Public Health (Diagnosed People and Household Contacts) Emergency Direction 2022 (No 3)

Notifiable Instrument NI2022–16

made under the

Public Health Act 1997, s 120 (Emergency actions and directions)

1. Name of instrument
   This instrument is the Public Health (Diagnosed People and Household Contacts) Emergency Direction 2022 (No 3).

2. Commencement
   This instrument commences at 6:00pm on 13 January 2022.

3. Public Health Emergency Direction
   I, Dr Kerryn Coleman, Chief Health Officer, consider it necessary or desirable to alleviate the emergency declared under the Public Health (Emergency) Declaration 2020 (No 1) [NI2020-153] (the declared emergency) on 16 March 2020, to give the directions as set out in this instrument.

4. Duration
   This direction is in force for the period ending on the day the declared emergency (as extended or further extended) ends, unless it is earlier revoked.

5. Revocation
   This instrument revokes the Public Health (Diagnosed People and Close Contacts) Emergency Direction 2022 (No 2) [NI2022-9].

Dr Kerryn Coleman
Chief Health Officer
13 January 2022
Public Health Emergency Direction

Public Health Act 1997

Made under the Public Health Act 1997, section 120 (Emergency actions and directions)

I, Dr Kerryn Coleman, Chief Health Officer, consider it necessary or desirable to alleviate the emergency declared under the Public Health (Emergency) Declaration 2020 (No 1) [NI2020-153] (the declared emergency) on 16 March 2020, to give the directions as set out below.

The purpose of this Direction is to require people who are diagnosed with COVID-19 to self-isolate, and people identified as a household contact to undergo quarantine in order to limit the spread of COVID-19.

Grounds for directions

I consider the directions are necessary or desirable to alleviate the COVID-19 emergency on the grounds that—

(a) COVID-19 poses a serious public health risk to the Australian Capital Territory community;

(b) the Australian Capital Territory has experienced persistent community transmission since the outbreak of the Delta variant of COVID-19, in the Australian Capital Territory on 12 August 2021;

(c) the Delta variant of COVID-19 (labelled as a variant of concern) has proven challenging both nationally and internationally, demonstrating that elimination of the virus is not feasible and community transmission will continue as the Australian Capital Territory seeks to mitigate the impact of this public health risk;

(d) the World Health Organization has declared COVID-19 Omicron to be a variant of concern which is being monitored closely, both nationally and internationally, for its potential to lead to severe illness. The first case of COVID-19 Omicron was recorded in the Australian Capital Territory on 3 December 2021;

(e) it is important to limit the spread of COVID-19 in the Australian Capital Territory community.

In making this Direction I have had regard to relevant human rights and I am satisfied that the limitations imposed as a result of this Direction are both demonstrably justifiable in a free and democratic society and necessary to protect the ACT community from the serious public health risk posed by COVID-19.
PART 1 — SELF-ISOLATION - COVID-19 DIAGNOSED

Directions

1. This Part applies to a person who is diagnosed with COVID-19.

2. On being given the diagnosis, the person must—
   a. if the person is at designated premises when the diagnosis is communicated to them—undertake a period of self-isolation at the premises; and
   b. if the person is not at designated premises when the diagnosis is communicated to them—
      i. travel directly to designated premises to undertake a period of self-isolation; or
      ii. if the person requires medical treatment at a hospital—travel directly to a hospital for medical treatment and after leaving or being discharged from the hospital, travel directly to designated premises to undertake a period of self-isolation; and
   c. communicate to any person with whom they may come into contact that they are required to self-isolate because of their diagnosis of COVID-19; and
   d. notify any person who is a household contact of their diagnosis of COVID-19; and
   e. not leave the designated premises other than in an emergency or to seek treatment for COVID-19, as advised by a staff member of the ACT COVID-19 Care@Home Program, ACT Health, or by a treating primary health care provider; and

   Example: An emergency may include needing to obtain urgent medical treatment, fleeing a serious risk to life or health, or escaping a risk of harm related to domestic and family violence.

   f. not permit any other person that does not reside at the designated premises to enter the premises, unless for medical, law enforcement or emergency purposes.

