PUBLIC ACCOUNTS AND ESTIMATES COMMITTEE

Inquiry into the Victorian Government's Response to the COVID-19 Pandemic

Melbourne—Friday, 27 November 2020

MEMBERS

Ms Lizzie Blandthorn—Chair Mr Danny O'Brien
Mr Richard Riordan—Deputy Chair Ms Pauline Richards
Mr Sam Hibbins Mr Tim Richardson
Mr David Limbrick Ms Nina Taylor
Mr Gary Maas Ms Bridget Vallence

WITNESSES

Mr Daniel Andrews, MP, Premier,

Mr Jeremi Moule, Secretary,

Ms Kate Houghton, Deputy Secretary, Social Policy Group, and

Mr Tim Ada, Department Secretary, Economic Policy and State Productivity Group, Department of Premier and Cabinet.

The CHAIR: I think we have a majority of committee members now, so I will declare these public hearings open and welcome you all to the third series of public hearings for the Public Accounts and Estimates Committee's Inquiry into the Victorian Government's Response to the COVID-19 Pandemic. The committee is reviewing and reporting to the Parliament on the responses taken by the Victorian government, including as part of the national cabinet, to manage the COVID-19 pandemic.

We note that witnesses and members may remove their mask when speaking to the committee, but we ask that they replace them afterwards.

We ask that mobile telephones be turned to silent.

All evidence taken by this committee is protected by parliamentary privilege. Comments repeated outside this hearing may not be protected by this privilege.

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Welcome again, Premier. We ask you to make a brief presentation of no more than 8 minutes. Welcome to your officials also. We ask that you state your name, position and obviously your department for broadcasting purposes. This will be followed by questions from the committee.

Visual presentation.

Mr ANDREWS: Very good. Thank you very much, Chair.

Very quickly, just to take you through some key facts and figures, this is, as we all know, a global event, but it is worth looking at the context across the world—some 60 million cases and tragically 1.4 million deaths. Victoria and Australia are in a unique position, and particularly Victoria, having successfully defeated a second wave. We are one of very, very few jurisdictions around the word that have been able to do that. It is a credit to every single Victorian who has stayed the course, made enormous sacrifices in order to prove as stubborn as this virus—in fact a little more so—today being of course the 28th day with zero cases and no active cases. We can, all of us I think, be very proud, particularly all those millions of Victorians who have done the right thing throughout this very challenging year.

If you look at the United States, that is not the trajectory that any jurisdiction wants, particularly as they head into winter. India is on the improve, but whether it be Italy, Germany or other European countries, they face some very serious circumstances in the next few months as well. Of course we wish them well, and the comparison is one that should do every Victorian great credit. We have gone from 700 cases to 25 cases to zero new cases and zero active cases over these last few months. It has been a very long journey, a very painful journey but one where we have seen both the very best of the Victorian spirit and also the worst of impacts. The damage and the pain is very real. That is why the discussion we have just ended in relation to this year's budget is so timely—those investments. But in each of those stages, each of those different decision points, none of those choices were easy; none of those choices were anything other than acting on the best of advice. But each of them came with not only a falling number of active cases, a falling number of infections and breaks in chains of transmission but also some considerable costs and pain. That is very real, and we have to be committed to dealing with that—and we are.

If we look at the work of our experts in guiding our public health team, whether it be at the Burnet, the University of Melbourne—we could just as easily have a number of other institutes that have been partners—the WEHI, the Doherty and others, we have all the way along been guided by the data, have listened to the doctors and been guided by the science. Despite a lot of commentary about the fact that various parameters were not achievable, that modelling was not accurate or that modelling had been too conservative or too ambitious—depending on your perspective—it is a great credit to all Victorians that we now arrive at a place where we can lock in a COVID-safe summer and look with a degree of optimism towards a COVID-normal and COVID-safe 2021. I do hasten to add, Chair, that this is not over. Twenty-eight days of no cases is not the same as having a vaccine. There is every chance this is still bubbling or lurking in the Victorian community, and we need to be very vigilant; that is what those rules are about—but being able to open up, and hopefully next weekend, 6 December, being able to announce further easing.

We have provided support for those in insecure work. People are well aware of the testing payments, the isolation payments for those who had no sick pay to fall back on. There have been some 13 500 worker support payments and 109 000 isolation-for-test payments. Additional funding for mental health—we know that this has been a very challenging year for many people with mental illness and those developing mental ill health. There are something like 300 000 contacts right across helplines and all those different resources, those support resources, particularly for those with the most complex needs. And I want to thank all the people who have been on the other end of that phone providing guidance and support. They are doing the best of work, and we are very proud of them.

In terms of support for business—this is well understood and well known I think—\$6 billion in total, \$3 billion through the business resilience package, lots of different grant rounds. This is the biggest package of its kind in Victorian history, and it needed to be. That is not a boast; that is just a reflection of how challenging the circumstances are. There is \$2.3 billion—130 000 businesses have shared in that—and \$550 million in payroll tax refunds, not cuts but actually money that had been paid to the government that was returned to those businesses. Cash flow rather than customers was what we could provide because restrictions simply had to be on. And then of course a whole range of other supports that have been provided to different sectors—creative, tourism, the racing industry, so on and so forth. We know there is more to do here, and that is what the budget is focused on.

Contact tracing has been reviewed by chief scientist Alan Finkel. We thank him for his work. He has reviewed all states and territories, and his report is one that I think is not just borne out by his detailed analysis but borne out by the falling case numbers. You cannot get on top of the outbreaks that we have been able to deal with, you cannot get to where we are now—28 days of no cases—if you do not have a very good public health response. And I am very pleased and grateful to all of those people that have worked in it. To be getting to close contacts in 36 hours from testing—so from time of swab; not time of notification but time of when the test is taken—is well in excess of the national benchmarks and something that the chief scientist held out as being a really important proxy for how efficient and how effective our contact-tracing system is now, and that we can have confidence in that. Again, I thank him for his work. He has worked very, very closely with us and other first ministers and other governments, and I think we are better off for that.

Obviously a regional contact-tracing or suburban contract-tracing, that sort of devolved governance model, together with the best part of 2500 people from lots of different perspectives all working together as part of what is the biggest public health team our state has ever seen, those public health units as well as the best technology—everything from QR codes all the way through to the CRM package that we have built and some other technology that we have been very pleased to partner with the commonwealth towards the deployment of—is a response that marries the cutting-edge technology with common sense and old-fashioned ways of doing things as well, visiting people at home for instance. But across the board it is a big team and they have done a great job and they are working very, very hard, and I am very grateful to them. And they stand ready, when the inevitable cases and outbreaks come, noting the nature of this virus, until a vaccine gets here. We have to be prepared and be ready for the inevitable cases and outbreaks. Plus of course our testing program is part of this public health response as well, and there is no jurisdiction in the country that is testing more people than we are week on week.

That is a good segue. In terms of our testing numbers, you can see there it is very, very important that we keep those test numbers up so that we can have the most complete picture of what virus is out there. And that is why Jeroen Weimar and a very big team of people—and again all of our partners, whether it be the federal

government, public health services, private health services, everybody involved in that best part of 200 sites across the state, waste water testing as well—all of this is really important in terms of surveillance monitoring. Knowing where it is not is very important, particularly where you have got very high-risk settings, and again a thank you to the 3.5 million Victorians who have come forward and got tested. That is really important, arguably the most important feature of our collective fight against this enemy.

That is a bit of a summary of a few facts and figures, and now I am more than happy to take any questions you have.

The CHAIR: Excellent, and right on time. Thank you, Premier. Deputy Chair, would you like the first question?

Mr RIORDAN: Thanks, Chair. Thank you again, Premier, for I think it is round three of the COVID hearings. The first question I have got, Premier, and I think it is one that many Victorians have asked over recent months, acknowledging the work that the government has done. But the question that still has not been answered is: after months and months of inquiry, millions and millions of dollars of taxpayers money, a crisis cabinet of only eight people, presumably your eight most competent cabinet ministers, we still do not know who authorised hotel quarantine. Are you now able to tell us which one of you or your eight were the ones that authorised hotel quarantine that, sadly and unfortunately, led to the deaths of over 800 people?

Mr ANDREWS: This is a wildly infectious virus. It is a deadly virus. To every Victorian who has lost a loved one, to every Victorian who has suffered pain and distress and anguish and hurt because of this virus, not only do we send our condolences and our sympathies but we acknowledge that pain and we commit ourselves to doing everything we can to be stronger because of this terrible event, to support the healing and the repair. The question you ask, Mr Riordan, is one that cannot be separated from the process that is currently underway, as we speak. The Coate inquiry is holding hearings, as I understand it. They are due to provide their final report on or before 21 December, and it is my intention to await that report and to look at the conclusions, the answers, the recommendations, the findings, that former judge Coate presents, and we will respond in due course so that we can take the swift and decisive action required to ensure that errors of this nature can never occur again.

Mr RIORDAN: So, Premier, accepting your answer, if any one of your many government departments or in fact any private enterprise that only had eight members on its board, would you as Premier be happy to accept the fact that the board chair or the company CEO who oversaw 800 deaths could not determine from a small board of only eight people who was responsible? Would you accept that from your government departments or the private sector?

Mr ANDREWS: Mr Riordan, I accept my fundamental responsibility to provide answers to questions and not to mark my own work. I have established a board of inquiry under law with the powers and the budget and I believe the resolve and the personnel required to get us answers. That report has not yet been written. That report has not yet been handed up. And I am simply not in a position—I do not think any of us are—to presuppose what the outcomes of that report will be. We soon will be able to read that report and draw our own conclusions, but I simply cannot be drawn on these sorts of conclusions that you are seeking whilst literally as we speak that board of inquiry is sitting, having hearings, doing their important work. When it is concluded then it is my absolute hope that we have answers to all of these matters and many more, but I cannot presuppose what that report says.

Mr RIORDAN: Okay, Premier. That was not what my question was. My question was quite clear: would you accept that standard from your government departments or the private sector? If 800 Victorian lives were lost because of a mistake—no matter how innocent, but a mistake—made at a corporate, private sector level or public sector level, would you as Premier be happy to accept the fact that a small board of eight people could not determine who made the decision?

Mr ANDREWS: Well, what would need to be—

Mr RIORDAN: Yes or no.

Mr ANDREWS: Well, no, it is not a yes-or-no matter, I am afraid, and therefore I will not be directed to answer it in that way. You would first need to establish what had occurred before you could possibly answer that question—

Mr RIORDAN: No, sorry.

Mr ANDREWS: and we have not yet determined exactly what occurred. And rather than me sitting in judgement on the government I lead, I have instead established an independent process—

Mr RIORDAN: You are still not answering.

Mr ANDREWS: which is active as we speak. Literally, Mr Riordan, as I answer your questions—

Mr RIORDAN: Premier, I am not asking you to judge. As you say, I am not asking you to judge your homework.

Mr ANDREWS: the inquiry is doing its work and the inquiry has not finished yet.

