Outbreak Management Plan – Rydges Swanston

Updated 14 June 2020 at 20:10h (S. McGuinness)

Epi update 13 July 15:00

Purpose

The purpose of this document is to provide an update on the current status of the Rydges on Swanston Street Outbreak.

Governance

Outbreak Management team

Functional role	Name:	Mobile No: REDACTED	Email:
Outbreak Lead	Simon Crouch Sarah McGuinness Ramona Muttucumaru Naveen Tenneti		REDACTED
Case and Contact Lead	REDACTED		
Epidemiology Lead	REDACTED		publichealth.intelligence@dhhs.vic.gov.a u
DHHS Command	Jason Helps		
Joint Intelligence Lead	REDACTE D		
Communicatio ns and Media Lead	REDACTED		
Outbreak Squad Coordinator	REDACTED		
Administrative Support Officer			

Outbreak Management Team meeting dates

First meeting – 1830 on Tuesday 26 May 2020. Second meeting – 1130 on Wednesday 27 May 2020 Third meeting – 1000 on Thursday 28 May 2020 Fourth meeting – 1000 on Friday 29 May 2020 Fifth meeting – 1000 on Saturday 30 May 2020 Sixth meeting – 1000 on Sunday 31 May 2020 Seventh meeting – 1230 on Monday 1 June 2020 Eighth meeting – 1300 on Tuesday 2 June Ninth meeting – 1300 on Wednesday 3 June Tenth meeting – 1300 on Thursday 4 June Eleventh meeting – 1300 on Friday 5 June Twelfth meeting – 1300 on Saturday 6 June Thirteenth meeting – 1300 on Monday 8 June Fourteenth meeting – 1200 on Thursday 11 June Fifteenth meeting – 1300 on Friday 12 June

Outbreak summary (Epi)

A total of **17** cases of COVID-19 epidemiologically associated with the Rydges Hotel on Swanston Street. have been notified to the department in Victoria (an additional case notified in QLD brings the total to 18). One is **REDACTED** the Rydges Hotel; six are security guards working at the hotel, one is a **REDACTED** (HCW) working at the hotel, nine are household close contacts of a staff member (secondary contacts – this includes one QLD notification) and one is a close contact of a household contact of a staff member. The first case was notified on 26 May 2020. Rydges Swanston Street was being used for hotel quarantine of returned travellers, specifically positive COVID-19 cases. All staff cases were in those that worked night shift. The first seven staff cases worked overlapping shifts on May, and it is hypothesised that there may have been a common exposure on this date. However, the 8th staff case only worked at the hotel from 24-27 May inclusive.

A case (**REDACTED**) was notified in Queensland on 5 June, symptom onset 1 June 2020. This case is included in the epi curve but is NOT counted in Victoria case numbers as was diagnosed in Queensland. This case had six close contacts in Victoria that were investigated by the department. (COVID-net ID - Rydges outbreak **REDACTED**). The most recent staff case (notified on 9 June 2020) was detected on return-to-work testing, but reported an onset date of 4 June 2020, which is eight days after the end of **RE** last shift. The case was in isolation during their infectious period (last date of work was 27 May 2020). A new case was notified on 10 June 2020 in a household contact of the most recently notified staff member, who until 27 May 2020 was sharing a room with the staff member.

As of 10 June 2020, five cases show genomic link to a single detainee family. As of the 12 of June 2020,120 close contacts have been identified and all close contacts have been tested. All results so far have been negative; 3 close contacts have pending results for day 11 testing and one is yet to be tested. Rydges is now planned to re-open as a quarantine hotel, but not for positive cases.

On 12 June a new case was notified to the department in a previously known household close contact **REDACTED** of three confirmed cases (one of whom is a security guard staff member) following a positive day 11 swab while in home isolation.

On 18 June a case was notified to the department in a contact of the case notified in QLD. This case, residing in Victoria, had been identified as a close contact and commenced home isolation on 6 June. The case developed symptoms 11 June and went for testing on 17 June.

Total Confirmed cases	17 (18 including the case diagnosed in QLD)		
Total active cases	0		
	Household: 8		
Relationship to exposure site	Staff: 8		
	Social: 1		
Sex distribution	Female: 🔂 Male: 💦		
Age (median (range))	25 REDA		
Indigenous	Indigenous 🖪 Non-Indigenous: 民 Unknown: 民		
Date of first diagnosis	26 May 2020		
Date of first symptom onset	25 May 2020		
Date of most recent symptom onset	11 June 2020		
Total hospitalisations	1		
Current hospitalisations	0		
Total ICU admissions	1		
Current ICU admissions	0		
Deaths	0		
Presumptive first case	REDACTELREDACTED – first case notified) preliminary genomics have suggested links with sequences from a family of overseas returnees from REDACT in hotel detention at REDA		
Close contacts (active)	144 (4)		
Casual contacts (active)	46 (38)		
Actions (high level)	-		

*QLD case not included in the above summary table

Situation

The Rydges on Swanston Hotel currently operates as a mandatory quarantine hotel accommodating people who test positive to COVID-19 during mandatory quarantine and a number of close contacts.

