

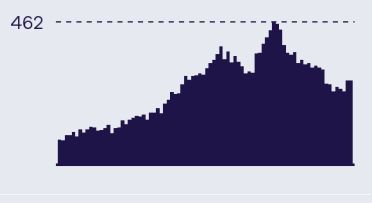
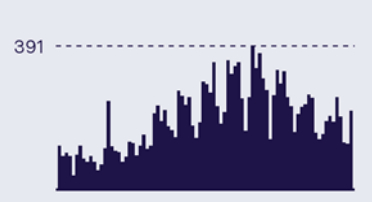
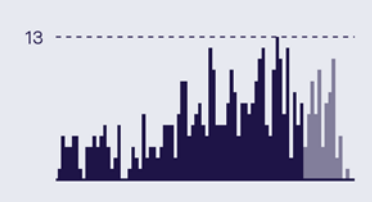

Victorian COVID-19 Surveillance Report

28 June 2024

OFFICIAL

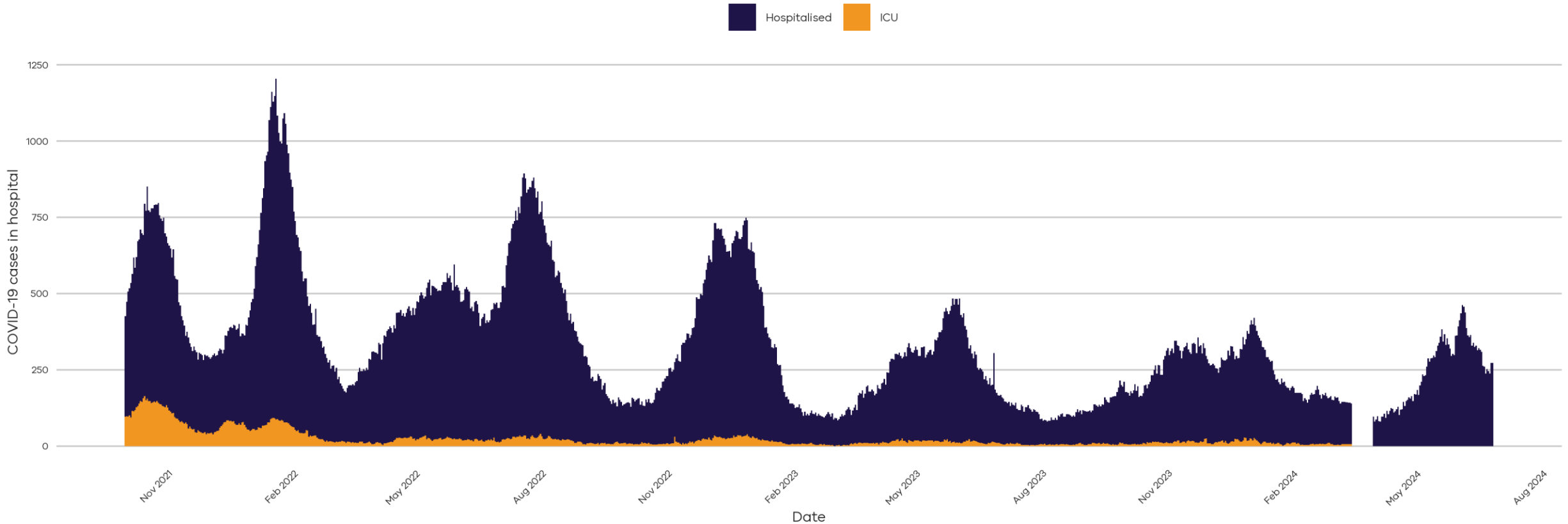
Epidemiological Summary

Current trends indicate decreasing levels of COVID-19 activity in Victoria.