Mr RIORDAN: I am not asking you to judge your homework.

Mr ANDREWS: I think you are.

Mr RIORDAN: My question was: many Victorians would be so, so disappointed to think that a group of eight of the most senior people in the state sitting around a table, presumably on a daily basis, could not determine who made the decision.

Mr ANDREWS: Oh, and I think people would be even more disappointed, Mr Riordan, if we did not have a full and frank accounting for those matters and an inquiry to get to the bottom of it and to present us with any learnings and findings and recommendations to ensure that it does not happen again. And if we just wait a short number of days, I am confident that the board will deliver on the timeline that it has outlined and we will have a report. The nature of that report, the contents of that report—I do not know what will be in that report. We will be freer, though, once we receive it, to ask questions that it may pose and to take action that it may require.

Mr RIORDAN: Well, we look forward to seeing that report just before Christmas.

Mr ANDREWS: Well, if you want to reflect on—

Mr RIORDAN: Moving on to Secretary Moule—

Mr ANDREWS: No, no. Chair, it is fair enough I think if the Deputy Chair wants to have a go at a member of the government—me or anyone else. That is fine, but the timing of that report is a function and a decision of a retired judge—

Mr RIORDAN: I am not asking you a question about the report.

Mr ANDREWS: and snide comments are reflections on a judicial officer who is doing a very important job. I do not think that is fair, Mr Riordan. Have a go at me if you want, but leave the retired judge who is working for all of us out of it. I do not think that is fair.

The CHAIR: And do not put propositions to the table you do not want answered.

Mr RIORDAN: I did not give a proposition; I just made a reference to when the report was coming out, which the Premier is so, so pleased to be reading shortly. My question to the Secretary, please: what is the total legal cost paid for Department of Premier and Cabinet legal representation during the COVID inquiry?

Mr MOULE: Thank you, Deputy Chair. As the inquiry is still ongoing, that matter has not been finalised. The intent would be to absolutely report those matters in the normal course of events.

Mr RIORDAN: There was a similar answer we received at the last hearing—that no-one had any idea and it was still ongoing. Presumably you have paid some bills to date.

Mr MOULE: Yes, we would have paid some bills to date.

Mr RIORDAN: Could you give the committee a ballpark of what we might have racked up so far in this Coate inquiry for the Premier's office?

Mr MOULE: I do not have that material at hand, Deputy Chair, but I am happy to provide some information.

Mr RIORDAN: Can you take that on notice?

Mr MOULE: Yes.

Mr RIORDAN: I think it would be useful to have a sense of where we are heading with it as it has almost finished. Secretary, what is the total legal cost paid for Mr Andrews's legal representation during the Coate inquiry?

Mr MOULE: I give a very similar answer, Deputy Chair: I do not have that material in front of me, but to the extent that I am able to I am happy to pursue that—

Mr RIORDAN: Take that on notice? Thank you. Secretary, what is the total legal cost paid for Mr Eccles's legal representation—your predecessor—during the Coate inquiry?

Mr MOULE: Those costs would be incorporated in the overall costs of the Department of Premier and Cabinet related to the Coate inquiry, so they will form part of the figures that you were asking about with your first question.

Mr RIORDAN: Okay. So when the committee receives your information there will be the Premier's department and the Premier separately, but everyone else will be aggregated into one amount?

Mr MOULE: I will have to see how the invoices were constructed in order to determine that precisely, but I am happy to have a look at how the information might best be presented to the committee.

Mr RIORDAN: Okay. And would we expect to get costs incurred up until today?

Mr MOULE: I will need to see how the invoices have been both provided to us and then paid in order to provide you with an accurate cost to date, so I will see when the most recent material is available that can be presented to the committee.

Mr RIORDAN: Secretary, in that breakdown, has your department funded any other legal costs for other ministers, or would their own departments have funded those?

Mr MOULE: Each department has been responsible for its own legal costs, so no is the answer to that question.

Mr RIORDAN: Thank you. Secretary, have you been given any advice to date on the whole-of-government legal costs for the Coate inquiry across all departments?

Mr MOULE: No, I have not.

Mr RIORDAN: Is that likely to be presented to the Premier—sort of a total cost to taxpayers of what the Coate inquiry has cost the mechanism of government?

Mr MOULE: I think we would expect that each department would report the entirety of its legal costs in the normal course of events. It may well be possible to aggregate those things, but there is no expectation that any other department would provide that material directly to the Department of Premier and Cabinet or to myself personally.

Mr RIORDAN: Okay. So as the key department in the government, it does not tweak your interest as to what the overall process that is so, so important for Victorians might have actually cost us?

Mr MOULE: As I said, that information will be reported in due course and will be part of the legal expenses that each of the departments reports, so in due course it will be possible to aggregate that information as best as we are able to. That is normal reporting. Whether or not it tweaks my interest is probably not an important matter.

Mr RIORDAN: Okay. It certainly tweaks the interest of many of the members on this committee as to what the entire cost was.

Just back to the Premier with the short amount of time we have got left. Premier, just a question on your masks policy. You have pointed out an achievement to date for Victorians at 28 days, and there was back in August where you said—or actually your Chief Health Officer said—'If we have no community transmission, then I'm going to recommend that we don't need masks beyond that'. Can you give the committee a sense of when we can look forward to gatherings like this, our Parliament and other internal restrictions being lifted where clear separation and non-crowded environments exist?

Mr ANDREWS: Look, I think we all have an eagerness to get to that point, Mr Riordan, but those policy changes will not be made unless and until there is public health advice that supports that. I do not have that public health advice at the moment so I cannot foreshadow when that might come, but I would point you to announcements made last Sunday where, just as we had said masks would not be everywhere forever, we moved to a different set of policy arrangements, a different set of rules—where you are outside and where you can physically distance, provided you are not in a queue waiting for a good or a service.

There will come a time when we are able to relax those measures further, but I see them in many respects as a pretty effective insurance policy against the inevitable one case or small outbreak that if unchecked can become something much, much bigger. I know it is challenging, particularly the further away from Melbourne you get and the further into the summer we get, but we have to stay the course on masks just as we did on all the other rules. That is what has delivered us to 28 days with no cases.

Mr RIORDAN: Can you tell the committee why our public health advice is so different from all the other states in Australia on masks?

Mr ANDREWS: Well, I am not a public health physician.

The CHAIR: I am sorry to interrupt you there.

Mr ANDREWS: I would not offer a medical opinion, but our experience is very different, Mr Riordan, to other states.

The CHAIR: I am sorry to interrupt you there, Premier, but the member's time has expired. I will pass the call to Mr Gary Maas, MP.

Mr MAAS: Thank you, Chair, and thank you, Premier, for your third appearance before this inquiry. Premier, what steps did the government to take to drive down case numbers across the state and to defeat the second wave?

Mr ANDREWS: Well, I think the first point is to acknowledge, Mr Maas, is that it is every single Victorian that has defeated this second wave. It is not the government or people who work for the government. Our staff, our partners have played an incredibly important role in that, but it was the determination, the courage, the conviction and the character of the Victorian community to know and understand that unless we were as stubborn as this virus we would not defeat it, we would not see it off.

Now I am sure during the course of today's hearings all of us are going to speak about lots of positives, lots of things that Victorians can be proud of. I just want to say to anybody watching: that should not be read down to mean that this is over. It should not be read down to mean that suddenly, because this magical 28th day has arrived, this is stamped out forever. That is not the case, and we have to have that proportionate abundance of caution because we know that even though masks are inconvenient and other rules are not exactly enjoyable, the discomfort and displeasure of complying with those rules is but a fraction of the discomfort and displeasure if we have to put in place much broader rules and lockdowns and things of that nature. So we will just sort of

temper the very positive nature of today being the 28th day with the realisation that a vaccine has not yet arrived.

We bolstered our contact tracing. We learned lessons from the first wave, we learned lessons from other states and we learned lessons from other parts of the world, and that is that culture of continuous improvement that is very, very important. I did reference Alan Finkel earlier; I will again take the opportunity to thank him for his assistance, his advice and his guidance, but also to congratulate him for the amazing job he has done in, if you like, assessing the capability and I suppose the resilience really of the contact tracing and public health responses in each of the states and territories. That is a great reassurance to me, and I hope to the Victorian community and indeed every Australian, that whilst Australia enjoys a unique position in the world—and Victoria most certainly enjoys a unique position in the world, having been one of a handful of places that have been able to see off a second wave—we have to be vigilant and we have to acknowledge that there will be positives, there will be outbreaks. That is just the nature of this thing

We are bolstered in terms of information technology, so systems—the Salesforce CRM product that we have put in place, that end-to-end IT solution, that common platform so that a team of public health physicians and contact tracers working in Geelong can have access to exactly the same details and exactly the same system in real time and have complete clarity about all the information that our system holds, looking at something at the same time as somebody who is in Shepparton, for instance, and everywhere in between. Simple, but to build something that is fit for purpose is not a simple task.

The other thing too is that to make change and reform and improvement while you are dealing with 700 cases a day—to do both of those things at the same time—is very, very challenging. So to those in leadership positions, as well as all of those that we have contracted and partnered with—they have done an amazing job. But again, this is not their success; this success belongs to every single Victorian who has shown a real determination to bring these numbers under control. That is why we can celebrate, cautiously and in a realistic fashion, 28 days of no cases. On every single performance measure we are exceeding the nationally agreed benchmark. We have even set about devising our own benchmarks. I was very keen to impress upon all of our public health officials that if you have got a dashboard and you are continually getting green lights on everything, the chances are you are not pushing hard enough and you are not measuring things in the most acute way. So we are in the process of doing that. To get to that 36 hours from swab to notification of close contacts, that is world's best practice by some margin.

Contact tracing is always challenging—very, very challenging. We have seen recent examples in Adelaide. We saw the same in Shepparton. Honesty, truthfulness and having the most complete picture are critical. Beyond that, scale is no friend of this. You can become overwhelmed very, very quickly. That is why so many jurisdictions around the world, in essence, give up contact tracing all cases and their contacts and contacts of contacts and even listing exposure sites when they get to as few as 50 cases per day. In my discussions with other states and territories, they have the same challenge—that a couple of hundred cases is a real challenge. It is potentially manageable, but when you start to get close to 1000 and beyond, it is incredibly difficult. The maths of this is quite obvious. It is that inverted pyramid where it starts and doubles and doubles again and doubles again, and all of a sudden, the only tools that are available to you are those suburb-wide, metropolitan Melbourne-wide or statewide restrictions. I am very confident that we have built a contact-tracing and public health response team with systems and processes that will mean that we do not have to employ—use those broader tools, if you like, the ones that are most effective but do the most damage along the way.

Just finally, I would say that having brought numbers under control and having gotten numbers down to this very low level and on the way to the 28 days of zero, we were able then to deploy—whether it be in Box Hill, Frankston, Chadstone, Kilmore, Shepparton, Benalla or the northern suburbs of Melbourne—that three-tiered approach of cases, their contacts and contacts of close contacts. That will guide us in the months ahead—hopefully, it is only months—so we will have potentially many hundreds of people that are locked down at home, but that will mean millions of other Victorians will be able to get about their business as close to normal as possible. So it is Victorians who can be proud. This is their victory. But we have to be vigilant because what we, all of us as Victorians, have built is precious and it is by its very nature—pre a vaccine—fragile.

