

COVID-19 WEEKLY SURVEILLANCE IN NSW

EPIDEMIOLOGICAL WEEK 14, ENDING 10 APRIL 2021

Published 15 April 2021

Overview

Number and proportion of COVID-19 cases by likely source of infection to week ending 10 April 2021

	Jan–Jun 2020	Jul–Dec 2020	Jan–10 April 2021
Overseas acquired	1,893 (59%)	714 (46%)	358 (89%)
Interstate acquired	67 (2%)	23 (2%)	0 (0%)
Locally acquired	1,237 (39%)	808 (52%)	45 (11%)
Total	3,197	1,545	403
Deaths	52	4	0

Summary for the week ending 10 April 2021

- There were no locally acquired cases reported in the week ending 10 April 2021.
- The number of cases reported in overseas returned travellers increased this week (up 89%) compared to the previous week.
- In the four-week period ending 10 April 2021, 35% (33/95) of overseas acquired cases have been identified as having COVID-19 variants of concern (B.1.1.7, B.1.351 and P1). Of the 545 returned travellers diagnosed with COVID-19 since 29 November 2020, 108 (20%) have been diagnosed with a VoC.
- Testing rates decreased across all local health districts compared to the previous week (down 37%).
- The NSW Sewage Surveillance Program reported four detections – taken from the Bondi and Malabar treatment plants, and the sewage networks at Paddington (within the Bondi catchment) and Botany (within the Malabar catchment). All detections were associated with known cases in returned travellers.
- In the week ending 11 April, bronchiolitis presentations remain below the seasonal range for this time of year while gastroenteritis presentations increased for the second week in a row. This increase was largely driven by children aged 0–4 years of age.

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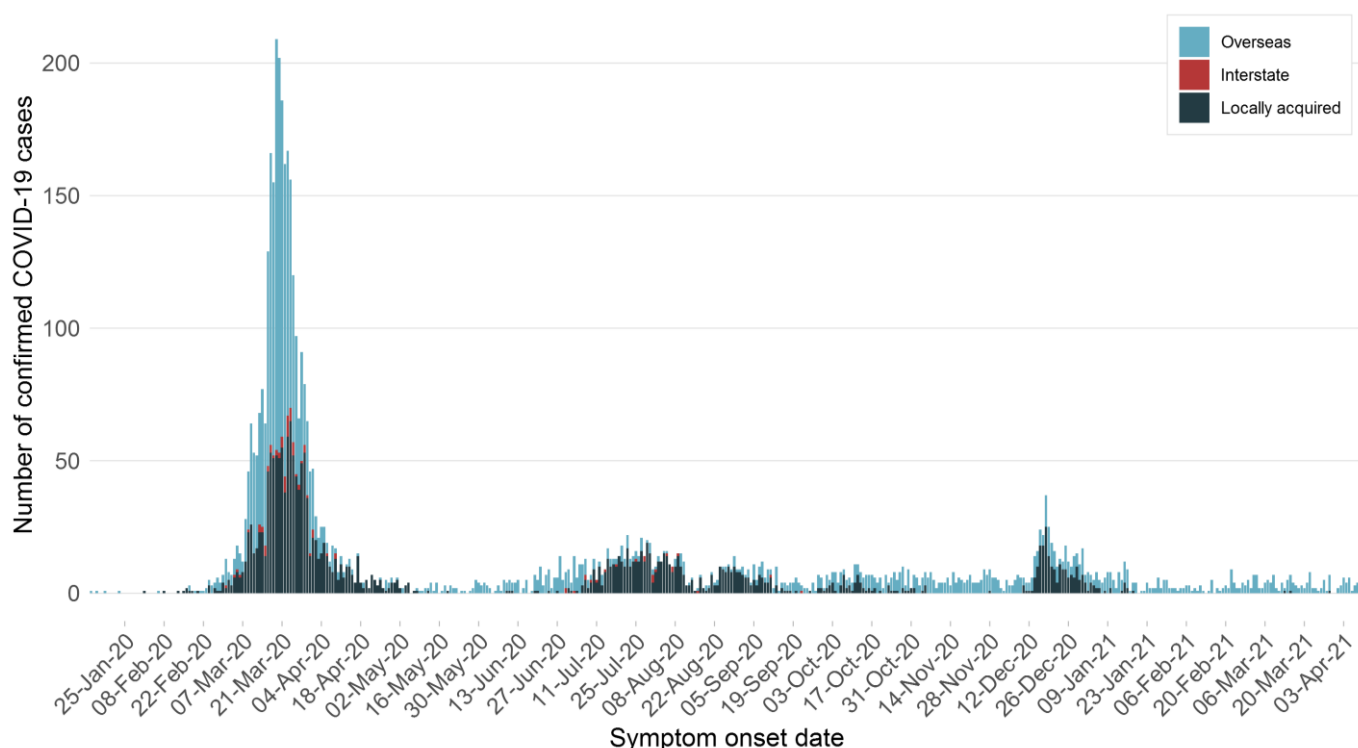
Section 1: How is the outbreak tracking in NSW?

The epidemiology of COVID-19 in NSW continued to evolve since the first case was reported in NSW on 25 January 2020. Following the introduction of the 14-day mandatory quarantine for returned travellers in March 2020, the number of new cases diagnosed in NSW decreased significantly following a peak in mid-March. The first locally acquired COVID-19 case in NSW was reported on 2 March 2020 in a resident who was suspected to have been exposed to SARS-CoV-2 in a public hospital setting. This triggered a number of public health measures to interrupt the transmission chain in the community. Subsequently case notifications declined sharply, and community transmission was interrupted by the end of May 2020.

In early July seeding of SARS-CoV-2 into South Western Sydney from an outbreak in Melbourne led to a second wave of infection. Following intensive public health action community transmission was again interrupted by the end of November 2020. In December 2020 two new introductions of SARS-CoV-2 caused outbreaks in Sydney's Northern Beaches and Berala in Sydney's West. Community transmission was again interrupted by the end of January 2021.

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, from 25 January 2020 to 10 April 2021



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

Interpretation: Between 25 January 2020 and 10 April 2021, there were 5,145 confirmed COVID-19 cases. Of those, 2,965 (58%) were overseas acquired, 90 (2%) were interstate acquired, and 2,090 (40%) were locally acquired.

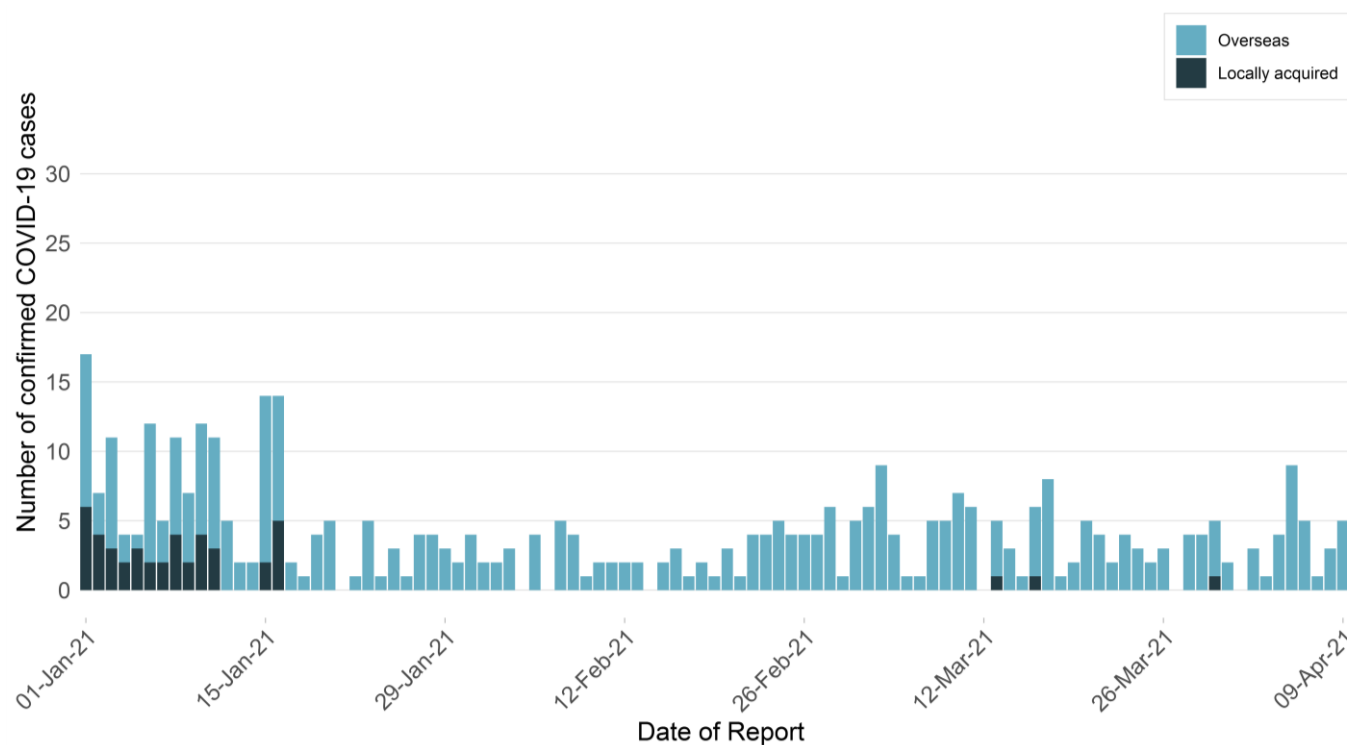
COVID-19 cases reported in 2021

Table 1. COVID-19 cases and tests reported, NSW, from 1 January 2021 to 10 April 2021

	Week ending 10 Apr	Week ending 3 Apr	% change	Total 2021
Number of cases	34	19	↑ 79%	403
Overseas acquired	34	18	↑ 89%	358
Interstate acquired	0	0	-	0
Locally acquired	0	1	↓ 100%	45
No epidemiological links to other cases or clusters	0	0	-	6
Number of deaths	0	0	-	0
Number of tests	58,345	92,442	↓ 37%	1,313,784

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

Figure 2. COVID-19 cases by likely infection source and reporting date, NSW, from 1 January 2021 to 10 April 2021



Interpretation: Of the 45 locally acquired COVID-19 cases reported between 1 January and 10 April 2021:

- 11 were associated with the Avalon cluster
- 31 were associated with the Berala cluster
- two were associated with the Sydney hotel quarantine cluster in mid-March
- one case acquired their infection from an infectious Queensland resident who was visiting Byron Bay, detected as part of extensive contact tracing in late March.