The proposed index case R^{REDACTED}, with symptom onset 25 May, tested same day. The case worked the night of **N**May, having travelled by bus from **REDACTED** and then by train. He lives in a **REDACTED**

REDACTED REDA

Case 2 CTED works as a security guard. Symptom onset 25 May, tested 26 May. The case worked the night of **REM**ay (drove in by private car). Household contacts include **RED** housemates (all of whom work in security) in a **REDACTED** house (all are close contacts), none have been confirmed as cases.

Case 3 **REDA** works as a security guard. **RE** reported being asymptomatic and was tested at the request of **RE**employer following notification of the first case. Four close contacts were identified within a **REDACTED** household. **REREDACTED** and housemate **RED** household. **RE**REDACTED and housemate **RED** household.

Case 4 REDA works as a security guard. RE reported being asymptomatic and was tested at the request of the provide the request of the first case. Two close contacts were identified. Case 4 also worked as REDACTED and lives in a REDACTED

housemates RE is currently isolating at home. RE shift schedule is unclear.

Case 5 (ACT) works as a security guard. Reference and reported symptom onset on 27 May. Reference was tested at the request of Reference following notification of the first case. Two household close contacts were identified, both were tested.

Case 6 **REDA** is a **REDACTED** inurse whose symptom onset was 29 May (swabbed same day).**RE** last worked at Rydges on Swanston on **RE**May. **RE** also worked at the Marriott Hotel on **REDACT**. May (not during infectious period). **RE** presented to the Marriott Hotel for a shift on **R** May, but was turned away by the manager on the basis of **RE** recent work at the Rydges (as by then, the first 2 cases had been publicly reported). This interaction is currently being investigated to determine if it meets criteria for close contact. **R** did not work at another health care facility during **RED** frectious period **RE** lives in **REDACTED** (deemed a close contact) and was isolating at home until 4 June, at which time **RE**was transferred to **RED**, by ambulance due to worsening symptoms. **RE** was admitted to ICU on **R** June, transferred to ward on **R** June and granted clinical clearance from the department on 17 June.

Case 7 **REDA**, is a security guard whose symptom onset was 25 May **RE** lives in a **REDACTED** house with **REDACTED** (all of whom were deemed close contacts) and is currently isolating in emergency accommodation at the **REDA**, hotel. **RED** housemates have subsequently tested positive.

Four more cases (Cases 8, 9. 11 and 12) are housemates of **REDA** and had symptom onset 31 May and 1 June. One is a **REDACTE** with **REDAC**, who worked between **RED**. May.

Two more cases (Cases 10 and 13) are **REDA** and housemate of **RED**. One is asymptomatic and was in isolation prior to testing positive.

All staff who attended the site between 11-28 May were asked to seek testing for COVID-19. The majority of staff were tested on-site (swabs taken by on-site nurses, couriered to VIDRL). To date, results received from VIDRL include 127 negative and 2 positive results (cases 5 & 6). Some staff sought testing elsewhere – this includes 19 Alfred health nurses who all tested negative. The highest attack rate is seen amongst security guards, with 5/42 testing positive (remaining security guards have tested negative).

One staff member **REDACTED** was transferred from their home and presented to **REDACTED** emergency with ongoing fevers, shortness of breath and productive cough. They were admitted to **REDACTED** ICU late on **R**June on oxygen, not ventilated.

A housemate of the HCW, who was not mentioned to the department as a close contact, had moved to **RE**, the day after the case was interviewed, has since tested positive in Qld. This case will not be counted in Victoria numbers (as diagnosed in Qld). **RE** had six close contacts in Victoria who are being followed up. During infectious period, this case took the Skybus (22min journey) to Tullamarine airport and flew to **REDACTED** A review of the CCTV footage by Skybus management has not revealed any close contacts that have resulted from this exposure. The Melbourne to **REDACTED** flight has been traced by the **REDACTED** Public Health Unit.

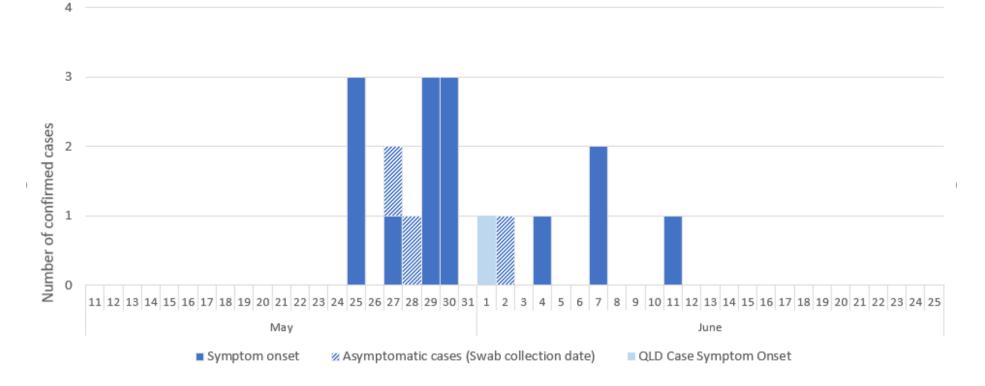
Case 14 is a staff member previously identified as a close contact of the Rydges exposure site (i.e. who worked there during the period 18-28 May but had no identified contact with a confirmed case). This case was notified to the department and interviewed on 9 June and has a symptom onset date of 4 June. The case was in isolation during their infectious period and does not report having close contact with anyone during this time.

