



Special Commission of Inquiry into the Ruby Princess

EXHIBIT 68

Statement of Shaun Devitt, dated 9 June 2020

SPECIAL COMMISSION OF INQUIRY INTO THE RUBY PRINCESS

Statement of Shaun Devitt, 9 June 2020

A Introduction

- 1 My full name is Shaun Adam Devitt.
- 2 I am the Director of Media in the Strategic Communications and Engagement Branch of the NSW Ministry of Health. I hold a Bachelor of Arts in Communication Journalism.
- 3 I began working at the NSW Ministry of Health in July 2018, and have been in my current role since that time.
- 4 Prior to working at the NSW Ministry of Health, I was managing director of my own company, Deviate Media, and the majority of the work that I was doing was making current affairs television specials. Prior to that I worked at the Seven Network as a Development Executive and as a Supervising Producer.

B Role in reviewing reports

- 5 In my role, I typically review reports prepared internally at NSW Health that may potentially be of interest to the media. The purpose of my review is generally to consider whether such reports are clear and able to be easily understood by journalists and members of the public, as they are often released publically.
- 6 Typically my comments on a report will cover things like:
 - (1) highlighting important and relevant parts of the report at the beginning in a “key points” executive summary;
 - (2) using more colloquial language so the report is more easily understood by non-medical people; and

(3) if the subject matter of the report has already been in the media, making sure the report covers the topics and issues that are of interest to the media or corrects errors in media reports.

7 I am not a doctor, and as such I am not expected to make comments on NSW Health reports from a clinical perspective but may ask a clinician to clarify or simplify key points so they can be more easily understood by the public or the media.

8 I always have any reports I comment on approved by senior staff within NSW Health, such as Executive Directors, the relevant Deputy Secretary or the Chief Health Officer, who have direct knowledge of the matters in the report, including to make sure that any amendments I make to reports do not introduce inaccuracies, particularly from a clinical perspective.

9 In addition to commenting on reports, I also regularly attend meetings of public health officials across various branches of NSW Health, to make sure I am aware of matters that may be of interest to the media. For example, since the beginning of the COVID-19 pandemic, I have attended briefings of the NSW Public Health Emergency Operations Centre (**PHEOC**) on the response to the pandemic.

C The Ruby Princess Report

10 On 1 April at about midday, I attended a meeting in Dr Kerry Chant's office to discuss media strategy to respond to a request from Channel 7 who were producing a special report on the Ruby Princess. It is my recollection that it was during this meeting that Dr Chant asked me to review a report Dr McAnulty was compiling on the Ruby Princess to highlight any key points from a media and communications perspective.

11 At 1.38pm Dr Chant forwarded me an email that she had received from the Office of the Premier. This email attached a chronology of events compiled by

the Department of Transport. A copy of the email and its attachment appears at **Annexure SAD-1**.

- 12 At 5.43pm on 1 April 2020, I received an email from Dr Jeremy McAnulty (Executive Director of Health Protection NSW), which attached a draft copy of a report entitled "NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020" (**Ruby Princess Report**). A copy of Dr McAnulty's email and its attachment appear at **Annexure SAD-2**.
- 13 It is not unusual for me to review internal reports at the request of Dr McAnulty, Dr Chant or a member of their staff, as I explained above.
- 14 Consistent with my ordinary practice as outlined above, my approach in reviewing the draft Ruby Princess Report was to read the Report as a whole, highlight what I considered to be the key points, and suggest that they be included, sometimes in paraphrased form, in the "Key Points" section at the beginning of the Report.
- 15 I did not make any changes to the body of the Report.
- 16 My comments and suggested amendments to the "Key Points" section of the draft Report were based on information contained in the body of the draft Report I received from Dr McAnulty, information I had gleaned through attending PHEOC briefings, the chronology attached to the email from Dr Chant and my knowledge of media reporting on the Ruby Princess cruise ship up to 1 April.
- 17 To the extent that any of my amendments to the draft Ruby Princess Report introduced errors, those errors were unintentional, and were simply a reflection of my own understanding of the issues discussed in the body of the draft Report.
- 18 At 6.32pm that day, after I completed my review of the draft Report, I sent my updated draft back to Dr McAnulty for him to review. A copy of my email to Dr McAnulty and its attachment are **Annexure SAD-3**. It was my expectation that, if any of my edits or comments introduced errors, Dr McAnulty (or others) would

identify those errors based on their understanding of the matters dealt with in the Report, and would correct them.

Specific comments and amendments

- 19 The draft of the Ruby Princess Report I received from Dr McAnulty, and the draft that I sent back to Dr McAnulty, included proposed edits from other people. **Annexure SAD-4** is a copy of the draft Ruby Princess Report I sent to Dr McAnulty that shows only the changes and comments I made on the document in mark-up.
- 20 The changes I suggested to the draft Report, and the comments I made were to all to the “Key Points” executive summary. Specifically, I made the following suggestions:
 - (1) move a paragraph that was previously the fourth paragraph of the draft Report to the beginning to emphasise its contents;
 - (2) add a paragraph setting out the number of passengers screened by NSW Health. I suggested this because I was aware, from attending the PHEOC briefings, how much work had gone into assessing cruise ship and aeroplane arrivals, and I thought that information provided important context for NSW Health’s work on the Ruby Princess;
 - (3) add a paragraph regarding a multi-agency approach being involved in a cruise ship entering a NSW port. I believe this suggestion was based on the chronology I was provided with and on media reports which stated that a combination of State and federal agencies, including NSW Health, Australian Border Force and the NSW Port Authority, were involved in permitting the cruise ships to enter NSW ports;
 - (4) the addition of a sentence regarding correspondence between the NSW Port Authority and the ship’s doctor. In referring to “correspondence”, I was referring to the email between the ship and the Port Authority

referred to in the chronology attached to the email I received from Dr Chant. I was not referring to any other documents I had seen when referring to "correspondence", other than the documents attached to the email I received from Dr Chant; and

- (5) I added a comment that the audio recording of a VHF call between the NSW Port Authority and the doctor should be obtained if it existed. I thought there was a recording of a call between the Port Authority and the ship's doctor because there was a VHF call referred to in the chronology I was sent by Dr Chant.

No further involvement in Ruby Princess Report

- 21 After I emailed Dr McAnulty my comments on the draft Ruby Princess Report at 6.32pm on 1 April 2020, I had no further involvement in the drafting of the Ruby Princess Report, and did not see any further drafts of the Report.
- 22 In the course of preparing this statement, I have been shown a later version of the Report, sent by Dr McAnulty at 7.27pm on 1 April 2020. A copy of the email and the Report attached to it appears at annexure **SAD-5**. I can see from that version that, using the numbering at paragraph 20 above, Dr McAnulty accepted suggestion (1), deleted (2), substantially deleted (3), deleted (4) and deleted (5).

Signed:



Name: Shaun Adam Devitt

Date: 9 June 2020

From: Shaun Devitt (Ministry of Health) <[REDACTED]>
Sent: Wednesday, 1 April 2020 1:47 PM
To: Jeremy McAnulty
Subject: FW: Timeline
Attachments: image001.png; ATT00001.htm; ruby princess chronology.docx; ATT00002.htm; RE: BIO SECURITY DECLARATION; ATT00003.htm

Shaun Devitt

Director, Media Unit | **Strategic Communications & Engagement Branch**
NSW Ministry of Health | [REDACTED]
Tel [REDACTED] | Mob [REDACTED] | [REDACTED]
www.health.nsw.gov.au

We have moved to [REDACTED] on Monday 13 May 2019.



From: Kerry Chant (Ministry of Health)
Sent: Wednesday, 1 April 2020 1:38 PM
To: Shaun Devitt (Ministry of Health) <[REDACTED]>
Subject: Fwd: Timeline

Sent from my iPhone

Begin forwarded message:

From: "Kerry Chant (Ministry of Health)" <[REDACTED]>
Date: 1 April 2020 at 1:18:15 pm AEDT
To: Jeremy McAnulty <[REDACTED]>
Subject: Fwd: Timeline

Sent from my iPhone

Begin forwarded message:

From: Ehssan Veiszadeh <[REDACTED]>
Date: 25 March 2020 at 6:28:40 pm AEDT
To: "Kerry Chant (Ministry of Health)" <[REDACTED]>
Subject: FW: Timeline

Dear Dr Chant,

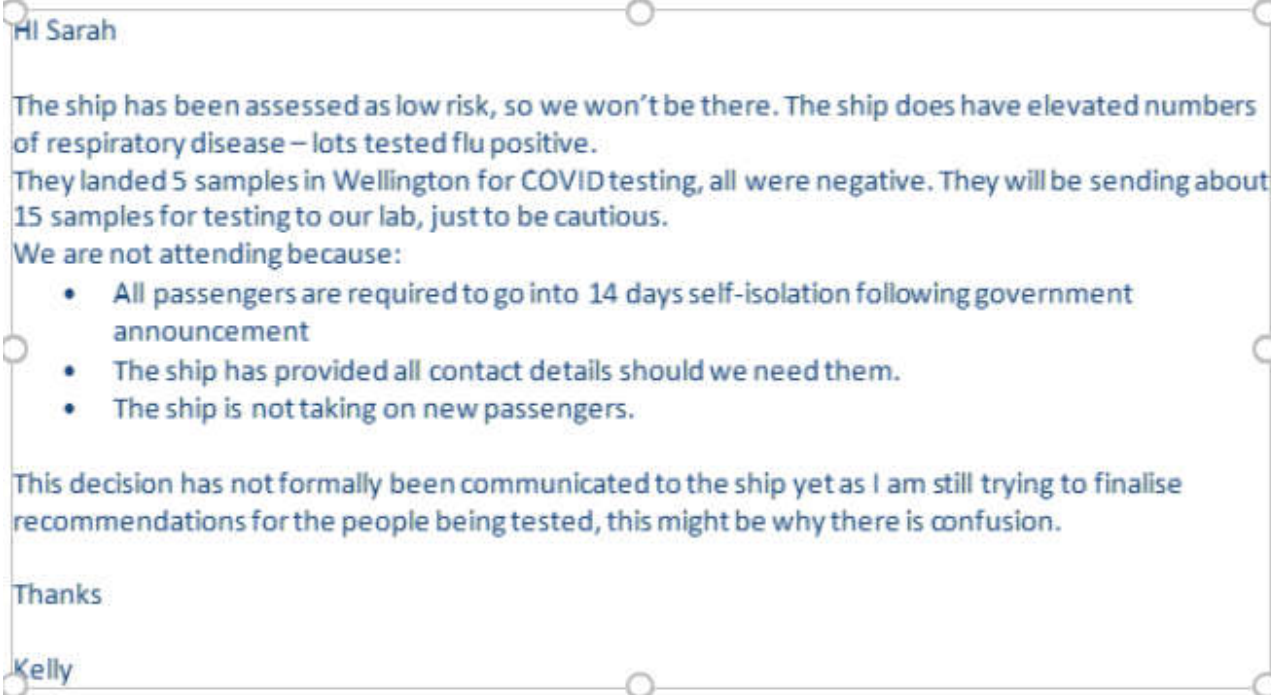
As discussed, please find attached information from Minister Constance's office that may assist with NSW Health's review into the Ruby Princess.

Regards,
Ehssan

Ehssan Veiszadeh
Director of Strategy
Office of the Premier
M: [REDACTED]
E: [REDACTED]

Chronology Ruby Princess 18th March, 2020

- Approximately **16:00Hrs** Valarie Burrows (Carnival) contacted Cameron Butchart (CB) on another matter and she also mentioned that there was a few sick people on board the Ruby Princess (there was no mention of Covid-19).
- 1638Hrs** after Sarah Marshall emailed Kelly Wressler at NSW Health Advice received from NSW Health in response set out below.