The majority of cases reported in the last four weeks in NSW were overseas acquired (95/97, 98%).

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:

- 108 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 India (17), the United Kingdom (15), South Africa (8), Bangladesh (6), the United Arab Emirates (6), USA (6), Pakistan (5), Germany (4), and one case each in Canada, Finland, France, Iraq, Jordan, Netherlands, Nigeria, Spain and Zambia. There are four cases where the likely country of acquisition was unable to be determined.
- Three locally acquired COVID-19 cases infected with the B.1.1.7 variant of concern.

Table 2a. Overseas acquired COVID-19 cases by VoC and week reported, NSW, 29 November 2020 to 10 April 2021

	Week ending				29 Nov to 13 Mar	Total since 29 November
	10 Apr	03 Apr	27 Mar	20 March		
Total overseas acquired cases	34	18	18	25	450	545
Overseas cases with VoC	6	10	5	12	75	108
B.1.1.7	3	5	5	12	64	88
B.1.351	2	4	0	0	9	15
P.1	1	1	0	0	2	4
% overseas acquired cases with VoC	18%	56%	48%	46%	17%	20%

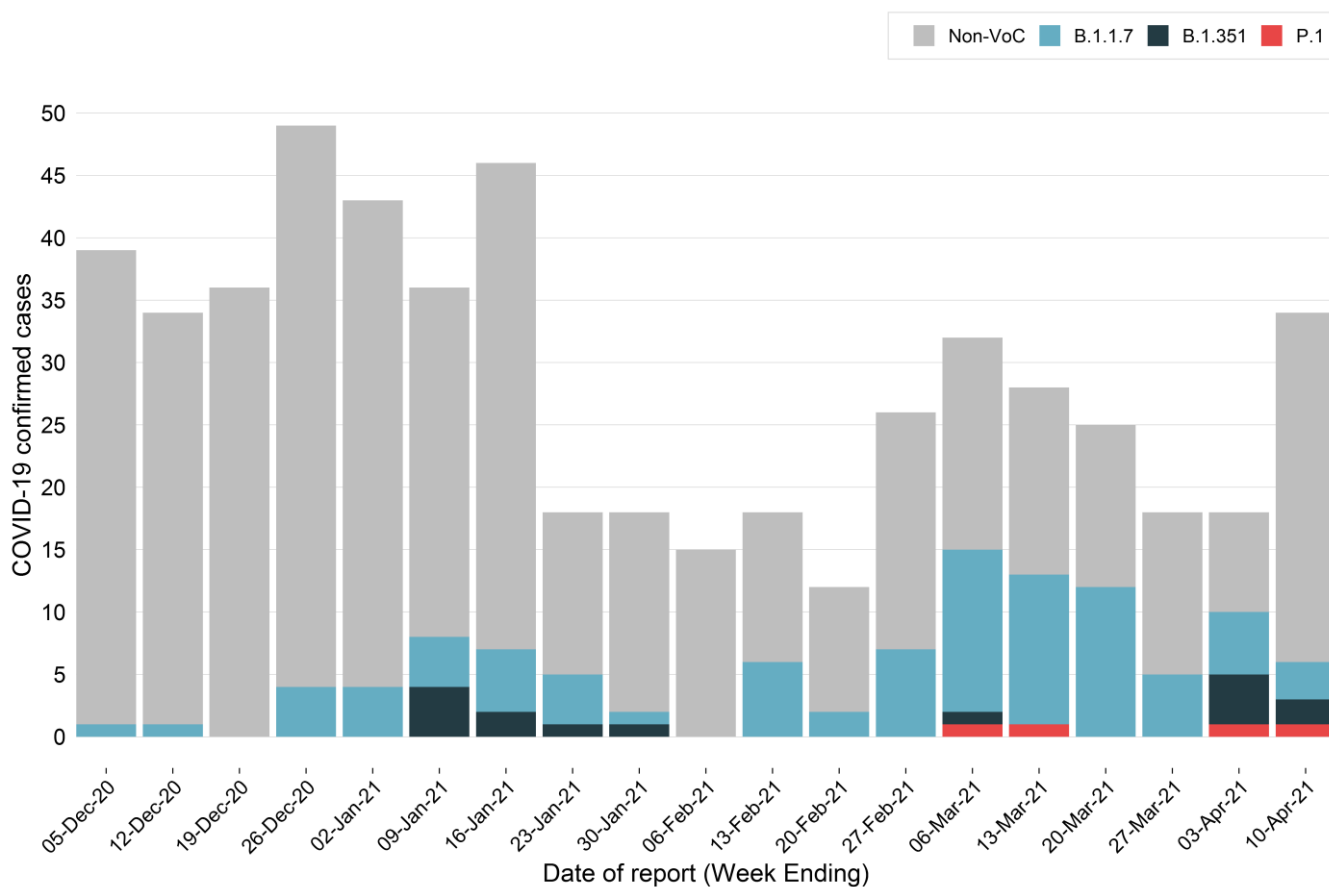
Interpretation: In the week ending 10 April, six returned travellers were reported as having a COVID-19 VoC, which is 18% (6/34) of all cases reported this week.

Table 2b. Locally acquired COVID-19 cases by VoC and week reported, NSW, 29 November 2020 to 10 April 2021

	Week ending				29 Nov to 13 Mar	Total since 29 November
	10 Apr	3 Apr	27 March	20 March		
Total locally acquired cases	0	1	0	1	219	221
Local cases with VoC	0	1	0	1	1	3
B.1.1.7	0	1	0	1	1	3
% local cases with VoC	0	100%	0	100%	0.5%	1%

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

Figure 3. Confirmed overseas acquired COVID-19 cases by VoC type, NSW, 29 November to 10 April 2021



Interpretation: Since 29 November 2020 there have been 108 returned travellers diagnosed with a COVID-19 VoC. In the last four weeks 35% (33/95) of overseas acquired cases 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, 14 March to 10 April 2021

Local Health District	Week ending				Total	Days since last case reported
	10 Apr	3 Apr	27 Mar	20 Mar		
Central Coast	0	0	0	0	0	102
Illawarra Shoalhaven	0	0	0	0	0	98
Nepean Blue Mountains	0	0	0	0	0	207
Northern Sydney	0	0	0	0	0	89
South Eastern Sydney	0	0	0	0	0	28
South Western Sydney	0	0	0	0	0	92
Sydney	0	0	0	0	0	89
Western Sydney	0	0	0	0	0	84
Far West	0	0	0	0	0	373
Hunter New England	0	0	0	0	0	247
Mid North Coast	0	0	0	0	0	354
Murrumbidgee	0	0	0	0	0	215
Northern NSW	0	1	0	0	1	11
Southern NSW	0	0	0	0	0	173
Western NSW	0	0	0	0	0	254
NSW*	0	1	0	1*	2*	11

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

Interpretation: There were no locally acquired cases reported in the week ending 10 April. In the last four weeks there were two locally acquired cases diagnosed with COVID-19. One was associated with the hotel quarantine cluster, and another associated with the Queensland cluster (see below).

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 have been 698 close and 108 casual contacts followed up in response to the Queensland cluster and the subsequent case in the Northern NSW resident. No further community transmission has been detected.

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

There were no cases reported in the last week who were linked to recent clusters.

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.

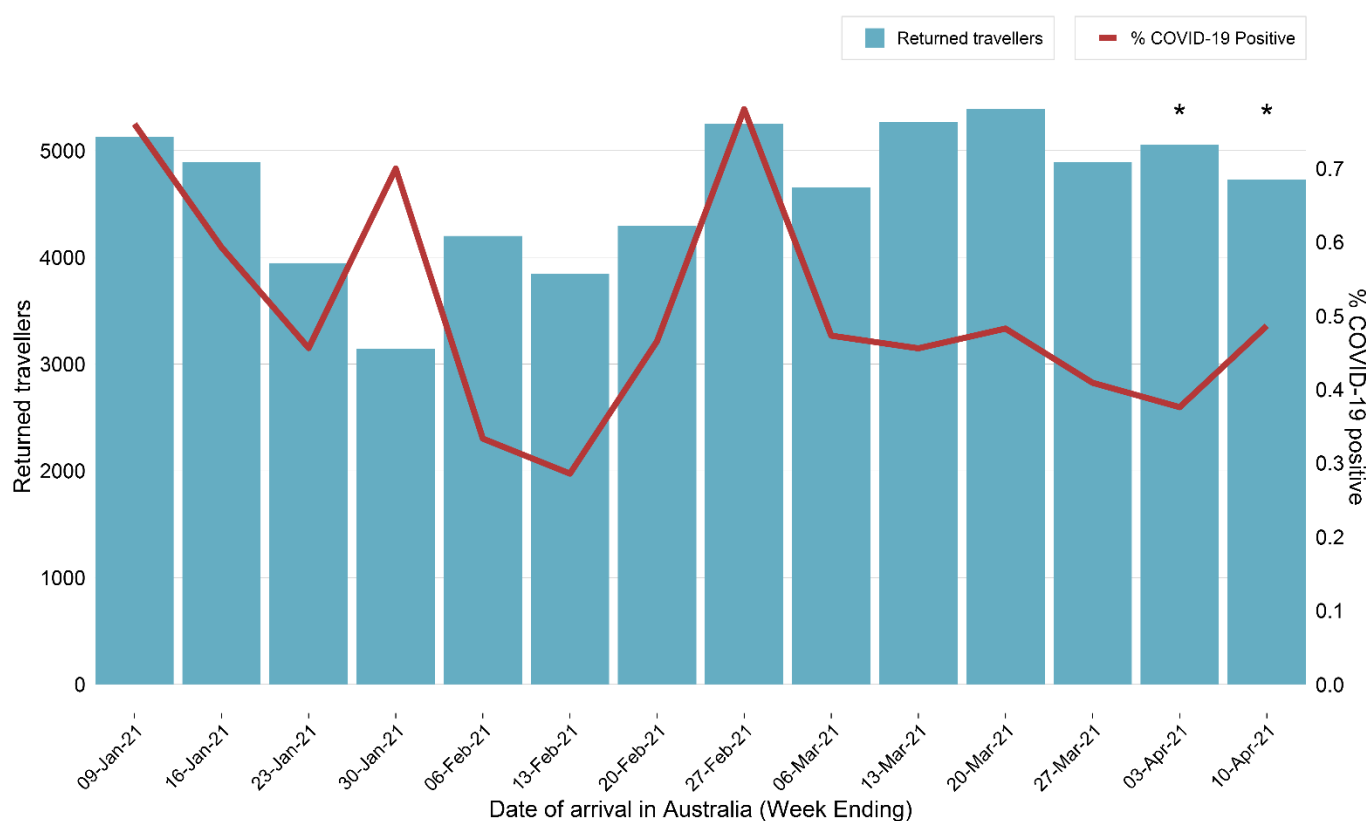
Section 5: COVID-19 in returned travellers