Case 15 is a household contact of case 14 (not previously disclosed / identified) with symptom onset 7-June, diagnosed 10-June. This case is **REDACTED** however, did not work during their infectious period. This case was not in isolation during their infectious period, and visited a butchers, a chemist, and a friend.

Case 16, symptom onset 7 June, diagnosed 12 June, is a household contact of Cases 12 and 13. Case 16 had been isolating at home for four days with Case 12 before they moved to hotel

accommodation. Case 13 (asymptomatic) had been isolating at the same home in a bedroom with ensuite.

Case 17, symptom onset 11 June, diagnosed 18 June, is a close contact of the REP notified case. They were identified as a close contact and commenced isolation on 6 June.



Epidemiological and clinical investigation

Figure 1: Epidemic curve for Rydges on Swanston Outbreak, by date of calculated symptom onset, including QLD case

*for asymptomatic cases symptom onset is estimated as first positive specimen collection date

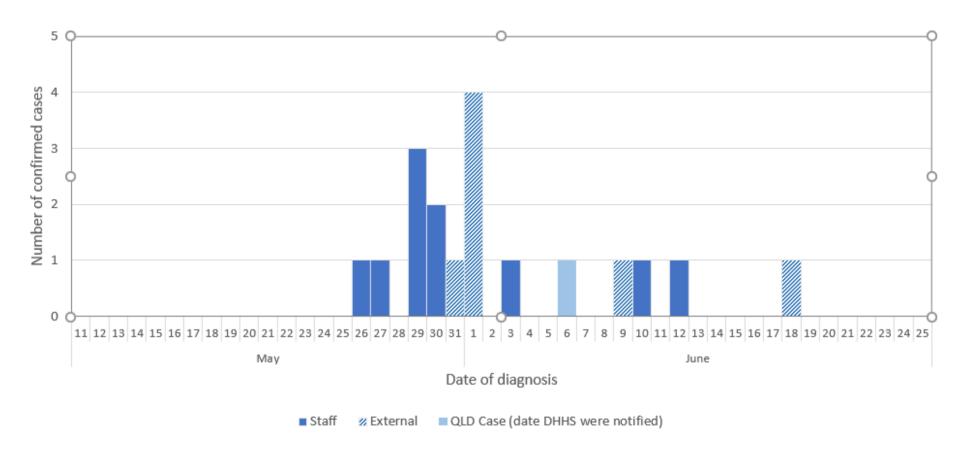


Figure 2: Epidemic curve for Rydges on Swanston Outbreak, by date of diagnosis, including QLD case

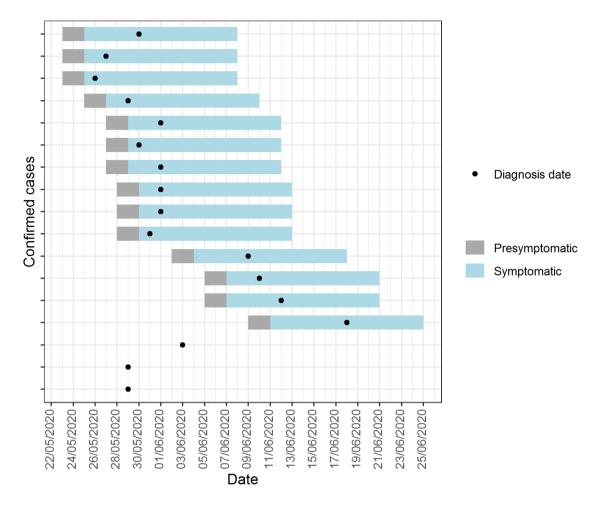


Figure 3: Onset date and incubation period for confirmed cases, Rydges on Swanston

Note: The timeline cascade will not include the case diagnosed in Queensland

Case definitions

Current COVID-19 case definition (as of 2 June 2020)

A person who tests positive to a validated SARS-CoV-2 nucleic acid test or has the virus identified by electron microscopy or viral culture.

Outbreak case definitions

Confirmed case:

A person tested positive for COVID-19 with an epidemiological link to the Rydges on Swanston Outbreak whose symptoms began on or after 11 May 2020.

Note: travellers who are in detention at Rydges on Swanston will be consider as a potential outbreak case if they have had direct contact with another confirmed outbreak case or if they are linked by genomic analysis.

Close Contact:

Any person who has had exposure of 15 minutes face to face or two hours in the same enclosed space to a confirmed outbreak case.

Casual Contact:

A person who has had any contact with, or worked a parallel shift with, a confirmed outbreak case.

Acquisition period:

11 May – 25 May 2020 (14 days prior to symptom onset in a case). All staff who spent 30 minutes or more at Rydges during this period have been asked to be tested.

Case follow-up

All cases are well having completed isolation.

Close Contact Follow up

Case 1 has 5 household contacts who have been designated as close contacts.

Case 2 has 3 household contacts who have been designated as close contacts. A work contact from another security job was initially designated as a close contact, but on review of the situation this person had <=5 minutes contact with the case while maintaining physical distancing and therefore does not meet the close contact criteria.

Case 3 has three household contacts who have been designated as close contacts – two have subsequently been confirmed as cases.

Case 4 has 2 household contacts who have been designated as close contacts.

Case 5 has 5 household contacts who have been designated as close contacts – four have subsequently been confirmed as cases.

Case 6 has 1 household contact who has been designated as a close contacts.

Case 7 has 3 household contacts who have been designated as close contacts.