- 2003Hrs:** Ruby Princess Bridge sends Sydney VTS response to Port Authority standard Covid-19 Questions for entry (as per Update #6). The Bridge email copied in the "Ruby Senior Doctor".
 - What were the last 5 ports of call? - **Napier 15/03/20, Wellington 14/03/20, Akaroa 13/03/20, Port Chalmers 12/03/20, Fiordland 11/03/20**
 - Are there any ill passengers or crew on board? **Yes**
 - Are any crew members showing symptoms of Covid-19 on board? **No**
 - Has the vessel been in mainland China, Iran, Republic of Korea or Italy in the last 14 days? **NO**
 - Has any person on the vessel been in contact with a proven case of novel coronavirus infection in the last 14 days. **NO**
 - Are there any crew or passengers who have left, or transited through, mainland China or Iran, Republic of Korea or Italy less than 14 days ago? **NO**
- 2300Hrs;** Sydney VTS received a call from **Peter Dilibano (Senior Superintendent NSW, Ambulance)**, who had received the VTS phone number from Marine Area Command. Peter was calling to seek the latest arrival information on the Ruby Princess. The DVTSM thought this was odd as we don't often fetch calls from NSW Ambulance in this manner and alerted me.
- 2315Hrs:** CB called Peter Dilibano from NSW ambulance who then advised CB that he had received a call from Bibi Trokevici (Carnival Australia) at 1910 on the 18th advising him that the Ship Ruby Princess had two patients on board who were tested for COVID19 in New Zealand and were suffering respiratory symptoms and required Medical transport to Royal Prince Alfred

Hospital (RPA). Based on the information that NSW ambulance had received they would be treating the incident as **COVID positive**. They also advised that RPA would triage these patients as **COVID19** on arrival, and subsequently they had beds awaiting and ready.

- **2330Hrs: SYDNEY VTS** advise the Ship, via VHF, that their booking is denied and their agent is to call SYDNEY VTS urgently. In addition to this, VTS sought further information on the Sick passengers. VTS received the Human Health report at 0000 (attached).
- **23:40Hrs: CB alerts Emma Fensom (EF)**
- CB then tries to raise Carnival agents without any luck.
 - Bibi Trokevic
 - Valerie Burrows
 - Arnoldo Kretzig

The above three agents would have multiple missed calls from CB
- **0001Hrs: EF** advises TfNSW IMT by email:
 - We have been advised, within the last two hrs, by NSW Ambulance that RPA Hospital has been notified that there are persons on board Ruby Princess with COVID-19. Ruby Princess was due to enter Port Jackson at 0300 Thursday morning.
 - We have not been able to get anyone from NSW Health for further information/assistance.
 - We have delayed pilotage of the vessel until we receive guidance from NSW Health.
 - NSW Water Police have also been notified.
 - Please contact me when you are available to discuss. Please advise your contacts at NSW Health. I have left a phone message for Alex Barrell.
- **0001Hrs: CB** notifies Rob Rybanic (RR) of the situation who then manages to raise Paul Mifsud who advises RR that the ambulances for the Ruby Princess have not been called for COVID symptoms but advises the following information:
 - 1. Three ambulances are to meet ship for heart issues, septic ear infection & leg issue.
 - 2. 120 people are in quarantine on board.
 - 3. Samples are being landed for testing.
 - 4. NSW Health have deemed it low risk.
 - 5. NSW Health has not advised that there is COVID-19 potential cases on board.

The above patient information was also replicated in a Human Health Report and forwarded through to Sydney VTS.
- **0006Hrs: Ships Doctor, Staff Captain, Ships Master** (all on same call) advises VTS of the following information
 - 1. Three ambulances are to meet ship for heart issues, septic ear infection & leg issue.
 - 2. 120 people are in quarantine on board.
 - 3. Samples are being landed for testing.
 - 4. NSW Health have deemed it low risk.
 - 5. NSW Health has not advised that there is COVID-19 potential cases on board.

The above patient information was also replicated in a Human Health Report and forwarded through to Sydney VTS
- **0015Hrs: Ruby Princess's staff captain** sends a medical report across to Sydney VTS advising the following. *Good evening Please see attached document, as was submitted to NSW PH. NSW PH have cleared us for disembarkation without any conditions except general precautions. Please also be advised that all passengers and crew that are currently ill are isolated onboard (attached).*
- **0050Hrs: Phone Hook** up with Emma, Rob and I to discuss the above. Decision is made that NSW ambulance have received incorrect information and that the Ship should enter.

- **Approx. 00:50Hrs** – EF talks to Paul Mifsud who confirms above information provided to RR.
- **Approx. 00:50Hrs** – EF calls CB back and EF approves entry of ship.
- **0050Hrs:** DHM (CB) grants Ship (Ruby Princess) approval to enter Port Limits.
- **0050Hrs:** EF emails TfNSW IMT:
 - We have now just been advised by Carnival Australia (Ruby Princess) senior management that. NSW Health has determined it low risk, cleared the ship to berth, they are landing some swabs to be tested and that there are ambulances meeting the ship but that NSW Health have NOT said that the Ambulances are for COVID-19 nor have NSW Health said That there is COVID-19 ON BOARD.
 - We understand from NSW Ambulance that Carnival had booked the Ambulance for two people with upper respiratory issues and that those two people had been tested for Covid in NZ and the test results had NOT been received yet.
 - We have also just received confirmation from Ruby Princess Ships Doctor that:
 - 1. Three ambulances are to meet ship for heart issues, septic ear infection & leg issue.
 - 2. 120 people are in quarantine on board;
 - 3. Samples are being landed for testing.
 - 4. NSW Health have deemed it low risk.
 - 5. NSW Health has not advised that there is COVID-19 on board.
 - On the basis of this new information the ship has been re-confirmed for its original pilotage time of 0300 this morning. However, I have advised Carnival that if there is concern for the health and safety of our marine pilot at time of pilotage that the pilotage may be delayed.
- **0053Hrs:** Corona Virus Hotline calls Sydney VTS asking for an update in relation to Ruby Princess. Corona Virus Hotline states that they were advised by Snr Constable Andrews Sydney Water Police. VTS advises Corona Virus Hotline that NSW Health is aware and managing.
- **0150Hrs:** CB advises both Sydney Water Police & NSW ambulance that he has confirmation from both the Ships DR and the Paul Misfud (Senior Management, Carnival) that there seems to be a miscommunication. NSW Ambulance (Peter Dilibano) advises CB that regardless of this new information they need to act on the information that they received at 1910 from Carnival Australia and would be treating the incident as if it was **COVID19 Positive** case.
- **0215Hrs:** Home affairs contacts me seeking an update. CB advises them of everything above.
- **0215Hrs:** Australian Border Force call (ABF) CB seeking an update with the concerns that the Ship has 120 people in isolation and alerting CB that the Ship may need to go back to sea. CB advise them to act ASAP as at this stage the Ship was within Port limits.
- **0220Hrs** :ABF Call CB and advise that the Ship is clear to go alongside.
- **0229Hrs**– Ruby Princess secure at berth.

From: Ruby Staff Captain 1 <[REDACTED]>
Sent: Thursday, 19 March 2020 12:15 AM
To: SY_VTS
Cc: Ruby Captain; Ruby Bridge
Subject: RE: BIO SECURITY DECLARATION
Attachments: REPORT.PDF

Good evening

Please see attached document, as was submitted to NSW PH. NSW PH have cleared us for disembarkation without any conditions except general precautions. Please also be advised that all passengers and crew that are currently ill are isolated onboard.

Regards,

Sebastiano Azzarelli

Staff Captain
Ruby Princess
Office: 14016 | Pager: 28101 | Mobile: [REDACTED]
[REDACTED]

From: Ruby Bridge
Sent: Thursday, March 19, 2020 1:03 AM
To: Ruby Staff Captain 1
Subject: FW: BIO SECURITY DECLARATION

From: SY_VTS ([REDACTED]@portauthoritynsw.com.au)
Sent: Wednesday, March 18, 2020 11:59 PM
To: Ruby Bridge
Cc: SY_VTS
Subject: RE: BIO SECURITY DECLARATION

Good Evening,

Please send a copy of your vessels MARS declaration to Sydney VTS prior to your pilot boarding time. Failure to do so will result in a delay to your pilot boarding.

Regards,

Steve Howieson | Vessel Traffic Services Operator

Port Authority of New South Wales

[REDACTED] | Port Botany NSW 2036 Australia

T: [REDACTED]

www.portauthoritynsw.com.au

From: Ruby Bridge <[REDACTED]>

Sent: Wednesday, 18 March 2020 8:03 PM

To: SY_VTS <>

Cc: Ruby Captain <[REDACTED]>; [sydney.portagent@\[REDACTED\]](mailto:sydney.portagent@[REDACTED]); Ruby Staff Captain 1
[REDACTED]; Ruby Bridge <[REDACTED]>; Ruby Senior Doctor
[REDACTED]

Subject: RE: BIO SECURITY DECLARATION

Good day Sir,

Please read below arrival declaration as per your instruction.

- ➤ What were the last 5 ports of call? - **Napier 15/03/20, Wellington 14/03/20, Akaroa 13/03/20, Port Chalmers 12/03/20, Fiordland 11/03/20**
- ➤ ***Are there any ill passengers or crew on board?* Yes**
- ➤ ***Are any crew members showing symptoms of Covid-19 on board?* No**
- ➤ Has the vessel been in mainland China, Iran, Republic of Korea or Italy in the last 14 days? **NO**
- ➤ Has any person on the vessel been in contact with a proven case of novel coronavirus infection in the last 14 days. **NO**
 - ➤ Are there any crew or passengers who have left, or transited through, mainland China or Iran, Republic of Korea or Italy less than 14 days ago? **NO**

Kind Regards

F.Savarese

1st Officer

From: SY_VTS [[mailto:\[REDACTED\]](mailto:[REDACTED])]

Sent: Wednesday, March 18, 2020 9:20 PM

To: Ruby Bridge; Ruby Captain

Cc: SY_VTS; '[REDACTED]'

Subject: BIO SECURITY DECLARATION

Hello Captain,

- What were the last 5 ports of call?
- Are there any ill passengers or crew on board?
- Are any crew members showing symptoms of Covid-19 on board?
- Has the vessel been in mainland China, Iran, Republic of Korea or Italy in the last 14 days? What date did the vessel depart these countries.
- Has any person on the vessel been in contact with a proven case of novel coronavirus infection in the last 14 days.
- Are there any crew or passengers who have left, or transited through, mainland China or Iran, Republic of Korea or Italy less than 14 days ago?

Kind Regards,

Steve Howieson | Vessel Traffic Services Operator

Port Authority of New South Wales

[REDACTED] | Port Botany NSW 2036 Australia
PO Box 25, Millers Point | NSW 2000 Australia

E: [REDACTED]

T: [REDACTED]

www.portauthoritiesnsw.com.au

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To the extent that the matters contained in this email relate to services being provided by Princess Cruises and/or Holland America Line (together "HA Group") to Carnival Australia/P&O Cruises Australia, HA Group is providing these services under the terms of a Services Agreement between HA Group and Carnival Australia.

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Australian Government

**Department of Agriculture,
Water and the Environment**

Human Health Report

This is a COPY of the Human Health Report submitted to the Department of Agriculture, Water and the Environment. If the Master or Agent of this vessel becomes aware that the information contained in this report is inaccurate, incomplete or out of date, they must complete a new report correcting the information as soon as practicable. Failure to provide this information is in breach of the *Biosecurity Act 2015*.

