

COVID-19 WEEKLY SURVEILLANCE IN NSW

EPIDEMIOLOGICAL WEEK 13, ENDING 3 APRIL 2021

Published 9 April 2021

Summary for the week ending 3 April 2021

- There was one locally acquired case of COVID-19 reported in the week ending 3 April. The case attended a venue in Byron Bay at the same time as an infectious case from Brisbane (see [Brisbane COVID-19 clusters](#)). NSW Health had initiated extensive contact tracing and containment measures in response to the report that a Brisbane case had attended Byron Bay venues. No other transmission has been identified to date.
- The number of cases reported in overseas returned travellers was the same as the previous week (18 cases).
- Eight of the 18 (44%) returned travellers reported in the week ending 3 April found to have a SARS-CoV-2 variant of concern (VoC). Of the 511 returned travellers diagnosed with COVID-19 since 29 November 2020, 100 (20%) have been diagnosed with a VoC.
- Testing rates increased across all Local Health Districts compared to the previous week (up 47%). This was largely driven by a surge in testing in Northern NSW, following reports of six cases associated with the Queensland cluster attending multiple venues across Byron Bay over the weekend of March 26–28. There was also an increase in testing in other LHDs, particularly South Eastern Sydney and Northern Sydney, which correlated to a large number of contacts from the Northern NSW and Queensland venues of concern residing in those areas.
- The NSW Sewage Surveillance Program reported eight detections – taken from the Bondi, Lennox Head, and Malabar treatment plants, and the sewage networks at Paddington (within the Bondi catchment), Botany, Olympic Park, and Homebush (within the Malabar catchment). All detections were associated with known cases in returned travellers and the locally acquired case in Northern NSW.
- In the week ending 4 April, bronchiolitis presentations remain below the seasonal range for this time of year while gastroenteritis presentations increased sharply and were above the seasonal range for the first time since January 2020. This increase was largely driven by children aged 0-4 years of age.

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Section 1: How is the outbreak tracking in NSW?

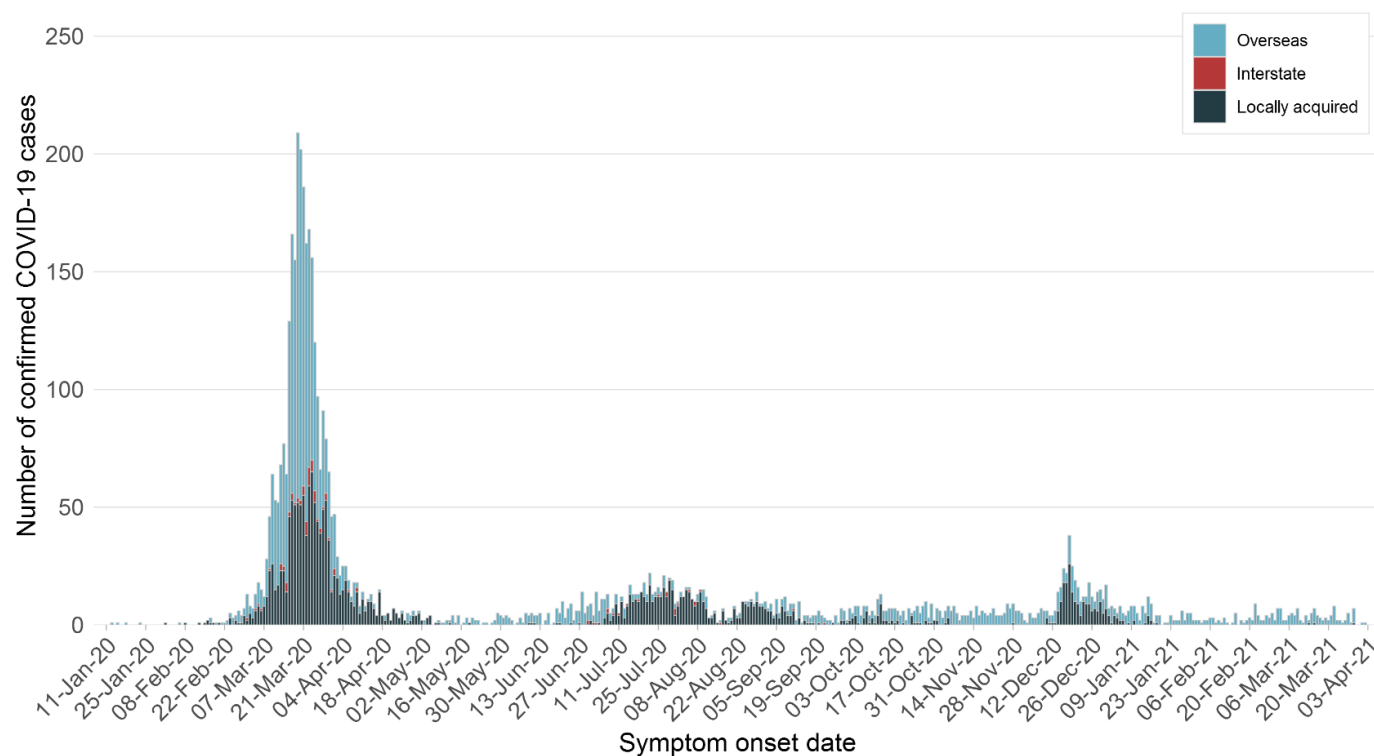
Table 1. COVID-19 cases and tests reported, NSW, from 25 January 2020 to 3 April 2021

	Week ending 03 Apr	Week ending 27 Mar	% change	Pandemic total
Number of cases	19	18	↑ 6%	5,111
Overseas acquired	18	18	0%	2,931
Interstate acquired	0	0	-	90
Locally acquired	1	0	-	2,090
No epidemiological links to other cases or clusters	0	0	-	450
Number of deaths	0	0	-	56
Number of tests	91,737	62,354	↑ 47%	5,418,437

Note: The case numbers reported for previous weeks is based on the most up to date information from public health investigations.

To understand how the outbreak is tracking we look at how many new cases are reported each day and the number of people being tested. Each bar in the graph below represents the number of new cases based on the date of symptom onset.

Figure 1. COVID-19 cases by likely infection source and illness onset, NSW, week ending 3 April 2021



The date of the first positive test is used for cases who did not report symptoms.

Interpretation: The majority of cases with a symptom onset in the last four weeks in NSW were overseas acquired (82/85, 97%). Of the three locally acquired cases, two acquired their infection from an overseas returned traveller and are associated with the hotel quarantine cluster, and one acquired their infection from an infectious Queensland resident who was visiting in Byron Bay, detected as part of contact tracing.

Section 2: Variants of Concern (VoC)

Like other viruses, the SARS-CoV-2 virus that causes COVID-19 acquires mutations over time. Some of these mutations occur in regions that are critical to virus function, such as the spike protein. The spike protein allows the virus to enter human cells, which is why it is the target of many COVID-19 vaccines and part of our own immune response to the virus. Global surveillance is done to monitor the prevalence of mutations in the SARS-CoV-2 virus, with particular focus on those occurring in the spike protein that may reduce vaccine effectiveness or enable re-infection. For more information on identified variants of concern (VoCs) and management see previous [COVID-19 weekly surveillance reports](#).

Since 29 November 2020 there have been:

- Three locally acquired COVID-19 cases infected with the B.1.1.7 variant of concern.
- 100 returned travellers diagnosed with a VoC. More than a quarter of these cases likely acquired their infection in Lebanon (28). The remaining cases likely acquired their infection in the United Kingdom (15), India (15), South Africa (8), the United Arab Emirates (6), USA (5), Pakistan (4), Bangladesh (4), Germany (3), and one case each in Canada, Finland, France, Jordan, Netherlands, Nigeria, Spain and Zambia. There are four cases where the likely country of acquisition was unable to be determined.

Table 2a. Overseas acquired COVID-19 cases by VoC and week reported, NSW, 29 November 2020 to 3 April 2021

	Week ending				29 Nov to 06 Mar	Total since 29 November
	03 Apr	27 Mar	20 March	13 March		
Total overseas acquired cases	18	18	25	28	422	511
Overseas cases with VoC	8	5	12	13	62	100
B.1.1.7	3	5	12	12	52	84
B.1.351	4				9	13
P.1	1			1	1	3
% overseas acquired cases with VoC	44%	28%	48%	46%	15%	20%

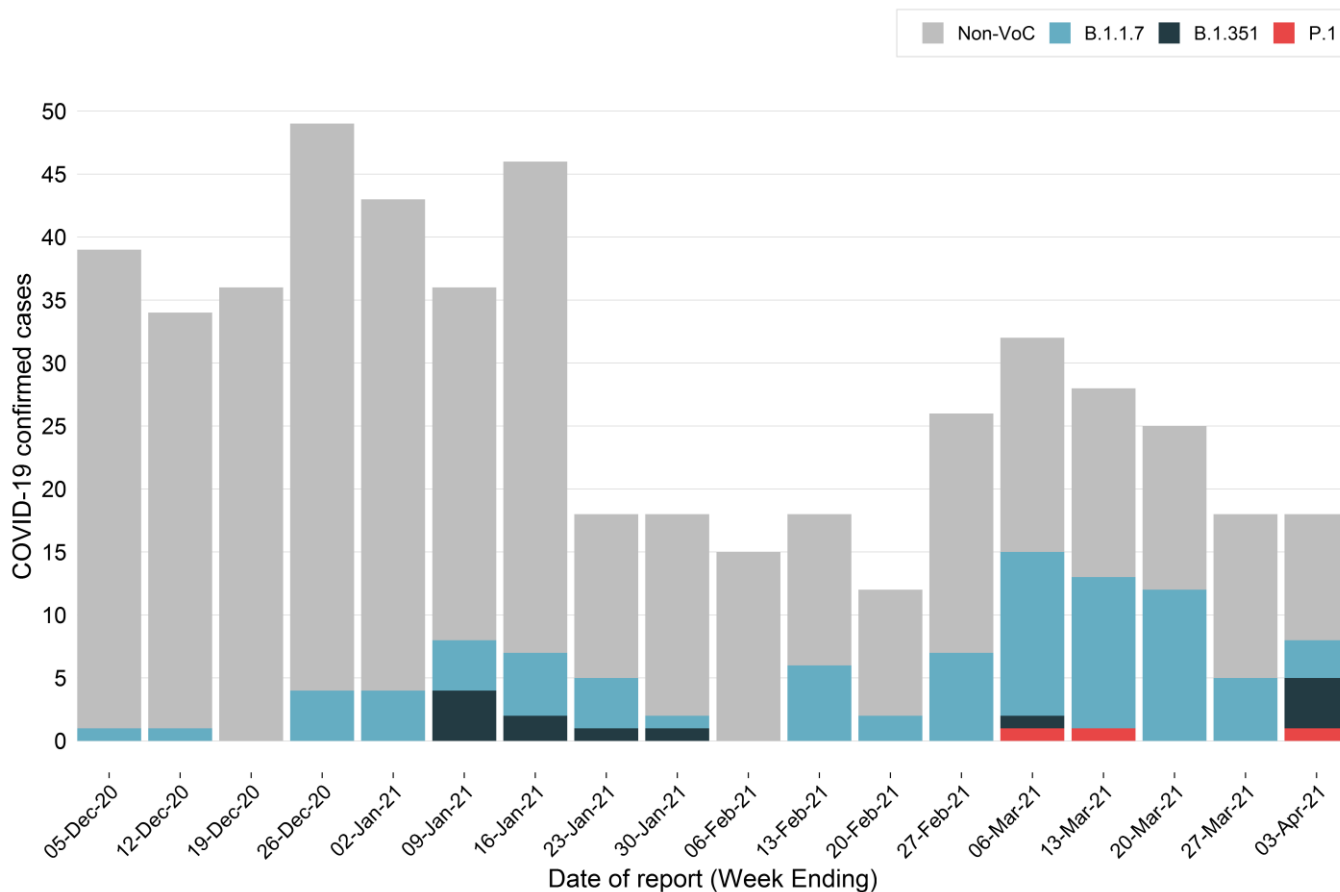
Interpretation: In the week ending 3 April, eight returned travellers were reported as having a COVID-19 VoC, which is 44% (8/18) of all cases reported this week.

Table 2b. Locally acquired COVID-19 cases by VoC and week reported, NSW, 29 November 2020 to 3 April 2021

	Week ending				29 Nov to 06 Mar	Total since 29 November
	03 Apr	27 Mar	20 March	13 March		
Total locally acquired cases	1	0	1	1	218	221
Local cases with VoC	1	0	1	1	0	3
B.1.1.7	1	0	1	1	0	3
% local cases with VoC	100%	0	100%	100%	0	1%

Interpretation: All locally acquired cases diagnosed with COVID-19 in the last four weeks were reported as having a COVID-19 VoC.