Cases 8-14 are all household contacts of the above staff cases.

On 5 May, Queensland health notified us of a previously unrecognised household close contact of case 6 who reported moved out of the house (to Queensland) on 31 May 2020. This person has subsequently tested positive.

As of 30 May, any staff member who attended the Rydges on Swanston Hotel for 30 minutes or more during the period 18 May to midday on 28 May inclusive is now considered a close contact and is being asked to self-quarantine for 14 days since their last visit to the hotel. This includes:

- R Medi7 GPs
- **RE** Alfred health nurses
- RE Unified Security staff
- R YNA nurses
- RE Hotel staff
- R SwingShift nurses
- Outbreak Squad nurses
- **B** DHHS staff (AOs and team leaders)
- RDJPR staff member

Environmental investigation

The hotel is located at 701 Swanston Street, Carlton.

A visit was made to the site by an IPC outbreak squad nurse on 27 May. Photographs and a report have been uploaded to PHESS. Key findings included:

- The hotel has no dedicated cleaning staff. Cleaning of common areas (including the lift used to transport positive cases) is currently performed by hotel staff (including the night manager), using a range of products that are unlikely to be effective against SARS-CoV-2 (e.g. PineOCleen, Glen20, home variety wipes and chux). Terminal cleaning of hotel rooms (following exit of a case) is contracted out to a cleaning company called lkon.
- A 'deep clean' involving cleaning and disinfection using agents with antiviral activity is yet to be performed in the areas where the two infectious staff members worked
- Security staff are wearing vinyl gloves and non-approved masks for their shifts
- Education around PPE usage and separation of "clean" and "dirty" tasks is needed

Discussion with hotel management over processes for garbage disposal and linen changes:

- The hotel provides linen and ask guests to change their own linen
- Soiled linen is to be placed in double bags and placed outside rooms
- Soiled linen is then collected by people wearing full PPE including gown.

Discussion with nurses who cleaned room REDAC and changed linen:

Information provided by hotel management and AO notes re: contact of guests from room (the **REDACTED** genomically linked with staff cases) with environment & staff:

- The guests arrived or RED May and departed RE May
- The room was very messy and the kids drew on the walls
- Two nurses provided assistance in cleaning and changing bedlinen on RE May as the REDAC was very flustered managing REDACTE
- The **REDA** is reported to have been taken for a walk on 18th May, accompanied by 4 security guards (wearing masks and gloves) and two nurses (wearing full PPE) we are awaiting CCTV footage to confirm this and glean more information about environmental contact
- The area where guests are taken for a break is an empty room. Guests are advised not to touch anything. The nurses call the lift and open doors for guests when needed. This info is to the best of my knowledge and what I am informed

Genomic Investigation

Request:

Request for expedited genomic testing. Preliminary genomic analysis has identified that the first case and second case cluster genomically with sequences from a family **REDACTED** that are overseas returnees from **REDACTED**. Based on PHESS notes, they appear to have been moved into the Rydges on **R**. May from the Crowne Promenade hotel. Symptom onset dates range from 9-15 May.

Details of these genomic findings are at REDACTED

Results

As of 13 July, MDU has provided information on the genomic analysis of sequences associated with The Rydges on Swanston Outbreak. The onwards transmission from cases associated with the original Rydges outbreak has seeded five clusters that are distinct and well-supported clusters

associated with the main Rydges Parent Cluster. These clusters are examples of local transmission and diversification, the groups are all very closely related, and the availability of more sequences could allow for the merging or splitting of these clusters.

The main parent cluster contains sequences from **RED** he earliest identification of this cluster was in sequences from security staff at the Rydges Hotel which cluster with a family of REP overseas returnees from REDACTE that were in hotel isolation at the Rydges. This parent cluster also includes sequences from cases associated with REDA (previously REDACTE) Family Outbreak, REDACTED REDACTED REDACTED REDACTED REDACTED sequences from five different public housing towers, a single case from REDACTED REDACTED and several other complex cases. There were 34 additional cases genomically linked that are not known to be epidemiologically linked to an outbreak. The first of the seeded clusters from the main parent cluster includes sequences from three cases, all of these were associated with the **REDACTED**

The second of the seeded clusters contains sequences from 15 cases. This includes 11 cases epidemiologically linked to the **REDACTED** Dutbreak, one associated with Ilim **REDACTED**. Outbreak and three not linked to clusters that all live in **REDACTED**. One of these is a **REDACTE** two others are spouses.

The third seeded cluster contains sequences from 38 cases. This includes those from the REDACTE, REDACTED),

and two cases associated with

REDACTED

complex cases in **REDACTE** and a single case from **REDACTED**. This also includes three cases that are still under investigation, four cases not linked to a cluster with an unknown source of acquisition and another case that reported recent overseas travel and commenced hotel detention **R** June at Crown Metropol and subsequently tested positive and was moved to the Brady Hotel.

The fourth seeded cluster contains sequences from 45 cases. This includes 14 from the **REDA REDACTED** six from cases that attended the **REDACTED**, two cases associated with separate public housing towers and a case from **REDACTED**. It also includes cases associated with several ELC (**REDACTED**) and workplaces (**RED**). Ten of the cases genomically linked were not known to be associated with an outbreak.

