



Australian Citizens Party

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MEDIA RELEASE

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Mobilise the nation to defeat public health emergency! Marshal all necessary resources for a massive expansion of healthcare infrastructure.

Australia's national and state governments are acting to source urgently needed medical devices and expand domestic production of personal protective equipment, but will it be too little too late? Combined with a short-term lockdown requiring a temporary hibernation of the economy (more on that from the Citizens Party soon), and a massive expansion of testing to slow, isolate, hunt and kill the virus, Australia needs an unprecedented mobilisation of resources into the public healthcare system to save ourselves and assist in the global fight.

To back up heroic efforts within the hospital system, the federal government should immediately declare a national works program, putting people back to work building new hospitals and producing medical equipment. A wartime transformation of our economy can be funded with credit issued by the government, by reviving the original Commonwealth Bank which got us through World War II, with the Citizens Party's Commonwealth National Credit Bank Bill.

Overseas rates of infection, hospitalisation and number of cases requiring intensive care lead to estimates that Australia could require anywhere from 6,000 to 50,000 Intensive Care Unit (ICU) beds, which include ventilator support. According to the [2018 report](#) of the Australian and New Zealand Intensive Care Society (ANZICS) we have 2,229 intensive care beds, many of which are already occupied. In question time in parliament on 23 March, Australian Health Minister Greg Hunt announced that the government has ordered 1,000 new ventilators, the most critical component required to keep serious COVID-19 patients alive. Hunt reported that four US firms have stepped in to help supply the machines to Australia: ResMed, GE, Philips and Medtronic. Global demand for ventilators is soaring, however, and Australia cannot once again leave all its eggs in one basket.

The Australian healthcare system has been stripped bare by thirty years of neoliberal economic policy. Economic rationalism and budget cuts have left us with around 3.8 hospital beds per thousand population, down from 8.1 in 1977. The countries which have avoided high death rates from the raging COVID-19 pandemic, such as Japan and South Korea, have more than 13 and 12 beds per thousand respectively. Nations such as Italy, the United Kingdom and the USA, on the other hand, have just three and fewer beds per thousand.

Immediately needed to save many lives, including those of our front-line healthcare workers, is an emergency program to address the following shortages:

Hospital beds: We urgently need to expand Australia's hospital bed capacity. We can re-nationalise private hospitals as Spain has just done, or temporarily co-opt them. More hospitals must be built, as was done in Wuhan, China, and now in Italy where one thousand workers are working in three daily shifts to build a mega-hospital on the site of the Milan Trade Fair. Current hospitals can be expanded, and military field hospitals can be set up. As in other countries, empty hotels can also be utilised.

Ventilators: Serious cases of COVID-19 infection require breathing assistance, with extreme cases requiring intubated ventilation (via a pipe inserted into the trachea). ANZICS has suggested we double our capacity to around 4,000 ventilators. The *Sydney Morning Herald* reported on 14 March that the Queensland health department (which has up to 500 ventilators) has acquired an extra 110 units and is preparing to double intensive care capacity. The WA government, with just over 300 ventilators available, has ordered a further 101. Procurement teams everywhere are working on sourcing more.

On 19 March the [Victorian government announced](#) an extra \$437 million for new beds and equipment, including for ICU, containment and workforce continuity. This will include 269 new beds and \$107 million for new equipment including 4,000 high-flow oxygen therapy units, and a dramatic expansion of contact tracing teams. Last year the Andrews government initiated an Engineering Infrastructure and Medical Equipment Replacement Program which included ventilators, funded to the tune of \$60 million from the 2019-20 State Budget. New machines are currently in transit. *The Age* reported 23 March that Victoria currently has around 1,000 ventilators, and has placed an urgent order for around 2,000 more.

The Andrews government has had an orientation to improving physical infrastructure, from eradicating level crossings to signing onto China's Belt and Road Initiative (BRI). [The Andrews government showed solidarity with China](#) after the virus broke out, and it is likely that spirit would be reciprocated. Premier Daniel Andrews could initiate a request for a shipment of Chinese-made ventilators, component parts, or other equipment difficult to make in Australia. With China emerging from its lockdown, it has ramped up production, including of ventilators, recently sending 1,000 units to Italy, part of an order for nearly 10,000 medical devices. (Note also, that Russia as of Monday had sent fourteen cargo planes with emergency aid to Italy.)