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 4. Returned travellers screened at Sydney International Airport by week of arrival and percent COVID-19 positive, NSW, 3 January 2021 to 10 April 2021



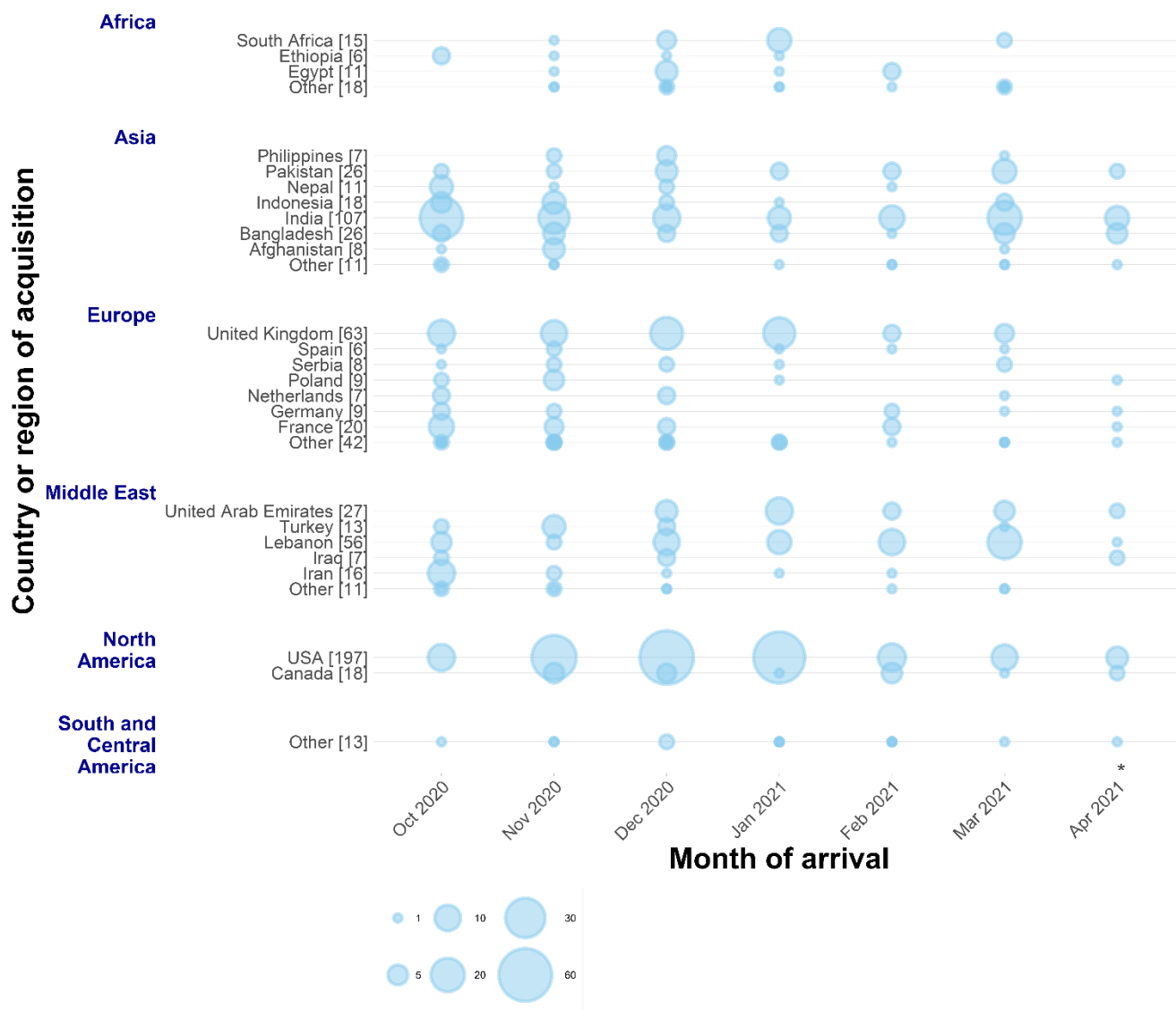
*Returned travellers entering Australia in the past 14 days are still in quarantine and may return a positive result prior to the end of their hotel quarantine period.

Interpretation: Since 3 January 2021, there has been on average 660 people screened on arrival through Sydney International Airport daily. In the last four weeks, 95 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 5. Overseas acquired COVID-19 cases by country of acquisition and arrival month, NSW, 1 October 2020 to 10 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, Bangladesh 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 95 COVID-positive travellers 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, 14 March to 10 April 2021

Country of acquisition of COVID-19	Number (%) of cases in the last four weeks
India	21 (22%)
Bangladesh	9 (9%)
Lebanon	9 (9%)
United States of America	9 (9%)
Pakistan	7 (7%)
United Arab Emirates	6 (6%)
Canada	3 (3%)
Papua New Guinea	3 (3%)
Indonesia	2 (2%)
Iraq	2 (2%)
Other	24 (25%)
Total	95

Interpretation: In the last four weeks, travellers returning from India accounted for the largest number of overseas acquired cases (21, 22%), followed by travellers returning from Bangladesh (9, 9%), Lebanon (9, 9%) and United States of America (9, 9%).

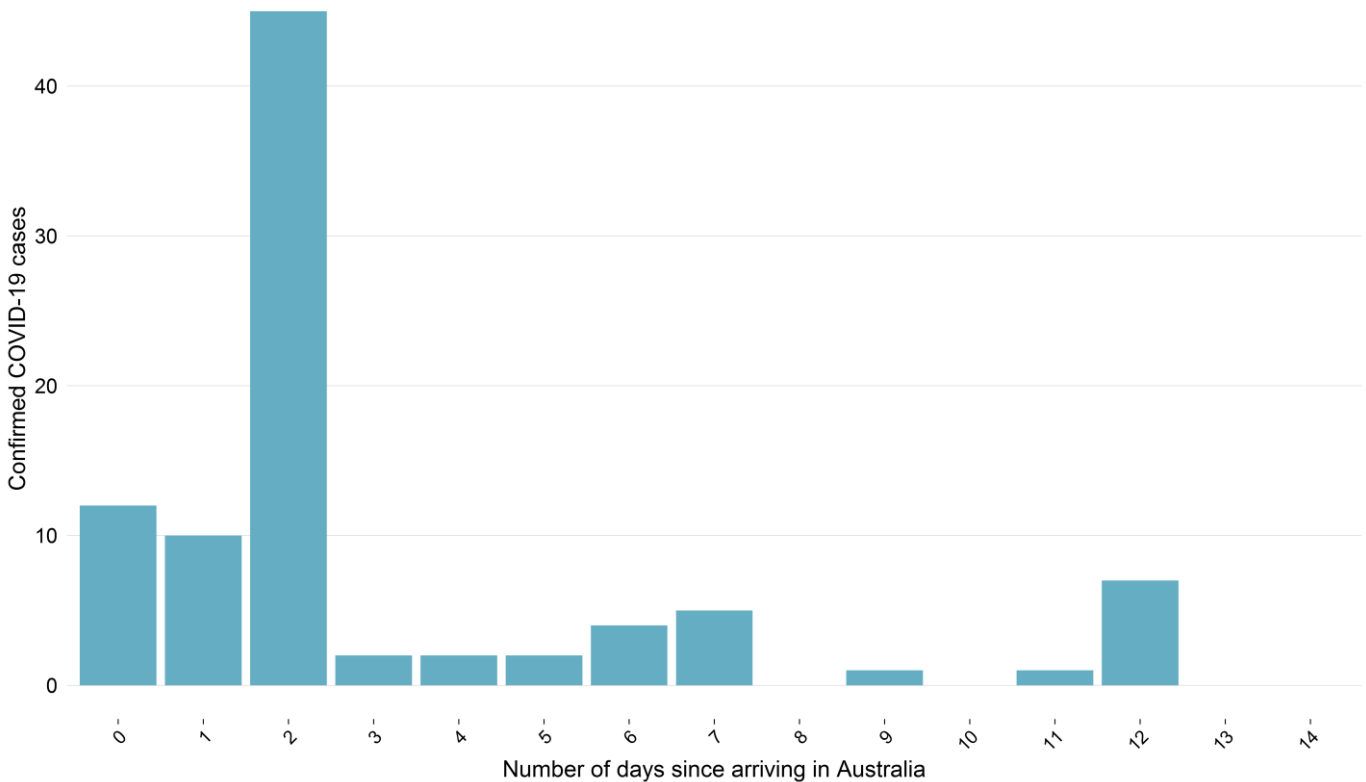
Hotel quarantine

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 6. 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, 14 March to 10 April 2021



Interpretation: In the four weeks ending 10 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 10 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