   Note: A person who usually resides at the same premises would be considered a member of a household contact to whom Part 2 applies.

3. If the diagnosed person is a child:
   a. a parent, guardian, person with parental responsibility or carer of the child must:
      i. self-isolate with the child at the designated premises for the period of self-isolation; and
      ii. comply with Part 2 of this direction as a household contact.

4. A period of self-isolation for a person to whom this Part applies is the period beginning when the person is diagnosed with COVID-19 and ending when the person is given clearance from self-isolation by either a public health officer or a staff member of the ACT COVID-19 Care@Home Program.
PART 2 — QUARANTINE - HOUSEHOLD CONTACTS

Directions

5. This Part applies to a person who is a household contact of a person diagnosed with COVID-19.

   Note: Attachment A contains risk mitigation guidance for a household contact. This includes a strong recommendation that household contacts should not enter high risk settings, such as hospitals and residential aged care facilities where practicable for days 8 to 14 following the household contact’s last exposure to a diagnosed case.

6. The person must:
   a. complete a COVID-19 online declaration at https://www.covid19.act.gov.au/; and
   b. if the person is at designated premises when they become aware they are a household contact—undertake a period of quarantine at the premises; and
   c. if the person is not at designated premises when they become aware they are a household contact—travel directly to designated premises to undertake a period of quarantine; and
   d. communicate to any person with whom they may come into contact that they are undertaking a period of quarantine due to being a household contact of a person diagnosed with COVID-19; and
   e. not leave the designated premises during the period of quarantine other than to undertake a COVID-19 test, or in an emergency; and
      Example: An emergency may include needing to obtain urgent medical treatment, fleeing a serious risk to life or health, or escaping a risk of harm related to domestic and family violence.
   f. undertake a COVID-19 test as soon as possible after becoming aware they are a household contact and again if the person develops any symptoms consistent with COVID-19; and
   g. undertake a COVID-19 test on or after day 6 of the period of quarantine, unless the test under paragraph 6(f) occurs on or after day 5 of the period of quarantine; and
   h. not permit any other person that does not reside at the designated premises to enter the premises during the period of quarantine, unless for medical, law enforcement emergency purposes or essential support services.

7. A period of quarantine, for this Part, means a period that begins on the day the person first becomes aware they are a household contact and ends at 11:59pm on the seventh day after the diagnosed person returned a positive result from a COVID-19 test, subject to the household contact obtaining a negative test result in accordance with requirements in paragraph 6(g).
8. A **COVID-19 test** for this Part means:
   a. a rapid antigen test to detect **COVID-19**; or
   b. a reverse transcription polymerase chain reaction test to diagnose **COVID-19**.

9. For a person who has a test under paragraph 8(a) and returns a positive detection for **COVID-19**, that person must comply with any **Guidance for People who Test Positive for COVID-19** as issued by ACT Health and published on the ACT COVID-19 website.

10. An **authorised person** may direct a person to comply with this Part if they reasonably believe that the person is a close contact of a person diagnosed with **COVID-19** and it is necessary for the person to undertake a period of quarantine.

11. Any person directed by an **authorised person** under paragraph 10 must comply with this Part as if they were if they were a **household contact**.

**PART 3 — RECOVERED CASES**

*Directions*

12. This Part applies to a **recovered case**.

13. A **recovered case** is subject to the requirements in Part 2 of this Direction unless an **authorised person** considers it safe for the person to stop complying with the relevant requirements in this Direction.

**PART 4 — MISCELLANEOUS**

14. An **authorised person** may ask a person for any information necessary to determine whether the person is subject to this Direction, including to produce proof of identification.

