

United States of America	163,199	2,850	22,559	452
Italy	105,792	12,430	4,053	839
Spain	94,417	8,189	9,222	849
Germany	67,366	732	5,453	149
France	51,477	3,514	7,500	497
Iran (Islamic Republic of)	44,606	2,898	3,111	141
The United Kingdom	25,154	1,789	3,009	381
Switzerland	16,108	373	696	78
Turkey	13,531	214	2,704	46
Belgium	12,775	705	876	192
Netherlands	12,595	1,039	845	175
Austria	10,182	128	564	20
Republic of Korea	9,887	165	101	3
Canada	7,695	89	1,378	23
Portugal	7,443	160	1,035	20
Australia	5,133	23	273	3
Israel	5,129	21	298	4
Brazil	4,579	159	323	23
Norway	4,447	28	221	2
Sweden	4,435	180	407	34
Czechia	3,308	31	306	7
Ireland	3,235	71	325	17
Denmark	2,860	90	283	13
Malaysia	2,766	43	140	6
Chile	2,738	12	289	4
Russian Federation	2,337	17	500	8
Poland	2,311	33	256	2
Romania	2,245	69	293	25
Ecuador	2,240	75	278	15
Japan	2,178	57	225	1
Luxembourg	2,178	23	190	1
Philippines	2,084	88	538	10
Pakistan	2,039	26	174	1
Thailand	1,771	12	247	3
India	1,636	38	565	9
Saudi Arabia	1,563	10	110	2
Indonesia	1,528	136	114	14
Finland	1,384	17	71	4
South Africa	1,353	5	27	2
Greece	1,314	49	102	6
Iceland	1,135	2	49	0
Dominican Republic	1,109	51	208	9
Mexico	1,094	28	101	8
Peru	1,065	24	213	13
Panama	989	24	0	0
Argentina	966	24	146	4

Singapore	926	3	47	0
Serbia	900	13	115	0
Croatia	867	6	77	0
Slovenia	814	13	51	2
Colombia	798	14	96	4
Qatar	781	2	88	1
Estonia	745	4	30	1
International conveyance (Diamond Princess)	712	7	0	0
Egypt	710	46	54	5
Iraq	694	50	64	4
Ukraine	669	17	120	4
United Arab Emirates	664	6	53	1
New Zealand	647	1	47	0
Morocco	638	36	64	3
Algeria	584	35	73	4
Bahrain	567	4	52	0
Lithuania	533	7	49	0
Armenia	532	3	50	0
Hungary	492	16	45	1
Lebanon	463	12	17	1
Bosnia and Herzegovina	413	12	54	3
Bulgaria	399	8	40	0
Latvia	398	0	22	0
Tunisia	394	10	32	1
Andorra	376	12	6	4
Slovakia	363	0	27	0
Republic of Moldova	353	3	55	1
Kazakhstan	348	2	36	1
North Macedonia	329	9	44	2
Uruguay	320	1	11	1
Costa Rica	314	2	0	0
Azerbaijan	298	5	25	1
Kuwait	289	0	23	0
Jordan	274	5	6	0
Cyprus	262	8	32	1
Burkina Faso	261	14	15	2
Réunion	247	0	40	0
Albania	243	13	20	2
Puerto Rico	239	8	65	2
San Marino	236	26	6	1
Oman	210	1	31	1
Viet Nam	207	0	4	0
Afghanistan	192	4	26	0
Cuba	186	6	16	2
Senegal	175	0	13	0
Uzbekistan	173	2	24	0

Cote d'Ivoire	169	0	0	0
Faroe Islands	169	0	1	0
Malta	167	0	11	0
Belarus	152	0	0	0
Ghana	152	5	0	0
Mauritius	143	5	36	3
Sri Lanka	143	2	23	1
Cameroon	139	6	0	0
Honduras	139	2	0	0
occupied Palestinian territory	134	1	17	0
Brunei Darussalam	129	1	2	0
Venezuela (Bolivarian Republic of)	129	3	0	0
Martinique	119	2	8	0
Georgia	115	0	12	0
Guadeloupe	114	5	8	1
Kosovo[1]	112	1	6	0
Kyrgyzstan	111	0	4	0
Nigeria	111	1	0	0
Cambodia	109	0	2	0
Democratic Republic of the Congo	109	8	11	0
Bolivia (Plurinational State of)	107	6	10	1
Montenegro	105	2	14	1
Mayotte	101	0	19	0
Trinidad and Tobago	85	3	3	0
Rwanda	75	0	5	0
Gibraltar	69	0	0	0
Guam	69	2	11	1
Liechtenstein	68	0	4	0
Paraguay	65	3	1	0
Jersey	63	2	0	0
Guernsey	60	1	15	1
Aruba	55	0	5	0
Bangladesh	54	6	5	1
Madagascar	53	0	7	0
Isle of Man	52	0	10	0
Monaco	52	0	3	0
Kenya	50	1	12	0
French Guiana	46	0	3	0
French Polynesia	37	0	1	0
Guatemala	36	1	0	0
Jamaica	36	1	0	0
Zambia	35	0	0	0
Togo	34	1	0	0
Barbados	33	0	0	0
Uganda	33	0	0	0
Djibouti	31	0	5	0

El Salvador	30	0	0	0
United States Virgin Islands	30	0	0	0
Bermuda	27	0	5	0
Ethiopia	26	0	3	0
Niger	20	3	0	0
Congo	19	0	0	0
United Republic of Tanzania	19	1	0	1
Maldives	18	0	1	0
Mali	18	0	0	0
Saint Martin	18	2	0	1
Guinea	16	0	0	0
New Caledonia	16	0	1	0
Haiti	15	0	0	0
Myanmar	15	1	5	1
Bahamas	14	0	0	0
Equatorial Guinea	14	0	0	0
Cayman Islands	12	1	0	0
Guyana	12	2	4	1
Mongolia	12	0	0	0
Curaçao	11	1	0	0
Dominica	11	0	0	0
Namibia	11	0	0	0
Greenland	10	0	0	0
Libya	10	0	2	0
Syrian Arab Republic	10	2	0	0
Benin	9	0	3	0
Eswatini	9	0	0	0
Grenada	9	0	0	0
Guinea-Bissau	9	0	7	0
Lao People's Democratic Republic	9	0	1	0
Saint Lucia	9	0	0	0
Mozambique	8	0	0	0
Saint Kitts and Nevis	8	0	6	0
Seychelles	8	0	0	0
Suriname	8	0	0	0
Zimbabwe	8	1	3	0
Angola	7	2	5	2
Antigua and Barbuda	7	0	0	0
Chad	7	0	2	0
Gabon	7	1	0	0
Sudan	7	2	1	0
Central African Republic	6	0	0	0
Eritrea	6	0	0	0
Holy See	6	0	0	0
Saint Barthélemy	6	0	0	0
Sint Maarten	6	0	0	0



Cabo Verde	5	1	0	0
Fiji	5	0	0	0
Mauritania	5	0	0	0
Montserrat	5	0	0	0
Nepal	5	0	0	0
Somalia	5	0	2	0
Turks and Caicos Islands	5	0	0	0
Bhutan	4	0	0	0
Nicaragua	4	1	0	0
Belize	3	0	0	0
British Virgin Islands	3	0	1	0
Gambia	3	1	0	0
Liberia	3	0	0	0
Anguilla	2	0	0	0
Northern Mariana Islands (Commonwealth of the)	2	0	0	0
Papua New Guinea	1	0	0	0
Saint Vincent and the Grenadines	1	0	0	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>824,046</b>	<b>40,601</b>	<b>72,655</b>	<b>4,194</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #75 Novel Coronavirus (COVID-19)  
**Date:** Friday, 3 April 2020 8:10:21 PM  
**Attachments:** [2020-04-03 NIR Health SitRep v75 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and Whole of Government preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 3 April 2020, there have been 5,350 laboratory confirmed cases of COVID-19 in Australia, including 26 deaths.
- Since yesterday's situation report, an additional 217 cases, including 3 death, have been reported in Australia.
- To date, more than 275,000 tests have been conducted across Australia.
- Following National Cabinet today, the Prime Minister stated Australia has moved into the suppression phase of the COVID-19 response.
- An advisory group has been established to guide development and implementation of a response plan focusing on the unique health needs of people with disability during the coronavirus pandemic.

#### Situation Overseas

- As at 1500 hrs 3 April 2020, a total of 1,016,128 cases of COVID-19 have been reported globally, including 53,146 deaths.
- The United States of America continues to report large increases in their case numbers and has reported the highest number of cases globally.

The next Situation Report will be issued on 4 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours).

Update directions:

- Please provide all input in the body of an email, under the headings situation, response, impact or other.
- **Home Affairs, DAWE, and DFAT are requested to return updates daily, including nil response.**
- Additional Commonwealth agencies and jurisdictions, please provide relevant updates, including removal of non-priority information, to [redacted] by 1300hrs for inclusion in the same day's Situation Report.
- Agencies are invited to nominate updates for inclusion in the front facing summary of the SitRep.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-03 1800 AEDT	<b>Version</b>	75
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-04 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>• <i>Following National Cabinet, the Prime Minister stated:</i> <ul style="list-style-type: none"> <li>◦ <i>Australia was now in the suppression phase of the response, which will last for some time. Restrictions will be reviewed regularly and planning for the medium to long-term has begun. Social distancing measures to slow the spread of this virus must be sustainable for at least months.</i></li> <li>◦ <i>Australians should be aware that social distancing must continue at Easter and agreed that Australians should stay at home this Easter and not undertake unnecessary holiday travel.</i></li> <li>◦ <i>Churches and other places of worship, will be considered places of work so that services can be live streamed to the community.</i></li> <li>◦ <i>Highlighted the importance of people who are self-isolating registering on the COVID-19 app.</i></li> </ul> </li> <li>• <i>An advisory group has been established to guide development and implementation of a response plan focusing on the unique health needs of people with disability during the coronavirus pandemic.</i> <ul style="list-style-type: none"> <li>◦ <i>The advisory group, endorsed yesterday by the Australian Health Protection Principal Committee, will develop and implement the Management and Operational Plan for People with Disability.</i></li> <li>◦ <i>The first meeting was held on Friday 3 April 2020 with an aim to deliver the Plan to the AHPPC on Thursday 9 April 2020, for immediate action.</i></li> </ul> </li> </ul>
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Response	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 27 March 2020, the Prime Minister announced that all incoming travellers entering Australia from 11.59pm 28 March will be quarantined in a designated hotel or other accommodation for 14 days. Foreign nationals cannot enter Australia.</li> <li>Travellers will complete their 14-day quarantine at their port of arrival, no onward travel will be permitted.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police. The Australian Defence Force will help ensure people are staying in quarantine and the Commonwealth will support as required.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>Isolation Declaration Cards (IDC) are issued to all incoming travellers. <ul style="list-style-type: none"> <li>The IDC will ask the traveller if they 'understand the need to isolate for 14 days', while collecting personal information for public health follow up by the states and territories.</li> <li>Travellers will be requested to complete the card at all international airports from 0600hrs AEDT 20 March.</li> </ul> </li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The declaration was recommended by the Chief Medical Officer in his capacity as the Director of Human Biosecurity.</li> <li>The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.</li> <li>The National Cabinet has also noted that Commonwealth, States and Territories were implementing emergency powers under respective legislation in order to be able to deal with the spread of COVID-19 as quickly and flexibly as possible.</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 3 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>5,350</b> cases of COVID-19, including <b>26</b> deaths, have been confirmed in Australia (Table 1 and Figure 2). <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>217</b> cases, including <b>3</b> deaths, have been reported in Australia.</li> <li><i>It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures and we are beginning to see a reduction in the daily rate of increase. It is too soon to tell whether this trend will be sustained.</i></li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 10% of cases have been hospitalised during their course of illness, with 12% of these cases requiring admission to an ICU (1.2% of confirmed cases).</li> </ul>
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- The median age of COVID-19 cases is 47 years, range 0–97 years, with a relatively equal ratio of male to female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is 80.5 years (range 67–94).

#### Testing

- To date, more than 275,000 tests have been conducted across Australia (as at 3pm).
  - The cumulative per cent positive is 1.9% with positivity in the past week being 2.5%.

#### Source of infection

- To date, most confirmed cases are considered to have been overseas acquired (67%) (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – 26%
    - There have been at least 342 cases associated with the Ruby Princess cruise ship with the majority of them being NSW cases, and a subset of interstate cases. One of the elderly passengers is reported to have died.
    - There are also cases associated with several other cruise ships.
  - United States – 15%
  - United Kingdom – 14%
  - There have also been cases imported from every continent, except Antarctica.
- Of the locally acquired cases:
  - Majority are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
  - Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). A high number of cases from NSW are reported as being locally acquired with no epidemiological link back to a confirmed case being able to be established.

#### Epidemiological Resources

- *A weekly COVID-19 epidemiological report is being published in the Communicable Diseases Intelligence (CDI) journal. The most recent report contains information on cases up to 29 March 2020.*
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

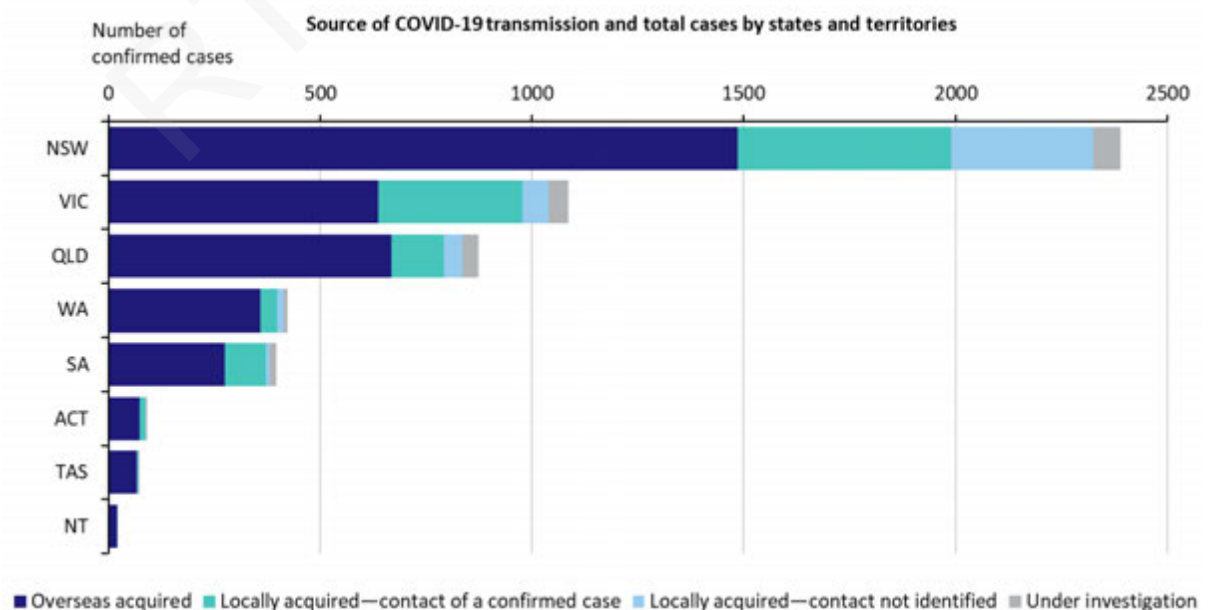
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>##</sup>, Australia (as at 1500 hrs, 3 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	3,586	74	1,485	20	669	275	68	637	358
Locally acquired - contact of confirmed case and/or in a known cluster	1,122	12	505	0	124	97	2	341	41
Locally acquired - contact not identified	442	0	336	0	31	3	0	62	10
Locally acquired - contact not identified, but case had interstate travel	29	4	NA	1	11	7	1	0	5
Under investigation	171	1	63	0	38	14	2	45	8
<b>Total cases</b>	<b>5,350</b>	<b>91</b>	<b>2,389</b>	<b>21</b>	<b>873</b>	<b>396</b>	<b>73</b>	<b>1085</b>	<b>422</b>
<b>Died (of total)</b>	<b>26</b>	<b>1</b>	<b>9</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>2</b>	<b>7</b>	<b>3</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	217 (4%)	3 (3%)	91 (4%)	1 (5%)	38 (5%)	11 (3%)	2 (3%)	49 (5%)	22 (6%)
Change in the last 72hrs before (%change)	793 (17%)	11 (14%)	357 (18%)	5 (31%)	130 (17%)	59 (18%)	5 (7%)	168 (18%)	58 (16%)
Average daily increase over the past three days (compound)	5%	4%	6%	10%	6%	6%	2%	6%	5%
Increase over the past week	2,184	29	984	9	318	139	27	511	167

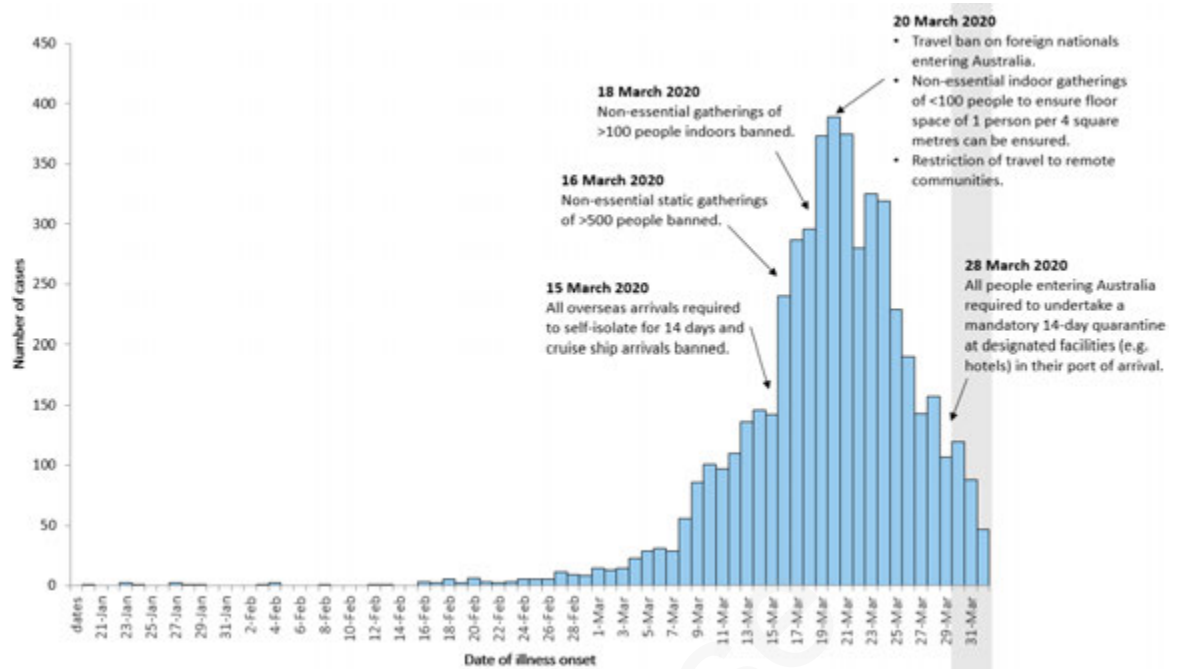
# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 3 April 2020**

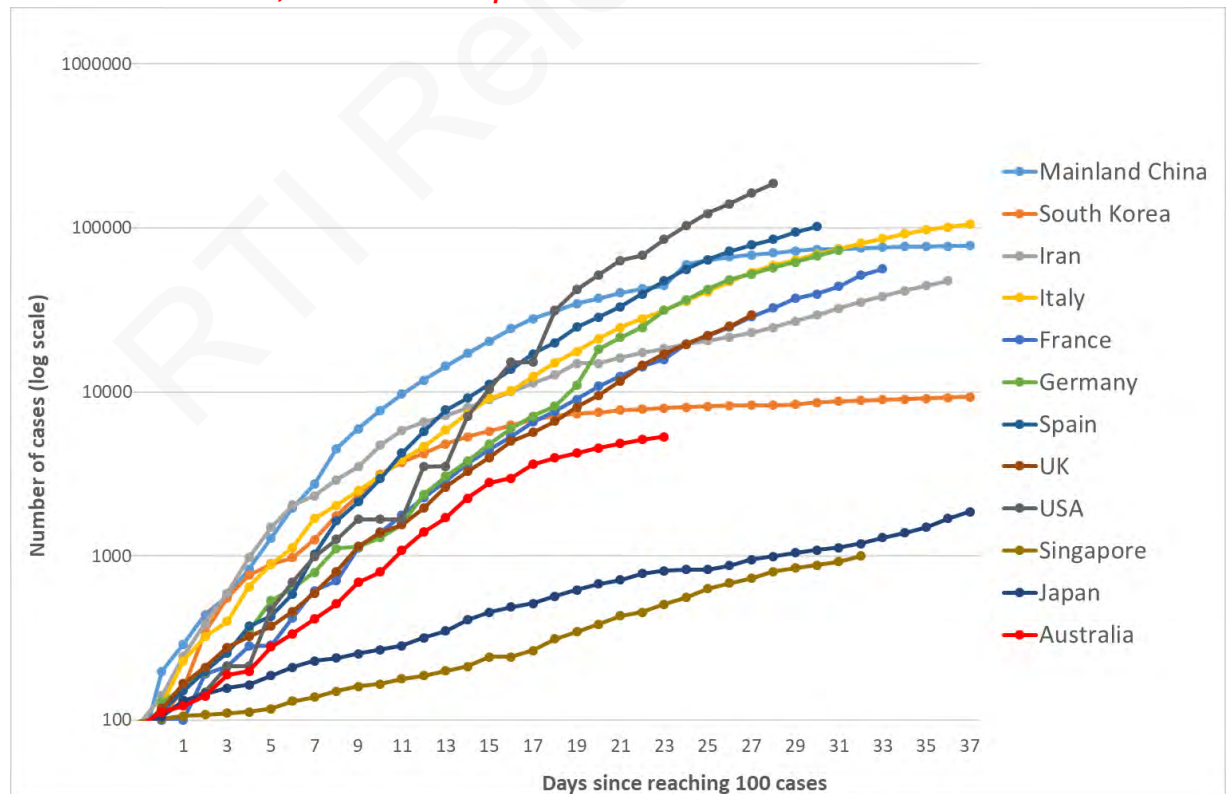


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 3 April 2020 by date of illness onset\***

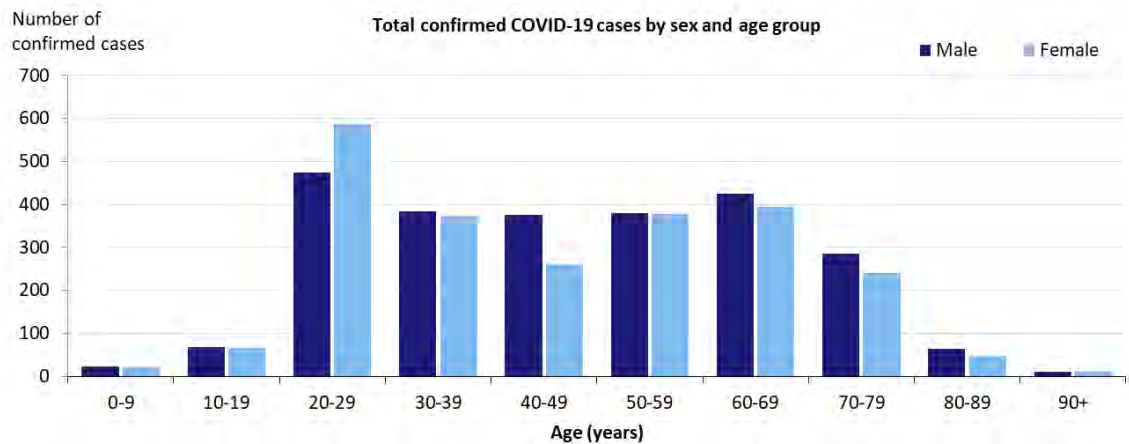


\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 3 April 2020**





**Fig 4. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 3 April 2020****International Situation (as at 1500 hrs, 3 April 2020)**

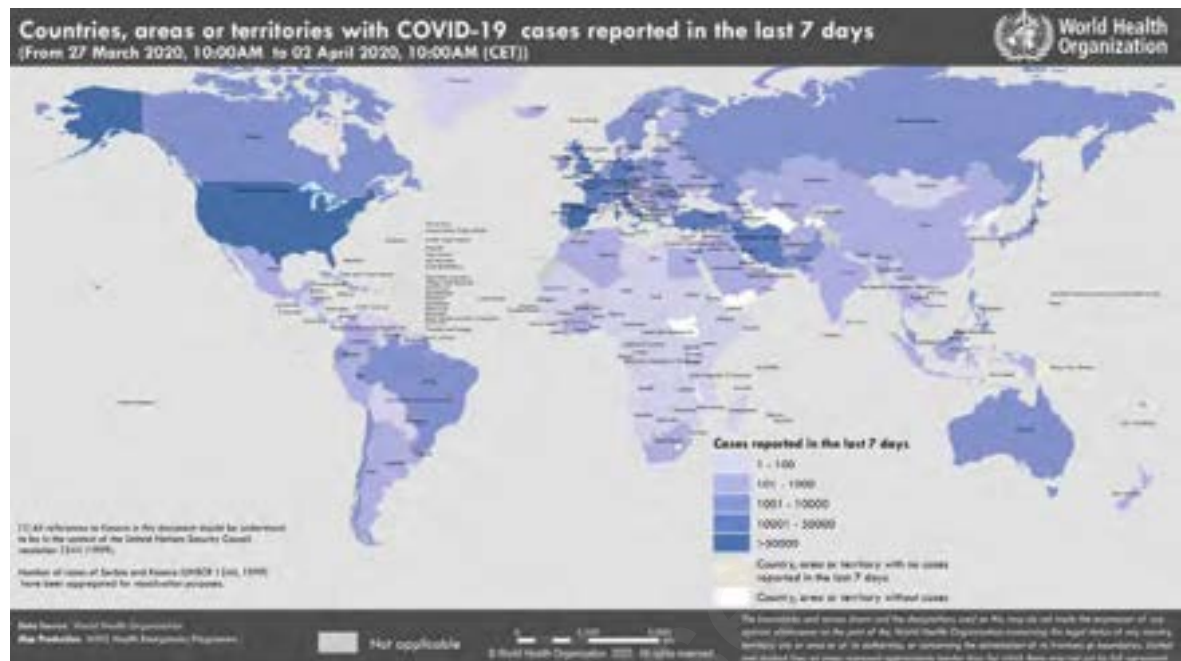
- *More than 1 million cases and 50,000 deaths have been reported globally (Johns Hopkins).*
- *Three countries (USA, Italy and Spain) are reporting more than 100,000 cases (WHO).*
- A total of **1,016,128** cases of COVID-19 have been reported globally, including **53,146** deaths (Source: Johns Hopkins University, *as at 1500hrs on 3 April 2020*).
- **72%** of all deaths are from 5 countries: Italy, Spain, France, *the United States* and China (including SARs).

**Recent reporting of cases and deaths**

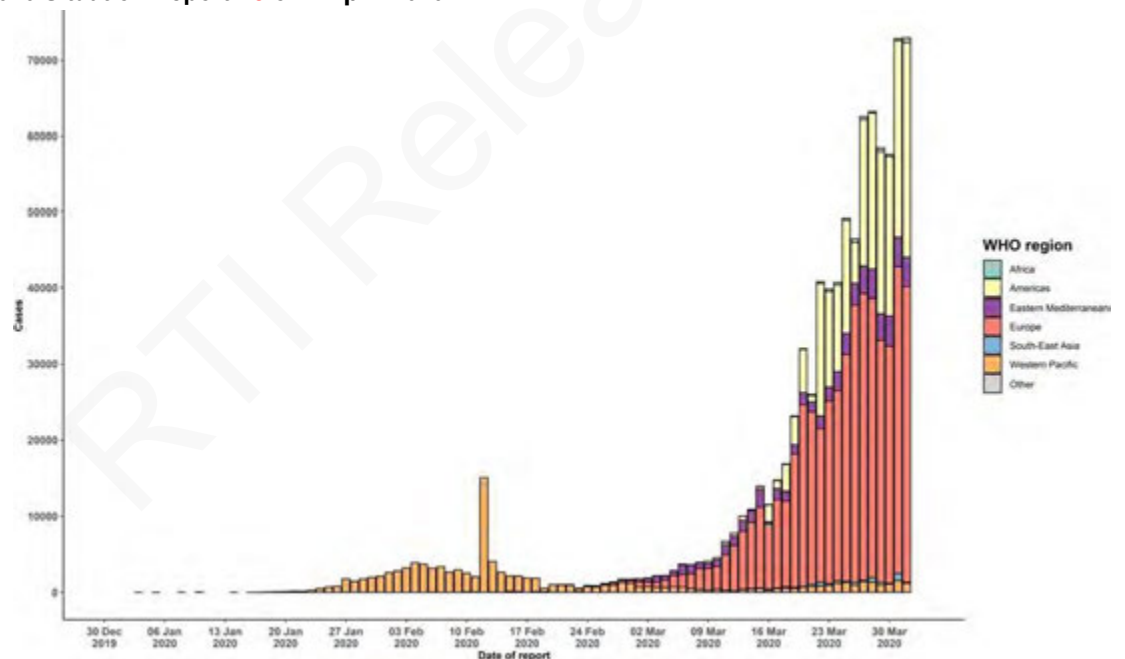
- A total of **78,561** new cases, *including 5,911 deaths*, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - The United States of America continues to report large increases in their case numbers and has reported the highest number of cases globally. All countries across the European region are also continuing to report large increases in their cases and deaths, particularly Italy and Spain. The Islamic Republic of Iran continues to report substantial daily increases.
    - New York City is reporting more than **1,500** deaths, with over **49,000** cases. More broadly, New York State is reporting more than **92,000** cases, which exceeds the total cases reported from Hubei Province, China (**68,000 cases**).
  - Mainland China and the Republic of Korea continue to report relatively few new cases each day.
    - International media reported on 24 March 2020 that Hubei Province will lift curbs on travel from 25 March, with the lockdown on Wuhan due to ease on 8 April 2020.
      - Internal movement within Hubei province will be unrestricted, however, strict limitations will apply to travel outside Hubei -travellers will need a "Green Code" indicating their health status.
      - Beijing is likely to receive 200,000 Hubei returnees, from all areas except Wuhan - all of whom will undergo a forced 14-day quarantine period.
      - It is unclear whether all provinces will permit people from Hubei to enter.
      - It has been reported that Wuhan is resuming non-COVID medical services from 29 March, with each city district to open at least one hospital to the public. It is predicted that following the ease in lockdown restrictions, there will be a surge in demand for medical services.
  - Based on the number of reported cases globally, the case fatality rate is approximately **5.1%**. The risk of death reportedly increases with age.



**Fig 5. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 73 of 2 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region through 1 April 2020 Situation Report 73 of 2 April 2020**



#### International response

#### WHO

- On 1 April 2020, the WHO Director General reported many countries are asking people to stay at home and shutting down population movement, which can help to limit transmission of the virus, but can have unintended consequences for the poorest and most vulnerable people.
  - In India, Prime Minister Modi has announced a \$24 billion package, including free food rations for 800 million disadvantaged people, cash transfers to 204 million poor women and free cooking gas for 80 million households for the next 3 months.
- So far, 74 countries have either joined or are in the process of joining the Solidarity trial. This trial is comparing the safety and effectiveness four drugs and drug combinations against COVID-19. As of this morning, more than 200 patients had been randomly assigned to one of the study arms.

	<ul style="list-style-type: none"> <li>WHO's priority is that frontline health workers are able to access essential personal protective equipment, including medical masks and respirators. WHO is working with governments and manufacturers to step up the production and distribution of personal protective equipment, including masks.</li> </ul> <p><b>International Monetary Fund</b></p> <ul style="list-style-type: none"> <li>The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.</li> </ul> <p><b>World Bank</b></p> <ul style="list-style-type: none"> <li>World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.</li> </ul> <p><b>European Commission</b></p> <ul style="list-style-type: none"> <li>On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.</li> </ul> <p><b>Asian Development Bank (ADB)</b></p> <ul style="list-style-type: none"> <li>ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT Health Emergency Control Centre (HECC) remains activated to control the novel Coronavirus (COVID-19) response.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>The HECC continues to liaise with stakeholders across government and the community on preparedness for the identification and management COVID-19 cases in the ACT.</li> <li>There is whole-of-government planning underway around communications and business continuity.</li> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>All schools in the ACT, including government and non-government, commenced pupil free days from 24 March through to the ACT school holidays. Children of essential staff can continue to send their children to school during this time. ACT schools will remain open to students who need to attend.</li> <li>There are currently six public health emergency directions in force under the Public Health Act 1997 for, returned travellers, returned travellers (No 2), Residential Aged Care Facilities, self-isolation, and non-essential gatherings.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> </ul>

	<ul style="list-style-type: none"> <li>• A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>• All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>• CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>• The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>• COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>• Whole of Health briefings held weekly.</li> <li>• State Control centre – Health activated 0800-1800 daily. Full recall arrangements in place.</li> <li>• Full Incident management team meetings held 3 times a week.</li> <li>• Activation of COVID-19 Clinics in 3 metro locations.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>• On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>• Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>• Premier Daniel Andrews released a statement on 22 March that Victoria will implement a lockdown of all non-essential activity.</li> <li>• A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li>• Victoria's State Control Centre (SCC) remains activated (Tier 2) to support the coordination of Victoria's response to the spread of COVID-19).</li> <li>• An incident management team is meeting daily.</li> <li>• A COVID-19 specific hotline has been activated using nurse on call.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA borders closed at 13:30 24 March 2020. Interstate arrivals are now required to self-isolate for 14 days, and the border controls apply to all road, air, rail and sea access points. Exceptions apply for essential services and workers and travel between regions in Western Australia will be restricted from midnight 31st March 2020. Regional boundaries will mirror those of the state's Regional Development Commissions.</li> <li>• <i>New laws to enforce self-isolation and increased penalties for COVID-19 related incidents passed through both houses of State Parliament. The new law will enable authorities to:</i> <ul style="list-style-type: none"> <li>○ <i>issue \$1,000 on-the-spot fines for individuals and \$5,000 fines for businesses to act as a further deterrent against those in the community who simply do not follow new directions.</i></li> <li>○ <i>allow for a person to be subject to electronic monitoring while they are in self-isolation.</i></li> <li>○ <i>introduce of a penalty of 12 months' imprisonment or a fine of \$12,000 for people who do not comply with electronic monitoring requirements.</i></li> <li>○ <i>include powers to compel people to provide information about any recent travel undertaken by them and information about people they have been in close contact with in light of COVID-19.</i></li> <li>○ <i>enable for emergency management authorities to direct that any road, access route or areas of water in or leading to an emergency area be closed.</i></li> </ul> </li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

### 4. Appendix 1

#### Confirmed cases of COVID-19 by location

Source: International cases based on WHO Situation Reports. Australian cases as at 15:00 hours on 3 April 2020.

Please note that the total global cases count reported in this table is less than the 'live' figure reported by John Hopkins University (1,016,126) as at 15:00 hours.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	82,724	3,327	93	6
Hong Kong SAR	802	4	37	0
Taiwan	339	5	10	0
Macau SAR	41	0	0	0
United States of America	187,302	3,846	24,103	996
Italy	110,574	13,157	4,782	727
Spain	102,136	9,053	7,719	864
Germany	73,522	872	6,156	140
France	56,261	4,019	4,784	505
Iran (Islamic Republic of)	47,593	3,036	2,987	138
The United Kingdom	29,478	2,532	4,324	743
Switzerland	17,070	378	962	5
Turkey	15,679	277	2,148	63
Belgium	13,964	828	1,189	123
Netherlands	13,614	1,173	1,019	134
Austria	10,711	146	529	18
Republic of Korea	9,976	169	89	4
Canada	9,005	105	1,310	16
Portugal	8,251	187	808	27
Brazil	5,717	201	1,138	42
Israel	5,591	21	462	0
Australia	5,350	26	217	3
Sweden	4,947	239	512	59
Norway	4,665	32	218	4
Czechia	3,589	39	281	8
Ireland	3,447	85	212	14
Denmark	3,107	104	247	14
Chile	3,031	16	293	4
Malaysia	2,908	45	142	2
Russian Federation	2,777	24	440	7
Poland	2,554	43	243	10
Romania	2,460	85	215	16
Japan	2,384	57	206	0
Ecuador	2,372	146	132	71
Luxembourg	2,319	29	141	6
Philippines	2,311	96	227	8
Pakistan	2,291	31	252	5
Thailand	1,771	12	0	0
Saudi Arabia	1,720	16	157	6
Indonesia	1,677	157	149	21
India	1,636	38	0	0
Finland	1,446	17	62	0
South Africa	1,380	5	27	0

Greece	1,375	50	61	1
Peru	1,323	24	258	0
Dominican Republic	1,284	57	175	6
Iceland	1,220	2	85	0
Mexico	1,215	29	121	1
Panama	1,181	30	192	6
Serbia	1,060	13	160	0
Argentina	1,054	27	88	3
Singapore	1,000	3	74	0
Croatia	963	6	96	0
Colombia	906	16	108	2
Algeria	847	58	263	23
Slovenia	841	15	27	2
Qatar	835	2	54	0
United Arab Emirates	814	8	150	2
Ukraine	804	20	135	3
Egypt	779	52	69	6
Estonia	779	5	34	1
Iraq	728	52	34	2
New Zealand	723	1	76	0
International conveyance (Diamond Princess)	712	11	0	4
Morocco	676	39	38	3
Lithuania	581	8	48	1
Armenia	571	3	39	0
Bahrain	569	4	2	0
Hungary	525	20	33	4
Lebanon	479	12	16	0
Bosnia and Herzegovina	464	13	51	1
Latvia	446	0	48	0
Republic of Moldova	423	5	70	2
Tunisia	423	12	29	2
Bulgaria	422	10	23	2
Slovakia	400	0	37	0
Andorra	396	13	20	1
Kazakhstan	386	3	38	1
Azerbaijan	359	5	61	0
North Macedonia	354	11	25	2
Costa Rica	347	2	33	0
Uruguay	338	2	18	1
Cyprus	320	9	58	1
Kuwait	317	0	28	0
Puerto Rico	286	11	47	3
Réunion	281	0	34	0
Jordan	278	5	4	0
Albania	277	15	34	2
Burkina Faso	261	14	0	0

San Marino	236	28	0	2
Afghanistan	235	4	43	0
Oman	231	1	21	0
Viet Nam	218	0	11	0
Cuba	212	6	26	0
Ghana	195	5	43	0
Belarus	192	2	40	2
Cote d'Ivoire	190	0	21	0
Senegal	190	1	15	1
Uzbekistan	190	2	17	0
Malta	188	0	21	0
Faroe Islands	173	0	4	0
Honduras	172	10	33	8
Mauritius	154	5	11	0
Sri Lanka	143	2	0	0
Venezuela (Bolivarian Republic of)	143	3	14	0
Cameroon	139	6	0	0
Nigeria	139	2	28	1
occupied Palestinian territory	134	1	0	0
Brunei Darussalam	131	1	2	0
Martinique	128	3	9	1
Guadeloupe	125	6	11	1
Kosovo[1]	125	1	13	0
Democratic Republic of the Congo	123	11	14	3
Georgia	121	0	6	0
Montenegro	120	2	15	0
Mayotte	116	2	15	2
Bolivia (Plurinational State of)	115	7	8	1
Kyrgyzstan	115	0	4	0
Cambodia	109	0	0	0
Trinidad and Tobago	89	5	4	2
Rwanda	82	0	7	0
Jersey	81	2	18	0
Kenya	81	1	31	0
Guernsey	78	1	18	0
Guam	77	3	8	1
Niger	74	5	54	2
Liechtenstein	72	0	4	0
Gibraltar	69	0	0	0
Paraguay	69	3	4	0
Isle of Man	65	0	13	0
Aruba	55	0	0	0
Bangladesh	54	6	0	0
Madagascar	53	0	0	0
French Guiana	51	0	5	0
Uganda	44	0	11	0



Guatemala	39	1	3	0
Jamaica	38	1	2	0
French Polynesia	37	0	0	0
Monaco	37	0	0	0
Togo	36	2	2	1
Zambia	36	0	1	0
Djibouti	34	0	3	0
Barbados	33	0	0	0
Bermuda	32	0	5	0
El Salvador	32	1	2	1
Guinea	30	0	14	0
United States Virgin Islands	30	0	0	0
Mali	28	0	10	0
Ethiopia	26	0	0	0
Congo	22	2	3	2
Saint Martin	21	2	3	0
United Republic of Tanzania	20	1	1	0
Guyana	19	2	7	0
Maldives	18	0	0	0
Haiti	16	0	1	0
New Caledonia	16	0	0	0
Bahamas	15	0	1	0
Eritrea	15	0	9	0
Myanmar	15	1	0	0
Cayman Islands	14	1	2	0
Equatorial Guinea	14	0	0	0
Mongolia	14	0	2	0
Benin	13	0	4	0
Saint Lucia	13	0	4	0
Curaçao	11	1	0	0
Dominica	11	0	0	0
Namibia	11	0	0	0
Greenland	10	0	0	0
Lao People's Democratic Republic	10	0	1	0
Libya	10	0	0	0
Mozambique	10	0	2	0
Seychelles	10	0	2	0
Syrian Arab Republic	10	3	0	1
Eswatini	9	0	0	0
Grenada	9	0	0	0
Guinea-Bissau	9	0	0	0
Angola	8	2	1	0
Central African Republic	8	0	2	0
Saint Kitts and Nevis	8	0	0	0
Suriname	8	0	0	0
Zimbabwe	8	1	0	0



Antigua and Barbuda	7	0	0	0
Chad	7	0	0	0
Gabon	7	1	0	0
Sudan	7	2	0	0
Holy See	6	0	0	0
Liberia	6	0	3	0
Northern Mariana Islands (Commonwealth of the)	6	0	4	0
Saint Barthélemy	6	0	0	0
Sint Maarten	6	0	0	0
Cabo Verde	5	1	0	0
Fiji	5	0	0	0
Mauritania	5	0	0	0
Montserrat	5	0	0	0
Nepal	5	0	0	0
Nicaragua	5	1	1	0
Somalia	5	0	0	0
Turks and Caicos Islands	5	0	0	0
Bhutan	4	0	0	0
Belize	3	0	0	0
Botswana	3	1	0	1
British Virgin Islands	3	0	0	0
Gambia	3	1	0	0
Anguilla	2	0	0	0
Burundi	2	0	0	0
Sierra Leone	2	0	1	0
Papua New Guinea	1	0	0	0
Saint Vincent and the Grenadines	1	0	0	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>896,824</b>	<b>45,531</b>	<b>72,787</b>	<b>4,930</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #76 Novel Coronavirus (COVID-19)  
**Date:** Saturday, 4 April 2020 6:19:04 PM  
**Attachments:** [2020-04-04 NIR Health SitRep v76 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 4 April 2020, there have been 5,548 laboratory confirmed cases of COVID-19 in Australia, including 30 deaths.
- Since yesterday's situation report, an additional 198 cases, including 4 death, have been reported in Australia.
- To date, more than 287,000 tests have been conducted across Australia.
- Deputy Prime Minister McCormack and Foreign Minister Payne announced a deal with Qantas and Virgin to keep operating flights from London, Los Angeles, Hong Kong and Auckland for four weeks to support Australians to return home by commercial means.

#### Situation Overseas

- As at 1500 hrs 4 April 2020, a total of 1,099,389 cases of COVID-19 have been reported globally, including 58,901 deaths.
- Large increases, including instances of export to other countries, especially in respective regions, continue to be reported in the European region (including Italy, Spain, Germany, France and the United Kingdom) as well as the United States and the Islamic Republic of Iran.

The next Situation Report will be issued on 5 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-04 1800 AEDT	<b>Version</b>	76
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-05 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>Following National Cabinet, the Prime Minister stated:             <ul style="list-style-type: none"> <li>Australia was now in the suppression phase of the response, which will last for some time. Restrictions will be reviewed regularly and planning for the medium to long-term has begun. Social distancing measures to slow the spread of this virus must be sustainable for at least months.</li> <li>Australians should be aware that social distancing must continue at Easter and agreed that Australians should stay at home this Easter and not undertake unnecessary holiday travel.</li> <li>Churches and other places of worship, will be considered places of work so that services can be live streamed to the community.</li> <li>Highlighted the importance of people who are self-isolating registering on the COVID-19 app.</li> </ul> </li> <li>An advisory group has been established to guide development and implementation of a response plan focusing on the unique health needs of people with disability during the coronavirus pandemic.             <ul style="list-style-type: none"> <li>The advisory group, endorsed yesterday by the Australian Health Protection Principal Committee, will develop and implement the Management and Operational Plan for People with Disability.</li> <li>The first meeting was held on Friday 3 April 2020 with an aim to deliver the Plan to the AHPPC on Thursday 9 April 2020, for immediate action.</li> </ul> </li> </ul>
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Response	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 27 March 2020, the Prime Minister announced that all incoming travellers entering Australia from 11.59pm 28 March will be quarantined in a designated hotel or other accommodation for 14 days. Foreign nationals cannot enter Australia.</li> <li>Travellers will complete their 14-day quarantine at their port of arrival, no onward travel will be permitted.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police. The Australian Defence Force will help ensure people are staying in quarantine and the Commonwealth will support as required.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>Isolation Declaration Cards (IDC) are issued to all incoming travellers.             <ul style="list-style-type: none"> <li>The IDC will ask the traveller if they 'understand the need to isolate for 14 days', while collecting personal information for public health follow up by the states and territories.</li> <li>Travellers will be requested to complete the card at all international airports from 0600hrs AEDT 20 March.</li> </ul> </li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The declaration was recommended by the Chief Medical Officer in his capacity as the Director of Human Biosecurity.</li> <li>The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.</li> <li>The National Cabinet has also noted that Commonwealth, States and Territories were implementing emergency powers under respective legislation in order to be able to deal with the spread of COVID-19 as quickly and flexibly as possible.</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 4 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>5,548</b> cases of COVID-19, including <b>30</b> deaths, have been confirmed in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>198</b> cases, including <b>4</b> deaths, have been reported in Australia.</li> <li>It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.                 <ul style="list-style-type: none"> <li><i>The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over 25% to around 4%.</i></li> <li><i>However, it is too soon to tell whether this trend will be sustained.</i></li> </ul> </li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately <b>11%</b> of cases have been hospitalised during their course of illness, with <b>11%</b> of</li> </ul>
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these cases requiring admission to an ICU (1.2% of confirmed cases).

- The median age of COVID-19 cases is 47 years, range 0–97 years, with a relatively equal ratio of male to female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is 80 years (range 67–94).

#### Testing

- To date, more **than 287,000** tests have been conducted across Australia (as at 3pm).
  - The cumulative per cent positive is 1.9% with positivity in the past week being **2.2%**.

#### Source of infection

- To date, most confirmed cases are considered to have been overseas acquired (67%) (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – **26%**
    - There have been at least **360 cases, including 15 crew members**, associated with the Ruby Princess cruise ship with the majority of them being NSW cases, and a subset of interstate cases. One of the elderly passengers is reported to have died.
    - There are also cases associated with several other cruise ships.
  - United States – **17%**
  - United Kingdom – **16%**
  - There have also been cases imported from every continent, except Antarctica.
- Of the locally acquired cases:
  - Majority are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
  - Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). A high number of cases from NSW are reported as being locally acquired with no epidemiological link back to a confirmed case being able to be established.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report is being published in the Communicable Diseases Intelligence (CDI) journal. The most recent report contains information on cases up to 29 March 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

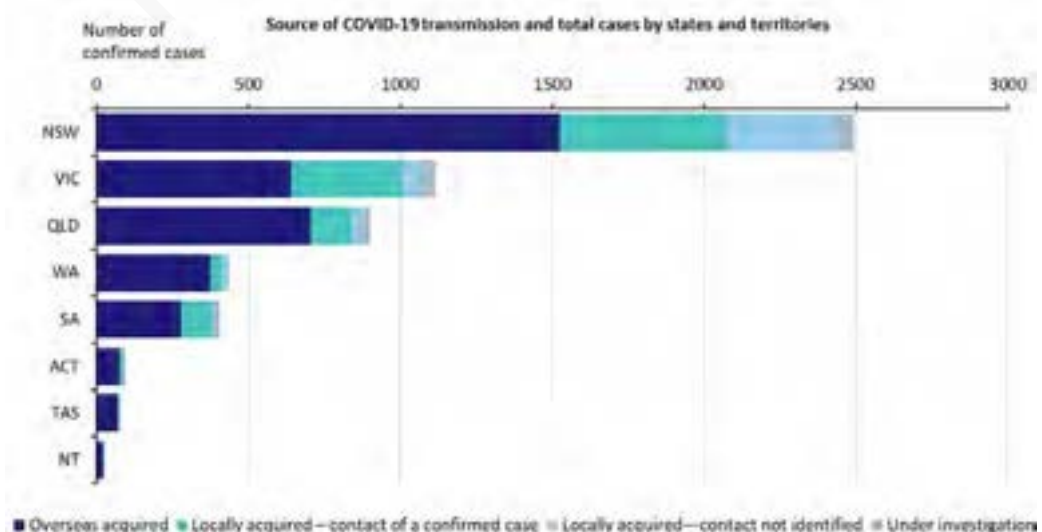
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>\*\*^</sup>, Australia (as at 1500 hrs, 4 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	3,691	75	1,524	23	706	278	71	640	374
Locally acquired - contact of confirmed case and/or in a known cluster	1,214	13	551	1	136	102	4	366	41
Locally acquired - contact not identified	482	0	365	0	31	3	0	73	10
Locally acquired - contact not identified, but case had interstate travel	30	4	NA	1	12	7	1	0	5
Under investigation	131	1	53	0	15	17	3	36	6
<b>Total cases</b>	<b>5,548</b>	<b>93</b>	<b>2,493</b>	<b>25</b>	<b>900</b>	<b>407</b>	<b>79</b>	<b>1,115</b>	<b>436</b>
<b>Died (of total)</b>	<b>30</b>	<b>2</b>	<b>11</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>2</b>	<b>8</b>	<b>3</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	198 (4%)	2 (2%)	104 (4%)	4 (19%)	27 (3%)	11 (3%)	6 (8%)	30 (3%)	14 (3%)
Change in the last 72hrs before (%change)	688 (14%)	9 (11%)	311 (14%)	7 (39%)	119 (15%)	40 (11%)	11 (16%)	147 (15%)	44 (11%)
Average daily increase over the past three days (compound)	5%	3%	5%	12%	5%	4%	5%	5%	4%
Increase over the past week	1,913	22	876	11	275	120	21	430	158

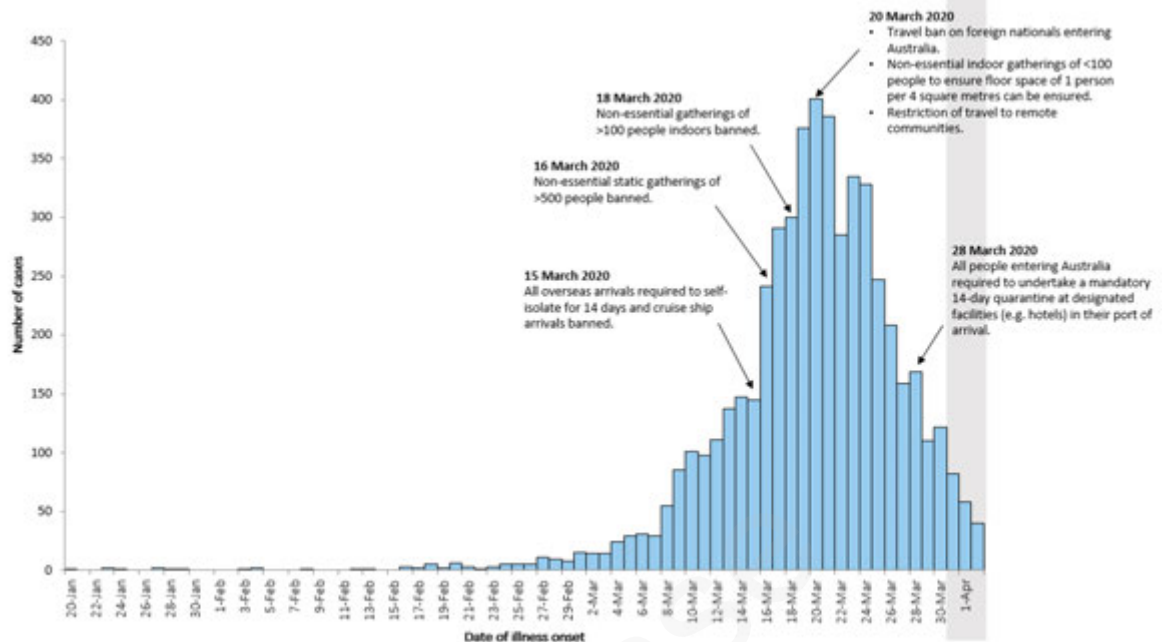
# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 4 April 2020**

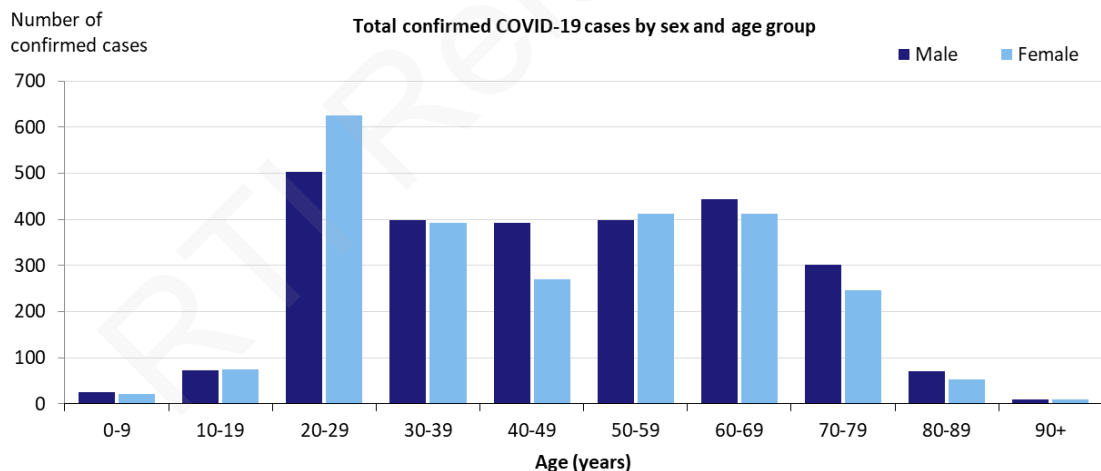


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 4 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 4 April 2020**



#### International Situation (as at 1500 hrs, 4 April 2020)

- A total of **1,099,389** cases of COVID-19 have been reported globally, including **58,901** deaths (Source: Johns Hopkins University, as at 1500hrs on 4 April 2020).
- Three countries (USA, Italy and Spain) are reporting more than 100,000 cases (WHO).
- **73%** of all deaths are from 5 countries: Italy, Spain, France, the United States and China (including SARs).

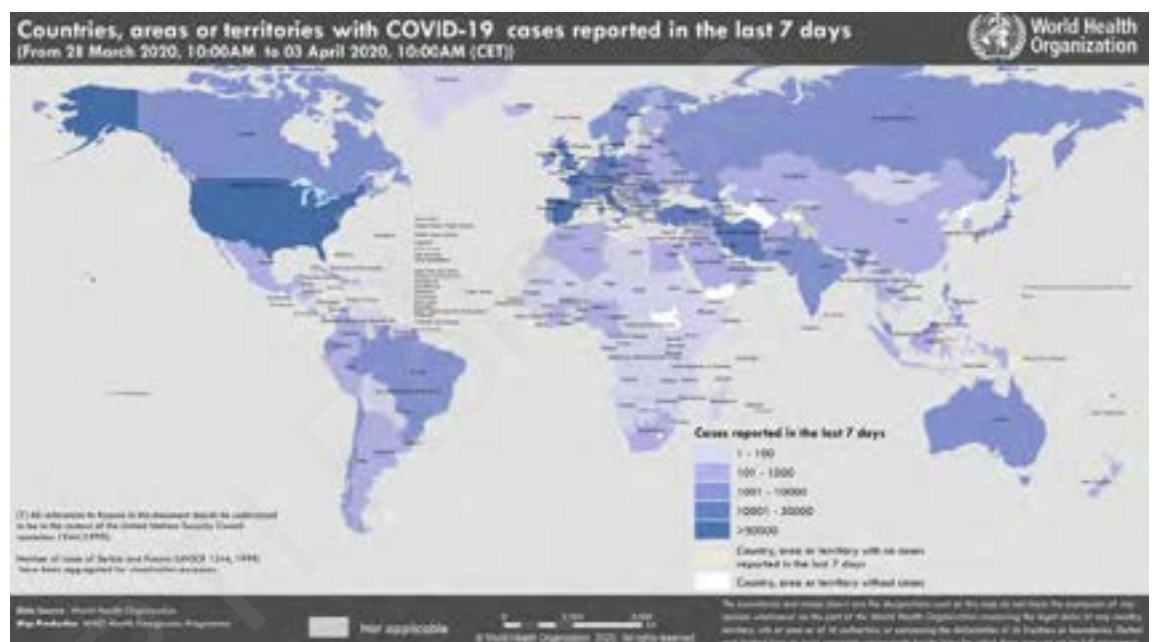
#### Recent reporting of cases and deaths

- A total of **83,261** new cases, including **5,755** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, especially in respective regions, continue to be reported in the European **region** (including Italy, Spain, Germany, France **and the United Kingdom**) as well as the **United States** and the **Islamic Republic of Iran**.

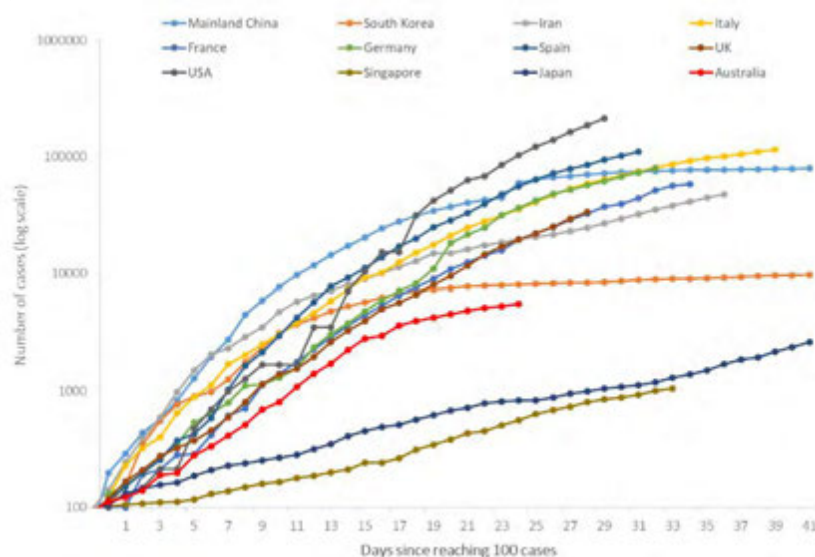


- New York City is reporting more than **1,800** deaths, with over **57,000** cases. More broadly, New York State is reporting more than **103,000** cases, which exceeds the total cases reported from Hubei Province, China (68,000 cases).
- Mainland China and the Republic of Korea continue to relatively few new cases each day.
  - International media reported on 24 March 2020 that Hubei Province will lift curbs on travel from 25 March, with the lockdown on Wuhan due to ease on 8 April 2020.
    - Internal movement within Hubei province will be unrestricted, however, strict limitations will apply to travel outside Hubei -travellers will need a "Green Code" indicating their health status.
    - Beijing is likely to receive 200,000 Hubei returnees, from all areas except Wuhan - all of whom will undergo a forced 14-day quarantine period.
- Based on the number of reported cases globally, the case fatality rate is approximately **5.4%**. The risk of death reportedly increases with age.

**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 74 of 3 April 2020**

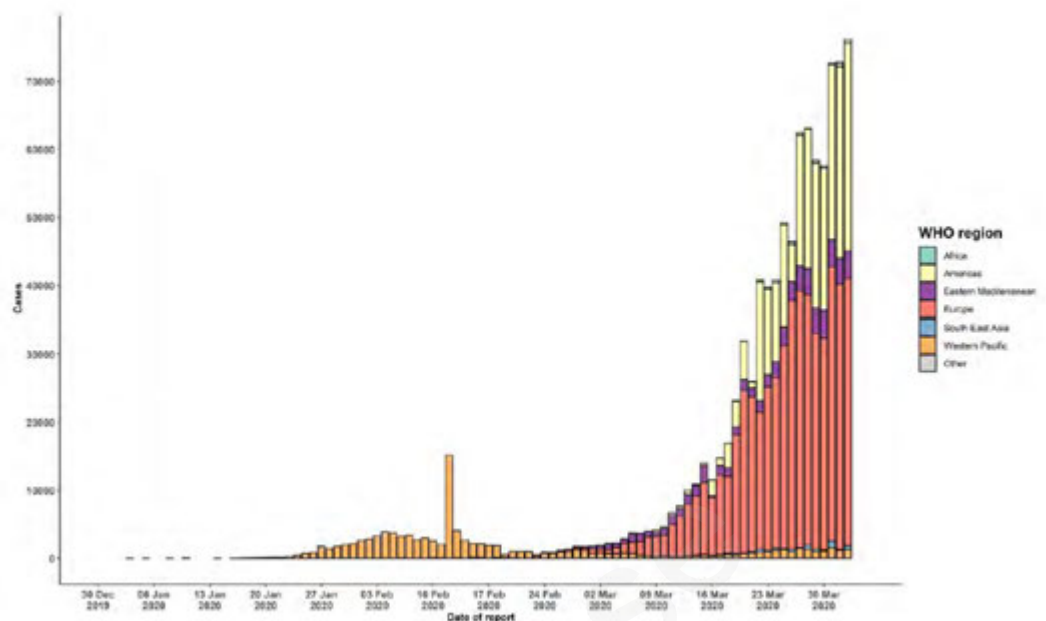


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 4 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 74 of 3 April 2020**



#### International response

##### WHO

- On 1 April 2020, the WHO Director General reported many countries are asking people to stay at home and shutting down population movement, which can help to limit transmission of the virus, but can have unintended consequences for the poorest and most vulnerable people.
  - In India, Prime Minister Modi has announced a \$24 billion package, including free food rations for 800 million disadvantaged people, cash transfers to 204 million poor women and free cooking gas for 80 million households for the next 3 months.
- So far, 74 countries have either joined or are in the process of joining the Solidarity trial. This trial is comparing the safety and effectiveness four drugs and drug combinations against COVID-19. As of this morning, more than 200 patients had been randomly assigned to one of the study arms.
- WHO's priority is that frontline health workers are able to access essential personal protective equipment, including medical masks and respirators. WHO is working with governments and manufacturers to step up the production and distribution of personal protective equipment, including masks.

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

##### European Commission

- On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.

##### Asian Development Bank (ADB)

- ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT Health Emergency Control Centre (HECC) remains activated to control the novel Coronavirus (COVID-19) response.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>The HECC continues to liaise with stakeholders across government and the community on preparedness for the identification and management COVID-19 cases in the ACT.</li> <li>There is whole-of-government planning underway around communications and business continuity.</li> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>All schools in the ACT, including government and non-government, commenced pupil free days from 24 March through to the ACT school holidays. Children of essential staff can continue to send their children to school during this time. ACT schools will remain open to students who need to attend.</li> <li>There are currently six public health emergency directions in force under the Public Health Act 1997 for, returned travellers, returned travellers (No 2), Residential Aged Care Facilities, self-isolation, and non-essential gatherings.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>Whole of Health briefings held weekly.</li> <li>State Control centre – Health activated 0800-1800 daily. Full recall arrangements in place.</li> <li>Full Incident management team meetings held 3 times a week.</li> <li>Activation of COVID-19 Clinics in 3 metro locations.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>

VIC Health	<ul style="list-style-type: none"> <li>• Premier Daniel Andrews released a statement on 22 March that Victoria will implement a lockdown of all non-essential activity.</li> <li>• A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li>• Victoria's State Control Centre (SCC) remains activated (Tier 2) to support the coordination of Victoria's response to the spread of COVID-19).</li> <li>• An incident management team is meeting daily.</li> <li>• A COVID-19 specific hotline has been activated using nurse on call.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• <i>WA is to close the state borders from midnight on Sunday 5 April 2020.</i> <ul style="list-style-type: none"> <li>◦ <i>WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</i></li> </ul> </li> <li>• <i>The Artania cruise ship remains anchored offshore in Fremantle.</i> <ul style="list-style-type: none"> <li>◦ <i>The Artania officially began its 14-day quarantine period on Friday 3rd April 2020 and is due to leave Fremantle on April 17 2020.</i></li> </ul> </li> <li>• <i>Additional doctors and nurses have been sent to the Kimberley region to support local healthcare workers.</i></li> <li>• New laws to enforce self-isolation and increased penalties for COVID-19 related incidents passed through both houses of State Parliament. The new law will enable authorities to: <ul style="list-style-type: none"> <li>◦ issue \$1,000 on-the-spot fines for individuals and \$5,000 fines for businesses to act as a further deterrent against those in the community who simply do not follow new directions.</li> <li>◦ allow for a person to be subject to electronic monitoring while they are in self-isolation.</li> <li>◦ introduce of a penalty of 12 months' imprisonment or a fine of \$12,000 for people who do not comply with electronic monitoring requirements.</li> <li>◦ include powers to compel people to provide information about any recent travel undertaken by them and information about people they have been in close contact with in light of COVID-19.</li> <li>◦ enable emergency management authorities to direct that any road, access route or areas of water in or leading to an emergency area be closed.</li> </ul> </li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Source: International cases based on WHO Situation Reports. Australian cases as at 15:00 hours on 4 April 2020.

Please note that the total global cases count reported in this table is less than the 'live' figure reported by John Hopkins University (1,099,389) as at 15:00 hours.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	82,802	3,331	78	4
Hong Kong SAR	845	4	43	0
Taiwan	348	5	9	0
Macau SAR	43	0	2	0
United States of America	213,600	4,793	26,298	947
Italy	115,242	13,917	4,668	760
Spain	110,238	10,003	8,102	950
Germany	79,696	1,017	6,174	145
France	58,327	4,490	2,066	471
Iran (Islamic Republic of)	50,468	3,160	2,875	124
The United Kingdom	33,722	2,921	4,244	389
Switzerland	18,844	536	1,774	158
Turkey	18,135	356	2,456	79
Belgium	15,348	1,011	1,384	183

Netherlands	14,697	1,339	1,083	166
Austria	11,129	158	418	12
Republic of Korea	10,062	174	86	5
Canada	10,114	127	1,109	22
Portugal	9,034	209	783	22
Brazil	6,836	241	1,119	40
Israel	6,211	29	620	8
Australia	5,454	28	104	2
Sweden	5,466	282	519	43
Norway	4,935	42	270	10
Czechia	3,858	44	269	5
Ireland	3,849	98	402	13
Denmark	3,386	123	279	19
Chile	3,404	18	373	2
Malaysia	3,116	50	208	5
Russian Federation	3,548	30	771	6
Poland	2,946	57	392	14
Romania	2,738	94	278	9
Japan	2,617	65	233	8
Ecuador	3,163	120	791	-26
Luxembourg	2,487	30	168	1
Philippines	2,633	107	322	11
Pakistan	2,450	35	159	4
Thailand	1,875	15	104	3
Saudi Arabia	1,885	21	165	5
Indonesia	1,790	170	113	13
India	1,965	50	329	12
Finland	1,518	19	72	2
South Africa	1,462	5	82	0
Greece	1,514	53	139	3
Peru	1,323	41	0	17
Dominican Republic	1,380	60	96	3
Iceland	1,319	4	99	2
Mexico	1,378	37	163	8
Panama	1,317	32	136	2
Serbia	1,171	13	111	0
Argentina	1,133	31	79	4
Singapore	1,049	4	49	1
Croatia	1,011	7	48	1
Colombia	1,065	17	159	1
Algeria	986	83	139	25
Slovenia	897	16	56	1
Qatar	949	3	114	1
United Arab Emirates	1024	8	210	0
Ukraine	987	23	183	3
Egypt	865	58	86	6

Estonia	858	11	79	6
Iraq	772	54	44	2
New Zealand	774	1	51	0
International conveyance (Diamond Princess)	712	11	0	0
Morocco	735	47	59	8
Lithuania	649	9	68	1
Armenia	640	4	69	1
Bahrain	643	4	74	0
Hungary	585	21	60	1
Lebanon	508	17	29	5
Bosnia and Herzegovina	521	16	57	3
Latvia	458	0	12	0
Republic of Moldova	591	8	168	3
Tunisia	455	14	32	2
Bulgaria	457	10	35	0
Slovakia	426	0	26	0
Andorra	429	15	33	2
Kazakhstan	435	3	49	0
Azerbaijan	400	5	41	0
North Macedonia	384	11	30	0
Costa Rica	375	2	28	0
Uruguay	350	4	12	2
Cyprus	356	9	36	0
Kuwait	417	0	100	0
Puerto Rico	316	12	30	1
Réunion	308	0	27	0
Jordan	299	5	21	0
Albania	277	16	0	1
Burkina Faso	261	14	0	0
San Marino	245	30	9	2
Afghanistan	269	5	34	1
Oman	252	2	21	1
Viet Nam	233	0	15	0
Cuba	233	6	21	0
Ghana	204	5	9	0
Belarus	254	4	62	2
Cote d'Ivoire	190	1	0	1
Senegal	195	1	5	0
Uzbekistan	221	2	31	0
Malta	195	0	7	0
Faroe Islands	177	0	4	0
Honduras	219	14	47	4
Mauritius	169	7	15	2
Sri Lanka	148	3	5	1
Venezuela (Bolivarian Republic of)	144	3	1	0
Cameroon	246	7	107	1

Nigeria	174	2	35	0
occupied Palestinian territory	165	1	31	0
Brunei Darussalam	133	1	2	0
Martinique	131	3	3	0
Guadeloupe	128	6	3	0
Kosovo[1]	126	1	1	0
Democratic Republic of the Congo	134	13	11	2
Georgia	148	0	27	0
Montenegro	140	2	20	0
Mayotte	128	2	12	0
Bolivia (Plurinational State of)	123	8	8	1
Kyrgyzstan	130	1	15	1
Cambodia	110	0	1	0
Trinidad and Tobago	90	5	1	0
Rwanda	84	0	2	0
Jersey	81	2	0	0
Kenya	110	3	29	2
Guernsey	91	1	13	0
Guam	82	3	5	0
Niger	74	5	0	0
Liechtenstein	75	0	3	0
Gibraltar	81	0	12	0
Paraguay	77	3	8	0
Isle of Man	71	1	6	1
Aruba	60	0	5	0
Bangladesh	56	6	2	0
Madagascar	65	0	12	0
French Guiana	55	0	4	0
Uganda	44	0	0	0
Guatemala	47	1	8	0
Jamaica	44	3	6	2
French Polynesia	37	0	0	0
Monaco	37	0	0	0
Togo	39	2	3	0
Zambia	39	1	3	1
Djibouti	41	0	7	0
Barbados	45	0	12	0
Bermuda	32	0	0	0
El Salvador	41	2	9	1
Guinea	52	0	22	0
United States Virgin Islands	33	0	3	0
Mali	28	3	0	3
Ethiopia	31	0	5	0
Congo	41	2	19	0
Saint Martin	22	2	1	0
United Republic of Tanzania	20	1	0	0

Guyana	19	4	0	2
Maldives	19	0	1	0
Haiti	16	0	0	0
New Caledonia	18	0	2	0
Bahamas	21	1	6	1
Eritrea	20	0	5	0
Myanmar	16	1	1	0
Cayman Islands	22	1	8	0
Equatorial Guinea	15	0	1	0
Mongolia	14	0	0	0
Benin	13	0	0	0
Saint Lucia	13	0	0	0
Curaçao	11	1	0	0
Dominica	11	0	0	0
Namibia	13	0	2	0
Greenland	10	0	0	0
Lao People's Democratic Republic	10	0	0	0
Libya	10	1	0	1
Mozambique	10	0	0	0
Seychelles	10	0	0	0
Syrian Arab Republic	16	2	6	-1
Eswatini	9	0	0	0
Grenada	10	0	1	0
Guinea-Bissau	9	0	0	0
Angola	8	2	0	0
Central African Republic	8	0	0	0
Saint Kitts and Nevis	8	0	0	0
Suriname	8	0	0	0
Zimbabwe	8	1	0	0
Antigua and Barbuda	7	0	0	0
Chad	7	0	0	0
Gabon	18	1	11	0
Sudan	8	2	1	0
Holy See	7	0	1	0
Liberia	6	0	0	0
Northern Mariana Islands (Commonwealth of the)	8	1	2	1
Saint Barthélemy	6	0	0	0
Sint Maarten	18	1	12	1
Cabo Verde	5	1	0	0
Fiji	7	0	2	0
Mauritania	5	0	0	0
Montserrat	5	0	0	0
Nepal	6	0	1	0
Nicaragua	5	1	0	0
Somalia	5	0	0	0
Turks and Caicos Islands	5	0	0	0



Bhutan	5	0	1	0
Belize	3	0	0	0
Botswana	4	1	1	0
British Virgin Islands	3	0	0	0
Gambia	4	1	1	0
Anguilla	2	0	0	0
Burundi	2	0	0	0
Sierra Leone	2	0	0	0
Papua New Guinea	1	0	0	0
Saint Vincent and the Grenadines	2	0	1	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>972,530</b>	<b>50,327</b>	<b>75,706</b>	<b>4,796</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #77 Novel Coronavirus (COVID-19)  
**Date:** Sunday, 5 April 2020 8:09:27 PM  
**Attachments:** [2020-04-05 NIR Health SitRep v77 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 5 April 2020, there have been 5,687 laboratory confirmed cases of COVID-19 in Australia, including 34 deaths.
- Since yesterday's situation report, an additional 139 cases, including 4 death, have been reported in Australia.
- To date, more than 297,000 tests have been conducted across Australia.
- On 4 April 2020, Minister Hunt announced a \$1.5 million investment to support clinical management of COVID-19.

#### Situation Overseas

- As at 1500 hrs 5 April 2020, a total of 1,203,485 cases of COVID-19 have been reported globally, including 64,784 deaths.
- New York State is reporting more than 113,000 cases, which exceeds the total cases reported from Hubei Province, China.

The next Situation Report will be issued on 6 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <i>05</i> 1800 AEDT	<b>Version</b>	<i>77</i>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <i>06</i> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 4 April 2020, Minister Hunt announced a \$1.5 million investment to support clinical management of COVID-19.               <ul style="list-style-type: none"> <li>The National COVID-19 Clinical Evidence Taskforce will receive this funding from the Medical Research Future Fund (MRFF) to deliver 'living guidelines' on the clinical management of patients with suspected or confirmed COVID-19 infection across primary, acute and critical care settings.</li> <li>The initial set of recommendations launched yesterday and will address priority topics in urgent need of clear and unified guidance, including:                   <ul style="list-style-type: none"> <li>Drug treatment of COVID-19 infection</li> <li>Use of oxygen therapies</li> <li>Key elements of critical care, and</li> <li>Disease categories and monitoring.</li> </ul> </li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 27 March 2020, the Prime Minister announced that all incoming travellers entering Australia from 11.59pm 28 March will be quarantined in a designated hotel or other accommodation for 14 days. Foreign nationals cannot enter Australia.</li> <li>Travellers will complete their 14-day quarantine at their port of arrival, no onward travel will be permitted.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police. The Australian Defence Force will help ensure people are staying in quarantine and the Commonwealth will support as required.</li> </ul>

	<ul style="list-style-type: none"> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>Isolation Declaration Cards (IDC) are issued to all incoming travellers. <ul style="list-style-type: none"> <li>The IDC will ask the traveller if they 'understand the need to isolate for 14 days', while collecting personal information for public health follow up by the states and territories.</li> <li>Travellers will be requested to complete the card at all international airports from 0600hrs AEDT 20 March.</li> </ul> </li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The declaration was recommended by the Chief Medical Officer in his capacity as the Director of Human Biosecurity.</li> <li>The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.</li> <li>The National Cabinet has also noted that Commonwealth, States and Territories were implementing emergency powers under respective legislation in order to be able to deal with the spread of COVID-19 as quickly and flexibly as possible.</li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 5 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>5,687</b> cases of COVID-19, including <b>34</b> deaths, have been confirmed in Australia (Table 1 and Figure 2). <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>139</b> cases, including <b>4</b> deaths, have been reported in Australia.</li> <li>It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures. <ul style="list-style-type: none"> <li>The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over 25% to around <b>3%</b>.</li> <li>However, it is too soon to tell whether this trend will be sustained.</li> </ul> </li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately <b>11%</b> of cases have been hospitalised during their course of illness, with 12% of these cases requiring admission to an ICU (<b>1.3%</b> of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0–<b>100</b> years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is <b>78</b> years (range <b>60–94</b>).</li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>297,000</b> tests have been conducted across Australia (as at 3pm). <ul style="list-style-type: none"> <li>The cumulative per cent positive is 1.9% with positivity in the past week being <b>2.0%</b>.</li> </ul> </li> </ul>
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Source of infection

- To date, most confirmed cases are considered to have been overseas acquired (**66%**) (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – **28%**
    - There have been at least 360 cases, including 15 crew members, associated with the Ruby Princess cruise ship with the majority of them being NSW cases, and a subset of interstate cases. **At least 7** of these cases are reported to have died.
    - There are also cases associated with several other cruise ships.
  - United States – **16%**
  - United Kingdom – 16%
  - There have also been cases imported from every continent, except Antarctica.
- Of the locally acquired cases:
  - Majority are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
  - Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). **An increasing** number of cases from NSW are reported as being locally acquired with no epidemiological link back to a confirmed case being able to be established.

Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence (CDI) journal. The most recent report contains information on cases up to 29 March 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

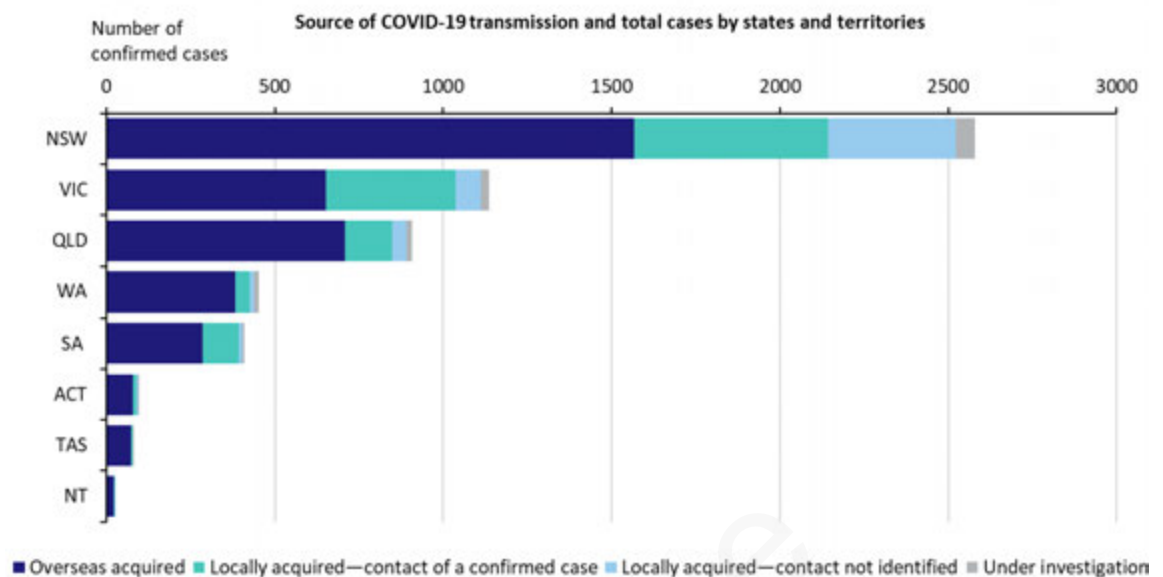
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>\*\*^</sup>, Australia (as at 1500 hrs, 5 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	3,765	77	1,566	23	707	285	72	652	383
Locally acquired - contact of confirmed case and/or in a known cluster	1,273	13	578	2	140	109	5	384	42
Locally acquired - contact not identified	500	0	380	0	32	3	0	75	10
Locally acquired - contact not identified, but case had interstate travel	29	4	NA	1	12	6	1	0	5
Under investigation	120	2	56	0	16	6	3	24	13
<b>Total cases</b>	<b>5,687</b>	<b>96</b>	<b>2,580</b>	<b>26</b>	<b>907</b>	<b>409</b>	<b>81</b>	<b>1,135</b>	<b>453</b>
<b>Died (of total)</b>	<b>34</b>	<b>2</b>	<b>15</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>2</b>	<b>8</b>	<b>3</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	139 (3%)	3 (3%)	87 (3%)	1 (4%)	7 (1%)	2 (0%)	2 (3%)	20 (2%)	17 (4%)
Change in the last 72hrs before (%change)	554 (11%)	8 (9%)	282 (12%)	6 (30%)	72 (9%)	24 (6%)	10 (14%)	99 (10%)	53 (13%)
Average daily increase over the past three days (compound)	3%	3%	4%	9%	3%	2%	5%	3%	4%
Increase over the past week	1,721	19	789	12	251	122	20	366	142

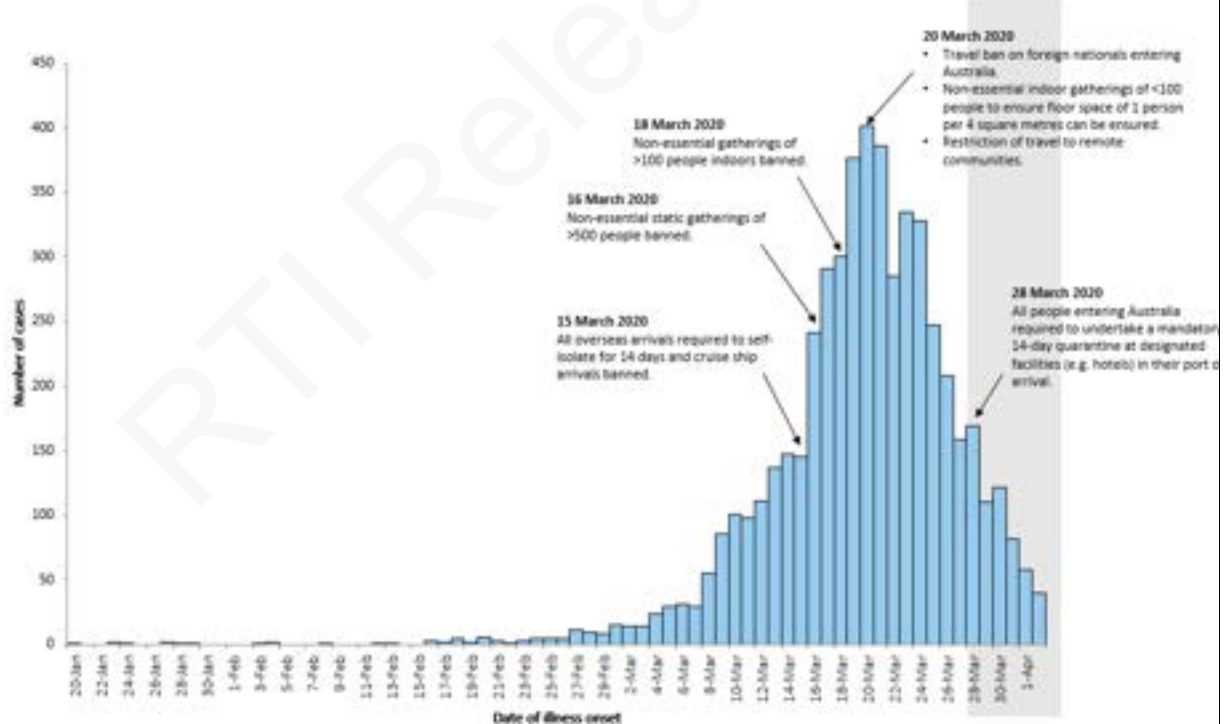
# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 5 April 2020**



**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 5 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Total confirmed COVID-19 cases by sex and age group**

Age (years)	Male	Female
0-9	25	20
10-19	75	75
20-29	525	645
30-39	415	415
40-49	405	285
50-59	415	420
60-69	465	435
70-79	305	255
80-89	70	50
90+	15	10

- A total of **1,203,485** cases of COVID-19 have been reported globally, including **64,784** deaths (Source: Johns Hopkins University, as at 1500hrs on **5 April 2020**).
- Three countries (USA, Italy and Spain) are reporting more than 100,000 cases (WHO).
- 73% of all deaths are from 5 countries: Italy, Spain, France, the United States and China (including SARs).

- A total of **104,096** new cases, including **5,883** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region (including Italy, Spain, Germany, France and the United Kingdom) as well as the United States and the Islamic Republic of Iran.
  - New York City is reporting more than **2,600** deaths, with over **63,000** cases. More broadly, New York State is reporting more than **113,000** cases, which exceeds the total cases reported from Hubei Province, China (68,000 cases).
  - Based on the number of reported cases globally, the case fatality rate is approximately **5.5%**. The risk of death reportedly increases with age.
  - *Indonesia is reporting over 2,000 cases and 191 deaths, which exceeds the number of deaths reported in the Republic of Korea which has reported over 10,000 cases. This suggests that the actual number of cases in Indonesia is much higher than reported.*

**Countries, areas or territories with COVID-19 cases reported in the last 7 days**  
(From 29 March 2020, 10:00AM to 04 April 2020, 10:00AM [CET])

**Cases reported in the last 7 days**

- 0 - 1,000
- 101 - 10,000
- 10,001 - 100,000
- 100,001 - 100,000
- >100,000

Countries, areas or territories with no cases reported in the last 7 days

Countries, areas or territories without border

World Health Organization

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Number of cases of COVID-19 and cases (WHO) (2020, 2020)

Source: Data aggregated for illustrative purposes.

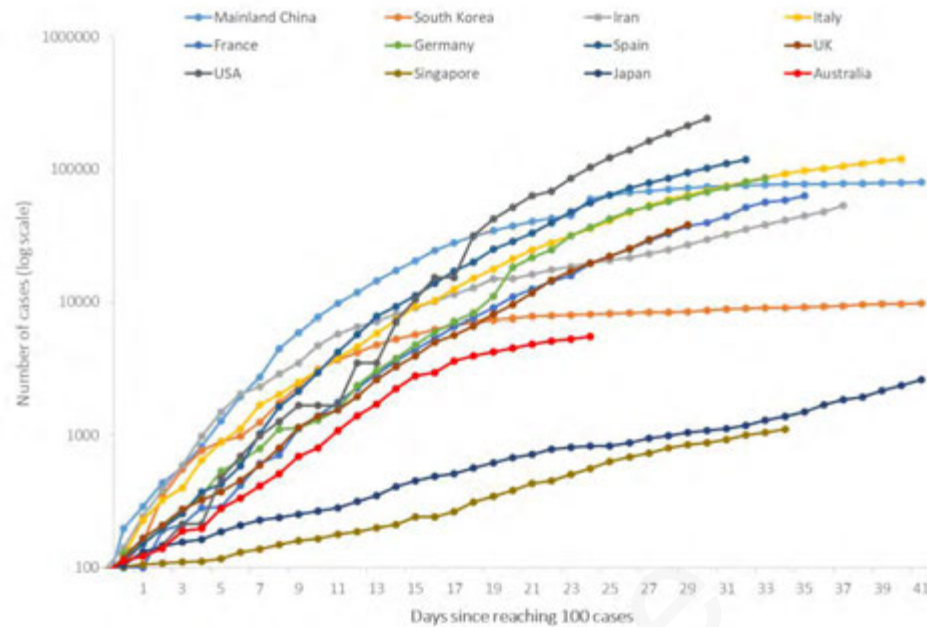
World Health Organization  
Map Projections: WGS84, North Equatorial Projection

Legend:   
 - Grey: Not applicable  
 - Blue: Cases  
 - Yellow: Cases

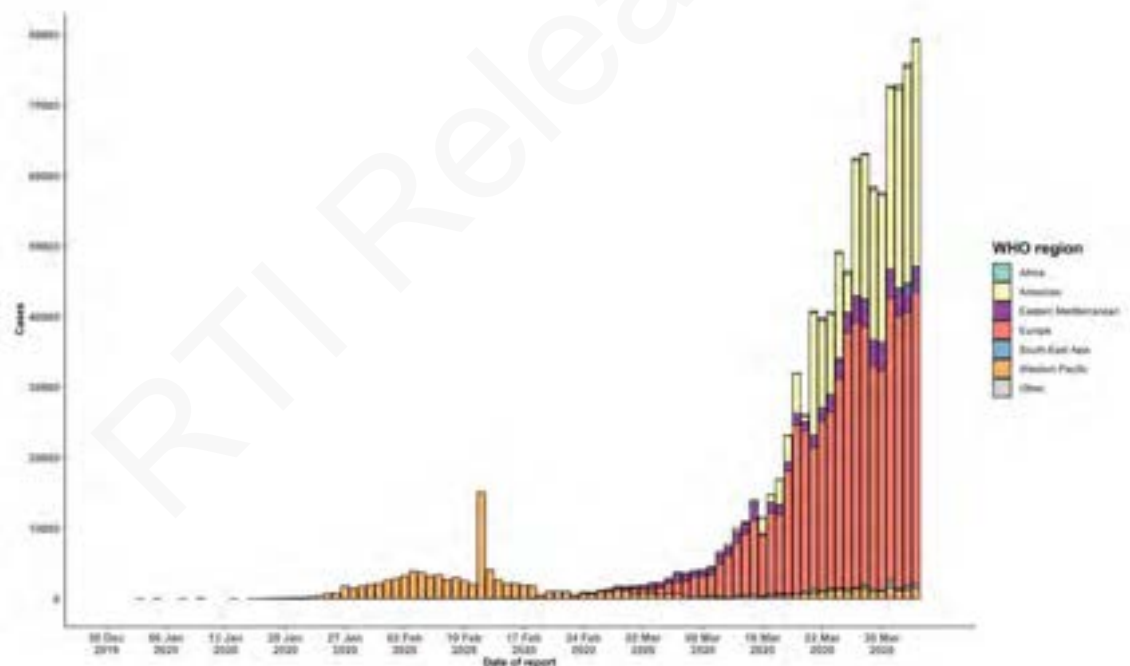
World Health Organization



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 5 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 75 of 4 April 2020**



#### International response

#### WHO

- On 1 April 2020, the WHO Director General reported many countries are asking people to stay at home and shutting down population movement, which can help to limit transmission of the virus, but can have unintended consequences for the poorest and most vulnerable people.
  - In India, Prime Minister Modi has announced a \$24 billion package, including free food rations for 800 million disadvantaged people, cash transfers to 204 million poor women and free cooking gas for 80 million households for the next 3 months.
- So far, 74 countries have either joined or are in the process of joining the Solidarity trial. This trial is comparing the safety and effectiveness four drugs and drug combinations against COVID-19. As of this morning, more than 200 patients had been randomly assigned to one of the study arms.

	<ul style="list-style-type: none"> <li>WHO's priority is that frontline health workers are able to access essential personal protective equipment, including medical masks and respirators. WHO is working with governments and manufacturers to step up the production and distribution of personal protective equipment, including masks.</li> </ul> <p><b>International Monetary Fund</b></p> <ul style="list-style-type: none"> <li>The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.</li> </ul> <p><b>World Bank</b></p> <ul style="list-style-type: none"> <li>World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.</li> </ul> <p><b>European Commission</b></p> <ul style="list-style-type: none"> <li>On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.</li> </ul> <p><b>Asian Development Bank (ADB)</b></p> <ul style="list-style-type: none"> <li>ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT Health Emergency Control Centre (HECC) remains activated to control the novel Coronavirus (COVID-19) response.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li><i>From Monday 6 April 2020, COVID testing in the ACT will be expanded to include a random selection of people who would not otherwise meet the testing criteria.</i></li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> </ul>

	<ul style="list-style-type: none"> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li><i>The State Control Centre Health is active 0800-2100 hours, 7 days a week, with liaison officers from multiple organisations.</i></li> <li><i>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</i></li> <li><i>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</i></li> <li><i>Hospital based COVID-19 clinics operational in metro and regional areas.</i></li> <li><i>GP based testing clinics open to ensure better coverage in some metro areas.</i></li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>Premier Daniel Andrews released a statement on 22 March that Victoria will implement a lockdown of all non-essential activity.</li> <li>A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li>Victoria's State Control Centre (SCC) remains activated (Tier 2) to support the coordination of Victoria's response to the spread of COVID-19).</li> <li>An incident management team is meeting daily.</li> <li>A COVID-19 specific hotline has been activated using nurse on call.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>WA is to close the state borders from midnight on Sunday 5 April 2020. <ul style="list-style-type: none"> <li>WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</li> </ul> </li> <li>The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>The Artania officially began its 14-day quarantine period on Friday 3rd April 2020 and is due to leave Fremantle on April 17 2020.</li> </ul> </li> <li>Additional doctors and nurses have been sent to the Kimberley region to support local healthcare workers.</li> <li>New laws to enforce self-isolation and increased penalties for COVID-19 related incidents passed through both houses of State Parliament.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year

olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Source: International cases based on WHO Situation Reports. Australian cases as at 15:00 hours on 5 April 2020.

Please note that the total global cases count reported in this table is less than the 'live' figure reported by John Hopkins University (1,099,389) as at 15:00 hours.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	82,875	3,335	73	4
Hong Kong SAR	862	4	17	0
Taiwan	355	5	7	0
Macau SAR	44	0	1	0
United States of America	277,205	6,593	63,605	1,800
Italy	124,632	15,362	9,390	1,445
Spain	124,736	11,744	14,498	1,741
Germany	85,778	1,158	6,082	141
France	68,605	7,560	10,278	3,070
Iran (Islamic Republic of)	55,743	3,452	5,275	292
The United Kingdom	41,903	4,313	8,181	1,392

Switzerland	20,278	607	1,434	71
Turkey	20,921	425	2,786	69
Belgium	16,770	1,143	1,422	132
Netherlands	15,723	1,487	1,026	148
Austria	11,525	168	396	10
Republic of Korea	10,156	177	94	3
Canada	13,904	214	3,790	87
Portugal	9,886	246	852	37
Brazil	7,910	299	1,074	58
Israel	7,030	36	819	7
Australia	5,635	34	181	6
Sweden	6,078	333	612	51
Norway	5,208	44	273	2
Czechia	4,190	53	332	9
Ireland	4,273	120	424	22
Denmark	3,757	139	371	16
Chile	3,737	22	333	4
Malaysia	3,333	53	217	3
Russian Federation	4,149	34	601	4
Poland	3,383	71	437	14
Romania	3,183	133	445	39
Japan	2,920	69	303	4
Ecuador	3,163	120	0	0
Luxembourg	2,612	31	125	1
Philippines	3,018	136	385	29
Pakistan	2,450	35	0	0
Thailand	1,978	19	103	4
Saudi Arabia	2,039	25	154	4
Indonesia	2,092	191	302	21
India	2,301	56	336	6
Finland	1,615	20	97	1
South Africa	1,505	7	43	2
Greece	1,613	59	99	6
Peru	1,414	51	91	10
Dominican Republic	1,488	68	108	8
Iceland	1,364	4	45	0
Mexico	1,510	50	132	13
Panama	1,475	37	158	5
Serbia	1,476	39	305	26
Argentina	1,265	37	132	6
Singapore	1,114	5	65	1
Croatia	1,079	8	68	1
Colombia	1,161	19	96	2
Algeria	986	83	0	0
Slovenia	934	20	37	4
Qatar	1,075	3	126	0

United Arab Emirates	1264	9	240	1
Ukraine	1096	28	109	5
Egypt	985	66	120	8
Estonia	961	12	103	1
Iraq	820	54	48	0
New Zealand	824	1	50	0
International conveyance (Diamond Princess)	712	11	0	0
Morocco	844	50	109	3
Lithuania	771	9	122	0
Armenia	736	7	96	3
Bahrain	673	4	30	0
Hungary	678	32	93	11
Lebanon	508	17	0	0
Bosnia and Herzegovina	586	18	65	2
Latvia	493	1	35	1
Republic of Moldova	591	9	0	1
Tunisia	495	18	40	4
Bulgaria	485	14	28	4
Slovakia	450	0	24	0
Andorra	442	16	13	1
Kazakhstan	460	3	25	0
Azerbaijan	443	5	43	0
North Macedonia	430	12	46	1
Costa Rica	396	2	21	0
Uruguay	369	4	19	0
Cyprus	396	11	40	2
Kuwait	417	0	0	0
Puerto Rico	378	15	62	3
Réunion	321	0	13	0
Jordan	310	5	11	0
Albania	333	17	56	1
Burkina Faso	261	15	0	1
San Marino	252	32	7	2
Afghanistan	270	5	1	0
Oman	277	1	25	-1
Viet Nam	239	0	6	0
Cuba	269	6	36	0
Ghana	204	5	0	0
Belarus	254	4	0	0
Cote d'Ivoire	203	1	13	0
Senegal	207	1	12	0
Uzbekistan	241	2	20	0
Malta	202	0	7	0
Faroe Islands	179	0	2	0
Honduras	222	15	3	1
Mauritius	186	7	17	0

Sri Lanka	151	4	3	1
Venezuela (Bolivarian Republic of)	144	3	0	0
Cameroon	246	7	0	0
Nigeria	190	2	16	0
occupied Palestinian territory	193	1	28	0
Brunei Darussalam	134	1	1	0
Martinique	138	3	7	0
Guadeloupe	130	7	2	1
Kosovo[1]	132	1	6	0
Democratic Republic of the Congo	134	13	0	0
Georgia	157	0	9	0
Montenegro	160	2	20	0
Mayotte	128	2	0	0
Bolivia (Plurinational State of)	132	9	9	1
Kyrgyzstan	144	1	14	0
Cambodia	114	0	4	0
Trinidad and Tobago	97	6	7	1
Rwanda	89	0	5	0
Jersey	118	2	37	0
Kenya	122	4	12	1
Guernsey	114	2	23	1
Guam	84	3	2	0
Niger	98	5	24	0
Liechtenstein	76	0	1	0
Gibraltar	95	1	14	1
Paraguay	92	3	15	0
Isle of Man	114	1	43	0
Aruba	62	0	2	0
Bangladesh	61	6	5	0
Madagascar	65	0	0	0
French Guiana	57	0	2	0
Uganda	45	0	1	0
Guatemala	50	1	3	0
Jamaica	47	3	3	0
French Polynesia	39	0	2	0
Monaco	37	0	0	0
Togo	39	2	0	0
Zambia	39	1	0	0
Djibouti	50	0	9	0
Barbados	45	0	0	0
Bermuda	35	0	3	0
El Salvador	46	2	5	0
Guinea	52	0	0	0
United States Virgin Islands	37	0	4	0
Mali	36	3	8	0
Ethiopia	35	0	4	0

Congo	41	3	0	1
Saint Martin	22	2	0	0
United Republic of Tanzania	20	1	0	0
Guyana	19	4	0	0
Maldives	19	0	0	0
Haiti	18	0	2	0
New Caledonia	18	0	0	0
Bahamas	24	3	3	2
Eritrea	20	0	0	0
Myanmar	20	1	4	0
Cayman Islands	28	1	6	0
Equatorial Guinea	15	0	0	0
Mongolia	14	0	0	0
Benin	13	0	0	0
Saint Lucia	13	0	0	0
Curaçao	11	1	0	0
Dominica	11	0	0	0
Namibia	13	0	0	0
Greenland	10	0	0	0
Lao People's Democratic Republic	10	0	0	0
Libya	17	1	7	0
Mozambique	10	0	0	0
Seychelles	10	0	0	0
Syrian Arab Republic	16	2	0	0
Eswatini	9	0	0	0
Grenada	10	0	0	0
Guinea-Bissau	15	0	Celia6	0
Angola	10	2	2	0
Central African Republic	8	0	0	0
Saint Kitts and Nevis	8	0	0	0
Suriname	10	0	2	0
Zimbabwe	9	1	1	0
Antigua and Barbuda	7	0	0	0
Chad	7	0	0	0
Gabon	21	1	3	0
Sudan	10	2	2	0
Holy See	7	0	0	0
Liberia	7	0	1	0
Northern Mariana Islands (Commonwealth of the)	8	1	0	0
Saint Barthélemy	6	0	0	0
Sint Maarten	23	2	5	1
Cabo Verde	5	1	0	0
Fiji	7	0	0	0
Mauritania	6	1	1	1
Montserrat	5	0	0	0
Nepal	6	0	0	0



Nicaragua	5	1	0	0
Somalia	7	0	2	0
Turks and Caicos Islands	5	0	0	0
Bhutan	5	0	0	0
Belize	3	0	0	0
Botswana	4	1	0	0
British Virgin Islands	3	0	0	0
Gambia	4	1	0	0
Anguilla	3	0	1	0
Burundi	3	0	1	0
Sierra Leone	2	0	0	0
Papua New Guinea	1	0	0	0
Saint Vincent and the Grenadines	3	0	1	0
Malawi	3	0	1	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>1,113,359</b>	<b>61,225</b>	<b>140,825</b>	<b>10,898</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #78 Novel Coronavirus (COVID-19)  
**Date:** Monday, 6 April 2020 8:16:51 PM  
**Attachments:** [2020-04-06 NIR Health SitRep v78 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 6 April 2020, there have been 5,795 laboratory confirmed cases of COVID-19 in Australia, including 39 deaths.
- Since yesterday's situation report, an additional 108 cases, including 5 deaths, have been reported in Australia.
- To date, more than 302,000 tests have been conducted across Australia.
- Today the Minister for Regional Health, Regional Communications and Local Government chaired the second special roundtable with members of the Rural Health Stakeholder group to discuss the Australian Government response to COVID-19 and priorities for rural and remote communities.

#### Situation Overseas

- As at 1500 hrs 6 April 2020, a total of 1,275,542 cases of COVID-19 have been reported globally, including 69,498 deaths.

The next Situation Report will be issued on 7 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-06 1800 AEDT	<b>Version</b>	78
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-07 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 6 April 2020, Minister for Regional Health, Regional Communications and Local Government chaired the second special roundtable teleconference with members of the Rural Health Stakeholder group to discuss the Australian Government response to COVID-19 and priorities for rural and remote communities. Discussions included:               <ul style="list-style-type: none"> <li>progress on distribution of additional Personal Protective Equipment (PPE) to rural and remote communities,</li> <li>roll out of GP respiratory clinics across the country with the likely first rural clinic to open next week in Emerald, Qld.</li> <li>locum tenens time limits have been extended for up to 12 weeks, enabling unrestricted access for doctors and eligible health professionals to be able to provide services,</li> <li>\$2.5 million funding for the Australian College of Nursing to provide a free online training course, known as the REFRESHER program, to 3,000 eligible Registered Nurses.</li> </ul> </li> <li>The International Aviation Network will ensure continuing commercial flights between Australia and four key international hubs over the next four weeks: London, Los Angeles, Hong Kong and Auckland.</li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 27 March 2020, the Prime Minister announced that all incoming travellers entering Australia from 11.59pm 28 March will be quarantined in a designated hotel or other accommodation for 14 days. Foreign nationals cannot enter Australia.</li> <li>Travellers will complete their 14-day quarantine at their port of arrival, no onward travel will be permitted.</li> </ul>

	<ul style="list-style-type: none"> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police. The Australian Defence Force will help ensure people are staying in quarantine and the Commonwealth will support as required.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>Isolation Declaration Cards (IDC) are issued to all incoming travellers. <ul style="list-style-type: none"> <li>The IDC will ask the traveller if they 'understand the need to isolate for 14 days', while collecting personal information for public health follow up by the states and territories.</li> <li>Travellers will be requested to complete the card at all international airports from 0600hrs AEDT 20 March.</li> </ul> </li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The declaration was recommended by the Chief Medical Officer in his capacity as the Director of Human Biosecurity.</li> <li>The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.</li> <li>The National Cabinet has also noted that Commonwealth, States and Territories were implementing emergency powers under respective legislation in order to be able to deal with the spread of COVID-19 as quickly and flexibly as possible.</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 6 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>5,795</b> cases of COVID-19, including <b>39</b> deaths, have been confirmed in Australia (Table 1 and Figure 2). <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>108</b> cases, including <b>5</b> deaths, have been reported in Australia.</li> <li>It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures. <ul style="list-style-type: none"> <li>The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over <b>22%</b> to around <b>2%</b>.</li> <li>However, it is too soon to tell whether this trend will be sustained.</li> </ul> </li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with 12% of these cases requiring admission to an ICU (<b>1.4%</b> of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is <b>80</b> years (range 60–94).</li> </ul>
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Testing

- To date, more than **302,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was 1.9% and the positivity in the past week are **2.0%**.

Source of infection

- To date, most confirmed cases are considered to have been overseas acquired (**67%**) (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – **26%**
    - At least **13** of these cases are reported to have died.
    - There have been at least **374** cases, including crew members, associated with the Ruby Princess cruise ship with the majority of them being NSW cases, and a subset of interstate cases.
    - There are also cases associated with several other cruise ships.
  - United States – **15%**
  - United Kingdom – **14%**
  - There have also been cases imported from every continent, except Antarctica.
- Of the locally acquired cases:
  - Majority are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
  - Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). An increasing number of cases from NSW are reported as being locally acquired with no epidemiological link back to a confirmed case being able to be established.

Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence (CDI) journal. The most recent report contains information on cases up to 29 March 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

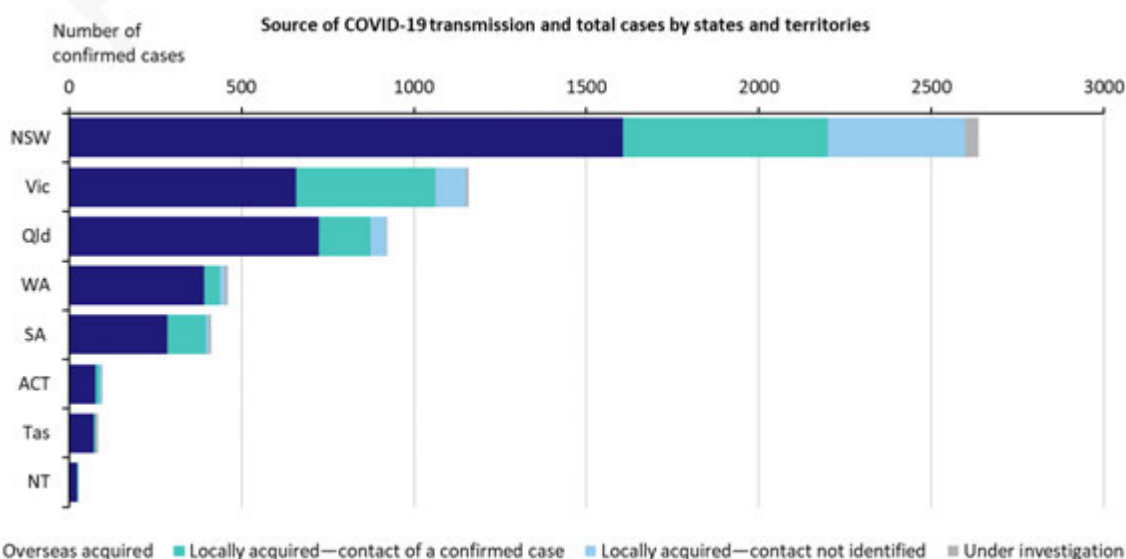
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*\*^, Australia (as at 1500 hrs, 6 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	3,839	78	1,605	24	724	286	72	658	392
Locally acquired - contact of confirmed case and/or in a known cluster	1,323	12	595	2	149	110	5	404	46
Locally acquired - contact not identified	531	0	397	0	33	3	0	88	10
Locally acquired - contact not identified, but case had interstate travel	30	4	NA	1	13	6	1	0	5
Under investigation	72	2	40	0	2	6	7	8	7
<b>Total cases</b>	<b>5,795</b>	<b>96</b>	<b>2,637</b>	<b>27</b>	<b>921</b>	<b>411</b>	<b>85</b>	<b>1,158</b>	<b>460</b>
<b>Died (of total)</b>	<b>39</b>	<b>2</b>	<b>17</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>2</b>	<b>10</b>	<b>3</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	108 (2%)	0 (0%)	57 (2%)	1 (4%)	14 (2%)	2 (0%)	4 (5%)	23 (2%)	7 (2%)
Change in the last 72hrs before (%change)	445 (8%)	5 (5%)	248 (10%)	6 (29%)	48 (5%)	15 (4%)	12 (16%)	73 (7%)	38 (9%)
Average daily increase over the past three days (compound)	3%	2%	3%	9%	2%	1%	5%	2%	3%
Increase over the past week	1,550	18	719	13	232	106	20	337	105

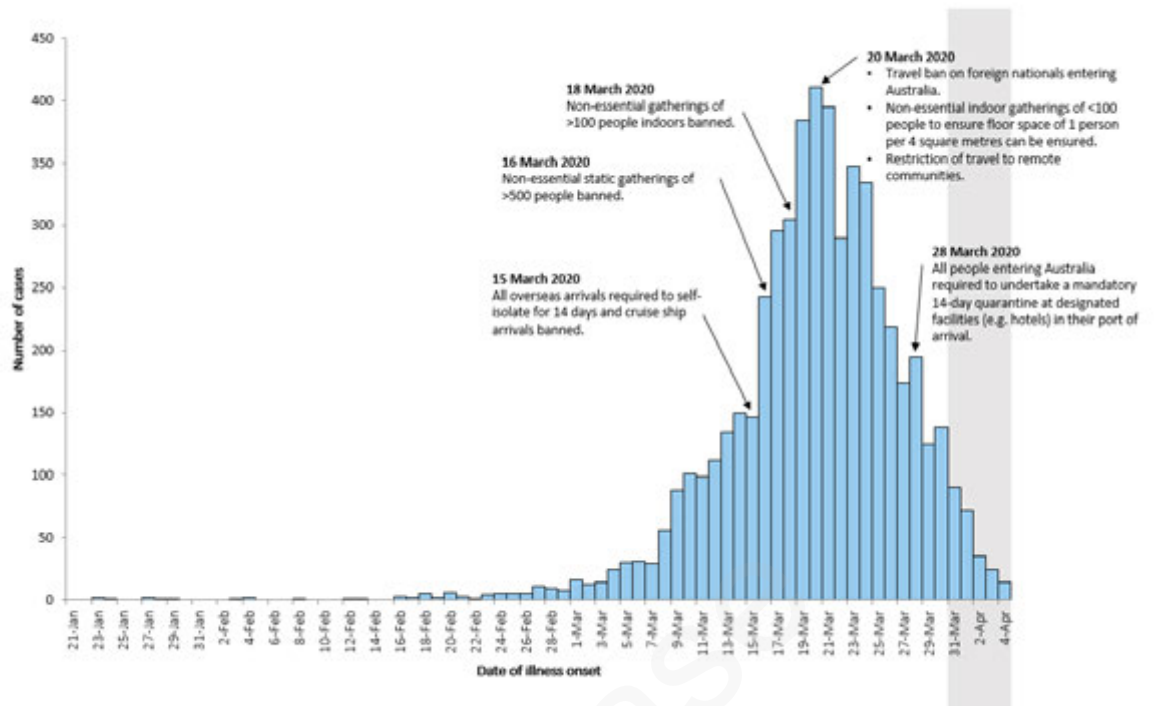
# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 6 April 2020**

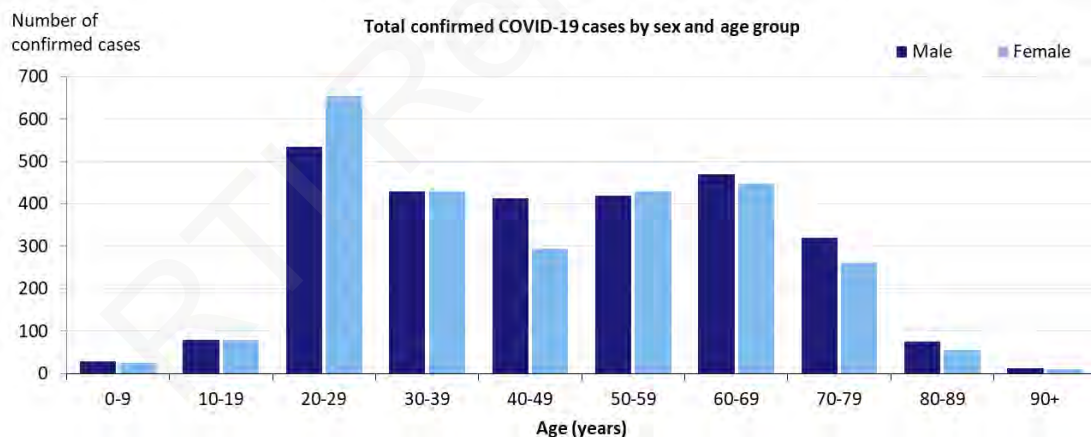


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 6 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 6 April 2020**



#### International Situation (as at 1500 hrs, 5 April 2020)

- A total of **1,275,542** cases of COVID-19 have been reported globally, including **69,498** deaths (Source: Johns Hopkins University, as at 1500hrs on 6 April 2020).
- 73% of all deaths are from 5 countries: Italy, Spain, France, the United States and **the United Kingdom**.