Mr MAAS: Thanks, Premier. If I could take you to the issue of hotel quarantine, the second wave in Victoria traces back to outbreaks from the hotel quarantine program. Indeed Mr Riordan has already taken us

there. I was wondering if you could inform the committee of what steps you have taken to improve the program, particularly ahead of flights returning back to Victoria.

Mr ANDREWS: As you alluded to, Mr Maas, flights will be back landing at Tullamarine. We will have returned passengers from the 7th. That is a very important step. We know there are many Australians who want to return home for obvious reasons such as to be reunited with family, but also as coronavirus conditions deteriorate markedly just about everywhere else in the world, Victoria and Australia are even better places to be. So that is a very important day. We will announce a detailed response to the first report of the board and the details of our reset hotel quarantining system.

I can speak quickly to a couple of key features. Staff will work exclusively for this program, so there will be no second or third jobs. Regular testing of all staff will be a routine feature with details to be finalised, but it will be a routine feature of the reset program. We will advance contact trace everybody who works in the system, so that we know who they are, or you could reasonably expect them to be, in close contact with. And we will to the very best of our ability try and minimise the crossover between our workforce and those who work in, for instance, aged care. We know that that is an incredibly vulnerable environment and one that we need to be mindful of. So that is just a flavour, if you like, of some of the features of that reset. We start at 160 passengers a day. That number will grow over time, and they will be some of the features of that reset.

I would just make this point. Events in Adelaide, events in Sydney and events in New Zealand even and other parts of the world show us it is impossible to build a zero-risk quarantine service. There will always be some risk. The key point here is to manage that risk as best you can, and that is what we intend to do. I will have more to say about the composition and make-up of staffing and some other features of that reset program quite soon.

Mr MAAS: Okay. Thank you. If I could take you to the issue of testing: how has the government ensured access to testing has increased during the second wave—you know, we have seen high rates of testing—and how will that continue as we progress to a COVID normal?

Mr ANDREWS: There is arguably nothing more important than people who register even the mildest of symptoms coming forward and getting tested as soon as possible. Part of the reason we say that we cannot be certain that there are literally no cases anywhere in the state is that not everybody gets tested and not everybody gets tested quite as quickly as they should—many do, but not everyone does. What is called exposure days—the time between the onset of symptoms and when you get your test, so the time when you will almost certainly have been giving this to others—we always try and get those hours down to be as small as possible. Logic tells you that you will have come into contact with less people if we can test you are positive and isolate you as quickly as possible.

Testing is a massive logistical task. All the team—the ADF, public health teams, hospital nurses and other staff, some private sector employees that we have seconded and brought in, and in more recent times the testing commander Jeroen Weimar—have done an absolutely outstanding job. But so, too, Mr Maas, have communities done an outstanding job. Of all the days, I have got to say one of the highlights in a very difficult year was when we put the call out to Shepparton, 'Come forward and get tested'. Just by virtue of how these things work you cannot have 100 test sites in Shepparton; you have got a limited number. We had extra, but you have a limited number. And people were there queueing for hours, such was their commitment to their health and safety and the health and safety of others—people who have made you absolutely proud.

So testing has been a big feature—3.4 million. I think I might have said 3.5 million before; it is about 3.4 million. It is going to continue to be a big feature. Wastewater testing and innovative testing follow. Whether it be in workplaces or whether it be at shopping centre and retail precincts, to the whole network, from the pathology workers to the laboratories, to GPs and to all the people that have stood and made possible all of these pop-up testing clinics—it is a big, big team, and they have done an amazing job—thank you. But most of all thank you to the 3.4 million—some people may have been tested more than once, but certainly millions of Victorians have come forward and got tested. It is the key to keeping these numbers low.

Mr MAAS: Thank you, Premier.

The CHAIR: Thank you, Mr Maas. I will pass the call to Mr David Limbrick, MLC.

Mr LIMBRICK: Thank you, Chair. Premier, at the very first one of these inquiry hearings I stated that my intention of coming onto this committee was to provide scrutiny on the limitations on rights and liberties of Victorians. One of the things that you said to me, which was very reassuring, was that you gave a commitment to restoring those rights and liberties that were taken away during the pandemic. We are in a situation now where we have no transmission of the virus but we are still under a state of emergency. At what point or under what conditions or at what time do you think those limitations on the rights and liberties of Victorians will be restored?

Mr ANDREWS: Mr Limbrick, the short answer would be as soon as possible, but I will do the question and your genuine and passionate interest in this matter justice, or I will certainly try to. We will get to a point where Chief Health Officer directions will no longer be needed. That is why there is a state of emergency on at the moment. The link between the two is very clear and very well known. As someone who, for instance, has for all of my public life, all of my adult life, supported people's right to take a stand on any issue, provided they are peaceful, to make their point, I believe protest and dissent, whilst decent and peaceful, are a very important part of our democratic system. I have always supported that. It is not easy to curtail those rights or the rights of people to move freely. The notion of having to keep sons and daughters away from dads on Father's Day and the same for Mother's Day are not easy decisions. But when you are provided with the best health advice, that you know is driven by data and international experience—and yes, there is an abundance of caution—you simply have no choice but to make those decisions. But they have always been appropriate to the challenge we face, and as the challenge changes the rules change. Ultimately, if any—or hopefully all—of the different vaccine products come to fruition, then we will be able to get the community vaccinated against this and then we can draw a line under it.

Many of the rules that I know are offensive to the policy imperatives that you passionately defend also are deeply annoying and frustrating for every single Victorian. Hopefully that day will come soon, and we will be able to make necessary changes to all of those rules. From time to time they may have appeared to be against Victorians; they have been always for Victorians and their safety and their health. It is only if we stay safe that we can stay open. Those rules and restrictions still have a way to go, they still have a part to play, until we get a vaccine.

Mr LIMBRICK: Thank you, Premier. I am that glad you brought up the right to free assembly, and I am glad to hear you say that you are a strong supporter of that right. As part of my role in providing scrutiny of this, I have been attending some protests to observe the government's response to people attempting to exercise their right to free assembly. I went to a protest in June, the Black Lives Matter march, to witness that. I know that you and the government caught a lot of criticism for allowing that to happen. However, none of that criticism came from me. In fact I thought it was very well managed. People were able to exercise their right to free assembly, and I thought the police acted very professionally and exactly how I would expect them to act. However, when I compare that to what happened on Cup Day, where I also went to witness what happened, there were I would estimate probably 1500 people there, and approximately 400 of those people were surrounded by police, pushed into a tight space—apparently this tactic is called 'kettling'—shoulder to shoulder, and I was one of them, for a number of hours. It was a fairly hot day, so people got thirsty. The police borrowed a bucket from the pub apparently, and then started giving out cups of water that they passed from person to people that were thirsty. This, to me, did not seem like a very good way of protecting public health. What are your thoughts on the use of these sort of tactics as a response to enforcing public health orders during a pandemic?

Mr ANDREWS: Well, with the greatest of respect and noting my comments earlier—because it is a passionately held view of mine and I think many other Victorians—protest is important, but protest has to be appropriate. At no point during this pandemic do I believe any of the protests that have been conducted were safe, were appropriate, were lawful and were the smart and right thing to do. Now, many will disagree with me. That is after all the nature of protest. However, I would say, Mr Limbrick, in my experience the men and women of Victoria Police have worked extremely hard this year to do the best job they can, issuing many more warnings than fines, dealing with tragedy in their own ranks—a very challenging year for law enforcement this year, very challenging. But they have done, I think, each of us proud. Now, that is my view. That might not be a view held by everybody. As to tactics or those deeply operational matters that literally are on the ground, with the greatest of respect, I think the Chief Commissioner, who I believe will be appearing before the committee, is the best person to speak to about those matters.

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The other thing too I would say is that if there is a view held by you or anybody else that police did not act appropriately, then there are avenues, there are ways in which you can advance that, and people should feel confident and free to do that. I do know—again, I am not reflecting on anyone who was at the protests specifically—that a female police officer was very badly injured at that particular protest, and she is not the only member of Victoria Police that has been injured this year. There have been a lot of very ugly scenes and a lot of very challenging circumstances, and I think police have done a good job. I do not expect or require everybody to agree with that. People are allowed to have a different view. But as to the tactical decisions that Victoria Police make, I think the Chief Commissioner would be the perfect person to ask. And if you are not satisfied with his answer, the police minister will be with him, and you can always come back to me. I am more than happy to have an ongoing discussion with you about this.

Mr LIMBRICK: All right. Thank you, Premier. I would state that I did not witness any violence there—at either of the protests. I did not witness any violence. All right. I feel that this appears to be a bit of a symptom, because I actually asked the Chief Health Officer about what he thought of these tactics. They were not done with his knowledge, and I think this might reveal some sort of communication problem. And I would like some sort of insight into the communication between, for example, the Chief Health Officer and the police on how these things are managed between each other, because the directions and the enforcement of those directions are two very separate things. And it is my view that in this case the enforcement of those directions does not meet the goals of improving public health—by pushing people together like this. So what sort of communications are happening, or how are you managing those communications between those different areas to ensure that they are being enforced in a way that actually is promoting public health?

Mr ANDREWS: Look, it is a very fair question. You may have isolated an issue that is driving worse, not better, outcomes. I cannot speak to the communication protocols and the work and the partnership between the public health team—so the Chief Health Officer and his deputies—and VicPol. I know there is obviously communication back and forth. There is consultation too, and rules are made and orders are drafted—but I cannot speak to that in any detail. If I could, Mr Limbrick, I would.

Mr LIMBRICK: Okay. When we get to these public health directions and their impact on human rights—I know that there is evidence for these directions and that there are assessments done against the Charter of Human Rights—why is this information still not being published?

Mr ANDREWS: I am not certain about that, to be honest. I have no hesitation in whatever information can be appropriately furnished to this committee or others. I know that in the passage of some changes to the *Public Health and Wellbeing Act* there have been commitments given. It would be my expectation that they would be honoured, and whatever information can be usefully and relevantly handed up should be. That is why I think it is important—I understand the Chief Health Officer will be a witness before the committee; I certainly hope so, both to answer questions but also to take things on notice. If there are matters that he needs to follow up, then it would be my expectation that he would.

I would caution, though, against any sense that every single order, every line and every rule has its own separate piece of advice that empowers that decision. There is a problem, there is an objective and an aim, and then there is always a process of back and forth with all the right hierarchy of decision-making and all the right thought being given in the right areas, as we saw with curfew as upheld by the courts. So, why 5 k's, not 10—I think Deputy Chief Health Officer Professor Allen Cheng answered that very well recently.

Mr LIMBRICK: I think you have spoken about suites of policies rather than individual.