15. Any person must comply with any request made under paragraph 14 by an **authorised person**.

16. An **authorised person** may direct a person who is subject to this Direction to do such things as are reasonably necessary to comply with this Direction.

17. Any person subject to this Direction must comply with any request under paragraph 16 by an **authorised person**.

18. A **clearance** given by an **authorised person**, **public health officer** or a staff member of the **ACT COVID-19 Care @ Home Program** under paragraph 4 must be in writing.
PART 5 — EXEMPTIONS

Exemption

19. The Chief Health Officer may, in writing and subject to any conditions that the Chief Health Officer considers necessary, exempt a person from this Direction, or a stated requirement under this Direction, on compassionate or other grounds that the Chief Health Officer considers reasonable and appropriate.

20. If the Chief Health Officer exempts a person from this Direction, or a stated requirement under this Direction that person must comply with the conditions of the exemption.

PART 6 — MATTERS RELEVANT TO THIS DIRECTION

Guidance


22. Information for people who are exposed to COVID-19 can be found at https://www.covid19.act.gov.au.


25. Guidance about how a person is determined to have met the criteria for discharge from self-isolation or quarantine can be found at https://www.covid19.act.gov.au/.


27. Risk mitigation guidance for a person to whom Part 1 applies, is provided in Attachment A.

28. Risk mitigation guidance for a person to whom Part 2 applies, is provided in Attachment B.
**Definitions**

For the purposes of these directions:

29. **Authorised medical officer** means an authorised medical officer under the *Public Health Act 1997*.

30. **Authorised person** means an authorised person under section 121 of the *Public Health Act 1997* and includes an **authorised medical officer**.

31. **ACT COVID-19 Care@Home Program** means the Care@Home Program managed by the Division of Medicine at Canberra Health Services.

32. **Clearance of a person by a person** under paragraph 4, means when the **public health officer** or a staff member of the **ACT COVID-19 Care@Home Program** considers it is safe for the person in self-isolation to stop complying with the relevant requirements for self-isolation under this Direction.


34. **COVID-19 Omicron** means the COVID-19 variant B.1.1.529 (Omicron).

35. **COVID-19 test** is defined in paragraph 8.

36. **Designated premises** means:
   a. the person’s usual place of residence or other premises that is suitable for the purposes of self-isolation or quarantine; or
   b. if the person is not normally a resident of the Australian Capital Territory, a hotel or other premises that has been approved in writing by the Chief Health Officer or an **authorised person** for the purposes of self-isolation or quarantine; or
   c. a room allocated on check-in at any hotel, serviced-apartment, or similar accommodation approved in writing by the Chief Health Officer or an **authorised person** for the purposes of self-isolation or quarantine; or
   d. if the Chief Health Officer, in writing, states another place—the stated place.

37. **Essential support services** means support without which a person would experience a deterioration in health or wellbeing, including assistance with, or provision of, the following:
   a. personal care;
   b. meal preparation
   c. exercise or physiotherapy;
   d. other critical support.

   **Note**: People requiring assistance or support for COVID-19 testing purposes are covered under this definition and provision of medical or other critical supports.

38. **Household** means people who reside at the same residential premises and were present in the household during the **infectious period** of the person diagnosed with COVID-19.
39. **Household contact** of a person diagnosed with COVID-19 means a person who is a member of the same **household** as the diagnosed person.

40. **Infectious period** means two days prior to symptom onset for the person diagnosed with COVID-19, or two days prior to receiving a positive diagnosis of COVID-19, whichever is earlier.

41. **Period of quarantine** for a person under Part 2 means the period applying to the person under paragraph 7.

42. **Period of self-isolation** for a person under Part 1 means the period applying to the person under paragraph 4.

43. **Public health officer** means a public health officer under the *Public Health Act 1997*.

44. **Recovered case** means a person who has previously been provided **clearance** from a COVID-19 diagnosis and no more than a six month period has elapsed since the date of clearance.