#### Recent reporting of cases and deaths

- A total of **72,057** new cases, including **4,714** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region (including Italy, Spain, Germany, France and the United Kingdom) as well as the United States and the Islamic Republic of Iran.
  - New York City is reporting more than **2,400** deaths, with over **64,000** cases. More broadly, New York State is reporting more than **123,000** cases, which exceeds the total cases reported from Hubei Province, China (68,000 cases).

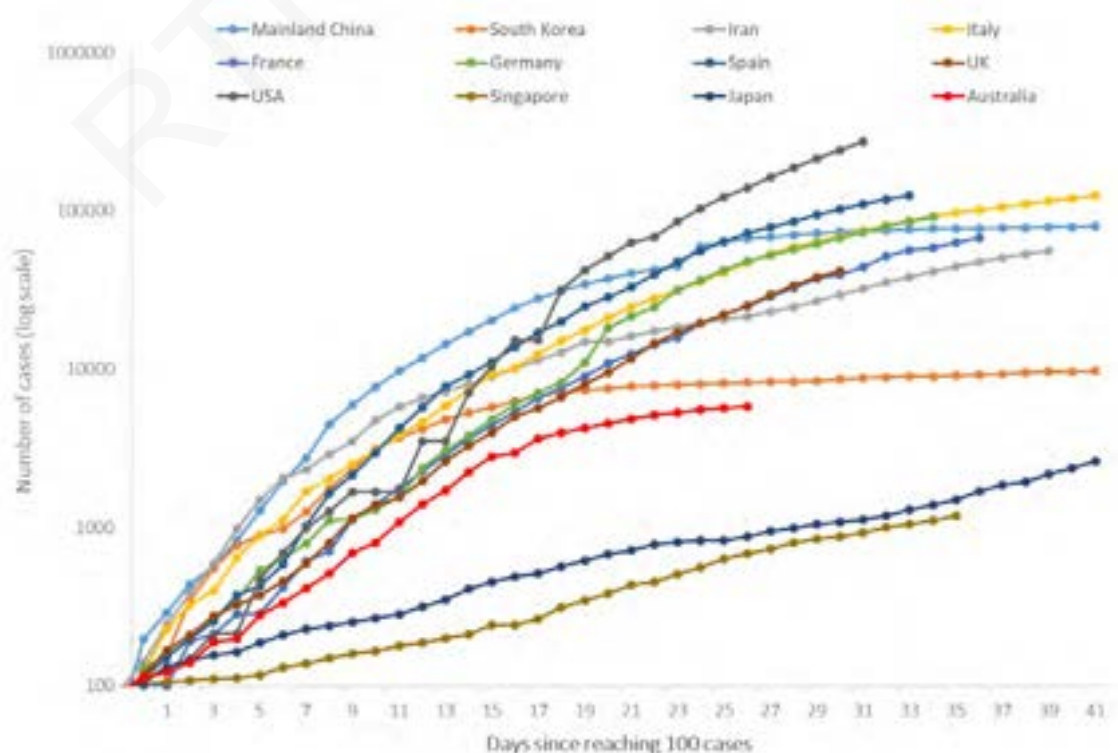


- Based on the number of reported cases globally, the case fatality rate is approximately 5.5%. The risk of death reportedly increases with age.
- Indonesia is reporting over 2,000 cases and 198 deaths, which exceeds the number of deaths reported in the Republic of Korea which has reported over 10,000 cases. This suggests that the actual number of cases in Indonesia is much higher than reported.

**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 76 of 5 April 2020**

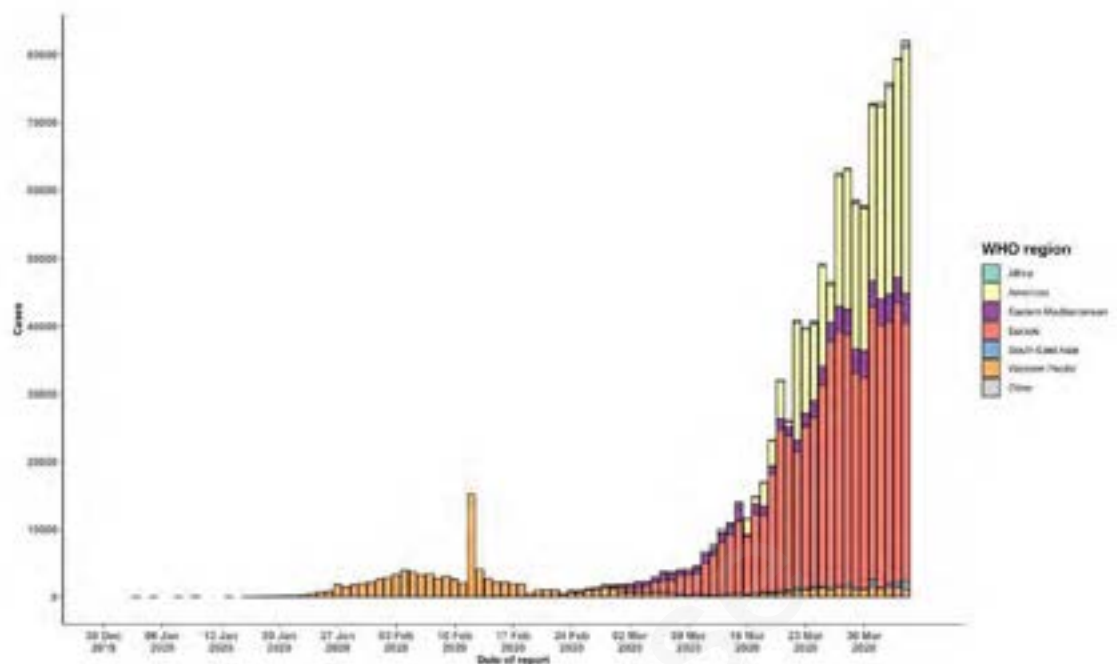


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 6 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 76 of 5 April 2020**



#### International response

##### WHO

- On 1 April 2020, the WHO Director General reported many countries are asking people to stay at home and shutting down population movement, which can help to limit transmission of the virus, but can have unintended consequences for the poorest and most vulnerable people.
  - In India, Prime Minister Modi has announced a \$24 billion package, including free food rations for 800 million disadvantaged people, cash transfers to 204 million poor women and free cooking gas for 80 million households for the next 3 months.
- So far, 74 countries have either joined or are in the process of joining the Solidarity trial. This trial is comparing the safety and effectiveness of four drugs and drug combinations against COVID-19. As of this morning, more than 200 patients had been randomly assigned to one of the study arms.
- WHO's priority is that frontline health workers are able to access essential personal protective equipment, including medical masks and respirators. WHO is working with governments and manufacturers to step up the production and distribution of personal protective equipment, including masks.

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

##### European Commission

- On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.

##### Asian Development Bank (ADB)

- ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated to control the novel Coronavirus (COVID-19) response.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>COVID testing in the ACT <b>was</b> expanded to include a random selection of people who would not otherwise meet the testing criteria <b>effective 6 April 2020</b>.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100 hours, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>Premier Daniel Andrews released a statement on 22 March that Victoria will implement a lockdown of all non-essential activity.</li> <li>A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li>Victoria's State Control Centre (SCC) remains activated (Tier 2) to support the coordination of Victoria's response to the spread of COVID-19).</li> <li>An incident management team is meeting daily.</li> <li>A COVID-19 specific hotline has been activated using nurse on call.</li> </ul>

WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA is to close the state borders from midnight on Sunday 5 April 2020. <ul style="list-style-type: none"> <li>◦ WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</li> </ul> </li> <li>• The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>◦ The Artania officially began its 14-day quarantine period on Friday 3rd April 2020 and is due to leave Fremantle on April 17 2020.</li> </ul> </li> <li>• Additional doctors and nurses have been sent to the Kimberley region to support local healthcare workers.</li> <li>• New laws to enforce self-isolation and increased penalties for COVID-19 related incidents passed through both houses of State Parliament.</li> </ul>
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### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

#### 4 Appendix 1

##### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by John Hopkins University (1,275,542) as at 15:00 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 15:00 hours on 6 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	82,930	3,338	55	3
Hong Kong SAR	890	4	28	0
Taiwan	363	5	8	0
Macau SAR	44	0	0	0
United States of America	273,808	7,020	32,105	1,166
Spain	124,736	11,744	7,026	809
Italy	124,632	15,362	4,805	681
Germany	91,714	1,342	5,936	184
France	67,757	7,546	4,221	1,053
Iran (Islamic Republic of)	55,743	3,452	2,560	158
The United Kingdom	41,907	4,313	3,735	708
Turkey	23,934	501	3,013	76
Switzerland	20,489	666	783	59
Belgium	18,431	1,283	1,661	140
Netherlands	16,627	1,651	904	164
Canada	12,938	214	1,206	62
Austria	11,766	186	241	18
Portugal	10,524	266	638	20
Republic of Korea	10,237	183	81	6
Brazil	9,056	359	1,146	60
Israel	7,589	42	559	6
Sweden	6,443	373	365	40
Australia	5,795	39	160	5
Norway	5,510	50	302	6
Russian Federation	4,731	43	582	9
Ireland	4,604	137	331	17
Czechia	4,472	59	282	6
Chile	4,161	27	424	5
Denmark	4,077	161	320	22
Poland	3,627	79	244	8
Romania	3,613	141	430	8
Malaysia	3,483	57	150	4

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Ecuador	3,465	172	302	52
India	3,374	77	1,073	21
Japan	3,271	70	351	1
Philippines	3,094	144	76	8
Pakistan	2,880	45	430	10
Luxembourg	2,729	31	117	0
Saudi Arabia	2,370	29	331	4
Indonesia	2,092	191	114	10
Thailand	2,067	20	89	1
Finland	1,882	25	267	5
Mexico	1,688	60	178	10
Greece	1,673	68	60	9
Panama	1,673	41	198	4
Serbia	1,624	39	148	0
Peru	1,595	61	181	10
South Africa	1,585	9	80	2
United Arab Emirates	1,505	10	241	1
Dominican Republic	1,488	68	0	0
Iceland	1,417	4	53	0
Argentina	1,353	42	88	5
Qatar	1,325	3	250	0
Colombia	1,267	25	106	6
Algeria	1,251	130	265	47
Ukraine	1,251	32	155	4
Singapore	1,189	5	75	0
Croatia	1,126	12	47	4
Egypt	1,070	71	85	5
Estonia	1,018	13	57	1
Slovenia	977	22	43	2
Morocco	960	66	116	16
Iraq	878	56	58	2
New Zealand	872	1	48	0
Lithuania	771	9	0	0
Republic of Moldova	752	12	161	3
Armenia	746	7	10	0
Hungary	733	34	55	2
International conveyance (Diamond Princess)	712	11	0	0
Bahrain	688	4	15	0
Bosnia and Herzegovina	632	21	46	3
Kuwait	556	1	139	1
Cameroon	555	9	309	2
Tunisia	553	19	58	1
Kazakhstan	531	5	71	2
Lebanon	527	18	19	1
Azerbaijan	512	5	69	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Latvia	509	1	16	0
Bulgaria	503	17	18	3
North Macedonia	483	17	53	5
Slovakia	471	0	21	0
Andorra	466	17	24	1
Puerto Rico	452	18	74	3
Belarus	440	4	186	0
Cyprus	426	11	30	0
Costa Rica	416	2	20	0
Uruguay	386	4	17	0
Réunion	334	0	13	0
Albania	333	18	0	1
Jordan	323	5	13	0
Burkina Faso	302	15	41	0
Afghanistan	299	7	29	2
Oman	298	2	21	1
Uzbekistan	298	2	57	0
Cuba	288	6	19	0
Honduras	264	15	42	0
San Marino	259	32	7	0
Cote d'Ivoire	245	2	42	1
Viet Nam	240	0	1	0
Senegal	219	2	12	1
occupied Palestinian territory	217	1	24	0
Malta	213	0	11	0
Nigeria	210	4	20	2
Ghana	205	5	1	0
Montenegro	197	2	37	0
Mauritius	196	7	10	0
Faroe Islands	181	0	2	0
Georgia	170	1	13	1
Sri Lanka	159	5	8	1
Democratic Republic of the Congo	148	16	14	3
Kyrgyzstan	147	1	3	0
Mayotte	147	2	19	0
Martinique	145	3	7	0
Niger	144	8	46	3
Venezuela (Bolivarian Republic of)	144	3	0	0
Kosovo[1]	140	1	8	0
Bolivia (Plurinational State of)	139	10	7	1
Guernsey	136	2	22	0
Brunei Darussalam	135	1	1	0
Guadeloupe	130	7	0	0
Isle of Man	126	1	12	0
Jersey	123	3	5	1

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Kenya	122	4	0	0
Cambodia	114	0	0	0
Guinea	111	0	59	0
Rwanda	102	0	13	0
Trinidad and Tobago	100	6	3	0
Gibraltar	98	1	3	0
Paraguay	96	3	4	0
Guam	93	4	9	1
Liechtenstein	77	1	1	1
Bangladesh	70	8	9	2
Madagascar	70	0	5	0
Aruba	64	0	2	0
French Guiana	62	0	5	0
El Salvador	56	3	10	1
Jamaica	53	3	6	0
Barbados	51	0	6	0
Djibouti	51	0	1	0
Guatemala	50	1	0	0
Uganda	48	0	3	0
Congo	45	5	4	2
French Polynesia	40	0	1	0
Togo	40	3	1	1
United States Virgin Islands	40	0	3	0
Mali	39	4	3	1
Zambia	39	1	0	0
Ethiopia	38	0	3	0
Monaco	37	0	0	0
Bermuda	35	0	0	0
Cayman Islands	28	1	0	0
Bahamas	24	3	0	0
Saint Martin	24	2	2	0
Guyana	23	4	4	0
Sint Maarten	23	2	0	0
Gabon	21	1	0	0
Eritrea	20	0	0	0
Myanmar	20	1	0	0
United Republic of Tanzania	20	1	0	0
Maldives	19	0	0	0
Guinea-Bissau	18	0	3	0
Haiti	18	0	0	0
New Caledonia	18	0	0	0
Libya	17	1	0	0
Equatorial Guinea	16	0	1	0
Syrian Arab Republic	16	2	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Mongolia	14	0	0	0
Namibia	14	0	1	0
Benin	13	0	0	0
Saint Lucia	13	0	0	0
Fiji	12	0	5	0
Grenada	12	0	2	0
Curaçao	11	1	0	0
Dominica	11	0	0	0
Angola	10	2	0	0
Greenland	10	0	0	0
Lao People's Democratic Republic	10	0	0	0
Liberia	10	1	3	1
Mozambique	10	0	0	0
Seychelles	10	0	0	0
Sudan	10	2	0	0
Suriname	10	0	0	0
Central African Republic	9	0	1	0
Eswatini	9	0	0	0
Nepal	9	0	3	0
Saint Kitts and Nevis	9	0	1	0
Zimbabwe	9	1	0	0
Northern Mariana Islands (Commonwealth of the)	8	1	0	0
Antigua and Barbuda	7	0	0	0
Chad	7	0	0	0
Holy See	7	0	0	0
Somalia	7	0	0	0
Mauritania	6	1	0	0
Montserrat	6	0	1	0
Saint Barthélemy	6	0	0	0
Bhutan	5	0	0	0
Cabo Verde	5	1	0	0
Nicaragua	5	1	0	0
Turks and Caicos Islands	5	0	0	0
Belize	4	0	1	0
Botswana	4	1	0	0
Gambia	4	1	0	0
Sierra Leone	4	0	2	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
Malawi	3	0	0	0
Saint Vincent and the Grenadines	3	0	0	0
Bonaire, Sint Eustatius and Saba	2	0	0	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Falkland Islands (Malvinas)	1	0	1	0
Papua New Guinea	1	0	0	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>1,133,918</b>	<b>62,789</b>	<b>82,110</b>	<b>5,798</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #79 Novel Coronavirus (COVID-19)  
**Date:** Tuesday, 7 April 2020 7:38:19 PM  
**Attachments:** [2020-04-07 NIR Health SitRep v79 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 7 April 2020, there have been 5,908 laboratory confirmed cases of COVID-19 in Australia, including 45 deaths.
- Since yesterday's situation report, an additional 113 cases, including 6 deaths, have been reported in Australia.
- To date, more than 310,000 tests have been conducted across Australia.
- Today National Cabinet met and released the first set of theoretical scenario modelling.

#### Situation Overseas

- As at 1500 hrs 7 April 2020, a total of 1,347,892 cases of COVID-19 have been reported globally, including 74,808 deaths.
- New York City is reporting more than 2,700 deaths, with over 68,000 cases, which is the same number of total cases reported from Hubei Province, China.

The next Situation Report will be issued on 8 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-07 1800 AEDT	<b>Version</b>	79
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-08 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li><i>National Cabinet met today and:</i> <ul style="list-style-type: none"> <li><i>Released the first set of theoretical scenario modelling. This modelling informs Australia's preparedness of our health system, including Intensive Care Units.</i></li> <li><i>Reiterated social distancing must continue over Easter, Australians should stay at home and not undertake unnecessary holiday travel.</i></li> <li><i>Agreed states and territories would implement the mandatory Code of Conduct for small and medium sized enterprises commercial leasing principles during COVID-19, including via legislation or regulation as appropriate.</i></li> </ul> </li> <li>The International Aviation Network will ensure continuing commercial flights between Australia and four key international hubs over the next four weeks: London, Los Angeles, Hong Kong and Auckland.</li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 27 March 2020, the Prime Minister announced that all incoming travellers entering Australia from 11.59pm 28 March will be quarantined in a designated hotel or other accommodation for 14 days. Foreign nationals cannot enter Australia.</li> <li>Travellers will complete their 14-day quarantine at their port of arrival, no onward travel will be permitted.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police. The Australian Defence Force will help ensure people are staying in quarantine and the Commonwealth will support as required.</li> </ul>

- On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the *Biosecurity Act 2015*. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.
- The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.

#### Emergency Response Plan for COVID-19

- On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.

#### Commonwealth emergency powers

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the *Biosecurity Act 2015*, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The declaration was recommended by the Chief Medical Officer in his capacity as the Director of Human Biosecurity.
- The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.
- The National Cabinet has also noted that Commonwealth, States and Territories were implementing emergency powers under respective legislation in order to be able to deal with the spread of COVID-19 as quickly and flexibly as possible.

## 1. Situation

### Overview

#### Domestic Situation (as at 1500 hrs, 7 April 2020)

- A total of **5,908** cases of COVID-19, including **45** deaths, have been confirmed in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **113** cases, including **6** deaths, have been reported in Australia.
  - It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.
    - The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over **25%** to around 2%.
    - However, it is too soon to tell whether this trend will be sustained.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with **17%** of these cases requiring admission to an ICU (**1.8%** of confirmed cases).
- The median age of COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is 80 years (range **55–95**).

#### Testing

- To date, more than **310,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was 1.9% and the positivity in the past week are 2.0%.

#### Source of infection

- To date, **two-thirds of** confirmed cases are considered to have been overseas acquired (Table 1).

- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – 26%
    - *There are cases associated with several cruise ships, which have been associated with 15 deaths.*
    - *The Ruby Princess' cruise ship is associated with at least 376 cases, including crew members, with the majority of cases from NSW, and a subset of interstate cases.*
  - United Kingdom – 18%
  - United States – 15%
  - There have also been cases imported from every continent, except Antarctica.
- Of the locally acquired cases:
  - Majority are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
  - Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). An increasing *proportion* of cases from *Victoria and* NSW are reported as locally acquired with no epidemiological link back to a confirmed case being able to be established.

#### Epidemiological Resources

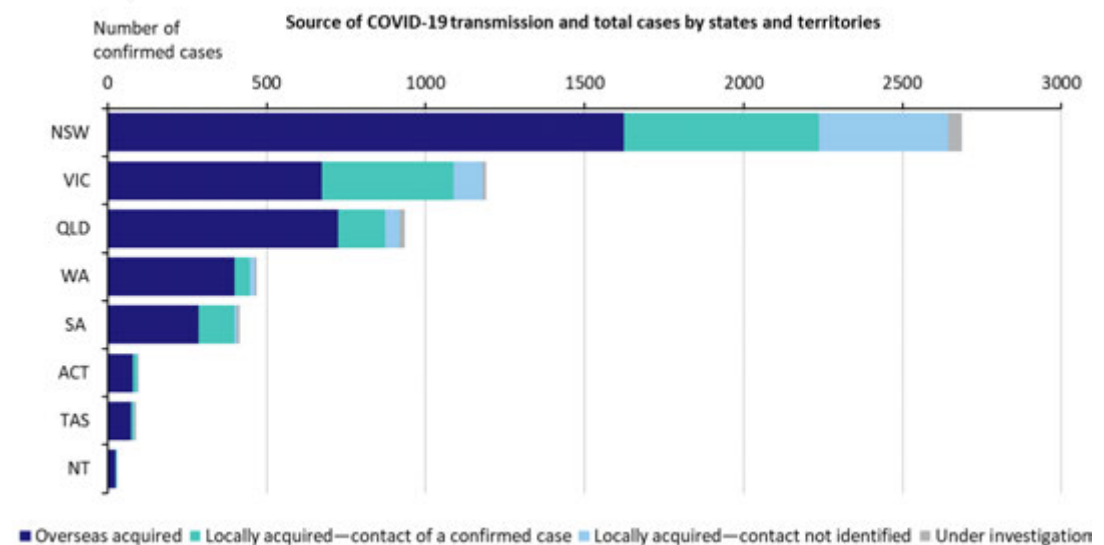
- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 29 March 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*\*^, Australia (as at 1500 hrs, 7 April 2020)**

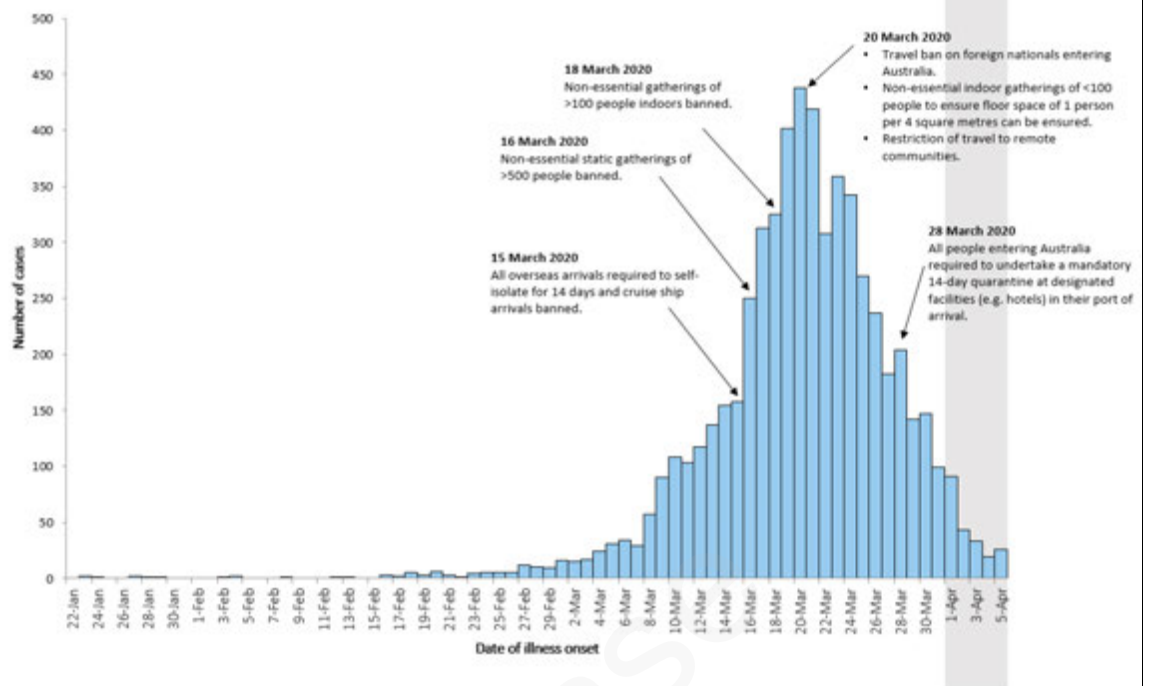
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	3,880	78	1,624	24	724	286	72	673	399
Locally acquired - contact of confirmed case and/or in a known cluster	1,361	13	614	2	149	112	10	414	47
Locally acquired - contact not identified	548	0	406	0	33	4	0	93	12
Locally acquired - contact not identified, but case had interstate travel	31	4	NA	1	13	6	2	0	5
Under investigation	88	2	42	0	15	7	4	11	7
<b>Total cases</b>	<b>5,908</b>	<b>97</b>	<b>2,686</b>	<b>27</b>	<b>934</b>	<b>415</b>	<b>88</b>	<b>1191</b>	<b>470</b>
<b>Died (of total)</b>	<b>45</b>	<b>2</b>	<b>20</b>	<b>0</b>	<b>5</b>	<b>1</b>	<b>2</b>	<b>11</b>	<b>4</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	113 (2%)	1 (1%)	49 (2%)	0 (0%)	13 (1%)	4 (1%)	3 (4%)	33 (3%)	10 (2%)
Change in the last 72hrs before (%change)	360 (6%)	4 (4%)	193 (8%)	2 (8%)	34 (4%)	8 (2%)	9 (11%)	76 (7%)	34 (8%)
Average daily increase over the past three days (compound)	2%	1%	3%	3%	1%	1%	4%	2%	3%
Increase over the past week	1,351	17	654	11	191	78	20	274	106

# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

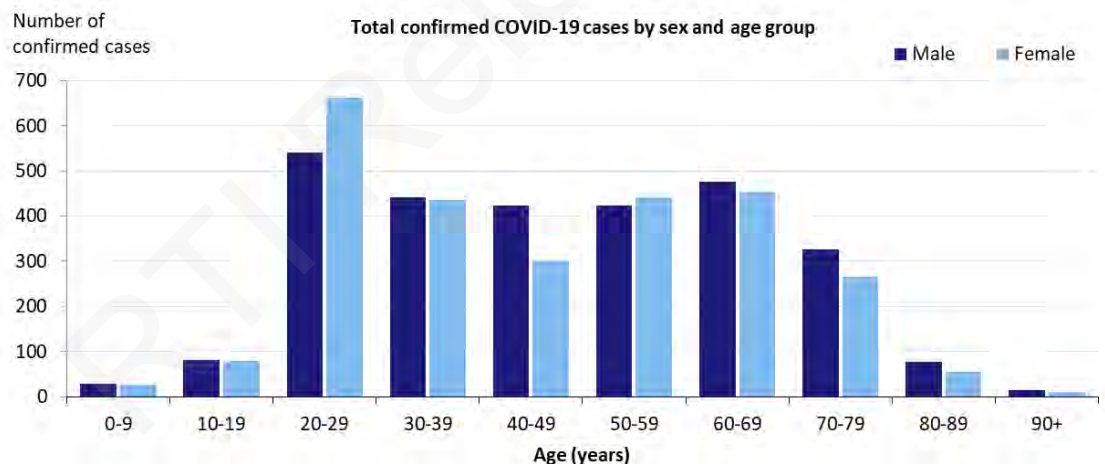
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 7 April 2020**

**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 7 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 7 April 2020**



#### International Situation (as at 1500 hrs, 7 April 2020)

- A total of **1,347,892** cases of COVID-19 have been reported globally, including **74,808** deaths (Source: Johns Hopkins University, as at 1500hrs on 7 April 2020).
- The majority of deaths are from Italy (**24%**), Spain (**18%**), the United States of America (**12%**) and France (**12%**).

#### Recent reporting of cases and deaths

- A total of **72,350** new cases, including **5,310** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region (including Italy, Spain, Germany, France and the United Kingdom) as well as the United States, **Turkey** and the Islamic Republic of Iran.
  - New York City is reporting more than **2,700** deaths, with over **68,000** cases, **which is the same number of total cases reported from Hubei Province, China (68,000 cases)**.
  - Based on the number of reported cases globally, the case fatality rate is approximately 5.5%. The risk of death reportedly increases with age.

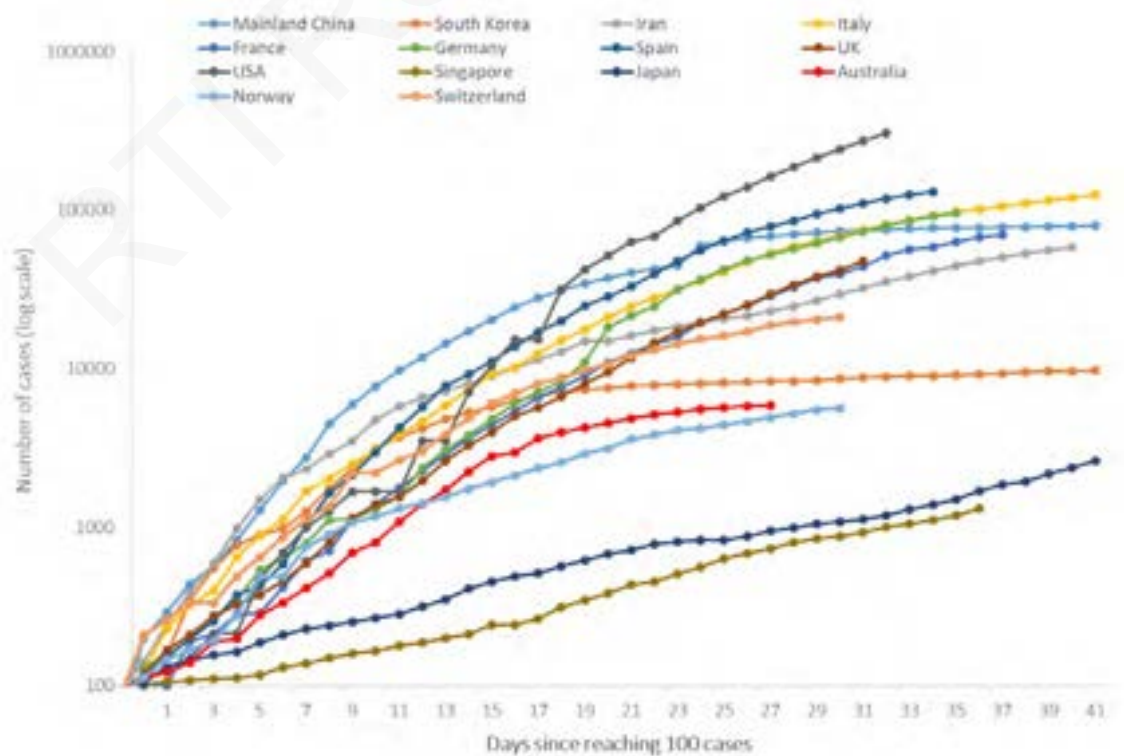


- Indonesia is reporting over **2,400** cases and **209** deaths, which exceeds the number of deaths reported in the Republic of Korea, which has reported over 10,000 cases. This suggests that the actual number of cases in Indonesia **may be much** higher than reported.

**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 77 of 6 April 2020**

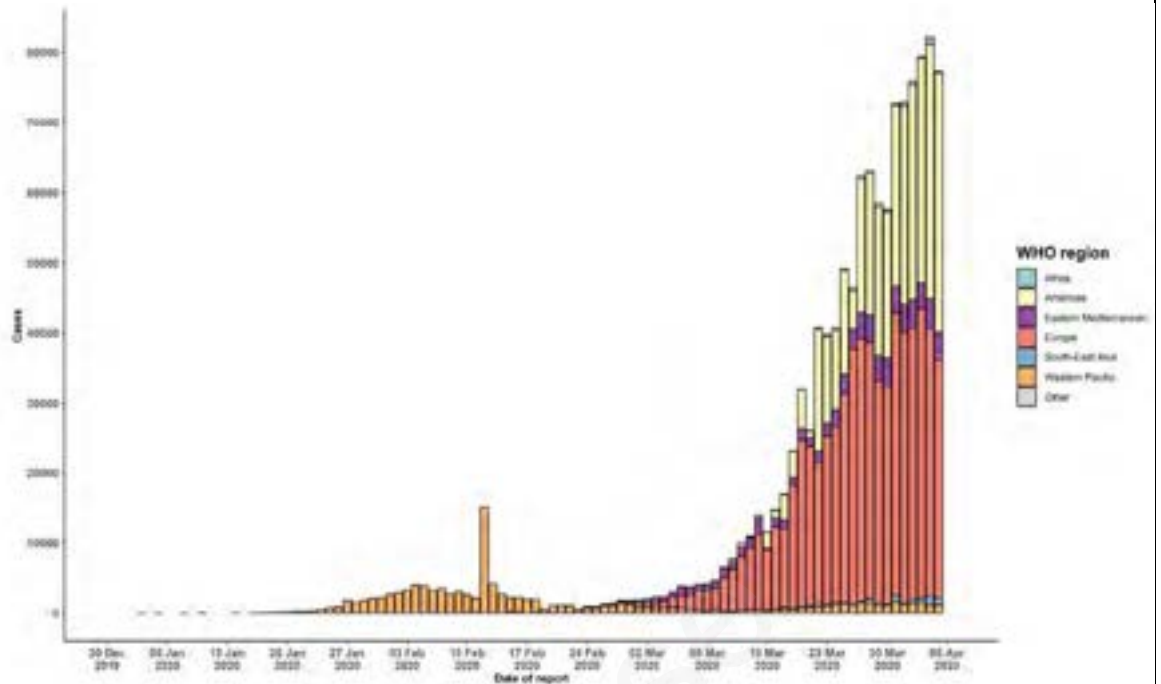


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 7 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 77 of 6 April 2020**



#### International response

##### WHO

- On 1 April 2020, the WHO Director General reported many countries are asking people to stay at home and shutting down population movement, which can help to limit transmission of the virus, but can have unintended consequences for the poorest and most vulnerable people.
  - In India, Prime Minister Modi has announced a \$24 billion package, including free food rations for 800 million disadvantaged people, cash transfers to 204 million poor women and free cooking gas for 80 million households for the next 3 months.
- So far, 74 countries have either joined or are in the process of joining the Solidarity trial. This trial is comparing the safety and effectiveness four drugs and drug combinations against COVID-19. As of this morning, more than 200 patients had been randomly assigned to one of the study arms.
- WHO's priority is that frontline health workers are able to access essential personal protective equipment, including medical masks and respirators. WHO is working with governments and manufacturers to step up the production and distribution of personal protective equipment, including masks.

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

##### European Commission

- On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.

##### Asian Development Bank (ADB)

- ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated to control the novel Coronavirus (COVID-19) response.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>COVID testing in the ACT was expanded to include a random selection of people who would not otherwise meet the testing criteria, effective 6 April 2020.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100 hours, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>Premier Daniel Andrews released a statement on 22 March that Victoria will implement a lockdown of all non-essential activity.</li> <li>A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li>Victoria's State Control Centre (SCC) remains activated (Tier 2) to support the coordination of Victoria's response to the spread of COVID-19).</li> <li>An incident management team is meeting daily.</li> <li>A COVID-19 specific hotline has been activated using nurse on call.</li> </ul>

WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA is to close the state borders from midnight on Sunday 5 April 2020. <ul style="list-style-type: none"> <li>◦ WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</li> </ul> </li> <li>• The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>◦ The Artania officially began its 14-day quarantine period on Friday 3rd April 2020 and is due to leave Fremantle on April 17 2020.</li> </ul> </li> <li>• Additional doctors and nurses have been sent to the Kimberley region to support local healthcare workers.</li> <li>• New laws to enforce self-isolation and increased penalties for COVID-19 related incidents passed through both houses of State Parliament.</li> </ul>
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### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

#### 4. Appendix 1

##### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by John Hopkins University (**1,347,892**) as at 15:00 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 15:00 hours on **6** April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,005	3,340	75	2
Hong Kong SAR	915	4	25	0
Taiwan	373	5	10	0
Macau SAR	44	0	0	0
United States of America	307,318	8358	33,510	1,338
Spain	130,759	12418	6,023	674
Italy	128,948	15889	4,316	527
Germany	95,391	1434	3,677	92
France	69,607	8064	1,850	518
Iran (Islamic Republic of)	58,226	3603	2,483	151
The United Kingdom	47,810	4934	5,903	621
Turkey	27,069	574	3,135	73
Switzerland	21,065	715	576	49
Belgium	19,691	1447	1,260	164
Netherlands	17,851	1766	1,224	115
Canada	13,904	231	966	17
Austria	11,983	204	217	18
Portugal	11,278	295	754	29
Republic of Korea	10,284	186	47	3
Brazil	10,278	432	1,222	73
Israel	8,018	46	429	4
Sweden	6,830	401	387	28
Australia	5,908	45	113	6
Norway	5,640	58	130	8
Russian Federation	5,389	45	658	2
Ireland	5,111	158	507	21
Czechia	4,587	67	115	8
Chile	4,471	34	310	7
Denmark	4,369	179	292	18
Poland	4,102	94	475	15
India	4,067	109	693	32

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Romania	3,864	148	251	7
Malaysia	3,662	61	179	4
Japan	3,654	73	383	3
Ecuador	3,465	172	0	0
Pakistan	3,277	50	397	5
Philippines	3,246	152	152	8
Luxembourg	2,804	36	75	5
Saudi Arabia	2,463	34	93	5
Indonesia	2,273	198	181	7
Thailand	2,169	23	102	3
Finland	1,927	28	45	3
Serbia	1,908	51	284	12
Mexico	1,890	79	202	19
Panama	1,801	46	128	5
United Arab Emirates	1,799	10	294	0
Peru	1,746	73	151	12
Greece	1,735	73	62	5
South Africa	1,655	11	70	2
Qatar	1,604	4	279	1
Dominican Republic	1,488	68	0	0
Iceland	1,486	4	69	0
Argentina	1,451	44	98	2
Colombia	1,406	32	139	7
Ukraine	1,319	38	68	6
Singapore	1,309	6	120	1
Algeria	1,251	130	0	0
Croatia	1,182	15	56	3
Egypt	1,173	78	103	7
Morocco	1,113	71	153	5
Estonia	1,097	15	79	2
Slovenia	997	28	20	6
Iraq	961	61	83	5
New Zealand	911	1	39	0
Republic of Moldova	864	15	112	3
Lithuania	811	13	40	4
Armenia	746	7	0	0
Hungary	744	38	11	4
International conveyance (Diamond Princess)	712	11	0	0
Bahrain	700	4	12	0
Bosnia and Herzegovina	662	21	30	0
Kazakhstan	604	5	73	0
Azerbaijan	584	5	72	0
Tunisia	574	22	21	3

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Belarus	562	8	122	4
Kuwait	556	1	0	0
Cameroon	555	9	0	0
North Macedonia	555	18	72	1
Latvia	533	1	24	0
Bulgaria	531	20	28	3
Lebanon	527	18	0	0
Andorra	523	17	57	0
Slovakia	485	0	14	0
Puerto Rico	452	18	0	0
Cyprus	446	14	20	3
Costa Rica	435	2	19	0
Uruguay	400	5	14	1
Uzbekistan	390	2	92	0
Albania	377	21	44	3
Jordan	345	5	22	0
Réunion	344	0	10	0
Afghanistan	337	7	38	0
Oman	331	2	33	0
Cuba	320	8	32	2
Burkina Faso	302	15	0	0
Honduras	268	22	4	7
San Marino	266	32	7	0
occupied Palestinian territory	246	1	29	0
Cote d'Ivoire	245	2	0	0
Viet Nam	241	0	1	0
Malta	234	0	21	0
Mauritius	227	7	31	0
Senegal	222	2	3	0
Kyrgyzstan	216	4	69	3
Nigeria	208	4	0	0
Ghana	205	5	0	0
Montenegro	203	2	6	0
Georgia	188	2	18	1
Faroe Islands	181	0	0	0
Sri Lanka	176	5	17	0
Democratic Republic of the Congo	161	18	13	2
Bolivia (Plurinational State of)	157	10	18	0
Jersey	155	3	32	0
Guernsey	154	3	18	1
Mayotte	147	2	0	0
Kosovo[1]	145	1	5	0
Martinique	145	3	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Niger	144	8	0	0
Venezuela (Bolivarian Republic of)	144	3	0	0
Kenya	142	4	20	0
Brunei Darussalam	135	1	0	0
Guadeloupe	134	7	4	0
Isle of Man	127	1	1	0
Cambodia	114	0	0	0
Guam	112	4	19	0
Guinea	111	0	0	0
Paraguay	104	3	8	0
Gibraltar	103	1	5	0
Trinidad and Tobago	103	6	3	0
Rwanda	102	0	0	0
Bangladesh	88	8	18	0
Liechtenstein	78	1	1	0
Madagascar	77	0	7	0
French Guiana	66	0	4	0
Aruba	64	0	0	0
El Salvador	62	3	6	0
Guatemala	61	2	11	1
Djibouti	59	0	8	0
Jamaica	55	3	2	0
Barbados	51	0	0	0
Uganda	48	0	0	0
Congo	45	5	0	0
Togo	44	3	4	0
Ethiopia	43	1	5	1
United States Virgin Islands	42	0	2	0
French Polynesia	41	0	1	0
Mali	39	4	0	0
Zambia	39	1	0	0
Bermuda	37	0	2	0
Monaco	37	0	0	0
Cayman Islands	35	1	7	0
Eritrea	29	0	9	0
Saint Martin	29	2	5	0
Bahamas	28	4	4	1
Guyana	24	4	1	0
Sint Maarten	23	2	0	0
Benin	22	0	9	0
United Republic of Tanzania	22	1	2	0
Gabon	21	1	0	0
Haiti	21	0	3	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Myanmar	21	1	1	0
Maldives	19	0	0	0
Syrian Arab Republic	19	2	3	0
Guinea-Bissau	18	0	0	0
Libya	18	1	1	0
New Caledonia	18	0	0	0
Equatorial Guinea	16	0	0	0
Namibia	16	0	2	0
Angola	14	2	4	0
Mongolia	14	0	0	0
Saint Lucia	14	0	1	0
Liberia	13	3	3	2
Fiji	12	0	0	0
Grenada	12	0	0	0
Sudan	12	2	2	0
Curaçao	11	1	0	0
Dominica	11	0	0	0
Greenland	11	0	1	0
Lao People's Democratic Republic	11	0	1	0
Mozambique	10	0	0	0
Seychelles	10	0	0	0
Suriname	10	0	0	0
Central African Republic	9	0	0	0
Chad	9	0	2	0
Eswatini	9	0	0	0
Nepal	9	0	0	0
Saint Kitts and Nevis	9	0	0	0
Zimbabwe	9	1	0	0
Northern Mariana Islands (Commonwealth of the)	8	1	0	0
Antigua and Barbuda	7	0	0	0
Holy See	7	0	0	0
Somalia	7	0	0	0
Mauritania	6	1	0	0
Montserrat	6	0	0	0
Saint Barthélemy	6	0	0	0
Sierra Leone	6	0	2	0
Belize	5	0	1	0
Bhutan	5	0	0	0
Cabo Verde	5	1	0	0
Nicaragua	5	1	0	0
Turks and Caicos Islands	5	1	0	1
Botswana	4	1	0	0
Gambia	4	1	0	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Malawi	4	0	1	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
Saint Vincent and the Grenadines	3	0	0	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Falkland Islands (Malvinas)	2	0	1	0
Papua New Guinea	1	0	0	0
South Sudan	1	0	1	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>1,211,120</b>	<b>67,603</b>	<b>77,204</b>	<b>4,814</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #80 Novel Coronavirus (COVID-19)  
**Date:** Wednesday, 8 April 2020 7:39:39 PM  
**Attachments:** [2020-04-08 NIR Health SitRep v80 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 8 April 2020, there have been 6,013 laboratory confirmed cases of COVID-19 in Australia, including 50 deaths.
- Since yesterday's situation report, an additional 105 cases, including 5 deaths, have been reported in Australia.
- To date, more than 319,000 tests have been conducted across Australia.
- The Minister for Aged Care and Senior Australians announced today that home care recipients would receive phone calls to ensure their wellbeing.

#### Situation Overseas

- As at 1500 hrs 8 April 2020, a total of 1,430,453 cases of COVID-19 have been reported globally, including 82,133 deaths.

The next Situation Report will be issued on 9 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-08 1800 AEDT	<b>Version</b>	80
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-09 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li><i>The Minister for Aged Care and Senior Australians announced today that home care recipients who had suspended services to avoid the risk of contracting coronavirus would receive phone calls to ensure their wellbeing.</i></li> <li><i>Visa conditions for the Seasonal Worker Programme and the Pacific Labour Scheme are being relaxed; participants can stay for up to one more year.</i></li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul>

**Commonwealth emergency powers**

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.

**1. Situation****Overview****Domestic Situation (as at 1500 hrs, 8 April 2020)**

- A total of **6,013** cases of COVID-19, including **50** deaths, have been confirmed in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **105** cases, including **5** deaths, have been reported in Australia.
  - It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.
    - The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over **13%** to around 2%.
    - However, it is too soon to tell whether this trend will be sustained.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with 17% of these cases requiring admission to an ICU (**1.9%** of confirmed cases).
- The median age of COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is 80 years (range **55–94 years, amended from yesterday**).

**Testing**

- To date, more than **319,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was 1.9% and the positivity in the past week are **1.8%**.

**Source of infection**

- To date, two-thirds of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – 26%
    - There are **1,101** cases and **16** deaths associated with cruise ships.
  - United Kingdom – 18%
  - United States – 15%
  - There have also been cases imported from every continent, except Antarctica.
- Of the locally acquired cases:
  - *Clusters have been reported in some jurisdictions. Victoria has identified 51 clusters and NSW has identified 11 active clusters (accounting for 147 cases). Tasmania is reporting a cluster of 22 cases, including 15 healthcare workers, from the North West Regional Hospital (Burnie).*
  - *Majority are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.*

- *Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). An increasing proportion of cases from Victoria and NSW are reported as locally acquired with no epidemiological link back to a confirmed case being able to be established.*

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 29 March 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

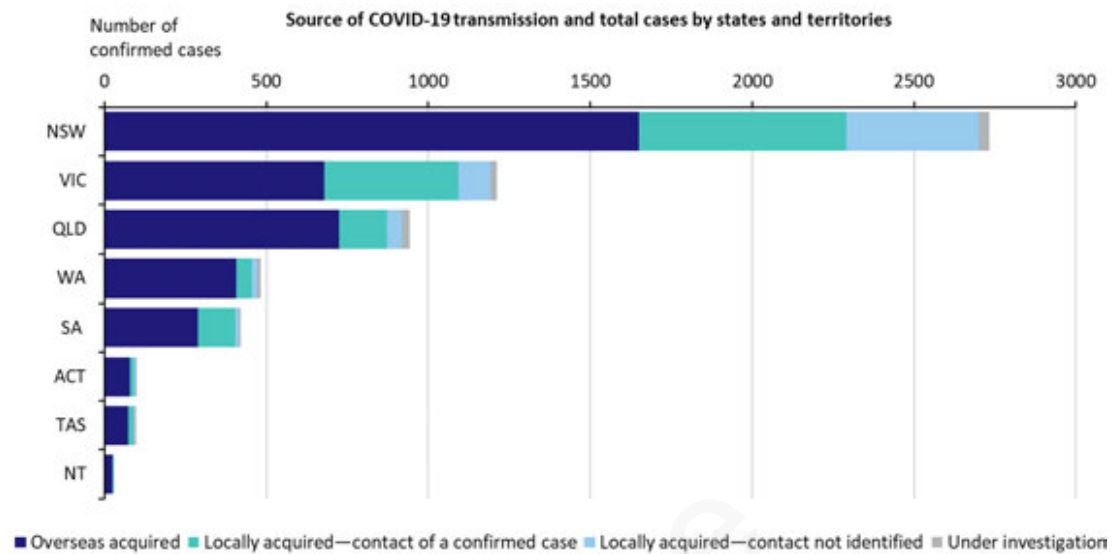
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>##</sup>, Australia (as at 1500 hrs, 8 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	3,924	79	1,650	24	724	289	73	678	407
Locally acquired - contact of confirmed case and/or in a known cluster	1,398	14	641	2	149	114	16	414	48
Locally acquired - contact not identified	561	0	410	0	33	5	0	101	12
Locally acquired - contact not identified, but case had interstate travel	32	5	NA	1	13	6	2	0	5
Under investigation	98	1	33	0	24	6	6	19	9
<b>Total cases</b>	<b>6,013</b>	<b>99</b>	<b>2,734</b>	<b>27</b>	<b>943</b>	<b>420</b>	<b>97</b>	<b>1212</b>	<b>481</b>
<b>Died (of total)</b>	<b>50</b>	<b>2</b>	<b>20</b>	<b>0</b>	<b>5</b>	<b>2</b>	<b>3</b>	<b>12</b>	<b>6</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	105 (2%)	2 (2%)	48 (2%)	0 (0%)	9 (1%)	5 (1%)	9 (10%)	21 (2%)	11 (2%)
Change in the last 72hrs before (%change)	326 (6%)	3 (3%)	154 (6%)	1 (4%)	36 (4%)	11 (3%)	16 (20%)	77 (7%)	28 (6%)
Average daily increase over the past three days (compound)	2%	1%	2%	1%	1%	1%	6%	2%	2%
Increase over the past week	1,153	15	552	9	162	53	29	244	89

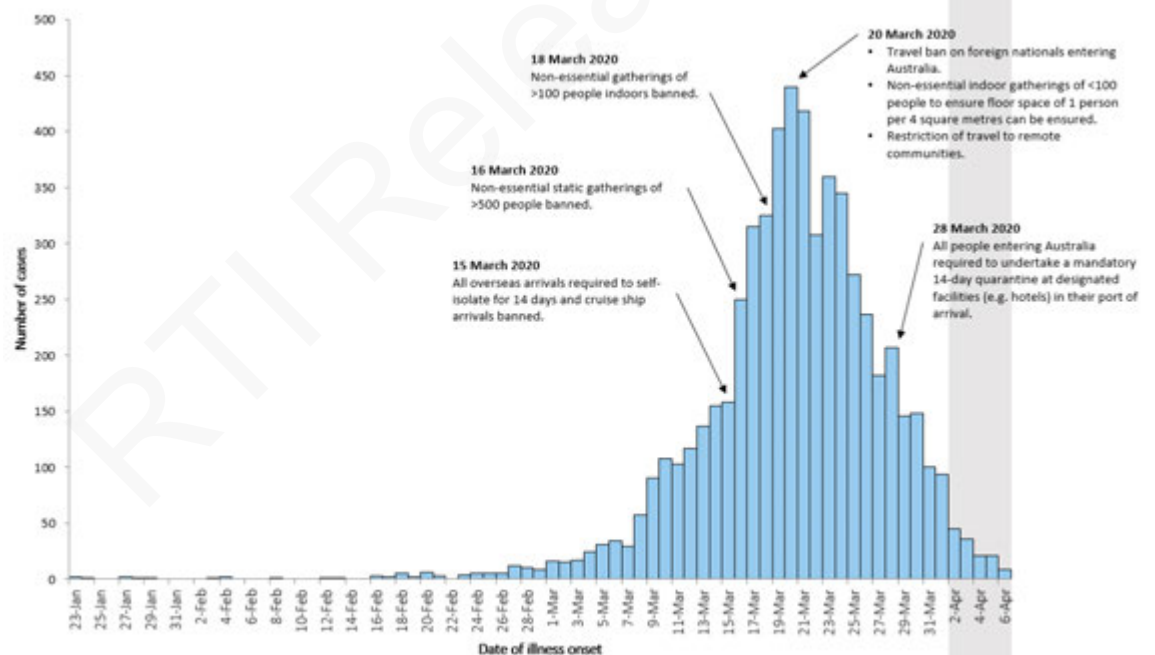
# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

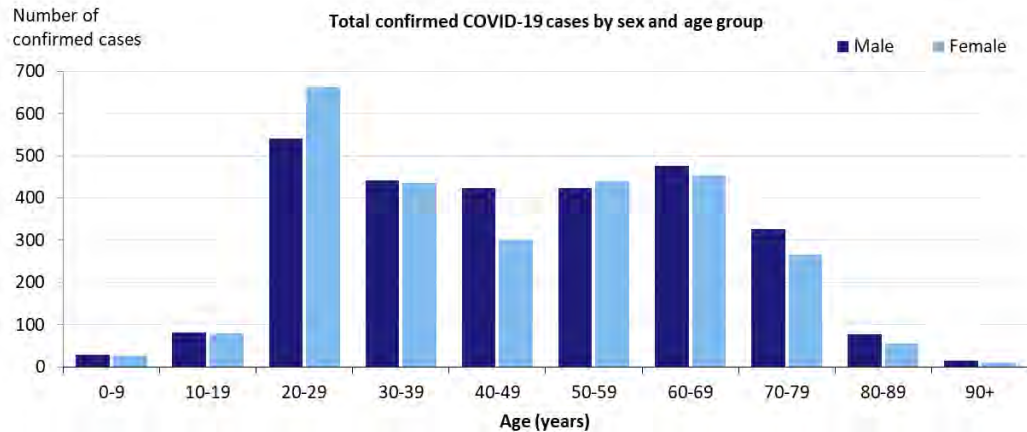
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 8 April 2020**



**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 8 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 8 April 2020****International Situation (as at 1500 hrs, 8 April 2020)**

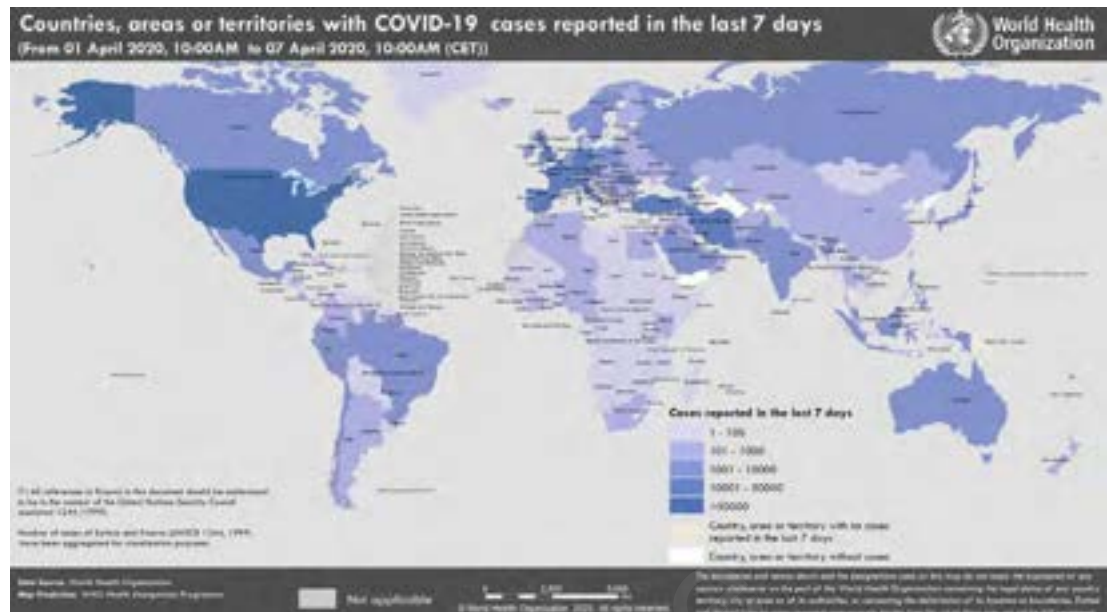
- A total of **1,430,453** cases of COVID-19 have been reported globally, including **82,133** deaths (Source: Johns Hopkins University, as at 1500hrs on 8 April 2020).
- The majority of deaths are from Italy (**23%**), Spain (**18%**), the United States of America (**13%**) and France (**12%**).

**Recent reporting of cases and deaths**

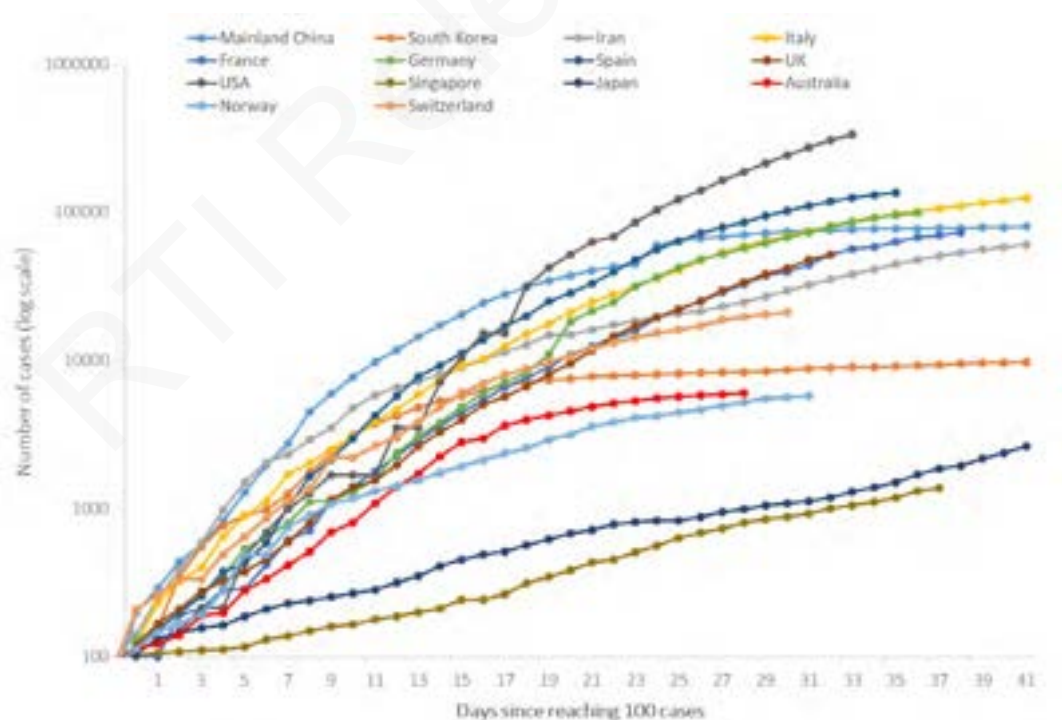
- A total of **82,571** new cases, including **7,325** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region, the United States and the Islamic Republic of Iran.
  - New York City is reporting more than **3,500** deaths, with over **74,000** cases, which is the **more than the** number of total cases reported from Hubei Province, China (68,000 cases) **and more than the total number of deaths reported from Mainland China (3,300)**.
  - Based on the number of reported cases globally, the case fatality rate is approximately **5.7%**. The risk of death reportedly increases with age.
  - Indonesia is reporting over **2,700** cases and **221** deaths, which exceeds the number of deaths reported in the Republic of Korea, which has reported over 10,000 cases. This suggests that the actual number of cases in Indonesia may be much higher than reported. **The number of tests conducted by Indonesia is approximately 13,500, with a positivity of 0.2% and at a rate of 0.05 tests per 1,000 people. In contrast, the number of tests conducted by the Republic of Korea is approximately 486,000, with a positivity of 2.1% and at a rate of 9.4 tests per 1,000. The rate of testing is almost 19 times higher.**



**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 78 of 7 April 2020**

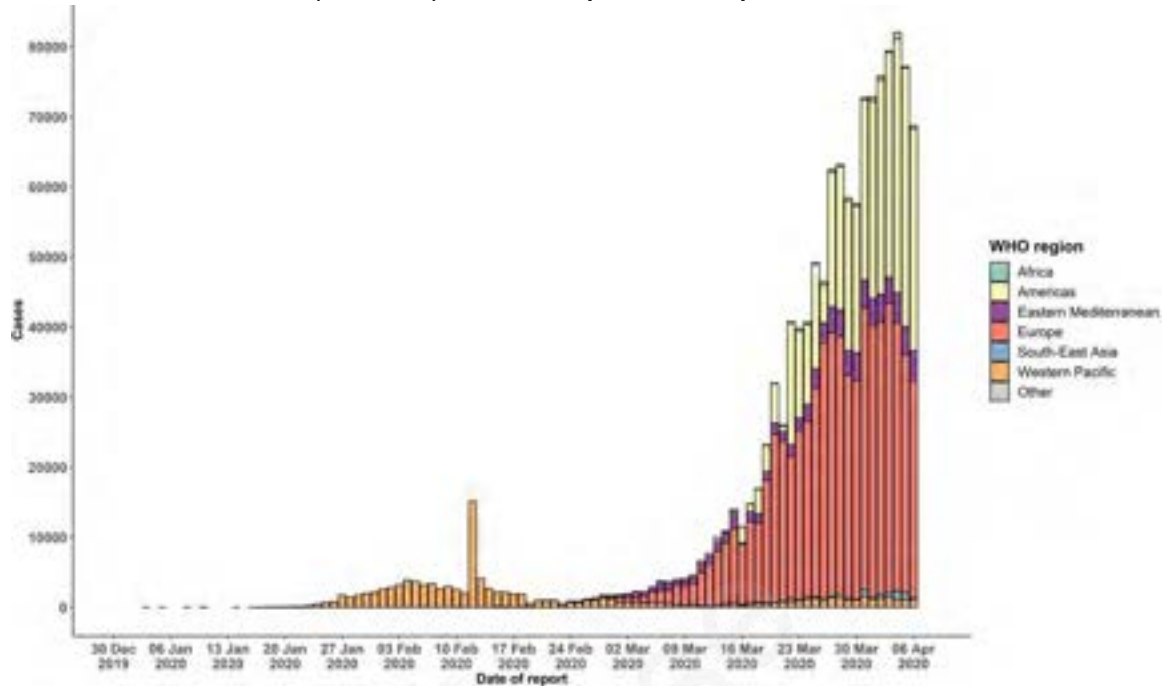


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 8 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 78 of 7 April 2020**



#### International response

##### WHO

- On 1 April 2020, the WHO Director General reported many countries are asking people to stay at home and shutting down population movement, which can help to limit transmission of the virus, but can have unintended consequences for the poorest and most vulnerable people.
  - In India, Prime Minister Modi has announced a \$24 billion package, including free food rations for 800 million disadvantaged people, cash transfers to 204 million poor women and free cooking gas for 80 million households for the next 3 months.
- So far, 74 countries have either joined or are in the process of joining the Solidarity trial. This trial is comparing the safety and effectiveness four drugs and drug combinations against COVID-19. As of this morning, more than 200 patients had been randomly assigned to one of the study arms.
- WHO's priority is that frontline health workers are able to access essential personal protective equipment, including medical masks and respirators. WHO is working with governments and manufacturers to step up the production and distribution of personal protective equipment, including masks.

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

##### European Commission

- On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.

##### Asian Development Bank (ADB)

- ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li><i>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</i></li> <li>The ACT Health Emergency Control Centre (HECC) remains activated to control the novel Coronavirus (COVID-19) response.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>COVID testing in the ACT was expanded to include a random selection of people who would not otherwise meet the testing criteria, effective 6 April 2020.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100 hours, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>Victoria's State Control Centre (SCC) remains activated (Tier 2) to support the coordination of Victoria's response to the spread of COVID-19).</li> <li>A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li><i>On 3 April 2020, the Victorian Premier established a Crisis Council of Cabinet (CCC). The CCC is chaired by the Premier and includes seven Ministers who have been sworn-in with new portfolios with responsibility for leading all COVID-19 response activities in their</i></li> </ul>

	<p><i>respective departments. It will operate initially until 30 September 2020 then be reviewed.</i></p> <ul style="list-style-type: none"> <li>• <i>On 1 April 2020, the Victorian Premier announced a \$1.3 billion injection to Victoria's health system with the aim of quickly establishing an extra 4,000 ICU beds.</i></li> <li>• <i>Stage 3 restrictions have been in place since 30 March 2020. These restrictions are legally enforceable. They govern how businesses can operate and valid reasons for people to leave their homes.</i></li> <li>• <i>From 28 March 2020, Victorian police have the power to issue on the spot fines for anyone who is not following the directions of the Chief Health Officer.</i></li> <li>• <i>A COVID-19 specific hotline is activated to field public enquiries.</i></li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA is to close the state borders from midnight on Sunday 5 April 2020. <ul style="list-style-type: none"> <li>◦ WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</li> </ul> </li> <li>• The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>◦ The Artania officially began its 14-day quarantine period on Friday 3rd April 2020 and is due to leave Fremantle on April 17 2020.</li> </ul> </li> <li>• <i>A dedicated COVID-19 clinic opened at Broome Hospital on Wednesday 8 April 2020.</i></li> <li>• <i>New enquiries line to keep the community informed about COVID-19 coronavirus has been launched (132 68 43).</i></li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no

pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by John Hopkins University (**1,347,892**) as at 15:00 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 15:00 hours on 6 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,071	3,340	66	0
Hong Kong SAR	936	4	21	0
Taiwan	376	5	3	0
Macau SAR	44	0	0	0
United States of America	333,811	9559	26,493	1,201
Spain	135,032	13055	4,273	637
Italy	132,547	16525	3,599	636
Germany	99,225	1607	3,834	173
France	73,488	8896	3,881	832
Iran (Islamic Republic of)	60,500	3739	2,274	136
The United Kingdom	51,612	5373	3,802	439
Turkey	30,217	649	3,148	75
Switzerland	21,574	715	509	0
Belgium	20,814	1632	1,123	185
Netherlands	18,803	1867	952	101
Canada	15,806	293	1,902	62
Austria	12,297	220	314	16
Portugal	11,730	311	452	16
Brazil	11,130	486	852	54

Republic of Korea	10,331	192	47	6
Israel	8,611	52	593	6
Sweden	7,206	477	376	76
Russian Federation	6,343	47	954	2
Australia	6,013	50	105	5
Norway	5,755	59	115	1
Ireland	5,364	174	253	16
Czechia	4,822	78	235	11
Chile	4,815	37	344	3
Denmark	4,681	187	312	8
Poland	4,413	107	311	13
India	4,067	109	0	0
Romania	4,057	157	193	9
Japan	3,906	80	252	7
Pakistan	3,864	54	587	4
Malaysia	3,793	62	131	1
Ecuador	3,747	191	282	19
Philippines	3,660	163	414	11
Luxembourg	2,843	41	39	5
Saudi Arabia	2,752	38	289	4
Indonesia	2,491	209	218	11
Peru	2,281	83	535	10
Thailand	2,220	26	51	3
Serbia	2,200	58	292	7
Finland	2,176	28	249	0
Mexico	2,143	94	253	15
United Arab Emirates	2,076	11	277	1
Panama	1,988	54	187	8
Qatar	1,832	4	228	0
Dominican Republic	1,828	86	340	18
Greece	1,755	79	20	6
South Africa	1,686	12	31	1
Iceland	1,562	6	76	2
Argentina	1,554	46	103	2
Colombia	1,485	35	79	3
Ukraine	1,462	45	143	7
Algeria	1,423	173	172	43
Singapore	1,375	6	66	0
Egypt	1,322	85	149	7
Croatia	1,222	16	40	1
Morocco	1,141	83	28	12
Estonia	1,108	19	11	4
Iraq	1,031	64	70	3
Slovenia	1,021	30	24	2
Republic of Moldova	965	19	101	4
New Zealand	943	1	32	0

Lithuania	843	14	32	1
Armenia	833	8	87	1
Hungary	817	47	73	9
Bahrain	756	4	56	0
International conveyance (Diamond Princess)	712	11	0	0
Belarus	700	13	138	5
Bosnia and Herzegovina	695	28	33	7
Kazakhstan	670	6	66	1
Kuwait	665	1	109	0
Azerbaijan	641	7	57	2
Tunisia	596	22	22	0
North Macedonia	570	21	15	3
Cameroon	555	9	0	0
Bulgaria	549	22	18	2
Latvia	542	1	9	0
Lebanon	541	19	14	1
Andorra	540	21	17	4
Slovakia	534	2	49	2
Puerto Rico	513	21	61	3
Uzbekistan	472	2	82	0
Cyprus	465	14	19	0
Costa Rica	454	2	19	0
Uruguay	406	6	6	1
Albania	377	22	0	1
Oman	371	2	40	0
Afghanistan	367	11	30	4
Cuba	350	9	30	1
Jordan	349	6	4	1
Réunion	349	0	5	0
Burkina Faso	345	17	43	2
Cote d'Ivoire	323	3	78	1
Honduras	298	22	30	0
San Marino	277	32	11	0
occupied Palestinian territory	254	1	8	0
Viet Nam	245	0	4	0
Mauritius	244	7	17	0
Malta	241	0	7	0
Nigeria	232	5	24	1
Kyrgyzstan	228	4	12	0
Senegal	226	2	4	0
Montenegro	223	2	20	0
Ghana	214	5	9	0
Georgia	195	2	7	0
Niger	184	10	40	2
Bolivia (Plurinational State of)	183	11	26	1
Faroe Islands	181	0	0	0

Sri Lanka	176	5	0	0
Kosovo	165	3	20	2
Mayotte	164	2	17	0
Democratic Republic of the Congo	161	18	0	0
Venezuela (Bolivarian Republic of)	159	3	15	0
Jersey	155	3	0	0
Guernsey	154	3	0	0
Martinique	149	4	4	1
Kenya	142	4	0	0
Brunei Darussalam	135	1	0	0
Guadeloupe	135	7	1	0
Isle of Man	127	1	0	0
Bangladesh	123	12	35	4
Cambodia	115	0	1	0
Guam	113	4	1	0
Paraguay	113	5	9	2
Guinea	111	0	0	0
Trinidad and Tobago	105	8	2	2
Rwanda	104	0	2	0
Gibraltar	103	1	0	0
Djibouti	90	0	31	0
Liechtenstein	78	1	0	0
Madagascar	77	0	0	0
Guatemala	70	3	9	1
El Salvador	69	3	7	0
French Guiana	68	0	2	0
Aruba	64	0	0	0
Jamaica	58	3	3	0
Barbados	56	1	5	1
Uganda	52	0	4	0
Congo	45	5	0	0
Togo	44	3	0	0
Ethiopia	43	1	0	0
United States Virgin Islands	43	1	1	1
French Polynesia	42	0	1	0
Monaco	40	0	3	0
Cayman Islands	39	1	4	0
Mali	39	4	0	0
Zambia	39	1	0	0
Bermuda	37	0	0	0
Sint Maarten	37	6	14	4
Guinea-Bissau	33	0	15	0
Saint Martin	31	2	2	0
Bahamas	29	5	1	1
Eritrea	29	0	0	0
Guyana	29	4	5	0

Haiti	24	1	3	1
United Republic of Tanzania	24	1	2	0
Benin	23	1	1	1
Gabon	21	1	0	0
Myanmar	21	1	0	0
Maldives	19	0	0	0
Syrian Arab Republic	19	2	0	0
Libya	18	1	0	0
New Caledonia	18	0	0	0
Angola	16	2	2	0
Equatorial Guinea	16	0	0	0
Namibia	16	0	0	0
Antigua and Barbuda	15	0	8	0
Mongolia	15	0	1	0
Dominica	14	0	3	0
Fiji	14	0	2	0
Liberia	14	3	1	0
Saint Lucia	14	0	0	0
Sudan	14	2	2	0
Curaçao	13	1	2	0
Grenada	12	0	0	0
Lao People's Democratic Republic	12	0	1	0
Greenland	11	0	0	0
Seychelles	11	0	1	0
Mozambique	10	0	0	0
Saint Kitts and Nevis	10	0	1	0
Suriname	10	1	0	1
Central African Republic	9	0	0	0
Chad	9	0	0	0
Eswatini	9	0	0	0
Nepal	9	0	0	0
Zimbabwe	9	1	0	0
Northern Mariana Islands (Commonwealth of the)	8	1	0	0
Belize	7	1	2	1
Cabo Verde	7	1	2	0
Holy See	7	0	0	0
Saint Vincent and the Grenadines	7	0	4	0
Somalia	7	0	0	0
Botswana	6	1	2	0
Mauritania	6	1	0	0
Montserrat	6	0	0	0
Nicaragua	6	1	1	0
Saint Barthélemy	6	0	0	0
Sierra Leone	6	0	0	0
Bhutan	5	0	0	0
Turks and Caicos Islands	5	1	0	0



Gambia	4	1	0	0
Malawi	4	0	0	0
Sao Tome and Principe	4	0	4	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Falkland Islands (Malvinas)	2	0	0	0
Papua New Guinea	1	0	0	0
South Sudan	1	0	0	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>1,279,891</b>	<b>72,622</b>	<b>68,771</b>	<b>5,019</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #81 Novel Coronavirus (COVID-19)  
**Date:** Thursday, 9 April 2020 7:40:51 PM  
**Attachments:** [2020-04-09 NIR Health SitRep v81 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 9 April 2020, there have been 6,103 laboratory confirmed cases of COVID-19 in Australia, including 51 deaths.
- Since yesterday's situation report, an additional 90 cases, including 1 deaths, have been reported in Australia.
- To date, more than 330,000 tests have been conducted across Australia.
- National Cabinet met today, no press conference scheduled at this stage.

#### Situation Overseas

- As at 1500 hrs 9 April 2020, a total of 1,484,811 cases of COVID-19 have been reported globally, including 88,538 deaths.
- On the 8th of April, the UN Secretary General of the UN launched the UN COVID-19 Supply Chain Task Force

The next Situation Report will be issued on 10 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-09 1800 AEDT	<b>Version</b>	81
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-10 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li><i>A new 24/7 support service specifically designed to help people through the COVID-19 pandemic is available free of charge to all Australians. The Coronavirus Mental Wellbeing Support Service has been developed to address the growing mental health impact of the pandemic.</i></li> <li><i>National Cabinet met today, no press conference scheduled at this stage.</i></li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul>

**Emergency Response Plan for COVID-19**

- On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.

**Commonwealth emergency powers**

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.

**1. Situation****Overview****Domestic Situation (as at 1500 hrs, 9 April 2020)**

- A total of **6,103** cases of COVID-19, including **51** deaths, have been confirmed in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **90** cases, including **1** death, have been reported in Australia.
  - It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.
    - The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over **16%** to around **1%**.
    - However, it is too soon to tell whether this trend will be sustained.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with 17% of these cases requiring admission to an ICU (1.9% of confirmed cases).
- The median age of COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is **79** years (range 55–94 years, amended from yesterday).

**Testing**

- To date, more than **330,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was **1.8%** and the positivity in the past week are **1.6%**.

**Source of infection**

- To date, two-thirds of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – 26%
    - There are 1,135 cases and 18 deaths associated with cruise ships.
  - United Kingdom – 18%
  - United States – 15%
- Of the locally acquired cases:
  - Clusters have been reported in some jurisdictions. Victoria has identified **52** clusters and NSW **currently has** 11 active clusters (accounting for **146** cases). Tasmania is reporting a cluster of 22 cases, including 15 healthcare workers, from the North West Regional Hospital (Burnie).

- *The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.*
- *Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). A subset of these cases are not able to be epidemiological linked back to a confirmed case, with the majority of these cases identified in NSW, followed by Victoria.*

#### Epidemiological Resources

- *A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 5 April 2020.*
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

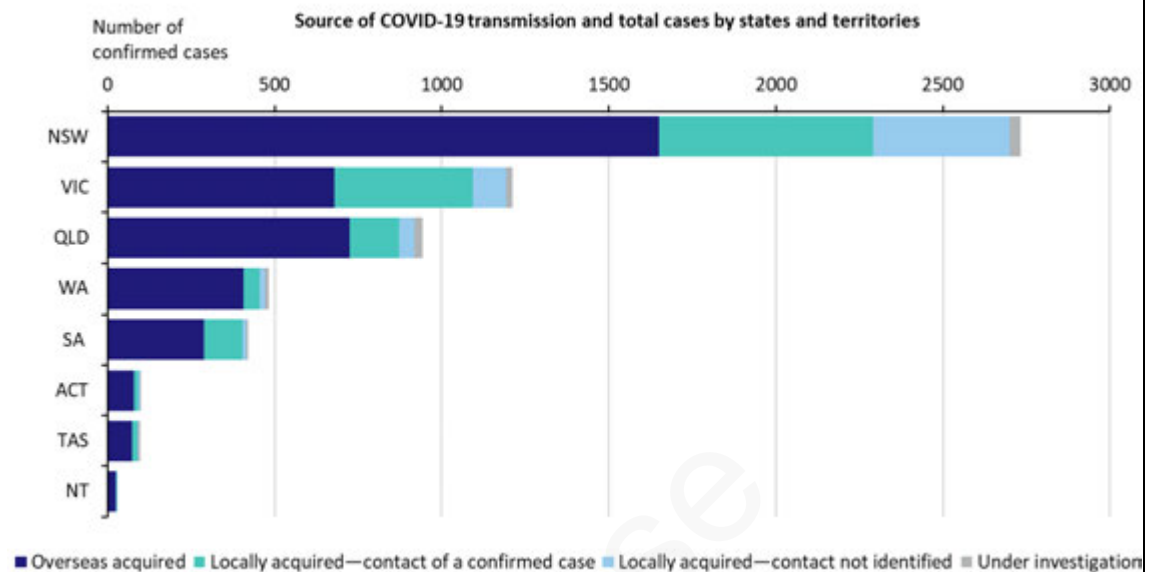
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>\*\*^</sup>, Australia (as at 1500 hrs, 9 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	3,968	80	1,659	24	737	289	73	688	418
Locally acquired - contact of confirmed case and/or in a known cluster	1,438	14	667	2	151	115	20	418	51
Locally acquired - contact not identified	575	0	416	0	32	4	0	110	13
Locally acquired - contact not identified, but case had interstate travel	33	5	NA	1	12	6	2	0	7
Under investigation	89	1	31	0	21	7	11	12	6
<b>Total cases</b>	<b>6,103</b>	<b>100</b>	<b>2,773</b>	<b>27</b>	<b>953</b>	<b>421</b>	<b>106</b>	<b>1228</b>	<b>495</b>
<b>Died (of total)</b>	<b>51</b>	<b>2</b>	<b>20</b>	<b>0</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>12</b>	<b>6</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	90 (1%)	1 (1%)	39 (1%)	0 (0%)	10 (1%)	1 (0%)	9 (9%)	16 (1%)	14 (3%)
Change in the last 72hrs before (%change)	308 (5%)	4 (4%)	136 (5%)	0 (0%)	32 (3%)	10 (2%)	21 (25%)	70 (6%)	35 (8%)
Average daily increase over the past three days (compound)	2%	1%	2%	0%	1%	1%	8%	2%	2%
Increase over the past week	970	12	475	7	118	36	35	192	95

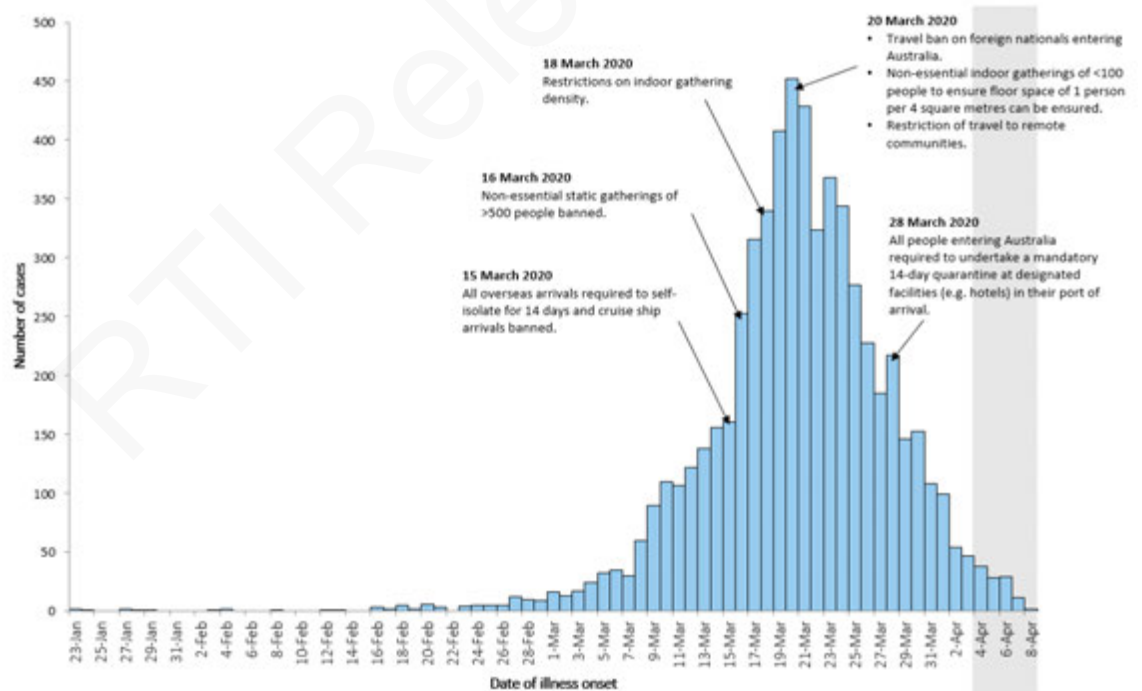
# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

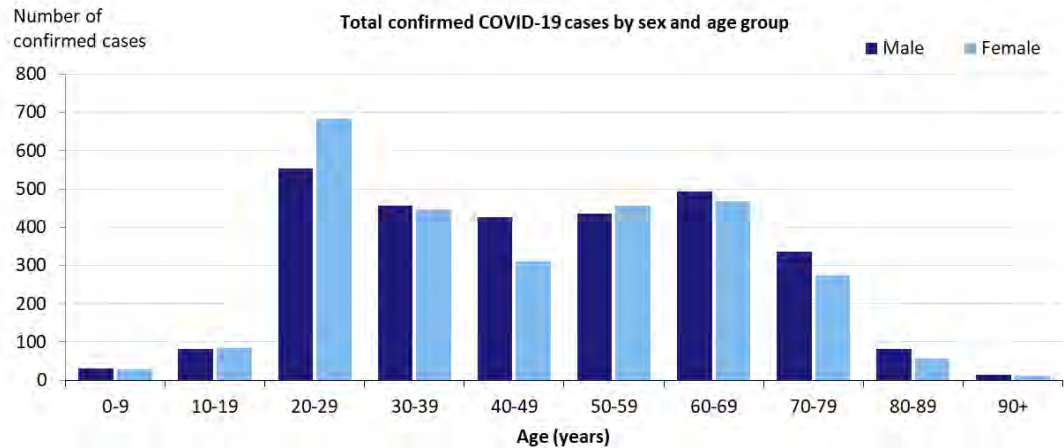
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 9 April 2020**



**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 9 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 9 April 2020****International Situation (as at 1500 hrs, 9 April 2020)**

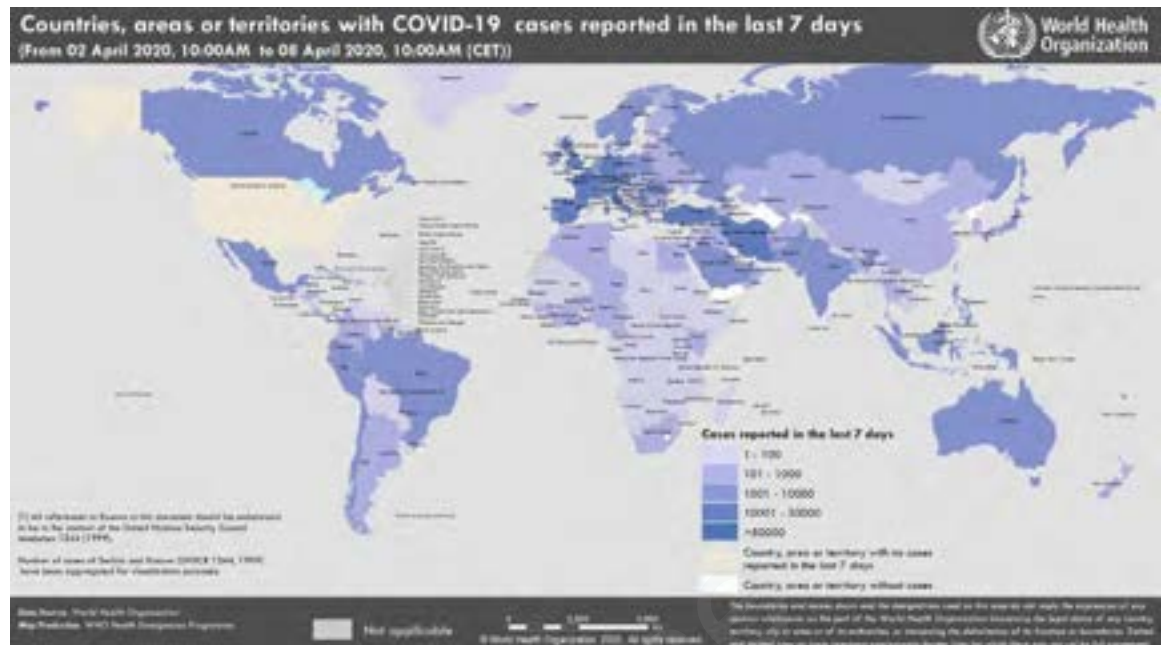
- A total of **1,484,811** cases of COVID-19 have been reported globally, including **88,538** deaths (Source: Johns Hopkins University, as at 1500hrs on 9 April 2020).
- The majority of deaths are from Italy (**22%**), Spain (**17%**), the United States of America (**14%**) and France (**13%**).

**Recent reporting of cases and deaths**

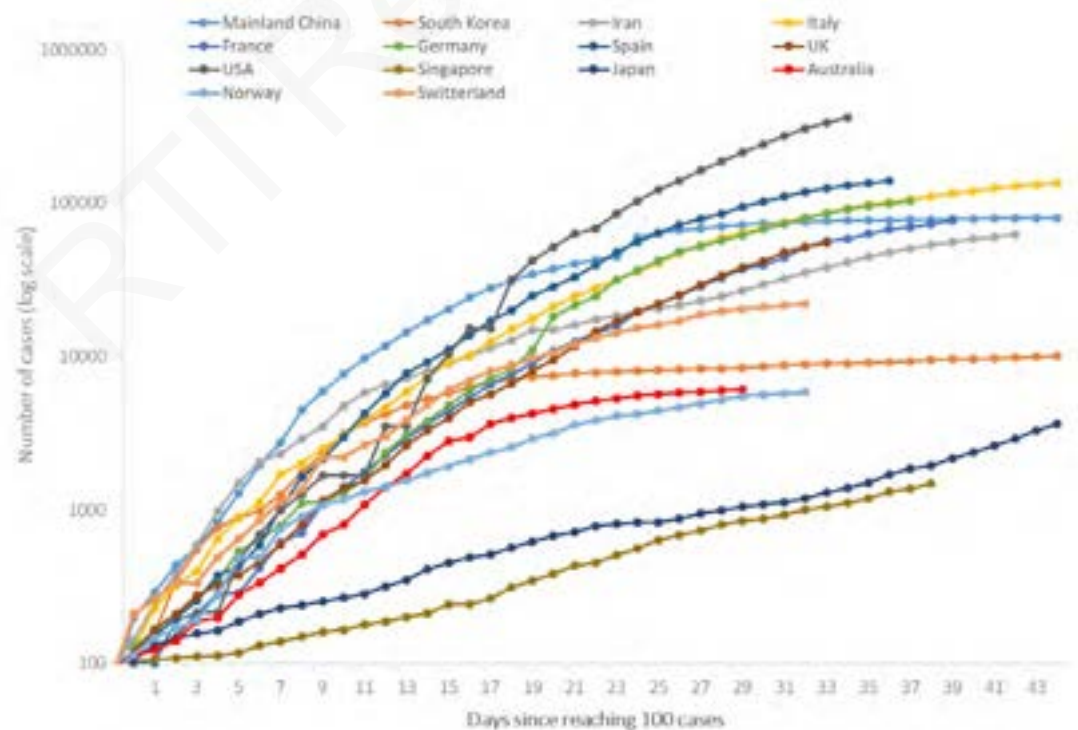
- A total of **54,358** new cases, including **6,405** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region, the United States and the Islamic Republic of Iran.
    - *Of all cases reported globally, more than one quarter are from the US. New York City is reporting more than 4,200 deaths, with over 80,000 cases, which is the almost as many cases (82,000 cases) and more than the total number of deaths (3,300) reported from Mainland China.*
  - Based on the number of reported cases globally, the case fatality rate is approximately **5.9%**. The risk of death reportedly increases with age.
  - Indonesia is reporting over 2,700 cases and 221 deaths, which exceeds the number of deaths reported in the Republic of Korea, which has reported over 10,000 cases. This suggests that the actual number of cases in Indonesia may be much higher than reported. The number of tests conducted by Indonesia is approximately 13,500, with a positivity of 0.2% and at a rate of 0.05 tests per 1,000 people. In contrast, the number of tests conducted by the Republic of Korea is approximately 486,000, with a positivity of 2.1% and at a rate of 9.4 tests per 1,000. The rate of testing is almost 19 times higher (*data as at 8 April*).



**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 79 of 8 April 2020**

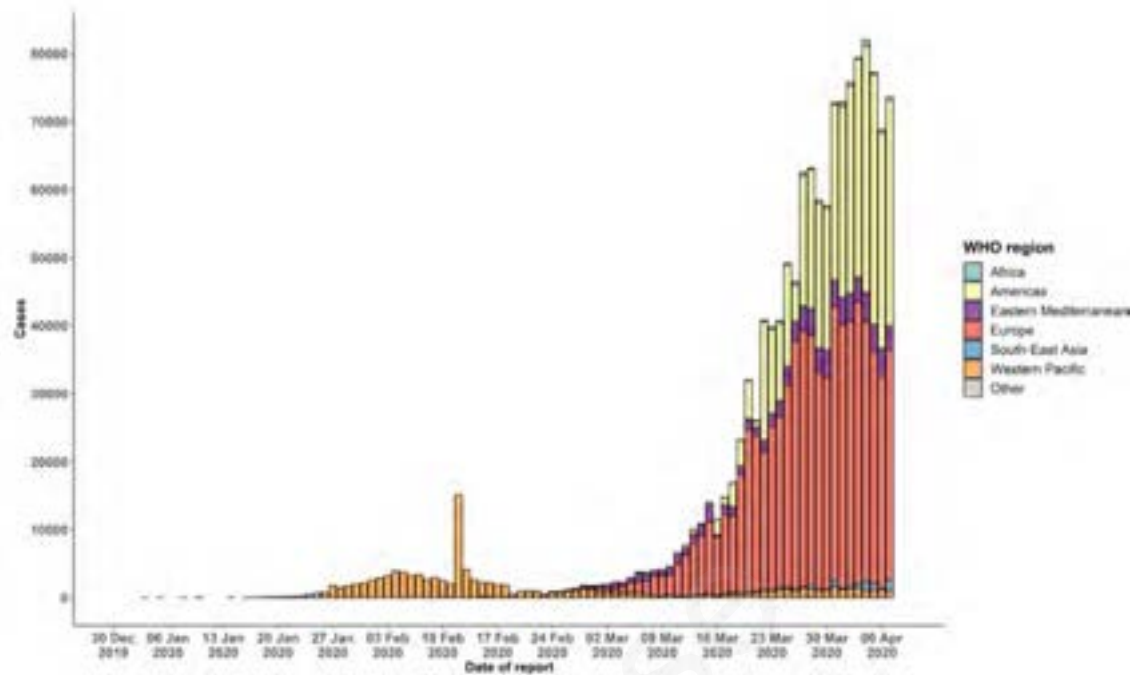


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 9 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 79 of 8 April 2020**



#### International response

##### WHO

- On 8 April, the UN Secretary General launched the UN COVID-19 Supply Chain Task Force, to dramatically scale up the supply of these life-saving tools, and match supply with needs.
- On 8 April 2020, WHO released guidance on the use of face masks in the broader community, reiterating that medical masks should be reserved for health care workers. WHO's advice is:
  - there is limited evidence that wearing a medical mask by healthy individuals may be beneficial as a preventive measure in the households or among contacts of a sick patient, or among attendees of mass gatherings.
  - there is currently no evidence that wearing a mask (whether medical or other types) can prevent them from infection with respiratory viruses, including COVID-19 by healthy persons in the wider community setting, including universal community masking.
- More than 90 countries *have joined* the Solidarity trial. This trial is comparing the safety and effectiveness four drugs and drug combinations against COVID-19. As of this morning, more than 200 patients had been randomly assigned to one of the study arms.
- WHO's priority is that frontline health workers are able to access essential personal protective equipment, including medical masks and respirators. WHO is working with governments and manufacturers to step up the production and distribution of personal protective equipment, including masks.
- *In the coming days, WHO will be releasing an updated strategy, and a revised Strategic Preparedness and Response Plan, with an estimate of the financial needs for the next phase of the response.*

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

##### European Commission

- On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.

	<p><b>Asian Development Bank (ADB)</b></p> <ul style="list-style-type: none"> <li>ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>COVID testing in the ACT was expanded to include a random selection of people who would not otherwise meet the testing criteria, effective 6 April 2020.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100 hours, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>

VIC Health	<ul style="list-style-type: none"> <li>• Victoria's State Control Centre (SCC) remains activated (Tier 2) to support the coordination of Victoria's response to the spread of COVID-19.</li> <li>• A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li>• On 3 April 2020, the Victorian Premier established a Crisis Council of Cabinet (CCC). The CCC is chaired by the Premier and includes seven Ministers who have been sworn-in with new portfolios with responsibility for leading all COVID-19 response activities in their respective departments. It will operate initially until 30 September 2020 then be reviewed.</li> <li>• On 1 April 2020, the Victorian Premier announced a \$1.3 billion injection to Victoria's health system with the aim of quickly establishing an extra 4,000 ICU beds.</li> <li>• Stage 3 restrictions have been in place since 30 March 2020. These restrictions are legally enforceable. They govern how businesses can operate and valid reasons for people to leave their homes.</li> <li>• From 28 March 2020, Victorian police have the power to issue on the spot fines for anyone who is not following the directions of the Chief Health Officer.</li> <li>• A COVID-19 specific hotline is activated to field public enquiries.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA <b>closed</b> the state borders <b>at</b> midnight on Sunday 5 April 2020. <ul style="list-style-type: none"> <li>◦ WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</li> </ul> </li> <li>• The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>◦ The Artania officially began its 14-day quarantine period on Friday 3rd April 2020 and is due to leave Fremantle on April 17 2020.</li> </ul> </li> <li>• A dedicated COVID-19 clinic opened at Broome Hospital on Wednesday 8 April 2020.</li> <li>• New enquiries line to keep the community informed about COVID-19 coronavirus has been launched (132 68 43).</li> <li>• <b><i>New testing criteria includes anyone in Western Australia showing signs of a fever OR acute respiratory infection. This expansion of criteria to assist in tracking individual cases and community transmission.</i></b></li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by John Hopkins University (**1,484,811**) as at 15:00 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 15:00 hours on **9** April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,157	3,342	86	2
Hong Kong SAR	961	4	25	0
Taiwan	379	5	3	0
Macau SAR	45	0	1	0
United States of America	363,321	10845	29,510	1,286
Spain	140,510	13798	5,478	743
Italy	135,586	17129	3,039	604
Germany	103,228	1861	4,003	254
France	77,226	10313	3,738	1,417
Iran (Islamic Republic of)	62,589	3872	2,089	133
The United Kingdom	55,246	6159	3,634	786

Turkey	34,109	725	3,892	76
Belgium	22,194	2035	1,380	403
Switzerland	22,164	641	590	0
Netherlands	19,580	2101	777	234
Canada	17,049	345	1,243	52
Austria	12,640	243	343	23
Portugal	12,442	345	712	34
Brazil	12,056	553	926	67
Republic of Korea	10,384	200	53	8
Israel	9,404	71	793	19
Sweden	7,693	591	487	114
Russian Federation	7,497	58	1,154	11
Australia	6,052	50	39	0
Norway	5,863	69	108	10
Ireland	5,709	210	345	36
India	5,194	149	1,127	40
Chile	5,116	43	301	6
Denmark	5,071	203	390	16
Czechia	5,017	88	195	10
Poland	4,848	129	435	22
Romania	4,417	182	360	25
Japan	4,257	81	351	1
Pakistan	4,072	58	208	4
Malaysia	3,963	63	170	1
Philippines	3,764	177	104	14
Ecuador	3,747	191	0	0
Luxembourg	2,970	44	127	3
Saudi Arabia	2,795	41	43	3
Indonesia	2,738	221	247	12
Peru	2,561	92	280	9
Serbia	2,447	61	247	3
Mexico	2,439	125	296	31
Thailand	2,369	30	149	4
United Arab Emirates	2,359	12	283	1
Finland	2,308	34	132	6
Panama	2,100	55	112	1
Qatar	2,057	6	225	2
Dominican Republic	1,956	98	128	12
Greece	1,832	81	77	2
South Africa	1,749	13	63	1
Ukraine	1,668	52	206	7
Argentina	1,628	53	74	7
Iceland	1,586	6	24	0
Colombia	1,579	46	94	11
Singapore	1,481	6	106	0
Algeria	1,468	194	45	21

Egypt	1,450	94	128	9
Croatia	1,282	18	60	2
Morocco	1,184	90	43	7
Estonia	1,149	21	41	2
Iraq	1,122	65	91	1
Republic of Moldova	1056	22	91	3
Slovenia	1,055	36	34	6
New Zealand	969	1	26	0
Hungary	895	58	78	11
Lithuania	880	15	37	1
Armenia	877	8	44	0
Belarus	861	13	161	0
Bahrain	811	5	55	1
Bosnia and Herzegovina	781	32	86	4
Kuwait	743	1	78	0
Azerbaijan	717	8	76	1
International conveyance (Diamond Princess)	712	11	0	0
Kazakhstan	709	6	39	0
Tunisia	623	23	27	1
North Macedonia	599	27	29	6
Slovakia	598	2	64	0
Bulgaria	577	23	28	1
Puerto Rico	573	23	60	2
Cameroon	555	9	0	0
Andorra	551	22	11	1
Latvia	548	2	6	1
Lebanon	548	19	7	0
Uzbekistan	534	3	62	1
Cyprus	494	14	29	0
Costa Rica	467	2	13	0
Afghanistan	423	14	56	3
Oman	419	2	48	0
Uruguay	415	6	9	0
Albania	400	22	23	0
Cuba	396	11	46	2
Burkina Faso	364	18	19	1
Réunion	358	0	9	0
Jordan	353	6	4	0
Côte d'Ivoire	349	3	26	0
Honduras	305	22	7	0
Malta	293	0	52	0
Ghana	287	5	73	0
San Marino	279	34	2	2
Niger	278	11	94	1
Kyrgyzstan	270	4	42	0
Mauritius	268	7	24	0

occupied Palestinian territory	263	1	9	0
Nigeria	254	6	22	1
Viet Nam	249	0	4	0
Montenegro	248	2	25	0
Senegal	237	2	11	0
Georgia	208	3	13	1
Bolivia (Plurinational State of)	194	14	11	3
Sri Lanka	186	6	10	1
Faroe Islands	184	0	3	0
Kosovo	184	5	19	2
Mayotte	184	2	20	0
Democratic Republic of the Congo	183	20	22	2
Kenya	172	6	30	2
Jersey	170	3	15	0
Guernsey	166	4	12	1
Venezuela (Bolivarian Republic of)	165	7	6	4
Bangladesh	164	17	41	5
Martinique	151	4	2	0
Isle of Man	150	1	23	0
Guinea	144	0	33	0
Guadeloupe	139	7	4	0
Brunei Darussalam	135	1	0	0
Guam	121	4	8	0
Djibouti	121	0	31	0
Cambodia	115	0	0	0
Paraguay	115	5	2	0
Gibraltar	113	1	10	0
Trinidad and Tobago	106	8	1	0
Rwanda	105	0	1	0
Madagascar	92	0	15	0
Liechtenstein	78	1	0	0
El Salvador	78	4	9	1
Guatemala	77	3	7	0
French Guiana	72	0	4	0
Aruba	71	0	7	0
Barbados	60	2	4	1
Jamaica	59	3	1	0
Togo	58	3	14	0
Uganda	52	0	0	0
Ethiopia	52	1	9	0
French Polynesia	47	0	5	0
Mali	47	5	8	1
Congo	45	5	0	0
United States Virgin Islands	43	1	0	0
Monaco	40	0	0	0
Sint Maarten	40	8	3	2

Cayman Islands	39	1	0	0
Zambia	39	1	0	0
Bermuda	39	2	2	2
Guinea-Bissau	33	0	0	0
Bahamas	33	5	4	0
Saint Martin	31	2	0	0
Eritrea	31	0	2	0
Guyana	31	5	2	1
Benin	26	1	3	0
Haiti	25	1	1	0
United Republic of Tanzania	24	1	0	0
Gabon	24	1	3	0
Myanmar	22	3	1	2
Libya	20	1	2	0
Maldives	19	0	0	0
Syrian Arab Republic	19	2	0	0
New Caledonia	18	0	0	0
Angola	17	2	1	0
Equatorial Guinea	16	0	0	0
Namibia	16	0	0	0
Antigua and Barbuda	15	0	0	0
Mongolia	15	0	0	0
Dominica	15	0	1	0
Fiji	15	0	1	0
Liberia	14	3	0	0
Saint Lucia	14	0	0	0
Sudan	14	2	0	0
Curaçao	13	1	0	0
Grenada	12	0	0	0
Lao People's Democratic Republic	12	0	0	0
Greenland	11	0	0	0
Seychelles	11	0	0	0
Zimbabwe	11	2	2	1
Mozambique	10	0	0	0
Saint Kitts and Nevis	10	0	0	0
Suriname	10	1	0	0
Chad	10	0	1	0
Eswatini	10	0	1	0
Central African Republic	9	0	0	0
Nepal	9	0	0	0
Northern Mariana Islands (Commonwealth of the)	8	2	0	1
Somalia	8	0	1	0
Turks and Caicos Islands	8	1	3	0
Malawi	8	1	4	1
Belize	7	1	0	0
Cabo Verde	7	1	0	0



Holy See	7	0	0	0
Saint Vincent and the Grenadines	7	0	0	0
Botswana	6	1	0	0
Mauritania	6	1	0	0
Montserrat	6	0	0	0
Nicaragua	6	1	0	0
Saint Barthélemy	6	0	0	0
Sierra Leone	6	0	0	0
Bhutan	5	0	0	0
Gambia	4	1	0	0
Sao Tome and Principe	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Falkland Islands (Malvinas)	2	0	0	0
Papua New Guinea	1	0	0	0
South Sudan	1	0	0	0
Timor-Leste	1	0	0	0
Saint Pierre and Miquelon	1	0	0	0
<b>Total</b>	<b>1,353,457</b>	<b>79,240</b>	<b>73,565</b>	<b>6,692</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #82 Novel Coronavirus (COVID-19)  
**Date:** Friday, 10 April 2020 7:04:45 PM  
**Attachments:** [2020-04-10 NIR Health SitRep v82 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 10 April 2020, there have been 6,203 laboratory confirmed cases of COVID-19 in Australia, including 53 deaths.
- Since yesterday's situation report, an additional 100 cases, including 2 deaths, have been reported in Australia.
- To date, more than 338,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 10 April 2020, a total of 1,602,885 cases of COVID-19 have been reported globally, including 95,735 deaths.
- On 9th of April, the WHO published the technical strategy update for the second Strategic Preparedness and Response Plan.

The next Situation Report will be issued on 11 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <i>10</i> 1800 AEDT	<b>Version</b>	<i>82</i>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <i>11</i> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>A new 24/7 support service specifically designed to help people through the COVID-19 pandemic is available free of charge to all Australians. The Coronavirus Mental Wellbeing Support Service has been developed to address the growing mental health impact of the pandemic.</li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020 incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul>

**Emergency Response Plan for COVID-19**

- On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.

**Commonwealth emergency powers**

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the *Biosecurity Act 2015*, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment, and the closure of duty free stores (excluding food outlets and chemists) at airports.

**1. Situation****Overview****Domestic Situation (as at 1500 hrs, 9 April 2020)**

- A total of **6,203** cases of COVID-19, including **53** deaths, have been confirmed in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **100** cases, including **2** deaths, have been reported in Australia.
  - It has been around two weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.
    - The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over **13%** to around **2%**.
    - However, it is too soon to tell whether this trend will be sustained.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with 17% of these cases requiring admission to an ICU (1.9% of confirmed cases).
- The median age of COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4). Of the deaths so far reported, the median age is **80** years (range 55–94 years, amended from yesterday).

Testing

- To date, more than **338,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was 1.8% and the positivity in the past week are **1.4%**.

Source of infection

- To date, two-thirds of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – **29%**
    - There are **1,156** cases and **19** deaths associated with cruise ships.
  - United Kingdom – **17%**
  - United States – **14%**
- Of the locally acquired cases:
  - Clusters have been reported in some jurisdictions. Victoria has identified 52 clusters and NSW currently has 11 active clusters (accounting for 146 cases). Tasmania is reporting a cluster of **25** cases, including **18** healthcare workers, from the North West Regional Hospital (Burnie).

- The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). A subset of these cases are not able to be epidemiological linked back to a confirmed case, with the majority of these cases identified in NSW, followed by Victoria.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the [Communicable Diseases Intelligence](#) journal. The most recent report contains information on cases up to 5 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

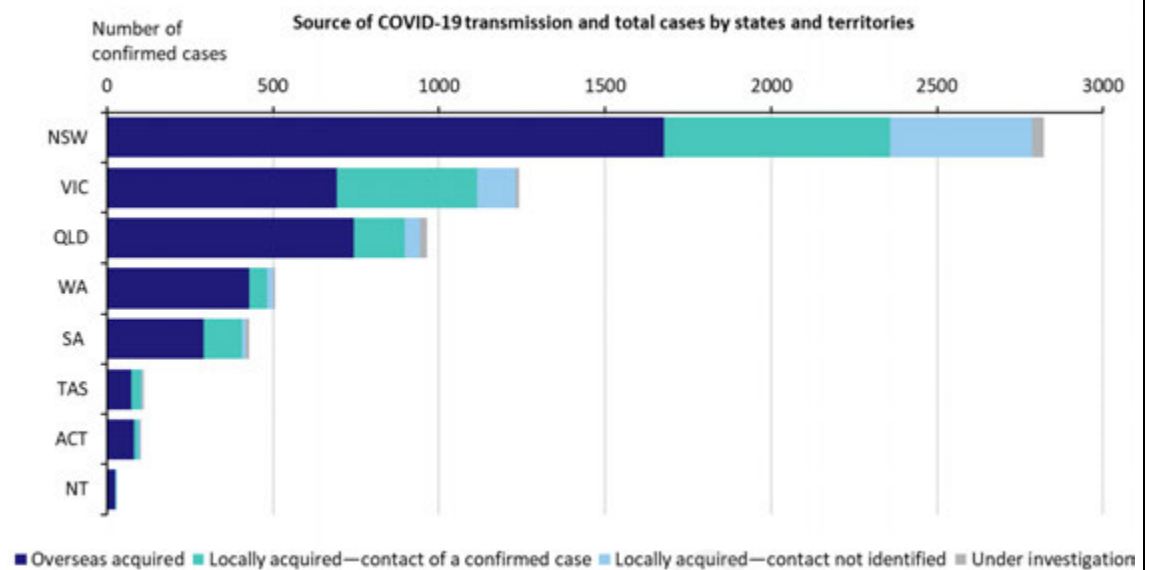
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>##</sup>, Australia (as at 1500 hrs, 10 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,010	80	1,677	24	744	290	74	693	428
Locally acquired - contact of confirmed case and/or in a known cluster	1,472	15	682	2	153	117	28	422	53
Locally acquired - contact not identified	593	0	427	0	33	4	0	116	13
Locally acquired - contact not identified, but case had interstate travel	33	5	N/A	1	12	6	2	0	7
Under investigation	95	3	36	0	23	11	7	10	5
<b>Total cases</b>	<b>6,203</b>	<b>103</b>	<b>2,822</b>	<b>27</b>	<b>965</b>	<b>428</b>	<b>111</b>	<b>1241</b>	<b>506</b>
<b>Died (of total)</b>	<b>53</b>	<b>2</b>	<b>21</b>	<b>0</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>13</b>	<b>6</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	100 (2%)	3 (3%)	49 (2%)	0 (0%)	12 (1%)	7 (2%)	5 (5%)	13 (1%)	11 (2%)
Change in the last 72hrs before (%change)	295 (5%)	6 (6%)	136 (5%)	0 (0%)	31 (3%)	13 (3%)	23 (26%)	50 (4%)	36 (8%)
Average daily increase over the past three days (compound)	1.6%	2.0%	1.7%	0.0%	1.1%	1.0%	8.1%	1.4%	2.5%
Increase over the past week	853	12	433	6	92	32	38	156	84

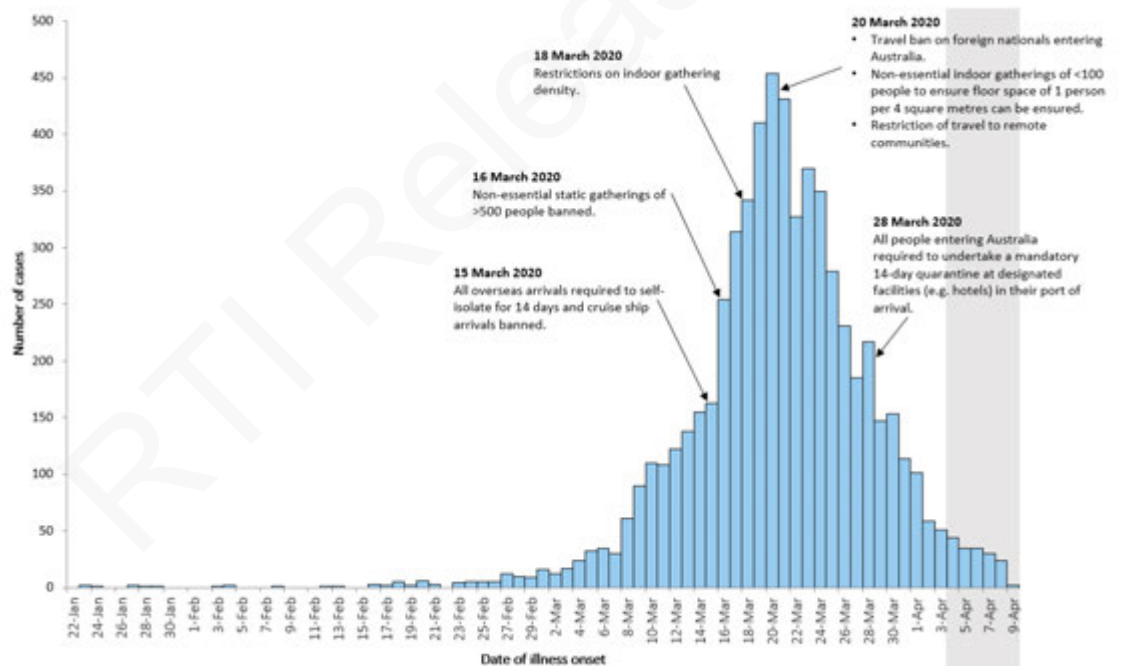
# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

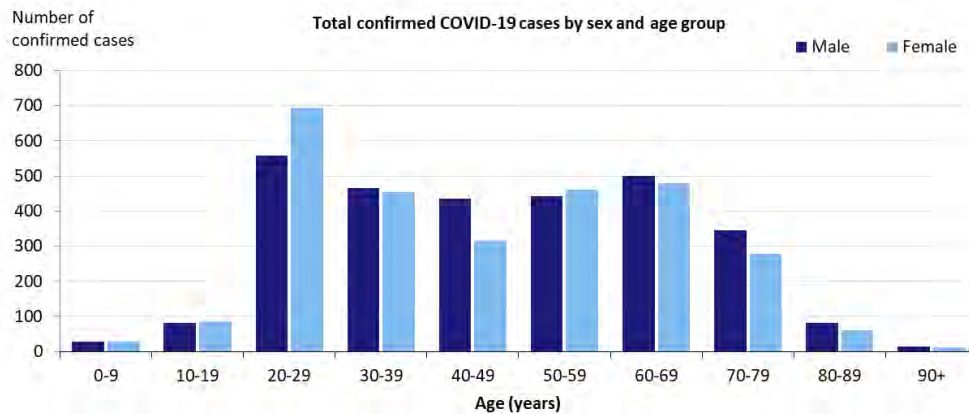
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 10 April 2020**



**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 10 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 10 April 2020****International Situation (as at 1500 hrs, 10 April 2020)**

- A total of **1,602,885** cases of COVID-19 have been reported globally, including **95,735** deaths (Source: Johns Hopkins University, as at 1500hrs on 10 April 2020).
- The majority of deaths are from Italy (22%), Spain (17%), the United States of America (14%) and France (13%).