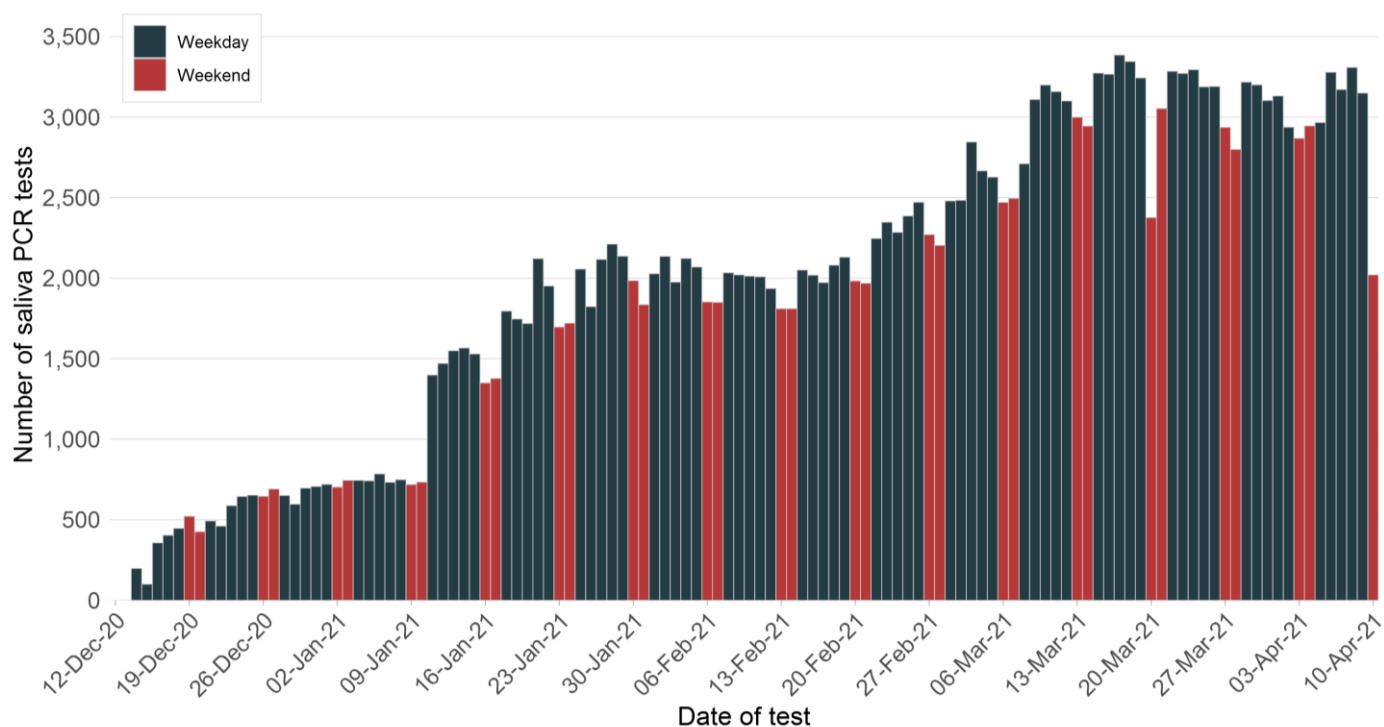
Aboriginal and Torres Strait Islander communities are recognised as a priority group due to key drivers of increased risk of transmission and severity of COVID-19 which include mobility, remoteness, barriers to access including institutional racism and mistrust of mainstream health services, crowded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

Border and 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 7. Daily numbers of saliva PCR test results reported for border and quarantine workers, NSW, 12 December 2020 to 10 April 2021



* The number of saliva PCR tests on 10 April 2021 is incomplete due to delays in reporting negative results.

Interpretation: Since screening of quarantine workers began in December 2020, a total of 232,417 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 13 March 2021.

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 10 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	120	0%
5–11	0	124	0%
12–17	0	163	0%
18–29	0	1,162	0%
30–49	0	1,678	0%
50–59	1	696	0.1%
60–69	4	649	0.6%
70–79	15	389	3.9%
80+	36	164	22.0%
Total	56	5,145	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.

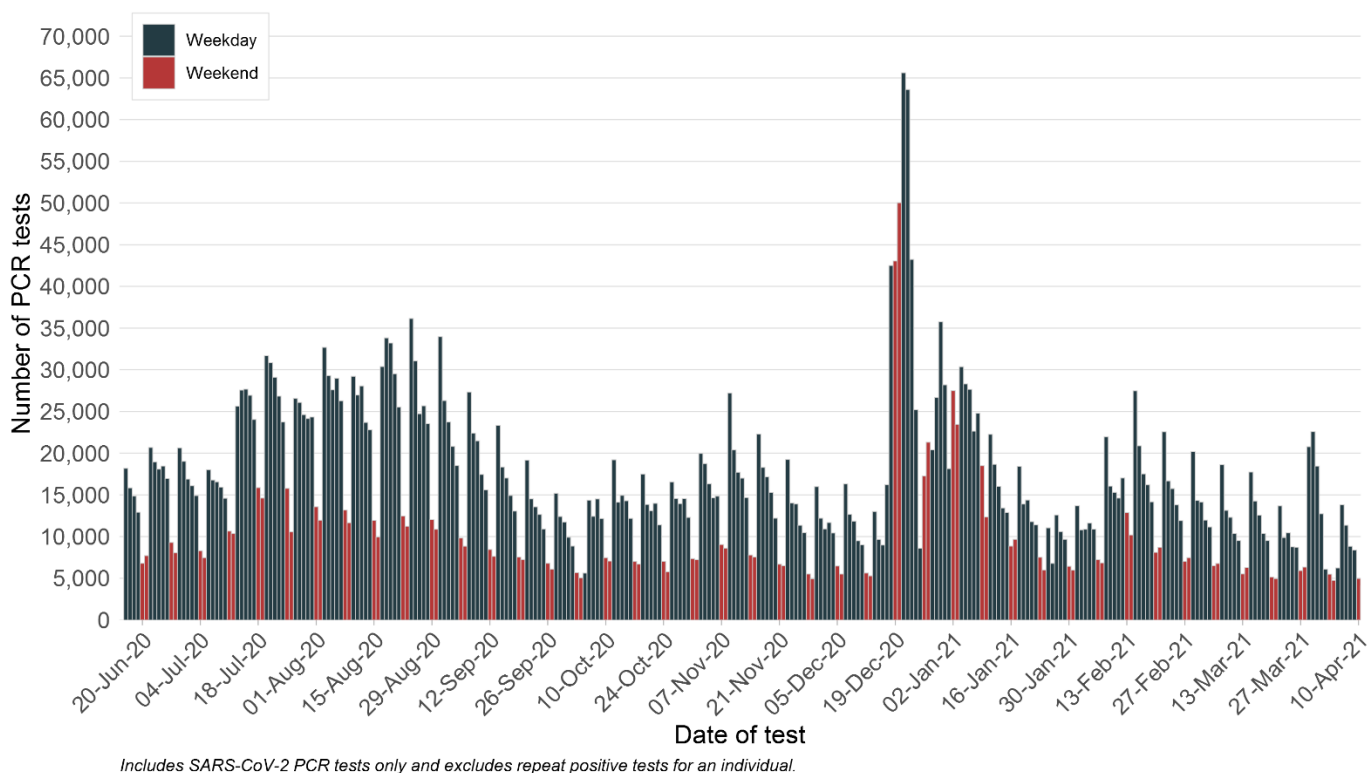
Section 8: COVID-19 testing in NSW

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 8. Number of PCR tests per day, NSW, 20 June 2020 to 10 April 2021