Vessel Particulars

Vessel Name

RUBY PRINCESS

IMO

9378462

Call Sign

ZCDY2

Registration/Official #

737959

Country of Registry

BERMUDA

Vessel Type

Cruise Vessel

Vessel Email

princesscruises.com

Arrival Details

Voyage #

RU2007

Agency to which any updated conditions will be sent

CARNIVAL AUSTRALIA SYDNEY

Human Health

1.) Have any persons died on board during the current voyage?

N

1.1) How many persons died?

1.2) Cause or suspected cause of death:

2.) Have any persons become ill or shown signs of illness in the past 14 days?

Response Number

Y

128

2.1) Is any person on board the vessel displaying any of the following symptoms?

2.1.1) Temperature over 38°C (if no thermometer is available, any person suspected of having a temperature should be reported)

Y

24

2.1.2) Acute unexplained non-itchy skin rashes or lesions, and non-itchy rashes or lesions caused by illness or exposure to hazardous agents (but not heat rashes, dermatitis, eczema, or similar common skin conditions)

2.1.3) Muscle aches, diarrhoea, severe headaches or vomiting (but not vomiting caused by inebriation or motion sickness)

Y

6

2.1.4) Severe bruising or bleeding from the nose, ears, eyes,

mouth, anus or skin (but not in a person pre-disposed to nosebleeds or haemorrhoids, or has cuts and abrasions)		
2.1.5) Glandular swelling in armpits or neck		
2.1.6) Prolonged loss of consciousness where a person cannot be roused (but not loss of consciousness caused by consumption of alcohol, drugs or medications, fainting or sleeping)		
2.1.7) Persistent coughing and difficulty breathing with no apparent cause and no history of similar symptoms (but not persistent coughing and difficulty breathing caused by asthma, heart disease, obesity, chronic bronchitis or emphysema)		
2.1.8) Except in the case of a person with restricted mobility or an otherwise healthy young child - an inability to disembark from a vessel without assistance		
2.1.9) Yellowing of the skin/whites of the eyes		

2.2) Has the ill person(s) on board:

2.2.1) Been in contact with birds/bird products/someone suspected/confirmed of having Avian influenza in the last 14 days		
2.2.2) Eaten raw poultry/raw poultry products in the last 14 days		
2.2.3) Handled samples suspected of containing Avian Influenza virus in the last 14 days		
2.2.4) Travelled Africa, South/Central America or the Caribbean in the last 6 days and do not have a valid yellow fever vaccination certificate?		
2.2.5) Been in Africa in the last 21 days		
2.2.6) Been in contact with camels or bodily fluids from a camel, including having been coughed or sneezed on by a camel, or drunk raw camel milk or consumed camel meat in a country in the Middle East?		

2.3) Gastro-intestinal illness

2.3.1) Cases of diarrhoea and/or gastro intestinal illness have been recorded in the vessel's medical log during the current voyage and/or the last 21 days

6

2.3.2) How many passengers and crew were on board during the current voyage and/or last 21 days

Passengers	Crew
------------	------

2647

1148

2.3.3) Was there any situation on board, which may lead to infection or the spread of disease

N

Details:

2.a) Has the vessel been in mainland China on or before 1 February 2020 and less than 14 days ago?

N

2.b) Has any person on the vessel been in mainland China on or after the 14 February and less than 14 days ago?

N

How many persons?

2.c) Has any person on the vessel been in contact with a proven case of novel coronavirus infection in the last 14 days?

N

How many persons?

End of Human Health Report

Submitted by

RUBYPRINCESS

Submitted on

18/03/2020 19:21

Annexure SAD-2

From: Jeremy McNulty
Sent: Wed, 1 Apr 2020 17:43:22 +1100
To: Shaun Devitt ([REDACTED])
Subject: Ruby Princess Risk Assessment Report 31 March 2020 - draft copy sw
Attachments: Ruby Princess Risk Assessment Report 31 March 2020 - draft copy sw.docx

Hi S
Use this version
Thx
J

NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

Key Points

- The Ruby Princess Cruise ship departed Sydney on 8 March to cruise around New Zealand and returned to Sydney on 19 March 2020.
- At the time of embarkation, the reported risk of transmission of infection in New Zealand was very low ~~and~~ as was the number of cases reported from the United States, (<https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>)
- As a large community with many thousands of people living in an enclosed environment, it is very common for cruise ships to have low levels of respiratory infections among passengers and crew. Outbreaks of influenza are common and can often affect a large proportion of those on board.
- NSW Health had enhanced risk assessment processing in place to assist the Commonwealth in assessing passengers arriving from international waters on cruise ships. This process was in place from February 2020 ~~and goes-went~~ far beyond the processes in most other jurisdictions ~~at that time~~. The risk assessment process included a review of information about disease on the ship and a review by a panel of public health physicians.
- International experience shows COVID-19 can rapidly spread among passengers if left on board, so self-isolation at home is a much safer option than leaving passengers on board. For extra assurance, should COVID-19 be subsequently diagnosed amongst passengers or crew, where a low risk assessment was concluded, passengers were allowed to disembark provided contacts details were available from the ship to allow them to be rapidly contacted.
- At the time of docking, disease rates on board were below the 1 ~~per cent~~% threshold previously set to identify outbreaks of influenza like illness, and no passengers or crew had been diagnosed or reported to Health Protection NSW to have COVID-19.
- Influenza had been detected among several passengers during the cruise indicating that influenza was the likely cause of respiratory illness on board the ship.
- Samples taken from five people on board the ship were reported to have tested negative for COVID-19 in Wellington NZ during the cruise.
- As an added precaution swabs taken for influenza testing were tested for COVID-19 and tested positive on 20 March 2020 allowing NSW Health to identify cases ~~who~~ were on board, and launch an investigation and intervention to control further spread.
- As soon as the cases were confirmed, NSW Health advised passengers and crew of the situation and asked all passengers to monitor for symptoms and self isolate for 14 days (as already required for people entering Australia from overseas).

Background to Australian Maritime Biosecurity Arrangements

The Australian Government determines the policy for people arriving from international ports into Australia. Under the Biosecurity Act 2015 (the Act) - section 44, the Australian Health Minister may determine entry requirements to prevent the entry, emergence, establishment and spread of a Listed Human Disease. The Biosecurity (Entry Requirements) Determination 2016 provides that an

individual may be screened by a biosecurity officer¹ or human biosecurity officer² via a questionnaire or equipment to identify signs and symptoms of a Listed Human Disease.

The Australian Government is responsible for border control, including granting pratique (permission to dock), and advising international travellers about any requirements to self-quarantine because of their international travel.

The Act requires that the operator of an international aircraft or vessel must report any ill travellers that show signs and symptoms of infectious disease, or if there has been a death on board. The report must be made to a biosecurity officer prior to arrival in Australia through the Pre-Arrival Report (PAR). These reports and other information from the ship are documented in the maritime arrivals reporting system (MARS).

Biosecurity Officers, officers of the Australian Department of Agriculture, Water and the Environment, apply standard questionnaires to assess pre-arrival reports of illness among passengers or crew, and consult where required with medical officers from NSW Health designated as Human Biosecurity Officers under the Act.

National Protocol for Assessing COVID-19 Risk from Cruise Ships

On the 6 March 2020, the Australian Government published a 'National Protocol for Managing Novel Coronavirus Disease (COVID-19) Risk from Cruise Ships' (the National Protocol) (**Appendix 1**) for use by personnel on international cruise vessels, biosecurity agencies and local port health authorities when there is a suspected or confirmed case of COVID-19 on-board. The National Protocol does not direct jurisdictions to do such assessments, but instead leaves it to their discretion.

Public health representatives of all state and territory governments including NSW were involved in the development and approval of the National Protocol. NSW Health indicated that in addition to implementing the National Protocol, additional risk assessment procedures for all cruise ships docking in NSW would be applied beyond those prescribed in the National Protocol.

On 15 March 2020 the Prime Minister announced that international cruise operations would cease and all travellers entering Australia from 0001 AEDST 16 March 2020 must undertake a precautionary self-isolation period for 14 days upon entry to Australia. Subsequent Guidance provided by the Australian Government stated that cruise ships would not be allowed to dock at an Australian port. There were a number of exceptions:

- Australian flagged ships
- Returning cruises to return Australians

¹ Biosecurity Officers are employed by the Australian Department of Agriculture, Water and the Environment.

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- Ships in transit that have left the last international port as of 12 pm on the 15 March
- Round Trip Cruises.

Ships potentially meeting the exception criteria are required to apply through the Maritime Processing Committee (MTPC), run by the Australian Border Force, for permission to dock at an Australian port and disembark passengers. Exempted ships will only be allowed to disembark at Sydney and Brisbane.

As of at least the 17 March, a factsheet (**Appendix 2**) from the Australian Border Force was available for the Cruise Lines to distribute to incoming international cruise ship passengers to advise that disembarking passengers would need to have an isolation period of 14 days, but commencing from the date of departure from the last foreign port, not from the date of arrival in Australia. The factsheet also notes that foreign nationals would be allowed to disembark ships with permission to return to their home country.

NSW Process for Assessing COVID-19 Risk from Cruise Ships

NSW Health has two long-standing ~~program (originally commenced in 1998)~~ public health programs for cruise ships visiting the Port of Sydney (~~originally commenced in 1998~~). These are the Cruise Ship Health Surveillance Program and the Vessel Inspection Program and they are managed by the South Eastern Sydney Local Health District's public health unit (SES PHU). SES PHU respond to reports of infectious disease cases, outbreaks, and other incidents of public health concern, and conduct environmental health inspections of vessels.

The SESPHU Cruise Ship Health Surveillance Program works closely with the cruise ship industry and the Australian Department of Agriculture and Water Resources to improve health surveillance on cruise ships and respond to outbreaks of infectious disease.

Cruise ships often have several thousand passengers on board, many of whom are older and have chronic medical conditions, as well as large numbers of crew (crew numbers may be 30-50% of the total ship population during a cruise). Respiratory infections (unrelated to COVID-19) and gastrointestinal infections among passengers and crew are common on cruise ships, sometimes increasing to significant outbreaks. Cruise ships are responsible for, and have policies to prevent, detect and manage outbreaks of infectious disease on board.

SESPHU increased monitoring for respiratory illness during January 2020 in response to the growing number of COVID-19 cases, including several dockside assessments.

By 15 February, NSW Health had implemented an enhanced surveillance screening process building on these existing risk assessment arrangements for cruise ships, and which required additional pre-arrival information from cruise lines and cruise ship medical teams for all cruise ships scheduled to dock in NSW ports. The process used from 15 February was documented and further refined on 19 ~~March~~ February (**Appendix 3**) and shared with other jurisdictions for consideration as a national approach.

Pre-arrival information was summarised by SES PHU in a standard reporting template and reviewed the day prior to arrival into NSW by senior public health officers from Health Protection NSW, ~~from~~ SES PHU and ~~from~~ the public health units of Sydney and Nepean Blue Mountains Local Health

Districts. Where the vessels were preliminarily classified as low risk, the panel determined the final risk assessment outcome through email discussions. The panel met by teleconference when there was disagreement about a low risk assessment rating or where the risk assessment classification was either medium or high.

On 22 February 2020 the NSW Chief Health Officer wrote to Cruise Line representatives to alert them to the enhanced risk assessment process for cruises and to provide specific guidance (*Enhanced COVID-19 Procedures for the Cruise Line Industry*) to reduce the risk of COVID-19 on their cruises (**Appendix 4**).

On 9 March 2020 additional information was sent to the cruise lines to recommend additional precautions and to strengthen their specimen collection capacity in case COVID-19 testing was required following the pre-arrival risk assessment (**Appendix 5**).

Details of enhanced pre-arrival risk assessment categories and response

Based on the pre-arrival risk assessment for each incoming cruise ship, the NSW Health cruise ship expert panel assigns one of three risk categories – Low, Medium or High – which informs further public health action. The screening process describes the criteria used in the risk assessment to classify the cruise (**Appendix 3**).

