are progressing this urgently.
- The speed and light staff approach of the reception process in the first 1-2 days has meant that data entry is lagging and we have urgent quality issues.
- As your team has flagged, we also need to coordinate which agency is collecting what, and for what purpose.
- \odot Can we please meet with your lead on this today at \sim 3pm to agree immediate steps.
- As a next step we also need your advice on how to log and close items for escalation.

Smoking policy.

- There was a security issue overnight (see summary below).
- o We have had more smokers arriving in today's groups.
- o DHHS staff on the ground have assisted with the immediate provision of nicotine replacement products (thank you).

- But we need to determine our ongoing policy today regarding smoking so that we can provide consistent advice to people.
- o It is logistically possible to support people to leave their room under supervision at agreed times
- o Can you please provide DHHS direction on whether arrangements can be made under the order for people to smoke.
- o If yes, we will prepare a logistics solution for your consideration.

Recreation policy.

- As flagged on the SCC call people are highly anxious about not being able to leave their room to exercise.
- We recommend from an operational perspective that they not be able to leave.
- However given the health and human rights issues associated with this, can you please provide direction on whether a provision can be made for movement outside of rooms.
- o If yes, we will prepare an approach for your consideration.
- If not, we will prepare advice on in room options for your approval in collaboration with DHHS colleagues.

• On site Victoria Police presence.

- o DJPR still recommends that Victoria Police is present 24/7 at each hotek
- We had one security incident last night (see below).
- Security incidents will increase throughout the quarantine period
- We strongly recommend that private security is not adequate given they have no powers to exercise.
- o Can you please escalate our request for a permanent police presence at each hotel and provide updated advice.

Delivery of food from outside.

- o There have been requests for delivery of food from home or companies such as UberEats.
- Can you please provide a direction on whether delivery of food / perishable items from outside is allowed.

Evacuation planning.

- We recommend the preparation of tailored evacuation plans for each site.
- Please provide direction on additional and specific measures that need to be included in evacuation plans in the context of quarantine.

I note that DHHS is also making arrangements for the two unaccompanied minors that will arrive today. Thank you for your work on this and please advise of any additional provisions that are required of DJPR to support their care.

Chris, thanks so much in advance and happy to talk all of the above through when your and / or the team is ready.

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St. Melbourne, Victoria Australia 3000

Email from Unified Security to Katrina Currie regarding security incident at Crown Metropole on 30/3/20

Hi Katrina,

I hope you are well, at 0307Hrs we had a significant issue, where a male from room 1516 decamped from his room, as he was in need of a cigarette.

The Male in question was quite agitated and highly augmentative, he refused direction from officers and egressed to the ground floor.

Officers contacted our night shift Duty Manager in relation to the situation.

At 0309Hrs, Duty Manager greeted the Male in question, after a brief discussion the male complied with directive and was escorted back to his accommodation.

As indicated during our meeting the officers are complying with hands off Policy

Regards	AND AND OTH
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************	**************

From: Claire Febey (DEDJTR)

Sent: Mon, 30 Mar 2020 17:14:15 +1100

To: Braedan Hogan (DHHS); Chris B Eagle (DELWP)

Cc: StateEmergencyManagementCentre SEMC (DHHS);Coralie Hadingham

(DHHS); Jason Helps (DHHS)

Subject: RE: Urgent DJPR / DHHS matters to progress today on hotel quarantine

arrangements

Thanks Braedan and team

Noting we expect responses on the following tonight:

- Smoking;
- Vic Pol.

DHHS and DJPR will work together tomorrow on:

- Roles and responsibilities;
- Recreation;
- Data collection and management (Rob Holland will respond to your email).

We have now resolved:

· Hotel complaints.

We will progress the following and update you:

- Policy for food delivery from outside;
- Evacuation planning.

Happy to take a call on staffing whenever you're ready.

Thanks

Claire

From: Braedan Hogan (DHHS) < Personal Information @dhhs.vic.gov.au>

Sent: Monday, 30 March 2020 4:43 PM

To: Claire Febey (DEDJTR) < Parsonal Informatio @ecodev.vic.gov.au>; Chris B Eagle (DELWP)

Personal Information delwp.vic.gov.au>

Cc: StateEmergencyManagementCentre SEMC (DHHS) <semc@health.vic.gov.au>; Coralie K

Hadingham (DHHS) < Personal Information @dhhs.vic.gov.au>; Jason Helps (DHHS)

Personal Information Ddhhs.vic.gov.au>

Subject: RE: Urgent DJPR / DHHS matters to progress today on hotel quarantine arrangements

HI Claire,

Thanks for sending this through – we will need to work through some of these not urgent issues tomorrow – but see my responses below.

Keen to also have a discussion about staffing levels at the hotel to ensure effective coverage.

Give me a call if you have any questions.

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management Branch Regulation, Health Protection & Emergency Management Division Department of Health and Human Services 50 Lonsdale Street Melbourne Victoria 3000

From: Claire Febey (DEDJTR) < Personal Informatio @ecodev.vic.gov.au>

Sent: Monday, 30 March 2020 1:32 PM

To: Personal Informatio (DELWP) < Personal Informatio @delwp.vic.gov.au >

Cc: StateEmergencyManagementCentre SEMC (DHHS) < semc@health.vic.gov.au >; Braedan Hogan

(DHHS) < Personal Information and dhistory of the control of the c

Personal Information @dhhs.vic.gov.au>; Jason Helps (DHHS) Personal Information @dhhs.vic.gov.au>

Subject: Urgent DJPR / DHHS matters to progress today on hotel quarantine arrangements

Importance: High

Hi Chris

There are a few important things we need to urgently progress together today [actions highlighted for ease].

Roles and responsibilities. May be able to review later tonight but likely tomorrow

- As you and Jason (and others) have flagged there is an urgent need to agree roles and responsibilities between DHHS and DJPR in line with your role as the Control Agency.
- We have prepared a first draft for your consideration (attached) that describes roles and responsibilities in the 'current state' of delivery.
- Please note this is a draft for discussion—I'm completely open to working through the detailed requirements and arrangements from your perspective. It's just a starting point.
- I recommend that we consider this as the possible arrangement for the next 7-10 days.
- We will also prepare a steady state option that we can move to for ongoing implementation which I expect would increase the control and delivery of this function by DHHS.
- Can you please review this and provide your feedback as soon as possible today.
- Hotel complaints. attached
 - We have prepared some advice on how to manage complaints at the hotel.
 - Please review and update the two sections requiring DHHS advice.
- Data collection / management. See previous email from me
 - We are progressing this urgently.
- The speed and light staff approach of the reception process in the first 1-2 days has meant that date entry is lagging and we have urgent quality issues.
- As your team has flagged, we also need to coordinate which agency is collecting what, and for what purpose.
- o Can we please meet with your lead on this today at ~3pm to agree immediate steps.
- As a next step we also need your advice on how to log and close items for escalation.
- Smoking policy. Public Health Command are working on a solution
 - There was a security issue overnight (see summary below).
 - We have had more smokers arriving in today's groups.
 - DHHS staff on the ground have assisted with the immediate provision of nicotine replacement products (thank you).

- But we need to determine our ongoing policy today regarding smoking so that we can provide consistent advice to people.
- o It is logistically possible to support people to leave their room under supervision at agreed times
- o Can you please provide DHHS direction on whether arrangements can be made under the order for people to smoke.
- o If yes, we will prepare a logistics solution for your consideration.
- Recreation policy. Public Health Command are working on a solution
 - o As flagged on the SCC call people are highly anxious about not being able to leave their room to exercise.
 - o We recommend from an operational perspective that they not be able to leave.
 - However given the health and human rights issues associated with this, can you please provide direction on whether a provision can be made for movement outside of rooms.
 - o If yes, we will prepare an approach for your consideration.
 - If not, we will prepare advice on in room options for your approval in collaboration with DHHS colleagues.
- On site Victoria Police presence. Being discussed with VicPol by DHHS
 - o DJPR still recommends that Victoria Police is present 24/7 at each hotek
 - We had one security incident last night (see below).
 - Security incidents will increase throughout the quarantine period
 - We strongly recommend that private security is not adequate given they have no powers to exercise.
 - o Can you please escalate our request for a permanent police presence at each hotel and provide updated advice.
- Delivery of food from outside. No issues from us as long as the passenger is paying and arrangements are in place to delivery and maintain distancing. Also note this will have an impact on cleaning and unsure of frequency - can you advise?
 - There have been requests for delivery of food from home or companies such as UberEats.
 - Can you please provide a direction on whether delivery of food / perishable items from outside is allowed.
- Evacuation planning. Crown should adjust current evacuation planning to facilitate physical distancing and the role of security to ensure compliance.
 - We recommend the preparation of tailored evacuation plans for each site.
 - Please provide direction on additional and specific measures that need to be included in evacuation plans in the context of quarantine.

I note that DHHS is also making arrangements for the two unaccompanied minors that will arrive today. Thank you for your work on this and please advise of any additional provisions that are required of DJPR to support their care.

Chris, thanks so much in advance and happy to talk all of the above through when your and / or the team is ready.

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

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The Male in question was quite agitated and highly augmentative, he refused direction from officers and egressed to the ground floor.

Officers contacted our night shift Duty Manager in relation to the situation.

At 0309Hrs, Duty Manager greeted the Male in question, after a brief discussion the male complied with directive and was escorted back to his accommodation.

As indicated during our meeting the officers are complying with hands off Policy

Regards	L BONDED
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From: Claire Febey (DEDJTR)

Sent: Mon, 30 Mar 2020 13:31:53 +1100

To: Chris B Eagle (DELWP)

Cc: StateEmergencyManagementCentre SEMC (DHHS);Braedan Hogan

(DHHS); Coralie Hadingham (DHHS); Jason Helps (DHHS)

Subject: Urgent DJPR / DHHS matters to progress today on hotel quarantine

arrangements

Attachments: Hotel quarantine complaints protocol for the call centre.docx, 20200329 -

Hotel governance and staffing plan v1.pptx

Importance: High

Hi Chris

There are a few important things we need to urgently progress together today [actions highlighted for ease].

Roles and responsibilities.

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- products (thank you).
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- We recommend the preparation of tailored evacuation plans for each site.
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I note that DHHS is also making arrangements for the two unaccompanied minors that will arrive today. Thank you for your work on this and please advise of any additional provisions that are required of DJPR to support their care.

^{ersonal Inf}thanks so much in advance and happy to talk all of the above through when your and / or the team is ready.

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

Personal Information

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As indicated during our meeting the officers are complying with hands off Policy

Regards

JEOR JEE PURPOPIL PRANDOR PRIVACY CLAIM

From: Simon Phemister (DJPR)

Sent: Wed, 1 Jul 2020 18:25:27 +1000

To: Personal Information (VICMIN)

Subject: Fwd: DJPR - DHHS role clarity

Get Outlook for iOS

From: Claire Febey (DJPR) < Personal Informatio @ecodev.vic.gov.au>

Sent: Tuesday, June 30, 2020 3:12:41 PM

To: Simon Phemister (DJPR) < Personal Information r@ecodev.vic.gov.au>

Subject: FW: DJPR - DHHS role clarity

From: Claire Febey (DEDJTR)

Sent: Sunday, 29 March 2020 5:29 PM

To: Personal Information (DHHS) < Personal Informatic@dhhs.vic.gov.au>

Cc: Rob Holland (DEDJTR) Personal Information @ecodev.vic.gov.au>; Braedan Hogan (DHHS)

@dhhs.vic.gov.au>; Andrea Spiteri (DHHS) < Personal Information @dhhs.vic.gov.au>; Chris

B Eagle (DELWP) < Personal Information @delwp.vic.gov.au>; Personal Information (DJCS) Personal Information >; Melissa Skilbeck (DHHS) < Personal Information

Personal Information ; Melissa Skilbeck (DHHS) (Personal Information @dhhs.vic.gov.au>;

Coralie Hadingham (DHHS) < Personal Information @dhhs.vic.gov.au>; Michael Mefflin (DHHS)

Subject: RE: DJPR - DHHS role clarity

Jason, Chris

Many thanks to you both for our discussions today. We're grateful for the clarity on your expectations regarding roles and responsibilities.

As agreed, we will continue with everything as is planned for the next 24 hours. This includes decisions on the placement of arrivals in hotels, engaging contractors to activate our next site (Crowne Plaza) and decisions about the daily and packages of support provided to people in quarantine.

We will escalate any issue to you that relates to the direction, for example the need to determine rules regarding recreation, and provide you with an update later tonight on arrangements for tomorrow.

Tomorrow we will commence planning with you and the team to clarify roles and responsibilities in the first instance, and then an orderly transition to ongoing arrangements.

Many thanks

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary **Department of Jobs, Precincts and Regions**Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000



From: Jason Helps (DHHS)

Sent: Sunday, 29 March 2020 4:58 PM

To: Claire Febey (DEDJTR) Personal Information @ecodev.vic.gov.au>

Cc: Rob Holland (DEDJTR) Personal Information @ecodev.vic.gov.au>; Braedan Hogan (DHHS)

Personal Information @dhhs.vic.gov.au>; Andrea Spiteri (DHHS) Personal Information @dhhs.vic.gov.au>; Chris

B Eagle (DELWP) Personal Information >; Andrew S Crisp (DJCS)

Personal Information @justice.vic.gov.au>; Melissa Skilbeck (DHHS) Personal Information (DHHS)

Personal Information @dhhs.vic.gov.au>; Michael Mefflin (DHHS)

As you are aware The Department of Health and Human Services (DHHS) is the Control Agency for the COVID-19 Pandemic, and at this time I am the State Controller—Health appointed by the Control Agency under the *Emergency Management Act*.

Fersonal Information is the Chief Health Officer leading the Public Health response under the *Public Health and Wellbeing Act*.

As the Control Agency, DHHS has overall responsibility for all activities undertaken in response to this emergency. The response to the direction for all passengers returning to Victoria after 11.59 p.m. 28/03/20 requiring to be quarantined in approved accommodation is being led by Dep State Controller Chris Eagle as "Operation Soteria".

As discussed today I am extremely grateful to the support DJPR have provided to date, your team have demonstrated flexibility, good planning and expertise which has contributed to making the first day as successful as it could be. I also look forward to your team continuing to support Operation Soteria.

It is important however that we clarify some roles and responsibilities and work on a transition plan over the next day or so. Chris Eagle will work with you on this. Many of the roles DJPR provided in the planning, and operationally today will need to transition to the Deputy State Controller and DHHS as the Control Agency. I would like to clarify that, at a minimum, I would request DJPR continue to provide the valuable work in procurement of hotels and the services required to support people under the direction to detain, I don't underestimate the complexity of this task in the current environment. It will be vital that DHHS make the operational decisions in regards to which hotels we utilise and when, along with other decisions which require a risk assessment by the Chief Health Officer or delegated Authorised Officer.

It was a pleasure to discuss this with you today and I sense the value of working closely on this for both agencies.

Please contact me again if I can assist or if a resolution cannot be reached during the handover process.

Regards

Jason Helps

Deputy Director Emergency Operations and Capability | Emergency Management Branch Department of Health and Human Services | 50 Lonsdale Street, Melbourne Victoria 3000

www.dhhs.vic.gov.au | www.emergency.vic.gov.au | white https://twitter.com/VicGovDHHS

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ORTO REAL

From: Claire Febey (DEDJTR)

Sent: <u>Tue, 31 Mar 2</u>020 10:08:12 +1100

To: (DPC);'SCC-Vic (Intelligence Section)'

Subject: RE: Hotel data (Crow Metropol / Crown Promenade)

Thanks so much for the feedback

Personal

Looking forward to working with you to support proper custody by DHHS.

Quick question, Vic Pol has been enormously keen to receive the same data from us.

Can I provide this directly or is there a direction or process I should follow?

Many thanks

Claire

From: Personal Information (DPC) < Personal Information (@dpc.vic.gov.au>

Sent: Tuesday, 31 March 2020 8:37 AM

To: Claire Febey (DEDJTR) < Personal Information @ecodev.vic.gov.au>; SCC-Vic (Intelligence Section)

Personal Information

Subject: Re: Hotel data (Crow Metropol / Crown Promenade)

Thanks Claire, and thanks again to you, and co for your great work. It's been a huge job. You have achieved in 48hrs what would ordinarily require months of planning. Kudos to you.

I will grab someone from DHHS today and between us we will progress this work. The plan is to transition full custody of the data and related processes to DHHS.

Thanks

Personal Information

State Intelligence Manager, COVID-19

Department of Premier and Cabinet, Victoria

Get Outlook for iOS

From: Claire Febey (DEDJTR) < Personal Information@ecodev.vic.gov.au>

Sent: Tuesday, March 31, 2020 8:28:39 AM

To: 'SCC-Vic (Intelligence Section)' < Personal Information >; Personal Information

dpc.vic.gov.au>

Subject: Hotel data (Crow Metropol / Crown Promenade)



Please find attached an initial capture of data provided across Crown Promenade and Crown Metropol.

	Crown Metropol	Crown Promenade	Total
Total person count	283	288	571
otal person count with passport data	234	209	443

Some very important things to note with this data:

- All data is provided by the hotels and is expected to be up to date as of 3pm 30 March (incl. room allocation).
- Check-in / Check-out dates need to be reconciled back the flight manifests. The hotel check-in
 dates provided by the hotel were listed on the date that Vic Govt. reserved the room, not the
 actual check-in date for each guest. We propose that we reconcile this data with the passenger
 arrival data in order to determine the original date. We have highlighted the instances which need
 to be confirmed.
- Date of birth and passport data is not complete for all quarantined persons within the list, this is due to two reasons:
 - o For some Sunday arrivals, the data was not complete or not legible because it was based on photos. This won't happen beyond tomorrow, since passports will be scanned from now on.
 - o For Monday arrivals, we will update / upload this information tomorrow (as per our data management process, we will always be one day out)
- Staff / contractor rooms (e.g. for the nurses) have been excluded
- Non-occupied 'reserved' rooms have also been excluded

Can we please request that this information is now reconciled with passenger arrival and DHHS collected data to confirm the date and flight on which they arrived.

Today DJPR will take the following actions to continue improving the quality of the data provided by hotels:

- Provide complete hotel data until 11.59pm Monday 30 March across the three active sites;
- Request that hotels collect missing passport information by contacting individual rooms by phone;
- Confirm that data collection practices are now properly set up across all three sites (scanning of all
 passports, accurate arrival day entry); and
- Contact lead at Crowne Plaza to ensure data practices at new site are in line with expected practices.

We understand that accurate data capture and timely sharing is of the utmost importance.

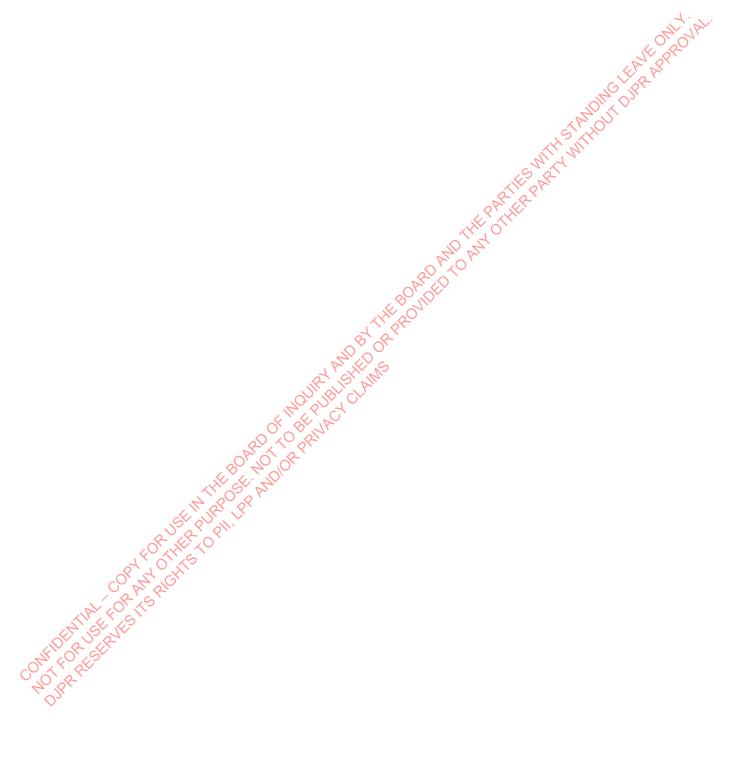
Please let me know how you would like together today on this, especially the reconciliation process and the DJPR actions outlined above.

Many thanks

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions
Level 36, 121 Exhibition St. Melbourne, Victoria Australia 3000
Personal Information



From: Cameron Nolan (DEDJTR)

Sent: Sat, 28 Mar 2020 17:40:41 +1100

To: Michael N Mefflin (DHHS); Braedan J Hogan (DHHS); Personal Information

(DHHS) Personal Information (DHHS)

 Cc:
 Rob Holland (DEDJTR)
 Personal Information
 (DEDJTR); David Clements

 (DEDJTR)
 DPC); Katrina Currie (DEDJTR)
 Personal Information
 DEDJTR); Unni Menon

(DEDJTR); Claire Febey (DEDJTR); Personal Information (DEDJTR)

Subject: RE: Hotel security briefing

Attachments: Security in hotels - roles and responsibilities.docx

Hi DHHS team

Thanks for the discussions today on briefing security guards on how they should assist authorised officers to enforce the CHO's directions inside the hotels.

As discussed, you are providing written material to these security contractors so they can properly understand what their role is in enforcing these directions and who to contact if something goes wrong. In case it's helpful, we have started on a two-page Q&A document that could be sent from DHHS to these contractors. If this information is not already covered off in the material you are preparing, we suggest using this doc as a base by filling out more information or correcting anything that we have got wrong.

Note we think there are some additional important public health questions that will need to be answered for each hotel in coordination with DHHS:

- Where can guests go in each hotel and when? Can they go to any communal or outside areas, or are they literally not meant to leave their room at all? If some movement is permitted in the hotel, this will need to be specified and agreed for each hotel depending on its facilities and layout.
- Should hotels be amending their evacuation plans to incorporate social distancing measures? They will also need to make a rangements so that people don't enter the community if an evacuation is required, but this is more a security issue than a public health one.

So to be clear—we are working on the basis that the attached document has been handed over to you to finish off (if 4t's not already covered in what you're preparing).

Very happy to take calls and provide further assistance.

Thanks Cam

Cam Nolan

Executive Director | Priority Projects Unit **Department of Jobs, Precincts and Regions** Level 36, 121 Exhibition St, Melbourne VIC 3000 -----Original Appointment-----

From: Cameron Nolan (DEDJTR)

Sent: Saturday, 28 March 2020 12:43 PM

To: Cameron Nolan (DEDJTR); Katrina Currie (DEDJTR); Michael Mefflin (DHHS); David Clements

(DEDJTR); Personal Information (DPC); Braedan Hogan (DHHS)

(DEDJTR); Cc: Rob Holland (DEDJTR)

Nigel Coppick

Subject: Hotel security briefing

When: Saturday, 28 March 2020 2:00 PM-2:30 PM (UTC+10:00) Canberra, Melbourne, Sydney.

Where: Skype Meeting: click on the link in this invite to join

Purpose of the meeting: For DHHS to provide guidance to the security firm on the roles, responsibilities and coordination points to help manage people being detained at the hotels.

Join Skype Meeting

Trouble Joining? Try Skype Web App

Help Legal

Any issues connecting let me know

Cam

Cam Nolan

Executive Director | Priority Projects Unit

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St. Melbourne VIC 3000

Personal Information @djpr.vic.gov.au



We acknowledge the traditional Aboriginal owners of country throughout Victoria, their ongoing connection to this land and we pay our respects to their culture and their Elders past, present and future.

Security consultants

Roles and responsibilities for hotel quarantine



Core duties at the hotel

Security personnel have been engaged to support authorised officers from the Victorian Department of Health and Human Services (DHHS) and Victoria Police to uphold mandatory quarantine directions from Chief Health Officer. This means ensuring the safety of quarantined guests and the people that those guests will interact with.