**Recent reporting of cases and deaths**

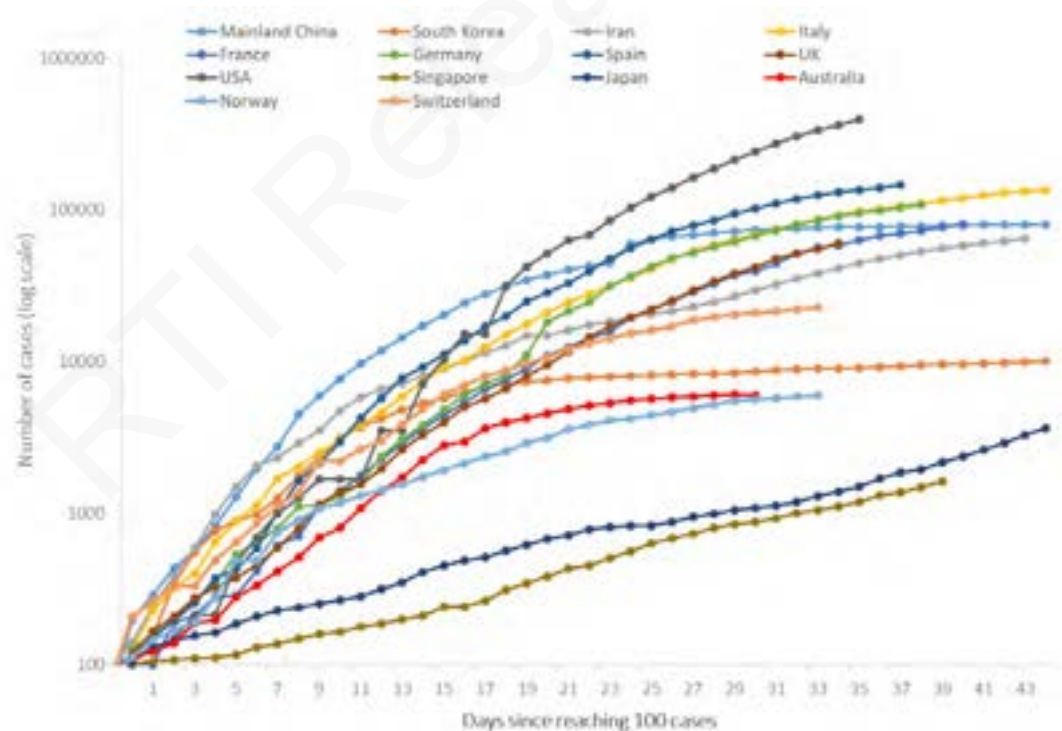
- A total of **117,405** new cases, including **7,197** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region, the United States and the Islamic Republic of Iran.
    - Of all cases reported globally, more than one quarter are from the US. New York City is reporting more than **4,700** deaths, with over **87,000** cases, which is **more than the total number of cases (82,000)** and more than the total number of deaths (3,300) reported from Mainland China.
  - Based on the number of reported cases globally, the case fatality rate is approximately 5.9%. The risk of death reportedly increases with age.
  - Indonesia is reporting over 3,200 cases and **280** deaths, which exceeds the number of deaths reported in the Republic of Korea, which has reported over 10,000 cases. This suggests that the actual number of cases in Indonesia may be much higher than reported. The number of tests conducted by Indonesia is approximately **17,600**, with a positivity of **0.18%** and at a rate of **7** tests per **100,000 population**. In contrast, the number of tests conducted by the Republic of Korea is approximately **503,000**, with a positivity of 2.1% and at a rate of **974** tests per **100,000 population**.



**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 80 of 9 April 2020**

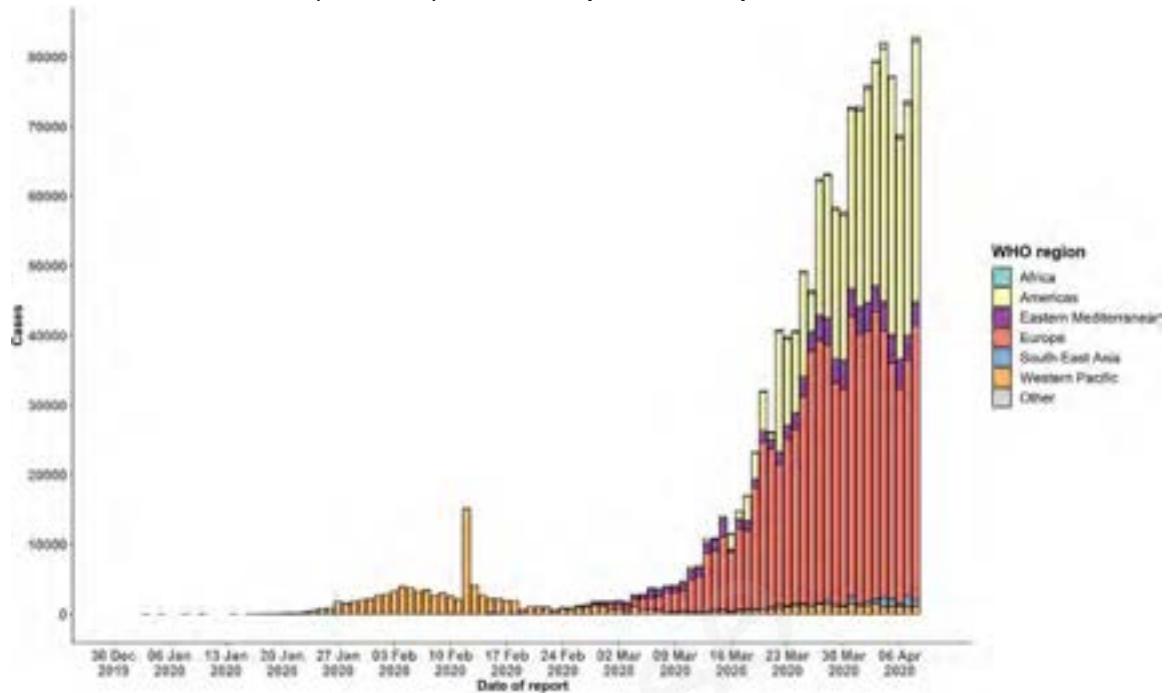


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 10 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 80 of 9 April 2020**



#### International response

##### WHO

- On 9 April 2020 the WHO published the technical strategy update for the next phase of the response.
  - This strategy update forms the basis of WHO's second Strategic Preparedness and Response Plan, to be released in coming days. It addresses circumstances in lower- and middle-income countries and communities with weaker health systems and infrastructure, and especially in countries affected by conflict and for displaced people. It is built on five strategic objectives:
    - mobilize all sectors and communities;
    - control sporadic cases and clusters and prevent community transmission;
    - suppress community transmission where it is occurring;
    - reduce mortality through appropriate care; and
    - develop safe and effective vaccines and therapeutics.
  - These strategic objectives must be supported by tailored national strategies to find, test, isolate and care for every case, and trace every contact.
  - In turn, national strategies must be supported at the international level in five key areas:
    - support countries to build their capacities to prepare and respond;
    - provide epidemiological analysis and risk communication;
    - coordinate the global supply chain;
    - provide technical expertise and mobilize the health workforce; and
    - accelerate research, innovation and knowledge sharing.
- The second Strategic Preparedness and Response Plan will estimate the resources needed for the next phase of the response.
- Member States and partners who have responded to the first Strategic Preparedness and Response Plan have pledged more than US\$800 million.

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

	<p><b>European Commission</b></p> <ul style="list-style-type: none"> <li>On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.</li> </ul> <p><b>Asian Development Bank (ADB)</b></p> <ul style="list-style-type: none"> <li>ADB announced on 18 March an initial USD 6.5 billion package for immediate needs of its developing member countries.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>COVID testing in the ACT was expanded to include a random selection of people who would not otherwise meet the testing criteria, effective 6 April 2020.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 Tuesday 24 March. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on Thursday 26th March restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on Saturday 28th March with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100 hours, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>

VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on Monday 16 March.</li> <li>On 3 April 2020, the Victorian Premier established a Crisis Council of Cabinet (CCC). The CCC is chaired by the Premier and includes seven Ministers who have been sworn-in with new portfolios with responsibility for leading all COVID-19 response activities in their respective departments. It will operate initially until 30 September 2020 then be reviewed.</li> <li>Stage 3 restrictions have been in place since 30 March 2020. These restrictions are legally enforceable. They govern how businesses can operate and valid reasons for people to leave their homes.</li> <li><i>On 8 April 2020 a new emergency order was enacted to ensure access to essential medicines. Pharmacists can receive digital images of Schedule 4 prescriptions from a prescriber without relying on the original or faxed copy.</i></li> <li><i>Most Victorian students will be educated from home when Term 2 starts on 15 April 2020; VCE students will still receive an ATAR score, but there will be several changes to the academic timetable for VCE and VCAL students.</i></li> <li><i>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</i></li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>WA closed the state borders at midnight on Sunday 5 April 2020. <ul style="list-style-type: none"> <li>WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</li> </ul> </li> <li>The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>The Artania officially began its 14-day quarantine period on Friday 3rd April 2020 and is due to leave Fremantle on April 17 2020.</li> </ul> </li> <li>A dedicated COVID-19 clinic opened at Broome Hospital on Wednesday 8 April 2020.</li> <li>New enquiries line to keep the community informed about COVID-19 coronavirus has been launched (132 68 43).</li> <li>New testing criteria includes anyone in Western Australia showing signs of a fever OR acute respiratory infection. This expansion of criteria to assist in tracking individual cases and community transmission.</li> <li>As at 10 April 2020, WA are monitoring seven cruise ships transiting past Western Australia and risk assessment for the provision of medical assistance.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild

disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (1,602,885) as at 15:00 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 15:00 hours on 9 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,249	3,344	92	2
Hong Kong SAR	974	4	13	0
Taiwan	380	5	1	0
Macau SAR	45	0	0	0
United States of America	395,030	12740	31,709	1,895
Spain	146,690	14555	6,180	757
Italy	139,422	17669	3,836	540
Germany	108,202	2107	4,974	246
France	81,095	10853	3,869	540
Iran (Islamic Republic of)	64,586	3993	1,997	121
The United Kingdom	60,737	7097	5,491	938

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Turkey	38,226	812	4,117	87
Belgium	23,403	2240	1,209	205
Switzerland	22,710	705	546	64
Netherlands	20,549	2248	969	147
Canada	18,433	401	1,384	56
Austria	12,969	273	329	30
Portugal	13,141	380	699	35
Brazil	13,717	667	1,661	114
Republic of Korea	10,423	204	39	4
Israel	9,404	71	0	0
Sweden	8,419	687	726	96
Russian Federation	10,131	76	2,634	18
Australia	6,152	52	100	2
Norway	6,010	80	147	11
Ireland	6,224	235	515	25
India	5,734	166	540	17
Chile	5,546	48	430	5
Denmark	5,402	218	331	15
Czechia	5,312	99	295	11
Poland	5,205	159	357	30
Romania	4,761	209	344	27
Japan	4,768	85	511	4
Pakistan	4,322	63	250	5
Malaysia	4,119	65	156	2
Philippines	3,870	182	106	5
Ecuador	4,450	242	703	51
Luxembourg	3,034	46	64	2
Saudi Arabia	2,932	41	137	0
Indonesia	2,956	240	218	19
Peru	2,954	107	393	15
Serbia	2,666	65	219	4
Mexico	2,785	141	346	16
Thailand	2,423	32	54	2
United Arab Emirates	2,659	12	300	0
Finland	2,487	40	179	6
Panama	2,249	59	149	4
Qatar	2,210	6	153	0
Dominican Republic	1,956	98	0	0
Greece	1,884	83	52	2
South Africa	1,845	18	96	5
Ukraine	1,892	57	224	5
Argentina	1,715	60	87	7
Iceland	1,616	6	30	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Colombia	1,780	50	201	4
Singapore	1,623	6	142	0
Algeria	1,572	205	104	11
Egypt	1,560	103	110	9
Croatia	1,343	19	61	1
Morocco	1,275	93	91	3
Estonia	1,185	24	36	3
Iraq	1,202	69	80	4
Republic of Moldova	1,174	28	118	6
Slovenia	1,091	40	36	4
New Zealand	992	1	23	0
Hungary	980	66	85	8
Lithuania	912	15	32	0
Armenia	921	10	44	2
Belarus	1,066	13	205	0
Bahrain	823	5	12	0
Bosnia and Herzegovina	816	35	35	3
Kuwait	855	1	112	0
Azerbaijan	822	8	105	0
International conveyance (Diamond Princess)	712	11	0	0
Kazakhstan	727	7	18	1
Tunisia	628	24	5	1
North Macedonia	617	30	18	3
Slovakia	682	2	84	0
Bulgaria	593	24	16	1
Puerto Rico	620	24	47	1
Cameroon	730	10	175	1
Andorra	566	24	15	2
Latvia	577	2	29	0
Lebanon	575	19	27	0
Uzbekistan	555	3	21	0
Cyprus	526	14	32	0
Costa Rica	483	2	16	0
Afghanistan	444	15	21	1
Oman	457	2	38	0
Uruguay	424	7	9	1
Albania	409	22	9	0
Cuba	457	12	61	1
Burkina Faso	384	19	20	1
Réunion	362	0	4	0
Jordan	358	6	5	0
Côte d'Ivoire	384	3	35	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Honduras	312	22	7	0
Malta	299	1	6	1
Ghana	313	6	26	1
San Marino	308	34	29	0
Niger	342	11	64	0
Kyrgyzstan	280	4	10	0
Mauritius	273	7	5	0
occupied Palestinian territory	263	1	0	0
Nigeria	276	6	22	0
Viet Nam	251	0	2	0
Montenegro	248	2	0	0
Senegal	244	2	7	0
Georgia	214	3	6	0
Bolivia (Plurinational State of)	210	15	16	1
Sri Lanka	189	7	3	1
Faroe Islands	184	0	0	0
Kosovo	224	6	40	1
Mayotte	186	2	2	0
Democratic Republic of the Congo	207	20	24	0
Kenya	179	6	7	0
Jersey	170	3	0	0
Guernsey	166	4	0	0
Venezuela (Bolivarian Republic of)	166	7	1	0
Bangladesh	218	20	54	3
Martinique	152	4	1	0
Isle of Man	150	1	0	0
Guinea	164	0	20	0
Guadeloupe	139	8	0	1
Brunei Darussalam	135	1	0	0
Guam	125	4	4	0
Djibouti	135	0	14	0
Cambodia	117	0	2	0
Paraguay	119	5	4	0
Gibraltar	113	1	0	0
Trinidad and Tobago	107	8	1	0
Rwanda	110	0	5	0
Madagascar	93	0	1	0
Liechtenstein	79	1	1	0
El Salvador	93	5	15	1
Guatemala	87	3	10	0
French Guiana	77	0	5	0
Aruba	74	0	3	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Barbados	63	3	3	1
Jamaica	63	3	4	0
Togo	70	3	12	0
Uganda	53	0	1	0
Ethiopia	55	2	3	1
French Polynesia	51	0	4	0
Mali	56	6	9	1
Congo	60	5	15	0
United States Virgin Islands	45	1	2	0
Monaco	54	0	14	0
Sint Maarten	40	8	0	0
Cayman Islands	45	2	6	1
Zambia	39	1	0	0
Bermuda	39	2	0	0
Guinea-Bissau	33	0	0	0
Bahamas	36	6	3	1
Saint Martin	31	2	0	0
Eritrea	33	0	2	0
Guyana	33	5	2	0
Benin	26	1	0	0
Haiti	27	1	2	0
United Republic of Tanzania	25	1	1	0
Gabon	24	1	0	0
Myanmar	22	3	0	0
Libya	21	1	1	0
Maldives	19	0	0	0
Syrian Arab Republic	19	2	0	0
New Caledonia	18	0	0	0
Angola	19	2	2	0
Equatorial Guinea	16	0	0	0
Namibia	16	0	0	0
Antigua and Barbuda	19	2	4	2
Mongolia	16	0	1	0
Dominica	15	0	0	0
Fiji	15	0	0	0
Liberia	31	4	17	1
Saint Lucia	14	0	0	0
Sudan	14	2	0	0
Curaçao	14	1	1	0
Grenada	12	0	0	0
Lao People's Democratic Republic	15	0	3	0
Greenland	11	0	0	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Seychelles	11	0	0	0
Zimbabwe	11	3	0	1
Mozambique	17	0	7	0
Saint Kitts and Nevis	11	0	1	0
Suriname	10	1	0	0
Chad	10	0	0	0
Eswatini	12	0	2	0
Central African Republic	10	0	1	0
Nepal	9	0	0	0
Northern Mariana Islands (Commonwealth of the)	11	2	3	0
Somalia	12	1	4	1
Turks and Caicos Islands	8	1	0	0
Malawi	8	1	0	0
Belize	8	1	1	0
Cabo Verde	7	1	0	0
Holy See	8	0	1	0
Saint Vincent and the Grenadines	8	0	1	0
Botswana	6	1	0	0
Mauritania	6	1	0	0
Montserrat	8	0	2	0
Nicaragua	6	1	0	0
Saint Barthélemy	6	0	0	0
Sierra Leone	7	0	1	0
Bhutan	5	0	0	0
Gambia	4	1	0	0
São Tomé and Príncipe	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Falkland Islands (Malvinas)	5	0	3	0
Papua New Guinea	2	0	1	0
South Sudan	1	0	0	0
Timor-Leste	1	0	0	0
Saint Pierre and Miquelon	1	0	0	0
<b>Total</b>	<b>1,436,298</b>	<b>85,524</b>	<b>82,841</b>	<b>6,284</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #83 Novel Coronavirus (COVID-19)  
**Date:** Saturday, 11 April 2020 7:14:41 PM  
**Attachments:** [2020-04-11 NIR Health SitRep v83 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 11 April 2020, there have been 6,292 laboratory confirmed cases of COVID-19 in Australia, including 56 deaths.
- Since yesterday's situation report, an additional 89 cases, including 3 deaths, have been reported in Australia.
- To date, more than 347,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 11 April 2020, a total of 1,698,416 cases of COVID-19 have been reported globally, including 102,764 deaths.
- On 10 April, the WHO provided detail of the UN Supply Chain Task Force including coordination, scale and supplies.
- Of all cases reported globally, more than one quarter are from the US. New York City is reporting more than 5,400 deaths, with over 94,000 cases, which is more than the total number of cases (82,000) and more than the total number of deaths (3,300) reported from Mainland China.

The next Situation Report will be issued on 12 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [\[redacted\]](#) or [\[redacted\]](#) (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [\[redacted\]](#) by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-11 1800 AEDT	<b>Version</b>	83
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-12 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>• <i>A plane carrying 99 Australian and 13 New Zealand passengers from the Greg Mortimer cruise ship, currently moored in Uruguay, has now departed Montevideo.</i> <ul style="list-style-type: none"> <li>○ <i>The plane is expected to arrive in Melbourne at 0620hrs on Sunday 12 April.</i></li> <li>○ <i>Around 70% of passengers have tested positive for COVID-19.</i></li> <li>○ <i>All passengers have been screened prior to boarding and have been deemed fit to travel by medical personnel. Passengers predominantly had mild symptoms or were asymptomatic at the time of boarding.</i></li> <li>○ <i>Two Australian citizens remain hospitalised in Uruguay, including one female in her 70s who is in a critical condition.</i></li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>• Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>• On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>• The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul>

**Emergency Response Plan for COVID-19**

- On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.

**Commonwealth emergency powers**

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the *Biosecurity Act 2015*, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment (PPE), and the closure of duty free stores (excluding food outlets and chemists) at airports.

**1. Situation****Overview****Domestic Situation (as at 1500 hrs, 11 April 2020)**

- A total of **6,292** cases of COVID-19, including **56** deaths, have been confirmed in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **89** cases, including **3** deaths, have been reported in Australia.
  - It has been around **three** weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.
    - The rate for which COVID-19 cases increases on average each day has fallen over the past fortnight from just over **15%** to around **1%**.
    - However, it is too soon to tell whether this trend will be sustained.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with 17% of these cases requiring admission to an ICU (1.9% of confirmed cases).
- The median age of COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4).
- Of the deaths so far reported:
  - The median age is 80 years (range 55–94 years).*
  - 62% were male and 38% were female.*
  - Co-morbidities have been reported for at least 20 deaths.*
    - Of these, the two most commonly reported co-morbidities were diabetes and chronic respiratory conditions (excluding asthma).*
    - Two or more co-morbidities were reported for eight of the deaths.*

**Testing**

- To date, more than **347,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was 1.8% and the positivity in the past week are **1.2%**.

**Source of infection**

- To date, two-thirds of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – **26%**
    - As reported by jurisdictions, there are **1,169** cases associated with cruise ships.
  - United Kingdom – **18%**
  - United States – **15%**
- Of the locally acquired cases:

- Clusters have been reported in some jurisdictions. Victoria has identified **53** clusters and NSW currently has 11 active clusters (accounting for 146 cases). Tasmania is reporting a cluster of 25 cases, including 18 healthcare workers, from the North West Regional Hospital (Burnie).
- The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). A subset of these cases are not able to be epidemiologically linked back to a confirmed case, with the majority of these cases identified in NSW, followed by Victoria.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the [Communicable Diseases Intelligence](#) journal. The most recent report contains information on cases up to 5 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

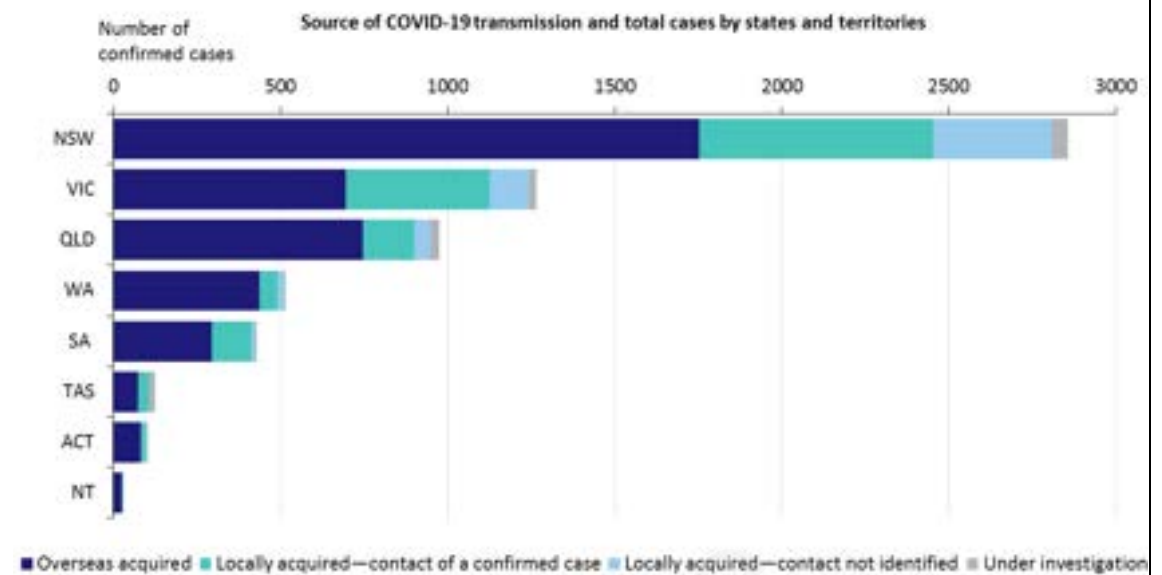
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>##</sup>, Australia (as at 1500 hrs, **11 April 2020**)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<b>4,102</b>	80	<b>1,753</b>	24	<b>745</b>	<b>295</b>	74	<b>695</b>	<b>436</b>
Locally acquired - contact of confirmed case and/or in a known cluster	<b>1,501</b>	15	<b>699</b>	2	<b>154</b>	<b>118</b>	30	<b>430</b>	53
Locally acquired - contact not identified	<b>528</b>	0	<b>356</b>	0	<b>36</b>	<b>5</b>	0	<b>118</b>	13
Locally acquired - contact not identified, but case had interstate travel	<b>34</b>	5	N/A	1	<b>13</b>	6	2	<b>0</b>	7
Under investigation	<b>127</b>	3	<b>49</b>	0	<b>26</b>	<b>5</b>	<b>17</b>	<b>22</b>	5
<b>Total cases</b>	<b>6,292</b>	<b>103</b>	<b>2,857</b>	<b>27</b>	<b>974</b>	<b>429</b>	<b>123</b>	<b>1265</b>	<b>514</b>
<b>Died (of total)</b>	<b>56</b>	2	<b>22</b>	0	5	3	<b>4</b>	<b>14</b>	6
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<b>89 (1%)</b>	<b>0 (0%)</b>	<b>35 (1%)</b>	<b>0 (0%)</b>	<b>9 (1%)</b>	<b>1 (0%)</b>	<b>12 (11%)</b>	<b>24 (2%)</b>	<b>8 (2%)</b>
Change in the last 72hrs before (%change)	<b>279 (5%)</b>	<b>4 (4%)</b>	<b>123 (4%)</b>	<b>0 (0%)</b>	<b>31 (3%)</b>	<b>9 (2%)</b>	<b>26 (27%)</b>	<b>53 (4%)</b>	<b>33 (7%)</b>
Average daily increase over the past three days (compound)	<b>1.5%</b>	<b>1.3%</b>	<b>1.5%</b>	<b>0.0%</b>	<b>1.1%</b>	<b>0.7%</b>	<b>8.3%</b>	<b>1.4%</b>	<b>2.2%</b>
Increase over the past week	<b>744</b>	<b>10</b>	<b>364</b>	<b>2</b>	<b>74</b>	<b>22</b>	<b>44</b>	<b>150</b>	<b>78</b>

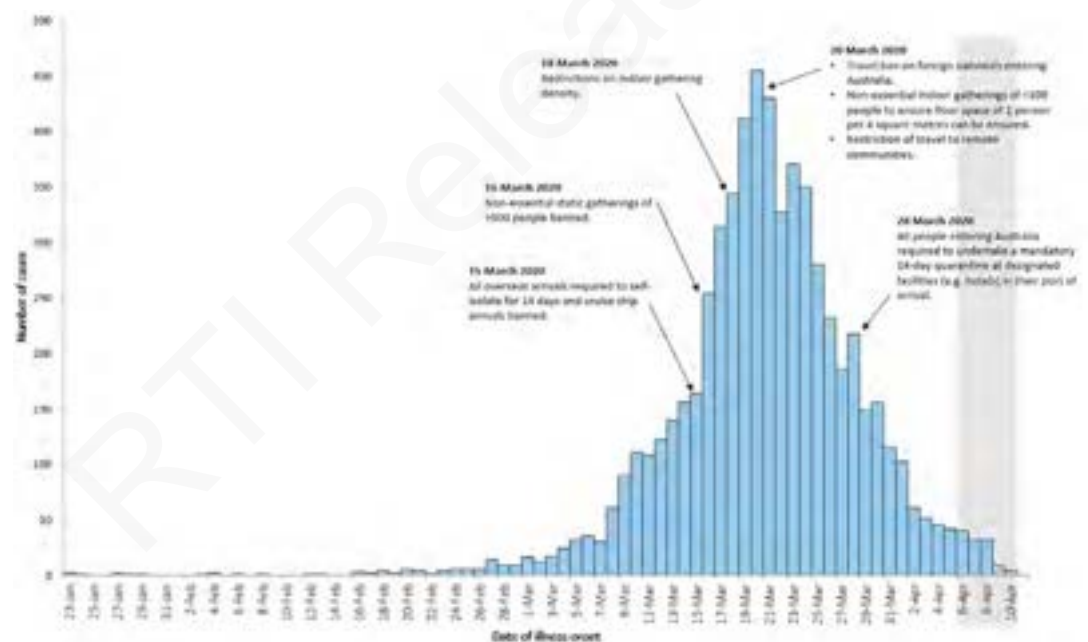
<sup>#</sup> Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

<sup>\*</sup>Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

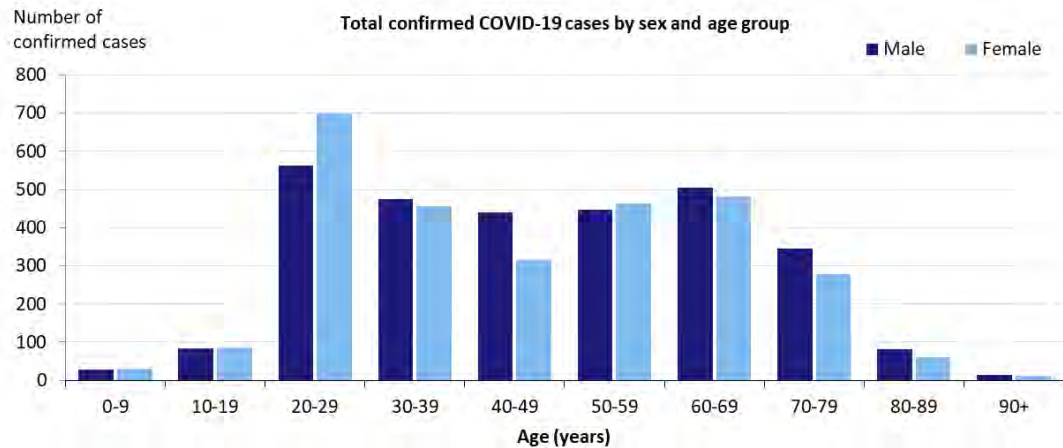
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 11 April 2020**



**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 11 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 11 April 2020****International Situation (as at 1500 hrs, 11 April 2020)**

- A total of **1,698,416** cases of COVID-19 have been reported globally, including **102,764** deaths (Source: Johns Hopkins University, as at 1500hrs on 11 April 2020).
- The majority of deaths are from Italy (**20%**), Spain (**16%**), the United States of America (**16%**), and France (13%) (*Source: WHO Situation Report 81*).

**Recent reporting of cases and deaths**

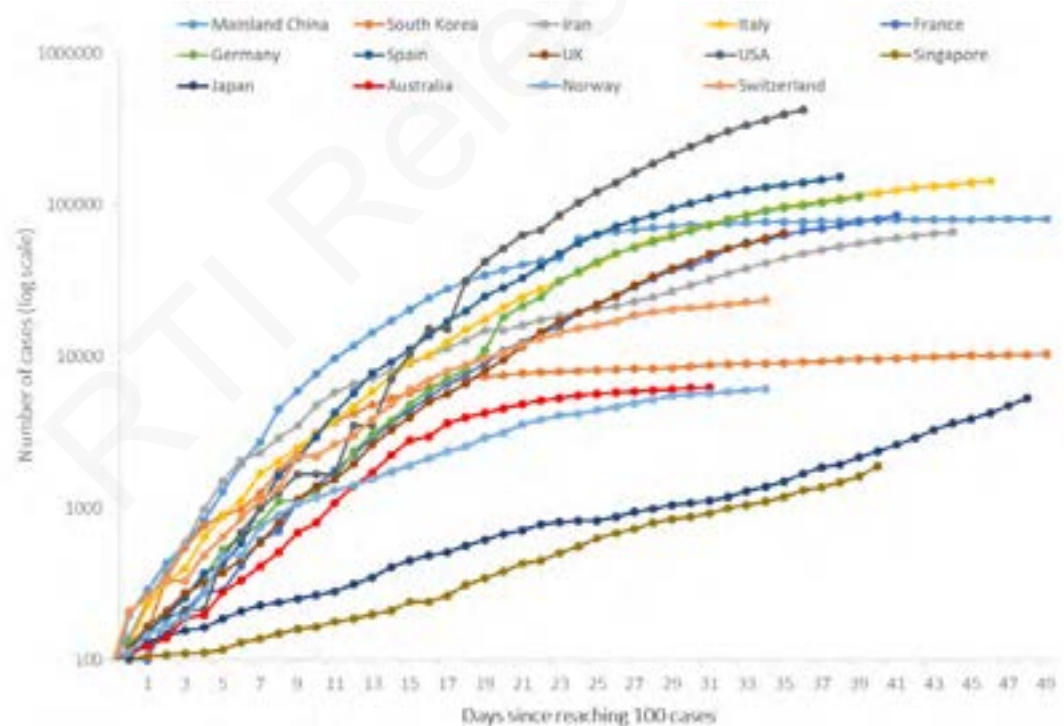
- A total of **95,531** new cases, including **7,029** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region, the United States and the Islamic Republic of Iran.
    - Of all cases reported globally, more than one quarter are from the US. New York City is reporting more than **5,400** deaths, with over **94,000** cases, which is more than the total number of cases (82,000) and more than the total number of deaths (3,300) reported from Mainland China.
  - Based on the number of reported cases globally, the case fatality rate is approximately **6.1%**. The risk of death reportedly increases with age.
  - Indonesia is reporting over **3,500** cases and **300** deaths, which exceeds the number of deaths reported in the Republic of Korea, which has reported over **10,400** cases. This suggests that the actual number of cases in Indonesia may be much higher than reported. The number of tests conducted by Indonesia is approximately **19,500**, with a positivity of **18%** and at a rate of **7** tests per **100,000 population**. In contrast, the number of tests conducted by the Republic of Korea is approximately **510,479**, with a positivity of 2.1% and at a rate of **989** tests per **100,000 population**.



**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report **81** of **10** April 2020**

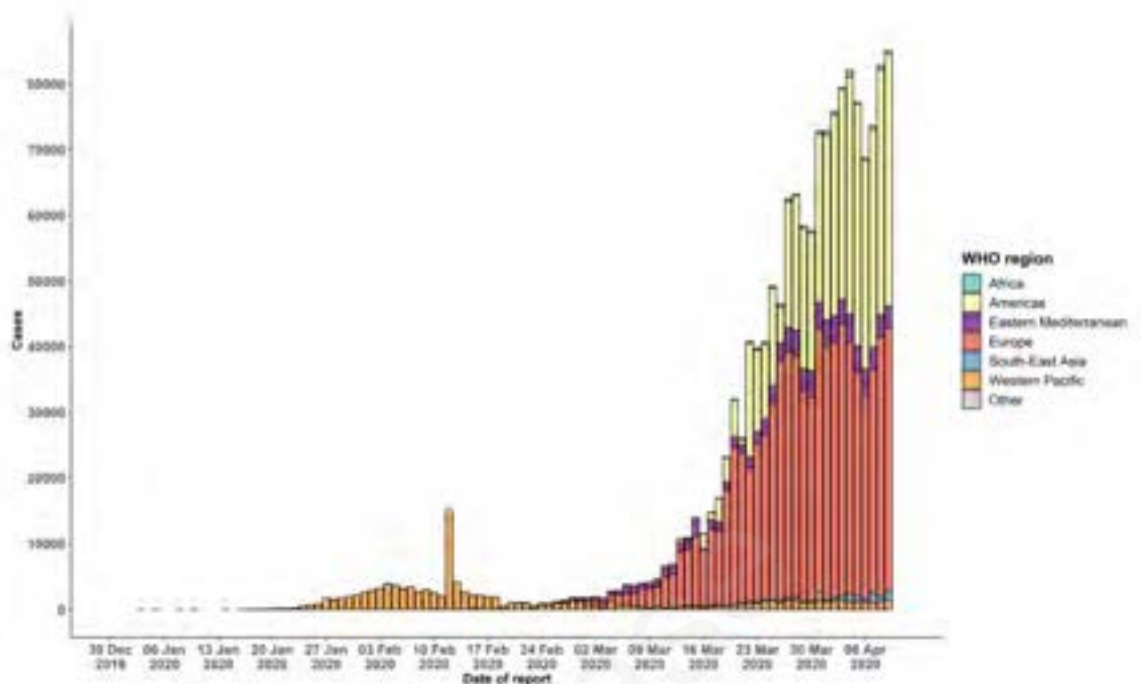


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs **11** April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 81 of 10 April 2020**



#### International response

##### WHO

- On 10 April 2020, the Director-General of the WHO announced:
  - nearly 1.5 million cases and more than 92,000 deaths have been reported to the WHO
  - a slowing of spread in European countries including Spain, Italy, Germany and France
  - clusters of cases and community spread in more than 16 African countries
  - WHO has launched three tools to help managers and planners calculate the health workers, supplies and equipment that will be needed for the increase in patients.
- On 8 April 2020, the UN Secretary General launched the UN Supply Chain Task Force, to coordinate and dramatically scale up the procurement and distribution of PPE, lab diagnostics and oxygen to countries most in need. This initiative:
  - will be coordinated by WHO and the World Food Programme (WFP),
  - will be comprised of hubs in Belgium, China, Ethiopia, Ghana, Malaysia, Panama, South Africa and the United Arab Emirates
  - may need to cover more than 30% of the world's needs in the pandemic's acute phase
  - will need to ship:
    - at least 100 million medical masks and gloves
    - up to 25 million N95 respirators, gowns and face-shields
    - up to 2.5 million diagnostic tests
    - large quantities of oxygen concentrators and other equipment for clinical care.
  - will deploy eight 747 aircraft, eight medium-sized cargo aircraft, and several smaller passenger planes to move humanitarian workers, technical staff, trainers and other personnel.
- The WFP estimates it will need approximately US\$280 million to store and move supplies.

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

	<p><b>European Commission</b></p> <ul style="list-style-type: none"> <li>On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.</li> </ul> <p><b>Asian Development Bank (ADB)</b></p> <ul style="list-style-type: none"> <li>ADB announced on 18 March 2020 an initial USD 6.5 billion package for immediate needs of its developing member countries.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li><i>On 11 April 2020, the ACT HECC is moving location</i> <small>irrelevant information</small>.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport.</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020 restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on 28 March 2020 with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>

VIC Health	<ul style="list-style-type: none"> <li>• A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>• On 3 April 2020, the Victorian Premier established a Crisis Council of Cabinet (CCC): <ul style="list-style-type: none"> <li>◦ chaired by the Premier and includes seven Ministers who have been sworn-in with new portfolios with responsibility for leading all COVID-19 response activities in their respective departments</li> <li>◦ will operate initially until 30 September 2020 then be reviewed.</li> </ul> </li> <li>• Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>• On 8 April 2020 a new emergency order was enacted to ensure access to essential medicines. Pharmacists can receive digital images of Schedule 4 prescriptions from a prescriber without relying on the original or faxed copy.</li> <li>• Most Victorian students will be educated from home when Term 2 starts on 15 April 2020; VCE students will still receive an ATAR score, but there will be several changes to the academic timetable for VCE and VCAL students.</li> <li>• All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA closed the state borders at midnight on 5 April 2020. <ul style="list-style-type: none"> <li>◦ WA residents travelling from interstate and FIFO workers will have to self-isolate for 14 days.</li> </ul> </li> <li>• The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>◦ The Artania officially began its 14-day quarantine period on 3 April 2020 and is due to leave Fremantle on 17 April 2020.</li> </ul> </li> <li>• A dedicated COVID-19 clinic opened at Broome Hospital on 8 April 2020.</li> <li>• New enquiries line to keep the community informed about COVID-19 coronavirus has been launched (132 68 43).</li> <li>• New testing criteria includes anyone in Western Australia showing signs of a fever OR acute respiratory infection. This expansion of criteria to assist in tracking individual cases and community transmission.</li> <li>• As at 10 April 2020, WA are monitoring seven cruise ships transiting past Western Australia and risk assessment for the provision of medical assistance. <ul style="list-style-type: none"> <li>◦ <i>On 10 April 2020, approximately 200 WA passengers from the cruise ship Vasco da Gama were released from quarantine on Rottnest Island and at two Perth CBD hotels.</i></li> </ul> </li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year

olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (**1,698,416**) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on **11** April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,305	3,345	56	1
Hong Kong SAR	990	4	16	0
Taiwan	382	6	2	1
Macau SAR	45	0	0	0
United States of America	425,889	14665	30,859	1,925
Spain	152,446	15238	5,756	683
Italy	143,626	18281	4,204	612
Germany	113,525	2373	5,323	266
France	85,351	12192	4,256	1,339
Iran (Islamic Republic of)	66,220	4110	1,634	117

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
The United Kingdom	65,081	7978	4,344	881
Turkey	42,282	908	4,056	96
Belgium	24,983	2523	1,580	283
Switzerland	23,495	756	785	51
Netherlands	21,762	2396	1,213	148
Canada	19,759	461	1,326	60
Brazil	15,927	800	2,210	133
Portugal	13,956	409	815	29
Austria	13,248	295	279	22
Russian Federation	11,917	94	1,786	18
Republic of Korea	10,450	208	27	4
Israel	9,755	79	351	8
Sweden	9,141	793	722	106
Ireland	7,393	263	1,169	28
India	6,412	199	678	33
Australia	6,292	56	140	4
Norway	6,160	88	150	8
Chile	5,972	57	426	9
Denmark	5,635	237	233	19
Poland	5,575	174	370	15
Czechia	5,569	112	257	13
Japan	5,347	88	579	3
Romania	5,202	229	441	20
Ecuador	4,965	272	515	30
Pakistan	4,601	66	279	3
Peru	4,342	121	1,388	14
Malaysia	4,228	67	109	2
Philippines	4,076	203	206	21
Indonesia	3,512	306	556	66
Saudi Arabia	3,287	44	355	3
Mexico	3,181	174	396	33
Luxembourg	3,115	52	81	6
United Arab Emirates	2,990	14	331	2
Serbia	2,867	65	201	0
Finland	2,605	42	118	2
Panama	2,528	63	279	4
Thailand	2,473	33	50	1
Qatar	2,376	6	166	0
Dominican Republic	2,349	118	393	20
Ukraine	2,203	69	311	12
Colombia	2,054	55	274	5
Greece	1,955	86	71	3
South Africa	1,934	18	89	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Singapore	1,910	7	287	1
Argentina	1,795	67	80	7
Egypt	1,699	118	139	15
Algeria	1,666	235	94	30
Iceland	1,648	6	32	0
Croatia	1,407	20	64	1
Morocco	1,377	97	102	4
Republic of Moldova	1,289	29	115	1
Iraq	1,232	69	30	0
Estonia	1,207	24	22	0
Hungary	1,190	77	210	11
Slovenia	1,124	43	33	3
Belarus	1,066	13	0	0
New Zealand	1,015	1	23	0
Lithuania	955	15	43	0
Armenia	937	11	16	1
Azerbaijan	926	9	104	1
Kuwait	910	1	55	0
Bahrain	887	5	64	0
Bosnia and Herzegovina	875	36	59	1
Kazakhstan	802	9	75	2
Cameroon	730	10	0	0
International conveyance (Diamond Princess)	712	11	0	0
Slovakia	701	2	19	0
Puerto Rico	683	33	63	9
North Macedonia	663	30	46	0
Tunisia	643	25	15	1
Bulgaria	624	24	31	0
Uzbekistan	624	3	69	0
Andorra	589	26	23	2
Latvia	589	2	12	0
Lebanon	582	19	7	0
Cyprus	564	15	38	1
Afghanistan	521	15	77	0
Cuba	515	15	58	3
Costa Rica	502	3	19	1
Oman	484	3	27	1
Uruguay	456	7	32	0
Albania	416	23	7	1
Burkina Faso	414	19	30	0
Niger	410	11	68	0
Côte d'Ivoire	384	3	0	0
Réunion	376	0	14	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Jordan	372	7	14	1
San Marino	344	34	36	0
Honduras	343	23	31	1
Malta	337	2	38	1
Bangladesh	330	21	112	1
Mauritius	314	7	41	0
Ghana	313	6	0	0
Kyrgyzstan	298	5	18	1
Nigeria	288	7	12	1
occupied Palestinian territory	266	1	3	0
Bolivia (Plurinational State of)	264	18	54	3
Viet Nam	255	0	4	0
Montenegro	252	2	4	0
Senegal	250	2	6	0
Georgia	230	3	16	0
Kosovo	227	7	3	1
Democratic Republic of the Congo	215	20	8	0
Guinea	194	0	30	0
Mayotte	191	2	5	0
Sri Lanka	190	7	1	0
Faroe Islands	184	0	0	0
Kenya	184	7	5	1
Guernsey	181	5	15	1
Jersey	170	3	0	0
Venezuela (Bolivarian Republic of)	166	7	0	0
Isle of Man	165	1	15	0
Martinique	154	6	2	2
Guadeloupe	141	8	2	0
Djibouti	140	1	5	1
Brunei Darussalam	135	1	0	0
Guam	128	4	3	0
Paraguay	124	5	5	0
Cambodia	118	0	1	0
Gibraltar	113	1	0	0
Rwanda	113	0	3	0
Trinidad and Tobago	109	8	2	0
El Salvador	103	5	10	0
Guatemala	95	3	8	0
Madagascar	95	0	2	0
French Guiana	83	0	6	0
Aruba	82	0	8	0
Liechtenstein	79	1	0	0
Togo	73	3	3	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Barbados	63	3	0	0
Jamaica	63	4	0	1
Congo	60	5	0	0
Mali	59	7	3	1
Ethiopia	56	2	1	0
Monaco	54	0	0	0
Uganda	53	0	0	0
French Polynesia	51	0	0	0
United States Virgin Islands	46	1	1	0
Cayman Islands	45	1	0	-1
Gabon	44	1	20	0
Sint Maarten	43	8	3	0
Bahamas	40	7	4	1
Bermuda	39	3	0	1
Zambia	39	1	0	0
Guyana	37	6	4	1
Guinea-Bissau	35	0	2	0
Eritrea	33	0	0	0
Saint Martin	32	2	1	0
Liberia	31	4	0	0
Benin	30	1	4	0
Haiti	30	2	3	1
Myanmar	27	3	5	0
United Republic of Tanzania	25	1	0	0
Libya	24	1	3	0
Angola	19	2	0	0
Antigua and Barbuda	19	2	0	0
Maldives	19	0	0	0
Syrian Arab Republic	19	2	0	0
Equatorial Guinea	18	0	2	0
New Caledonia	18	0	0	0
Mozambique	17	0	0	0
Mongolia	16	0	0	0
Namibia	16	0	0	0
Dominica	15	0	0	0
Fiji	15	0	0	0
Lao People's Democratic Republic	15	0	0	0
Sudan	15	2	1	0
Curaçao	14	1	0	0
Saint Lucia	14	0	0	0
Botswana	13	1	7	0
Eswatini	12	0	0	0
Grenada	12	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Somalia	12	1	0	0
Chad	11	0	1	0
Greenland	11	0	0	0
Northern Mariana Islands (Commonwealth of the)	11	2	0	0
Saint Kitts and Nevis	11	0	0	0
Seychelles	11	0	0	0
Zimbabwe	11	3	0	0
Central African Republic	10	0	0	0
Suriname	10	1	0	0
Belize	9	1	1	0
Nepal	9	0	0	0
Holy See	8	0	0	0
Malawi	8	1	0	0
Montserrat	8	0	0	0
Saint Vincent and the Grenadines	8	0	0	0
Turks and Caicos Islands	8	1	0	0
Cabo Verde	7	1	0	0
Sierra Leone	7	0	0	0
Mauritania	6	1	0	0
Nicaragua	6	1	0	0
Saint Barthelemy	6	0	0	0
Bhutan	5	0	0	0
Falkland Islands (Malvinas)	5	0	0	0
Gambia	4	1	0	0
São Tomé and Príncipe	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
South Sudan	3	0	2	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Papua New Guinea	2	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Timor-Leste	1	0	0	0
<b>Total</b>	<b>1,521,392</b>	<b>92,802</b>	<b>85,094</b>	<b>7,278</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #84 Novel Coronavirus (COVID-19)  
**Date:** Sunday, 12 April 2020 7:35:06 PM  
**Attachments:** [2020-04-12 NIR Health SitRep v84 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 12 April 2020, there have been 6,313 laboratory confirmed cases of COVID-19 in Australia, including 59 deaths.
- Since yesterday's situation report, an additional 21 cases, including 3 deaths, have been reported in Australia.
- To date, more than 353,000 tests have been conducted across Australia.
- The plane carrying passengers from the Greg Mortimer cruise ship arrived in Melbourne this morning.

#### Situation Overseas

- As at 1500 hrs 12 April 2020, a total of 1,777,666 cases of COVID-19 have been reported globally, including 108,867 deaths.
- Based on the number of reported cases globally, the case fatality rate is approximately 6.2%. The risk of death reportedly increases with age.

The next Situation Report will be issued on 13 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-12 1800 AEDT	<b>Version</b>	84
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-13 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Graeme Barden, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>A plane carrying 99 Australian and 13 New Zealand passengers from the Greg Mortimer cruise ship <i>arrived in Melbourne this morning, Sunday 12 April 2020.</i> <ul style="list-style-type: none"> <li><i>A Field Emergency Medical Officer team from the Victorian Department of Health met the flight and assessed all passengers before transfer to quarantine or hospital.</i></li> </ul> </li> <li><i>Today the Minister for Aged Care and Senior Australians, Minister for Youth and Sport announced a joint strategy aimed at ensuring aged care recipients continue to get the care they need during the COVID-19 pandemic. The measures include:</i> <ul style="list-style-type: none"> <li><i>New emergency response teams on standby if there's a significant outbreak in a residential aged care facility,</i></li> <li><i>Remote locums to support aged care providers in remote Australia if they are unable to source staff, and</i></li> <li><i>Access to a surge workforce through the online platform Mable, to help providers if they are unable to fill critical skills because of infection or staff have to self-isolate.</i></li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> </ul>

	<ul style="list-style-type: none"> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment (PPE), and the closure of duty free stores (excluding food outlets and chemists) at airports.</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 12 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,313</b> cases of COVID-19, including <b>59</b> deaths, have been confirmed in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>21</b> cases, including 3 deaths, have been reported in Australia.                 <ul style="list-style-type: none"> <li><i>On 12 April 2020, ACT Health reported that one of their cases was a false positive result, reducing the number of ACT cases from 103 to 102.</i></li> <li><i>On 11 April 2020, 7 new cases of COVID-19 were confirmed by NSW Health; however, their total number of cases were revised down by 10 based on new information which meant that these cases were excluded from NSW cases count. Of these 10 cases, 9 were considered to be interstate residents who are currently in their home jurisdiction but are yet to be confirmed by their home jurisdiction; and one case was considered to have a false positive result.</i></li> </ul> </li> <li>It has been around three weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.                 <ul style="list-style-type: none"> <li><i>The national rate of increase of new cases over the last 24 hours was less than 1%. This has declined from 3% reported this time last week. However, it is too soon to tell whether this trend will be sustained.</i></li> </ul> </li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with 17% of these cases requiring admission to an ICU (1.9% of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is <b>79</b> years (range 55–94 years).</li> <li>62% were male and 38% were female.</li> <li>Co-morbidities have been reported for at least <b>21</b> deaths.                 <ul style="list-style-type: none"> <li>Of these, the two most commonly reported co-morbidities were diabetes and chronic respiratory conditions (excluding asthma).</li> <li>Two or more co-morbidities were reported for eight of the deaths.</li> </ul> </li> </ul> </li> </ul>
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Testing

- To date, more than **353,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was 1.8% and the positivity in the past week are **1.1%**.

Source of infection

- To date, two-thirds of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – **24%**
    - As reported by jurisdictions, there are **1,215** cases associated with cruise ships.
  - United Kingdom – 18%
  - United States – 15%
- Of the locally acquired cases:
  - Clusters have been reported in some jurisdictions. Victoria has identified **54** clusters and NSW currently has 11 active clusters (accounting for 146 cases). Tasmania is reporting a cluster of **49** cases, including **35** healthcare workers, from the North West Regional Hospital.
    - *On 12 April 2020, the Tasmanian Premier announced that North West Regional Hospital and North West Private Hospital in Burnie will close for two weeks for cleaning from 7am 13 April. All current staff will be placed into a 14-day quarantine period. This quarantine requirement will also include members of the households where they reside.*
  - The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
  - Most locally acquired cases are being reported in NSW, followed by Victoria (Figure 1). A subset of these cases are not able to be epidemiologically linked back to a confirmed case, with the majority of these cases identified in NSW, followed by Victoria.

Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 5 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction<sup>\*\*^α</sup>, Australia (as at 1500 hrs, 12 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,130	80	1,766	24	748	295	74	705	438
Locally acquired - contact of confirmed case and/or in a known cluster	1,534	15	708	2	156	119	47	433	54
Locally acquired - contact not identified	530	0	354	0	39	5	0	119	13
Locally acquired - contact not identified, but case had interstate travel	35	5	NA	1	14	6	2	0	7
Under investigation	84	2	26	0	26	4	10	11	5
<b>Total cases</b>	<b>6,313</b>	<b>102</b>	<b>2,854</b>	<b>27</b>	<b>983</b>	<b>429</b>	<b>133</b>	<b>1,268</b>	<b>517</b>
<b>Died (of total)</b>	<b>59</b>	<b>2</b>	<b>23</b>	<b>0</b>	<b>5</b>	<b>4</b>	<b>5</b>	<b>14</b>	<b>6</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	21 (0%)	-1 (-1%)	-3 (0%)	0 (0%)	9 (1%)	0 (0%)	10 (8%)	3 (0%)	3 (1%)
Change in the last 72hrs before (%change)	210 (3%)	2 (2%)	81 (3%)	0 (0%)	30 (3%)	8 (2%)	27 (25%)	40 (3%)	22 (4%)
Average daily increase over the past three days (compound)	1.1%	0.7%	1.0%	0.0%	1.0%	0.6%	7.9%	1.1%	1.5%
Increase over the past week	626	6	274	1	76	20	52	133	64

# Cases in this table include Diamond Princess repatriation cases: Qld (3), SA (1), Vic (4), WA (2, including 1 death)

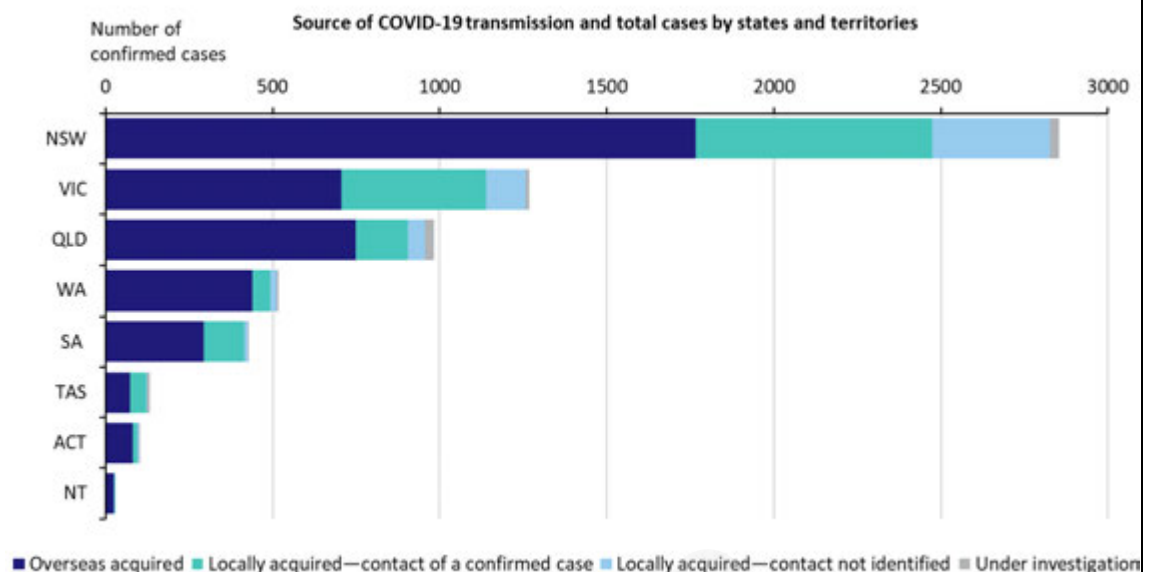
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

<sup>^</sup> The number of new cases in NSW increased by 7, however their total number of cases has been revised down by 10. These 10 cases have been excluded by NSW based on new information received on 11 April 2020 (9 cases were considered to be interstate residents who are currently in their home jurisdiction and are yet to be confirmed by those jurisdictions; and one case was a false positive result).

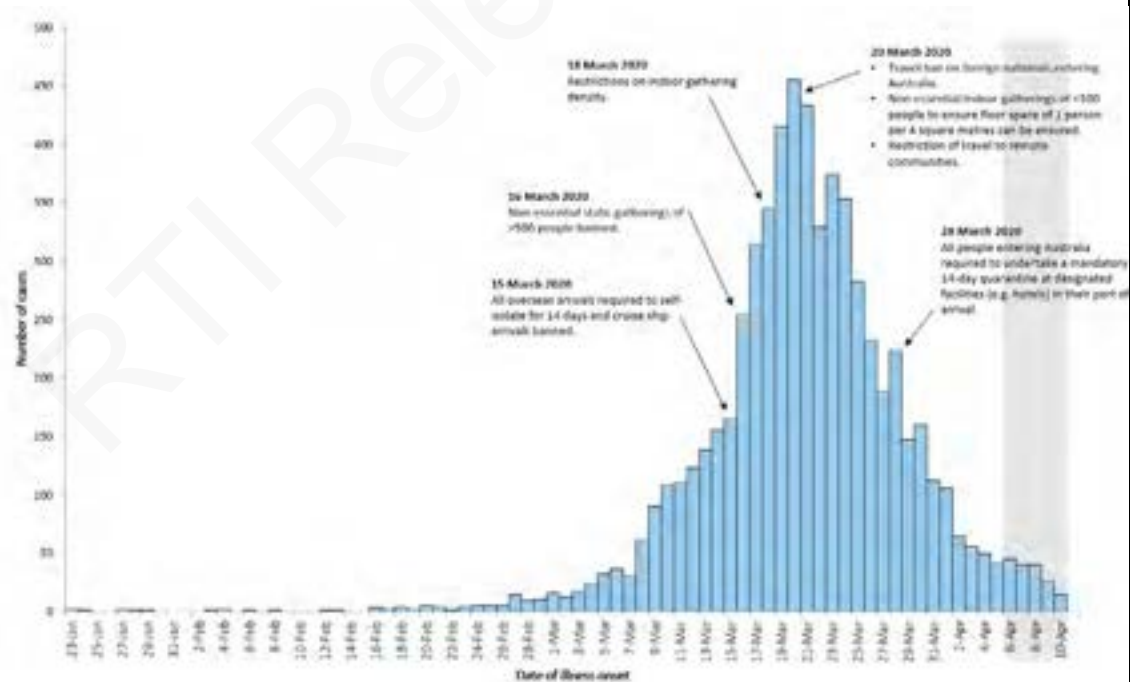
<sup>α</sup> ACT has reduced the number of cases from 103 to 102 due to subsequent investigations demonstrating that an individual did not have COVID-19.



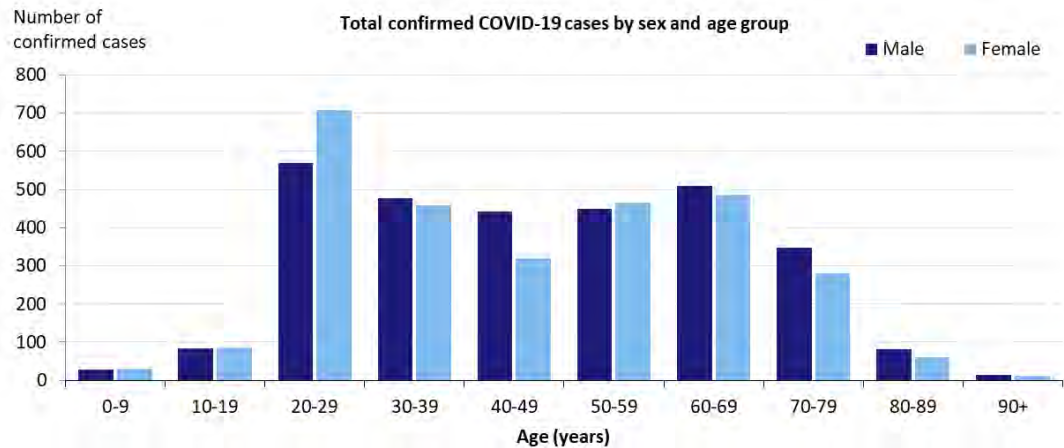
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 12 April 2020**



**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 12 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 12 April 2020****International Situation (as at 1500 hrs, 12 April 2020)**

- A total of **1,777,666** cases of COVID-19 have been reported globally, including **108,867** deaths (Source: Johns Hopkins University, as at 1500hrs on 12 April 2020).
- The majority of deaths are from Italy (**19%**), **the United States of America (17%)**, **Spain (16%)**, and France (13%) (Source: WHO Situation Report 82).

**Recent reporting of cases and deaths**

- A total of **79,250** new cases, including **6,103** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Large increases, including instances of export to other countries, continue to be reported in the European region, the United States and the Islamic Republic of Iran.
    - Of all cases reported globally, more than one quarter are from the US. New York City is reporting more than **5,700** deaths, with over **98,000** cases, which is more than the total number of cases (82,000) and more than the total number of deaths (3,300) reported from Mainland China.
  - Based on the number of reported cases globally, the case fatality rate is approximately **6.2%**. The risk of death reportedly increases with age.
  - Indonesia is reporting over **3,800** cases and **327** deaths, which exceeds the number of deaths reported in the Republic of Korea, which has reported over 10,400 cases. This suggests that the actual number of cases in Indonesia may be much higher than reported. The number of tests conducted by Indonesia is approximately 19,500, with a positivity of **20%** and at a rate of 7 tests per 100,000 population. In contrast, the number of tests conducted by the Republic of Korea is **514,621**, with a positivity of **2%** and at a rate of **997** tests per 100,000 population.

Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report **82** of **11** April 2020

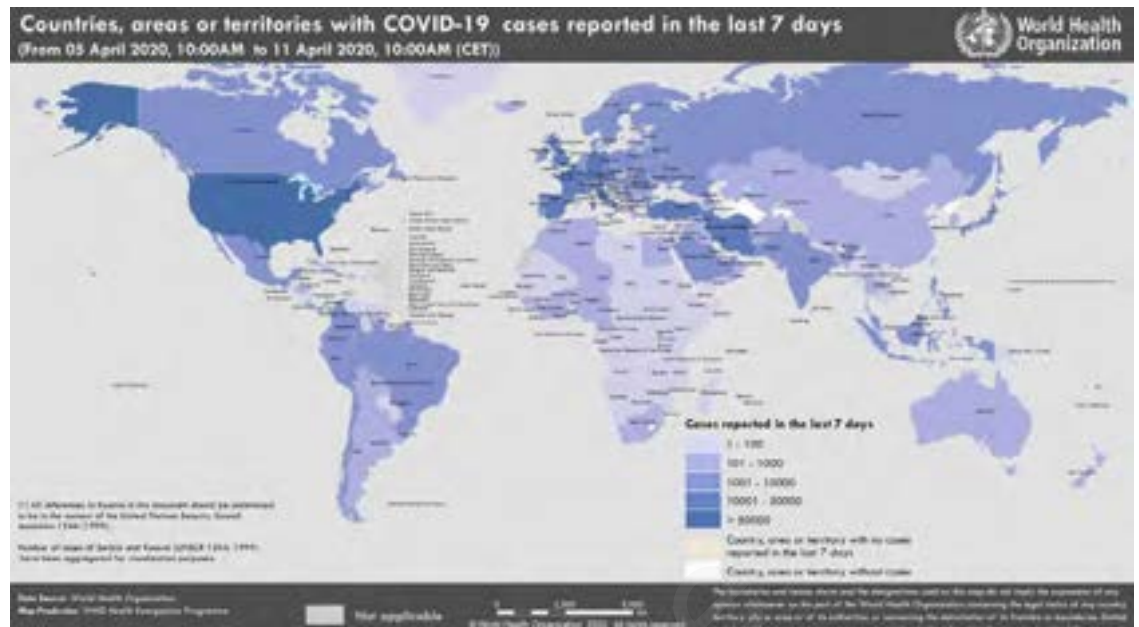
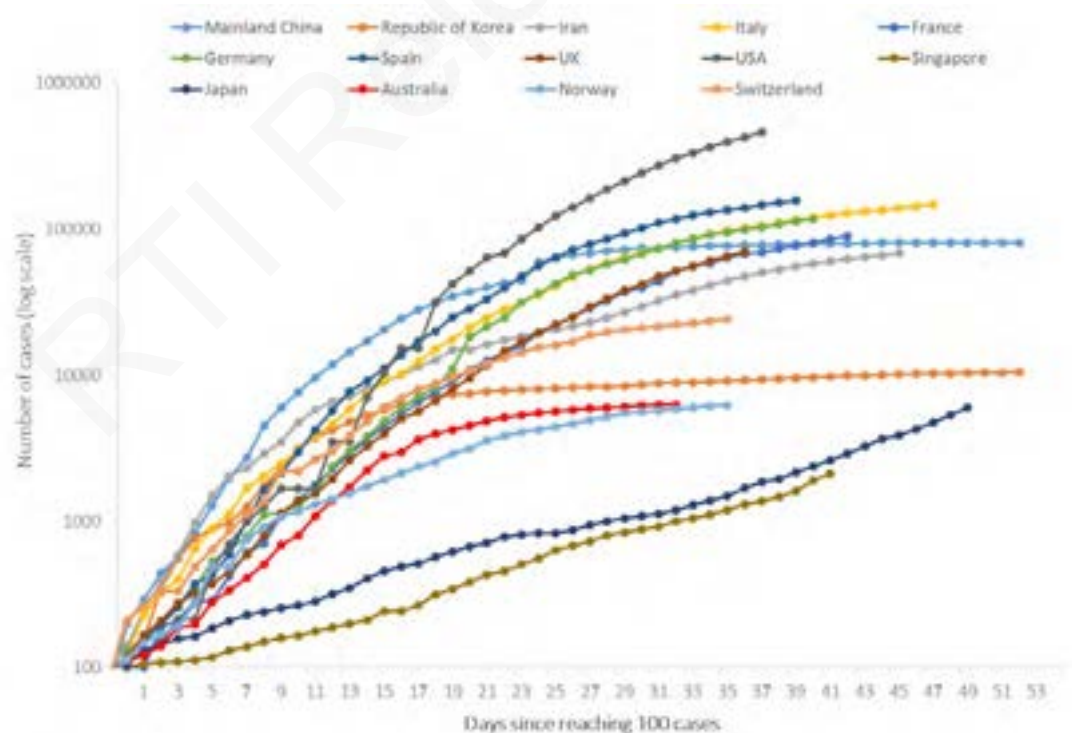
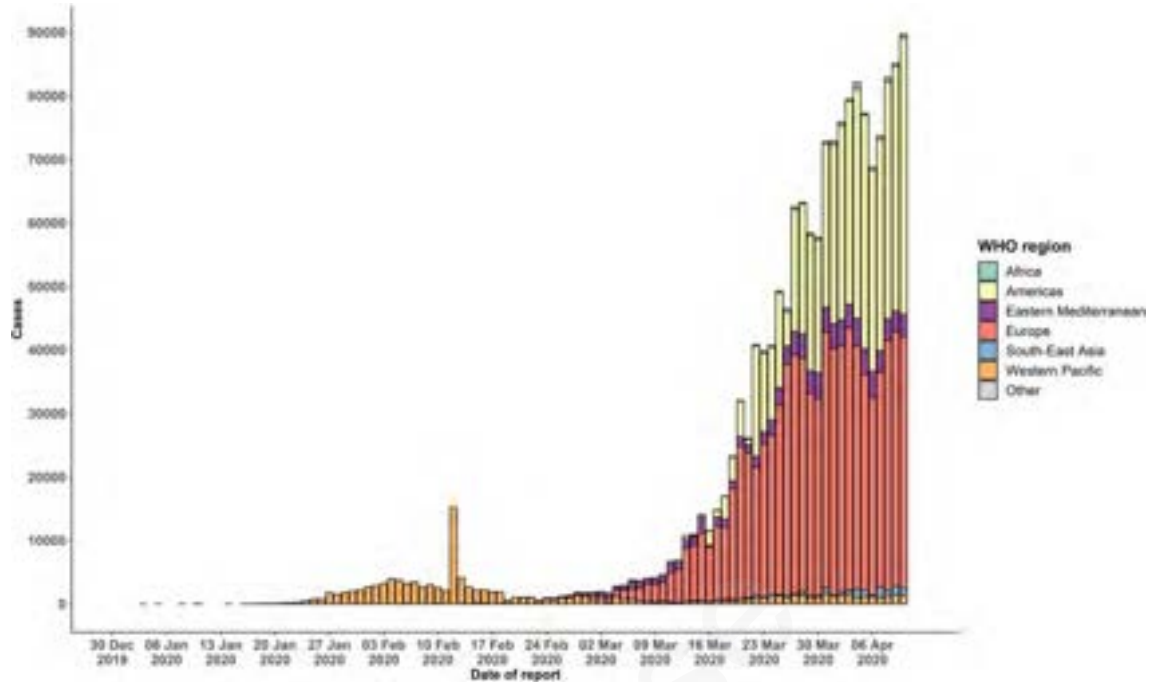


Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs **12** April 2020



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 82 of 11 April 2020**



#### International response

##### WHO

- On 10 April 2020, the Director-General of WHO announced *the launch of three* tools to help managers and planners calculate the health workers, supplies and equipment that will be needed for the increase in patients.
- On 8 April 2020, the UN Secretary General launched the UN Supply Chain Task Force, to coordinate and dramatic scale up of procurement and distribution of PPE, lab diagnostics and oxygen to countries most in need. This initiative will be coordinated by WHO and the World Food Programme (WFP).

##### International Monetary Fund

- The IMF has received inquiries or requests for aid from 50 emerging nations and 31 middle-income countries totalling USD2.5 trillion to address the coronavirus pandemic.

##### World Bank

- World Bank/IMF issued a joint statement calling on all official bilateral creditors to suspend debt payments from IDA countries that request forbearance; and asks G20 leaders to task the IMF and World Bank to prepare an assessment of the impact of the crisis on the debt situation and financing needs of IDA countries.

##### European Commission

- On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.

##### Asian Development Bank (ADB)

- ADB announced on 18 March 2020 an initial USD 6.5 billion package for immediate needs of its developing member countries.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li><i>The ACT confirmed cases number reduced from 103 to 102 as one of their cases was a false positive result.</i></li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport.</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020 restricting entry into controlled regional zones to exempted essential services and those with permits who have quarantined in a major NT centre for 14 days if they have arrived from overseas or interstate.</li> <li>NT enacted the new international border control measures at 0500 on 28 March 2020 with all international arrivals into the NT being required to go directly into supervised quarantine for 14 days.</li> <li>A compliance joint taskforce was established with public health, police and other agencies with compliance officers to expand the compliance checks of all interstate and international arrivals in quarantine including close contacts of positive people.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>



VIC Health	<ul style="list-style-type: none"> <li>• A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>• Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>• On 8 April 2020 a new emergency order was enacted to ensure access to essential medicines. Pharmacists can receive digital images of Schedule 4 prescriptions from a prescriber without relying on the original or faxed copy.</li> <li>• Most Victorian students will be educated from home when Term 2 starts on 15 April 2020: VCE students will still receive an ATAR score, but there will be several changes to the academic timetable for VCE and VCAL students.</li> <li>• All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA closed the state borders at midnight on 5 April 2020. <ul style="list-style-type: none"> <li>◦ WA residents travelling from interstate and FIFO workers have to self-isolate for 14 days.</li> </ul> </li> <li>• The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>◦ The Artania officially began its 14-day quarantine period on 3 April 2020 and is due to leave Fremantle on 17 April 2020.</li> </ul> </li> <li>• A dedicated COVID-19 clinic opened at Broome Hospital on 8 April 2020.</li> <li>• Enquiries line to keep the community informed about COVID-19 coronavirus launched (132 68 43).</li> <li>• New testing criteria includes anyone in Western Australia showing signs of a fever OR acute respiratory infection. This expansion of criteria to assist in tracking individual cases and community transmission.</li> <li>• <i>The Chief Health Officer has approved an Emergency Notice under the Public Health Act to amend prescription rules for telehealth consults conducted during COVID-19.</i></li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (1,777,666) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 12 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,369	3,349	64	4
Hong Kong SAR	1,001	4	11	0
Taiwan	385	6	3	0
Macau SAR	45	0	0	0
United States of America	461,275	16,596	35,386	1,931
Spain	157,022	15,843	4,576	605
Italy	147,577	18,851	3,951	570
Germany	117,658	2,544	4,133	171
France	89,683	13,179	4,332	987
The United Kingdom	70,276	8,958	5,195	980
Iran (Islamic Republic of)	68,192	4,232	1,972	122



Turkey	47,029	1,006	4,747	98
Belgium	26,667	3,019	1,684	496
Switzerland	24,228	805	733	49
Netherlands	23,097	2,511	1,335	115
Canada	21,226	531	1,467	70
Brazil	17,857	941	1,930	141
Portugal	15,472	435	1,516	26
Russian Federation	13,584	106	1,667	12
Austria	13,560	319	312	24
Republic of Korea	10,480	211	30	3
Israel	10,095	92	340	13
Sweden	9,685	870	544	77
Ireland	8,089	287	696	24
India	7,447	239	1,035	40
Ecuador	7,161	297	2,196	25
Chile	6,501	65	529	8
Australia	6,313	59	21	3
Norway	6,244	92	84	4
Japan	6,005	94	658	6
Poland	5,955	181	380	7
Denmark	5,819	247	184	10
Czechia	5,732	119	163	7
Romania	5,467	257	265	28
Peru	5,256	138	914	17
Pakistan	4,788	71	187	5
Malaysia	4,346	70	118	3
Philippines	4,195	221	119	18
Saudi Arabia	3,651	47	364	3
Indonesia	3,512	306	0	0
Mexico	3,441	194	260	20
United Arab Emirates	3,360	16	370	2
Luxembourg	3,223	54	108	2
Serbia	3,105	71	238	6
Finland	2,769	48	164	6
Panama	2,752	66	224	3
Thailand	2,518	35	45	2
Qatar	2,512	6	136	0
Ukraine	2,511	73	308	4
Dominican Republic	2,349	118	0	0
Colombia	2,223	69	169	14
Singapore	2,108	7	198	0
Greece	2,011	90	56	4
South Africa	2,003	24	69	6
Belarus	1,981	19	915	6
Argentina	1,929	79	134	12
Egypt	1,794	135	95	17

Algeria	1,761	256	95	21
Iceland	1,675	7	27	1
Croatia	1,495	21	88	1
Morocco	1,448	107	71	10
Republic of Moldova	1,438	29	149	0
Hungary	1,310	85	120	8
Iraq	1,280	71	48	2
Estonia	1,258	24	51	0
Slovenia	1,160	45	36	2
New Zealand	1,035	4	20	3
Lithuania	999	17	44	2
Bahrain	998	6	111	1
Kuwait	993	1	83	0
Azerbaijan	991	10	65	1
Armenia	937	11	0	0
Bosnia and Herzegovina	901	37	26	1
Kazakhstan	859	10	57	1
Cameroon	803	10	73	0
Puerto Rico	725	39	42	6
Slovakia	715	2	14	0
International conveyance (Diamond Princess)	712	11	0	0
North Macedonia	711	32	48	2
Tunisia	671	25	28	0
Bulgaria	635	25	11	1
Uzbekistan	624	3	0	0
Latvia	612	2	23	0
Lebanon	609	20	27	1
Andorra	602	26	13	0
Cyprus	595	15	31	0
Cuba	564	15	49	0
Oman	546	3	62	0
Costa Rica	539	3	37	0
Afghanistan	521	15	0	0
Côte d'Ivoire	480	3	96	0
Uruguay	473	7	17	0
Burkina Faso	443	19	29	0
Niger	438	11	28	0
Bangladesh	424	27	94	6
Albania	416	23	0	0
Honduras	382	23	39	0
Réunion	382	0	6	0
Ghana	378	6	65	0
Jordan	372	7	0	0
Malta	350	2	13	0
San Marino	344	34	0	0
Kyrgyzstan	339	5	41	0

Mauritius	318	9	4	2
Nigeria	305	7	17	0
Bolivia (Plurinational State of)	268	19	4	1
occupied Palestinian territory	268	2	2	1
Senegal	265	2	15	0
Viet Nam	257	0	2	0
Montenegro	255	2	3	0
Kosovo	250	7	23	0
Georgia	233	3	3	0
Democratic Republic of the Congo	215	20	0	0
Sri Lanka	197	7	7	0
Guinea	194	0	0	0
Guernsey	191	5	10	0
Mayotte	191	2	0	0
Isle of Man	190	1	25	0
Kenya	189	7	5	0
Faroe Islands	184	0	0	0
Jersey	183	4	13	1
Venezuela (Bolivarian Republic of)	171	9	5	2
Martinique	154	6	0	0
Djibouti	150	1	10	0
Guadeloupe	143	8	2	0
Brunei Darussalam	136	1	1	0
Guam	130	4	2	0
Paraguay	129	6	5	1
Guatemala	126	3	31	0
Cambodia	120	0	2	0
Rwanda	118	0	5	0
El Salvador	117	6	14	1
Gibraltar	113	1	0	0
Trinidad and Tobago	109	8	0	0
Madagascar	95	0	0	0
Aruba	86	0	4	0
French Guiana	84	0	1	0
Liechtenstein	80	1	1	0
Mali	74	7	15	0
Togo	73	3	0	0
Barbados	66	4	3	1
Ethiopia	65	2	9	0
Jamaica	63	4	0	0
Congo	60	5	0	0
Monaco	54	0	0	0
Uganda	53	0	0	0
French Polynesia	51	0	0	0
Sint Maarten	50	9	7	1
United States Virgin Islands	50	1	4	0

Bermuda	48	4	9	1
Cayman Islands	45	1	0	0
Gabon	44	1	0	0
Bahamas	41	8	1	1
Zambia	40	2	1	1
Guyana	37	6	0	0
Liberia	37	5	6	1
Guinea-Bissau	35	0	0	0
Eritrea	33	0	0	0
Saint Martin	32	2	0	0
United Republic of Tanzania	32	3	7	2
Benin	30	1	0	0
Haiti	30	2	0	0
Myanmar	28	3	1	0
Libya	24	1	0	0
Mozambique	20	0	3	0
Angola	19	2	0	0
Antigua and Barbuda	19	2	0	0
Maldives	19	0	0	0
Syrian Arab Republic	19	2	0	0
Equatorial Guinea	18	0	0	0
New Caledonia	18	0	0	0
Sudan	17	2	2	0
Dominica	16	0	1	0
Fiji	16	0	1	0
Lao People's Democratic Republic	16	0	1	0
Mongolia	16	0	0	0
Namibia	16	0	0	0
Curaçao	14	1	0	0
Saint Lucia	14	0	0	0
Botswana	13	1	0	0
Eswatini	12	0	0	0
Grenada	12	0	0	0
Saint Vincent and the Grenadines	12	0	4	0
Somalia	12	1	0	0
Central African Republic	11	0	1	0
Chad	11	0	0	0
Greenland	11	0	0	0
Northern Mariana Islands (Commonwealth of the)	11	2	0	0
Saint Kitts and Nevis	11	0	0	0
Seychelles	11	0	0	0
Zimbabwe	11	3	0	0
Belize	10	1	1	0
Suriname	10	1	0	0
Malawi	9	1	1	0
Montserrat	9	0	1	0

Nepal	9	0	0	0
Holy See	8	0	0	0
Turks and Caicos Islands	8	1	0	0
Cabo Verde	7	1	0	0
Mauritania	7	1	1	0
Nicaragua	7	1	1	0
Sierra Leone	7	0	0	0
Saint Barthélemy	6	0	0	0
Bhutan	5	0	0	0
Falkland Islands (Malvinas)	5	0	0	0
Gambia	4	1	0	0
São Tomé and Príncipe	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
South Sudan	3	0	0	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Papua New Guinea	2	0	0	0
Timor-Leste	2	0	1	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	1	0
<b>Total</b>	<b>1,610,984</b>	<b>99,695</b>	<b>89,602</b>	<b>6,893</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #85 Novel Coronavirus (COVID-19)  
**Date:** Monday, 13 April 2020 6:46:27 PM  
**Attachments:** [2020-04-13 NIR Health SitRep v85 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 13 April 2020, there have been 6,359 laboratory confirmed cases of COVID-19 in Australia, including 61 deaths.
- Since yesterday's situation report, an additional 46 cases, including 2 deaths, have been reported in Australia.
- To date, more than 362,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 13 April 2020, a total of 1,850,527 cases of COVID-19 have been reported globally, including 114,245 deaths.

The next Situation Report will be issued on 14 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <i>13</i> 1800 AEDT	<b>Version</b>	<i>85</i>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <i>14</i> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Graeme Barden, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On <i>12 April 2020</i>, the Minister for Aged Care and Senior Australians, Minister for Youth and Sport announced a joint strategy aimed at ensuring aged care recipients continue to get the care they need during the COVID-19 pandemic.</li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul>



**Commonwealth emergency powers**

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment (PPE), and the closure of duty free stores (excluding food outlets and chemists) at airports.

**1. Situation****Overview****Domestic Situation (as at 1500 hrs, 13 April 2020)**

- A total of **6,359** cases of COVID-19, including **61** deaths, have been confirmed in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **46** cases, including **2** deaths, have been reported in Australia.
    - *On 10 April 2020, NSW reallocated interstate acquired cases to be included with 'overseas acquired', increasing the number of 'overseas' acquired by 71 cases. This will be amended in the coming days in order to accurately identify overseas acquired cases and interstate acquired cases as separate case counts.*
  - On 11 April 2020, 7 new cases of COVID-19 were confirmed by NSW Health; however, their total number of cases were revised down by 10 based on new information which meant that these cases were excluded from NSW cases count. Of these 10 cases, 9 were considered to be interstate residents who are currently in their home jurisdiction but are yet to be confirmed by their home jurisdiction; and one case was considered to have a false positive result.
  - It has been around three weeks since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.
    - The national rate of increase of new cases over the last 24 hours was less than 1%, showing a steady decline over the last week. However, it is too soon to tell whether this trend will be sustained.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately **11%** of cases have been hospitalised during their course of illness, with **17%** of these cases requiring admission to an ICU (**2%** of confirmed cases).
- The median age of COVID-19 cases is 47 years, range 0 to 100 years, with a relatively equal ratio of male-to-female cases across most age groups (Figure 4).
- Of the deaths so far reported:
  - The median age is **79.5** years (range 55 to 94 years).
  - 62% were male and 38% were female.
  - Co-morbidities have been reported for at least 21 deaths.
    - Of these, the two most commonly reported co-morbidities were diabetes and chronic respiratory conditions (excluding asthma).
    - Two or more co-morbidities were reported for eight of the deaths.

Testing

- To date, more than **362,000** tests have been conducted across Australia (as at 3pm).
  - Cumulative per cent positive was **1.8%** and the positivity in the past week are **0.9%**.

Source of infection

- To date, **more than 65%** of confirmed cases are considered to have been overseas acquired (Table 1).

- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – 25%
    - As reported by jurisdictions, there are 1,201 cases associated with cruise ships.
  - United Kingdom – 18%
  - United States – 15%
- Of the locally acquired cases:
  - Clusters have been reported in some jurisdictions. Victoria has identified 55 clusters and NSW currently has 11 active clusters (accounting for 146 cases). Tasmania is reporting a cluster of 49 cases, including 35 healthcare workers, from the North West Regional Hospital.
    - On 12 April 2020, the Tasmanian Premier announced that North West Regional Hospital and North West Private Hospital in Burnie will close for two weeks for cleaning from 7am 13 April. All current staff will be placed into a 14-day quarantine period. This quarantine requirement will also include members of the households where they reside.
  - The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 5 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*<sup>α</sup>, Australia (as at 1500 hrs, 13 April 2020)**

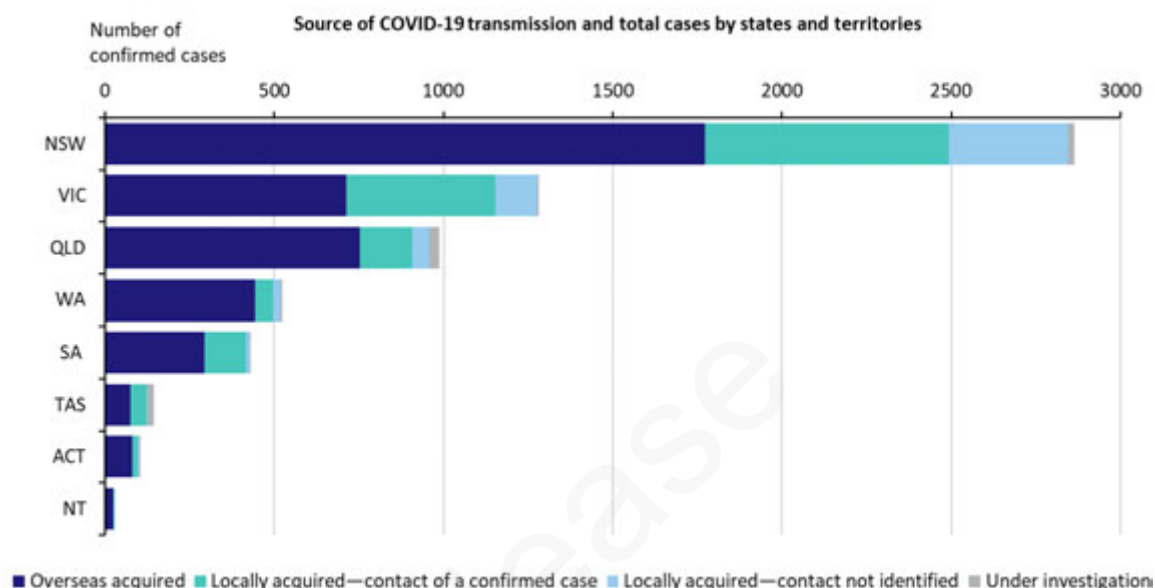
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,154	80	1,772	24	752	295	74	714	443
Locally acquired - contact of confirmed case and/or in a known cluster	1,561	16	722	2	155	122	50	439	55
Locally acquired - contact not identified	530	0	351	0	39	5	0	122	13
Locally acquired - contact not identified, but case had interstate travel	34	5	0	1	13	6	2	0	7
Under investigation	80	2	18	0	28	3	18	6	5
<b>Total cases</b>	<b>6,359</b>	<b>103</b>	<b>2,863</b>	<b>27</b>	<b>987</b>	<b>431</b>	<b>144</b>	<b>1,281</b>	<b>523</b>
<b>Died (of total)</b>	<b>61</b>	<b>2</b>	<b>25</b>	<b>0</b>	<b>5</b>	<b>4</b>	<b>5</b>	<b>14</b>	<b>6</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	46 (1%)	1 (1%)	9 (0%)	0 (0%)	4 (0%)	2 (0%)	11 (8%)	13 (1%)	6 (1%)
Change in the last 72hrs before (%change)	156 (3%)	0 (0%)	41 (1%)	0 (0%)	22 (2%)	3 (1%)	33 (30%)	40 (3%)	17 (3%)
Average daily increase over the past three days (compound)	0.8%	0.0%	0.5%	0.0%	0.8%	0.2%	9.1%	1.1%	1.1%
Increase over the past week	564	7	226	-	66	20	59	123	63

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported previously in the NT in a NSW resident is counted in the national figures as a NSW case.

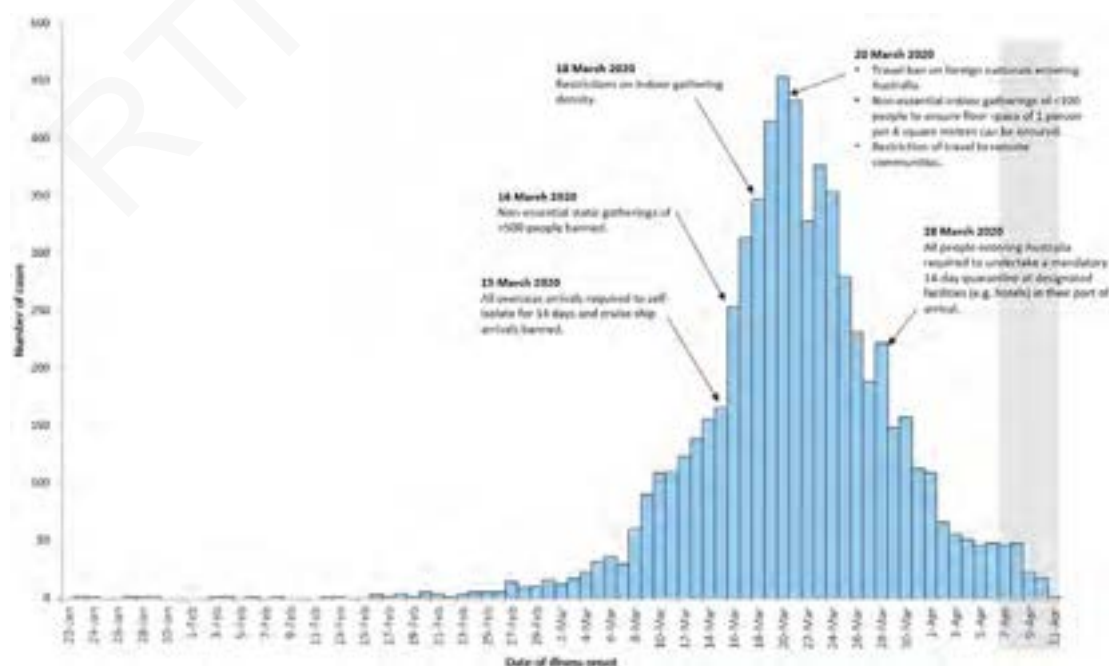
<sup>^</sup> The number of new cases in NSW increased by 7, however their total number of cases has been revised down by 10. These 10 cases have been excluded by NSW based on new information received on 11 April 2020 (9 cases were considered to be interstate residents who are currently in their home jurisdiction and are yet to be confirmed by those jurisdictions; and one case was a false positive result).

<sup>a</sup> On 12 April 2020 ACT has reduced the number of cases by 1, due to subsequent investigations demonstrating that an individual did not have COVID-19.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 13 April 2020**

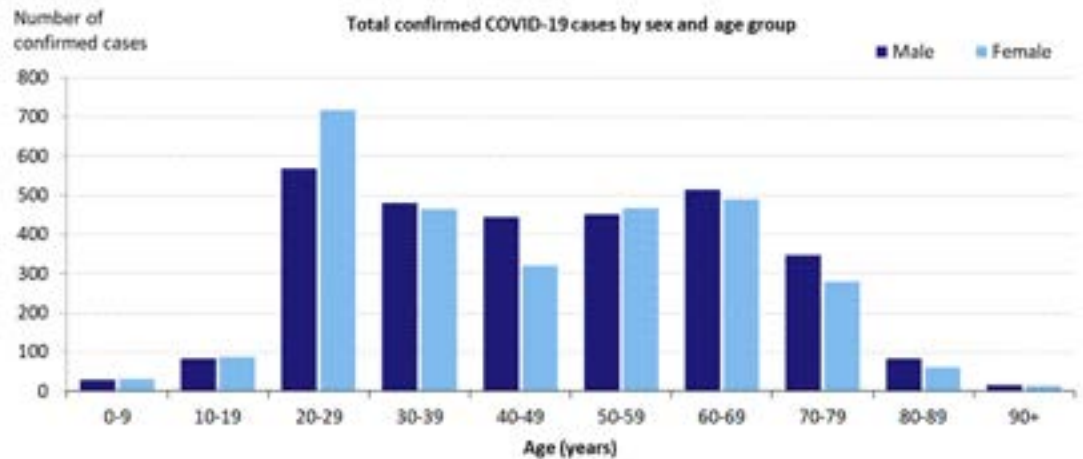


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 13 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs **13** April 2020**



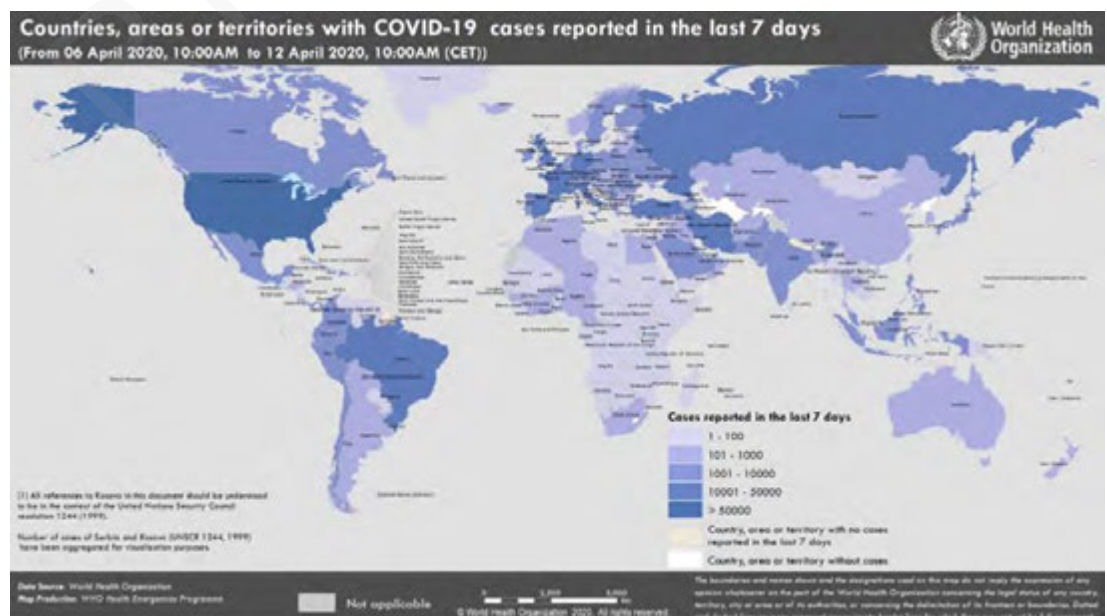
**International Situation (as at 1500 hrs, **13** April 2020)**

- A total of **1,850,527** cases of COVID-19 have been reported globally, including **114,245** deaths (Source: Johns Hopkins University, as at 1500hrs on **13** April 2020).
- The majority of deaths are from Italy (**18%**), the United States of America (17%), Spain (**15%**), and France (13%) (Source: WHO Situation Report **83**).

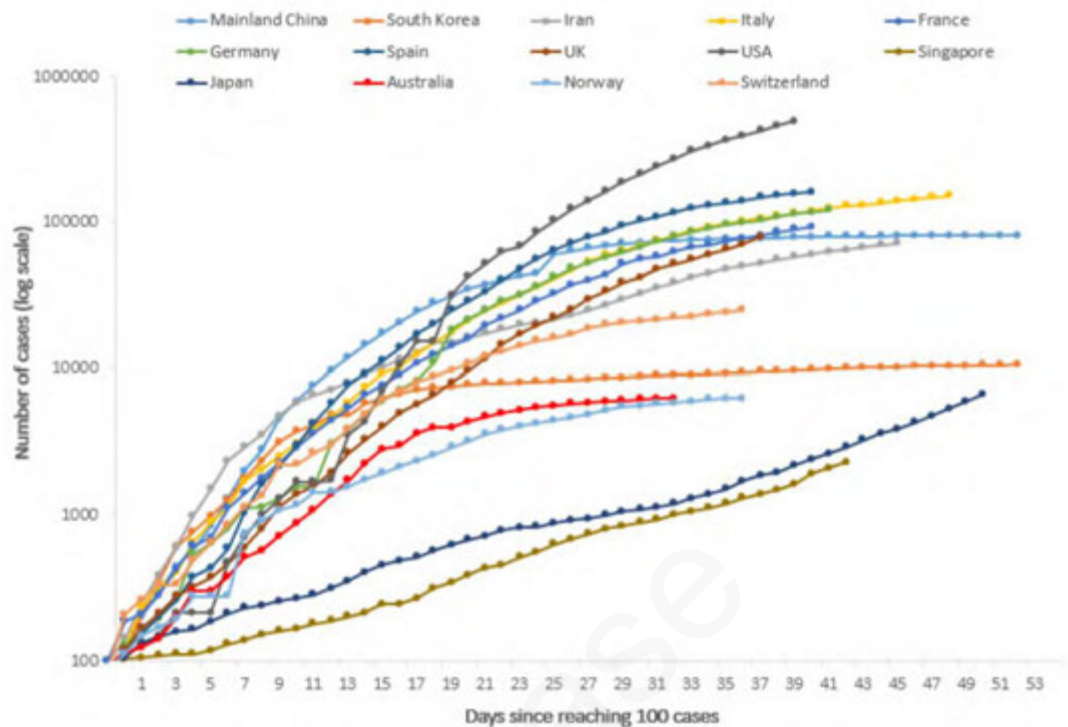
Recent reporting of cases and deaths

- A total of **72,861** new cases, including **5,378** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Based on the number of reported cases globally, the case fatality rate is approximately 6.2%. The risk of death reportedly increases with age.
  - Indonesia is reporting over **4,241** cases and **373** deaths, which exceeds the number of deaths reported in the Republic of Korea, which has reported over 10,400 cases. This suggests that the actual number of cases in Indonesia may be much higher than reported.

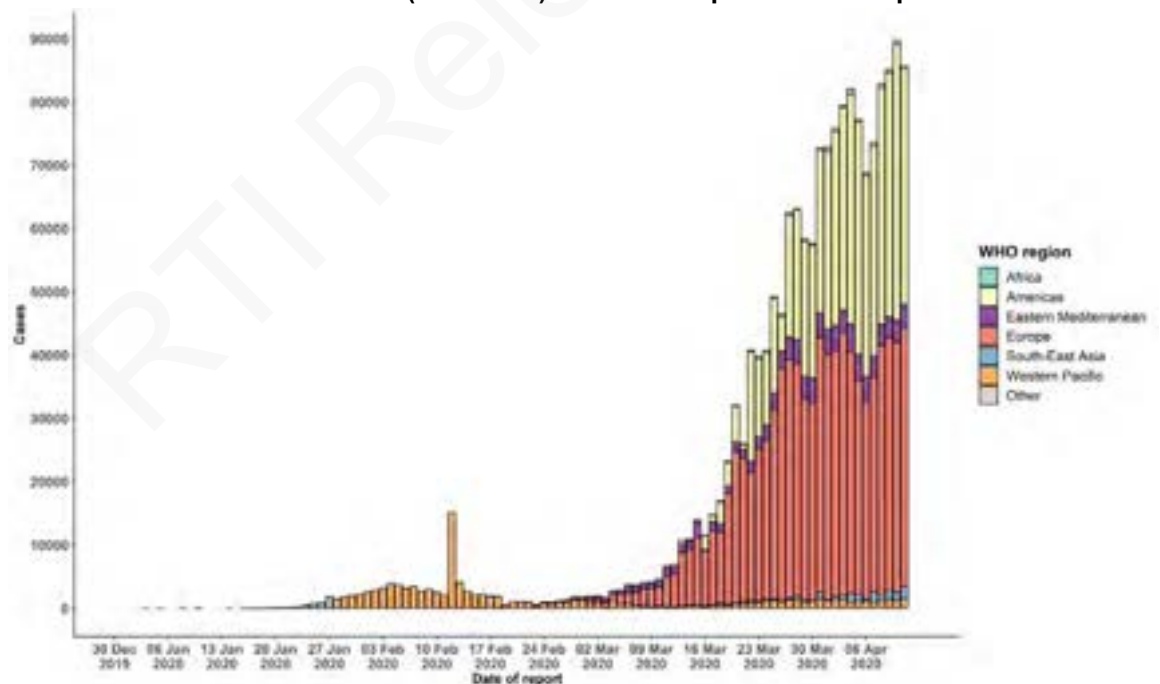
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report **83** of **12** April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 13 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 83 of 12 April 2020**



#### International response

#### WHO

- On 10 April 2020, the Director-General of WHO announced the launch of three tools to help managers and planners calculate the health workers, supplies and equipment that will be needed for the increase in patients.
- On 8 April 2020, the UN Secretary General launched the UN Supply Chain Task Force, to coordinate and dramatic scale up of procurement and distribution of PPE, lab diagnostics and oxygen to countries most in need. This initiative will be coordinated by WHO and the World Food Programme (WFP).



	<b>European Commission</b> <ul style="list-style-type: none"> <li>On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport.</li> <li>NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>Most Victorian students will be educated from home when Term 2 starts on 15 April 2020: VCE students will still receive an ATAR score, but there will be several changes to the academic timetable for VCE and VCAL students.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan</li> </ul>

	<p>Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</p> <ul style="list-style-type: none"> <li>• WA closed the state borders at midnight on 5 April 2020. WA residents travelling from interstate and FIFO workers have to self-isolate for 14 days.</li> <li>• The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>○ The Artania officially began its 14-day quarantine period on 3 April 2020 and is due to leave Fremantle on 17 April 2020.</li> </ul> </li> <li>• Enquiries line to keep the community informed about COVID-19 coronavirus launched (132 68 43).</li> <li>• The Chief Health Officer has approved an Emergency Notice under the Public Health Act to amend prescription rules for telehealth consults conducted during COVID-19.</li> </ul>
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### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours)

at +61 (0) 2 6289 3030.

#### 4. Appendix 1

##### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (**1,850,527**) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on **13** April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,482	3,349	113	0
Hong Kong SAR	1,005	4	4	0
Taiwan	388	6	3	0
Macau SAR	45	0	0	0
United States of America	492,881	18,516	31,606	1,920
Spain	161,852	16,353	4,830	510
Italy	152,271	19,470	4,694	619
Germany	120,479	2,673	2,821	129
France	92,787	13,814	3,104	635
The United Kingdom	78,995	9,875	8,719	917
Iran (Islamic Republic of)	70,029	4,357	1,837	125
Turkey	52,167	1,101	5,138	95
Belgium	28,018	3,346	1,351	327
Switzerland	24,820	831	592	26
Netherlands	24,413	2,643	1,316	132
Canada	22,544	600	1,318	69
Brazil	19,638	1,056	1,781	115
Portugal	15,987	470	515	35
Russian Federation	15,770	130	2,186	24
Austria	13,807	337	247	18
Israel	10,525	96	430	4
Republic of Korea	10,512	214	32	3
Sweden	10,151	887	466	17
Ireland	8,928	320	839	33
India	8,356	273	909	34
Ecuador	7,257	315	96	18
Chile	6,927	73	426	8
Japan	6,748	98	743	4
Australia	6,359	61	46	2
Poland	6,356	208	401	27
Norway	6,320	98	76	6
Denmark	5,996	260	177	13
Romania	5,990	282	523	25
Czechia	5,902	129	170	10



Peru	5,897	169	641	31
Pakistan	5,038	86	250	15
Malaysia	4,530	73	184	3
Philippines	4,428	247	233	26
Indonesia	4,241	373	729	67
Saudi Arabia	4,033	52	382	5
Mexico	3,844	233	403	39
United Arab Emirates	3,736	20	376	4
Serbia	3,380	74	275	3
Luxembourg	3,270	62	47	8
Panama	2,974	74	222	8
Finland	2,905	49	136	1
Ukraine	2,777	83	266	10
Qatar	2,728	6	216	0
Dominican Republic	2,620	126	271	8
Thailand	2,551	38	33	3
Colombia	2,473	80	250	11
Singapore	2,299	8	191	1
Belarus	2,226	23	245	4
Greece	2,081	93	70	3
South Africa	2,028	25	25	1
Argentina	1,975	82	46	3
Egypt	1,939	146	145	11
Algeria	1,825	275	64	19
Iceland	1,689	8	14	1
Republic of Moldova	1,560	30	122	1
Morocco	1,545	111	97	4
Croatia	1,534	21	39	0
Hungary	1,410	99	100	14
Iraq	1,318	72	38	1
Estonia	1,304	24	46	0
Slovenia	1,188	50	28	5
Kuwait	1,154	1	161	0
Azerbaijan	1,058	11	67	1
Lithuania	1,053	23	54	6
New Zealand	1,049	4	14	0
Bahrain	1,040	6	42	0
Armenia	1,013	13	76	2
Bosnia and Herzegovina	948	37	47	0
Kazakhstan	897	10	38	0
North Macedonia	828	34	117	2
Cameroon	803	10	0	0
Uzbekistan	796	3	172	0
Puerto Rico	788	42	63	3
Slovakia	728	2	13	0
International conveyance (Diamond Princess)	712	11	0	0

Tunisia	685	28	14	3
Bulgaria	661	28	26	3
Latvia	630	3	18	1
Andorra	622	28	20	2
Bangladesh	621	34	197	7
Cuba	620	16	56	1
Lebanon	619	20	10	0
Cyprus	616	15	21	0
Oman	599	3	53	0
Costa Rica	558	3	19	0
Afghanistan	555	18	34	3
Côte d'Ivoire	533	4	53	1
Uruguay	494	7	21	0
Niger	491	11	53	0
Albania	446	23	30	0
Burkina Faso	443	19	0	0
Ghana	408	8	30	2
Honduras	392	24	10	1
Réunion	388	0	6	0
Jordan	381	7	9	0
Kyrgyzstan	377	5	38	0
Malta	370	3	20	1
San Marino	356	35	12	1
Mauritius	319	9	1	0
Nigeria	318	10	13	3
Kosovo	283	7	33	0
Senegal	278	2	13	0
Bolivia (Plurinational State of)	275	20	7	1
occupied Palestinian territory	268	2	0	0
Montenegro	262	2	7	0
Viet Nam	258	0	1	0
Georgia	252	3	19	0
Guinea	250	0	56	0
Democratic Republic of the Congo	223	20	8	0
Isle of Man	204	1	14	0
Guernsey	200	6	9	1
Sri Lanka	199	7	2	0
Jersey	198	4	15	0
Kenya	191	7	2	0
Mayotte	191	2	0	0
Djibouti	187	2	37	1
Faroe Islands	184	0	0	0
Venezuela (Bolivarian Republic of)	171	9	0	0
Martinique	155	6	1	0
Guadeloupe	143	8	0	0
Guatemala	137	3	11	0

Brunei Darussalam	136	1	0	0
Guam	133	5	3	1
Paraguay	133	6	4	0
Cambodia	122	0	2	0
Rwanda	120	0	2	0
El Salvador	118	6	1	0
Gibraltar	113	1	0	0
Trinidad and Tobago	109	8	0	0
Madagascar	104	0	9	0
Aruba	92	0	6	0
Mali	87	7	13	0
French Guiana	86	0	2	0
Liechtenstein	80	1	0	0
Togo	73	3	0	0
Ethiopia	69	3	4	1
Barbados	67	4	1	0
Jamaica	65	4	2	0
Congo	60	5	0	0
Monaco	54	0	0	0
Uganda	53	0	0	0
United States Virgin Islands	53	1	3	0
French Polynesia	51	0	0	0
Sint Maarten	50	9	0	0
Gabon	49	1	5	0
Bermuda	48	4	0	0
Liberia	48	5	11	0
Cayman Islands	45	1	0	0
Bahamas	42	8	1	0
Zambia	40	2	0	0
Guinea-Bissau	38	0	3	0
Myanmar	38	3	10	0
Guyana	37	6	0	0
Benin	35	2	5	1
Eritrea	33	0	0	0
Saint Martin	33	2	1	0
United Republic of Tanzania	32	3	0	0
Haiti	31	2	1	0
Libya	25	1	1	0
Syrian Arab Republic	25	2	6	0
Antigua and Barbuda	21	2	2	0
Somalia	21	1	9	0
Mozambique	20	0	0	0
Angola	19	2	0	0
Maldives	19	0	0	0
Sudan	19	2	2	0
Equatorial Guinea	18	0	0	0

New Caledonia	18	0	0	0
Dominica	16	0	0	0
Fiji	16	0	0	0
Lao People's Democratic Republic	16	0	0	0
Mongolia	16	0	0	0
Namibia	16	0	0	0
Saint Lucia	15	0	1	0
Curaçao	14	1	0	0
Grenada	14	0	2	0
Botswana	13	1	0	0
Zimbabwe	13	3	2	0
Eswatini	12	0	0	0
Malawi	12	2	3	1
Saint Kitts and Nevis	12	0	1	0
Saint Vincent and the Grenadines	12	0	0	0
Central African Republic	11	0	0	0
Chad	11	0	0	0
Greenland	11	0	0	0
Northern Mariana Islands (Commonwealth of the)	11	2	0	0
Seychelles	11	0	0	0
Belize	10	2	0	1
Suriname	10	1	0	0
Gambia	9	1	5	0
Montserrat	9	0	0	0
Nepal	9	0	0	0
Holy See	8	0	0	0
Sierra Leone	8	0	1	0
Turks and Caicos Islands	8	1	0	0
Cabo Verde	7	1	0	0
Mauritania	7	1	0	0
Nicaragua	7	1	0	0
Saint Barthélemy	6	0	0	0
Bhutan	5	0	0	0
Falkland Islands (Malvinas)	5	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	1	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Burundi	3	0	0	0
Bonaire, Sint Eustatius and Saba	2	0	0	0
Papua New Guinea	2	0	0	0
Timor-Leste	2	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>1,696,658</b>	<b>105,956</b>	<b>85,674</b>	<b>6,261</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #86 Novel Coronavirus (COVID-19)  
**Date:** Tuesday, 14 April 2020 7:46:11 PM  
**Attachments:** [2020-04-14 NIR Health SitRep v86 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 14 April 2020, there have been 6,400 laboratory confirmed cases of COVID-19 in Australia, including 61 deaths.
- Since yesterday's situation report, an additional 41 cases and no new deaths, have been reported in Australia.
- To date, more than 366,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 14 April 2020, a total of 1,920,985 cases of COVID-19 have been reported globally, including 119,686 deaths.
- The Ministry of Health of Indonesia is reporting over 4,500 cases and 380 deaths, which exceeds the number of deaths reported by the Republic of Korea Ministry of Health and Welfare (over 10,500 cases and 217 deaths).

The next Situation Report will be issued on 15 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-14 1800 AEDT	<b>Version</b>	86
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-15 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 13 April 2020, the Minister for Health announced a further \$3 million funding to support frontline health workers with training and information in treating COVID-19 patients:               <ul style="list-style-type: none"> <li>\$1 million in funding from the Medical Research Future Fund (MRFF) to a consortium led by DetectED-X for the 'CovED initiative' - artificial intelligence, web-based technology that uses CT scans to enable health care professionals to accurately diagnose COVID-19.</li> <li>\$2 million in funding from the National Health and Medical Research Council (NHMRC) will be provided to the Australian Partnership for Preparedness Research on Infectious Disease Emergencies (APPRISE).</li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June.</li> </ul>

**Emergency Response Plan for COVID-19**

- On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.

**Commonwealth emergency powers**

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment (PPE), and the closure of duty free stores (excluding food outlets and chemists) at airports.

**1. Situation****Overview****Domestic Situation (as at 1500 hrs, 14 April 2020)**

- A total of **6,400** cases of COVID-19, including 61 deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **41** cases and no new deaths, have been reported in Australia.
    - On 10 April 2020, NSW reallocated interstate acquired cases to be included with 'overseas acquired', increasing the number of 'overseas' acquired by 71 cases. *This was amended on 13 April 2020 with the reclassification of around 60 cases from 'Overseas acquired' to 'Locally acquired – interstate'.*
  - It has been around **one month** since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.
    - The national rate of increase of new cases as reported over the last 24 hours was less than 1%, showing a steady decline over the last week. However, it is too soon to tell whether this trend will be sustained.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with **18%** of these cases requiring admission to an ICU (2% of confirmed cases).
- The median age of COVID-19 cases is 47 years, range 0 to 100 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).
- Of the deaths so far reported:
  - The median age is **79** years (range 55 to 94 years).
  - 62% were male and 38% were female.
  - Co-morbidities have been reported for at least **24** deaths.
    - Of these, the **three** most commonly reported co-morbidities were diabetes, **cardiac disease (excluding hypertension)** and chronic respiratory conditions (excluding asthma).
    - Two or more co-morbidities were reported for **13** of the deaths.

**Testing**

- To date, more than **366,000** tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions.
  - Cumulative per cent positive was **1.7%** and the positivity in the past week are 0.9%.

**Source of infection**

- To date, **64%** of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired in:
  - At sea (e.g. cruise ships) – **25%**
    - As reported by jurisdictions, there are **1,199** cases associated with cruise ships.