| | |
|---|---|
| <p>Daily counts last 12 weeks</p> | |
|  | <p>The number of people in hospital with COVID-19 has decreased this week. The 7-day average is 254 (week ending 25 June), compared to 311 last week.</p> |
|  | <p>COVID-19 notifications remained stable this week. A total of 1,310 cases (PCR-confirmed) were notified in the most recent week (ending 25 June), compared to 1,375 the week prior.</p> <p>21,223 PCR tests were completed last week, similar to the week prior with 20,717 tests.</p> <p>7% of tests returned a positive SARS-CoV-2 result, a decrease from 7.7% the previous week.</p> |
|  | <p>Deaths have increased. In the most recent 28-day period (15 May 2024 - 11 Jun 2024) there were 212 COVID-19 associated deaths. Increases and decreases in the reporting of deaths attributable to COVID-19 tend to lag waves of infections and hospitalisations by several weeks.</p> |
|  | <p>Globally, JN.1 is the most prevalent variant. KP.3 and KP.2 are the fastest growing JN.1 sublineages. They were declared Variants Under Monitoring by WHO on 3 May 2024.</p> <p>KP.3 has been the most prevalent JN.1 sublineage in Victoria to date.</p> |

COVID-19 Hospitalisations

Daily COVID-19 cases in hospital and ICU
Data until 25 June 2024

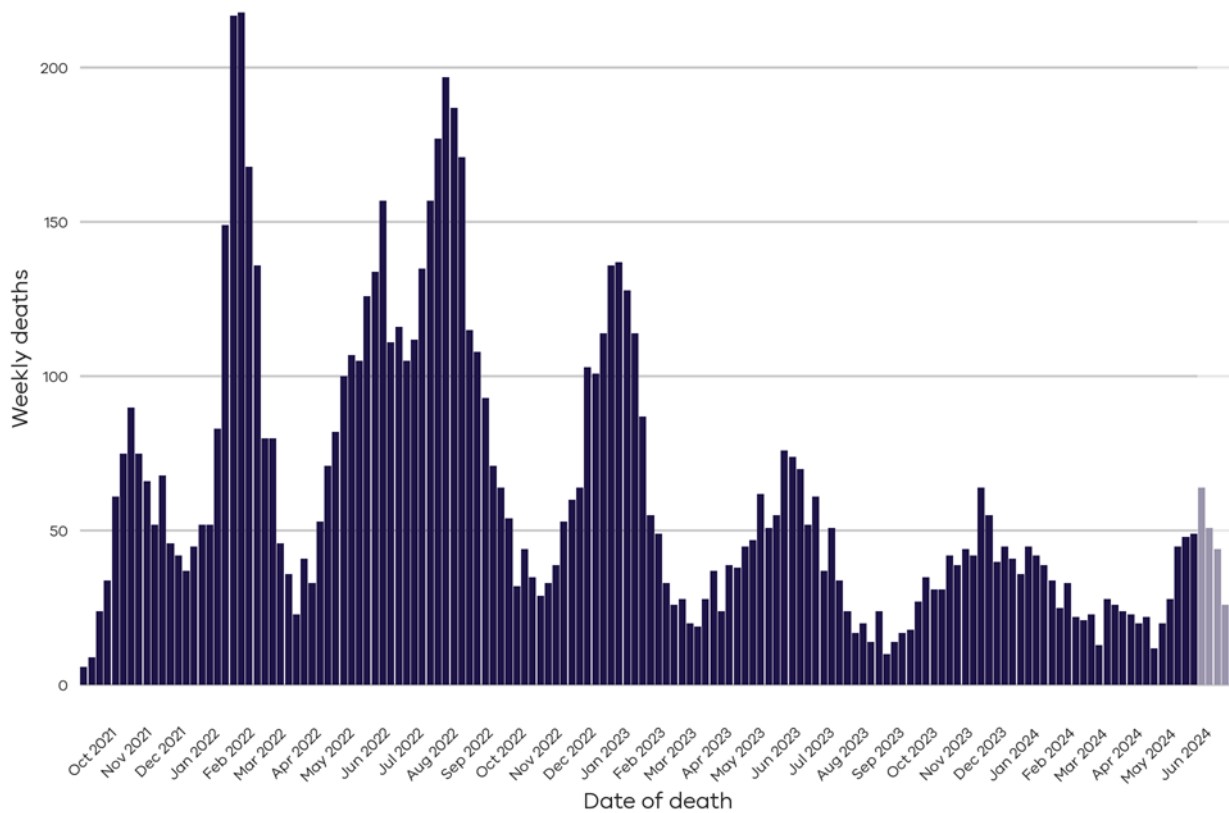


Data source: Critical Health Resource Information System (CHRIS)