Figure 2. Confirmed overseas acquired COVID-19 cases by VoC type, NSW, 29 November to 3 April 2021



Interpretation: Since 29 November 2020 there have been 100 returned travellers diagnosed with a VoC. In the last four weeks 43% (38/89) of returned travellers in hotel quarantine have been identified as having COVID-19 Variants of Concern (B.1.1.7, B.1.351 and P1).

Section 3: Locally acquired COVID-19 transmission in NSW in the last four weeks

Information from cases who were diagnosed in the last four weeks is used to understand where COVID-19 is spreading in the community. This takes into account the incubation period and the time it takes for people to seek testing and for the laboratory to perform the test. This section summarises cases based on the date the case was reported to NSW Health.

Table 3. Locally acquired COVID-19 cases by LHD of residence and week reported, NSW, 7 March to 3 April 2021

Local Health District	Week ending				Total	Days since last case reported
	3 Apr	27 Mar	20 Mar	13 Mar		
Central Coast	0	0	0	0	0	95
Illawarra Shoalhaven	0	0	0	0	0	91
Nepean Blue Mountains	0	0	0	0	0	200
Northern Sydney	0	0	0	0	0	82
South Eastern Sydney	0	0	0	1	1	21
South Western Sydney	0	0	0	0	0	85
Sydney	0	0	0	0	0	82
Western Sydney	0	0	0	0	0	77
Far West	0	0	0	0	0	366
Hunter New England	0	0	0	0	0	240
Mid North Coast	0	0	0	0	0	347
Murrumbidgee	0	0	0	0	0	208
Northern NSW	1	0	0	0	1	4
Southern NSW	0	0	0	0	0	166
Western NSW	0	0	0	0	0	247
NSW*	1	0	1	1	3	4

*Includes people with a usual place of residence outside of NSW

Interpretation: There was one locally acquired case reported in the week ending 3 April. In the last four weeks there have been three locally acquired cases diagnosed with COVID-19. Two of those associated with the hotel quarantine cluster, and one associated with the Queensland cluster (see above).

Between 26 and 28 March a group of Queensland residents attended a social gathering at various venues in Byron Bay. On 29 March NSW Health was notified of positive COVID-19 detections in two the Queensland residents, who were later part of a cluster associated with transmission from a hospital in Queensland. Following extensive contact tracing, a confirmed case in a Northern NSW resident was notified on 31 March 2021, who had been tested after being identified as a close contact. Whole genome sequencing confirmed that the Northern NSW resident had same viral sequence as cases in the Queensland cluster, the B.1.1.7 lineage. To date, there has been no further transmission from this NSW case.

Section 4: Current COVID-19 clusters in NSW

Public health staff interview all new cases at the time of diagnosis to identify the likely source of their infection. Cases are also asked to report all the locations visited and people with whom they have been in contact within their infectious period (generally two days prior to symptom onset until the time of isolation and three days in high-risk settings). Close contacts are quarantined to limit the spread of infection to others and encouraged to seek testing.

Clusters are defined as a group of cases that are infected with the same virus (with the identical genetic sequence) that are linked epidemiologically to each other. This means that a direct source of infection can be identified for each case in the cluster, through contact with a known case where transmission likely occurred.

A case that shares the same virus (with an identical genetic sequence) is not counted as part of the cluster if an epidemiological link to another case in the cluster has not been found. Although the case must have been infected through contact with an infectious person in the cluster, that contact or that infectious person has not been found.

Cases in community settings

Previously reported active clusters with no new cases identified this week

Hotel quarantine cluster

On 14 March 2021 a security guard who worked at a quarantine hotel in Sydney CBD was diagnosed with COVID-19 following detection of a non-negative saliva sample done as part of routine quarantine worker surveillance. The result was subsequently confirmed by a nose and throat swab. Whole genome sequencing of the guard's virus sample indicated a match to an infection in a previously reported returned traveller (the source case) who returned from Lebanon on 5 March, who was on the same floor of the hotel where the case worked. The returned traveller and security guard both had the B.1.1.7 lineage.

On 16 March 2021 an additional case in a returned traveller was notified. This case was quarantining on the same floor of the quarantine hotel as the source case, in a room that was 20 metres away. This case reported no symptoms and was identified as part of the investigation into the transmission to the security guard. It was subsequently determined that the case had an identical viral sequence to the security guard and the source case. Following an extensive investigation and public health action to contain further transmission, no further cases were identified.

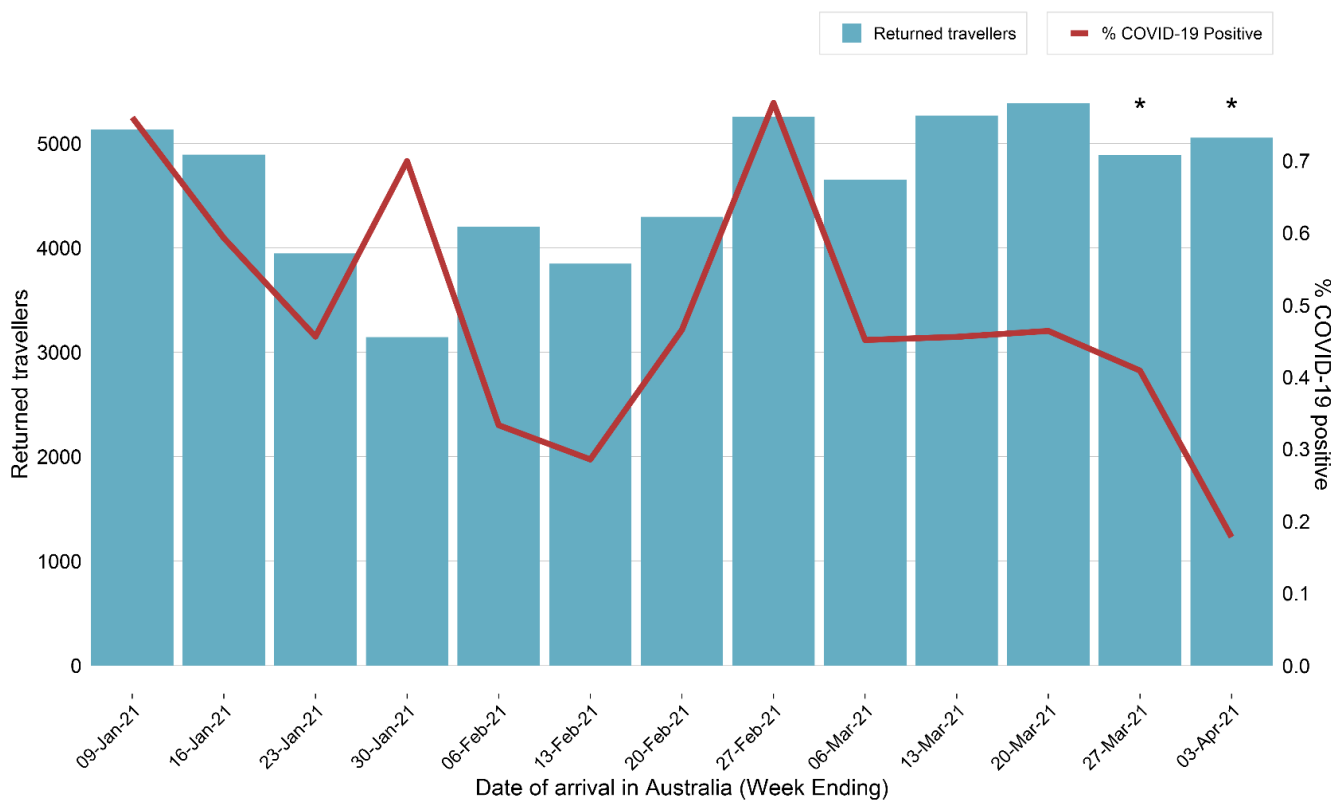
Section 5: COVID-19 in returned travellers

To limit the spread of COVID-19 into NSW, travel restrictions were introduced for all non-Australian citizens and permanent residents in mid-March 2020. In addition:

- From 29 March 2020 returned travellers have been quarantined in hotels for a 14-day period and travellers who develop symptoms are isolated until no longer infectious. Returned travellers are screened on entry and exit from quarantine and following release from quarantine.
- From 22 January 2021 (local time at departure point) all people travelling to Australia on flights must provide proof of a negative COVID-19 PCR test result at the time of check-in.

The figure below shows the number of returned travellers screened at Sydney International Airport since 2021. Returned travellers include international flight crew who are required to be tested before leaving the airport.

Figure 3. Returned travellers screened at Sydney International Airport by week of arrival and percent COVID-19 positive, NSW, 3 January 2021 to 3 April 2021



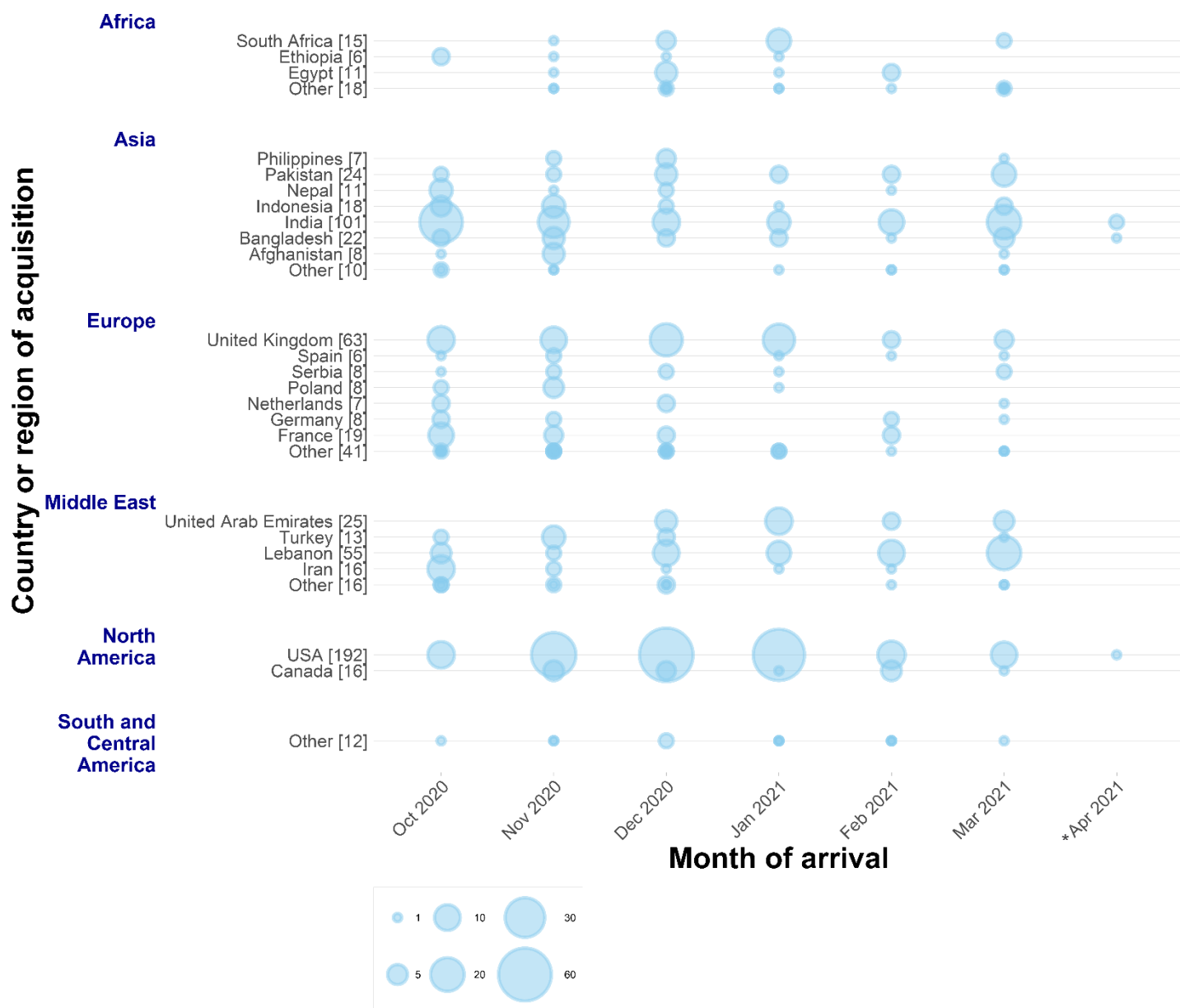
*Returned travellers entering Australia in the past 14 days are still in quarantine and may return a positive result prior to the end of their hotel quarantine period.