Mr ANDREWS: Yes—and their aggregate impact and all of those things. So, there will not be a filing cabinet with a piece of advice for every single rule, but if there is anything further that the Chief Health Officer can relevantly and appropriately provide, then it would be my expectation that he would.

Mr LIMBRICK: Thank you, Premier. I would note that there was actually a documents motion put forward by the opposition in the upper house, and this passed the upper house. However, it still has not been provided. I think the last time I saw there was a letter from the Attorney-General stating that it is taking time to do this. I cannot remember exactly when it was passed, but it was a period of time ago. So it is quite concerning that it is taking such a long time to produce this. I would have thought that it is fairly simple to put these documents together.

Mr ANDREWS: Let me have a look at that and see if I can add anything. I would be confident that the committee can question those who are a bit more proximate to these matters as they appear, but if there is anything I can add, Mr Limbrick, I will.

Mr LIMBRICK: Thank you, Premier. I believe I am out of time.

The CHAIR: Right on time. Thank you, Mr Limbrick. Mr Danny O'Brien, MP.

Mr D O'BRIEN: Thank you, Chair. Premier, we have just heard from the hotel quarantine inquiry that a number of new documents have been tabled, including an affidavit, I believe, from yourself. But it will not be available online to the public until after this hearing concludes. Are you able to tell us what that affidavit includes?

Mr ANDREWS: No, I am not. That is a matter for the board of inquiry to make available documents.

Mr D O'BRIEN: I am not asking for the document; I am just asking for what it entails.

Mr ANDREWS: I think I have been asked this question a few times, and I have answered it, I think, consistent with the facts at all times. It was for the sake of completeness. A number of questions were put to me. I answered them accurately in detail, and it will be for the board to determine what they make public. There is nothing more or less to this. New issues were not canvassed, or threshold new issues. It was not like there was some really significant development that they needed to come to me on, but as I have always said, if there was any way in which I could assist them in their inquiries, I would. That is why. Questions were put to me. I have responded in affidavit form—so on oath. That is the way everyone who is asked for answers should actually respond. I have, and it will be for the board to provide that in whatever form they believe appropriate. I have absolutely nothing to do with whether those matters are made public and when. I would hope you would appreciate that that is out of absolute respect for the process. It is not my document to speak to in detail, and it is not my document to hand up.

Mr D O'BRIEN: In terms of respect for the process and in terms of what is your document, I would just like to go back. When we last met in this forum, in the August hearings of this committee, I asked you a question about the use of private security, police or the ADF, and you stated very clearly that you did not believe ADF support was on offer at the hotel quarantine inquiry. Subsequent to that there has been an absolute avalanche of evidence, including your own press release from 27 March and your own statement at a press conference welcoming the offer of support from the ADF. Do you now concede that that was a lie?

Mr ANDREWS: No, I do not, and the facts in no way support the conclusion that you have just drawn.

Mr D O'BRIEN: Sorry, Premier, but the facts have been outlined in detail—

Mr ANDREWS: No, they have not—your version of the facts, perhaps, not the facts.

Mr D O'BRIEN: Please, Premier, can I put this to you. The defence minister outlined a series of offers made to Victoria. The Secretary of the Department of the Prime Minister and Cabinet obviously made an offer to Mr Eccles, and as a result Mr Eccles no longer has his job. There has been evidence provided from the ADF at a set of hearings making it abundantly clear, not to mention your own comments from 27 March, as I said, acknowledging the ADF offer was there. How can you still maintain that ADF support was not offered to Victoria?

Mr ANDREWS: Well, I think it is important to go back and look at the comments I made to this committee.

Mr D O'BRIEN: I just did. I just asked you about them.

Mr ANDREWS: Well, no, you have not, actually. You have not fully and accurately quoted what I said.

Ms VALLENCE: Yes, it is in the transcript.

The CHAIR: Ms Vallence.

Mr ANDREWS: If you want to fully and accurately quote what I said, I have gone to these matters under oath. I have nothing to add to what I have said under oath. If you look at my witness statement, my oral evidence and the numerous transcripts not just of this committee but of appearance after appearance in different public forums where I have spoken directly to this issue, the facts are absolutely consistent with the way that I have described events. Each of us left the national cabinet with no expectation of significant and substantial ADF support. That has always been the fact of the matter, and I have spoken to that on numerous occasions and been absolutely consistent and clear. It is not appropriate to reinterpret what has been said and then draw a conclusion that has no basis in fact.

Mr D O'BRIEN: You have just said you left national cabinet on 27 March under no illusions that there was no offer to Victoria for ADF support.

Mr ANDREWS: Of significant and substantial support.

Mr D O'BRIEN: 'It has also been agreed'—this is your statement in a press release—'that the Australian Defence Force will be engaged to support the implementation of these arrangements'. Look, you are just going to say black is white, Premier, so let us move on.

Mr ANDREWS: It was not to run these arrangements, to support them.

Mr D O'BRIEN: Did you or any members of your COVID cabinet ever direct the bureaucracy not to seek or accept offers of support from the ADF for the hotel quarantine program?

Mr ANDREWS: No, that is a ridiculous suggestion. That is a ridiculous suggestion, and I will take you back, Mr O'Brien, to the bushfires, which you are well acquainted with, given your own community.

Mr D O'BRIEN: I am not asking about bushfires, with respect, Premier.

Mr ANDREWS: Well, you have asked a question and I am now providing you with an answer.

Mr D O'BRIEN: You have actually answered it, Premier. Chair, this is exactly the point that we have been talking about. The Premier has answered my question and I would like to now move on.

Mr ANDREWS: I am sorry. You have just accused—

The CHAIR: Mr O'Brien, the Premier is completing his answer. It is not for you to decide when he has finished his own answer.

Mr D O'BRIEN: Oh, well, it is your decision when we have to ask the question, isn't it?

Mr ANDREWS: You have just accused members of the government of—

Mr D O'BRIEN: No, I asked a question.

Mr ANDREWS: not seeking support or having a preference against or some bias against the Australian Defence Force. I would remind you that when your community was on fire, I requested ADF to come to Victoria, not the other way around. It was not offered; I requested it. Any suggestion that I have at any point been reticent in having support, no matter what colour uniform they wear or whether they wear a uniform at all, has no basis in fact.

Mr D O'BRIEN: Okay. Premier, in August you told me that the decision to use private security guards in the hotel quarantine program was an 'evolution', I think the term was you used, of an existing program, the Hotels for Heroes program. Now, obviously the hotel quarantine program was established on 27 March. Hotels for Heroes was not established until 5 April. How can it have been an evolution of that program when it did not get established until a week later?

Mr ANDREWS: Because, Mr O'Brien, again, the facts are always quite challenging I think with some of these false constructions of history. We had been long discussing and developing the program you refer to. When it was stood up is not the point at issue here. It is simply accurate to say that the government and various agencies that work for the government had been giving regard and thought and had been doing hard work to

develop that Hotels for Heroes program. That well and truly predated 27 March, but in any event, Mr O'Brien, it is not for me to pre-empt a process that—in answer to Mr Riordan, and I have indicated to you I think in your very first question. You have just referred to a hearing that is literally going on right now—

Mr D O'BRIEN: I am not asking you to pre-empt the process, Premier.

Mr ANDREWS: Yes, you are, I am afraid.

Mr D O'BRIEN: No, this is a parallel inquiry that, I might remind you, you asked PAEC to do. You said you had confidence in us.

Mr ANDREWS: I do not think that I at any point asked—

Mr D O'BRIEN: Excuse me, Premier. Chair, why can the Premier interrupt me when I am asking a question but I cannot interrupt him?

The CHAIR: The Premier will allow Mr O'Brien to finish his question.

Mr D O'BRIEN: Premier, with respect to this program, this hotel quarantine program, if it was in fact an evolution of the Hotels for Heroes, which you have just said was being developed for some time, who made the decision to use private security guards rather than police or ADF?

Mr ANDREWS: I would have to go back and check the record in relation to those matters. What I think you are doing at the moment is you are, without any doubt at all, cutting across issues that are under active consideration by an independent board. Whilst you are correct to say that the government was very pleased to have PAEC play this role in terms of oversight of our pandemic response, at no point did I invite any member of this committee to essentially undermine or cut across or in any way hamper or hinder the board of inquiry.

Mr D O'BRIEN: Can I just verify a couple of things from the 27 March national cabinet meeting?

Mr ANDREWS: Sure.

Mr D O'BRIEN: Was it only you and Secretary Eccles representing Victoria at that meeting?

Mr ANDREWS: No, I do not believe so. There would have been a minute taker as well.

Mr D O'BRIEN: Okay. Can you tell me who the minute taker was?

Mr ANDREWS: I would need to check. It would most likely have been Deputy Secretary Houghton, but I would need to double-check just for the purposes of accuracy. That gives you three people in the room—myself, the Secretary and a deputy secretary who is the minute taker—from our end.

Mr D O'BRIEN: Okay. By the time of the conclusion of that national cabinet meeting had you already made a decision as to how Victoria's program would run and did you make any contact with your chief of staff to that effect?

Mr ANDREWS: Again, I have gone to all of these matters, and I have got nothing to add as to who was spoken to and who was not. I have gone to all of these matters in great detail. What I will say to you is at the end of the national cabinet meeting a national cabinet decision had been made that there would be a hotel quarantine system, and various people in the government, most notably those who have direct responsibility for operational matters, went and operationalised that decision.

Mr D O'BRIEN: And did you—

Mr ANDREWS: I gave a press conference and went to a number of matters but clearly indicated to all assembled and all who were watching and listening that the final detail, in fact many of the key details—and almost apologetically, because I had anticipated there would be a series of questions—would not be able to be answered at that doorstop because they had not been settled yet. They were then settled throughout the evening and into the following day—

Mr D O'BRIEN: And I understand that—

Mr ANDREWS: and I can add no further interpretation or commentary lest I cut across other matters that, as you well know, are literally live and occurring as we meet here.

Mr D O'BRIEN: Premier, Mr Eccles left national cabinet to call your chief of staff. Have you been advised what the context of that discussion was?

Mr ANDREWS: No.

Mr D O'BRIEN: Did you bother to ask anyone at the time?

Mr ANDREWS: There were numerous conversations. I cannot speak to a verbatim transcript or all the detail of it.

Mr D O'BRIEN: I am not asking you to.

Mr ANDREWS: The current secretary and the previous secretary and where relevant other senior public servants speak with my chief of staff on a very regular basis.

Mr D O'BRIEN: Okay. At around the time these key decisions were made—and you know from the hotel quarantine inquiry there was a crucial 6-minute window where Commissioner Ashton firstly did not know who was going to be guarding returnees into hotel quarantine and 6 minutes later he did—it would appear that there was only Commissioner Ashton, your secretary of the department, yourself and your chief of staff that knew this program was being established in Victoria. Is there anyone else who could have known that?

Mr ANDREWS: I think this matter has been pursued in quite some substance.

Mr D O'BRIEN: A name?