The fifth seeded cluster contains sequences from 32 cases. This contains 19 sequences from cases associated with **REDACTED** Outbreak and five from **REDACTED** Eight additional cases were not known to be associated with an outbreak and three of these have been identified as an unknown source of acquisition.

As at 10 July 2020, there are 274 cases that are genomically linked to the **REDAC** Parent Cluster. Due to travel restrictions, there are less travel associated importations of COVID-19 and more local transmission occurring. This means sequences from cases are very similar to one another and therefore, it is harder to distinguish and determine relatedness between them. A sequence from an outbreak may be genomically linked to a different cluster than another sequence from that same outbreak, however please note this does not definitively mean the outbreak has multiple sources of infection as these cluster groups are very closely related and constantly changing with availability of more sequence data.

Hypothesis

Transmission of SARS-CoV-2 has occurred at the workplace from a COVID case in quarantine (either directly, via fomites or through contact with an unidentified intermediary staff case).

Control measures

Case 1, 3 and 5 were originally isolated at the Rydges, but were moved to the Novotel with other cases (due to staffing concerns at Rydges).

Identified close contacts have been quarantined.

Cleaning of work areas to be undertaken (commercial deep clean completed on 28 May).

Testing of all contacts from the acquisition period (from 11 May 2020) to be conducted at the workplace on 27 and 28 May (nurses from YNA to collect swabs; sent to VIDRL for testing).

All staff members who attended the Rydges on Swanston Hotel for 30 minutes or more during the period 18 May to midday on 28 May inclusive are considered close contacts. Rationale for this period is that it extends from 7 days prior to symptom onset in first case (and a date which is almost 14d ago), until the date on which a full clean and disinfection of the site was undertaken (28th May).

Staff who only attended the site between 11 and 17 May inclusive AND who have had a negative test have been advised that they can continue their usual activities.

Staff who have only attended the site since 28 May have been asked to only work at Rydges while an investigation is underway.

Stakeholder mapping

Rydges Hotel Management:

Key contact: Rosswyn Menezes – General Manager, REDACTED @evt.com, hotel:
 REDACTED mobile: REDACTED

Your Nursing Agency (YNA)

SwingShift (mental health nurses):

Eric Smith – Managing Director; RED Swingshift.com.au, phone REDACTED

Alfred Hospital (nursing staff)

REDACTED

Unified Security

 Key contact: Nigel Coppick – National Operations Manager (Victoria Office), REDA punifiedsecurity.com.au, mobile REDACTED phone REDACTED

Medi7 GPs:

 Key contact: Stuart Garrow – Clinical Lead, Melbourne Quarantine Hotel Doctor Team, REDACTED Dgmail.com, REDACTED

DJPR:

 Key contact: Rachaele May – DJPR Hotel Quarantine Agency Commander, REDACTED ______agriculture.vic.gov.au, djprcovidaccom-lead@ecodev.vic.gov.au, mobile: REDACTED

Operation Soteria (Pam Williams, Merrin Bamert)

Issues/risks:

There is a high risk of transmission from COVID positive cases being detained in the hotel to the staff members working at the hotel. This is due to the inadequate education and cleaning procedures that are currently in place. The cleaning duties of communal areas were the responsibility of the security staff; specifically, for the elevators used to transport COVID positive cases. Because of this, there is a

high likelihood of fomite spread from poor cleaning products being utilised, poor PPE used by security staff, and a lack of education surrounding cleaning practices. At risk populations include staff members from the hotel, DHHS staff, nurses, and various other HCWs that were onsite to attend to the people in hotel detention. Outside of the hotel, there has been onward household transmission to partners and housemates.

Risk communication

Key events

[Include information on internal communication, including briefings and communication with the Minister's Officer. Detail when media releases and press conference are released/take place]

Escalation point	Date of escalation	
Deputy Public Health Commander CCOM	17:00, 26 May 2020	
Public Health Commander	17:48, 26 May 2020	
Chief Health Officer	20:10, 26 May 2020	
Minister's Office	20:10, 26 May 2020	

Communication with exposed settings

Initial request for information from the Rydges on the evening of 26 May 2020.

Key messages – general public

Approved media holding lines as of 26 May 2020

Statement

The department has been notified of a COVID-19 case in a staff member at Rydges on Swanston, Melbourne.

The source of acquisition for this case is under investigation and all potential sources of transmission will be explored.

All identified close contacts of the staff member have been contacted and placed into quarantine.

Any staff who are classified as close contacts of the case will be tested.

Thorough cleaning of relevant parts of the hotel is being undertaken, alongside other appropriate public health actions including contact tracing, isolation and quarantine where required.

Background

The hotel is not currently open to the public.

There are some returned overseas travellers observing their quarantine at the hotel.

The cause of the infection is under investigation.