Most ventilators are produced in the USA, followed by Europe and then Asia, and now orders from European nations are pouring into Shenzhen-based companies, in China's southern Guangdong province. Moves to increase production in the USA and UK will involve auto manufacturers, by adapting or retooling existing production lines. 3D printers, already used for many auto parts, will be used to make parts for ventilators. UK Prime Minister Boris Johnson met with 60 British industrial firms to map out a program to produce 20,000 ventilators within a couple of weeks. US President Donald Trump has activated the 1950 national *Defence Production Act* to step up production of ventilators.

Revive manufacturing!

The shutdown of Australia's manufacturing sector means there is no quick turnaround for production of vital medical machinery such as ventilators, but we can develop the capability on a wartime footing. In addition to rounding up all available supplies from stockpiles, [medical suppliers](#) and the Australian Defence Force, we can mobilise manufacturers to begin a crash program for production, just as Australian industrialist Essington Lewis did during World War II, producing all kinds of materiel, including aircraft, for which we previously had no capability.

Labor MP Bill Shorten called for a "wartime-like mobilisation" to make the life-saving machines, telling the parliament yesterday that he has been inundated with offers from manufacturers saying: "We have got the people. We have the skills. We have the desire, the ingenuity and the knowledge to build equipment." Minister for Industry, Science and Technology Karen Andrews reported that the government is working with manufacturers to explore ventilator production.

A young innovator in Ireland, Colin Keogh, and associate Gui Cavalcanti, working with a group of 300 experts, launched a [collaborative venture](#) to produce a design for a no-frills open-source ventilator using 3D-printed parts, suitable for mass production. The design is set to be approved by Irish health officials very soon. Italian entrepreneurs have used 3D printers to produce valves for ventilators for US\$1 each, normally priced at US\$11,000. They have already saved lives, but the medical company which owns the patents refused to provide the technical specifications for production and is threatening to sue for patent infringement. A [Canadian doctor](#), meanwhile, figured out how to turn one ventilator into nine by rigging up an adaptor, which means one device can work effectively for several patients with similar requirements. Now is not the time for red tape or "intellectual property" bastardry, but for maximum ingenuity and innovation!

Testing and other equipment: The same measures must be taken to secure the supply of virus test kits, personal protective equipment, hand sanitiser and other supplies such as medical-grade oxygen. Testing will continue to be critical as seen in the Italian case of Vò, a town in the Veneto region which has been hit hard by the pandemic. Testing all 3,300 citizens repeatedly, followed by isolation and contact tracing, has stopped the spread. China has also ramped up production of infrared thermometers, fabric for masks, other PPE products and testing kits. China is supplying many South East Asian nations, as well as filling European orders. But right here at home we have biotech giant CSL, the world's biggest manufacturer of influenza vaccines. Formerly Commonwealth Serum Laboratories until it was privatised in 1994, CSL as a public institution for 78 years developed and/or mass-produced vaccines for tetanus, diphtheria, whooping cough and polio. Now's not the time to run essential healthcare as a business for megaprofits—it should be re-nationalised immediately and deployed to mass-produce high quality, reliable COVID-19 test kits, among other things.

Medical staff: Not only does our "just in time" healthcare system lack the beds required to face the current crisis, it lacks enough trained staff to manage critical patients and life-saving equipment. Hospitals are working overtime to train more staff in ICU procedures. Defence medics could be deployed and war-style training programs initiated, and if necessary we could also request experts from China who have experience from their battle: China has sent 300 medical workers to Italy, in addition to a team of experts.

At the same time, security of food supply, power supply, sanitation, waste collection and cleaning services must be guaranteed by the government. The Victorian government has launched a Working for Victoria Fund, announcing on Facebook that, "If you've lost shifts or lost your job: We need you, working for Victoria". The initiative includes deploying people to ensure food delivery, to clean public transport and help in the community.

In-depth logistics will be required to coordinate the resources and skills required to address this emergency in the necessary time frame. Make the plans now! Our hospitals are bracing for impact and we must buy them time with effective lockdowns while arming them with all necessary provisions. We wouldn't send our soldiers to war without weapons and ammunition, neither can we send our medical staff to the front lines so exposed.

Please share this release widely, with friends and family, your email address book, and your MPs and Senators, to ensure the nation's leaders take notice of these ideas. They have presided over an economic system that has gutted our healthcare infrastructure and left us vulnerable to pandemics like this—don't assume they know how to think through this crisis.