



Report Card on the COVID-19 National Plan in Australia Supplementary Report 6

Commissioned by People for Safe Vaccines
Presented by Sandy Barrett
Dated 20 May 2022

WHO WE ARE

People for Safe Vaccines is an **Australian not-for-profit committed to promoting vaccine safety and efficacy**, with a membership of **over 3,000 concerned Australians**, including parents of children at risk of injury and injured by certain provisionally registered goods indicated for prevention of Covid-19 on the Australian Register of Therapeutic Goods.

WHAT WE SEEK

Proper due diligence from the government on safe vaccines

True transparency and accountability

Freedom to choose your own medical interventions

Open public debate

OUR OBJECTIVE HERE

This is a further Supplementary Report to our previous reports, which can be found [here](#). The purpose of this supplementary report is to look at the overarching objectives of the Doherty Institute National Plan to transition Australia's National COVID-19 Response and provide a scorecard, using available official data sets.

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NATIONAL PLAN OBJECTIVES

On 3 August 2021, the Australian Government publicly released the 'Operation COVID SHIELD National COVID Vaccine Campaign Plan' and the Doherty Institute Modelling Report to advise on the National Plan to transition Australia's National COVID Response.

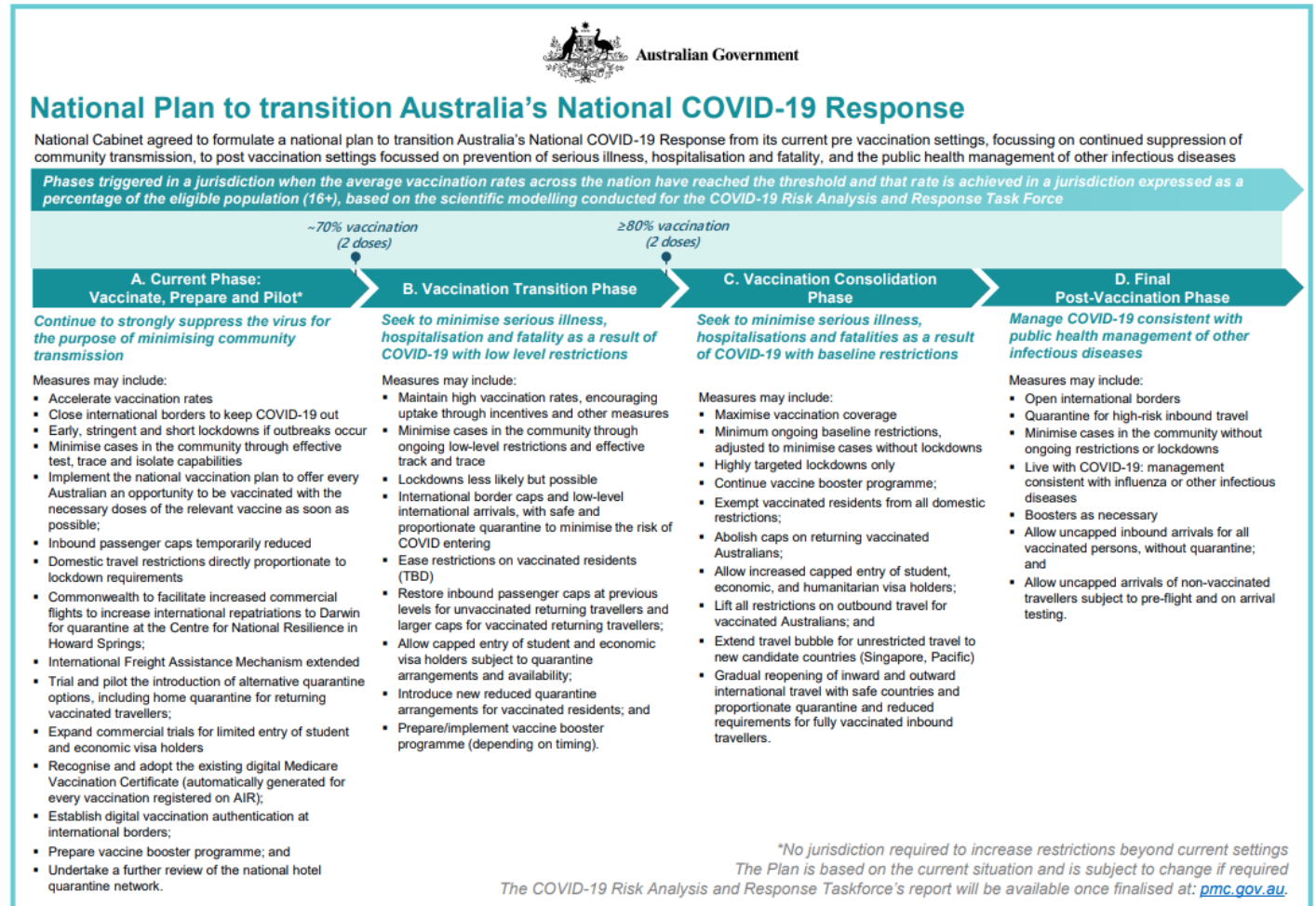
The National Plan used models of COVID-19 infection and vaccination to define a target level of vaccine coverage for transition from social restrictions like lockdowns.