These duties are as follows:

- Support the Chief Health Officer, authorised officers and Victoria Police in the enforcement of the *Isolation (International Arrivals) Directions* (Attachment A) on the premises of the hotel.
- Ensure quarantined guests do not leave the hotel for the period of their quarantine without the permission of an authorised officer.
- Ensure that any disputes involving quarantined guests in the hotel are de-escalated without physical contact. If unable to de-escalate, Victoria Police should be contacted immediately.
- Provide advice to quarantined guests on which areas they can go to in the hotel
 (Attachment B) and ensure that this is upheld.

When do my duties start?

Victoria Police officers will be present at the hotel to meet quarantined guests upon their arrival. Once they have been checked in Victoria Police officers will hand over to the security personnel to escort guests to their rooms and oversee their safety during their stay.

Will there be existing hotel security and how should we work with them?

You should fully coordinate and cooperate with the security and operations team at the hotel. Your manager will need to liaise with the hotel's existing security and operations team for advice on hotel layouts, access and exit points and emergency evacuation protocols.

Who should I contact if I don't know the answer to a guest's question?

If a **guest has a question** about their quarantine, they should contact a dedicated information line at [insert number] which will answer any queries guests may have.

If a security team member has a question about how to ensure the safety of guests and uphold the Chief Health Officers directions, speak to your manager. If they are unable to provide an answer, your manager should contact [insert contact name and number] at DHHS.

Are quarantined guests allowed to leave the hotel?

As stated in the *Isolation (International Arrivals) Directions,* quarantined guests are not allowed to leave the grounds of the hotel for the duration of their quarantine.

Are quarantined guests allowed to visit other areas of the hotel or use the hotel facilities?

This will be dependent on the policy of the individual hotel as directed by an authorised officer. The details of movement within each hotel is set out in **Attachment B**.

In the event that guests are not allowed to use hotel facilities or travel to other parts of the hotel, you should inform guests of this if they ask. If they do not comply, your manager should contact Victoria Police.

Are friends and family of guests allowed to visit people who are quarantined at the hotel?

No. As stated in the *Isolation (International Arrivals) Directions*, apart from medical professionals in an emergency situation, the only other external parties who can enter the hotel to see a quarantined guest are the parents, guardians or temporary carers of quarantined guests under 18 years old. All other external parties are not permitted to visit quarantined guests.

Can I use physical contact in the enforcement of my duties?

Manhandling of quarantined individuals is not permitted at any time. Any disputes that cannot be deescalated verbally should be referred to your manager who will contact Victoria Police directly. The Victoria Police contact is [contact name and number].

What happens in the event of an evacuation?

Your security team, the hotel, Victoria Police and the Melbourne Fire Brigade will need to establish evacuation protocols that ensure the safety of all people in the hotel and, where possible, ensure social distancing requirements are met.

What should to if medical assistance is required

A 24 hour nurse service will be stationed at the hotel. Their contact number is [contact number]. If it is emergency call 000.

What about social support for guests who need help?

Red Cross members will be on site to provide additional support where needed. The key contact for Red Cross is [contact name and number].

From: Cameron Nolan (DJPR)

Sent: Tue, 30 Jun 2020 09:19:25 +1000

To: Claire Febey (DJPR); Charles Rankin (DJPR); Rob Holland (DJPR)

Subject: FW: Security briefing and role

Attachments: RE: Hotel security briefing, Security support for hotel quarantine .docx,

Security in hotels - roles and responsibilities.docx

FYI

From: Cameron Nolan (DEDJTR)

Sent: Monday, 30 March 2020 5:27 PM

Cc: Chris B Eagle (DELWP) < Personal Informati@delwp.vic.gov.au>; Andrea Spiteri (DHHS)>

@dhhs.vic.gov.au>; StateEmergencyManagementCentre SEMC (DHHS)

<semc@health.vic.gov.au>; Claire Febey (DEDJTR) < Personal Informatio@ecodev.vic.gov.au>; Katrina Currie (DEDJTR) < Personal Information @ecodev.vic.gov.au>; David Clements (DEDJTR)

Personal Information @ecodev.vic.gov.au>

Subject: RE: Security briefing and role

Hi all

The attached document provides an overview of the instructions we have been giving verbally to our two contracted private security companies: Unified and Wilson. However, we see DJPR's role as leading the contracting of the security companies, whereas DHHS and SCC should be 'in command' of them.

To that end, we sent the attached email on Saturday with a suggested brief and Q&As for DHHS to complete and provide to the security companies. I suggest updating this document and formally providing it to the security managers at each site.

There are a few critical things that we have assumed and communicated, including that the private security companies should not physically engage with any people under quarantine and instead escalate to VicPol. But you should confirm those instructions with the security companies.

Happy to discuss more.

Thanks

Cam

Cam Nolan

Executive Director | Priority Projects Unit

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne VIC 3000

rsonal Information

From: Claire Febey (DEDJTR) < @ecodev.vic.gov.au>

Sent: Monday, 30 March 2020 4:29 PM

To: Braedan J Hogan (DHHS) < Personal Information @dhhs.vic.gov.au >

Personal Information and dhhs.vic.gov.au >; StateEmergencyManagementCentre SEMC (DHHS)

<<u>semc@health.vic.gov.au</u>>; Cameron Nolan (DEDJTR) < <u>Personal Information</u> <u>ecodev.vic.gov.au</u>>

Subject: RE: Security briefing and role

Sure Braedan.

I am cc'ing my colleague Cam Nolan who has oversight of this.

Please let us know how you would like to connect.

Claire

From: Braedan Hogan (DHHS) < Personal Information @dhhs.vic.gov.au>

Sent: Monday, 30 March 2020 4:26 PM

To: Claire Febey (DEDJTR) < Personal Information@ecodev.vic.gov.au >

Cc: Chris B Eagle (DELWP) < Delwp.vic.gov.au >; Andrea C Spiteri (DHHS)

Personal Information and this vic.gov.au >; StateEmergencyManagementCentre SEMC (DHHS)

<semc@health.vic.gov.au>

Subject: Security briefing and role

Hi Claire,

We are seeking to understand how the private security have been briefed and what there role is and the limits of this role.

We are considering the role of security, AO's and VicPol.

Braedan

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management Branch

Regulation, Health Protection & Emergency Management Division

Department of Health and Human Services

50 Lonsdale Street Melbourne Victoria 3000

Personal Information

Jet Polit, t

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From: Claire Febey (DEDJTR)

Sent: Sat, 4 Apr 2020 13:06:26 +1100

To: 'SCC-Vic (State Controller Health'

Cc: Andrea C Spiteri (DHHS);Braedan J Hogan (DHHS);Jason Helps (DHHS)

Subject: Hotel contracts & approach to site selection

Attachments: All Seasons Resort Hotel Agreement Signed.pdf, Batman Hill Agreement Signed.pdf, Bell Tower Inn - Schedule to the Agreement Signed.pdf, Crowne Plaza Agreement Signed.pdf, Four Points Melbourne Agreement Signed.pdf, Holiday Inn Melbourne Airport Schedule to the Agreement Signed.pdf, Mecure Welcome Melbourne Agreement Signed.pdf, Melbourne Marriott Hotel - Schedule to the Agreement Signed.pdf, Mid City Ballarat Schedule to the Agreement Signed.pdf, Novotel Geelong - Agreement Signed.pdf, Novotel Glen Waverley Agreement Signed.pdf, Novotel Melbourne on Collins Agreement Signed.pdf, Pan Pacific Schedule to the Agreement Signed.pdf, Park Royal Melb Airport Schedule to the Agreement Signed.pdf, Peppers the Sands Resort, Torquay Agreement Signed.pdf, Rydges Carlton Agreement Signed.pdf, Signed Agreement - Rydges Geelong.pdf, Travelodge Docklands Agreement Signed.pdf, Travelodge Southbank Agreement Signed .pdf, Vibe Hotel Marysville - Schedule to the Agreement for the provision of accomodation.pdf, Zagames House Agreement Signed.pdf

Colleagues

Please see attached contracts currently held with hotels.

I committed to sending these to you earlier this week, my apologies for the delay.

Quarantine

Following our call just now can I please ask that State Control convene a meeting on Monday to:

- Be briefed on how site assessment and selection has been happening to date (by DJPR); and
- Outline how you will take leadership of this process moving forward with DJPR as the support agency.

Broader hotel use

Can I also request your advice on the decision-maker for the selection of hotels for broader purposes.

We had some great conversations with Andrea and Braedan this week and activated Rydges as a property that will take confirmed COVID-19 cases from the community (e.g. family violence context, no other appropriate place to self-isolate).

It has just been flagged with me that there has been some exploration today (with resonal little in this as to whether Rydges can be repurposed for health workers.

I would be grateful for your advice on whether State Control will also lead and coordinate all discussions regarding broader hotel allocation.

I will also act as the central point for DJPR on this work (supported by Unni Menon and to ensure we are coordinated across quarantine and other hotel uses.



Thanks in advance

Claire.

Claire Febev

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions

Personal Information

From: Braedan Hogan (DHHS)

Sent: Mon, 30 Mar 2020 15:20:58 +1100

To: Claire Febey (DJPR); Personal Information (DHHS)

Cc: Chris B Eagle (DELWP);Andrea C Spiteri (DHHS);StateEmergencyManagementCentre SEMC (DHHS)

Subject: Accommodation allocation for tomorrow

HI Claire and Persona

Can we please be advised ASAP of tomorrow hotel allocations and let me know when we can expect these daily?

We need to be able to make staffing arrangements with as much notice as possible.

Thanks.

Braedan

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management Branch

Regulation, Health Protection & Emergency Management Division

Department of Health and Human Services 50 Lonsdale Street Melbourne Victoria 3000

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From: Claire Febey (DEDJTR)

Sent: Fri, 3 Apr 2020 21:57:11 +1100

To: Coralie Hadingham (DHHS);Felicia Cousins (DEDJTR)

Cc: Personal Information (DHHS); Andrea C Spiteri (DHHS); Pam Williams (DHHS);

ersonal Informati<mark>c</mark> (DHHS);Michael N Mefflin (DHHS);Merrin C Bamert (DHHS);Meena Naidu (DHHS);Braedan

J Hogan (DHHS);Scott C Falconer (DELWP);'SCC-Vic (State Controller

Health';StateEmergencyManagementCentre SEMC (DHHS);Gonul Serbest (DEDJTR)

(DEDJTR)

Subject: RE: Proposed use of Parkroyal hotel - Airport

Hi Coralie

Thanks for checking in and raising your questions about the use of Parkroyal on Sunday.

We're enormously keen to meet DHHS' full set of needs with hotel selection, and from your email it seems that there are additional parties across DHHS that we should be involving earlier in the selection and assessment of sites. My sincere apologies if the right people haven't been involved and if you can give me advice on this I'll take it up as an immediate action for improvement with the team on Monday.

However it would be extremely challenging to change from Parkroyal at this late stage as we do not have an alternative property prepared and activated:

- Parkroyal is scheduled to come online on Sunday, but with the recent addition of a new flight may
 now be required on Saturday night;
- The hotel has been fully prepared by the DIPR team today including an assessment by security, Vic Pol and other partners, food preparation has commenced and groceries and other essential supplies have been prepositioned at the notel.

I completely acknowledge that from a DHHS perspective it is preferable to cluster sites. I am more than happy to share the full list of sites that have been contracted and work with you to better understand how you would like to rank these from a location perspective.

However I strongly recommend that we proceed with Parkroyal as the next site for Saturday night or Sunday as we do not have an alternative property prepared.

Please let me know if you would like to escalate or discuss this further.

Many thanks

Claire

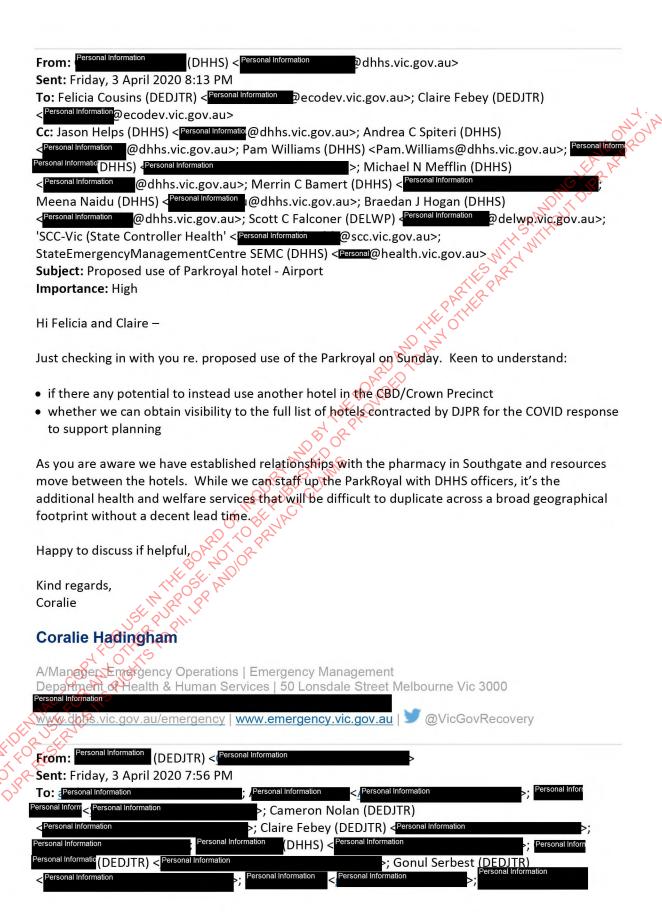
Claire Febey

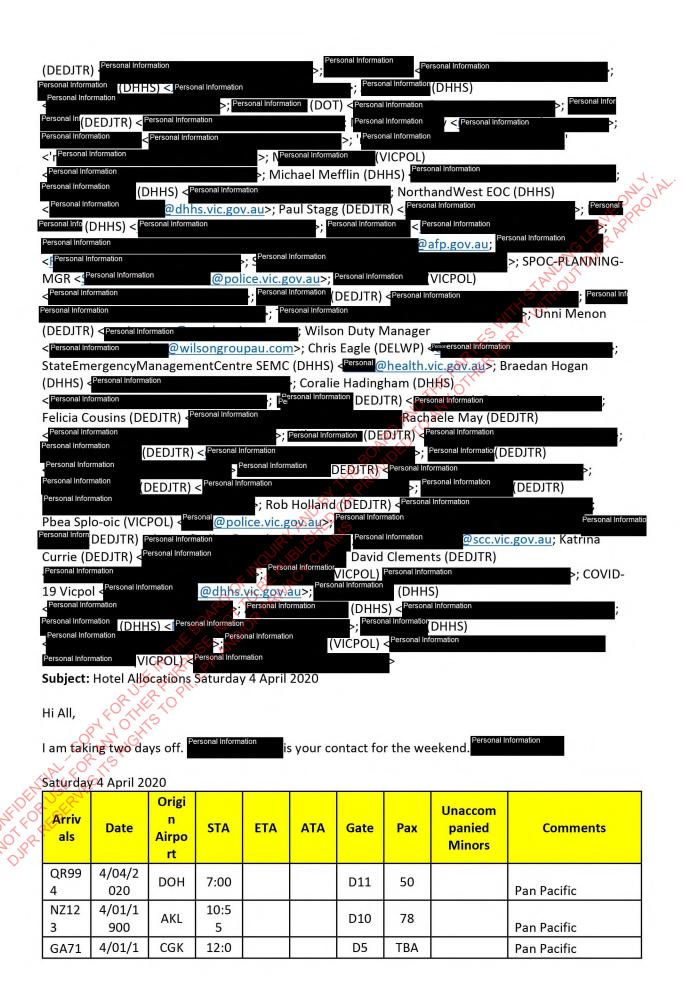
Executive Director, Priority Projects Unit | Office of the Secretary

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

Personal Information





6	900		0				
QR90 4	4/04/2 020	DOH	18:3 0		D11	43	Pan Pacific
					Total	171	Garuda flight PAX still to come

Sunday 5 April 2020

Arriv als	Date	Origi n Airpo rt	STA	ETA	АТА	Gate	Pax	Unaccom panied Minors	Comments
QR99 4	5/04/2 020	DOH	7:00				ТВА	, s	Parkroyal Melbourne Airport
QR90 4	5/04/2 020	DOH	18:3 0				43	TEST	Rarkroyal Melbourne Airport

For your reference, this is the flight schedule for the coming week.

- This does not include all the adhoc flights that get added at short notice.
- Some of these flights will operate as freight only and may change at short notice.

International Passenger Services from 05 April

Arr Flight	Dep Flight	Days of Week	Seats	A/C Type	ORG
BI 005	BI 006	Tue/Fri	254	788	BWN
GA 716	GA 717	Tue/Sat	257	333	CGK
MH 149	MH 148	Thu/Sun	290	333	KUL
NZ 123	NZ 124	Mon/Sat	275	789	AKL
QR 994	QR 995	Mon/Tue/Wed/Thu/Fri/Sat/Sun	354	77W	DOH
QR 904	QR 905	Mon/Tue/Wed/Thu/Fri/Sat/Sun	327	351	DOH
UL 604	UL 605	Mon/Tue/Wed/Thu/Fri/Sat/Sun	297	333	СМВ

Kind regards

| Senior Investment Manager - Aviation

Aviation Strategy and Services

Department of Jobs, Precincts and Regions

Personal Information

www.djpr.vic.gov.au



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THIRLE CORNER TO PHILIP AND OR PRIVACY CLAIMS

From: Claire Febey (DEDJTR)

Sent: Fri, 3 Apr 2020 22:22:00 +1100

To: Personal Information (DEDJTR)

Subject: RE: Contact for DHHS planning - Personal Inf. - FOR ACTION

If only it were!

I'm confident we will stick with Parkroyal.

Rest.

From: $\frac{Personal Information}{Personal Information}$ (DEDJTR) < $\frac{Personal Information}{Personal Information}$ @ecodev.vic.gov.au>

Sent: Friday, 3 April 2020 10:21 PM

To: Claire Febey (DEDJTR) < Personal Information @ ecodev.vic.gov.au> **Subject:** Re: Contact for DHHS planning - Personal In - FOR ACTION

All good. Not worried, just frustrated. But it is what is. This is not the biggest issue we will

face.

Get Outlook for Android

From: Claire Febey (DEDJTR) < Personal Information@ecodev.vic.gov.au>

Sent: Friday, April 3, 2020 10:15:29 PM

To: Personal Information (DEDJTR) Personal Information @ecodev.vic.gov.au>
Subject: RE: Contact for DHHS planning - Personal Information FOR ACTION

Thanks Personal. That's really helpful.

I know you took all the right steps, I was just being deferential.

From: Personal Information (DEDJTR) < Personal Information @ecodev.vic.gov.au >

Sent: Friday, 3 April 2020 10:14 PM

To: Claire Febey (DEDJTR) <u>@ecodev.vic.gov.au</u>>
Subject: Fwd: Contact for DHHS planning - Personal Inte

For reference

Get Outlook for Android

From: SCC-Vic (State Controller Health) <sccvic.sctrl.health@scc.vic.gov.au>

Sent: Friday, April 3, 2020 10:34:42 AM

To: Personal Information (DEDJTR) < Personal Information @ecodev.vic.gov.au > Subject: Fw: Contact for DHHS planning - Personal Information - FOR ACTION

Hi (Personal Informa

I have spoken to Coraline Handingham, DHHS Agency Commander, she is aware of this and will get back to you.

SCC-Vic (State Controller - Health)

State Control Centre | 8 Nicholson Street East Melbourne Victoria 3002 Ph:1300 368 722 (1300 EMV SCC) | Fax: 1300 13 4488 | DX: 210098 Email: sccvic.sctrl.health@scc.vic.gov.au | Web: https://cop.em.vic.gov.au

From: Chris B Eagle (DELWP) Personal Information @delwp.vic.gov.au> Sent: Friday, 3 April 2020 8:48 AM To: Personal Information (DEDJTR) < Personal Information @ecodev.vic.gov.au >; Scott C Falconer (DELWP) @delwp.vic.gov.au> (DEDJTR) < Personal Information pecodev.vic.gov.au>; Personal Informatic (DPC) @dpc.vic.gov.au>; SCC-Vic (State Controller Health) <sccvic.sctrl.health@sccvic.gov.au> ersonal Inf(Subject: RE: Contact for DHHS planning -

Good morning Personal

I have dropped out of this role for a couple of days, will be back next week. Scott Falconer has taken on this role for this roster rotation. I have CCd him into email, and his phone number is Personal Information

If you use the scc.vic.gov.au, this will get to whomever is in the Deputy State Controller role.

Cheers,

Chris

Chris Eagle | Deputy Chief Fire Officer Port Phillip Region Forest Fire Management Victoria Department of Environment, Land, Water and Planning 609 Burwood Hwy, Knoxfield, Victoria, 3180 @delwp.vic.gov.au



delwp.vic.gov.au









(DEDJTR) < Personal Information @ecodev.vic.gov.au>

Sent: Friday, 3 April 2020 8:38 AM

To: Chris B Eagle (DELWP) < Personal Informati@delwp.vic.gov.au>

DEDJTR) < Personal Information @ecodev.vic.gov.au>; /Personal Informati (DPC)

ersonal Informat<mark>@dpc.vic.gov.au</mark>> Subject: Contact for DHHS planning

Hi Chris,

You are listed as the contact for DHHS for the planning to get a hotel up and running.

Can you please tell me the key contacts in DHHS that I should be engaging? We are looking to bring Parkroyal online on Sunday and are starting the processes for Mercure Welcome, Novotel Melbourne and Four Points by Sheraton.



attachments.

error, please notify us by return email.

From: Pam Williams (DHHS)

Sent: Sun, 5 Apr 2020 18:40:21 +1000

To: Claire Febey (DEDJTR); Unni Menon (DEDJTR)

(DHHS); Personal Information (DHHS); Jason Helps (DHHS); Chris B Eagle (DELWP); Coralie K Hadingham (DHHS); Personal Information (DHHS); Personal Information (DHHS); Andrea C Spiteri (DHHS)

Cc: (DHHS) Personal Information (DHHS)

Subject: COVID19 Accommodation response

Hello All

I have been asked to oversee the DHHS COVID19 Accommodation response. There has been a great deal of fabulous work done with many people involved. Given the fluid situation, it is timely that we come together to establish a clear governance structure where we all understand who has responsibility for what and how matters are to be escalated and decisions made. Lunderstand we are all having discussions on these issues – DJPR, DHHS, SCC. I also note that DJPR (Claire) was seeking a meeting to clarify further on the issues.

I am hoping for a meeting Monday afternoon at 3pm to tease out issues and clarify our respective responsibilities. I have invited a number of people as listed above, but am happy for you to advise me of who should be included and any specific agenda items you would like to include. Below is a draft agenda as a starting point. A formal agenda and invitation will be sent tomorrow.

Time and date	3:00PM – 4:30PM, Monday 6 April, 2020
Chairperson	Pam Williams (PW)
Location	Microsoft Teams
Attendees	Pam Williams (PW)
	Andrea Spiteri (AS)
	(Personal, DJPR / SCC representatives (to be confirmed), Personal Information
	(meeting minutes)
Apologies	of the the

ltem	Time	Description 7	Presenter
1.	5	Welcome and introductions	PW
2. ≿∕ ⟨	20 8740 8740 8740	Roles and responsibility: Confirm Departments / Leads on four (4) streams across current and future EM accommodation (i.e. Compliance, Public Health, Supply and Operations) Clarify ongoing role of SCC	All
35/2	30	 Key program aspects to be discussed: Next immediate expansion (i.e. Healthcare Workers) Current developments Significant operational issues for discussion and decision (or identification of process for decision) 	All
4.	30	Ongoing governance for all program elements	PW
5.	5	Close and next steps	PW

Pam Williams Director, Barwon Area

Department of Health and <u>Human Services</u>

www.dhhs.vic.gov.au

t: 03 | m: Personal Information e: Personal Information @dhhs.vic.gov.au

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THE SE AND OF PRIVACY CLAIM

From: Claire Febey (DEDJTR)

Sent: Mon, 6 Apr 2020 14:26:14 +1000

To: Personal Information (DEDJTR)

Subject: FW: OFFICIAL - Sensitive: DRAFT - quarantine functional structure

Attachments: DRAFT - quarantine functional structure.pptx

Pls review

From: Personal Information (DHHS) < Personal Information @dhhs.vic.gov.au>

Sent: Monday, 6 April 2020 2:24 PM

To: Claire Febey (DEDJTR) < Personal Information Decodev.vic.gov.au>

Cc: Pam Williams (DHHS) < Personal Information @dhhs.vic.gov.au>; Personal Information (DH

Personal Informatio
@dhhs.vic.gov.au>

Subject: OFFICIAL - Sensitive: DRAFT - quarantine functional structure

Hi Claire

Based on previous discussions and the materials DJPR have prepared and shared with us over the last week or Op Soteria operations/governance, we've developed the attached in an attempt to name the relevant leads.