Interpretation: Since 3 January 2021, there has been on average 659 people screened on arrival through Sydney International Airport daily. In the last four weeks, 89 returned travellers have subsequently tested positive for COVID-19 while completing quarantine. The proportion of returned travellers who test positive for COVID-19 has remained very low, at less than 1%.

Country of acquisition of COVID-19 for overseas travellers

The following figure displays the countries and regions with the greatest numbers of international travellers diagnosed with COVID-19 in NSW.

Figure 4. Overseas acquired COVID-19 cases by country of acquisition and arrival month, NSW, 1 October 2020 to 3 April 2021



*The number of overseas acquired COVID-19 cases is incomplete for the current month

Interpretation: In March and April 2021, there has been an increase in detections of COVID-19 in travellers from India and Lebanon. The pattern seen in COVID-positive travellers over time reflects the evolving nature of the pandemic in those areas and the country of origin of returned travellers.

In the last four weeks, there have been 89 COVID-positive travellers who have arrived in NSW. The table below lists of countries of acquisition for these travellers.

Table 4. Top countries of acquisition for overseas acquired cases that have tested positive in the last four weeks, 7 March to 3 April 2021

Country of acquisition of COVID-19	Number (%) of cases in the last four weeks
India	22 (25%)
Lebanon	14 (16%)
Pakistan	7 (8%)
Bangladesh	5 (6%)
United States of America	5 (6%)
United Arab Emirates	4 (4%)
Papua New Guinea	3 (3%)
Indonesia	2 (2%)
South Africa	2 (2%)
Sudan	2 (2%)
Other	23 (26%)
Total	89

Interpretation: In the last four weeks, travellers returning from India accounted for the largest number of overseas acquired cases (22, 25%), followed by travellers returning from Lebanon (14, 16%) and Pakistan (7, 8%).

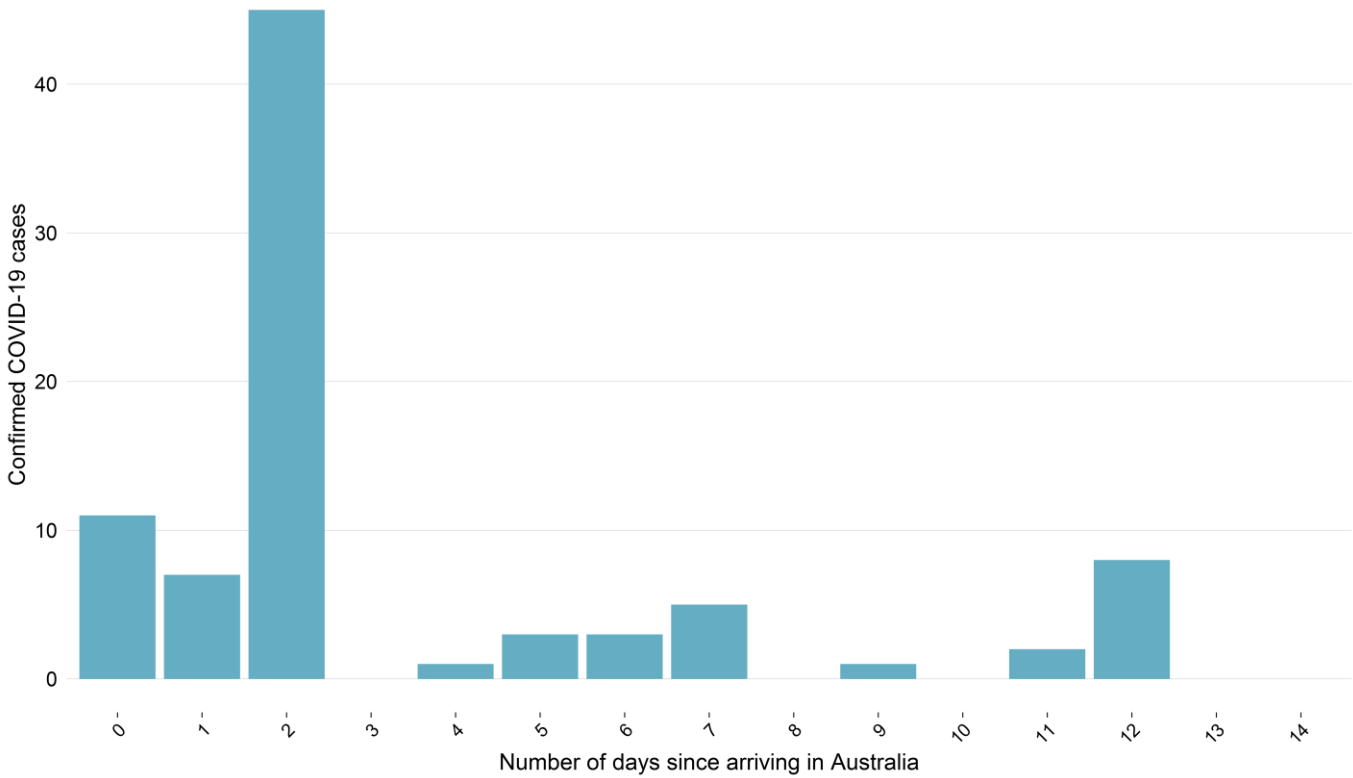
Hotel quarantine

The program of screening all overseas travellers after arrival in NSW commenced on 15 May 2020. From 30 June 2020, the program was extended to include screening of travellers on entry to quarantine, day 2 after arrival, and exit of quarantine. On 11 January 2021, exit screening of travellers was moved from day 10 to day 12 of quarantine. Testing is also carried out on individuals that became symptomatic in addition to these two tests, including those that are symptomatic on arrival.

Overseas returned travellers complete their quarantine in several facilities with majority of people in police-managed hotels or hotels managed by NSW Health (known as Special Health Accommodation). Since September 2020 international flight crew are also required to quarantine in police-managed hotels.

The figure below shows the number of overseas returned travellers within the quarantine program that have tested positive for COVID-19, by the number of days since they arrived in Australia.

Figure 5. Number of returned travellers in the last four weeks who tested positive for SARS-CoV-2 during the 14-day quarantine period, by days since arrival in NSW, 7 March to 3 April 2021



Interpretation: In the four weeks ending 3 April 2021, 71% of overseas acquired COVID-19 cases have tested positive within 2 days of arriving to Australia, with most people testing positive on day 2 screening.

Section 6: COVID-19 in specific populations

Healthcare workers

The following describes infections of COVID-19 in healthcare workers (HCWs). HCWs in this section includes roles such as doctor, nurse, orderly, paramedic, laboratory technician, pharmacist, administrative staff, cleaners, and other support staff. Public health units routinely undertake investigations of COVID-19 cases in healthcare workers to identify ongoing risks in healthcare settings.

There were no locally acquired cases of COVID-19 reported in HCWs in the week ending 3 April.

In total, there have been 48 cases of COVID-19 in health care workers since 1 August 2020. Of these, 25 HCWs were potentially infected in healthcare settings. A further nine cases were social or household contacts of a known case, eight were exposed in community settings, and for six cases the source of infection is unknown. Prior to August 2020, there were 206 cases identified in HCWs who had worked in a health facility in the 14 days prior to symptom onset or date of testing (see [COVID-19 in healthcare workers in NSW](#)).

Aboriginal people

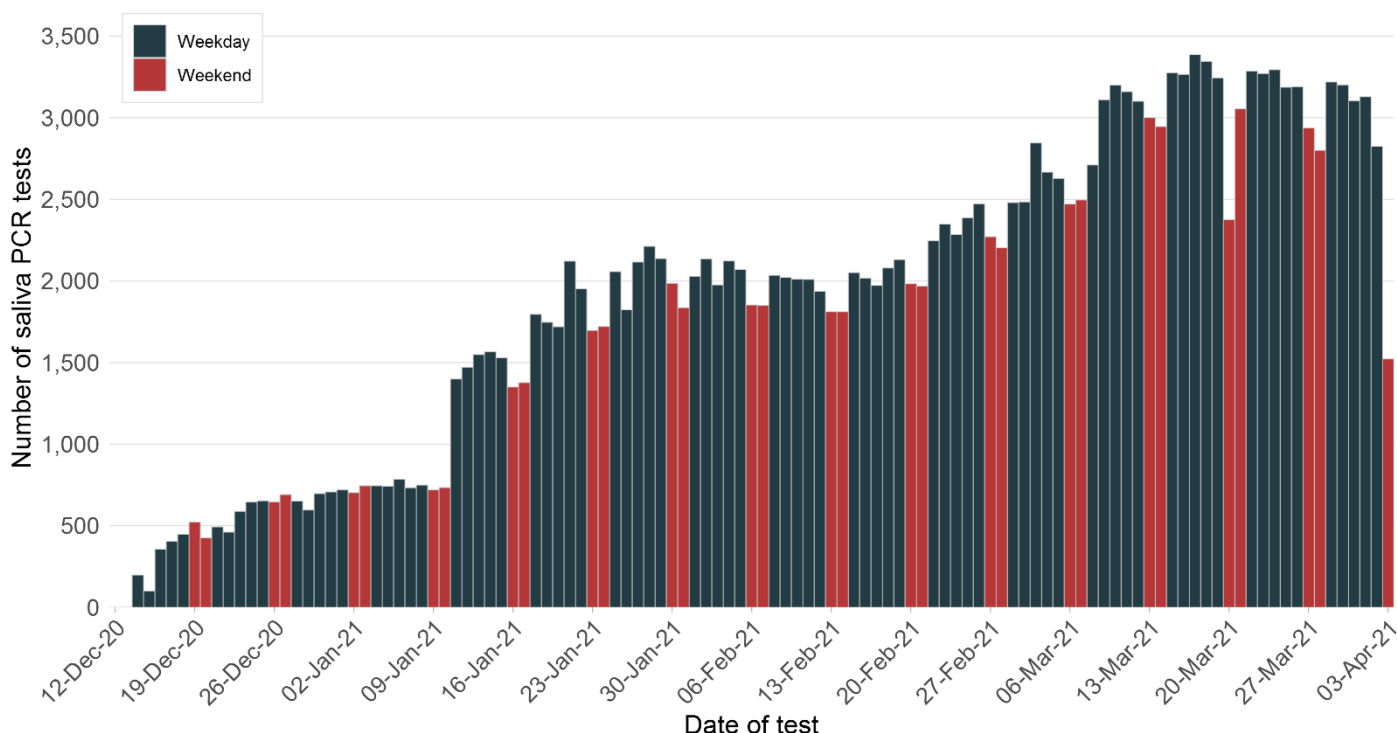
Aboriginal and Torres Strait Islander communities are recognised as a priority group due to key drivers of increased risk of transmission and severity of COVID-19 which include mobility, remoteness, barriers to access including institutional racism and mistrust of mainstream health services, crowded and inadequate housing, and burden of disease.

Since the beginning of the pandemic there have been 48 Aboriginal people been diagnosed with COVID-19, representing 1% of all cases in NSW.

Quarantine workers – Screening Program

As the number of COVID-19 cases rise across the world and more people return to Australia from overseas, increased numbers of COVID-19 cases are seen in returned overseas travellers in quarantine facilities. Routine screening of quarantine workers is implemented out of care and caution for staff members who work in NSW quarantine facilities. Screening involves a daily COVID-19 saliva PCR testing, which is painless and quick (see [NSW hotel quarantine worker surveillance and testing program](#)).

Figure 6. Daily numbers of saliva PCR test results reported for workers in quarantine facilities, NSW, 12 December 2020 to 3 April 2021



* The number of saliva PCR tests on 03 April 2021 is incomplete due to delays in reporting negative results.

Interpretation: Since screening of quarantine workers began in December 2020, a total of 209,423 saliva PCR tests have been conducted. The number of saliva PCR tests increased significantly on 11 January 2021, which corresponds to the expansion of the NSW quarantine hotel worker surveillance and testing program. One confirmed case of COVID-19 has been reported through saliva PCR testing, reported on 14 March 2021 (see above).

The daily number of saliva PCR tests is not included in the total PCR testing numbers reported.

Section 7: COVID-19 deaths

How many people have died as a result of COVID-19?

Since the start of the pandemic, 1.1% of cases (56 people) have died as a result of COVID-19, most of whom were 70 years of age or older, including 28 residents of aged care facilities with known COVID-19 outbreaks. Approximately 21% (12/56) of the deaths were in overseas acquired cases.

There were no deaths reported in the week ending 3 April.