This graph shows data back to September 2021 when hospitalisations were increasing during the Delta variant wave. Hospitalisations represent the number of COVID-19 positive patients in hospital on a given day. Please note that COVID-19 hospitalisation data from CHRIS is unavailable for dates between 15 March 2024 and 30 March 2024

COVID-19 Mortality

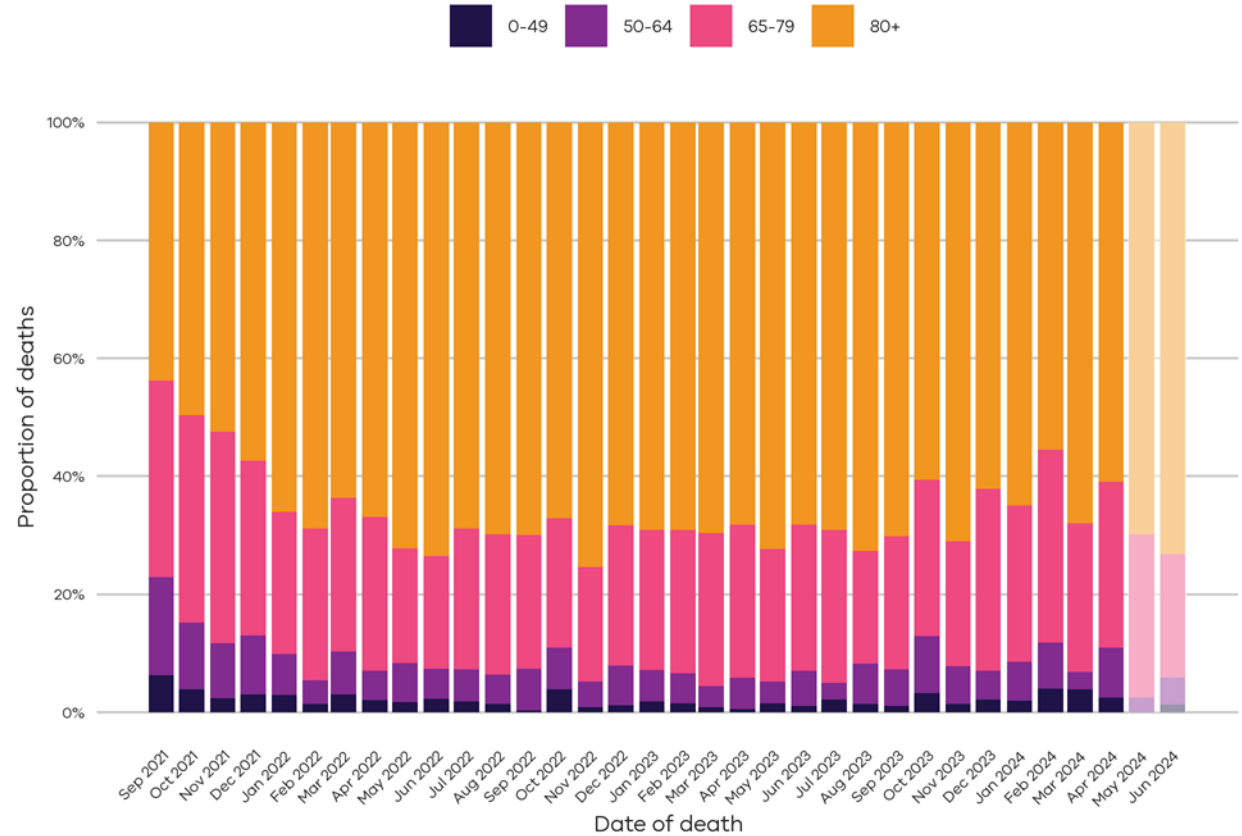
Weekly COVID-19 deaths
Data until 25 June 2024