Its key to suppressing the virus was vaccination combined with test, trace, isolate and quarantine measures.

It centred around mass vaccination as the only solution and failed to explore any possible early treatments that may also impact hospitalisation.

[The Doherty Report](#) (as revised dated 10 August 2021) became a benchmark for States and Territories in justifying their push towards vaccine mandates.

The National Plan assumed higher levels of vaccine coverage would reduce demands on hospitals and intensive care units sufficiently to ease the need for public health and safety measures in a transition to normality.













This report card:








- assesses the successes and failures of the National Plan criteria in each phase against quantitative real-world official data on vaccination doses, and on Covid-19 cases, hospitalisations, ICU admissions and deaths, and
- looks at the stringency measures, namely test, trace, isolate, mask and quarantine, to determine whether stringency measures worked, or whether they only delayed transmission.











The Report centres around Transmission Potential (TP), which aims to reduce the reproductive rate (RR) by using a combination of vaccination and social measures. TP and RR both represent the average number of new infections caused by a single infected individual. If the TP or RR is greater than 1, the infection can spread in the population. If it is below 1, the number of cases occurring in the population will gradually decrease to zero.



The Report claims that "*Vaccination reduces population level susceptibility to infection, and ongoing spread from immunised infected individuals, thereby reducing TP*". (Page 6)




APPRAISAL

Phase A. Vaccinate, Prepare and Pilot (<i>estimated 1 Jul 2021 - 19 Oct 2021</i>) Continue to strongly suppress the virus for the purpose of minimising community transmission		
<i>Measures</i>	<i>Performance</i>	<i>Score</i>
Accelerate vaccination rates	Vaccination rates were accelerated as Australians were encouraged by being bombarded with media messaging as well as financially incentivised to vaccinate and to overcome hesitancy, vaccine mandates were introduced to try and force rates up, which contributed significantly to accelerating vaccination rates	
Close international borders	International borders were closed end March 2020	
Early, stringent, and short lockdowns if outbreaks occur	Extreme stringency measures had already been implemented in Victoria prior to the commencement of National Plan. Other States and Territories followed suit at various intervals	
Minimise cases in the community through effective test, trace, and isolate capabilities	Compared to the rate of transmission in 2022, the low prevalence of cases during Phase A (between July and Sep 2021) gave the impression that these measures were effective	
Implement national vaccination plan to offer every Australian an opportunity to be vaccinated with the necessary doses of the relevant vaccine as soon as possible	TGA fast-tracked provisional approvals of vaccines and the first vaccine was administered 22 Feb 2021	
Inbound passenger caps temporarily reduced	The office of the Prime Minister and the National Cabinet announced a temporary 50% reduction to all international passenger (inbound) arrivals applying to all major Australian ports starting 14 Jul 2021, held until 31 Aug 2021, then further extending it until the end of Oct 2021	
Domestic travel restrictions directly proportionate to lockdown requirements	Various States and Territories implemented border restrictions at different times during different outbreaks	
Commonwealth to facilitate increased commercial flights to increase international repatriations to Darwin for quarantine at the Centre for National Resilience in Howard Springs	The Commonwealth did technically increase international repatriations; however, many Australians were severely impacted in their repatriation efforts by being forced to pay their own way home paying for exorbitant flights, then hotel quarantine costs, due to long wait times for Commonwealth assisted repatriation. Some remained stranded	
International Freight Assistance Mechanism extended	On 27 Aug 2021 the IFAM was further extended, until 30 June 2022, with an operational tail to the end of July 2022	
Trial and pilot the introduction of alternative quarantine options, including home quarantine for returning vaccinated travellers	Billions of tax-payer dollars were spent on building quarantine facilities in various States. Home quarantine for returning vaccinated travellers did not occur until Phase D	