- United Kingdom – 18%
- United States – 15%
- Of the locally acquired cases:
  - Clusters have been reported in some jurisdictions. Victoria has identified 55 clusters and NSW currently has 11 active clusters (accounting for 146 cases). Tasmania is reporting a cluster of 49 cases, including 35 healthcare workers, from the North West Regional Hospital.
    - On 12 April 2020, the Tasmanian Premier announced that North West Regional Hospital and North West Private Hospital in Burnie will close for two weeks for cleaning from 0700 13 April 2020. All current staff will be placed into a 14-day quarantine period. This quarantine requirement will also include members of the households where they reside.
  - The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 5 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*<sup>α</sup>, Australia (as at 1500 hrs, 14 April 2020)**

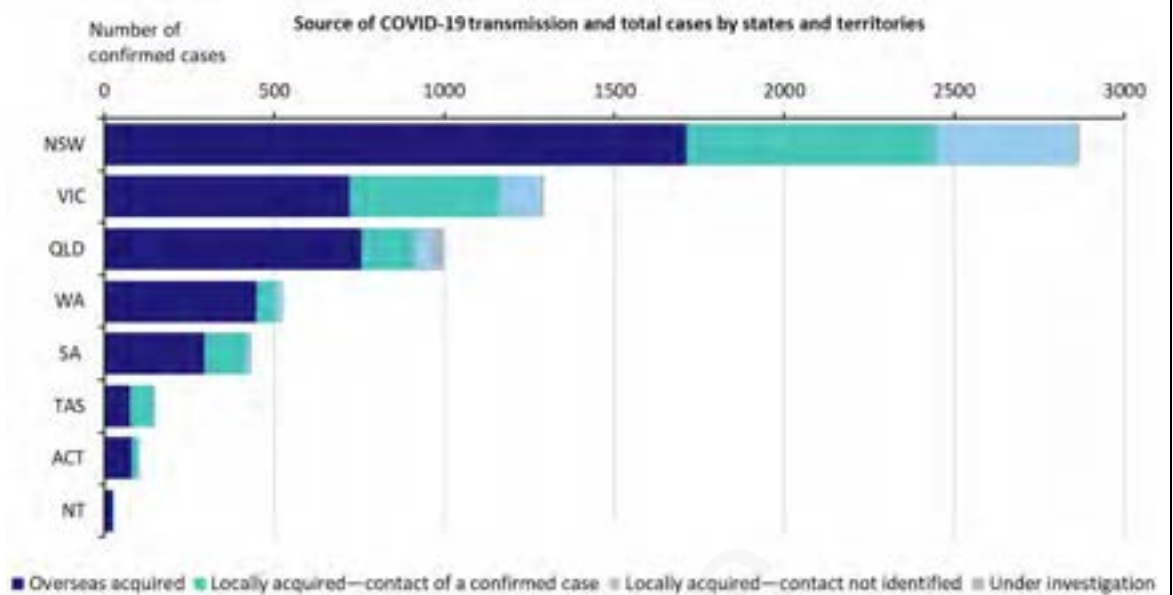
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,109	80	1,712	24	756	295	74	721	447
Locally acquired - contact of confirmed case and/or in a known cluster	1,586	16	730	2	155	122	67	439	55
Locally acquired - contact not identified	528	0	350	0	38	4	0	122	14
Locally acquired - contact not identified, but case had interstate travel	102	5	66	1	15	6	2	0	7
Under investigation	75	2	12	0	34	6	8	9	4
<b>Total cases</b>	<b>6,400</b>	<b>103</b>	<b>2,870</b>	<b>27</b>	<b>998</b>	<b>433</b>	<b>151</b>	<b>1,291</b>	<b>527</b>
<b>Deaths (of total)</b>	<b>61</b>	<b>2</b>	<b>25</b>	<b>0</b>	<b>5</b>	<b>4</b>	<b>5</b>	<b>14</b>	<b>6</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	41 (0.6%)	0 (0%)	7 (0%)	0 (0%)	11 (1%)	2 (0%)	7 (5%)	10 (1%)	4 (1%)
Change in the last 72hrs before (%change)	108 (2%)	0 (0%)	13 (0%)	0 (0%)	24 (2%)	4 (1%)	28 (23%)	26 (2%)	13 (3%)
Average daily increase over the past three days (compound)	0.6%	0.0%	0.2%	0.0%	0.8%	0.3%	7.1%	0.7%	0.8%
Increase over the past week	492	6	184	-	64	18	63	100	57

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

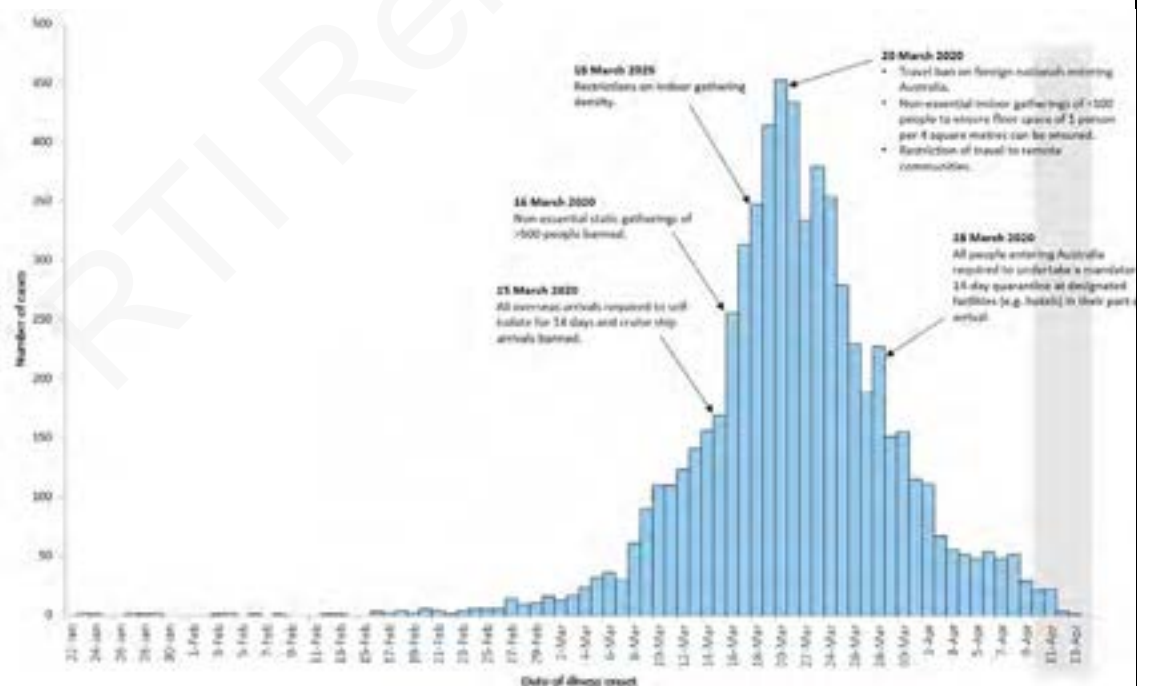
<sup>α</sup> The number of new cases in NSW increased by 7, however their total number of cases has been revised down by 10. These 10 cases have been excluded by NSW based on new information received on 11 April 2020 (9 cases were considered to be interstate residents who are currently in their home jurisdiction and are yet to be confirmed by those jurisdictions; and one case was a false positive result).

<sup>α</sup> On 12 April 2020 ACT has reduced the number of cases by 1, due to subsequent investigations demonstrating that an individual did not have COVID-19.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 14 April 2020**

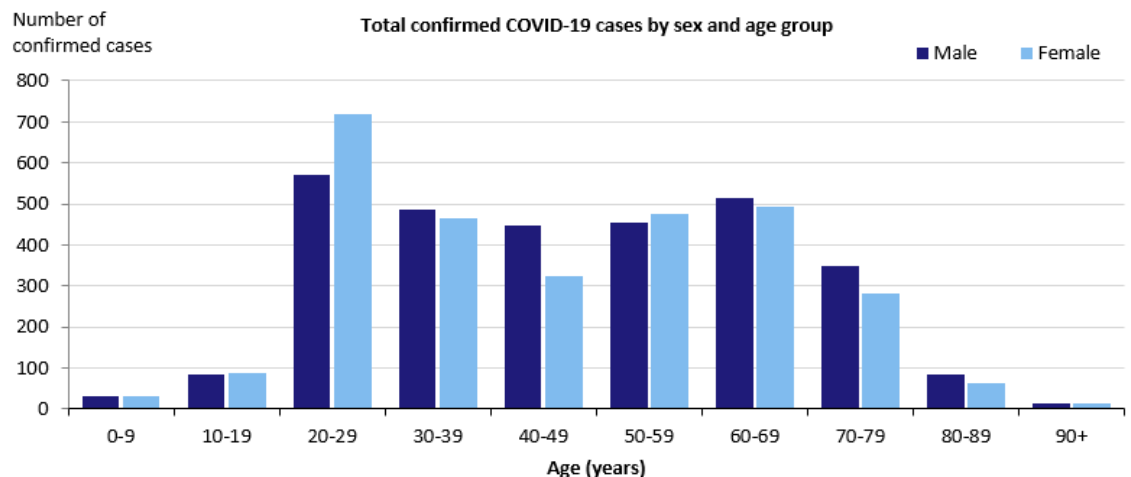


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 14 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 14 April 2020**



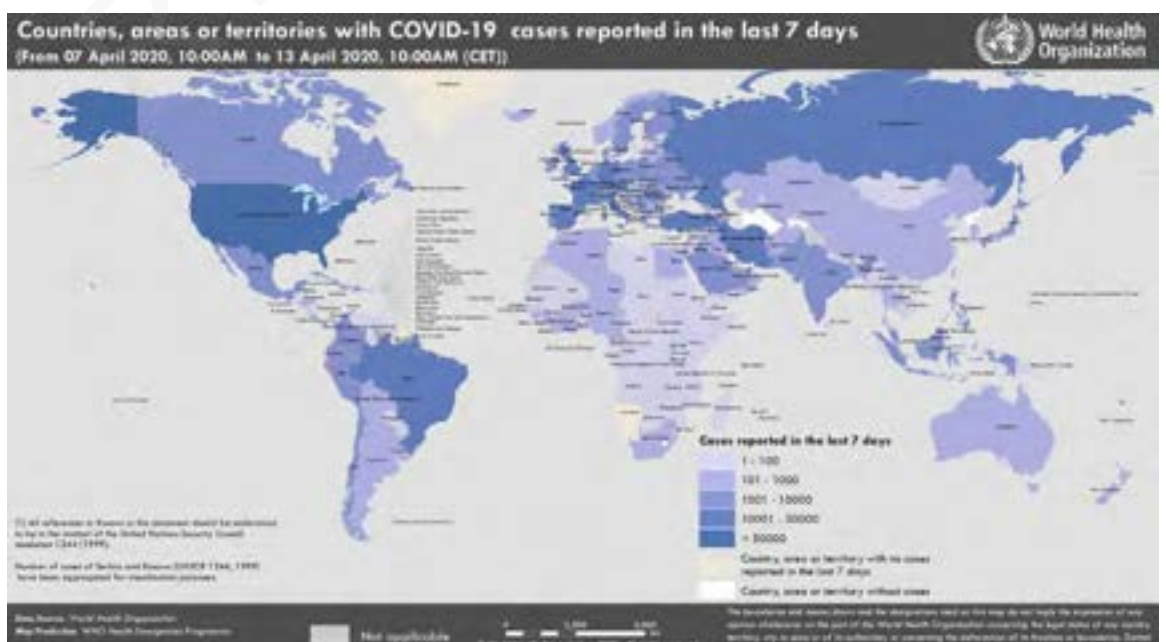
#### International Situation (as at 1500 hrs, 14 April 2020)

- A total of **1,920,985** cases of COVID-19 have been reported globally, including **119,686** deaths (Source: Johns Hopkins University, as at 1500hrs on 14 April 2020).
- The majority of deaths are from **the United States of America (18%)**, Italy (**18%**), Spain (**15%**), and France (**13%**) (Source: WHO Situation Report **84**).

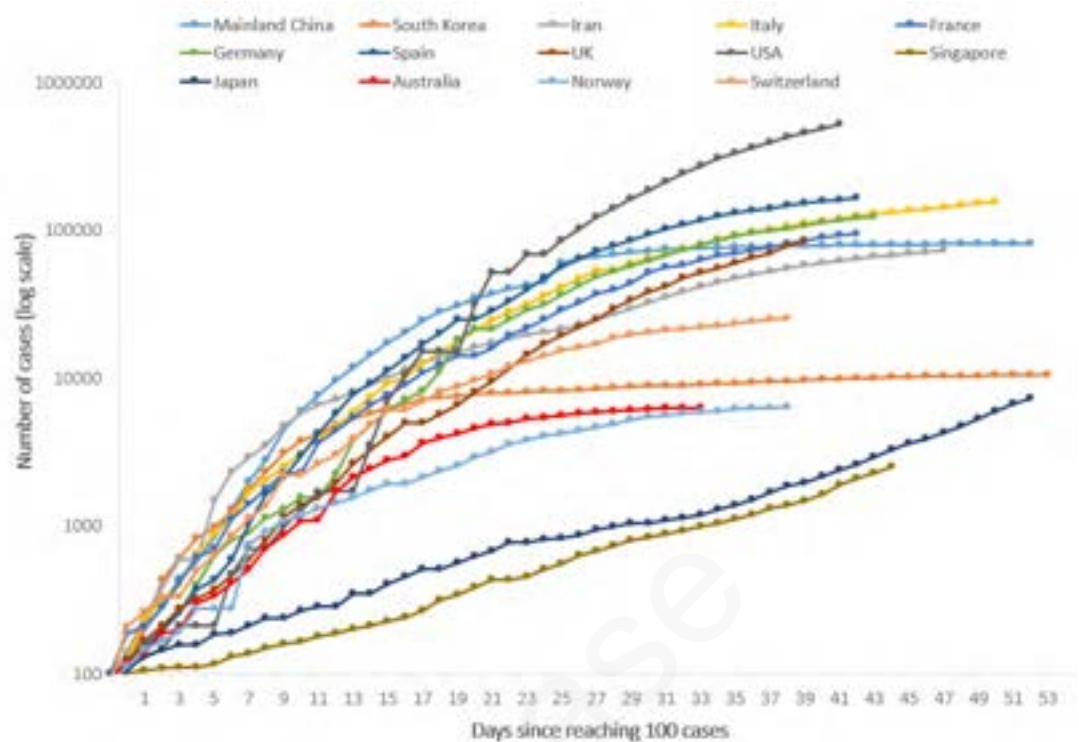
#### Recent reporting of cases and deaths

- A total of **70,458** new cases, including **5,441** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Based on the number of reported cases globally, the case fatality rate is approximately **6.3%** (Source: **WHO Situation Report 84**). The risk of death reportedly increases with age.
  - The Ministry of Health of Indonesia is reporting over **4,500** cases and **380** deaths, which exceeds the number of deaths reported by the Republic of Korea Ministry of Health and Welfare, which has reported over **10,500 cases**. This suggests that the actual number of cases in Indonesia may be much higher than reported.

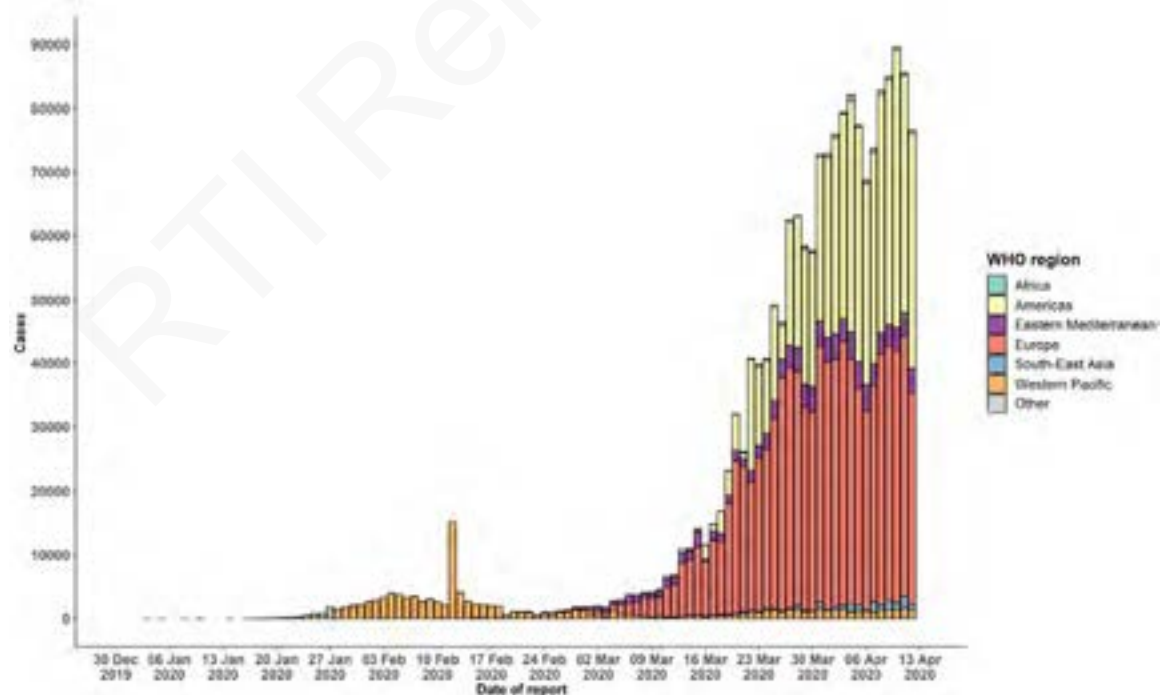
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report **84** of 13 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 14 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 84 of 13 April 2020**



#### International response

#### WHO

- On 14 April 2020, the Director-General of WHO reiterated this is the first pandemic caused by a coronavirus, that COVID-19 spreads fast and it is 10 times deadlier than the 2009 flu pandemic. The UK was acknowledged for its contribution of £200 million to the global response.
  - Importantly, it was emphasised that any lifting of control measures must be slow and controlled, with appropriate public health measures in place.
- The WHO will publish updated strategic advice tomorrow, 15 April 2020, including six criteria for countries considering lifting restrictions:
  - transmission is controlled;

	<ul style="list-style-type: none"> <li>○ <i>health system capacities are in place to detect, test, isolate and treat every case and trace every contact;</i></li> <li>○ <i>outbreak risks are minimized in special settings like health facilities and nursing homes;</i></li> <li>○ <i>preventive measures are in place in workplaces, schools and other places where it's essential for people to go;</i></li> <li>○ <i>importation risks can be managed; and</i></li> <li>○ <i>communities are fully educated, engaged and empowered to adjust to the "new norm".</i></li> </ul> <p><b>European Commission</b></p> <ul style="list-style-type: none"> <li>● On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>● The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>● On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>● The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>● The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>● Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>● The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>● NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport.</li> <li>● NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>● Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>● NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>● All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>● CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>● The State Health Emergency Contact Centre is activated.</li> <li>● COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>● The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>● Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>● Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>● Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>● GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>● On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>● Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>● A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>● Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>● Most Victorian students will be educated from home when Term 2 starts on 15 April 2020: VCE students will still receive an ATAR score, but there will be several changes to the academic timetable for VCE and VCAL students.</li> </ul>



	<ul style="list-style-type: none"> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>WA closed the state borders at midnight on 5 April 2020. WA residents travelling from interstate and FIFO workers have to self-isolate for 14 days.</li> <li>The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>The Artania officially began its 14-day quarantine period on 3 April 2020 and is due to leave Fremantle on 17 April 2020.</li> </ul> </li> <li>Enquiries line to keep the community informed about COVID-19 coronavirus launched (132 68 43).</li> <li>The Chief Health Officer has approved an Emergency Notice under the Public Health Act to amend prescription rules for telehealth consults conducted during COVID-19.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.



## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (1,850,527) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 14 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,597	3,351	115	2
Hong Kong SAR	1,010	4	5	0
Taiwan	393	6	5	0
Macau SAR	45	0	0	0
United States of America	524,514	20,444	31,633	1,928
Spain	166,019	16,972	4,167	619
Italy	156,363	19,901	4,092	431
Germany	123,016	2,799	2,537	126
France	94,382	14,374	1,595	560
The United Kingdom	84,283	10,612	5,288	737
Iran (Islamic Republic of)	71,686	4,474	1,657	117
Turkey	56,956	1,198	4,789	97
Belgium	29,647	3,600	1,629	254
Netherlands	25,587	2,737	1,174	94
Switzerland	25,220	858	400	27
Canada	23,702	674	1,158	74
Brazil	20,727	1,124	1,089	68
Russian Federation	18,328	148	2,558	18
Portugal	16,585	504	598	34
Austria	13,937	350	130	13
Israel	10,878	103	353	7
Republic of Korea	10,537	217	25	3
Sweden	10,483	899	332	12
Ireland	9,655	334	727	14
India	9,152	308	796	35
Ecuador	7,466	333	209	18
Japan	7,255	102	507	4
Chile	7,213	80	286	7

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Peru	6,848	181	951	12
Poland	6,674	232	318	24
Norway	6,415	103	95	5
Australia	6,400	61	41	0
Romania	6,300	306	310	24
Denmark	6,174	273	178	13
Czechia	5,991	138	89	9
Pakistan	5,374	93	336	7
Malaysia	4,683	76	153	3
Philippines	4,648	297	220	50
Saudi Arabia	4,462	59	429	7
Indonesia	4,241	373	0	0
Mexico	4,219	273	375	40
United Arab Emirates	4,123	22	387	2
Serbia	3,630	80	250	6
Luxembourg	3,281	66	11	4
Panama	3,234	79	260	5
Ukraine	3,102	93	325	10
Qatar	2,979	7	251	1
Finland	2,974	56	69	7
Dominican Republic	2,967	173	347	47
Colombia	2,709	100	236	20
Thailand	2,579	40	28	2
Belarus	2,578	26	352	3
Singapore	2,532	8	233	0
South Africa	2,173	25	145	0
Greece	2,114	98	33	5
Egypt	2,065	159	126	13
Argentina	1,975	82	0	0
Algeria	1,914	293	89	18
Iceland	1,701	8	12	0
Republic of Moldova	1,662	33	102	3
Morocco	1,661	118	116	7
Croatia	1,600	23	66	2
Hungary	1,458	109	48	10
Iraq	1,352	76	34	4
Estonia	1,309	25	5	1
Kuwait	1,234	1	80	0
Slovenia	1,205	53	17	3
Bahrain	1,136	6	96	0
Azerbaijan	1,098	11	40	0
New Zealand	1,064	5	15	1
Lithuania	1,062	24	9	1

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Armenia	1,039	14	26	1
Bosnia and Herzegovina	1,007	38	59	1
Kazakhstan	979	12	82	2
Puerto Rico	897	44	109	2
Uzbekistan	896	4	100	1
North Macedonia	828	34	0	0
Cameroon	803	10	0	0
Slovakia	742	2	14	0
Oman	727	4	128	1
International conveyance (Diamond Princess)	712	12	0	1
Tunisia	707	31	22	3
Bulgaria	675	29	14	1
Cuba	669	18	49	2
Latvia	651	5	21	2
Andorra	639	29	17	1
Cyprus	633	16	17	1
Lebanon	630	20	11	0
Bangladesh	621	34	0	0
Afghanistan	607	19	52	1
Costa Rica	577	3	19	0
Ghana	566	8	158	0
Côte d'Ivoire	533	4	0	0
Niger	529	12	38	1
Uruguay	501	7	7	0
Albania	446	23	0	0
Burkina Faso	443	19	0	0
Kyrgyzstan	419	5	42	0
Honduras	393	25	1	1
Jordan	389	7	8	0
Réunion	389	0	1	0
Malta	378	3	8	0
Kosovo	362	7	79	0
San Marino	356	35	0	0
Mauritius	324	9	5	0
Nigeria	323	10	5	0
Bolivia (Plurinational State of)	300	24	25	4
Senegal	280	2	2	0
occupied Palestinian territory	271	2	3	0
Montenegro	267	2	5	0
Georgia	266	3	14	0
Viet Nam	262	0	4	0
Guinea	250	0	0	0
Democratic Republic of the Congo	235	20	12	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Isle of Man	226	1	22	0
Djibouti	215	2	28	0
Sri Lanka	210	7	11	0
Guernsey	209	6	9	0
Mayotte	207	3	16	1
Jersey	198	4	0	0
Kenya	197	8	6	1
Faroe Islands	184	0	0	0
Venezuela (Bolivarian Republic of)	171	9	0	0
Martinique	156	6	1	0
Guatemala	153	3	16	0
Guadeloupe	143	8	0	0
Brunei Darussalam	136	1	0	0
Paraguay	134	6	1	0
Guam	133	5	0	0
Gibraltar	129	0	16	-1
Rwanda	126	0	6	0
El Salvador	125	6	7	0
Cambodia	122	0	0	0
Trinidad and Tobago	112	8	3	0
Madagascar	106	0	2	0
Aruba	92	0	0	0
Mali	87	7	0	0
French Guiana	86	0	0	0
Liechtenstein	80	1	0	0
Togo	76	3	3	0
Ethiopia	71	3	2	0
Congo	70	5	10	0
Jamaica	69	4	4	0
Barbados	68	4	1	0
Gabon	57	1	8	0
Monaco	54	0	0	0
Uganda	54	0	1	0
Cayman Islands	53	1	8	0
French Polynesia	53	0	2	0
United States Virgin Islands	51	1	-2	0
Bermuda	50	4	2	0
Liberia	50	5	2	0
Sint Maarten	50	9	0	0
Zambia	43	2	3	0
Bahamas	42	8	0	0
Myanmar	41	4	3	1
Guinea-Bissau	39	0	1	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Guyana	37	6	0	0
Benin	35	1	0	-1
Eritrea	34	0	1	0
Saint Martin	33	2	0	0
United Republic of Tanzania	32	3	0	0
Haiti	31	2	0	0
Libya	25	1	0	0
Somalia	25	2	4	1
Syrian Arab Republic	25	2	0	0
Antigua and Barbuda	21	2	0	0
Maldives	20	0	1	0
Mozambique	20	0	0	0
Angola	19	2	0	0
Lao People's Democratic Republic	19	0	3	0
Sudan	19	2	0	0
Chad	18	0	7	0
Equatorial Guinea	18	0	0	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Fiji	16	0	0	0
Mongolia	16	0	0	0
Namibia	16	0	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Eswatini	14	0	2	0
Grenada	14	0	0	0
Zimbabwe	14	3	1	0
Belize	13	2	3	0
Botswana	13	1	0	0
Malawi	13	2	1	0
Nepal	12	0	3	0
Saint Kitts and Nevis	12	0	0	0
Saint Vincent and the Grenadines	12	0	0	0
Central African Republic	11	0	0	0
Greenland	11	0	0	0
Northern Mariana Islands (Commonwealth of the)	11	2	0	0
Seychelles	11	0	0	0
Sierra Leone	10	0	2	0
Suriname	10	1	0	0
Gambia	9	1	0	0
Montserrat	9	0	0	0
Nicaragua	9	1	2	0
Turks and Caicos Islands	9	1	1	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Holy See	8	0	0	0
Cabo Verde	7	1	0	0
Mauritania	7	1	0	0
Saint Barthelemy	6	0	0	0
Bhutan	5	0	0	0
Burundi	5	0	2	0
Falkland Islands (Malvinas)	5	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
Bonaire, Sint Eustatius and Saba	3	0	1	0
British Virgin Islands	3	0	0	0
Papua New Guinea	2	0	0	0
Timor-Leste	2	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>1,773,128</b>	<b>111,652</b>	<b>76,470</b>	<b>5,696</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #87 Novel Coronavirus (COVID-19)  
**Date:** Wednesday, 15 April 2020 8:19:40 PM  
**Attachments:** [2020-04-15 NIR Health SitRep v87 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 15 April 2020, there have been 6,477 laboratory confirmed cases of COVID-19 in Australia, including 63 deaths.
- Since yesterday's situation report, an additional 47 cases and 2 deaths, have been reported in Australia.
- To date, more than 371,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 15 April 2020, a total of 1,982,281 cases of COVID-19 have been reported globally, including 126,722 deaths.
- On 14 April 2020, the African Union, the World Food Programme and the World Health Organisation announced the same-day scheduled departure of the first United Nations 'Solidarity Flight' from Addis Ababa, Ethiopia, carrying COVID-19 medical supplies to all African Nations.

The next Situation Report will be issued on 16 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

[redacted]

National Incident Room  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health





**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <i>15</i> 1800 AEDT	<b>Version</b>	<i>87</i>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <i>16</i> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li><i>National Cabinet will meet tomorrow, 16 April 2020.</i></li> <li><i>On 12 April 2020, Tasmanian Health submitted a joint AUSMAT / ADF DACC request seeking direct support to Northwest Health service to maintain provision of essential emergency care services.</i> <ul style="list-style-type: none"> <li><i>The entire regional referral Northwest Hospital was closed on due to an emerging cluster of COVID-19 cases in health care workers</i></li> </ul> </li> <li><i>All services, other than the emergency department, are being offset or redirected across the region, whilst concurrent deep clean decontamination of the entire health facility is conducted.</i></li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June <i>2020</i>.</li> </ul>

	<p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment (PPE), and the closure of duty free stores (excluding food outlets and chemists) at airports.</li> </ul>
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## 1. Situation

<p><b>Overview</b></p>	<p><b>Domestic Situation (as at 1500 hrs, 15 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,447</b> cases of COVID-19, including <b>63</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>47</b> cases and <b>2</b> deaths, have been reported in Australia.                 <ul style="list-style-type: none"> <li><i>On 15 April 2020, Victoria revised their number of cases by source of acquisition after undertaking a review of overseas travel. This resulted in 54 cases being reclassified from 'Locally acquired-contact of a confirmed case' to 'Overseas acquired'.</i></li> </ul> </li> <li>It has been around one month since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.                 <ul style="list-style-type: none"> <li>The national rate of increase of new cases as reported over the last 24 hours was less than 1%, showing a steady decline over the last week. However, it is too soon to tell whether this trend will be sustained.</li> </ul> </li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with <b>17%</b> of these cases requiring admission to an ICU (2.0% of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0 to 100 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is <b>79</b> years (range 55 to 94 years).</li> <li><b>60%</b> were male and <b>40%</b> were female.</li> <li>Co-morbidities have been reported for at least <b>30</b> deaths.                 <ul style="list-style-type: none"> <li>Of these, the three most commonly reported co-morbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> <li>Two or more co-morbidities were reported for <b>17</b> of the deaths.</li> </ul> </li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>371,000</b> tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.7% and the positivity in the past week are <b>0.8%</b>.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, over <b>65%</b> of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and the US.</li> </ul>
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- Of the locally acquired cases:
  - Clusters have been reported in some jurisdictions. Victoria has identified 55 clusters and NSW currently has 11 active clusters (accounting for 146 cases). Tasmania is reporting a cluster of 49 cases, including 35 healthcare workers, from the North West Regional Hospital.
    - On 12 April 2020, the Tasmanian Premier announced that North West Regional Hospital and North West Private Hospital in Burnie will close for two weeks for cleaning from 0700 13 April 2020. All current staff will be placed into a 14-day quarantine period. This quarantine requirement will also include members of the households where they reside.
    - *As of 14 April, there are 140 crew on board Ruby Princess who have tested positive for COVID-19. These 140 crew are not included in NSW case numbers. In addition, there are 12 Ruby Princess crew members with COVID-19 in health facilities in NSW.*
  - The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 5 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 15 April 2020)**

Confirmed COVID-19 cases	Australia	ACT <sup>a</sup>	NSW	NT	Qld	SA	Tas	Vic <sup>^</sup>	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,177	80	1,716	24	761	295	76	775	450
Locally acquired - contact of confirmed case and/or in a known cluster	1,561	16	738	2	160	124	80	385	56
Locally acquired - contact not identified	540	0	351	0	39	4	0	132	14
Locally acquired - contact not identified, but case had interstate travel	104	5	65	1	18	6	2	0	7
Under investigation	65	2	16	0	21	4	10	7	5
<b>Total cases</b>	<b>6,447</b>	<b>103</b>	<b>2,886</b>	<b>27</b>	<b>999</b>	<b>433</b>	<b>168</b>	<b>1,299</b>	<b>532</b>
<b>Deaths (of total)</b>	<b>63</b>	<b>3</b>	<b>25</b>	<b>0</b>	<b>5</b>	<b>4</b>	<b>6</b>	<b>14</b>	<b>6</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	47 (0.7%)	0 (0.0%)	16 (0.6%)	0 (0.0%)	1 (0.1%)	0 (0.0%)	17 (11.3%)	8 (0.6%)	5 (0.9%)
Change in the last 72hrs before (%change)	134 (2.1%)	1 (1.0%)	32 (1.1%)	0 (0.0%)	16 (1.6%)	4 (0.9%)	35 (26.3%)	31 (2.4%)	15 (2.9%)
Average daily increase over the past three days (compound)	0.7%	0.3%	0.4%	0.0%	0.5%	0.3%	8.1%	0.8%	1.0%
Increase over the past week	434	4	152	-	56	13	71	87	51

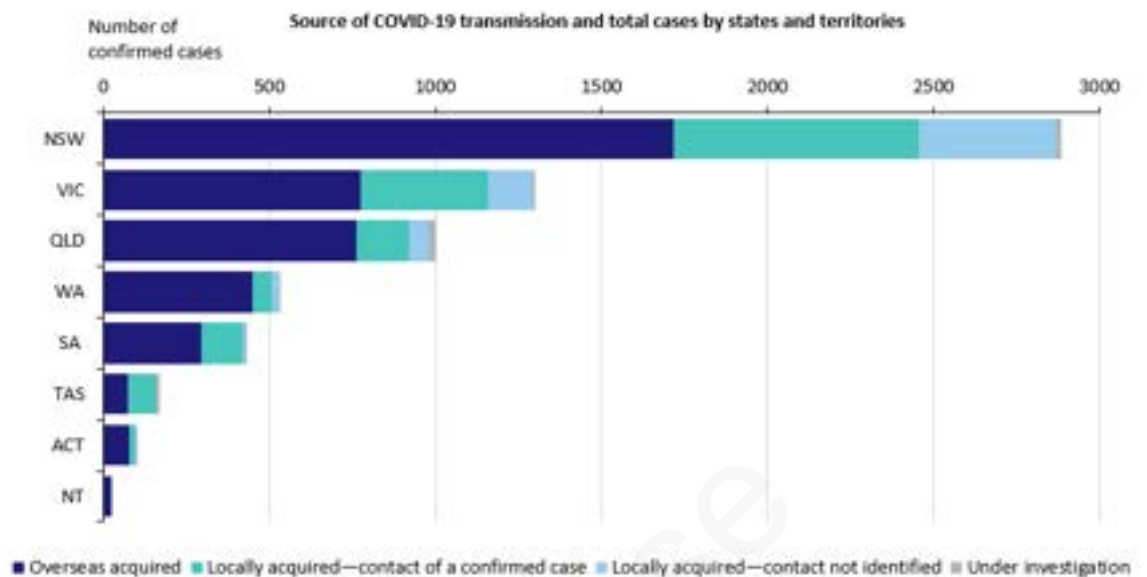
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

<sup>a</sup> On 12 April 2020 ACT has reduced the number of cases by 1, due to subsequent investigations demonstrating that an individual did not have COVID-19.

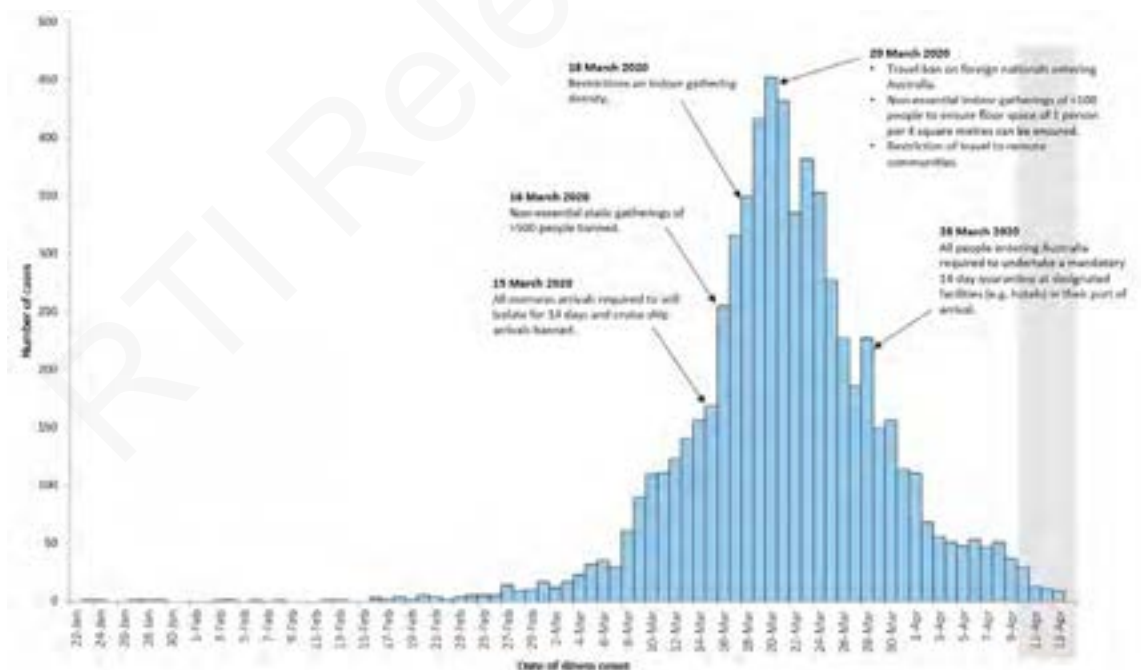
<sup>^</sup> On 15 April 2020, Victoria revised their number of cases by source of acquisition after undertaking a review of overseas travel. This resulted in 54 cases being reclassified from 'Locally acquired-contact of a confirmed case' to 'Overseas

acquired'.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 15 April 2020**

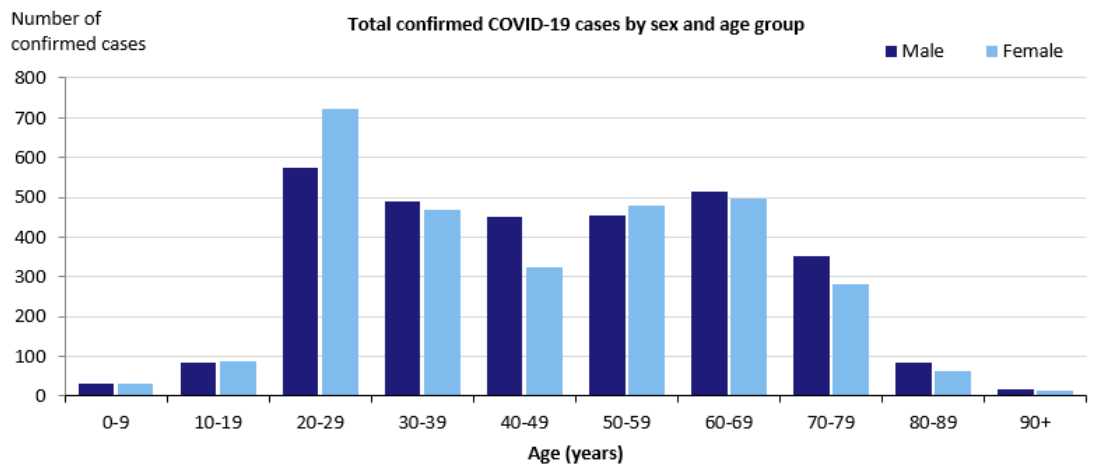


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 15 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 15 April 2020**



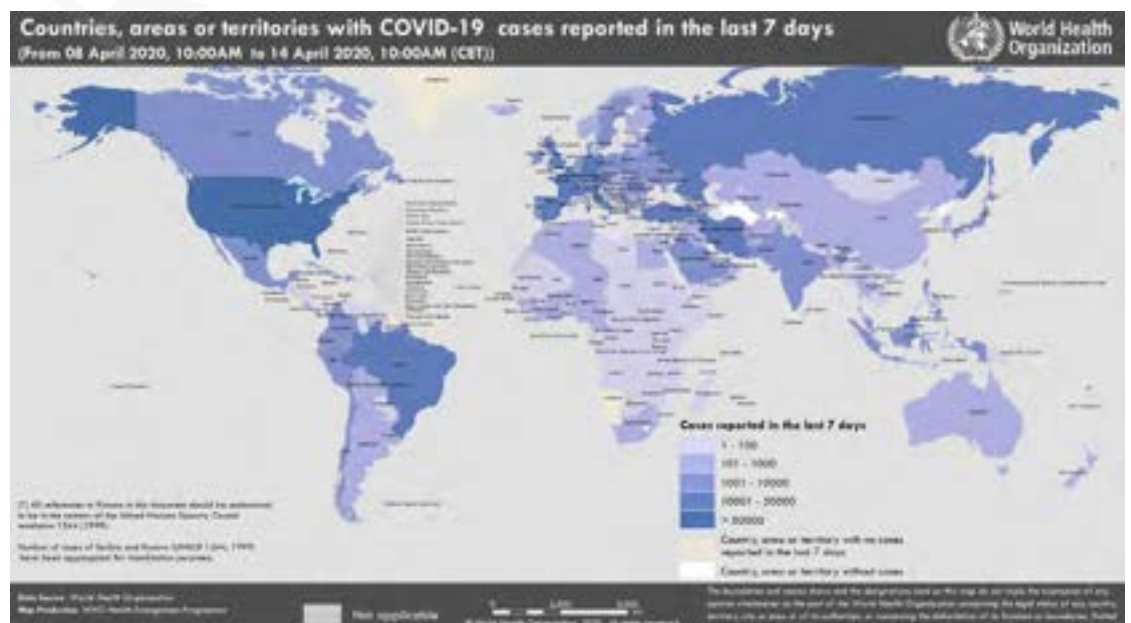
**International Situation (as at 1500 hrs, 15 April 2020)**

- A total of **1,982,281** cases of COVID-19 have been reported globally, including **126,722** deaths (Source: Johns Hopkins University, as at 1500hrs on 14 April 2020).
- The majority of deaths are from the United States of America (**19%**), Italy (**18%**), Spain (**15%**), and France (13%) (Source: WHO Situation Report).

Recent reporting of cases and deaths

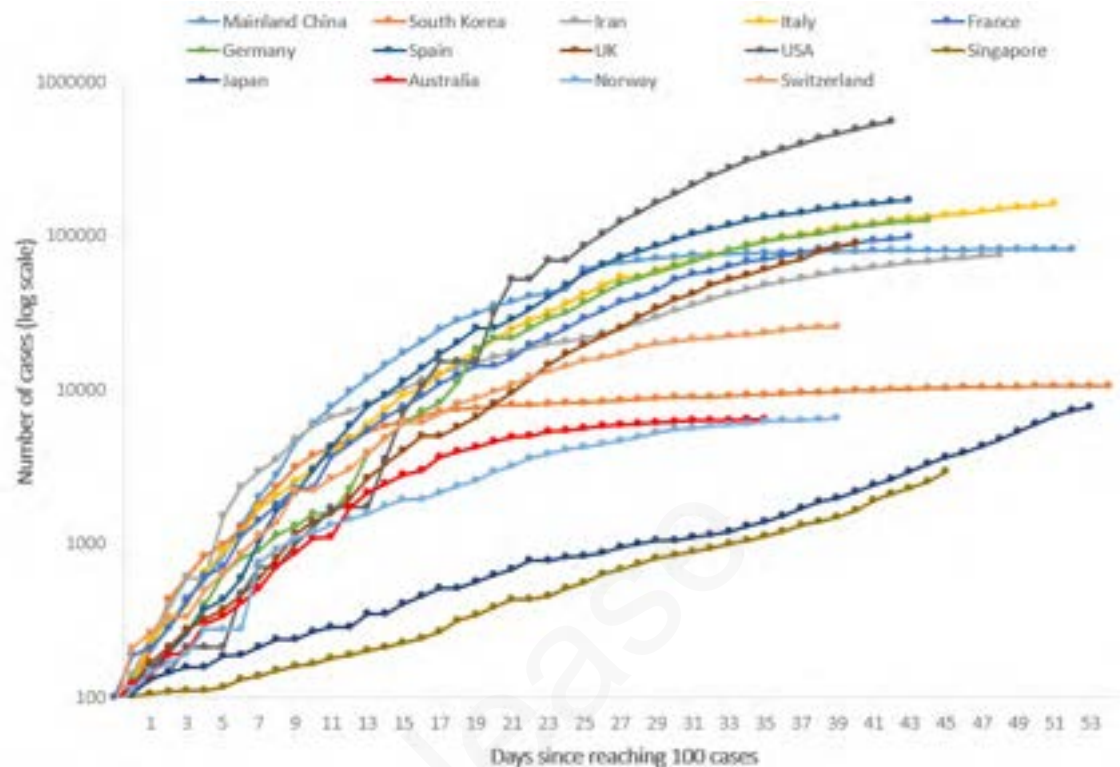
- A total of **61,296** new cases, including **7,036** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Based on the number of reported cases globally, the case fatality rate is approximately 6.3% (Source: WHO Situation Report). The risk of death reportedly increases with age.
  - The Ministry of Health of Indonesia is reporting over **4,800** cases and **450** deaths, which exceeds the number of deaths reported by the Republic of Korea Ministry of Health and Welfare, which has reported over 10,500 cases. This suggests that the actual number of cases in Indonesia may be much higher than reported.

**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 85 of 14 April 2020**

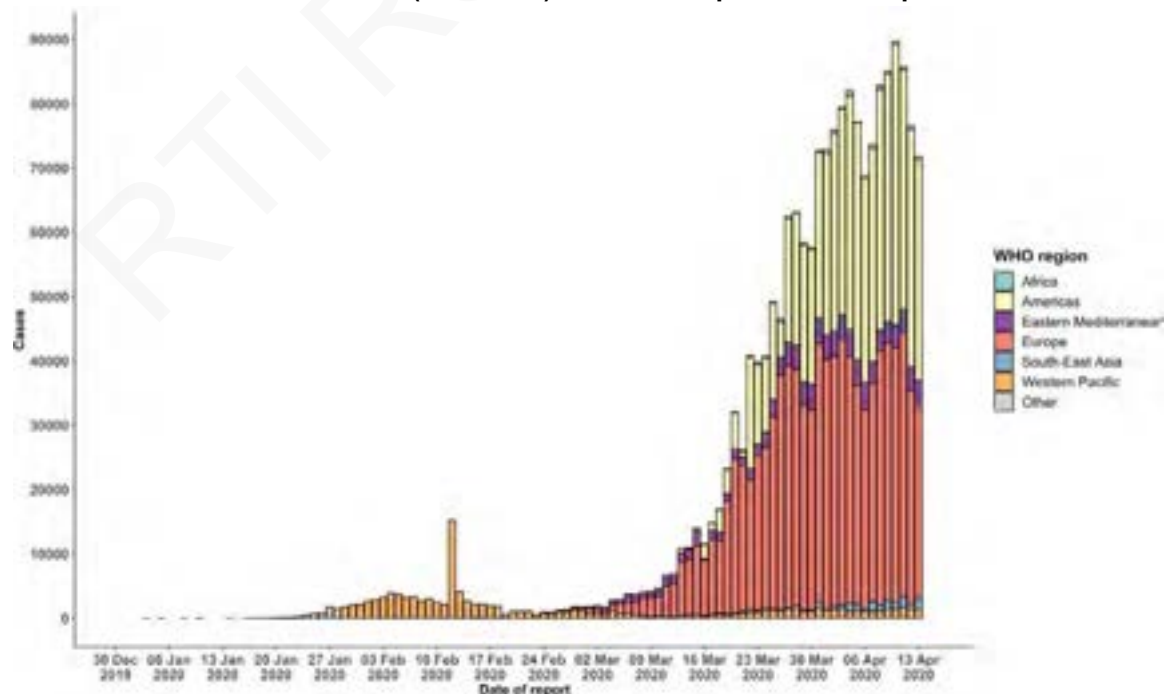




**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 15 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 85 of 14 April 2020**



#### International response

#### WHO

- On 14 April 2020, the Measles and Rubella Initiative: American Red Cross, U.S. CDC, UNICEF, UN Foundation and WHO released a statement 'more than 117 million children at risk of missing out on measles vaccines, as COVID-19 surges', highlighting the following:
  - Measles immunisation campaigns in 24 countries have already been delayed

	<ul style="list-style-type: none"> <li>○ <i>Children younger than 12 months of age are more likely to die from measles complications</i></li> <li>○ <i>The WHO has issued new guidelines endorsed by the Strategic Advisory Group of Experts on Immunization to help governments around the world sustain immunisation activities during the COVID-19 pandemic:</i> <ul style="list-style-type: none"> <li>▪ <i>temporarily pause preventive immunisation campaigns where there is no active outbreak of a vaccine-preventable disease</i></li> <li>▪ <i>continue routine immunisation services, ensuring the safety of communities and health workers</i></li> <li>▪ <i>undertake a careful risk-benefit analysis when deciding whether to delay vaccination campaigns in response to outbreaks</i></li> </ul> </li> <li>• <i>On 14 April 2020, the African Union, the World Food Programme (WFP) and the WHO announced the same-day scheduled departure of the first UN 'Solidarity Flight' from Addis Ababa, Ethiopia, carrying COVID-19 medical supplies to all African Nations.</i> <ul style="list-style-type: none"> <li>○ <i>Cargo included 1 million face masks, PPE sufficient to protect health workers treating more than 30,000 patients across Africa, and laboratory supplies to support surveillance and detection.</i></li> <li>○ <i>Dispatch was coordinated by the WHO logistics hub in Dubai.</i></li> </ul> </li> <li>• <i>The United Nations Office for Coordination of Humanitarian Affairs (OCHA) launched the global appeal to raise \$2 billion for the COVID-19 response.</i> <ul style="list-style-type: none"> <li>○ <i>The WFP is seeking US\$350 million, of which only 24% has been realised (\$US84 million), to establish global humanitarian hubs, such as the aforementioned in Dubai.</i></li> </ul> </li> </ul> <p><b>European Commission</b></p> <ul style="list-style-type: none"> <li>• On 17 March 2020, the EU closed its external borders to non-essential travel for 30 days.</li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>• The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>• On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>• The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>• The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>• Breaches of Public Health Orders can be referred to Crime Stoppers NSW for follow-up.</li> <li>• The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>• NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport.</li> <li>• NSW Health is currently working with Disaster Welfare to refine the process for providing emergency support (accommodation and groceries) to people required to self-isolate.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>• Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>• NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>• All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>• CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>• The State Health Emergency Contact Centre is activated.</li> <li>• COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>• The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>• Arrangements activated to support the medical workforce in areas where restrictions have had an impact.</li> <li>• Restrictions on international arrivals and cross border travel came into effect into SA from 22 March. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> </ul>



	<ul style="list-style-type: none"> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>Most Victorian students will be educated from home when Term 2 starts on 15 April 2020: VCE students will still receive an ATAR score, but there will be several changes to the academic timetable for VCE and VCAL students.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>WA closed the state borders at midnight on 5 April 2020. WA residents travelling from interstate and FIFO workers have to self-isolate for 14 days.</li> <li>The Artania cruise ship remains anchored offshore in Fremantle. <ul style="list-style-type: none"> <li>The Artania officially began its 14-day quarantine period on 3 April 2020 and is due to leave Fremantle on 17 April 2020.</li> </ul> </li> <li>Enquiries line to keep the community informed about COVID-19 coronavirus launched (132 68 43).</li> <li>The Chief Health Officer has approved an Emergency Notice under the Public Health Act to amend prescription rules for telehealth consults conducted during COVID-19.</li> <li><i>As at 14 April 2020, legislation to support tenants and landlords of both commercial and residential tenancies are being introduced into State Parliament.</i></li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (1,982,281) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 15 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,696	3,351	99	0
Hong Kong SAR	1,013	4	3	0
Taiwan	393	6	0	0
Macau SAR	45	0	0	0
United States of America	553,822	21,972	29,308	1,528
Spain	169,496	17,489	3,477	517
Italy	159,516	20,465	3,153	564
Germany	125,098	2,969	2,082	170
France	97,050	14,946	2,668	572
The United Kingdom	88,625	11,329	4,342	717
Iran (Islamic Republic of)	73,303	4,585	1,617	111
Turkey	61,049	1,296	4,093	98
Belgium	30,589	3,903	942	303
Netherlands	26,551	2,823	964	86
Switzerland	25,499	885	279	27
Canada	24,786	734	1,084	60
Brazil	22,169	1,223	1,442	99

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Russian Federation	21,102	170	2,774	22
Portugal	16,934	535	349	31
Austria	14,043	368	106	18
Israel	11,235	110	357	7
Sweden	10,948	919	465	20
Ireland	10,647	365	992	31
Republic of Korea	10,564	222	27	5
India	10,363	339	1,211	31
Japan	7,645	109	390	7
Ecuador	7,529	355	63	22
Chile	7,525	82	312	2
Peru	7,519	193	671	12
Poland	6,934	245	260	13
Romania	6,633	318	333	12
Norway	6,488	114	73	11
Australia	6,447	63	47	2
Denmark	6,318	285	144	12
Czechia	6,059	143	68	5
Pakistan	5,716	96	342	3
Saudi Arabia	4,934	65	472	6
Philippines	4,932	315	284	18
Malaysia	4,817	77	134	1
Mexico	4,661	296	442	23
Indonesia	4,557	399	316	26
United Arab Emirates	4,521	25	398	3
Serbia	4,054	85	424	5
Panama	3,400	87	166	8
Ukraine	3,372	98	270	5
Luxembourg	3,292	69	11	3
Qatar	3,231	7	252	0
Dominican Republic	3,167	177	200	4
Finland	3,064	59	90	3
Belarus	2,919	29	341	3
Singapore	2,918	9	386	1
Colombia	2,776	109	67	9
Thailand	2,613	41	34	1
South Africa	2,272	27	99	2
Argentina	2,252	95	277	13
Egypt	2,190	164	125	5
Greece	2,145	99	31	1
Algeria	1,983	313	69	20
Morocco	1,763	126	102	8
Republic of Moldova	1,712	36	50	3
Iceland	1,711	8	10	0
Croatia	1,650	25	50	2

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Hungary	1,512	122	54	13
Iraq	1,378	78	26	2
Bahrain	1,362	7	226	1
Estonia	1,332	28	23	3
Kuwait	1,300	2	66	1
Slovenia	1,212	55	7	2
Azerbaijan	1,148	12	50	1
Kazakhstan	1,091	12	112	0
New Zealand	1,072	9	8	4
Lithuania	1,070	24	8	0
Uzbekistan	1,054	4	158	0
Armenia	1,039	14	0	0
Bosnia and Herzegovina	1,034	38	27	0
Puerto Rico	903	45	6	1
North Macedonia	854	38	26	4
Oman	813	4	86	0
Bangladesh	803	39	182	5
Cameroon	803	10	0	0
Slovakia	769	2	27	0
Cuba	726	21	57	3
Tunisia	726	34	19	3
International conveyance (Diamond Princess)	712	12	0	0
Bulgaria	685	32	10	3
Afghanistan	665	22	58	3
Cyprus	662	17	29	1
Latvia	655	5	4	0
Andorra	651	29	12	0
Lebanon	632	20	2	0
Côte d'Ivoire	626	6	93	2
Costa Rica	595	3	18	0
Ghana	566	8	0	0
Niger	548	13	19	1
Uruguay	512	7	11	0
Burkina Faso	497	27	54	8
Albania	475	23	29	0
Kyrgyzstan	430	5	11	0
Honduras	397	25	4	0
Jordan	391	7	2	0
Réunion	391	0	2	0
Malta	384	3	6	0
Kosovo	377	8	15	1
San Marino	371	36	15	1
Nigeria	343	10	20	0
Bolivia (Plurinational State of)	330	27	30	3
Mauritius	324	9	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Guinea	319	0	69	0
Djibouti	298	2	83	0
Georgia	296	3	30	0
Senegal	291	2	11	0
Montenegro	274	4	7	2
occupied Palestinian territory	274	2	3	0
Viet Nam	265	0	3	0
Democratic Republic of the Congo	241	20	6	0
Isle of Man	228	2	2	1
Guernsey	218	6	9	0
Sri Lanka	218	7	8	0
Jersey	213	4	15	0
Kenya	208	9	11	1
Mayotte	207	3	0	0
Faroe Islands	184	0	0	0
Venezuela (Bolivarian Republic of)	181	9	10	0
Martinique	157	8	1	2
Guatemala	156	5	3	2
Paraguay	147	6	13	0
Guadeloupe	143	8	0	0
El Salvador	137	6	12	0
Brunei Darussalam	136	1	0	0
Guam	134	5	1	0
Gibraltar	129	0	0	0
Rwanda	127	0	1	0
Cambodia	122	0	0	0
Mali	116	9	29	2
Trinidad and Tobago	113	8	1	0
Madagascar	106	0	0	0
Monaco	93	0	39	0
Aruba	92	0	0	0
French Guiana	88	0	2	0
Liechtenstein	80	1	0	0
Togo	76	3	0	0
Congo	74	5	4	0
Ethiopia	74	3	3	0
Jamaica	72	4	3	0
Barbados	71	4	3	0
Myanmar	62	4	21	0
Somalia	60	2	35	0
Bermuda	57	4	7	0
Gabon	57	1	0	0
French Polynesia	55	0	2	0
Uganda	54	0	0	0
Cayman Islands	53	1	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Sint Maarten	52	9	2	0
Liberia	51	6	1	1
United States Virgin Islands	51	1	0	0
United Republic of Tanzania	49	3	17	0
Bahamas	47	8	5	0
Guyana	47	6	10	0
Zambia	45	2	2	0
Haiti	40	3	9	1
Guinea-Bissau	39	0	0	0
Benin	35	1	0	0
Eritrea	34	0	0	0
Saint Martin	33	2	0	0
Sudan	29	4	10	2
Libya	26	1	1	0
Syrian Arab Republic	25	2	0	0
Antigua and Barbuda	23	2	2	0
Chad	23	0	5	0
Equatorial Guinea	21	0	3	0
Mozambique	21	0	1	0
Maldives	20	0	0	0
Angola	19	2	0	0
Lao People's Democratic Republic	19	0	0	0
New Caledonia	18	0	0	0
Mongolia	17	0	1	0
Zimbabwe	17	3	3	0
Dominica	16	0	0	0
Fiji	16	0	0	0
Malawi	16	2	3	0
Namibia	16	0	0	0
Nepal	16	0	4	0
Saint Lucia	15	0	0	0
Belize	14	2	1	0
Curaçao	14	1	0	0
Eswatini	14	0	0	0
Grenada	14	0	0	0
Botswana	13	1	0	0
Saint Kitts and Nevis	12	0	0	0
Saint Vincent and the Grenadines	12	0	0	0
Central African Republic	11	0	0	0
Greenland	11	0	0	0
Montserrat	11	0	2	0
Northern Mariana Islands (Commonwealth of the)	11	2	0	0
Seychelles	11	0	0	0
Cabo Verde	10	1	3	0
Sierra Leone	10	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Suriname	10	1	0	0
Gambia	9	1	0	0
Nicaragua	9	1	0	0
Turks and Caicos Islands	9	1	0	0
Holy See	8	0	0	0
Mauritania	7	1	0	0
Saint Barthelemy	6	0	0	0
Timor-Leste	6	0	4	0
Bhutan	5	0	0	0
Burundi	5	0	0	0
Falkland Islands (Malvinas)	5	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
Bonaire, Sint Eustatius and Saba	3	0	0	0
British Virgin Islands	3	0	0	0
Papua New Guinea	2	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>1,844,913</b>	<b>117,021</b>	<b>71,785</b>	<b>5,369</b>



**From:** NGComms  
**To:** [redacted]  
**Subject:** 2020-04-16 NIR Health SitRep v88 - COVID-19  
**Date:** Thursday, 16 April 2020 9:12:29 PM  
**Attachments:** [2020-04-16 NIR Health SitRep v88 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 16 April 2020, there have been 6,465 laboratory confirmed cases of COVID-19 in Australia, including 63 deaths.
- Since yesterday's situation report, an additional 21 cases and no deaths, have been reported in Australia.
- To date, more than 380,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 16 April 2020, a total of 2,064,815 cases of COVID-19 have been reported globally, including 137,078 deaths.
- On 14 April 2020, the African Union, the World Food Programme and the World Health Organisation announced the same-day scheduled departure of the first United Nations 'Solidarity Flight' from Addis Ababa, Ethiopia, carrying COVID-19 medical supplies to all African Nations

The next Situation Report will be issued on 17 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

5.73 - Irrelevant information

A/g National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-16 1800 AEDT	<b>Version</b>	88
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-17 1800 AEDT
<b>Prepared By</b>	Irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>• <b>National Cabinet met today and:</b> <ul style="list-style-type: none"> <li>◦ <i>agreed that Australia will continue to progress a successful suppression/elimination strategy for the virus.</i></li> <li>◦ <i>confirmed new modelling that has confirmed that measures to suppress the virus have largely been successful in slowing and reversing the growth of cases in Australia.</i></li> <li>◦ <i>agreed to a framework for future actions to plan the pathway for next steps in responding to the virus and conditions for relaxation, agreeing to AHPPC's advice on seven precedent conditions to any further relaxations, with work to continue over the next four weeks.</i></li> <li>◦ <i>agreed with the AHPPC health advice that "on current evidence, schools can be fully open" along with additional advice from AHPPC provided school leaders to even further reduce the "relatively low risk" of transmission in schools.</i></li> <li>◦ <i>Agreed to a series of National Principles for School Education.</i></li> </ul> </li> <li>• <b>The Minister for Health announced \$3.3 million to establish a rapid coronavirus (COVID-19) Remote Point of Care Testing Program for remote and rural Aboriginal and Torres Strait Islander communities.</b> <ul style="list-style-type: none"> <li>◦ <i>There will be 83 testing sites in place across Indigenous communities most at risk.</i></li> <li>◦ <i>Sites will be confirmed rapidly, with the aim to finalise rollout by mid-May.</i></li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> </ul>

	<ul style="list-style-type: none"> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Health Minister has issued a number of directions and requirements relating to preventing the outbound travel of Australian citizens and permanent residents, restriction of the movement of cruise vessels, restricting movements into remote communities, preventing price gouging for essential goods such as personal protective equipment (PPE), and the closure of duty free stores (excluding food outlets and chemists) at airports.</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 16 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,468</b> cases of COVID-19, including 63 deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>21</b> cases and <b>no</b> deaths, have been reported in Australia.                 <ul style="list-style-type: none"> <li>On 15 April 2020, Victoria revised their number of cases by source of acquisition after undertaking a review of overseas travel. This resulted in 54 cases being reclassified from 'Locally acquired-contact of a confirmed case' to 'Overseas acquired'.</li> </ul> </li> <li>It has been around one month since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures.                 <ul style="list-style-type: none"> <li>The national rate of increase of new cases as reported over the last 24 hours was less than 1%, showing a steady decline over the last week. However, it is too soon to tell whether this trend will be sustained.</li> </ul> </li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 11% of cases have been hospitalised during their course of illness, with <b>18%</b> of these cases requiring admission to an ICU (2.0% of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0 to 100 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is 79 years (range 55 to 94 years).</li> <li><b>59%</b> were male and <b>41%</b> were female.</li> <li><b>Where data was available regarding comorbidities, 90% had one or more comorbidity and 57% had two or more comorbidities.</b> <ul style="list-style-type: none"> <li>The three most commonly reported co-morbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>380,000</b> tests have been conducted across Australia (as at 3pm) as</li> </ul>
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reported by the jurisdictions.

- o Cumulative per cent positive was 1.7% and the positivity in the past week are **0.7%**.

#### Source of infection

- To date, 65% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and the US.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - o *As reported by states and territories on 11 April 2020, there have been 21 known clusters or outbreaks of COVID-19 occurring in healthcare settings and approximately 481 cases in healthcare workers (data was not available for, with no cases occurring in the Northern Territory or South Australia). Where jurisdictions reported source of infection, 79% of healthcare workers acquired their infection outside of the healthcare settings, such as from travel overseas or a household contact.*
  - o Tasmania is reporting a cluster of 49 cases, including 35 healthcare workers, from the North West Regional Hospital.
  - o As of **15 April 2020**, there are **149** crew on board Ruby Princess who have tested positive for COVID-19. These **149** crew are not included in NSW case numbers. In addition, there are **13** Ruby Princess crew members with COVID-19 in health facilities in NSW.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 5 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, **16 April 2020**)**

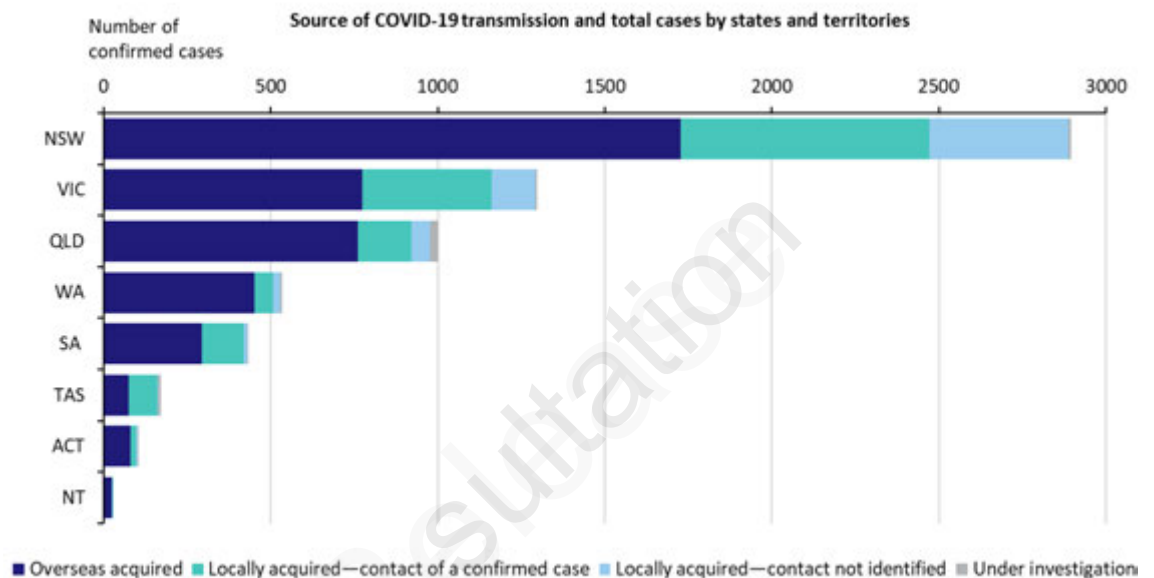
Confirmed COVID-19 cases	Australia	ACT <sup>a</sup>	NSW	NT	Qld	SA	Tas	Vic <sup>a</sup>	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<b>4,189</b>	80	1,727	24	761	295	76	<b>774</b>	<b>452</b>
Locally acquired - contact of confirmed case and/or in a known cluster	<b>1,572</b>	16	744	2	160	124	<b>84</b>	<b>386</b>	56
Locally acquired - contact not identified	<b>540</b>	0	350	0	39	4	0	<b>133</b>	14
Locally acquired - contact not identified, but case had interstate travel	<b>106</b>	5	67	1	18	6	2	0	7
Under investigation	<b>61</b>	2	9	0	<b>23</b>	<b>5</b>	<b>8</b>	<b>8</b>	<b>6</b>
<b>Total cases</b>	<b>6,468</b>	<b>103</b>	<b>2,897</b>	<b>27</b>	<b>1,001</b>	<b>434</b>	<b>170</b>	<b>1,301</b>	<b>535</b>
<b>Deaths (of total)</b>	63	3	25	0	5	4	6	14	6
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<b>21 (0%)</b>	0 (0%)	11 (0%)	0 (0%)	<b>2 (0%)</b>	<b>1 (0%)</b>	<b>2 (1%)</b>	<b>2 (0%)</b>	<b>3 (1%)</b>
Change in the last 72hrs before (%change)	<b>109 (2%)</b>	<b>0 (0%)</b>	34 (1%)	0 (0%)	<b>14 (1%)</b>	<b>3 (1%)</b>	<b>26 (18%)</b>	<b>20 (2%)</b>	<b>12 (2%)</b>
Average daily increase over the past three days (compound)	<b>0.6%</b>	<b>0.0%</b>	0.4%	0.0%	<b>0.5%</b>	<b>0.2%</b>	<b>5.8%</b>	<b>0.5%</b>	<b>0.8%</b>
Increase over the past week	<b>365</b>	<b>3</b>	124	-	<b>48</b>	13	<b>64</b>	<b>73</b>	<b>40</b>

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

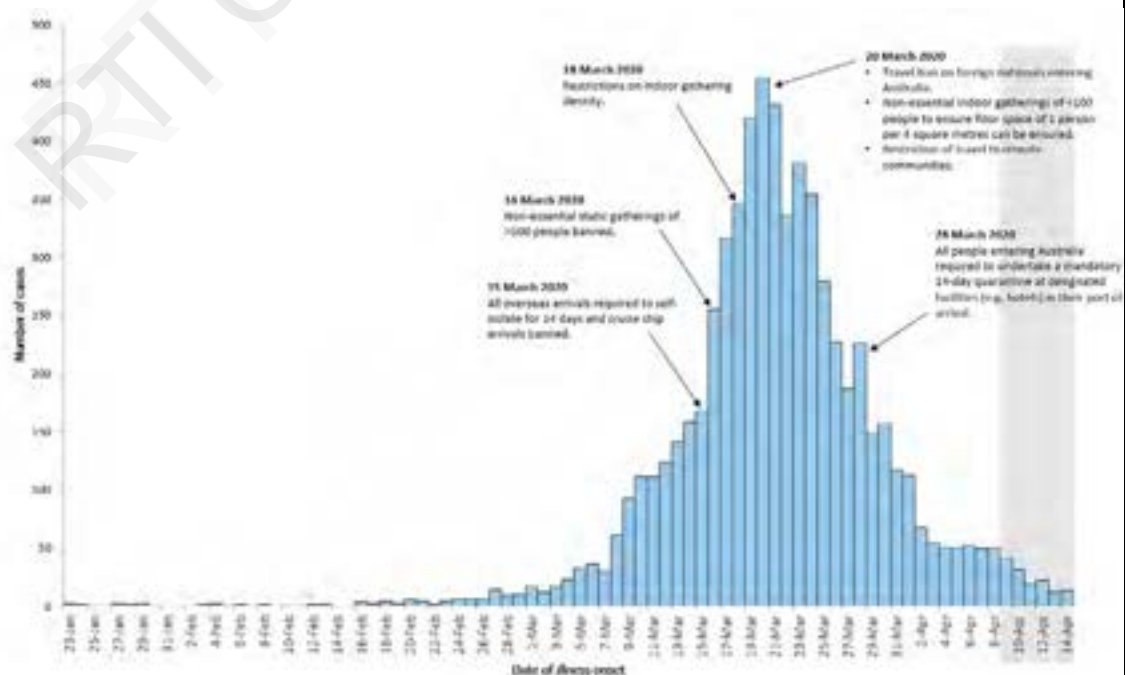
<sup>a</sup> On 12 April 2020 ACT has reduced the number of cases by 1, due to subsequent investigations demonstrating that an individual did not have COVID-19.

<sup>^</sup> On 15 April 2020, Victoria revised their number of cases by source of acquisition after undertaking a review of overseas travel. This resulted in 54 cases being reclassified from 'Locally acquired-contact of a confirmed case' to 'Overseas acquired'.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 16 April 2020**

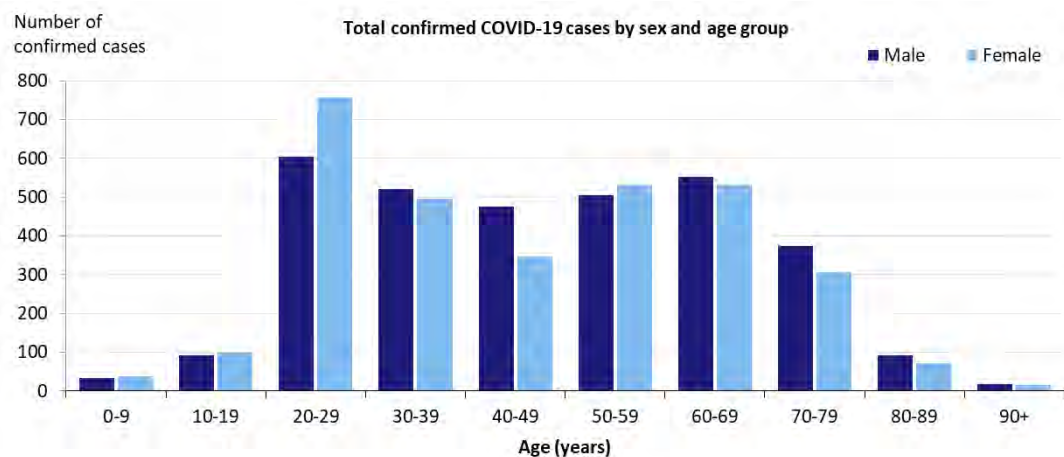


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 16 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 16 April 2020**



#### International Situation (as at 1500 hrs, 16 April 2020)

- A total of **2,064,815** cases of COVID-19 have been reported globally, including **137,078** deaths (Source: Johns Hopkins University, as at 1500hrs on 16 April 2020).
- The majority of deaths are from the United States of America (19%), Italy (**17%**), Spain (15%), and France (13%) (Source: WHO Situation Report).

#### Recent reporting of cases and deaths

- A total of **82,534** new cases, including **10,356** deaths, of COVID-19 have been reported since yesterday's Situation Report (Source: Johns Hopkins).
  - Based on the number of reported cases globally, the case fatality rate is approximately **6.4%** (Source: WHO Situation Report). The risk of death reportedly increases with age.
  - *Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting 469 deaths and a case fatality rate of 9.1%.*
    - *Indonesia is aiming to increase the number of tests completed daily to 10,000. However, media outlets are reporting that the government was looking to procure reagents from other countries as Indonesia's current stock of reagents would only last a week.*

**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 86 of 15 April 2020**



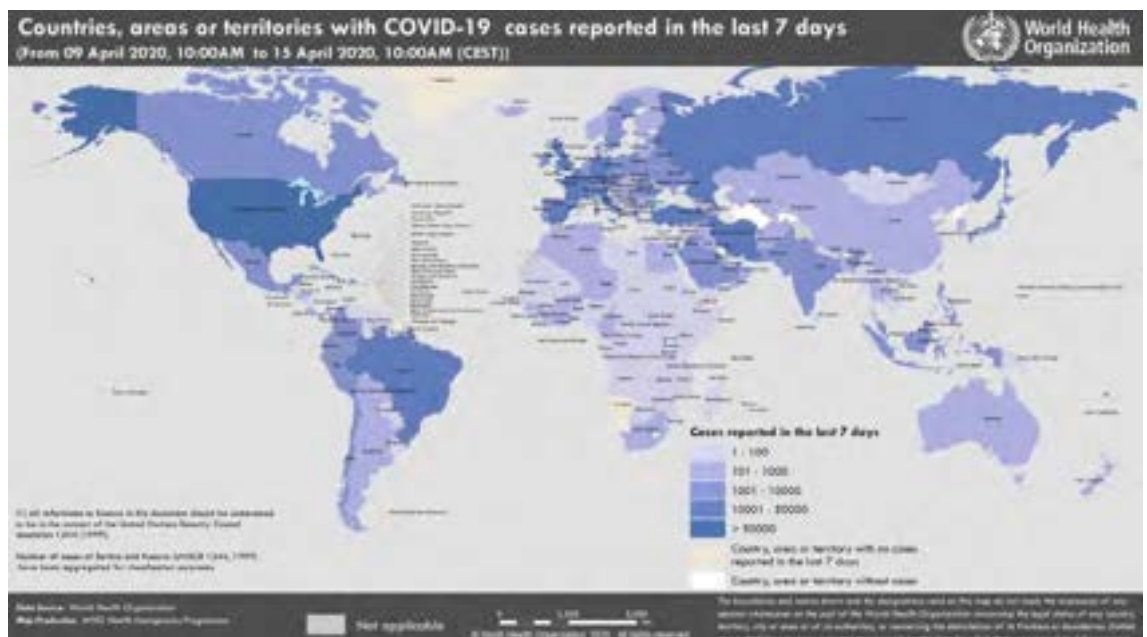


Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 15 April 2020

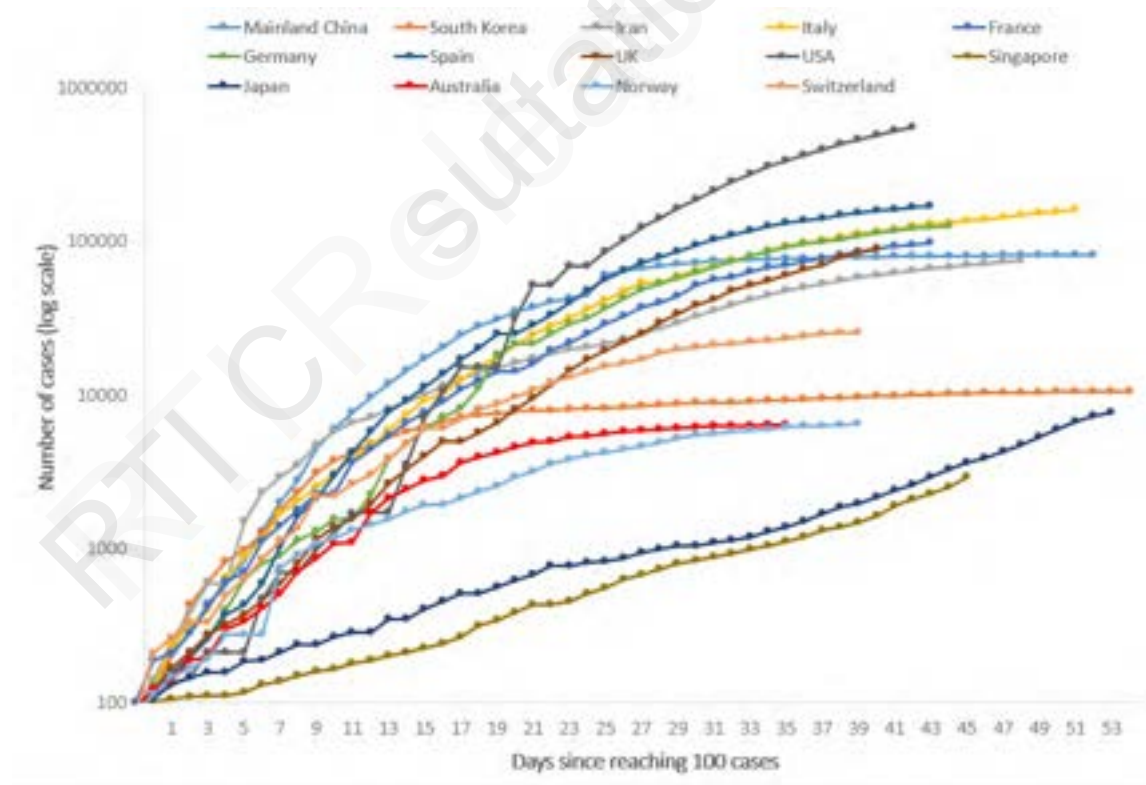
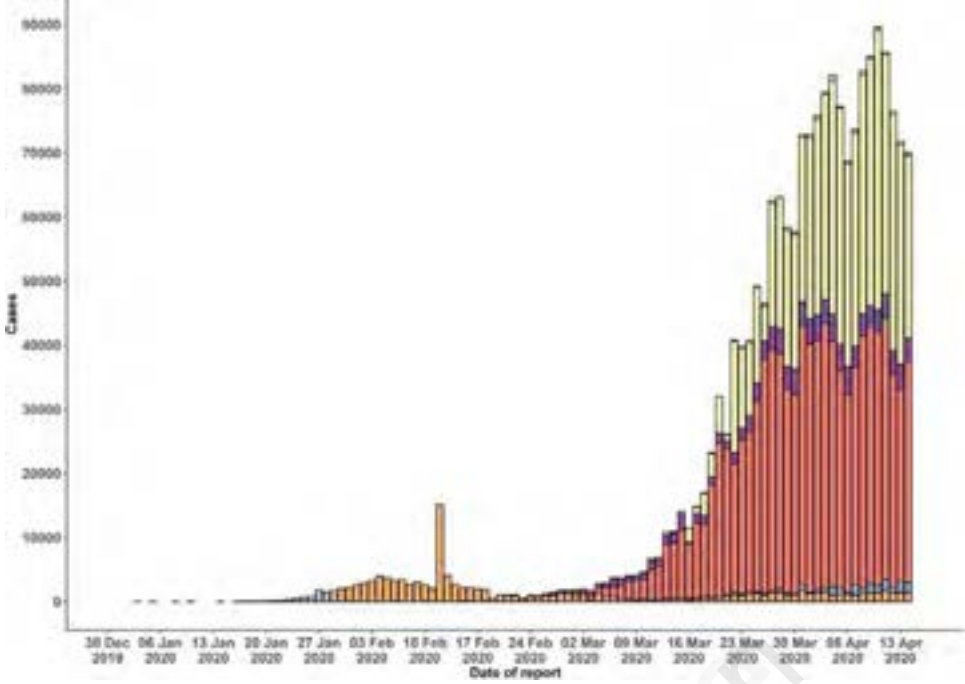


Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 86 of 15 April 2020



	
International response	<p><b>WHO</b></p> <ul style="list-style-type: none"> <li>On 15 April 2020, the Director-General advised that WHO is reviewing the impact of any withdrawal of US funding and will work to fill any financial gaps that this may create.</li> <li>WHO launched an online course on how to put on and remove personal protective equipment.</li> <li>On 14 April 2020, the African Union, the World Food Programme (WFP) and the WHO announced the same-day scheduled departure of the first UN 'Solidarity Flight' from Addis Ababa, Ethiopia, carrying COVID-19 medical supplies to all African Nations.</li> <li>The United Nations Office for Coordination of Humanitarian Affairs (OCHA) launched the global appeal to raise \$2 billion for the COVID-19 response.             <ul style="list-style-type: none"> <li>The WFP is seeking US\$350 million, of which only 24% has been realised (\$US84 million), to establish global humanitarian hubs, such as the aforementioned in Dubai.</li> </ul> </li> </ul>

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) <i>has moved location</i> and remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>

QLD Health	<ul style="list-style-type: none"> <li>• CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>• The State Health Emergency Contact Centre is activated.</li> <li>• COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>• The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>• Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>• Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>• GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>• On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>• Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>• A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>• Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>• All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>• <i>Execution of the exit plan commenced Saturday 11 April for travelers from other states who have completed isolation within Perth Hotels.</i></li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>• WA closed the state borders at midnight on 5 April 2020. WA residents travelling from interstate and FIFO workers have to self-isolate for 14 days.</li> <li>• Enquiries line to keep the community informed about COVID-19 coronavirus launched (132 68 43).</li> <li>• The Chief Health Officer has approved an Emergency Notice under the Public Health Act to amend prescription rules for telehealth consults conducted during COVID-19.</li> <li>• As at 14 April 2020, legislation to support tenants and landlords of both commercial and residential tenancies are being introduced into State Parliament.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild

disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,064,815) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 16 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,745	3,352	49	1
Hong Kong SAR	1,017	4	4	0
Taiwan	395	6	2	0
Macau SAR	45	0	0	0
United States of America	578,268	23,476	24,446	1,504
Spain	172,541	18,056	3,045	567
Italy	162,488	21,069	2,972	604
Germany	127,584	3,254	2,486	285
France	102,533	15,708	5,483	762
The United Kingdom	93,877	12,107	5,252	778

Iran (Islamic Republic of)	74,877	4,683	1,574	98
Turkey	65,111	1,403	4,062	107
Belgium	31,119	4,157	530	254
Netherlands	27,419	2,945	868	122
Canada	26,146	823	1,360	89
Switzerland	25,753	900	254	15
Russian Federation	24,490	198	3,388	28
Brazil	23,430	1,328	1,261	105
Portugal	17,448	567	514	32
Austria	14,234	384	191	16
Israel	11,868	117	633	7
Ireland	11,479	406	832	41
Sweden	11,445	1,033	497	114
India	11,439	377	1,076	38
Republic of Korea	10,591	225	27	3
Japan	8,100	119	455	10
Chile	7,917	92	392	10
Ecuador	7,603	369	74	14
Peru	7,519	193	0	0
Poland	7,202	263	268	18
Romania	6,879	344	246	26
Norway	6,566	127	78	13
Denmark	6,511	299	193	14
Australia	6,468	63	21	0
Czechia	6,141	161	82	18
Pakistan	5,988	107	272	11
Saudi Arabia	5,369	73	435	8
Philippines	5,223	335	291	20
Mexico	5,014	332	353	36
Malaysia	4,987	82	170	5
United Arab Emirates	4,933	28	412	3
Indonesia	4,839	459	282	60
Serbia	4,465	94	411	9
Ukraine	3,764	108	392	10
Panama	3,472	94	72	7
Qatar	3,428	7	197	0
Luxembourg	3,307	69	15	0
Dominican Republic	3,286	183	119	6
Belarus	3,281	33	362	4
Singapore	3,252	10	334	1
Finland	3,161	64	97	5
Colombia	2,852	112	76	3
Thailand	2,643	43	30	2
South Africa	2,415	27	143	0
Egypt	2,350	178	160	14
Argentina	2,336	101	84	6

Greece	2,170	101	25	2
Algeria	2,070	326	87	13
Republic of Moldova	1,934	41	222	5
Morocco	1,888	126	125	0
Iceland	1,720	8	9	0
Croatia	1,704	31	54	6
Hungary	1,579	134	67	12
Bahrain	1,528	7	166	0
Iraq	1,400	78	22	0
Estonia	1,373	31	41	3
Kuwait	1,355	3	55	1
Kazakhstan	1,275	12	184	0
Slovenia	1,220	56	8	1
Uzbekistan	1,214	4	160	0
Azerbaijan	1,197	13	49	1
Bosnia and Herzegovina	1,086	40	52	2
New Zealand	1,078	9	6	0
Lithuania	1,070	24	0	0
Armenia	1,067	16	28	2
Bangladesh	1,012	46	209	7
Puerto Rico	923	45	20	0
Oman	910	4	97	0
North Macedonia	908	44	54	6
Cameroon	855	15	52	5
Slovakia	835	2	66	0
Afghanistan	770	25	105	3
Cuba	766	21	40	0
Tunisia	747	34	21	0
Bulgaria	713	35	28	3
International conveyance (Diamond Princess)	712	12	0	0
Cyprus	695	17	33	0
Andorra	659	31	8	2
Latvia	657	5	2	0
Lebanon	641	21	9	1
Côte d'Ivoire	638	6	12	0
Ghana	636	8	70	0
Costa Rica	612	3	17	0
Niger	570	14	22	1
Burkina Faso	515	28	18	1
Uruguay	483	8	-29	1
Albania	475	24	0	1
Kyrgyzstan	449	5	19	0
Honduras	407	26	10	1
Jordan	397	7	6	0
Malta	393	3	9	0
Réunion	391	0	0	0

Kosovo	387	8	10	0
San Marino	372	36	1	0
Djibouti	363	2	65	0
Guinea	363	0	44	0
Bolivia (Plurinational State of)	354	28	24	1
Nigeria	343	10	0	0
Mauritius	324	9	0	0
Georgia	306	3	10	0
Senegal	299	2	8	0
Montenegro	288	4	14	0
occupied Palestinian territory	288	2	14	0
Viet Nam	266	0	1	0
Democratic Republic of the Congo	254	21	13	1
Isle of Man	242	2	14	0
Sri Lanka	233	7	15	0
Guernsey	219	6	1	0
Jersey	217	4	4	0
Mayotte	217	3	10	0
Kenya	216	9	8	0
Faroe Islands	184	0	0	0
Venezuela (Bolivarian Republic of)	181	9	0	0
Guatemala	167	5	11	0
Paraguay	159	7	12	1
Martinique	157	8	0	0
El Salvador	149	6	12	0
Guadeloupe	145	8	2	0
Brunei Darussalam	136	1	0	0
Guam	135	5	1	0
Rwanda	134	0	7	0
Gibraltar	129	0	0	0
Mali	123	10	7	1
Cambodia	122	0	0	0
Trinidad and Tobago	113	8	0	0
Madagascar	110	0	4	0
Monaco	93	0	0	0
Aruba	92	0	0	0
French Guiana	88	0	0	0
Ethiopia	82	3	8	0
Liechtenstein	81	1	1	0
Gabon	80	1	23	0
Togo	77	3	1	0
Congo	74	5	0	0
Myanmar	74	4	12	0
Jamaica	73	4	1	0
Barbados	72	4	1	0
Somalia	60	2	0	0

Liberia	59	6	8	0
Bermuda	57	5	0	1
French Polynesia	55	0	0	0
Cayman Islands	54	1	1	0
Uganda	54	0	0	0
United Republic of Tanzania	53	3	4	0
Sint Maarten	52	9	0	0
United States Virgin Islands	51	1	0	0
Bahamas	49	8	2	0
Guyana	47	6	0	0
Zambia	45	2	0	0
Equatorial Guinea	41	0	20	0
Guinea-Bissau	40	0	1	0
Haiti	40	3	0	0
Benin	35	1	0	0
Libya	35	1	9	0
Saint Martin	35	2	2	0
Eritrea	34	0	0	0
Sudan	32	5	3	1
Mongolia	30	0	13	0
Syrian Arab Republic	29	2	4	0
Mozambique	28	0	7	0
Antigua and Barbuda	23	2	0	0
Chad	23	0	0	0
Maldives	20	0	0	0
Angola	19	2	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	4	0
New Caledonia	18	0	0	0
Zimbabwe	18	3	1	0
Dominica	16	0	0	0
Fiji	16	0	0	0
Malawi	16	2	0	0
Namibia	16	0	0	0
Nepal	16	0	0	0
Eswatini	15	0	1	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Grenada	14	0	0	0
Botswana	13	1	0	0
Northern Mariana Islands (Commonwealth of the)	13	2	2	0
Saint Kitts and Nevis	12	0	0	0
Saint Vincent and the Grenadines	12	0	0	0
Central African Republic	11	0	0	0
Falkland Islands (Malvinas)	11	0	6	0
Greenland	11	0	0	0



Montserrat	11	0	0	0
Seychelles	11	0	0	0
Sierra Leone	11	0	1	0
Cabo Verde	10	1	0	0
Suriname	10	1	0	0
Turks and Caicos Islands	10	1	1	0
Gambia	9	1	0	0
Nicaragua	9	1	0	0
Holy See	8	0	0	0
Mauritania	7	1	0	0
Saint Barthelemy	6	0	0	0
Timor-Leste	6	0	0	0
Bhutan	5	0	0	0
Burundi	5	0	0	0
Bonaire, Sint Eustatius and Saba	4	0	1	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Papua New Guinea	2	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>1,914,968</b>	<b>123,012</b>	<b>70,024</b>	<b>5,989</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #89 Novel Coronavirus (COVID-19)  
**Date:** Friday, 17 April 2020 8:12:32 PM  
**Attachments:** [2020-04-17 NIR Health SitRep v89 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 17 April 2020, there have been 6,523 laboratory confirmed cases of COVID-19 in Australia, including 65 deaths.
- Since yesterday's situation report, an additional 55 cases and 2 deaths, have been reported in Australia.
- To date, more than 391,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 17 April 2020, a total of 2,158,594 cases of COVID-19 have been reported globally, including 145,533 deaths.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting 496 deaths and a case fatality rate of 9.0%.
- On 16 April 2020, the WHO Regional Director for Europe released a statement 'transition to a 'new' normal during the COVID-19 pandemic must be guided by public health principles'.

The next Situation Report will be issued on 18 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

[redacted]

National Incident Room  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-17 1800 AEDT	<b>Version</b>	89
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-18 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>National Cabinet met <i>16 April 2020</i> and:               <ul style="list-style-type: none"> <li><i>Noted</i> new modelling that has confirmed that measures to suppress the virus have largely been successful in slowing and reversing the growth of cases in Australia.</li> <li>Agreed to a framework for future actions to plan the pathway for next steps in responding to the virus and conditions for relaxation, agreeing to AHPPC's advice on seven precedent conditions to any further relaxations, with work to continue over the next four weeks.</li> <li>Agreed with the AHPPC health advice that "on current evidence, schools can be fully open" along with additional advice from AHPPC provided school leaders to even further reduce the "relatively low risk" of transmission in schools.</li> <li>Agreed to a series of National Principles for School Education.</li> </ul> </li> <li><i>On 17 April 2020 the Minister for Aged Care and Senior Australians announced immediate testing for COVID-19 at three aged care facilities across Tasmania's North West Coast.</i> <ul style="list-style-type: none"> <li><i>a health care worker from the North West Regional Hospital and Private Hospital who had also worked at the three aged care facilities tested positive for COVID-19.</i></li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> </ul>

	<ul style="list-style-type: none"> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li><i>The Health Minister has made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</i></li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 17 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,523</b> cases of COVID-19, including <b>65</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2). <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>55</b> cases and <b>2</b> deaths, have been reported in Australia.</li> <li>It has been around one month since Australia implemented restrictions on international arrivals and put in place stricter social distancing measures. <ul style="list-style-type: none"> <li><i>There were 55 new cases reported over the last 24 hours. The total number of cases reported over the last 7 days was 320, which is down from the 853 reported in the week prior. These numbers indicate a steady decline over the last fortnight.</i></li> </ul> </li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately <b>12%</b> of cases have been hospitalised during their course of illness, with 18% of these cases requiring admission to an ICU (2.0% of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0 to <b>101</b> years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported: <ul style="list-style-type: none"> <li>The median age is <b>78.5</b> years (range <b>42</b> to <b>95</b> years).</li> <li><b>58%</b> were male and <b>42%</b> were female.</li> <li>Where data was available regarding comorbidities, <b>88%</b> had one or more comorbidity and <b>59%</b> had two or more comorbidities. <ul style="list-style-type: none"> <li>The three most commonly reported co-morbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>391,000</b> tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions. <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.7% and the positivity in the past week are <b>0.6%</b>.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, 65% of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and the US.</li> </ul>
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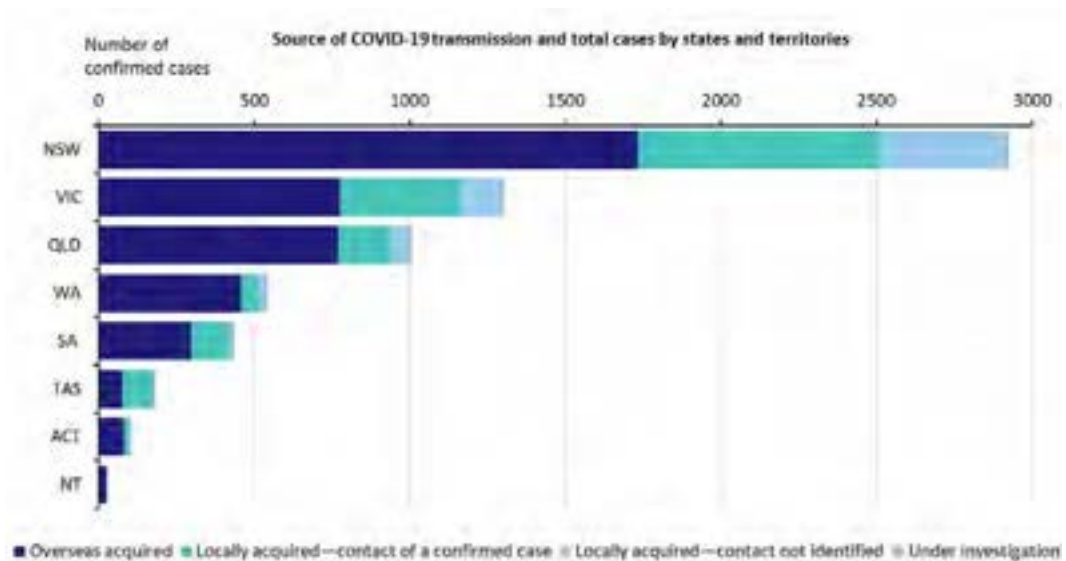
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - Victoria has identified **60** clusters. Tasmania is reporting a cluster of **95** cases, including **62** healthcare workers, from the North West Regional Hospital (as of 16 April 2020).
  - *In relation to reported cases among healthcare workers*, 79% have acquired their infection outside of the healthcare settings, such as from travel overseas or a household contact.
  - As of 16 April 2020, there are 153 crew on board Ruby Princess who have tested positive for COVID-19. Whilst the 153 crew remain on board they are not included in NSW or national case numbers. In addition, there are **13** Ruby Princess crew members with COVID-19 in health facilities in NSW.
- Epidemiological Resources
- *A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 12 April 2020.*
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 17 April 2020)**

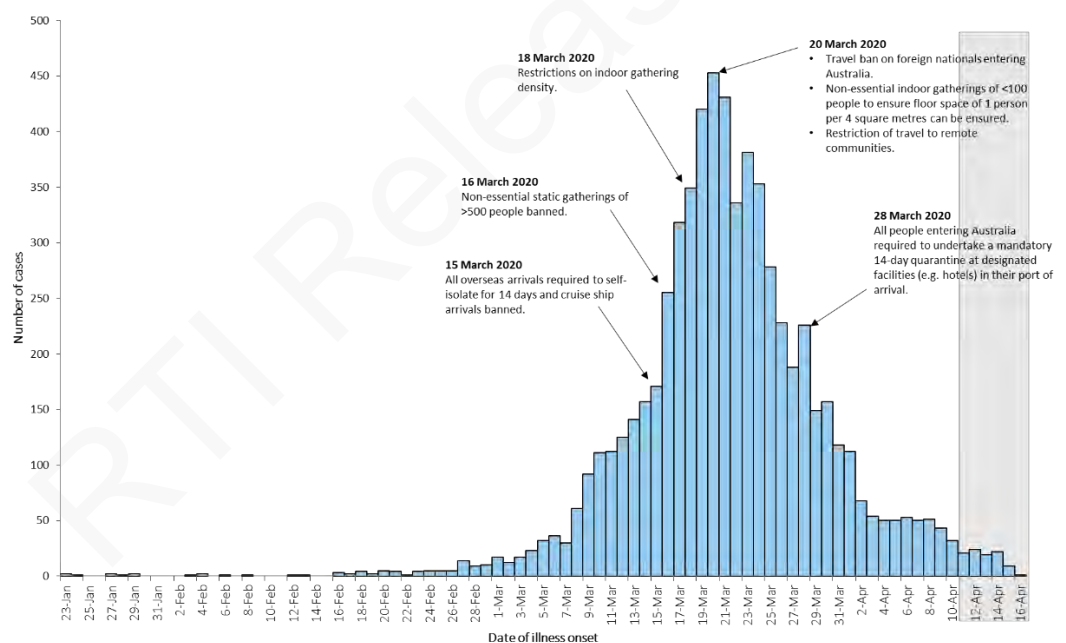
Confirmed COVID-19 cases	Australia	ACT <sup>a</sup>	NSW	NT	Qld	SA	Tas	Vic <sup>a</sup>	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,209	80	1,733	24	769	296	76	773	458
Locally acquired - contact of confirmed case and/or in a known cluster	1,624	16	770	2	171	124	96	389	56
Locally acquired - contact not identified	537	0	347	0	36	4	0	136	14
Locally acquired - contact not identified, but case had interstate travel	105	5	67	1	17	6	2	0	7
Under investigation	48	2	9	0	14	5	8	4	6
<b>Total cases</b>	<b>6,523</b>	<b>103</b>	<b>2,926</b>	<b>27</b>	<b>1,007</b>	<b>435</b>	<b>182</b>	<b>1,302</b>	<b>541</b>
<b>Deaths (of total)</b>	<b>65</b>	<b>3</b>	<b>25</b>	<b>0</b>	<b>5</b>	<b>4</b>	<b>7</b>	<b>14</b>	<b>7</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	55 (1%)	0 (0%)	29 (1%)	0 (0%)	6 (1%)	1 (0%)	12 (7%)	1 (0%)	6 (1%)
Change in the last 72hrs before (%change)	123 (2%)	0 (0%)	56 (2%)	0 (0%)	9 (1%)	2 (0%)	31 (21%)	11 (1%)	14 (3%)
Average daily increase over the past three days (compound)	0.6%	0.0%	0.6%	0.0%	0.3%	0.2%	6.5%	0.3%	0.9%
Increase over the past week	320	-	104	-	42	7	71	61	35

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 17 April 2020**

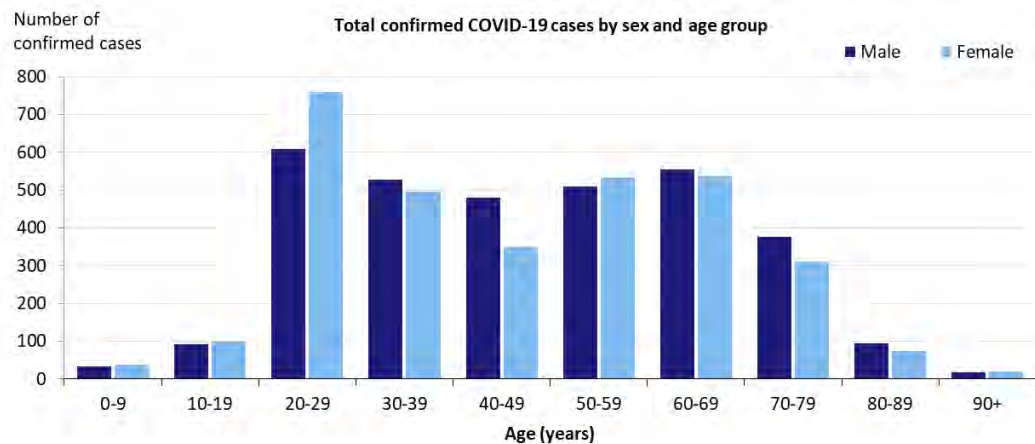


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 17 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 17 April 2020**



**International Situation (as at 1500 hrs, 17 April 2020)**

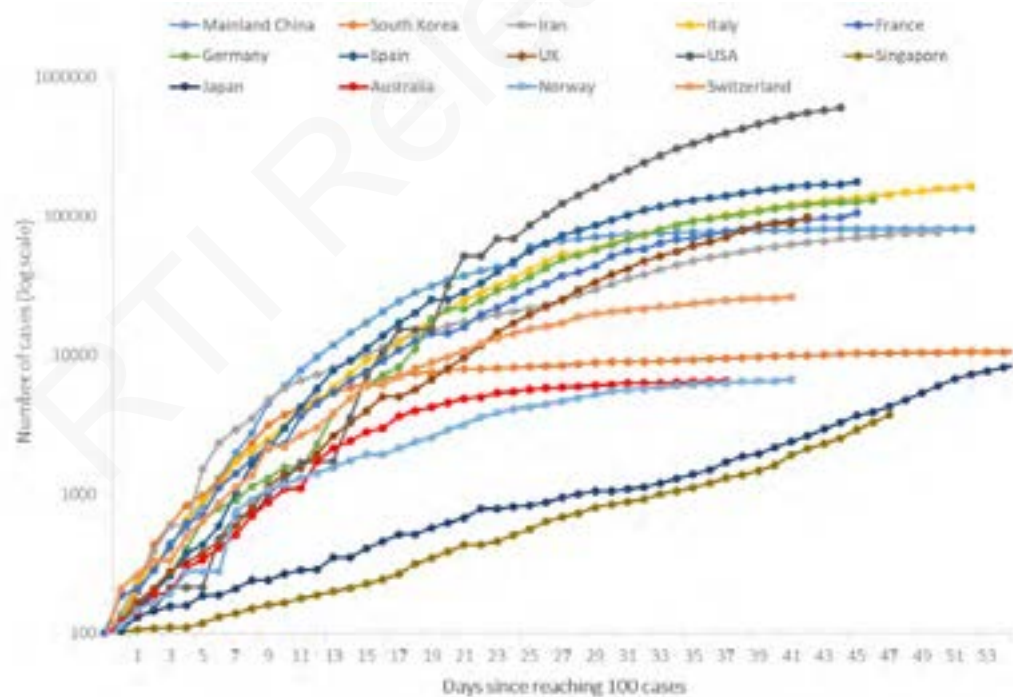
- A total of **2,158,594** cases of COVID-19 have been reported globally, including **145,533** deaths (Johns Hopkins University).
  - A total of **30,721** new cases, including **4,079** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (19%), Italy (17%), Spain (15%), and France (13%) (Source: WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately **6.6%** (Source: WHO Situation Report). The risk of death reportedly increases with age.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **496** deaths and a case fatality rate of **9.0%**. **The government has reported 5,516 cases to date.**
  - Indonesia is aiming to increase the number of tests completed daily **from 2,500 to 10,000**. However, media outlets are reporting that the government was looking to procure reagents from other countries as Indonesia's current stock of reagents would only last a week.
  - **On 14 April 2020, Indonesia disclosed for the first time that it had 10,482 patients with COVID-19 symptoms, half of whom tested positive. Previously, only confirmed cases were being reported. Indonesia has recently reported there are more than 165,000 potential close contacts of confirmed cases.**



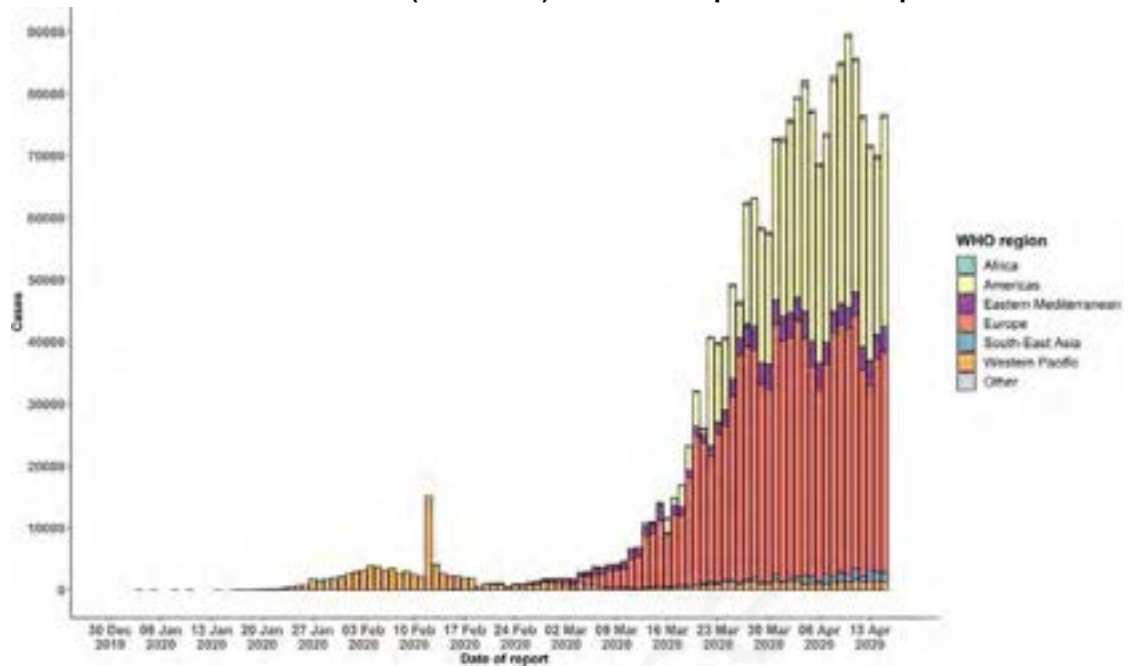
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 87 of 16 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 17 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 87 of 16 April 2020**



#### International response

#### WHO

- On 16 April 2020, the WHO Regional Director for Europe released a statement 'transition to a 'new' normal during the COVID-19 pandemic must be guided by public health principles':
  - Case numbers across the Europe Region continue to climb
  - In the past 10 days, the number of cases reported in Europe has nearly doubled to close to 1 million.
  - About 50% of the global burden of COVID-19 is in the Europe Region and over 84,000 people in Europe have lost their lives.
  - New WHO Regional Office for Europe guidance will be released early next week.
  - Any step to ease restrictions and transition must ensure that:
    1. evidence shows COVID-19 transmission is controlled;
    2. public health and health system capacities including hospitals are in place to identify, isolate, test, trace contacts and quarantine them;
    3. outbreak risks are minimized in high-vulnerability settings – particularly in elderly homes, mental health facilities and people residing in crowded places;
    4. workplace preventive measures are established – with physical distancing, handwashing facilities, respiratory etiquette in place;
    5. importation risks can be managed; and
    6. communities have a voice and are engaged in the transition.
- On 15 April 2020, the Director-General advised that WHO is reviewing the impact of any withdrawal of US funding and will work to fill any financial gaps that this may create.
- WHO launched an online course on how to put on and remove **PPE**.
- On 14 April 2020, the African Union, the World Food Programme (WFP) and the WHO announced the same-day scheduled departure of the first UN 'Solidarity Flight' from Addis Ababa, Ethiopia, carrying COVID-19 medical supplies to all African Nations.
- The United Nations Office for Coordination of Humanitarian Affairs (OCHA) launched the global appeal to raise \$2 billion for the COVID-19 response.

## 2. Health Responses by States and Territories

#### ACT Health

- The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).
- On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).
- The ACT Health Emergency Control Centre (HECC) has moved location and remains activated.