If a cruise is classified as Low Risk, usual disembarkation procedures are assumed and no NSW Health team attends the ship dockside to conduct screening of sick passengers and crew. In the event that NSW Health becomes aware that respiratory samples had been collected by the Ship medical team and tested negative for influenza, it was not required that these samples be routinely collected and tested by NSW Health for COVID-19 but an assessment on the need for further testing is made on a case-by-case basis.

If a cruise is classified as Medium Risk, a NSW Health team meets the ship dockside to conduct a further assessment and screening of symptomatic travellers and other travellers of concern due to their recent travel history. Pratique is not granted for disembarkation of other travellers until this further risk assessment is completed. Travellers identified for COVID-19 testing are required to self-isolate in a private cabin on board until the results are known. Other passengers are allowed to disembark with the standard Australian Government COVID-19 advice provided to all international arrivals.

If a cruise is classified as High Risk, such as when an ill passenger with suspected COVID-19 is identified, the ship would not be granted pratique or permitted to dock-disembark until an incident management team had been formed to assess the risks and prepare a plan of action to minimise the risk to the NSW community and to screen and manage other passengers and crew.

Procedures for responding to and management of cruise ships where there are confirmed cases of COVID-19 in passengers and/or crew are set out in the 26 February 2020 draft policy (**Appendix 6**).

Risk Assessments for the Ruby Princess cruises ending 24 February 2020 and 8 March 2020.

On 23 February, NSW Health conducted a detailed pre-arrival risk assessment for the 24 February docking of the Ruby Princess in Sydney, as required under the new enhanced pre-arrival risk assessment. The expert panel assessed this cruise of the Ruby Princess as being a **low risk** for COVID-19 and no NSW Health team attended dockside.

On 7 March, NSW Health again conducted a detailed pre-arrival risk assessment for the 8 March docking of the Ruby Princess in Sydney. The expert panel assessed the ship for that cruise as **medium risk**.

The basis for this **medium risk** classification was that, while the overall reported influenza-like illness rate among travellers (passengers and crew) was low, the expert panel expressed concerns about two passengers who had had onset of acute respiratory illnesses during the cruise and had spent several days in Singapore prior to boarding the cruise. Both passengers had also [no identified cause of their symptoms as been cleared of influenza after](#) swabs collected on board had tested negative for influenza.

A NSW Health team from South East Sydney Local Health District met the ship when it docked and screened approximately 360 people who had fever or respiratory symptoms, or who had a travel history of concern for risk of COVID-19.

In addition to the two passengers of concern, an additional four passengers and three crew were swabbed for COVID-19 testing. [These passengers and crew were isolated in their cabins. Disembarkation of other passengers was allowed after the assessment was complete. Embarkation of the next cruise passengers and crew was delayed from noon to 5pm, pending receipt of swab results](#)

All nine swabs tested negative for COVID-19 on the same day, and these people were released from isolation [and the next cruise allowed to embark.](#)

Risk Assessment for the Ruby Princess cruise 8-19 March

On 8 March 2020 the Ruby Princess left Sydney to cruise to New Zealand. The cruise included nine stops in different locations in New Zealand including a stop in Wellington on 14 March and a final stop in Auckland on 17 March before returning to Sydney to dock on 19 March 2020.

The itinerary for this cruise was shortened due to the cruise ship ban announced by the Prime Minister on 15 March 2020.

Prior to docking on the 19 March pre-arrival information was provided to the South East Sydney Public Health Unit from the Ruby Princess through the maritime arrivals reporting system (MARS) and through direct communications with the ship's medical team.

On 18 March the expert panel reviewed the risk assessment summary prepared from this information (**Appendix 7**).

The pre-arrival information indicated that there were 2647 passengers and 1148 crew on board. No passengers or crew reported contact with a COVID-19 case, and none reported being had in China, Iran, South Korea or Italy [\(the countries considered as a high risk for exposure at that time\)](#) within 14 days of embarking.

The Ruby Princess doctor reported that 104 of the 3795 travellers had reported an acute respiratory infection at some time during the cruise, including 36 who reported an influenza-like illness (ILI). A total of 48 patients had been tested for influenza of whom 24 tested positive. The ship doctor indicated that they had kept 10 respiratory swabs available for further testing.

The ship doctor also reported that five travellers had been tested for COVID-19 during their stop in Wellington (NZ) on 14 March, and that all five had tested negative for COVID-19.

The ship doctor reported that they were planning to medically disembark two unwell passengers by ambulance.

- One was an Australian man who had no travel history of significance apart from the visit to NSW and NZ. He had a fever and had been diagnosed with an upper respiratory tract infection and had tested negative for influenza. The reason for medical disembarkation was given as ischaemic heart disease, likely secondary to his infection, which had since improved on oseltamivir treatment.
- The second passenger was an Australian woman who had no travel history apart from NSW and NZ. She had been diagnosed with a febrile upper respiratory tract infection and had tested negative for influenza, [however was being treated with oseltamivir](#). She reported an exacerbation of severe lower back pain with signs suggestive of a femoral nerve radiculopathy. She was to be referred to an emergency department for imaging and specialist referral as needed.

The NSW Health expert panel assessed the available pre-arrival information and agreed that the cruise should be classified as Low Risk. They noted that the itinerary only included ports in New Zealand, considered a low risk country for COVID-19 and the lack of known contact with a COVID-19 among the travellers. The ILI rate was below the one per cent threshold generally recommended to indicate a respiratory outbreak, and 24 travellers had been confirmed with influenza infections. It was recommended to have the specimens that had been collected by the ship doctor tested for COVID-19 when the ship docked.

Communications to passengers

Carnival Corporation, the owner of the Ruby Princess have confirmed that the Australian Border Force factsheet (**Appendix 2**) was delivered to every passenger's cabin prior to arrival and that additional printed information was provided to passengers as they disembarked.

Events of 19 March

On the morning of 19 March, the Ruby Princess docked at the Overseas Passenger Terminal in Sydney. The two passengers noted in the pre-arrival assessment were transferred by ambulance to Royal Prince Alfred Hospital for further medical assessment, [as arranged by the ship](#).

SES PHU arranged for transfer of the 10 respiratory samples collected by the ~~S~~ship doctor for COVID-19 testing to the NSW Pathology COVID-19 reference laboratory at Randwick.

NSW Response

On 20 March 2020, NSW Health was notified that three of the ten swabs for people on the Ruby Princess cruise had tested positive for COVID-19 and were confirmed cases according to the national COVID-19 case definition current at that time (**Appendix 8**). Two of the cases were in passengers and one was in a crew member. The crew member had remained in isolation on board under the care of the ship's medical team. A fourth Ruby Princess passenger was confirmed as a case later on the same day having sought medical assessment after disembarkation.

NSW Health responded according to the NSW Health COVID-19 cruise ship response procedures for confirmed cases in passengers or crew (**Appendix 6**).

NSW Health immediately informed Carnival and obtained from them their passenger manifest with contact details for all passengers, and advised them to contact all of their crew about the need for self-isolation and to monitor for symptoms.

On 20 March 2020, NSW Health prepared and sent urgent communications to all Ruby Princess passengers by email and SMS messages to advise them of the confirmed cases on board and to reinforce the importance of self-isolation and regular self-monitoring for symptoms. The email had as an attachment the NSW Health's factsheet for people in home isolation, and links to further information on the NSW Health website.

In addition, on the 20 March 2020,

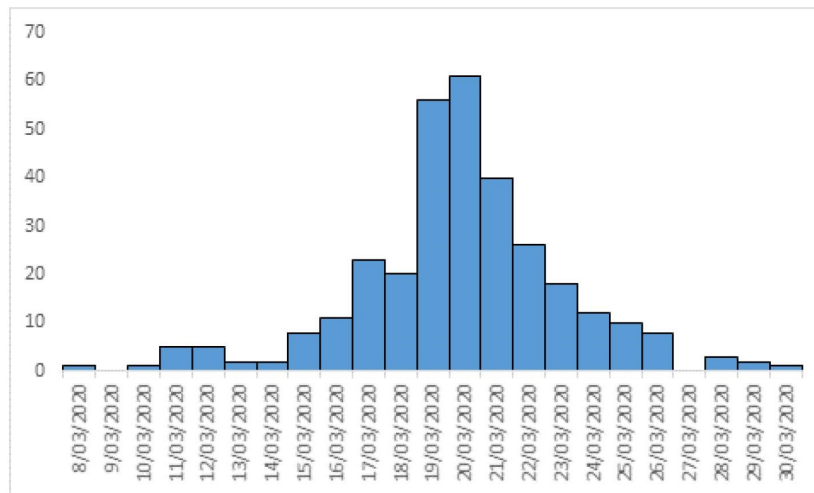
- a media release was also issued to support rapid dissemination of this information;
- other states and territories were notified; and,
- the National Incident Room was notified in relation to international passengers who might have already travelled out of Australia.

Commencing on 20 March:

- NSW Health commenced contacting by telephone all passengers from the Ruby Princess to check on their health and to re-inforce the requirement to self-isolate and to monitor their health. The Service NSW call centre was co-opted to assist with telephone contact.
- A letter was also prepared for Carnival Australia which they distributed by email to all passengers on behalf of NSW Health to further ensure receipt of the NSW Health advice.

As of ~~131 April 2020~~ ~~March~~, ~~337329~~ cases of COVID-19 acquired on the Ruby Princess have been diagnosed in NSW, including ~~two~~ ~~one~~ deaths, and there have been ~~nine~~ ~~six~~ secondary cases in close contacts of these cases. Please see Figure 1 below for epidemiological curve.

Figure 1: Cases of COVID-19 among passengers and crew of the Ruby Princess who reside in NSW, 8-30 March 2020, by date of onset as of 1 April 2020. Note that the cruise disembarked 6am 19 March 2020.



Further measures implemented by NSW to reduce the risk of COVID-19 from cruise ships

On 22 March 2020 NSW implemented additional measures to further reduce the risk of COVID-19-infected passengers or crew transmitting infection within NSW. This included a direction that no cruise ship crew or passengers to be allowed to disembark in NSW until anyone with symptoms consistent with COVID-19 are assessed, swabbed and tested for COVID-19 and found to be negative.

On 28 March 2020, Minister Hazzard, Minister for Health and Medical Research signed the *Public Health (COVID-19 Maritime Quarantine) Order 2020* restricting disembarkation of any person arriving in NSW on a vessel unless authorised by the Police Commissioner, with additional directions regarding other persons boarding or disembarking from vessels. See https://gazette.legislation.nsw.gov.au/so/download.w3p?id=Gazette_2020_2020-61.pdf.

Annexure SAD-3

From: Shaun Devitt (Ministry of Health)
Sent: Wed, 1 Apr 2020 18:32:14 +1100
To: Jeremy McAnulty
Subject: RE: Ruby Princess Risk Assessment Report 31 March 2020 - draft copy sw
Attachments: Ruby Princess Risk Assessment Report 31 March 2020 - draft copy sd.docx

Here you go!
Couple of edits/comments
Shaun Devitt

Director, Media Unit | **Strategic Communications & Engagement Branch**

NSW Ministry of Health | [REDACTED]

Tel [REDACTED] | Mob [REDACTED] | [REDACTED]

www.health.nsw.gov.au

We have moved to [REDACTED] on Monday 13 May 2019.