Table 5. Deaths as a result of COVID-19, by age group, NSW, 2020 and 2021

Age group (years)	Number of deaths	Number of cases	Case fatality rate
0–4	0	119	0%
5–11	0	122	0%
12–17	0	163	0%
18–29	0	1,153	0%
30–49	0	1,663	0%
50–59	1	695	0.1%
60–69	4	644	0.6%
70–79	15	388	3.9%
80+	36	164	22.0%
Total	56	5,111	1.1%

Interpretation: Cases older than 80 years of age had both the highest number of deaths and the highest case fatality rate. No cases under 50 years of age have died as a result of COVID-19 in NSW.

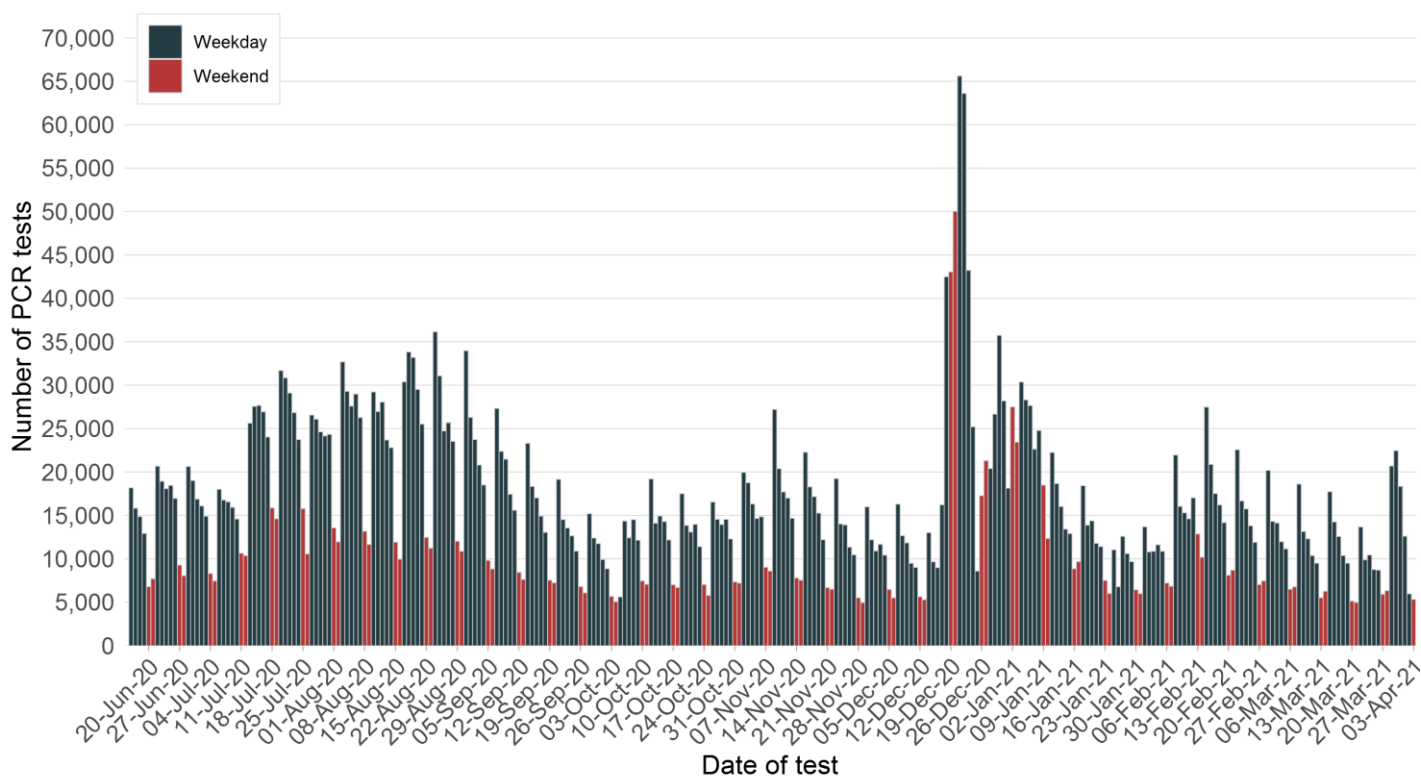
Section 8: COVID-19 testing in NSW

How much testing is happening?

The bars on the graph below show the number of tests by the date a person presented for the test.¹ While public health facilities are generally open seven days a week, there may be less demand and availability for testing through GPs and private collection centres on weekends and public holidays. This likely explains lower testing numbers on weekends.

The PCR testing numbers reported are for tests performed on nose and throat swabs. Saliva PCR tests are not included, these are reported in the “Quarantine workers – Screening Program” section on page 11.

Figure 7. Number of PCR tests per day, NSW, 20 June 2020 to 3 April 2021



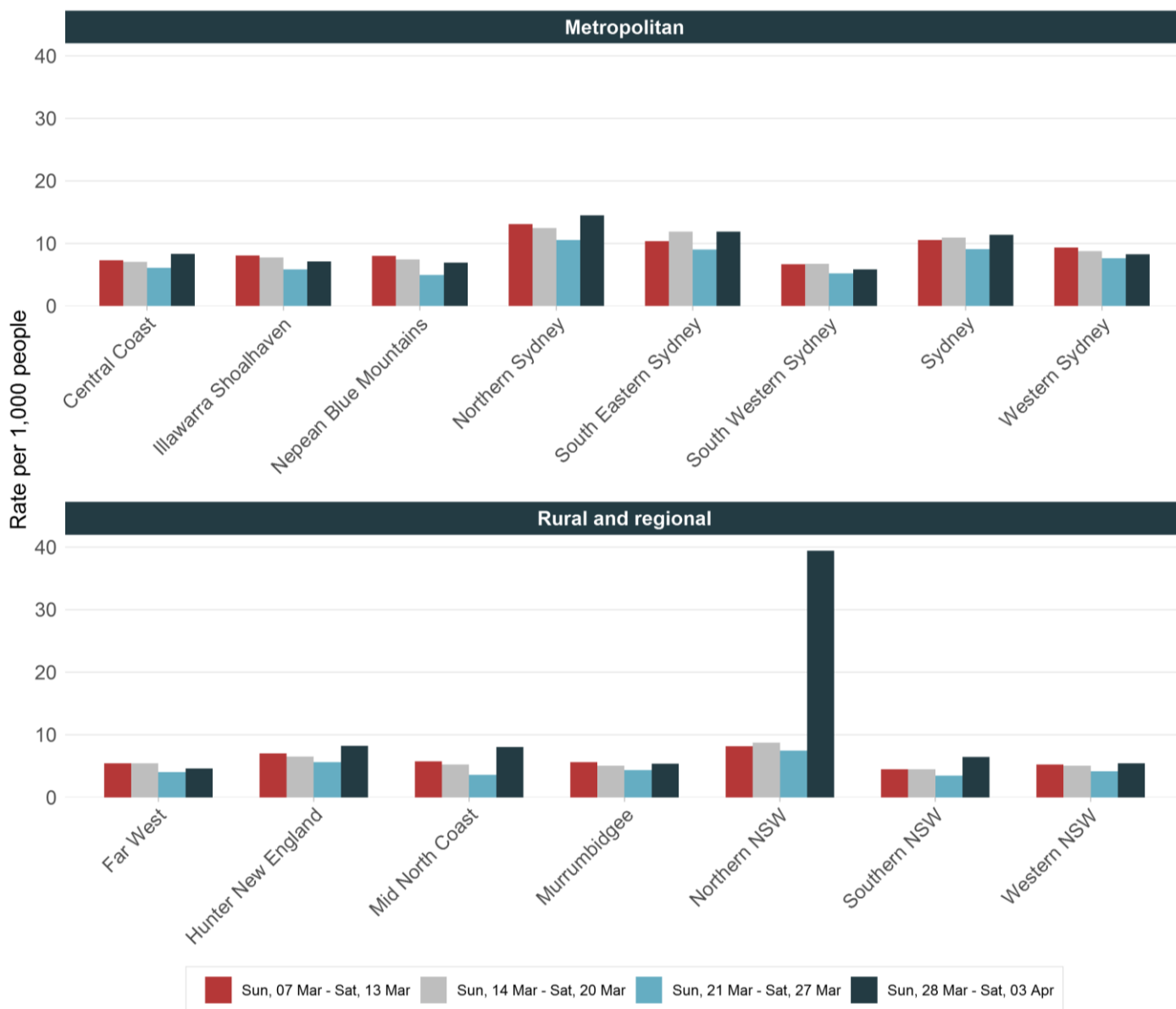
Includes SARS-CoV-2 PCR tests only and excludes repeat positive tests for an individual.

Interpretation: Testing numbers increased in the week ending 3 April (up 45%) compared to the previous week. The average daily testing rate was 1.6 per 1,000 people in NSW compared to the previous week of 1.1 per 1,000 people. This has been mostly driven by a surge in testing in Northern NSW following notification of several cases travelling to the Byron Bay area.

¹ The number of tests per day displayed below is different to the 24 hour increase in tests reported each day as there are delays in some laboratories providing negative results to NSW Health.

Testing by Local Health District

Figure 8. Rates of COVID-19 testing by LHD of residence, NSW, 7 March to 3 April 2021

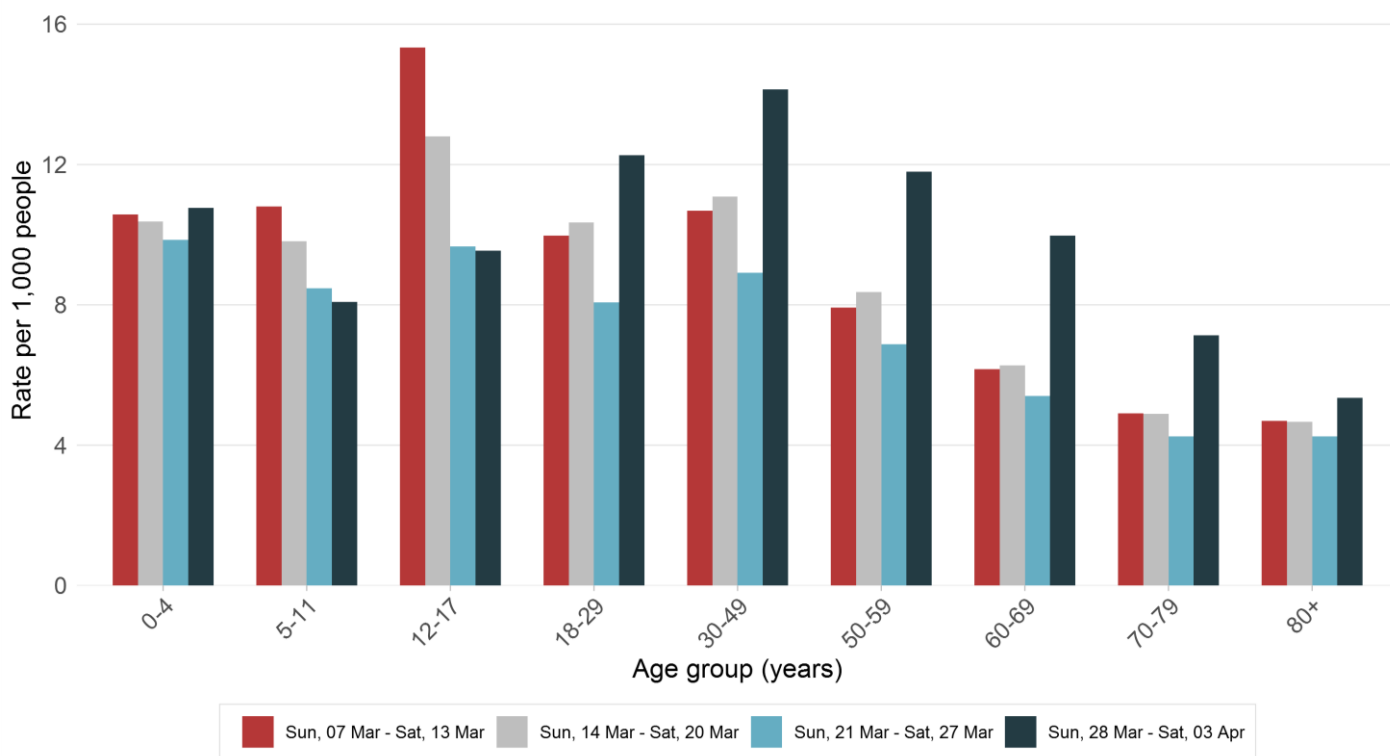


Includes SARS-CoV-2 PCR tests only and excludes notifications with missing postcode of residence.

Interpretation: State-wide testing rates in the week ending 3 April increased for all LHDs compared to the previous week (11 per 1,000 people compared to 8 per 1,000 people). Northern NSW LHD had a surge in testing after NSW Health released multiple health alerts advising people who attended various venues in the Byron Bay to get tested.

