



# COVID-19 Risk Monitoring Dashboard – Healthcare settings

Date of release:  
19 Apr 2023

This dashboard provides an assessment of transmission risk in healthcare settings – it is not an assessment of risk in the community.

## Overall status

### Yellow

The number of reported cases has increased, and the growth factor is currently 1.03 - indicating a 3% increase per day. Ward admissions, occupancy and the number of staff furloughed have also increased. Staff are reminded to comply with infection control measures; and not attend work with acute respiratory infection (ARI) symptoms. The risk status remains at Yellow (for information, see the updated COVID [IPAC manual](#)).

## Categories

- Green
- Yellow
- Amber
- Red

## Local transmission



	Week ending 17 Apr 2023	Previous week
Number of cases (PCR + RAT)	<b>11,581<sup>#</sup></b>	9,363 <sup>#</sup>
7-day average daily cases	<b>1,838<sup>#</sup></b>	1,172 <sup>#</sup>
Average growth factor, cases	<b>1.03<sup>#</sup></b>	1.00 <sup>#</sup>
% of cases by age group		
<12 /	<b>7%</b>	8%
12-17 /	<b>3%</b>	4%
18-59 /	<b>58%</b>	54%
60+	<b>33%</b>	34%
Number of LHDs with ≥ 5 average daily cases per 10 000 population	<b>0</b>	0
Number of LHDs with average growth factor > 1.10	<b>1</b>	0

## Public health



	Week ending 16 Apr 2023	Previous week
% PCR positive cases contacted by stop and stay message within 1 day	<b>91%</b>	90%
% of cases hospitalised with		
0 dose or no information /	<b>17.9%</b>	17.1%
1 dose /	<b>1.0%</b>	1.0%
2 doses /	<b>11.0%</b>	10.4%
3 doses /	<b>23.9%</b>	21.8%
4 or more doses	<b>46.3%</b>	49.7%
vaccinated (as of 16 Apr)		
Late presentations within 2 days of positive test # (% hospitalisations)	<b>231 (55%)</b>	126 (52%)
% of population vaccinated with at least 2 doses (age 16+) (29 Mar)	<b>96%</b>	96%
% of population vaccinated with at least 3 doses (age 16+) (29 Mar)	<b>70.6%</b>	70.6%
New cases in neighbour jurisdictions	<b>Week ending (14 Apr)</b>	<b>% change from previous week</b>
<b>VIC</b>	<b>5,811</b>	<b>↑1%</b>
<b>QLD</b>	<b>3,472</b>	<b>↓12%</b>

## Healthcare setting



	As at 17 Apr 2023	Previous week
Number of cases on wards	<b>1,129</b>	1,041
Number of cases in ICU	<b>23</b>	23
Average length of stay of admissions (days / cases), discharged in the week ending 17 Apr	<b>8.7 / 734</b>	8.7 / 551
Average length of stay of ICU (days / cases), discharged in the week ending 17 Apr	<b>4.8 / 40</b>	4.0 / 35
Weekly new admissions to a ward / ICU	<b>562 / 33</b>	452 / 32
Number of cases self- managed (using 5 day isolation rule – see notes)	<b>4,673</b>	2,601
Number of LHDs with ≥20% hospitalisation capacity used by COVID-19 positive patients	<b>0</b>	0
Healthcare workers in isolation (19 Apr)		
- Community exposure	<b>549</b>	449
- Potential workplace exposure	<b>1</b>	4

<sup>#</sup>Reporting of cases, and case related indicators, were affected by the Easter Holidays. Smoothing has been applied to adjust for the artefactual effect. Cases before smoothing was 12,866 for week ending 17 Apr and 8,201 for the previous week.



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Indicators are updated and reviewed weekly by the Ministry of Health, the Public Health Emergency Operations Centre, NSW Health Workforce, the Agency for Clinical Innovation and the Clinical Excellence Commission. NSW health guidance will continue to be updated to manage risk as the pandemic progresses, please see the [CEC COVID-19 Infection Prevention and Control Response and Escalation Framework](#).