Mr ANDREWS: I do not have a detailed minute-by-minute in front of me—

The CHAIR: I am sorry to—

Mr ANDREWS: Chair, with your indulgence, I do not want to leave this unfinished. I do not have a minute-by-minute in front of me, but further phone records were handed up to the inquiry. The former secretary of my department became very clear that he was the person who had made that contact. I would refer you to the statement that he issued as to the contents of that telephone call, I would refer you to former Chief Commissioner Ashton's witness statement and oral evidence and I would refer you to the numerous sworn and public statements that I have made on this issue. I really have nothing further to add than that. I am at a slight disadvantage, Mr O'Brien, in that I do not have a minute-by-minute to give you the best sequential, but I have done that before, including under oath.

The CHAIR: Thank you, Premier. The member's time has expired and Mr O'Brien's call has finished.

Mr D O'Brien interjected.

Mr ANDREWS: And your editorial is noted.

The CHAIR: I will pass the call to Ms Pauline Richards, MP.

Ms RICHARDS: Thank you, Chair. And thank you again for your appearance this afternoon—this marathon. I would like to take you to an understanding of those workers who are at the front line of the pandemic, and specifically our healthcare workers of course. I think we have all recognised that they are most at risk of infection. Over the course of the pandemic I understand that nearly 3600 healthcare workers in clinical roles have been diagnosed with the virus. I am interested in gaining some insights into what you have done to keep them safe.

Mr ANDREWS: Thank you very much, Ms Richards. Our workforce, and when we say our health workforce we really do mean everybody—health care is delivered by teams of people and it is always best to acknowledge each and every member of the team as best you can. So whether it be people acting as a car park attendant at the hospital to ward clerks and front-of-house staff, people who do a lot of administrative work, all the way through to our ambulance paramedics, who are in and out of hospitals all the time, nurses, all our allied

health staff, cleaners and cooks and, of course, our medical staff—we have asked a lot of them this year. We have asked an enormous amount of them. And in the depths of the second wave when we had many hundreds of people gravely ill in hospital suffering with the complications of a wildly infectious virus, our entire team—the clinical absolutely, but the entire team—were at significant risk and did quite amazing work. It is appropriate to acknowledge them and to thank them, and I must confess I was particularly moved on the day when we could indicate that there were no active cases amongst healthcare workers. Issues of workplace safety are central to the values of this government, and we do not want to see anybody who is in the business of caring for others become unwell because of their fundamental commitment to the wellbeing of others.

PPE has been much talked of this year. I think people have become more expert in matters of N95 masks and other gloves and gowns and shields. It has been the lived experience for all of us, all the way down to wearing a fitted mask when not speaking at a parliamentary committee inside. This new normal has been most acutely challenging for those that are literally dealing face to face and cannot maintain a distance. They cannot provide care and be 1.5 metres apart. To all of those from a logistics point of view who have provided literally tens, hundreds of millions of items, literally tonnes of gear, to those who have changed the way they work, to those who have changed the practices in a very meaningful and tangible way, to staff who have worked in quite extraordinary circumstances—we are grateful to them. To patients, non-COVID patients, elective surgery patients, for instance in the back end of category 2 and category 3 who, because of safety, have had to have their surgery put off—we thank every single person who has made a contribution to this. None of it has been easy.

There is a big difference between the first and the second wave. The majority of healthcare workers in the first wave were contracting the virus outside that health setting. That flipped almost 100 per cent when we got to the second wave, and it is simply a function of the number of patients that were in hospital and also the amount of community transmission that was around and throughout the metropolitan area and some parts of regional Victoria. Every effort has been made. Hospital-based infections, cleanliness, hygiene, infection prevention and control are very, very serious issues, and I know that whether it be the Chief Health Officer, or the Chief Medical Officer, Mr Andrew Wilson, CEOs of hospitals, clinical directors of hospitals, the new Secretary of the department of health, Professor Euan Wallace, all of us know and understand how important these issues are, and not just at the height of the second wave but in an ongoing sense. We do not have a vaccine for this. We are going to have to be vigilant, very careful, about these matters. But there have literally been millions of items that have been sent to hospitals and many, many tens of thousands of hours of hard work done to keep patients safe and to keep fellow workers safe.

If I can perhaps end by saying: I have had an opportunity throughout this year to connect with a number of nurses—Zoom, of course—and to hear from them firsthand about what working on the ward is like. To each of them we say thank you, and through them to everybody else in the team. But when people who have got 20 years experience at, say, the Royal Melbourne Hospital, which is a trauma centre—the sickest patients finish up there or at the Alfred or hospitals like that—are reporting that they have never seen anything like this, that gives you some really important perspective on how significant the challenge has been and how well served we have been by some of the most professional and committed people anywhere in the world.

Ms RICHARDS: Thank you, Premier. You spoke earlier about the emotion you felt when you saw that queue in Shepparton. I am interested in unpacking specific actions that the government took in response to outbreaks like that Shepparton outbreak, and what the role was or is now of the local public health units.

Mr ANDREWS: So the history to this is in the first instance we established some regional public health units, first in—I think, if memory serves me correctly—five different locations. We then set up a number of suburban public health units as well. They have been regarded from time to time as a branch office for the purposes of contact tracing. They can be called upon in partnership with the health service, for instance, to do contact tracing, but they are more likely to be involved in the first instance in building the connections and the linkages with community leaders or the contacts of a health network, for instance—a local health service.

It is about prevention and community engagement and building those really powerful and important linkages so that in the event that you do have an outbreak, you have got that reservoir of contacts that you can go to, those well-established networks of trust. The best way to deal with chains of transmission is to have well-proven and established networks of personal connection, trust and rapport. And again, we are a very diverse community, and if we are going to respond, we cannot have a universal message; it has got to be tailored, it has got to be

bespoke, it has got to be culturally and linguistically appropriate—faith appropriate. I think all of those public health teams, regional and metro, have served us very well. I expect they will be an enduring feature of our public health response in one form or another.

The other point that I should not miss is that obviously if you live in Shepparton, on the Surf Coast, in Geelong or wherever it might be, you just have a much better and more accurate appreciation for patterns of movement, for points of congregation, for just the practical lived experience of people who are local. We often say locals know best, and when it comes to some of these issues it has been proven to be true. We have been able to spot things and stop things, find gaps and just use local knowledge, with practical common sense as well, and it has proven particularly valuable.

Ms RICHARDS: Thank you. I am just going to take us down another path now and move on to an understanding or seek some understanding of the measures the government has taken to support the mental health of Victorians during the pandemic. I think I probably speak for the committee in saying it has been something that is of great interest and importance to everyone here with us today.

Mr ANDREWS: I had a meeting with the Prime Minister just last Monday—the Monday before—talking about lots of different things, but one of the issues that he and I share a common passion for and a determination to do something significant about is issues of mental health, suicide prevention. We have always known—certainly in recent times, since our commitment before the election and our subsequent mandate that we were given to have Australia's first royal commission into mental health—and we understand that the system is broken. It is arguable that it is not actually a system; it is a series of disparate services that do not connect appropriately, except when a person is in absolute crisis.

So at all those different points—prevention, high-prevalence disorders and all the way through to acute mental illness, support for carers and a better consumer voice—a lot of it is not earth-shattering innovation; a lot of it is just about linkages and connection and fundamentally an acknowledgement that the system is broken. It is very hard to fix something that you will not first confess is fundamentally broken.

So we have done that, and I am very hopeful and positive that we will get some further unique partnerships with the commonwealth when it comes to a better mental health system. The fact that this pandemic event has exposed what we already knew and had acknowledged I think potentially provides us with a unique opportunity across the nation to have all states and territories and the commonwealth government united to make national mental health reform a key priority for the national cabinet and a key priority for 2021.

There are many different investments that we have made. As I said before, whether it is about \$60 million for a package of measures to support mental health wellbeing and social connections for Victorians; additional capacity for emergency departments; additional capacity for those that provide counselling and online support, Beyond Blue, Lifeline and those sorts of services; or all the way through to trying to make sure that our mental health service system was as COVID-safe as possible, it has been a massive effort. I want to thank and congratulate, as he was then, Minister Foley and, since some changes, the Deputy Premier for the way in which they have listened to that sector. I am very proud to think that people like Pat McGorry and so many others have lauded this budget as a big down payment on the reform that we need, but people like Pat, who I have known and had the honour of working with for 20 years now, would want me to point out that of course he will bid for more money. That is the nature of this. But we are on the edge of something special here I think, and the pandemic may well have pushed all of us as a nation to do more and do better for those who live with mental illness and their carers and their families.

Ms RICHARDS: Thank you.

The CHAIR: Thank you, Premier. The member's time has expired. I will pass the call to Mr Sam Hibbins, MP.

Mr HIBBINS: Thank you, Chair. Thank you, Premier and your team, again for appearing this afternoon. One of the criticisms that has been made regarding the government's response has been the lack of public health funding and the lack of resourcing for public health, in particular the number of public health officers that were available to deal with the pandemic from the start being significantly lower than other states and also in particular that adding to the contact-tracing system and having an outdated contact-tracing system. Do you accept those criticisms?

Mr ANDREWS: I do not accept the criticisms in relation to—at a systemic level—contact-tracing systems. The software in Victoria and New South Wales are essentially the same, or at least they were until we upgraded ours to now what is absolutely best in class. Look, this is one of those things that has become quite obvious. If you have a volume of cases that reaches a certain threshold point, then any system will be overwhelmed. The maths of this is just an undeniable inverted pyramid of doubling and doubling again.

On the issue of comparisons and contrasts or observations you might make about our standing public health team, our non-pandemic public health team, look, none of us have the benefit of hindsight. I think that we scaled very, very quickly, we scaled appropriately and we were able to bring a sense of control to the first wave. Unbeknownst to us, there was another problem. If I point you to the Adelaide example—where, thankfully for everybody involved a non-mandatory test of a patient in hospital happened to show them that they had had a breach and then they were able to rapidly respond—I am not saying that good fortune is essential to these things, but sometimes this virus can present in a way that is more easily managed and more effectively managed, and sometimes you do need a break. I am very pleased that they were able to be fortunate over in Adelaide just a couple of weeks ago.

We have scaled up. I think that there will be lessons to learn in terms of our standing public health presence. But I would also make the point—I have done a few times, and I will make it perhaps more briefly—that the notion that we would have 2500 or 1200 or potentially even 600 people employed doing work that is central to a one-in-100-year event, there will be an opportunity cost that. That will mean that there are less dollars because there are not infinite amounts of money. Health is a capped funding model with infinite demand, and there is always a rationing: sickest get treated quickest. If we were to try and maintain even a portion of what we have on the ground now, that would be a very significant cost. Whether that is proportionate to the risk that we face once this event is over, there will be much written and much said about that.