Pam is keen to be able to table this at the 4.30PM meeting this afternoon to which you and other leads have been invited. Could you please:

- Check that the stream captured in 'gold' titled "Supply and accommodation" appropriately captures the key functions of the program under DJPR and make changes to the 'buckets' as you see fit.
- Add/remove/change any names that you can confirm as leads for the management tier and the operational pillars under that.

Feel free to either make changes and comments directly in the document, provide feedback in an email, or call me directly.

Thanks in advance.

Regards

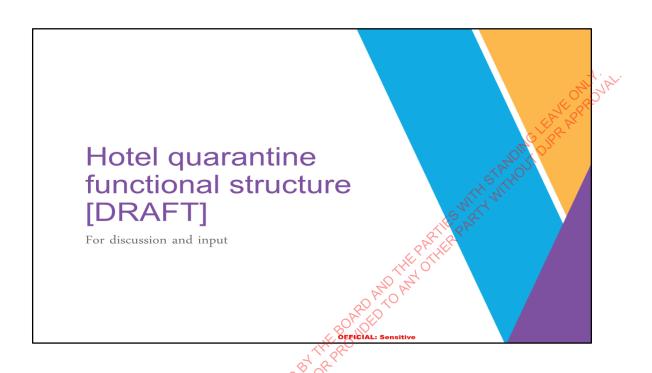
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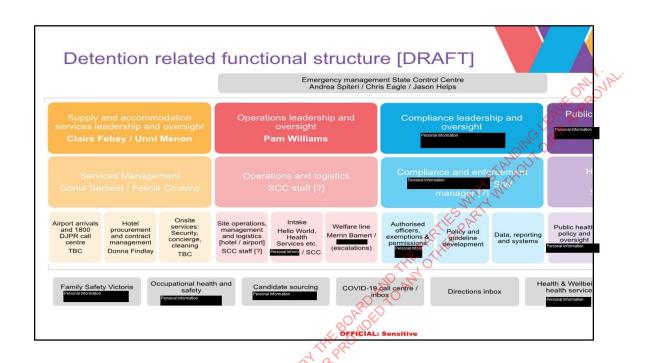
NB – as mentioned on the phone I will also be sending through a 'issue / risk' log that we have developed (as we explored the E2E Service Architecture and process related to the passenger journey) to capture some of the challenges and pinch-points that have been identified, as well as other more strategic program elements to be explored. We are keen to get you and your team to add to, provide feedback or input on this log for us to target our efforts to help resolve high-priority high-risk areas of the current service together with Pam.

OFFICIAL: Sensitive

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From:

Sent:

Wed, 8 Apr 2020 07:58:36 +1000

To:

(DHHS); Personal Information (DHHS); Personal Inform

Subject: OFFICIAL - Sensitive: COVID19 Accom Response - Governance Establishment

Meeting - Minutes & Actions

Attachments: 06_04_2020_Meeting minutes.docx, CE Demand forecast 060420.xlsx,

08_04_2020_COVID19 Accommodation Response Taskforce_Agenda.docx

Importance: High

Dear All

Please see attached for the minutes from Monday's meeting (and .xls shared by Chris Eagle), actions and outcomes for your reference and review.

As an immediate action can each stream director / lead, please:

1. Nominate 2 (max) representatives from their stream to attend this meeting and on an ongoing basis.

As discussed during the meeting the purpose of this forum is to provide governance and oversight as it relates to strategic program matters and decisions, and less on the management and resolution of on-the-ground, operational management issues. In the instance that you are unable to attend please let us know your apologies and whether you will be sending a proxy on your behalf.

A draft agenda for this afternoon's meeting is attached for your reference with some attendees already nominate to present on particular items.

For and on behalf of Pam Williams

Regards



Senior Adviser, Change

Corporate Services Transformation | Organisational Transformation

Department of Health and Human Services | Level 5, 2 Lonsdale Street Melbourne 3000

m Personal Information e: Personal Information @dhhs.vic.gov.au | w: www.dhhs.vic.gov.au

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COVID19 Accommodation Response Governance Establishment Meeting

Meeting Minutes

			JOHN DIPRAPPRO				
Time a	nd date	4:30PM – 6:00PM, Monday 6 April, 2020	LG JPR				
Chairpe	erson	Pam Williams	(ANDITO				
Locatio	n	Teams Meeting	CHS ITH				
Attende	ees	Bamert (MB), Personal Information ; Claire Febey (DEDJTR) (CF); U	; Jason gham (CH); Merrin				
Apolog	ies	Ross Broad (RB), Personal Information					
Purpos	е	Review current programs of work and establish governance forum for	or ongoing operations				
ltem	Time	Description Supplies	Presenter				
1.	5	Welcome and Introductions	PW				
2.	20	Roles and responsibility: - Confirm Departments / Leads on four (4) streams across current and future EM accommodation (i.e. compliance, Public Health, supply and operations) - What needs to be cleared by SCC	All				
3.	30 08 15	Key program aspects to be resolved: Next immediate expansion (i.e. Healthcare Workers) Current developments Significant operational issues for discussion (or identification of process for decision)	All				
(£14.1)	30 (5	Ongoing governance for all program elements	PW				
KILOP (3E.						
ltem	Key poin	ts and comments					
1.	of de - CE s numb mode	of detainees at 3 locations across Melbourne CBD as at 'Day 9' (approx. 1800)					

Australia, and an observation that flights are being rerouted from Sydney. PW proposed to move to item 3 as a follow on from this discussion to address the immediate needs of expansion to Healthcare Workers (HCW) JH shared current R&R as it stands today (for Quarantine Ops only), between DJPR and SCC 2. noting that preparations for operational handover to PW from SCC are underway MS noted that a central point of contact is required as the lead (to be identified in functional and associated detailed structure) Noted that daily POC for issues raised on the ground would be agency commander on the day. (taken offline and discussed between SCC and MN). **OUTCOME:** PW will now be first point of contact (POC) for mandatory quarantine requirements (as required by Public Health) (and will liaise with SCC and other partners as required) outlined the HCW plan and what this will mean for EM accommodation response, noting 3. the primary remit of this cohort, but that more specific modelling / demand estimates will become available (via RB et al). ACTION: Person to follow-up with Person FAQs issued through DPC relating to this cohort and circulate for reference. DJPR requires feedback on what appropriate accommodation looks like for this cohort, noting that there are currently 600 vacant rooms that SCC as identified as unsuitable for returning Person noted that Public Health can help provide advice on which cohorts can be integrated with others (i.e. +ve cases, versus returning travellers and HCW) DJPR (UM) request 48hrs notice to stand-up new site (incl. source, agree (with SCC) and hotel staffing needs). MN noted that a schedule of when new sites come on board will be imperative to support effective staffing. Noted that H&W have arrangements in place with Quest in regional areas for HCW but the preference is to have all arrangements fall under one supply and operations governance structure to ensure full visibility of total cost of COVID19 Accommodation. SCC (JH) preference is to have all sites CBD located to support effective resourcing across sites. ACTION: DJPR will commence sourcing for possible locations for HCW cohort and revert to SCC / PW to confirm (consistent with current process with SCC) OUTCOME: HCW accommodation response to be leading agenda item at next meeting (Wednesday 8 April, 2020) Consensus that meetings should occur as regularly as required by PW in the initial phases of 4. delivery and further expansion PW proposed that this forum focus on strategic program matters, governance and issues related to the total COVID19 Accommodation Response (not daily operational matters) PW proposed next meeting to be held Wednesday 6 April, 2020 – AGREED ACTION: All leads to nominate appropriate representatives for next meeting ACTION: Persito forward proposed agenda and schedule placeholder for nominated attendees **ACTION:** Pers to circulate minutes and actions for review and feedback with related materials.

COVID19 Accommodation Response Taskforce

Agenda

10

5.

			CK XX
Time a	nd date	4:30PM – 5:30PM, Wednesday 8 April, 2020	"ACTUR"
Chairpe	erson	Pam Williams	(ANDITY OF
Locatio	on	Teams Meeting	CH STITH
Attendees		Pam Williams (PW); Ross Broad (RB), Marina Henley (MH); Personal Information (DJPR) (UM); Chris Eagle (SCC); Personal Information (SCC); Personal Information (DJPR)	
Apolog	jies	THEOTH	
ltem	Time	Description	Presenter
1.	5	Welcome and Introductions	PW
2.	15	Exit planning and communications	PW / MN / Persona
3.	15	Surge planning	PW
4.	15	Healthcare Workers Program	RB / MH

Update relating to the program 'ins' and 'outs', pipeline

planning (i.e. expected demand) and site requirements

Update on sites available / sourced (DJPR)

Next meeting - date and agenda items

UM / CF

Persor

PW

 From:
 DJPR COVID Accom-Lead (DJPR)

 Sent:
 Fri, 10 Apr 2020 18:55:29 +1000

To: Braedan Hogan (DHHS); DJPR COVID Accom-Lead (DJPR); SCC-Vic (State

Controller Health)

Cc: Personal Information (DJPR); DJPR COVID Accom-Support (DJPR)

Subject: RE: Hotel allocations for Saturday and Sunday flights - seeking confirmation

Many thanks for the quick response.

From: Braedan Hogan (DHHS) Personal Information @dhhs.vic.gov.au>

Sent: Friday, 10 April 2020 6:46 PM

To: DJPR COVID Accom-Lead (DJPR) <DJPRcovidaccom-lead@ecodev.vic.gov.au>; SCC-Vic(State

Controller Health) <sccvic.sctrl.health@scc.vic.gov.au>

Cc: (Personal Information (DJPR) Personal Information (DJPR) (DJPR) (DJPR)

<DJPRcovidaccom-support@ecodev.vic.gov.au>

Subject: Re: Hotel allocations for Saturday and Sunday flights - seeking confirmation

Yes happy with that.

Braedan

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management

Department of Health and Human Services

Personal Information

From: DJPR COVID Accom-Lead (DJPR) DJPRcovidaccom-lead@ecodev.vic.gov.au>

Sent: Friday, April 10, 2020 6:44:21 PM

To: SCC-Vic (State Controller Health) < seevic.sctrl.health@scc.vic.gov.au>; Braedan Hogan (DHHS)

Personal Information
Personal Information
DEDJTR) Personal Information
DED

Subject: Hotel allocations for Saturday and Sunday flights - seeking confirmation

Braedan

Can you please confirm that you're happy with the below so that we can circulate ASAP.

Please note that the:

Figure 1. Sunday 12 April 2020. We are still seeking final confirmation of this flight.

Novotel will be required online on Sunday to accommodate passengers outside of the Delhi flight.

Saturday 11 April 2020

Arriv als	Date Origi n Airp	STA	ET A	AT A	Gat e	Un ac	Pax	Inf ant s	Unaccomp anied minor	Comments
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					Tot al	203		STANOT

Sunday 12 April 2020

Many thanks

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Claire JSE PURILLEY

Government of Victoria, Victoria, Australia.

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From: Claire Febey (DEDJTR)

Sent: Tue, 31 Mar 2020 15:45:10 +1100

To: Simon Phemister (DEDJTR);Penelope McKay (DEDJTR);Annie L Reeves

(DEDJTR)

Subject: FW: Communication protocol & management of confirmed case - request

urgent advice and escalation Importance: High

For your record.

From: Claire Febey (DEDJTR)

Sent: Tuesday, 31 March 2020 3:43 PM

To: SCC-Vic (State Controller Health) <sccvic.sctrl.health@scc.vic.gov.au>

Cc: Chris B Eagle (DELWP) < Personal Information and delwp.vic.gov.au>; Andrew S Crisp (DJCS)

@justice.vic.gov.au>

Subject: Communication protocol & management of confirmed case - request urgent advice and

escalation

Importance: High

Chris

Thanks for the discussion following the Operation Soteria meeting at 13:30.

• In the meeting I learned that there was a confirmed COVID-19 case at one of the three hotels

- I asked for advice on communication protocols regarding confirmed cases given I was unaware, and we have DJPR, VPS and contracted staff on site and engaging directly with people arriving for quarantine
- I also requested advice on how the person will be managed having been confirmed (e.g. taken to a separate health facility, or treated in their room)
- I didn't ask about contact tracing given this was raised by DOT
- Following the meeting Jacon Helps advised that the location was Metropole (TBC, subject to rechecking his email) and that he was unable to give me details (e.g. name of the person) due to health protocols

After the meeting braised the following points with you:

- My concern that DJPR as a supporting partner to DHHS and with staff and contractors on the ground was not advised of this directly and in timely way;
- That in the absence of timely information I felt unable to support and manage the safety and wellbeing of our staff and contractors on the ground;
- That if DHHS was unable to provide timely and accurate information and engage DJPR as a partner in managing confirmed cases, my view that DHHS would be better placed to manage operations on the ground with DJPR providing support in its area of expertise (securing and negotiating contracts with hotel providers).

We agreed that you would immediately work with Jason and colleagues to provide DJPR with advice on protocols (for example a communication chain) for managing information and confirmed cases of COVID-19 in hotels, that has proper regard for all staff (DJPR, DPC, and contractors) on the ground.

I also request advice on next steps regarding contact tracing and what information I can provide to staff immediately who are likely to have had contact.

Following our discussion I was also advised through two separate sources that there was a confirmed COVID-19 case at the Promenade:

- Katrina Currie (DJPR) who had been notified by the security contractors; and
- Gonul Serbest (DJPR) who had been notified by hotel management, who we understand had received information via DHHS staff on the ground (we think Personal Information and was able to provide the name and room number of the person.

As you can imagine this separate and informal communication flow raises a further concern for me. Staff are now being provided with information second hand via the hotel agency and contractors.

As discussed I request your advice on these issues and the opportunity to negotiate and agree a way forward by COB today.

Thanks so much Chris.

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

Personal Information

Personal Informatio@ecodev.vic.gov.au

From: SCC-Vic (State Controller Health)
Sent: Tue, 31 Mar 2020 16:24:22 +1100

To: Claire Febey (DEDJTR)

Cc: Chris B Eagle (DELWP);Andrew S Crisp (DJCS);Andrea C Spiteri (DHHS)

Subject: Re: Communication protocol & management of confirmed case - request

urgent advice and escalation

Thanks Claire,

whilst this scenario was nearly always guaranteed to occur, in the realm of emergency management and priorities, until the case was confirmed today, a process was never created.

The first will always be most complex, until we get process sorted, then its refine as we go.

The first part that Andrea and i have agreed is that for future cases, DHHS agency commander will advise myself (Deputy State Controller- Health), then i will advise other agencies as required. In the future, it wont be as part of a daily update, but rather a structured response to agencies with relevant information they require to continue to look after travellers and provide safe work places for staff.

DHHS Agency Commander (Jason) and team are working through their actions / response for this event as highest priority for today. This may mean other items will be delayed until the morning ie recreation guidance.

This guidance may reflect a change in the way we brief our staff, to undertake service provision upon the assumption everyone may be infected, then a confirmed case is less of an impact. This will ensure consistent levels of service to our guests, as well as high levels of safety for our staff.

As discussed, whilst DHHS have capability to provide accommodation services, and do so under normal circumstances, they don't have capacity to undertake this task for this incident, due to significant impact on whole of DHHS business units. As such, the work DJPR and others are providing is crucial to the success to look after our current travellers, but also what ever is next during this incident.

As the process is confirmed today, i will share with you and others as a priority.

Regards,

Chris Eagle Deputy State Controller - Health

SCC-Vic (State Controller - Health)

State Control Centre | 8 Nicholson Street East Melbourne Victoria 3002 Ph:1300 368 722 (1300 EMV SCC) | Fax: 1300 13 4488 | DX: 210098

Email: sccvic.sctrl.health@scc.vic.gov.au | Web: https://cop.em.vic.gov.au | From: Claire Febey (DEDJTR)
Personal information
y@ecodev.vic.gov.au | Web: https://cop.em.vic.gov.au | Web: https://cop.em.vic.gov.au | Web: <a href="mailto:https://cop.em.vic.go

Sent: Tuesday, 31 March 2020 3:43 PM

To: SCC-Vic (State Controller Health) <sccvic.sctrl.health@scc.vic.gov.au>

Cc: Chris B Eagle (DELWP) (Personal Information) delwp.vic.gov.au>; Andrew S Crisp (DJCS)

@justice.vic.gov.au>

Subject: Communication protocol & management of confirmed case - request urgent advice and

escalation

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After the meeting I raised the following points with you:

- My concern that DJPR as a supporting partner to DHHS and with staff and contractors on the ground was not advised of this directly and in timely way;
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As discussed I request your advice on these issues and the opportunity to negotiate and agree a way. forward by COB today.

Thanks so much Chris.

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

T: Personal Information | M: Personal Information sonal Informati@ecodev.vic.gov.au

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Sent: Tue, 31 Mar 2020 23:07:31 +1100

To: Simon Phemister (DEDJTR); Penelope McKay (DEDJTR)

Cc: Annie L Reeves (DEDJTR)

Subject: FW: Communication protocol & management of confirmed case - request

urgent advice and escalation

Simon, Penelope

Our issues were partially addressed today:

- The chain of communication has been confirmed (with further practical detail needed regarding critical information such as confirmed COVID-19 cases;
- Authorised Officers will brief all DJPR, DPC and contracted staff on safety and PPE use at the start
 of each shift at each site; and
- DHHS staffing levels (including more senior staff) will be increased at each site from tomorrow which should improve shared working practices and reduce the burden on DIPR staff.

As you will see DHHS is keen to maintain DJPR's engagement.

Given this, in terms of next steps I will:

- Continue discussions with DHHS regarding roles and responsibilities (they tell me they are working on this but haven't yet shared any work products);
- Work with Penelope and Annie to improve safe work practices e.g.
 - Support Gonul to move to a rostered approach to staffing at hotels that ensures proper fatigue management;
 - o Ensure managers are active in

I will work with Penelope and Annie to improve our

From: Claire Febey (DEDJTR)

Sent: Tuesday, 31 March 2020 4:47 PM

To: SCC-Vic (State Controller Health) <sccvic.sctrl.health@scc.vic.gov.au>

Cc: Chris B Eagle (DELWP) Personal Informatic @delwp.vic.gov.au>; Personal Information (DJCS)

Personal Information @justice.vic.gov.au>; Andrea C Spiteri (DHHS) Personal Information @dhhs.vic.gov.au> Subject: RE: Communication protocol & management of confirmed case - request urgent advice and escalation

Thank you for your quick initial response Chris.

Labsolutely agree this should be the highest priority for today – I understand that other conversations such as recreation will have to wait.

Thank you for outlining the expected protocol. I look forward to understanding this in a bit more detail (e.g. expectations on timing, how an agency is determined as required).

In conversation just now Andrea and I have agreed an immediate process improvement. That AO's will twice daily brief staff and contractors on appropriate use of PPE and other safe working practices. This resolves a request that I have raised on past State Control calls. I ask that this commences tomorrow in time for staff supporting the first expected flight.

I look forward to talking further this afternoon and being included in the work that you and the team are doing to make arrangements for the current (and future) confirmed case, as well as how we'll make the shift to the assumption that all people in quarantine are infected – in a way that includes DJPR, DPC and contracted staff in this change.

Thanks

Claire

From: SCC-Vic (State Controller Health) < sccvic.sctrl.health@scc.vic.gov.au>

Sent: Tuesday, 31 March 2020 4:24 PM

To: Claire Febey (DEDJTR) < Personal Information @ecodev.vic.gov.au>

Cc: Chris B Eagle (DELWP) Personal Information @delwp.vic.gov.au>; Personal Information @justice.vic.gov.au>; Andrea C Spiteri (DHHS) Personal Information @dhh.

Subject: Re: Communication protocol & management of confirmed case - request urgent advice and escalation

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Regards,

Chris Eagle
Deputy State Controller - Health

SCC-Vic (State Controller - Health)

State Control Centre | 8 Nicholson Street East Melbourne Victoria 3002

Email: Personal Information @scc.vic.gov.au | Web: https://cop.em.vic.gov.au

From: Claire Febey (DEDJTR) < Personal Information @ecodev.vic.gov.au >

Sent: Tuesday, 31 March 2020 3:43 PM

To: SCC-Vic (State Controller Health) Personal Information @scc.vic.gov.au>

Cc: Chris B Eagle (DELWP) Personal Information adelwp.vic.gov.au>; Personal Information (DJCS

ersonal Information @justice.vic.gov.au>

Subject: Communication protocol & management of confirmed case request urgent advice and

escalation

Chris

Thanks for the discussion following the Operation Soteria meeting at 13:30.

- In the meeting I learned that there was a confirmed COVID-19 case at one of the three hotels
- I asked for advice on communication protocols regarding confirmed cases given I was unaware, and we have DJPR, VPS and contracted staff on site and engaging directly with people arriving for quarantine
- I also requested advice on how the person will be managed having been confirmed (e.g. taken to a separate health facility, or treated in their room)
- I didn't ask about contact tracing given this was raised by DOT
- Following the meeting resonal information advised that the location was Metropole (TBC, subject to rechecking his email) and that he was unable to give me details (e.g. name of the person) due to health protocols

After the meeting raised the following points with you:

- My concern that DJPR as a supporting partner to DHHS and with staff and contractors on the ground was not advised of this directly and in timely way;
- That in the absence of timely information I felt unable to support and manage the safety and wellbeing of our staff and contractors on the ground;
- That if DHHS was unable to provide timely and accurate information and engage DJPR as a partner in managing confirmed cases, my view that DHHS would be better placed to manage operations on the ground with DJPR providing support in its area of expertise (securing and negotiating contracts with hotel providers).

We agreed that you would immediately work with Jason and colleagues to provide DJPR with advice on protocols (for example a communication chain) for managing information and confirmed cases of COVID-19 in hotels, that has proper regard for all staff (DJPR, DPC, and contractors) on the ground.

I also request advice on next steps regarding contact tracing and what information I can provide to staff immediately who are likely to have had contact.

Following our discussion I was also advised through two separate sources that there was a confirmed COVID-19 case at the Promenade:

- Katrina Currie (DJPR) who had been notified by the security contractors; and
- Gonul Serbest (DJPR) who had been notified by hotel management, who we understand had
 received information via DHHS staff on the ground (we think
 provide the name and room number of the person.

As you can imagine this separate and informal communication flow raises a further concern for me. Staff are now being provided with information second hand via the hotel agency and contractors.

As discussed I request your advice on these issues and the opportunity to negotiate and agree a way forward by COB today.

Thanks so much Chris.

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

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Sent: Mon, 30 Mar 2020 11:00:35 +1100

To: StateEmergencyManagementCentre SEMC (DHHS)

Jason Helps (DHHS); Braedan J Hogan (DHHS); Claire Febey (DEDJTR); Cc:

(DEDJTR);Chris B Eagle (DELWP)

Subject: FW: OFFICIAL: PPE for staff on site - training/induction and issue of PPE

Importance: High

Hi team,

I wasn't sure on the best place to direct this urgent query regarding available training/guidance for our staff and contractors on correct use of PPE for this operation. On the call yesterday Jason confirmed that only surgical masks and hand sanitiser were required, but guidance we can provide on correct usage would be really helpful if you can direct us to the correct place.