Expand commercial trials for limited entry of student and economic visa holders	Changes were made to help temporary visa holders who may be stood down or lose work hours because of the coronavirus, to ensure that most temporary visa holders with work rights would be able to access their Australian superannuation to help support themselves during the crisis. This scheme was set to six months and temporary visa holders were strongly encouraged to return home. Students were encouraged to rely on family support, part-time work where available and their own savings to sustain themselves in Australia. As part of their visa application, international students have had to demonstrate that they can support themselves completely in their first year. Students who had been here longer than 12 months who found themselves in financial hardship would be able to access their superannuation	
Recognise and adopt the existing digital Medicare Vaccination Certificate (automatically generated for every vaccination registered on AIR)	Automatically generated digital vaccine certificates available on the Express Plus Medicare app became available from 13 Jul 2021 for Australians fully vaccinated against COVID-19 for proof of vaccination	
Establish digital vaccination authentication at international borders	On 19 Oct 2021, International COVID-19 Vaccine Certificate was made available for Australian passport holders and visa holders with a QR code which could be downloaded from the MyGov website or Medicare Express app	
Prepare vaccine booster programme	18 Nov 2021, the booster rollout officially commenced. As at this date 75% of the eligible population was fully vaccinated.	
Undertake a further review of the national hotel quarantine network	23 Jul 2021, National Cabinet commissioned a second review of the national hotel quarantine network. Due to lockdown restrictions, the review team could not conduct site inspections. Instead, the review is based on documentation provided by all states. Supplementing this desktop review, interviews were conducted via videoconferences with representatives from all states	
<p>Phase B. Vaccination Transition Phase (70% vaccination – 2 doses) (estimated 20 Oct 2021 – 5 Nov 2021) Seek to minimise serious illness, hospitalisation and fatality as a result of COVID-19 with low level restrictions</p>		
<i>Measures</i>	<i>Performance</i>	<i>Score</i>
Maintain high vaccination rates, encouraging uptake through incentives and other measures	Australians were encouraged by being bombarded with media messaging as well as financially incentivised to vaccinate and to overcome hesitancy, vaccine mandates were introduced as the 'other measure' to try and force rates up, which contributed significantly to achieving and maintaining high vaccination rates.	
Minimise cases in the community through ongoing low-level restrictions and effective track and trace	Until 17 Dec 2021, the rolling 7-day average daily new confirmed cases per million, remained below 100. Exactly one month prior, on 17 Nov 2021, Australia reached 70% of its total population being fully vaccinated.	