Mr HIBBINS: Just to clarify what you have said about contact-tracing systems, you indicated that Victoria and New South Wales were essentially the same. Didn't we send a team to New South Wales to see how they were—

Mr ANDREWS: No, a team was sent to share our experience and for them to share their experience with us. The report that was provided after that visit indicated that there was no area where Victoria needed to fundamentally change. It was a cooperative, collaborative visit that came after literally dozens, perhaps hundreds, of different interactions between our public health team and the New South Wales public health team over the full length of the pandemic. We have gone beyond that though—well beyond that.

Mr HIBBINS: Thank you. Some of the evidence that we have heard in regard to our multicultural communities for this inquiry—and I will just read to you from a submission from the Ethnic Communities Council of Victoria—stated:

By far the overarching problem cited both by community members and multicultural organisations was the lack of coordination by the State Government of a taskforce including multicultural organisations and ethnic associations with long experience in working directly with ethnic communities.

. . .

Communities and organisations mentioned difficulties in accessing updated, official information in different languages, in a timely manner.

Do you accept this criticism of the government's response? I would put it in the context too of the second outbreak. I mean, a lot of the discussion has been about obviously the casualised workforce, but we must also acknowledge that many of our members of our multicultural community were affected by the second outbreak. Do you accept that criticism of the government's—

Mr ANDREWS: Well, I would say to you I think there is a link between casualised work and many multicultural communities—

Mr HIBBINS: Yes, that is the link that I am—

Mr ANDREWS: Sorry. Well, then we are in furious agreement.

Mr HIBBINS: Again.

Mr ANDREWS: There is definitely a link between those two things. I have not read the submission you are referring to. That seemed a little binary to me in its tone. I am not for a moment saying that interaction with any community at any time this year in an event like this can ever be perfect. I think that we have got better and better over time at engaging with different communities as the virus has presented in those communities or as we have become aware that there was a prevention piece of work that needed to be done. I well remember speaking to the Islamic community on that weekend when we had hoped to announce the end of the hard lockdown but had to defer for a couple of days because of the northern suburbs outbreak. I well remember speaking to a very large group of different community leaders, school principals, faith leaders and business leaders, and I thank them for their engagement. I was particularly impressed with the work that the VMC had done and the Islamic Council of Victoria, Bachar Houli and so many other people who stood up as genuine community leaders to lead their community. To me the tone of that seems a little harsh and perhaps unfair, but I am more than happy to have a look at it in more detail. Nothing can ever be perfect in these responses, but I think it has got better and a lot of people have worked particularly hard.

Mr HIBBINS: Well, do you think that is one of the lessons to learn, Premier? I mean, we have also heard evidence in regard to the public housing lockdown about the need for the Department of Health and Human Services to engage immediately and deeper with the groups on the ground to assist them to do their job.

Mr ANDREWS: Sure. Mr Hibbins, I am happy to concede that there will always be learnings when it comes to public messaging, behavioural change and public awareness in a dynamic, often fearful environment where there is a great diversity, which is a great strength but presents challenges sometimes. It is a unique event. If it is okay with you—because I do not want this sense that we have not done a lot and that all of our agencies and partners have not done a lot—and if it would be of interest to you, in addition to my answer today I can write to you or write to the committee and provide you with a full accounting of all the translated material, the social media interactions in language and what must be thousands of meetings that will have been held over the course of the year around outbreak management. Every effort has been made. But again you cannot go through a one-in-100-year event without learning some things, and embedding those learnings is a really important part of this.

Mr HIBBINS: Yes. Further with PPE for healthcare workers, now, you would have heard throughout the entirety that there was a large outbreak obviously with healthcare workers, that many healthcare workers—and we heard evidence before our committee—were unhappy with the level of PPE that they were provided. Now, obviously you were quite adamant that there were lots of supplies, but do you accept that there was actually a deficiency in N95 masks and that is why they were not made mandatory, and that there were also issues with the distribution of that equipment given that we have a quite devolved, and we have heard evidence the most devolved, health sector in the country—there were actually also difficulties with the distribution of that?

Mr ANDREWS: I think a devolved system is one of the great strengths of our health system. I think it is closer to the people that it serves. However, again, a one-in-100-year event will expose in terms of fitness for purpose for that event: are your structures that serve you well for 99 years out of 100 in fact a challenge? So there will be a lot of learning to come out of that. I do not necessarily accept some of the criticisms that have been made around the distribution network, but I can confirm for you that there are 364 million gloves, 85 million surgical masks, 5.6 million N95 masks and 3.2 million face shields currently in our warehouse and many more than that that have been distributed. They have been distributed to local health services, and the assumption and the expectation is that they are then, in a safe and urgent way—with some speed—administered and distributed. Each health service obviously will have learned things along this journey, and my expectation would be that they would feed those learnings back up to the department of health and then we can try and embed some of those.

Just on N95s, I am not a doctor, but what I do know is that there is quite some debate about where they are best deployed and how they are best fitted. I know many people will have very firm views on that. I am not in a position to be able to offer up an expert view or to try and adjudicate between competing clinical judgements. I do think the Chief Health Officer may be able to add to my answer. If he cannot, then Professor Wallace will be able to. And if none of that is to your satisfaction, then the minister I am sure will be able to take things on notice for you.

Mr HIBBINS: Okay. And just finally, Premier, on hotel quarantine, you have indicated that the decisions around setting up hotel quarantine were operational in matter, but this was one of two sources of infection. You

have got community and you have got people coming from overseas and interstate. Why did you not run the ruler over this program before it was implemented given it was so critical to the success of managing this virus? Why did not you get involved and run the ruler over this program to make sure it was watertight?

Mr ANDREWS: Well, what we have heard in evidence to the board of inquiry and what is clearly a matter of public record and fact is that there were regular reports and there were regular briefings. There was a flow of information in relation to how the system was operating. However, there was not the detection in time of the fact that this had breached hotel quarantine. This was not an issue at every single quarantine hotel. It was an issue at some. I await the findings and any recommendations that are made. My commitment has always been to take the swift action to make sure this does not happen again in any circumstance. We will be better able to comment on that and perhaps more fully answer your question once that report is handed up, which is only a couple of weeks away.

Mr HIBBINS: Thank you.

The CHAIR: Sorry to interrupt you there, Premier, The member's time has expired. Mr Tim Richardson.

Mr RICHARDSON: Thanks, Chair. Premier, can I take you back to where you left off with Ms Richards about the impacts on our community's mental health during the pandemic. Of course Professor Pat McGorry has rightly described this as the second phase or the second wave of the pandemic. I am wondering if you could take the committee to the support for young people. This has disproportionately impacted them, requiring a disproportionate response. What supports has the government provided to young Victorians?

Mr ANDREWS: It is fair to say, Mr Richardson, that there is a significant impact, and some would argue a disproportionate impact. There are a number of different groups. I think we have got those that came into the pandemic experiencing mental illness—it was a feature of their day-to-day life. We have got others then in turn whose condition or challenges may have been made more acute by virtue of the pressure of these 12 months. Then there are others that are experiencing mental health issues for the first time, and I think that there are many young people who are in that category, where depression and anxiety and a whole range of different mental health issues have been experienced by them for the very first time. So it is challenging. You have got to build up the current system to cope with additional demand, and then you have got to wrap services around people that are not known to the system—they have never been in the system previously.

The best thing here is to listen to the experts, whether it is Pat—every Victorian can be very, very proud that Pat McGorry calls our state home. He is passionate. He is very effective. His appetite for more funding and more certainty and better outcomes is almost insatiable. That is what you want in advocates. He is a champion particularly for child and adolescent mental health services, particularly young adult mental health services. We are proud to have rebuilt Orygen down in Parkville. We are proud to have supported that organisation and many others.

This budget and our pandemic response provides just under \$60 million since April. Sorry, in April we provided just about \$60 million. Orygen, an online social therapy digital platform, COVID specific—\$1.6 million, with a partnership with the YMCA that has attracted nearly 60 000 subscribers over that journey, and we thank them as a partner in terms of wellbeing, leadership, mental health, first aid, issues of fitness and physical activity. It has been a wonderful success—a small amount of money but very substantial benefits. About \$450 000 went to Smiling Mind to deliver tailored resources for parents, particularly of young people who are experiencing mental illness. There are 13 000 parents and over 6000 teachers who have subscribed to that resource and have been better placed because of it. And there is \$500 000 to deliver increased capacity to Kids Helpline, which has supported more than more than 26 000 contacts from young Victorians during the pandemic period.

So some of these are very big investments; some of them are much smaller. But such is the quality of our support and assistance sector, if you like, and such is the quality of our mental health clinicians and advocates that if you give them additional funding they will always put it to very good use, and that is why there is the best part of \$900 million in this year's budget, as you said, and as Pat said, for step 2, noting that there will need to be many more steps after that. The final report, of course, does not come down until February. I think this is not a cost, this is a profound investment in keeping in people well and avoiding the very worst of outcomes. But there is a lot more work to be done in this space—a lot.

Mr RICHARDSON: Just turning our attention to the progress of the royal commission, I think the lessons that have been learned during the pandemic and then where we face ourselves as we progress to the findings of the royal commission—obviously its interim report has already been handed down—what specific actions are the government taking to ensure the work of the royal commission and the progress of its recommendations are not delayed during the pandemic?

Mr ANDREWS: The mental health royal commission moved all of its work online. They were able to because chair Penny Armytage and others have worked extremely hard to make sure that they continue to engage with the sector. They have been absolutely determined and passionate about letting the consumer voice lead this reform process, and it just makes sense. If you want to build a system that meets the needs of people with mental illness, you need to speak to people who live with mental illness and their carers and clinicians—people who know and understand this world really well. They have done an amazing job to be as engaged, as authentic, in terms of getting those real voices, that lived experience, into the recommendations they have already provided.

Through their consultations with the minister and their dialogue with me, I think that it is fair to assume that this issue of housing is something that is well known and well understood to them, and it is not by accident that there is an allocation, a substantial allocation, of these new social and affordable housing units to those who live with mental illness. They have done an outstanding job. I am very confident they will report in February, as they have indicated. The first response we provided to their first report, and their first report itself was about things that could not wait—things that we should get on with because they were no-regrets investments, regardless of what was in the final report. We have added to that in unprecedented terms in the budget, just from this week, the best part of another \$850 million—\$900 million. That will deliver all the beds that they had required of us through their recommendation and more and sets us up really well to be able to take even further steps once the final report comes out. But running a big inquiry—running something that is as personal, as emotional—is only successful if it engages with really large numbers of people and has meaningful engagement. I think that Penny Armytage and her team have done an amazing job in being able to reach out and give everybody a voice, particularly consumers. That is where the best reform comes from.

Mr RICHARDSON: Just taking you, Premier, to business support now. And obviously we have covered off on some of the post-pandemic support for businesses, but I am wondering if you could take the committee to explaining what support the government has provided to businesses, from the start and through the pandemic, to help them survive and bounce back during the impact of the coronavirus.

Mr ANDREWS: Thanks very much, Mr Richardson. I think it is important that we acknowledge that there has been about \$13 billion worth of economic relief that has been provided—\$6 million of that is direct support to businesses—since the beginning of the pandemic. It has come in a number of different phases and somewhat different eligibility criteria, depending on the nature of the need and the nature of the grant round, if you like.