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**Dr Kerryn Coleman**  
Chief Health Officer  
13 January 2022

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**PENALTIES**  
Section 120 (4) of the *Public Health Act 1997* provides:

A person must not, without reasonable excuse, fail to comply with a direction under this section.

**Maximum Penalty:**  
In the case of a natural person, $8,000 (50 penalty units).
ATTACHMENT A

Risk Mitigation Advice for Diagnosed Persons

The risk mitigation advice outlined below applies to all persons who have been diagnosed with COVID-19, regardless of variant and vaccination status.

- A diagnosed person should tell social contacts with whom they have spent time that they have been diagnosed with COVID-19. You should tell the people you have spent time with in the 2 days before you started having symptoms or tested positive (whichever came first).
- A diagnosed person should tell their workplace (or educational setting if they are a student, including Early Learning Education Centres) that they have been diagnosed with COVID-19. The following advice should be provided:
  - Date of test; and
  - Date of symptom onset (if symptoms were present) OR infectious period
  - The day/s on which the person attended the workplace or educational setting.

In addition the following advice applies to a diagnosed person during days 8 to 10 after the date on which the positive test was collected (date of test equals day zero).

- Minimise movement in public spaces wherever possible and avoid mass community gatherings/events (eg music festivals) regardless of whether these are held indoors or outdoors.
- Wear a face mask when interacting with other people and in line with existing mask wearing requirements in place within the ACT.
- Practise physical distancing wherever possible and continue good hand and respiratory hygiene at all times.
- Avoid using public transport wherever possible and only use if essential. You should wear a face mask at all times, maintain appropriate physical distancing wherever possible, and practise good hand hygiene.
- Avoid visiting high risk settings (hospital, residential aged care facilities, supported independent living facilities, or correction and detention facilities and other residential accommodation facilities that support people who require frequent, close personal care and who are vulnerable to disease), unless for personal care or the individual is a resident in the setting.
  - Individuals can still access urgent medical care or aged or disability care services
  - Facilities may permit entry into a facility following risk assessment.
  - Individuals who work in these settings should contact their employer to obtain permission to return to work and should comply with any risk mitigation measures in place (which may include use of appropriate PPE and testing).
ATTACHMENT B

Risk Mitigation Advice for Household Contacts

The risk mitigation advice outlined below applies to all Household Contacts of a COVID-19 positive case, regardless of variant and applies during days 8 to 14 after the date of the first positive test in the household.

- Monitor for symptoms consistent with COVID-19 and if these develop undergo testing and isolate until a negative result is received.
- In addition to the testing requirements outlined in the Public Health Direction, it is strongly recommended that a further test for COVID-19 is undertaken on day 12 or day 13.
- Household contacts should minimise their movement in public spaces wherever possible and avoid mass community gatherings/events (eg music festivals) regardless of whether these are held indoors or outdoors.
- Household contacts should wear a face mask when interacting with other people and in line with existing mask wearing requirements in place within the ACT.
- Practise physical distancing wherever possible and continue good hand and respiratory hygiene at all times.
- Avoid using public transport wherever possible and only use if essential.
  - You may use public transport to attend a COVID-19 testing facility in accordance with the Public Health Direction if all other transport options have been exhausted. You should wear a face mask at all times, maintain appropriate physical distancing wherever possible, and practise good hand hygiene.
- Avoid visiting high risk settings (hospital, residential aged care facilities, supported independent living facilities, or correction and detention facilities and other residential accommodation facilities that support people who require frequent, close personal care and who are vulnerable to disease), unless for personal care or the individual is a resident in this setting.
  - Individuals can still access urgent medical care or aged or disability care services
  - Facilities may permit entry into a facility following risk assessment.
  - Individuals who work in these settings should contact their employer to obtain permission to return to work and should comply with any risk mitigation measures in place (including use of appropriate PPE and testing, which may involved regular rapid antigen testing).
- Keep good records of where they have been, including dates and times and use Check in CBR wherever it is required.