

CORONAVIRUS — HEALTH MODELLING —OMICRON VARIANT

4. Ms M.J. DAVIES to the Minister for Health:

I refer to the concerns Professor George Milne of the University of Western Australia raised on 9 February that delays to reopening the border is having negative health impacts and the minister's dismissive response that Professor Milne is "not an epidemiologist; he's a mathematician".

- (1) What modelling is the Chief Health Officer's advice to government based on?
- (2) If Professor Milne is not qualified, as the minister asserts, why was he relied on by this government for previous Delta strain modelling?

Ms A. SANDERSON replied:

- (1)–(2) As the Premier has outlined very clearly and I have outlined numerous times in numerous press conferences over the last two months—I think it is—modelling is one part of the equation when making decisions. These decisions will affect people's lives and their livelihoods. Professor Milne has been used by the Department of Health and he worked with the department previously. He has not been involved in the modelling being undertaken by the department currently. There are a whole range of factors that are used to determine decision-making and to determine the advice of the Chief Health Officer.

The government will release the modelling when it is complete. The reality is that any Omicron modelling right now is not complete; it does not have a full dataset to back it up. The Delta modelling had six months' worth of data to inform our decision to put in place the safe transition plan. The 5 February date was based on Delta modelling for which we had six months' worth of data. We have a very different disease here. What we saw, getting closer to 5 February, was the crippling impact of furloughing of staff across sectors, hundreds of people dying—2 000 people have died since December last year. If that was a number of plane crashes, that would be an absolute outrage; there would be inquiries. That is not happening.

The opposition chooses to remain completely oblivious to those numbers. It is very easy to commentate from the sidelines when you are not making the decisions that will affect people's lives and their livelihoods. It is very easy to do that. The advice that we take is from the statutory officer—the Chief Health Officer—and he is an expert in this field. That is the person from whom we take advice. As we got closer to 5 February, as members opposite would also know if they had been watching this over Christmas, the paediatric vaccine program was not commenced by the commonwealth until 10 January. That was three weeks before school was to start—three weeks for people to get their kids vaccinated. We had a great take-up and we threw everything we had at that vaccination program—we had a big boost and blitzes in place. But people wanted to get their kids vaccinated before they started school, and that bought time to do that.

We also needed to give people who were not eligible for the booster the opportunity to get that booster to protect themselves against Omicron. The opposition may obsess about modelling—the government will release modelling when it is complete—but modelling is not the only factor when we are making these decisions that affect people's lives and their livelihoods.