One element of that may seem a little counterintuitive to call business relief, but the \$2.7 billion building works package is literally thousands of small projects allowing us to hire tens of thousands of extra people, giving people work and a sense of security and giving firms an order book that they can plan around. That is very, very important to us as well.

It all of course started with payroll tax refunds, not something that has been done in any other state or territory, which is all about the fundamental acknowledgement that that money, those three quarterly payments that were made by those businesses—many thousands of them—was better in their bank account than in the Treasury's coffers at a time when they did not have customers, at a time when they really had this very, very significant challenge. Beyond that we then had waves of grant funding which total the best part of \$3 billion, as well as some business taxes that have been waived and discounted, as well as some business tax deferrals also.

There is a focus on those that have been hardest hit. I do not think any of us would argue that. Whether it is the hospitality sector, the accommodation sector or the live music sector, it is very obvious who has been closed—and not closed by choice, but closed by law—and we have tried to target and tailor our support to each of those businesses and those sectors.

That has I think been well designed because of a real commitment within my office and other senior ministers' offices—relevant ministers' offices—to engage with industry as deeply and as often as we possibly can to get

the best understanding of the circumstances that they face, and I want to thank all of those businesses and peak bodies and industry associations and unions—everybody who has engaged with us. It was just literally thousands and thousands of Zoom calls and telephone calls over the course of the year, and I think our response has been better because of that, and I think the budget is better because of that ongoing dialogue. We will continue to have that open door and to try and listen and to have policy responses that are well informed by the lived experience of people who run these businesses and work in these sectors every single day. It is an enormous amount of money, but it is proportionate to the task that we face.

Mr RICHARDSON: Can I take you to the support for hospitality businesses? Can you explain how the government has supported hospitality businesses to survive and bounce back during the impact of the coronavirus pandemic?

Mr ANDREWS: So there has been a very substantial package of support in aggregate terms, whether it is waiving, basically not charging people for, liquor licences during this year or providing cash grants that in the first instance were pretty much across the board for that sector and then moved to a recognition of larger venues. There are some eligibility criteria that I am sure I would invite you to take up with Minister Pakula when he appears before you, but venues were receiving multiple payments of up to \$30 000 per venue. In this industry it is a mix of people that run very small cafes—and that might be the only hospitality business that they have—all the way through to people that own a number of restaurants, a number of pubs or a number of bars. So we have tried to tailor all of this, and we have worked as closely as we can with those who are running these businesses.

I have to say that whether it is JobKeeper or the enhanced JobSeeker payments they have been very important, and we have always sought to tailor our support to marry up with that. We have not tried wage subsidies as such during the pandemic, because that would be to duplicate the effort of the commonwealth government, which I have acknowledged on many, many occasions has been very important. We know that hospitality is not just about licensed venues though; it can also be read to be that whole accommodation sector, and there have been some very specific payments in grant rounds that have been targeted particularly to regional Victoria where because of rules lots of bookings got cancelled and because of rules lots of trips did not happen. And of course our \$465 million tourism package, including \$200 vouchers for those who do travel to regional Victoria, is directly relevant to a question about business support for those hardest hit.

Mr RICHARDSON: Thank you.

The CHAIR: Sorry to interrupt you there. The member's time has expired. Ms Bridget Vallence, MP.

Ms VALLENCE: Thank you, Chair. Just to pick up on some of the line of questioning before, Premier, Mr Eccles, your former secretary, and Commissioner Ashton both claim that neither of them made any decision to provide private security for hotel quarantine, and in his resignation letter Mr Eccles made it very clear that he did not and nor did his department make any decision about it. Doesn't that just leave yourself or your chief of staff in that decision-making process?

Mr ANDREWS: No, not at all.

Ms VALLENCE: No? So at that critical time—and there has been in the hotel quarantine inquiry and in PAEC a lot of focus on that time around a quarter past 1 pm on 27 March—which other Victorian was aware of and had a decision-making ability in relation to private security for hotel quarantine?

Mr ANDREWS: Well, you are making a number of assumptions about a 6-minute window of time and the impact that window of time and various contacts between different people did or did not have on the operationalisation of the decisions of the national cabinet.

Ms VALLENCE: Well, shed some light, then; do not worry about the assumptions.

Mr ANDREWS: Well, Ms Vallence, you have just indicated this is a matter that has been well ventilated at the hotel quarantine board of inquiry. I think therein lies the answer to your question. That is not yet a complete process. When it is, hopefully, it is my clear desire and my expectation that many of these issues will be canvassed in great detail—

Ms VALLENCE: And we look forward to that, but you were there on the day, on the 27th—you were in the national cabinet.

Mr ANDREWS: Yes.

Ms VALLENCE: If Chief Commissioner Ashton and Mr Eccles have both said that they were not involved, and the only other two people would be yourself and your chief of staff—unless you are prepared to let us know which other Victorian might have been involved in making a decision—

Mr ANDREWS: These matters are absolutely central to the work that the board of inquiry is doing—

Ms VALLENCE: And you are an essential part of that, so—

Mr ANDREWS: and I would direct you to the long, detailed, accurate, faithful and completely truthful account that I gave on oath to the board of inquiry. The video is available for you, Ms Vallence; the transcript is available for you. I do not intend to go across that ground again. I just do not think there is anything to be served by that.

Ms VALLENCE: Well, I think what would be served by it would probably be a burning question that Victorians want to know. But Premier, Mr Eccles resigned on 12 October after his phone records proved that he had called Commissioner Ashton at 1.17 pm on that day, on 27 March, and you indicated that you had a conversation with Mr Eccles on 11 October after his phone records uncovered that. What was the nature of the discussion between you and Mr Eccles? Did Mr Eccles talk to you about his conversation with Commissioner Ashton? What was said?

Mr ANDREWS: Again, you have got a time line in front of you and I do not necessarily. Is 12 October, as you outlined, Ms Vallence, the day that Mr Eccles resigned?

Ms VALLENCE: 12 October is the day Mr Eccles resigned.

Mr ANDREWS: Right, so just to be clear—

Ms VALLENCE: You had a conversation with him on the 11th?

Mr ANDREWS: No. That I believe was the Monday morning. In any event, the night before I did not have a conversation with Mr Eccles; I was informed by my chief of staff that she had been informed by Mr Eccles that he would be resigning the following day. I spoke to Mr Eccles very briefly the following morning. The conversation in no way related to anything other than the fact that he was tendering his resignation, and by that stage I think he already had. Then I gave a press conference where I answered any and all questions about that matter. I wished him well for the future. If you want to know any more about what he did or did not say to Graham Ashton at any time at all, I would direct you to his statement. He has gone directly to these matters.

Ms VALLENCE: No, that was not my question. My question was: what did he discuss with you subsequent to his phone records?

Mr ANDREWS: Nothing related to any of those matters.

Ms VALLENCE: Okay. In these hearings back in May, of accommodation hotels, or the hotel quarantine program, you gave evidence to this committee that, and I quote:

... under a plan put forward by Victoria at the national cabinet to move to a compulsory hotel quarantine model, which was very quickly adopted around that national cabinet table by all states and territories. I think it has served us really well ...

... and it was very well-managed.

Do you still stand by that statement after we have seen a second wave—the only second wave in this country—

Mr ANDREWS: Obviously not.

Ms VALLENCE: a harsh second lockdown—

Mr ANDREWS: Obviously not.

Ms VALLENCE: 800 lives tragically lost—

Mr ANDREWS: Obviously not.

Ms VALLENCE: You do not stand by that statement you made to this committee on 12 May?

Mr ANDREWS: I am well aware of the question, and I will answer the question: obviously not. A quarantine arrangement is by its very nature designed to keep the virus or those who may well be assumed to be infected away from the general community. As I said when I appeared before the hotel quarantine inquiry, a quarantine system that does not achieve that objective has clearly failed. I would not have established a hotel quarantine inquiry, I would not have set about a clear strategy and made a series of decisions to bring the second wave under control if I was not acknowledging of both it and its cause.

Ms VALLENCE: So you concede it failed, then, and as the Premier of this state, have you made any—

Mr ANDREWS: I do not think that is a great startling concession to make, if I might say. It is not a startling concession to make. I have been pretty clear about that and I have gone into that in very blunt and clear and direct terms on literally hundreds of occasions, if not more, in the last six months.

Ms VALLENCE: Thank you. That blunt concession that that government policy was the worst policy decision in this nation's history—

Mr ANDREWS: I am sorry, is that a comment or a question?

The CHAIR: Ms Vallence, that is a comment, and it is not what the Premier just said.

Mr ANDREWS: No, that is not. For the record, I completely disassociate myself from this rather amateur verballing effort that is going on at the moment. That is not what I said. I am entirely sure. I believe we are both speaking the same language, but you are hearing something very different to what I am saying, and I will not be verballed in that way.

Ms VALLENCE: You conceded—

The CHAIR: Sorry, Premier, just a moment.

Mr ANDREWS: If that is the best tactic you can employ, that is—

The CHAIR: Premier and Ms Vallence, if we could have a bit of quiet, please. Ms Vallence, if you want to add commentary at the end of your question and the answer and put a proposition to the witness, then you need to allow the witness the opportunity to answer that. You repeated something that was not what he said so the Premier should have an opportunity to respond to that. Premier, would you like to respond to that?

Mr ANDREWS: I think I have made my point very clear: in no way could any comment that I make here today or at any time be interpreted and verballed into what the questioner has just put to me, and the record should reflect that.

Ms VALLENCE: You just gave evidence to this committee that you have conceded that the hotel quarantine program stood up by your government did fail—

Mr ANDREWS: I do not think it is a matter of concession.

Ms VALLENCE: and that we know that 99 per cent—

Mr ANDREWS: I do not see it as a startling admission, and you may want to present it in that way but I have literally made that point for six months on hundreds of occasions.

Ms VALLENCE: Premier, I would like to finish the question.

Mr ANDREWS: And I would like you to stop reinterpreting everything I say and putting it back as if it were statements that I had made. This is a rather silly game, and these matters are much more serious than that, much more serious than that. If there is a question to be asked, please ask me the question—I will answer it—

rather than reinterpreting everything I say to suit your purposes, which are not about public health but rather about politics I think.

Ms VALLENCE: Premier, on 12 August in these hearings—we had at the time 1079 healthcare workers who had been infected by the virus—you told Victorians at the time, and I quote:

The early advice to me—
that is you—
from the public health team is that half of those cases did not rate to the clinical setting—
and that—

We know who they are, we know they are in a high-risk setting but what we are finding from interviews is they didn't get it at work

And yet only a couple of weeks later Victorians were told on 25 August by the Chief Medical Officer of Victoria that 70 to 80 per cent of healthcare workers were infected with COVID whilst they were at work, which took the number of infected healthcare workers to nearly 2700. How did you get that so wrong to advise this committee of that so wrongly back in August?