Testing by age group

Figure 9. Rates of COVID-19 testing by age group and week, NSW, 7 March to 3 April 2021



Interpretation: In the week ending 3 April, testing rates have increased across most age groups. The largest relative increase was seen in people aged 60-69 years.

Section 9: NSW Sewage Surveillance Program

The NSW Sewage Surveillance Program tests untreated sewage for fragments of the COVID-19 (SARS-CoV-2) virus at sewage treatment plant locations across NSW. In Sydney, testing is undertaken from both the sewage treatment plant (inlet sites) and sites within the network (network sites). Testing sewage can help track infections in the community and provide early warning of an increase in infections. These tests provide data to support NSW Health’s response to COVID-19.

An infected person can shed virus in their faeces even if they do not have symptoms, and shedding can continue for several weeks after they are no longer infectious. The NSW sewage surveillance for SARS-CoV-2 is in the preliminary stages of analysis and work is progressing to assess the significance of the results. For example, it is not currently known the minimum number of cases that can be detected in a catchment. A small number of cases in a large sewage catchment may not be detected by sewage surveillance due to factors such as dilution, inhibition, reduction in shedding over the infection period or movement of cases.

The table below shows results for the last 10 weeks for sites that have had detections. Lennox Head, Bangalow and Mullumbimby were added as new sites as part of investigations around Byron Bay. Farley, Dungog, Kurri Kurri and Cessnock were also added as new sites. The results from all sites across NSW are available in Appendix D.

Table 6. Locations with SARS-CoV-2 detections in sewage samples in the last 10 weeks, NSW, 24 January 2021 to 3 April 2021

		30-Jan	6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr
Pop.	Location	4	5	6	7	8	9	10	11	12	13
Sydney sewage treatment plant (inlet sites)											
69,245	Warriewood										
318,810	Bondi					n	n	n	n	n	n
1,857,740	Malabar 1					n	n	n	n	n	n
	Malabar 2										
181,005	Liverpool		n								
161,200	Glenfield										
1,341,986	North Head				n	n					
Sydney network sites											
Bondi	Paddington Sewage Network										
Malabar	Homebush SPS										
Malabar	Olympic Park										
Malabar	Botany Sewage Network										
North Head	Auburn Sewage Network										
Glenfield	Minto Sewage Network										
Liverpool	Ireland Park Sewage Network										
Regional sites											
7,700	Lennox Head										

Sampling commenced week ending 18 July 2020

- not sampled or analysed
- SARS-CoV-2 not detected
- SARS-CoV-2 detected
- SPS Sewage Pumping Station
- n result from network sites

Interpretation: In the week ending 3 April, 162 sewage samples were tested for fragments of SARS-CoV-2. Of these, there were eight detections – taken from the Bondi, Lennox Head and Malabar (two detections) treatment plants, and the sewage network at Paddington (within the Bondi catchment), Botany (within the Malabar catchment) Homebush sewage pumping station (within the Malabar catchment) and Olympic Park (within the Malabar catchment). All detections were associated with known cases in returned travellers or locally acquired case in Northern NSW

Section 10: Other respiratory infections in NSW

Influenza and other respiratory virus cases and tests reported in NSW, up to 28 March 2021

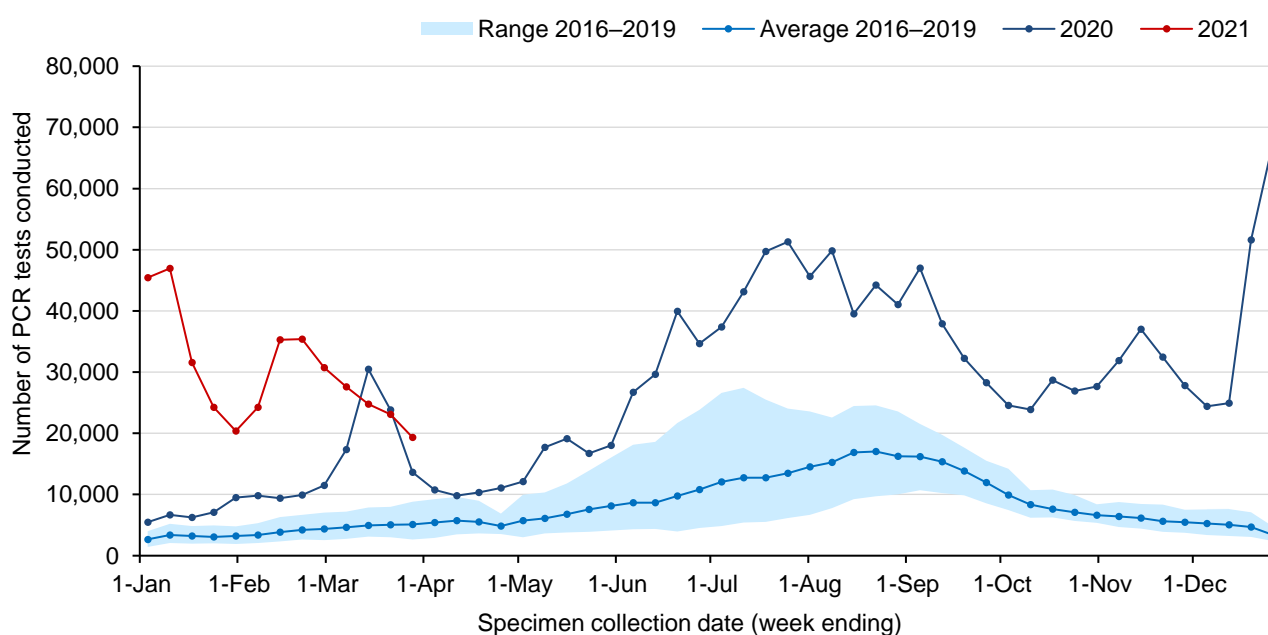
In NSW, routine surveillance for influenza and other respiratory viruses is conducted through sentinel laboratories. The number of all PCR tests (positive and negative) are provided to NSW Health by participating laboratories each week. Testing counts reflect the number of influenza PCR tests conducted; not all samples are tested for all respiratory viruses.

The most recent data available is for testing carried out to 28 March 2021. A total of 346,709 influenza tests have been performed at participating laboratories from 28 December 2020. Refer to Appendix B for PCR testing results for a range of respiratory viruses.

How much influenza testing is happening?

The red line in the figure below shows the number of PCR tests for influenza carried out each week in 2021, the dark blue line showing PCR tests for 2020. The light blue line shows the average number of PCR tests carried out for the same week in the previous four years (2016–2019) and the shaded area shows the range of tests reported in the same time period.

Figure 10. Testing for influenza by week, NSW, 1 January 2016 to 28 March 2021

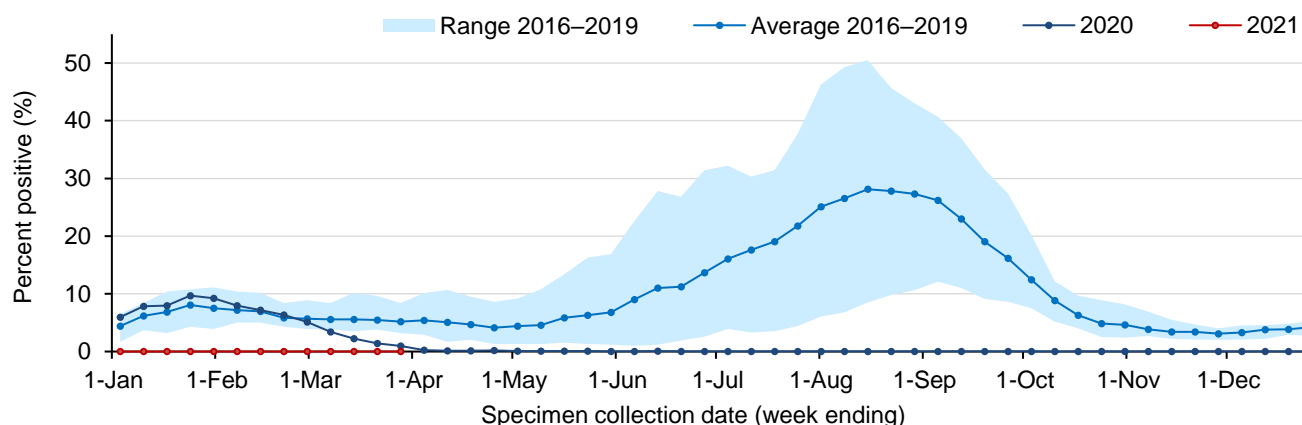


Interpretation: In the week ending 28 March, there were 19,331 influenza tests performed across the participating laboratories. Testing has been steadily decreasing since mid-February but continues to exceed the four-year average for this time of year.

How much influenza is circulating?

The graph below shows the proportion of tests found to be positive for influenza with the red line showing weekly counts for 2021, the dark blue line showing counts for 2020, the light blue line showing the average for 2016 to 2019 and the shaded area showing the range recorded for 2016 to 2019.

Figure 11. Proportion of tests positive for influenza, NSW, 1 January 2016 to 28 March 2021

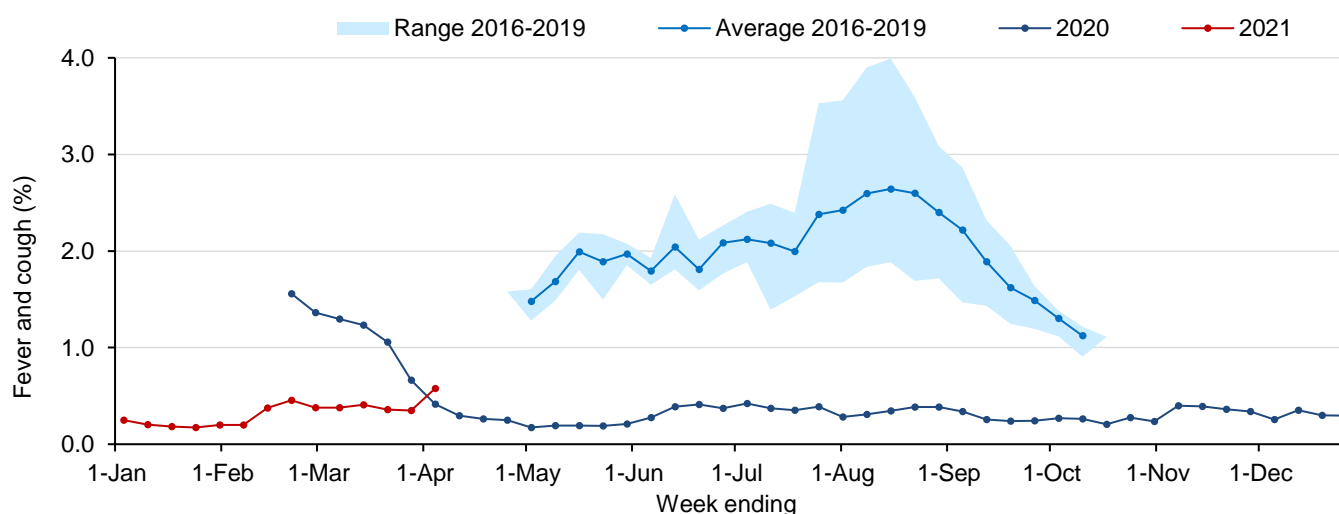


Interpretation: In the week ending 28 March, the percent of influenza tests that were positive continued to be very low (<0.01%), indicating limited influenza transmission in the community. Since early March 2020, this percentage has remained far lower than the usual range for the time of year.

How many people have flu-like symptoms in the community?

FluTracking is an online survey that asks participants to report flu-like symptoms, such as fever or cough, in the last week. Across NSW approximately 25,000–30,000 people participate each week. The survey usually commences at the beginning of May in line with the flu season but commenced at the end of February this year given the COVID-19 outbreak.