Rob Holland

Director, Office of the Secretary **DJPR State Agency Commander**

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition Street, Melbourne, Victoria Australia 3000

T: 03 8392 8031 M: Personal Information @djpr.vic.gov.au

djpr.vic.gov.au



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(DEDITR) @ecodev.vic.gov.au>

Sent: Monday, 30 March 2020 10:54 AM

ecodev.vic.gov.au> To: Claire Febey (DEDJTR Personal Information Cc: Rob Holland (DEDJTR) ecodev.vic.gov.au>

Subject: FW: OFFICIAL: PPE for staff on site - training/induction and issue of PPE

Importance: High

AS discussed, questions around staff protocol and training.

Robert Leith

Principal Policy Adviser | Office of the Secretary | Priority Projects Unit

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition Street, Melbourne, Victoria Australia 3000

T: 03 9651 8118 | M: Personal Information

ersonal Information ecodev.vic.gov.au

djpr.vic.gov.au



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From Personal Informatio (DPC) < Personal Informatio adpc.vic.gov.au>

Sent: Sunday, 29 March 2020 10:46 PM

To: Personal Information DEDJTR) Personal Information Pecodev.vic.gov.au>

Subject: OFFICIAL: PPE for staff on site - training/induction and issue of PPE

Importance: High

Hi again

Just a few things I observed today and wanted to flag with you. The DHHS staff that came on site today were wearing their PPE – which I believe they were wearing from their site – Crown. I am a little worried that they came from one hotel to another with their RPE on. They both had masks around their neck, and one was wearing gloves.

Secondly, has there been thought to PPE training for staff (Dnata, Security etc)? How will they be inducted to each hotel? Will there be someone from DHHS to talk them through this?

- How long can PPE be worn before it needs to be disposed of masks in particular as they have a lifespan which I believe is 4 hrs
- How to put it on and how you take it off, disposal procedure, what comes off first?
- Will there be googles for everyone?

Will someone be training the security. Dnata and other hotel staff on site in this. Note also that staff once active on site should really not be moving between sites. Site to be managed in silos to protect against cross contamination.

The Metro Tunnel Project may also have googles that they can spare as I know they have a requirement for site workers and visitors to wear PPE when on their site. I have a contact there so can ask the question.

Cheers

Senior Adviser, Protocol and Special Events | Strategic Communication, Engagement and Protocol Branch Department of Premier and Cabinet | Level 13, 35 Collins Street, Melbourne Victoria 3000

Measonal Information www.dpc.vic.gov.au | www.vic.gov.au

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OFFICIAL

From: Jason Helps (DHHS)

Sent: Sat, 28 Mar 2020 19:54:45 +1100

To: Rob Holland (DJPR); Michael N Mefflin (DHHS)

Cc: Personal Information (DJPR); Claire Febey (DJPR); Personal Information (DJPR); Personal Information

Personal Infor (DJPR)

Subject: RE: PPE for staff at the airport

All,

I have PPE to go to the airport tomorrow, I will not send the full quantity at once but enough for tomorrow at the very least. It will be available for passengers and staff who need to interact if they don't already have stock. I'm keen for us to track quantity so we can ensure we have stock going forward.

Jason Helps

Deputy Director Emergency Operations and Capability | Emergency Management Branch Department of Health and Human Services | 50 Lonsdale Street, Melbourne Victoria 3000

www.dhhs.vic.gov.au | www.emergency.vic.gov.au | whites://twitter.com/VicGovDHHS

From: Rob Holland (DEDJTR) Personal Information @ecodev.vic.gov.au>

Sent: Saturday, 28 March 2020 7:33 PM

To: Michael Mefflin (DHHS) < Personal Information @dhns.vic.gov.au>

Cc: Jason Helps (DHHS) < Personal Information@dhhs.vic.gov.au>; Personal Information (DEDJTR)

< Personal Informatio @ ecodev.vic.gov.au >; Claire Febey (DEDJTR) < claire.febey@ecodev.vic.gov.au >; Personal Informatio @ ecodev.vic.gov.au >; Personal

ersonal Information (DEDJTR) < Personal Information (DEDJTR)

Personal Information @ecodev.vic.gov.au>; (Personal Information (DEDJTR))

Subject: PPE for staff at the airport

Hi Michael,

I've spoken with Personal Information at the SCC and he has confirmed that 80 bottles of hand sanitiser, 1,500 face masks and 500 pairs of gloves will be available for the operation tomorrow. He instructed me that this was handed to DHHS as the control agency for distribution as required.

Lunderstand from earlier discussions with Braedan and Jason that masks will be provided to all passengers on the buses but wanted to confirm that PPE will be available for staff at the airport and at hotels as required?

Thanks,

Rob

Rob Holland

Director, Office of the Secretary
DJPR State Agency Commander

Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition Street, Melbourne, Victoria Australia 3000



djpr.vic.gov.au



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Operation Soteria Op Soteria-Minutes-2020-04-06-1330hrs



EM-COP Library Filename - Op Soteria Minutes-2020-04-06-1330hrs

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Meeting Detail	s				
Meeting Date	Monday 6 April 2020	Start	1330hrs		
Teleconference	Personal Information			End	1351hrs
Location	State Control Centre, Bogon	g Room			JK PR
Minutes	SRC Executive Support				CLERA
Members	Name	Attendees (+ as required)	Na	ame	OUT DIRRAPE.
Deputy State Controller – Op Soteria (Chair)	Chris Eagle (CE)	рот	.4	WIHWITH	
ЕМС	Andrew Crisp (AC)	VicPol	Per	sonal Information	
State Controller Health	Jason Helps (JH)	DPC RIP AND	Per	sonal Information	
DHHS	Coralie Hadingham (CH)	EMV	Pers	onal Information	
DJPR	Claire Febey (CF)	DHHS (Airport)	Perso	onal Information	
SCC Comms	Personal Information	ADF			





Act	ions from Pre	vious Meetings		
No	Meeting Date	Action	Assigned to	Due Date
1.	3/4/2020	Follow up on the passengers that are not on the reconciled DHHS/DJPR hotel quarantine list. 6/04/2020 - Continues as a work in progress, ongoing and no longer required as an action.	DHHS/DJPR	5/04/2020 – ONGOING , DHHS required to support DJPR in reconciling outstanding gaps in passenger manifests/hotel quarantine lists.
2.	3/4/2020	DPC and EMC to look to identify contacts that may be able to assist in gaining information on the numbers of Australians returning home and capacity trigger points for all jurisdictions (to discuss offline). 6/04/2020 - EMC followed up with EMA. Raised by DPC as part of national coordination mechanism, which occurred this morning. Agreement for a national approach is key for those passengers travelling home this weekend as to whether they face home quarantine when travelling on to other states. Home Affairs will pursue with ADF better intelligence on flight arrivals.	EMC ARD AND ANY O	TBC IN PROGRESS. EMC to follow-up with EMA and set up a very meeting with the national group looking at this modelling.
3.	3/4/2020 	Intel to report whether repatriation data from DFAT is more or less than they current receive and is useful. 6/4/2020 - Chris Eagle to follow up	Intel Team	5/04/2020 – IN PROGRESS .
45/2	5/4/2020	State Controller direction required for hotel allocation tomorrow. 6/04/2020 - Completed for today, further decision today, mark as complete.	Personal	5/4/2020 – COMPLETED .





5.	5/4/2020	FAQs or scripts to be developed for exit process. 6/04/2020 - More than FAQs/Scripts to be developed, the whole process. Multiple agencies are working on that space and will be connecting on that.	DHHS/DJPR	ASAP - IN PROGRESS.
6.	5/4/2020	State Controller to confirm what type of staff DHHS are requesting via DoT Secretary. 6/04/2020 - Request out to support authorised officers, will confirm offline	Personal In	5/4/2020 - IN PROGRESS.
7.	5/4/2020	Share call centre trends document with Intelligence and Jamie Templeton (VicPoI) directly. 6/04/2020 – Will complete after TC	DJPRO ANTO	5/4/2020 – IN PROGRESS .

Item	Subject
1.	Operations

Reports on mornings transfers, key issues, items for review

RULE

- 63 passengers in today over two flights, a further 39 on another flight today. All incoming passengers today are being received into Park Royal at the airport, this was the additional hotel stood up today.
- Continuing to work with DJPR on the resourcing and setup of a growing number of hotels, an additional 3 of the coming days. With increased numbers we are seeing pressures around the exemptions requests and processes at the airport and hotel end.
- Dietary requirements are a continued discussion.
- Exit planning is occurring.
- Increased demand for nursing support at the hotels, additional resources overnight at each hotel, increased mental health resources during the day.
- Person: Around issues of transiting passengers. Would be a lot easier operationally on the ground if we could get some clarity about where that sits. Flagging this as an emerging issue and consideration for the group now to be worked through.

DJPR







- Focus today is settling into new rhythm with Park Royal. Preparation of the next 3 sites
 that we would go to as a priority. Seeing a continued fluctuation in passenger arrival
 numbers. Repatriation flight from San Fran tomorrow redirected from Sydney to
 Melbourne, seeing a further 200 passengers.
- Fluctuations continue at very short notice. Move to immediately stand up 2-3 hotels that
 are next in our pipeline so that we have appropriate accommodation in place for those
 fluctuations we expect will continue.
- Additional intelligence and data to properly plan for that, will do modelling work in the background to think about what sort of stock we need, rolling use of stock and turning over hotels rather than standing up new ones.
- Request urgent direction around State Controller around standing up hotels, in order for other agencies to properly mobilise their staff.
- Need to give hotels a minimum of 24 hours' notice to stand up and accept guests, as
 they are operating in a failed market they do not have staff onsite as they normally
 would. Complexity of having private security and other contractors in place.
- Report back after this meeting after site visits, requesting an urgent decision from the State Controller around the allocation of incoming flights.
- CE: It is now Day 9, and we have another 5 days of incoming passengers. We should be in front of the game but we are still trying to catch up.

VicPol

Nil issues

DPC

Nil update

2. Planning

Forward look at following day - air and sea

- CE: We are up to Day 9 and should have multiple things in place, we need to nail down what is in place, and think about the next 5 days to get us through the initial 14 day timeline.
- By Thursday at the latest we need demobilisation sorted out. Ensure people know what
 is going on over the weekend with first lot of people leaving. Going forward we will have
 the added complexity of people both arriving and leaving on same days at different
 hotels.
- At least another 16 days assuming flights stop tomorrow. Every day we are here, there is a further 16 days before finishing. Number of weeks before this begins to slow down.
- PersoWhat is the role of VicPol role at the end of this 14 day cycle?
- CE: Haven't got our thinking that far in advance yet tomorrow and Wednesday these discussions should be taking place. Various agency requirements to be sorted out today and tomorrow.
- CF: Focus on people calling call centre was around dietary needs, now volume of calls
 is about exit planning. Asking DJPR to support people with connection with airlines etc.
 Need to provide feedback to passengers and clarity around roles.
- Perso Indication of when these guidelines might be in place?
- Pess Can DJPR provide a list of those that have called, we can work through those. We need to work out modes of exit and work through the various logistics. Will need to work individually with a lot of people especially if they are leaving the state as different border controls exist in different states.
- CF: We can support you on providing people who have made enquiries, but we need
 proactive communications and scripts. Questions regarding specific calculations
 around periods of quarantine. Pressing whether or not people will need to complete a



File Version





	second period of quarantine in another state. Timing of their departure and their ability to obtain flights.
3.	Health and Safety/Welfare and Wellbeing
	 CF: Dictions around standing up Park Royal. Different views between DHHS and DJPR between correct and appropriate use of PPE. DHHS concerned about proper preservation of PPE, DJPR concerned about ensuring our staff are supported to use PPE in a way that means they are safe if having direct interface with passengers. CH: Will provide that today, all advice will be consistent with that on the COVID website, critical thig here is application of appropriate physical distancing measures. Staff should not be put in a situation where they require more than a mask and gloves. CF: Look forward to advice, noting physical distancing measures are in place. Will need to contextualise and ensure briefings are happening in a daily cycle. CE: CH to send requested information.
4.	Communication • Covered above.
	Covered above.
5.	Other Business • Nil
6.	Next Scheduled Meeting – 1330hrs, Tuesday 7 April 2020

Act	ions		
No	Action	Assigned to	Due Date
1.	Provide DJPR with advice regarding the correct and appropriate use of PPE	СН	6/04/2020

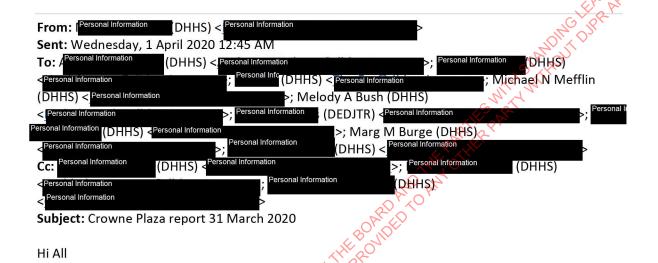
From: Claire Febey (DEDJTR)

Sent: Wed, 1 Apr 2020 14:56:47 +1100

To: Chris B Eagle (DELWP)

Subject: FW: Crowne Plaza report 31 March 2020

Chris – this was sent to us in error, but I think it is a useful insight for you in terms of overall leadership of the operation.



In coming to Crowne Plaza this evening as a DHHS manager I've noted a number of issues that need further attention.

Hotel hospitality

Reception Duty Officer number is This needs to be available to all managers and Authorised Officers. Personal and Lapoke to Personal Intronight and informed her that hospitality requests by detainees (such as food, tea, coffee etc) need to be managed directly by the hotel, rather than being referred to the nurses who then need to call reception for the request to be managed. Reception had previously been told to refer all phone calls to the nurses for triage, however we have indicated that these requests are to be managed by the hotel as their core business.

It would be helpful for this message to be reinforced to hotel management so that all reception staff are aware of this please. (I'm unsure who has the lead with hotel management - possibly DJPR?)

Policy issues

We need:

- A process to enable people to get items delivered to the hotel including Uber Eats / family with culturally appropriate food (there is a diabetic who is not eating as the hotel food is not culturally appropriate). Concerns and complaints about food generate the most calls.
- Clarity on how and what people are able to have delivered, including the acceptable times for delivery,
- A process for checking and photographing what is being delivered so that there is no claim of discrepancy.
- An agreed process on how to get deliveries to the rooms.
- A policy on managing alcohol. For example people should be able to access two standard drinks per day.

• A process for dealing with contraband including excess alcohol and possibly illegal drugs.

Communication

Detainees need to be given information regarding the above policy decisions, particularly delivery of items to the hotel and how it will be managed.

Information on the daily process/routines including meal times, how to access additional items, deliveries

Security

On doing an initial check we found that not all the security staff were doing roving checks of the floor. There are four security staff on each floor - one at each stairwell and two at the lift well. We've asked their manager to ensure that one of the staff at the lift well takes turns doing roving checks of the floor as with the curve of the building there is no complete line of sight of the rooms from any of the stationed security staff. There was some initial resistance to this suggestion by a couple of staff, but it was resolved following a conversation with their supervisor.

Staff care

For staff working including nurses who cannot leave the hotel, a meal needs to be provided for each shift including overnight.

We need to have clear policy on staff use of PPE, following the WHO PPE guidelines. Unless there is direct care being provided to detainees, my understanding is that it is unnecessary to wear gowns and eye protection to enter a room.

All staff need to ensure they are clear on how to manage their own hygiene and safety needs with instructions need to be printed and available on donning and doffing PPE safely (if required) including instruction to not touch the front of a mask. Generally, there is very little interaction with the detainees. If required, the nurses are the ones having the interaction and they are wearing PPE. DHHS staff are generally in a separate area with no requirement to interact with detainees, so risk to them is very low.

Rosters need to be completed as far in advance as possible so staff, particularly those on night shift, are aware as far ahead of their shift as possib.

Smokers

There needs to be a process to manage smokers beyond the use of nicotine patches. The hotel has allowed two chain smokers to use the stair well to smoke at 10am, 1 pm and 8 pm.

Welfare checks

Nurses are undertaking health and wellbeing checks. There needs to be clarity on who is calling the detainees and for what purpose to avoid duplication and causing confusion to detainees, some of whom have limited English skills.

Nurses

Nurses this evening and tonight (Personal Information were excellent and are getting through the list of detainees to undertake welfare checks. We suggest ensuring that new nurses are rostered with people who have done a previous shift for continuity and consistency where possible.

Supplies required for staff and detainees – as noted 31 March:

Thermometers - none currently

PPE

Pens

Pencils

Highlighters

Stapler

Scissors

Plastic pockets

Folders

Baby food

Nappies

Baby wipes

Bottle washing brush

Bottle sterilising containers

Sterilising tablets

Sanitary pads

Incontinence pads

Sim cards

Biosecurity hazard bags

Regards

Personal Information

Principal Advisor, Health and Emergency Management
Emergency Management, Health Protection and Population Health Branch | West Division
Department of Health and Human Services | 1 McNab Avenue, Footscray VIC 3011

North and West Duty Officer – 1800 326 627 Barwon South West Duty Officer - 1800 238 183 Grampians Duty Officer - 1800 238 414 State Duty Officer - 1300 790 733

State Duty Officer - 1300 790 733
West Division Code Brown / relocation number - 1800 780 354

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From: Claire Febey (DJPR)

Sent: Mon, 6 Apr 2020 22:57:35 +1000
To: Coralie K Hadingham (DHHS)

Cc: 'SCC-Vic (State Controller Health'; Jason Helps (DHHS); Braedan J Hogan

(DHHS); Chris B Eagle (DELWP); Andrea C Spiteri (DHHS); Personal Information (DHHS)

Subject: Re: Use of PPE for hotel check-in of returning overseas travellers

Hi Coralie

Thanks for the follow up.

To clarify, there was no mention of gowns. Just gloves, masks and goggles.

I'll look into the latter to understand if and why these have been used, and come back to you if I need any further clarity on appropriate use.

Cheers

Claire

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From: Coralie Hadingham (DHHS) < Personal Information @dhhs.vic.gov.au>

Sent: Monday, April 6, 2020 10:43:14 PM

To: Claire Febey (DJPR) < Personal Information@ecodev.vic.gov.au>

Cc: 'SCC-Vic (State Controller Health' <sccvic.sctrl.health@scc.vic.gov.au>; Jason Helps (DHHS)

Personal Information and dhhs.vic.gov.au>; Braedan J Hogan (DHHS) Personal Information and Odhhs.vic.gov.au>; Chris

B Eagle (DELWP) < Personal Informatio@delwp.vic.gov.au>; Andrea C Spiteri (DHHS)

Subject: Use of PPE for hotel check-in of returning overseas travellers

Hi Claire,

I'm writing to follow up from our discussion last night regarding PPE.

I was concerned when you suggested that DJPR and hotel staff were wearing significant levels of PPE (specifically gowns and eye protection) when processing returning o/s travellers at hotels.

Our expectation is that non-medical staff supporting the check-in process should not be in a position where such PPE measures are required – personal hygiene (including hand hygiene and cough etiquette), cleaning, physical distancing measures, surgical masks and gloves should be sufficient.

Staff should not be closer than 1.5m to returning travellers, and the space should be set up to allow and promote this.

Guidance on physical distancing and other transmission reduction measures can be found on our coronavirus website: https://www.dhhs.vic.gov.au/coronavirus-covid-19-transmission-reduction-measures

Further, as I explained last night my concern was heightened as adequate provision of PPE stock for the COVID-19 response is an issue not only in Victoria but across the world. Particularly as VicGov employees, we should be looking to conserve the amount of critical stock that remains available.

World Health Organisation guidance on the Rational use of PPE for COVID-19 can be accessed via the following link: https://apps.who.int/iris/bitstream/handle/10665/331498/WHO-2019-nCoV-IPCPPE_use-2020.2-eng.pdf

I hope this explains why the concerns were raised, and supports appropriate and rational use of PPE moving forwards.

Kind regards, Coralie

Coralie Hadingham

A/Manager, Emergency Operations | Emergency Management
Department of Health & Human Services | 50 Lonsdale Street Melbourne Vic 3000

www.dhhs.vic.gov.au/emergency | www.emergency.vic.gov.au | 💆 @VicGovRecovery

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From: Claire Febey (DEDJTR)

Sent: Wed, 1 Apr 2020 21:04:37 +1100

To: Unni Menon (DEDJTR);Rob Holland (DEDJTR)

Cc: Personal Information (DEDJTR);

Personal Information (DEDJTR);

Subject: RE: Cleaners for Mercure Welcome

Hey team – see my exchange with Braedan offering to help.

From: Unni Menon (DEDJTR) < Personal Information@ecodev.vic.gov.au>

Sent: Wednesday, 1 April 2020 9:00 PM

To: Rob Holland (DEDJTR) < Personal Information Decodev.vic.gov.au>

Cc: Personal Information DEDJTR) Personal Information @ecodev.vic.gov.au>; Claire Febey (DEDJTR) DEDJTR) Personal Information @ecodev.vic.gov.au>; Personal Information @ecodev.vic.gov.au>

Subject: Re: Cleaners for Mercure Welcome

Thanks for the heads up Rob- will get to it in the morning

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From: Rob Holland (DEDJTR) < Personal Information@ecodev.vic.gov.au

Sent: Wednesday, April 1, 2020 8:54:02 PM

To: Unni Menon (DEDJTR) Personal Information @ecodev.vic.gov.au>

Cc: Personal Information (DEDJTR) < Personal Information @ecodevvicegov.au >; Claire Febey (DEDJTR)

< Personal Information @ecodev.vic.gov.au >; Personal Information (DEDJTR) < Personal Information (DEDJTR)</p>

Subject: FW: Cleaners for Mercure Welcome

Hi Unni,

I raised this with DHHS today and didn't get a clear answer and they indicated it was a matter for the contract. However, I suggest you contact Jason Helps and Braedan Hogan at DHHS in the first instance to attempt to resolve this.

@ecodev.vic.gov.au>

I would specifically ask them for what guidance we can give to hotels around cleaning requirements where they are (or will be) accommodating persons that are isolating or detained given that the strong likelihood of some guests having COVID-19.

I would also explain that we risk losing hotels from our inventory. Hotels are receiving excessive or unreasonable demands from cleaning contractors in the absence of clear guidance on what cleaning is required. This guidance will be valuable in managing expectations with hotels and protecting staff and contractors. Without this, it may not be financially viable for hotels to participate.

Hope this helps and happy to discuss.

Rob

Rob Holland

Director, Office of the Secretary
DJPR State Agency Commander
Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition Street, Melbourne, Victoria Australia 3000



djpr.vic.gov.au



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From: Claire Febey (DEDJTR) < Personal Informati @ecodev.vic.gov.au >

Sent: Tuesday, 31 March 2020 10:33 PM

To: Rob Holland (DEDJTR) < Personal Information@ecodev.vic.gov.au >

Subject: FW: Cleaners for Mercure Welcome

From: Unni Menon (DEDJTR) < Personal Information@ecodev.vic.gov.au>

Sent: Tuesday, 31 March 2020 7:39 PM

To: Claire Febey (DEDJTR) < Personal Informatio @ecodev.vic.gov aux

Subject: Fwd: Cleaners for Mercure Welcome

Hi Claire

Who would be best placed to give this advice?

Thanks Unni

From: Personal Information (DEDJTR) Personal Information @ecodev.vic.gov.au>

Sent: Tuesday, March 31, 2020 6:37 pm

To: Personal Information (DEDJTR); Unni Menon (DEDJTR); Personal Informatio (DEDJTR); Personal Information (DEDJTR); Personal Information (DEDJTR);

Subject: Cleaners for Mercure Welcome

Hi all,

had a call from Personal Inform the Mercure Welcome today.

His cleaners are saying the waste from the hotels is "clinical" rubbish and they are trying to charge him a lot more than what they normally do which will blow his costs out.

Do we have confirmation from DHHS about whether the waste is a biohazard?

He would like something from us confirming it can be considered as normal waste in order to push back on them RE cost.

Kind regards,



Level 8, 1 Spring Street, Melbourne, Victoria Australia 3000





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From: Claire Febey (DEDJTR)

Sent: Wed, 1 Apr 2020 21:03:09 +1100

To: Unni Menon (DEDJTR) DEDJTR);Braedan J Hogan (DHHS)

(DEDJTR);Rob Holland (DEDJTR) Cc:

FW: Cleaning specs Subject:

Unni, Personal I

Braedan is keen to understand what information we need regarding cleaning to support our negotiations with hotels.