	<ul style="list-style-type: none"> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre is activated.</li> <li>COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>Execution of the exit plan commenced Saturday 11 April for travelers from other states who have completed isolation within Perth Hotels.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>WA closed the state borders at midnight on 5 April 2020. WA residents travelling from interstate and FIFO workers have to self-isolate for 14 days.</li> <li>Enquiries line to keep the community informed about COVID-19 coronavirus launched (132 68 43).</li> <li>The Chief Health Officer has approved an Emergency Notice under the Public Health Act to amend prescription rules for telehealth consults conducted during COVID-19.</li> <li><i>On 11 April 2020, the exit plan for travellers from other states who have completed isolation within Perth Hotels commenced.</i></li> <li>As at 14 April 2020, legislation to support tenants and landlords of both commercial and residential tenancies are being introduced into State Parliament.</li> <li><i>As at 16 April 2020, GPs can now refer patients to private pathology providers for COVID-19 testing.</i> <ul style="list-style-type: none"> <li><i>COVID-19 private collection centres are scheduled to begin operating on 17 April 2020.</i></li> </ul> </li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

#### 4. Appendix 1

##### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,158,594) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 17 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	83,797	3,352	52	0
Hong Kong SAR	1,018	4	1	0
Taiwan	395	6	0	0
Macau SAR	45	0	0	0
United States of America	604,070	25,871	25,802	2,395
Spain	177,633	18,579	5,092	523
Italy	165,155	21,647	2,667	578
Germany	130,450	3,569	2,866	315
France	105,155	17,146	2,622	1,438
The United Kingdom	98,480	12,868	4,603	761
Iran (Islamic Republic of)	76,389	4,777	1,512	94
Turkey	69,392	1,518	4,281	115
Belgium	33,573	4,440	2,454	283
Netherlands	28,153	3,134	734	189
Russian Federation	27,938	232	3,448	34
Canada	27,540	954	1,394	131
Switzerland	26,336	973	583	73
Brazil	25,262	1,532	1,832	204
Portugal	18,091	599	643	32
Austria	14,370	393	136	9
Ireland	12,547	444	1,068	38
India	12,380	414	941	37
Israel	12,200	126	332	9
Sweden	11,927	1,203	482	170
Republic of Korea	10,613	229	22	4
Peru	10,303	230	2,784	37
Japan	8,582	136	482	17
Chile	8,273	94	356	2
Ecuador	7,858	388	255	19
Poland	7,582	286	380	23
Romania	7,216	372	337	28
Denmark	6,681	309	170	10
Norway	6,677	130	111	3
Pakistan	6,505	124	517	17
Australia	6,523	65	55	2
Czechia	6,303	166	162	5

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Saudi Arabia	5,862	79	493	6
Philippines	5,453	349	230	14
Mexico	5,399	406	385	74
United Arab Emirates	5,365	33	432	5
Indonesia	5,136	469	297	10
Malaysia	5,072	83	85	1
Serbia	4,873	99	408	5
Ukraine	4,162	115	398	7
Belarus	3,728	36	447	3
Qatar	3,711	7	283	0
Singapore	3,699	10	447	0
Dominican Republic	3,614	189	328	6
Panama	3,574	95	102	1
Luxembourg	3,373	69	66	0
Finland	3,237	72	76	8
Colombia	2,979	127	127	15
Thailand	2,672	46	29	3
South Africa	2,506	34	91	7
Egypt	2,505	183	155	5
Argentina	2,477	108	141	7
Greece	2,192	102	22	1
Algeria	2,160	336	90	10
Republic of Moldova	2,049	46	115	5
Morocco	2,024	127	136	1
Croatia	1,741	34	37	3
Iceland	1,727	8	7	0
Bahrain	1,677	7	149	0
Hungary	1,652	142	73	8
Iraq	1,415	79	15	1
Kuwait	1,405	3	50	0
Estonia	1,402	35	29	4
Uzbekistan	1,349	4	135	0
Kazakhstan	1,295	16	20	4
Azerbaijan	1,253	13	56	0
Slovenia	1,248	61	28	5
Bangladesh	1,231	50	219	4
Armenia	1,135	18	68	2
Bosnia and Herzegovina	1,116	41	30	1
Lithuania	1,091	29	21	5
New Zealand	1,084	9	6	0
Oman	1,019	4	109	0
North Macedonia	974	45	66	1
Puerto Rico	974	51	51	6
Slovakia	863	6	28	4



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Cameroon	855	17	0	2
Cuba	814	24	48	3
Afghanistan	794	29	24	4
Tunisia	780	35	33	1
Bulgaria	747	36	34	1
Cyprus	715	17	20	0
International conveyance (Diamond Princess)	712	12	0	0
Andorra	673	33	14	2
Latvia	666	5	9	0
Lebanon	658	21	17	0
Côte d'Ivoire	654	6	16	0
Ghana	636	8	0	0
Costa Rica	618	3	6	0
Niger	584	14	14	0
Burkina Faso	528	28	13	0
Albania	494	25	19	1
Uruguay	492	8	9	0
Kyrgyzstan	466	5	17	0
Djibouti	435	2	72	0
Honduras	419	31	12	5
Guinea	404	1	41	1
Jordan	401	7	4	0
Malta	399	3	6	0
Bolivia (Plurinational State of)	397	28	43	0
Kosovo	397	9	10	1
San Marino	393	36	21	0
Réunion	390	0	-1	0
Nigeria	373	11	30	1
Georgia	336	3	30	0
Mauritius	324	9	0	0
Senegal	314	2	15	0
occupied Palestinian territory	293	2	5	0
Montenegro	288	4	0	0
Democratic Republic of the Congo	267	22	13	1
Viet Nam	267	0	1	0
Isle of Man	254	2	12	0
Sri Lanka	238	7	5	0
Kenya	225	10	9	1
Guernsey	223	7	4	1
Mayotte	221	3	4	0
Jersey	217	6	0	2
Venezuela (Bolivarian Republic of)	193	9	12	0
Faroe Islands	184	0	0	0
Guatemala	180	5	13	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Paraguay	161	8	2	1
El Salvador	159	6	10	0
Martinique	158	8	1	0
Guadeloupe	145	8	0	0
Mali	144	13	21	3
Brunei Darussalam	136	1	0	0
Rwanda	136	0	2	0
Guam	135	5	0	0
Gibraltar	129	0	0	0
Cambodia	122	0	0	0
Congo	117	5	43	0
Trinidad and Tobago	114	8	1	0
Madagascar	110	0	0	0
Jamaica	105	5	32	1
French Guiana	95	0	7	0
Aruba	93	1	1	1
Monaco	93	0	0	0
United Republic of Tanzania	88	4	35	1
Gabon	87	1	7	0
Ethiopia	85	3	3	0
Myanmar	85	4	11	0
Liechtenstein	81	1	0	0
Somalia	80	5	20	3
Togo	77	3	0	0
Barbados	73	5	1	1
Liberia	59	6	0	0
Bermuda	57	5	0	0
French Polynesia	55	0	0	0
Uganda	55	0	1	0
Cayman Islands	54	1	0	0
Sint Maarten	53	9	1	0
Equatorial Guinea	51	0	10	0
United States Virgin Islands	51	1	0	0
Bahamas	49	8	0	0
Guyana	48	6	1	0
Libya	48	1	13	0
Zambia	48	2	3	0
Guinea-Bissau	43	0	3	0
Haiti	41	3	1	0
Benin	35	1	0	0
Eritrea	35	0	1	0
Saint Martin	35	2	0	0
Syrian Arab Republic	33	2	4	0
Sudan	32	5	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Mongolia	30	0	0	0
Mozambique	28	0	0	0
Chad	27	0	4	0
Antigua and Barbuda	23	2	0	0
Zimbabwe	23	3	5	0
Maldives	21	0	1	0
Angola	19	2	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Eswatini	16	0	1	0
Fiji	16	0	0	0
Malawi	16	2	0	0
Namibia	16	0	0	0
Nepal	16	0	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Grenada	14	0	0	0
Saint Kitts and Nevis	14	0	2	0
Botswana	13	1	0	0
Northern Mariana Islands (Commonwealth of the)	13	2	0	0
Sierra Leone	13	0	2	0
Saint Vincent and the Grenadines	12	0	0	0
Central African Republic	11	0	0	0
Falkland Islands (Malvinas)	11	0	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Cabo Verde	10	1	0	0
Suriname	10	1	0	0
Turks and Caicos Islands	10	1	0	0
Gambia	9	1	0	0
Nicaragua	9	1	0	0
Holy See	8	0	0	0
Mauritania	7	1	0	0
Saint Barthelemy	6	0	0	0
Timor-Leste	6	0	0	0
Bhutan	5	0	0	0
Burundi	5	0	0	0
Bonaire, Sint Eustatius and Saba	4	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
British Virgin Islands	3	0	0	0
Papua New Guinea	2	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>1,991,657</b>	<b>130,887</b>	<b>76,692</b>	<b>7,875</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #90 Novel Coronavirus (COVID-19)  
**Date:** Saturday, 18 April 2020 7:56:24 PM  
**Attachments:** [2020-04-18 NIR Health SitRep v90 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 18 April 2020, there have been 6,565 laboratory confirmed cases of COVID-19 in Australia, including 68 deaths.
- Since yesterday's situation report, an additional 42 cases and 3 deaths, have been reported in Australia.
- To date, more than 406,500 tests have been conducted across Australia.
- Today the Minister for Health, the Minister for Families and Social Services, and the Minister for the National Disability Insurance Scheme released the [Management and Operational Plan for COVID-19 for People with Disability](#).

#### Situation Overseas

- As at 1500 hrs 18 April 2020, a total of 2,243,710 cases of COVID-19 have been reported globally, including 154,215 deaths.
- Chinese authorities have performed a comprehensive review of COVID-19 data in Wuhan; the total number of cases has increased by 325 and the number of deaths has increased by 1,290 (total of 4,642 cumulative deaths).

The next Situation Report will be issued on 19 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [\[redacted\]](#) or [\[redacted\]](#) (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [\[redacted\]](#) by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

[\[redacted\]](#)

National Incident Room  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-18 1800 AEDT	<b>Version</b>	90
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-19 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 18 April 2020, the Minister for Health, the Minister for Families and Social Services, and the Minister for the National Disability Insurance Scheme released the <i>Management and Operational Plan for COVID-19 for People with Disability (the Plan)</i>.             <ul style="list-style-type: none"> <li>The Plan supports the objectives of the <u>Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)</u>.</li> </ul> </li> <li>The Disability Information Helpline is now active to provide information and referrals for people with disability who need help because of coronavirus, as well as for families, carers, support workers and services.             <ul style="list-style-type: none"> <li>The Helpline, 1800 643 787, is available Monday to Friday 8am to 8pm (AEST) and Saturday and Sunday 9am to 7pm (AEST), excluding national public holidays.</li> </ul> </li> <li>More information is available at <a href="http://www.dss.gov.au/disabilityhelp">www.dss.gov.au/disabilityhelp</a>, including Auslan and Easy Read materials.</li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> </ul>

	<ul style="list-style-type: none"> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Health Minister has made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 18 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,565</b> cases of COVID-19, including <b>68</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2). <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>42</b> cases and <b>3</b> deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>273</b>, which is down from the <b>744</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 18% of these cases requiring admission to an ICU (2.0% of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported: <ul style="list-style-type: none"> <li>The median age is 78.5 years (range 42 to 95 years).</li> <li><b>60%</b> were male and <b>40%</b> were female.</li> <li>Where data was available regarding comorbidities, <b>90%</b> had one or more comorbidities and 59% had two or more comorbidities. <ul style="list-style-type: none"> <li>The three most commonly reported co-morbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>406,500</b> tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions. <ul style="list-style-type: none"> <li>Cumulative per cent positive was <b>1.6%</b> and the positivity in the past week are <b>0.5%</b>.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, <b>around</b> 65% of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and the US.</li> <li>Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.</li> <li>Clusters have been reported in some jurisdictions:</li> </ul>
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- Victoria has identified 60 clusters. Tasmania is reporting a cluster of 95 cases, including 62 healthcare workers, from the North West Regional Hospital (as of 16 April 2020).
- In relation to reported cases among healthcare workers *nationally*, 79% have acquired their infection outside of the healthcare settings, such as from travel overseas or a household contact.
- As of 16 April 2020, there are 153 crew on board Ruby Princess who have tested positive for COVID-19. Whilst the 153 crew remain on board they are not included in NSW or national case numbers. In addition, there are 13 Ruby Princess crew members with COVID-19 in health facilities in NSW.
- Epidemiological Resources
- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 12 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 18 April 2020)**

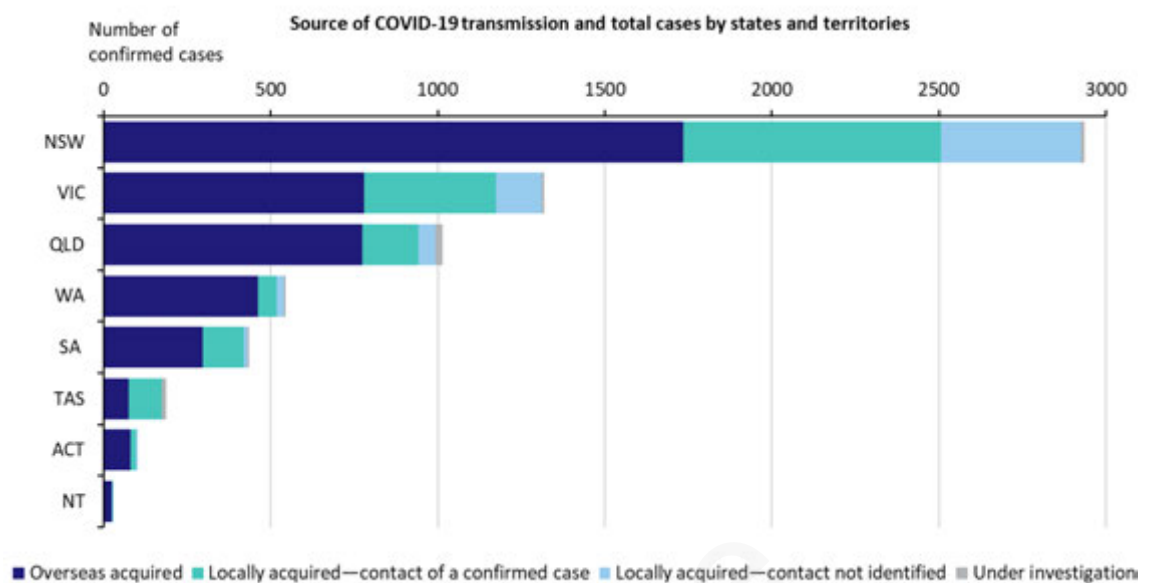
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld <sup>^</sup>	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,226	80	1,734	24	774	296	76	780	462
Locally acquired - contact of confirmed case and/or in a known cluster	1,632	17	773	2	168	124	97	395	56
Locally acquired - contact not identified	541	1	350	0	36	4	0	136	14
Locally acquired - contact not identified, but case had interstate travel	105	5	68	1	16	6	2	0	7
Under investigation	61	0	11	0	20	5	12	8	5
<b>Total cases</b>	<b>6,565</b>	<b>103</b>	<b>2,936</b>	<b>27</b>	<b>1,014</b>	<b>435</b>	<b>187</b>	<b>1,319</b>	<b>544</b>
<b>Deaths (of total)</b>	<b>68</b>	<b>3</b>	<b>26</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>8</b>	<b>14</b>	<b>7</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	42 (1%)	0 (0%)	10 (0%)	0 (0%)	7 (1%)	0 (0%)	5 (3%)	17 (1%)	3 (1%)
Change in the last 72hrs before (%change)	118 (2%)	0 (0%)	50 (2%)	0 (0%)	15 (2%)	2 (0%)	19 (11%)	20 (2%)	12 (2%)
Average daily increase over the past three days (compound)	0.6%	0.0%	0.6%	0.0%	0.5%	0.2%	3.7%	0.5%	0.7%
Increase over the past week	273	-	79	-	40	6	64	54	30

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

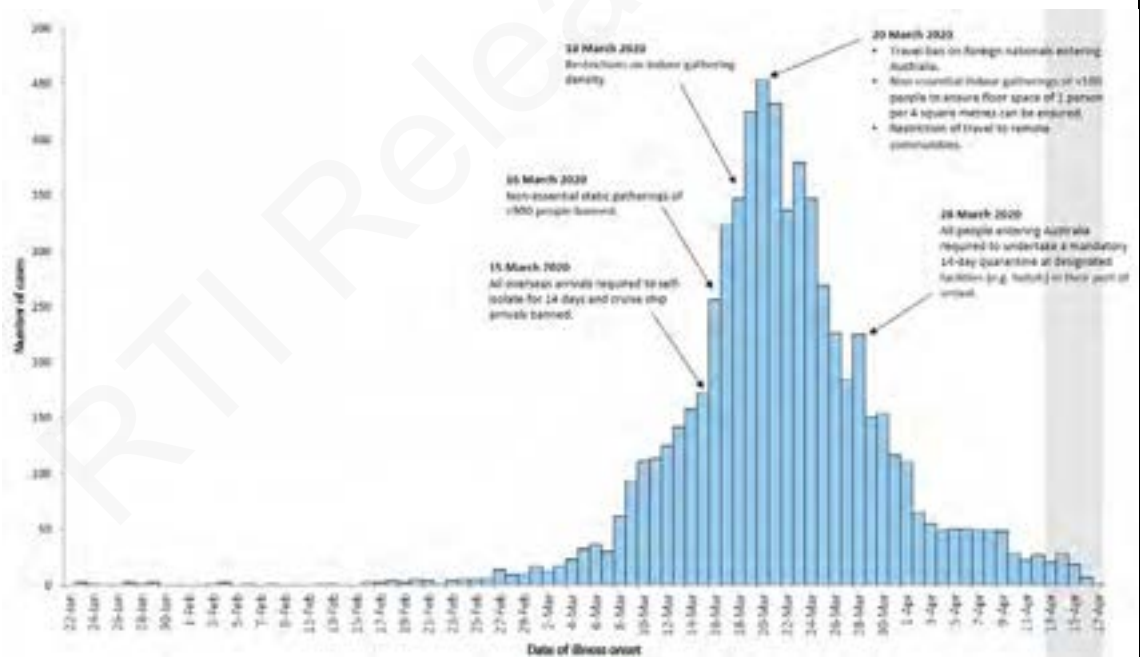
<sup>^</sup> On 18 April 2020, Queensland revised their number of cases by source of acquisition after undertaking data cleaning. This resulted in 3 less cases classified as 'Locally acquired-contact of a confirmed case' and 1 less case classified as 'Locally acquired - contact not identified, but case had interstate travel' from previous reporting. It is unknown what these cases were reclassified to.



**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 18 April 2020**

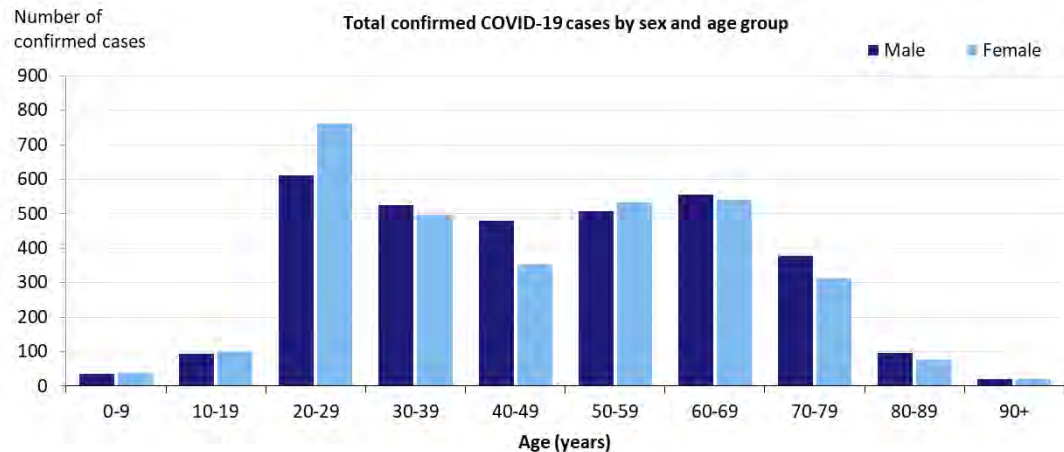


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 18 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

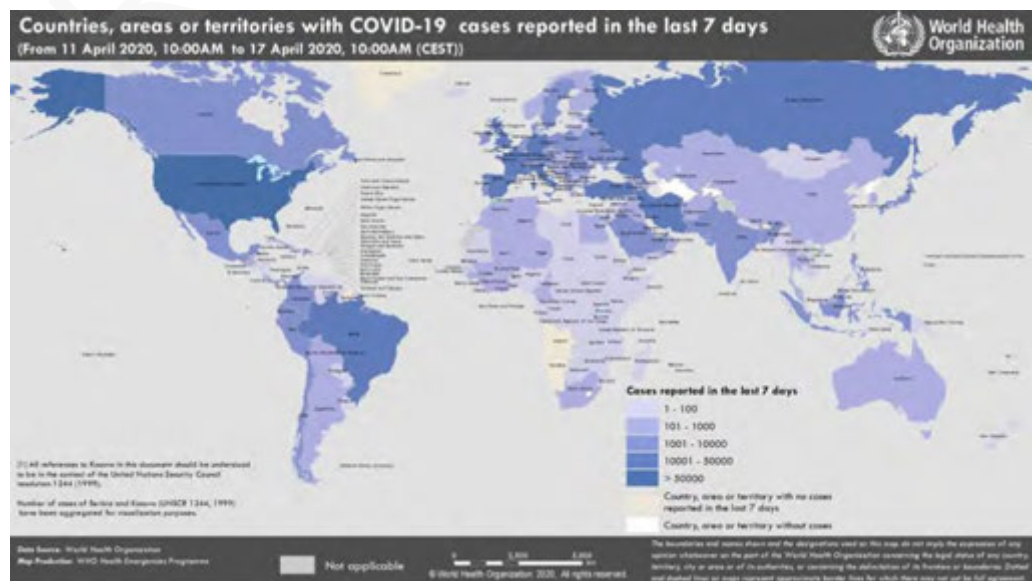
**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 18 April 2020**



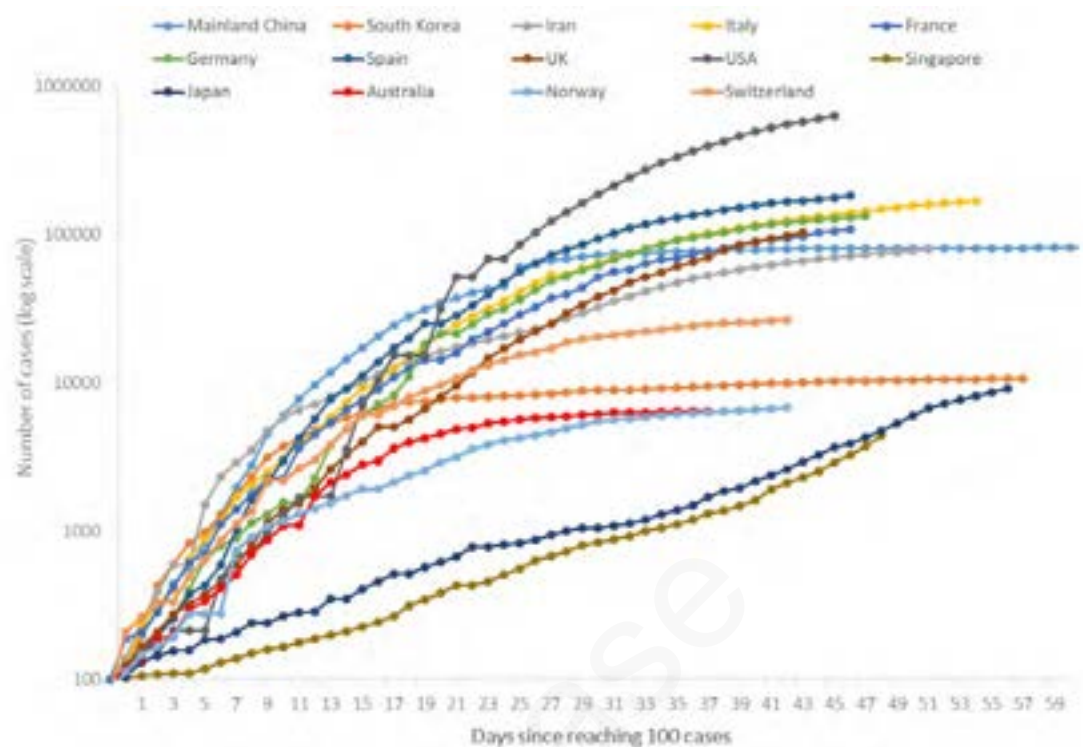
**International Situation (as at 1500 hrs, 18 April 2020)**

- A total of **2,243,710** cases of COVID-19 have been reported globally, including **154,215** deaths (Johns Hopkins University).
  - A total of **85,116** new cases, including **8,682** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (**20%**), Italy (**16%**), Spain (**14%**), and France (13%) (Source: WHO Situation Report).
- *As reported in WHO Situation Report 88, Chinese authorities have performed a comprehensive review of COVID-19 data in Wuhan. Following this review the total number of cases has increased by 325 and the number of deaths has increased by 1,290 (total of 4,642 cumulative deaths). This is not yet reflected in the Chinese Government Ministry of Health figures.*
- Based on the number of reported cases globally, the case fatality rate is approximately **6.7%** (Source: WHO Situation Report). The risk of death reportedly increases with age.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **520** deaths and a case fatality rate of 9.0%. The government has reported **5,923** cases to date.
  - *On 17 April, Indonesia announced that 42,000 people have been tested and that they have more than 34 laboratories testing for SARS-CoV-2. They have announced that they will continue to increase the number of laboratories.*

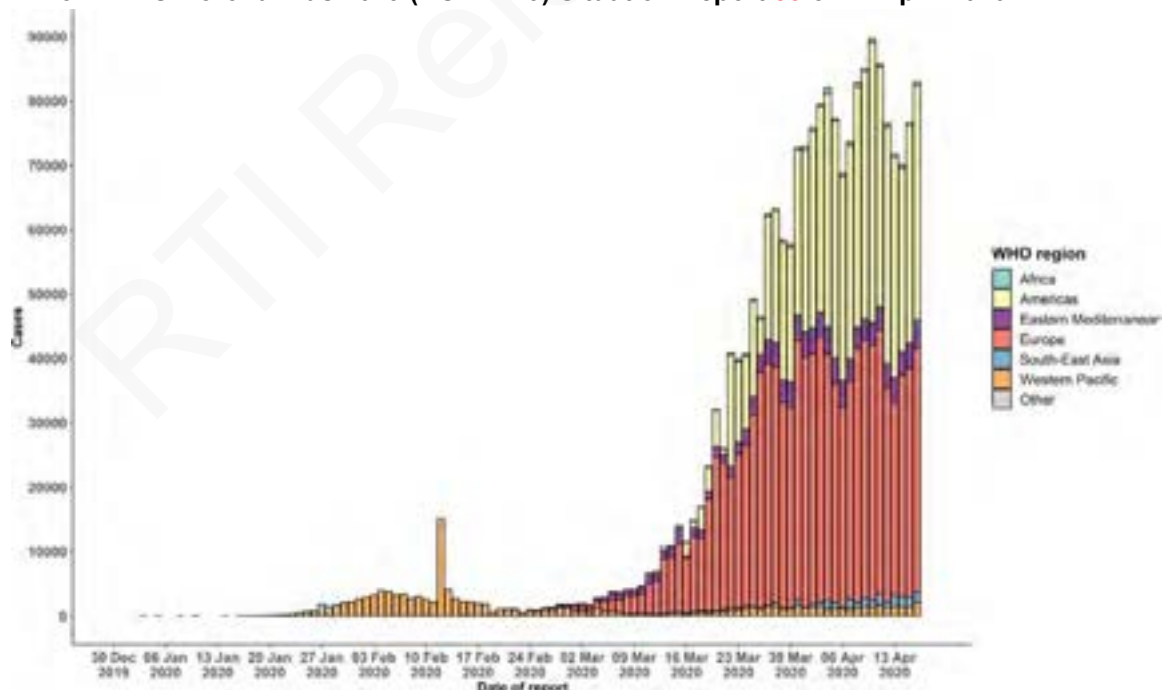
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 88 of 17 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 18 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 88 of 17 April 2020**



#### International response

#### WHO

- On 17 April 2020, the Director-General announced:
  - the “One World, Together At Home” virtual global special, a collaboration between the WHO, global musicians, comedians and humanitarians to be held tomorrow, 18 April 2020. The event:
    - supports the COVID-19 Solidarity Response Fund, run by the UN Foundation and the Swiss Philanthropy Foundation, which has raised over US\$150 million. These funds are used to purchase PPE, laboratory diagnostics and other essential supplies.
  - over 2 million cases of COVID-19, and over 135,000 deaths have been reported to WHO

	<ul style="list-style-type: none"> <li>○ <i>guidance is being updated to include patient care during recovery and post-discharge</i></li> <li>○ <i>a 51 per cent and a 60 per cent increase in reported cases and deaths, respectively in Africa in the past week</i></li> <li>○ <i>WHO is working hard to accelerate the development, production and equitable distribution of a vaccine, and is in discussion with the President of France and Bill Gates to discuss prevention of another pandemic via vaccinations</i></li> <li>○ <i>WHO's position on wet markets is that when these markets are allowed to reopen, it should be contingent on conformance to stringent food safety and hygiene standards</i> <ul style="list-style-type: none"> <li>▪ <i>Governments must rigorously enforce bans on the sale and trade of wildlife for food</i></li> <li>▪ <i>WHO has worked closely with the World Organization for Animal Health and the Food and Agriculture Organization of the United Nations, to develop guidance on the safe operation of markets</i></li> </ul> </li> <li>○ <i>WHO's communication efforts include:</i> <ul style="list-style-type: none"> <li>▪ <i>a Viber chatbot reaching 2.6 million people with evidence-based information, available in 16 languages including Tamil, Sinhala, Bulgarian, Greek, Italian and Hungarian, and soon to include Polish and Bangla.</i></li> <li>▪ <i>simultaneous interpretation for WHO press conferences in all official UN languages: Arabic, Chinese, French, Russian and Spanish, commencing Monday, 20 April 2020.</i></li> </ul> </li> <li>● On 16 April 2020, the WHO Regional Director for Europe released a statement 'transition to a 'new' normal during the COVID-19 pandemic must be guided by public health principles': <ul style="list-style-type: none"> <li>○ New WHO Regional Office for Europe guidance will be released early next week.</li> <li>○ Any step to ease restrictions and transition must ensure that: <ol style="list-style-type: none"> <li>1. evidence shows COVID-19 transmission is controlled;</li> <li>2. public health and health system capacities including hospitals are in place to identify, isolate, test, trace contacts and quarantine them;</li> <li>3. outbreak risks are minimized in high-vulnerability settings – particularly in elderly homes, mental health facilities and people residing in crowded places;</li> <li>4. workplace preventive measures are established – with physical distancing, handwashing facilities, respiratory etiquette in place;</li> <li>5. importation risks can be managed; and</li> <li>6. communities have a voice and are engaged in the transition.</li> </ol> </li> </ul> </li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>● The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>● On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>● The ACT Health Emergency Control Centre (HECC) has moved location and remains activated.</li> <li>● The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>● The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>● NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>● <i>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</i></li> </ul>
NT Health	<ul style="list-style-type: none"> <li>● Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>● NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>● All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>● CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>● The State Health Emergency Contact Centre is activated.</li> <li>● COVID-19 is a controlled notifiable condition under the Public Health Act 2005.</li> </ul>



SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>Execution of the exit plan commenced Saturday 11 April for travelers from other states who have completed isolation within Perth Hotels.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 2 Incident Declaration.</li> <li>WA closed the state borders at midnight on 5 April 2020. WA residents travelling from interstate and FIFO workers have to self-isolate for 14 days.</li> <li>Enquiries line to keep the community informed about COVID-19 coronavirus launched (132 68 43).</li> <li>The Chief Health Officer has approved an Emergency Notice under the Public Health Act to amend prescription rules for telehealth consults conducted during COVID-19.</li> <li>On 11 April 2020, the exit plan for travellers from other states who have completed isolation within Perth Hotels commenced.</li> <li>As at 14 April 2020, legislation to support tenants and landlords of both commercial and residential tenancies are being introduced into State Parliament.</li> <li>As at 16 April 2020, GPs can now refer patients to private pathology providers for COVID-19 testing.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,243,710) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 18 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,149	4,642	352	1,290
Hong Kong SAR	1,022	4	4	0
Taiwan	395	6	0	0
Macau SAR	45	0	0	0
United States of America	632,781	28,221	28,711	2,350
Spain	182,816	19,130	5,183	551
Italy	168,941	22,172	3,786	525
Germany	133,830	3,868	3,380	299
France	107,778	17,899	2,623	753
The United Kingdom	103,097	13,729	4,617	861
Iran (Islamic Republic of)	77,995	4,869	1,606	92
Turkey	74,193	1,643	4,801	125
Belgium	34,809	4,857	1,236	417

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Netherlands	29,214	3,315	1,061	181
Russian Federation	32,008	273	4,070	41
Canada	28,884	1,048	1,344	94
Switzerland	26,651	1,016	315	43
Brazil	28,320	1,736	3,058	204
Portugal	18,841	629	750	30
Austria	14,448	410	78	17
Ireland	13,271	486	724	42
India	13,387	437	1,007	23
Israel	12,591	140	391	14
Sweden	12,540	1,333	613	130
Republic of Korea	10,635	230	22	1
Peru	11,475	254	1,172	24
Japan	9,167	148	585	12
Chile	8,807	105	534	11
Ecuador	8,225	403	367	15
Poland	7,918	314	336	28
Romania	7,707	387	491	15
Denmark	6,879	321	198	12
Norway	6,791	136	114	6
Pakistan	7,025	135	520	11
Australia	6,565	68	42	3
Czechia	6,433	169	130	3
Saudi Arabia	6,380	83	518	4
Philippines	5,660	362	207	13
Mexico	5,847	449	448	43
United Arab Emirates	5,825	35	460	2
Indonesia	5,516	496	380	27
Malaysia	5,182	84	110	1
Serbia	5,318	103	445	4
Ukraine	4,662	125	500	10
Belarus	4,204	40	476	4
Qatar	4,103	7	392	0
Singapore	4,427	10	728	0
Dominican Republic	3,755	196	141	7
Panama	3,751	103	177	8
Luxembourg	3,444	69	71	0
Finland	3,369	75	132	3
Colombia	3,105	131	126	4
Thailand	2,700	47	28	1
South Africa	2,605	48	99	14
Egypt	2,673	196	168	13
Argentina	2,598	115	121	7



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Greece	2,207	105	15	3
Algeria	2,268	348	108	12
Republic of Moldova	2,154	54	105	8
Morocco	2,283	130	259	3
Croatia	1,791	35	50	1
Iceland	1,739	8	12	0
Bahrain	1,700	7	23	0
Hungary	1,763	156	111	14
Iraq	1,434	80	19	1
Kuwait	1,524	3	119	0
Estonia	1,434	36	32	1
Uzbekistan	1,380	4	31	0
Kazakhstan	1,480	16	185	0
Azerbaijan	1,283	15	30	2
Slovenia	1,268	61	20	0
Bangladesh	1,572	60	341	10
Armenia	1,159	18	24	0
Bosnia and Herzegovina	1,169	42	53	1
Lithuania	1,149	32	58	3
New Zealand	1,086	11	2	2
Oman	1,069	5	50	1
North Macedonia	1,081	46	107	1
Puerto Rico	1,043	56	69	5
Slovakia	977	8	114	2
Cameroon	855	17	0	0
Cuba	862	27	48	3
Afghanistan	845	30	51	1
Tunisia	822	37	42	2
Bulgaria	800	38	53	2
Cyprus	735	17	20	0
International conveyance (Diamond Princess)	712	13	0	1
Andorra	694	34	21	1
Latvia	675	5	9	0
Lebanon	663	21	5	0
Côte d'Ivoire	688	6	34	0
Ghana	641	8	5	0
Costa Rica	626	4	8	1
Niger	609	15	25	1
Burkina Faso	543	32	15	4
Albania	518	26	24	1
Uruguay	493	9	1	1
Kyrgyzstan	489	5	23	0
Djibouti	591	2	156	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Honduras	426	35	7	4
Guinea	438	1	34	0
Jordan	402	7	1	0
Malta	412	3	13	0
Bolivia (Plurinational State of)	441	29	44	1
Kosovo	449	11	52	2
San Marino	426	38	33	2
Réunion	394	0	4	0
Nigeria	373	11	0	0
Georgia	370	3	34	0
Mauritius	324	9	0	0
Senegal	335	2	21	0
occupied Palestinian territory	295	2	2	0
Montenegro	303	4	15	0
Democratic Republic of the Congo	287	23	20	1
Viet Nam	268	0	1	0
Isle of Man	258	4	4	2
Sri Lanka	238	7	0	0
Kenya	234	11	9	1
Guernsey	228	8	5	1
Mayotte	233	3	12	0
Jersey	219	7	2	1
Venezuela (Bolivarian Republic of)	197	9	4	0
Faroe Islands	184	0	0	0
Guatemala	196	5	16	0
Paraguay	174	8	13	0
El Salvador	164	6	5	0
Martinique	159	8	1	0
Guadeloupe	145	8	0	0
Mali	171	13	27	0
Brunei Darussalam	136	1	0	0
Rwanda	138	0	2	0
Guam	135	5	0	0
Gibraltar	131	0	2	0
Cambodia	122	0	0	0
Congo	117	5	0	0
Trinidad and Tobago	114	8	0	0
Madagascar	117	0	7	0
Jamaica	125	5	20	0
French Guiana	96	0	1	0
Aruba	95	2	2	1
Monaco	93	1	0	1
United Republic of Tanzania	94	4	6	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Gabon	95	1	8	0
Ethiopia	92	3	7	0
Myanmar	85	4	0	0
Liechtenstein	81	1	0	0
Somalia	80	5	0	0
Togo	81	5	4	2
Barbados	75	5	2	0
Liberia	73	6	14	0
Bermuda	81	5	24	0
French Polynesia	55	0	0	0
Uganda	55	0	0	0
Cayman Islands	60	1	6	0
Sint Maarten	57	9	4	0
Equatorial Guinea	51	0	0	0
United States Virgin Islands	51	1	0	0
Bahamas	53	8	4	0
Guyana	55	6	7	0
Libya	49	1	1	0
Zambia	48	2	0	0
Guinea-Bissau	46	0	3	0
Haiti	41	3	0	0
Benin	37	1	2	0
Eritrea	35	0	0	0
Saint Martin	35	2	0	0
Syrian Arab Republic	33	2	0	0
Sudan	32	5	0	0
Mongolia	31	0	1	0
Mozambique	29	0	1	0
Chad	27	0	0	0
Antigua and Barbuda	23	2	0	0
Zimbabwe	23	3	0	0
Maldives	23	0	2	0
Angola	19	2	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Eswatini	16	1	0	1
Fiji	17	0	1	0
Malawi	16	2	0	0
Namibia	16	0	0	0
Nepal	16	0	0	0
Saint Lucia	15	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Curaçao	14	1	0	0
Grenada	14	0	0	0
Saint Kitts and Nevis	14	0	0	0
Botswana	15	1	2	0
Northern Mariana Islands (Commonwealth of the)	13	2	0	0
Sierra Leone	15	0	2	0
Saint Vincent and the Grenadines	12	0	0	0
Central African Republic	12	0	1	0
Falkland Islands (Malvinas)	11	0	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Cabo Verde	55	1	45	0
Suriname	10	1	0	0
Turks and Caicos Islands	11	1	1	0
Gambia	9	1	0	0
Nicaragua	9	1	0	0
Holy See	8	0	0	0
Mauritania	7	1	0	0
Saint Barthelemy	6	0	0	0
Timor-Leste	18	0	12	0
Bhutan	5	0	0	0
Burundi	5	0	0	0
Bonaire, Sint Eustatius and Saba	4	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Papua New Guinea	7	0	5	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,074,626</b>	<b>139,383</b>	<b>82,999</b>	<b>8,496</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #91 Novel Coronavirus (COVID-19)  
**Date:** Sunday, 19 April 2020 6:37:21 PM  
**Attachments:** [2020-04-19 NIR Health SitRep v91 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 19 April 2020, there have been 6,606 laboratory confirmed cases of COVID-19 in Australia, including 70 deaths.
- Since yesterday's situation report, an additional 41 cases and 2 deaths, have been reported in Australia.
- To date, more than 420,000 tests have been conducted across Australia.
- The total number of cases reported over the last 7 days was 293, which is down from the 626 reported in the week prior. These numbers indicate a steady decline over the last fortnight.

#### Situation Overseas

- As at 1500 hrs 19 April 2020, a total of 2,328,651 cases of COVID-19 have been reported globally, including 160,721 deaths.
- China's National Health Commission revised the COVID-19 deaths in Wuhan up by 1,290 COVID-19 deaths, bringing Wuhan deaths to 3,869. The new deaths raises China's national total by 39%.

The next Situation Report will be issued on 20 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

[redacted]

National Incident Room  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-19 1800 AEDT	<b>Version</b>	91
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-20 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Graeme Barden, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li><i>The Prime Minister announced that this year's ANZAC Day Dawn Service will be broadcast from the Australian War Memorial. The event will not be open to the public to maintain social distancing.</i></li> <li>On 18 April 2020, the Minister for Health, the Minister for Families and Social Services, and the Minister for the National Disability Insurance Scheme released the Management and Operational Plan for COVID-19 for People with Disability.</li> <li>The Disability Information Helpline is now active to provide information and referrals for people with disability who need help because of coronavirus, as well as for families, carers, support workers and services.             <ul style="list-style-type: none"> <li>The Helpline, 1800 643 787, is available Monday to Friday 8am to 8pm (AEST) and Saturday and Sunday 9am to 7pm (AEST), excluding national public holidays.</li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> </ul>

	<ul style="list-style-type: none"> <li>The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Health Minister has made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 19 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,606</b> cases of COVID-19, including <b>70</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>41</b> cases and <b>2</b> deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>293</b>, which is down from the <b>626</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 18% of these cases requiring admission to an ICU (2.0% of confirmed cases).</li> <li>The median age of COVID-19 cases is 47 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is <b>79</b> years (range 42 to 95 years).</li> <li><b>61%</b> were male and <b>39%</b> were female.</li> <li>Where data was available regarding comorbidities, <b>91%</b> had one or more comorbidities and <b>68%</b> had two or more comorbidities.                 <ul style="list-style-type: none"> <li>The three most commonly reported co-morbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>420,000</b> tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.6% and the positivity in the past week are <b>0.4%</b>.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, around <b>64%</b> of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and the US.</li> <li>Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.</li> </ul>
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- Clusters have been reported in some jurisdictions:
  - Victoria has identified 60 clusters. Tasmania is reporting a cluster of 95 cases, including 62 healthcare workers, from the North West Regional Hospital (as of 16 April 2020).
  - In relation to reported cases among healthcare workers nationally, 79% have acquired their infection outside of the healthcare settings, such as from travel overseas or a household contact.
  - As of **19 April 2020**, there are **171** crew on board Ruby Princess who have tested positive for COVID-19. Whilst these crew members remain on board they are not included in NSW or national case numbers. Meanwhile, there are **12** Ruby Princess crew members with COVID-19 and **1 without COVID-19 in health facilities in NSW**. These 12 onshore cases are included in the NSW and national numbers.
- Epidemiological Resources
- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 12 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

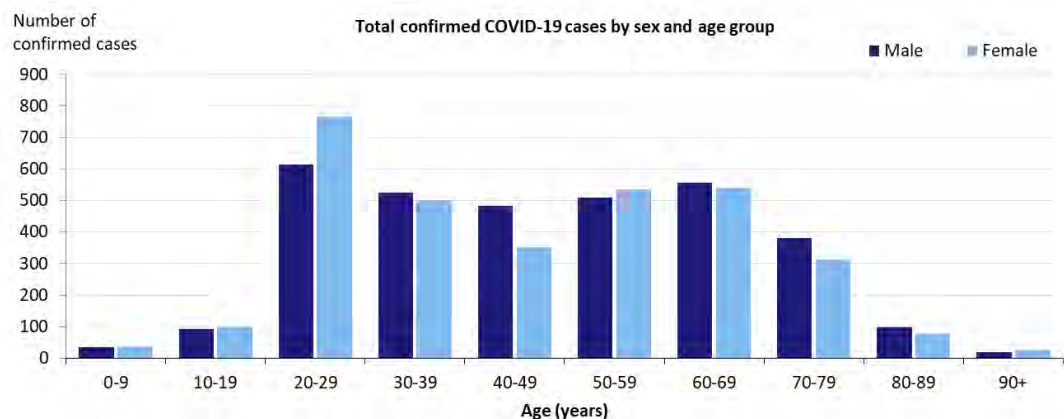
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, **19 April 2020**)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld <sup>^</sup>	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<b>4,237</b>	80	1,735	24	<b>778</b>	296	76	<b>786</b>	462
Locally acquired - contact of confirmed case and/or in a known cluster	<b>1,658</b>	17	783	2	<b>169</b>	124	<b>107</b>	<b>399</b>	<b>57</b>
Locally acquired - contact not identified	<b>550</b>	1	357	0	<b>40</b>	4	0	<b>134</b>	14
Locally acquired - contact not identified, but case had interstate travel	<b>104</b>	5	68	1	<b>15</b>	6	2	0	7
Under investigation	<b>57</b>	0	14	0	<b>17</b>	5	<b>7</b>	<b>9</b>	5
<b>Total cases</b>	<b>6,606</b>	<b>103</b>	<b>2,957</b>	<b>27</b>	<b>1,019</b>	<b>435</b>	<b>192</b>	<b>1,328</b>	<b>545</b>
<b>Deaths (of total)</b>	<b>4,230</b>	<b>89</b>	1,356	<b>11</b>	738	<b>354</b>	<b>68</b>	<b>1,188</b>	<b>426</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<b>41</b> <b>(1%)</b>	0 (0%)	21 (1%)	0 (0%)	<b>5</b> <b>(0%)</b>	0 (0%)	5 (3%)	<b>9</b> (1%)	<b>1</b> (0%)
Change in the last 72hrs before (%change)	<b>138</b> <b>(2%)</b>	0 (0%)	60 (2%)	0 (0%)	<b>18</b> <b>(2%)</b>	<b>1</b> (0%)	<b>22</b> (13%)	<b>27</b> (2%)	<b>10</b> (2%)
Average daily increase over the past three days (compound)	<b>0.7%</b>	0.0%	0.7%	0.0%	<b>0.6%</b>	<b>0.1%</b>	<b>4.2%</b>	<b>0.7%</b>	<b>0.6%</b>
Increase over the past week	<b>293</b>	<b>1</b>	103	0	<b>36</b>	6	<b>59</b>	<b>60</b>	<b>28</b>

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

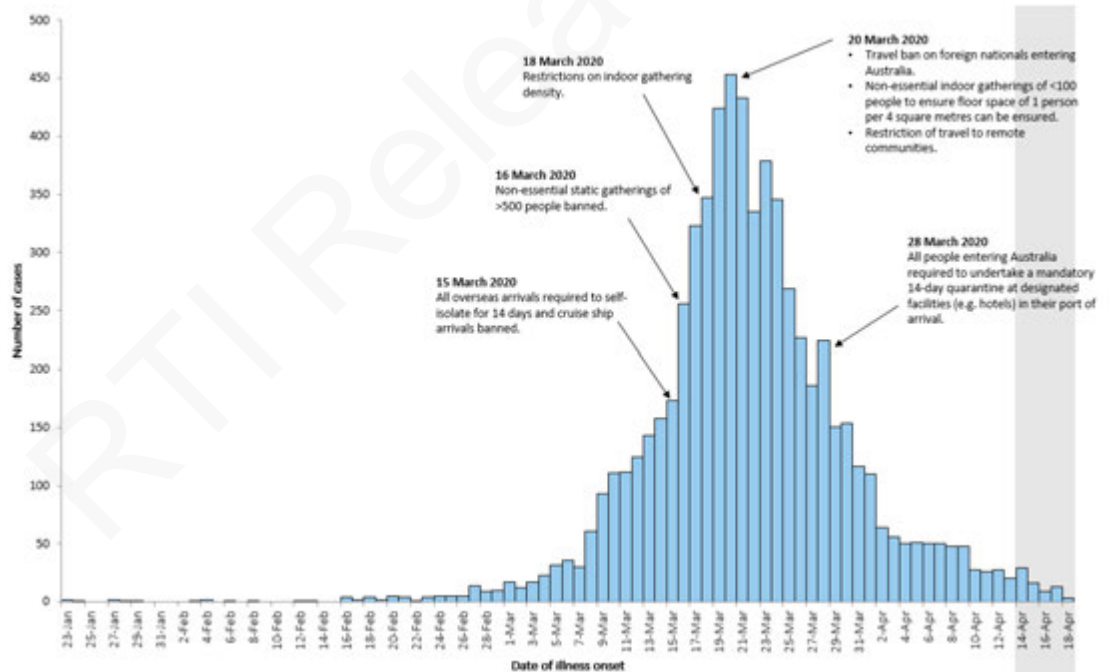
<sup>^</sup> On 18 April 2020, Queensland revised their number of cases by source of acquisition after undertaking data cleaning. This resulted in 3 less cases classified as 'Locally acquired-contact of a confirmed case' and 1 less case classified as 'Locally acquired - contact not identified, but case had interstate travel' from previous reporting. It is unknown what these cases were reclassified to.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 19 April 2020**



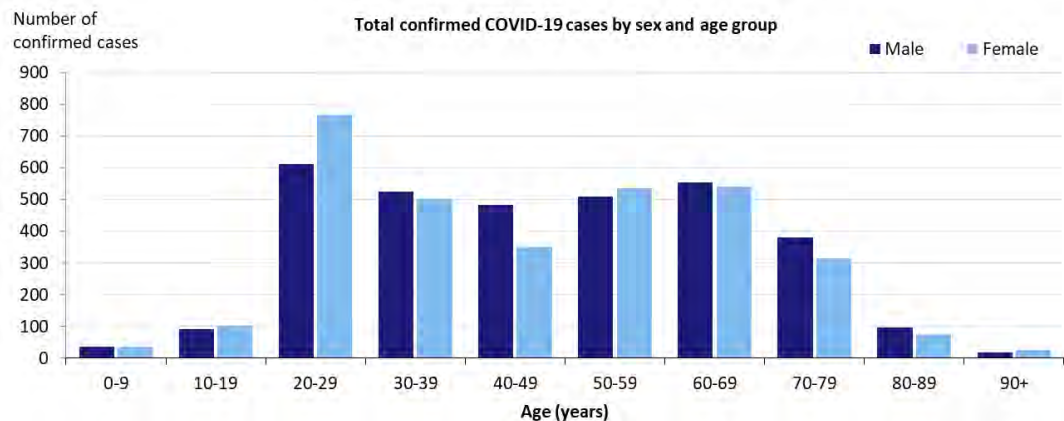
Data source: National Notifiable Diseases Surveillance Section

**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 19 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

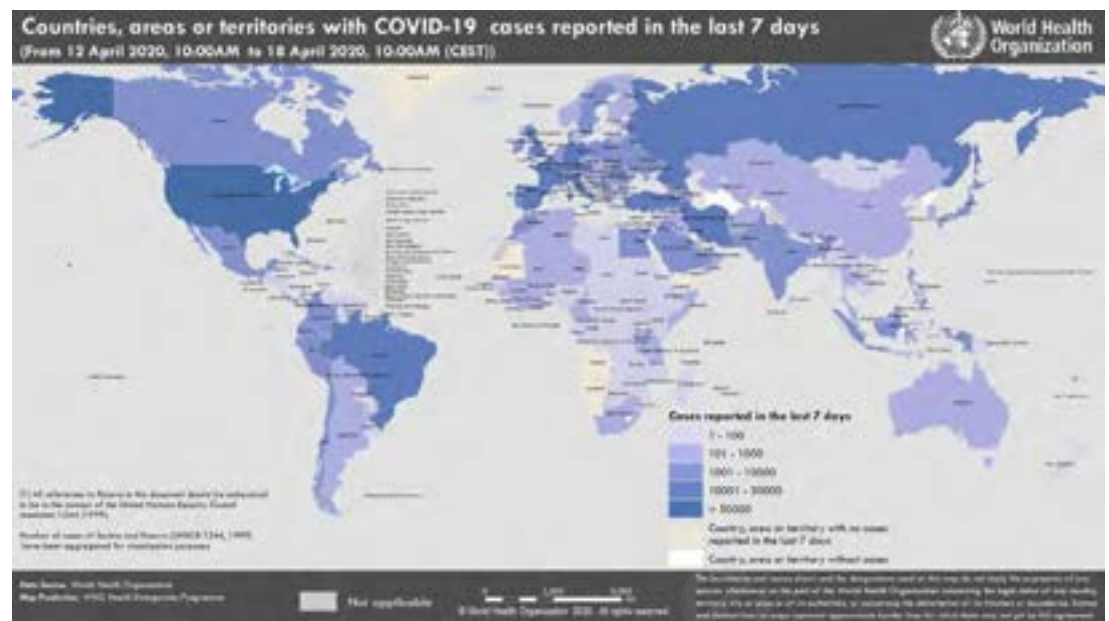
**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 19 April 2020**



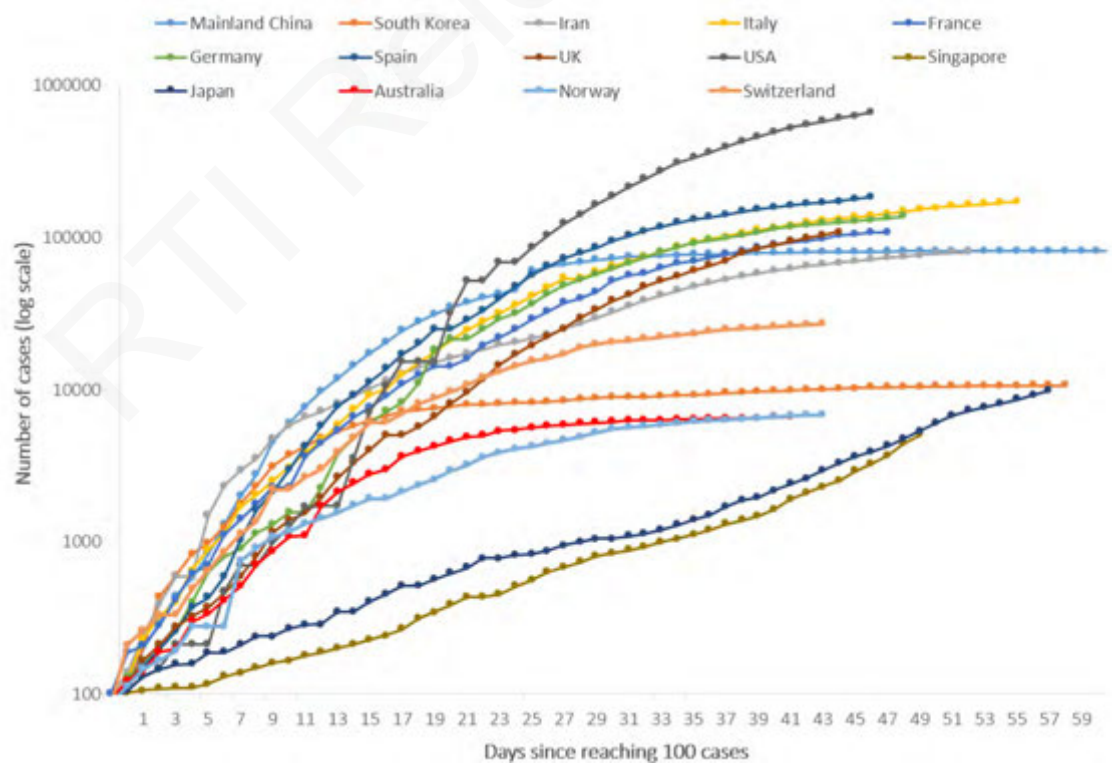
**International Situation (as at 1500 hrs, 19 April 2020)**

- A total of **2,328,651** cases of COVID-19 have been reported globally, including **160,721** deaths (Johns Hopkins University).
  - A total of **84,941** new cases, including **6,506** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (**21%**), Italy (**16%**), Spain (**13%**), and France (**13%**) (Source: WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately **6.8%** (Source: WHO Situation Report). The risk of death reportedly increases with age.
- *On 17 April 2020, China's National Health Commission revised the COVID-19 deaths in Wuhan up by 1,290 COVID-19 deaths, bringing Wuhan deaths to 3,869. The new deaths raises China's national total by 39%. The NHC attributes the underreporting to the large surge of cases early in the epidemic hindering data collection efforts. In particular, the notice references inadequate testing, overwhelmed healthcare capacity (leading to patients dying outside of healthcare settings), and healthcare facilities not being able to utilize the central reporting system.*
- *On 18 April 2020, Spain reported an increasing daily COVID-19 incidence for 3 consecutive days, with over 5,000 new cases reported daily. Prior to this increase Spain had been exhibiting a steady decline in daily incidence since the beginning of April.*
- *On 18 April 2020, Singapore reported 942 new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, 893 (95%) were reported among residents of migrant worker dormitories. Outside of the cases associated with the dormitories, Singapore reports that cases reported in the broader community have decreased since the enhanced social distancing measures were implemented.*
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **535** deaths and a case fatality rate of **8.6%**. The government has reported **6,248** cases to date.

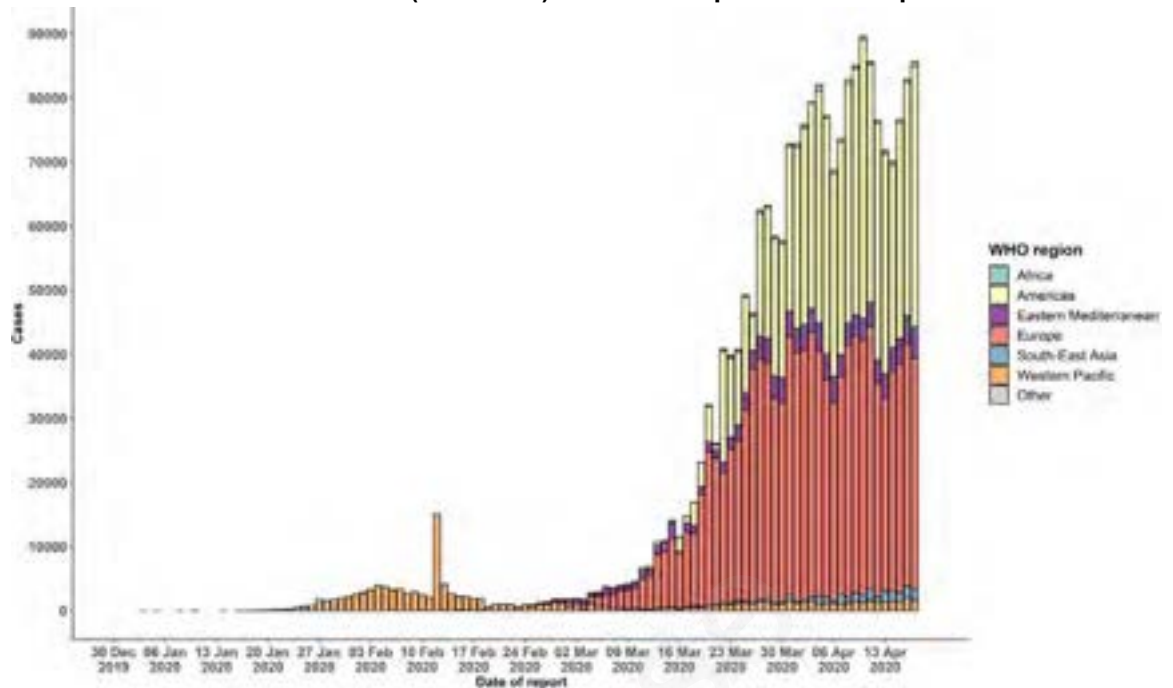
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 89 of 18 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 19 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 89 of 18 April 2020**



#### International response

#### WHO

- On 17 April 2020, the Director-General announced:
  - WHO is working hard to accelerate the development, production and equitable distribution of a vaccine, and is in discussion with the President of France and Bill Gates to discuss prevention of another pandemic via vaccinations
  - WHO's position on wet markets is that when these markets are allowed to reopen, it should be contingent on conformance to stringent food safety and hygiene standards
    - Governments must rigorously enforce bans on the sale and trade of wildlife for food.
    - WHO has worked closely with the World Organization for Animal Health and the Food and Agriculture Organization of the United Nations, to develop guidance on the safe operation of markets.
- On 16 April 2020, the WHO Regional Director for Europe released a statement 'transition to a 'new' normal during the COVID-19 pandemic must be guided by public health principles':
  - Any step to ease restrictions and transition must ensure that:
    1. Evidence shows COVID-19 transmission is controlled,
    2. Public health and health system capacities including hospitals are in place to identify, isolate, test, trace contacts and quarantine them,
    3. Outbreak risks are minimised in high-vulnerability settings, particularly in elderly homes, mental health facilities and people residing in crowded places,
    4. Workplace preventive measures are established with physical distancing, handwashing facilities, respiratory etiquette in place,
    5. Importation risks can be managed, and
    6. Communities have a voice and are engaged in the transition.

## 2. Health Responses by States and Territories

#### ACT Health

- The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).
- On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).
- The ACT Health Emergency Control Centre (HECC) has moved location and remains activated.
- The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.
- *As at 1430 hrs 19 April 2020, the ACT has no hospitalised COVID-19 cases.*



NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li><i>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</i></li> <li><i>The State Health Emergency Coordination Centre (SHECC) moved to "stand up" on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</i></li> <li><i>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</i></li> <li><i>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</i></li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration <i>on the 15 March.</i></li> <li><i>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</i></li> <li><i>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</i></li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

## Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,329,651) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 18 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,180	4,642	31	0



Hong Kong SAR	1,024	4	2	0
Taiwan	398	6	3	0
Macau SAR	45	0	0	0
United States of America	665,330	30,384	32,549	2,163
Spain	188,068	19,478	5,252	348
Italy	172,434	22,747	3,493	575
Germany	137,439	4,110	3,609	242
The United Kingdom	108,696	14,576	5,599	847
France	108,163	18,659	385	760
Iran (Islamic Republic of)	79,494	4,958	1,499	89
Turkey	78,546	1,769	4,353	126
Russian Federation	36,793	313	4,785	40
Belgium	36,138	5,163	1,329	306
Canada	30,659	1,250	1,775	202
Netherlands	30,449	3,459	1,235	144
Brazil	30,425	1,924	2,105	188
Switzerland	26,997	1,058	346	42
Portugal	19,022	657	181	28
Austria	14,603	431	155	21
India	14,378	480	991	43
Ireland	13,980	530	709	44
Peru	13,489	300	2,014	46
Sweden	13,216	1,400	676	67
Israel	12,855	148	264	8
Republic of Korea	10,653	232	18	2
Japan	9,795	154	628	6
Chile	9,252	116	445	11
Ecuador	8,450	421	225	18
Poland	8,379	332	461	18
Romania	8,067	400	360	13
Pakistan	7,481	143	456	8
Saudi Arabia	7,142	87	762	4
Denmark	7,073	336	194	15
Norway	6,791	136	0	0
Australia	6,606	70	41	2
Czechia	6,549	173	116	4
United Arab Emirates	6,302	37	477	2
Mexico	6,297	486	450	37
Indonesia	5,923	520	407	24
Philippines	5,878	387	218	25
Serbia	5,690	110	372	7
Malaysia	5,251	86	69	2
Ukraine	5,106	133	444	8
Singapore	5,050	11	623	1
Belarus	4,779	43	575	3
Qatar	4,663	7	560	0
Dominican Republic	4,126	200	371	4
Panama	4,016	109	265	6

Finland	3,489	82	120	7
Luxembourg	3,480	72	36	3
Colombia	3,233	144	128	13
Egypt	2,844	205	171	9
South Africa	2,783	50	178	2
Thailand	2,733	47	33	0
Argentina	2,694	122	96	7
Morocco	2,564	135	281	5
Algeria	2,418	364	150	16
Republic of Moldova	2,264	56	110	2
Greece	2,207	105	0	0
Bangladesh	1,838	75	266	15
Hungary	1,834	172	71	16
Croatia	1,814	36	23	1
Iceland	1,754	8	15	0
Bahrain	1,744	7	44	0
Kuwait	1,658	5	134	2
Kazakhstan	1,546	17	66	1
Iraq	1,482	81	48	1
Estonia	1,459	38	25	2
Uzbekistan	1,450	4	70	0
Azerbaijan	1,340	15	57	0
Slovenia	1,304	66	36	5
Lithuania	1,239	33	90	1
Bosnia and Herzegovina	1,210	44	41	2
Armenia	1,201	19	42	1
Oman	1,180	6	111	1
North Macedonia	1,117	49	36	3
New Zealand	1,094	11	8	0
Puerto Rico	1,068	58	25	2
Slovakia	1,049	9	72	1
Cameroon	1,016	21	161	4
Cuba	923	31	61	4
Afghanistan	908	30	63	0
Tunisia	864	37	42	0
Bulgaria	846	41	46	3
Côte d'Ivoire	742	6	54	0
Cyprus	735	17	0	0
Djibouti	732	2	141	0
International conveyance (Diamond Princess)	712	13	0	0
Andorra	703	35	9	1
Latvia	682	5	7	0
Lebanon	668	21	5	0
Costa Rica	642	4	16	0
Ghana	641	8	0	0
Niger	627	18	18	3
Albania	548	26	30	0
Burkina Faso	547	32	4	0
Kyrgyzstan	506	5	17	0

Uruguay	502	9	9	0
Kosovo	480	12	31	1
Bolivia (Plurinational State of)	465	31	24	2
Honduras	442	41	16	6
Guinea	438	1	0	0
San Marino	426	38	0	0
Malta	422	3	10	0
Jordan	407	7	5	0
Réunion	402	0	8	0
Georgia	385	3	15	0
Nigeria	373	11	0	0
Senegal	342	3	7	1
Mauritius	324	9	0	0
occupied Palestinian territory	313	2	18	0
Montenegro	305	5	2	1
Isle of Man	289	4	31	0
Democratic Republic of the Congo	287	23	0	0
Viet Nam	268	0	0	0
Kenya	246	11	12	0
Mayotte	245	4	12	1
Sri Lanka	244	7	6	0
Guernsey	234	9	6	1
Jersey	223	10	4	3
Guatemala	214	7	18	2
Venezuela (Bolivarian Republic of)	204	9	7	0
Paraguay	199	8	25	0
Mali	190	13	19	0
Faroe Islands	184	0	0	0
El Salvador	177	7	13	1
Martinique	159	8	0	0
United Republic of Tanzania	148	5	54	1
Guadeloupe	145	8	0	0
Congo	143	6	26	1
Jamaica	143	5	18	0
Rwanda	138	0	0	0
Brunei Darussalam	136	1	0	0
Guam	135	5	0	0
Gibraltar	133	0	2	0
Cambodia	122	0	0	0
Madagascar	117	0	0	0
Somalia	116	5	36	0
Trinidad and Tobago	114	8	0	0
Monaco	98	1	5	0
Aruba	96	2	1	0
Ethiopia	96	3	4	0
French Guiana	96	0	0	0
Gabon	95	1	0	0
Myanmar	94	5	9	1
Bermuda	83	5	2	0

Togo	83	5	2	0
Liechtenstein	81	1	0	0
Liberia	76	7	3	1
Barbados	75	5	0	0
Cayman Islands	61	1	1	0
Guyana	57	6	2	0
Sint Maarten	57	9	0	0
Cabo Verde	55	1	0	0
French Polynesia	55	0	0	0
Uganda	55	0	0	0
Bahamas	54	9	1	1
Zambia	52	2	4	0
Equatorial Guinea	51	0	0	0
United States Virgin Islands	51	2	0	1
Guinea-Bissau	50	0	4	0
Libya	49	1	0	0
Haiti	43	3	2	0
Syrian Arab Republic	38	2	5	0
Benin	37	1	0	0
Eritrea	35	0	0	0
Saint Martin	35	2	0	0
Chad	33	0	6	0
Sudan	33	6	1	1
Mongolia	31	0	0	0
Mozambique	31	0	2	0
Nepal	30	0	14	0
Maldives	28	0	5	0
Sierra Leone	26	0	11	0
Zimbabwe	24	3	1	0
Antigua and Barbuda	23	2	0	0
Angola	19	2	0	0
Eswatini	19	1	3	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
New Caledonia	18	0	0	0
Timor-Leste	18	0	0	0
Fiji	17	0	0	0
Malawi	17	2	1	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Botswana	15	1	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Grenada	14	0	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	1	0
Saint Kitts and Nevis	14	0	0	0
Central African Republic	12	0	0	0
Saint Vincent and the Grenadines	12	0	0	0
Falkland Islands (Malvinas)	11	0	0	0

Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Suriname	10	1	0	0
Gambia	9	1	0	0
Nicaragua	9	1	0	0
Holy See	8	0	0	0
Mauritania	7	1	0	0
Papua New Guinea	7	0	0	0
Saint Barthélemy	6	0	0	0
Bhutan	5	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	1	0
Burundi	5	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,161,747</b>	<b>146,101</b>	<b>85,654</b>	<b>6,708</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #92 Novel Coronavirus (COVID-19)  
**Date:** Monday, 20 April 2020 7:38:11 PM  
**Attachments:** [2020-04-20 NIR Health SitRep v92 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 20 April 2020, there have been 6,619 laboratory confirmed cases of COVID-19 in Australia, including 71 deaths.
- Since yesterday's situation report, an additional 13 cases and 1 death, have been reported in Australia.
- To date, more than 431,700 tests have been conducted across Australia.
- The total number of cases reported over the last 7 days was 260, which is down from the 564 reported in the week prior. These numbers indicate a steady decline over the last fortnight.

#### Situation Overseas

- As at 1500 hrs 20 April 2020, a total of 2,404,249 cases of COVID-19 have been reported globally, including 165,234 deaths.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia.

The next Situation Report will be issued on 21 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

[redacted]

National Incident Room  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-20 1800 AEDT	<b>Version</b>	92
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-21 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>• <i>Today the Minister for Regional Health, Regional Communications and Local Government announced a \$52.8 million aeromedical retrieval package to support rural and remote communities during the COVID-19 health emergency.</i> <ul style="list-style-type: none"> <li>◦ <i>The package includes funding for CareFlight and other state and territory aeromedical departments to enable more evacuations.</i></li> </ul> </li> <li>• The Prime Minister announced that this year's ANZAC Day Dawn Service will be broadcast from the Australian War Memorial. The event will not be open to the public to maintain social distancing.</li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>• Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>• On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>• The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June 2020.</li> </ul>



	<p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 19 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,619</b> cases of COVID-19, including <b>71</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2). <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>13</b> cases and <b>1</b> deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>260</b>, which is down from the <b>564</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 18% of these cases requiring admission to an ICU (2.0% of confirmed cases).</li> <li>The median age of COVID-19 cases is <b>48</b> years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported: <ul style="list-style-type: none"> <li>The median age is 79 years (range 42 to 95 years).</li> <li><b>62%</b> were male and <b>38%</b> were female.</li> <li>Where data was available regarding comorbidities, 91% had one or more comorbidities and 68% had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>431,700</b> tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions. <ul style="list-style-type: none"> <li>Cumulative per cent positive was <b>1.5%</b> and the positivity in the past week was 0.4%.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and the US. <ul style="list-style-type: none"> <li><i>Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; however, all jurisdictions are reporting cases associated with cruise ships. To date there have been 27 deaths reported.</i></li> </ul> </li> </ul>
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- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - Victoria has identified 60 clusters. *Tasmania is reporting a cluster of 107 cases, including 70 staff members, from the North West Regional Hospital (as of 19 April 2020).*
  - In relation to reported cases among healthcare workers nationally, 79% have acquired their infection outside of the healthcare settings, such as from travel overseas or a household contact.
  - *There have been 22 instances where one or more cases have been reported in residential aged care facilities in Australia.*
  - *While there have been cases of COVID-19 reported in residential aged care facilities the majority are believed to have been introduced by staff or residents. None are known to have been introduced by visitors.*
  - *NSW Health are reporting 41 cases (14 staff and 27 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 19 March 20. There have also been two deaths associated with this outbreak.*
  - As of 19 April 2020, there *were 190* crew on board Ruby Princess who had tested positive for COVID-19. Whilst these crew members remain on board they are not included in NSW or national case numbers. Meanwhile, there are 12 Ruby Princess crew members with COVID-19 and 1 without COVID-19 in health facilities in NSW. These 12 onshore cases are included in the NSW and national numbers.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 12 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 20 April 2020)**

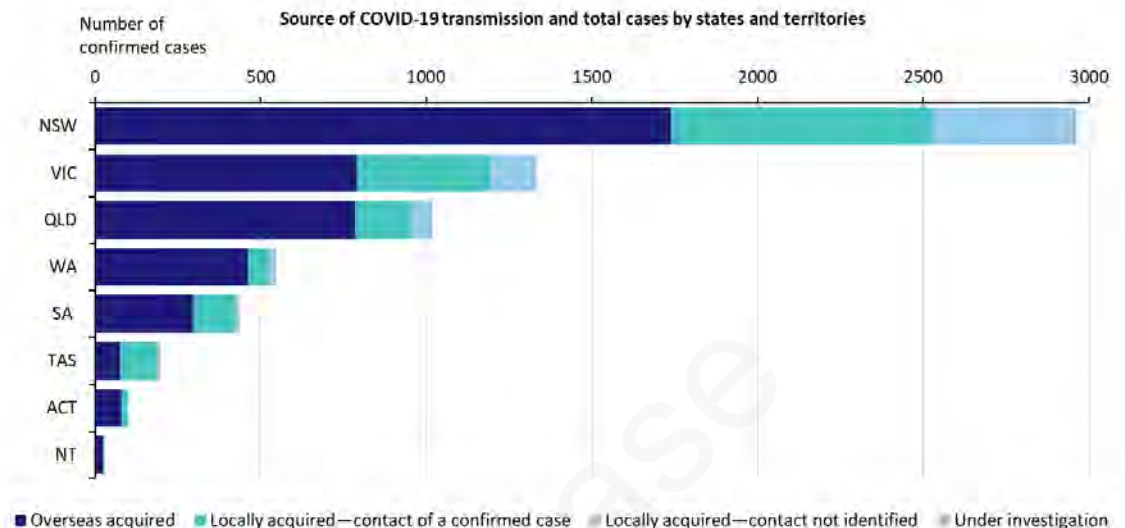
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld <sup>a</sup>	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,251	81	1,738	24	784	296	76	790	462
Locally acquired - contact of confirmed case and/or in a known cluster	1,673	17	790	2	169	124	112	402	57
Locally acquired - contact not identified	555	1	358	0	41	4	0	136	15
Locally acquired - contact not identified, but case had interstate travel	105	5	67	1	17	6	2	0	7
Under investigation	35	0	10	0	8	5	7	1	4
<b>Total cases</b>	<b>6,619</b>	<b>104</b>	<b>2,963</b>	<b>27</b>	<b>1,019</b>	<b>435</b>	<b>197</b>	<b>1,329</b>	<b>545</b>
<b>Deaths (of total)</b>	<b>71</b>	<b>3</b>	<b>28</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>8</b>	<b>15</b>	<b>7</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	13 (0%)	1 (1%)	6 (0%)	0 (0%)	0 (0%)	0 (0%)	5 (3%)	1 (0%)	0 (0%)
Change in the last 72hrs before (%change)	96 (1%)	1 (1%)	37 (1%)	0 (0%)	12 (1%)	0 (0%)	15 (8%)	27 (2%)	4 (1%)
Average daily increase over the past three days (compound)	0.5%	0.3%	0.4%	0%	0.4%	0%	2.7%	0.7%	0.2%
Increase over the past week	260	1	100	-	32	4	53	48	22

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on

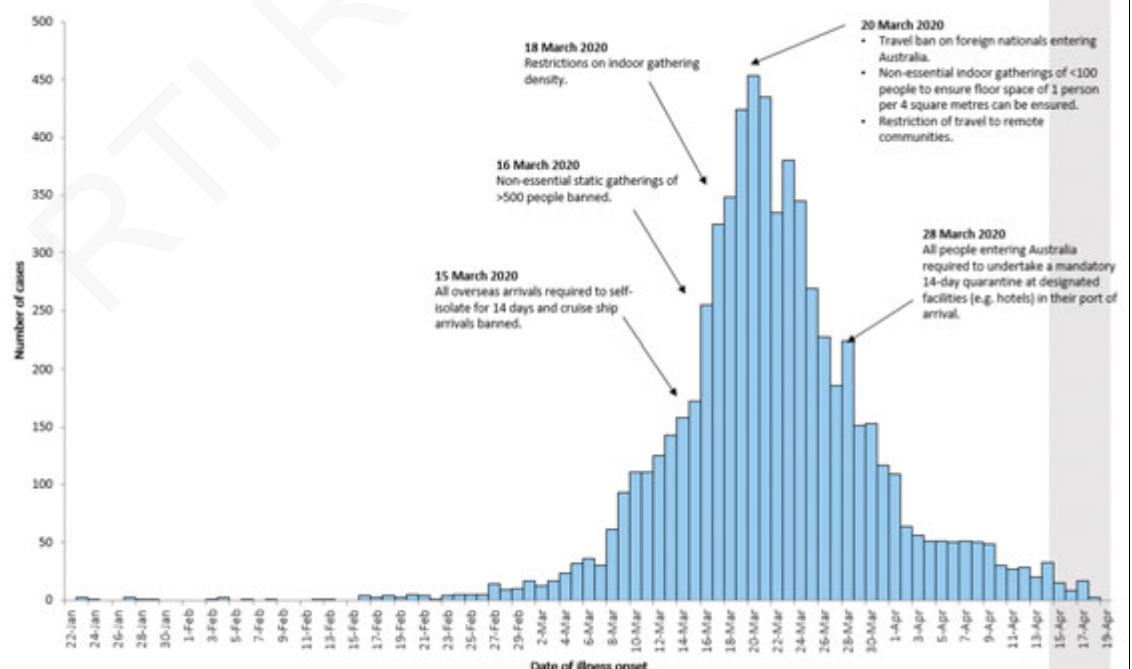
their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

^ On 18 April 2020, Queensland revised their number of cases by source of acquisition after undertaking data cleaning. This resulted in 3 less cases classified as 'Locally acquired-contact of a confirmed case' and 1 less case classified as 'Locally acquired - contact not identified, but case had interstate travel' from previous reporting. It is unknown what these cases were reclassified to.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 20 April 2020**

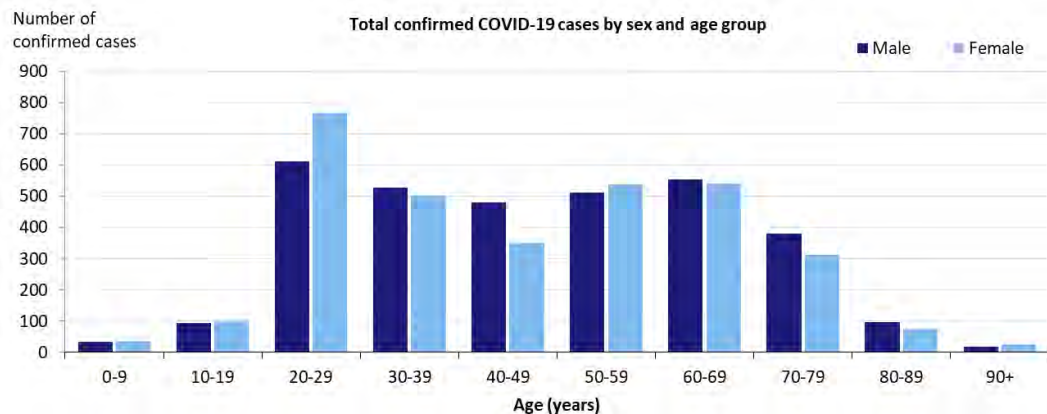


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 20 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

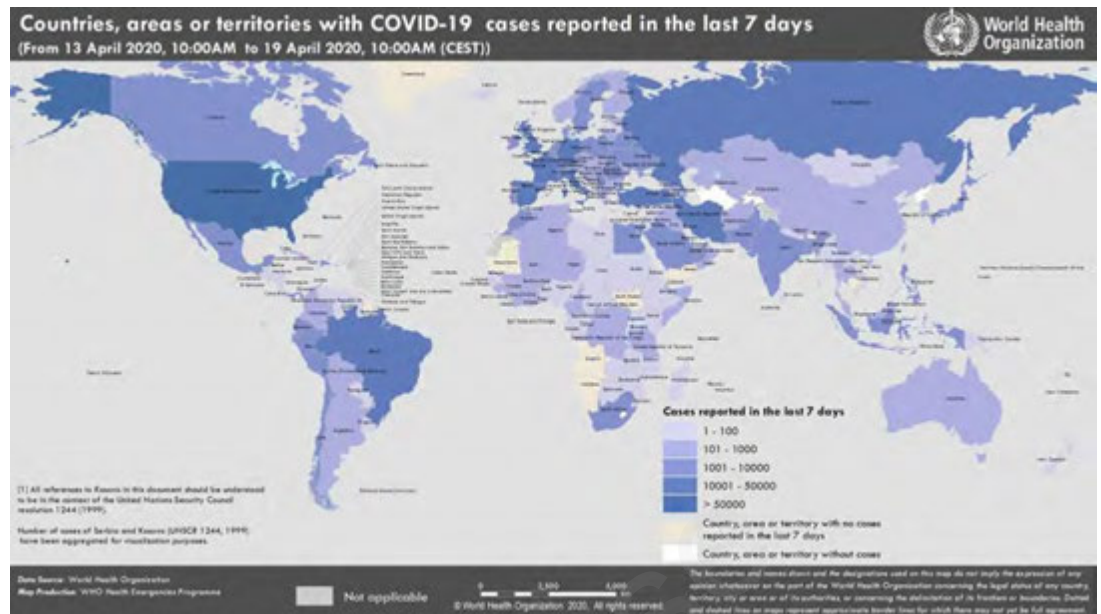
**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 20 April 2020**



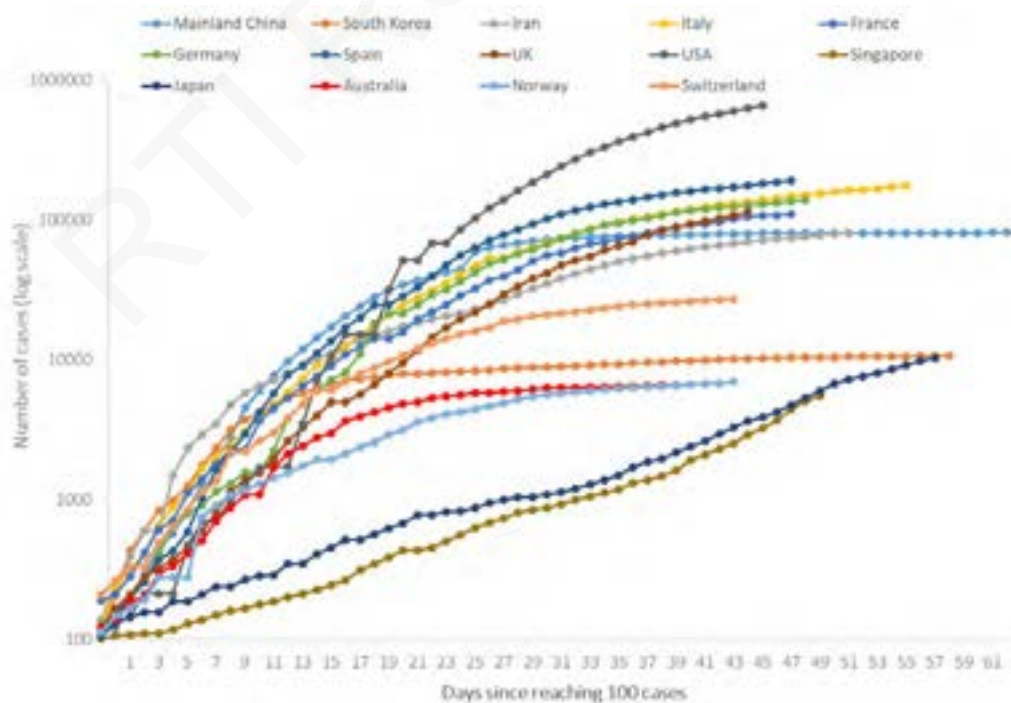
**International Situation (as at 1500 hrs, 19 April 2020)**

- A total of **2,404,249** cases of COVID-19 have been reported globally, including **165,234** deaths (Johns Hopkins University).
  - A total of **74,598** new cases, including **4,513** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (21%), Italy (**15%**), Spain (13%), and France (13%) (Source: WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.8% (Source: WHO Situation Report). The risk of death reportedly increases with age.
- On 17 April 2020, China's National Health Commission revised the COVID-19 deaths in Wuhan up by 1,290 COVID-19 deaths, bringing Wuhan deaths to 3,869. The new deaths raises China's national total by 39%. The NHC attributes the underreporting to the large surge of cases early in the epidemic hindering data collection efforts. In particular, the notice references inadequate testing, overwhelmed healthcare capacity (leading to patients dying outside of healthcare settings), and healthcare facilities not being able to utilize the central reporting system.
- On **19** April 2020, Singapore reported **596** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **544 (91%)** were reported among residents of migrant worker dormitories. Outside of the cases associated with the dormitories, Singapore reports that cases reported in the broader community have decreased since the enhanced social distancing measures were implemented. ***In total Singapore has reported 6,588 cases and 11 deaths. Over the past fortnight only 10 cases were reported as imported cases, with only 1 imported case reported in the last week.***
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **582** deaths and a case fatality rate of **8.9%**. The government has reported **6,575** cases to date.

**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 90 of 19 April 2020**

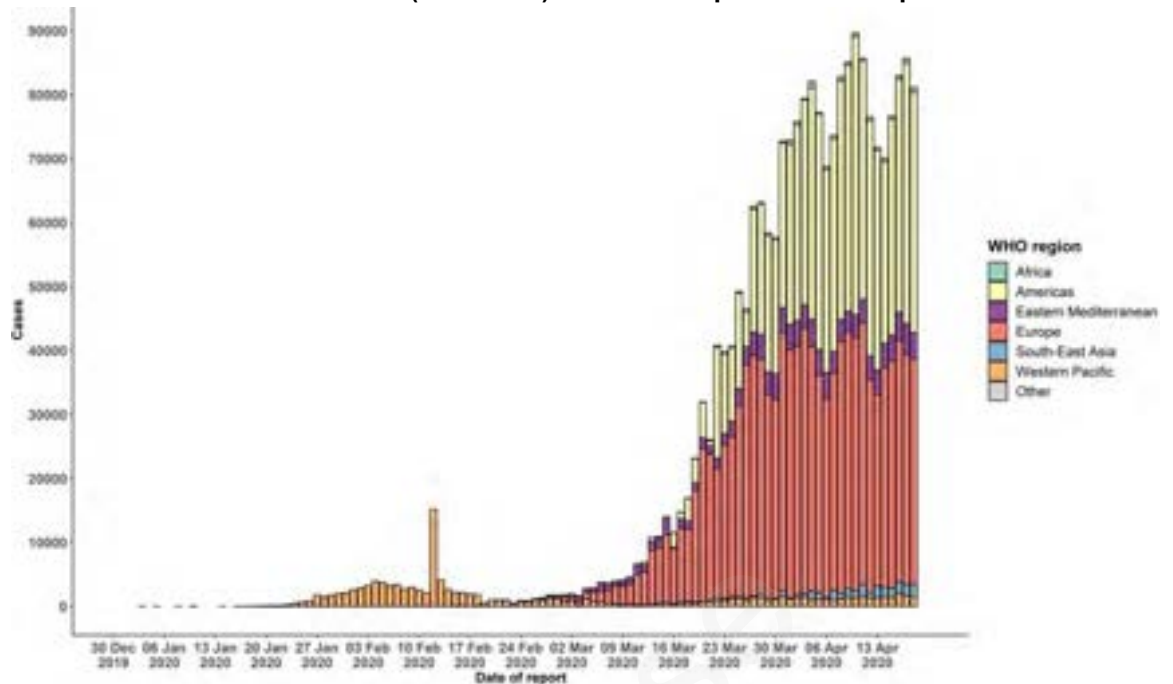


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 20 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 90 of 19 April 2020**



#### International response

#### WHO

- On 17 April 2020, the Director-General announced:
  - WHO is working hard to accelerate the development, production and equitable distribution of a vaccine, and is in discussion with the President of France and Bill Gates to discuss prevention of another pandemic via vaccinations
  - WHO's position on wet markets is that when these markets are allowed to reopen, it should be contingent on conformance to stringent food safety and hygiene standards
    - Governments must rigorously enforce bans on the sale and trade of wildlife for food.
    - WHO has worked closely with the World Organization for Animal Health and the Food and Agriculture Organization of the United Nations, to develop guidance on the safe operation of markets.
- On 16 April 2020, the WHO Regional Director for Europe released a statement 'transition to a 'new' normal during the COVID-19 pandemic must be guided by public health principles':
  - Any step to ease restrictions and transition must ensure that:
    1. Evidence shows COVID-19 transmission is controlled,
    2. Public health and health system capacities including hospitals are in place to identify, isolate, test, trace contacts and quarantine them,
    3. Outbreak risks are minimised in high-vulnerability settings, particularly in elderly homes, mental health facilities and people residing in crowded places,
    4. Workplace preventive measures are established with physical distancing, handwashing facilities, respiratory etiquette in place,
    5. Importation risks can be managed, and
    6. Communities have a voice and are engaged in the transition.

## 2. Health Responses by States and Territories

#### ACT Health

- The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).
- On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).
- The ACT Health Emergency Control Centre (HECC) has moved location and remains activated.
- The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.

NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to "stand up" on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.



## Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,404,249) as at 1500 hours.

Source: International cases based on WHO Situation Reports and Australian cases as at 1500 hours on 19 April 2020.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,201	4,642	21	0

Hong Kong SAR	1,026	4	2	0
Taiwan	420	6	22	0
Macau SAR	45	0	0	0
United States of America	695,353	32,427	30,023	2,043
Spain	191,726	20,043	3,658	565
Italy	175,925	23,227	3,491	480
Germany	139,897	4,294	2,458	184
The United Kingdom	114,221	15,464	5,525	888
France	110,721	19,294	2,558	635
Turkey	82,329	1,890	3,783	121
Iran (Islamic Republic of)	80,868	5,031	1,374	73
Russian Federation	42,853	361	6,060	48
Belgium	37,183	5,453	1,045	290
Brazil	33,682	2,141	3,257	217
Canada	32,400	1,346	1,741	96
Netherlands	31,589	3,601	1,140	142
Switzerland	27,322	1,110	325	52
Portugal	19,685	687	663	30
India	15,712	507	1,334	27
Ireland	14,758	571	778	41
Austria	14,662	443	59	12
Sweden	13,822	1,511	606	111
Peru	13,489	300	0	0
Israel	13,107	158	252	10
Republic of Korea	10,661	234	8	2
Japan	10,361	161	566	7
Chile	9,730	126	478	10
Ecuador	9,022	456	572	35
Poland	8,742	347	363	15
Romania	8,418	417	351	17
Saudi Arabia	8,274	92	1,132	5
Pakistan	7,993	159	512	16
Denmark	7,242	346	169	10
Norway	6,984	148	193	12
Mexico	6,875	546	578	60
Czechia	6,654	181	105	8
Australia	6,619	71	13	1
United Arab Emirates	6,302	37	0	0
Indonesia	6,248	535	325	15
Philippines	6,087	397	209	10
Serbia	5,994	117	304	7
Singapore	5,573	11	523	0
Ukraine	5,449	141	343	8
Malaysia	5,305	88	54	2
Qatar	5,008	8	345	1
Belarus	4,779	45	0	2
Dominican Republic	4,335	217	209	17
Panama	4,210	115	194	6

Finland	3,681	90	192	8
Luxembourg	3,537	72	57	0
Colombia	3,439	153	206	9
South Africa	3,034	52	251	2
Egypt	3,032	224	188	19
Argentina	2,784	129	90	7
Thailand	2,765	47	32	0
Morocco	2,685	137	121	2
Algeria	2,534	367	116	3
Republic of Moldova	2,351	60	87	4
Greece	2,207	105	0	0
Bangladesh	2,144	84	306	9
Hungary	1,916	189	82	17
Croatia	1,832	39	18	3
Bahrain	1,773	7	29	0
Iceland	1,760	9	6	1
Kuwait	1,751	6	93	1
Kazakhstan	1,546	17	0	0
Iraq	1,513	82	31	1
Estonia	1,512	38	53	0
Uzbekistan	1,495	5	45	1
Azerbaijan	1,373	18	33	3
Slovenia	1,317	70	13	4
Lithuania	1,298	33	59	0
Bosnia and Herzegovina	1,268	46	58	2
Oman	1,266	6	86	0
Armenia	1,248	20	47	1
North Macedonia	1,170	49	53	0
Puerto Rico	1,118	60	50	2
New Zealand	1,098	11	4	0
Slovakia	1,089	11	40	2
Cameroon	1,016	21	0	0
Cuba	986	32	63	1
Afghanistan	933	30	25	0
Bulgaria	878	41	32	0
Tunisia	866	37	2	0
Ghana	834	9	193	1
Cyprus	761	17	26	0
Côte d'Ivoire	742	6	0	0
Djibouti	732	2	0	0
International conveyance (Diamond Princess)	712	13	0	0
Latvia	712	5	30	0
Andorra	704	35	1	0
Lebanon	673	21	5	0
Costa Rica	649	4	7	0
Niger	639	19	12	1
Kyrgyzstan	554	5	48	0
Albania	548	26	0	0
Burkina Faso	547	32	0	0

Kosovo	510	12	30	0
Uruguay	508	9	6	0
Bolivia (Plurinational State of)	493	31	28	0
Guinea	477	3	39	2
Honduras	457	46	15	5
San Marino	455	39	29	1
Malta	426	3	4	0
Jordan	413	7	6	0
Réunion	407	0	5	0
Georgia	394	4	9	1
Nigeria	373	11	0	0
Senegal	350	3	8	0
Democratic Republic of the Congo	327	25	40	2
Mauritius	325	9	1	0
occupied Palestinian territory	320	2	7	0
Montenegro	308	5	3	0
Isle of Man	291	4	2	0
Viet Nam	268	0	0	0
Kenya	262	12	16	1
Sri Lanka	254	7	10	0
Mayotte	245	4	0	0
Guernsey	236	9	2	0
Guatemala	235	7	21	0
Jersey	234	11	11	1
Mali	216	13	26	0
Venezuela (Bolivarian Republic of)	204	9	0	0
Paraguay	202	8	3	0
El Salvador	190	7	13	0
Faroe Islands	184	0	0	0
Martinique	163	12	4	4
Jamaica	163	5	20	0
United Republic of Tanzania	148	5	0	0
Guadeloupe	145	11	0	3
Rwanda	144	0	6	0
Congo	143	6	0	0
Brunei Darussalam	137	1	1	0
Guam	136	5	1	0
Somalia	135	7	19	2
Gibraltar	133	0	0	0
Cambodia	122	0	0	0
Madagascar	120	0	3	0
Trinidad and Tobago	114	8	0	0
Gabon	108	1	13	0
Myanmar	107	5	13	0
Ethiopia	105	3	9	0
Monaco	98	1	0	0
Aruba	96	2	0	0
French Guiana	96	0	0	0
Bermuda	83	5	0	0

Togo	83	5	0	0
Liechtenstein	82	1	1	0
Liberia	81	7	5	0
Equatorial Guinea	79	0	28	0
Barbados	75	5	0	0
Sudan	66	10	33	4
Guyana	63	6	6	0
Cayman Islands	61	1	0	0
Sint Maarten	57	9	0	0
Zambia	57	2	5	0
Cabo Verde	55	1	0	0
French Polynesia	55	0	0	0
Uganda	55	0	0	0
Bahamas	54	9	0	0
United States Virgin Islands	53	3	2	1
Guinea-Bissau	50	0	0	0
Libya	49	1	0	0
Haiti	44	3	1	0
Eritrea	39	0	4	0
Syrian Arab Republic	38	2	0	0
Benin	37	1	0	0
Saint Martin	37	2	2	0
Maldives	34	0	6	0
Chad	33	0	0	0
Mongolia	31	0	0	0
Mozambique	31	0	0	0
Nepal	31	0	1	0
Sierra Leone	30	0	4	0
Zimbabwe	25	3	1	0
Antigua and Barbuda	23	2	0	0
Eswatini	22	1	3	0
Angola	19	2	0	0
Lao People's Democratic Republic	19	0	0	0
Timor-Leste	19	0	1	0
Belize	18	2	0	0
New Caledonia	18	0	0	0
Fiji	17	0	0	0
Malawi	17	2	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Botswana	15	1	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Kitts and Nevis	14	0	0	0
Grenada	14	0	0	0
Central African Republic	12	0	0	0
Saint Vincent and the Grenadines	12	0	0	0
Falkland Islands (Malvinas)	11	0	0	0

Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Suriname	10	1	0	0
Gambia	9	1	0	0
Nicaragua	9	1	0	0
Holy See	8	0	0	0
Mauritania	7	1	0	0
Papua New Guinea	7	0	0	0
Saint Barthélemy	6	0	0	0
Bhutan	5	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
Burundi	5	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
British Virgin Islands	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,242,884</b>	<b>152,563</b>	<b>81,113</b>	<b>6,462</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #93 Novel Coronavirus (COVID-19)  
**Date:** Tuesday, 21 April 2020 7:47:31 PM  
**Attachments:** [2020-04-21 NIR Health SitRep v93 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 21 April 2020, there have been 6,645 laboratory confirmed cases of COVID-19 in Australia, including 71 deaths.
- Since yesterday's situation report, an additional 26 cases, and no new deaths, have been reported in Australia.
- To date, more than 439,800 tests have been conducted across Australia.
- National Cabinet met today and agreed to the recommencement of some elective surgeries from 27 April 2020.

#### Situation Overseas

- As at 1500 hrs 21 April 2020, a total of 2,478,153 cases of COVID-19 have been reported globally, including 170,368 deaths.
- On 20 April 2020, Singapore reported 1,426 new cases, continuing its recent increasing incidence of locally acquired cases.

The next Situation Report will be issued on 22 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [\[redacted\]](#) or [\[redacted\]](#) (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [\[redacted\]](#) by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health





**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <del>21</del> 1800 AEDT	<b>Version</b>	<b>93</b>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <del>22</del> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>• <i>National Cabinet met today, 21 April 2020 and:</i> <ul style="list-style-type: none"> <li>◦ <i>agreed to the recommencement of some elective surgeries from 27 April 2020;</i></li> <li>◦ <i>agreed to dentists moving from level 3 to level 2 restrictions;</i></li> <li>◦ <i>noted data confirming measures have succeeded in slowing and reversing the growth of cases in Australia;</i></li> <li>◦ <i>noted that the National Medical Stockpile does not replace state, territory or private processes to source and deliver PPE to meet their needs;</i></li> <li>◦ <i>restated the principles regarding visits to residential aged care facilities (RACF), discussed the lessons learned from recent outbreaks in RACFs, and acknowledged the importance of infection prevention and control measures;</i></li> <li>◦ <i>re-emphasised the one person per four square metres rule does not apply in classrooms.</i></li> </ul> </li> <li>• <i>On Monday, 20 April 2020, the Minister for Regional Health, Regional Communications and Local Government announced a \$52.8 million aeromedical retrieval package to support rural and remote communities during the COVID-19 health emergency.</i> <ul style="list-style-type: none"> <li>◦ <i>The package includes funding for CareFlight and other state and territory aeromedical departments to enable more evacuations.</i></li> </ul> </li> <li>• <i>The Prime Minister announced that this year's ANZAC Day Dawn Service will be broadcast from the Australian War Memorial. The event will not be open to the public to maintain social distancing.</i></li> <li>• <i>The Government is finalising the development of a voluntary Coronavirus tracing app to help map the spread. The app has been modelled closely on a similar Singaporean Government app and will:</i></li> </ul>
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	<ul style="list-style-type: none"> <li>○ <i>digitise the current contact tracing that public health officials manually carry out when an individual tests positive to coronavirus;</i></li> <li>○ <i>identify close contact with an infected person when contact is made for a period of 15 minutes or more;</i></li> <li>○ <i>be subject to a Privacy Impact Assessment, the highest level of cyber security assurance, and is only available to health professionals for identifying people at risk of COVID-19; and</i></li> <li>○ <i>The information of close contacts will:</i> <ul style="list-style-type: none"> <li>▪ <i>only be shared with health authorities after an individual has tested positive for coronavirus and consents to it, mirroring current information provided to public health officials during contact tracing; and</i></li> <li>▪ <i>be fully encrypted and stored securely and anonymously on the mobile phone. It cannot be accessed by anyone, including the user.</i></li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>• Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>• On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>• The Prime Minister announced on 15 March 2020, the Australian Government announced a ban on cruise ships from foreign ports from arriving at Australian ports. The initial 30-day ban has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>• On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>• On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>• The declaration allows the Health Minister to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>• The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>• The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>

## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 21 April 2020)</b></p> <ul style="list-style-type: none"> <li>• A total of <b>6,645</b> cases of COVID-19, including 71 deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>○ Since yesterday's situation report, an additional <b>26</b> cases and <b>no new</b> deaths, have been reported in Australia.</li> <li>○ The total number of cases reported over the last 7 days was <b>245</b>, which is down from the <b>492</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>• According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 18% of these cases requiring admission to an ICU (<b>2.1%</b> of confirmed cases).</li> <li>• The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data)</li> </ul>
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(Figure 3).

- Of the deaths so far reported:
  - The median age is 79 years (range 42 to 95 years).
  - 62% were male and 38% were female.
  - Where data was available regarding comorbidities, 91% had one or more comorbidities and 69% had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).

#### Testing

- To date, more than 439,800 tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions.
  - Cumulative per cent positive was 1.5% and the positivity in the past week was 0.3%.

#### Source of infection

- To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and the US.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; however, all jurisdictions are reporting cases associated with cruise ships. To date there have been 27 deaths reported.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - Victoria has identified 60 clusters. Tasmania is reporting an outbreak in North-West hospitals of 112 cases, including 72 staff members (as of 20 April 2020).
  - In relation to reported cases among healthcare workers nationally, 79% have acquired their infection outside of the healthcare settings, such as from travel overseas or a household contact.
  - While there have been cases of COVID-19 reported in residential aged care facilities the majority are believed to have been introduced by staff or residents. None are known to have been introduced by visitors.
  - NSW Health is reporting 42 cases (14 staff and 28 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 20 April 2020. There have also been two deaths associated with this outbreak.
  - As of 20 April 2020, there were 190 crew on board Ruby Princess who had tested positive for COVID-19. Whilst these crew members remain on board they are not included in NSW or national case numbers. Meanwhile, there are 12 Ruby Princess crew members with COVID-19 and 1 without COVID-19 in health facilities in NSW. These 12 onshore cases are included in the NSW and national numbers.

#### Epidemiological Resources

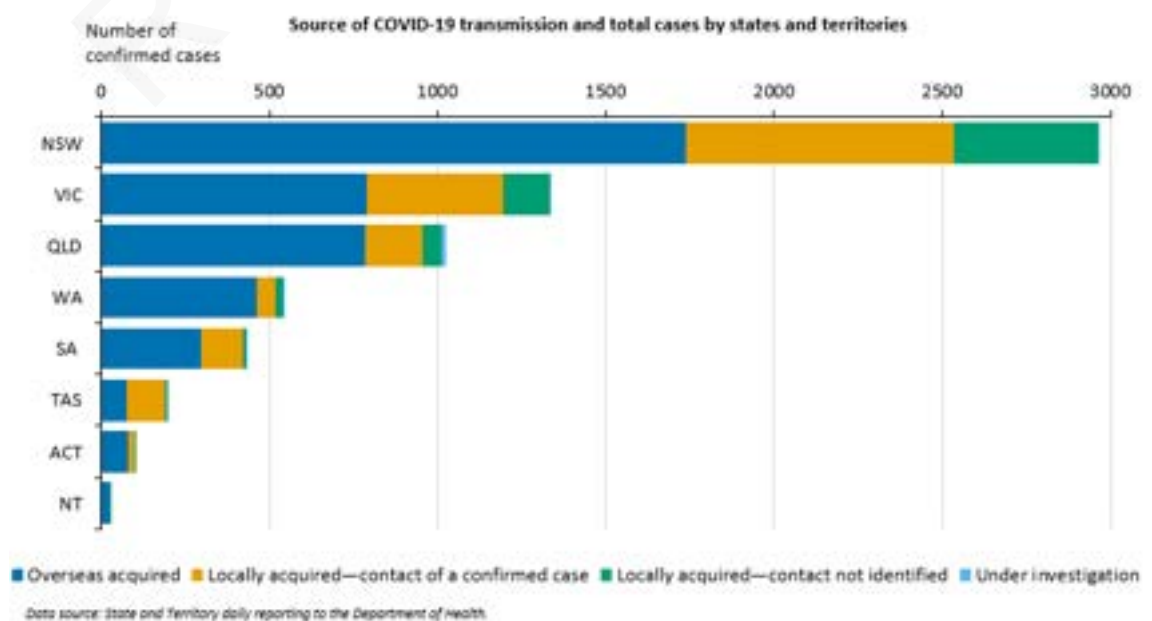
- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 12 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 21 April 2020)**

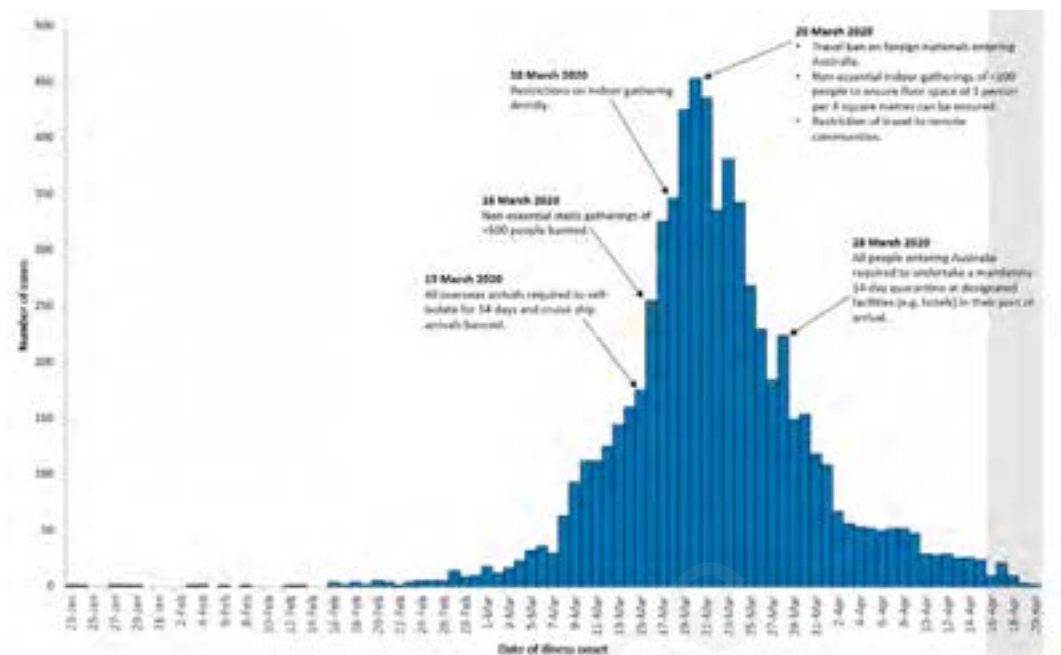
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld <sup>^</sup>	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,254	81	1,738	24	785	297	76	791	462
Locally acquired - contact of confirmed case and/or in a known cluster	1,684	17	795	2	169	125	117	402	57
Locally acquired - contact not identified	559	1	360	0	41	4	0	138	15
Locally acquired - contact not identified, but case had interstate travel	106	5	68	1	17	6	2	0	7
Under investigation	42	0	8	0	12	5	7	5	5
<b>Total cases</b>	<b>6,645</b>	<b>104</b>	<b>2,969</b>	<b>27</b>	<b>1,024</b>	<b>437</b>	<b>202</b>	<b>1,336</b>	<b>546</b>
<b>Deaths (of total)</b>	<b>71</b>	<b>3</b>	<b>28</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>8</b>	<b>15</b>	<b>7</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	26 (0%)	0 (0%)	6 (0%)	0 (0%)	5 (0%)	2 (0%)	5 (3%)	7 (1%)	1 (0%)
Change in the last 72hrs before (%change)	80 (1%)	1 (1%)	33 (1%)	0 (0%)	10 (1%)	2 (0%)	15 (8%)	17 (1%)	2 (0%)
Average daily increase over the past three days (compound)	0.4%	0.3%	0.4%	0.0%	0.3%	0.2%	2.6%	0.4%	0.1%
Increase over the past week	245	1	99	-	26	4	51	45	19

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

<sup>^</sup> On 18 April 2020, Queensland revised their number of cases by source of acquisition after undertaking data cleaning. This resulted in 3 less cases classified as 'Locally acquired-contact of a confirmed case' and 1 less case classified as 'Locally acquired - contact not identified, but case had interstate travel' from previous reporting. It is unknown what these cases were reclassified to.

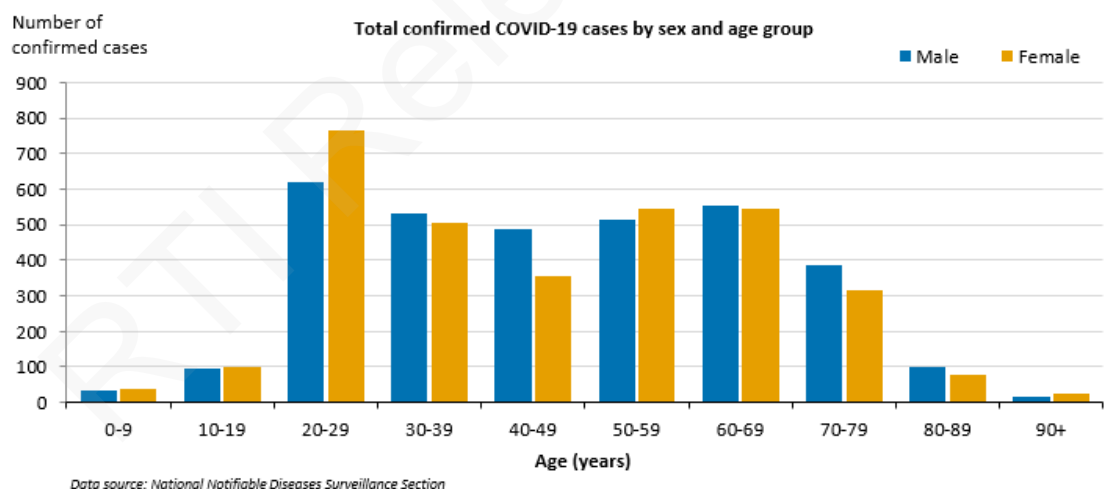
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 21 April 2020**

**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs **21** April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs **21** April 2020**



#### International Situation (as at 1500 hrs, **21** April 2020)

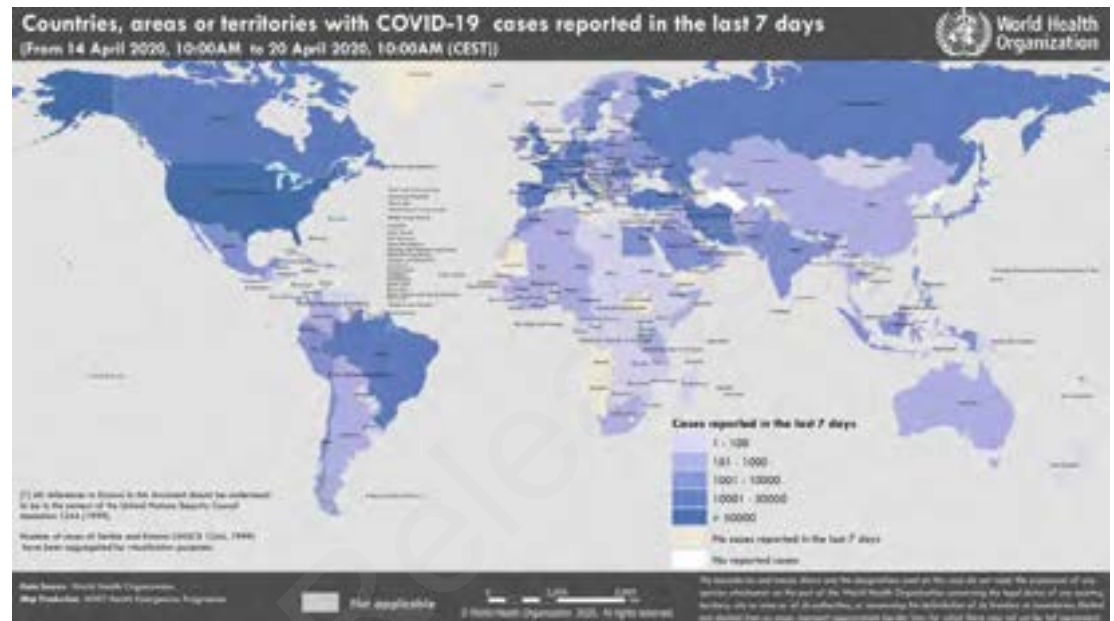
- A total of **2,478,153** cases of COVID-19 have been reported globally, including **170,368** deaths (Johns Hopkins University).
  - A total of **73,904** new cases, including **5,134** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (**22%**), Italy (**15%**), Spain (**13%**), and France (**13%**) (Source: WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.8% (Source: WHO Situation Report). The risk of death reportedly increases with age.
- On 17 April 2020, China's National Health Commission revised the COVID-19 deaths in Wuhan up by 1,290 COVID-19 deaths, bringing Wuhan deaths to 3,869. The new deaths raises China's national total by 39%. The NHC attributes the underreporting to the large surge of cases early in the epidemic hindering data collection efforts. In particular, the notice references inadequate testing, overwhelmed healthcare capacity (leading to patients dying



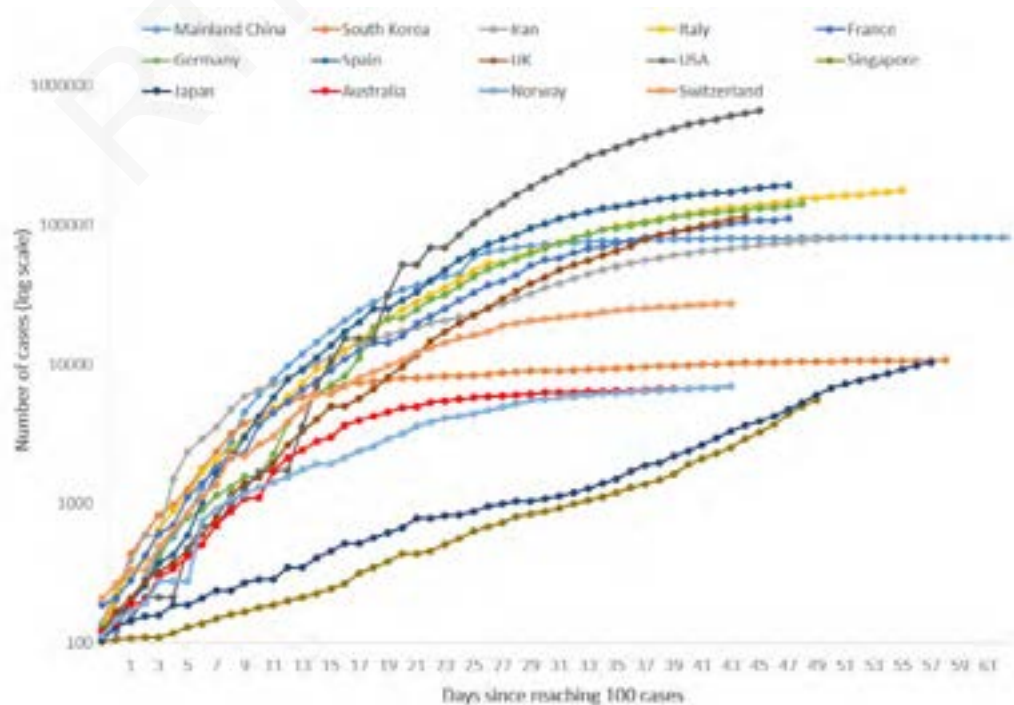
outside of healthcare settings), and healthcare facilities not being able to utilize the central reporting system.