Figure 12. Proportion of FluTracker participants reporting influenza-like illness, NSW, 1 January 2016 to 4 April 2021



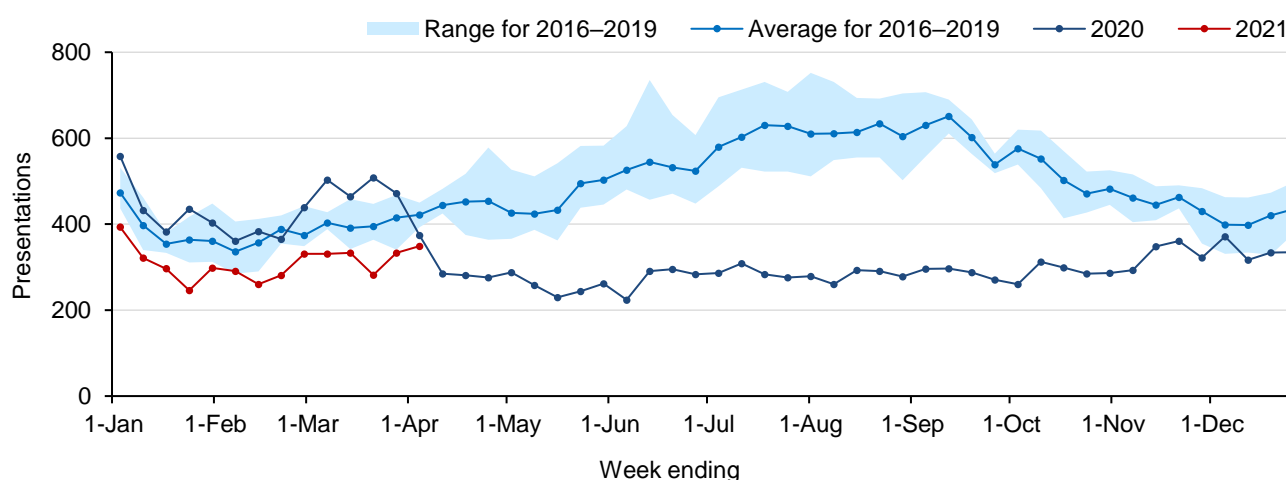
Interpretation: In NSW in the week ending 4 April of the 16,085 people surveyed, 93 people (0.58%) reported flu-like symptoms. In the last four weeks, 54% (160/297) of new cases of flu-like illness reported having a COVID-19 test. The proportion of people being tested for COVID-19 has been steadily decreasing since January when 80% of people surveyed with flu-like symptoms were being tested.

How are emergency department presentations tracking?

Improved hygiene and social distancing measures implemented during the COVID-19 pandemic have impacts on a broad range of other viral and bacterial infections.

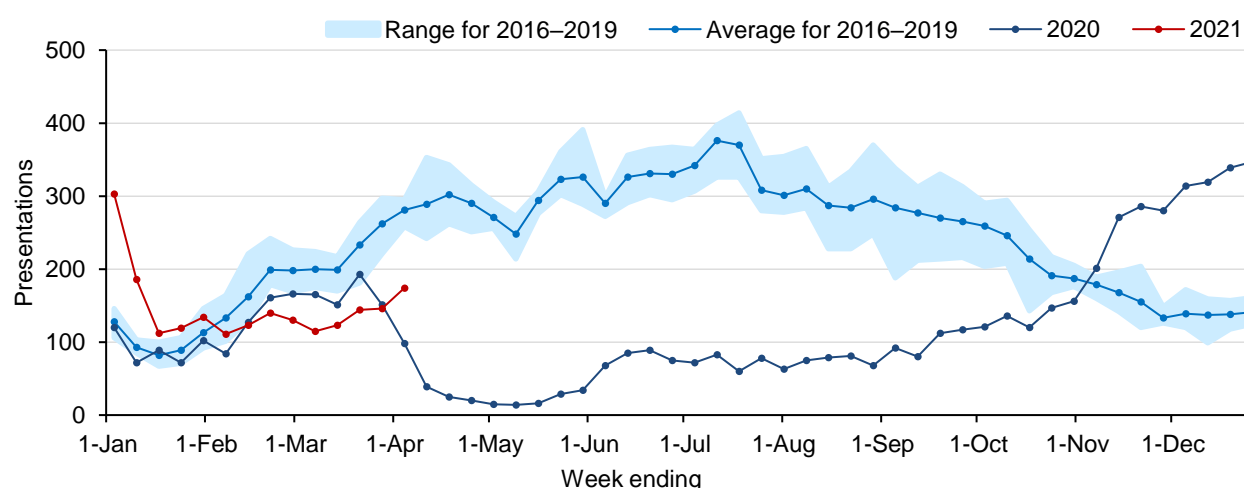
The figures below show weekly pneumonia, bronchiolitis and gastrointestinal presentations to Emergency Departments in NSW, using PHREDSS². The red line shows the weekly counts for 2021, the dark blue line showing counts for 2020, the light blue line showing the average for 2016 to 2019 and the shaded area showing the range recorded for 2016 to 2019.

Figure 13. Emergency Department pneumonia presentations, NSW, 1 January 2016 to 4 April 2021



Interpretation: Pneumonia presentations include people with diagnoses of viral, bacterial, atypical or unspecified pneumonia, and Legionnaires' disease, but excludes 'pneumonia with influenza' and provides an indicator of more severe respiratory conditions. In the week ending 4 April, pneumonia presentations increased but remain below the seasonal range for this time of year.

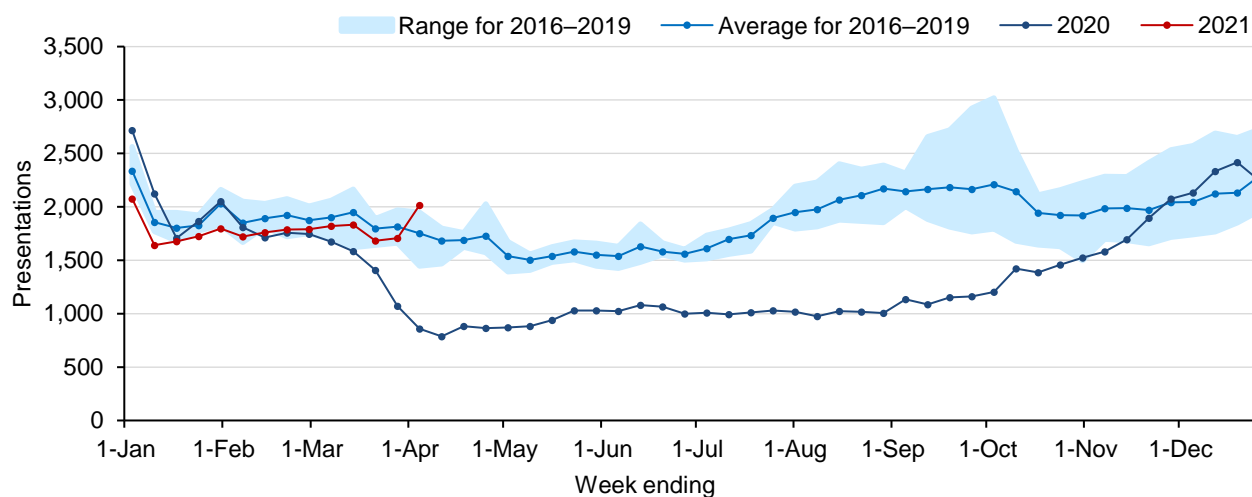
Figure 14. Emergency Department bronchiolitis presentations, NSW, 1 January 2016 to 4 April 2021



Interpretation: Bronchiolitis is a common disease of infants often caused by respiratory syncytial virus (RSV). Public health measures introduced last year around social distancing and improved hygiene practices coincided with a large decrease in bronchiolitis presentations for the majority of 2020. A rise in bronchiolitis presentations in the later part of 2020 corresponds to an increase in RSV detections. In the week ending 4 April, bronchiolitis presentations increased but remain below the seasonal range for this time of year.

² NSW Health Public Health Rapid, Emergency Disease and Syndromic Surveillance (PHREDSS) system, CEE, NSW Ministry of Health. Comparisons are made with data for the preceding 5 years. Includes unplanned presentations to 67 NSW emergency departments (accounts for 87% of total public ED activity).

Figure 15. Emergency Department gastrointestinal presentations, NSW, 1 January 2016 to 4 April 2021



Interpretation: Gastrointestinal presentations include people diagnosed with gastroenteritis, diarrhoea, vomiting, nausea, food poisoning and blood in vomit. Outbreaks in gastrointestinal virus can be caused by bacteria (e.g. salmonella), viruses (e.g. norovirus or rotavirus) or parasites (e.g. cryptosporidium). Viral gastroenteritis is more common in younger children and adults aged 65 and over.

For the period between March and October 2020, gastrointestinal presentations were well below the seasonal range. This corresponds to the introduction of COVID-19 restrictions limiting public and private gatherings, improved hygiene practices and social distancing measures. In the week ending 4 April, gastroenteritis presentations increased sharply and were above the seasonal range for the first time since January 2020. This increase was largely driven by children aged 0-4 years of age.

Appendix A: COVID-19 PCR tests in NSW by Local Government Area

Local Health District	Local Government Area	Week ending				Total since January 2021	
		27-March		20-March		No.	Tests per 1,000 population
		No.	Tests per 1,000 population	No.	Tests per 1,000 population		
Central Coast	Central Coast / LHD Total ²	2951	8.36	2165	6.14	198243	561.81
	Balranald	8	3.42	2	0.86	666	284.86
Far West	Broken Hill	98	5.61	88	5.03	8844	505.98
	Central Darling	2	1.09	1	0.54	531	288.74
	Wentworth	31	4.4	30	4.25	3237	458.95
	LHD Total ²	139	4.61	121	4.01	13278	440.49
Hunter New England	Armidale Regional	359	11.66	179	5.82	13888	451.22
	Cessnock	246	4.1	214	3.57	20679	344.74
	Dungog	40	4.24	36	3.82	3369	357.53
	Glen Innes Severn	95	10.71	37	4.17	2538	286.1
	Gunnedah	79	6.23	45	3.55	4371	344.69
	Gwydir	44	8.22	16	2.99	943	176.16
	Inverell	190	11.25	67	3.97	5667	335.52
	Lake Macquarie	1882	9.14	1378	6.69	121755	591.33
	Liverpool Plains	27	3.42	25	3.16	2830	358.09
	Maitland	954	11.2	683	8.02	55132	647.35
	Mid-Coast	396	4.22	229	2.44	32980	351.46
	Moree Plains	90	6.79	39	2.94	4022	303.3
	Muswellbrook	59	3.6	63	3.85	6110	373.08
	Narrabri	76	5.79	29	2.21	3426	260.83
	Newcastle	1929	11.65	1375	8.3	118765	717.31
	Port Stephens	503	6.85	368	5.01	38340	521.77
	Singleton	175	7.46	116	4.94	12632	538.43
	Tamworth Regional	520	8.31	314	5.02	30245	483.6
	Tenterfield	73	11.07	44	6.67	1557	236.12
	Upper Hunter Shire	94	6.63	52	3.67	5598	394.78
Uralla	34	5.66	23	3.83	1684	280.11	
Walcha	39	12.44	15	4.79	1239	395.34	
	LHD Total ²	7884	8.28	5344	5.61	487380	511.75
Illawarra Shoalhaven	Kiama	176	7.53	138	5.9	14127	604.08
	Shellharbour	485	6.62	451	6.16	42980	586.89
	Shoalhaven	562	5.32	446	4.22	47491	449.52
	Wollongong	1821	8.35	1419	6.51	136653	626.52
	LHD Total ²	3044	7.25	2454	5.85	241251	574.94
Mid North Coast	Bellingen	135	10.39	58	4.46	5358	412.28
	Coffs Harbour	799	10.34	301	3.9	28339	366.72
	Kempsey	192	6.45	105	3.53	12355	415.36
	Nambucca	147	7.42	63	3.18	6737	340.17
	Port Macquarie-Hastings	581	6.87	286	3.38	36181	428.05