Can you please reply all with a quick outline of what you need.

Braedan – in addition to what Unni and Personal In send through, as flagged in the SCC meeting I'm keen to understand:

 What specific practices should we apply in the hotel space (e.g. cleaning after each arrival through reception, after a confirmed case is moved, after a recreation period)

This is especially important for us to understand given the health and wellbeing issues raised by DHHS staff on the call.

Thanks so much

Claire

From: Braedan Hogan (DHHS)

Sent: Wednesday, 1 April 2020 3:36 PM

To: Claire Febey (DEDJTR) Personal Information @ecodev.vic.gov.au>

Subject: Cleaning specs

Hi – as discussed at 1:30 pm if you can send me the questions you had for us about cleaning I can see what we have available and seek further advice from Public Health if needed.

Braedan

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management Branch

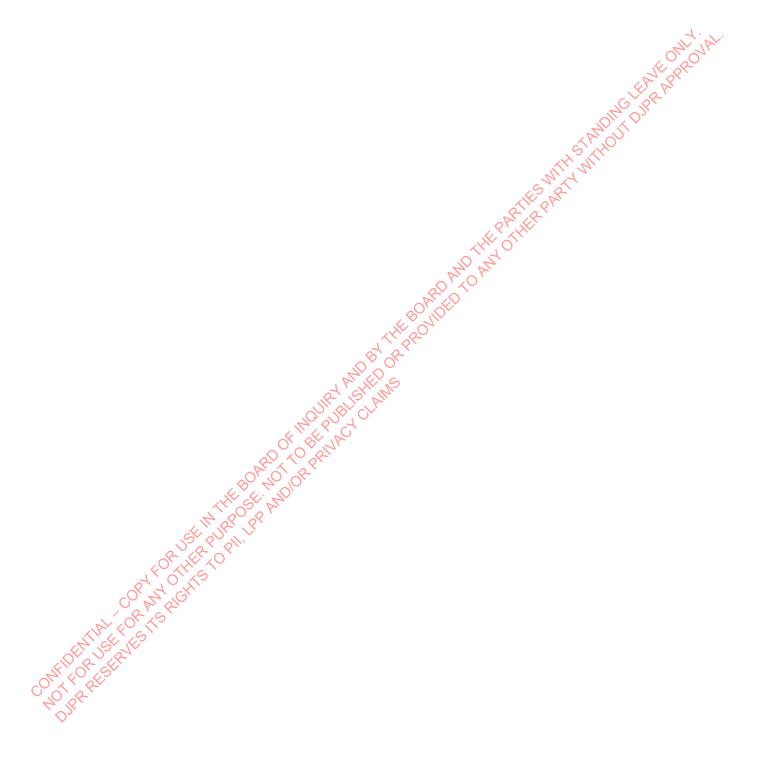
Regulation, Health Protection & Emergency Management Division

Department of Health and Human Services 50 Lonsdale Street Melbourne Victoria 3000

@dhhs.vic.gov.au

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virus or that it has not been intercepted or interfered with. If you have received this email in error or



From: SCC Support

Sent: Wed, 1 Apr 2020 18:29:23 +1100 (AEDT)

To: Rob Holland

Subject: Operation Soteria Minutes - 01/04/2020 **Attachments:** Op Soteria Minutes-2020-04-01-1330hrs.pdf

Good Afternoon,

Please find attached Operation Soteria Minutes for 01/04/2020.

Could each agency please advise who the lead is for the day (name and contact details) via sccvic.sctrl.health@scc.vic.gov.au

Please note: Some agency domains block attachments from Whispir. Please advise sccvic.support@scc.vic.gov.au if you do not receive this attachment.

Kind Regards,

Chris Eagle

Deputy State Controller - Operation Soteria

Operation Soteria Op.Soteria-Minutes-2020-04-01-1330hrs



EM-COP Library Filename – Op Soteria-Minutes-2020-04-01-1330hrs

Operation Soteria

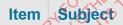
operation o	<u> </u>				
Meeting Detai	ls				
Meeting Date	1 April 2020			Start	1330hrs
Teleconference	9037 8885			End	1411hrs
Location	State Control Centre, Bogon	g Room			JK OF
Minutes	SRC Executive Support				CLERAN
Members	Name	Attendees (+ as required)	Na	me	DING LEAVE ARE
Deputy State Controller – Op Soteria (Chair)	Chris Eagle (CE)	DOT	Person	al Information	
EMC		VicPol DPC THE BOUNDER OF THE BOUN			
State Controller Health		DPC PLOPED PROPERTY OF THE PRO			
DHHS	Braedan Hogan (BH) Personal Information	THE BOUDE			
DJPR	Claire Febey (CF) Rob Holland (RH)	0,			
	MOUNTALISA				

CONTROL RISERVES





Actions from Previous Meetings				
No	Meeting Date	Action	Assigned to	Due Date
1	29/3/2020	Clarification of booking hotels and their capacity (roles & responsibilities) with DJPR & DHHS. 1/4/20 – Still working on.	Person	30/3/2020
2	29/3/2020	Check consistency of information supplied to passengers – (Plane, Airport and Hotel) 1/4/20 – BH updated fact sheets for Airport. Working on a daily newsletter.	Person Person On De la	30/3/2020
3	30/3/2020	Minibars not being removed from Crown Plaza to be followed up. 1/4/2020 – CF Alcohol has now been removed; in for 1 day only.	CF	31/3/2020 Complete
4	30/3/2020	Evacuation planning procedures to be followed up for hotels. 1/4/20 — VicPol have what they need.	DJPR / DHHS	31/3/2020



Situational Awareness

Deputy State Controller - Health







2. Operations

Reports on mornings transfers, key issues, items for review

nurses and concierge.

DHHS

Person:

 Airport process running smoothly, people processed in a timely manner.

- Overall the Promenade best set up with a business centre set up. Metropol set up is not ideal for Nurses, room at end of floor where you need to walk through occupied rooms. Working with hotel management. Crown Plaza also has some issues we are working through. DHHS staff are at each site, working with
 - If issues are critical re meeting dietary requirement then allowing deliveries.
 - Nurses over run with health and mental health needs, would like to refer people over support via telephone. Allowing nurses to focus on people that may be starting to develop symptoms around COVID.
- CF DJPR staff on the ground have raised concerns re DHHS having enough staff on the ground to deal with demand issues.
- BH Can have further discussion offline, the Newsletter under the door with contact number may divert the demand on the ground.
- Need to consider if Red Cross, Beyond Blue or Lifeline could assist with Mental Health issues that are arising, will chat offline.
- Security at Metropol advising people are smoking in rooms, they are letting it go at the moment. Security briefed daily and have strategy if people try and leave their room.
- One passenger taken away for back treatment, when he returned staff just dropped him off. Will work on a process to deal with this type of thing moving forward.
- Minor transported this morning and the process worked well.
- Are start of shift briefings now in place re use of PPE.
- Conducted at Crown Plaza and the Promenade this morning, just about to do one at Metropol.
- Works proceeding well 3 points of data, providing directly to
 Can distribute information now and establish a protocol.

DJPR

- Focussed on solving key issues driving people's satisfaction and comfort: smoking, recreation, policy around deliveries, food/dietary requirement.
- Working with DHHS regarding the operating model on the ground and understanding the model of care and how we interact with it (as an agency and through contracting staff).
- Trying to gain an understanding of expected demand for modelling work.

DOT

 Sufficient supply of buses to accommodate any flight schedule changes. AFP supporting well with challenges air side.

VicPol

- Operation is going well, concerned if disgruntle passengers decide to leave hotel.

 Need to understand what response would be like.
- Persor Need to understand what staffing levels are stationed at each hotel and contact points.
- BH I can be central coordination point, we have Authorised Officers at each hotel 24/7. Can facilitate conversation with DJPR about security and concierge staffing.



File Version

Operation Soteria





- **ACTION** Security escalation process to VicPol. VicPol response and requirements under detention order.
- Person SCT discussions regarding detainee, isolation, quarantine. Need clarity moving forward on proper reference.
- BH Passengers for internal use with VicPol for this operation.

Other

- Person It would be good to know rostering arrangements from DJPR and who they are so that we can contact them.
- CF Will take as action and provide details. Would also ask DHHS to do the same.
- ACTION DJPR & DHHS to share data of key people on the ground and also provide details to agency command / SCC.

3. **Planning**

Forward look at following day

Person - 2 or 3 flights per day with 100 passengers today and around 150 passengers tomorrow. This links into forward planning for hotels.

Health and Safety 4.

- BH Cleaning regime after buses have come through to wipe down areas of hotel.
- CF Seeking advice from DHHS on what the cleaning regime should be.
- BH Guidance online, frequency as often as possible.
- CF Would also need practice principals ie. After every intake, people being moved around etc.
- RH Wider issue coming in from other hotels we have contracted with, cleaning companies are saying they will charge more re possible COVID related.
- Yesterday we had a confirmed case of COVID that was reported. Yesterday afternoon an agreed process has been set up, DHHS is to advise the Deputy Controller Op Soteria, I will then advise agencies as needed/required. DHHS will follow the normal processes re close contact etc. The Authorised Officer on site will then take charge of actions to be undertaken on site. PPE should be used at all times like any person could be a potential case. Person will then be moved to an appropriate floor.

5. Welfare and Wellbeing

Coordination

State Controller – Health / Deputy State Controller

DHHS

File Version

Operation Soteria

9.



Next Scheduled Meeting - 1330hrs, 2 April 2020



7.	 CF – How will cases be reported and how will it be managed with others in the hotel. BH – We do not release that level of information. CF – Need to look at the assumption it gets into public domain. Prepare for how it would be handled, could create a spike in mental health issues. BH – ACTION – Will liaise with CHO about how he would want it to handle it. Person – DPC can help with communications for passenger information if needed. BH – Daily newsletter being worked on with linkages to other services, we will go through usual approval processes. CF – Would be good to include housekeeping arrangements etc.
8.	Other Business • ARIE PART AREA AREA

Actions				
No	Action	Assigned to	Due Date	
1.	Security escalation process to VicPol VicPol response and requirements under detention order.	BH /	3/4/2020	
2.	Preparation on how we manage communications if a confirmed case of a passenger is made known in the media.	вн	2/4/2020	
3.	DJPR & DHHS to share data of key people on the ground and also provide details to agency command / SCC.	Pers/CF	2/4/2020	

1/04/2020 - 18:27

From: Claire Febey (DEDJTR)

Sent: Thu, 2 Apr 2020 21:39:16 +1100

To: SEMC

Cc: Rob Holland (DEDJTR)

Subject: RE: FW: FW: Cleaning specs

Hi team

Many thanks for sharing this link. It's a good base level of information, but can I press you for something a little more tailored?

- Hotels are seeking very specific advice on cleaning practices when they are running essentially health services, they will be accommodating many or mostly COVID-19 cases.
- For Operation Soteria, the regularity of cleaning in the hotel foyer has been raised as health and
 welfare issues by DHHS, we are seeking direct instruction from DHHS as to what cleaning practices
 are needed and expected to ensure staff and passengers are safe, in an environment where we
 have been instructed to assume all passengers are confirmed cases.

Can I please ask you for some advice which is more tailored to the context that we're operating in.

Thanks you in advance

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions

Level 36, 121 Exhibition St, Melbourne, Victoria Australia 3000

T: 03 8392 8049 | M: Personal Information
Personal Informat

/@ecodev.vic.gov.au

From: SEMC < semc@dhhs.vic.gov.au> Sent: Thursday, 2 April 2020 5:59 PM

To: Claire Febey (DEDJTR) Personal Information @ecodev.vic.gov.au>

Subject: Fwd FW: FW: Cleaning specs

Thanks Clare) good evening all,

Please find advise on cleaning guideline enquiry (link below) and contact who may be able to provide additional resource information.

regards

State Duty Officer

DHHS

------ Forwarded message ------

From: Personal Information

Date: 02/04/2020 17:20

Subject: FW: FW: Cleaning specs

To: "StateEmergencyManagementCentre SEMC (DHHS)"

CC. 'Personal Information (DHHS)"

Hi SEMC,

Has this advice been provided for the hotels? If not, there are resources on the health gov website and

https://www.health.gov.au/sites/default/files/documents/2020/03/coronavirus-covid-19-information-for-hotels-and-hotel-staff-coronavirus-covid-19-information-for-hotels-and-hotel-staff-2.pdf

I have also included Personal Information our infection control lead, who may know of other resources that exist that could guide facilities.

Kind regards

Personal Information

Deputy Public Health Commander COVID-19 (Operations)

Senior Medical Advisor

Health Protection Branch | Regulation, Health Protection and Emergency Management Division Department of Health and Human Services | 50 Lonsdale Street, Melbourne Victoria 3000

t. +61 3 9096 5177 | m. Personal Information @dhhs.vic.gov.au

w. www.dhhs.vic.gov.au

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From: Personal Information DHHS) Personal Information @dhhs.vic.gov.au>

Sent: Thursday, 2 April 2020 8:12 AM

To: Personal Information (DHHS) Personal Information (DHHS)

Subject: Fwd: FW: Cleaning specs

Get Outlook for iOS

From: SEMC < semc@dhhs.vic.gov.au >

Sent: Thursday, April 2, 2020 7:02:22 AM

To: Personal Information (DHHS) Personal Information (Qdhhs.vic.gov.au)

Subject: Fwd: FW: Cleaning specs

Good morning,

Could public health please provide guidelines on cleaning requirements for response in relation to the questions below. Given this is active quarantine accommodation, there is an urgency associated with this information.

Many thanks

DHHS SDO

----- Forwarded message -----

From: Braedan Hogan Date: 01/04/2020 21:49 Subject: FW: Cleaning specs

To: "StateEmergencyManagementCentre SEMC (DHHS)"

Hi SEMC - can you please seek advice from PH on this as a priority.

Braedan

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management Branch

Regulation, Health Protection & Emergency Management Division

Department of Health and Human Services

50 Lonsdale Street Melbourne Victoria 3000

p. 9096 8971 m

@dhhs.vic.gov.au

Personal Information @ecodev.vic.gov.au> From: Unni Menon (DEDJTR

Sent: Wednesday, 1 April 2020 9:23 PM

To: Claire Febey (DEDJTR) Personal Information@ecodev.vic.gov.au>

(DEDJTR)

```
@ecodev.vic.gov.au>; Braedan Hogan (DHHS)
                 (DEDJTR) < Personal Informa @ecodev.vic.gov.au >; Rob Holland (DEDJTR)
              @ecodev.vic.gov.au>
 Subject: RE: Cleaning specs
 Thanks Claire and hi Braedan and Rob
 My thoughts on what we require( similar to what Claire has alluded to):
1. What is the minimum acceptable standard of cleaning required at all quarantine premises
2. Any prescription details around cleaning standards expected in all common areas including corridors,
   hallways, reception, terraces etc
3. Should a guest vacate- what level of clean is expected for each room( COVID infected versus non infected
   - or is there a difference in cleaning standards)
 Hope this helps
 Cheers
 Regards
 Unni Menon
 Executive Director
 Department of Jobs, Precincts and Regions
 Level 7, 1 Spring Street, Melbourne, 3000
 E: Personal Information @dipr.vic.gov.
 djpr.vic.gov.au
 Linkedin | Youtube | Twitter
 From: Claire Febey (DEDJTR)
                                            @ecodev.vic.gov.au>
 Sent: Wednesday, 1 April 2020 9:03 PM
 To: Unni Menon (DEDJTR) (Personal Informatic @ecodev.vic.gov.au>; Donna Findlay (DEDJTR)
```

<u>Decodev.vic.gov.au</u>>; Braedan J Hogan (DHHS)

<u>@ecodev.vic.gov.au</u>>; Rob Holland (DEDJTR)

@dhhs.vic.gov.au>

Unni, Donna

Personal Informatio @ecodev.vic.gov.au:

Subject: FW: Cleaning specs

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Can you please reply all with a quick outline of what you need.

Braedan – in addition to what Unni and Personal In send through, as flagged in the SCC meeting I'm keen to understand:

 What specific practices should we apply in the hotel space (e.g. cleaning after each arrival through reception, after a confirmed case is moved, after a recreation period).

This is especially important for us to understand given the health and wellbeing issues raised by DHHS staff on the call.

Thanks so much

Claire

From: Braedan Hogan (DHHS) < Braedan. Hogan@dhhs.vic.gov.au >

Sent: Wednesday, 1 April 2020 3:36 PM

To: Claire Febey (DEDJTR) Personal Information @ecodev.vic.gov.au>

Subject: Cleaning specs

Hi – as discussed at 1:30pm if you can send me the questions you had for us about cleaning I can see what we have available and seek further advice from Public Health if needed.

Braedan

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management Branch

Regulation, Health Protection & Emergency Management Division

Department of Health and Human Services

50 Lonsdale Street Melbourne Victoria 3000

p. 9096 8971 m. Personal Information

e. Braedan.Hogan@dhhs.vic.gov.au

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From: Braedan Hogan (DHHS) Sent: Wed, 1 Apr 2020 21:48:51 +1100 To: Unni Menon (DEDJTR);Claire Febey (DEDJTR); (DEDJTR) Personal Information (DEDJTR); Rob Holland (DEDJTR) Cc: Subject: **RE: Cleaning specs** Thanks Unni – will get some clear advice and come back to you. Braedan Braedan Hogan Deputy Director, Strategy and Policy **Emergency Management Branch** Regulation, Health Protection & Emergency Management Division Department of Health and Human Services 50 Lonsdale Street Melbourne Victoria 3000 @dhhs.vic.gov.au From: Unni Menon (DEDJTR) @ecodev.vic.gov.au> Sent: Wednesday, 1 April 2020 9:23 PM To: Claire Febey (DEDJTR) Personal Information @ecodev.vic.gov.au>; (DEDJTR) @ecodev.vic.gov.au>; Braedan Hogan (DHHS)Personal Information @dhhs.vic.gov.au> @ecodev.vic.gov.aux; Rob Holland (DEDJTR) @ecodev.vic.gov.au> Subject: RE: Cleaning specs Thanks Claire and hi Braedan and Rob My thoughts on what we require(similar to what Claire has alluded to): a. What is the minimum acceptable standard of cleaning required at all quarantine premises b. Any prescription details around cleaning standards expected in all common areas including corridors, hallways, reception, terraces etc c. Should a guest vacate- what level of clean is expected for each room(COVID infected versus non infected - or is there a difference in cleaning standards) Hope this helps Cheers Regards Unni Menon **Executive Director** Department of Jobs, Precincts and Regions Level 7,1 Spring Street, Melbourne, 3000 ersonal Information @djpr.vic.gov.au

Linkedin | Youtube | Twitter

djpr.vic.gov.au

From: Claire Febey (DEDJTR) < Personal Information @ecodev.vic.gov.au >

Sent: Wednesday, 1 April 2020 9:03 PM

To: Unni Menon (DEDJTR) Personal Information @ecodev.vic.gov.au >; Personal Information @ecodev.vic.gov.au >; Personal Information @ecodev.vic.gov.au >; Rob Holland (DEDJTR)

Cc: Personal Information @ecodev.vic.gov.au >; Rob Holland (DEDJTR)

Personal Information @ecodev.vic.gov.au> **Subject:** FW: Cleaning specs

Unni, Donna

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Thanks so much

Claire

From: Braedan Hogan (DHHS) Personal Information @dhhs.vic.gov.au>

Sent: Wednesday, 1 April 2020 3:36 PM

To: Claire Febey (DEDJTR) Personal Information @ecodev.vic.gov.au>

Subject: Cleaning specs

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Braedan

Braedan Hogan

Deputy Director, Strategy and Policy

Emergency Management Branch

Regulation, Health Protection & Emergency Management Division

Department of Health and Human Services

50 Lonsdale Street Melbourne Victoria 3000

Personal Information

Personal Information @dhhs.vic.gov.au

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Sent: Thu, 2 Apr 2020 09:44:47 +1100 To: Braedan J Hogan (DHHS) Claire Rob Holland (DEDJTR) Cc: Febey (DEDJTR); Subject: RE: Waste Removal and Laundry Specs Cheers thanks Braedan From: Braedan Hogan (DHHS) < Personal Sent: Thursday, 2 April 2020 8:38 AM To: Unni Menon (DEDJTR) < Personal Infor Cc: Personal Information (DEDJTR) < Rob Holland (DEDJTR) (DEDJTR) DEDJTR) Claire Febey (DEDJTR) < ✓ Personal Information Subject: RE: Waste Removal and Laundry Specs Thanks Unni – seeking advice from PHC/CHO. Braedan Braedan Hogan Deputy Director, Strategy and Policy **Emergency Management Branch** Regulation, Health Protection & Emergency Management Division Department of Health and Human Services 50 Lonsdale Street Melbourne Victoria 3000 From: Unni Menon (DEDJTR) Sent: Thursday, 2 April 2020 7:19 AM To: Braedan Hogan (DHHS) (DEDITR) < ; Rob Holland (DEDJTR) (DEDJTR) < Personal Information Claire Febey (DEDJTR) < Subject: FW: Waste Removal and Laundry Specs Importance: High Hi Braedan Thank you for following up on the minimum requirements for cleaning - whilst you are seeking this information can you also (for any avoidance of doubt) please seek similar information from Health expertise on the minimum required standards for waste disposal and laundry.

Unni Menon (DEDJTR)

Regards

From:

Unni Menon

Many thanks

Executive Director

Department of Jobs, Precincts and Regions

Level 7, 1 Spring Street, Melbourne, 3000 djpr.vic.gov.au ORIA <u>Linkedin</u> | <u>Youtube</u> | <u>Twitter</u> From: Braedan Hogan (DHHS) < Personal Inform Sent: Wednesday, 1 April 2020 9:49 PM To: Unni Menon (DEDJTR) < Personal Inform Claire Febey (DEDJTR) DEDJTR) Cc: Personal Information (DEDJTR) < Rob Holland (DEDJTR) Subject: RE: Cleaning specs Thanks Unni – will get some clear advice and come back to you. Braedan Braedan Hogan Deputy Director, Strategy and Policy **Emergency Management Branch** Regulation, Health Protection & Emergency Management Division Department of Health and Human Services 50 Lonsdale Street Melbourne Victoria 3000 From: Unni Menon (DEDITR) < Sent: Wednesday, 1 April 2020 9:23 PM To: Claire Febey (DEDJTR) Personal Information (DEDJTR) >; Braedan Hogan (DHHS) < Personal Information Cc: Personal Information (DEDJTR) < Personal Information ; Rob Holland (DEDJTR) Subject: RE: Cleaning specs

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- a. What is the minimum acceptable standard of cleaning required at all quarantine premises
- Any prescription details around cleaning standards expected in all common areas including corridors, hallways, reception, terraces etc
- c. Should a guest vacate- what level of clean is expected for each room(COVID infected versus non infected or is there a difference in cleaning standards)

Hope this helps

Cheers

Regards

Unni Menon Executive Director

Department of Jobs, Precincts and Regions Level 7, 1 Spring Street, Melbourne, 3000



From: Claire Febey (DEDJTR) < Personal Information

Sent: Wednesday, 1 April 2020 9:03 PM

To: Unni Menon (DEDJTR) < Personal Information ; Personal Information ; Braedan J Hogan (DHHS) < Personal Information > ; Rob Holland (DEDJTR)

Personal Information > ; Rob Holland (DEDJTR)

Subject: FW: Cleaning specs

Unni, Personal Information > ; Personal Information > ; Rob Holland (DEDJTR)

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Can you please reply all with a quick outline of what you need.