- On **20 April 2020**, Singapore reported **1,426** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **1,369 (96%)** were reported among residents of migrant worker dormitories. *Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing with most cases being reported as asymptomatic or mild cases.* In total, Singapore has reported **8,014** cases and 11 deaths.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **590** deaths and a case fatality rate of **8.7%**. The government has reported **6,760** cases to date.

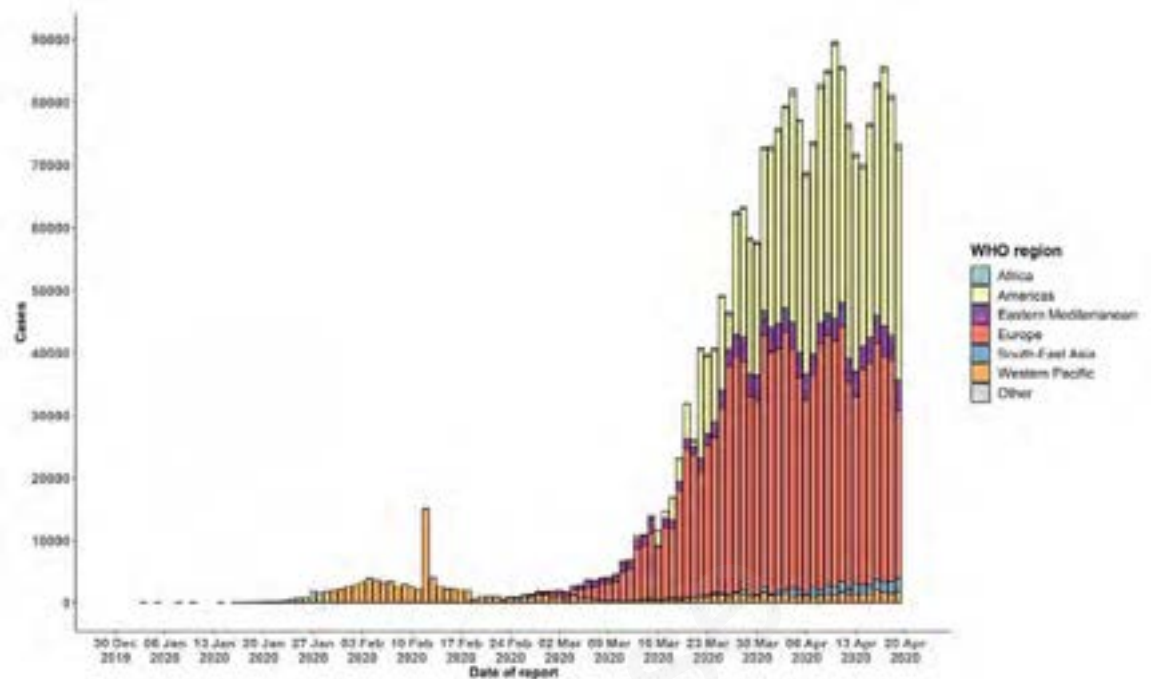
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report **91** of **20 April 2020****



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs **21 April 2020****



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 91 of 20 April 2020**



#### International response

##### WHO

- On 20 April 2020, the Director-General announced:
  - WHO is providing technical, scientific and financial support for the rollout of sero-epidemiologic surveys globally.
  - WHO is working with partners such as the Foundation for Innovative New Diagnostics, and the Clinton Health Access Initiative to increase the production and equitable distribution of diagnostics to nations in need.
  - WHO is leading research and development efforts with over 100 countries participating in the Solidarity Trial to evaluate therapeutics for COVID-19. 1,200 patients have been randomized from the first 5 countries. It is anticipated that more than 600 hospitals will be ready to start enrolling patients this week.
  - there have been six cases of Ebola in the past 10 days in the Democratic Republic of the Congo, after 54 days without a case.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>• The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>• On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>• The ACT Health Emergency Control Centre (HECC) has moved location and remains activated.</li> <li>• The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>• The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>• NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>• On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>



NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> <li><i>The majority of international flights repatriating Australians are landing in Melbourne. All passengers arriving in these international flights are temperature and health screened and remain in Victoria for their mandatory 14-day hotel quarantine. Currently, approximately 20% of these exits from quarantine return to their residence in other states and territories.</i></li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal

outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location, *excluding Australia*

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (**2,478,153**) as at 1500 hours.

Source: International cases based on WHO Situation Report 91, 20 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,237	4,642	36	0
Hong Kong SAR	1,026	4	0	0
Taiwan	422	6	2	0
Macau SAR	45	0	0	0
United States of America	723,605	34,203	28,252	1,776
Spain	195,944	20,453	4,218	410
Italy	178,972	23,660	3,047	433
Germany	141,672	4,404	1,775	110

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
The United Kingdom	120,071	16,060	5,850	596
France	111,463	19,689	742	395
Turkey	86,306	2,017	3,977	127
Iran (Islamic Republic of)	82,211	5,118	1,343	87
Russian Federation	42,853	361	0	0
Belgium	38,496	5,683	1,313	230
Brazil	36,599	2,347	2,917	206
Canada	33,909	1,506	1,509	160
Netherlands	32,655	3,684	1,066	83
Switzerland	27,658	1,134	336	24
Portugal	20,206	714	521	27
India	17,265	543	1,553	36
Ireland	15,251	610	493	39
Austria	14,710	452	48	9
Peru	14,420	348	931	48
Sweden	14,385	1,540	563	29
Israel	13,362	171	255	13
Chile	10,888	133	1,158	7
Japan	10,751	171	390	10
Republic of Korea	10,674	236	13	2
Ecuador	9,468	474	446	18
Saudi Arabia	9,362	97	1,088	5
Poland	9,287	360	545	13
Romania	8,746	434	328	17
Pakistan	8,418	176	425	17
Mexico	7,497	650	622	104
Denmark	7,384	355	142	9
Norway	7,068	154	84	6
Czechia	6,787	188	133	7
United Arab Emirates	6,781	41	479	4
Singapore	6,588	11	1,015	0
Indonesia	6,575	582	327	47
Serbia	6,318	122	324	5
Philippines	6,259	409	172	12
Ukraine	5,710	151	261	10
Qatar	5,448	8	440	0
Malaysia	5,389	89	84	1
Belarus	4,779	47	0	2
Dominican Republic	4,680	226	345	9
Panama	4,273	120	63	5
Finland	3,783	94	102	4
Colombia	3,621	166	182	13
Luxembourg	3,550	73	13	1

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
South Africa	3,158	54	124	2
Egypt	3,144	239	112	15
Morocco	2,855	141	170	4
Argentina	2,839	132	55	3
Thailand	2,792	47	27	0
Algeria	2,629	375	95	8
Republic of Moldova	2,472	67	121	7
Bangladesh	2,456	91	312	7
Greece	2,235	110	28	5
Hungary	1,984	199	68	10
Kuwait	1,915	7	164	1
Bahrain	1,881	7	108	0
Croatia	1,871	47	39	8
Iceland	1,771	9	11	0
Uzbekistan	1,565	5	70	0
Kazakhstan	1,546	17	0	0
Iraq	1,539	82	26	0
Estonia	1,528	40	16	2
Oman	1,410	7	144	1
Azerbaijan	1,398	19	25	1
Slovenia	1,330	74	13	4
Lithuania	1,326	36	28	3
Armenia	1,291	20	43	0
Bosnia and Herzegovina	1,286	46	18	0
Puerto Rico	1,213	62	95	2
North Macedonia	1,207	51	37	2
Slovakia	1,161	12	72	1
New Zealand	1,105	12	7	1
Ghana	1,042	9	208	0
Cuba	1,035	34	49	2
Cameroon	1,016	21	0	0
Afghanistan	996	33	63	3
Bulgaria	915	43	37	2
Tunisia	866	37	0	0
Côte d'Ivoire	847	9	105	3
Djibouti	846	2	114	0
Cyprus	767	17	6	0
Latvia	727	5	15	0
Andorra	717	36	13	1
International conveyance (Diamond Princess)	712	13	0	0
Lebanon	673	21	0	0
Costa Rica	655	4	6	0
Niger	648	20	9	1

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Kyrgyzstan	568	7	14	2
Burkina Faso	565	36	18	4
Albania	562	26	14	0
Nigeria	541	19	168	8
Kosovo	535	12	25	0
Bolivia (Plurinational State of)	520	32	27	1
Uruguay	517	9	9	0
Guinea	477	3	0	0
Honduras	472	46	15	0
San Marino	461	39	6	0
Malta	427	3	1	0
Jordan	417	7	4	0
Réunion	408	0	1	0
Georgia	399	4	5	0
Senegal	367	3	17	0
Democratic Republic of the Congo	332	25	5	0
Mauritius	328	9	3	0
occupied Palestinian territory	324	2	4	0
Montenegro	308	5	0	0
Isle of Man	297	4	6	0
Mayotte	284	4	39	0
Sri Lanka	271	7	17	0
Kenya	270	14	8	2
Viet Nam	268	0	0	0
Guatemala	257	7	22	0
Jersey	245	12	11	1
Guernsey	239	9	3	0
Venezuela (Bolivarian Republic of)	228	9	24	0
Mali	224	14	8	1
Paraguay	206	8	4	0
El Salvador	201	7	11	0
Faroe Islands	185	0	1	0
Jamaica	173	5	10	0
United Republic of Tanzania	171	7	23	2
Somalia	164	7	29	0
Martinique	163	12	0	0
Guadeloupe	148	11	3	0
Rwanda	147	0	3	0
Congo	143	6	0	0
Brunei Darussalam	138	1	1	0
Guam	133	5	-3	0
Gibraltar	133	0	0	0
Cambodia	122	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Madagascar	121	0	1	0
Trinidad and Tobago	114	8	0	0
Myanmar	111	5	4	0
Gabon	109	1	1	0
Ethiopia	108	3	3	0
Monaco	98	1	0	0
Aruba	97	2	1	0
French Guiana	96	0	0	0
Sudan	92	12	26	2
Liberia	91	8	10	1
Bermuda	86	5	3	0
Togo	83	5	0	0
Liechtenstein	82	1	0	0
Equatorial Guinea	79	0	0	0
Barbados	75	5	0	0
Sint Maarten	64	9	7	0
Guyana	63	7	0	1
Cayman Islands	61	1	0	0
Zambia	61	3	4	1
Bahamas	58	9	4	0
Cabo Verde	55	1	0	0
French Polynesia	55	0	0	0
Uganda	55	0	0	0
United States Virgin Islands	53	3	0	0
Libya	51	1	2	0
Maldives	51	0	17	0
Guinea-Bissau	50	0	0	0
Haiti	44	3	0	0
Eritrea	39	0	0	0
Syrian Arab Republic	39	3	1	1
Benin	37	1	0	0
Saint Martin	37	2	0	0
Mozambique	35	0	4	0
Sierra Leone	35	0	5	0
Chad	33	0	0	0
Mongolia	32	0	1	0
Nepal	31	0	0	0
Zimbabwe	25	3	0	0
Antigua and Barbuda	23	3	0	1
Eswatini	22	1	0	0
Botswana	20	1	5	0
Angola	19	2	0	0
Lao People's Democratic Republic	19	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Timor-Leste	19	0	0	0
Belize	18	2	0	0
New Caledonia	18	0	0	0
Fiji	17	0	0	0
Malawi	17	2	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Kitts and Nevis	14	0	0	0
Grenada	13	0	-1	0
Central African Republic	12	0	0	0
Saint Vincent and the Grenadines	12	0	0	0
Falkland Islands (Malvinas)	11	0	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Suriname	10	1	0	0
Gambia	9	1	0	0
Nicaragua	9	1	0	0
Holy See	8	0	0	0
Mauritania	7	1	0	0
Papua New Guinea	7	0	0	0
Saint Barthélemy	6	0	0	0
Burundi	6	1	1	1
Bhutan	5	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
British Virgin Islands	4	1	1	1
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,309,502</b>	<b>157,787</b>	<b>73,235</b>	<b>5,295</b>



**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #94 Novel Coronavirus (COVID-19)  
**Date:** Wednesday, 22 April 2020 7:26:58 PM  
**Attachments:** [2020-04-22 NIR Health SitRep v94 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 22 April 2020, there have been 6,649 laboratory confirmed cases of COVID-19 in Australia, including 74 deaths.
- Since yesterday's situation report, an additional 4 cases and 3 deaths, have been reported in Australia.
- To date, more than 452,400 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 22 April 2020, a total of 2,564,190 cases of COVID-19 have been reported globally, including 177,445 deaths.
- A WHO expert team has travelled to Belarus, in the last week, to support the Ministry of Health in preparing the country for its COVID-19 response

The next Situation Report will be issued on 23 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-22 1800 AEDT	<b>Version</b>	94
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-23 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 22 April 2020, the Minister for Aged Care and Senior Australians announced current measures to ensure care for Anglicare's Newmarch House residents amidst COVID-19.             <ul style="list-style-type: none"> <li>The Department of Health, the Aged Care Quality and Safety Commission, NSW Ministry of Health and Anglicare are meeting regularly and coordinating a response to the cluster.</li> <li>Anglicare will call a resident and family meeting tomorrow, 23 April 2020.</li> </ul> </li> <li>The Government is finalising the development of a voluntary Coronavirus tracing app to help map the spread. The app has been modelled closely on a similar Singaporean Government app and will:             <ul style="list-style-type: none"> <li>digitise the current contact tracing that public health officials manually carry out when an individual tests positive to coronavirus;</li> <li>identify close contact with an infected person when contact is made for a period of 15 minutes or more;</li> <li>be subject to a Privacy Impact Assessment, the highest level of cyber security assurance, and is only available to health professionals for identifying people at risk of COVID-19; and</li> <li>The information of close contacts will:                 <ul style="list-style-type: none"> <li>only be shared with health authorities after an individual has tested positive for coronavirus and consents to it, mirroring current information provided to public health officials during contact tracing; and</li> <li>be fully encrypted and stored securely and anonymously on the mobile phone. It cannot be accessed by anyone, including the user.</li> </ul> </li> </ul> </li> </ul>
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Response	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 21 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,649</b> cases of COVID-19, including <b>74</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>4</b> cases and <b>3</b> deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>202</b>, which is down from the <b>434</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately <b>11%</b> of cases have been hospitalised during their course of illness, with <b>19%</b> of these cases requiring admission to an ICU (<b>2.2%</b> of confirmed cases).</li> <li>The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is <b>79.5</b> years (range 42 to 95 years).</li> <li><b>61%</b> were male and <b>39%</b> were female.</li> <li>Where data was available regarding comorbidities, <b>93%</b> had one or more comorbidities and 69% had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> <p><b>Testing</b></p> <ul style="list-style-type: none"> <li>To date, more than <b>452,400</b> tests have been conducted across Australia (as at 3pm) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.5% and the positivity in the past week was <b>0.2%</b>.</li> </ul> </li> </ul>
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Source of infection

- To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; however, all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - Victoria has identified 60 clusters. Tasmania is reporting an outbreak in North-West hospitals of 112 cases, including 72 staff members (as of 20 April 2020).
  - In relation to reported cases among healthcare workers nationally, 79% have acquired their infection outside of the healthcare settings, such as from travel overseas or a household contact.
  - While there have been cases of COVID-19 reported in residential aged care facilities the majority are believed to have been introduced by staff or residents. None are known to have been introduced by visitors.
  - NSW Health is reporting 42 cases (14 staff and 28 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 20 April 2020. There have also been two deaths associated with this outbreak.
  - As of 20 April 2020, there were 190 crew on board Ruby Princess who had tested positive for COVID-19. Whilst these crew members remain on board they are not included in NSW or national case numbers. Meanwhile, there are 12 Ruby Princess crew members with COVID-19 and 1 without COVID-19 in health facilities in NSW. These 12 onshore COVID-19 cases are included in the NSW and national numbers.

Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 12 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 22 April 2020)**

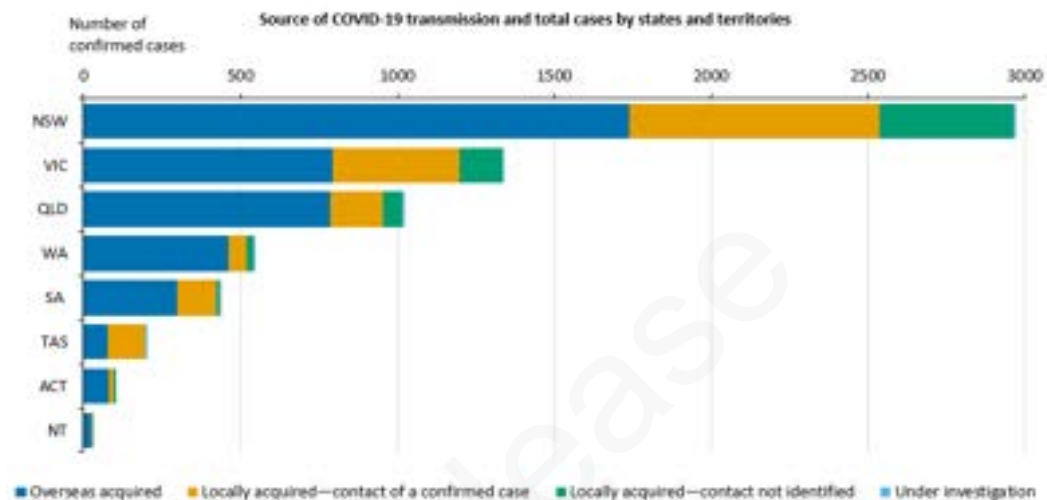
Confirmed COVID-19 cases	Australia	ACT <sup>a</sup>	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<b>4,257</b>	<b>80</b>	<b>1,738</b>	24	785	<b>298</b>	76	<b>794</b>	462
Locally acquired - contact of confirmed case and/or in a known cluster	<b>1,692</b>	17	<b>799</b>	2	<b>170</b>	125	117	<b>405</b>	57
Locally acquired - contact not identified	<b>553</b>	1	<b>356</b>	0	<b>42</b>	4	0	<b>135</b>	15
Locally acquired - contact not identified, but case had interstate travel	<b>109</b>	<b>6</b>	<b>70</b>	1	17	6	2	0	7
Under investigation	<b>38</b>	0	<b>8</b>	0	<b>10</b>	5	<b>8</b>	<b>2</b>	5
<b>Total cases</b>	<b>6,649</b>	<b>104</b>	<b>2,971</b>	<b>27</b>	<b>1,024</b>	<b>438</b>	<b>203</b>	<b>1,336</b>	<b>546</b>
<b>Deaths (of total)</b>	<b>74</b>	3	<b>31</b>	0	6	4	8	15	7
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<b>4</b> <b>(0%)</b>	0 (0%)	2 (0%)	0 (0%)	<b>0</b> <b>(0%)</b>	<b>1</b> <b>(0%)</b>	<b>1</b> <b>(0%)</b>	<b>0</b> <b>(0%)</b>	<b>0</b> <b>(0%)</b>
Change in the last 72hrs before (%change)	<b>43</b> <b>(1%)</b>	1 (1%)	14 (0%)	0 (0%)	<b>5</b> <b>(0%)</b>	<b>3</b> <b>(1%)</b>	<b>11</b> <b>(6%)</b>	8 (1%)	<b>1</b> <b>(0%)</b>

Average daily increase over the past three days (compound)	0.2%	0.3%	0.2%	0.0%	0.2%	0.2%	1.9%	0.2%	0.1%
Increase over the past week	202	1	85	-	25	5	35	37	14

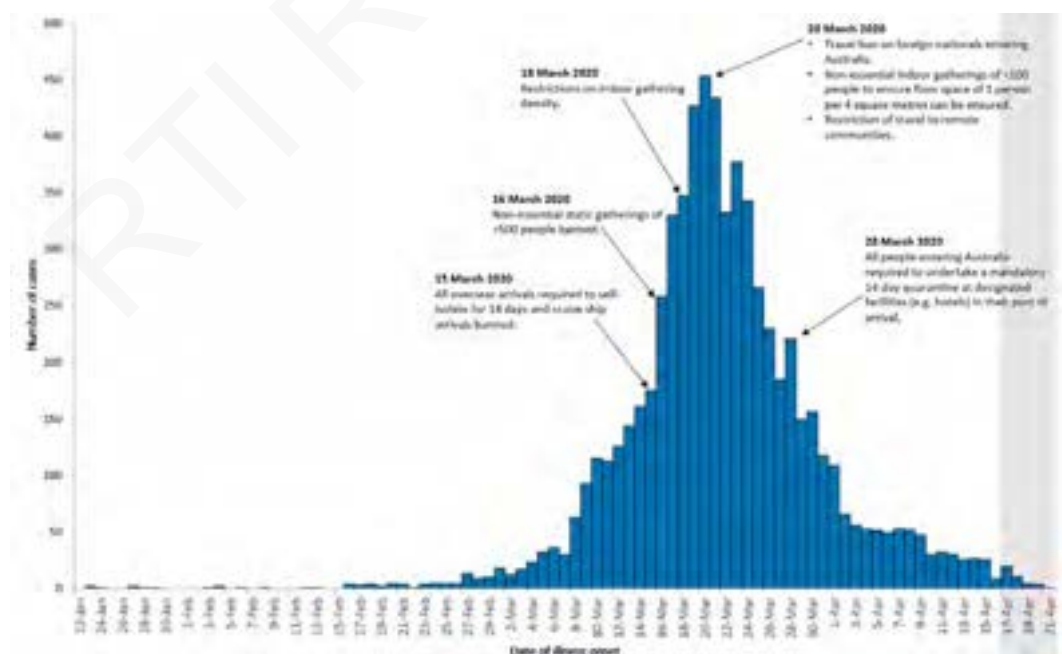
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

<sup>a</sup> On 22 April 2020, ACT revised the source of acquisition for 1 of their cases after undertaking data cleaning. This resulted in the case being changed from Overseas Acquired to Locally acquired - contact not identified interstate travel.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 22 April 2020**

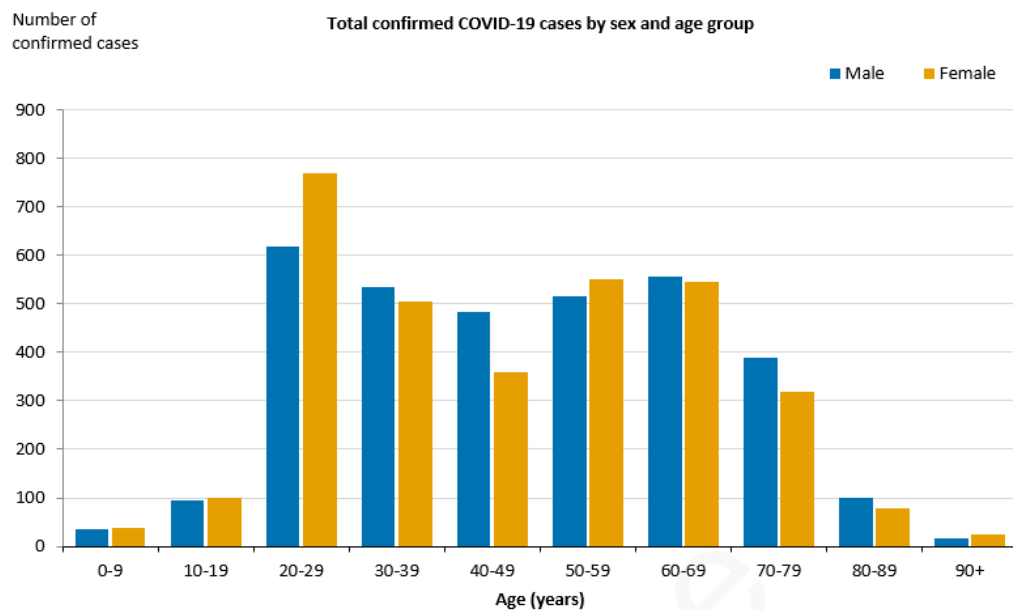


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 22 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 22 April 2020**

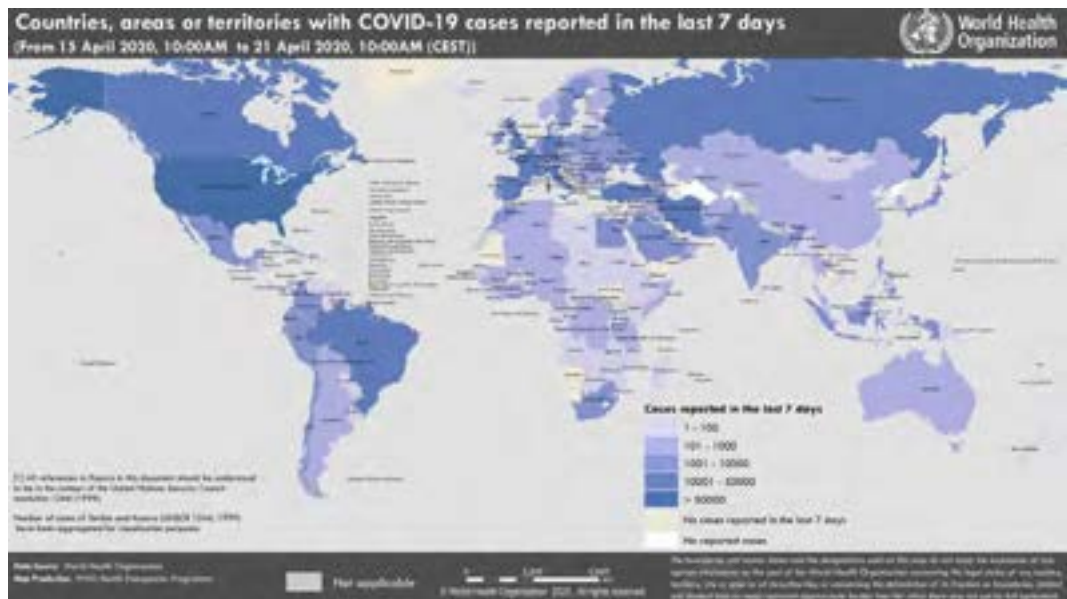


**International Situation (as at 1500 hrs, 21 April 2020)**

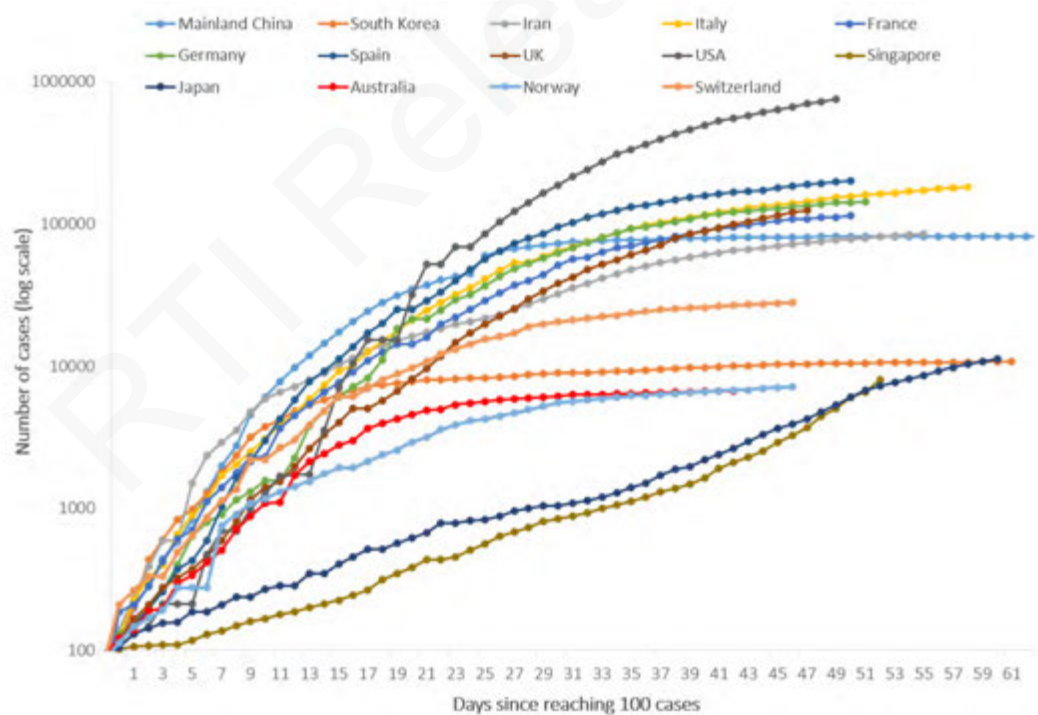
- A total of **2,564,190** cases of COVID-19 have been reported globally, including **177,445** deaths (Johns Hopkins University).
  - A total of **69,275** new cases, including **6,196** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (22%), Italy (15%), Spain (13%), and France (**12%**) (Source: WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.8% (Source: WHO Situation Report). The risk of death reportedly increases with age.
- On 17 April 2020, China's National Health Commission revised the COVID-19 deaths in Wuhan up by 1,290 COVID-19 deaths, bringing Wuhan deaths to 3,869. The new deaths raises China's national total by 39%. The NHC attributes the underreporting to the large surge of cases early in the epidemic hindering data collection efforts. In particular, the notice references inadequate testing, overwhelmed healthcare capacity (leading to patients dying outside of healthcare settings), and healthcare facilities not being able to utilize the central reporting system.
- On **21** April 2020, Singapore reported **1,111** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **1,050 (95%)** were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing with most cases being reported as asymptomatic or mild cases. In total, Singapore has reported **9,114** cases and 11 deaths.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting 590 deaths and a case fatality rate of 8.7%. The government has reported **6,760 cases as of the 21 April 2020**.



**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 92 of 21 April 2020**

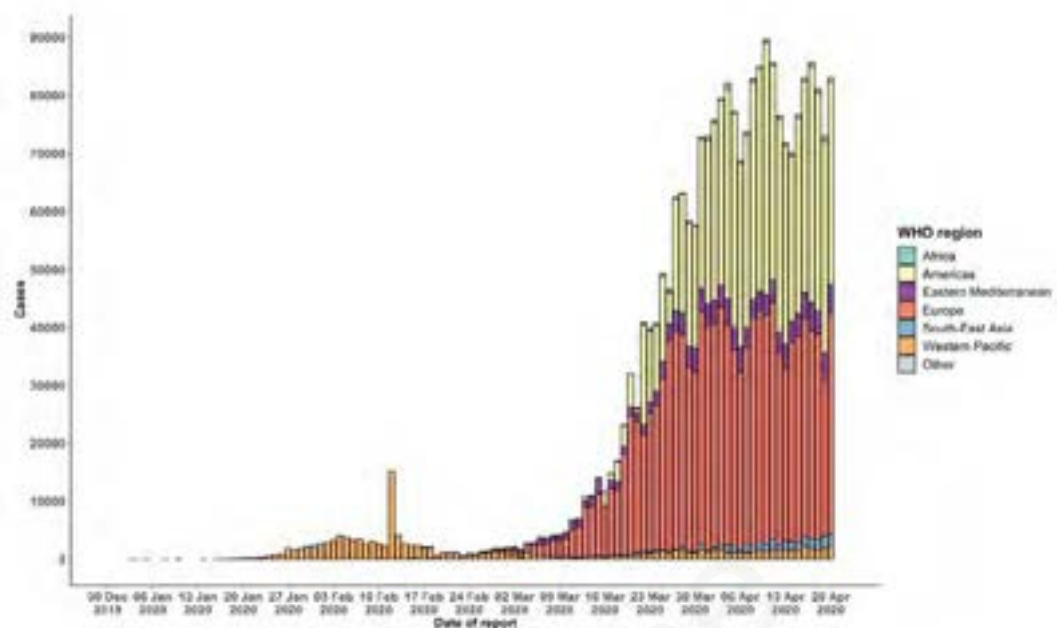


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 22 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 92 of 21 April 2020**



**International response**

**WHO**

- On 21 April 2020, the WHO Regional Director South-East Asia announced the death of a WHO worker in Myanmar, who was transporting COVID-19 samples, as the result of an attack.
- A WHO expert team has travelled to Belarus, in the last week, to support the Ministry of Health in preparing the country for its COVID-19 response.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to "stand up" on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> </ul>

	<ul style="list-style-type: none"> <li>• A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>• Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>• The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>• Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>• Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>• GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>• On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>• Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>• A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>• Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>• All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> <li>• The majority of international flights repatriating Australians are landing in Melbourne. All passengers arriving in these international flights are temperature and health screened and remain in Victoria for their mandatory 14-day hotel quarantine. Currently, approximately 20% of these exits from quarantine return to their residence in other states and territories.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>• A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>• A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,564,190) as at 1500 hours.

Source: International cases based on WHO Situation Report 92, 21 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,250	4,642	13	0
Hong Kong SAR	1,030	4	4	0
Taiwan	425	6	3	0
Macau SAR	45	0	0	0
United States of America	751,273	35,884	27,668	1,681
Spain	200,210	20,852	4,266	399
Italy	181,228	24,114	2,256	454
Germany	143,457	4,598	1,785	194
The United Kingdom	124,747	16,509	4,676	449
France	113,513	20,233	2,050	544
Turkey	90,980	2,140	4,674	123
Iran (Islamic Republic of)	83,505	5,209	1,294	91
Russian Federation	52,763	456	9,910	95
Belgium	39,983	5,828	1,487	145
Brazil	38,654	2,462	2,055	115
Canada	35,383	1,611	1,474	105

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Netherlands	33,405	3,751	750	67
Switzerland	27,862	1,141	204	7
Portugal	20,863	735	657	21
India	18,601	590	1,336	47
Ireland	15,652	687	401	77
Peru	15,628	400	1,208	52
Austria	14,783	470	73	18
Sweden	14,777	1,580	392	40
Israel	13,883	181	521	10
Japan	11,118	186	367	15
Republic of Korea	10,683	237	9	1
Chile	10,507	139	0	6
Saudi Arabia	10,484	103	1,122	6
Ecuador	10,128	507	660	33
Poland	9,593	380	306	20
Pakistan	9,216	192	798	16
Romania	8,936	451	190	17
Mexico	8,261	686	764	36
Singapore	8,014	11	1,426	0
Denmark	7,515	364	131	9
United Arab Emirates	7,265	43	484	2
Norway	7,113	154	45	0
Czechia	6,914	196	127	8
Indonesia	6,760	590	185	8
Serbia	6,630	125	312	3
Philippines	6,459	428	200	19
Belarus	6,264	51	1,485	4
Ukraine	6,125	161	415	10
Qatar	6,015	9	567	1
Malaysia	5,424	89	35	0
Dominican Republic	4,964	235	284	9
Panama	4,467	126	194	6
Finland	3,868	98	85	4
Colombia	3,792	179	171	13
Luxembourg	3,558	75	8	2
Egypt	3,333	250	189	11
South Africa	3,300	58	142	4
Morocco	3,046	143	191	2
Argentina	2,960	136	121	4
Bangladesh	2,948	101	492	10
Thailand	2,811	48	19	1
Algeria	2,718	384	89	9
Republic of Moldova	2,548	70	76	3
Greece	2,245	116	10	6

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Hungary	2,098	213	114	14
Kuwait	1,995	9	80	2
Bahrain	1,907	7	26	0
Croatia	1,881	47	10	0
Kazakhstan	1,852	19	306	2
Iceland	1,773	10	2	1
Uzbekistan	1,657	5	92	0
Iraq	1,574	82	35	0
Estonia	1,535	40	7	0
Oman	1,508	8	98	1
Azerbaijan	1,436	19	38	0
Lithuania	1,350	37	24	1
Armenia	1,339	22	48	2
Slovenia	1,335	74	5	0
Bosnia and Herzegovina	1,300	49	14	3
Puerto Rico	1,252	63	39	1
North Macedonia	1,225	54	18	3
Slovakia	1,173	13	12	1
Cameroon	1,163	42	147	21
New Zealand	1,107	13	2	1
Cuba	1,087	36	52	2
Ghana	1,042	9	0	0
Afghanistan	1,026	36	30	3
Bulgaria	929	43	14	0
Tunisia	884	38	18	1
Côte d'Ivoire	879	10	32	1
Djibouti	846	2	0	0
Cyprus	772	17	5	0
Latvia	739	5	12	0
Andorra	718	36	1	0
International conveyance (Diamond Princess)	712	13	0	0
Lebanon	677	21	4	0
Costa Rica	660	5	5	1
Niger	655	20	7	0
Guinea	622	5	145	2
Albania	609	26	47	0
Kyrgyzstan	590	7	22	0
Burkina Faso	576	36	11	0
Kosovo	572	12	37	0
Bolivia (Plurinational State of)	564	33	44	1
Nigeria	541	19	0	0
Uruguay	528	10	11	1
Honduras	477	46	5	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
San Marino	462	39	1	0
Malta	431	3	4	0
Jordan	425	7	8	0
Georgia	408	4	9	0
Réunion	408	0	0	0
Senegal	377	5	10	2
Democratic Republic of the Congo	350	25	18	0
occupied Palestinian territory	329	2	5	0
Mauritius	328	9	0	0
Montenegro	312	5	4	0
Sri Lanka	304	7	33	0
Isle of Man	297	4	0	0
Guatemala	289	7	32	0
Mayotte	284	4	0	0
Kenya	281	14	11	0
Viet Nam	268	0	0	0
Venezuela (Bolivarian Republic of)	256	9	28	0
United Republic of Tanzania	255	10	84	3
Jersey	249	12	4	0
Mali	246	14	22	0
Guernsey	239	9	0	0
Somalia	237	8	73	1
El Salvador	218	7	17	0
Paraguay	208	8	2	0
Jamaica	196	5	23	0
Faroe Islands	185	0	0	0
Martinique	163	14	0	2
Congo	160	6	17	0
Guadeloupe	148	11	0	0
Rwanda	147	0	0	0
Brunei Darussalam	138	1	0	0
Gibraltar	133	0	0	0
Guam	133	5	0	0
Cambodia	122	0	0	0
Madagascar	121	0	0	0
Gabon	120	1	11	0
Myanmar	119	5	8	0
Trinidad and Tobago	114	8	0	0
Ethiopia	111	3	3	0
Sudan	107	12	15	0
Liberia	99	8	8	0
Aruba	97	2	0	0
French Guiana	97	1	1	1

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Bermuda	86	5	0	0
Togo	84	5	1	0
Liechtenstein	82	1	0	0
Equatorial Guinea	79	0	0	0
Barbados	75	5	0	0
Monaco	68	1	0	0
Maldives	67	0	16	0
Sint Maarten	67	10	3	1
Guyana	65	7	2	0
Zambia	65	3	4	0
Cayman Islands	61	1	0	0
Bahamas	60	9	2	0
French Polynesia	56	0	1	0
Cabo Verde	55	1	0	0
Uganda	55	0	0	0
Benin	54	1	17	0
United States Virgin Islands	53	3	0	0
Libya	51	1	0	0
Guinea-Bissau	50	0	0	0
Haiti	47	3	3	0
Sierra Leone	43	0	8	0
Eritrea	39	0	0	0
Syrian Arab Republic	39	3	0	0
Saint Martin	37	2	0	0
Mozambique	35	0	0	0
Chad	33	0	0	0
Mongolia	33	0	1	0
Nepal	31	0	0	0
Zimbabwe	25	3	0	0
Angola	24	2	5	0
Eswatini	24	1	2	0
Antigua and Barbuda	23	3	0	0
Timor-Leste	23	0	4	0
Botswana	20	1	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	1	0
New Caledonia	18	0	0	0
Malawi	17	2	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Saint Kitts and Nevis	15	0	1	0
Saint Lucia	15	0	0	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Curaçao	14	1	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Grenada	13	0	0	0
Central African Republic	12	0	0	0
Saint Vincent and the Grenadines	12	0	0	0
Falkland Islands (Malvinas)	11	0	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Gambia	10	1	1	0
Suriname	10	1	0	0
Holy See	9	0	1	0
Nicaragua	9	2	0	1
Mauritania	7	1	0	0
Papua New Guinea	7	0	0	0
Bhutan	6	0	1	0
Burundi	6	1	0	0
Saint Barthélemy	6	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
British Virgin Islands	4	1	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,392,091</b>	<b>162,895</b>	<b>82,993</b>	<b>5,108</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #95 Novel Coronavirus (COVID-19)  
**Date:** Thursday, 23 April 2020 8:24:41 PM  
**Attachments:** [2020-04-23 NIR Health SitRep v95 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 23 April 2020, there have been 6,661 laboratory confirmed cases of COVID-19 in Australia, including 75 deaths.
- Since yesterday's situation report, an additional 12 cases and 1 death, have been reported in Australia.
- To date, more than 466,600 tests have been conducted across Australia.

#### Situation Overseas

- As at 1830 hrs 23 April 2020, a total of 2,628,916 cases of COVID-19 have been reported globally, including 183,441 deaths.
- On 22 April 2020, the WHO Director-General announced that most epidemics in Western Europe are slowing, however upwards trends in Africa, Central and South America, and Eastern Europe are occurring.

The next Situation Report will be issued on 24 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <b>23</b> 1800 AEDT	<b>Version</b>	<b>95</b>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <b>24</b> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <b>red italics</b>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 23 April 2020, the Minister for Health announced the Australian Government's funding and launch of the Critical Health Resource Information System (CHRIS), a tool to share live data on available Intensive Care Unit (ICU) beds and ICU equipment, including ventilators. CHRIS:               <ul style="list-style-type: none"> <li>will operate in all public and private hospitals with ICUs; and</li> <li>was developed in conjunction with the Australian and New Zealand Intensive Care Society, Ambulance Victoria and Telstra Purple.</li> </ul> </li> <li>The Government is finalising the development of a voluntary Coronavirus tracing app to help map the spread. The app has been modelled closely on a similar Singaporean Government app and will:               <ul style="list-style-type: none"> <li>digitise the current contact tracing that public health officials manually carry out when an individual tests positive to coronavirus;</li> <li>identify close contact with an infected person when contact is made for a period of 15 minutes or more;</li> <li>be subject to a Privacy Impact Assessment, the highest level of cyber security assurance, and is only available to health professionals for identifying people at risk of COVID-19; and</li> <li>The information of close contacts will:                   <ul style="list-style-type: none"> <li>only be shared with health authorities after an individual has tested positive for coronavirus and consents to it, mirroring current information provided to public health officials during contact tracing; and</li> <li>be fully encrypted and stored securely and anonymously on the mobile phone. It cannot be accessed by anyone, including the user.</li> </ul> </li> </ul> </li> </ul>
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Response	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 23 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of 6,661 cases of COVID-19, including 75 deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional 12 cases and 1 death, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was 193, which is down from the 365 reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 19% of these cases requiring admission to an ICU (2.2% of confirmed cases).</li> <li>The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is 79 years (range 42 to 95 years).</li> <li>61% were male and 39% were female.</li> <li>Where data was available regarding comorbidities, 96% had one or more comorbidities and 71% had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul>
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Testing

- To date, more than **466,600** tests have been conducted across Australia (as at **1500**) as reported by the jurisdictions.
  - Cumulative per cent positive was **1.4%** and the positivity in the past week was 0.2%.

Source of infection

- To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; however, all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - *The Ruby Princess is expected to depart Australia on 23 April 2020. Some crew have disembarked prior to the ship's departure; however, the number of COVID-19 cases who remain on board is not known. To date over 600 cases of COVID-19 cases associated with the vessel have been reported by the states and territories (excluding the 190 crew who were COVID-19 positive).*
  - *Tasmania is reporting an outbreak in North-West hospitals of 117 cases, including 75 staff members (as of 22 April 2020).*
  - While there have been cases of COVID-19 reported in residential aged care facilities in residents or staff, the majority are believed to have been introduced by staff or residents. None are known to have been introduced by visitors (*data analysed on 20 April 2020*).
  - NSW Health is reporting 44 cases (15 staff and 29 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 22 April 2020. There have also been 3 deaths associated with this outbreak.

Epidemiological Resources

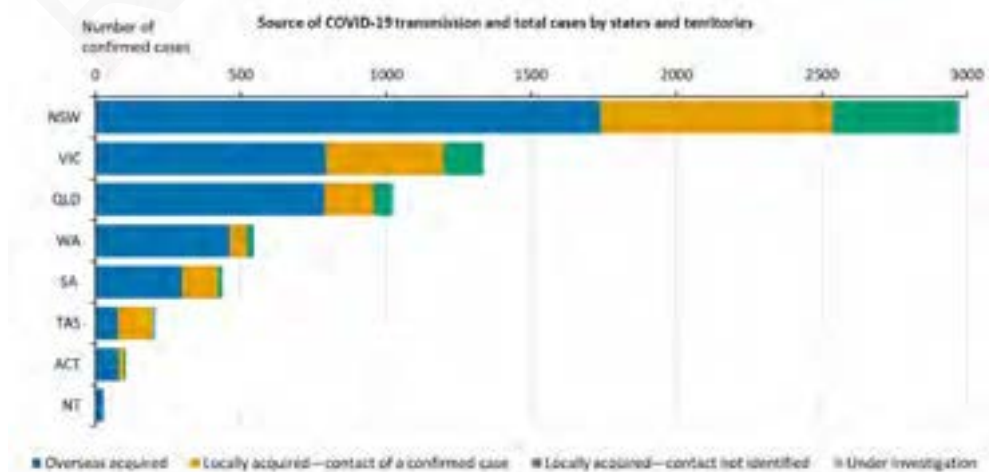
- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 12 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 23 April 2020)**

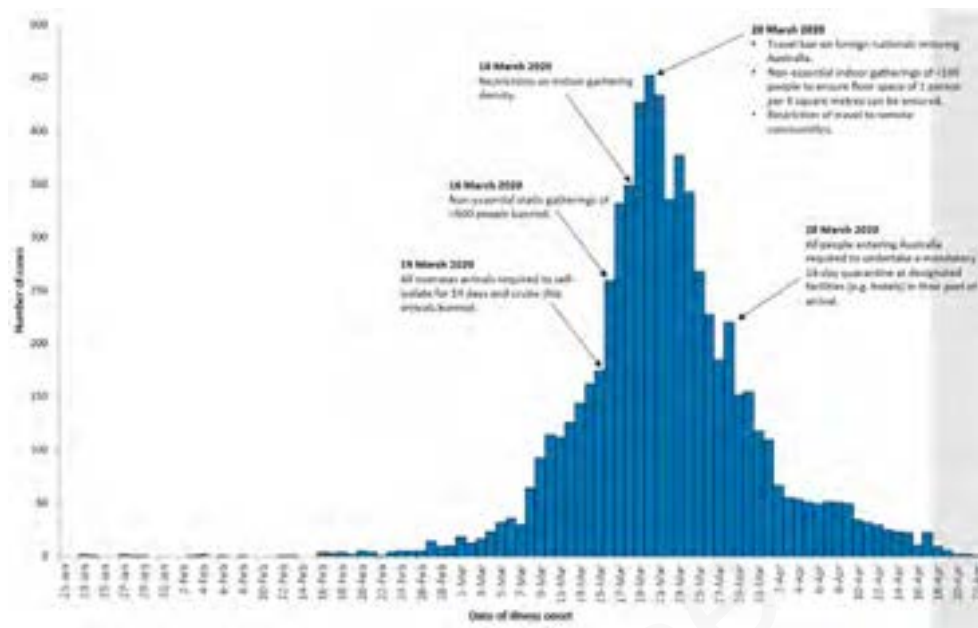
Confirmed COVID-19 cases	Australia	ACT <sup>a</sup>	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,262	80	1,739	24	788	298	76	794	463
Locally acquired - contact of confirmed case and/or in a known cluster	1,693	17	797	2	171	124	120	405	57
Locally acquired - contact not identified	560	1	360	0	41	7	0	135	16
Locally acquired - contact not identified, but case had interstate travel	111	6	72	1	17	6	2	0	7
Under investigation	35	0	8	0	9	3	9	3	3
<b>Total cases</b>	<b>6,661</b>	<b>104</b>	<b>2,976</b>	<b>27</b>	<b>1,026</b>	<b>438</b>	<b>207</b>	<b>1,337</b>	<b>546</b>
<b>Deaths (of total)</b>	<b>75</b>	<b>3</b>	<b>31</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>8</b>	<b>16</b>	<b>7</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	12 (0%)	0 (0%)	5 (0%)	0 (0%)	2 (0%)	0 (0%)	4 (2%)	1 (0%)	0 (0%)
Change in the last 72hrs before (%change)	42 (1%)	0 (0%)	13 (0%)	0 (0%)	7 (1%)	3 (1%)	10 (5%)	8 (1%)	1 (0%)
Average daily increase over the past three days (compound)	0.2%	0%	0.1%	0%	0.2%	0.2%	1.7%	0.2%	0.1%
Increase over the past week	193	1	79	-	25	4	37	36	11

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

<sup>a</sup> On 22 April 2020, ACT revised the source of acquisition for 1 of their cases after undertaking data cleaning. This resulted in the case being changed from Overseas Acquired to Locally acquired - contact not identified interstate travel.

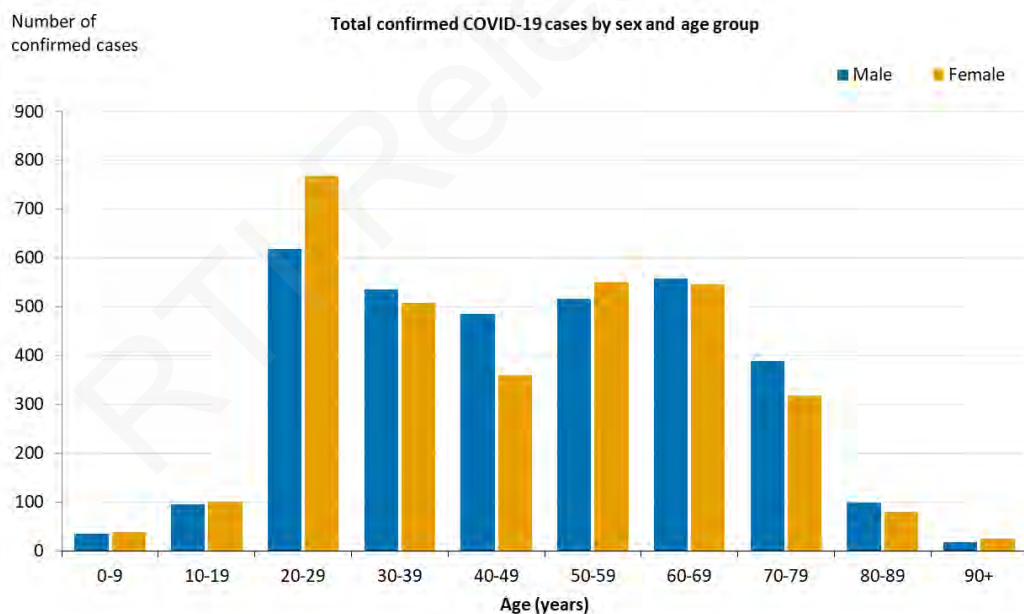
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 23 April 2020**

**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs **23 April 2020** by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs **23 April 2020****



#### International Situation (as at 1500 hrs, **23 April 2020**)

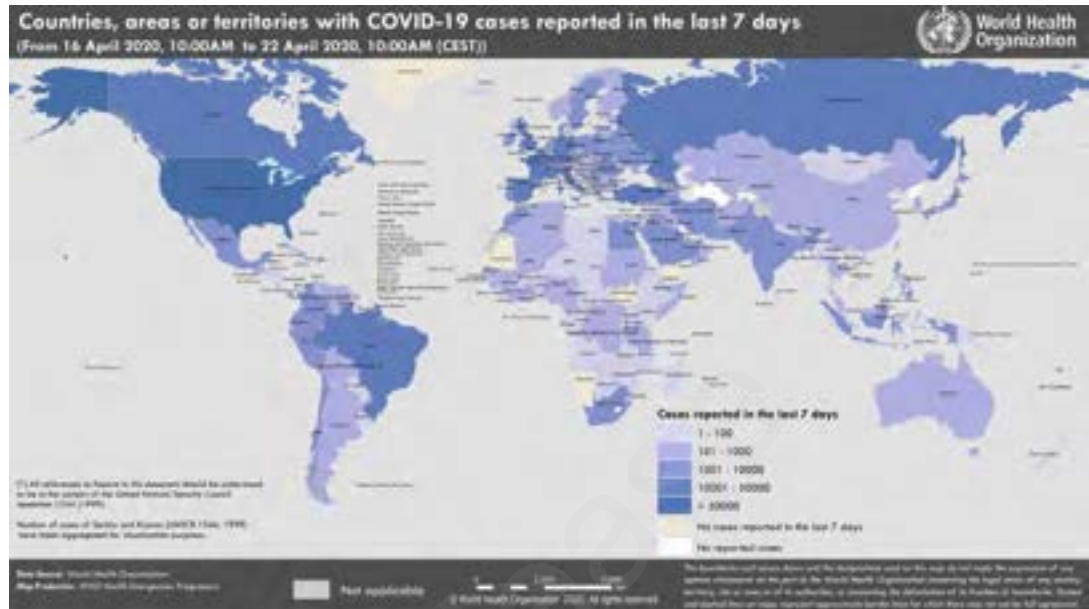
- A total of **2,628,916** cases of COVID-19 have been reported globally, including **183,441 deaths** (Johns Hopkins University).
  - A total of **64,726** new cases, including **5,996** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (**22%**), Italy (**15%**), Spain (**13%**), and France (**12%**) (Source: WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately **6.9%** (Source: WHO Situation Report). The risk of death reportedly increases with age.
- On **22 April 2020**, Singapore reported **1,016** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **967** (95%) were reported among residents of migrant worker dormitories. Singapore attributes the large



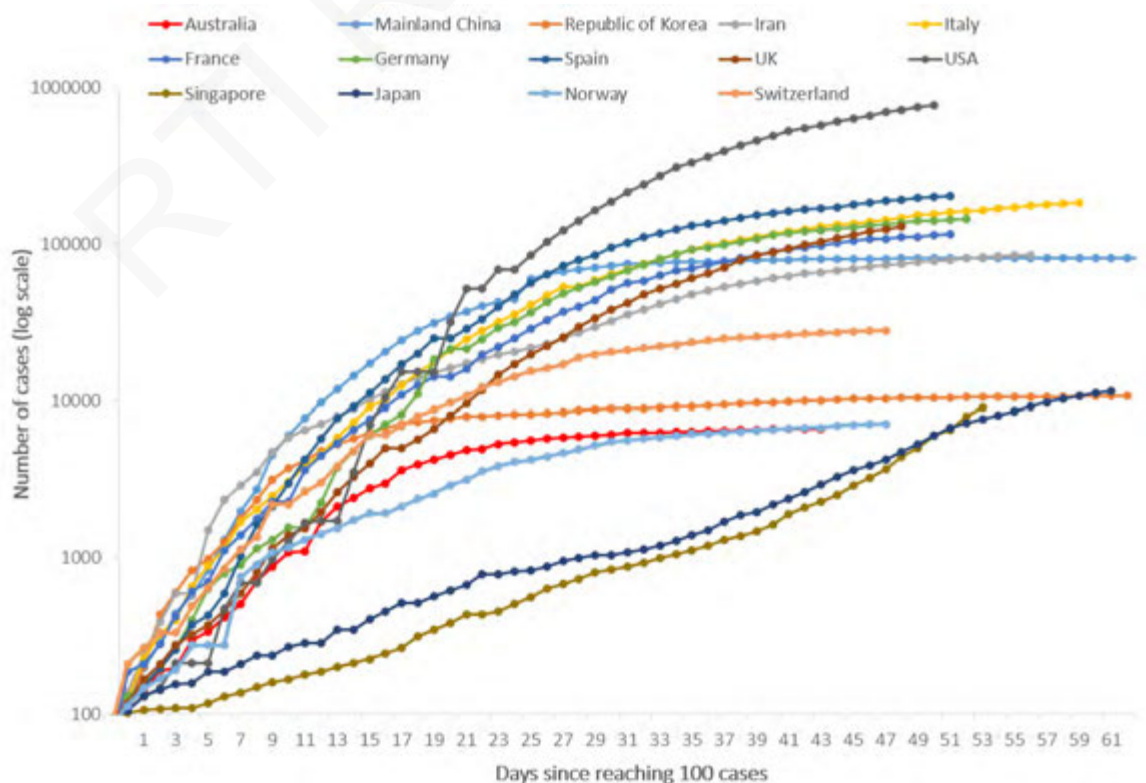
number of new cases in migrant worker dormitories to extensive testing with most cases being reported as asymptomatic or mild cases. In total, Singapore has reported **10,141** cases and **12** deaths.

- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **635** deaths and a case fatality rate of **8.6%**. The government has reported **7,418** cases as of the **22** April 2020.

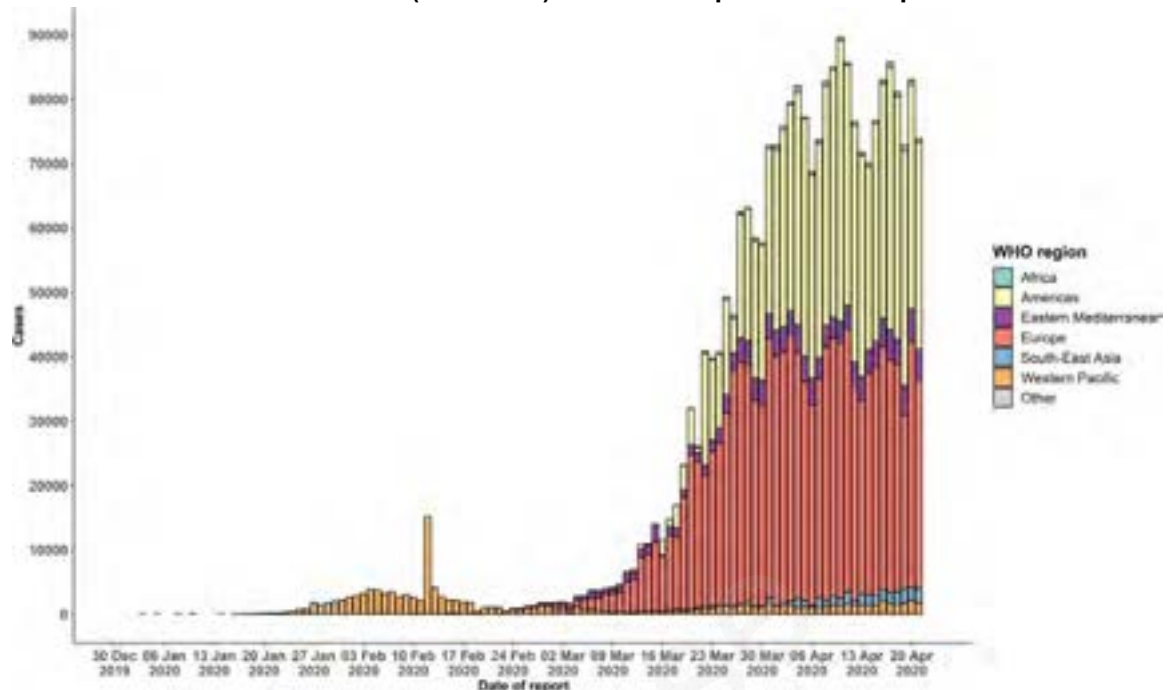
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 93 of 22 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 23 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 93 of 22 April 2020**



#### International response

#### WHO

- On 22 April 2020, the WHO Director-General announced:
  - Most of the epidemics in Western Europe are slowing, however upwards trends in Africa, Central and South America, and Eastern Europe are occurring.
  - WHO has sent over 70 surge teams to countries to strengthen surveillance, and provide advice on infection prevention, how to treat patients, risk communication, lab capacity, and data management.
  - progress of countries who have reported data to WHO:
    - 78% have a preparedness and response plan in place;
    - 76% have surveillance systems in place to detect cases;
    - 91% have laboratory testing capacity for COVID-19;
    - 66% of countries have a clinical referral system in place to care for COVID-19 patients;
    - 48% have a community engagement plan; and
    - 48% have an infection prevention and control programme and standards for water, sanitation and hygiene in health facilities.
  - WHO and the International Telecommunication Union are partnering with global telecommunications companies to message people directly, on their mobile phones, with information about COVID-19.
    - Aim to reach half of the world's population that does not have internet access; and
    - Implementation will begin in the Asia Pacific region and then be progress globally.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>• The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>• On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>• The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>• The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>• The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>• NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> </ul>

	<ul style="list-style-type: none"> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to "stand up" on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> <li>The majority of international flights repatriating Australians are landing in Melbourne. All passengers arriving in these international flights are temperature and health screened and remain in Victoria for their mandatory 14-day hotel quarantine. Currently, approximately 20% of these exits from quarantine return to their residence in other states and territories.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li><i>COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</i></li> <li><i>Given the serious limitations and risks associated with the COVID-19 point of care (POC) serological (blood) test for acute detection and diagnostic purposes, POC test as an acute illness diagnostic tool for COVID-19 has been prohibited in WA.</i></li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

#### 4. Appendix 1

##### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,628,916) as at 1500 hours.

Source: International cases based on WHO Situation Report 93, 22 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,287	4,642	37	0
Hong Kong SAR	1,034	4	4	0
Taiwan	426	6	1	0
Macau SAR	45	0	0	0
United States of America	776,907	37,602	25,634	1,718
Spain	204,178	21,282	3,968	430
Italy	183,957	24,648	2,729	534
Germany	145,694	4,879	2,237	281
The United Kingdom	129,048	17,337	4,301	828
France	116,151	20,763	2,638	530
Turkey	95,591	2,259	4,611	119
Iran (Islamic Republic of)	84,802	5,297	1,297	88
Russian Federation	57,999	513	5,236	57
Belgium	40,956	5,998	973	170
Brazil	40,581	2,575	1,927	113
Canada	37,374	1,728	1,991	117
Netherlands	34,134	3,916	729	165
Switzerland	27,981	1,186	119	45
Portugal	21,379	762	516	27
India	19,984	640	1,383	50
Peru	16,325	445	697	45
Ireland	16,040	730	388	43
Sweden	15,322	1,765	545	185
Austria	14,833	463	50	0
Israel	13,942	184	59	3
Saudi Arabia	11,631	109	1,147	6
Japan	11,496	277	378	91
Chile	10,832	147	325	8
Republic of Korea	10,694	238	11	1
Ecuador	10,398	520	270	13
Poland	9,856	401	263	21
Pakistan	9,749	209	533	17
Romania	9,242	483	306	32
Singapore	9,125	11	1,111	0
Mexico	8,772	712	511	26
United Arab Emirates	7,755	46	490	3

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Denmark	7,695	370	180	6
Norway	7,166	163	53	9
Indonesia	7,135	616	375	26
Czechia	7,041	201	127	5
Serbia	6,890	130	260	5
Belarus	6,723	55	459	4
Philippines	6,599	437	140	9
Ukraine	6,592	174	467	13
Qatar	6,533	9	518	0
Malaysia	5,482	92	58	3
Dominican Republic	5,044	245	80	10
Panama	4,658	136	191	10
Finland	4,014	141	146	43
Colombia	3,977	189	185	10
Luxembourg	3,618	78	60	3
Egypt	3,490	264	157	14
South Africa	3,465	58	165	0
Bangladesh	3,382	110	434	9
Morocco	3,209	145	163	2
Argentina	3,073	145	113	9
Thailand	2,826	49	15	1
Algeria	2,811	392	93	8
Republic of Moldova	2,641	73	93	3
Greece	2,401	121	156	5
Hungary	2,168	225	70	12
Kuwait	2,080	11	85	2
Kazakhstan	1,995	19	143	0
Bahrain	1,973	7	66	0
Croatia	1,908	48	27	1
Iceland	1,778	10	5	0
Uzbekistan	1,657	6	0	1
Oman	1,614	8	106	0
Iraq	1,602	83	28	1
Estonia	1,552	43	17	3
Azerbaijan	1,480	20	44	1
Armenia	1,377	24	38	2
Lithuania	1,370	38	20	1
Bosnia and Herzegovina	1,340	50	40	1
Slovenia	1,340	77	5	3
Puerto Rico	1,298	64	46	1
North Macedonia	1,231	55	6	1
Slovakia	1,199	14	26	1
Cameroon	1,163	43	0	1



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Cuba	1,137	38	50	2
New Zealand	1,113	14	6	1
Afghanistan	1,092	36	66	0
Ghana	1,042	9	0	0
Bulgaria	975	45	46	2
Djibouti	945	2	99	0
Côte d'Ivoire	916	13	37	3
Tunisia	901	38	17	0
Cyprus	784	17	12	0
Latvia	748	9	9	4
Andorra	723	37	5	1
International conveyance (Diamond Princess)	712	13	0	0
Guinea	688	6	66	1
Lebanon	682	22	5	1
Costa Rica	662	6	2	1
Niger	657	20	2	0
Albania	634	26	25	0
Kyrgyzstan	612	7	22	0
Kosovo	604	18	32	6
Bolivia (Plurinational State of)	598	34	34	1
Burkina Faso	581	38	5	2
Nigeria	541	19	0	0
Uruguay	535	10	7	0
Honduras	494	46	17	0
San Marino	476	40	14	1
Malta	443	3	12	0
Jordan	428	7	3	0
Senegal	412	5	35	0
Georgia	411	5	3	1
Réunion	410	0	2	0
Democratic Republic of the Congo	359	25	9	0
occupied Palestinian territory	335	2	6	0
Mauritius	328	9	0	0
Montenegro	313	5	1	0
Mayotte	311	4	27	0
Sri Lanka	310	7	6	0
Isle of Man	307	10	10	6
Kenya	296	14	15	0
Guatemala	294	9	5	2
Somalia	286	14	49	6
Venezuela (Bolivarian Republic of)	285	10	29	1
Viet Nam	268	0	0	0
Mali	258	14	12	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
United Republic of Tanzania	255	10	0	0
Jersey	250	14	1	2
Guernsey	239	10	0	1
El Salvador	225	7	7	0
Jamaica	223	6	27	1
Paraguay	208	8	0	0
Faroe Islands	185	0	0	0
Congo	165	6	5	0
Martinique	163	14	0	0
Gabon	156	1	36	0
Rwanda	150	0	3	0
Guadeloupe	148	12	0	1
Sudan	140	13	33	1
Brunei Darussalam	138	1	0	0
Gibraltar	133	0	0	0
Guam	133	5	0	0
Cambodia	122	0	0	0
Madagascar	121	0	0	0
Myanmar	121	5	2	0
Ethiopia	114	3	3	0
Trinidad and Tobago	114	8	0	0
Liberia	101	8	2	0
Aruba	97	2	0	0
French Guiana	97	1	0	0
Bermuda	86	5	0	0
Togo	86	6	2	1
Maldives	83	0	16	0
Liechtenstein	82	1	0	0
Equatorial Guinea	79	0	0	0
Barbados	75	5	0	0
Zambia	70	3	5	0
Monaco	68	1	0	0
Sint Maarten	68	10	1	0
Cabo Verde	67	1	12	0
Cayman Islands	66	1	5	0
Guyana	66	7	1	0
Bahamas	64	9	4	0
Libya	59	1	8	0
French Polynesia	57	0	1	0
Haiti	57	3	10	0
Uganda	56	0	1	0
Benin	54	1	0	0
United States Virgin Islands	54	3	1	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Guinea-Bissau	50	0	0	0
Sierra Leone	50	0	7	0
Nepal	42	0	11	0
Syrian Arab Republic	42	3	3	0
Eritrea	39	0	0	0
Mozambique	39	0	4	0
Saint Martin	37	2	0	0
Chad	34	0	1	0
Mongolia	34	0	1	0
Zimbabwe	28	3	3	0
Angola	24	2	0	0
Eswatini	24	1	0	0
Antigua and Barbuda	23	3	0	0
Timor-Leste	23	0	0	0
Botswana	20	1	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
Malawi	18	2	1	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Central African Republic	14	0	2	0
Curaçao	14	1	0	0
Grenada	14	0	1	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Vincent and the Grenadines	12	0	0	0
Burundi	11	1	5	0
Falkland Islands (Malvinas)	11	0	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Gambia	10	1	0	0
Nicaragua	10	2	1	0
Suriname	10	1	0	0
Holy See	9	0	0	0
Mauritania	7	1	0	0
Papua New Guinea	7	0	0	0
Bhutan	6	0	0	0
Saint Barthélemy	6	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Bonaire, Sint Eustatius and Saba	5	0	0	0
British Virgin Islands	4	1	0	0
São Tomé and Príncipe	4	0	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,465,994</b>	<b>168,942</b>	<b>73,898</b>	<b>6,054</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #96 Novel Coronavirus (COVID-19)  
**Date:** Friday, 24 April 2020 8:09:45 PM  
**Attachments:** [2020-04-24 NIR Health SitRep v96 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 24 April 2020, there have been 6,675 laboratory confirmed cases of COVID-19 in Australia, including 78 deaths.
- Since yesterday's situation report, an additional 14 cases and 3 deaths, have been reported in Australia.
- To date, more than 482,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 24 April 2020, a total of 2,709,408 cases of COVID-19 have been reported globally, including 190,861 deaths.
- The majority of deaths are from the United States of America (23%), Italy (14%), Spain (12%), and France (12%).

The next Situation Report will be issued on 25 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-24 1800 AEDT	<b>Version</b>	96
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04-25 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li> <i>National Cabinet met on 24 April 2020 and:</i> <ul style="list-style-type: none"> <li><i>received an updated briefing on new modelling, Australia's case detection rate (93 per cent) and projections of case numbers (below lower bound modelled estimates);</i></li> <li><i>noted:</i> <ul style="list-style-type: none"> <li><i>data that confirms success of implemented measures in slowing and reversing the growth of cases in Australia; and</i></li> <li><i>AHPPC advice that wearing of face masks by the general population is not currently recommended.</i></li> </ul> </li> <li><i>discussed the outbreaks of COVID-19 in residential aged care facilities and reiterated AHPPC advice to not implement complete lockdowns or bans of visitors, other than during a specified facility outbreak; and</i></li> <li><i>agreed:</i> <ul style="list-style-type: none"> <li><i>to nationally expand testing criteria to all people with mild COVID-19 symptoms;</i></li> <li><i>with updated AHPPC advice that the 'venue density rule' of no more than one person per four square metres is not appropriate or practical in schools, nor maintaining 1.5 metre between students during classroom activities;</i></li> <li><i>to develop nationally-consistent, industry-specific work health and safety guidance on COVID-19, accessible via a central hub provided by Safe Work Australia; and</i></li> <li><i>the 'National COVID-19 Safe Workplace Principles'.</i></li> </ul> </li> </ul> </li> <li><i>Cruise vessel Ruby Princess departed Port Kembla at 1640 hrs yesterday, 23 April 2020 after approximately 550 crew members were disembarked to either hotels, medical quarantine</i></li> </ul>
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	<p>facilities or repatriation flights. The vessel departed with approximately 500 crew members on board and is tracking north to depart Australian waters.</p> <ul style="list-style-type: none"> <li>• The vessel Caledonian Sky is the only vessel ported in Australia and is on track to depart Darwin 28 April 2020.</li> <li>• National Cabinet will next meet on 1 May 2020.</li> <li>• On 24 April 2020: <ul style="list-style-type: none"> <li>○ the Minister for Health announced that online and phone support services for people experiencing drug and alcohol problems will receive an additional \$6 million from the Australian Government during the COVID-19 pandemic.</li> <li>○ the Minister for Aged Care and Senior Australians announced that Commonwealth Home Support Programme providers are being supported to fund personal monitoring technology for Senior Australians during self-isolation.</li> <li>○ the Minister for Aged Care and Senior Australians and the Minister for Communications, Cyber Safety and the Arts announced the availability of free daytime webinars to help improve the online skills of Senior Australians.</li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>• On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>• Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>• On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>• The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>• On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>• On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>• The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>• The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>• The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>

## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 24 April 2020)</b></p> <ul style="list-style-type: none"> <li>• A total of 6,675 cases of COVID-19, including 78 deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2). <ul style="list-style-type: none"> <li>○ Since yesterday's situation report, an additional 14 cases and 3 deaths, have been reported in Australia.</li> <li>○ The total number of cases reported over the last 7 days was 152, which is down from the 320 reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> </ul>
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- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 19% of these cases requiring admission to an ICU (2.2% of confirmed cases).
- The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).
- Of the deaths so far reported:
  - The median age is 79 years (range 42 to 95 years).
  - 60% were male and 40% were female.
  - Where data was available regarding comorbidities, 96% had one or more comorbidities and 71% had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).

#### Testing

- To date, more than 482,000 tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.
  - Cumulative per cent positive was 1.4% and the positivity in the past week was 0.2%.

#### Source of infection

- To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; however, all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - The Ruby Princess departed Australia on 23 April 2020. Some crew have disembarked prior to the ship's departure; however, the number of COVID-19 cases who remain on board is not known. To date over 600 cases of COVID-19 cases associated with the vessel have been reported by the states and territories (excluding the 190 crew who were COVID-19 positive).
  - Tasmania is reporting an outbreak in North-West hospitals of 117 cases, including 75 staff members (as of 23 April 2020).
  - While there have been cases of COVID-19 reported in residential aged care facilities in residents or staff, the majority are believed to have been introduced by staff or residents. None are known to have been introduced by visitors (data analysed on 20 April 2020).
  - NSW Health is reporting 44 cases (15 staff and 29 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 23 April 2020. There have also been 4 deaths associated with this outbreak.

#### Epidemiological Resources

- *A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 19 April 2020.*
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.



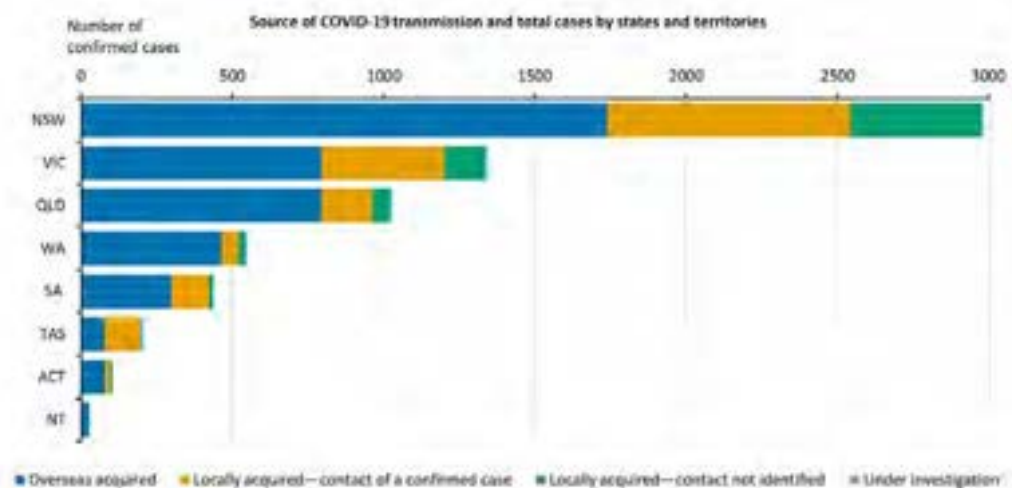
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 24 April 2020)**

Confirmed COVID-19 cases	Australia	ACT <sup>a</sup>	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,270	80	1,740	24	793	298	76	794	465
Locally acquired - contact of confirmed case and/or in a known cluster	1,702	17	804	2	171	124	120	407	57
Locally acquired - contact not identified	560	1	360	0	41	7	0	135	16
Locally acquired - contact not identified, but case had interstate travel	111	6	72	1	18	6	2	0	6
Under investigation	32	0	6	0	3	3	9	7	4
<b>Total cases</b>	<b>6,675</b>	<b>104</b>	<b>2,982</b>	<b>27</b>	<b>1,026</b>	<b>438</b>	<b>207</b>	<b>1,343</b>	<b>548</b>
<b>Deaths (of total)</b>	<b>78</b>	<b>3</b>	<b>32</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>9</b>	<b>16</b>	<b>8</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	14 (0%)	0 (0%)	6 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	6 (0%)	2 (0%)
Change in the last 72hrs before (%change)	30 (0%)	0 (0%)	13 (0%)	0 (0%)	2 (0%)	1 (0%)	5 (2%)	7 (1%)	2 (0%)
Average daily increase over the past three days (compound)	0.2%	0.0%	0.1%	0.0%	0.1%	0.1%	0.8%	0.2%	0.1%
Increase over the past week	152	1	56	-	19	3	25	41	7

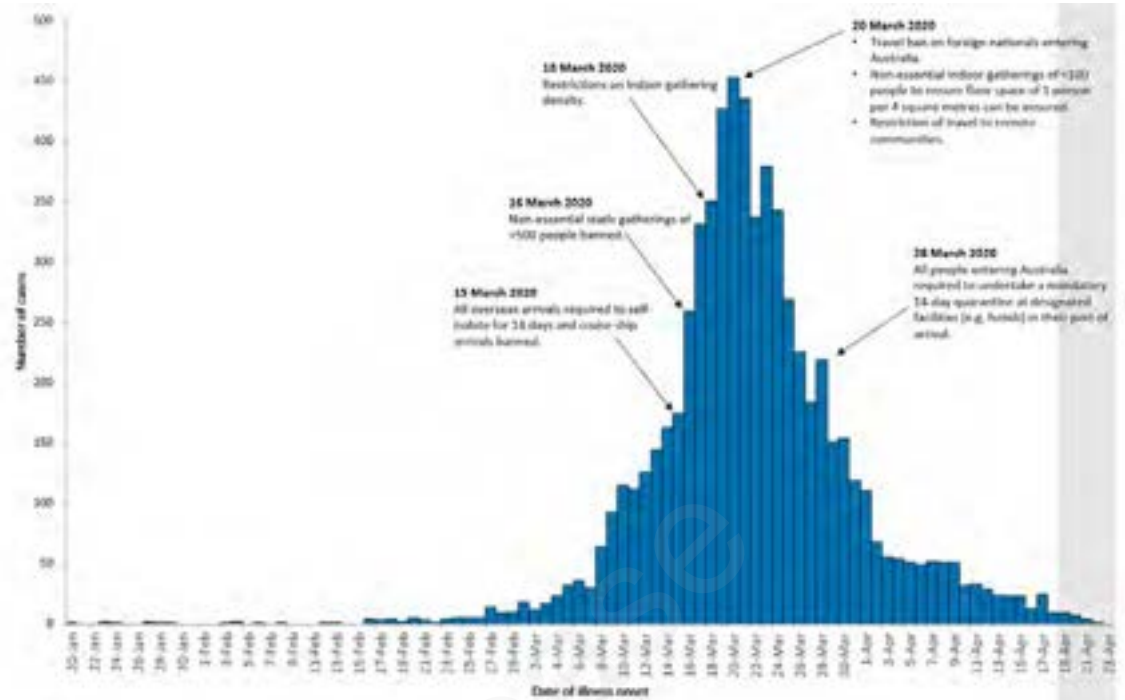
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

<sup>a</sup> On 23 April 2020, NSW revised their case count down by 1, to exclude a case who after further testing was not considered to meet the case definition.

<sup>a</sup> On 22 April 2020, ACT revised the source of acquisition for 1 of their cases after undertaking data cleaning. This resulted in the case being changed from Overseas Acquired to Locally acquired - contact not identified interstate travel.

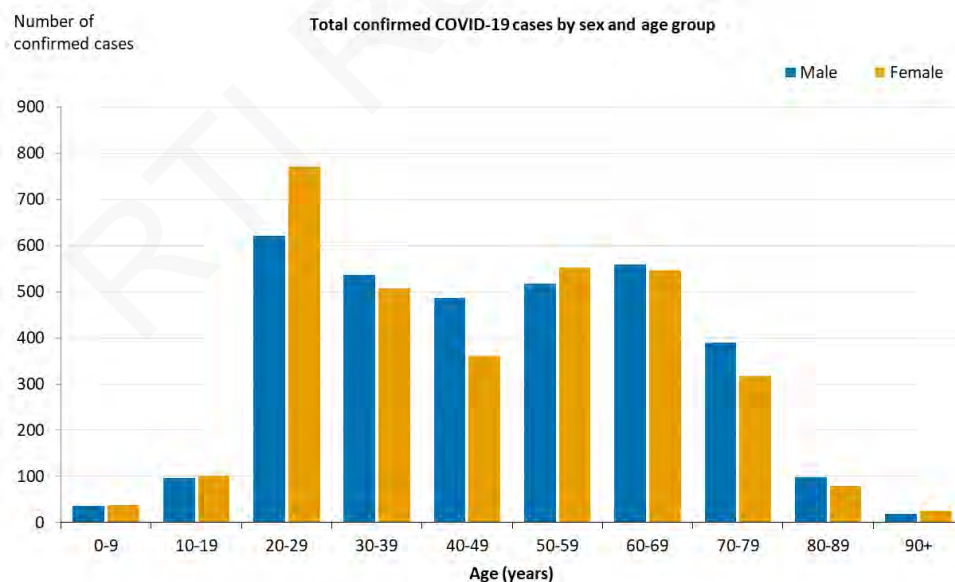
**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 24 April 2020**

**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs **24** April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs **24** April 2020**

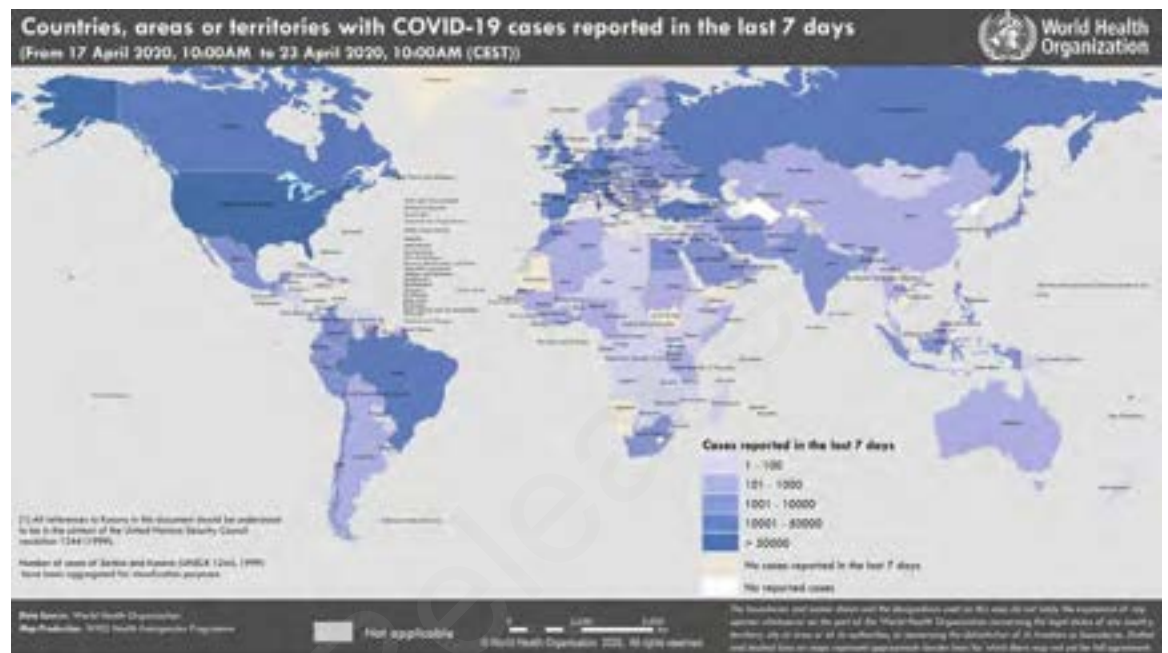


#### International Situation (as at 1500 hrs, **24** April 2020)

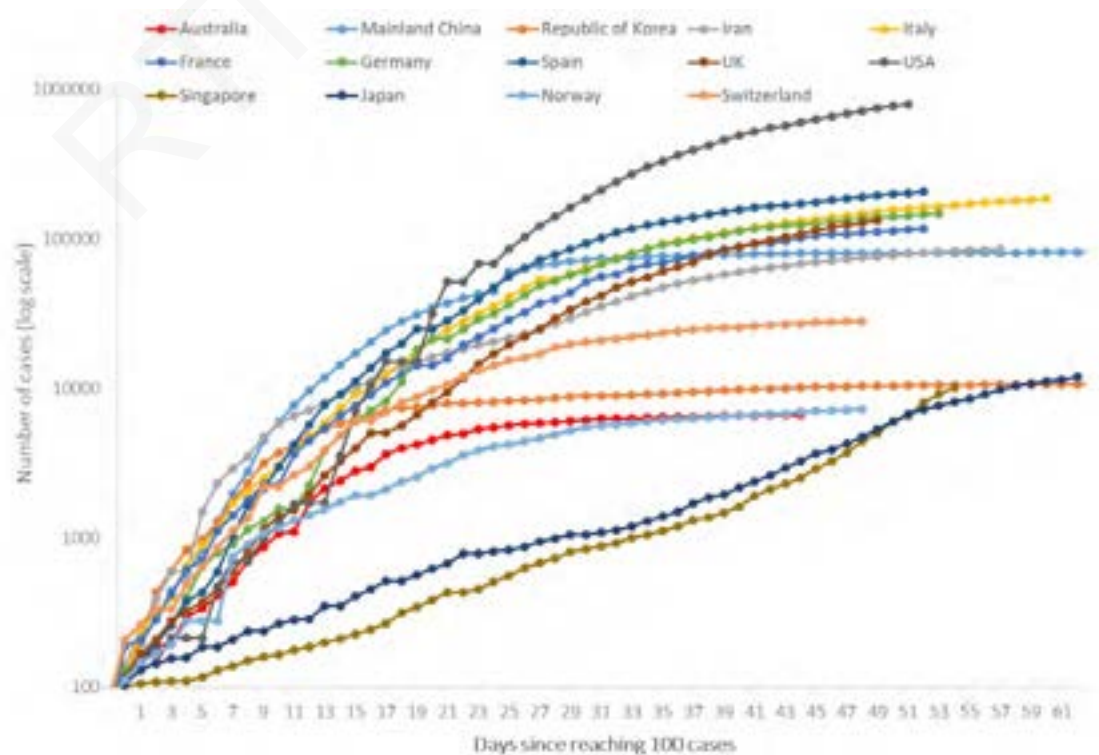
- A total of **2,709,408** cases of COVID-19 have been reported globally, including **190,861** deaths (Johns Hopkins University).
  - A total of **80,492** new cases, including **7,420** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins University).
- The majority of deaths are from the United States of America (**23%**), Italy (**14%**), Spain (**12%**), and France (**12%**) (Source: WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.9% (Source: WHO Situation Report). The risk of death reportedly increases with age.

- On **23 April 2020**, Singapore reported **1,037** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **982** (95%) were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing with most cases being reported as asymptomatic or mild cases. In total, Singapore has reported **11,178** cases and 12 deaths.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **647** deaths and a case fatality rate of **8.3%**. The government has reported **7,775** cases as of the **23 April 2020**.

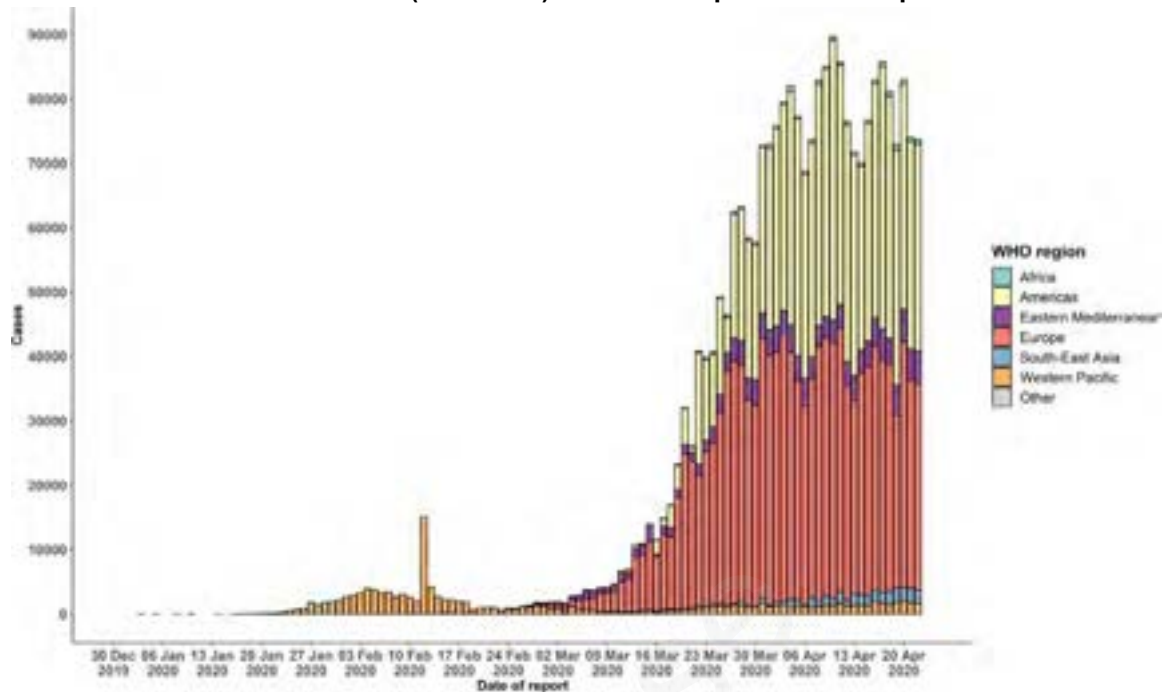
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 94 of **23 April 2020****



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs **24 April 2020****



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 94 of 24 April 2020**



#### International response

#### WHO

- On 22 April 2020, the WHO Director-General *opened the ministerial meeting of the Eastern Mediterranean Region on COVID-19 and noted Iran's national campaign, the rapid scaling up of testing in the UAE, the establishment of temporary isolation units in Pakistan, and the use of polio assets in Afghanistan and Somalia.*

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li><i>On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</i></li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> </ul>



	<ul style="list-style-type: none"> <li>The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> <li>The majority of international flights repatriating Australians are landing in Melbourne. All passengers arriving in these international flights are temperature and health screened and remain in Victoria for their mandatory 14-day hotel quarantine. Currently, approximately 20% of these exits from quarantine return to their residence in other states and territories.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li>COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</li> <li>Given the serious limitations and risks associated with the COVID-19 point of care (POC) serological (blood) test for acute detection and diagnostic purposes, POC test as an acute illness diagnostic tool for COVID-19 has been prohibited in WA.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal

outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,709,408) as at 1500 hours.

Source: International cases based on WHO Situation Report 94, 23 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,302	4,642	15	0
Hong Kong SAR	1,036	4	2	0
Taiwan	427	6	1	0
Macau SAR	45	0	0	0
United States of America	800,926	40,073	24,019	2,471
Spain	208,389	21,717	4,211	435
Italy	187,327	25,085	3,370	437
Germany	148,046	5,094	2,352	215

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
The United Kingdom	133,499	18,100	4,451	763
France	117,961	21,307	1,810	544
Turkey	98,674	2,376	3,083	117
Iran (Islamic Republic of)	85,996	5,391	1,194	94
Russian Federation	62,773	555	4,774	42
Brazil	43,079	2,741	2,498	166
Belgium	41,889	6,262	933	264
Canada	38,923	1,871	1,549	143
Netherlands	34,842	4,054	708	138
Switzerland	28,186	1,216	205	30
Portugal	21,982	785	603	23
India	21,393	681	1,409	41
Peru	17,837	484	1,512	39
Ireland	16,671	769	631	39
Sweden	16,004	1,937	682	172
Austria	14,924	494	91	31
Israel	14,498	189	556	5
Saudi Arabia	12,772	114	1,141	5
Japan	11,919	287	423	10
Chile	11,296	160	464	13
Ecuador	10,850	537	452	17
Republic of Korea	10,702	240	8	2
Pakistan	10,513	224	764	15
Poland	10,169	426	313	25
Singapore	10,141	12	1,016	1
Romania	9,710	508	468	25
Mexico	9,501	857	729	145
United Arab Emirates	8,238	52	483	6
Denmark	7,912	384	217	14
Indonesia	7,418	635	283	19
Belarus	7,281	60	558	5
Norway	7,250	169	84	6
Ukraine	7,170	187	578	13
Qatar	7,141	10	608	1
Czechia	7,136	210	95	9
Serbia	7,114	134	224	4
Philippines	6,710	446	111	9
Malaysia	5,532	93	50	1
Dominican Republic	5,300	260	256	15
Panama	4,821	141	163	5
Colombia	4,149	196	172	7
Finland	4,129	149	115	8
Bangladesh	3,772	120	390	10



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Egypt	3,659	276	169	12
Luxembourg	3,654	80	36	2
South Africa	3,635	65	170	7
Morocco	3,446	149	237	4
Argentina	3,197	152	124	7
Algeria	2,910	402	99	10
Thailand	2,839	50	13	1
Republic of Moldova	2,778	76	137	3
Greece	2,408	121	7	0
Hungary	2,284	225	116	0
Kuwait	2,248	13	168	2
Bahrain	2,027	7	54	0
Kazakhstan	2,025	19	30	0
Croatia	1,950	48	42	0
Iceland	1,785	10	7	0
Oman	1,716	8	102	0
Uzbekistan	1,716	7	59	1
Iraq	1,631	83	29	0
Estonia	1,559	44	7	1
Azerbaijan	1,518	20	38	0
Armenia	1,473	24	96	0
Lithuania	1,398	38	28	0
Bosnia and Herzegovina	1,367	52	27	2
Slovenia	1,353	79	13	2
Puerto Rico	1,298	64	0	0
North Macedonia	1,259	56	28	1
Slovakia	1,244	14	45	0
Cuba	1,189	40	52	2
Afghanistan	1,176	40	84	4
Cameroon	1,163	43	0	0
Ghana	1,154	9	112	0
New Zealand	1,112	16	0	2
Bulgaria	1,024	49	49	4
Djibouti	974	2	29	0
Côte d'Ivoire	952	14	36	1
Tunisia	909	38	8	0
Cyprus	790	17	6	0
Guinea	761	6	73	0
Latvia	761	11	13	2
Andorra	724	37	1	0
International conveyance (Diamond Princess)	712	13	0	0
Lebanon	682	22	0	0
Costa Rica	669	6	7	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Niger	662	22	5	2
Albania	634	27	0	1
Kyrgyzstan	631	8	19	1
Kosovo	630	18	26	0
Bolivia (Plurinational State of)	609	37	11	3
Burkina Faso	600	38	19	0
Uruguay	543	12	8	2
Nigeria	541	19	0	0
Honduras	510	46	16	0
San Marino	488	40	12	0
Malta	444	3	1	0
Senegal	442	6	30	1
Jordan	435	7	7	0
Georgia	420	5	9	0
Réunion	410	0	0	0
Democratic Republic of the Congo	359	25	0	0
occupied Palestinian territory	336	2	1	0
Sri Lanka	330	7	20	0
Mauritius	329	9	1	0
Mayotte	326	4	15	0
Guatemala	316	8	22	0
Montenegro	314	5	1	0
Isle of Man	307	10	0	0
Kenya	303	14	7	0
Mali	293	17	35	3
Venezuela (Bolivarian Republic of)	288	10	3	0
Somalia	286	14	0	0
United Republic of Tanzania	285	10	30	0
Viet Nam	268	0	0	0
Jersey	255	14	5	0
Guernsey	241	10	2	0
El Salvador	237	7	12	0
Jamaica	233	6	10	0
Paraguay	213	9	5	1
Congo	186	6	21	0
Faroe Islands	185	0	0	0
Gabon	166	1	10	0
Martinique	164	14	1	0
Sudan	162	13	22	0
Rwanda	153	0	3	0
Guadeloupe	148	12	0	0
Brunei Darussalam	138	1	0	0
Gibraltar	133	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Guam	133	5	0	0
Myanmar	127	5	6	0
Cambodia	122	0	0	0
Madagascar	121	0	0	0
Ethiopia	116	3	2	0
Trinidad and Tobago	115	8	1	0
Liberia	101	8	0	0
Aruba	100	2	3	0
Bermuda	98	5	12	0
French Guiana	97	1	0	0
Togo	88	6	2	0
Maldives	85	0	2	0
Equatorial Guinea	84	1	5	1
Liechtenstein	82	1	0	0
Barbados	75	5	0	0
Zambia	74	3	4	0
Sint Maarten	71	11	3	1
Monaco	68	1	0	0
Cabo Verde	67	1	0	0
Guyana	67	7	1	0
Cayman Islands	66	1	0	0
Bahamas	65	9	1	0
Sierra Leone	61	1	11	1
Uganda	61	0	5	0
Libya	60	1	1	0
Haiti	58	4	1	1
French Polynesia	57	0	0	0
Benin	54	1	0	0
United States Virgin Islands	54	3	0	0
Guinea-Bissau	50	0	0	0
Nepal	45	0	3	0
Syrian Arab Republic	42	3	0	0
Mozambique	41	0	2	0
Eritrea	39	0	0	0
Saint Martin	38	2	1	0
Mongolia	35	0	1	0
Chad	34	0	0	0
Eswatini	31	1	7	0
Zimbabwe	28	4	0	1
Angola	24	2	0	0
Antigua and Barbuda	24	3	1	0
Malawi	23	3	5	1
Timor-Leste	23	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Botswana	22	1	2	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Central African Republic	14	0	0	0
Curaçao	14	1	0	0
Grenada	14	0	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Vincent and the Grenadines	13	0	1	0
Falkland Islands (Malvinas)	12	0	1	0
Burundi	11	1	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Gambia	10	1	0	0
Nicaragua	10	2	0	0
Suriname	10	1	0	0
Holy See	9	0	0	0
Papua New Guinea	8	0	1	0
Bhutan	7	0	1	0
Mauritania	7	1	0	0
São Tomé and Príncipe	7	0	3	0
Saint Barthélemy	6	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
British Virgin Islands	4	1	0	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,539,646</b>	<b>175,630</b>	<b>73,650</b>	<b>6,689</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #97 Novel Coronavirus (COVID-19)  
**Date:** Saturday, 25 April 2020 9:24:23 PM  
**Attachments:** [2020-04-25 NIR Health SitRep v97 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (2019-nCoV) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 25 April 2020, there have been 6,695 laboratory confirmed cases of COVID-19 in Australia, including 80 deaths.
- Since yesterday's situation report, an additional 20 cases and 2 deaths, have been reported in Australia.
- To date, more than 494,000 tests have been conducted across Australia.
- AHPPC did not meet today, however the National Incident Room is working with AHPPC members over the weekend to progress work on the Pandemic Health Intelligence Plan.

#### Situation Overseas

- As at 1500 hrs 25 April 2020, a total of 2,790,986 cases of COVID-19 have been reported globally, including 195,920 deaths.
- To date, Singapore has reported 12,075 cases and 12 deaths, with 9,929 (82% of all cases) being migrant worker dormitory residents.

The next Situation Report will be issued on 26 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <del>25</del> 1800 AEDT	<b>Version</b>	<b>97</b>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <del>26</del> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Graeme Barden, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>National Cabinet met on 24 April 2020 and agreed:               <ul style="list-style-type: none"> <li>to nationally expand testing criteria to all people with mild COVID-19 symptoms;</li> <li>with updated AHPPC advice that the 'venue density rule' of no more than one person per four square metres is not appropriate or practical in schools, nor maintaining 1.5 metre between students during classroom activities;</li> <li>to develop nationally-consistent, industry-specific work health and safety guidance on COVID-19, accessible via a central hub provided by Safe Work Australia; and</li> <li>the 'National COVID-19 Safe Workplace Principles'.</li> </ul> </li> <li>National Cabinet will next meet on <i>Friday, 1 May 2020</i>.</li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> </ul>

	<ul style="list-style-type: none"> <li>The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 25 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,695</b> cases of COVID-19, including <b>80</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>20</b> cases and <b>2</b> deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>130</b>, which is down from the <b>273</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 19% of these cases requiring admission to an ICU (2.2% of confirmed cases).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is 79 years (range 42 to <b>96</b> years).</li> <li>60% were male and 40% were female.</li> <li>Where data was available regarding comorbidities, <b>93%</b> had one or more comorbidities and <b>70%</b> had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>494,000</b> tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.4% and the positivity in the past week was <b>0.1%</b>.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.             <ul style="list-style-type: none"> <li>Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; however, all jurisdictions are reporting cases associated with cruise ships.</li> </ul> </li> </ul>
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- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - To date, *approximately 800* cases of COVID-19 cases associated with the *Ruby Princess cruise ship, including 190 crew (44 crew members are being managed onshore in NSW). Additionally, there have been a number of cases linked to previously confirmed passengers.* The Ruby Princess departed Australia on 23 April 2020.
  - Tasmania is reporting an outbreak in North-West hospitals of *at least* 117 cases, including 75 staff members (as of *24* April 2020).
  - NSW Health is reporting *48* cases (*17* staff and *31* residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of *24* April 2020. There have also been *5* deaths associated with this outbreak.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 19 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

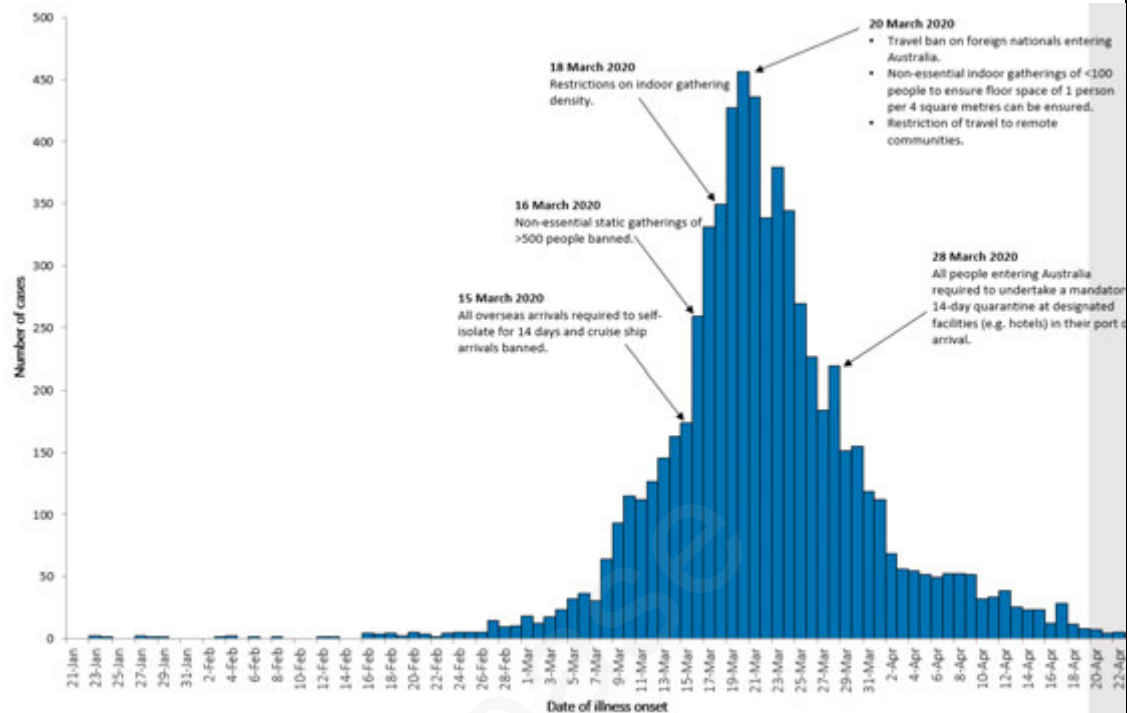
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, *25* April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<i>4,278</i>	<i>81</i>	1,744	24	793	298	<i>77</i>	<i>795</i>	<i>466</i>
Locally acquired - contact of confirmed case and/or in a known cluster	<i>1,709</i>	17	807	2	171	124	120	<i>411</i>	57
Locally acquired - contact not identified	<i>566</i>	1	366	0	41	7	0	135	16
Locally acquired - contact not identified, but case had interstate travel	<i>111</i>	6	71	1	18	6	<i>3</i>	0	6
Under investigation	<i>31</i>	<i>1</i>	6	0	3	3	9	<i>5</i>	4
<b>Total cases</b>	<b><i>6,695</i></b>	<b><i>106</i></b>	<b>2,994</b>	<b>27</b>	<b>1,026</b>	<b>438</b>	<b><i>209</i></b>	<b><i>1,346</i></b>	<b><i>549</i></b>
<b>Deaths (of total)</b>	<b><i>80</i></b>	3	33	0	6	4	<i>10</i>	16	8
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<i>20</i> (0.3%)	<i>2</i> (1.9%)	<i>12</i> (0.4%)	<i>0</i> (0.0%)	<i>0</i> (0.0%)	<i>0</i> (0.0%)	<i>2</i> (1.0%)	<i>3</i> (0.2%)	<i>1</i> (0.2%)
Change in the last 72hrs before (%change)	<i>46</i> (0.7%)	<i>2</i> (1.9%)	<i>23</i> (0.8%)	<i>0</i> (0.0%)	<i>2</i> (0.2%)	<i>0</i> (0.0%)	<i>6</i> (3.0%)	<i>10</i> (0.7%)	<i>3</i> (0.5%)
Average daily increase over the past three days (compound)	<i>0.2%</i>	<i>0.6%</i>	0.3%	0.0%	0.1%	0.0%	<i>1.0%</i>	<i>0.2%</i>	<i>0.2%</i>
Increase over the past week	<i>130</i>	<i>3</i>	58	-	<i>12</i>	3	<i>22</i>	<i>27</i>	<i>5</i>

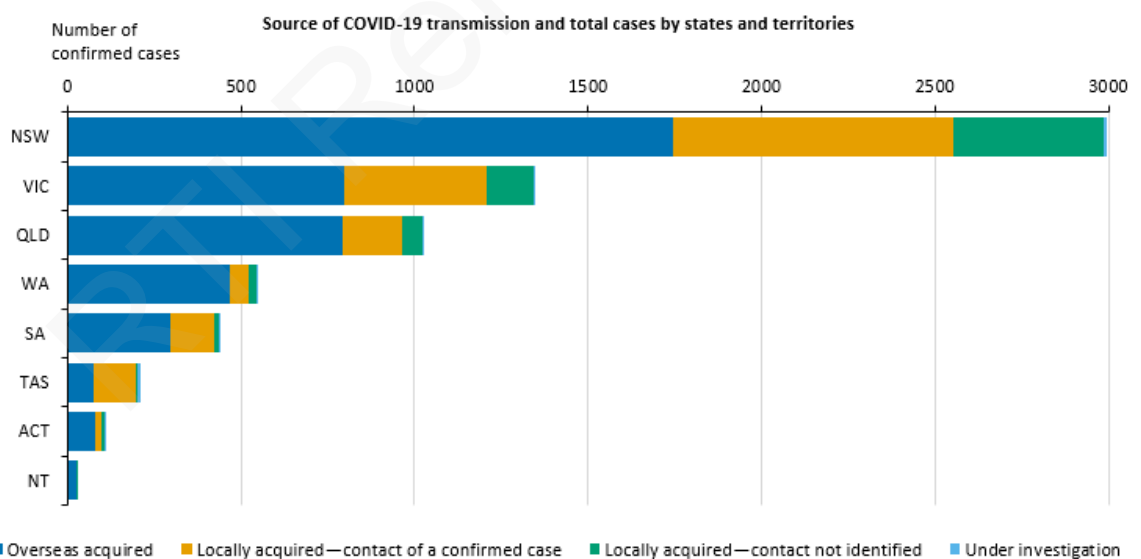
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

^ On 23 April 2020, NSW revised their case count down by 1, to exclude a case who after further testing was not considered to meet the case definition.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 25 April 2020**

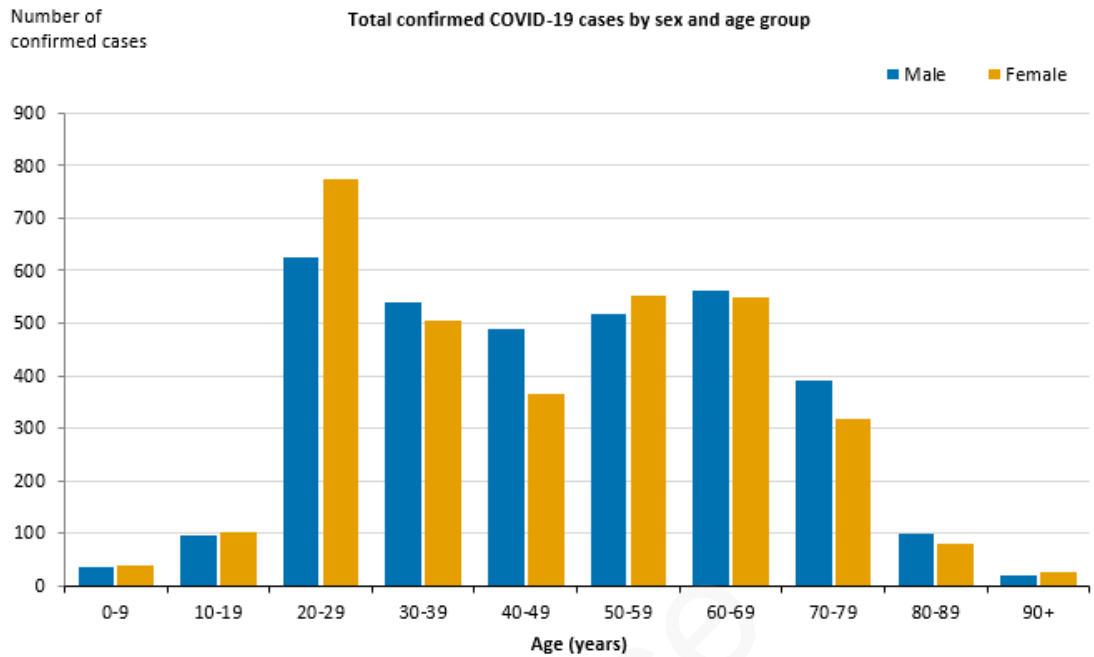


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 25 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

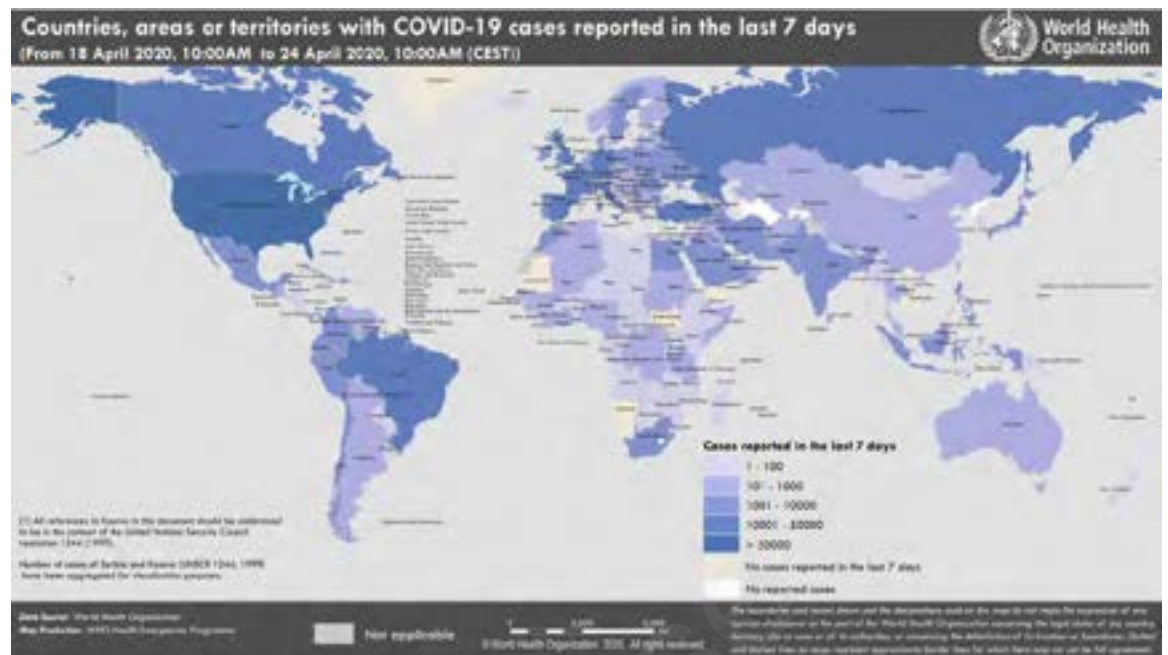
**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 25 April 2020**



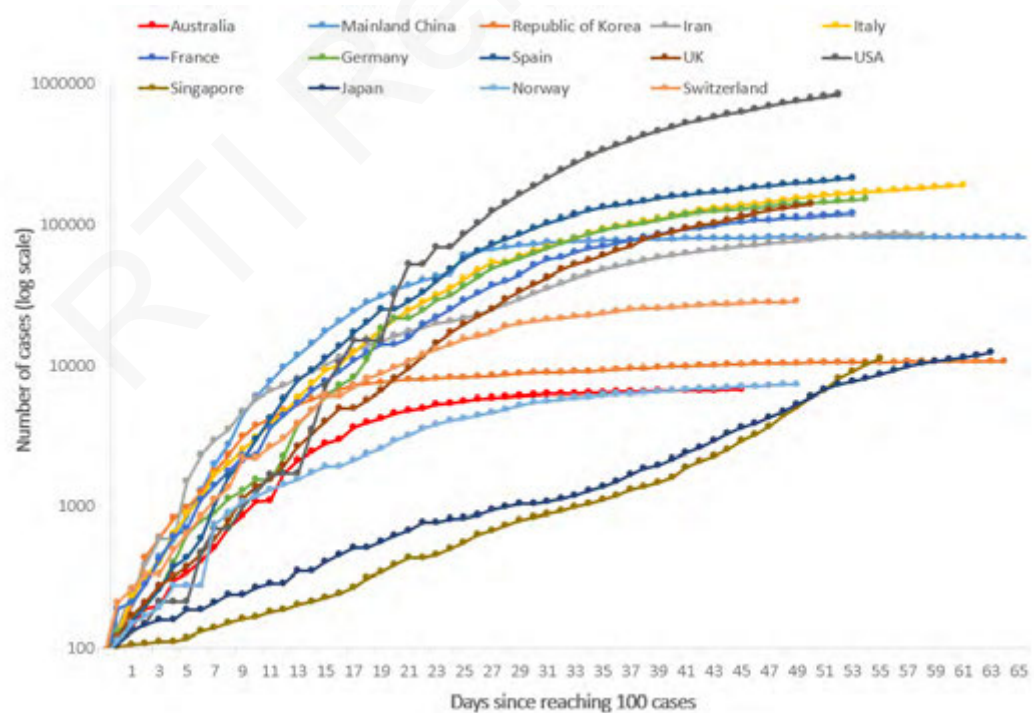
**International Situation (as at 1500 hrs, 25 April 2020)**

- A total of **2,790,986** cases of COVID-19 have been reported globally, including **195,920** deaths (Johns Hopkins, *last updated 0730 hrs AEST*).
  - A total of **81,578** new cases, including **5,059** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins).
- The majority of deaths are from the United States of America (23%), Italy (14%), Spain (12%), and France (12%) (WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.9% (WHO Situation Report). The risk of death reportedly increases with age.
- On **24 April 2020**, Singapore reported **897** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **853** (95%) were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing, with most being reported as mild cases. In total, Singapore has reported **12,075** cases and 12 deaths, *with 9,929 (82% of all cases) being migrant worker dormitory residents*.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **689** deaths and a case fatality rate of **8.4%**. The government has reported **8,211** cases.