Timeline of outbreak

Date	Action		
26/05/2020	Case 1 notified to DHHS – REDACTED interview completed		
	Emergency accommodation arrangements made for Case 1		
26/05/2020	Worksafe informed		
26/05/2020	Email sent to Operation Soteria team & Rydges Swanston with the following directions:		
	 Request to provide background as to duties/jobs/functions undertaken by the REDACTED and RE, interactions with other staff and guests 		
	- Request for rosters for shifts worked by manager since 11 th May REDACTED		
	- Request for floor plan of hotel		
	 Request for list of staff that had been swabbed and whether any staff are symptomatic 		
	 Instruction that 'A clean of all common areas, and the cases' direct work areas will need to occur' 		
27/05/2020	On-site visit by IPC nurse from outbreak squad (report in TRIM)		
	 Noted that a 'deep clean' involving application of a disinfectant with antiviral properties had not yet been carried out 		
	 Noted inconsistencies in staff use of PPE and issues with inappropriate use of PPE (masks not applied correctly, incorrect use of gloves) 		
	 Noted that the REDACTED 's duties include cleaning of common areas and the lift used to transport COVID-19 cases 		
27/05/2020	Case 2 notified to DHHS – security guard REDACTED		
27/05/2020	Request made to DJPR to arrange a commercial 'deep clean' of all common areas / areas visited by two		
27/05/2020	Decision made to ask all staff who have been on-site for 30 minutes or more from 11 May 2020 (14 days prior to symptom onset date for Cases 1 and 2) to undergo testing for COVID-19		
27/05/2020	Contact made with Stuart Garrow (RED GP providing on-site services)		
	 Confirmed that 3 x medical staff who have been on-site since 11th May attended Rydges on 27/5/2020 for sample collection 		
	 Confirmed that RE is happy to contact any staff members with positive results through any positive results in staff 		
28/05/2020	Contact made with Alfred Hospital re: Alfred staff who attended site between 11-27 May (19 staff). Spreadsheet received from infection prevention and control team.		

28/05/2020	Full commercial bioclean of common/affected areas conducted by Ikon cleaning – documentation received and filed in TRIM folder		
28/05/2020	On-site visit by outbreak squad nurses to provide IPC education		
29/05/2020	Notification of Case 3 by ACL at ~1000h; case interview completed		
	Emergency accommodation arrangements made for Case 3		
	Notification of Case 4 by Doctor at ~1200h; case interview completed		
	Notification of Case 5 by VIDRL at ~1800h; case interview completed		
	Notification of Case 6 by VIDRL at ~2000h; unable to contact case		
29/05/2020	Following notification of cases 3 and 4, decisions made that:		
	 Any staff who have worked at Rydges on Swanston since the 11th May (14 days before symptom onset in Case 1 & 2) should not work elsewhere, unless they have not been on site in the past 14 days AND have had a negative swab. Information relayed to relevant agencies (including Swing Shift, YNA, Unified Security, Alfred Health, Rydges, DHHS) 		
	 Directive to implement at least daily commercial cleaning (using disinfectant with antiviral activity) with a particular focus on common areas and high touch surfaces 		
	Following notification of cases 5 and 6 decision made to limit movement of staff and patients in and out of premises effective immediately:		
	No new admissions to hotel		
	 Minimising all movement of residents outside their rooms (except for emergency care) 		
	 No movement of staff between hotel sites, including all health staff, AOs, team leaders, support staff, DJPR team leaders, security and hotel staff (time frame currently unclear) 		
30/05/2020	Actions from OMT #5:		
	At least once daily cleaning & disinfection of all common areas and frequently touched surfaces to commence		
	Ongoing education and PPE training for staff		
	Explore option of embed IPC lead from a health service		
	 Quarantine staff who attended for 30 min or more between 18 May and midday on 28 May for 14 days since last exposure 		
	Emergency accommodation for cases 3 & 5		
	Communications to staff		
3/06/2020	Late on 3 June, PHU staff became aware that a close contact of the exposure site worked two shifts at a correctional facility when they were supposed to be in quarantine. The close contact is asymptomatic and has received one negative test; a second test is pending. Although the public health risk is considered low, the correctional facility, Justice Health and Corrections Victoria have been advised of this situation.		

4/06/2020	PHU staff arranged for an ambulance to transport one of the staff cases REDACTED deteriorated. The case is currently under close observation in ICU.		
4/06/2020	Due to difficulties in staffing the Rydges, alternative accommodation was sought. Residents have been moved today to a different hotel in the CBD. Department outbreak control squad nurses have visited this hotel and are providing training and support to enable the lifting of restrictions. It is expected that following training of security staff today (3 June) that restrictions can be lifted tomorrow (4 June)		
5/06/2020	Notified by Queensland health of an additional close contact – housemate of case REDAREDACTED who moved out on RE May 2020 (during cases' infectious period). Now symptomatic and has sought testing in QLD		
5/06/2020	Request made to Operation Soteria for CCTV footage and documentation of movements of staff and family in hotel.		
	AO handover notes provided (scanned PDF placed in TRIM)		
08/06/2020	Household contacts associated with outbreak called and provided verbal and written advise to seek testing prior to end of quarantine (c 11 advised).		
9/06/2020	All close contacts associated with outbreak being called and provided provided verbal and written advise to seek testing prior to end of quarantine (day 11 advised).		
9/06/2020	Notification of Case 14 (in Victoria)		
	Case 14 interviewed – security guard identified as close contact of exposure site; has been in quarantine since 27/5		
10/06/2020	Notification of Case 15 (in Victoria)		
	Case 15 interviewed – household close contact of case 14; had not been in quarantine as case 14 had advised had been quarantining separately from rest of household (in studio)		
12/06/2020	Notification of Case 16 (in Victoria)		
14/06/2020	Awaiting results on 2 close contacts for day 11 testing.		
	Outbreak control squad visited site on 13 June and advised that Rydges site was not ready for opening and that an effective terminal clean needed to be undertaken and correct signage put up.		
17 June 2020	Preliminary information from MDU linking the case associated with Embracia Aged Care genomically to cases from Rydges on Swanston St Outbreak.		
18 June 2020	Department notified of Case 17.		