## Explanatory notes

### Local transmission

- The number of cases is sourced from the Notifiable Conditions Information Management System (NCIMS), including both PCR and RAT results. Cases by age percentages may not add up to 100% due to rounding. To note, 15.1%, 7.0%, 55.4%, and 22.5% of the population are aged under 12, 12-17, 18-59 and 60+ years.
- The growth factor is defined as the number of cases for the 7 days on the date indicated divided by the number of cases for the 7 days the day before.
- The average percent of tests that are positive is defined as the total number of tests with a positive result for the 7 days on the test conducted date indicated divided by the total number of tests for the 7 days on the same test conducted date, expressed as a percentage. The three most recent days of data will always report much lower testing numbers than any other day reported as the results are not yet available. Therefore, the three most recent days of testing data are excluded from calculations.
- The number of local health districts (LHDs) with cases is the number of LHDs with at least one case among its residents for the 7 days ending 4pm on the date indicated. Any cases from correctional services, Hotel Quarantine, or Network with Victoria are counted within case numbers but are not counted as an individual LHD.

### Public health

- The percent of cases contacted by text message within one day indicates cases who were messaged to advise of their positive result, provide isolation requirements and to identify high risk exposure settings. Cases who do not have a valid phone number are referred to NSW Police to identify details.
- Proportion of population at least 2 doses vaccinated and number of booster administered sourced from [Australian Government Department of Health - Vaccination numbers and statistics](#)
- COVID-19 cases hospitalised on the date of reporting are sourced from the NSW Health patient flow portal at 7pm on the date indicated, including all current admitted patients with COVID-19 regardless of the initial admission date and initial admission reason. Patients with 0 dose vaccination or no vaccination information include those with no linkable vaccination record.
- Late presentation within 2 days of positive tests is sourced from Epidemiology and Surveillance, NSW MOH. Proportion is calculated as number of hospitalisations on the same or next date after the case positive test was conducted, divided by the total hospitalisations, for the 7 day period (week ending). Hospitalisations do not include Hospital in the Home, Transit/Discharge Lounge, Ambulatory Care, Rehab, Corrective Services, Residential Age Care, Dialysis, Medi-Hotel, and Boarder.
- New cases in neighbouring jurisdictions is sourced from [Johns Hopkins Coronavirus Resource Center](#)

### Healthcare setting

- The number of cases on wards and in ICU are sourced from the NSW Health patient flow portal at 7pm on the date indicated. The current ICU numbers include adult, paediatric and neonatal intensive care cases. The definition for the number of cases self-managed changed from 7 day isolation period to 5 day isolation period on 09 September 2022. Comparison with previously published dashboards should be made with care.
- New hospitalisations for COVID-19 positive patients are extracted from the Patient Flow Portal daily at 7pm. Ward changes are not considered a new admission. Ward types include Short Stay Unit, ED, Hospital in the Home, Same Day Medical, Rehab, Palliative Care, and Residential Age Care. Transfers between hospitals are considered as separate hospitalisations. Counts may differ from acute hospital admissions reported elsewhere.
- Length of stay is calculated as number of days from admission date to last date of recorded stay in the NSW Health patient flow portal at 7pm. For cases discharged before 7pm on the date indicated, length of stay may be underestimated by one calendar date. Length of stay of admission may be underestimated among cases who were discharged from ICU and did not return to ward. Average length of stay is calculated after excluding admissions with length of stay more than 365 days and those with length of stay greater than two standard deviations from the mean of total COVID-19 positive patients.
- Healthcare workers include individuals who work within a hospital or other healthcare setting, including staff in direct or indirect contact with patients or infectious materials. Healthcare workers in isolation include NSW Health staff were isolated, either due to positive COVID-19 status, exposure to COVID-19, and/or whilst waiting a negative result, sourced from People, Culture, and Governance Office, NSW Ministry of Health.