Health

From: Jeremy McAnulty
Sent: Wednesday, 1 April 2020 5:43 PM
To: Shaun Devitt (Ministry of Health)
Subject: Ruby Princess Risk Assessment Report 31 March 2020 - draft copy sw

Hi S

Use this version

Thx

J

NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

Key Points

- ~~NSW Health had enhanced risk assessment processing in place to assist the Commonwealth in assessing passengers arriving from international waters on cruise ships. This process was in place from February 2020 and went far beyond the processes in most other jurisdictions at that time. The risk assessment process included a review of information about disease on individual ships and a review by a panel of public health physicians.~~
- ~~Since enhanced screening has been conducted XXX number of passengers have been screened by NSW Health teams based on the risk assessment of a ship.~~
- ~~The decision to allow a ship to enter a port in NSW involves a multi-agency response at both State and Federal levels. NSW Health is just one component of this process and relies on the information provided by these other agencies.~~
- The Ruby Princess Cruise ship departed Sydney on 8 March to cruise around New Zealand and returned to Sydney on 19 March 2020.
- At the time of embarkation, the reported risk of transmission of infection in New Zealand was very low ~~and~~ as was the number of cases reported from the United States, (<https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>)
- As a large community with many thousands of people living in an enclosed environment, it is very common for cruise ships to have low levels of respiratory infections among passengers and crew. Outbreaks of influenza are common and can often affect a large proportion of those on board.
- ~~NSW Health had enhanced risk assessment processing in place to assist the Commonwealth in assessing passengers arriving from international waters on cruise ships. This process was in place from February 2020 and goes well beyond the processes in most other jurisdictions at that time. The risk assessment process included a review of information about disease on the ship and a review by a panel of public health physicians.~~
- International experience shows COVID-19 can rapidly spread among passengers if left on board, so self-isolation at home is a much safer option than leaving passengers on board. For extra assurance, should COVID-19 be subsequently diagnosed amongst passengers or crew, where a low risk assessment was concluded, passengers were allowed to disembark provided contacts details were available from the ship to allow them to be rapidly contacted.
- At the time of docking, disease rates on board were below the 1 per cent% threshold previously set to identify outbreaks of influenza like illness, and no passengers or crew had been diagnosed or reported to Health Protection NSW to have COVID-19. ~~Correspondence between NSW Port Authority and the ship's doctor support the fact that there was no clinical reason to believe the ship's passengers and crew were affected by a COVID-19 outbreak.~~
- Influenza had been detected among several passengers during the cruise indicating that influenza was the likely cause of respiratory illness on board the ship.
- Samples taken from five people on board the ship were reported to have tested negative for COVID-19 in Wellington NZ during the cruise.
- As an added precaution swabs taken for influenza testing were tested for COVID-19 and tested positive on 20 March 2020 allowing NSW Health to identify cases ~~who~~ were on board, and launch an investigation and intervention to control further spread.

Commented [D51]: Move this par up to emphasise our additional processes had been in place well before RP

Commented [D52]: We should add this stat in to show we have been diligent in screening passengers

Commented [D53]: Can we add a line here that stresses we are just one cog in the wheel??

Commented [D54]: We should include a line like this if we can obtain an audio recording of the Ports conversation with RP doctor

- As soon as the cases were confirmed, NSW Health advised passengers and crew of the situation and asked all passengers to monitor for symptoms and self isolate for 14 days (as already required for people entering Australia from overseas).

Background to Australian Maritime Biosecurity Arrangements

The Australian Government determines the policy for people arriving from international ports into Australia. Under the Biosecurity Act 2015 (the Act) - section 44, the Australian Health Minister may determine entry requirements to prevent the entry, emergence, establishment and spread of a Listed Human Disease. The Biosecurity (Entry Requirements) Determination 2016 provides that an individual may be screened by a biosecurity officer¹ or human biosecurity officer² via a questionnaire or equipment to identify signs and symptoms of a Listed Human Disease.

The Australian Government is responsible for border control, including granting pratique (permission to dock), and advising international travellers about any requirements to self-quarantine because of their international travel.

The Act requires that the operator of an international aircraft or vessel must report any ill travellers that show signs and symptoms of infectious disease, or if there has been a death on board. The report must be made to a biosecurity officer prior to arrival in Australia through the Pre-Arrival Report (PAR). These reports and other information from the ship are documented in the maritime arrivals reporting system (MARS).

Biosecurity Officers, officers of the Australian Department of Agriculture, Water and the Environment, apply standard questionnaires to assess pre-arrival reports of illness among passengers or crew, and consult where required with medical officers from NSW Health designated as Human Biosecurity Officers under the Act.

National Protocol for Assessing COVID-19 Risk from Cruise Ships

On the 6 March 2020, the Australian Government published a 'National Protocol for Managing Novel Coronavirus Disease (COVID-19) Risk from Cruise Ships' (the National Protocol) (**Appendix 1**) for use by personnel on international cruise vessels, biosecurity agencies and local port health authorities when there is a suspected or confirmed case of COVID-19 on-board. The National Protocol does not direct jurisdictions to do such assessments, but instead leaves it to their discretion.

Public health representatives of all state and territory governments including NSW were involved in the development and approval of the National Protocol. NSW Health indicated that in addition to

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implementing the National Protocol, additional risk assessment procedures for all cruise ships docking in NSW would be applied beyond those prescribed in the National Protocol.

On 15 March 2020 the Prime Minister announced that international cruise operations would cease and all travellers entering Australia from 0001 AEDST 16 March 2020 must undertake a precautionary self-isolation period for 14 days upon entry to Australia. Subsequent Guidance provided by the Australian Government stated that cruise ships would not be allowed to dock at an Australian port. There were a number of exceptions:

- Australian flagged ships
- Returning cruises to return Australians
- Ships in transit that have left the last international port as of 12 pm on the 15 March
- Round Trip Cruises.

Ships potentially meeting the exception criteria are required to apply through the Maritime Processing Committee (MTPC), run by the Australian Border Force, for permission to dock at an Australian port and disembark passengers. Exempted ships will only be allowed to disembark at Sydney and Brisbane.

As of at least the 17 March, a factsheet (**Appendix 2**) from the Australian Border Force was available for the Cruise Lines to distribute to incoming international cruise ship passengers to advise that disembarking passengers would need to have an isolation period of 14 days, but commencing from the date of departure from the last foreign port, not from the date of arrival in Australia. The factsheet also notes that foreign nationals would be allowed to disembark ships with permission to return to their home country.

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The SESPHU Cruise Ship Health Surveillance Program works closely with the cruise ship industry and the Australian Department of Agriculture and Water Resources to improve health surveillance on cruise ships and respond to outbreaks of infectious disease.

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If a cruise is classified as Medium Risk, a NSW Health team meets the ship dockside to conduct a further assessment and screening of symptomatic travellers and other travellers of concern due to their recent travel history. Pratique is not granted for disembarkation of other travellers until this further risk assessment is completed. Travellers identified for COVID-19 testing are required to self-isolate in a private cabin on board until the results are known. Other passengers are allowed to disembark with the standard Australian Government COVID-19 advice provided to all international arrivals.

If a cruise is classified as **High Risk**, such as when an ill passenger with suspected COVID-19 is identified, the ship would not be [granted pratique or](#) permitted to [deck-disembark](#) until an incident management team had been formed to assess the risks and prepare a plan of action to minimise the risk to the NSW community and to screen and manage other passengers and crew.

Procedures for responding to and management of cruise ships where there are confirmed cases of COVID-19 in passengers and/or crew are set out in the 26 February 2020 draft policy (**Appendix 6**).

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On 7 March, NSW Health again conducted a detailed pre-arrival risk assessment for the 8 March docking of the Ruby Princess in Sydney. The expert panel assessed the ship for that cruise as **medium risk**.

The basis for this **medium risk** classification was that, while the overall reported influenza-like illness rate among travellers (passengers and crew) was low, the expert panel expressed concerns about two passengers who had had onset of acute respiratory illnesses during the cruise and had spent several days in Singapore prior to boarding the cruise. Both passengers had also [no identified cause of their symptoms as been cleared of influenza after swabs collected on board had tested negative for influenza](#).

A NSW Health team from South East Sydney Local Health District met the ship when it docked and screened approximately 360 people who had fever or respiratory symptoms, or who had a travel history of concern for risk of COVID-19.

In addition to the two passengers of concern, an additional four passengers and three crew were swabbed for COVID-19 testing. [These passengers and crew were isolated in their cabins. Disembarkation of other passengers was allowed after the assessment was complete. Embarkation of the next cruise passengers and crew was delayed from noon to 5pm, pending receipt of swab results](#)

All nine swabs tested negative for COVID-19 on the same day, and these people were released from isolation [and the next cruise allowed to embark.](#)

Risk Assessment for the Ruby Princess cruise 8-19 March

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The itinerary for this cruise was shortened due to the cruise ship ban announced by the Prime Minister on 15 March 2020.

Prior to docking on the 19 March pre-arrival information was provided to the South East Sydney Public Health Unit from the Ruby Princess through the maritime arrivals reporting system (MARS) and through direct communications with the ship's medical team.

On 18 March the expert panel reviewed the risk assessment summary prepared from this information (**Appendix 7**).

The pre-arrival information indicated that there were 2647 passengers and 1148 crew on board. No passengers or crew reported contact with a COVID-19 case, and none reported being had in China, Iran, South Korea or Italy (the countries considered as a high risk for exposure at that time) within 14 days of embarking.

The Ruby Princess doctor reported that 104 of the 3795 travellers had reported an acute respiratory infection at some time during the cruise, including 36 who reported an influenza-like illness (ILI). A total of 48 patients had been tested for influenza of whom 24 tested positive. The ship doctor indicated that they had kept 10 respiratory swabs available for further testing.

The ship doctor also reported that five travellers had been tested for COVID-19 during their stop in Wellington (NZ) on 14 March, and that all five had tested negative for COVID-19.

The ship doctor reported that they were planning to medically disembark two unwell passengers by ambulance.

- One was an Australian man who had no travel history of significance apart from the visit to NSW and NZ. He had a fever and had been diagnosed with an upper respiratory tract infection and had tested negative for influenza. The reason for medical disembarkation was given as ischaemic heart disease, likely secondary to his infection, which had since improved on oseltamivir treatment.
- The second passenger was an Australian woman who had no travel history apart from NSW and NZ. She had been diagnosed with a febrile upper respiratory tract infection and had tested negative for influenza, however was being treated with oseltamivir. She reported an exacerbation of severe lower back pain with signs suggestive of a femoral nerve radiculopathy. She was to be referred to an emergency department for imaging and specialist referral as needed.

The NSW Health expert panel assessed the available pre-arrival information and agreed that the cruise should be classified as Low Risk. They noted that the itinerary only included ports in New Zealand, considered a low risk country for COVID-19 and the lack of known contact with a COVID-19 among the travellers. The ILI rate was below the one per cent threshold generally recommended to indicate a respiratory outbreak, and 24 travellers had been confirmed with influenza infections. It was recommended to have the specimens that had been collected by the ship doctor tested for COVID-19 when the ship docked.

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Events of 19 March

On the morning of 19 March, the Ruby Princess docked at the Overseas Passenger Terminal in Sydney. The two passengers noted in the pre-arrival assessment were transferred by ambulance to Royal Prince Alfred Hospital for further medical assessment, as arranged by the ship.

SES PHU arranged for transfer of the 10 respiratory samples collected by the Ship doctor for COVID-19 testing to the NSW Pathology COVID-19 reference laboratory at Randwick.

NSW Response

On 20 March 2020, NSW Health was notified that three of the ten swabs for people on the Ruby Princess cruise had tested positive for COVID-19 and were confirmed cases according to the national COVID-19 case definition current at that time (**Appendix 8**). Two of the cases were in passengers and one was in a crew member. The crew member had remained in isolation on board under the care of the ship's medical team. A fourth Ruby Princess passenger was confirmed as a case later on the same day having sought medical assessment after disembarkation.

NSW Health responded according to the NSW Health COVID-19 cruise ship response procedures for confirmed cases in passengers or crew (**Appendix 6**).