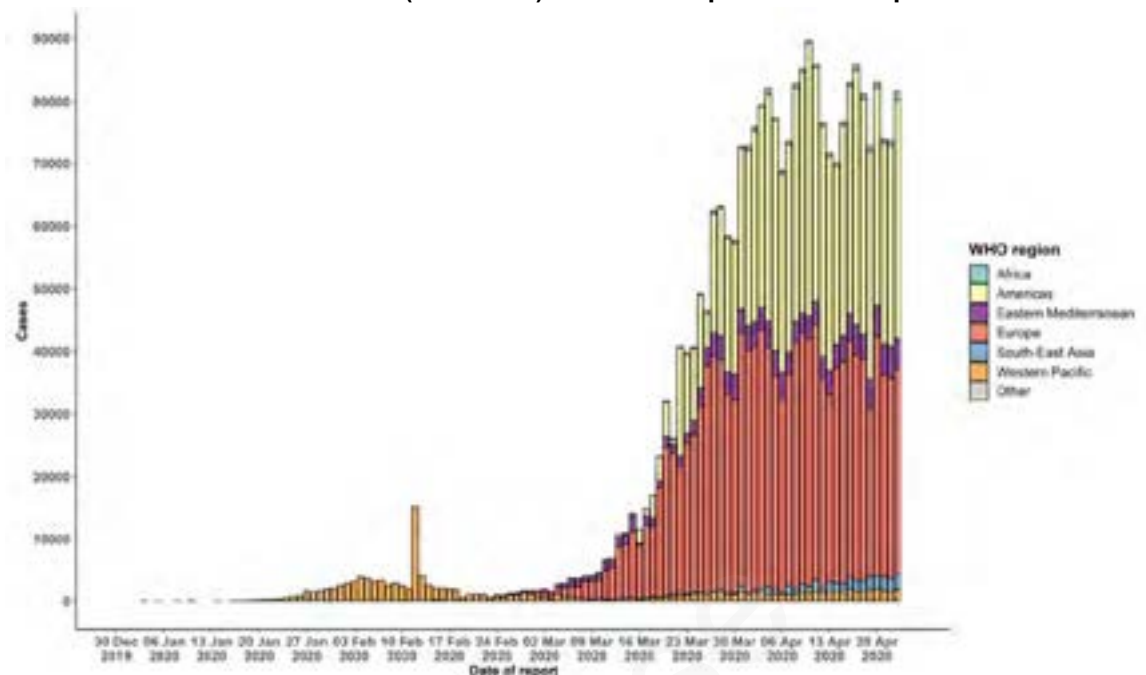
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 95 of 24 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 25 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 95 of 24 April 2020**



#### International response

#### WHO

- On 23 April 2020, the Regional Director for Europe implored European countries to invest in and 'build sustainable people-centred long-term care in the wake of COVID-19' by empowering care workers, changing how long-term care facilities operate, and building systems that prioritise people's needs.
- The WHO warned against suspending immunization services in the COVID-19 pandemic in the lead-up to World Immunization Week, 24 to 30 April 2020.
- The WHO's\* new modelling analysis shows that severe disruptions to insecticide-treated net campaigns and in-access to antimalarial medicines could lead to a doubling in malaria deaths in sub-Saharan Africa this year, compared to 2018.
  - \*Partners included PATH, Malaria Atlas Project, and Bill and Melinda Gates Foundation.
  - World Malaria Day is 25 April 2020.
- On 24 April 2020, the WHO Director-General launched, with President Macron, President von der Leyen and Bill and Melinda Gates, the Access to COVID-19 Tools (ACT) Accelerator.
  - ACT Accelerator is a global collaboration to accelerate the development, production and equitable access to new COVID-19 diagnostics, therapeutics and vaccines.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>• The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>• On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>• The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>• The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>• On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>• The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>• NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>• On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and</li> </ul>

	weddings.
NT Health	<ul style="list-style-type: none"> <li>• Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>• NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>• All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>• A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>• The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>• A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>• Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>• The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>• Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>• Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>• GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>• On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>• Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>• A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>• Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>• All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> <li>• The majority of international flights repatriating Australians are landing in Melbourne. All passengers arriving in these international flights are temperature and health screened and remain in Victoria for their mandatory 14-day hotel quarantine. Currently, approximately 20% of these exits from quarantine return to their residence in other states and territories.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>• A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>• A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li>• COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</li> <li>• Given the serious limitations and risks associated with the COVID-19 point of care (POC) serological (blood) test for acute detection and diagnostic purposes, POC test as an acute illness diagnostic tool for COVID-19 has been prohibited in WA.</li> </ul>



### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.



#### 4. Appendix 1

##### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,790,986) *last updated 0730 hrs AEST, checked at* 1500 hours.

Source: International cases based on WHO Situation Report 95, 25 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,311	4,642	9	0
Hong Kong SAR	1,036	4	0	0
Taiwan	428	6	1	0
Macau SAR	45	0	0	0
United States of America	830,053	42,311	29,127	2,238
Spain	213,024	22,157	4,635	440
Italy	189,973	25,549	2,646	464
Germany	150,383	5,321	2,337	227
The United Kingdom	138,082	18,738	4,583	638
France	119,583	21,823	1,622	516
Turkey	101,790	2,491	3,116	115
Iran (Islamic Republic of)	87,026	5,481	1,030	90
Russian Federation	68,622	615	5,849	60
Brazil	45,757	2,906	2,678	165
Belgium	42,797	6,490	908	228
Canada	40,813	2,028	1,890	157
Netherlands	35,729	4,177	887	123
Switzerland	28,414	1,267	228	51
India	23,077	718	1,684	37
Portugal	22,353	820	371	35
Peru	19,250	530	1,413	46
Ireland	17,607	794	936	25
Sweden	16,755	2,021	751	84
Austria	14,985	508	61	14
Israel	14,803	192	305	3
Saudi Arabia	13,930	121	1,158	7
Japan	12,388	317	469	30
Chile	11,812	168	516	8
Ecuador	11,183	560	333	23
Singapore	11,178	12	1,037	0
Pakistan	11,155	237	642	13
Republic of Korea	10,708	240	6	0
Mexico	10,544	970	1,043	113
Poland	10,511	454	342	28
Romania	10,096	527	386	19
United Arab Emirates	8,756	56	518	4

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Denmark	8,073	394	161	10
Belarus	8,022	60	741	0
Indonesia	7,775	647	357	12
Qatar	7,764	10	623	0
Ukraine	7,647	193	477	6
Norway	7,345	180	95	11
Serbia	7,276	139	162	5
Czechia	7,188	213	52	3
Philippines	6,981	462	271	16
Malaysia	5,603	95	71	2
Dominican Republic	5,543	265	243	5
Panama	4,992	144	171	3
Colombia	4,356	206	207	10
Finland	4,284	172	155	23
Bangladesh	4,186	127	414	7
South Africa	3,953	75	318	10
Egypt	3,891	287	232	11
Luxembourg	3,665	83	11	3
Morocco	3,568	155	122	6
Argentina	3,340	159	143	7
Algeria	3,007	407	97	5
Republic of Moldova	2,926	80	148	4
Thailand	2,854	50	15	0
Greece	2,463	125	55	4
Kuwait	2,399	14	151	1
Hungary	2,383	250	99	25
Bahrain	2,217	8	190	1
Kazakhstan	2,025	19	0	0
Croatia	1,981	50	31	2
Iceland	1,789	10	4	0
Uzbekistan	1,778	7	62	0
Oman	1,716	8	0	0
Iraq	1,677	83	46	0
Estonia	1,592	45	33	1
Azerbaijan	1,548	20	30	0
Armenia	1,523	24	50	0
Puerto Rico	1,416	48	118	-16
Bosnia and Herzegovina	1,413	53	46	1
Lithuania	1,410	40	12	2
Cameroon	1,401	49	238	6
Slovenia	1,366	79	13	0
Slovakia	1,325	15	81	1
North Macedonia	1,300	56	41	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Cuba	1,235	43	46	3
Afghanistan	1,226	40	50	0
Ghana	1,154	9	0	0
New Zealand	1,114	17	2	1
Bulgaria	1,097	52	73	3
Côte d'Ivoire	1,004	14	52	0
Djibouti	986	2	12	0
Nigeria	981	31	440	12
Tunisia	918	38	9	0
Guinea	862	6	101	0
Cyprus	795	17	5	0
Latvia	778	11	17	0
Andorra	726	38	2	1
International conveyance (Diamond Princess)	712	13	0	0
Lebanon	688	22	6	0
Costa Rica	681	6	12	0
Albania	678	28	44	1
Bolivia (Plurinational State of)	672	40	63	3
Niger	671	24	9	2
Kosovo	669	19	39	1
Kyrgyzstan	656	8	25	0
Burkina Faso	600	38	0	0
Uruguay	549	12	6	0
Honduras	519	47	9	1
San Marino	501	40	13	0
Senegal	479	6	37	0
Malta	445	3	1	0
Jordan	437	7	2	0
Georgia	431	5	11	0
Réunion	412	0	2	0
Democratic Republic of the Congo	394	25	35	0
Sri Lanka	368	7	38	0
Guatemala	342	10	26	2
Mayotte	339	4	13	0
occupied Palestinian territory	336	2	0	0
Mauritius	331	9	2	0
Somalia	328	16	42	2
Kenya	320	14	17	0
Montenegro	316	5	2	0
Mali	309	21	16	4
Isle of Man	307	16	0	6
Venezuela (Bolivarian Republic of)	298	10	10	0
United Republic of Tanzania	285	10	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Viet Nam	268	0	0	0
Jersey	255	18	0	4
El Salvador	250	8	13	1
Guernsey	243	10	2	0
Jamaica	243	6	10	0
Paraguay	213	9	0	0
Faroe Islands	187	0	2	0
Congo	186	6	0	0
Sudan	174	16	12	3
Martinique	170	14	6	0
Gabon	166	2	0	1
Rwanda	154	0	1	0
Guadeloupe	148	12	0	0
Myanmar	139	5	12	0
Brunei Darussalam	138	1	0	0
Guam	135	5	2	0
Gibraltar	133	0	0	0
Cambodia	122	0	0	0
Madagascar	121	0	0	0
Ethiopia	116	3	0	0
Trinidad and Tobago	115	8	0	0
French Guiana	107	1	10	0
Liberia	101	8	0	0
Aruba	100	2	0	0
Bermuda	99	5	1	0
Maldives	94	0	9	0
Togo	88	6	0	0
Equatorial Guinea	84	1	0	0
Liechtenstein	82	1	0	0
Barbados	76	6	1	1
Zambia	76	3	2	0
Sint Maarten	73	12	2	1
Bahamas	70	9	5	0
Monaco	68	1	0	0
Cabo Verde	67	1	0	0
Guyana	67	7	0	0
Cayman Islands	66	1	0	0
Sierra Leone	64	1	3	0
Uganda	63	0	2	0
Haiti	62	4	4	0
Libya	60	2	0	1
Benin	58	1	4	0
French Polynesia	57	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
United States Virgin Islands	54	3	0	0
Guinea-Bissau	52	0	2	0
Nepal	48	0	3	0
Syrian Arab Republic	42	3	0	0
Mozambique	41	0	0	0
Eritrea	39	0	0	0
Saint Martin	38	2	0	0
Mongolia	35	0	0	0
Chad	34	0	0	0
Malawi	33	3	10	0
Eswatini	31	1	0	0
Zimbabwe	28	4	0	0
Angola	25	2	1	0
Antigua and Barbuda	24	3	0	0
Timor-Leste	24	0	1	0
Botswana	22	1	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
New Caledonia	18	0	0	0
Central African Republic	16	0	2	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Grenada	15	0	1	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Vincent and the Grenadines	13	0	0	0
Falkland Islands (Malvinas)	12	0	0	0
Burundi	11	1	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Gambia	10	1	0	0
Nicaragua	10	2	0	0
Suriname	10	1	0	0
Holy See	9	0	0	0
Papua New Guinea	8	0	0	0
São Tomé and Príncipe	8	0	1	0
Bhutan	7	0	0	0
Mauritania	7	1	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Saint Barthélemy	6	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
British Virgin Islands	5	1	1	0
South Sudan	4	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,621,163</b>	<b>181,872</b>	<b>81,516</b>	<b>6,242</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #98 Novel Coronavirus (COVID-19)  
**Date:** Sunday, 26 April 2020 6:40:27 PM  
**Attachments:** [2020-04-26 NIR Health SitRep v98 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 26 April 2020, there have been 6,711 laboratory confirmed cases of COVID-19 in Australia, including 83 deaths.
- Since yesterday's situation report, an additional 16 cases and 3 deaths, have been reported in Australia.
- To date, more than 506,000 tests have been conducted across Australia.
- Today the Minister for Health, Chief Medical Officer and Chief Nursing and Midwifery Officer launched the contact tracing app, COVIDSafe.

#### Situation Overseas

- As at 1500 hrs 26 April 2020, a total of 2,897,883 cases of COVID-19 have been reported globally, including 202,880 deaths.

The next Situation Report will be issued on 27 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health





**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <del>26</del> 1800 AEDT	<b>Version</b>	<b>98</b>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <del>27</del> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>• <i>Today the Minister for Health, Chief Medical Officer and Chief Nursing and Midwifery Officer launched the contact tracing app, COVIDSafe.</i> <ul style="list-style-type: none"> <li>◦ <i>The app is available for downloading from Google Play, and the App Store. Registrations opened today at 1800hrs.</i></li> <li>◦ <i>Use of COVIDSafe is voluntary. You can install or delete COVIDSafe at any time.</i></li> <li>◦ <i>Contact data on your device will be automatically deleted from your device 21 days after contact occurs.</i></li> <li>◦ <i>No user should feel pressured to install or continue to use COVIDSafe, or to agree to upload contact data to the data store. This is prohibited under the Biosecurity Determination.</i></li> <li>◦ <i>All data will be deleted from the data store after the COVID-19 pandemic has concluded, as required by the Biosecurity Determination.</i></li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>• On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>• Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> </ul>

	<ul style="list-style-type: none"> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 26 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,711</b> cases of COVID-19, including <b>83</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>16</b> cases and <b>3</b> deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>105</b>, which is down from the <b>293</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 19% of these cases requiring admission to an ICU (2.2% of confirmed cases).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is 79 years (range 42 to 96 years).</li> <li><b>61%</b> were male and <b>39%</b> were female.</li> <li>Where data was available regarding comorbidities, <b>94%</b> had one or more comorbidities and <b>71%</b> had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>506,000</b> tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was <b>1.3%</b> and the positivity in the past week was 0.1%.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.</li> </ul>
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- Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; however, all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - To date, approximately 800 cases of COVID-19 cases associated with the Ruby Princess cruise ship, including 190 crew (44 crew members are being managed onshore in NSW). Additionally, there have been a number of cases linked to previously confirmed passengers. The Ruby Princess departed Australia on 23 April 2020.
  - Tasmania is reporting an outbreak in North-West hospitals of at least 117 cases, including 75 staff members (as of 24 April 2020).
  - NSW Health is reporting 48 cases (17 staff and 31 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 24 April 2020. There have also been 5 deaths associated with this outbreak.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 19 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

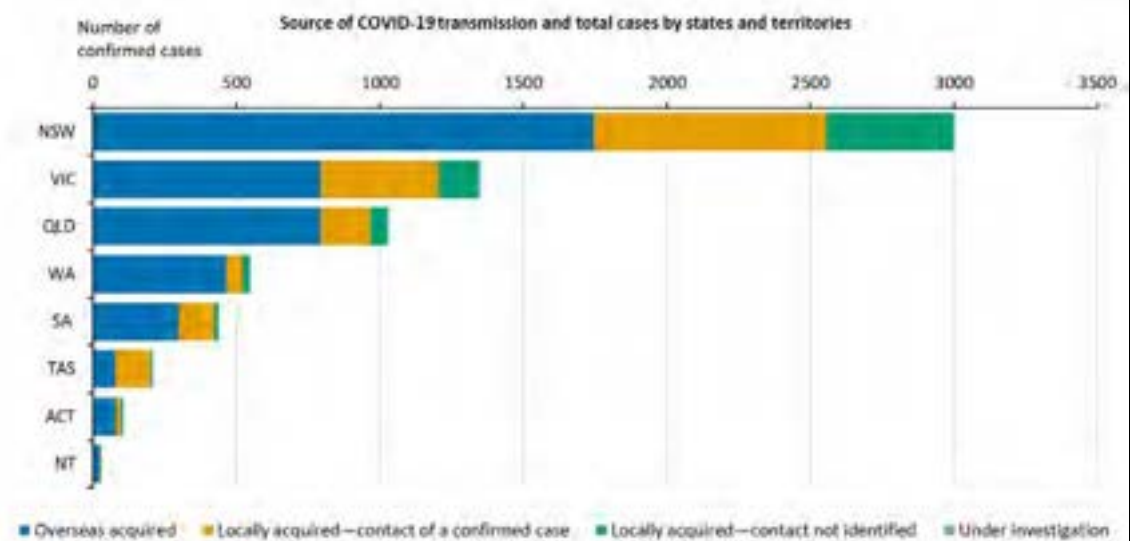
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 26 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,278	81	1,744	24	794	298	77	794	466
Locally acquired - contact of confirmed case and/or in a known cluster	1,720	17	813	2	172	124	124	411	57
Locally acquired - contact not identified	572	1	368	0	43	7	0	137	16
Locally acquired - contact not identified, but case had interstate travel	112	6	71	1	18	6	4	0	6
Under investigation	29	1	6	0	3	3	5	7	4
<b>Total cases</b>	<b>6,711</b>	<b>106</b>	<b>3,002</b>	<b>27</b>	<b>1,030</b>	<b>438</b>	<b>210</b>	<b>1,349</b>	<b>549</b>
<b>Deaths (of total)</b>	<b>83</b>	<b>3</b>	<b>34</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>11</b>	<b>17</b>	<b>8</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	16 (0%)	0 (0%)	8 (0%)	0 (0%)	4 (0%)	0 (0%)	1 (0%)	3 (0%)	0 (0%)
Change in the last 72hrs before (%change)	50 (1%)	2 (2%)	26 (1%)	0 (0%)	4 (0%)	0 (0%)	3 (1%)	12 (1%)	3 (1%)
Average daily increase over the past three days (compound)	0.2%	0.6%	0.3%	0.0%	0.1%	0.0%	0.5%	0.3%	0.2%
Increase over the past week	105	3	45	-	11	3	18	21	4

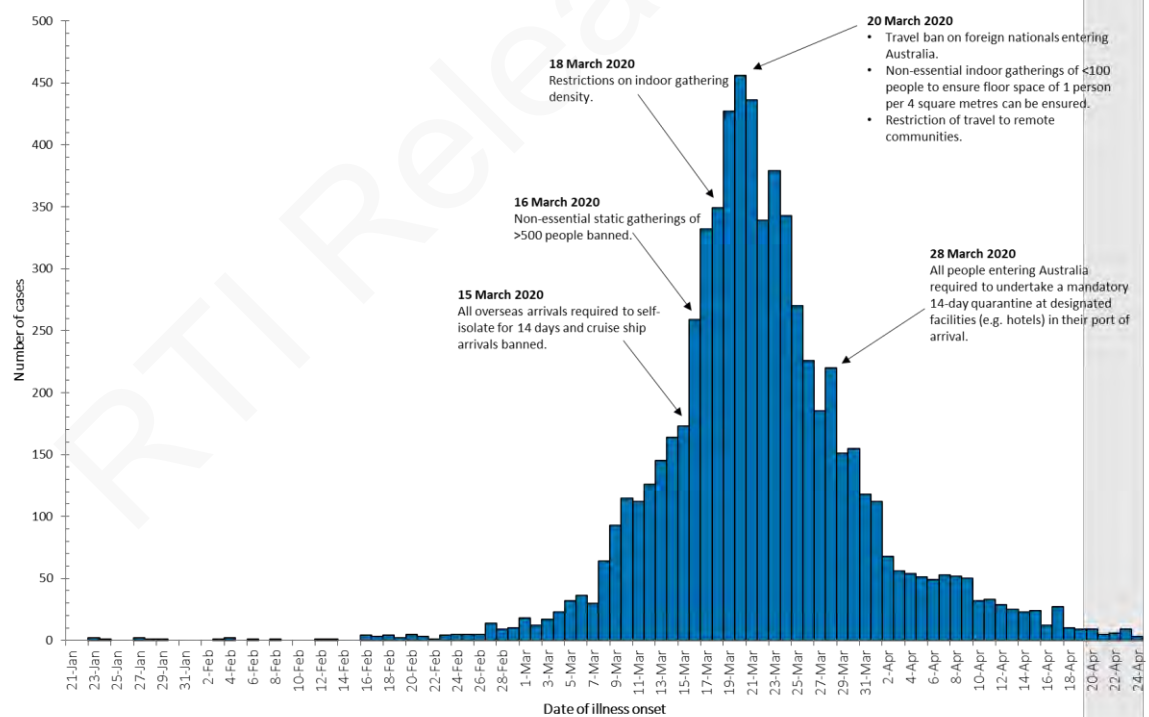
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

^ On 23 April 2020, NSW revised their case count down by 1, to exclude a case who after further testing was not considered to meet the case definition.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 26 April 2020**

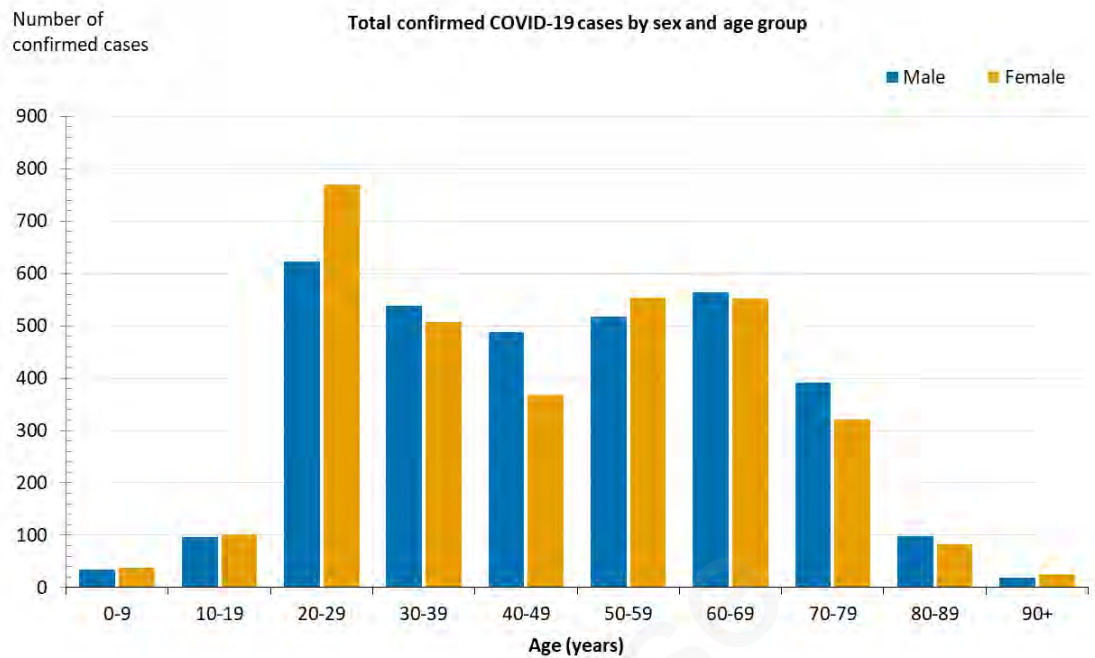


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 26 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 26 April 2020**

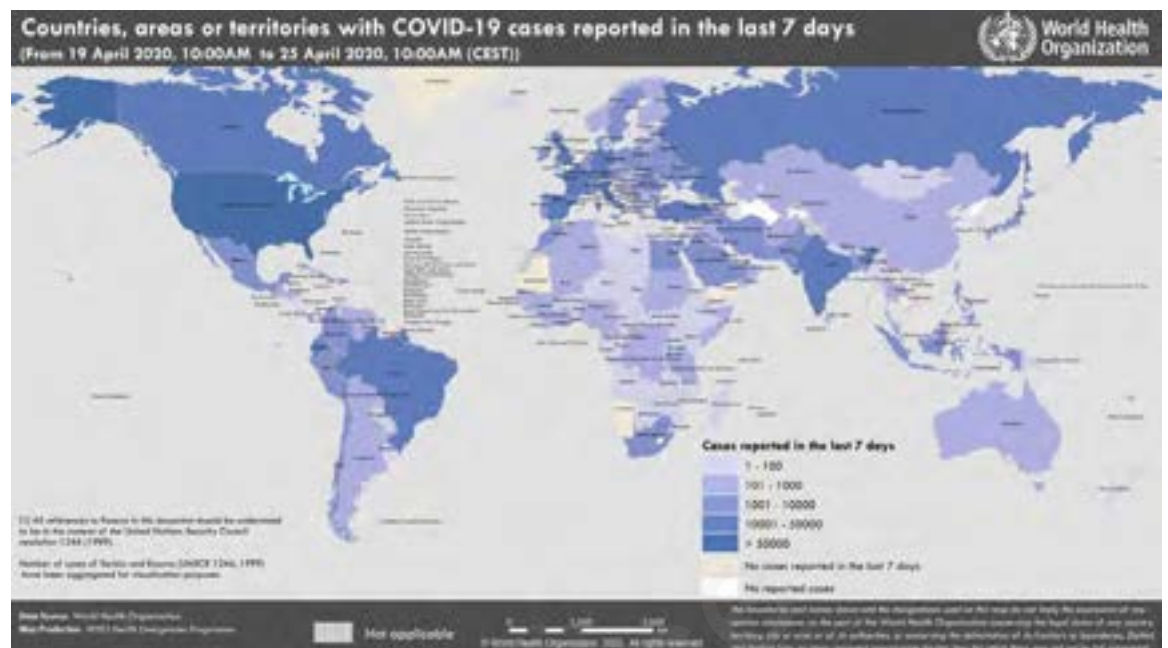


**International Situation (as at 1500 hrs, 26 April 2020)**

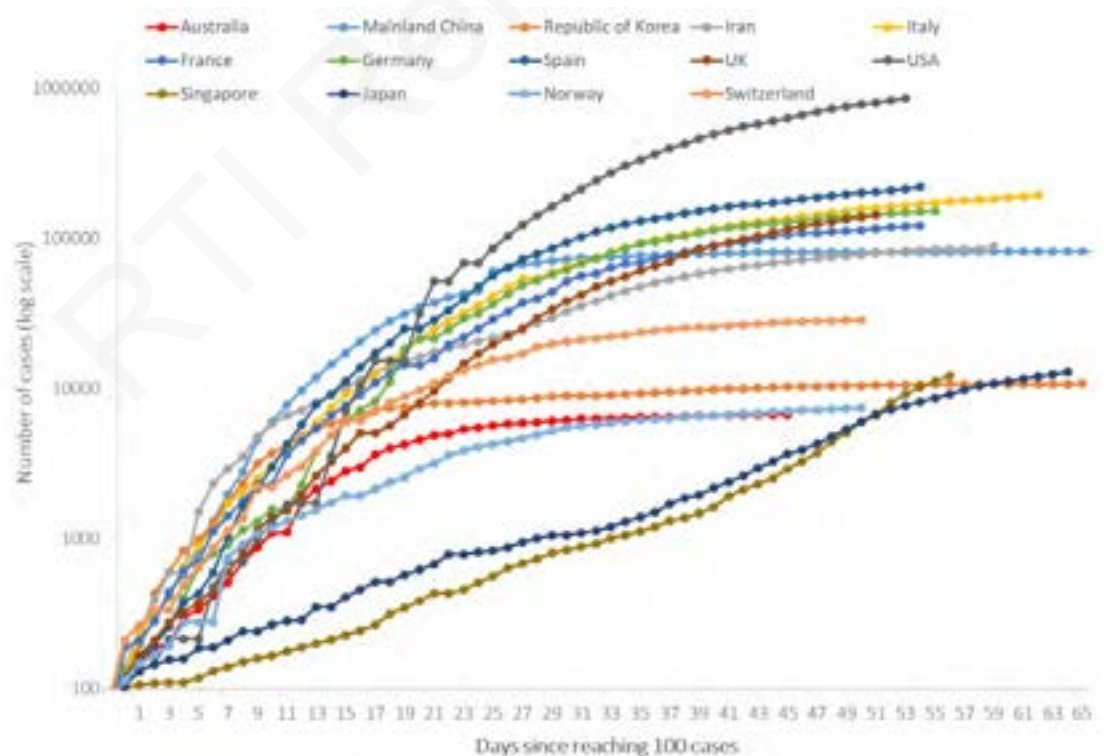
- A total of **2,897,883** cases of COVID-19 have been reported globally, including **202,880** deaths (Johns Hopkins, last updated 1530 hrs AEST).
  - A total of **106,897** new cases, including **6,960** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins).
- The majority of deaths are from the United States of America (23%), Italy (14%), Spain (12%), and France (12%) (WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.9% (WHO Situation Report). The risk of death reportedly increases with age.
- On **25 April 2020**, Singapore reported **618** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **597 (97%)** were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing, with most being reported as mild cases. In total, Singapore has reported **12,693** cases and 12 deaths, with **10,526 (83% of all cases)** being migrant worker dormitory residents.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **720** deaths and a case fatality rate of 8.4%. The government has reported **8,607** cases.



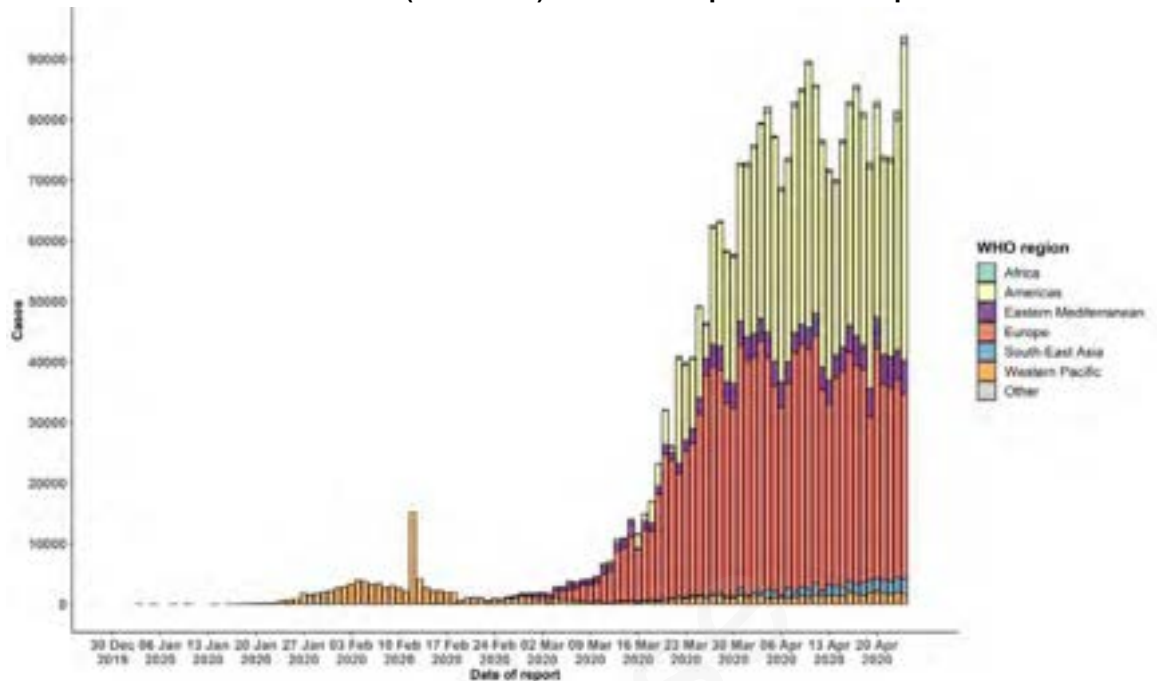
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 96 of 25 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 26 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 96 of 25 April 2020**



#### International response

##### WHO

- On 24 April 2020, the WHO Director-General launched, with President Macron, President von der Leyen and Bill and Melinda Gates, the Access to COVID-19 Tools (ACT) Accelerator.
  - ACT Accelerator is a global collaboration to accelerate the development, production and equitable access to new COVID-19 diagnostics, therapeutics and vaccines.
- On 23 April 2020, the Regional Director for Europe implored European countries to invest in and 'build sustainable people-centred long-term care in the wake of COVID-19' by empowering care workers, changing how long-term care facilities operate, and building systems that prioritise people's needs.
- The WHO's\* new modelling analysis shows that severe disruptions to insecticide-treated net campaigns and in-access to antimalarial medicines could lead to a doubling in malaria deaths in sub-Saharan Africa this year, compared to 2018.
  - \*Partners included PATH, Malaria Atlas Project, and Bill and Melinda Gates Foundation.
  - World Malaria Day is 25 April 2020.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>



NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> <li>Hospital based COVID-19 clinics operational in metro and regional areas.</li> <li>GP based testing clinics open to ensure better coverage in some metro areas.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> <li>The majority of international flights repatriating Australians are landing in Melbourne. All passengers arriving in these international flights are temperature and health screened and remain in Victoria for their mandatory 14-day hotel quarantine. Currently, approximately 20% of these exits from quarantine return to their residence in other states and territories.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li>COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</li> <li>Given the serious limitations and risks associated with the COVID-19 point of care (POC) serological (blood) test for acute detection and diagnostic purposes, POC test as an acute illness diagnostic tool for COVID-19 has been prohibited in WA.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

### 4. Appendix 1

#### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,897,883) last updated 1430 hrs AEST, checked at 1500 hours.

Source: International cases based on WHO Situation Report 96, 25 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,325	4,642	14	0
Hong Kong SAR	1,038	4	2	0
Taiwan	429	6	1	0
Macau SAR	45	0	0	0
United States of America	860,772	44,053	30,719	1,742
Spain	219,764	22,524	6,740	367
Italy	192,994	25,969	3,021	420
Germany	152,438	5,500	2,055	179
The United Kingdom	143,468	19,506	5,386	768
France	121,338	22,212	1,755	389
Turkey	104,912	2,600	3,122	109
Iran (Islamic Republic of)	88,194	5,574	1,168	93
Russian Federation	68,622	615	0	0
Brazil	49,492	3,313	3,735	407
Belgium	44,293	6,679	1,496	189
Canada	42,739	2,197	1,926	169
Netherlands	36,535	4,289	806	112
Switzerland	28,595	1,308	181	41
India	24,506	775	1,429	57
Portugal	22,797	854	444	34
Ecuador	22,719	576	11,536	16
Peru	20,914	572	1,664	42
Ireland	18,184	829	577	35
Sweden	17,567	2,152	812	131
Saudi Arabia	15,102	127	1,172	6
Austria	15,068	513	83	5
Israel	15,028	194	225	2
Japan	12,829	334	441	17
Chile	12,306	174	494	6
Singapore	12,075	12	897	0
Pakistan	11,940	253	785	16
Mexico	11,633	1,069	1,089	99
Poland	10,892	494	381	40
Republic of Korea	10,718	240	10	0
Romania	10,417	552	321	25
United Arab Emirates	9,281	64	525	8
Belarus	8,773	63	751	3
Qatar	8,525	10	761	0
Indonesia	8,211	689	436	42
Denmark	8,210	403	137	9
Ukraine	8,125	201	478	8

Serbia	7,483	144	207	5
Norway	7,408	191	63	11
Czechia	7,273	215	85	2
Philippines	7,192	477	211	15
Dominican Republic	5,749	267	206	2
Malaysia	5,691	96	88	1
Panama	5,166	146	174	2
Bangladesh	4,689	131	503	4
Colombia	4,561	215	205	9
Finland	4,395	177	111	5
South Africa	4,220	79	267	4
Egypt	4,092	294	201	7
Morocco	3,758	158	190	3
Luxembourg	3,695	85	30	2
Argentina	3,479	167	139	8
Algeria	3,127	415	120	8
Republic of Moldova	3,110	87	184	7
Thailand	2,907	51	53	1
Kuwait	2,614	15	215	1
Bahrain	2,518	8	301	0
Greece	2,490	130	27	5
Hungary	2,443	262	60	12
Kazakhstan	2,416	25	391	6
Croatia	2,009	51	28	1
Oman	1,905	10	189	2
Uzbekistan	1,836	8	58	1
Iceland	1,789	10	0	0
Iraq	1,708	86	31	3
Estonia	1,605	46	13	1
Armenia	1,596	27	73	3
Azerbaijan	1,592	21	44	1
Bosnia and Herzegovina	1,428	54	15	1
Lithuania	1,410	40	0	0
Cameroon	1,403	49	2	0
Slovenia	1,373	80	7	1
Slovakia	1,360	17	35	2
Afghanistan	1,330	43	104	3
North Macedonia	1,326	57	26	1
Cuba	1,285	49	50	6
Ghana	1,279	10	125	1
Puerto Rico	1,276	51	0	3
Bulgaria	1,188	54	91	2
New Zealand	1,117	18	3	1
Nigeria	1,095	32	114	1
Côte d'Ivoire	1,077	14	73	0
Djibouti	999	2	13	0

Guinea	954	6	92	0
Tunisia	922	38	4	0
Cyprus	804	17	9	0
Latvia	784	12	6	1
Andorra	733	40	7	2
International conveyance (Diamond Princess)	712	13	0	0
Bolivia (Plurinational State of)	703	43	31	3
Kosovo	703	19	34	0
Lebanon	696	22	8	0
Costa Rica	686	6	5	0
Niger	681	24	10	0
Albania	678	28	0	0
Kyrgyzstan	665	8	9	0
Burkina Faso	616	41	16	3
Honduras	562	47	43	0
Uruguay	557	12	8	0
Senegal	545	7	66	1
San Marino	513	40	12	0
Georgia	456	5	25	0
Malta	447	3	2	0
Jordan	441	7	4	0
Sri Lanka	420	7	52	0
Democratic Republic of the Congo	416	28	22	3
Réunion	412	0	0	0
Guatemala	384	11	42	1
Mayotte	354	4	15	0
occupied Palestinian territory	340	2	4	0
Kenya	336	14	16	0
Mauritius	331	9	0	0
Somalia	328	16	0	0
Mali	325	21	16	0
Montenegro	319	5	3	0
Venezuela (Bolivarian Republic of)	318	10	20	0
Isle of Man	308	17	1	1
United Republic of Tanzania	300	10	15	0
Jersey	276	19	21	1
Viet Nam	270	0	2	0
El Salvador	261	8	11	0
Jamaica	257	7	14	1
Guernsey	245	10	2	0
Paraguay	220	9	7	0
Equatorial Guinea	212	1	128	0
Congo	200	6	14	0
Faroe Islands	187	0	0	0
Rwanda	176	0	22	0
Sudan	174	16	0	0

Gabon	172	3	6	1
Martinique	170	14	0	0
Guadeloupe	149	12	1	0
Myanmar	144	5	5	0
Brunei Darussalam	138	1	0	0
Guam	136	5	1	0
Gibraltar	133	0	0	0
Cambodia	122	0	0	0
Madagascar	122	0	1	0
Ethiopia	117	3	1	0
Liberia	117	8	16	0
Maldives	116	0	22	0
Trinidad and Tobago	115	8	0	0
French Guiana	109	1	2	0
Aruba	100	2	0	0
Bermuda	99	5	0	0
Togo	90	6	2	0
Cabo Verde	88	1	21	0
Zambia	84	3	8	0
Liechtenstein	82	1	0	0
Sierra Leone	82	3	18	2
Barbados	76	6	0	0
Uganda	75	0	12	0
Sint Maarten	73	12	0	0
Bahamas	72	11	2	2
Haiti	72	5	10	1
Guyana	70	7	3	0
Monaco	68	1	0	0
Cayman Islands	66	1	0	0
Mozambique	65	0	24	0
Libya	61	2	1	0
Benin	58	1	0	0
French Polynesia	57	0	0	0
United States Virgin Islands	54	3	0	0
Guinea-Bissau	52	0	0	0
Nepal	49	0	1	0
Syrian Arab Republic	42	3	0	0
Chad	40	0	6	0
Eswatini	40	1	9	0
Eritrea	39	0	0	0
Saint Martin	38	2	0	0
Mongolia	36	0	1	0
Malawi	33	3	0	0
Zimbabwe	29	4	1	0
Angola	25	2	0	0
Antigua and Barbuda	24	3	0	0

Timor-Leste	24	0	0	0
Botswana	22	1	0	0
Central African Republic	19	0	3	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Grenada	15	0	0	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Vincent and the Grenadines	14	0	1	0
Burundi	12	1	1	0
Falkland Islands (Malvinas)	12	0	0	0
Greenland	11	0	0	0
Montserrat	11	0	0	0
Nicaragua	11	3	1	1
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Gambia	10	1	0	0
Suriname	10	1	0	0
Holy See	9	0	0	0
Papua New Guinea	8	0	0	0
São Tomé and Príncipe	8	0	0	0
Bhutan	7	0	0	0
Mauritania	7	1	0	0
Saint Barthélemy	6	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
British Virgin Islands	5	1	0	0
South Sudan	5	0	1	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,713,210</b>	<b>187,626</b>	<b>93,696</b>	<b>5,764</b>



**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #99 Novel Coronavirus (COVID-19)  
**Date:** Monday, 27 April 2020 6:46:51 PM  
**Attachments:** [2020-04-27 NIR Health SitRep v99 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 27 April 2020, there have been 6,720 laboratory confirmed cases of COVID-19 in Australia, including 83 deaths.
- Since yesterday's situation report, an additional 9 cases and no new deaths, have been reported in Australia.
- To date, more than 517,000 tests have been conducted across Australia.
- The total number of cases reported over the last 7 days was 101, which is down from the 260 reported in the week prior. These numbers indicate a steady decline over the last fortnight.
- 1.89 million people have downloaded and registered for the COVIDSafe app as at 1600hrs today.

#### Situation Overseas

- As at 1500 hrs 27 April 2020, a total of 2,971,639 cases of COVID-19 have been reported globally, including 206,542 deaths.
- Singapore has reported 13,624 cases and 12 deaths, with 11,419 (84% of all cases) being migrant worker dormitory residents.

The next Situation Report will be issued on 28 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [\[redacted\]](#) or [\[redacted\]](#) (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [\[redacted\]](#) by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <del>27</del> 1800 AEDT	<b>Version</b>	<b>99</b>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <del>28</del> 1800 AEDT
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>The Minister for Health, Chief Medical Officer and Chief Nursing and Midwifery Officer launched the contact tracing app, COVIDSafe <i>on Sunday, 26 April 2020</i>.               <ul style="list-style-type: none"> <li>The app is available for downloading from Google Play, and the App Store.</li> <li>Registrations opened on <i>26 April 2020</i>, at 1800hrs <i>and as at 1600hrs today 1.89 million people have downloaded and registered for the COVIDSafe app</i>.</li> <li>Use of COVIDSafe is voluntary. You can install or delete COVIDSafe at any time.</li> <li>Contact data on your device will be automatically deleted from your device 21 days after contact occurs.</li> <li>No user should feel pressured to install or continue to use COVIDSafe, or to agree to upload contact data to the data store. This is prohibited under the Biosecurity Determination.</li> <li>All data will be deleted from the data store after the COVID-19 pandemic has concluded, as required by the Biosecurity Determination.</li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> </ul>

	<ul style="list-style-type: none"> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 27 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,720</b> cases of COVID-19, including 83 deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>9</b> cases and <b>no new</b> deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>101</b>, which is down from the <b>260</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).</li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 19% of these cases requiring admission to an ICU (2.2% of confirmed cases).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is <b>79.5</b> years (range 42 to 96 years).</li> <li>61% were male and 39% were female.</li> <li>Where data was available regarding comorbidities, <b>96%</b> had one or more comorbidities and <b>73%</b> had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>517,000</b> tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.3% and the positivity in the past week was 0.1%.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).</li> </ul>
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- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - To date, approximately 800 cases of COVID-19 cases associated with the Ruby Princess cruise ship, including 190 crew (44 crew members are being managed onshore in NSW). Additionally, there have been a number of cases linked to previously confirmed passengers. The Ruby Princess departed Australia on 23 April 2020.
  - Tasmania is reporting an outbreak in North-West hospitals of at least 123 cases, including 78 staff members (as of 27 April 2020).
  - NSW Health is reporting 48 cases (17 staff and 31 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 27 April 2020. There have also been 6 deaths associated with this outbreak.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 19 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

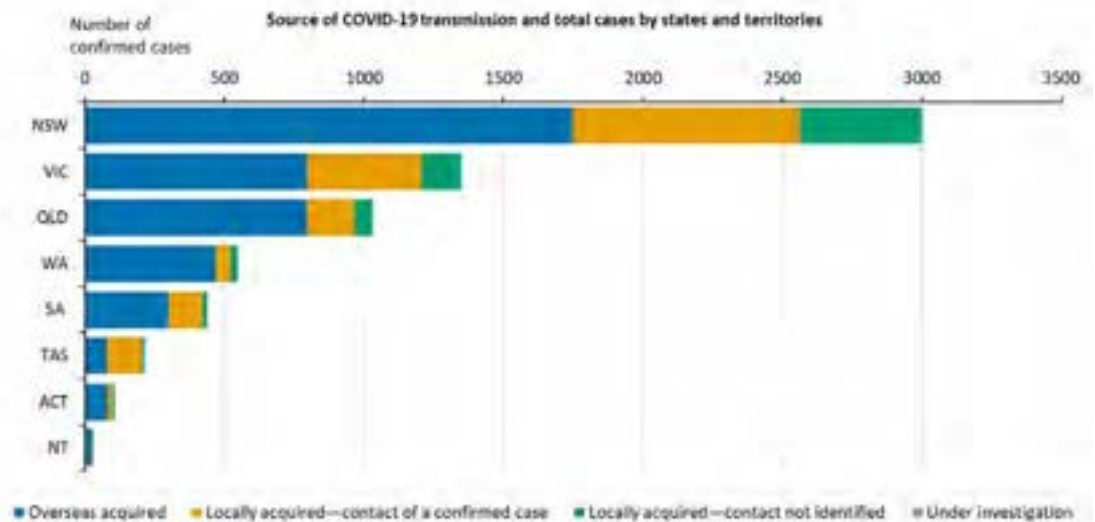
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 27 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,283	81	1,747	24	795	298	77	794	467
Locally acquired - contact of confirmed case and/or in a known cluster	1,727	17	816	2	172	124	128	412	56
Locally acquired - contact not identified	571	1	366	0	43	7	0	138	16
Locally acquired - contact not identified, but case had interstate travel	109	6	68	1	18	6	4	0	6
Under investigation	30	1	7	0	5	3	5	5	4
<b>Total cases</b>	<b>6,720</b>	<b>106</b>	<b>3,004</b>	<b>27</b>	<b>1,033</b>	<b>438</b>	<b>214</b>	<b>1,349</b>	<b>549</b>
<b>Deaths (of total)</b>	<b>83</b>	<b>3</b>	<b>34</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>11</b>	<b>17</b>	<b>8</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	9 (0%)	0 (0%)	2 (0%)	0 (0%)	3 (0%)	0 (0%)	4 (2%)	0 (0%)	0 (0%)
Change in the last 72hrs before (%change)	45 (1%)	2 (2%)	22 (1%)	0 (0%)	7 (1%)	0 (0%)	7 (3%)	6 (0%)	1 (0%)
Average daily increase over the past three days (compound)	0.2%	0.6%	0.2%	0.0%	0.2%	0.0%	1.1%	0.1%	0.1%
Increase over the past week	101	2	41	0	14	3	17	20	4

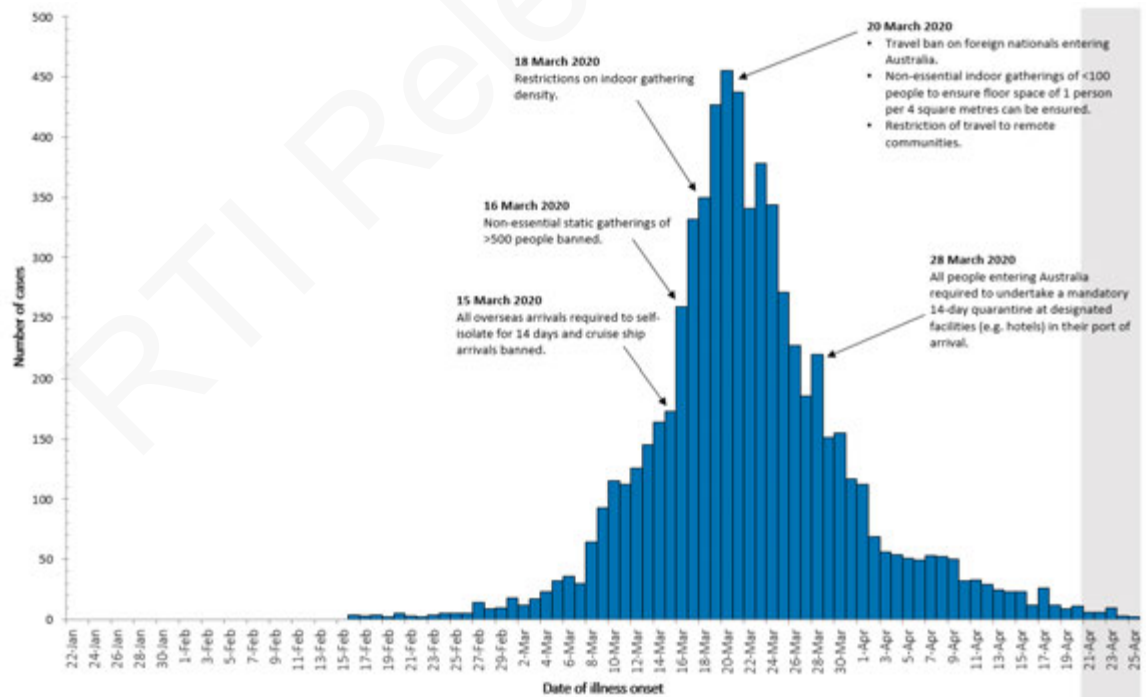
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

^ On 23 April 2020, NSW revised their case count down by 1, to exclude a case who after further testing was not considered to meet the case definition.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 27 April 2020**

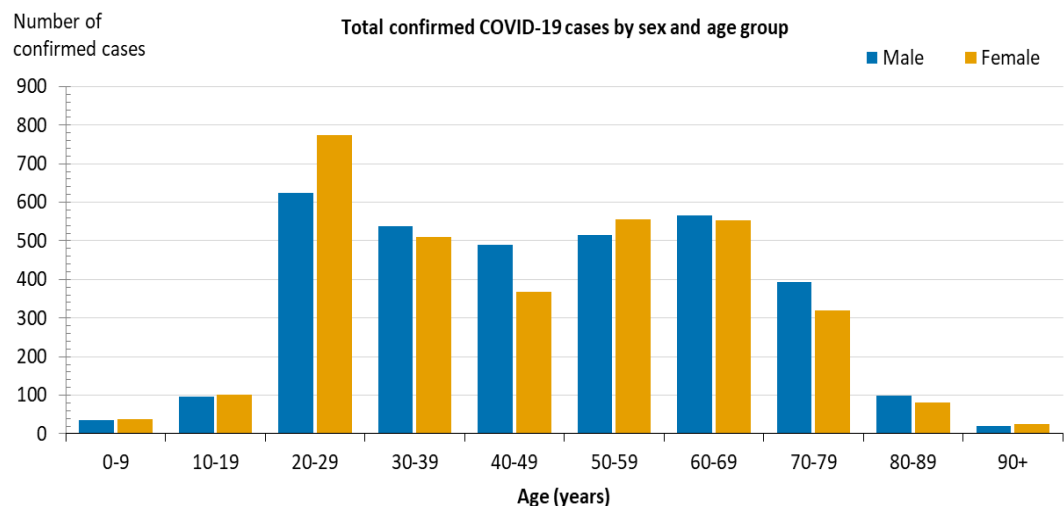


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 27 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

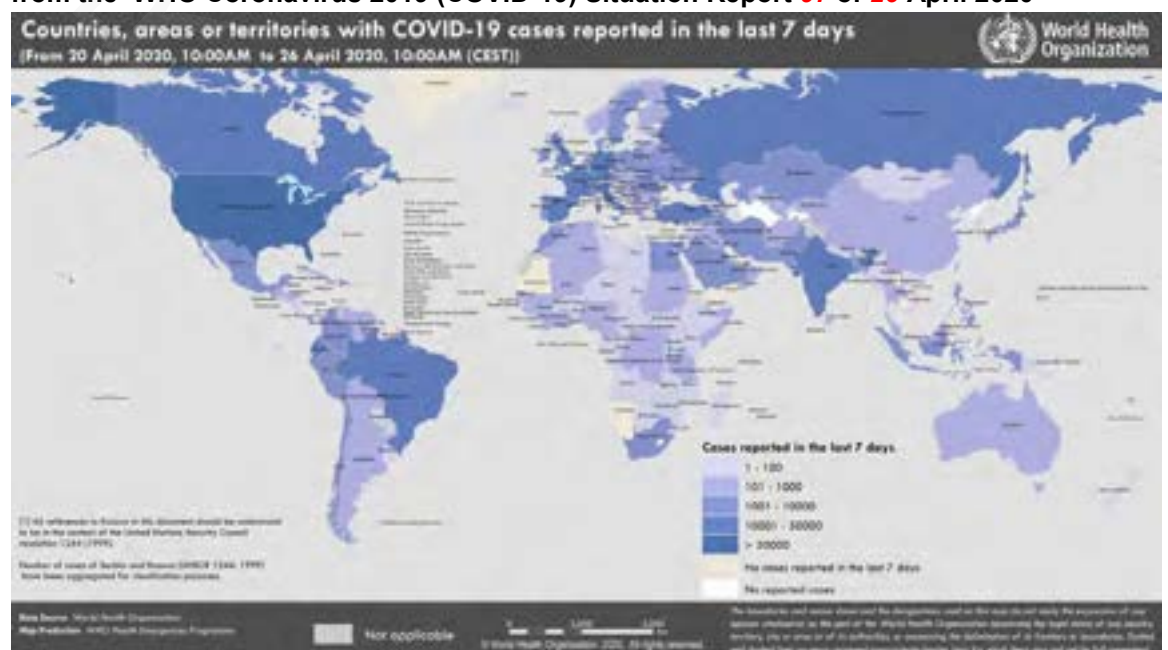
**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 27 April 2020**



**International Situation (as at 1500 hrs, 27 April 2020)**

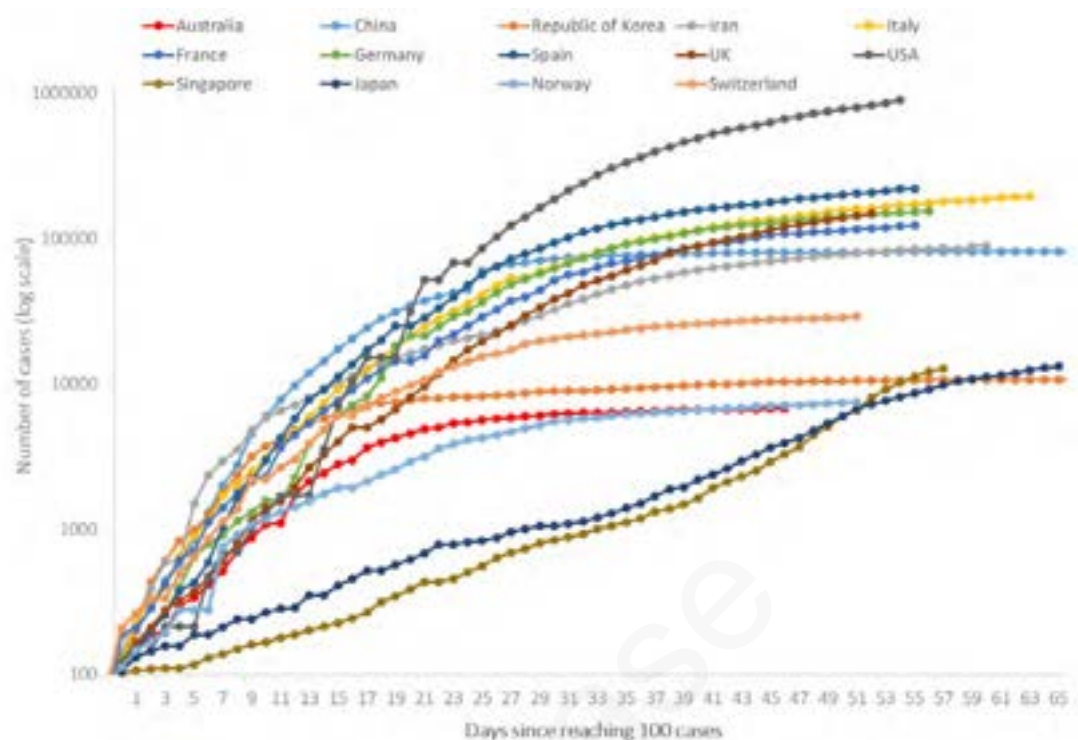
- A total of **2,971,639** cases of COVID-19 have been reported globally, including **206,542** deaths (Johns Hopkins, last updated **1430** hrs AEST).
  - A total of **73,756** new cases, including **3,662** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins).
- The majority of deaths are from the United States of America (**24%**), Italy (**14%**), **France (12%)**, and **Spain (12%)** (WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.9% (WHO Situation Report). The risk of death reportedly increases with age.
- On **26** April 2020, Singapore reported **931** new cases of COVID-19, continuing its recent increasing incidence of locally acquired cases. Among these new cases, **886 (95%)** were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing, with most being reported as mild cases. In total, Singapore has reported **13,624** cases and 12 deaths, with **11,419 (84% of all cases)** being migrant worker dormitory residents.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **743** deaths and a case fatality rate of 8.4%. The government has reported **8,882** cases.

**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 97 of 26 April 2020**

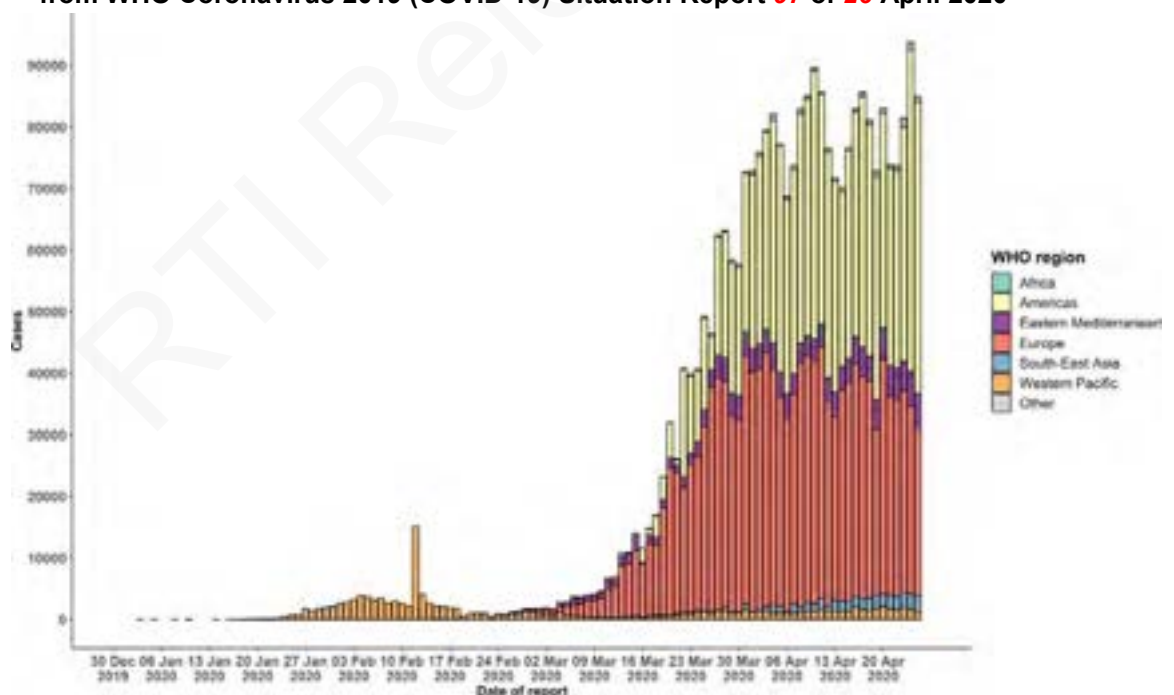




**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 27 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 97 of 26 April 2020**



#### International response

#### WHO

- On 24 April 2020, the WHO Director-General launched, with President Macron, President von der Leyen, and Bill and Melinda Gates, the Access to COVID-19 Tools (ACT) Accelerator.
  - ACT Accelerator is a global collaboration to accelerate the development, production and equitable access to new COVID-19 diagnostics, therapeutics and vaccines.
- On 23 April 2020, the Regional Director for Europe implored European countries to invest in and 'build sustainable people-centred long-term care in the wake of COVID-19' by empowering care workers, changing how long-term care facilities operate, and building systems that prioritise people's needs.



## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>On 8 April 2020, the ACT Minister for Health extended the Public Health Emergency Declaration for a period of 90 days (effective 8 April 2020 until 7 July 2020).</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan remains activated.</li> <li>On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> </ul>

- A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.
- A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.
- COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

#### 4. Appendix 1

##### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (2,971,639) last updated 1430 hrs AEST, checked at 1500 hours.

Source: International cases based on WHO Situation Report 97, 26 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,338	4,642	13	0
Hong Kong SAR	1,038	4	0	0
Taiwan	429	6	0	0
Macau SAR	45	0	0	0
United States of America	899,281	46,204	38,509	2,151
Spain	219,764	22,524	0	0
Italy	195,351	26,384	2,357	415
Germany	154,175	5,640	1,737	140
The United Kingdom	148,381	20,319	4,913	813
France	122,875	22,580	1,537	368
Turkey	107,773	2,706	2,861	106
Iran (Islamic Republic of)	89,328	5,650	1,134	76
Russian Federation	74,588	681	5,966	66
Brazil	52,995	3,670	3,503	357
Belgium	45,325	6,917	1,032	238
Canada	44,353	2,350	1,614	153
Netherlands	37,190	4,409	655	120
Switzerland	28,978	1,336	383	28
India	26,496	824	1,990	49
Portugal	23,392	880	595	26
Ecuador	22,719	576	0	0
Peru	21,648	634	734	62
Ireland	18,561	1,063	377	234
Sweden	18,177	2,192	610	40
Saudi Arabia	16,299	136	1,197	9
Israel	15,398	199	370	5
Austria	15,134	536	66	23
Japan	13,182	348	353	14
Mexico	12,872	1,221	1,239	152
Chile	12,858	181	552	7
Pakistan	12,723	269	783	16
Singapore	12,693	12	618	0
Poland	11,273	524	381	30
Republic of Korea	10,728	242	10	2

Romania	10,635	575	218	23
United Arab Emirates	9,813	71	532	7
Belarus	9,590	67	817	4
Qatar	9,358	10	833	0
Ukraine	8,617	209	492	8
Indonesia	8,607	720	396	31
Denmark	8,445	418	235	15
Serbia	7,779	151	296	7
Norway	7,467	193	59	2
Czechia	7,352	218	79	3
Philippines	7,294	494	102	17
Dominican Republic	5,926	273	177	6
Malaysia	5,742	98	51	2
Panama	5,338	154	172	8
Bangladesh	4,998	140	309	9
Colombia	4,881	225	320	10
Finland	4,475	186	80	9
South Africa	4,361	86	141	7
Egypt	4,319	307	227	13
Morocco	3,897	159	139	1
Luxembourg	3,711	85	16	0
Argentina	3,701	179	222	12
Republic of Moldova	3,304	94	194	7
Algeria	3,256	419	129	4
Thailand	2,922	51	15	0
Kuwait	2,892	19	278	4
Kazakhstan	2,601	25	185	0
Bahrain	2,589	8	71	0
Greece	2,506	130	16	0
Hungary	2,500	272	57	10
Croatia	2,016	54	7	3
Oman	1,998	10	93	0
Uzbekistan	1,865	8	29	0
Iceland	1,790	10	1	0
Iraq	1,763	86	55	0
Armenia	1,746	28	150	1
Estonia	1,635	46	30	0
Azerbaijan	1,617	21	25	0
Cameroon	1,518	53	115	4
Bosnia and Herzegovina	1,485	56	57	2
Afghanistan	1,463	49	133	6
Lithuania	1,438	41	28	1
Slovenia	1,388	81	15	1
Slovakia	1,373	17	13	0
North Macedonia	1,367	59	41	2
Cuba	1,337	51	52	2

Ghana	1,279	10	0	0
Puerto Rico	1,276	77	0	26
Bulgaria	1,247	55	59	1
Nigeria	1,182	35	87	3
New Zealand	1,121	18	4	0
Côte d'Ivoire	1,111	14	34	0
Djibouti	1,008	2	9	0
Guinea	996	7	42	1
Tunisia	939	38	17	0
Cyprus	810	17	6	0
Bolivia (Plurinational State of)	807	44	104	1
Latvia	804	12	20	0
Andorra	738	40	5	0
Kosovo	731	20	28	1
Albania	712	27	34	-1
International conveyance (Diamond Princess)	712	13	0	0
Lebanon	704	24	8	2
Costa Rica	687	6	1	0
Niger	684	27	3	3
Kyrgyzstan	682	8	17	0
Burkina Faso	629	41	13	0
Senegal	614	7	69	0
Honduras	591	55	29	8
Uruguay	563	12	6	0
San Marino	513	40	0	0
Georgia	485	5	29	0
Sri Lanka	460	7	40	0
Malta	448	4	1	1
Jordan	444	7	3	0
Democratic Republic of the Congo	442	28	26	0
Guatemala	430	13	46	2
Réunion	412	0	0	0
Somalia	390	18	62	2
Mali	370	21	45	0
Mayotte	354	4	0	0
Kenya	343	14	7	0
occupied Palestinian territory	342	2	2	0
Mauritius	331	9	0	0
Montenegro	319	6	0	1
Venezuela (Bolivarian Republic of)	318	10	0	0
Isle of Man	308	18	0	1
United Republic of Tanzania	300	10	0	0
Jamaica	288	7	31	0
Jersey	278	19	2	0
El Salvador	274	8	13	0
Viet Nam	270	0	0	0

Equatorial Guinea	258	1	46	0
Guernsey	245	11	0	1
Paraguay	223	9	3	0
Sudan	213	17	39	1
Congo	200	8	0	2
Faroe Islands	187	0	0	0
Rwanda	183	0	7	0
Gabon	176	3	4	0
Martinique	170	14	0	0
Guadeloupe	149	12	0	0
Myanmar	146	5	2	0
Brunei Darussalam	138	1	0	0
Guam	137	5	1	0
Maldives	137	0	21	0
Gibraltar	136	0	3	0
Madagascar	124	0	2	0
Cambodia	122	0	0	0
Ethiopia	122	3	5	0
Liberia	120	11	3	3
Trinidad and Tobago	115	8	0	0
French Guiana	109	1	0	0
Aruba	100	2	0	0
Bermuda	99	5	0	0
Togo	96	6	6	0
Cabo Verde	90	1	2	0
Sierra Leone	86	3	4	0
Zambia	84	3	0	0
Liechtenstein	83	1	1	0
Barbados	77	6	1	0
Uganda	75	0	0	0
Guyana	73	7	3	0
Sint Maarten	73	12	0	0
Bahamas	72	11	0	0
Haiti	72	6	0	1
Cayman Islands	70	1	4	0
Mozambique	70	0	5	0
Monaco	68	1	0	0
Libya	61	2	0	0
Benin	58	1	0	0
French Polynesia	57	0	0	0
Eswatini	56	1	16	0
United States Virgin Islands	55	3	1	0
Guinea-Bissau	52	0	0	0
Nepal	49	0	0	0
Chad	46	0	6	0
Syrian Arab Republic	42	3	0	0

Eritrea	39	0	0	0
Saint Martin	38	3	0	1
Mongolia	37	0	1	0
Malawi	33	3	0	0
Zimbabwe	31	4	2	0
Angola	25	2	0	0
Antigua and Barbuda	24	3	0	0
Timor-Leste	24	0	0	0
Botswana	22	1	0	0
Central African Republic	19	0	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Grenada	15	0	0	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Vincent and the Grenadines	14	0	0	0
Falkland Islands (Malvinas)	13	0	1	0
Burundi	12	1	0	0
Greenland	11	0	0	0
Montserrat	11	1	0	1
Nicaragua	11	3	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Gambia	10	1	0	0
Suriname	10	1	0	0
Holy See	9	0	0	0
Papua New Guinea	8	0	0	0
São Tomé and Príncipe	8	0	0	0
Bhutan	7	0	0	0
Mauritania	7	1	0	0
British Virgin Islands	6	1	1	0
Saint Barthélemy	6	0	0	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
South Sudan	5	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,798,093</b>	<b>193,629</b>	<b>84,883</b>	<b>6,003</b>



**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #100 Novel Coronavirus (COVID-19)  
**Date:** Tuesday, 28 April 2020 6:56:37 PM  
**Attachments:** [2020-04-28 NIR Health SitRep v100 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 28 April 2020, there have been 6,731 laboratory confirmed cases of COVID-19 in Australia, including 84 deaths.
- Since yesterday's situation report, an additional 11 cases and 1 new death, have been reported in Australia.
- To date, more than 530,600 tests have been conducted across Australia.
- The total number of cases reported over the last 7 days was 86, which is down from the 245 reported in the week prior. These numbers indicate a steady decline over the last fortnight.
- 2.44 million people have downloaded and registered for the COVIDSafe app as at 1230hrs today.

#### Situation Overseas

- As at 1500 hrs 28 April 2020, a total of 3,041,550 cases of COVID-19 have been reported globally, including 211,159 deaths.
- Singapore has reported 14,423 cases and 14 deaths, with 12,183 (84% of all cases) being migrant worker dormitory residents.

The next Situation Report will be issued on 29 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [\[redacted\]](#) or [\[redacted\]](#) (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [\[redacted\]](#) by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <del>28</del> 1800 AEDT	<b>Version</b>	<i>100</i>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <del>29</del> 1800 AEST
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Graeme Barden, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>The Minister for Health, Chief Medical Officer and Chief Nursing and Midwifery Officer launched the contact tracing app, COVIDSafe on Sunday, 26 April 2020.               <ul style="list-style-type: none"> <li>The app is available for downloading from Google Play, and the App Store.</li> <li>Registrations opened on 26 April 2020, at 1800hrs and as at <i>1230hrs</i> today <i>2.44 million</i> people have downloaded and registered for the COVIDSafe app.</li> <li>Use of COVIDSafe is voluntary. You can install or delete COVIDSafe at any time.</li> <li>Contact data on your device will be automatically deleted from your device 21 days after contact occurs.</li> <li>No user should feel pressured to install or continue to use COVIDSafe, or to agree to upload contact data to the data store. This is prohibited under the Biosecurity Determination.</li> <li>All data will be deleted from the data store after the COVID-19 pandemic has concluded, as required by the Biosecurity Determination.</li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> </ul>

	<ul style="list-style-type: none"> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

<b>Overview</b>	<p><b>Domestic Situation (as at 1500 hrs, 28 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,731</b> cases of COVID-19, including <b>84</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>11</b> cases and <b>1</b> new death, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>86</b>, which is down from the <b>245</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).             <ul style="list-style-type: none"> <li><i>According to the NNDSS data, 1.8% of COVID-19 cases have been in children aged 5-17 years.</i></li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with <b>18%</b> of these cases requiring admission to an ICU (2.2% of confirmed cases).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is <b>80</b> years (range 42 to 96 years).</li> <li>61% were male and 39% were female.</li> <li>Where data was available regarding comorbidities, <b>92%</b> had one or more comorbidities and <b>71%</b> had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> <p><u>Testing</u></p> <ul style="list-style-type: none"> <li>To date, more than <b>530,600</b> tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.3% and the positivity in the past week was 0.1%.</li> </ul> </li> </ul> <p><u>Source of infection</u></p> <ul style="list-style-type: none"> <li>To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).</li> </ul>
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- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - To date, approximately 800 cases of COVID-19 cases associated with the Ruby Princess cruise ship, including 190 crew (44 crew members are being managed onshore in NSW). Additionally, there have been a number of cases linked to previously confirmed passengers. The Ruby Princess departed Australia on 23 April 2020.
  - Tasmania is reporting an outbreak in North-West hospitals of at least **125** cases, including 78 staff members (as of 27 April 2020).
  - NSW Health is reporting **54** cases (**20** staff and **31** residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of 27 April 2020. There have also been **at least 7** deaths associated with this outbreak.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 19 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

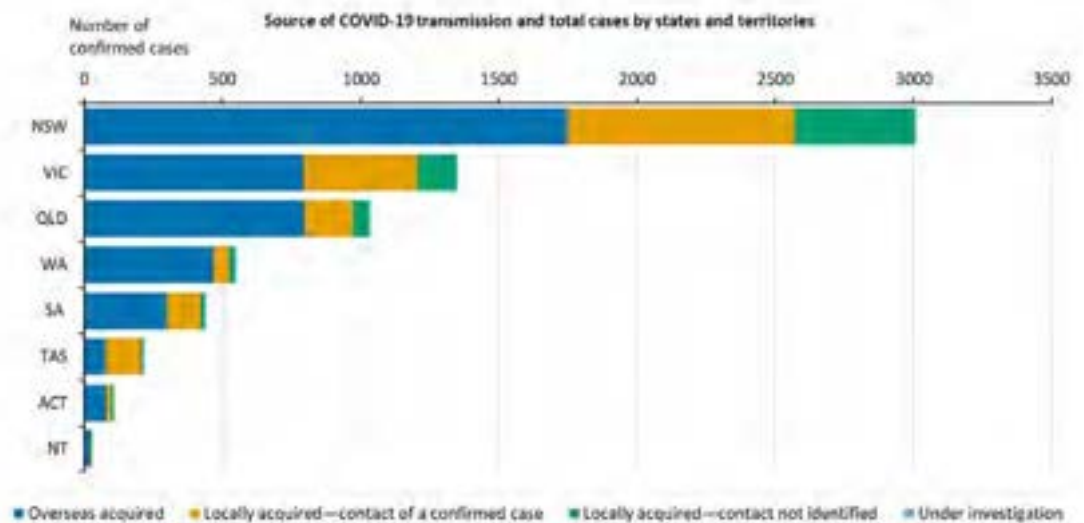
**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 28 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,288	82	1,747	24	798	298	77	794	468
Locally acquired - contact of confirmed case and/or in a known cluster	1,741	17	824	2	173	124	131	414	56
Locally acquired - contact not identified	571	1	366	0	42	7	0	139	16
Locally acquired - contact not identified, but case had interstate travel	109	6	68	1	18	6	4	0	6
Under investigation	22	0	4	0	2	3	5	4	4
<b>Total cases</b>	<b>6,731</b>	<b>106</b>	<b>3,009</b>	<b>27</b>	<b>1,033</b>	<b>438</b>	<b>217</b>	<b>1,351</b>	<b>550</b>
<b>Deaths (of total)</b>	<b>84</b>	<b>3</b>	<b>35</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>11</b>	<b>17</b>	<b>8</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	11 (0%)	0 (0%)	5 (0%)	0 (0%)	0 (0%)	0 (0%)	3 (1%)	2 (0%)	1 (0%)
Change in the last 72hrs before (%change)	36 (1%)	0 (0%)	15 (1%)	0 (0%)	7 (1%)	0 (0%)	8 (4%)	5 (0%)	1 (0%)
Average daily increase over the past three days (compound)	0.2%	0.0%	0.2%	0.0%	0.2%	0.0%	1.3%	0.1%	0.1%
Increase over the past week	86	2	40	0	9	1	15	15	4

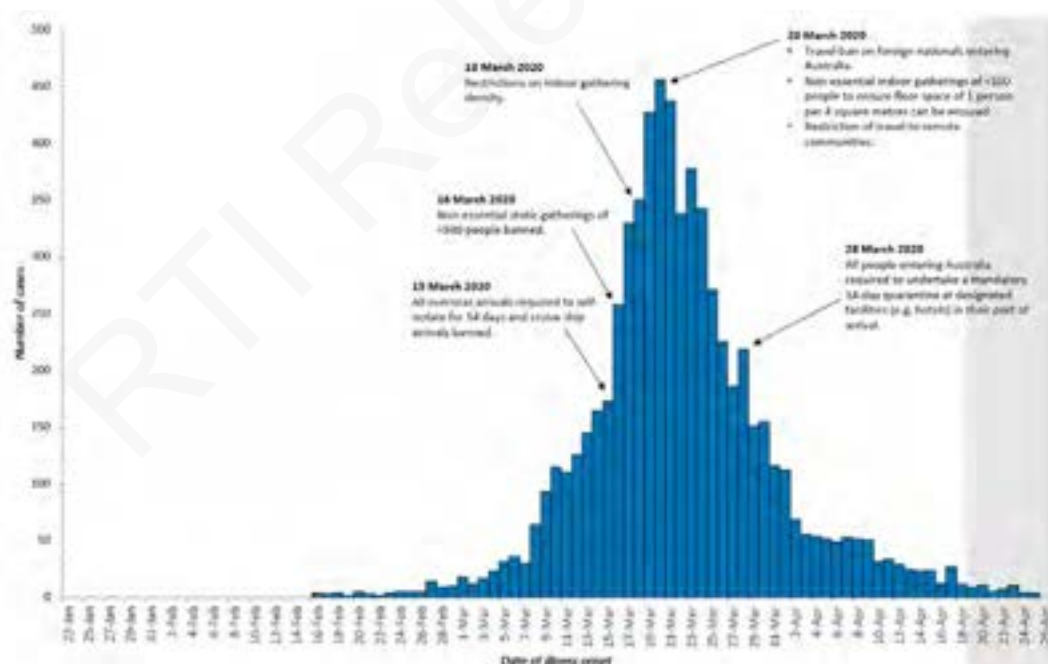
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

^ On 23 April 2020, NSW revised their case count down by 1, to exclude a case who after further testing was not considered to meet the case definition.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 28 April 2020**

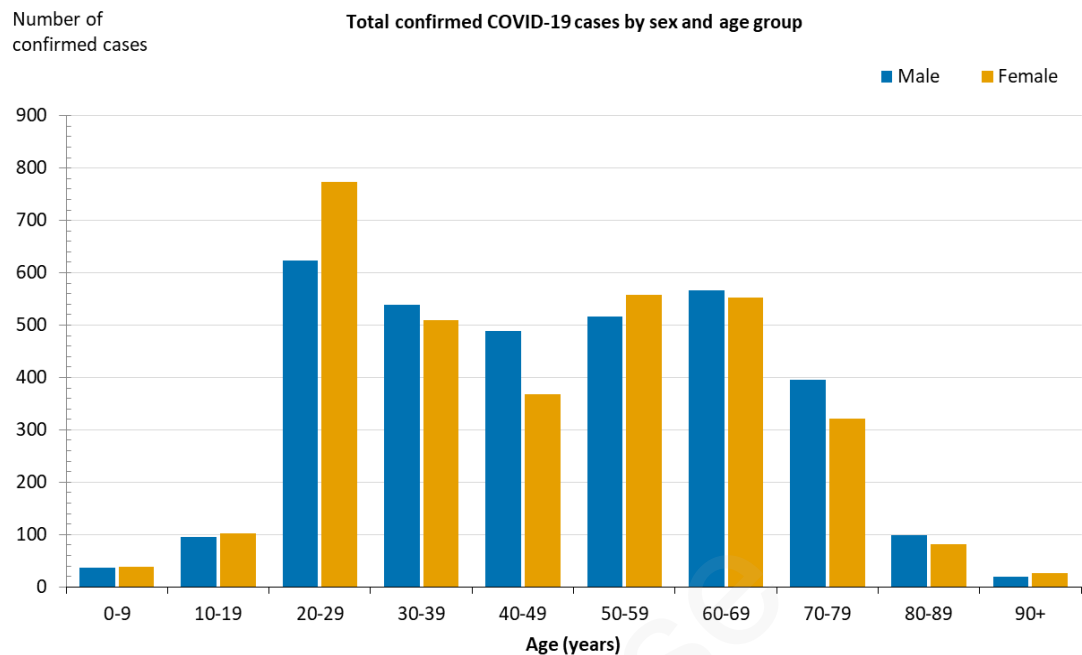


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 28 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 28 April 2020**

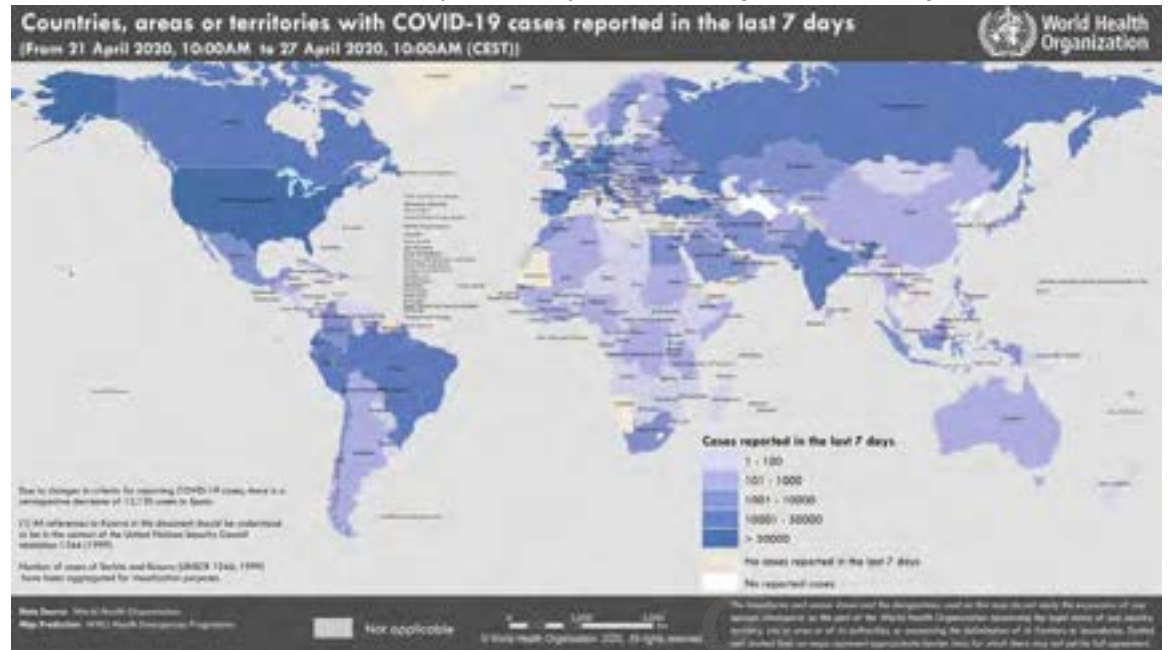


**International Situation (as at 1500 hrs, 28 April 2020)**

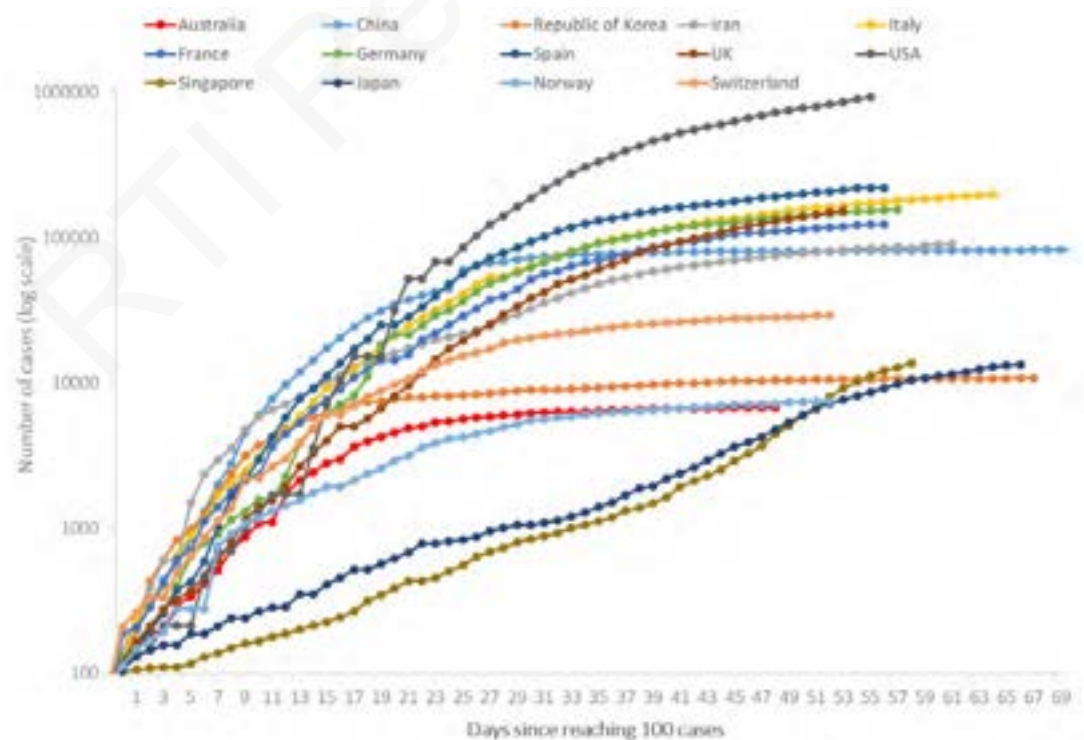
- A total of **3,041,550** cases of COVID-19 have been reported globally, including **211,159** deaths (Johns Hopkins, last updated 1430 hrs AEST).
  - A total of **69,911** new cases, including **4,617** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins).
- The majority of deaths are from the United States of America (24%), Italy (**13%**), Spain (12%) and France (12%) (WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.9% (WHO Situation Report). The risk of death reportedly increases with age.
- On **27 April 2020**, Singapore reported **799** new cases of COVID-19. Among these new cases, **764 (96%)** were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing, with most being reported as mild cases. In total, Singapore has reported **14,423** cases and **14** deaths, with **12,183** (84% of all cases) being migrant worker dormitory residents.
- Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **765** deaths and a case fatality rate of 8.4%. The government has reported **9,096** cases.



**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 98 of 27 April 2020**

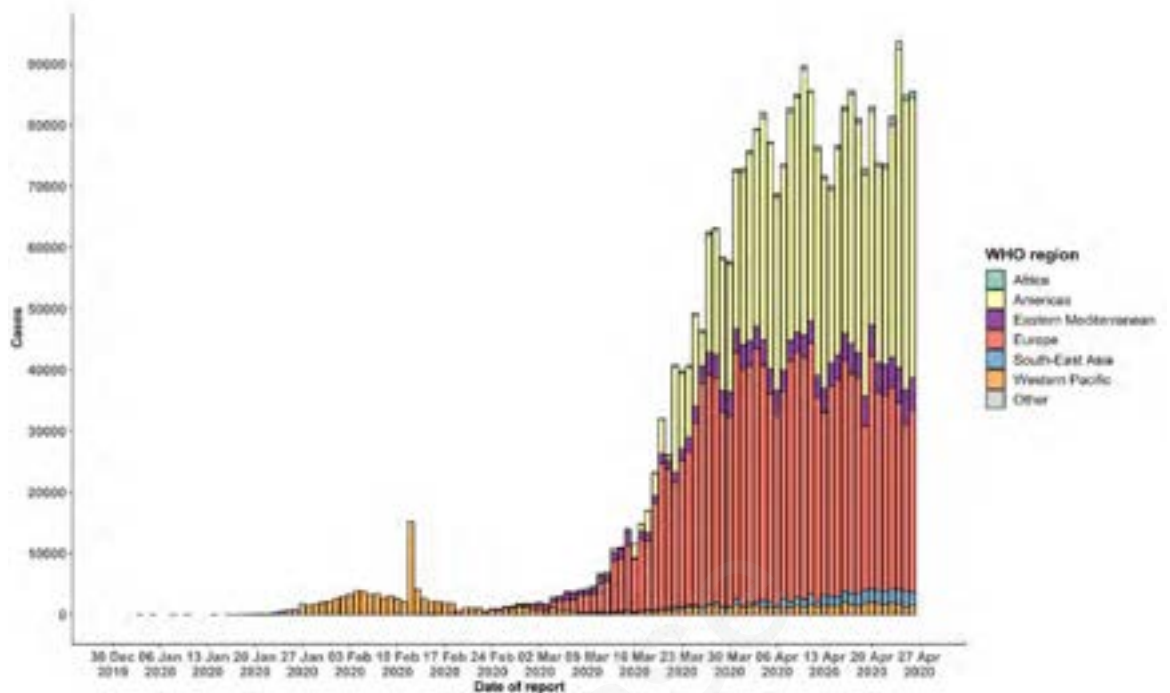


**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 28 April 2020**





**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 98 of 27 April 2020**



#### International response

##### WHO

- On 27 April 2020, the WHO Director-General announced:
  - this week is World Immunization Week;
  - WHO has shipped millions of items of personal protective equipment to 105 countries, and lab supplies to more than 127 countries; and
  - WHO will launch its second Strategic Preparedness and Response Plan, with an estimate of the resources needed for the next stage of the global response, later this week.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li><i>There are seven public health emergency directions in force under the Public Health Act 1997.</i></li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>

QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li>COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (3,041,550) last updated 1430 hrs AEST, checked at 1500 hours.

Source: International cases based on WHO Situation Report 98, 27 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,341	4,643	3	1
Hong Kong SAR	1,038	4	0	0
Taiwan	429	6	0	0
Macau SAR	45	0	0	0
United States of America	931,698	47,980	32,417	1,776
Spain	207,634	23,190	-12,130	666
Italy	197,675	26,644	2,324	260
Germany	155,193	5,750	1,018	110
The United Kingdom	152,844	20,732	4,463	413
France	123,279	22,821	404	241
Turkey	110,130	2,805	2,357	99
Iran (Islamic Republic of)	90,481	5,710	1,153	60
Russian Federation	87,147	794	12,559	113
Brazil	58,509	4,016	5,514	346
Belgium	46,134	7,094	809	177
Canada	45,778	2,489	1,425	139

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Netherlands	37,845	4,475	655	66
Switzerland	28,978	1,336	0	0
India	27,892	872	1,396	48
Peru	25,331	700	3,683	66
Portugal	23,864	903	472	23
Ecuador	22,719	576	0	0
Ireland	19,262	1,087	701	24
Sweden	18,640	2,194	463	2
Saudi Arabia	17,522	139	1,223	3
Israel	15,398	199	0	0
Austria	15,189	542	55	6
Mexico	13,842	1,305	970	84
Singapore	13,624	12	931	0
Japan	13,385	351	203	3
Chile	13,331	189	473	8
Pakistan	13,328	281	605	12
Poland	11,617	535	344	11
Romania	11,036	608	401	33
Republic of Korea	10,738	243	10	1
Belarus	10,463	72	873	5
United Arab Emirates	10,349	76	536	5
Qatar	10,287	10	929	0
Ukraine	9,009	220	392	11
Indonesia	8,882	743	275	23
Denmark	8,575	422	130	4
Serbia	8,042	156	263	5
Philippines	7,579	501	285	7
Norway	7,505	193	38	0
Czechia	7,404	221	52	3
Dominican Republic	6,135	278	209	5
Malaysia	5,780	98	38	0
Panama	5,538	159	200	5
Bangladesh	5,416	145	418	5
Colombia	5,142	233	261	8
Finland	4,576	190	101	4
South Africa	4,546	87	185	1
Egypt	4,534	317	215	10
Morocco	4,065	161	168	2
Argentina	3,838	179	137	0
Luxembourg	3,723	88	12	3
Republic of Moldova	3,408	96	104	2
Algeria	3,382	425	126	6
Kuwait	3,075	20	183	1
Thailand	2,931	52	9	1

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Kazakhstan	2,791	25	190	0
Bahrain	2,647	8	58	0
Hungary	2,583	280	83	8
Greece	2,506	130	0	0
Oman	2,049	10	51	0
Croatia	2,030	55	14	1
Uzbekistan	1,887	8	22	0
Iraq	1,820	87	57	1
Armenia	1,808	29	62	1
Iceland	1,792	10	2	0
Azerbaijan	1,645	21	28	0
Estonia	1,643	49	8	3
Cameroon	1,621	56	103	3
Ghana	1,550	11	271	1
Afghanistan	1,531	50	68	1
Bosnia and Herzegovina	1,516	58	31	2
Lithuania	1,449	41	11	0
Slovenia	1,407	82	19	1
North Macedonia	1,386	61	19	2
Slovakia	1,379	18	6	1
Puerto Rico	1,371	53	95	0
Cuba	1,369	54	32	3
Bulgaria	1,300	56	53	1
Nigeria	1,273	40	91	5
Côte d'Ivoire	1,150	14	39	0
New Zealand	1,122	19	1	1
Guinea	1,094	7	98	0
Djibouti	1,023	2	15	0
Tunisia	949	38	10	0
Bolivia (Plurinational State of)	866	46	59	2
Cyprus	817	17	7	0
Latvia	812	12	8	0
Kosovo	763	21	32	1
Andorra	740	40	2	0
Albania	726	28	14	1
International conveyance (Diamond Princess)	712	13	0	0
Lebanon	707	24	3	0
Niger	696	29	12	2
Kyrgyzstan	695	8	13	0
Costa Rica	693	6	6	0
Senegal	671	9	57	2
Burkina Faso	632	42	3	1
Honduras	627	59	36	4

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Uruguay	596	14	33	2
San Marino	538	41	25	1
Sri Lanka	523	7	63	0
Georgia	496	6	11	1
Guatemala	473	15	43	2
Democratic Republic of the Congo	459	28	17	0
Malta	448	4	0	0
Jordan	447	7	3	0
Somalia	436	23	46	5
Réunion	417	0	5	0
Mayotte	401	4	47	0
Mali	389	23	19	2
Kenya	355	14	12	0
occupied Palestinian territory	342	2	0	0
Mauritius	332	9	1	0
Venezuela (Bolivarian Republic of)	323	10	5	0
Montenegro	321	7	2	1
Isle of Man	308	18	0	0
Jamaica	305	7	17	0
United Republic of Tanzania	300	10	0	0
El Salvador	298	8	24	0
Jersey	280	19	2	0
Viet Nam	270	0	0	0
Equatorial Guinea	258	1	0	0
Guernsey	245	12	0	1
Sudan	237	21	24	4
Paraguay	228	9	5	0
Congo	200	8	0	0
Rwanda	191	0	8	0
Maldives	188	0	51	0
Faroe Islands	187	0	0	0
Gabon	176	3	0	0
Martinique	175	14	5	0
Guadeloupe	149	13	0	1
Myanmar	146	5	0	0
Gibraltar	141	0	5	0
Brunei Darussalam	138	1	0	0
Guam	137	5	0	0
Madagascar	128	0	4	0
Liberia	124	12	4	1
Ethiopia	123	3	1	0
Cambodia	122	0	0	0
Trinidad and Tobago	115	8	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Bermuda	109	5	10	0
French Guiana	109	1	0	0
Cabo Verde	106	1	16	0
Aruba	100	2	0	0
Togo	98	6	2	0
Sierra Leone	93	4	7	1
Zambia	88	3	4	0
Liechtenstein	83	1	0	0
Barbados	79	6	2	0
Bahamas	78	11	6	0
Mozambique	76	0	6	0
Uganda	75	0	0	0
Guyana	74	8	1	1
Sint Maarten	74	13	1	1
Haiti	72	6	0	0
Cayman Islands	70	1	0	0
Monaco	68	1	0	0
Benin	64	1	6	0
Libya	61	2	0	0
Eswatini	59	1	3	0
French Polynesia	57	0	0	0
United States Virgin Islands	55	3	0	0
Guinea-Bissau	53	1	1	1
Nepal	51	0	2	0
Chad	46	0	0	0
Syrian Arab Republic	42	3	0	0
Eritrea	39	0	0	0
Mongolia	38	0	1	0
Saint Martin	38	3	0	0
Malawi	34	3	1	0
Zimbabwe	31	4	0	0
Angola	26	2	1	0
Antigua and Barbuda	24	3	0	0
Timor-Leste	24	0	0	0
Botswana	22	1	0	0
Central African Republic	19	0	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
Grenada	18	0	3	0
New Caledonia	18	0	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Burundi	15	1	3	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Curaçao	14	1	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Saint Vincent and the Grenadines	14	0	0	0
Falkland Islands (Malvinas)	13	0	0	0
Nicaragua	13	3	2	0
Greenland	11	0	0	0
Montserrat	11	1	0	0
Seychelles	11	0	0	0
Turks and Caicos Islands	11	1	0	0
Gambia	10	1	0	0
Suriname	10	1	0	0
Holy See	9	0	0	0
Papua New Guinea	8	0	0	0
São Tomé and Príncipe	8	0	0	0
Bhutan	7	0	0	0
Mauritania	7	1	0	0
British Virgin Islands	6	1	0	0
Saint Barthélemy	6	0	0	0
South Sudan	6	0	1	0
Bonaire, Sint Eustatius and Saba	5	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,871,483</b>	<b>198,585</b>	<b>73,390</b>	<b>4,980</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #101 Novel Coronavirus (COVID-19)  
**Date:** Wednesday, 29 April 2020 7:02:40 PM  
**Attachments:** [2020-04-29 NIR Health SitRep v101 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 29 April 2020, there have been 6,746 laboratory confirmed cases of COVID-19 in Australia, including 89 deaths.
- There were 19 new cases reported over the last 24 hours.
- To date, more than 544,000 tests have been conducted across Australia.
- The total number of cases reported over the last seven days was 97, which is down from the 202 reported in the week prior. These numbers indicate a steady decline over the last fortnight.
- 2.8 million people have downloaded and registered for the COVIDSafe app as at 1200hrs today.

#### Situation Overseas

- As at 1500 hrs 29 April 2020, a total of 3,116,992 cases of COVID-19 have been reported globally, including 217,182 deaths.
- Of the confirmed cases reported globally, the case fatality rate is approximately 6.9%.

The next Situation Report will be issued on 30 April 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [\[redacted\]](#) or [\[redacted\]](#) (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [\[redacted\]](#) by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04- <del>29</del> 1800 AEDT	<b>Version</b>	<i>101</i>
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-04- <del>30</del> 1800 AEST
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 29 April 2020, the Minister for Health announced a partnership between the Australian Government, the Minderoo Foundation and private pathology providers, which secures an additional 10 million COVID-19 test kits and pathology equipment to be installed across Australia.             <ul style="list-style-type: none"> <li>Test kits and equipment will be supplied by the Beijing Genomic Institute (BGI), Thermo Fisher and Tecan.</li> <li>The Government will enter into supply contracts with private pathology providers, including Sonic Healthcare and Healix, for the 13 BGI and 14 Tecan laboratory systems.</li> </ul> </li> <li>The Minister for Health, Chief Medical Officer and Chief Nursing and Midwifery Officer launched the contact tracing app, COVIDSafe on Sunday, 26 April 2020.             <ul style="list-style-type: none"> <li>The app is available for downloading from Google Play, and the App Store.</li> <li>Registrations opened at 1800hrs on 26 April 2020, and as at <i>1200</i> hrs today <i>2.8</i> million people have downloaded and registered for the COVIDSafe app.</li> <li>Use of COVIDSafe is voluntary. You can install or delete COVIDSafe at any time.</li> <li>Contact data on your device will be automatically deleted from your device 21 days after contact occurs.</li> <li>No user should feel pressured to install or continue to use COVIDSafe, or to agree to upload contact data to the data store. This is prohibited under the Biosecurity Determination.</li> <li>All data will be deleted from the data store after the COVID-19 pandemic has concluded, as required by the Biosecurity Determination.</li> </ul> </li> </ul>
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Response	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.</li> <li>The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>
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## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 29 April 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,746</b> cases of COVID-19, including <b>89</b> deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>19</b> cases and <b>5</b> new deaths, have been reported in Australia.</li> <li>The total number of cases reported over the last 7 days was <b>97</b>, which is down from the <b>202</b> reported in the week prior. These numbers indicate a steady decline over the last fortnight.</li> </ul> </li> <li>The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).             <ul style="list-style-type: none"> <li>According to the NNDSS data, <b>1.9%</b> of COVID-19 cases have been in children aged 5-17 years.</li> </ul> </li> <li>According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with 18% of these cases requiring admission to an ICU (2.2% of confirmed cases).</li> <li>Of the deaths so far reported:             <ul style="list-style-type: none"> <li>The median age is 80 years (range 42 to 96 years).</li> <li><b>58%</b> were male and <b>42%</b> were female.</li> <li>Where data was available regarding comorbidities, <b>93%</b> had one or more comorbidities and <b>70%</b> had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul>
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Testing

- To date, more than **544,000** tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.
  - Cumulative per cent positive was **1.2%** and the positivity in the past week was 0.1%.

Source of infection

- To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - Tasmania is reporting an outbreak in North-West hospitals of at least 125 cases, including 78 staff members (as of 27 April 2020).
  - NSW Health is reporting **56** cases (**22** staff and **34** residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of **28** April 2020. There have also been at least **12** deaths associated with this outbreak.

Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 19 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 29 April 2020)**

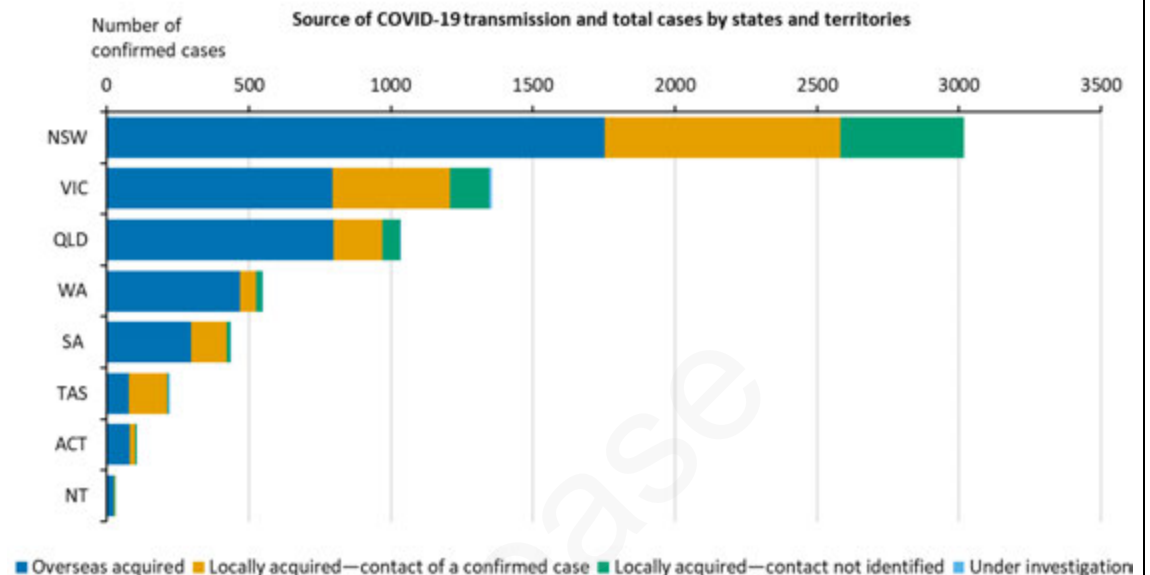
Confirmed COVID-19 cases	Australia	ACT	NSW <sup>a</sup>	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<b>4,294</b>	82	<b>1,752</b>	24	798	298	77	794	<b>469</b>
Locally acquired - contact of confirmed case and/or in a known cluster	<b>1,751</b>	17	<b>830</b>	2	173	124	<b>135</b>	414	56
Locally acquired - contact not identified	<b>571</b>	1	366	0	42	7	0	139	16
Locally acquired - contact not identified, but case had interstate travel	<b>109</b>	6	68	1	18	6	4	0	6
Under investigation	<b>21</b>	0	<b>0</b>	0	<b>3</b>	3	<b>4</b>	<b>7</b>	4
<b>Total cases</b>	<b>6,746</b>	<b>106</b>	<b>3,016</b>	<b>27</b>	<b>1,034</b>	<b>438</b>	<b>220</b>	<b>1,354</b>	<b>551</b>
<b>Deaths (of total)</b>	<b>89</b>	3	<b>39</b>	0	6	4	11	<b>18</b>	8
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<b>19</b> (0%)	0 (0%)	<b>11</b> (0%)	0 (0%)	<b>1</b> (0%)	0 (0%)	3 (1%)	<b>3</b> (0%)	1 (0%)
Change in the last 72hrs before (%change)	35 (1%)	0 (0%)	<b>14</b> (0%)	0 (0%)	<b>4</b> (0%)	0 (0%)	<b>10</b> (5%)	5 (0%)	<b>2</b> (0%)
Average daily increase over the past three days (compound)	<b>0.2%</b>	0.0%	<b>0.2%</b>	0.0%	<b>0.1%</b>	0.0%	<b>1.6%</b>	0.1%	0.1%
Increase over the past week	<b>97</b>	2	45	0	<b>10</b>	<b>0</b>	<b>17</b>	<b>18</b>	<b>5</b>

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on

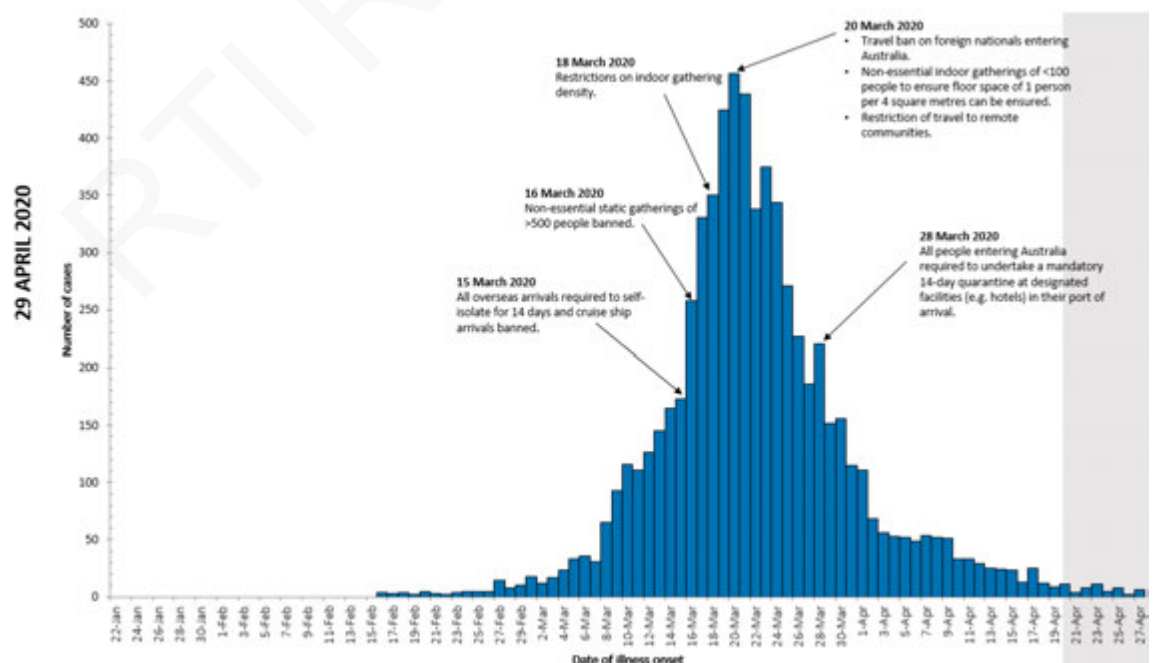
their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

^ On 28 April 2020, NSW revised their number of cases. Whilst their increase in cases in the past 24 hours was 11, there were 4 people *previously reported* that were subsequently excluded after further testing. *This resulted in the cumulative total number of cases to decrease by 4.*

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 29 April 2020**

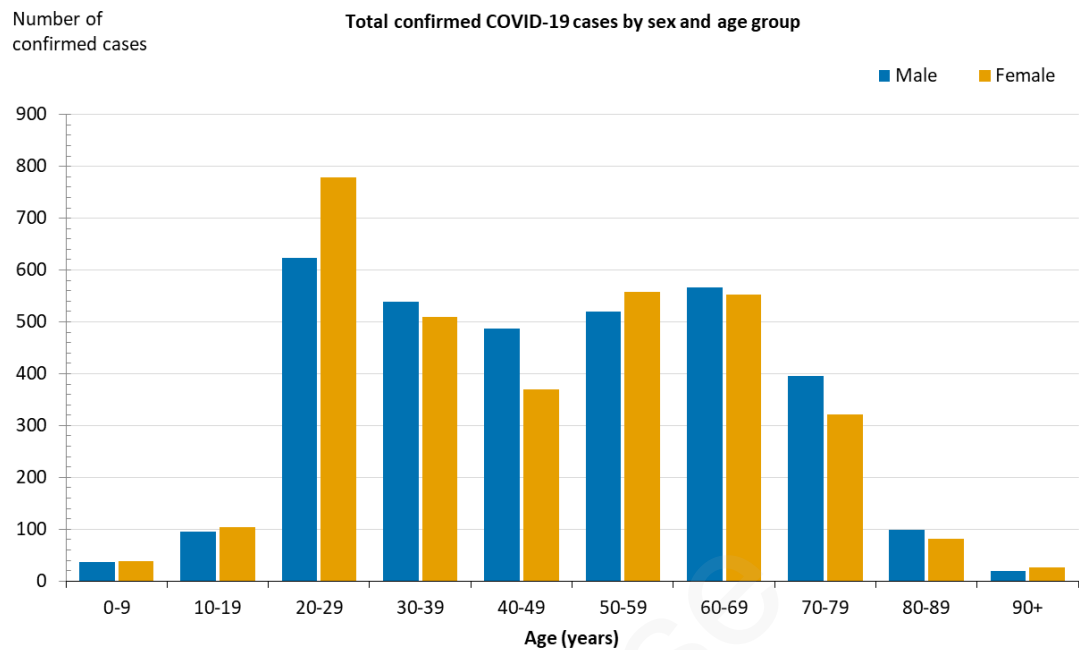


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 29 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 29 April 2020**

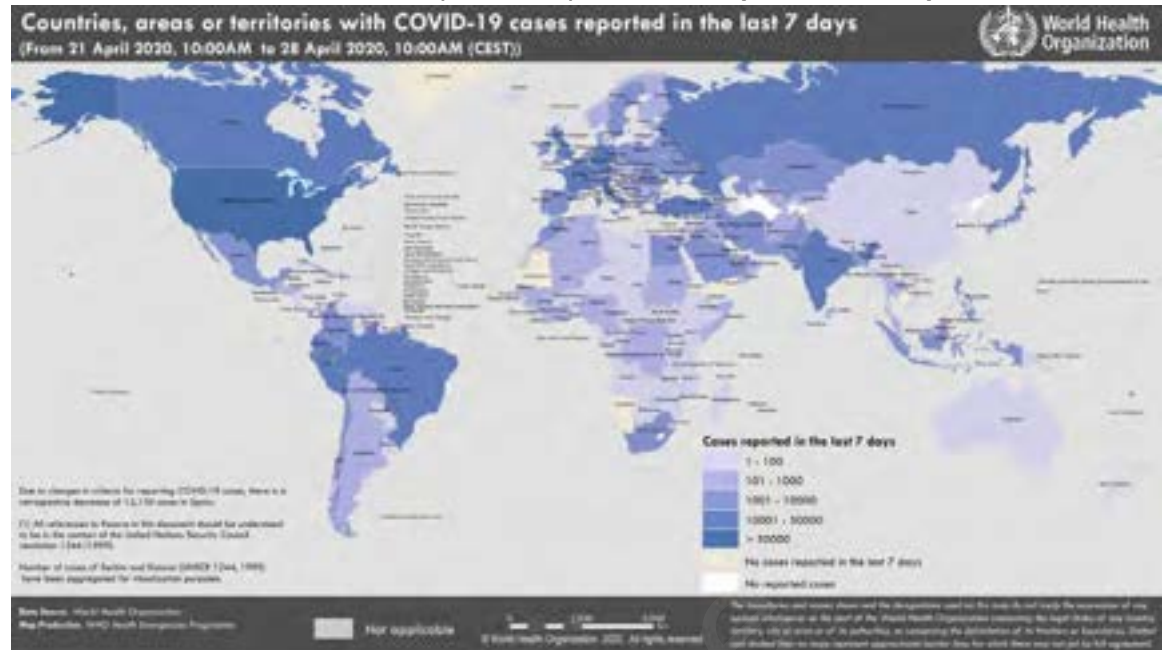


**International Situation (as at 1500 hrs, 29 April 2020)**

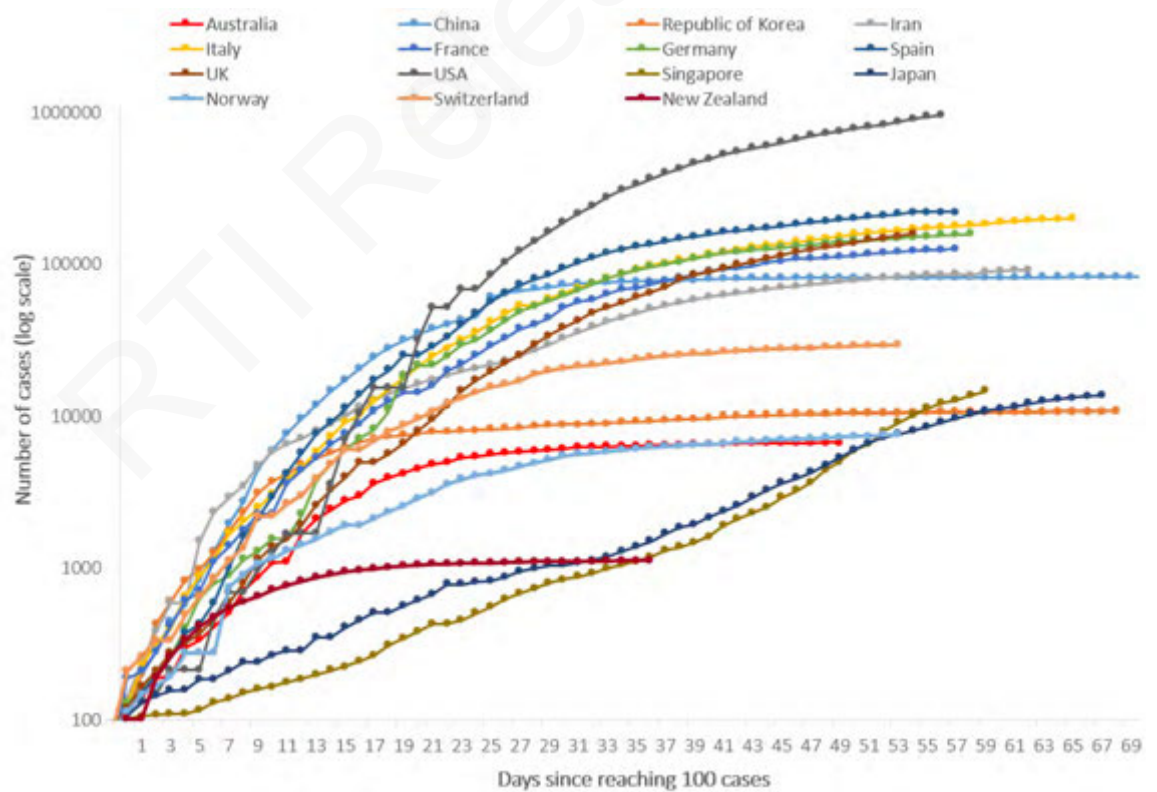
- A total of **3,116,992** cases of COVID-19 have been reported globally, including **217,183** deaths (Johns Hopkins).
  - A total of **75,442** new cases, including **6,024** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins).
- The majority of deaths are from the United States of America (24%), Italy (13%), France (**11%**) and Spain (**11%**) (WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.9% (WHO Situation Report). The risk of death reportedly increases with age.
- On **28 April 2020**, Singapore reported **528** new cases of COVID-19. Among these new cases, **511** (96%) were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing, with most being reported as mild cases. In total, Singapore has reported **14,951** cases and 14 deaths, with **85%** of all cases being migrant worker dormitory residents.
- As of **28 April 2020**, Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **773** deaths and a case fatality rate of **8.1%**, **compared to a case fatality rate in the Republic of Korea of 2.3%**. The government has reported **9,511** cases.