Local Health District	Local Government Area	Week ending				Total since January 2021	
		27-March		20-March			
		No.	Tests per 1,000 population	No.	Tests per 1,000 population	No.	Tests per 1,000 population
	<i>LHD Total²</i>	1854	8.22	813	3.6	88970	394.26
Murrumbidgee	Albury	449	8.26	331	6.09	24269	446.51
	Berrigan	28	3.2	20	2.29	2405	274.86
	Bland	22	3.68	20	3.35	1934	323.84
	Carrathool	4	1.43	1	0.36	431	153.98
	Coolamon	24	5.53	9	2.07	1715	395.07
	Cootamundra-Gundagai Regional	35	3.12	46	4.09	3901	347.22
	Edward River	24	2.64	23	2.53	3272	360.19
	Federation	61	4.9	35	2.81	3975	319.61
	Greater Hume Shire	59	5.48	70	6.5	4159	386.38
	Griffith	147	5.44	126	4.66	11948	442.04
	Hay	7	2.37	8	2.71	678	229.91
	Hilltops	98	5.24	94	5.03	6984	373.4
	Junee	10	1.5	16	2.39	1787	267.39
	Lachlan ¹	12	1.98	10	1.65	1215	200
	Leeton	42	3.67	43	3.76	3538	309.13
	Lockhart	10	3.04	6	1.83	1020	310.5
	Murray River	16	1.32	9	0.74	1071	88.38
	Murrumbidgee	10	2.55	12	3.06	1055	269.34
	Narrandera	10	1.7	5	0.85	1396	236.65
	Snowy Valleys	63	4.35	66	4.56	5458	376.96
Temora	15	2.38	12	1.9	1654	262.25	
Wagga Wagga	491	7.52	341	5.23	34753	532.55	
	<i>LHD Total²</i>	1628	5.46	1297	4.35	117804	395.17
Nepean Blue Mountains	Blue Mountains	716	9.05	550	6.95	60232	761.29
	Hawkesbury	323	4.8	138	2.05	41114	610.94
	Lithgow	83	3.84	60	2.78	8471	392.09
	Penrith	1640	7.7	1213	5.7	145127	681.42
	<i>LHD Total²</i>	2747	7.03	1948	4.98	252950	646.95
Northern NSW	Ballina	3471	77.78	858	19.23	24740	554.36
	Byron	3514	100.17	312	8.89	22627	644.99
	Clarence Valley	557	10.78	148	2.86	15879	307.36
	Kyogle	117	13.3	26	2.96	2588	294.22
	Lismore	1892	43.3	318	7.28	22198	508.06
	Richmond Valley	495	21.1	134	5.71	9802	417.73
	Tenterfield	73	11.07	44	6.67	1557	236.12
	Tweed	2268	23.38	514	5.3	36344	374.68
	<i>LHD Total²</i>	12332	39.73	2311	7.45	134534	433.47
Northern Sydney	Hornsby	1583	10.41	1258	8.27	96665	635.71
	Hunters Hill	359	23.97	259	17.29	21687	1447.73
	Ku-ring-gai	2199	17.29	1701	13.38	127424	1002.13
	Lane Cove	1031	25.68	713	17.76	61428	1529.77
	Mosman	466	15.04	301	9.72	26016	839.74

Local Health District	Local Government Area	Week ending				Total since January 2021	
		27-March		20-March			
		No.	Tests per 1,000 population	No.	Tests per 1,000 population	No.	Tests per 1,000 population
	North Sydney	985	13.13	647	8.62	47626	634.84
	Northern Beaches	4218	15.42	2759	10.09	327994	1199.25
	Parramatta ¹	2315	9	1952	7.59	141334	549.52
	Ryde	1688	12.86	1329	10.12	89555	682.21
	Willoughby	895	11.02	687	8.46	49276	606.93
	<i>LHD Total²</i>	13973	14.62	10102	10.57	876271	916.68
South Eastern Sydney	Bayside	1446	8.11	1283	7.19	93393	523.52
	Georges River	1275	8	1153	7.23	79907	501.08
	Randwick	2279	14.64	1460	9.38	127610	819.86
	Sutherland Shire	2564	11.12	1938	8.4	166078	720.17
	Sydney ¹	3926	15.94	2807	11.39	207531	842.45
	Waverley	1261	16.97	894	12.03	73116	984.13
	Woollahra	1402	23.61	928	15.63	62460	1051.75
	<i>LHD Total²</i>	11638	12.13	8665	9.03	677714	706.61
South Western Sydney	Camden	956	9.42	758	7.47	86845	856.15
	Campbelltown	1191	6.97	1120	6.55	116827	683.43
	Canterbury-Bankstown ¹	2503	6.62	2291	6.06	203560	538.64
	Fairfield	802	3.79	796	3.76	90599	427.97
	Liverpool	1414	6.21	1183	5.2	142255	625.06
	Wingecarribee	432	8.45	342	6.69	37100	725.54
	Wollondilly	250	4.7	200	3.76	24897	468.44
	<i>LHD Total²</i>	6211	5.98	5411	5.21	598302	576.1
Southern NSW	Bega Valley	139	4.03	71	2.06	13147	381.34
	Eurobodalla	261	6.78	181	4.7	20056	521.3
	Goulburn Mulwaree	186	5.97	122	3.92	13939	447.74
	Queanbeyan-Palerang Regional	519	8.49	207	3.39	19476	318.76
	Snowy Monaro Regional	133	6.4	84	4.04	8425	405.15
	Upper Lachlan Shire	48	5.96	37	4.59	3094	383.92
	Yass Valley	127	7.43	52	3.04	4706	275.41
	<i>LHD Total²</i>	1413	6.51	754	3.47	82873	381.78
Sydney	Burwood	275	6.77	251	6.18	18996	467.74
	Canada Bay	1119	11.65	830	8.64	72700	756.71
	Canterbury-Bankstown ¹	2503	6.62	2291	6.06	203560	538.64
	Inner West	2485	12.37	1830	9.11	168779	840.49
	Strathfield	473	10.08	391	8.33	33276	709.12
	Sydney ¹	3926	15.94	2807	11.39	207531	842.45
	<i>LHD Total²</i>	8173	11.73	6334	9.09	525970	754.87
Western NSW	Bathurst Regional	249	5.71	186	4.26	23455	537.74
	Blayney	40	5.42	32	4.34	3855	522.43
	Bogan	19	7.36	7	2.71	1032	400
	Bourke	8	3.09	11	4.25	626	241.7
	Brewarrina	1	0.62	1	0.62	359	222.84
	Cabonne	29	2.13	32	2.35	3942	289.13

Local Health District	Local Government Area	Week ending				Total since January 2021	
		27-March		20-March		No.	Tests per 1,000 population
		No.	Tests per 1,000 population	No.	Tests per 1,000 population		
	Cobar	14	3.01	9	1.93	1317	282.74
	Coonamble	11	2.78	9	2.27	1109	280.19
	Cowra	59	4.63	49	3.85	4308	338.07
	Dubbo Regional	332	6.18	232	4.32	22725	423.03
	Forbes	32	3.23	31	3.13	2631	265.6
	Gilgandra	10	2.36	9	2.12	1114	262.8
	Lachlan ¹	12	1.98	10	1.65	1215	200
	Mid-Western Regional	157	6.22	120	4.75	10439	413.41
	Narromine	19	2.92	21	3.22	2150	329.91
	Oberon	27	4.99	19	3.51	2006	370.73
	Orange	372	8.76	292	6.88	26781	630.87
	Parkes	52	3.5	44	2.97	4972	335.11
	Walgett	32	5.38	9	1.51	1849	310.6
	Warren	23	8.53	8	2.97	1563	579.53
	Warrumbungle Shire	34	3.66	49	5.28	3346	360.64
	Weddin	18	4.98	11	3.04	1023	283.14
	<i>LHD Total²</i>	1547	5.43	1187	4.16	121464	426.17
Western Sydney	Blacktown	3031	8.09	2622	7	238063	635.77
	Cumberland	1634	6.77	1647	6.82	151628	627.8
	Parramatta ¹	2315	9	1952	7.59	141334	549.52
	The Hills Shire	2422	13.61	2177	12.23	155446	873.44
	<i>LHD Total²</i>	8900	8.45	8011	7.6	663948	630.27
NSW Total³		91737	11.34	62354	7.71	1254699	155.1

Source - Notifiable condition information management System, accessed as at 8pm 29 March 2021.

¹Local Government Area (LGA) spans multiple Local Health Districts.

²Local Health District total counts and rates includes tests for LHD residents only. Murrumbidgee includes Albury LGA residents.

³NSW Total counts and rates since January 2021 include tests where residential information is incomplete.

See <https://www.health.nsw.gov.au/Infectious/covid-19/Pages/counting-tests.aspx> for detail on how tests are counted.

Appendix B: Number of positive PCR test results for influenza and other respiratory viruses at sentinel NSW laboratories, January 2020 to 28 March 2021

The reported testing numbers reflect the number of influenza PCR tests conducted. Not all samples are tested for all of the other respiratory viruses. Therefore, data presented may tend to under-represent current respiratory virus activity in NSW.

Testing numbers in NSW from 28 December 2020–28 March 2021

Specimen collection date	PCR tests conducted	Influenza A		Influenza B		Adeno-virus	Para-influenza	RSV	Rhino-virus	HMPV**	Entero-virus
		No.	%Pos.	No.	%Pos.						
Total	346,709	5	0.00%	0	0.00%	1,084	291	6,683	16,983	53	2,066
Month ending											
31 January*	168,596	2	0.00%	0	0.00%	416	88	3,275	3,541	23	560
28 February	125,718	3	0.00%	0	0.00%	419	106	2,386	8,667	22	910
Week ending											
7 March	27,612	0	0.00%	0	0.00%	119	43	482	2,540	5	280
14 March	24,783	0	0.00%	0	0.00%	130	54	540	2,235	3	316
21 March	23,077	0	0.00%	0	0.00%	118	95	442	2,101	8	273
28 March	19,331	0	0.00%	0	0.00%	131	156	424	1,899	2	302

Testing numbers in NSW from January–27 December 2020

Specimen collection date	PCR tests conducted	Influenza A		Influenza B		Adeno-virus	Para-influenza	RSV	Rhino-virus	HMPV**	Entero-virus
		No.	%Pos.	No.	%Pos.						
Total	1,393,182	6,631	0.48%	955	0.07%	9,139	9,193	22,004	138,737	2,435	6,434
Month ending											
3 February *	34,953	2,508	7.18%	401	1.15%	846	1,900	752	5,036	599	335
1 March	40,575	2,363	5.82%	315	0.78%	798	2,435	1,118	8,245	437	1,007
29 March	85,238	1,549	1.82%	200	0.23%	898	4,117	1,977	18,088	664	1,502
3 May *	54,128	70	0.13%	13	0.02%	175	273	410	2,250	48	210
31 May	71,525	35	0.05%	6	0.01%	237	62	115	3,511	27	112
28 June	130,922	42	0.03%	11	0.01%	629	83	178	28,321	112	246
2 August *	227,152	34	0.01%	2	0.00%	1,251	89	209	31,589	79	427
30 August	174,594	9	0.01%	2	0.00%	1,137	37	299	13,926	14	235
27 September	145,489	6	0.00%	1	0.00%	938	35	866	8,416	61	259
1 November *	131,686	7	0.01%	1	0.00%	894	56	3,508	5,632	51	662
29 November	129,164	6	0.00%	3	0.00%	752	42	6,255	8,252	192	884
27 December	167,756	2	0	0	0	584	64	6,317	5,471	151	555

Notes: Preliminary laboratory data is provided by participating sentinel laboratories on a weekly basis and are subject to change.

Serological diagnoses are not included.

HMPV – Human metapneumovirus

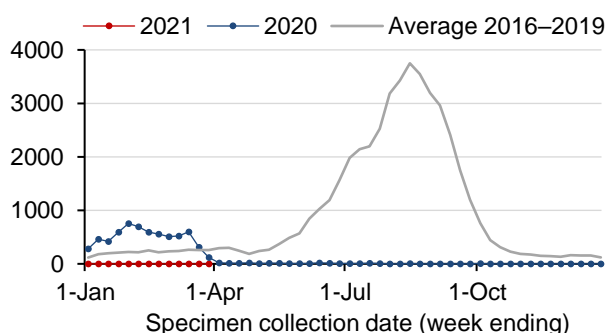
RSV - Respiratory syncytial virus

*Five-week period

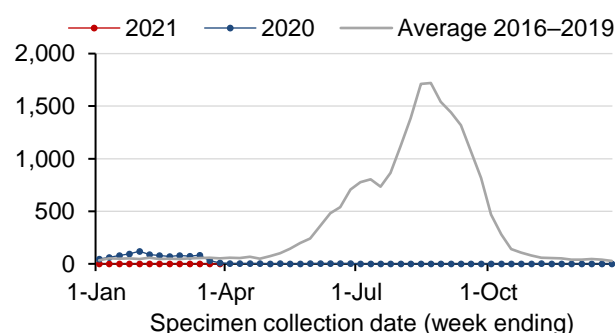
Appendix C: Number of positive PCR test results for influenza and other respiratory viruses at sentinel NSW laboratories, January 2020 to 28 March 2021

Not all samples are tested for all of the other respiratory viruses. Therefore, data presented may tend to under-represent current respiratory virus activity in NSW.