NSW Health immediately informed Carnival and obtained from them their passenger manifest with contact details for all passengers, and advised them to contact all of their crew about the need for self-isolation and to monitor for symptoms.

On 20 March 2020, NSW Health prepared and sent urgent communications to all Ruby Princess passengers by email and SMS messages to advise them of the confirmed cases on board and to reinforce the importance of self-isolation and regular self-monitoring for symptoms. The email had as an attachment the NSW Health's factsheet for people in home isolation, and links to further information on the NSW Health website.

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Commencing on 20 March:

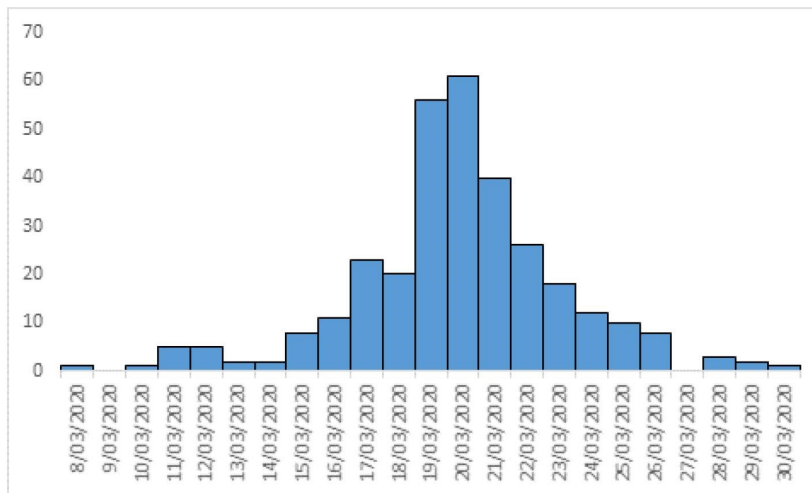
NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

- NSW Health commenced contacting by telephone all passengers from the Ruby Princess to check on their health and to re-inforce the requirement to self-isolate and to monitor their health. The Service NSW call centre was co-opted to assist with telephone contact.
- A letter was also prepared for Carnival Australia which they distributed by email to all passengers on behalf of NSW Health to further ensure receipt of the NSW Health advice.

As of ~~131 April 2020~~ ~~March~~, ~~337329~~ cases of COVID-19 acquired on the Ruby Princess have been diagnosed in NSW, including ~~twoone~~ deaths, and there have been ~~ninesix~~ secondary cases in close contacts of these cases. Please see Figure 1 below for epidemiological curve.

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Figure 1: Cases of COVID-19 among passengers and crew of the Ruby Princess who reside in NSW, 8-30 March 2020, by date of onset as of 1 April 2020. Note that the cruise disembarked 6am 19 March 2020.



Further measures implemented by NSW to reduce the risk of COVID-19 from cruise ships

On 22 March 2020 NSW implemented additional measures to further reduce the risk of COVID-19-infected passengers or crew transmitting infection within NSW. This included a direction that no cruise ship crew or passengers to be allowed to disembark in NSW until anyone with symptoms consistent with COVID-19 are assessed, swabbed and tested for COVID-19 and found to be negative.

On 28 March 2020, Minister Hazzard, Minister for Health and Medical Research signed the *Public Health (COVID-19 Maritime Quarantine) Order 2020* restricting disembarkation of any person arriving in NSW on a vessel unless authorised by the Police Commissioner, with additional directions regarding other persons boarding or disembarking from vessels. See https://gazette.legislation.nsw.gov.au/so/download.w3p?id=Gazette_2020_2020-61.pdf.

NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

Key Points

- NSW Health had enhanced risk assessment processing in place to assist the Commonwealth in assessing passengers arriving from international waters on cruise ships. This process was in place from February 2020 and went far beyond the processes in most other jurisdictions at that time. The risk assessment process included a review of information about disease on individual ships and a review by a panel of public health physicians.
- Since enhanced screening has been conducted XXX number of passengers have been screened by NSW Health teams based on the risk assessment of a ship.
- The decision to allow a ship to enter a port in NSW involves a multi-agency response at both State and Federal levels. NSW Health is just one component of this process and relies on the information provided by these other agencies.
- The Ruby Princess Cruise ship departed Sydney on 8 March to cruise around New Zealand and returned to Sydney on 19 March 2020.
- At the time of embarkation, the reported risk of transmission of infection in New Zealand was very low as was the number of cases reported from the United States, (<https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>)
- As a large community with many thousands of people living in an enclosed environment, it is very common for cruise ships to have low levels of respiratory infections among passengers and crew. Outbreaks of influenza are common and can often affect a large proportion of those on board.
- ~~NSW Health had enhanced risk assessment processing in place to assist the Commonwealth in assessing passengers arriving from international waters on cruise ships. This process was in place from February 2020 and goes well beyond the processes in most other jurisdictions at that time. The risk assessment process included a review of information about disease on the ship and a review by a panel of public health physicians.~~
- International experience shows COVID-19 can rapidly spread among passengers if left on board, so self-isolation at home is a much safer option than leaving passengers on board. For extra assurance, should COVID-19 be subsequently diagnosed amongst passengers or crew, where a low risk assessment was concluded, passengers were allowed to disembark provided contact details were available from the ship to allow them to be rapidly contacted.
- At the time of docking, disease rates on board were below the 1 per cent threshold previously set to identify outbreaks of influenza like illness, and no passengers or crew had been diagnosed or reported to Health Protection NSW to have COVID-19. Correspondence between NSW Port Authority and the ship's doctor support the fact that there was no clinical reason to believe the ship's passengers and crew were affected by a COVID-19 outbreak.
- Influenza had been detected among several passengers during the cruise indicating that influenza was the likely cause of respiratory illness on board the ship.
- Samples taken from five people on board the ship were reported to have tested negative for COVID-19 in Wellington NZ during the cruise.
- As an added precaution swabs taken for influenza testing were tested for COVID-19 and tested positive on 20 March 2020 allowing NSW Health to identify cases who were on board, and launch an investigation and intervention to control further spread.

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Commented [DS2]: We should add this stat in to show we have been diligent in screening passengers

Commented [DS3]: Can we add a line here that stresses we are just one cog in the wheel??

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- As soon as the cases were confirmed, NSW Health advised passengers and crew of the situation and asked all passengers to monitor for symptoms and self isolate for 14 days (as already required for people entering Australia from overseas).

Background to Australian Maritime Biosecurity Arrangements

The Australian Government determines the policy for people arriving from international ports into Australia. Under the Biosecurity Act 2015 (the Act) - section 44, the Australian Health Minister may determine entry requirements to prevent the entry, emergence, establishment and spread of a Listed Human Disease. The Biosecurity (Entry Requirements) Determination 2016 provides that an individual may be screened by a biosecurity officer¹ or human biosecurity officer² via a questionnaire or equipment to identify signs and symptoms of a Listed Human Disease.

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Biosecurity Officers, officers of the Australian Department of Agriculture, Water and the Environment, apply standard questionnaires to assess pre-arrival reports of illness among passengers or crew, and consult where required with medical officers from NSW Health designated as Human Biosecurity Officers under the Act.

National Protocol for Assessing COVID-19 Risk from Cruise Ships

On the 6 March 2020, the Australian Government published a 'National Protocol for Managing Novel Coronavirus Disease (COVID-19) Risk from Cruise Ships' (the National Protocol) (**Appendix 1**) for use by personnel on international cruise vessels, biosecurity agencies and local port health authorities when there is a suspected or confirmed case of COVID-19 on-board. The National Protocol does not direct jurisdictions to do such assessments, but instead leaves it to their discretion.

Public health representatives of all state and territory governments including NSW were involved in the development and approval of the National Protocol. NSW Health indicated that in addition to

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implementing the National Protocol, additional risk assessment procedures for all cruise ships docking in NSW would be applied beyond those prescribed in the National Protocol.

On 15 March 2020 the Prime Minister announced that international cruise operations would cease and all travellers entering Australia from 0001 AEDST 16 March 2020 must undertake a precautionary self-isolation period for 14 days upon entry to Australia. Subsequent Guidance provided by the Australian Government stated that cruise ships would not be allowed to dock at an Australian port. There were a number of exceptions:

- Australian flagged ships
- Returning cruises to return Australians
- Ships in transit that have left the last international port as of 12 pm on the 15 March
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Ships potentially meeting the exception criteria are required to apply through the Maritime Processing Committee (MTPC), run by the Australian Border Force, for permission to dock at an Australian port and disembark passengers. Exempted ships will only be allowed to disembark at Sydney and Brisbane.

As of at least the 17 March, a factsheet (**Appendix 2**) from the Australian Border Force was available for the Cruise Lines to distribute to incoming international cruise ship passengers to advise that disembarking passengers would need to have an isolation period of 14 days, but commencing from the date of departure from the last foreign port, not from the date of arrival in Australia. The factsheet also notes that foreign nationals would be allowed to disembark ships with permission to return to their home country.

NSW Process for Assessing COVID-19 Risk from Cruise Ships

NSW Health has two long-standing public health programs for cruise ships visiting the Port of Sydney (originally commenced in 1998). These are the Cruise Ship Health Surveillance Program and the Vessel Inspection Program and they are managed by the South Eastern Sydney Local Health District's public health unit (SES PHU). SES PHU respond to reports of infectious disease cases, outbreaks, and other incidents of public health concern, and conduct environmental health inspections of vessels.

The SESPHU Cruise Ship Health Surveillance Program works closely with the cruise ship industry and the Australian Department of Agriculture and Water Resources to improve health surveillance on cruise ships and respond to outbreaks of infectious disease.

Cruise ships often have several thousand passengers on board, many of whom are older and have chronic medical conditions, as well as large numbers of crew (crew numbers may be 30-50% of the total ship population during a cruise). Respiratory infections (unrelated to COVID-19) and gastrointestinal infections among passengers and crew are common on cruise ships, sometimes increasing to significant outbreaks. Cruise ships are responsible for, and have policies to prevent, detect and manage outbreaks of infectious disease on board.

SESPHU increased monitoring for respiratory illness during January 2020 in response to the growing number of COVID-19 cases, including several dockside assessments.

By 15 February, NSW Health had implemented an enhanced surveillance screening process building on these existing risk assessment arrangements for cruise ships, and which required additional pre-arrival information from cruise lines and cruise ship medical teams for all cruise ships scheduled to dock in NSW ports. The process used from 15 February was documented and further refined on 19 February (**Appendix 3**) and shared with other jurisdictions for consideration as a national approach.

Pre-arrival information was summarised by SES PHU in a standard reporting template and reviewed the day prior to arrival into NSW by senior public health officers from Health Protection NSW, SES PHU and the public health units of Sydney and Nepean Blue Mountains Local Health Districts. Where the vessels were preliminarily classified as low risk, the panel determined the final risk assessment outcome through email discussions. The panel met by teleconference when there was disagreement about a low risk assessment rating or where the risk assessment classification was either medium or high.

On 22 February 2020 the NSW Chief Health Officer wrote to Cruise Line representatives to alert them to the enhanced risk assessment process for cruises and to provide specific guidance (*Enhanced COVID-19 Procedures for the Cruise Line Industry*) to reduce the risk of COVID-19 on their cruises (**Appendix 4**).

On 9 March 2020 additional information was sent to the cruise lines to recommend additional precautions and to strengthen their specimen collection capacity in case COVID-19 testing was required following the pre-arrival risk assessment (**Appendix 5**).

Details of enhanced pre-arrival risk assessment categories and response

Based on the pre-arrival risk assessment for each incoming cruise ship, the NSW Health cruise ship expert panel assigns one of three risk categories – Low, Medium or High – which informs further public health action. The screening process describes the criteria used in the risk assessment to classify the cruise (**Appendix 3**).