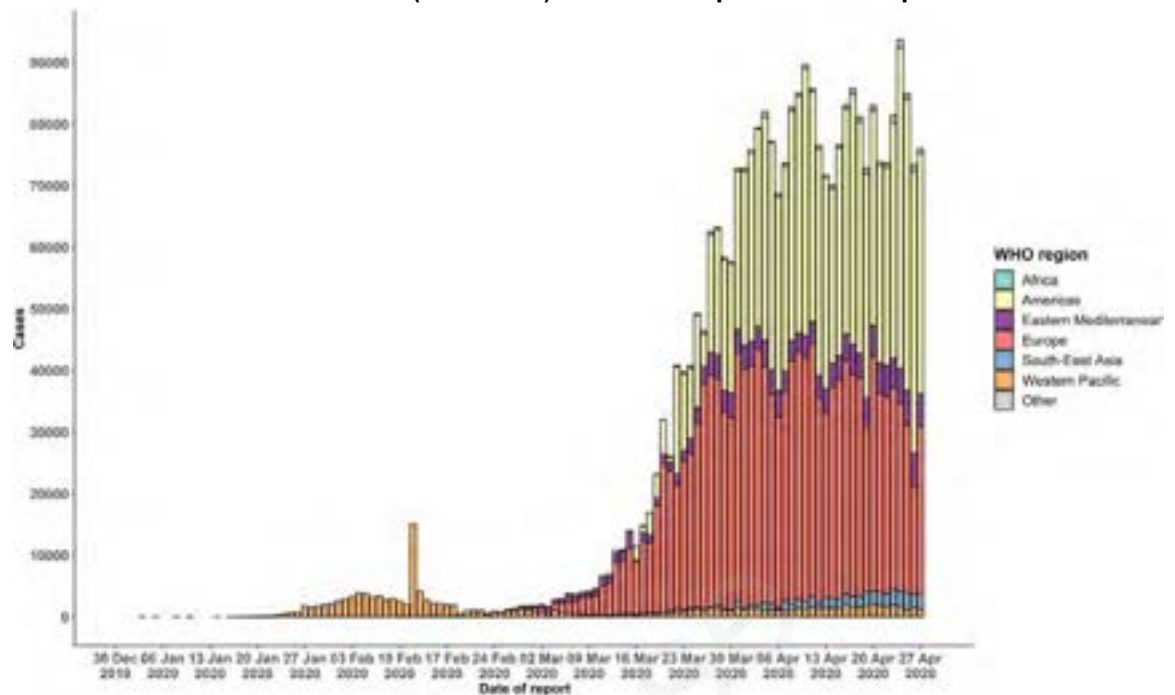
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 99 of 28 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 29 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 99 of 28 April 2020**



#### International response

##### WHO

- On 27 April 2020, the WHO Director-General announced:
  - this week is World Immunization Week;
  - WHO has shipped millions of items of personal protective equipment to 105 countries, and lab supplies to more than 127 countries; and
  - WHO will launch its second Strategic Preparedness and Response Plan, with an estimate of the resources needed for the next stage of the global response, later this week.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>• The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>• There are seven public health emergency directions in force under the Public Health Act 1997.</li> <li>• The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>• On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>• The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>• NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>• On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>• Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>• NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>• All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>

QLD Health	<ul style="list-style-type: none"> <li>• A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>• The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>• A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>• Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>• The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>• Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>• On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>• Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>• A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>• Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>• All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>• A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>• A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li>• COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

## Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

## Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

## Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (3,116,992), checked at 1500 hours.

Source: International cases based on WHO Situation Report 99, 28 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,347	4,643	6	0
Hong Kong SAR	1,038	4	0	0
Taiwan	429	6	0	0
Macau SAR	45	0	0	0
United States of America	960,916	49,170	29,218	1,190
Spain	209,465	23,190	1,831	0
Italy	199,414	26,977	1,739	333
The United Kingdom	157,153	21,092	4,309	360
Germany	156,337	5,913	1,144	163
France	127,008	23,261	3,729	440
Turkey	112,261	2,900	2,131	95
Russian Federation	93,558	867	6,411	73
Iran (Islamic Republic of)	91,472	5,806	991	96
Brazil	61,888	4,205	3,379	189
Canada	47,316	2,617	1,538	128
Belgium	46,687	7,207	553	113

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Netherlands	38,245	4,518	400	43
India	29,435	934	1,543	62
Switzerland	29,081	1,352	103	16
Peru	27,517	728	2,186	28
Portugal	24,027	928	163	25
Ecuador	23,240	663	521	87
Ireland	19,648	1,102	386	15
Sweden	18,926	2,274	286	80
Saudi Arabia	18,811	144	1,289	5
Israel	15,466	202	68	3
Austria	15,256	549	67	7
Mexico	14,677	1,351	835	46
Singapore	14,423	14	799	2
Pakistan	13,915	292	587	11
Chile	13,813	198	482	9
Japan	13,576	376	191	25
Belarus	12,208	79	1,745	7
Poland	11,902	562	285	27
Romania	11,339	631	303	23
Qatar	11,244	10	957	0
United Arab Emirates	10,839	82	490	6
Republic of Korea	10,752	244	14	1
Ukraine	9,410	239	401	19
Indonesia	9,096	765	214	22
Denmark	8,698	427	123	5
Serbia	8,275	162	233	6
Philippines	7,777	511	198	10
Norway	7,533	193	28	0
Czechia	7,449	223	45	2
Dominican Republic	6,293	282	158	4
Bangladesh	5,913	152	497	7
Malaysia	5,820	99	40	1
Panama	5,779	165	241	6
Colombia	5,379	244	237	11
South Africa	4,793	90	247	3
Egypt	4,782	337	248	20
Finland	4,695	193	119	3
Morocco	4,120	162	55	1
Argentina	3,892	192	54	13
Luxembourg	3,729	88	6	0
Algeria	3,517	432	135	7
Republic of Moldova	3,481	103	73	7
Kuwait	3,288	22	213	2
Kazakhstan	2,982	25	191	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Thailand	2,938	54	7	2
Bahrain	2,723	8	76	0
Hungary	2,649	291	66	11
Greece	2,534	136	28	6
Oman	2,131	10	82	0
Croatia	2,039	59	9	4
Uzbekistan	1,924	8	37	0
Armenia	1,867	30	59	1
Iraq	1,847	88	27	1
Iceland	1,792	10	0	0
Afghanistan	1,703	60	172	10
Azerbaijan	1,678	22	33	1
Estonia	1,647	50	4	1
Cameroon	1,621	56	0	0
Bosnia and Herzegovina	1,564	60	48	2
Ghana	1,550	11	0	0
Lithuania	1,449	41	0	0
Slovenia	1,407	83	0	1
North Macedonia	1,399	65	13	4
Cuba	1,389	56	20	2
Puerto Rico	1,389	53	18	0
Slovakia	1,381	18	2	0
Bulgaria	1,363	58	63	2
Nigeria	1,337	40	64	0
Côte d'Ivoire	1,164	14	14	0
Guinea	1,163	7	69	0
New Zealand	1,124	19	2	0
Djibouti	1,035	2	12	0
Tunisia	967	39	18	1
Bolivia (Plurinational State of)	950	50	84	4
Cyprus	822	20	5	3
Latvia	818	13	6	1
Kosovo	780	22	17	1
Andorra	748	40	8	0
Albania	736	28	10	0
Senegal	735	9	64	0
International conveyance (Diamond Princess)	712	13	0	0
Lebanon	710	24	3	0
Kyrgyzstan	708	8	13	0
Niger	701	29	5	0
Costa Rica	695	6	2	0
Honduras	661	61	34	2
Burkina Faso	632	42	0	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Uruguay	606	15	10	1
San Marino	538	41	0	0
Sri Lanka	523	7	0	0
Georgia	511	6	15	0
Guatemala	500	15	27	0
Somalia	480	26	44	3
Democratic Republic of the Congo	471	30	12	2
Malta	450	4	2	0
Jordan	449	7	2	0
Mayotte	433	4	32	0
Réunion	418	0	1	0
Mali	408	23	19	0
Kenya	363	14	8	0
occupied Palestinian territory	342	2	0	0
Mauritius	334	9	2	0
Venezuela (Bolivarian Republic of)	325	10	2	0
El Salvador	323	8	25	0
Montenegro	321	7	0	0
Isle of Man	308	18	0	0
Jamaica	305	7	0	0
United Republic of Tanzania	300	10	0	0
Jersey	281	19	1	0
Sudan	275	22	38	1
Viet Nam	270	0	0	0
Equatorial Guinea	258	1	0	0
Guernsey	247	13	2	1
Paraguay	228	9	0	0
Maldives	214	0	26	0
Congo	207	8	7	0
Rwanda	207	0	16	0
Faroe Islands	187	0	0	0
Gabon	176	3	0	0
Martinique	175	14	0	0
Guadeloupe	149	10	0	0
Myanmar	146	5	0	0
Gibraltar	141	0	0	0
Brunei Darussalam	138	1	0	0
Guam	138	5	1	0
Liberia	133	16	9	4
Madagascar	128	0	0	0
Ethiopia	124	3	1	0
Cambodia	122	0	0	0
Trinidad and Tobago	116	8	1	0



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
French Guiana	111	1	2	0
Bermuda	109	6	0	1
Cabo Verde	106	1	0	0
Aruba	100	2	0	0
Sierra Leone	99	4	6	0
Togo	99	6	1	0
Zambia	89	3	1	0
Liechtenstein	83	1	0	0
Bahamas	80	11	2	0
Barbados	79	6	0	0
Uganda	79	0	4	0
Mozambique	76	0	0	0
Guyana	74	8	0	0
Haiti	74	6	2	0
Sint Maarten	74	13	0	0
Guinea-Bissau	73	1	20	0
Cayman Islands	70	1	0	0
Monaco	68	1	0	0
Eswatini	65	1	6	0
Benin	64	1	0	0
Libya	61	2	0	0
United States Virgin Islands	59	4	4	1
French Polynesia	58	0	1	0
Nepal	52	0	1	0
Chad	46	0	0	0
Syrian Arab Republic	43	3	1	0
Central African Republic	42	0	23	0
Eritrea	39	0	0	0
Mongolia	38	0	0	0
Saint Martin	38	3	0	0
Malawi	36	3	2	0
Zimbabwe	31	4	0	0
Angola	27	2	1	0
Antigua and Barbuda	24	3	0	0
Timor-Leste	24	0	0	0
Botswana	22	1	0	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
Grenada	18	0	0	0
New Caledonia	18	0	0	0
Curaçao	16	1	2	0
Dominica	16	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Namibia	16	0	0	0
Burundi	15	1	0	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Saint Vincent and the Grenadines	15	0	1	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Falkland Islands (Malvinas)	13	0	0	0
Nicaragua	13	3	0	0
Turks and Caicos Islands	12	1	1	0
Greenland	11	0	0	0
Montserrat	11	1	0	0
Seychelles	11	0	0	0
Gambia	10	1	0	0
Suriname	10	1	0	0
Holy See	9	0	0	0
Papua New Guinea	8	0	0	0
São Tomé and Príncipe	8	0	0	0
Bhutan	7	0	0	0
Mauritania	7	1	0	0
Bonaire, Sint Eustatius and Saba	6	0	1	0
British Virgin Islands	6	1	0	0
Saint Barthélemy	6	0	0	0
South Sudan	6	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>2,947,497</b>	<b>202,513</b>	<b>76,014</b>	<b>3,931</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #102 Novel Coronavirus (COVID-19)  
**Date:** Thursday, 30 April 2020 7:44:51 PM  
**Attachments:** [2020-04-30 NIR Health SitRep v102 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 30 April 2020, there have been 6,753 laboratory confirmed cases of COVID-19 in Australia, including 91 deaths.
- Since yesterday's situation report, an additional 10 newly confirmed cases and 2 new deaths, have been reported in Australia.
- The total number of newly confirmed cases reported over the last seven days was 92, which is down from the 193 reported in the week prior. These numbers indicate a steady decline over the last fortnight.
- To date, more than 563,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 30 April 2020, a total of 3,194,523 cases of COVID-19 have been reported globally, including 227,659 deaths.
- Of the confirmed cases reported globally, the case fatality rate is approximately 6.9%. The risk of death reportedly increases with age.

The next Situation Report will be issued on 1 May 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-04-30 1800 AEDT	<b>Version</b>	102
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-05-01 630 AEST
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>On 29 April 2020, the Minister for Health announced a partnership between the Australian Government, the Minderoo Foundation and private pathology providers, which secures an additional 10 million COVID-19 test kits and pathology equipment to be installed across Australia.               <ul style="list-style-type: none"> <li>Test kits and equipment will be supplied by the Beijing Genomic Institute (BGI), Thermo Fisher and Tecan.</li> <li>The Government will enter into supply contracts with private pathology providers, including Sonic Healthcare and Healix, for the 13 BGI and 14 Tecan laboratory systems.</li> </ul> </li> <li>The Government launched the contact tracing app, COVIDSafe on Sunday, 26 April 2020.               <ul style="list-style-type: none"> <li>The app is available for downloading from Google Play, and the App Store.</li> <li>Registrations opened at 1800hrs on 26 April 2020, and as at 1200 hrs <i>on 30 April 2020, more than 3.34</i> million people have downloaded and registered for the COVIDSafe app.</li> <li>Use of COVIDSafe is voluntary. You can install or delete COVIDSafe at any time.</li> <li>Contact data on your device will be automatically deleted from your device 21 days after contact occurs.</li> <li>No user should feel pressured to install or continue to use COVIDSafe, or to agree to upload contact data to the data store. This is prohibited under the Biosecurity Determination.</li> <li>All data will be deleted from the data store after the COVID-19 pandemic has concluded, as required by the Biosecurity Determination.</li> </ul> </li> </ul>
<b>Response</b>	<b>Travel advice and restrictions</b>

- On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.
- On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.
- From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.
- Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.
- On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.
- The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.

#### Emergency Response Plan for COVID-19

- On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.

#### Commonwealth emergency powers

- On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the risks COVID-19 poses to human health and the need to control its spread in Australia.
- The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.
- The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.
- The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).

## 1. Situation

### Overview

#### Domestic Situation (as at 1500 hrs, 30 April 2020)

- A total of **6,753** cases of COVID-19, including **91** deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **10 newly confirmed** cases and **2** new deaths, have been reported in Australia.
    - ***A total of 3 previously reported cases have been excluded from NSW and Qld. This has affected the calculated difference between the previously reported total case figure.***
  - The total number of **newly confirmed** cases reported over the last 7 days was **92**, which is down from the **193** reported in the week prior. These numbers indicate a steady decline over the last fortnight.
- The median age of COVID-19 cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: NNDSS data) (Figure 3).
  - According to the NNDSS data, **1.8%** of COVID-19 cases have been in children aged 5-17 years.
- According to the National Notifiable Diseases Surveillance System (NNDSS) data, approximately 12% of cases have been hospitalised during their course of illness, with **19%** of these cases requiring admission to an ICU (2.2% of confirmed cases).
- Of the deaths so far reported:
  - The median age is 80 years (range 42 to 96 years).
  - 58% were male and 42% were female.
  - Where data was available regarding comorbidities, 93% had one or more comorbidities and **69%** had two or more comorbidities. The three most commonly reported co-

morbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).

#### Testing

- To date, more than **563,000** tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.
  - Cumulative per cent positive was 1.2% and the positivity in the past week was 0.1%.

#### Source of infection

- To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - Tasmania is reporting an outbreak in North-West hospitals of at least 125 cases, including 78 staff members (as of 27 April 2020).
  - NSW Health is reporting 56 cases (22 staff and 34 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of **29** April 2020. There have also been 12 deaths associated with this outbreak.

#### Epidemiological Resources

- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence journal. The most recent report contains information on cases up to 19 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 30 April 2020)**

Confirmed COVID-19 cases	Australia	ACT	NSW <sup>^</sup>	NT	Qld <sup>#</sup>	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	4,296	82	1,752	24	799	298	77	795	469
Locally acquired - contact of confirmed case and/or in a known cluster	1,756	17	833	2	173	124	136	415	56
Locally acquired - contact not identified	569	1	362	0	43	7	0	140	16
Locally acquired - contact not identified, but case had interstate travel	109	6	68	1	18	6	4	0	6
Under investigation	23	0	1	0	0	3	4	11	4
<b>Total cases</b>	<b>6,753</b>	<b>106</b>	<b>3,016</b>	<b>27</b>	<b>1,033</b>	<b>438</b>	<b>221</b>	<b>1,361</b>	<b>551</b>
<b>Deaths (of total)</b>	<b>91</b>	<b>3</b>	<b>40</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>12</b>	<b>18</b>	<b>8</b>
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	10 (0%)	0 (0%)	2 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0%)	7 (1%)	0 (0%)
Change in the last 72hrs before (%change)	33 (0%)	0 (0%)	12 (0%)	0 (0%)	0 (0%)	0 (0%)	7 (3%)	12 (1%)	2 (0%)
Average daily increase over the past three days (compound)	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	1.1%	0.3%	0.1%
Increase over the past week	92	2	40	0	7	0	14	24	5

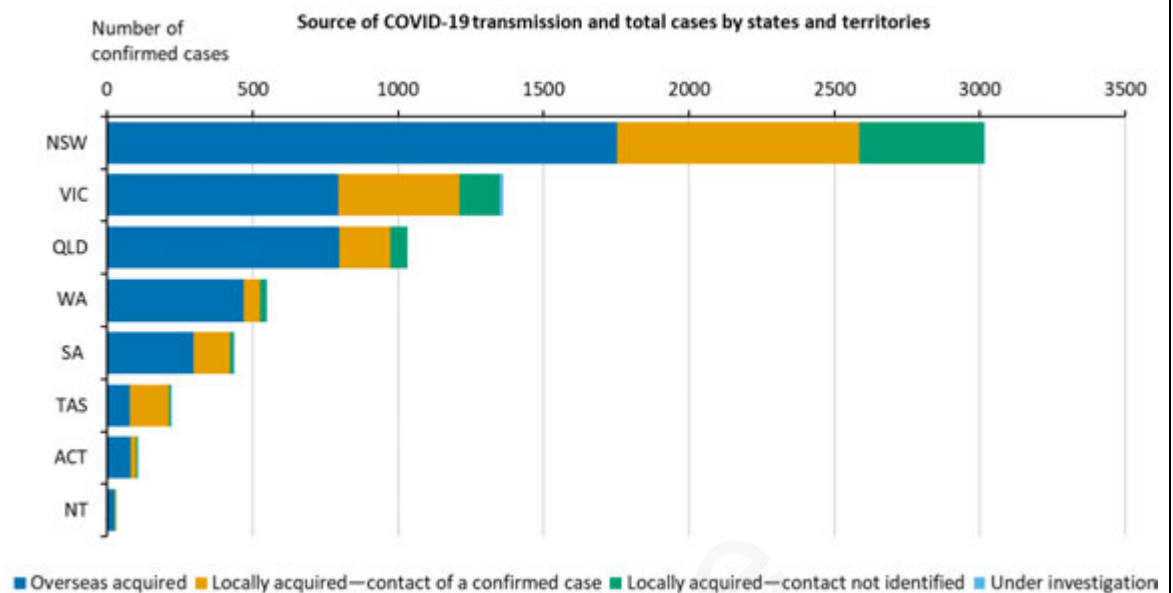
\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

<sup>^</sup> On 29 April 2020, NSW revised their number of cases. Whilst their increase in cases in the past 24 hours was 2, there were 2 people reported previously that were subsequently excluded after further testing. This resulted in no change to their calculated total number of cases.

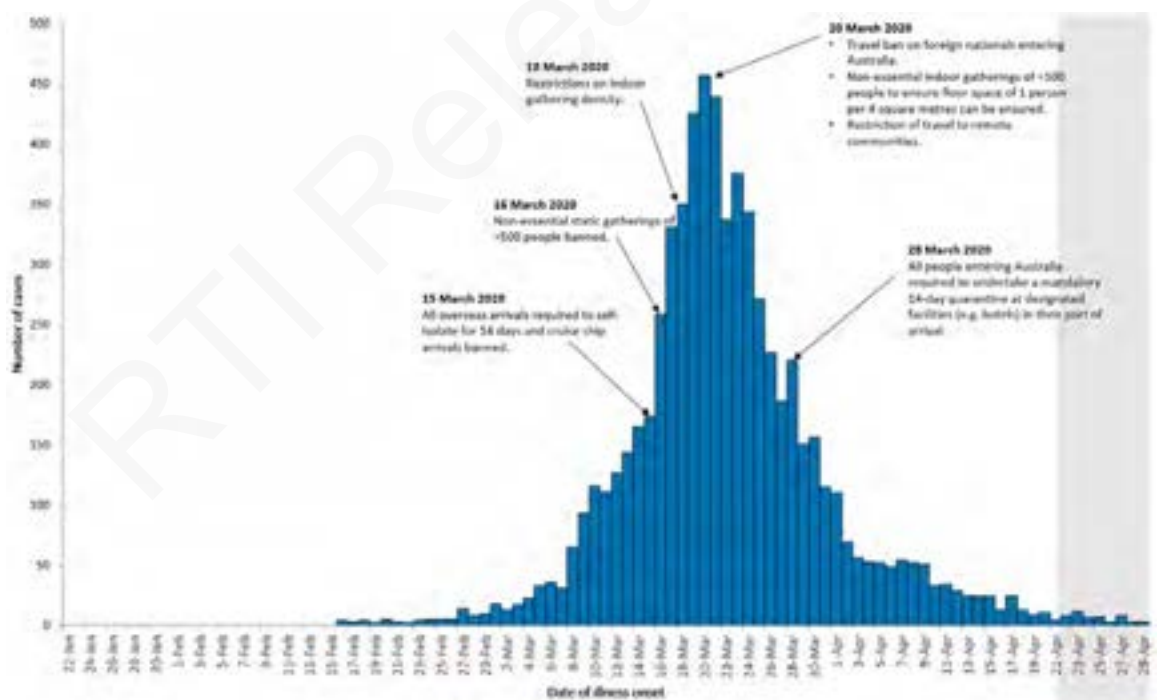
<sup>#</sup> On 30 April 2020, Queensland revised their number of cases, due to a cross-border case from WA. This has resulted in the cumulative total number of cases to decrease by 1.



**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 30 April 2020**

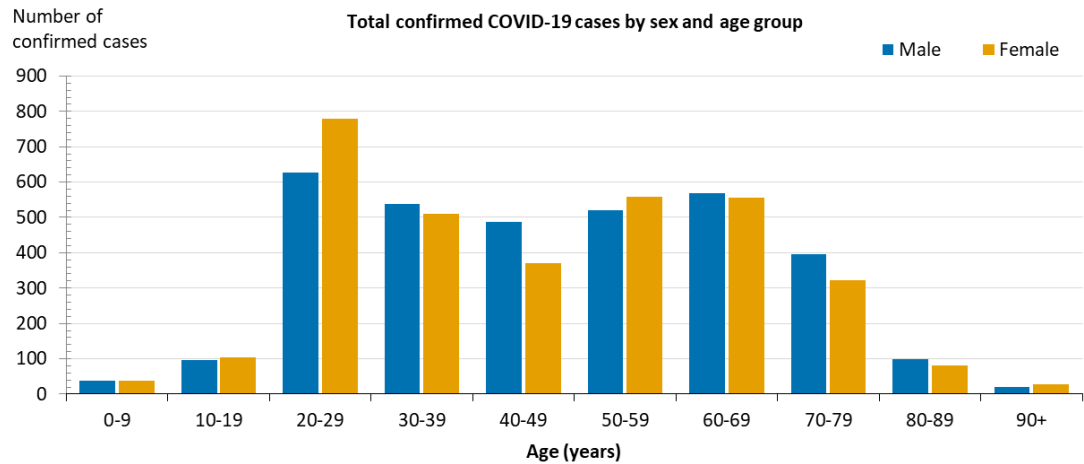


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 30 April 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 30 April 2020**



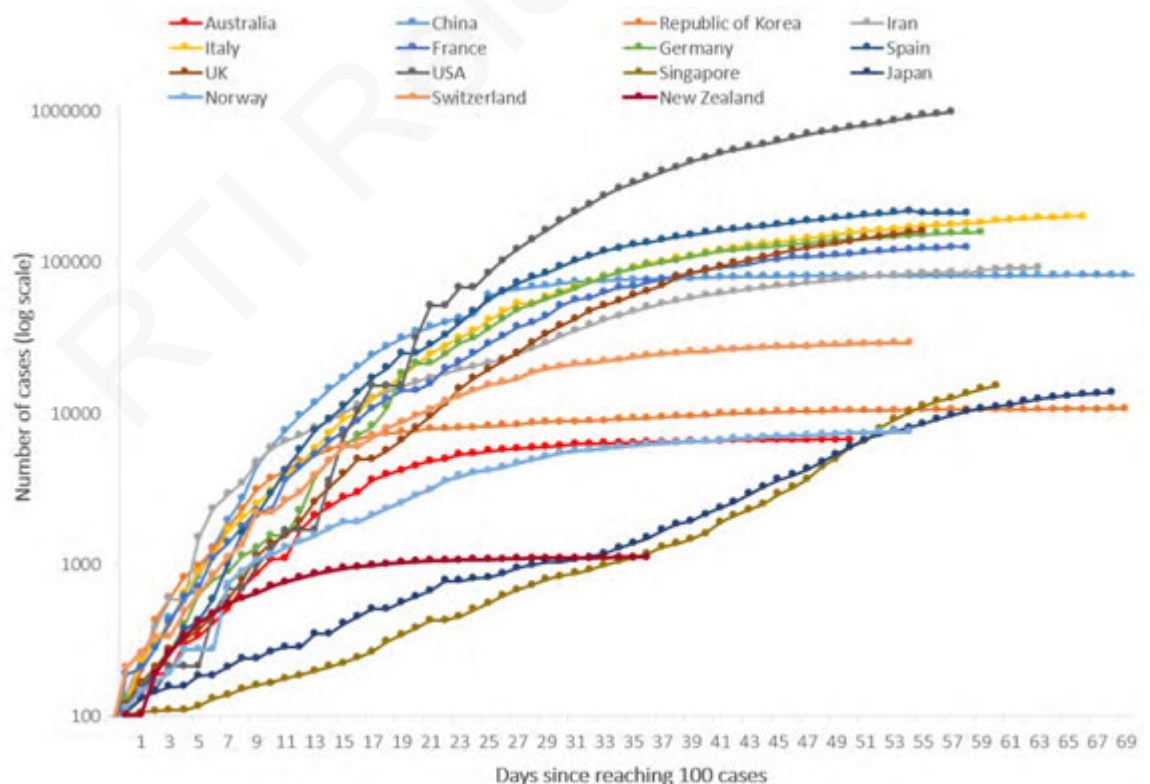
**International Situation (as at 1500 hrs, 30 April 2020)**

- A total of **3,194,523** cases of COVID-19 have been reported globally, including **227,659** deaths (Johns Hopkins).
  - A total of **77,531** new cases, including **10,746** deaths, of COVID-19 have been reported since yesterday's Situation Report (Johns Hopkins).
- The majority of deaths are from the United States of America (24%), Italy (13%), **Spain** (11%) and **France** (11%) (WHO Situation Report).
- Based on the number of reported cases globally, the case fatality rate is approximately 6.9% (WHO Situation Report). The risk of death reportedly increases with age.
- On **29 April 2020**, Singapore reported **690** new cases of COVID-19. Among these new cases, **660** (96%) were reported among residents of migrant worker dormitories. Singapore attributes the large number of new cases in migrant worker dormitories to extensive testing, with most being reported as mild cases. In total, Singapore has reported **15,641** cases and 14 deaths, with 85% of all cases being migrant worker dormitory residents.
- As of **29 April 2020**, Indonesia continues to be the country with the highest number of COVID-19 fatalities in Southeast Asia, reporting **784** deaths and a case fatality rate of **8.0%**, compared to a case fatality rate in the Republic of Korea of 2.3%. The government has reported **10,765** cases.

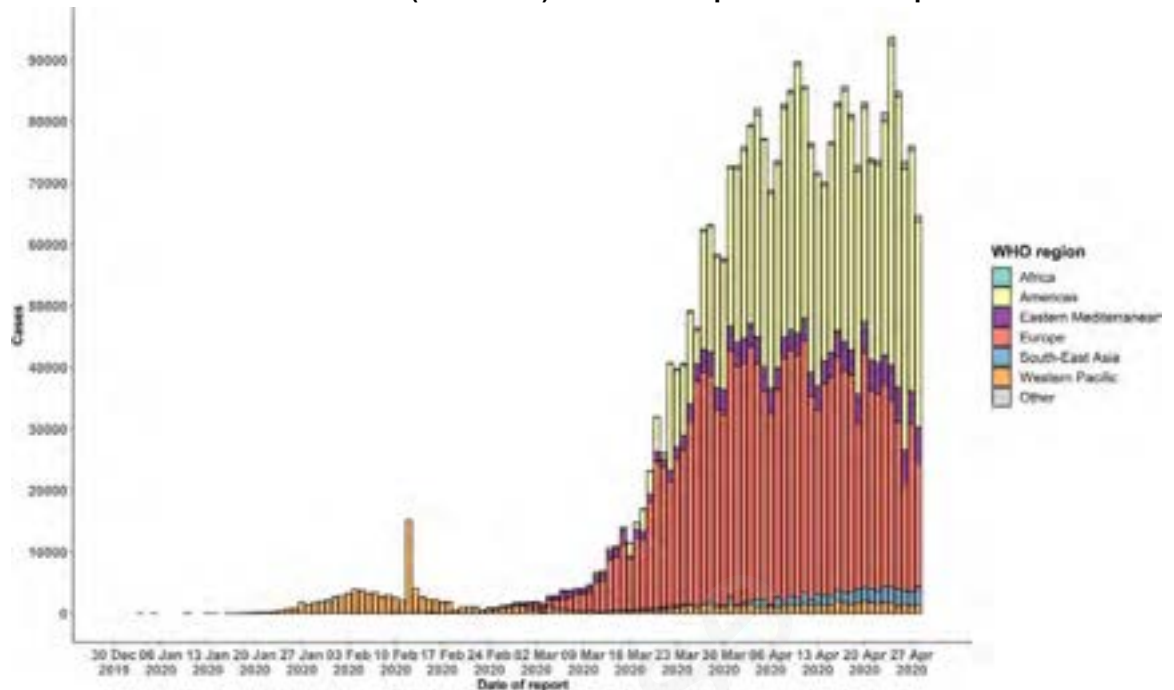
**Fig 4. Map of COVID-19 cases reported in the last 7 days, by country, area or territory, from the WHO Coronavirus 2019 (COVID-19) Situation Report 100 of 29 April 2020**



**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 30 April 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 100 of 29 April 2020**



#### International response

##### WHO

- On 28 April 2020,
  - the WHO Regional Office for Europe announced that WHO has called on countries to ensure that immunization is maintained wherever possible and surveillance for vaccine-preventable diseases remains uninterrupted during the pandemic.
  - WHO released a list of 'frequently asked questions: Breastfeeding and COVID-19' and guidance for health workers supporting mothers with confirmed or suspected COVID-19 to breastfeed.
- On 29 April 2020, the WHO Director-General outlined a timeline of the COVID-19 events and WHO's knowledge and actions taken. Of note was the reconvening of the Emergency Committee on 30 January 2020 and the WHO's declaration of a global public health emergency.
  - At the time there were 82 known cases and no deaths outside China.
  - 'WHO acted quickly and decisively to respond and to warn the world'.
  - 'WHO is committed to transparency and accountability.'
  - The Emergency Committee is scheduled to meet on 30 April 2020 to evaluate the evolution of the pandemic, and to advise on updated recommendations.

## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>There are seven public health emergency directions in force under the Public Health Act 1997.</li> <li>The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> </ul>

	<ul style="list-style-type: none"> <li>NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>The State Health Emergency Coordination Centre (SHECC) moved to “stand up” on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>
WA Health	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li>COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</li> </ul>

### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year



olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

## 4. Appendix 1

### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (3,194,523), checked at 1500 hours.

Source: International cases based on WHO Situation Report 100, 29 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,369	4,643	22	0
Hong Kong SAR	1,038	4	0	0
Taiwan	429	6	0	0
Macau SAR	45	0	0	0
United States of America	983,457	50,492	22,541	1,322
Spain	210,773	23,822	1,308	632
Italy	201,505	27,359	2,091	382
The United Kingdom	161,149	21,678	3,996	586
Germany	157,641	6,115	1,304	202
France	125,464	23,627	-1,544	366
Turkey	114,653	2,992	2,392	92
Russian Federation	99,399	972	5,841	105
Iran (Islamic Republic of)	92,584	5,877	1,112	71

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Brazil	66,501	4,543	4,613	338
Canada	49,014	2,766	1,698	149
Belgium	47,334	7,331	647	124
Netherlands	38,416	4,566	171	48
India	31,332	1,007	1,897	73
Switzerland	29,181	1,379	100	27
Peru	28,699	782	1,182	54
Portugal	24,322	948	295	20
Ecuador	24,258	871	1,018	208
Saudi Arabia	20,077	152	1,266	8
Ireland	19,877	1,159	229	57
Sweden	19,621	2,355	695	81
Israel	15,782	212	316	10
Mexico	15,529	1,434	852	83
Austria	15,314	569	58	20
Singapore	15,222	14	799	0
Pakistan	14,885	327	970	35
Chile	14,365	207	552	9
Japan	13,852	389	276	13
Poland	12,218	596	316	34
Belarus	12,208	79	0	0
Qatar	11,921	10	677	0
Romania	11,616	650	277	19
United Arab Emirates	11,380	89	541	7
Republic of Korea	10,761	246	9	2
Ukraine	9,866	250	456	11
Indonesia	9,511	773	415	8
Denmark	8,851	434	153	7
Serbia	8,497	168	222	6
Philippines	7,958	530	181	19
Norway	7,605	195	72	2
Czechia	7,504	227	55	4
Bangladesh	6,462	155	549	3
Dominican Republic	6,416	286	123	4
Panama	6,021	167	242	2
Malaysia	5,851	100	31	1
Colombia	5,597	253	218	9
Egypt	5,042	359	260	22
South Africa	4,996	93	203	3
Finland	4,740	199	45	6
Morocco	4,252	165	132	3
Argentina	4,019	197	127	5
Luxembourg	3,741	89	12	1
Algeria	3,649	437	132	5



Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Republic of Moldova	3,638	109	157	6
Kuwait	3,440	23	152	1
Kazakhstan	3,078	25	96	0
Thailand	2,947	54	9	0
Bahrain	2,811	8	88	0
Hungary	2,727	300	78	9
Greece	2,534	136	0	0
Oman	2,274	10	143	0
Croatia	2,047	63	8	4
Uzbekistan	1,955	8	31	0
Armenia	1,932	30	65	0
Iraq	1,928	90	81	2
Afghanistan	1,827	60	124	0
Iceland	1,795	10	3	0
Azerbaijan	1,717	22	39	0
Cameroon	1,705	58	84	2
Ghana	1,671	16	121	5
Estonia	1,660	50	13	0
Bosnia and Herzegovina	1,588	62	24	2
Lithuania	1,449	44	0	3
Cuba	1,437	58	48	2
North Macedonia	1,421	71	22	6
Slovenia	1,408	86	1	3
Puerto Rico	1,400	54	11	1
Bulgaria	1,399	58	36	0
Slovakia	1,384	20	3	2
Nigeria	1,337	40	0	0
Guinea	1,240	7	77	0
Côte d'Ivoire	1,183	14	19	0
New Zealand	1,126	19	2	0
Djibouti	1,072	2	37	0
Bolivia (Plurinational State of)	1,014	53	64	3
Tunisia	975	40	8	1
Cyprus	837	20	15	0
Latvia	836	13	18	0
Senegal	823	9	88	0
Kosovo	790	22	10	0
Albania	766	30	30	2
Andorra	753	41	5	1
Kyrgyzstan	729	8	21	0
Lebanon	717	24	7	0
International conveyance (Diamond Princess)	712	13	0	0
Niger	709	31	8	2

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Honduras	702	64	41	3
Costa Rica	697	6	2	0
Burkina Faso	638	42	6	0
Uruguay	620	15	14	0
Sri Lanka	619	7	96	0
San Marino	553	41	15	0
Guatemala	530	15	30	0
Somalia	528	28	48	2
Georgia	517	6	6	0
Democratic Republic of the Congo	491	30	20	0
Mayotte	460	4	27	0
Malta	450	4	0	0
Jordan	449	8	0	1
Mali	424	24	16	1
Réunion	418	0	0	0
Kenya	374	14	11	0
Jamaica	364	7	59	0
El Salvador	345	8	22	0
occupied Palestinian territory	343	2	1	0
Mauritius	332	10	0	1
Venezuela (Bolivarian Republic of)	329	10	4	0
Montenegro	321	7	0	0
Sudan	318	25	43	3
Equatorial Guinea	315	1	57	0
Isle of Man	308	20	0	2
United Republic of Tanzania	300	10	0	0
Jersey	283	19	2	0
Viet Nam	270	0	0	0
Guernsey	247	13	0	0
Maldives	245	0	31	0
Gabon	238	3	62	0
Paraguay	230	9	2	0
Rwanda	212	0	5	0
Congo	207	8	0	0
Faroe Islands	187	0	0	0
Martinique	175	14	0	0
Myanmar	150	5	4	0
Guadeloupe	149	11	0	1
Gibraltar	141	0	0	0
Liberia	141	16	8	0
Guam	140	5	2	0
Brunei Darussalam	138	1	0	0
Madagascar	128	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Ethiopia	126	3	2	0
French Guiana	124	1	13	0
Cambodia	122	0	0	0
Trinidad and Tobago	116	8	0	0
Cabo Verde	113	1	7	0
Bermuda	110	6	1	0
Sierra Leone	104	5	5	1
Aruba	100	2	0	0
Togo	99	6	0	0
Zambia	95	3	6	0
Liechtenstein	83	1	0	0
Bahamas	80	11	0	0
Barbados	80	6	1	0
Uganda	79	0	0	0
Haiti	76	6	2	0
Mozambique	76	0	0	0
Sint Maarten	75	13	1	0
Guyana	74	8	0	0
Guinea-Bissau	73	1	0	0
Eswatini	71	1	6	0
Cayman Islands	70	1	0	0
Monaco	68	1	0	0
Benin	64	1	0	0
Libya	61	2	0	0
United States Virgin Islands	59	4	0	0
French Polynesia	58	0	0	0
Nepal	54	0	2	0
Chad	52	2	6	2
Central African Republic	50	0	8	0
Syrian Arab Republic	43	3	0	0
Eritrea	39	0	0	0
Mongolia	38	0	0	0
Saint Martin	38	3	0	0
Malawi	36	3	0	0
South Sudan	34	0	28	0
Zimbabwe	32	4	1	0
Angola	27	2	0	0
Antigua and Barbuda	24	3	0	0
Timor-Leste	24	0	0	0
Botswana	23	1	1	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Grenada	18	0	0	0
New Caledonia	18	0	0	0
Curaçao	16	1	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Burundi	15	1	0	0
Saint Kitts and Nevis	15	0	0	0
Saint Lucia	15	0	0	0
Saint Vincent and the Grenadines	15	0	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Falkland Islands (Malvinas)	13	0	0	0
Nicaragua	13	3	0	0
Turks and Caicos Islands	12	1	0	0
Greenland	11	0	0	0
Montserrat	11	1	0	0
São Tomé and Príncipe	11	0	3	0
Seychelles	11	0	0	0
Gambia	10	1	0	0
Holy See	10	0	1	0
Suriname	10	1	0	0
Papua New Guinea	8	0	0	0
Bhutan	7	0	0	0
Mauritania	7	1	0	0
Bonaire, Sint Eustatius and Saba	6	0	0	0
British Virgin Islands	6	1	0	0
Saint Barthélemy	6	0	0	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
Yemen	1	0	0	0
<b>Total</b>	<b>3,012,214</b>	<b>207,885</b>	<b>64,719</b>	<b>5,372</b>

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #103 Novel Coronavirus (COVID-19)  
**Date:** Friday, 1 May 2020 7:59:25 PM  
**Attachments:** [2020-05-01 NIR Health SitRep v103 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 1 May 2020, there have been 6,767 laboratory confirmed cases of COVID-19 in Australia, including 93 deaths.
- Since yesterday's situation report, an additional 14 newly confirmed cases and 2 new deaths, have been reported in Australia.
- The total number of cases reported over the last seven days was 92, which is down from the 152 reported in the week prior. These numbers indicate a steady decline over the last fortnight.
- To date, more than 588,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1530 hrs 1 May 2020, a total of 3,257,660 cases of COVID-19 have been reported globally, including 233,416 deaths.
- Of the confirmed cases reported globally, the case fatality rate is approximately 7.1%.
- Cases in India and Bangladesh remain trending upwards, but the rate of new infections is slowing slightly.
- In the Pacific no new cases or deaths have been reported in the Northern Mariana Islands, Fiji, New Caledonia, Papua New Guinea, French Polynesia or Timor-Leste in three days.

The next Situation Report will be issued on 2 May 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [\[redacted\]](#) or [\[redacted\]](#) (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [\[redacted\]](#) by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health



**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-05-01 1800 AEST	<b>Version</b>	103
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-05-02 1800 AEST
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Celia Street, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li><i>National Cabinet met today, 1 May 2020 and encouraged Australians to download the COVIDSafe app, noted Treasury's economic update on both the domestic and international situation, and agreed to review the first phase of removing baseline restrictions on Friday, 8 May 2020.</i></li> </ul> <p><b>Aged care</b></p> <ul style="list-style-type: none"> <li><i>Today, National Cabinet endorsed the sector-led draft 'Code of Conduct on Pandemic Procedures' for residential aged care.</i></li> </ul> <p><b>Sport and recreational activities</b></p> <ul style="list-style-type: none"> <li><i>National Cabinet agreed that the resumption of sport and recreation will play a significant role in Australia's emergence from the COVID-19 environment due to associated health, economic, social and cultural benefits.</i></li> <li><i>Agreed the <u>'Framework for Rebooting Sport in a COVID-19 Environment'</u> developed by the Australian Institute of Sport (AIS) that provides guidance for the staged resumption of sport and recreation in Australia.</i></li> <li><i>Endorsed the <u>'National Principles for the Resumption of Sport and Recreation Activities'</u> developed by the AHPPC in consultation with sporting bodies, and the AHPPC's proposal to form a COVID-19 Sports and Health Committee (the Committee).</i></li> </ul> <p><b>Key metrics to relax restrictions</b></p> <ul style="list-style-type: none"> <li><i>National Cabinet endorsed medical advice from the AHPPC, which sets out <u>key metrics to</u></i></li> </ul>
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	<p><u><a href="#">support decision making on the relaxation of restriction measures.</a></u></p> <ul style="list-style-type: none"> <li>• <i>Australia is currently on track to meet 11 of 15 precedent conditions.</i></li> <li>• <i>Governments will expedite four conditions - surveillance (testing), state and territory surveillance plans and resources, use of COVIDSafe App, and stocks of PPE.</i></li> </ul> <p><b>Boarding schools arrangements</b></p> <ul style="list-style-type: none"> <li>• <i>National Cabinet endorsed the AHPPC statement on risk management for re-opening boarding schools and school-based residential colleges, which includes practical recommendations, such as:</i> <ul style="list-style-type: none"> <li>○ <i>a reduction in the number of boarding students;</i></li> <li>○ <i>staggered dining times; and</i></li> <li>○ <i>establishing procedures for quarantine.</i></li> </ul> </li> <li>• <i>National Cabinet will next meet on Tuesday, 5 May 2020.</i></li> <li>• <i>On 1 May 2020, the Prime Minister and the Minister for Aged Care and Senior Australians announced a new COVID-19 support package of \$250 million for residential aged care providers. All Commonwealth funded residential aged care providers will receive:</i> <ul style="list-style-type: none"> <li>○ <i>around \$900 per resident in major metropolitan areas; and</i></li> <li>○ <i>around \$1,350 per resident in all other areas.</i></li> <li>○ <i>The funding is aimed at covering the additional costs of caring for the health and wellbeing of residents during the pandemic, such as additional staffing, training, supporting visitations and connections and the provision of PPE.</i></li> </ul> </li> <li>• The Government launched the contact tracing app, COVIDSafe on Sunday, 26 April 2020. <ul style="list-style-type: none"> <li>○ The app is available for downloading from Google Play, and the App Store.</li> <li>○ Registrations opened at 1800hrs on 26 April 2020, and as at 1530 hrs on 1 May 2020, more than 3.59 million people have downloaded and registered for the COVIDSafe app.</li> <li>○ Use of COVIDSafe is voluntary. You can install or delete COVIDSafe at any time.</li> <li>○ Contact data on your device will be automatically deleted from your device 21 days after contact occurs.</li> <li>○ No user should feel pressured to install or continue to use COVIDSafe, or to agree to upload contact data to the data store. This is prohibited under the Biosecurity Determination.</li> <li>○ All data will be deleted from the data store after the COVID-19 pandemic has concluded, as required by the Biosecurity Determination.</li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>• On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>• Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>• On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the Biosecurity Act 2015. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>• The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>• On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>• On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the Biosecurity Act 2015, given the <i>threat</i> COVID-19 poses to human health <i>on a nationally significant scale</i> and the need to control its <i>entry, emergence, establishment and</i> spread in Australia.</li> <li>• The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> </ul>



- The Minister for Health determined, under the Biosecurity Act 2015, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.
- The Minister for Health has also made determinations under the Biosecurity Act 2015 to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).

## 1. Situation

### Overview

#### Domestic Situation (as at 1500 hrs, 1 May 2020)

- A total of **6,767** cases of COVID-19, including **93** deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).
  - Since yesterday's situation report, an additional **14** newly confirmed cases and **2** new deaths, have been reported in Australia.
  - The total number of newly confirmed cases reported over the last 7 days was **92**, which is down from the **152** reported in the week prior. These numbers indicate a steady decline over the last fortnight.
- The median age of cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: National Notifiable Diseases Surveillance System (NNDSS) data) (Figure 3).
  - According to the NNDSS data, 1.8% of cases have been in children aged 5-17 years.
- *Aboriginal and Torres Strait Islander cases represent less than 1% of the total number of cases (source: NNDSS data reported in CDI journal, reporting on cases up to 26 April 2020).*
  - *Median age of cases is 36 years, range 7 to 76 years.*
  - *40% of cases were acquired overseas.*
  - *67% of cases have been from major cities, with the remainder in inner and outer regional areas. There are no reported cases in remote or very remote areas.*
- According to the NNDSS data, approximately 12% of cases have been hospitalised during their course of illness, with **18%** of these cases requiring admission to an ICU (2.2% of confirmed cases).
- Of the deaths so far reported:
  - The median age is 80 years (range 42 to 96 years).
  - 58% were male and 42% were female.
  - Where data was available regarding comorbidities, 93% had one or more comorbidities and **70%** had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).

#### Testing

- To date, more than **588,000** tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.
  - Cumulative per cent positive was **1.1%** and the positivity in the past week was 0.1%.

#### Source of infection

- To date, around 64% of confirmed cases are considered to have been overseas acquired (Table 1).
- Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.
  - Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; all jurisdictions are reporting cases associated with cruise ships.
- Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.
- Clusters have been reported in some jurisdictions:
  - Tasmania is reporting an outbreak in North-West hospitals of at least 125 cases, including 78 staff members (as of 27 April 2020).

- *On 30 April, the Tasmanian Department of Health released an interim report based on the North-West hospitals outbreak. It reports that the original source of infection was most likely to have been one or both of the two patients admitted to hospital with COVID-19.*
- NSW Health is reporting **59** cases (22 staff and **37** residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of **30** April 2020. There have also been **13** deaths associated with this outbreak.

#### Epidemiological Resources

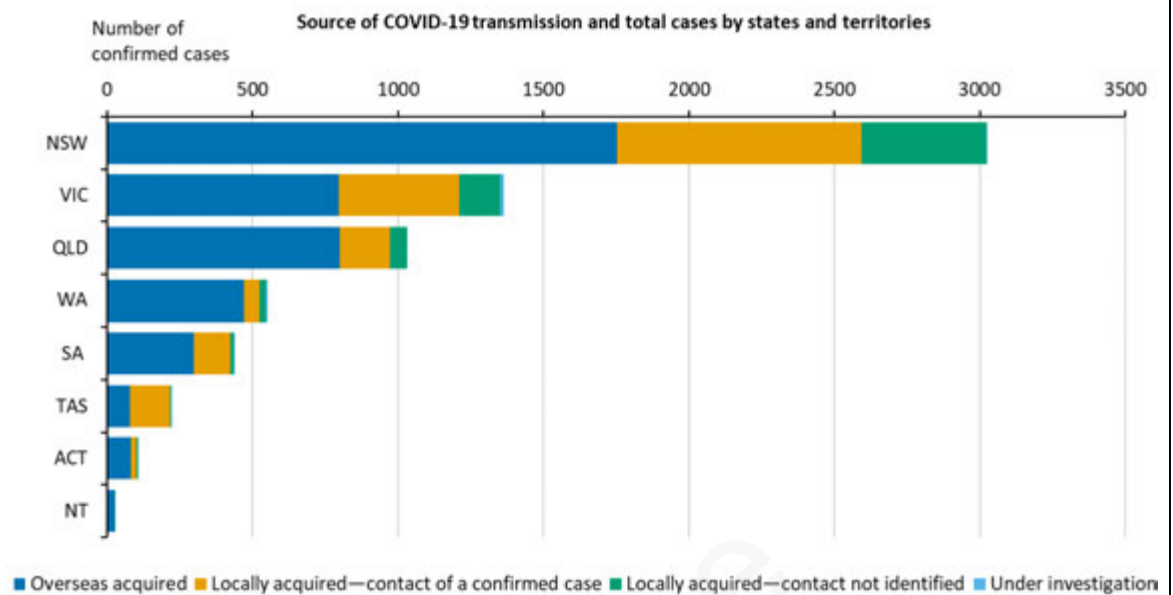
- *A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence (CDI) journal. The most recent report contains information on cases up to 26 April 2020.*
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, **1 May 2020**)**

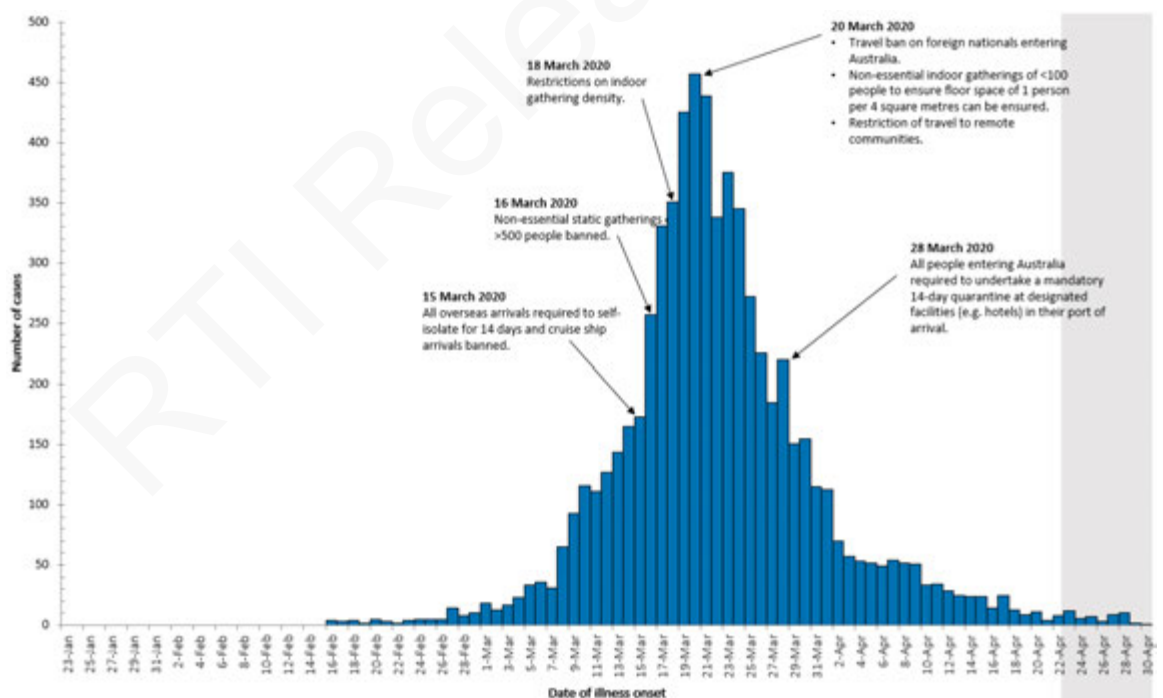
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<b>4,298</b>	82	<b>1,753</b>	24	799	298	<b>78</b>	795	469
Locally acquired - contact of confirmed case and/or in a known cluster	<b>1,765</b>	17	<b>840</b>	2	173	124	<b>137</b>	<b>416</b>	56
Locally acquired - contact not identified	<b>570</b>	1	363	0	43	7	0	140	16
Locally acquired - contact not identified, but case had interstate travel	<b>109</b>	6	68	1	18	6	4	0	6
Under investigation	<b>25</b>	0	<b>1</b>	0	0	3	4	<b>13</b>	4
<b>Total cases</b>	<b>6,767</b>	<b>106</b>	<b>3,025</b>	<b>27</b>	<b>1,033</b>	<b>438</b>	<b>223</b>	<b>1,364</b>	<b>551</b>
<b>Deaths (of total)</b>	<b>93</b>	3	<b>41</b>	0	6	4	<b>13</b>	18	8
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<b>14</b> <b>(0%)</b>	0 (0%)	9 (0%)	0 (0%)	0 (0%)	0 (0%)	<b>2</b> <b>(1%)</b>	<b>3</b> <b>(0%)</b>	0 (0%)
Change in the last 72hrs before (%change)	<b>40</b> <b>(1%)</b>	0 (0%)	20 (1%)	0 (0%)	0 (0%)	0 (0%)	<b>6</b> <b>(3%)</b>	<b>13</b> <b>(1%)</b>	<b>1</b> <b>(0%)</b>
Average daily increase over the past three days (compound)	<b>0.2%</b>	0.0%	0.2%	0.0%	0.0%	0.0%	<b>0.9%</b>	<b>0.3%</b>	<b>0.1%</b>
Increase over the past week	<b>92</b>	2	43	0	7	0	<b>16</b>	<b>21</b>	<b>3</b>

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 1 May 2020**



**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 1 May 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

**Total confirmed COVID-19 cases by sex and age group**

Age (years)	Male	Female
0-9	30	30
10-19	90	100
20-29	620	780
30-39	530	500
40-49	480	370
50-59	510	550
60-69	560	540
70-79	390	320
80-89	90	70
90+	20	20

- The global number of confirmed COVID cases is currently **3,257,660**, including **233,416** deaths (John Hopkins).
  - A total of **63,137** new cases, including **5,757** have been reported since yesterday's Situation Report.
- The majority of deaths are from the United States of America (**27%**), Italy (**13%**), **the United Kingdom (12%)**, Spain and France (11% each) (WHO SitRep).
  - Based on the number of reported cases, the global case fatality rate is approximately **7.1%**. The risk of death reportedly increases with age.
- *The outbreak among residents of migrant worker dormitories in Singapore continues.*
- *The UK reports that it is over the peak of their epidemic. However it is too early to be sure if this apparent decline will be sustained. With the phased relaxing of measures for countries in the region occurring over the coming weeks, a second wave or continuation of the current wave remains a possibility.*
- *The number of new cases reported in Indonesia has fluctuated between 200 and 450 new cases per day for the past two weeks.*
- *Cases in India and Bangladesh remain trending upwards, but the rate of new infections is slowing slightly.*
- *In the Pacific no new cases or deaths have been reported in the Northern Mariana Islands, Fiji, New Caledonia, Papua New Guinea, French Polynesia or Timor-Leste in three days.*

**Countries, areas or territories with COVID-19 cases reported in the last 7 days**  
(From 23 April 2020, 10:00AM to 30 April 2020, 10:00AM (CEST))

World Health Organization

**Cases reported in the last 7 days**

- 1 - 100
- 101 - 1,000
- 1,001 - 10,000
- 10,001 - 50,000
- ≥ 50,000

No cases reported in the last 7 days  
No reported cases

Scale: 0 1,000 2,000 km

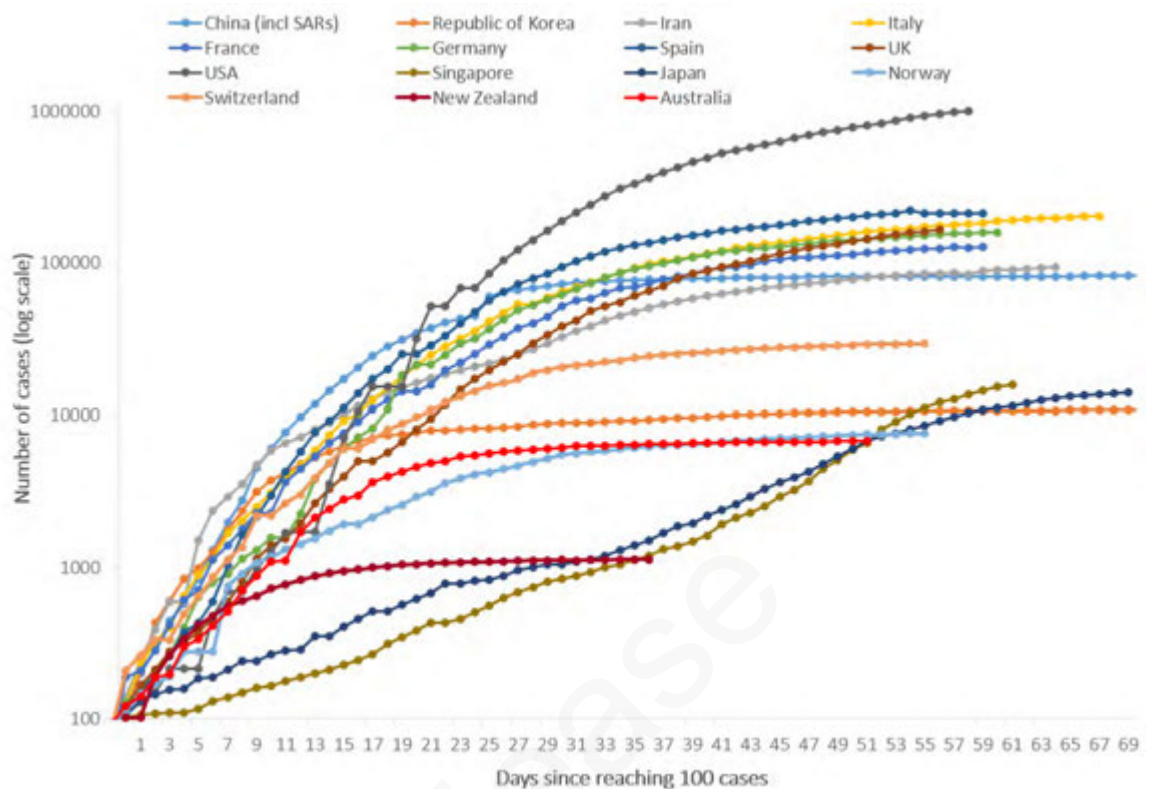
World Health Organization (WHO) Health Emergency Operations Centre

World Health Organization  
Map Attribution: WHO Health Emergency Operations Centre

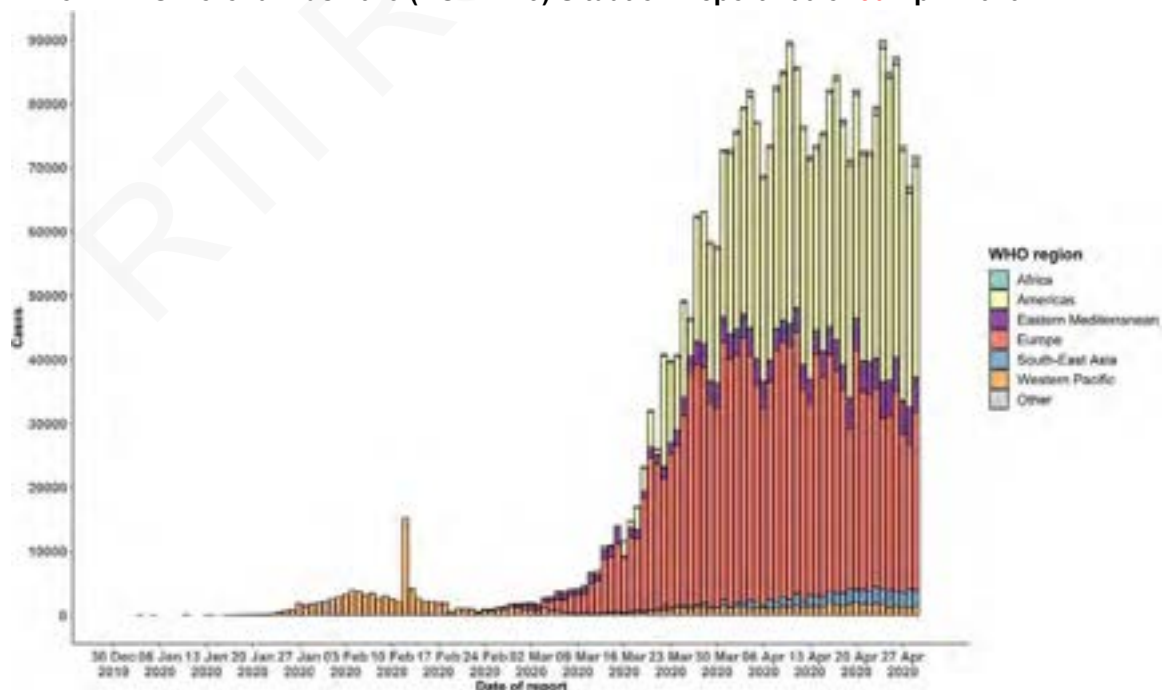
Not applicable

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**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 1 May 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 100 of 30 April 2020**



#### International response

#### WHO

- On 28 April 2020,
  - the WHO Regional Office for Europe announced that WHO has called on countries to ensure that immunization is maintained wherever possible and surveillance for vaccine-preventable diseases remains undisrupted during the pandemic.



	<ul style="list-style-type: none"> <li>○ WHO released a list of 'frequently asked questions: Breastfeeding and COVID-19' and guidance for health workers supporting mothers with confirmed or suspected COVID-19 to breastfeed.</li> <li>● On 29 April 2020, the WHO Director-General outlined a timeline of the COVID-19 events and WHO's knowledge and actions taken. Of note was the reconvening of the Emergency Committee on 30 January 2020 and the WHO's declaration of a global public health emergency. <ul style="list-style-type: none"> <li>○ At the time there were 82 known cases and no deaths outside China.</li> <li>○ 'WHO acted quickly and decisively to respond and to warn the world'.</li> <li>○ 'WHO is committed to transparency and accountability.'</li> <li>○ The Emergency Committee is scheduled to meet on 30 April 2020 to evaluate the evolution of the pandemic, and to advise on updated recommendations.</li> </ul> </li> </ul>
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## 2. Health Responses by States and Territories

ACT Health	<ul style="list-style-type: none"> <li>● The ACT declared a Public Health Emergency under the Public Health Act 1997 (ACT).</li> <li>● There are seven public health emergency directions in force under the Public Health Act 1997.</li> <li>● The ACT Health Emergency Control Centre (HECC) remains activated.</li> <li>● On 24 April 2020, the ACT Government expanded its COVID-19 testing criteria at designated COVID-19 testing sites for all symptomatic people over the next two weeks.</li> </ul>
NSW Health	<ul style="list-style-type: none"> <li>● The State Emergency Operations Centre is active to help facilitate NSW government agency COVID-19 preparedness.</li> <li>● NSW Health is working with other necessary agencies to support the logistics of implementing drive-through testing clinics, such as Police and Transport</li> <li>● On 15 April 2020, the Minister for Health approved the delegation for exemptions to the Public Health (COVID-19 Restrictions on Gathering and Movement) Order 2020 for funerals and weddings.</li> </ul>
NT Health	<ul style="list-style-type: none"> <li>● Restrictions on entry into the NT from 1600 24 March 2020. Those not exempt will be required to self-isolate for 14 days.</li> <li>● NT enacted the Biosecurity Act regional control measures on 26 March 2020.</li> <li>● All COVID-19 positive people are going into supervised isolation in order to ensure compliance and community safety. This includes the use of the Howard Springs facility as a step down COVID-19 health facility.</li> </ul>
QLD Health	<ul style="list-style-type: none"> <li>● A Public Health Event of State Significance was declared by the Chief Health Officer on 22 January 2020.</li> <li>● The State Health Emergency Coordination Centre (SHECC) moved to "stand up" on 25 January 2020 and is activated 24 hours to coordinate the Queensland Health response.</li> <li>● A public health emergency for COVID-19 was declared under the Public Health Act 2005 on 29 January 2020.</li> <li>● Further Queensland border restrictions and quarantine arrangements came into effect midnight 10 April 2020.</li> </ul>
SA Health	<ul style="list-style-type: none"> <li>● The State Control Centre Health is active 0800-2100, 7 days a week, with liaison officers from multiple organisations.</li> <li>● Restrictions on international arrivals and cross border travel came into effect into SA from 22 March 2020. Unless exempt, all arrivals are required to self-quarantine for 14 days.</li> </ul>
TAS Health	<ul style="list-style-type: none"> <li>● On 21 March 2020, Tasmania put in place strict self-isolation requirements for anyone entering the state.</li> <li>● Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
VIC Health	<ul style="list-style-type: none"> <li>● A state of emergency was declared in Victoria, effective from midday on 16 March 2020.</li> <li>● Stage 3 restrictions have been in place since 30 March 2020, are legally enforceable, govern how businesses can operate, and valid reasons for people to leave their homes.</li> <li>● All public hospital ICUs in Victoria are now reporting real-time data on confirmed cases every 6 hours. The data are managed by Ambulance Victoria via the REACH platform.</li> </ul>

WA Health	<ul style="list-style-type: none"> <li>• The Public Health Emergency Operations Centre and State Health Incident Coordination Centre are activated.</li> <li>• The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to TARGETED ACTION PHASE and escalated the State Hazard Plan Human Biosecurity to RESPONSE PHASE and made a Level 3 Incident Declaration on the 15 March 2020.</li> <li>• A State of Emergency declaration was made on the 15 March 2020. Further extensions have been activated.</li> <li>• A Public Health State of Emergency declaration was made on the 16 March 2020. Further extensions have been activated.</li> <li>• COVID testing molecular PCR (GeneXpert®) analysers to be rolled out from next week in regional areas for higher risk COVID-19 testing scenarios, such as health care workers, police, hospital patients, people living in Aboriginal communities and those from an area with an increased risk of community transmission.</li> </ul>
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### 3. Supporting Information and Background

#### General

A weekly epidemiological report which includes data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection is being published in the Communicable Disease Intelligence journal.

#### Clinical presentation

Ongoing evidence from China supports previous research that COVID-19 presents as mild illness in the majority of cases with fever and cough being the most commonly reported symptoms. Severe or fatal outcomes tend to occur in the elderly or those with comorbid conditions (i.e. cardiovascular disease, diabetes and hypertension).

Examination of cases and their close contacts in China found an association between age and time from symptom onset to recovery. The median time to recovery was estimated to be 27 days in 20–29 year olds, 32 days in 50–59 year olds, and 36 days in those aged over 70 years. Compared to those with mild disease, those with moderate and severe disease were associated with a 19% and 58% increase in recovery time, respectively.

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 4.0% is reported in Mainland China. The calculated CFR was much higher in Hubei Province (4.6%) than in all other provinces (1.7%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease.

#### Transmission

Human-to-human transmission of SARS-CoV-2 is via droplets and fomites from an infected person to a close contact. Current evidence does not support airborne or faecal-oral spread as major factors in transmission.

#### Incubation period

Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the National Health Security Act 2007.



For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

#### 4. Appendix 1

##### Confirmed cases of COVID-19 by location, excluding Australia

Please note that the total global cases count reported in the table below is less than the 'live' figure reported by Johns Hopkins University (3,257,660), checked at 1530 hours.

Source: International cases based on WHO Situation Report 101, 30 April 2020, excluding Australian cases.

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
China (including SARs)	84,373	4,643	4	0
Hong Kong SAR	1,038	4	0	0
Taiwan	429	6	0	0
Macau SAR	45	0	0	0
United States of America	1,003,974	52,428	20,517	1,936
Spain	212,917	24,275	2,144	453
Italy	203,591	27,682	2,086	323
The United Kingdom	165,225	26,097	4,076	4,419
Germany	159,119	6,288	1,478	173
France	127,066	24,054	1,602	427
Turkey	117,589	3,081	2,936	89
Russian Federation	106,498	1,073	7,099	101
Iran (Islamic Republic of)	93,657	5,957	1,073	80
Brazil	71,886	5,017	5,385	474
Canada	50,363	2,904	1,349	138
Belgium	47,859	7,501	525	170
Netherlands	38,802	4,711	386	145
India	33,050	1,074	1,718	67
Peru	31,190	854	2,491	72
Switzerland	29,324	1,407	143	28
Ecuador	24,675	883	417	12
Portugal	24,505	973	183	25
Saudi Arabia	21,402	157	1,325	5
Sweden	20,302	2,462	681	107
Ireland	20,253	1,190	376	31
Mexico	16,752	1,569	1,223	135
Israel	15,782	212	0	0
Pakistan	15,759	346	874	19
Singapore	15,641	14	419	0
Austria	15,364	580	50	11
Chile	14,885	216	520	9
Japan	14,088	415	236	26
Belarus	13,181	84	973	5
Poland	12,640	624	422	28

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Qatar	12,564	10	643	0
Romania	11,978	675	362	25
United Arab Emirates	11,929	98	549	9
Republic of Korea	10,765	247	4	1
Ukraine	10,406	261	540	11
Indonesia	9,771	784	260	11
Denmark	9,008	443	157	9
Serbia	8,724	173	227	5
Philippines	8,212	558	254	28
Norway	7,667	202	62	7
Czechia	7,579	227	75	0
Bangladesh	7,103	163	641	8
Dominican Republic	6,652	293	236	7
Panama	6,200	176	179	9
Colombia	5,949	269	352	16
Malaysia	5,945	100	94	0
South Africa	5,350	103	354	10
Egypt	5,268	380	226	21
Finland	4,906	206	166	7
Morocco	4,359	168	107	3
Argentina	4,201	207	182	10
Algeria	3,848	444	199	7
Republic of Moldova	3,771	116	133	7
Luxembourg	3,769	89	28	0
Kuwait	3,740	24	300	1
Kazakhstan	3,333	25	255	0
Thailand	2,954	54	7	0
Bahrain	2,921	8	110	0
Hungary	2,775	312	48	12
Greece	2,576	139	42	3
Oman	2,348	10	74	0
Armenia	2,066	32	134	2
Croatia	2,062	67	15	4
Uzbekistan	2,031	9	76	1
Iraq	2,003	92	75	2
Afghanistan	1,827	60	0	0
Cameroon	1,806	59	101	1
Iceland	1,797	10	2	0
Azerbaijan	1,766	23	49	1
Bosnia and Herzegovina	1,689	64	101	2
Ghana	1,671	16	0	0
Estonia	1,666	50	6	0
Nigeria	1,532	44	195	4

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Cuba	1,467	58	30	0
Bulgaria	1,447	64	48	6
North Macedonia	1,442	73	21	2
Puerto Rico	1,433	54	33	0
Slovenia	1,418	89	10	3
Slovakia	1,391	22	7	2
Lithuania	1,375	45	0	1
Guinea	1,351	7	111	0
Côte d'Ivoire	1,238	14	55	0
New Zealand	1,129	19	3	0
Djibouti	1,077	2	5	0
Bolivia (Plurinational State of)	1,053	55	39	2
Tunisia	980	40	5	0
Senegal	882	9	59	0
Latvia	849	15	13	2
Cyprus	843	20	6	0
Kosovo	799	22	9	0
Albania	773	31	7	1
Andorra	753	41	0	0
Kyrgyzstan	746	8	17	0
Honduras	738	66	36	2
Lebanon	721	24	4	0
Niger	713	32	4	1
International conveyance (Diamond Princess)	712	13	0	0
Costa Rica	705	6	8	0
Sri Lanka	649	7	30	0
Burkina Faso	638	42	0	0
Uruguay	625	15	5	0
Somalia	582	28	54	0
San Marino	563	41	10	0
Guatemala	557	16	27	1
Georgia	539	6	22	0
Democratic Republic of the Congo	500	31	9	1
Mali	482	25	58	1
United Republic of Tanzania	480	16	180	6
Malta	463	4	13	0
Mayotte	460	4	0	0
Jordan	451	8	2	0
Réunion	420	0	2	0
Kenya	384	15	10	1
Jamaica	381	7	17	0
El Salvador	377	9	32	1
Sudan	375	28	57	3
occupied Palestinian territory	344	2	1	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Mauritius	332	10	0	0
Venezuela (Bolivarian Republic of)	329	10	0	0
Montenegro	322	7	1	0
Equatorial Guinea	315	1	0	0
Isle of Man	309	21	1	1
Jersey	284	20	1	1
Gabon	276	3	38	0
Viet Nam	270	0	0	0
Maldives	256	0	11	0
Guernsey	247	13	0	0
Paraguay	239	9	9	0
Rwanda	225	0	13	0
Congo	220	9	13	1
Faroe Islands	187	0	0	0
Martinique	175	14	0	0
Guadeloupe	151	11	2	0
Myanmar	150	6	0	1
Gibraltar	141	0	0	0
Guam	141	5	1	0
Liberia	141	16	0	0
Brunei Darussalam	138	1	0	0
Ethiopia	130	3	4	0
Madagascar	128	0	0	0
French Guiana	125	1	1	0
Cambodia	122	0	0	0
Sierra Leone	116	5	12	0
Trinidad and Tobago	116	8	0	0
Cabo Verde	113	1	0	0
Bermuda	111	6	1	0
Togo	109	7	10	1
Aruba	100	2	0	0
Zambia	97	3	2	0
Eswatini	91	1	20	0
Liechtenstein	83	1	0	0
Bahamas	80	11	0	0
Barbados	80	6	0	0
Uganda	79	0	0	0
Guinea-Bissau	77	1	4	0
Haiti	76	6	0	0
Mozambique	76	0	0	0
Guyana	75	8	1	0
Sint Maarten	75	13	0	0
Cayman Islands	73	1	3	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Benin	69	2	5	1
Monaco	68	1	0	0
United States Virgin Islands	62	4	3	0
Libya	61	2	0	0
French Polynesia	58	0	0	0
Nepal	57	0	3	0
Chad	52	2	0	0
Central African Republic	50	0	0	0
Syrian Arab Republic	43	3	0	0
Eritrea	39	0	0	0
Mongolia	38	0	0	0
Saint Martin	38	3	0	0
Malawi	36	3	0	0
South Sudan	34	0	0	0
Zimbabwe	32	4	0	0
Angola	27	2	0	0
Antigua and Barbuda	24	3	0	0
Timor-Leste	24	0	0	0
Botswana	23	1	0	0
Grenada	19	0	1	0
Lao People's Democratic Republic	19	0	0	0
Belize	18	2	0	0
Fiji	18	0	0	0
New Caledonia	18	0	0	0
Saint Lucia	17	0	2	0
Curaçao	16	1	0	0
Dominica	16	0	0	0
Namibia	16	0	0	0
Saint Vincent and the Grenadines	16	0	1	0
Burundi	15	1	0	0
Saint Kitts and Nevis	15	0	0	0
Northern Mariana Islands (Commonwealth of the)	14	2	0	0
Falkland Islands (Malvinas)	13	0	0	0
Nicaragua	13	3	0	0
Turks and Caicos Islands	12	1	0	0
Gambia	11	1	1	0
Greenland	11	0	0	0
Montserrat	11	1	0	0
São Tomé and Príncipe	11	0	0	0
Seychelles	11	0	0	0
Holy See	10	0	0	0
Suriname	10	1	0	0
Papua New Guinea	8	0	0	0

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
Bhutan	7	0	0	0
Mauritania	7	1	0	0
Bonaire, Sint Eustatius and Saba	6	0	0	0
British Virgin Islands	6	1	0	0
Saint Barthélemy	6	0	0	0
Yemen	6	0	5	0
Anguilla	3	0	0	0
Saint Pierre and Miquelon	1	0	0	0
<b>Total</b>	<b>3,083,699</b>	<b>217,679</b>	<b>71,559</b>	<b>9,794</b>

RTI Release

**From:** NGComms  
**To:** [Jeannette Young](#)  
**Subject:** Health Situation Report #104 Novel Coronavirus (COVID-19)  
**Date:** Saturday, 2 May 2020 7:13:26 PM  
**Attachments:** [2020-05-02 NIR Health SitRep v104 - COVID-19.pdf](#)

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Good evening,

Please find attached today's Situation Report on the novel coronavirus (COVID-19) and current preparedness and response activities.

#### Situation in Australia

- As at 1500 hrs 2 May 2020, there have been 6,783 laboratory confirmed cases of COVID-19 in Australia, including 93 deaths.
- Since yesterday's situation report, an additional 16 newly confirmed cases and no new deaths, have been reported in Australia.
- The total number of cases reported over the last seven days was 88, which is down from the 130 reported in the week prior.
- To date, more than 611,000 tests have been conducted across Australia.

#### Situation Overseas

- As at 1500 hrs 2 May 2020, a total of 3,344,274 cases of COVID-19 have been reported globally, including 238,775 deaths.
- Of the confirmed cases reported globally, the case fatality rate is approximately 7.1%.
- On 30 April 2020, the International Health Regulations (2005) Emergency Committee met and agreed that the outbreak still constitutes a public health emergency of international concern (PHEIC).
- The PHEIC advised WHO to work to identify the animal source of SARS-CoV-2 with the World Organisation for Animal Health and the Food and Agriculture Organization of the United Nations.

The next Situation Report will be issued on 3 May 2020.

To notify further updates or for any questions or changes to distribution, please contact the NIR at [redacted] or [redacted] (24 hours). Commonwealth agencies and jurisdictions, please provide relevant updates or additions to [redacted] by 1300hrs for inclusion in the following day's Situation Report.

As always, thank you to all contributing business areas and jurisdictions for your ongoing efforts in supporting our daily Situation Reports.

Kind regards

Rhonda Owen  
 National Incident Room Manager  
 Health Emergency Management Branch  
 Office of Health Protection | Chief Medical Officer Group  
 Australian Government Department of Health





**Australian Government**  
**Department of Health**  
 National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-05-02 1800 AEST	<b>Version</b>	103
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-05-03 1800 AEST
<b>Prepared By</b>	irrelevant information	<b>Authorised By</b>	Graeme Barden, FAS NIRD
<b>Context</b>	<p>This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u>.</p> <p>Changes are shown in <i>red italics</i>.</p>		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Key events and updates</b>	<ul style="list-style-type: none"> <li>National Cabinet met <i>yesterday</i>, 1 May 2020 and encouraged Australians to download the COVIDSafe app, noted Treasury's economic update on both the domestic and international situation, and agreed to review the first phase of removing baseline restrictions on Friday, 8 May 2020.</li> </ul> <p><b>Aged care</b></p> <ul style="list-style-type: none"> <li><i>Yesterday</i>, National Cabinet endorsed the sector-led draft 'Code of Conduct on Pandemic Procedures' for residential aged care.</li> </ul> <p><b>Sport and recreational activities</b></p> <ul style="list-style-type: none"> <li>National Cabinet agreed that the resumption of sport and recreation will play a significant role in Australia's emergence from the COVID-19 environment due to associated health, economic, social and cultural benefits.</li> <li>Agreed the '<u>Framework for Rebooting Sport in a COVID-19 Environment</u>' developed by the Australian Institute of Sport (AIS) that provides guidance for the staged resumption of sport and recreation in Australia.</li> <li>Endorsed the '<u>National Principles for the Resumption of Sport and Recreation Activities</u>' developed by the AHPPC in consultation with sporting bodies, and the AHPPC's proposal to form a COVID-19 Sports and Health Committee (the Committee).</li> </ul> <p><b>Key metrics to relax restrictions</b></p> <ul style="list-style-type: none"> <li>National Cabinet endorsed medical advice from the AHPPC, which sets out <u>key metrics to</u></li> </ul>
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	<p><u>support decision making on the relaxation of restriction measures.</u></p> <ul style="list-style-type: none"> <li>• Australia is currently on track to meet 11 of 15 precedent conditions.</li> <li>• Governments will expedite four conditions - surveillance (testing), state and territory surveillance plans and resources, use of COVIDSafe App, and stocks of PPE.</li> </ul> <p><b>Boarding schools arrangements</b></p> <ul style="list-style-type: none"> <li>• National Cabinet endorsed the AHPPC statement on risk management for re-opening boarding schools and school-based residential colleges, which includes practical recommendations.</li> <li>• National Cabinet will next meet on Tuesday, 5 May 2020.</li> <li>• On 1 May 2020, the Prime Minister and the Minister for Aged Care and Senior Australians announced a new COVID-19 support package of \$250 million for residential aged care providers. All Commonwealth funded residential aged care providers will receive funding aimed at covering the additional costs of caring for the health and wellbeing of residents during the pandemic.</li> <li>• The Government launched the contact tracing app, COVIDSafe on Sunday, 26 April 2020. <ul style="list-style-type: none"> <li>○ The app is available for downloading from Google Play, and the App Store.</li> <li>○ Registrations opened at 1800hrs on 26 April 2020, and as at 1530 hrs on 2 May 2020, more than 4.02 million people have downloaded and registered for the COVIDSafe app.</li> <li>○ Use of COVIDSafe is voluntary. You can install or delete COVIDSafe at any time.</li> <li>○ Contact data on your device will be automatically deleted from your device 21 days after contact occurs.</li> <li>○ No user should feel pressured to install or continue to use COVIDSafe, or to agree to upload contact data to the data store. This is prohibited under the Biosecurity Determination.</li> <li>○ All data will be deleted from the data store after the COVID-19 pandemic has concluded, as required by the Biosecurity Determination.</li> </ul> </li> </ul>
<b>Response</b>	<p><b>Travel advice and restrictions</b></p> <ul style="list-style-type: none"> <li>• On 24 April 2020, self-isolation advice for international air crew was updated so essential flight related duties from a regulatory and safety perspective can be undertaken.</li> <li>• On 21 April 2020, the outgoing international travel ban for Australians was extended for a further four weeks, with a review date of 20 May 2020.</li> <li>• From 28 March 2020, incoming travellers entering Australia will be quarantined in a designated hotel or other accommodation for 14 days at their point of arrival. Foreign nationals cannot enter Australia.</li> <li>• Quarantining of travellers will be led by State and Territory Governments with enforcement through State and Territory police.</li> <li>• On 24 March 2020, the Prime Minister announced broader shutdown measures, including a ban on overseas travel under the <i>Biosecurity Act 2015</i>. Exemptions include aid work in the Pacific, compassionate travel and essential travel for employment.</li> <li>• The Prime Minister announced on 15 March 2020 a 30-day ban on cruise ships from foreign ports from arriving at Australian ports, which has been extended until 15 June 2020.</li> </ul> <p><b>Emergency Response Plan for COVID-19</b></p> <ul style="list-style-type: none"> <li>• On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> </ul> <p><b>Commonwealth emergency powers</b></p> <ul style="list-style-type: none"> <li>• On 18 March 2020, the Prime Minister announced the Governor-General accepted the Commonwealth Government's recommendation that he declare a "human biosecurity emergency" under the <i>Biosecurity Act 2015</i>, given the threat COVID-19 poses to human health on a nationally significant scale and the need to control its entry, emergence, establishment and spread in Australia.</li> <li>• The declaration allows the Minister for Health to issue targeted, legally enforceable directions and requirements to combat the virus as required.</li> <li>• The Minister for Health determined, under the <i>Biosecurity Act 2015</i>, that cruise ships cannot come into Australian ports and foreign cruise ships must leave Australian territory.</li> <li>• The Minister for Health has also made determinations under the <i>Biosecurity Act 2015</i> to prevent price gouging of essential goods (personal protective equipment such as disposable face masks and disinfectant products), preventing persons from entering designated remote communities, subject to exceptions, and to close some retail outlets at airports (with the exception of food outlets and chemists).</li> </ul>

## 1. Situation

Overview	<p><b>Domestic Situation (as at 1500 hrs, 2 May 2020)</b></p> <ul style="list-style-type: none"> <li>A total of <b>6,783</b> cases of COVID-19, including 93 deaths, have been confirmed by jurisdictions in Australia (Table 1 and Figure 2).             <ul style="list-style-type: none"> <li>Since yesterday's situation report, an additional <b>16</b> confirmed cases and <b>no</b> new deaths, have been reported in Australia.</li> <li>The total number of newly confirmed cases reported over the last 7 days was <b>88</b>, which is down from the <b>130</b> reported in the week prior. <i>Following the peak of cases at the end of March, since approximately 19 April there has been a sustained and relatively low number of new cases reported daily.</i></li> </ul> </li> <li>The median age of cases is 48 years, range 0 to 101 years, with a relatively equal ratio of male-to-female cases across most age groups (source: National Notifiable Diseases Surveillance System (NNDSS) data) (Figure 3).             <ul style="list-style-type: none"> <li>According to the NNDSS data, 1.8% of cases have been in <b>school aged</b> children (5-17 years).</li> </ul> </li> <li>Aboriginal and Torres Strait Islander cases represent less than 1% of the total number of cases:             <ul style="list-style-type: none"> <li>Median age of cases is <b>approximately</b> 36 years.</li> <li><b>Almost half</b> of cases were acquired overseas.</li> <li><b>Two-thirds</b> of cases have been from major cities, with the remainder in inner and outer regional areas. There are no reported cases in remote or very remote areas.</li> </ul> </li> <li>According to the NNDSS data, approximately 12% of cases have been hospitalised during their course of illness, with 18% of these cases requiring admission to an ICU (2.2% of confirmed cases).</li> <li>Of the deaths reported so far:             <ul style="list-style-type: none"> <li>The median age is 80 years (range 42 to 96 years).                 <ul style="list-style-type: none"> <li><b>84% of deaths have been in people aged 70 years and over, compared with only 14% of all cases being in this age group.</b></li> </ul> </li> <li>58% were male and 42% were female.</li> <li>Where data was available regarding comorbidities, <b>91%</b> had one or more comorbidities and <b>55%</b> had two or more comorbidities. The three most commonly reported comorbidities were diabetes, cardiac disease (excluding hypertension) and chronic respiratory conditions (excluding asthma).</li> </ul> </li> </ul> <p><b>Testing</b></p> <ul style="list-style-type: none"> <li>To date, more than <b>611,000</b> tests have been conducted across Australia (as at 1500) as reported by the jurisdictions.             <ul style="list-style-type: none"> <li>Cumulative per cent positive was 1.1% and the positivity in the past week was 0.1%.</li> </ul> </li> </ul> <p><b>Source of infection</b></p> <ul style="list-style-type: none"> <li>To date, around <b>63%</b> of confirmed cases are considered to have been overseas acquired (Table 1).</li> <li>Of the overseas acquired cases where place of acquisition was reported to the NNDSS, the majority of cases were acquired at sea (e.g. cruise ships), the UK and USA.             <ul style="list-style-type: none"> <li>Over 1,200 cases have been associated with cruise ships. A majority of those have been reported in NSW; all jurisdictions are reporting cases associated with cruise ships.</li> </ul> </li> <li>Of the locally acquired cases: The majority of locally acquired cases are contacts of a confirmed case, with a subset of locally acquired cases unable to be linked back to a confirmed case.</li> <li>Clusters have been reported in some jurisdictions:             <ul style="list-style-type: none"> <li>Tasmania is reporting an outbreak in North-West hospitals of at least 125 cases, including 78 staff members (as of 27 April 2020).                 <ul style="list-style-type: none"> <li>On 30 April, the Tasmanian Department of Health released an interim report based on the North-West hospitals outbreak. It reports that the original source of</li> </ul> </li> </ul> </li> </ul>
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infection was most likely to have been one or both of the two patients admitted to hospital with COVID-19.

- o NSW Health is reporting **61** cases (**24** staff and 37 residents) of COVID-19 associated with the Anglicare Newmarch House aged care facility as of **1 May** 2020. There have also been 13 deaths associated with this outbreak.

#### Epidemiological Resources

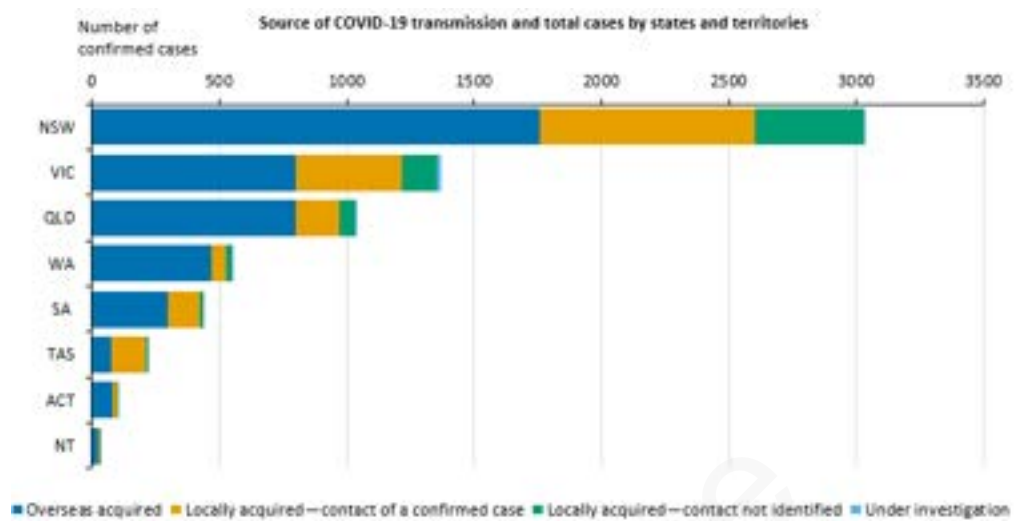
- A weekly COVID-19 epidemiological report was published in the Communicable Diseases Intelligence (CDI) journal. The most recent report contains information on cases up to 26 April 2020.
- Figures regarding the epidemiology of cases in Australia are also being published on the Department of Health website.

**Table 1. Confirmed cases of COVID-19 by source of infection in each jurisdiction\*, Australia (as at 1500 hrs, 2 May 2020)**

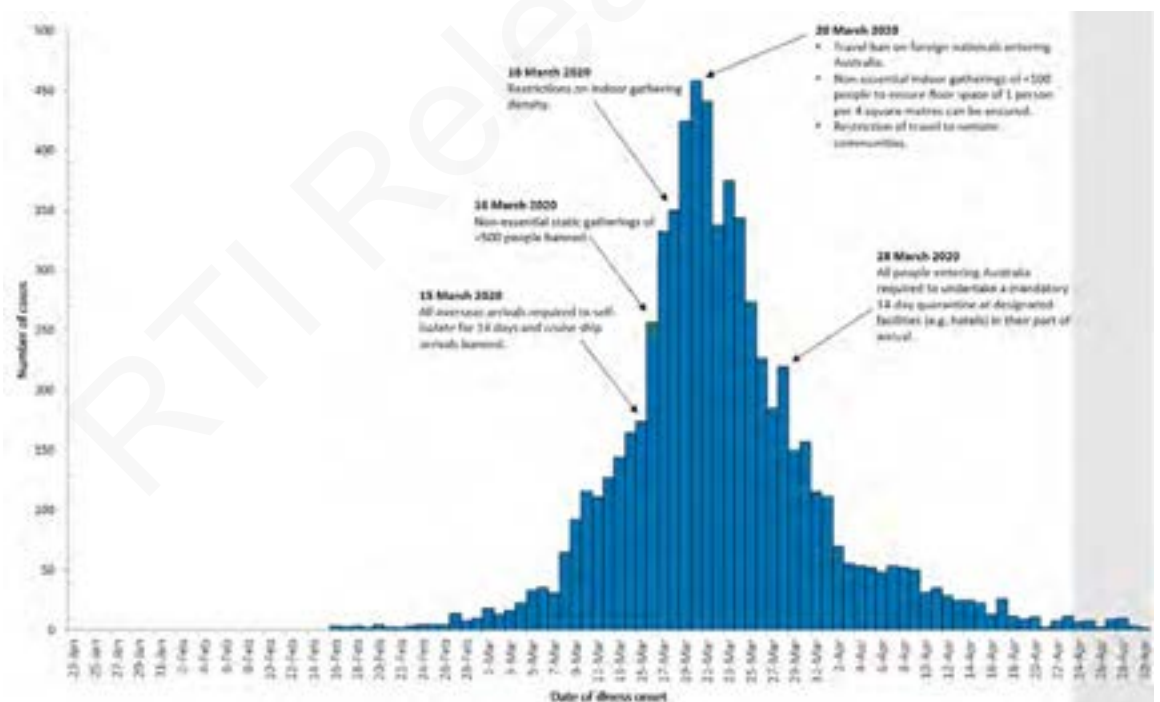
Confirmed COVID-19 cases	Australia	ACT	NSW	NT	Qld	SA	Tas	Vic	WA
<b>Source of infection (cumulative to date)</b>									
Overseas acquired	<b>4,306</b>	82	1,756	<b>26</b>	799	298	78	<b>798</b>	469
Locally acquired - contact of confirmed case and/or in a known cluster	<b>1,770</b>	17	844	2	173	124	137	<b>417</b>	56
Locally acquired - contact not identified	<b>571</b>	1	362	0	43	7	0	<b>141</b>	<b>17</b>
Locally acquired - contact not identified, but case had interstate travel	<b>109</b>	6	68	1	18	6	4	0	6
Under investigation	<b>27</b>	0	1	0	<b>1</b>	3	4	<b>15</b>	<b>3</b>
<b>Total cases</b>	<b>6,783</b>	<b>106</b>	<b>3,031</b>	<b>29</b>	<b>1,034</b>	<b>438</b>	<b>223</b>	<b>1,371</b>	<b>551</b>
<b>Deaths (of total)</b>	<b>93</b>	3	41	0	6	4	13	18	8
<b>Comparison over time of cumulative case count</b>									
Change in last 24hrs (%change)	<b>16</b> (0.2%)	<b>0</b> (0%)	<b>6</b> (0.2%)	<b>2</b> (7.4%)	<b>1</b> (0.1%)	<b>0</b> (0%)	<b>0</b> (0%)	<b>7</b> (0.5%)	<b>0</b> (0%)
Change in the last 72hrs before (%change)	<b>40</b> (0.6%)	<b>0</b> (0.0%)	<b>17</b> (0.6%)	<b>2</b> (7.4%)	<b>1</b> (0.1%)	<b>0</b> (0.0%)	<b>3</b> (1.4%)	<b>17</b> (1.3%)	<b>0</b> (0.0%)
Average daily increase over the past three days (compound)	<b>0.2%</b>	0.0%	<b>0.2%</b>	<b>2.5%</b>	<b>0.0%</b>	0.0%	<b>0.5%</b>	<b>0.4%</b>	0.0%
Increase over the past week	<b>88</b>	<b>0</b>	<b>37</b>	<b>2</b>	<b>8</b>	<b>0</b>	<b>14</b>	<b>25</b>	<b>2</b>

\*Note that under National Notifiable Diseases Surveillance System (NNDSS) reporting requirements, cases are reported based on their Australian jurisdiction of residence rather than where they were detected. For example, a case reported in the NT who is a NSW resident is counted in the national figures as a NSW case.

**Fig 1. Distribution of confirmed cases of COVID-19, by jurisdiction and type of acquisition, as at 1500 hrs 2 May 2020**

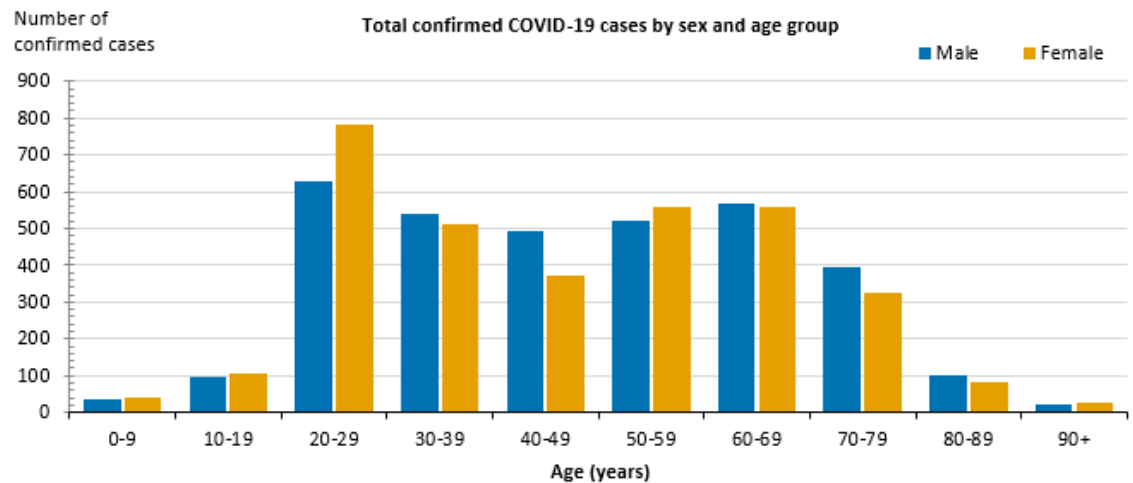


**Fig 2. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 2 May 2020 by date of illness onset\***



\*Illness with an onset during the shaded period may not yet have been reported and so trends during this period should be interpreted with caution.

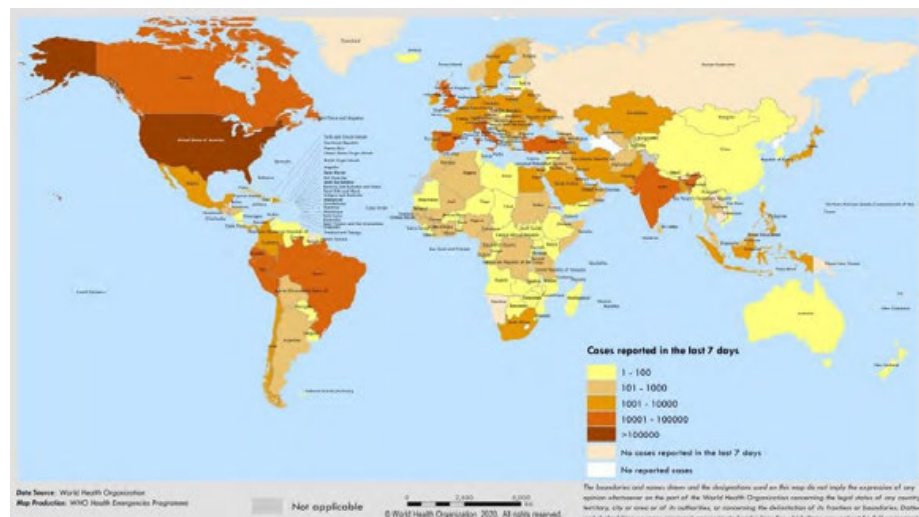
**Fig 3. Distribution of confirmed cases of COVID-19, by age and sex, as at 1500 hrs 2 May 2020**



**International Situation (as at 1430 hrs, 2 May 2020)**

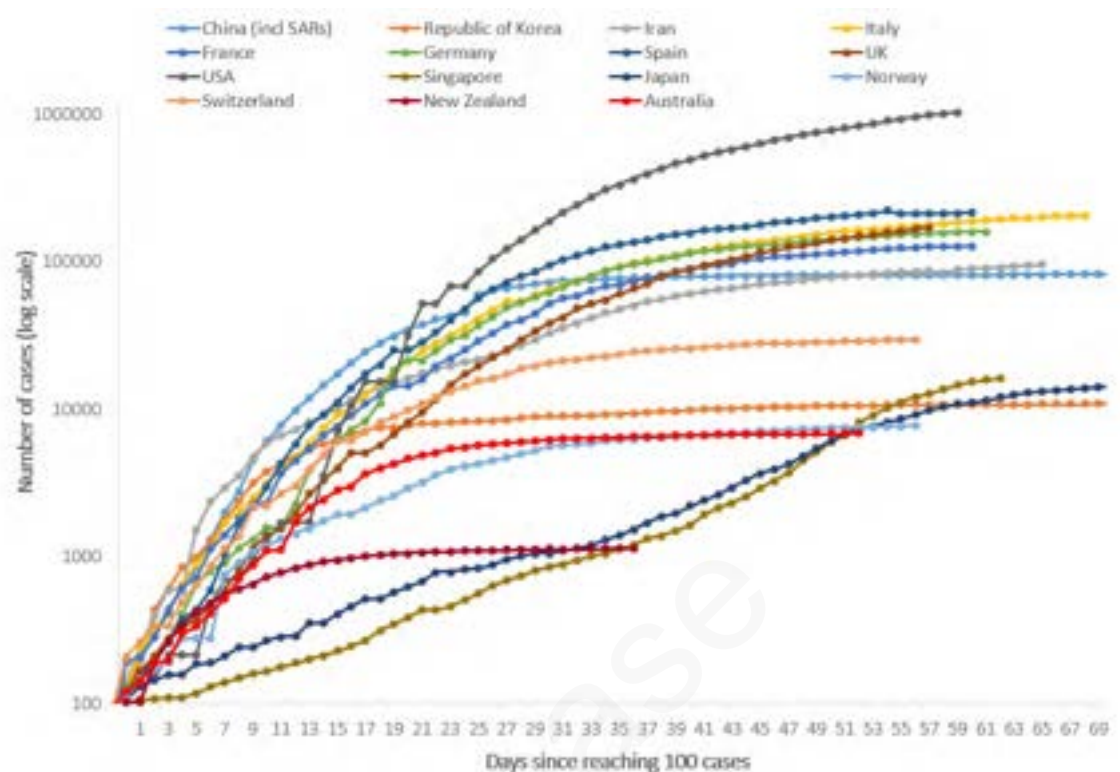
- The global number of confirmed COVID cases is currently **3,344,274**, including **238,775** deaths (John Hopkins).
  - A total of **86,614** new cases, including **5,359 deaths** have been reported since yesterday's Situation Report.
- The majority of deaths are from the United States of America (**23%**), Italy **and** the United Kingdom (**12% each**), Spain and France (**11% each**) (WHO SitRep).
  - Based on the number of reported cases, the global case fatality rate is approximately 7.1%. The risk of death reportedly increases with age.
- The outbreak among residents of migrant worker dormitories in Singapore continues.
- The UK reports that it is over the peak of their epidemic. However it is too early to be sure if this apparent decline will be sustained. With the phased relaxing of measures for countries in the region occurring over the coming weeks, a second wave or continuation of the current wave remains a possibility.
- The number of new cases reported in Indonesia has fluctuated between 200 and 450 new cases per day for the past two weeks.
- Cases in India and Bangladesh remain trending upwards, but the rate of new infections is slowing slightly.
- In the Pacific no new cases or deaths have been reported in the Northern Mariana Islands, Fiji, New Caledonia, Papua New Guinea, French Polynesia or Timor-Leste in 3 days.

**Fig 4. Number of confirmed COVID-19 cases reported in the last seven days by country, territory or area, from the WHO Coronavirus 2019 (COVID-19) Situation Report 102 of 1 May 2020**

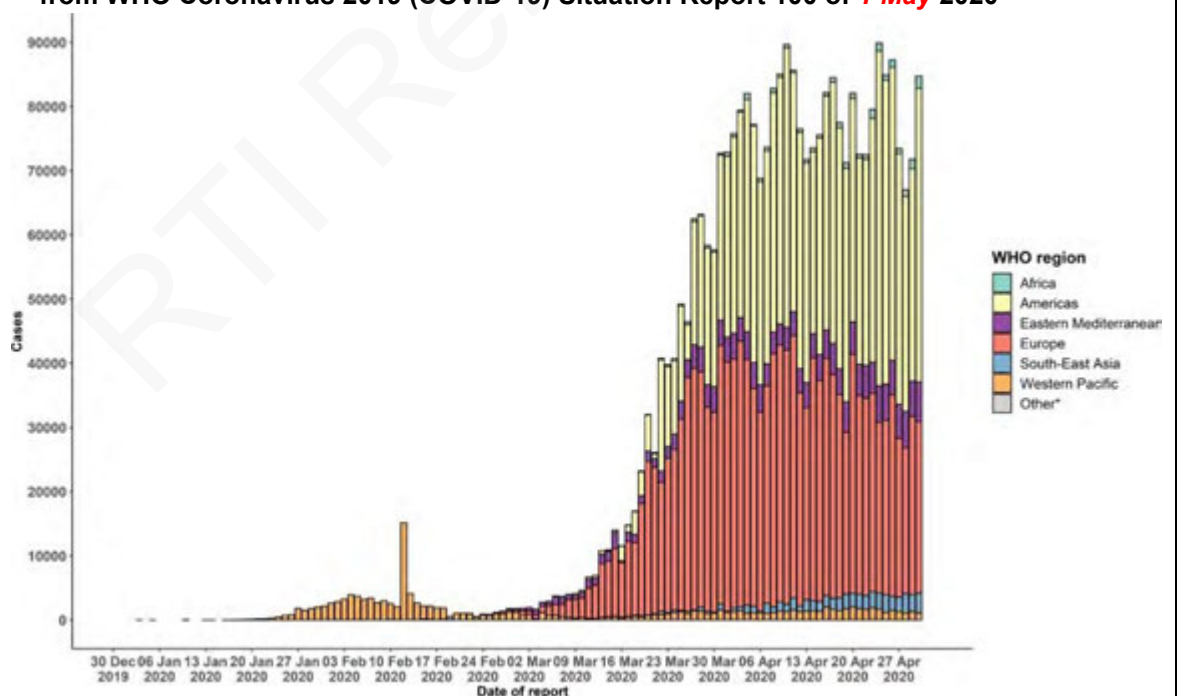




**Fig 5. Logarithmic epidemic curve of confirmed cases in the days after the first 100 cases of COVID-19 for various countries, as at 1500 hrs 2 May 2020**



**Fig 6. Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, from WHO Coronavirus 2019 (COVID-19) Situation Report 100 of 1 May 2020**



#### International response

#### WHO

- On 30 April 2020, the WHO Regional Director for Europe announced that in the Europe:
  - cumulative cases have increased by 15 per cent in the past week to 1,408,266;
  - deaths have increased by 18 per cent in the past week to 129,344; and
  - accounts for 46% of cases and 63% of deaths globally.
- On 30 April 2020, the International Health Regulations (2005) Emergency Committee met and:
  - agreed that the outbreak still constitutes a public health emergency of international concern (PHEIC); and