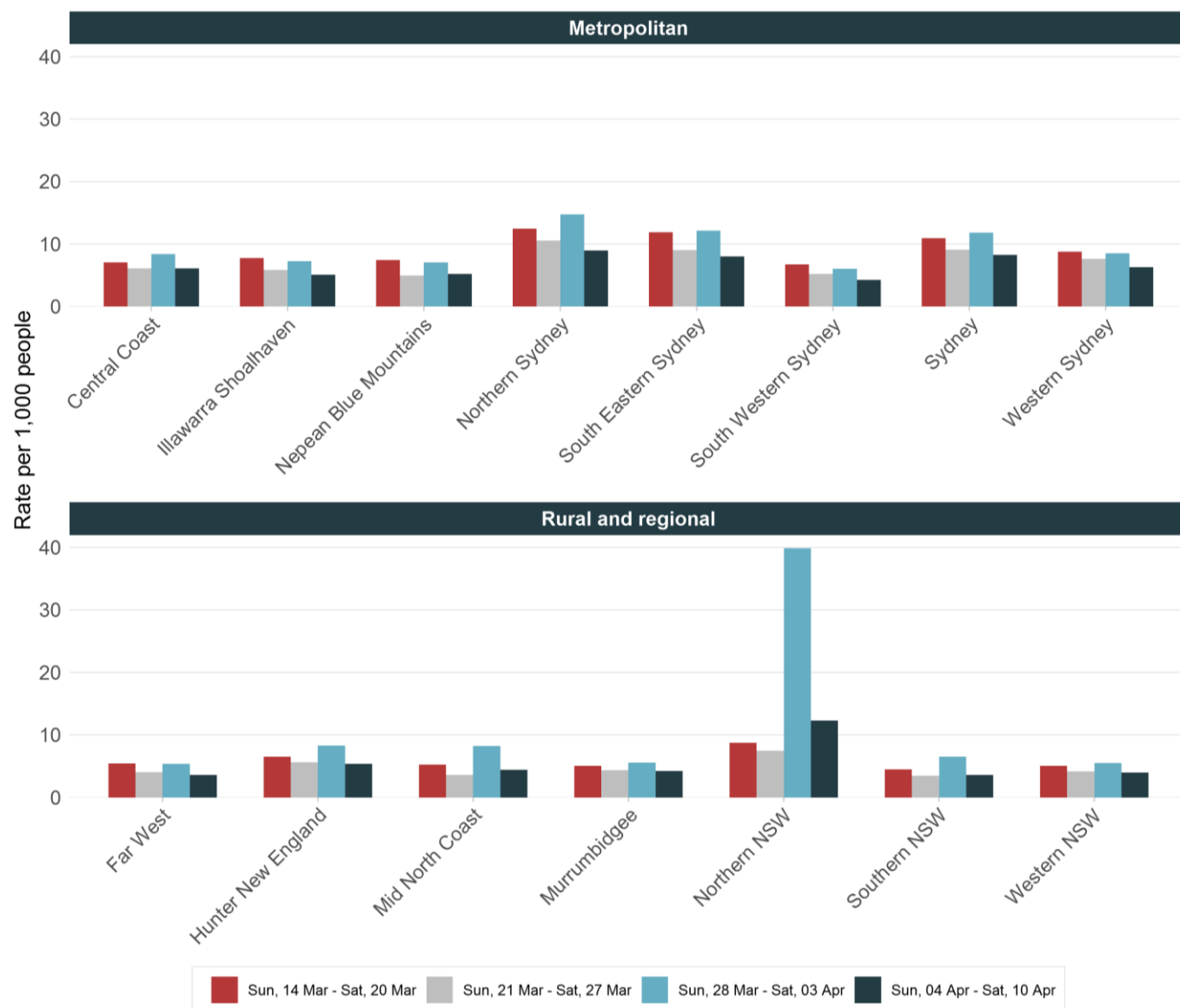


Interpretation: Testing numbers decreased in the week ending 10 April (down 37%) compared to the previous week. The average daily testing rate was 1.0 per 1,000 people in NSW compared to the previous week of 1.6 per 1,000 people.

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 9. Rates of COVID-19 testing by LHD of residence, NSW, 14 March to 10 April 2021

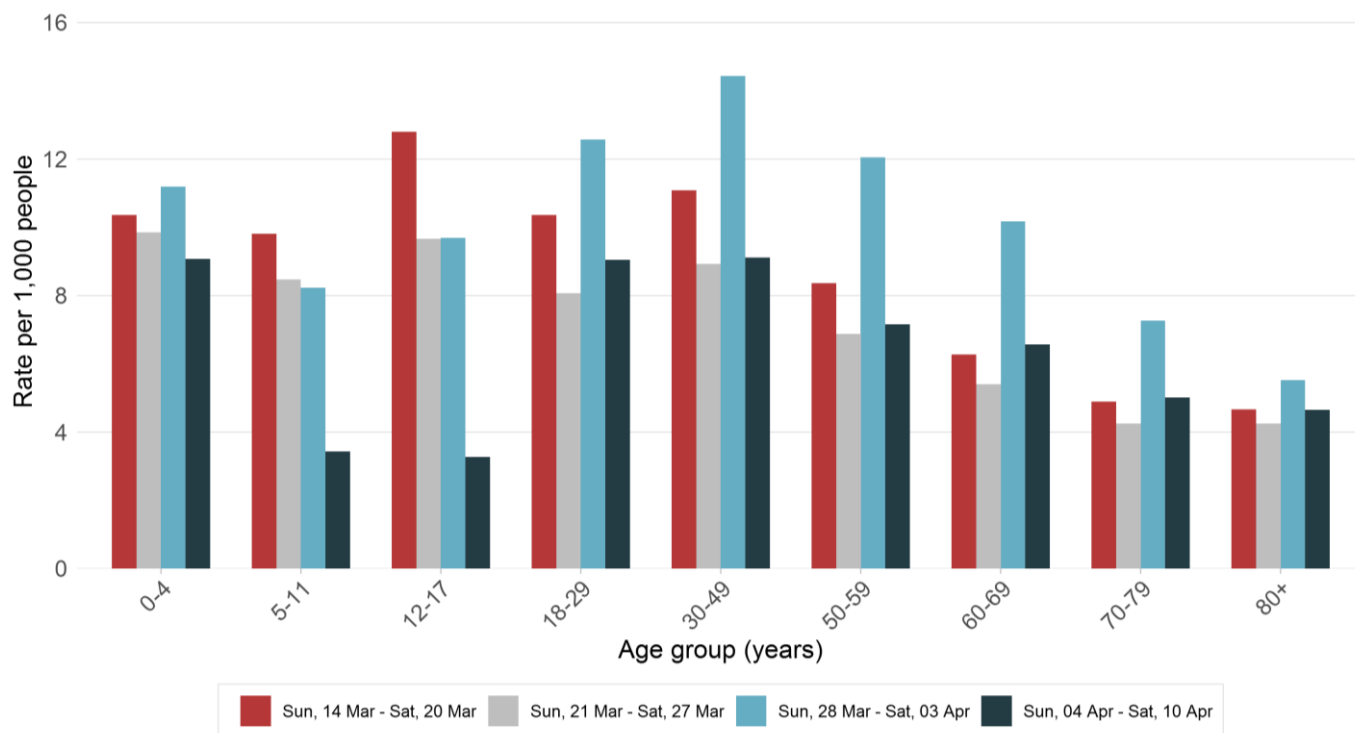


Includes SARS-CoV-2 PCR tests only and excludes notifications with missing postcode of residence.

Interpretation: State-wide testing rates in the week ending 10 April decreased for all LHDs compared to the previous week (7 per 1,000 people compared to 11 per 1,000 people). A decrease in the testing rate was seen in Northern NSW LHD, after a surge in testing as a result of NSW Health releasing multiple health alerts advising people who attended various venues in the Byron Bay to get tested.

Testing by age group

Figure 10. Rates of COVID-19 testing by age group and week, NSW, 14 March to 10 April 2021



Includes SARS-CoV-2 PCR tests only and excludes notifications with age missing.

Interpretation: In the week ending 10 April, testing rates decreased across all age groups. The largest relative decrease was seen in people aged 5–17 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. 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

		6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr	10-Apr
Pop.	Location	5	6	7	8	9	10	11	12	13	14
Sydney sewage treatment plant (inlet sites)											
318,810	Bondi	Rayt	Rayt	Rayt	n	n	n	n	n	n	n
1,857,740	Malabar 1	Rayt	SARS-CoV-2 not detected	Rayt	n	n	n	n	n	n	n
181,005	Liverpool	n	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected
161,200	Glenfield	Rayt	SARS-CoV-2 not detected	Rayt	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected
1,341,986	North Head	SARS-CoV-2 not detected	SARS-CoV-2 not detected	n	n	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected
Sydney network sites											
Bondi	Paddington Sewage Network	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	Rayt	Rayt	Rayt	Rayt	Rayt	Rayt	Rayt
Malabar	Homebush SPS	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	Rayt	SARS-CoV-2 not detected	Rayt	SARS-CoV-2 not detected
Malabar	Olympic Park	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	Rayt	SARS-CoV-2 not detected
Malabar	Botany Sewage Network	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	Rayt	Rayt	Rayt	Rayt	Rayt	Rayt	Rayt
North Head	Auburn Sewage Network	SARS-CoV-2 not detected	SARS-CoV-2 not detected	Rayt	Rayt	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected
Liverpool	Ireland Park Sewage Network	Rayt	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected
Regional sites											
7,700	Lennox Head	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	SARS-CoV-2 not detected	Rayt	SARS-CoV-2 not detected

Sampling commenced week ending 18 July 2020

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

Interpretation: In the week ending 10 April, 161 sewage samples were tested for fragments of SARS-CoV-2. Of these, there were four detections – taken from the Bondi and Malabar treatment plants, and the sewage network at Paddington (within the Bondi catchment). These areas all receive sewage from quarantine hotels with known cases. There were no regional detections.

Section 10: Other respiratory infections in NSW

Influenza and other respiratory virus cases and tests reported in NSW, up to 4 April 2021

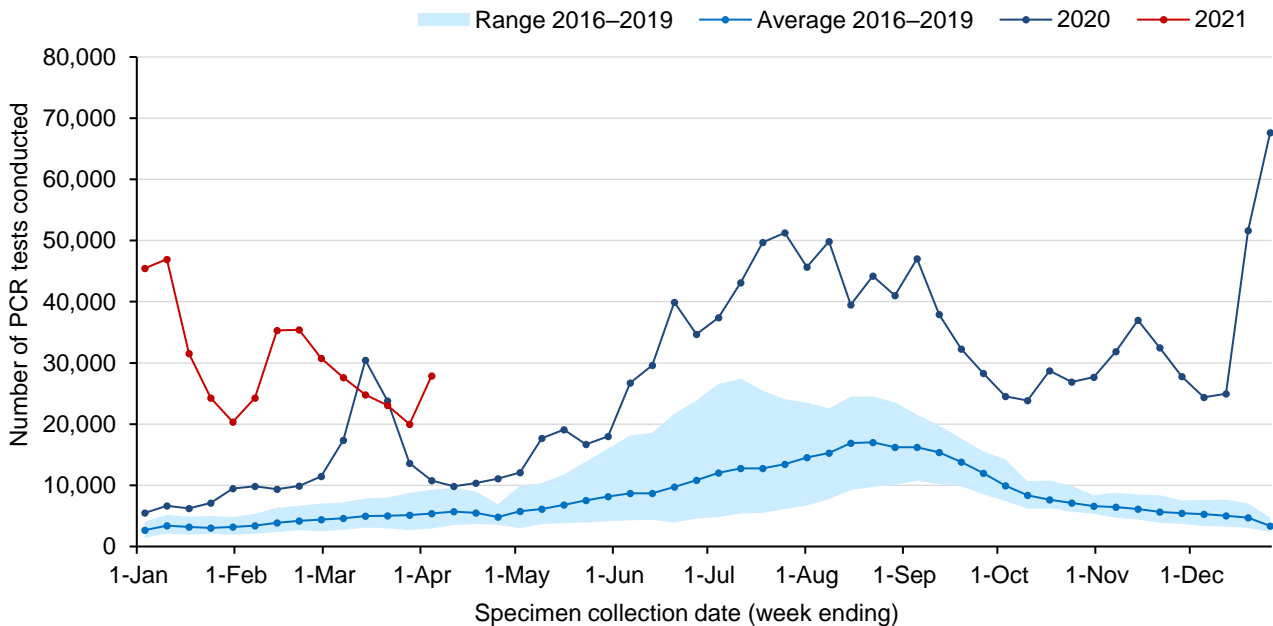
In NSW, routine surveillance for influenza and other respiratory viruses is conducted through sentinel laboratories. The number of all PCR tests (positive and negative) are provided to NSW Health by participating laboratories each week. Testing counts reflect the number of influenza PCR tests conducted;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