If a cruise is classified as Low Risk, usual disembarkation procedures are assumed and no NSW Health team attends the ship dockside to conduct screening of sick passengers and crew. In the event that NSW Health becomes aware that respiratory samples had been collected by the Ship medical team and tested negative for influenza, it was not required that these samples be routinely collected and tested by NSW Health for COVID-19 but an assessment on the need for further testing is made on a case-by-case basis.

If a cruise is classified as Medium Risk, a NSW Health team meets the ship dockside to conduct a further assessment and screening of symptomatic travellers and other travellers of concern due to their recent travel history. Pratique is not granted for disembarkation of other travellers until this further risk assessment is completed. Travellers identified for COVID-19 testing are required to self-isolate in a private cabin on board until the results are known. Other passengers are allowed to disembark with the standard Australian Government COVID-19 advice provided to all international arrivals.

If a cruise is classified as High Risk, such as when an ill passenger with suspected COVID-19 is identified, the ship would not be granted pratique or permitted to disembark until an incident

management team had been formed to assess the risks and prepare a plan of action to minimise the risk to the NSW community and to screen and manage other passengers and crew.

Procedures for responding to and management of cruise ships where there are confirmed cases of COVID-19 in passengers and/or crew are set out in the 26 February 2020 draft policy (**Appendix 6**).

Risk Assessments for the Ruby Princess cruises ending 24 February 2020 and 8 March 2020.

On 23 February, NSW Health conducted a detailed pre-arrival risk assessment for the 24 February docking of the Ruby Princess in Sydney, as required under the new enhanced pre-arrival risk assessment. The expert panel assessed this cruise of the Ruby Princess as being a **low risk** for COVID-19 and no NSW Health team attended dockside.

On 7 March, NSW Health again conducted a detailed pre-arrival risk assessment for the 8 March docking of the Ruby Princess in Sydney. The expert panel assessed the ship for that cruise as **medium risk**.

The basis for this **medium risk** classification was that, while the overall reported influenza-like illness rate among travellers (passengers and crew) was low, the expert panel expressed concerns about two passengers who had had onset of acute respiratory illnesses during the cruise and had spent several days in Singapore prior to boarding the cruise. Both passengers had also no identified cause of their symptoms as swabs collected on board had tested negative for influenza.

A NSW Health team from South East Sydney Local Health District met the ship when it docked and screened approximately 360 people who had fever or respiratory symptoms, or who had a travel history of concern for risk of COVID-19.

In addition to the two passengers of concern, an additional four passengers and three crew were swabbed for COVID-19 testing. These passengers and crew were isolated in their cabins. Disembarkation of other passengers was allowed after the assessment was complete. Embarkation of the next cruise passengers and crew was delayed from noon to 5pm, pending receipt of swab results

All nine swabs tested negative for COVID-19 on the same day, and these people were released from isolation and the next cruise allowed to embark.

Risk Assessment for the Ruby Princess cruise 8-19 March

On 8 March 2020 the Ruby Princess left Sydney to cruise to New Zealand. The cruise included nine stops in different locations in New Zealand including a stop in Wellington on 14 March and a final stop in Auckland on 17 March before returning to Sydney to dock on 19 March 2020.

The itinerary for this cruise was shortened due to the cruise ship ban announced by the Prime Minister on 15 March 2020.

NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

Prior to docking on the 19 March pre-arrival information was provided to the South East Sydney Public Health Unit from the Ruby Princess through the maritime arrivals reporting system (MARS) and through direct communications with the ship's medical team.

On 18 March the expert panel reviewed the risk assessment summary prepared from this information (**Appendix 7**).

The pre-arrival information indicated that there were 2647 passengers and 1148 crew on board. No passengers or crew reported contact with a COVID-19 case, and none reported being had in China, Iran, South Korea or Italy (the countries considered as a high risk for exposure at that time) within 14 days of embarking.

The Ruby Princess doctor reported that 104 of the 3795 travellers had reported an acute respiratory infection at some time during the cruise, including 36 who reported an influenza-like illness (ILI). A total of 48 patients had been tested for influenza of whom 24 tested positive. The ship doctor indicated that they had kept 10 respiratory swabs available for further testing.

The ship doctor also reported that five travellers had been tested for COVID-19 during their stop in Wellington (NZ) on 14 March, and that all five had tested negative for COVID-19.

The ship doctor reported that they were planning to medically disembark two unwell passengers by ambulance.

- One was an Australian man who had no travel history of significance apart from the visit to NSW and NZ. He had a fever and had been diagnosed with an upper respiratory tract infection and had tested negative for influenza. The reason for medical disembarkation was given as ischaemic heart disease, likely secondary to his infection, which had since improved on oseltamivir treatment.
- The second passenger was an Australian woman who had no travel history apart from NSW and NZ. She had been diagnosed with a febrile upper respiratory tract infection and had tested negative for influenza, however was being treated with oseltamivir. She reported an exacerbation of severe lower back pain with signs suggestive of a femoral nerve radiculopathy. She was to be referred to an emergency department for imaging and specialist referral as needed.

The NSW Health expert panel assessed the available pre-arrival information and agreed that the cruise should be classified as Low Risk. They noted that the itinerary only included ports in New Zealand, considered a low risk country for COVID-19 and the lack of known contact with a COVID-19 among the travellers. The ILI rate was below the one per cent threshold generally recommended to indicate a respiratory outbreak, and 24 travellers had been confirmed with influenza infections. It was recommended to have the specimens that had been collected by the ship doctor tested for COVID-19 when the ship docked.

Communications to passengers

Carnival Corporation, the owner of the Ruby Princess have confirmed that the Australian Border Force factsheet (**Appendix 2**) was delivered to every passenger's cabin prior to arrival and that additional printed information was provided to passengers as they disembarked.

Events of 19 March

On the morning of 19 March, the Ruby Princess docked at the Overseas Passenger Terminal in Sydney. The two passengers noted in the pre-arrival assessment were transferred by ambulance to Royal Prince Alfred Hospital for further medical assessment, as arranged by the ship.

SES PHU arranged for transfer of the 10 respiratory samples collected by the ship doctor for COVID-19 testing to the NSW Pathology COVID-19 reference laboratory at Randwick.

NSW Response

On 20 March 2020, NSW Health was notified that three of the ten swabs for people on the Ruby Princess cruise had tested positive for COVID-19 and were confirmed cases according to the national COVID-19 case definition current at that time (**Appendix 8**). Two of the cases were in passengers and one was in a crew member. The crew member had remained in isolation on board under the care of the ship's medical team. A fourth Ruby Princess passenger was confirmed as a case later on the same day having sought medical assessment after disembarkation.

NSW Health responded according to the NSW Health COVID-19 cruise ship response procedures for confirmed cases in passengers or crew (**Appendix 6**).

NSW Health immediately informed Carnival and obtained from them their passenger manifest with contact details for all passengers, and advised them to contact all of their crew about the need for self-isolation and to monitor for symptoms.

On 20 March 2020, NSW Health prepared and sent urgent communications to all Ruby Princess passengers by email and SMS messages to advise them of the confirmed cases on board and to reinforce the importance of self-isolation and regular self-monitoring for symptoms. The email had as an attachment the NSW Health's factsheet for people in home isolation, and links to further information on the NSW Health website.

In addition, on the 20 March 2020,

- a media release was also issued to support rapid dissemination of this information;
- other states and territories were notified; and,
- the National Incident Room was notified in relation to international passengers who might have already travelled out of Australia.

Commencing on 20 March:

- NSW Health commenced contacting by telephone all passengers from the Ruby Princess to check on their health and to reinforce the requirement to self-isolate and to monitor their health. The Service NSW call centre was co-opted to assist with telephone contact.
- A letter was also prepared for Carnival Australia which they distributed by email to all passengers on behalf of NSW Health to further ensure receipt of the NSW Health advice.

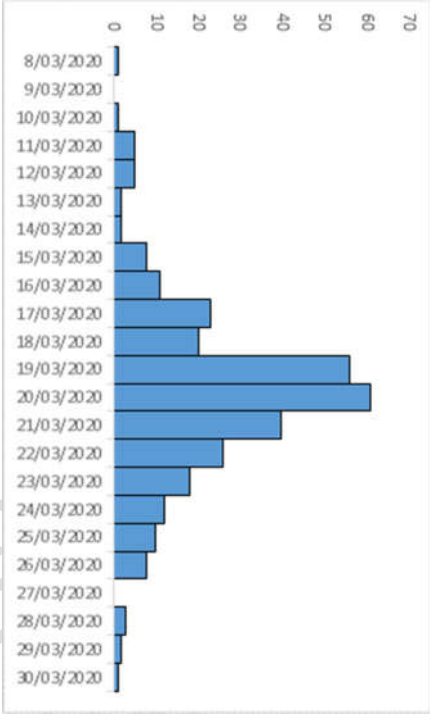
NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

As of 1 April 2020, 337 cases of COVID-19 acquired on the Ruby Princess have been diagnosed in NSW, including two deaths, and there have been nine secondary cases in close contacts of these cases. Please see Figure 1 below for epidemiological curve.

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NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

Figure 1: Cases of COVID-19 among passengers and crew of the Ruby Princess who reside in NSW, 8-30 March 2020, by date of onset as of 1 April 2020. Note that the cruise disembarked 6am 19 March 2020.



Further measures implemented by NSW to reduce the risk of COVID-19 from cruise ships

On 22 March 2020 NSW implemented additional measures to further reduce the risk of COVID-19-infected passengers or crew transmitting infection within NSW. This included a direction that no cruise ship crew or passengers to be allowed to disembark in NSW until anyone with symptoms consistent with COVID-19 are assessed, swabbed and tested for COVID-19 and found to be negative.

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https://gazette.legislation.nsw.gov.au/50/download.w3p?id=Gazette_2020_2020-61.pdf.

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Annexure SAD-5

From: Jeremy McNulty
Sent: Wed, 1 Apr 2020 19:27:25 +1100
To: Andrew Wilson; Kerry Chant (Ministry of Health)
Cc: Sean Tobin; Simon Willcox (Ministry of Health); Christine Selvey; Victor Carey
Subject: Ruby Princess Risk Assessment Report 1 April
Attachments: Ruby Princess Risk Assessment Report 1 April.docx, Appendix 1 National protocol for managing risk of COVID-19 from cruisepdf, Appendix 2 ABF Factsheet for cruise ship travellers dated 17 March 2020.pdf, Appendix 3 Cruise Ship Screening policy DRAFT 19022020.pdf, Appendix 4 CHO letter for Cruise Ship Operators 22 Feb.pdf, Appendix 5 Enhanced COVID-19 Procedures for the Cruise Line Industry 9 M....pdf, Appendix 6 NSW Health COVID-19 Cruise ship response procedure for confir....pdf, Appendix 7 Risk Assessment for RP cruise arriving 19 March.pdf, Appendix 8 CDNA COVID-19 Case Definition.pdf

Dear Andrew

Please find attached our updated report on the Ruby Princess. We have updated some numbers added the graph and provided a summary at the top.

