



COVID-19 Risk Monitoring Dashboard – Healthcare settings

Date of release:
25 January 2022

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

Overall status

Red – system impacts

Overall, available metrics are pointing towards a stabilisation of the outbreak. The daily number of cases is decreasing, although there remains some uncertainty around levels of case ascertainment. PCR test volumes and positivity have decreased slightly but remain high. The number of cases cared for in hospital has increased slightly; and patient counts in intensive care units are fairly stable. The number of healthcare workers in isolation has decreased significantly.

Assessment category key

- Green
- Amber
- Red

Local transmission



	Week ending 23 Jan 2022	Previous week
Number of cases*	129,294	179,104
7-day average daily cases*	18,471	25,586
Average growth factor, cases*	0.95	0.97
% of cases by age group (<12 / 12-17 / 18-59 / 60+)	15 / 7 / 64 / 13	12 / 7 / 69 / 13
Average % of PCR tests that were positive week ending 21 Jan	20.8%	25.9%
Number of LHDs with average daily cases >100	14	14
Number of LHDs with average growth factor > 1.10	0	0
Number of LHDs with test positivity rate >5% Week ending 21 Jan	15	15

* Cases identified by rapid antigen tests are included from 21 Jan; comparisons with historical data should be made with care.

Public health



	Week ending 23 Jan 2022	Previous week
% PCR positive cases contacted by stop and stay message within 1 day	97%	98%
% of cases hospitalised unvaccinated / at least double vaccinated (Data as at 23 Jan)	25.8% / 71.8%	27.6% / 70.2%
% of cases in ICU who are unvaccinated / at least double vaccinated (Data as at 23 Jan)	36.3% / 62.7%	43.8% / 53.7%
Late presentations within 2 days of a positive test # (% hospitalisations)	1132 (32%)	1554 (37%)
% of population with 2+ vaccine doses (all ages)	79.8%	78.4%
% of population aged 18+ years with 3 doses	33.8%	N/A
New cases in neighbour jurisdictions (PCR + RAT results)		% change from previous week
VIC	129,453	↓48%
QLD	110,549	↓14%

Healthcare setting



	As at 23 Jan 2022	Previous week
Number of cases on wards / number of hospitals	2620 / 96	2573 / 92
Number of cases in ICU / number of hospitals	196 / 32	203 / 33
Average length of stay of admissions (days / cases), discharged in the week ending 23 Jan	6.0 / 3750	4.8 / 3351
Average length of stay of ICU (days / cases), discharged in the week ending 23 Jan	5.1 / 250	5.2 / 230
Weekly new admissions to a ward	3433	3506
Weekly new admissions to ICU	221	229
Number of cases self-managed	112,494	179,226
Healthcare workers in isolation (24 Jan)		
- Community exposure	4157	5379
- Potential workplace exposure	366	472



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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. The indicators cover virus spread and containment, capacity of laboratory services to respond, capacity within the health system, impact of COVID-19 on workforce, effectiveness of the public health system response, and an indication of the community response to public health messaging. For information 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 since 21 Jan 2022. Comparisons with historical data should be made with care. The data may differ from that reported in the media – the reason for the discrepancy is attribution of the RAT results to a particular day.
- 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 growth factor is the average of the growth factor for each of the past 7 days.
- 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 8pm 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.
- Vaccination data sourced from NSW Health via the Australian Government Department of Health Australian Immunisation Register. Estimated population rates calculated using population estimates at 30 June 2022, projected by the NSW Department of Planning, Industry and Environment. Population unvaccinated refers to neither partial (dose 1) or full (dose 2) vaccination.
- COVID-19 cases hospitalised / in ICU who are unvaccinated on the date of reporting are sourced from the NSW Health patient flow portal at 7pm on the date indicated.
- Late presentations are cases who are admitted on the day of their first positive test or only one day after testing positive. Data is sourced from Epidemiology and Surveillance, NSW MOH. The 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 available at: coronavirus.jhu.edu/map.html

Healthcare setting

- The number of cases on wards, in intensive care units (ICU), hospital in the home ([definition](#)), and out of hospital care, are sourced from the NSW Health patient flow portal at 7pm on the date indicated. The current ICU numbers include adult intensive care cases, PICU and NICU.
- New hospitalisations for COVID-19 patients are extracted from the Patient Flow Portal daily at 7pm. One admission is counted for patients who change wards during their hospital stay, based on the most severe ward type. Transfers between hospitals are considered as separate hospitalisations. A short stay not captured at the 7pm snapshot may not be counted (for example, patients who are admitted and discharged between two daily 7pm snapshot times). Data for NSW residents treated interstate are not available. Therefore, new hospitalisations for COVID-19 patients may be potentially underestimated.
- 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. Length of stay is an indicator for how long a case has been admitted rather than a measure of time from admission to discharge. 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.
- Self-managed cases definition has been changed since 13th Jan, data sourced from the NSW Health patient flow portal at 7pm on the date indicated.
- 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 in isolation due to either close contact, casual contact and/or while waiting for a negative test result, sourced from People, Culture, and Governance Office, NSW Ministry of Health.