The most recent data available is for testing carried out to 4 April 2021. A total of 417,643 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 11. Testing for influenza by week, NSW, 1 January 2016 to 4 April 2021

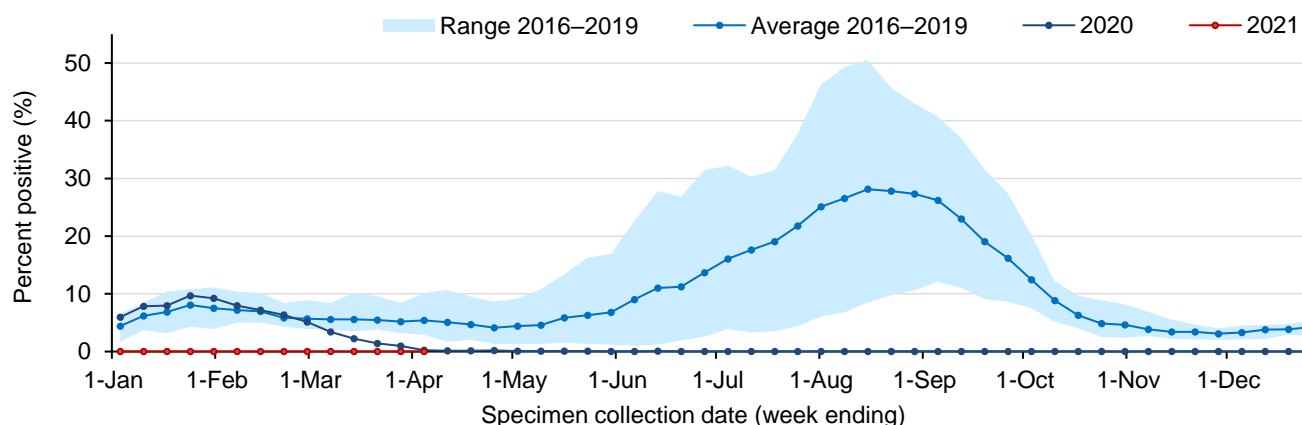


Interpretation: In the week ending 4 April, the number of influenza tests increased sharply with 27,871 influenza tests performed across participating laboratories compared with 19,986 the previous week. Testing for influenza continues to exceed the four-year average for this time of year.

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 12. Proportion of tests positive for influenza, NSW, 1 January 2016 to 4 April 2021

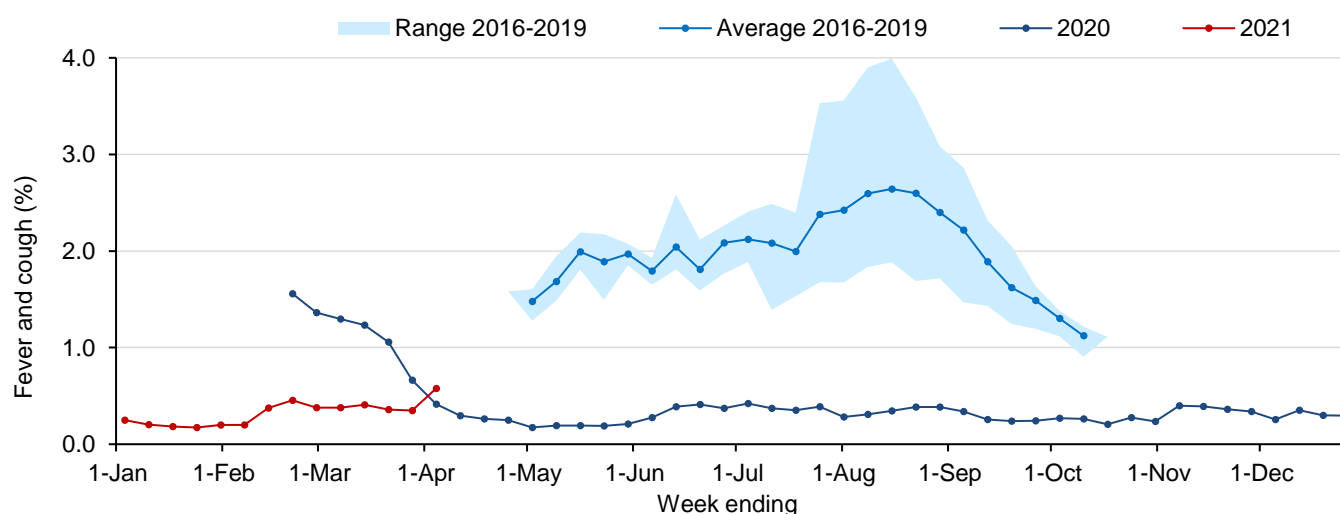


Interpretation: In the week ending 28 March, the percent of influenza tests that were positive continued to be very low (<0.01%), indicating limited influenza transmission in the community. Since early March 2020, this percentage has remained far lower than the usual range for the time of year.

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



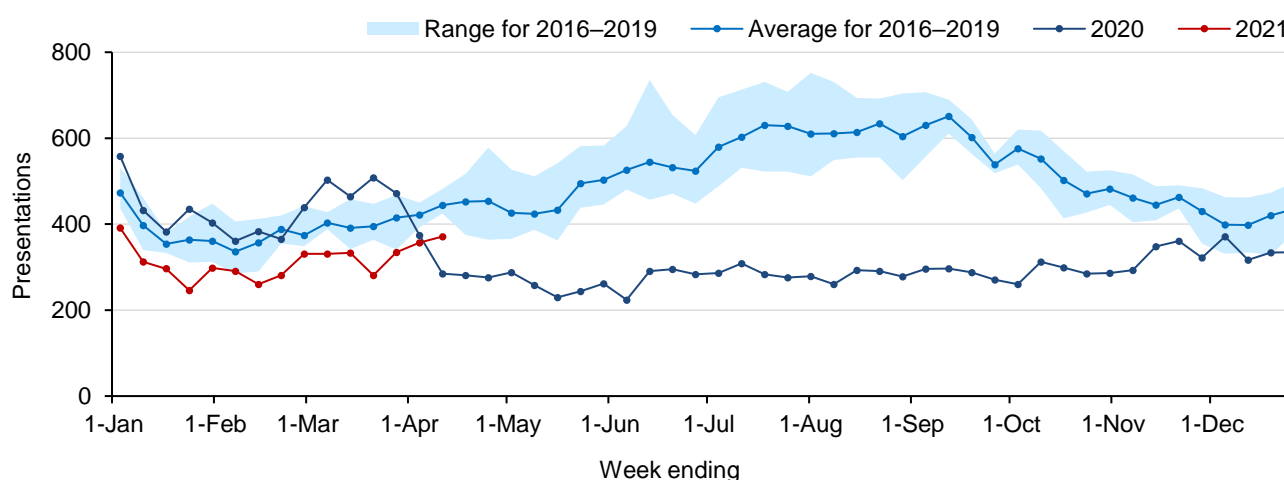
Interpretation: In NSW in the week ending 4 April of the 16,085 people surveyed, 93 people (0.58%) reported flu-like symptoms. In the last four weeks, 54% (160/297) of new cases of flu-like illness reported having a COVID-19 test. The proportion of people being tested for COVID-19 has been steadily decreasing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

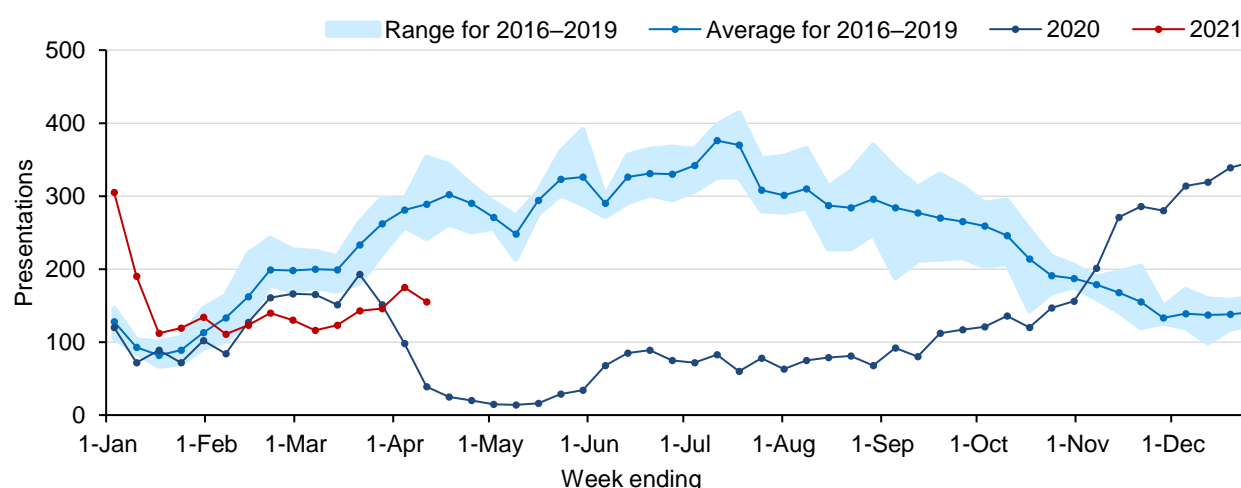
The figures below show weekly pneumonia, bronchiolitis and gastrointestinal presentations to Emergency Departments in NSW, using PHREDSS². The red line shows the weekly counts for 2021, the dark blue line showing counts for 2020, the light blue line showing the average for 2016 to 2019 and the shaded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

Figure 14. Emergency Department pneumonia presentations, NSW, 1 January 2016 to 11 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 11 April, pneumonia presentations increased but remain below the seasonal range for this time of year.