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Thanks so much

Claire

From: Braedan Hogan (DHHS) < Personal Information

Sent: Wednesday, 1 April 2020 3:36 PM

To: Claire Febey (DEDJTR) < Personal Information

Subject: Cleaning specs

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Braedan

Braedan Hogan Deputy Director, Strategy and Policy

Emergency Management Branch
Regulation, Health Protection & Emergency Management Division
Department of Health and Human Services
50 Lonsdale Street Melbourne Victoria 3000

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From: Braedan Hogan (DHHS)

Sent: Wed, 8 Apr 2020 14:40:35 +1000

To: Claire Febey (DJPR);SCC-Vic (State Controller Health)

Cc: Personal Information (DJPR); Personal Information (DJPR); Andrea C Spiteri (DHHS); Chris B

Eagle (DELWP); Pam Williams (DHHS); Personal Information DHHS); Meena Naidu (DHHS)

Subject: RE: Update on next steps with hotels

Attachments: Coronavirus disease 2019 (COVID-19) - Guidelines for health services and general practitioners - V17-5April 2020.DOCX, Cleaning and disinfecting to reduce COVID-19 transmission - 20 March 2020 (2).docx

Thanks Claire – we will just need to ensure that sequence of hotels allows us enough rooms to meet demand – Ill turn to Chris to look at his modelling and to ensure we have adequate reserves.

COVID positive hotel

- We will require separate floors for COVID positive passengers under a detention notice vs others who are just under self-isolation order. This will also trigger the need for an AO presence.
 - I think the simplest way to cut this is to have 3 floors for passengers under 14 day detention notice to start with security presence on these floors
- We will work today to move the current three COVID positive passenger to the Rydges tomorrow we will provide more advice on this as we plan this through.

DHHS is also developing a more robust model of care for this hotel and linked in with a Hospital.

<u>Cleaning requirements</u> – see attached the current guide for GP's (page 25 has the detail on cleaning for COVID) and the general cleaning advice which would work for every space aside from those with COVID positive people in rooms.

Exit requirements - This is being worked through currently and I will leave to Pam to advise.

Braedan

Braedan Hogan | DHHS Agency Commander

Deputy Director, Strategy and Policy

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Sent: Wednesday, 8 April 2020 2:23 PM

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Subject: Update on next steps with hotels

Braedan, Chris

Activating four additional hotels

You have asked that we activate all remaining contracted hotels that are deemed as suitable by DHHS for Operation Soteria (14 properties, 3936 rooms) and that we activate ~one new hotel per day commencing 10 April.

Please note that the order of listing below indicates their level or readiness and therefore our preferred order of activation:

- The following hotels will be ready to receive guests from no later than 10 April
- 1. Travelodge Hotel Melbourne Docklands
- 2. Novotel Melbourne
- This means we will have DJPR supplies (e.g. groceries) prepositioned, and hotel and security staff will be in place.
- DJPR will undertake site visits at the following hotels tomorrow with a view to activating them on 11/12 April.
- 1. Travelodge Hotel Southbank
- 2. Batmans Hill Collins.
- We will confirm exact timing for (3) and (4) after tomorrow's site visits

COVID-19 confirmed hotel

Separately we have also agreed the Rydges on Swanson will today take its first COVID-19 confirmed case, and it will be kept for the purpose of accommodating confirmed cases from both Operation Soteria and the community.

Can you please confirm:

- Any additional requirements for the service model (e.g. additional security, people housed on different floors) beyond those outlined to Braedan and Andrea in email corresponce by

 Personal Information
- When you will commence the movement of people from current quarantine hotels to the Rydges, and how this will be managed. This will help us understand when additional stock is likely to be made available as we remove fred floors. I also note we will not allocate red floors in future hotels as they are activated.

Cleaning requirements

As discussed can you please confirm in writing the following:

- Cleaning requirements for rooms once vacated, specifically those that have had confirmed COVID-19 cases; and
- whether the disposal of rubbish should be treated any differently in hotels that are housing quarantined or isolated guests. We have been advised through hotels that in NSW this is treated as medical grade waste.
- Any other steps that are required from a DHHS perspective before rooms are returned to general stock.

Exit accommodation

There was discussion today about offering exiting passengers accommodation at the airport if they needed to stay overnight before they can travel.

Can you please urgently confirm if you would like remaining stock at one of the airport hotels to be reserved for this purpose, and your requirements for how these guests would be separated from quarantined passengers (e.g. separate floors at a minimum to manage security).

Thanks so much

Claire

Claire Febey

Executive Director, Priority Projects Unit | Office of the Secretary Department of Jobs, Precincts and Regions

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Government of Victoria, Victoria, Australia.

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Coronavirus disease 2019 (COVID-19)

Case and contact management guidelines for health services and general practitioners

5 April 2020

Version 17



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Background

Coronavirus disease 2019 (COVID-19) was first identified in Wuhan City, Hubei Province, China in December 2019. Updated epidemiological information is available from the World Health Organization (WHO) and other sources. Current information on COVID-19 is summarised in a section at the end of this guideline entitled 'The disease'.

These guidelines and a range of other resources for health services and general practitioners can be found at the department's Coronavirus disease (COVID-19) website https://www.dhhs.vic.gov.au/novelcoronavirus>.

A hotline is available for the general public who have questions or concerns – 1800 675 398

Public health response objectives

This situation is evolving rapidly with new clinical and epidemiological information. Following the declaration of a State of Emergency in Victoria on Monday 16th March and subsequent Directions, the Department of Health and Human Services' (the department) public health response has now transitioned from the Initial Containment stage (which encompassed an inclusive approach to identifying cases and a precautionary approach to the management of cases and contacts), to the Targeted Action stage, with implementation of social distancing measures and shutdowns of non-essential services to slow disease transmission, prioritisation of diagnostic testing to critical risk groups, and adoption of sustainable strategies and models of care.

The overall objectives of the public health response are to:

- 1. Reduce the morbidity and mortality associated with COVID-19 infection through an organised response that focuses on containment of infection.
- 2. Rapidly identify, isolate and treat cases, to reduce transmission to contacts, including health care, household and community contacts.
- 3. Characterise the clinical and epidemiological features of cases in order to adjust required control measures in a proportionate manner.
- Minimise risk of transmission in healthcare and residential aged care environments, including minimising transmission to healthcare and residential aged care workers.

Checklist for general practitioners

The following actions should be undertaken when a patient presents to a general practice or community health service who may be a case of COVID-19:

- 1. Provide a single-use surgical mask for the patient to put on.
- 2. Isolate the patient in a single room with the door closed.
- 3. Any person entering the room should don droplet and contact precautions personal protective equipment (single-use surgical mask, eye protection, gown and gloves).
- 4. Conduct a medical assessment, and focus on:
 - a) the date of onset of illness and especially whether there are symptoms or signs of pneumonia
 - b) contact with confirmed cases of COVID-19
 - c) precise travel history and occupation
 - d) history of contact with sick travellers or other people or overseas health care facilities
 - e) work or residence in a moderate or high risk setting for transmission
 - f) residence in a geographically localised area with elevated risk of community transmission, as defined by the department.

5. Determine:

- (a) Does the patient need testing for COVID-19? Refer to Who should be tested for COVID-19
- (b) Does the patient require further assessment in an emergency department? Where there is suspicion of pneumonia or the patient is quite unwell, a suspected case of COVID-19 should be tested and managed in hospital.
- (c) If further assessment is required, how will the patient be transferred?

The department no longer needs to be notified about suspected cases (only confirmed cases).

- 6. If a suspected case of COVID-19 is unwell enough to require ambulance transfer to hospital, call Triple Zero (000) in the normal manner but advise that the patient may have suspected COVID-19 infection. Ambulance transfers do not need to be approved by the department. Where there is no clinical need for ambulance transfer, alternative means of transport should be used including private car driven by the case or an existing close contact (not bus, taxi or Uber).
- 7. Remember to provide a surgical face mask for the patient and driver if being transferred to an emergency department by any means.
- 8. If a patient is tested in the community by a general practitioner, the general practitioner should **undertake testing** as indicated in this guide. Ensure arrangements are in place for contacting the patient with the test result this is the responsibility of the general practitioner.
- 9. Advise a suspected case they must self-isolate at home, and provide a factsheet for suspected cases from the department's COVID-19 webpage.
- ndertake cleaning and disinfection of the room as detailed in this guide.
- 11. When the test result is available:
 - a) If the test is negative for COVID-19 provide the negative result from the laboratory to the patient and manage any other cause of illness you have assessed as requiring treatment. Consider advising the patient in the normal manner that admission to hospital and further testing may be required if they deteriorate.
 - b) **If the test is positive** for COVID-19, call the department on 1300 651 160 to confirm that the department is aware of the result and agree on next steps for management of the patient.

Checklist for health services

The following actions should be undertaken when a patient presents to an emergency department or urgent care centre who may be a suspected case of COVID-19:

- 1. Staff at triage points should wear personal protective equipment for droplet and contact precautions (single-use surgical mask, eye protection, gown and gloves).
- 2. Triage high risk patients to a separate isolated waiting area away from low risk patients, staff and general public.
- 3. Provide a single-use surgical mask for the patient to put on.
- 4. Isolate the patient in a single room with the door closed.
- 5. Any person entering the room should don droplet and contact precautions personal protective equipment (single-use surgical mask, eye protection, gown and gloves).
- 6. Conduct a medical assessment, and focus on:
 - (a) the date of onset of illness and especially whether there are symptoms or signs of pneumonia
 - (b) contact with confirmed cases of COVID-19
 - (c) precise travel history and occupation
 - (d) history of contact with sick travellers or other people or overseas health care facilities
 - (e) work or residence in a moderate or high risk setting for transmission
 - (f) residence in a geographically localised area with elevated risk of community transmission, as defined by the department.
- 7. Determine whether the patient fits the current criteria for testing. Refer to Who should be tested for COVID-19
- 8. If admission is not required and the patient can return to the community:
 - a) for patients that do **not** fit the current criteria for testing for COVID-19 advise the patient to stay at home until their symptoms have resolved and they feel well. Those with fever should stay at home until at least 72 hours (3 days) after the last fever. Provide a factsheet for those who do not meet criteria for testing from the department's coronavirus disease (COVID-19) website https://www.dhhs.vic.gov.au/information-health-services-and-general-practitioners-novel-coronavirus
 - b) for patients that fit the current criteria for testing the notifying clinician should advise the patient to self-isolate at home (if not already) and minimise contact with other people. Provide a factsheet for suspected cases from the department's coronavirus disease (COVID-19) website https://www.dhhs.vic.gov.au/information-health-services-and-general-practitioners-novel-coronavirus
 - c) consider advising the patient in the normal manner that admission to hospital and further testing may be required if they deteriorate
 - d) ensure arrangements are in place for the patient to be contacted with the test result this is the responsibility of the testing clinician and health service.
- 9. If admission is required:
 - a) maintain infection control precautions and actively consider multiple samples including from lower respiratory tract specimens.
- 10. When the test result is available:
 - a) if the test is positive for COVID-19, provide the result to the patient. The health service infectious diseases lead, or senior clinician should call the department on 1300 651 160 to confirm that the department is aware of the result and to provide any additional clinical information.

- b) **if the test is negative** for COVID-19, provide the negative result to the patient and manage any other cause of illness you have assessed as requiring treatment.
- c) consider advising the patient in the normal manner that admission to hospital and further testing may be required if they deteriorate and no other cause is found.

Who should be tested for COVID-19?

People without symptoms should not be tested.

Patients who meet at least one clinical AND at least one epidemiological criterion should be tested:

Clinical criteria:

Fever (≥38°C) or history of fever (for example night sweats, chills)

OR

Acute respiratory infection (for example, shortness of breath, cough, sore throat).

Epidemiological criteria:

Close contacts of confirmed COVID-19 cases with onset of symptoms within 14 days of last contact

OR

Travelers from overseas with onset of symptoms within 14 days of return

OR

Cruise ship passengers and crew with onset of symptoms within 14 days of disembarkation

OR

Paid or unpaid workers in healthcare, residential care, and disability care settings

OR

People who have worked in public facing roles in the following settings within the last 14 days:

- homelessness support
- child protection
- the police force
- firefighters who undertake emergency medical response
- childcare and early childhood education
- primary or secondary schools.

ÖR

Any person aged 65 years or older

OR

Aboriginal or Torres Strait Islander peoples

OR

Patients admitted to hospital where no other cause is identified

OR

Any person in other high-risk settings, including:

- Aged care, disability and other residential care facilities
- Military operational settings
- Boarding schools
- Correctional facilities
- Detention centres
- Settings where COVID-19 outbreaks have occurred, in consultation with the department.

Confirmed case:

A person who tests positive to a validated SARS-CoV-2 nucleic acid test or has the virus identified by electron microscopy or viral culture.

Only confirmed cases need to be notified to the department. Notify the department of confirmed cases as soon as practicable by calling 1300 651 160, 24 hours a day.

General comments:

- Clinical judgement should be exercised in testing hospitalised patients.
- All patients being tested for COVID-19 should home isolate until test results are available. All patients should attend an emergency department if clinical deterioration occurs.

Definition of close contact

For the purposes of testing, the department advises a precautionary understanding of close contact. In keeping with definitions of close contact developed in other jurisdictions, close contact means greater than 15 minutes face-to-face or the sharing of a closed space for more than two hours with a confirmed case without recommended personal protective equipment (PPE) which is droplet and contact precautions for the definition of contact.

Contact needs to have occurred during the period of 24 hours prior to onset of symptoms in the confirmed case until the confirmed case is no longer considered infectious to be deemed close contact.

Examples of close contact include:

- living in the same household or household-like setting (for example, a boarding school or hostel)
- direct contact with the body fluids or laboratory specimens of a confirmed case without recommended PPE (droplet and contact precautions)
- a person who spent two hours or longer in the same room (such as a GP clinic or ED waiting room, a school classroom; an aged care facility)
- a person in the same hospital room when an aerosol generating procedure (AGP) is undertaken on the case, without recommended PPE for an AGP (airborne and contact precautions)
- Aircraft passengers who were seated in the same row as the case or in the two rows in front or two
 rows behind a confirmed COVID-19 case.
- For aircraft crew exposed to a confirmed case, a case-by-case risk assessment should be conducted by the airline to identify which crew member(s) should be managed as close contacts. This will include:
 - Proximity of crew to confirmed case
 - Duration of exposure to confirmed case
 - Size of the compartment in which the crew member and confirmed case interacted
 - Precautions taken, including PPE worn, when in close proximity to the confirmed case
 - If an aircraft crew member is the COVID-19 case, contact tracing efforts should concentrate on
 passengers seated in the area where the crew member was working during the flight and all of the
 other members of the crew.
- Close contacts on cruise ships can be difficult to identify, and a case-by-case risk assessment should be conducted to identify which passengers and crew should be managed as close contacts.
- Face-to-face contact for more than 15 minutes with the case in any other setting not listed above.

Healthcare workers (HCWs) and other contacts who have taken recommended infection control precautions, including the use of recommended PPE (droplet and contact precautions for the purposes of this contact definition), while caring for a suspected or confirmed case of COVID-19 are **not** considered to be close contacts.

Triaging and managing high risk patients on arrival to hospital

A patient is considered high-risk for COVID-19 if:

- presenting with acute respiratory tract infection
- presenting with fever (≥38 degrees), without another immediately apparent cause (e.g. UTTor cellulitis)
- they have travelled overseas and have onset of symptoms within 14 days of return
- they have been in close contact with a confirmed coronavirus (COVID-19) case with onset of symptoms within 14 days
- they are a confirmed coronavirus (COVID-19) case (this includes healthcare workers who are known confirmed cases and are attending for clearance testing to determine when they can return to work).

Patient transfer and destination health service

The following is advice on where patients should be managed:

- · patients should be assessed and managed by the health service they present to
- transport of patients to other facilities should be avoided unless medically necessary
- ambulance transfer should be reserved for cases where there is clinical need; alternative means of transport should be used for other cases including a private car driven by the case or an existing close contact (not bus, taxi or Uber).
- suspected or confirmed cases in the community who require assessment or admission at a hospital should be seen and assessed at the nearest emergency department
- travellers identified as suspected cases at Melbourne Airport can also be transferred by private car to a coronavirus assessment centre at a Victorian hospital. If ambulance transport is required the patient will likely be transferred to Royal Melbourne Hospital or Royal Children's Hospital for assessment.
- travellers identified as suspected cases at Avalon Airport and requiring ambulance transport will likely be transferred to Geelong Hospital for assessment.

Arrival to hospital and triage

Upon arrival to the emergency department, patients assessed as high-risk should be triaged to a separate isolated section of the waiting area, away from the general public and provided with a surgical mask. Assessment centres can support the management of high-risk patients if they are in place at the health service. All staff at triage points and assessment centres should be wearing PPE required for suspected or confirmed cases of coronavirus (COVID-19).

Ambulance triage

Patients assessed as high-risk and arriving by ambulance should be triaged to an isolated section of the waiting area away from the general public and be provided with a surgical mask as appropriate. For patients who cannot go to the waiting area (for example, stretcher, ongoing clinical care), they should remain in the ambulance vehicle until their triage and cubicle allocation is completed. Once allocated, the patient should move directly from the ambulance to the cubicle, and not stop in the corridors.

Emergency department admissions

A dedicated floor plan should be established that clearly designates areas assigned for high-risk patients within the emergency department. If able, rostering of staff to these areas to support the separation and

resourceful use of PPEs should be considered. For staff working directly in the area of suspected or confirmed cases of coronavirus (COVID-19), PPE should be worn accordingly. Designated areas for donning and removing PPE should be in place.

Patient transfers

Should high-risk patients need to be moved outside of the initial isolation section, they should be transferred using a route that minimises contact with the general hospital population including clinicians (for example, dedicated lift service, external path). Staff involved in patient transfer should wear PRE required for suspected or confirmed cases of coronavirus (COVID-19). Physical distancing rules apply during all stages of the transfer.

Case management

Assessment and management of patients for COVID-19 testing

A checklist above indicates key actions for the assessment of patients for testing.

Victorian health services and general practitioners are only required to notify the department of **confirmed** cases.

The medical assessment of the patient should focus on the following:

- the date of onset of illness and especially whether there are symptoms or signs of pneumonia.
- contact with confirmed cases of COVID-19
- precise travel history and occupation
- history of contact with sick travellers or other people or overseas health care facilities.
- work or residence in a high risk setting for transmission.

People awaiting results of tests for COVID-19 should be isolated until COVID-19 is excluded.

Exclusion of COVID-19

For patients with fever or respiratory tract infection who are not hospitalised, a single negative nasopharyngeal swab (plus sputum if possible) is sufficient to exclude COVID-19 infection.

A patient who developed symptoms whilst in self-quarantine, for example because of recent overseas travel or contact with a confirmed case, who has then tested negative for COVID-19 should continue their quarantine period but be considered for a second test if they deteriorate and require hospitalisation.

For patients who fit the testing criteria and who require admission for pneumonia (for example, fever and shortness of breath), two negative nasopharyngeal swabs (plus a lower respiratory tract specimen such as sputum if possible) are recommended to exclude COVID-19 infection. Further testing can also be considered if a patient deteriorates and clinical suspicion of COVID-19 remains high.

Clinical management of confirmed cases

This is at the discretion of the treating team and at the present time is supportive care only.

Admission to hospital should occur when medically necessary or when directed by the department in order to reduce the risk of transmission or facilitate testing for clearance, such as if the case resides in a communal environment. Emerging information suggests COVID-19 may be associated with a delayed deterioration in clinical status in some cases.

Interim clinical guidelines for the management of patients with COVID-19 have been released by the following peak professional bodies:

- The Australasian Society for Infectious Diseases (ASID)
- The Australian and New Zealand Intensive Care Society (ANZICS)

Persons not requiring hospitalisation who have confirmed COVID-19 can be managed at home. The United States Centers for Disease Control and Prevention (USCDC) has developed principles for such home care management at https://www.cdc.gov/coronavirus/COVID-19/guidance-home-care.html.

Criteria for inpatient discharge

The department and treating team may agree to care of the patient in the community for example through Hospital in the Home if all of the following criteria are met:

- an infectious diseases specialist determines the patient is clinically improved and well enough to be managed in the community, and
- the patient has been afebrile for the previous 24 hours, and
- a risk assessment has been conducted by the department to determine whether there is any risk to the household.

A confirmed case in the home must remain in isolation until criteria for release from isolation are met.

Release from isolation of a confirmed case

The department will determine when a confirmed case no longer requires to be isolated in hospital or in their own home, in consultation with the treating clinician. This will be actively considered when all of the following criteria are met:

- the person has been afebrile for the previous 72 hours, and
- at least ten days have elapsed after the onset of the acute illness, and
- there has been a noted improvement in symptoms, and
- a risk assessment has been conducted by the department and deemed no further criteria are needed

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Healthcare workers and workers in aged care facilities who meet the above criteria can be released from isolation. However, these individuals must meet the following criteria before they can return to work.

Return-to-work criteria for health care workers and workers in aged care facilities

Healthcare workers and workers in aged care facilities (HCWs) must meet the following criteria before they can return to work in a healthcare setting or aged care facility:

- the person has been afebrile for the previous 48 hours
- resolution of the acute illness for the previous 24 hours
- be at least seven days after the onset of the acute illness
- PCR negative on at least two consecutive respiratory specimens collected 24 hours apart after the acute illness has resolved.

The department will determine when healthcare and aged care workers should be tested for return-to-work clearance in consultation with the patient and their treating doctor. Testing should be arranged by the healthcare worker's empoyer, the healthcare or aged care worker's treating doctor, or at a

coronavirus assessment centre if testing by the treating doctor is not feasible. The patient should inform the department of where they intend to be tested. The department will follow up test results and provide a letter indicating that the patient can return to work once the return-to-work criteria are met.

In the event that a healthcare worker or aged care worker returns a positive result, repeat testing should be arranged. If whilst awaiting results, the healthcare worker or aged care worker meets the above release from isolation criteria, they can be released from isolation but cannot return to work until they have two consecutive negative swabs. In the event that respiratory specimens remain persistently PCR positive, a decision on return to work should be made on a case-by-case basis after consultation between the person's treating doctor, the testing laboratory and the department.

The following procedures should be followed when performing return-to-work clearance testing:

- All HCWs presenting for testing must wear a single use face mask and comply with infection control standards applicable to a confirmed case of COVID-19 until the department determines that release from isolation criteria are met
- Specimens should be collected using droplet and contact precautions
- HCWs should not attempt to self-swab.
- Pathology requests must be clearly labelled with the following content under 'clinical information':
 'URGENT: HCW CLEARANCE TESTING, please notify result to DHHS' and results should be copied to the DHHS COVID-19 Response and the HCW's treating physician.
- HCWs attending for return-to-work testing should be triaged as priority patients for testing.

The department will follow up the results of return-to-work testing and will contact healthcare and aged care workers regarding next steps. Once the return-to-work criteria are met, the department will provide healthcare and aged care workers with a letter confirming that they can return to work.

Checklist of key actions for the department for confirmed cases

- Confirm the diagnosis with testing laboratory.
- Contact the treating team/GP to confirm that the confirmed case is isolated and agree the management of the patient.
- Contact the confirmed case +/- parent/guardian (for cases under 18 years) to collect relevant social, clinical and epidemiological information.
- Identify close contacts and recommend immediate quarantining of any close contacts.
- Identify any potential exposure sites and assess whether any further action is required.
- Undertake all public health response activities including risk communication and sharing of relevant resources.

Checklist of key actions for the clinical team for confirmed cases

- organise with the nearest appropriate health service to admit the patient, in order for care to be provided in hospital or via Hospital in the Home.
- For patients who do not require admission to hospital or Hospital in the Home, clinical teams only
 need to provide patients with the initial feedback of their results, information and counselling and
 usual advice to seek medical attention if their condition deteriorates. Clinical teams do not need to
 routinely contact cases unless clinically appropriate.
- Notify the department on 1300 651 160 as soon as possible (within 24 hours) if a patient becomes
 critically unwell, in the case of intensive care admission, or death.

- Commence list of all HCWs and visitors who enter the case's room. (If the case is at home and being visited by Hospital in the Home only a list of HCWs required.)
- Advise HCWs who provide care for the case (even with appropriate use of PPE) to self-monitor for symptoms of COVID-19 for 14 days after their last contact with the case.

Signage and triage of people presenting to health and other services

Diagnosis and management of COVID-19 must be undertaken by medical practitioners in accordance with the current with guidelines from the Victorian Department of Health and Human Services. This will occur primarily in general practice and hospitals.