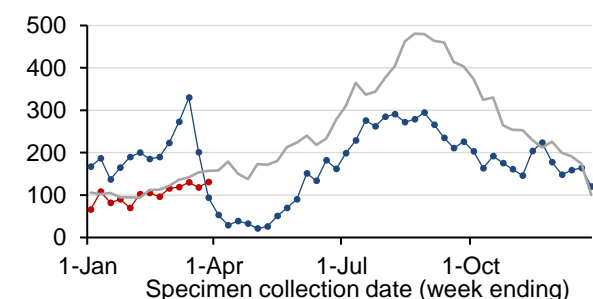
Influenza A



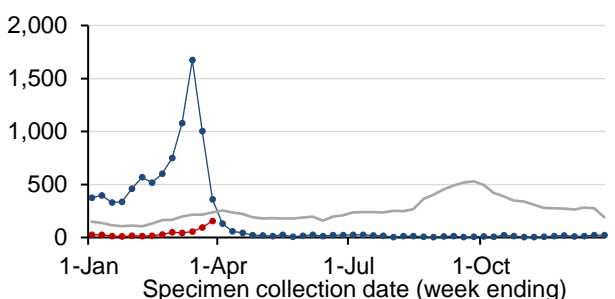
Influenza B



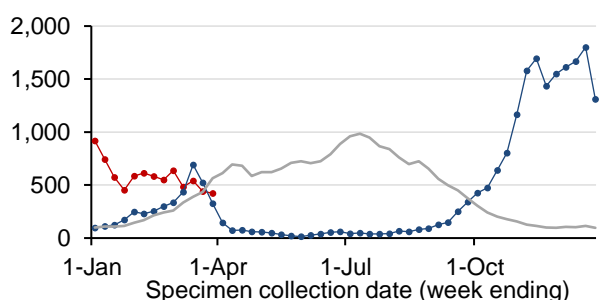
Adenovirus



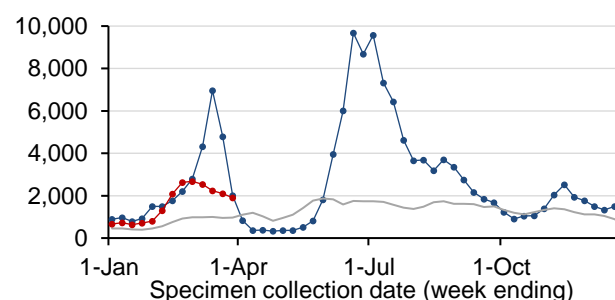
Parainfluenza



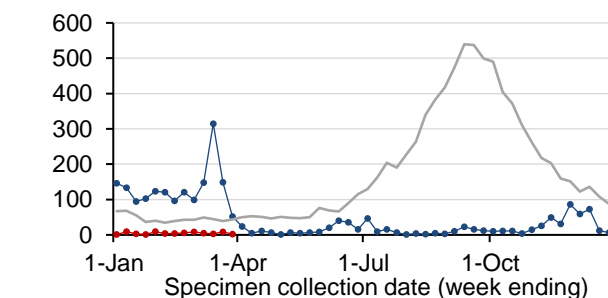
Respiratory syncytial virus (RSV)



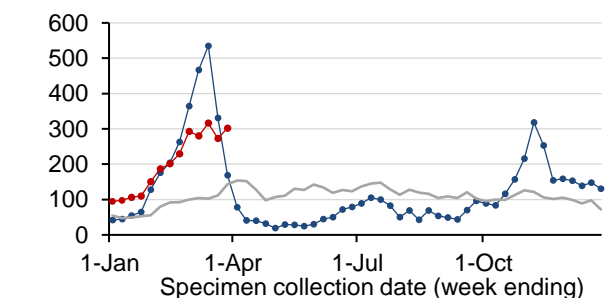
Rhinovirus



Human metapneumovirus (HMPV)



Enterovirus



Note: Preliminary laboratory data is provided by participating sentinel laboratories on a weekly basis and are subject to change. Serological diagnoses are not included.

Appendix D: SARS-CoV-2 testing in sewage samples collected in the previous 10 weeks, week ending 3 April 2021

The NSW Sewage Surveillance Program tests untreated sewage for fragments of the COVID-19 (SARS-CoV-2) virus at sewage treatment plant locations across NSW. The table below shows results for the last 10 weeks of samples collected across all sites in NSW.

Sydney Sites		30-Jan	6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr
Pop.	Location	4	5	6	7	8	9	10	11	12	13
60,514	Blue Mountains (Winmalee)										
4,681	North Richmond										
13,052	Richmond										
110,114	Penrith										
12,000	Lithgow										
19,000	South Windsor										
8,000	McGraths Hill										
69,245	Warriewood										
1,241	Brooklyn										
31,924	Hornsby Heights										
57,933	West Hornsby										
318,810	Bondi					n	n	n	n	n	n
233,176	Cronulla										
1,857,740	Malabar 1					n	n	n	n	n	n
	Malabar 2										
181,005	Liverpool		n								
98,743	West Camden										
6,882	Wallacia										
14,600	Picton										
161,200	Glenfield										
1,341,986	North Head					n	n				
26,997	Castle Hill Cattai										
	Castle Hill Glenhaven										
163,374	Quakers Hill										
119,309	Rouse Hill										
37,061	Riverstone										
163,147	St Marys										
73,686	Shellharbour										
55,000	Wollongong										
68,000	Port Kembla										
93,000	Bellambi										

Sydney Network Sites		30-Jan	6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr
Network	Location	4	5	6	7	8	9	10	11	12	13
Bondi	Paddington Sewage Network										
Cronulla	Caringbah Sewage Network										
Cronulla	Miranda Sewage Network										
Malabar	Earlwood Sewage Network										
Malabar	Marrickville Sewage Network 1										
Malabar	Marrickville Sewage Network 2										
Malabar	Bardwell Creek Sewage Network										
Malabar	Arncliffe Sewage Network 1										
Malabar	Arncliffe Sewage Network 2										
Malabar	Blakehurst Sewage Network										
Malabar	Padstow Sewage Network 1										
Malabar	Padstow Sewage Network 2										
Malabar	Fairfield Sewage Pumping Station 1										
Malabar	Fairfield Sewage Pumping Station 2										
Malabar	Homebush Sewage Pumping Station										
Malabar	Olympic Park										
Malabar	Croydon Sewage Network										
Malabar	Dulwich Hill Sewage Network										
Malabar	Canterbury Sewage Network										
Malabar	Botany Sewage Network										
Malabar	Maroubra Sewage Network										
North Head	Camellia Sewage Pumping Station - North										
North Head	Camellia Sewage Pumping Station - South										
North Head	Auburn Sewage Network										
North Head	Northmead Sewage Pumping Station										
North Head	Northmead Sewage Network										
North Head	Tunks Park Sewage Network										
North Head	Vineyard Creek Sewage Network										
North Head	Boronia Park Sewage Network										
North Head	West Lindfield Sewage Network										
North Head	Lane Cove West Sewage Network										
North Head	Allambie Heights Sewage Network										
North Head	Buffalo Creek Reserve Network										
Glenfield	Minto Sewage Network										
Liverpool	Ireland Park Sewage Network										
Quakers Hill	Eastern Creek Sewage Network										
St Mary's	Ropes Creek Sewage Network										

Regional Sites		30-Jan	6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr
Pop.	Location	4	5	6	7	8	9	10	11	12	13
14,700	Bowral										
14,000	Mittagong										
9,000	Moss Vale										
1,000	Berrima										
2,000	Bundanoon										
900	Robertson										
16,068	Bombo										
7,200	Gerringong/Gerroa										
32,000	Ulladulla										
18,000	Bomaderry										
37,500	Nowra										
16,000	St Georges Basin										
11,000	Cullburra Beach										
139,500	Gosford-Kincumber										
59,060	Charmhaven										
29,300	Wyong-Toukley										
38,900	Bateau Bay										
41,300	Woy Woy										
5,000	Perisher										
8,400	Thredbo										
3,000	Jindabyne										
8,000	Cooma										
500	Gunning										
500	Charlottes Pass										
51,750	Albury composite	C	C	C	C	C	C		C	C	C
	Albury Kremer St										
	Albury Waterview										
22,419	Goulburn										
21,000	Batemans Bay										
18,000	Moruya										
17,000	Narooma										
8,000	Eden										
15,500	Merimbula										
5,000	Bermagui										
7,800	Deniliquin										
48,000	Queanbeyan										
50,000	Wagga Wagga composite	C	C	C	C	C	C	C	C	C	C
	Wagga Wagga- inlet 1										
	Wagga Wagga- inlet 2										
	Wagga Wagga -Koorlingal STP										
2,050	Bourke										
	Nyngan										

Regional Sites (con't)		30-Jan	6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr
Pop.	Location	4	5	6	7	8	9	10	11	12	13
40,000	Orange										
12,000	Mudgee										
36,603	Bathurst										
19,000	Broken Hill										
500	Dareton										
11,600	Parkes										
37,000	Dubbo										
24,000	Armidale										
45,000	Tamworth										
	Narrabri										
	Tenterfield										
	Urbenville										
10,000	Moree										
26,394	Taree										
12,000	Forster										
7,582	Hallidays Point										
5,180	Harrington										
10,715	Hawks Nest										
225,834	Hunter - Burwood Beach										
60,000	Hunter - Shortland										
115,000	Hunter - Belmont										
60,000	Hunter - Morpeth										
58,300	Hunter - Boulder Bay										
35,000	Hunter - Raymond Terrace										
32,000	Hunter - Dora Creek										
42,000	Hunter - Toronto										
70,000	Hunter - Edgeworth										
2,500	Hunter - Karuah										
3,000	Hunter - Dungog										
21,500	Hunter - Kurri Kurri										
32,000	Hunter - Cessnock										
40,000	Hunter - Farley										
32500	Lismore composite			C		C	C	C			C
17,000	East Lismore										
15,500	South Lismore										
18,958	Byron Bay - Ocean Shores										
	Byron Bay										
2,000	Bangalow										
3,500	Mullumbimby										
31,104	Ballina										
7,700	Lennox Head										
16,000	Tweed - Murwillumbah										

Regional Sites (con't)		30-Jan	6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr
Pop.	Location	5	6	7	8	9	10	11	12	13	Location
75,000	Tweed - Banora Point										
25,000	Tweed - Kingscliff										
18,000	Tweed - Hastings Point										
18,550	Grafton composite			c	c	c	c	c	c	c	
12,250	North Grafton										
6,300	South Grafton										
6,500	Yamba										
8,730	Nambucca Heads										
54,370	Port Macquarie										
7,010	Bonny Hills										
8,540	Dunbogan										
12,105	South West Rocks										
4,052	Crescent Head										
12,000	Urunga										
50,000	Coffs Harbour										

Sampling commenced week ending 18 July 2020

- not sampled or analysed
- SARS-CoV-2 not detected
- SARS-CoV-2 detected
- site moved to composite or ceased

- c composite of the separate influent samples
- n result from network sites

Glossary

Term	Description
Case	<p>A person infected who has tested positive to a validated specific SARS-CoV-2 nucleic acid test or has had the virus identified by electron microscopy or viral culture. Blood tests (serology) is only used in special situations following a public health investigation and require other criteria to be met in addition to the positive serology result (related to timing of symptoms and contact with known COVID-19 cases).</p> <p>Case counts include:</p> <ul style="list-style-type: none"> - NSW residents diagnosed in NSW who were infected overseas or in Australia (in NSW or interstate), and - interstate or international visitors diagnosed in NSW who were under the care of NSW Health at the time of diagnosis
Health care workers	Individuals who work within a hospital or other healthcare settings, including staff in direct or indirect contact with patients or infectious materials.
Incubation period	The time in which the case was infected. The incubation period for COVID-19 is between 1 and 14 days prior to symptom onset.
Overseas acquired case	Case who travelled overseas during their incubation period. While testing rates in NSW are high and case counts are low, cases who have travelled overseas in their incubation period are considered to have acquired their infection overseas.
Interstate acquired case	Case who travelled interstate during their infection and the public health investigation concludes the infection was likely acquired interstate.
Cluster	Group of cases sharing a common source of infection or are linked to each other in some way.

Dates used in COVID-19 reporting

Event	Date name	Source
Person first starts to feel unwell	Date of symptom onset	Public health staff interview all cases at the time of diagnosis. This is the date provided to NSW Health by the case.
Person has a swab taken	Date of test	This date is provided to NSW Health by the laboratory when the test result (positive or negative) is notified.
Laboratory notifies NSW Health of result	Date of notification	<p>This date is provided to NSW Health by the laboratory. Laboratories prioritise notification of positive results to allow prompt public health action.</p> <p>Positive cases: The date of notification is collected by NSW Health on the day of notification. Cases are informed of their diagnosis by their doctor or public health staff as soon as the result is available. The date of notification to NSW Health is usually the same day as the date the case finds out about the result.</p> <p>Negative cases: Some laboratories notify NSW Health of negative results in batches at regular intervals. For these laboratories the date of notification to NSW Health does not reflect the date the negative result was available at the laboratory. NSW Health does not collect information on the date the person was informed of the result.</p>