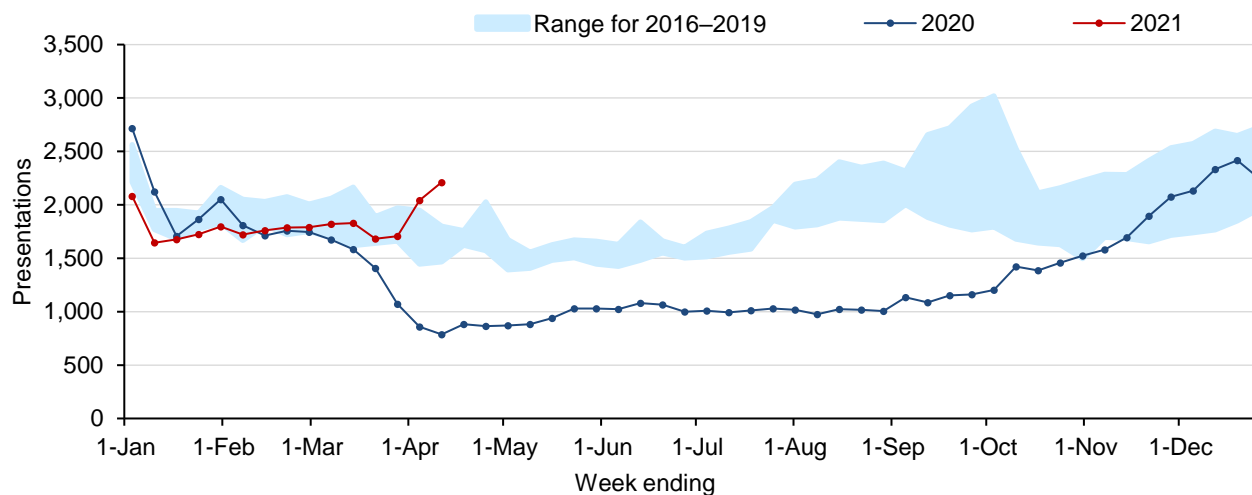
Figure 15. Emergency Department bronchiolitis presentations, NSW, 1 January 2016 to 11 April 2021



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 11 April, bronchiolitis presentations decreased and 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 16. Emergency Department gastrointestinal presentations, NSW, 1 January 2016 to 11 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 11 April, gastroenteritis presentations increased for the second week in a row, and have surpassed the average range for 2016–2019. 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		
		10-April		3-April		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	2164	6.13	2961	8.39	200433	568.02	
	Balranald	3	1.28	8	3.42	669	286.14	
	Broken Hill	71	4.06	120	6.87	8936	511.24	
Far West	Central Darling	3	1.63	2	1.09	534	290.38	
	Wentworth	31	4.4	32	4.54	3269	463.49	
	LHD Total ²	108	3.58	162	5.37	13408	444.8	
	Armidale Regional	167	5.43	362	11.76	14057	456.71	
	Cessnock	209	3.48	246	4.1	20890	348.25	
	Dungog	36	3.82	41	4.35	3405	361.35	
	Glen Innes Severn	29	3.27	96	10.82	2568	289.48	
	Gunnedah	59	4.65	81	6.39	4433	349.58	
	Gwydir	14	2.62	48	8.97	961	179.53	
	Inverell	86	5.09	190	11.25	5753	340.62	
	Lake Macquarie	1342	6.52	1882	9.14	123102	597.87	
	Liverpool Plains	33	4.18	27	3.42	2863	362.27	
	Maitland	584	6.86	957	11.24	55718	654.23	
Hunter New England	Mid-Coast	282	3.01	396	4.22	33260	354.45	
	Moree Plains	42	3.17	101	7.62	4075	307.29	
	Muswellbrook	47	2.87	59	3.6	6157	375.95	
	Narrabri	40	3.05	80	6.09	3470	264.18	
	Newcastle	1228	7.42	1930	11.66	120001	724.77	
	Port Stephens	366	4.98	504	6.86	38708	526.78	
	Singleton	108	4.6	175	7.46	12740	543.03	
	Tamworth Regional	317	5.07	522	8.35	30568	488.77	
	Tenterfield	23	3.49	73	11.07	1580	239.61	
	Upper Hunter Shire	54	3.81	99	6.98	5659	399.08	
	Uralla	23	3.83	34	5.66	1707	283.93	
	Walcha	14	4.47	39	12.44	1253	399.81	
		LHD Total ²	5102	5.36	7922	8.32	492537	517.16
	Illawarra Shoalhaven	Kiama	106	4.53	176	7.53	14233	608.61
Shellharbour		370	5.05	487	6.65	43350	591.95	
Shoalhaven		349	3.3	562	5.32	47841	452.83	
Wollongong		1305	5.98	1823	8.36	137959	632.51	
LHD Total ²		2130	5.08	3048	7.26	243383	580.02	
Mid North Coast	Bellingen	67	5.16	136	10.46	5426	417.51	
	Coffs Harbour	355	4.59	799	10.34	28694	371.31	
	Kempsey	127	4.27	192	6.45	12483	419.67	
	Nambucca	76	3.84	151	7.62	6816	344.16	
	Port Macquarie-Hastings	366	4.33	583	6.9	36546	432.37	

Local Health District	Local Government Area	Week ending				Total since January 2021	
		10-April		3-April			
		No.	Tests per 1,000 population	No.	Tests per 1,000 population	No.	Tests per 1,000 population
	<i>LHD Total²</i>	991	4.39	1861	8.25	89965	398.67
Murrumbidgee	Albury	308	5.67	454	8.35	24583	452.28
	Berrigan	17	1.94	30	3.43	2424	277.03
	Bland	19	3.18	23	3.85	1954	327.19
	Carrathool	3	1.07	4	1.43	434	155.06
	Coolamon	22	5.07	24	5.53	1737	400.14
	Cootamundra-Gundagai Regional	31	2.76	35	3.12	3932	349.98
	Edward River	21	2.31	24	2.64	3293	362.51
	Federation	53	4.26	62	4.99	4030	324.03
	Greater Hume Shire	47	4.37	59	5.48	4206	390.75
	Griffith	126	4.66	151	5.59	12078	446.85
	Hay	3	1.02	7	2.37	681	230.93
	Hilltops	78	4.17	98	5.24	7063	377.62
	Junee	13	1.95	22	3.29	1816	271.73
	Lachlan ¹	12	1.98	13	2.14	1228	202.14
	Leeton	32	2.8	46	4.02	3573	312.19
	Lockhart	10	3.04	11	3.35	1031	313.85
	Murray River	5	0.41	16	1.32	1076	88.79
	Murrumbidgee	4	1.02	10	2.55	1059	270.36
	Narrandera	12	2.03	10	1.7	1408	238.68
	Snowy Valleys	39	2.69	63	4.35	5497	379.65
Temora	14	2.22	16	2.54	1669	264.63	
Wagga Wagga	404	6.19	498	7.63	35161	538.8	
	<i>LHD Total²</i>	1263	4.24	1666	5.59	119108	399.55
Nepean Blue Mountains	Blue Mountains	484	6.12	719	9.09	60725	767.52
	Hawkesbury	256	3.8	323	4.8	41371	614.76
	Lithgow	77	3.56	83	3.84	8548	395.65
	Penrith	1246	5.85	1647	7.73	146384	687.32
	<i>LHD Total²</i>	2046	5.23	2757	7.05	255017	652.24
Northern NSW	Ballina	1405	31.48	3480	77.98	26161	586.2
	Byron	840	23.94	3523	100.42	23487	669.51
	Clarence Valley	230	4.45	562	10.88	16115	311.93
	Kyogle	36	4.09	117	13.3	2624	298.32
	Lismore	437	10	1899	43.46	22647	518.33
	Richmond Valley	168	7.16	500	21.31	9976	425.14
	Tenterfield	23	3.49	73	11.07	1580	239.61
	Tweed	695	7.16	2273	23.43	37051	381.97
	<i>LHD Total²</i>	3812	12.28	12372	39.86	138418	445.99
Northern Sydney	Hornsby	1009	6.64	1592	10.47	97690	642.45
	Hunters Hill	192	12.82	376	25.1	21896	1461.68
	Ku-ring-gai	1365	10.74	2217	17.44	128812	1013.05
	Lane Cove	600	14.94	1056	26.3	62068	1545.71
	Mosman	294	9.49	467	15.07	26308	849.17

Local Health District	Local Government Area	Week ending				Total since January 2021	
		10-April		3-April			
		No.	Tests per 1,000 population	No.	Tests per 1,000 population	No.	Tests per 1,000 population
	North Sydney	644	8.58	986	13.14	48281	643.57
	Northern Beaches	2472	9.04	4220	15.43	330484	1208.36
	Parramatta ¹	1700	6.61	2339	9.09	143059	556.22
	Ryde	1019	7.76	1742	13.27	90632	690.42
	Willoughby	624	7.69	903	11.12	49914	614.79
	<i>LHD Total²</i>	8601	9	14127	14.78	885089	925.9
South Eastern Sydney	Bayside	1123	6.29	1455	8.16	94530	529.89
	Georges River	899	5.64	1280	8.03	80812	506.75
	Randwick	1422	9.14	2283	14.67	129036	829.02
	Sutherland Shire	1575	6.83	2569	11.14	167658	727.02
	Sydney ¹	2822	11.46	3938	15.99	210394	854.07
	Waverley	793	10.67	1264	17.01	73908	994.79
	Woollahra	868	14.62	1409	23.73	63329	1066.38
	<i>LHD Total²</i>	7688	8.02	11676	12.17	685462	714.69
South Western Sydney	Camden	603	5.94	960	9.46	87455	862.16
	Campbelltown	908	5.31	1215	7.11	117768	688.93
	Canterbury-Bankstown ¹	1851	4.9	2549	6.74	205462	543.67
	Fairfield	631	2.98	818	3.86	91257	431.08
	Liverpool	952	4.18	1421	6.24	143221	629.31
	Wingecarribee	295	5.77	433	8.47	37400	731.41
	Wollondilly	191	3.59	250	4.7	25090	472.07
	<i>LHD Total²</i>	4449	4.28	6282	6.05	602863	580.49
Southern NSW	Bega Valley	121	3.51	139	4.03	13268	384.85
	Eurobodalla	159	4.13	261	6.78	20216	525.46
	Goulburn Mulwaree	135	4.34	187	6.01	14075	452.11
	Queanbeyan-Palerang Regional	209	3.42	519	8.49	19686	322.19
	Snowy Monaro Regional	64	3.08	133	6.4	8490	408.27
	Upper Lachlan Shire	38	4.72	48	5.96	3132	388.63
	Yass Valley	54	3.16	127	7.43	4760	278.57
	<i>LHD Total²</i>	780	3.59	1414	6.51	83657	385.39
Sydney	Burwood	191	4.7	277	6.82	19190	472.52
	Canada Bay	763	7.94	1126	11.72	73483	764.86
	Canterbury-Bankstown ¹	1851	4.9	2549	6.74	205462	543.67
	Inner West	1715	8.54	2498	12.44	170498	849.05
	Strathfield	342	7.29	475	10.12	33619	716.43
	Sydney ¹	2822	11.46	3938	15.99	210394	854.07
	<i>LHD Total²</i>	5776	8.29	8228	11.81	531806	763.24
Western NSW	Bathurst Regional	171	3.92	255	5.85	23632	541.79
	Blayney	41	5.56	40	5.42	3896	527.98
	Bogan	11	4.26	19	7.36	1043	404.26
	Bourke	4	1.54	8	3.09	632	244.02
	Brewarrina	2	1.24	1	0.62	361	224.08
	Cabonne	25	1.83	30	2.2	3968	291.04