	By 13 Jan 2022 this rate peaked at 4235.06; 2768-times higher than at commencement of the National Plan. As a result, strict stringency measures were reintroduced	
Lockdowns less likely but possible	During this time, strict lockdowns applied across the country for extended periods despite having exceeded 70% fully vaccinated in the entire population. Lockdown days in Melbourne was 263, Greater Sydney 159, Brisbane 67, ACT 114 and Perth 61	
International border caps and low-level international arrivals, with safe and proportionate quarantine to minimise the risk of COVID entering	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Ease restrictions on vaccinated residents	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Restore inbound passenger caps at previous levels for unvaccinated returning travellers and larger caps for vaccinated returning travellers	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Allow capped entry of student and economic visa holders subject to quarantine arrangements and availability	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Introduce new reduced quarantine arrangements for vaccinated residents	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Prepare/implement vaccine booster programme	18 Nov 2021, the booster rollout officially commenced. As at this date 75% of the eligible population was fully vaccinated and the rolling 7-day average daily new confirmed cases per million was 47.51	
Phase C. Vaccination Consolidation (>80% vaccination - 2 doses) (estimated 6 Nov 2021 - Present) Seek to minimise serious illness, hospitalisations and fatalities as a result of COVID-19 with baseline restrictions		
Measures	Performance	Score
Maximum vaccination coverage	By 14 Dec 2021, 80% of the eligible population were fully vaccinated; meaning they received all doses prescribed by the initial vaccination protocol and reached 85% on 6 Mar 2022	
Minimum ongoing baseline restrictions, adjusted to minimise cases without lockdowns	On 14 Dec 2021, when we reached 80% fully vaccinated, the rolling 7-average daily new confirmed cases per million was 73.61 By 13 Jan 2022 this rate peaked at 4235.06; 2768-times higher than at commencement of the National Plan. As a result, strict stringency measures were reintroduced	
Highly targeted lockdowns only	During this time, strict lockdowns applied across the country despite having exceeded 80% fully vaccinated in the entire population	

Continue vaccine booster programme	Australians continue to be encouraged through ongoing media messaging to get their booster and to overcome hesitancy, remaining vaccine mandates continue to force rates up, which contribute significantly to maintaining high vaccination booster rates	
Exempt vaccinated residents from all domestic restrictions	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Abolish caps on returning vaccinated Australians	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Allow increased capped entry of student, economic and humanitarian visa holders	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Lift all restrictions on outbound travel for vaccinated Australians	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Extend travel bubble for unrestricted travel to new candidate countries (Singapore, Pacific)	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Gradual reopening of inward and outward international travel with safe countries and proportionate quarantine and reduced requirements for fully vaccinated inbound travellers	This did not occur until Phase D, after fully vaccinated rates exceeded 84% of eligible Australians	
Phase D. Final Post-Vaccination Phase (No timeline provided) Manage COVID-19 consistent with public health management of other infectious diseases		
Measures	Performance	Score
Open international borders	From 21 Feb 2022 fully vaccinated visa holders, including tourists, were allowed to travel to Australia without an exemption. WA capped arrivals at 530 per week and must undergo quarantine and testing	
Quarantine for high-risk inbound travel	All inbound travellers must declare their vaccination status to enter. Unvaccinated inbound travellers may be required to quarantine on arrival in Australia at their own expense and be subject to passenger gaps. A Digital Passenger Declaration is required before boarding a flight and a Maritime Travel Declaration required when arriving on a cruise vessel. Pre-departure testing is not required	
Minimise cases in the community without ongoing restrictions or lockdowns	As at 13 Jan 2022, the seven-day rolling average per million people peaked at 4,235.06 as compared with 1.53, or 2768-times higher transmission than when the National Plan commenced on 2 Jul 2021	
Live with COVID-19; management consistent with influenza or other infectious diseases	Isolation rules are still in place, impacting work attendance rates which is causing significant supply-chain issues and rising inflation. Vaccine mandates persist in many States, forcing skilled worker shortages and unemployment	

Boosters as necessary	Vaccination is still being imposed on a significant number of workers due to mandates, including ongoing promotion of boosters to the public	
Allow uncapped inbound arrivals for all vaccinated persons, without quarantine	From 21 Feb 2022 fully vaccinated visa holders, including tourists, were allowed to travel to Australia without an exemption. WA capped arrivals at 530 per week and must undergo quarantine and testing	
Allow uncapped arrivals of non-vaccinated travellers subject to pre-flight and on arrival testing	Unvaccinated traveller caps and pre-flight testing may be governed by State and Territory restrictions	

OVERALL PERFORMANCE SCORE

Because the National Plan claimed that "*vaccination reduces population level susceptibility to infection, and ongoing spread*", it relied on stringency measures of test, trace, mask, isolate and quarantine to "minimise serious illness, hospitalisation and fatality", until high rates of vaccination were achieved. Therefore, to rate the overall performance we must look at the changes in transmission as well as cases with clinical severity requiring hospitalisation, ICU admission and deaths.