OMT meeting actions list

Outbreak Meeting 1 - 26th May

Action	Due date	Responsible person
Request further information from Rydges on:	27 May 2020	REDACTED
- Interactions with guests		
- Rosters		
- Floor plan		
- Duties of case		
Test all staff who have worked the same shift (including staff handed over to and from) as the case	27 May 2020	Simon Crouch
Confirm staff not working across different hotels	27 May 2020	Jason Helps
Clean areas case has worked	27 May 2020	REDACTED
Outbreak squad visit	27 May 2020	REDACTED
Media holding lines	26 May 2020	

Outbreak Meeting 2 - 27th May

Action	Due date	Responsible person
Document and map staff interactions and contacts with case 1 and case 2 across hotel to provide comprehensive mapping of potential contact points	28 May 2020	Pam
Coordinate testing for those who had overlapping shifts with cases as a priority	27 May 2020	REDAC TED
Work with team to procure hotel floor plans and staff rosters	28 May 2020	REDA CTED
Draft lines for staff testing +/- letter	27 May 2020	Sarah
Complete on-site visit and provide report	27 May 2020	REDACTED
Interview case 2	27 May 2020	
Escalate outbreak brief to Brett via Finn	27 May 2020	Simon
Facilitate expedited genomics analysis	28 May 2020	REDACTED
Ensure pathology slips are labelled as URGENT: priority 1 – outbreak (Rydges) to ensure quick turnaround of results by VIDRL	27 May 2020	

Outbreak Meeting 3 – 28th May

Action	Due date	Responsible person
Prepare materials (video and written) on proper hygiene and use of PPE, to be distributed to staffing agency leadership (both health services and security guards) via Pam Williams	30/05/2020	Outbreak Squad REDACTED
Liaise with Katherine Ong and intelligence leads to determine current knowledge about eye protection vs face shields for PPE when collecting deep nasal and oropharyngeal swabs	29/05/2020	REDACTED
Discuss potential support for procuring contact details and complete rosters of all staff in the hotel from the Public Health OMT (via RED)	28/05/2020	REDACTE D
Liaise with VIDRL and REDACTED re: coordination of collection & testing of samples from Rydges hotel staff	28/05/2020	Sarah M
Coordinate distribution of negative test results to staff	28/05/2020	Sarah MREDACT
Confirm with DJPR that commercial cleaning is underway	28/05/2020	Sarah M
Follow up status on genomics	28/05/2020	Sarah M

Outbreak Meeting 4 - 29th May

Action	Due date	Responsible person
Procure staff contact details for Rydges staff	29/05/2020	REDACTED
Conduct interview & contact tracing for case 3	29/05/2020	
Investigate standard cleaning arrangement at the hotel and report back to team	29/05/2020	
Ensure that negative results received from VIDRL are sent via SMS to staff	29/05/2020	

Outbreak Meeting 5 – 30th May

Action	Due date	Responsible person
Complete interview of Case 6 and assess potential close contacts at Marriott hotel	30/05/2020	ССОМ
Chase genomics over the coming week		Intelligence
Arrange at least daily cleaning and disinfection of all common areas & frequently touched surfaces	30/05/2020	Operation Soteria (Merrin)
Continue education regarding PPE, hand hygiene and discuss these with security company management	30/05/2020	Outbreak squad
Embed IPC lead from a health service		Operation Soteria (Merrin)

Limit movement of guests today only, until full environmental clean	Operation Soteria
Maintain block on new admissions of well people until full clean today	Operation Soteria
Quarantine staff who attended for 30 min or more between 18 May and midday on 28 May inclusive for 14 days from last exposure	REDACTED
Arrange emergency accommodation for Case 5	DHHS commander
Liaise with WorkSafe	CCOM
Communicate to various work groups / agencies who have been on-site	Merrin (Operation Soteria)
	REDACTED
	CCOM (DJPR, YNA, Swingshift, Medi7, Alfred, Unified Security, outbreak squads)

Outbreak Meeting 11 - 8 June

Action	Due date	Responsible person
Follow up cleaning practices at the hotel prior to 4/06/2020	5/06/2020	REDACTED
Share any updates regarding the nurse who worked at REDACT, with the OMT team	5/06/2020	
Sarah to collate questions for finding details about the genomically linked family, REDAC to summarise info known so far; both to escalate concerns about the family's movement within the hotel to Pam Williams	5/06/2020	Sarah <mark>REDACT</mark>
Schedule OMT meetings for Saturday and Monday	5/06/2020	Sarah
Clarify plan to move COVID-19 cases back Rydges Swanston St with Merrim Bamert from Operation Soteria	09/06/20	REDACTED
Advise all close contacts of the requirement for day 11 clearance testing	09/06/20	REDAC, and CCOM team
Provide IPC advice given to hotel security staff and AOs	09/06/20	REDACTE Ind Outbreak Squad team

Outbreak Meeting 14 - 11 June

Action		Due date	Responsible person	
Contac REDACTED site visit to Rydges	Outbreak squads to arrange	12/06/2020	Sarah	

Chase CCTV footage from Rydges	12/06/2020	Sarah
Ensure that emergency accommodation arrangements are underway for two most recently reported cases	12/06/2020	REDACTE D
Provide an update to DJPR and Operation Soteria	12/06/2020	Sarah
Follow up results of close contact day 11 testing	12/06/2020	CCOMREDACTED
Escalate discussion of whether staff working at the COVID-19 positive hotel can work elsewhere to Deputy PHC	12/06/2020	Sarah

Line list

List does not include the QLD notified case.