Local Health District	Local Government Area	Week ending				Total since January 2021	
		10-April		3-April			
		No.	Tests per 1,000 population	No.	Tests per 1,000 population	No.	Tests per 1,000 population
	Cobar	8	1.72	14	3.01	1325	284.46
	Coonamble	8	2.02	11	2.78	1118	282.47
	Cowra	38	2.98	59	4.63	4346	341.05
	Dubbo Regional	216	4.02	334	6.22	22947	427.17
	Forbes	31	3.13	32	3.23	2662	268.73
	Gilgandra	8	1.89	10	2.36	1123	264.92
	Lachlan ¹	12	1.98	13	2.14	1228	202.14
	Mid-Western Regional	100	3.96	158	6.26	10540	417.41
	Narromine	18	2.76	19	2.92	2169	332.82
	Oberon	18	3.33	27	4.99	2024	374.05
	Orange	298	7.02	374	8.81	27081	637.94
	Parkes	41	2.76	56	3.77	5017	338.14
	Walgett	21	3.53	40	6.72	1878	315.47
	Warren	18	6.67	23	8.53	1581	586.21
	Warrumbungle Shire	25	2.69	35	3.77	3373	363.55
	Weddin	17	4.71	18	4.98	1040	287.85
	<i>LHD Total</i> ²	1129	3.96	1573	5.52	122629	430.26
Western Sydney	Blacktown	2227	5.95	3051	8.15	240314	641.78
	Cumberland	1459	6.04	1644	6.81	153099	633.9
	Parramatta ¹	1700	6.61	2339	9.09	143059	556.22
	The Hills Shire	1607	9.03	2442	13.72	157075	882.6
	<i>LHD Total</i> ²	6661	6.32	8958	8.5	670675	636.66
NSW Total ³		58345	7.21	92442	11.43	1313784	162.4

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 4 April 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 2020–4 April 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	417,643	3	0.00%	0	0.00%	1,342	548	7,570	21,099	63	2,657
Month ending											
31 January*	168,596	1	0.00%	0	0.00%	416	88	3,275	3,541	23	560
28 February	125,718	2	0.00%	0	0.00%	419	106	2,386	8,667	22	910
28 March	95,458	0	0.00%	0	0.00%	507	354	1,909	8,891	18	1,187
Week ending											
4 April	27,871	0	0.00%	0	0.00%	173	221	365	1,773	13	270

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

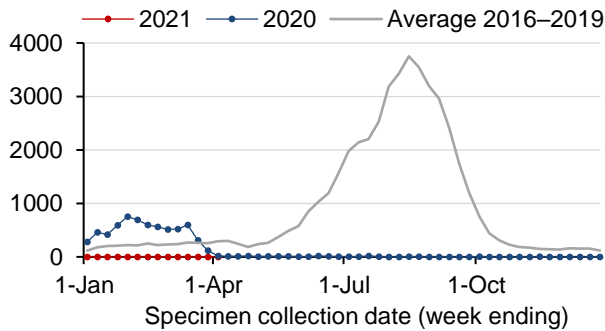
RSV - Respiratory syncytial virus

*Five-week period

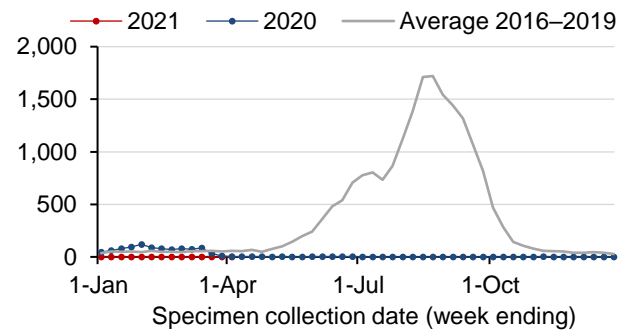
Appendix C: Number of positive PCR test results for influenza and other respiratory viruses at sentinel NSW laboratories, January 2020 to 4 April 2021

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.

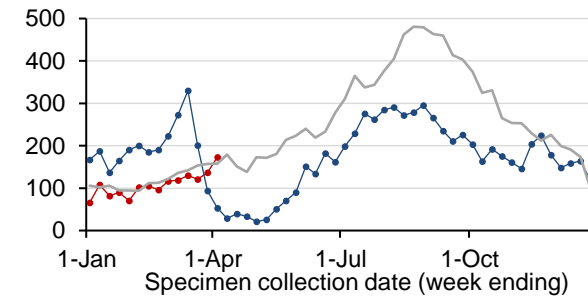
Influenza A



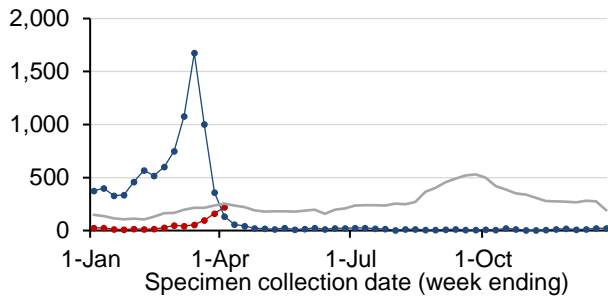
Influenza B



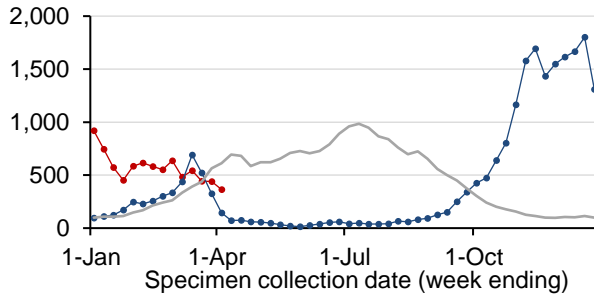
Adenovirus



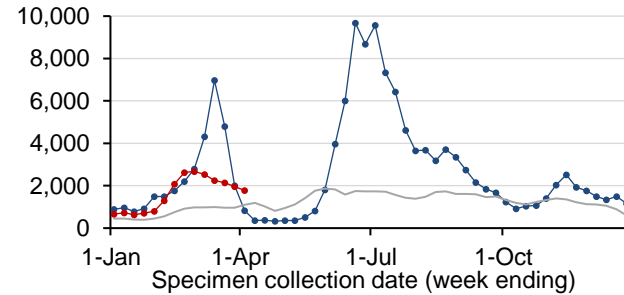
Parainfluenza



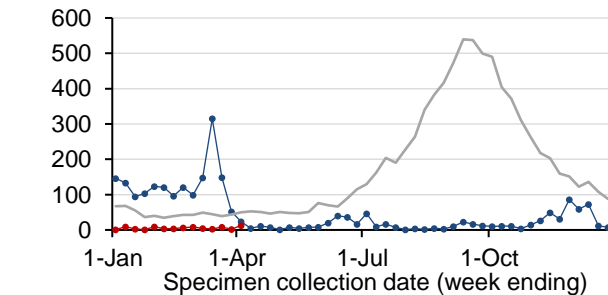
Respiratory syncytial virus (RSV)



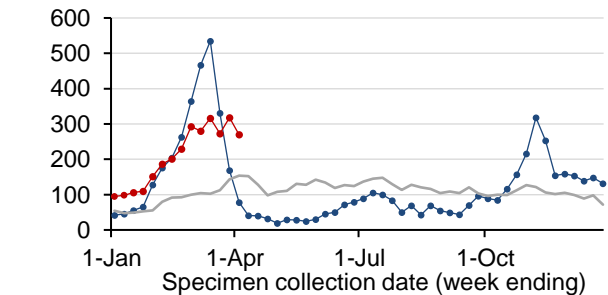
Rhinovirus



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 10 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		6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr	10-Apr
Pop.	Location	5	6	7	8	9	10	11	12	13	14
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	n
233,176	Cronulla										
1,857,740	Malabar 1				n	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		6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr	10-Apr
Network	Location	5	6	7	8	9	10	11	12	13	14
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		6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr	10-Apr
Pop.	Location	5	6	7	8	9	10	11	12	13	14
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 -Koorringal STP										
2,050	Bourke										
	Nyngan										

Regional Sites (con't)		6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr	10-Apr
Pop.	Location	5	6	7	8	9	10	11	12	13	14
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)		6-Feb	13-Feb	20-Feb	27-Feb	6-Mar	13-Mar	20-Mar	27-Mar	3-Apr	10-Apr
Pop.	Location	5	6	7	8	9	10	11	12	13	14
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>