The following table summarises the key findings around COVID-19 transmission and clinical severity in Australia. The figures are current to 18/5/22.

Note: yearly comparisons are based on the calculated daily averages.

COVID-19 Positive	2020	2021	2022	2022 comparisons	
				2020	2021
Cases	29,756	371,746	6,759,554	↑ x 570.7	↑ x 45.72
Hospitalisations	37,716	157,532	421,880	↑ x 29.82	↑ x 7.19
ICU Admissions	5,302	27,085	26,229	↑ x 13.18	↑ x 2.59
Deaths	909	1,330	5,687	↑ x 16.67	↑ x 11.36




Given the increased rates of transmission and clinical severity, especially deaths, including significant deaths in residential aged care, **the National Plan has failed in its overarching objective**. Its **critical failing is that it relied solely on high vaccination rates**, ignoring research and development of early treatments and prophylaxis.

The National Plan states "*Vaccination reduces population level susceptibility to infection, and ongoing spread from immunised infected individuals, thereby reducing (transmission potential) TP*", yet the **daily average deaths in 2022 is more than 16-times greater than pre-vaccination**.

Worse still, it appears that the **stringency measures implemented may have only delayed transmission**; meaning these restrictions, which have come with massive social and economic costs, may be without merit. Lockdowns and mandates are the cause of significant division, creating civil and societal problems and long-standing laws that protect human rights were cast aside to push this failed National Plan.

Furthermore, the **spike in hospitalisations and ICU admissions is creating the burden on hospitals** that the National Plan was supposed to mitigate.

In our [earlier reports](#) we made the observation that **transmission and clinical severity correlate to the rollout of the booster** doses, and the Australian Bureau of Statistics [Provisional Mortality Statistics](#) of deaths data show **deaths are 22% more than the historical average** and **COVID-19 is now the second most common cause of death**, which is unmistakably proof that the National Plan has been an abject failure.

OVERALL OBJECTIVE SCORES		
Objectives	Outcomes	Score
Reduce population level susceptibility to infection, and ongoing spread through vaccination	Susceptibility to infection has risen significantly despite 89.4% of the eligible population as of 18 May 2022 being double-dosed. Based on daily averages of new cases, new infections are >570-times higher than 2020 and >45-times higher than 2021	
Use stringency measures of test, trace, mask, isolate and quarantine to minimise serious illness, hospitalisation and fatality	The official line is that physical distancing and hygiene measures, put in place to slow COVID-19 transmission, have likely slowed the spread of COVID-19 and other infectious diseases including influenza. Now that borders have reopened, people are moving about and returning from overseas, and this is causing an increase in the rate of COVID-19 transmission. Because the vaccines have failed to reduce susceptibility to infection, stringency measures have only delayed it.	
Protect the sick and elderly	An analysis of government data , conducted by the United Workers Union and confirmed by the Guardian , shows that Covid deaths in aged care facilities are now occurring at rates unseen in the first two years of the pandemic	

The overarching goal of the National Plan was to protect all people by preventing serious illness and death. If that were true, COVID-19 would not be the second most common cause of death in January 2022. This proves that the vaccines have played a leading role in exacerbating clinical severity, clearly indicating the vaccines do not give protection.

With all-cause mortality increasing by 22% on historical averages and COVID-19 becoming the second most common cause of death despite significant rates of vaccination, we conclude that the purported **COVID-19 vaccines used in Australia are ineffective**, and the ABS mortality report verifies our assumptions that these **vaccines are creating increased susceptibility to COVID-19 infection, serious illness and death**.

Consequently, it makes no sense to force people to be vaccinated and we believe the rollout should be halted immediately and a thorough independent and transparent investigation be done.

SUPPORT OUR WORK

BECOME A MEMBER

People for Safe Vaccines has been providing ongoing research, education and lobbying efforts to bring about proper due diligence from government on safe vaccines including transparency and accountability. If you would like to support our ongoing work, please become a member today.

<https://www.peopleforsafevaccines.org/plans-pricing>