However, to reduce risks to service providers and detect people with COVID-19 risk factors, rapid preassessment is indicated by a broader range of service providers prior to the provision of a service. This pre-assessment may include enquiring about recent travel history and relevant symptoms. Only healthcare services who manage unwell patients (such as general practice, hospitals and ambulance services) are expected to assess for symptoms.

For examples of posters that can be used see the <u>department's website</u> https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19

Contact management

The department will conduct contact tracing for confirmed cases in the community and will seek assistance from a health service in relation to any contact tracing required for health service staff.

Close contacts

Self-quarantine

The following groups are now required to self-quarantine:

- close contacts of confirmed cases until 14 days after last close contact with the confirmed case.
- all travellers who arrived in Australia after midnight on Sunday 15 March 2020 but prior to 11:59pm on Saturday 28 March 2020 need to self-quarantine at home until 14 days after arriving in Australia
- As of midnight, 28 March 2020, all travellers arriving into Melbourne from overseas will be
 quarantined for two weeks in hotel rooms and other accommodation facilities after submitting an
 Isolation Declaration Card. Interstate travellers can return to their home states after fulfilling the
 mandatory quarantine requirements.

Self-quarantine means remaining at home except in cases of medical emergency. This means a person recommended to self-quarantine:

- must not visit public settings or mass gatherings.
- must not use public transport.
- must not attend settings like health services, residential aged care facilities or educational settings.

This requirement for people who are in quarantine not to attend health services, includes a requirement that they do not attend a family member who is a confirmed case in a Victorian health service.

Health services and GPs are not required to provide a certificate of medical clearance to those who have completed the required 14 days self-quarantine.

In keeping with being in quarantine, children who attend early education and childcare and students in Victorian primary schools and secondary schools, who have been in any overseas country if they arrived after midnight on Sunday 15th March are excluded from attending that educational or care setting until 14 days after they were last in those countries.

Again, in keeping with being in quarantine, children who attend early education and childcare and students in Victorian primary schools and secondary schools are excluded from attending that educational or care setting for 14 days following close contact with a confirmed COVID-19 case.

Close contacts should not travel within Australia or internationally within the 14 days after last contact with the infectious case.

Symptomatic close contacts

Testing for COVID-19 is not indicated unless symptoms develop.

The approach to a symptomatic close contact requires an assessment by a treating clinician. The next steps depend on whether a treating clinician has identified the patient as having a non-infectious cause, a likely non-respiratory infectious cause, or an acute respiratory illness.

For a symptomatic close contact during the 14-day quarantine period, the department will:

 Advise the close contact to attend a suitable general practice, emergency department or coronavirus assessment centre for evaluation with a single-use face mask on and to identify themselves immediately on arrival.

Where a close contact has an illness during the 14-day period of quarantine after the step above, the treating clinician will:

- use a single room and appropriate PPE as for a suspected case
- test for COVID-19 and manage the person as a suspected case.
- If the test is positive, the person will be managed as a confirmed case. Notify the department.

Where the illness is diagnosed as acute respiratory illness:

If testing for COVID-19 is negative and the treating clinician has diagnosed an acute respiratory
illness or an illness that is highly compatible with COVID-19, the close contact may then require a
subsequent test at a short period thereafter.

Where the illness is diagnosed as likely to be some other form of infection or is not an infection:

- If testing for COVID-19 is negative and the treating clinician has diagnosed some other infection or a
 non-infectious cause, then the treating team should consider, in conjunction with an infectious
 disease specialist, whether testing of relevant specimens such as urine and faeces for COVID-19
 might be of value or whether evidence is now clear for an alternative cause, including legionellosis.
- The close contact can be advised to continue to self-quarantine until a full 14 days have expired from date of last close contact with confirmed case.

Checklist of key actions for the department for close contacts

For all close contacts the department will:

- Advise self-quarantine including restriction on travel until 14 days from the last contact with confirmed
 case.
- Counsel close contacts about risk and awareness of potential symptoms.
- Provide a close contact fact sheet
- Make regular contact with the close contact to monitor for any symptoms, either through SMS, email
 or telephone call.
- If after 14 days of quarantine (from the last contact with a confirmed case), the contact remains asymptomatic, the individual is cleared and may cease quarantine.
- If a school or employer requests confirmation from the department that the quarantine period has been met, the department will provide evidence with the consent of the individual.

Healthcare workers

HCWs and other contacts who have taken recommended infection control precautions, including the use of recommended PPE, while caring for a confirmed case of COVID-19 are not considered to be close contacts. However, they should be advised to self-monitor and if they develop symptoms consistent with COVID-19 infection they should isolate themselves. See also Infection prevention and control.

From midnight 15 March 2020, any healthcare worker or residential aged care worker arriving or returning from any overseas destination must self-quarantine (self-isolate) for a period of fourteen (14) days.

 Any healthcare workers who is unwell with a compatible illness should not attend work and should seek appropriate medical care. All healthcare workers with fever or symptoms of acute respiratory infection should be tested for COVID-19, as per the testing criteria. Hospital workers must not enter or remain at a hospital in Victoria from midnight 23 March, if:

- the person has been diagnosed with COVID-19, and has not yet met the criteria for discharge from isolation
- if the person has travelled/arrived in Australia from any country in the past 14 days
- has had known contact with a person who is a confirmed COVID 19 case
- has a temperature higher than 37.5 degrees or symptoms of acute respiratory infection

Table 1: Actions for travellers and healthcare workers returning from overseas

Date of arrival	Country	General actions	Action for healthcare and residential care workers
Before 11:59 pm on Saturday 28 March 2020	All countries	Self-quarantine for 14 days	No work for 14 days
After 11:59pm on Saturday 28 March 2020	All countries	Mandatory quarantine for 14 days (accommodation provided)	No work for 14 days

Infection prevention and control

Background

Infection prevention and control recommendations are based on the Communicable Diseases Network Australia Series of National Guidelines – Coronavirus Disease 2019 (COVID-19) guideline, and WHO guideline Infection prevention and control during health care when novel coronavirus (nCoV) infection suspected: Interim guidance January 2020 https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-(ncov)-infection-is-suspected>.

Nationally consistent advice regarding the management of COVID-19 suspected and confirmed cases has evolved as further information regarding the specific risks of transmission associated with this infection have become known. As it becomes available, this advice has been incorporated into this guideline.

To reduce transmission of COVID-19, there are now general restrictions on who can visit or work at a Victorian hospital and how long visits can last. Screening procedures to prevent unwell visitors entering hospitals are also being implemented. The current restrictions are available on the <u>department's website</u> https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19.

Healthcare workers

Healthcare workers are required to self-quarantine for 14 days after overseas travel and self-quarantine for 14 days after close contact of a confirmed case of COVID-19 (see Healthcare workers in Contact management section). If a healthcare worker is identified as a confirmed case of COVID-19, they must not return to work until they are advised by the department that they meet clearance criteria.

Healthcare workers should only attend work if they are well. Prior to going to work each day, healthcare workers should consider whether or not they feel unwell and should take their own temperature.

Those working in a Victorian public health services are required to report to their manager if they have the following symptoms prior to starting work or at any time while at work:

- temperature higher than 37.5 degrees Celsius
- symptoms of acute respiratory infection, such as shortness of breath, cough, sore throat or nasal congestion.

Some health services may require you to be screened (temperature and/or symptom check) on site prior to starting work

Looking after yourself when wearing PPE

It is important that healthcare workers look after themselves during this time of increased use of PPE. Upon removal of PPE, healthcare workers should remember to hydrate themselves, practice hand hygiene and avoid touching their faces. Regular application of hand cream should be considered. Healthcare workers who are sensitive to latex should ensure that they wear non-latex gloves.

Using mobile phones in healthcare settings

People touch their phones as frequently as their faces. Mobile phones may be dirty, so please:

- · ensure mobile phones are cleaned regularly with disinfectant wipes
- ensure hands are cleaned before and after using mobile phone
- do not answer mobile phones when you are wearing PPE

• consider placing your mobile phone in a clear sealed bag at the commencement of each shift and discarding the bag prior to going home as an additional precaution.

Physical distancing measures in healthcare settings

Physical distancing is to be practiced within clinics and wards, between staff and patients, and between staff and staff. This includes:

- waiting room chairs separated by at least 1.5 metres
- direct interactions between staff conducted at a distance
- staff and patients to remain at least 1.5 metres apart with the exception of clinical examinations and procedures
- hospital cafeterias may only provide takeaways.

Transmission-based precautions

For the purposes of PPE, healthcare workers are people in close contact with patients or the patient space. For example, doctors and nurses and cleaners who enter the patient's from or cubicle are included as healthcare workers. Staff who work in non-clinical areas who do not enter patient rooms are not included as healthcare workers for this purpose.

Prioritising PPE for health care workers

To ensure that single-use face masks (surgical masks) are available to protect health workers and for patients presenting with suspected coronavirus (COVID-19) the following strategies are recommended:

Single-use face masks (surgical masks)

- Prioritise use to frontline staff (ICU, ED, coronavirus (COVID-19) wards, acute respiratory assessment clinics, theatre and birthing suites).
- Surgical mask supplies are to be stored in secure areas or supervised by a staff member and not accessible to patients
- Unless damp or soiled, a surgical mask may be worn for the duration of a clinic or shift of up to four hours.

General PPE

- Substitutions that may be considered include:
 - plastic aproprinted of a long-sleeved disposable gown where appropriate
 - full-face shield instead of a surgical mask for situations that are appropriate.
- PPE training should use expired PPE stock only (if available)

PPE and routine patient care, during the COVID-19 emergency

During the COVID-19 emergency, all healthcare workers in Victorian public health services in high-risk areas—intensive care units (ICU), emergency departments (ED), Coronavirus (COVID-19) wards, and acute respiratory assessment clinics – are to wear surgical masks for all patient interactions, unless the situations below apply.

This is in addition to hand hygiene in accordance with the five moments of hand hygiene. Unless damp or soiled, a surgical mask may be worn for the duration of a clinic or shift of up to four hours. Masks must be removed and disposed of for breaks and then replaced.

The risk in birthing suites is unknown, however the use of a surgical face mask and eye protection may be prudent where there is a risk of splashes from body fluids.

Lung function testing should only be performed if it is deemed clinically essential by a respiratory physician, and staff performing testing should followed droplet and contact precautions as outlined below. For more information see https://www.thoracic.org.au/documents/item/1864

For all other areas within Victorian public health services, standard precautions apply.

Caring for suspected and confirmed cases

In line with advice from the WHO and the Communicable Disease Network Australia, the department recommends **droplet and contact precautions** for HCWs providing routine care of suspected and confirmed cases of COVID-19 infection, including during initial triaging.

This means that in addition to standard precautions, **all individuals**, **including family members**, **visitors and HCWs** should apply droplet and contact precautions. This includes use of the following PPE:

- single-use surgical mask
- eye protection (for example, safety glasses/goggles or face shield. Note that prescription glasses are not sufficient protection.)
- long-sleeved gown
- gloves (non-sterile).

If the gown is disposable and soiled, take it off and dispose of it with clinical waste. If the gown is reusable (non-disposable), take it off and get it reprocessed. Posters showing the order of putting on and taking off PPE (donning and doffing) can be found on the department's website https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19.

Masks, gloves and gowns are not to be worn outside of patient rooms (for example, between wards, break room, reception area) and are to be removed before proceeding to care for patients that are not isolated for coronavirus (COVID-19).

For hand hygiene, use an alcohol-based hand rub with over 60 per cent alcohol if hands are visibly clean, soap and water when hands are visibly soiled.

Visiting confirmed cases of COVID-19 is discouraged due to the high likelihood of contamination of the environment of the room of an infectious confirmed case. If a visitor attends a confirmed case in hospital, the visitor must wear PPE as described above and should be carefully donned and doffed by a person experienced in infection prevention and control requirements.

Airborne and contact precautions

Airborne and contact precautions are now recommended in **specific circumstances** when <u>undertaking</u> aerosol generating procedures as outlined below.

Airborne and contact precautions are:

- P2/N95 respirator (mask) fit-check with each use
- eye protection (for example, safety glasses/goggles or face shield)
- long-sleeved gown
- gloves (non-sterile)

Total head covering is not required as part of airborne and contact precautions.

P2/N95 respirators (mask) should be used only when required. *Unless used correctly*, that is with fitchecking, a P2/N95 respirator (mask) is unlikely to protect against airborne pathogen spread.

An air-tight seal may be difficult to achieve for people with facial hair. Fit checking with a range of P2/N95 respirators must occur to assess the most suitable one to achieve a protective seal. If a tight seal cannot be achieved, facial hair should be removed.

When to discard P2 respirators (N95) masks

P2/N95 masks should be:

- Discarded and replaced if contaminated with blood or bodily fluids
- Discarded following the AGP
- Replaced if it becomes hard to breathe through or if the mask no longer conforms to the face or loses
 its shape
- Removed outside of patient care areas (e.g. between wards, break room, reception area) and are to
 be removed before proceeding to care for patients that are not isolated for coronavirus (COVID-19).

Undertaking diagnostic testing for COVID-19

For information on the appropriate specimens for testing see the section on laboratory testing for COVID-19 below.

In the **community**, there is no requirement for airborne precautions when taking a nose and throat swab.

If the patient has symptoms of **pneumonia**, such as shortness of breath or **productive** sputum there may be a small chance of a higher viral load. As a precaution, airborne and **contact** precautions are recommended when taking upper respiratory specimens when pneumonia is present.

A patient with clinical evidence of pneumonia who requires testing for COVID-19 should be managed in a hospital setting. Management of patients with pneumonia in the hospital setting will also facilitate lower respiratory tract specimen collection.

Table 3: When airborne precautions are recommended for specimen collection

Specimen type	Patients without symptoms of pneumonia	Patients with symptoms of pneumonia (fever and breathlessness and/or severe cough)
Nasopharyngeal swab	No No	Yes
Oropharyngeal swab	No	Yes
Sputum (not induced)	No	Yes
Nasal wash/aspirate	No	Yes
Bronchoalveolar Javage	Yes	Yes
Induced sputum	Yes	Yes

Ref: Infection Control Advisory Group – 2019-nCoV, Interim recommendations for the use of PPE during clinical care of people with possible nCoV infection. CDNA

While patient's faecal samples may be tested under some circumstances where there is capacity to do so, faecal sampling is not recommended as a standard test.

Undertaking aerosol generating procedures

Aerosol generating procedures (AGPs) should be avoided where possible.

Airborne and contact precautions are now recommended when undertaking aerosol generating procedures* in the following **specific circumstances**:

- where a patient is a suspected or confirmed case of COVID-19;
- where it is not possible to determine if a patient is a suspected case of COVID-19, for example, where a person is found unconscious and a history cannot be obtained;

- in a high-risk procedure on a patient (regardless of COVID-19 status) involving:
 - head and neck including ENT surgery/endoscopy;
 - neurosurgery that involves sinus surgery;
 - dacryocystorhinostomy and other ophthalmological procedures that breach the nasal mucosa;
 - maxillofacial surgery;
 - gastroscopy, or
 - bronchoscopy.

*Examples of AGPs include:

- bronchoscopy
- tracheal intubation
- non-invasive ventilation (for example, BiPAP or CPAP)
- high flow nasal oxygen therapy
- manual ventilation before intubation
- intubation
- cardiopulmonary resuscitation
- sputum induction
- suctioning
- nebuliser use (nebulisers should be discouraged and alternative administration devices such as a spacer should be used).

Appropriate cleaning and disinfection should be undertaken following an AGP. See Environmental cleaning and disinfection for further information.

Patient placement

A standard single room (Class S) with doors closed is sufficient, although cases may be placed into a negative-pressure ventilation room (Class N), where available. AGPs, wherever possible, should be conducted in a negative-pressure ventilation room.

A dedicated toilet / commode should be used where possible, ensuring lid is closed when flushed to reduce any risk of aerosolization:

Suspected cases of COVID-19 infection may be cohorted together where single rooms are not available.

Maintain a record of all persons entering the patient's room including all staff and visitors.

Care of critically ill patients in ICU

- Patients who require admission to ICU with severe COVID-19 infection are likely to have a high viral load, particularly in the lower respiratory tract.
- Contact and airborne precautions (as above) are required for patient care and are adequate for most AGPs. The risk of aerosol transmission is reduced once the patient is intubated with a closed ventilator circuit. There is a potential, but unknown, risk of transmission from other body fluids such as diarrhoeal stool or vomitus or inadvertent circuit disconnection.
- If a health care professional is required to remain in the patient's room continuously for a long period (for example, more than one hour), because of the need to perform multiple procedures, the use of a powered air purifying respirator (PAPR) may be considered for additional comfort and visibility. Several different types of relatively lightweight, comfortable PAPRs are now available and should be used according to manufacturer's instructions. Only **PPE marked as reusable** should be reused, following reprocessing according to manufacturer's instructions; all other PPE must be disposed of after use.



ICU staff caring for patients with COVID-19 (or any other potentially serious infectious disease) should be trained in the correct use of PPE, including by an infection control professional. This also applies particularly to the use of PAPRs, when used. Particular care should be taken on removal of PAPR, which is associated with a risk of contamination.

Case movement and transfers

Where possible, all procedures and investigations should be carried out in the case's room, with exception of AGPs which should be performed in a negative pressure room whenever possible.

Transfers to other healthcare facilities should be avoided unless it is necessary for medical care. Inter hospital transfers should use routine providers.

Environmental management

Signage

Clear signage should be visible to alert HCWs of required precautions before entering the room, see Australian Commission on Safety and Quality in Health Care https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/infection-control-signage.

Management of equipment

Preferably, all equipment should be either single-use or single-patient-use disposable. Reusable equipment should be dedicated for the use of the case until the end of their admission. If this is not possible, equipment must be cleaned and disinfected (see Environmental cleaning and disinfection below) prior to use on another patient.

Disposable crockery and cutlery may be useful in the patient's room to minimise the number of contaminated items that need to be removed. Otherwise, crockery and cutlery can be reprocessed as per standard precautions.

Environmental cleaning and disinfection

Required agents for cleaning and disinfection

Cleaning of a patient consultation room or inpatient room should be performed using a neutral detergent. Disinfection should then be undertaken using a chloring based disinfectant (for example, sodium hypochlorite) at a minimum strength of 1000ppm, or any hospital-grade, TGA-listed disinfectant with claims against coronaviruses or norovirus, following manufacturer's instructions.

A one-step detergent/chlorine-based product may also be used. Ensure manufacturer's instructions are followed for dilution and use of products, particularly contact times for disinfection.

Wearing PPE whilst undertaking cleaning and disinfection

Droplet and contact precautions should be used during any cleaning and disinfection of a room where there has not been an AGP or if more than 30 minutes has elapsed since the AGP was done.

Airborne and contact precautions should be used during any cleaning and disinfection of a room where there has been an AGP performed within the previous 30 minutes.

Steps for disinfection and cleaning of a patient consultation room or inpatient room

The patient consultation room should be cleaned at least once daily and following any AGPs or other potential contamination.

There is no need to leave a room to enable the air to clear after a patient has left the room unless there was an AGP performed. Nose and throat swabs are not considered AGPs unless performed on a patient who has pneumonia. If an AGP was performed, leave the room to clear for 30 minutes.

The patient consultation room (or inpatient room after discharge of the suspected case) should now be cleaned and disinfected using the agents listed above. In most cases this will mean a wipe down with a one-step detergent disinfectant as listed above. There is no requirement to wait before the next patient is seen. The room is now suitable for consultation for the next patient.

Waste management

Dispose of all waste as clinical waste. Clinical waste may be disposed of in the usual manner.

Linen

Bag linen inside the patient room. Ensure wet linen is double bagged and will not leak.

Reprocess linen as per standard precautions.

Environmental cleaning and disinfection in an outpatient or community setting (for example, a general practice)

Cleaning and disinfection methods as below:

- Clean surfaces with a neutral detergent and water first.
- Disinfect surfaces using either a chlorine-based product at 1000ppm or other disinfectant that makes claims against coronavirus. Follow the manufacturer's instructions for dilution and use.
- A one-step detergent/disinfectant product may be used as long as the manufacturer's instructions are followed re dilution, use and contact times for disinfection (that is, how long the product must remain on the surface to ensure disinfection takes place).

Follow the manufacturer's safety instructions for products used regarding precautions and use of safety equipment such as gloves or aprons.

All linen should be washed on the hottest setting items can withstand.

Wash crockery and cutlery in a dishwasher on the highest setting possible.

Care of the deceased if COVID-19 is suspected or confirmed

The same level of infection prevention and control precautions should be used for the management of a deceased person as were used before their death. As such, droplet and contact precautions should be used when handling deceased persons for whom COVID-19 infection is suspected or confirmed.

Additional precautions may be required, for example airborne and contact precautions, if conducting an autopsy. This will be dependent upon the risk of generation of aerosols.

The Australian Government advice for funeral directors may be found at

https://www.health.gov.au/resources/publications/coronavirus-covid-19-advice-for-funeral-directors

Laboratory testing for COVID-19

Prioritisation of testing

A number of Victorian laboratories are undertaking testing for COVID-19 in Victorian patients. There is significant pressure on supply of swabs and reagent kits for COVID-19 testing. It is **critical** that clinicians use the current testing criteria to guide patient investigation and use **only one swab** when testing. Please provide **clinical details** on request slips so high-risk patients and healthcare workers, aged, residential care workers or disability workers can be prioritised where resources allow. Specimens taken from health care workers should be marked URGENT- Health Care Worker.

Specimens for testing

For initial diagnostic testing for COVID-19, DHHS recommends collection of the following samples:

- 1. upper respiratory tract specimens.
- 2. lower respiratory tract specimens (if possible).
- 3. serum, where possible (to be stored for later analysis).

Label each specimen container with the patient's ID number (for example, medical record number), specimen type (for example, serum) and the date the sample was collected.

Respiratory specimens

Collection of upper respiratory (nasopharyngeal AND/OR oropharyngeal swabs), and lower respiratory (sputum, if possible) is recommended for patients with a productive cough.

- 1. Upper respiratory tract
 - a) Nasopharyngeal swab: Insert a swab into nostril parallel to the palate. Leave the swab in place for a few seconds to absorb secretions. Swab both nostrils (nasopharyngeal areas) with the same swab.

AND/OR

- b) Oropharyngeal swab (that is, a throat swab): Swab the tonsillar beds, avoiding the tongue.
- c) **To conserve swabs** the same swab that has been used to sample the oropharynx should be utilised for nasopharynx sampling
- d) A second swab is no longer necessary for influenza testing. Testing for other respiratory viruses (for example, multiplex PCR) can be undertaken on the same specimen.

Note: Swab specimens should be collected only on swabs with a synthetic tip (such as polyester, Dacron® or Rayon, flocked preferred) with aluminium or plastic shafts. Do not use calcium alginate swabs or swabs with wooden shafts, as they may contain substances that inactivate some viruses and inhibit PCR testing. For transporting samples, recommended options include viral transport medium (VTM) containing antifungal and antibiotic supplements, or Liquid Amies medium which is commonly available. Avoid repeated freezing and thawing of specimens.

- 2. Lower Respiratory tract (if possible)
 - a) Sputum: Have the patient rinse the mouth with water and then expectorate deep cough sputum directly into a sterile, leak-proof, screw-cap sputum collection cup or sterile dry container. Refrigerate specimen at 2-8°C. If sending to Victorian Infectious Diseases Reference Laboratory (VIDRL), send on an ice pack.

b) Bronchoalveolar lavage, tracheal aspirate: Collect 2-3 mL into a sterile, leak-proof, screw-cap sputum collection cup or sterile dry container. Refrigerate specimen at 2-8°C - if sending to VIDRL, use ice pack.

Lower respiratory tract specimens are likely to contain the highest virus loads based on experience with SARS and MERS coronaviruses.

Other specimens:

- 3. Blood (serum) for storage for serology at a later date:
 - a) Children and adults: Collect 1 tube (5-10mL) of whole blood in a serum separator-tube.
 - b) Infant: A minimum of 1ml of whole blood is needed for testing paediatric patients. If possible, collect 1mL in a serum separator tube.

At the current time there is no serological test for COVID-19 and blood when received at VIDRL will be stored for future testing, when testing is available and if the case is confirmed as COVID-19 infection.