Case	PHESS ID	Age Group	Sex	Onset Date	Diagnosis Date	Clinical Status	Cluster Link
17	320203567743	REDACTE	RED)AC	2020-06-11	2020-06-18	Well, isolation complete	Social
16	320203518386	D	ACT ⁾ ED	2020-06-07	2020-06-12	Well, isolation complete	Household
15	320203585777			2020-06-07	2020-06-10	Well, isolation complete	Household
14	320203506661			2020-06-04	2020-06-09	Well, isolation complete	Staff
13	320203514855			NA	2020-06-03	Well, isolation complete	Household
12	320203514833			2020-05-29	2020-06-01	Well, isolation complete	Household
11	320203515292			2020-05-29	2020-06-01	Well, isolation complete	Household
10	320203515305			2020-05-30	2020-06-01	Well, isolation complete	Household
9	320203515315			2020-05-30	2020-06-01	Well, isolation complete	Household
8	320203515304			2020-05-30	2020-05-31	Well, isolation complete	Household
7	320203514863			2020-05-25	2020-05-30	Well, isolation complete	Staff
6	320203514969			2020-05-29	2020-05-30	Well, isolation complete	Staff
5	320203509872			NA	2020-05-29	Well, isolation complete	Staff
4	320203511748			NA	2020-05-29	Well, isolation complete	Staff
3	320203513656			2020-05-27	2020-05-29	Well, isolation complete	Staff
2	320203487846			2020-05-25	2020-05-27	Well, isolation complete	Staff
1	320203450603			2020-05-25	2020-05-26	Well, isolation complete	Staff

Outbreak demographic summary

Includes Victorian notified cases only.

		N	Perc %
Total		17	100
	Female	4	23.5
Sex	Male	13	76.5
	Unknown	0	0
	0-9	0	0
	10-19	2	11.8
	20-29	11	64.7
	30-39	2	11.8
	40-49	1	5.9
Age group	50-59	1	5.9
	60-69	0	0
	70-79	0	0
	80-89	0	0
	90+	0	0
	Indigenous	0	0
Indigenous status	Non- Indigenous	16	94.1
	Unknown	1	5.9
	Admitted, not known to be in ICU	0	0
	Admitted to ICU	0	0
	Home isolation	0	0
Clinical status	Hospital in the home	0	0
	Deceased	0	0
	Well, isolation complete	17	100
	Not recorded	0	0

Shifts worked	by staff cases	at Rydges
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Date	Case 1	Case 2	Case 3	Case 4	Case 5	Case 6	Case 7	Case 8
Details	REDACTED							
	320203450603	320203487846	320203509872	320203513656	320203514863	320203514969	320203511748	320203506661
	REDACTED							
Role	REDACTED	REDACTED	REDACT	REDAC	REDACTE	REDACT, EDA , REDA,	REDACTED	REDACTE
Sx onset	25/05/2020	25/05/2020	Asymptomatic	27/05/2020	25/05/2020	29/05/2020	Asymptomatic	04/06/2020
11 May	REDACTED							
12 May	REBROTED							
13 May								
14 May								
15 May								
16 May								
17 May								
19 May								
20 May								
21 May								
22 May								
23 May						2100 0100		

	REDACTED	
24 May		
25 May		
26 May		
27 May		
28 May		

*text in red denotes shifts worked during infectious period

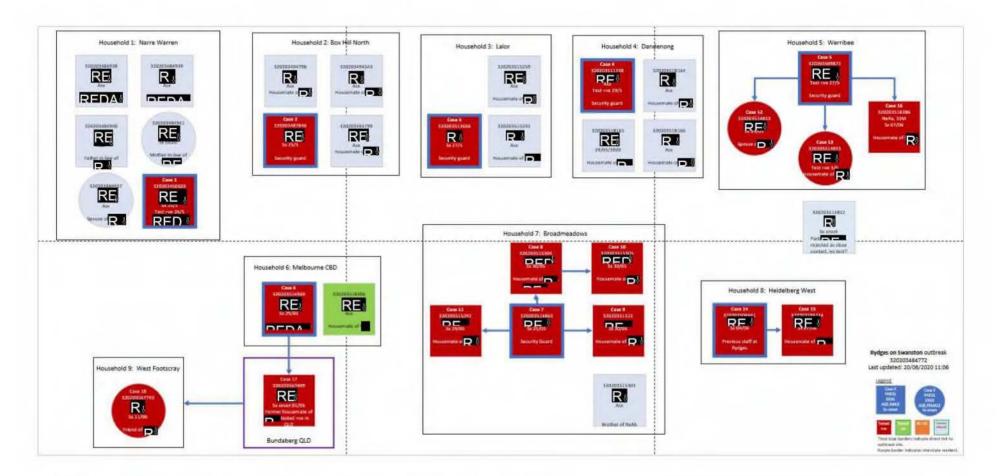


Figure 4: Visio transmission diagram, Rydges Swanston, Updated 21 June 2020, 15:00