Jeremy

Dr Jeremy McNulty

Executive Director | **Health Protection NSW**

Tel [REDACTED]

www.health.nsw.gov.au



Health

NSW Health Report on the Ruby Princess Cruise of 8 to 19 March 2020

Key Points

- NSW Health had enhanced risk assessment processing in place to assist the Commonwealth in assessing passengers arriving from international waters on cruise ships. This process was in place from February 2020 and went far beyond the processes in most other jurisdictions at that time. The risk assessment process included a review of information about disease on the ship and a review by a panel of public health physicians.
- The decision to allow a ship to enter a port in NSW involves multiple agencies at both State and Federal levels.
- The Ruby Princess Cruise ship departed Sydney on 8 March to cruise around New Zealand and returned to Sydney on 19 March 2020.
- At the time of embarkation, the reported risk of transmission of infection in New Zealand was very low, as was the number of cases reported from the United States, (<https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>)
- As a large community with many thousands of people living in an enclosed environment, it is very common for cruise ships to have low levels of respiratory infections among passengers and crew. Outbreaks of influenza are common and can often affect a large proportion of those on board.
- International experience shows COVID-19 can rapidly spread among passengers if left on board, so self-isolation at home is a much safer option than leaving passengers on board. For extra assurance, should COVID-19 be subsequently diagnosed amongst passengers or crew, where a low risk assessment was concluded, passengers were allowed to disembark provided contact details were available from the ship to allow them to be rapidly contacted.
- At the time of docking, disease rates on board were below the 1 per cent threshold previously set to identify outbreaks of influenza like illness, and no passengers or crew had been diagnosed or reported to Health Protection NSW to have COVID-19.
- Influenza had been detected among several passengers during the cruise indicating that influenza was the likely cause of respiratory illness on board the ship.
- Samples taken from five people on board the ship were reported to have tested negative for COVID-19 in Wellington NZ during the cruise.
- As an added precaution swabs taken for influenza testing were tested for COVID-19 and tested positive on 20 March 2020 allowing NSW Health to identify cases who were on board, and launch an investigation and intervention to control further spread.
- As soon as the cases were confirmed, NSW Health advised passengers and crew of the situation and asked all passengers to monitor for symptoms and self isolate for 14 days (as already required for people entering Australia from overseas).

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Based on the pre-arrival risk assessment for each incoming cruise ship, the NSW Health cruise ship expert panel assigns one of three risk categories – Low, Medium or High – which informs further public health action. The screening process describes the criteria used in the risk assessment to classify the cruise (**Appendix 3**).

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If a cruise is classified as High Risk, such as when an ill passenger with suspected COVID-19 is identified, the ship would not be granted pratique or permitted to disembark until an incident management team had been formed to assess the risks and prepare a plan of action to screen and manage other passengers and crew.

Procedures for responding to and management of cruise ships where there are confirmed cases of COVID-19 in passengers and/or crew are set out in the 26 February 2020 draft policy (**Appendix 6**).

Risk Assessments for the Ruby Princess cruises ending 24 February 2020 and 8 March 2020.

On 23 February, NSW Health conducted a detailed pre-arrival risk assessment for the 24 February docking of the Ruby Princess in Sydney, as required under the new enhanced pre-arrival risk assessment. The expert panel assessed this cruise of the Ruby Princess as being a **low risk** for COVID-19 and no NSW Health team attended dockside.

On 7 March, NSW Health again conducted a detailed pre-arrival risk assessment for the 8 March docking of the Ruby Princess in Sydney. The expert panel assessed the ship for that cruise as **medium risk**.

The basis for this **medium risk** classification was that, while the overall reported influenza-like illness rate among travellers (passengers and crew) was low, the expert panel expressed concerns about two passengers who had had onset of acute respiratory illnesses during the cruise and had spent several days in Singapore prior to boarding the cruise. Both passengers had also no identified cause of their symptoms as swabs collected on board had tested negative for influenza.

A NSW Health team from South East Sydney Local Health District met the ship when it docked and screened approximately 360 people who had fever or respiratory symptoms, or who had a travel history of concern for risk of COVID-19.

In addition to the two passengers of concern, an additional four passengers and three crew were swabbed for COVID-19 testing. These passengers and crew were isolated in their cabins. Disembarkation of other passengers was allowed after the assessment was complete. Embarkation of the next cruise passengers and crew was delayed from noon to 5pm, pending receipt of swab results

All nine swabs tested negative for COVID-19 on the same day, and these people were released from isolation and the next cruise allowed to embark.

Risk Assessment for the Ruby Princess cruise 8-19 March

On 8 March 2020, the Ruby Princess left Sydney to cruise to New Zealand. The cruise included nine stops in different locations in New Zealand including a stop in Wellington on 14 March and a final stop in Auckland on 17 March before returning to Sydney to dock on 19 March 2020.

The itinerary for this cruise was shortened due to the cruise ship ban announced by the Prime Minister on 15 March 2020.

Prior to docking on the 19 March pre-arrival information was provided to the South East Sydney Public Health Unit from the Ruby Princess through the maritime arrivals reporting system (MARS) and through direct communications with the ship's medical team.

On 18 March 2020, the expert panel reviewed the risk assessment summary prepared from this information (**Appendix 7**).

The pre-arrival information indicated that there were 2647 passengers and 1148 crew on board. No passengers or crew reported contact with a COVID-19 case, and none reported being had in China, Iran, South Korea or Italy (the countries considered as a high risk for exposure at that time) within 14 days of embarking.

The Ruby Princess doctor reported that 104 of the 3795 travellers had reported an acute respiratory infection at some time during the cruise, including 36 who reported an influenza-like illness (ILI). A total of 48 patients had been tested for influenza of whom 24 tested positive. The ship doctor indicated that they had kept 10 respiratory swabs available for further testing.

The ship doctor also reported that five travellers had been tested for COVID-19 during their stop in Wellington (NZ) on 14 March, and that all five had tested negative for COVID-19.

The ship doctor reported that they were planning to medically disembark two unwell passengers by ambulance.

- One was an Australian man who had no travel history of significance apart from the visit to NSW and NZ. He had a fever and had been diagnosed with an upper respiratory tract infection and had tested negative for influenza. The reason for medical disembarkation was given as ischaemic heart disease, likely secondary to his infection, which had since improved on oseltamivir treatment.
- The second passenger was an Australian woman who had no travel history apart from NSW and NZ. She had been diagnosed with a febrile upper respiratory tract infection and had tested negative for influenza, however was being treated with oseltamivir. She reported an exacerbation of severe lower back pain with signs suggestive of a femoral nerve radiculopathy. She was to be referred to an emergency department for imaging and specialist referral as needed.

The NSW Health expert panel assessed the available pre-arrival information and agreed that the cruise should be classified as Low Risk. They noted that the itinerary only included ports in New Zealand, considered a low risk country for COVID-19 and the lack of known contact with a COVID-19 among the travellers. The ILI rate was below the one per cent threshold generally recommended to indicate a respiratory outbreak, and 24 travellers had been confirmed with influenza infections. It was recommended to have the specimens that had been collected by the ship doctor tested for COVID-19 when the ship docked.

Communications to passengers

Carnival Corporation, the owner of the Ruby Princess have confirmed that the Australian Border Force factsheet (**Appendix 2**) was delivered to every passenger's cabin prior to arrival and that additional printed information was provided to passengers as they disembarked.

Events of 19 March

On the morning of 19 March, the Ruby Princess docked at the Overseas Passenger Terminal in Sydney. The two passengers noted in the pre-arrival assessment were transferred by ambulance to Royal Prince Alfred Hospital for further medical assessment, as arranged by the ship.

SES PHU arranged for transfer of the 10 respiratory samples collected by the ship doctor for COVID-19 testing to the NSW Pathology COVID-19 reference laboratory at Randwick.

NSW Response

On 20 March 2020, NSW Health was notified that three of the ten swabs for people on the Ruby Princess cruise had tested positive for COVID-19 and were confirmed cases according to the national COVID-19 case definition current at that time (**Appendix 8**). Two of the cases were in passengers and one was in a crew member. The crew member had remained in isolation on board under the care of the ship's medical team. A fourth Ruby Princess passenger was confirmed as a case later on the same day having sought medical assessment after disembarkation.

NSW Health responded according to the NSW Health COVID-19 cruise ship response procedures for confirmed cases in passengers or crew (**Appendix 6**).

NSW Health immediately informed Carnival and obtained from them their passenger manifest with contact details for all passengers, and advised them to contact all of their crew about the need for self-isolation and to monitor for symptoms.

On 20 March 2020, NSW Health prepared and sent urgent communications to all Ruby Princess passengers by email and SMS messages to advise them of the confirmed cases on board and to reinforce the importance of self-isolation and regular self-monitoring for symptoms. The email had as an attachment the NSW Health's factsheet for people in home isolation, and links to further information on the NSW Health website.

In addition, on the 20 March 2020,

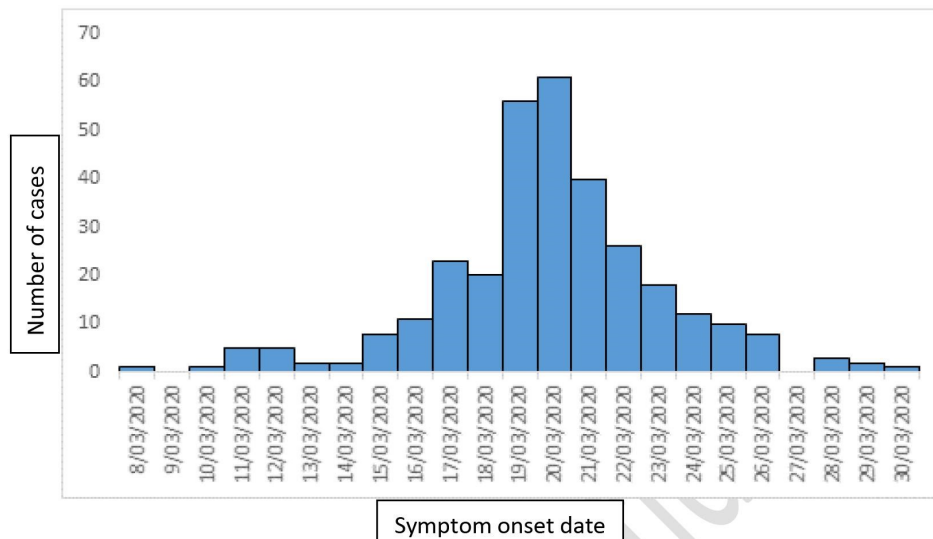
- a media release was also issued to support rapid dissemination of this information;
- other states and territories were notified; and,
- the National Incident Room was notified in relation to international passengers who might have already travelled out of Australia.

Commencing on 20 March:

- NSW Health commenced contacting by telephone all passengers from the Ruby Princess to check on their health and to reinforce the requirement to self-isolate and to monitor their health. The Service NSW call centre was co-opted to assist with telephone contact.
- A letter was also prepared for Carnival Australia which they distributed by email to all passengers on behalf of NSW Health to further ensure receipt of the NSW Health advice.

As of 1 April 2020, 337 cases of COVID-19 acquired on the Ruby Princess have been diagnosed in NSW, including two deaths, and there have been nine secondary cases in close contacts of these cases. Please see Figure 1 below for epidemiological curve. The cruise disembarked 6am 19 March 2020. Of 315 people who reported symptom onset, 237 (75%) developed symptoms on or after 19/3.

Figure 1: Cases of COVID-19 among passengers and crew of the Ruby Princess who reside in NSW, 8-30 March 2020, by date of symptom onset as of 1 April 2020. Note that the cruise disembarked 6am 19 March 2020.



Further measures implemented by NSW to reduce the risk of COVID-19 from cruise ships

On 22 March 2020 NSW implemented additional measures to further reduce the risk of COVID-19-infected passengers or crew transmitting infection within NSW. This included a direction that no cruise ship crew or passengers to be allowed to disembark in NSW until anyone with symptoms consistent with COVID-19 are assessed, swabbed and tested for COVID-19 and found to be negative.

On 28 March 2020, Minister Hazzard, Minister for Health and Medical Research signed the *Public Health (COVID-19 Maritime Quarantine) Order 2020* restricting disembarkation of any person arriving in NSW on a vessel unless authorised by the Police Commissioner, with additional directions regarding other persons boarding or disembarking from vessels. See https://gazette.legislation.nsw.gov.au/so/download.w3p?id=Gazette_2020_2020-61.pdf.