The department is continuously reviewing whether there is a requirement for other specimens such as stool or urine to be sent to VIDRL. At the current time this is not routinely recommended in cases of respiratory illness. A stool specimen may be recommended by the department to provide additional reassurance before a confirmed case is released from isolation.

Specimen collection and transport

See also <u>Undertaking diagnostic testing</u> for PPE recommendations.

Specimen collection process

For most patients with mild illness in the community, collection of upper respiratory specimens (that is, nasopharyngeal or oropharyngeal swabs) is a low risk procedure and can be performed using **droplet** and contact precautions.

- Perform hand hygiene before donning gown, gloves, eye protection and single-use surgical
 mask. See How to put on your PPE poster on the <u>department's website</u>
 https://www.dhhs.vic.gov.au/frealth-services-and-general-practitioners-coronavirus-disease-covid-19.
- When collecting throat or nasopharyngeal swabs stand slightly to one side of the patient to avoid exposure to respiratory secretions should the patient cough or sneeze.
- At the completion of the specimen collection process, remove all PPE and perform hand hygiene
 after removing gloves and when all PPE has been removed. See How to take off your PPE
 poster on the department's website https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19>.

Note that, for droplet and contact precautions, the room does not need to be left empty after sample collection. Droplet and contact precautions PPE must be worn when cleaning the room. See Environmental cleaning and disinfection for further information.

If the patient has severe symptoms suggestive of pneumonia, for example, fever and breathing difficulty, or frequent, severe or productive coughing episodes then **airborne and contact precautions** should be observed. This means that a P2 respirator must be used instead of a single-use surgical mask.

Patients with symptoms suggestive of pneumonia should be managed in hospital, and sample collection conducted in a negative pressure room, if available. If referral to hospital for specimen collection is not possible, specimens should be collected in a single room. The door should be closed during specimen collection and the room left vacant for at least 30 minutes afterwards (cleaning can be performed during this time by a person wearing PPE for airborne and contact precautions).

There are no special requirements for transport of samples to VIDRL. They can be transported as routine diagnostic samples for testing (that is, Biological substance, Category B).

Handling of specimens within diagnostic laboratories

All diagnostic laboratories should follow appropriate biosafety practices, and testing on clinical specimens, including for other respiratory viruses, should only be performed by adequately trained scientific staff.

Current advice from the WHO is that respiratory samples for molecular testing should be handled at Biosafety Level 2 (BSL2), with the USCDC recommending that the following procedures involving manipulation of potentially infected specimens are performed at BSL2 within a class II biosafety cabinet:

- · aliquoting and/or diluting specimens
- · inoculating bacterial or mycological culture media
- performing diagnostic tests that do not involve propagation of viral agents in vitro or in vivo
- nucleic acid extraction procedures involving potentially infected specimens
- preparation and chemical- or heat-fixing of smears for microscopic analysis.

Information on testing for coronavirus at VIDRL

VIDRL has moved to utilising Real-Time specific COVID-19 PCR assays as the primary diagnostic tool for COVID-19 detection.

Real-time COVID-19 PCR assay

- The test takes approximately 2–3 hours to perform.
- Results reported as positive or negative for COVID-19, for example, COVID-19 not detected.

The current VIDRL testing algorithm is as follows:

- All suspected cases will be tested by a real-time assay as above.
 - This test will be performed twice a day at the current time (morning and afternoon), with results released through routine pathways.
- All negative results will be reported and finalised.
- Any positive results will be confirmed by a second specific Real-Time COVID-19 PCR assay targeting a different RNA sequence.
 - This second Real-Time assay will be run for any presumptive positive results, immediately following completion of the first Real-Time assay.
 - Samples positive in both Real-Time assays will thus be reported on the same day as initial testing and will be telephoned through to the referring pathology service as well as the department.
 - Discordant results between the two different Real-Time assays are not anticipated and will be managed on a case by case basis with further molecular testing (for example, Pan-coronavirus PCR assay).
- Urgent specimens can be tested outside of these periods in consultation with the department.
- Viral culture will be attempted from any positive sample under high containment, but such testing is not a diagnostic modality.
- · Serum samples will be stored.

As experience with testing develops this algorithm may change further. VIDRL has the intention to register the Real-Time assays with NATA in the near future once sufficient data is available.

Indeterminate test results

Indeterminate test results have been reported from a number of Victorian laboratories.

Indeterminate results should be referred to VIDRL for further testing. While awaiting the results of further testing at VIDRL:

- If the person with an indeterminate test result is a hospital inpatient with pneumonia, they should remain in isolation and a second nasopharyngeal swab (plus a lower respiratory tract specimen such as sputum if possible) should be sent for COVID-19 testing
- If the person with an indeterminate test result meets the criteria for a suspected case and does not
 require hospitalisation, they should be managed like a confirmed case and be advised to isolate until
 they meet the clearance criteria.

Governance

International response

The WHO declared COVID-19 a Public Health Emergency of International Concern (PHEIC) under the *International Health Regulations 2005* and on 30 January 2020. A pandemic has now been declared.

A State of Emergency was declared in Victoria on 16 March 2020.

Department Incident Management Team

The Department of Health and Human Services (the department, DHHS) has formed a Department Incident Management Team, chaired by a Public Health Commander, to coordinate the public health and sector response. A Class 2 Emergency, or public health emergency, was declared on 1 February 2020.

The Infection Clinical Network of Safer Care Victoria will be a network that is requested to provide comment and advice to the department, alongside national committees including the Communicable Diseases Network Australia (CDNA).

Communications and media

The department will coordinate communications and media in relation to suspected and confirmed cases of COVID-19. In some instances, the department may – in collaboration with a Victorian health service – request a service to provide media responses in relation to one of more cases associated with that service. A health service should contact the department's Media Unit with any queries.

Role of Ambulance Victoria

Where clinically appropriate, Ambulance Victoria can be used to transport unwell suspected cases of COVID-19 from a port of entry, general practice or other settings to an emergency department. Triple 300 should be called in the normal manner but advise that the patient may have suspected COVID-19 infection.

Prevention

 From 9pm 20 March 2020, any Australian returning from any country outside Australia is required to self-isolate for 14 days

- Follow physical distancing advice
- Follow advice on influenza vaccination.
- Ensure adherence to good hand and respiratory hygiene practices.
- Adhere to good food safety practices.
- Consider avoiding live animal markets.
- At the present time, travel within Australia is not recommended, and a ban on overseas travel is currently in place. Check for overseas travel advice or restrictions at Smartraveller https://www.smartraveller.gov.au.
- Advice on physical distancing and other transmission reduction measures is available on the department's website https://www.dhhs.vic.gov.au/coronavirus-covid-19-transmission-reduction-measures>.

Risk management at ports of entry

Infection with COVID-19 was designated a Listed Human Disease (LHD) under the *Biosecurity Act 2015* on 21 January 2020.

As of midnight on Sunday 15th March, all people arriving in Australia from any other overseas country are required to self-quarantine for 14 days. Australian citizens and permanent residents and their immediate family members (spouses, legal guardians or dependents only) are still able to enter Australia, but are required to self-quarantine at home for 14 days. As of 18th March, the Australian Government advises all Australians not to travel overseas to any country at this time.

A sample of all passengers from every arriving international aircraft are health screened. DHHS healthcare workers are also conducting health checks on passengers from any international flight if required by the biosecurity officer. Single-use facemasks are provided to arriving passengers who have been identified as unwell. As of midnight on 15th March, arrivals from all other countries are provided with written information and advised to self-quarantine for 14 days.

The disease

Infectious agent

Severe Acute Respiratory Syndrome coronavirus 2 (SARS-CoV-2) has been confirmed as the causative agent. Coronaviruses are a large and diverse family of viruses that include viruses that are known to cause illness of variable severity in humans, including the common cold, severe acute respiratory syndrome (SARS-CoV), and Middle East Respiratory Syndrome (MERS-CoV). They are also found in animals such as camels and bats.

First termed 2019 novel coronavirus (2019-nCoV), the virus was officially named Severe Acute Respiratory Syndrome coronavirus 2 (SARS-CoV-2) 11 February 2020. The disease it causes is now called coronavirus disease 2019 (COVID-19).

Reservoir

The reservoir is essentially unknown, but probably zoonotic, meaning they are likely transmitted between animals and people; however, an animal reservoir has not yet been identified for COVID-19.

Initial cases were business operators at the Hua Nan Seafood Wholesale Market, which sold live animals such as poultry, bats, marmots, and wildlife parts. The source of the outbreak is still under investigation in Wuhan. Preliminary investigations have identified environmental samples positive for COVID-19 in Hua Nan Seafood Wholesale Market in Wuhan City, however some laboratory-confirmed patients did not report visiting this market.

Mode of transmission

The mode or modes of transmission of COVID-19 are not yet fully understood, although based on the nature of other coronavirus infections, transmission is likely through droplet and contact. There were cases with a strong history of exposure to the Hua Nan Seafood Wholesale Market in Wuhan City, China where live animals are sold. However, the mechanism by which transmission occurred in these cases, whether through respiratory secretions after coughing or sneezing, or direct physical contact with the patient or via fomites after contamination of the environment by the patient, is unknown.

Person to person transmission has now occurred worldwide and the WHO declared a pandemic on 11 March 2020. As a result, droplet and contact precautions are recommended.

Incubation period

The incubation period is not yet known. However, the interim view on the incubation period is that it is 4 to 14 days, based on the nature of previous coronavirus infections.

Infectious period

Evidence on the duration of infectivity for COVID-19 infection is evolving. Epidemiological data suggests that the majority of transmission occurs from symptomatic cases. The risk of pre-symptomatic transmission is thought to be low. However, as a precaution an infectious period of 24 hours prior to the onset of symptoms is being used to identify and manage close contacts. Infection control precautions should be applied throughout any admission and until the department has declared the confirmed case to be released from isolation.

Given that little information is currently available on viral shedding and the potential for transmission of COVID-19, testing to detect the virus may be necessary to inform decision-making on infectiousness. Patient information (for example age, immune status and medication) should also be considered. Criteria for release from isolation are described in this guideline.

Clinical presentation

Common signs of infection include respiratory symptoms, fever, cough, shortness of breath and breathing difficulties. Sore throat, coryzal symptoms, headache and fatigue have been reported.

In more severe cases, it appears that infection can cause pneumonia, severe acute respiratory syndrome and multi-organ failure (including renal failure). In summary the clinical spectrum varies from mild cases, through to severe acute respiratory infection (SARI) cases.

Illness is more likely in the middle-aged and elderly.

The case fatality rate is unknown but appears to be lower than for SARS and higher than the common cold. The case fatality rate may be higher in elderly, people with immune compromise or who have comorbidities. The case fatality rate also appears to be higher in countries where the rate of infection has overwhelmed the ability of the relevant health system to care. Current estimates are that the case fatality rate may be as high as two to four per cent.

Information resources

The department will place resources for health professionals on the department's <u>Coronavirus website</u> https://www.dhhs.vic.gov.au/novelcoronavirus>.

It is important that health professionals consult this website regularly, as case definitions and content of this guideline change regularly during the response to this outbreak.

From: Claire Febey (DEDJTR)

Sent: Wed, 1 Apr 2020 10:46:24 +1100

To: Chris B Eagle (DELWP); Braedan J Hogan (DHHS)

Subject: RE: Hotel allocations Wednesday 1st April and Thursday 2nd April

Great snapshot, thanks Chris. See below.

From: Chris B Eagle (DELWP) < @delwp.vic.gov.au>

Sent: Wednesday, 1 April 2020 10:31 AM

To: Claire Febey (DEDJTR) < Personal Informatio@ecodev.vic.gov.au>; Braedan J Hogan (DHHS)

Personal Information Odhhs.vic.gov.au>

Subject: RE: Hotel allocations Wednesday 1st April and Thursday 2nd April

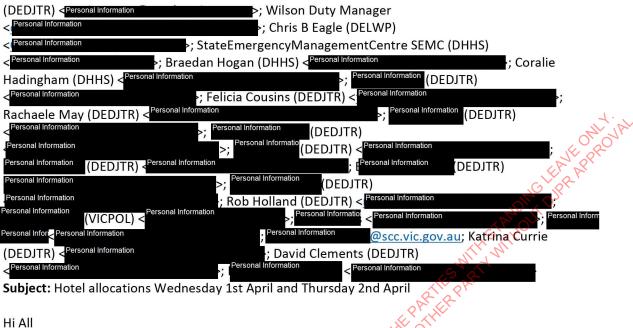
Hi Claire and Braedon,

A couple of items:

- 1. Claire are you wandering into SCC to work today? Yes, I'll be there at from 12.30. Just taking some calls from home.
- 2. Braedan Jason indicated yesterday that Persona would like to catch up with the 3 of us to go though the work he has done on process map have he indicated a time?
 - a. Also an update on the data management
- 3. A few key items that needs resolution / further discussion with the 3 of us Have been doing work on smoking & rec in anticipation of a decision. Keen to close out by COB, please let us know when you are likely to have a direction or how we can assist.
 - a. Smoking was in train yesterday, got bumped in priority, we need to finalise
 - b. Recreation as above
 - c. Confirmed covid case actions I think we now have a plan, just want to work through to lock in prior to next case occurring Can you please share / talk draft plan through with me so I can input from DJPR perspective.
 - d. Accommodation allocation—Personal is doing a great job with the planning and room allocation with current 3 venues. I would like to get a handle on
 - i. Remaining capacity we are doing modelling on remaining and projected capacity today. Will share draft products if not finished by COB.
 - ii. Projected timeline of when we will move to 4th venue
 - iii. Confirmation of 4th venue including signoff of suitability by DHHS to allow contract to be set up by DIPR can you please help us understand DHHS needs for this site and contract, and who is the decision maker / lead on site selection that we should involve. Also relates to broader accommodation project as discussed with Braedan DHHS broader needs may need to be kept separate given the complexity of current delivery of quarantine.
 - Accommodation contracts Braedan I think DHHS had a couple of queries around modifying contract to allow greater flexibility to allow for situations such as last night I will call a meeting with Braedan and relevant contacts to discuss today.
 - f. Evacuation planning this will become urgent soon. It is only a matter of time until this will occur.
 - i. Claire have you been able to obtain the venue evac plans (their normal operations) **these** have been shared with Vic Pol, please let me know what email to share with DHHS given they are considered sensitive documents.

- ii. Braedan is there someone from DHHS who can work through this, with the input from DJPR, MFB, Vicpol
- g. Shift briefings just want to confirm these happened last night and this morning I will check with staff.
- h. Vicpol compliance requirements / response Braedan this one may be a DHHS/Vicpol discussion that we can clarify will take guidance from you

There is probably others, but these are the key ones that are all almost finished, or will be the next priority. Cheers, Chris Chris Eagle | Deputy Chief Fire Officer | Port Phillip Region Forest Fire Management Victoria | Department of Environment, Land, Water and Planning 609 Burwood Hwy, Knoxfield, Victoria, 3180 FOREST FIRE **VICTORIA** MANAGEMENT delwp.vic.gov.au (DEDJTR) < Person Sent: Wednesday, 1 April 2020 8:04 AM ; Cameron Nolan (DEDJTR) ; Claire Febey (DEDJTR) < Pers (DEDJTR) < ; Gonul Serbest (DEDJTR) (DEDJTR) **₫** nal Informat (DEDJTR) (DHHS) rsonal Informatio on (DHHS) < (DEDJTR) rsonal Information Michael Mefflin (DHHS) (DHHS) < Personal Inform @dhhs.vic.gov.au; Paul Stagg (DEDJTR) (DHHS) rsonal Information Personal Information SPOC-PLANNING-Personal Information (VICPOL) MGR < @police.vic.gov.au>; >; Tim Sullivan (DEDJTR) < >; Unni Menon



Hotel allocations for today, Wednesday 1 April.

Arri vals	Date	Orig in Airp ort	ST A	ET A	AT A	Ga te	Pa	Unaccompan ied Minors	Comments
QR9	1/04/	DO	7:0			411X	() ₄₁ ()		
94	2020	Н	0		118		All		Crowne Plaza
QR9	1/04/	DO	18:		100	26° C	39		
04	2020	Н	30	4	OK.	PO	39		Crowne Plaza
				201	O SE	Tot	80		
			OP		8x	al	80		

Please note the planned Hotel allocations for Thursday 2 April.

	_<	IL BY	PX						
Arriv als	Date	Origi n Airp ort	STA	ETA	АТА	Gate	Pax	Unaccom panied Minors	Comments
QR99	2/04/2 020	DOH	7:00			9	36		Crowne Plaza
MH1 49	2/04/2 020	KUL	8:55			7	70		Crowne Plaza
QR90 4	2/04/2 020	DOH	18:3 0			9	57		Crowne Plaza
			·		·	Total	163		

Planned flights for Friday. Hotel to be advised later today

Arriv als	Date	Origin Airpor t	STA	ЕТА	АТА	Gate	Pax	Unaccomp anied Minors	Comments
BI005	3/04/20 20	BWN	4:55			D5			
QR99 4	3/04/20 20	DOH	7:00			D8			4
QR90 4	3/04/20 20	DOH	18:30			D9			CANE PR
						Total	0		CLIPP

Kind regards
Personal Inform

Personal Information
S | Senior Investment Manager - Aviation

Aviation Strategy and Services

Department of Jobs, Precincts and Regions

P: 03 9935 0633 | M: Personal Information

www.djpr.vic.gov.au

@djpr.vic.gov.au



Government of Victoria, Victoria, Australia

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Operation Soteria Op.Soteria-Minutes-2020-04-01-1330hrs



EM-COP Library Filename – Op Soteria-Minutes-2020-04-01-1330hrs

Operation Soteria

Meeting Detai	ls				
Meeting Date	1 April 2020			Start	1330hrs
Teleconference	9037 8885			End	1411hrs
Location	State Control Centre, Bogon	g Room	'		JK.
Minutes	SRC Executive Support				CLERA
Members	Name	Attendees (+ as required)	Na	me	JUNG LEAVE AR
Deputy State Controller – Op Soteria (Chair)	Chris Eagle (CE)	DOT	Person	nal Information	
EMC		VicPol	N. Contraction	al Information	
State Controller Health		DPC PROPERTY AND ADDRESS OF THE PROPERTY OF TH	Person	nal Information	
DHHS	Braedan Hogan (BH) Personal Information	DPC ARTHUR AND			
DJPR	Claire Febey (CF) Rob Holland (RH)	0,			
	MOUNTALOUR				

CONTROL PERSON





Act	ions from Pre	vious Meetings		
No	Meeting Date	Action	Assigned to	Due Date
1	29/3/2020	Clarification of booking hotels and their capacity (roles & responsibilities) with DJPR & DHHS. 1/4/20 – Still working on.	Persona	30/3/2020
2	29/3/2020	Check consistency of information supplied to passengers – (Plane, Airport and Hotel) 1/4/20 – BH updated fact sheets for Airport. Working on a daily newsletter.	Personal Personal Personal And	30/3/2020
3	30/3/2020	Minibars not being removed from Crown Plaza to be followed up. 1/4/2020 – CF Alcohol has now been removed; in for 1 day only.	CF	31/3/2020 Complete
4	30/3/2020	Evacuation planning procedures to be followed up for hotels. 1/4/20 – AH VicPol have what they need.	DJPR / DHHS	31/3/2020

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Item	150	bject
Itelli	704	M CAL

Situational Awareness

Deputy State Controller - Health

Op Soteria-Minutes-2020-04-01-1330hrs



2. Operations

Reports on mornings transfers, key issues, items for review

DHHS

- Perso Airport process running smoothly, people processed in a timely manner.
- Overall the Promenade best set up with a business centre set up. Metropol set up is not ideal for Nurses, room at end of floor where you need to walk through occupied rooms. Working with hotel management. Crown Plaza also has some issues we are working through. DHHS staff are at each site, working with nurses and concierge.
 - If issues are critical re meeting dietary requirement then allowing deliveries.
 - Nurses over run with health and mental health needs, would like to refer people over support via telephone. Allowing nurses to focus on people that may be starting to develop symptoms around COVID.
- CF DJPR staff on the ground have raised concerns re DHHS having enough staff on the ground to deal with demand issues.
- BH Can have further discussion offline, the Newsletter under the door with contact number may divert the demand on the ground.
- Person Need to consider if Red Cross, Beyond Blue or Lifeline could assist with Mental Health issues that are arising, will chat offline.
- Person
 - Security at Metropol advising people are smoking in rooms, they are letting it go at the moment. Security priefed daily and have strategy if people try and leave their room.
 - One passenger taken away for back treatment, when he returned staff just dropped him off. Will work on a process to deal with this type of thing moving forward.
 - Minor transported this morning and the process worked well.
- CE Are start of shift briefings now in place re use of PPE.
- Works proceeding well 3 points of data, providing directly to
 - CF—Can distribute information now and establish a protocol.

DJPR

- Focussed on solving key issues driving people's satisfaction and comfort: smoking, recreation, policy around deliveries, food/dietary requirement.
- Working with DHHS regarding the operating model on the ground and understanding the model of care and how we interact with it (as an agency and through contracting staff).
- Trying to gain an understanding of expected demand for modelling work.

DOT

 Sufficient supply of buses to accommodate any flight schedule changes. AFP supporting well with challenges air side.

VicPol

- Per Operation is going well, concerned if disgruntle passengers decide to leave hotel.
 Need to understand what response would be like.
- Person Need to understand what staffing levels are stationed at each hotel and contact points.
- BH I can be central coordination point, we have Authorised Officers at each hotel 24/7. Can facilitate conversation with DJPR about security and concierge staffing.







- **ACTION** Security escalation process to VicPol. VicPol response and requirements under detention order.
- SCT discussions regarding detainee, isolation, quarantine. Need clarity moving forward on proper reference.
- BH Passengers for internal use with VicPol for this operation.

Other

- It would be good to know rostering arrangements from DJPR and who they are so that we can contact them.
- CF Will take as action and provide details. Would also ask DHHS to do the same.
- ACTION DJPR & DHHS to share data of key people on the ground and also provide details to agency command / SCC.

3. **Planning**

Forward look at following day

CE - 2 or 3 flights per day with 100 passengers today and around 150 passengers tomorrow. This links into forward planning for hotels.

Health and Safety 4.

- BH Cleaning regime after buses have come through to wipe down areas of hotel.
- CF Seeking advice from DHHS on what the cleaning regime should be.
- BH Guidance online, frequency as often as possible.
- CF Would also need practice principals ie. After every intake, people being moved around etc.
- RH Wider issue coming in from other hotels we have contracted with, cleaning companies are saying they will charge more re possible COVID related.
- CE Yesterday we had a confirmed case of COVID that was reported. Yesterday afternoon an agreed process has been set up, DHHS is to advise the Deputy Controller Op Soteria, I will then advise agencies as needed/required. DHHS will follow the normal processes re close contact etc. The Authorised Officer on site will then take charge of actions to be undertaken on site. PPE should be used at all times like any person could be a potential case. Person will then be moved to an appropriate floor.

5. Welfare and Wellbeing

Coordination

State Controller – Health / Deputy State Controller

DHHS

File





7.	 CF – How will cases be reported and how will it be managed with others in the hotel. BH – We do not release that level of information. CF – Need to look at the assumption it gets into public domain. Prepare for how it would be handled, could create a spike in mental health issues. BH – ACTION – Will liaise with CHO about how he would want it to handle it. Persol – DPC can help with communications for passenger information if needed. BH – Daily newsletter being worked on with linkages to other services, we will go through usual approval processes. CF – Would be good to include housekeeping arrangements etc.
8.	Other Business • 2 ILS PRETURE REPRETURE REPRETURE
9.	Next Scheduled Meeting – 1330hrs, 2 April 2020

Act	ions LE PORTE		
No	Action	Assigned to	Due Date
1.	Security escalation process to VicPol VicPol response and requirements under detention order.	Personal Inf BH /	3/4/2020
2.	Preparation on how we manage communications if a confirmed case of a passenger is made known in the media.	ВН	2/4/2020
3.	DJPR & DHHS to share data of key people on the ground and also provide details to agency command / SCC.	Person	2/4/2020