Mr ANDREWS: Well, I think, having stood behind the Chief Health Officer, I am almost certain when he made those subsequent statements a few weeks later, the first wave and the second wave are very different as they relate to chains of transmission, the way this virus has moved throughout the community. The first wave was much more about people returning from ski holidays in the United States and less about meatworks and distribution centres and large families in the north and west of the—

Ms VALLENCE: We are not talking about returned travellers or abattoir workers; we are talking about healthcare workers, who obviously did an amazing job on the front line. But we have heard—

Mr ANDREWS: No, I think we were talking about chains of transmission—

Ms VALLENCE: The evidence you provided was that healthcare workers were not getting it at work. However, it is the complete polar opposite we heard only a few weeks later that 70 to 80 per cent of them were getting it at work.

Mr ANDREWS: That is the, as I have just—

Ms VALLENCE: How could that have been so wrong?

Mr ANDREWS: This is your time. If you want to just keep talking, I will have no time to answer your question.

The CHAIR: Would you like the Premier to answer, Ms Vallence?

Ms VALLENCE: So you do not want to answer?

Mr ANDREWS: First and second waves are very different. You can be provided with advice that makes assumptions, always subject to data and analysis, and the department of health has done that work under the leadership of the Chief Medical Officer. We have provided periodic updates, and there is a dramatic difference in chains of transmission and source of infection for healthcare workers between the first wave and the second wave. They are the facts of the matter. You may seek to reinterpret them and to put a commentary on top of them, but that would not be accurate or indeed fair.

Ms VALLENCE: Did any of the private security who worked on the hotel quarantine program for the returned travellers also work at hotels where healthcare workers stayed for the Hotels for Heroes program?

Mr ANDREWS: I could not answer that question.

Ms VALLENCE: Will you take it on notice?

Mr ANDREWS: I am happy to provide you with whatever I can relevantly add.

Ms VALLENCE: Okay. As we have heard earlier, Victoria will recommence accepting international arrivals. Can you tell us what budget provisioning has been made for these returning travellers relating to the new hotel quarantine arrangements from 7 December? Whereabouts is that in the budget?

Mr ANDREWS: I cannot provide you with a definitive number. Some of those matters will still be subject to work that is ongoing. Some of the staff costs, which will represent the lion's share of the total budget, will be made up from the redeployment of staff that are already employees. I am happy to take on notice, and again—

Ms VALLENCE: On notice where it is in the budget?

Mr ANDREWS: Pardon, sorry?

Ms VALLENCE: Just where it is in the budget, if you could take that on notice.

Mr ANDREWS: Well, there are many contingencies in the budget. Not every item has its own line item. But I am more than happy to provide you any relevant and appropriate information.

The CHAIR: The member's time has expired. Ms Nina Taylor, MLC.

Ms TAYLOR: Thank you. If we could pivot back to the discussion around business support, in particular small business, how has the government supported small businesses during the pandemic not only to survive but also to become more resilient?

Mr ANDREWS: Thanks very much, Ms Taylor, for the question. There has been a whole range of different quite well-targeted programs, whether it be grants all the way through to the Click for Vic campaign, which is principally made up of small artisan businesses, businesses that Victorians can be very proud of, local produce, the very best produce of its kind anywhere in the world—all of those different grants. We can provide, and I am sure that Minister Pakula will speak to this in more detail, the different levels of assistance and some bespoke programs that we have run for different sectors. But I just have to make the point: small or large, the best thing that any government can do for Victorian business is to make sure that Victorians have jobs, because if Victorians are in work then they have income to spend, they have confidence to invest and they have an ability to drive demand and activity. But they will only do that if they have got confidence. They will only do that, particularly as it relates to this virus, if you have got the sequence right. You have got to get the public health situation under control, which means you have got to make very difficult decisions. You cannot be distracted by the loudest voices. You cannot be led—knocked off course—by those who play politics instead of being focused on public health. You have to make difficult decisions and you have to have the courage of your convictions to get the numbers low, because only if you get the numbers low can you hope to keep the numbers low.

Once the public health issue is dealt with—or contained, suppressed, whatever term we want to put on it—that is the only time when you can then move to repair the damage that this virus has done. So sequence matters—sequence absolutely matters. And to those who have argued from literally a minute after we started to lock parts of the economy and community down that they should be open, I will just point to that fact. There is not a jurisdiction in the world that thought the public health bit was optional and they could just move to economic repair. It does not work that way. You have got to be logical, and you have got to be sequential. That is why it is such a triumph for the people of Victoria—the pain, the challenge, the obvious hurt that comes from these rules but an equal determination to get the public health situation under control. And now they have been rewarded—we have all been rewarded—with these numbers, and now we can push forward and repair that damage and set up employment as well as dedicated support for businesses large and small.

There are many different things that are brought to book in the budget that have been rolled out progressively throughout the course of the year, but nothing—nothing—is more important than providing businesses with a confident and employed customer base. That is the most important thing you can do, and that is what this budget, the government and our pandemic response delivers in spades off the back of Tuesday's budget.

Ms TAYLOR: Thank you. Thinking about business chambers, we know that local shopping strips are the heart of many communities across Victoria. How has the government stepped up and supported local traders?

Mr ANDREWS: For those of us who live in metropolitan Melbourne—and particularly the middle suburbs and further out—we know how important the local strip shopping centre is. There are some that are more dense than others. In my own local community I know that those shopkeepers are not just merchants; they are there and are part of the community. They live in the community; they are the lifeblood, in many respects, of the local community. And it has been very difficult to see people that you know, people that you respect, people that you have supported in your capacity as a consumer closed for business or literally surviving on a fraction of the takings they would normally expect in any given week.

But there are substantial supports: a \$100 million sole trader support fund, \$2.6 billion of funding that has supported 125 000 businesses across the board and a \$20 million small business digital adaptation fund—to pick up on those points I made earlier on, I think earlier this morning, about some changes that are no longer conceptual; they are real. Online shopping I think is going to change the way many of us purchase goods and services forever. It is no longer a thing you think about. We have actually done it for such a long period of time that it may have a lasting impact. The series of platform supports—website, e-commerce, finance and business management products—I think is especially important; a rebate of up to \$1200 available for 12 months for those smaller businesses. I think that sort of support has a much bigger impact, almost, the smaller the business is. There has also been a range of other professional development, recovery and resilience mentoring—all of those sorts of programs. There is \$10 million that has supported those programs.

There are also some wellbeing and mental health support programs that have been particularly targeted to businesses, and often very small businesses, who have done it very tough. There is \$5 million allocated to support metropolitan and regional chambers and trader groups. We know that that collective voice and that advocacy has been very important and arguably is even more important when we come to the recovery and repair phase. There are grants of either \$10 000, \$20 000 or \$50 000 that are awarded to those groups—trader groups and others. That is all about making sure that we have got as localised a voice as possible, so that we have got the lived experience and a genuine on-the-ground sense and understanding of the interventions we can make and the impact they would have.

So whether it is a very large company that employs many thousands of people or whether it is a very small business, having Victorians in work and confident means that they will be out there spending. Then there is some targeted and tailored support for those who really have had a horrid 2020—that is what the budget delivers. That is what our virus response has delivered, and if we need to add to some of these measures because of that advocacy, in May next year, of course we will.

Ms TAYLOR: Excellent, thank you. Just shifting gear a little bit—looking at COVID and schools—can you explain what impact the pandemic has had on Victorian students and what support the government has provided in response?

Mr ANDREWS: This is a very good question. As a parent, as a policymaker and as leader of the government, some of the hardest decisions that we have had to make were closing schools and having online flexible and remote learning for, at various points in the year, every single student right across the whole state. That has been very challenging for them and very challenging for parents and guardians. Let us not forget how challenging it has been for teachers and support staff as well. They have done a fantastic job. Parents have done a fantastic job and our students have too. It is very difficult, Ms Taylor, to give a completely accurate sense or picture. We are doing assessments. For instance, I will give you one example. When it comes to VCE and study scores and ATAR scores, we are doing—not special consideration based on a handful of students who seek that—a special consideration at a school-based level of every single year 12 student, because we know that every single student has been touched by this. That approach, that very individual approach—a one-on-one approach—will be further supported by the 4100 tutors that are going into our schools. As I said before, I probably should have got the exact number during the break, but we have been overwhelmed with people who have wanted to do that work, because it is critically important work.

We want to make sure that as soon as possible, but certainly as we end the 2021 school year—and just as vice-chancellors tell me, that they will have got all of their first-year university students, the graduating class who were admitted in 2021, all the COVID VCE 2020 young people. They anticipate and are very confident they will have them absolutely ready to go into second-year study, and the same can be said for some of the CEOs of our TAFE colleges, and others.

So it is a big piece of work next year. But I think the principal thing, the most important thing, in answer to your question, is the \$250 million to employ 4100 tutors, who will make assessments about any gaps for every single student and then put in place a tailored, very personalised response to catch those kids up and to make sure that they can move through 2021 and into 2022 exactly where they need to be in terms of their educational attainment level and the confidence that they need as part of their peer group to advance.

There is a lot of international evidence, and we were very keen to get this out—you will remember we announced this quite early—because some parents might come to the conclusion that maybe if their son or daughter was to repeat the year, that would be a better thing. Now, there will be some small number; that happens every year. But there is a lot of international evidence that says to progress with your peer group, with individual and tailored support, is a much, much better way—lots of international evidence to that end. That is where this \$250 million and these more than 4000 tutors come from. I am very, very excited by this, and I think it is going to make a big difference. And it may well mean that at the end of the 2021 academic year we have got some young people, some kids, who would have fallen behind—pandemic or no pandemic, because there were some underlying issues there—that we will have got to an acceptable standard and even higher than that.

So again, if you look at challenges for long enough, really in a thoughtful way, and then have an urgency to act, you can often find really important opportunities buried right within them. And I think this is a profound opportunity to make sure that every child gets every chance and progresses with the level of individual attention that every parent wants for every child.

Ms TAYLOR: Can you take us through the decision-making that led to the staged return to onsite learning for Victorian students?

Mr ANDREWS: So we had different settings, both in metropolitan Melbourne and regional Victoria, at different points. They were always based on the science of this, so the most complete epidemiological picture in metropolitan Melbourne and regional Victoria. There is a lot of emerging evidence too. I think that because we have lived with this for as long as we have, we sometimes lose sight of the fact that it is a novel virus, and we are not certain of what its long-lasting impacts are, particularly for young people. But each and every one of the decisions and settings has been based in science, in public health advice and in data and making sure that we are being driven by the experts. That is why all schools are open now, and that is why we can look to 2021 with a degree of confidence.

The CHAIR: Thank you, Premier. I am sorry to interrupt there, but our time for this hearing has expired. We thank you very much for appearing before the committee today. The committee will follow up on any questions taken on notice in writing, and responses will be required within five working days of the committee's request. We declare this hearing adjourned and thank you for your time today.

Mr ANDREWS: Thank you very much, Chair.

Committee adjourned.