Data source: TREVI

Note: Faded area includes last 4 weeks where data is incomplete

COVID-19 deaths by age
Data until 25 June 2024



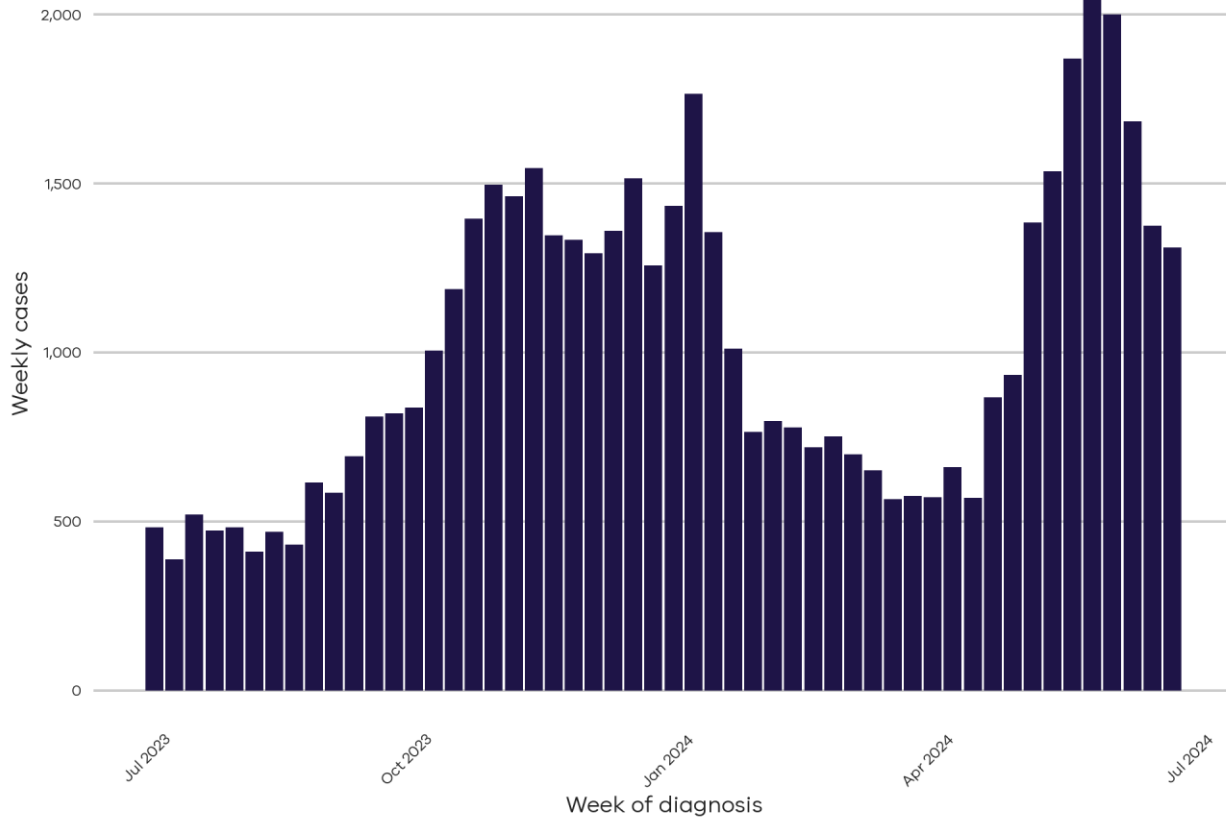
Data source: TREVI

Note: Faded area includes last 4 weeks where data is incomplete

Date is based on date of death, not the date of when each death was reported.

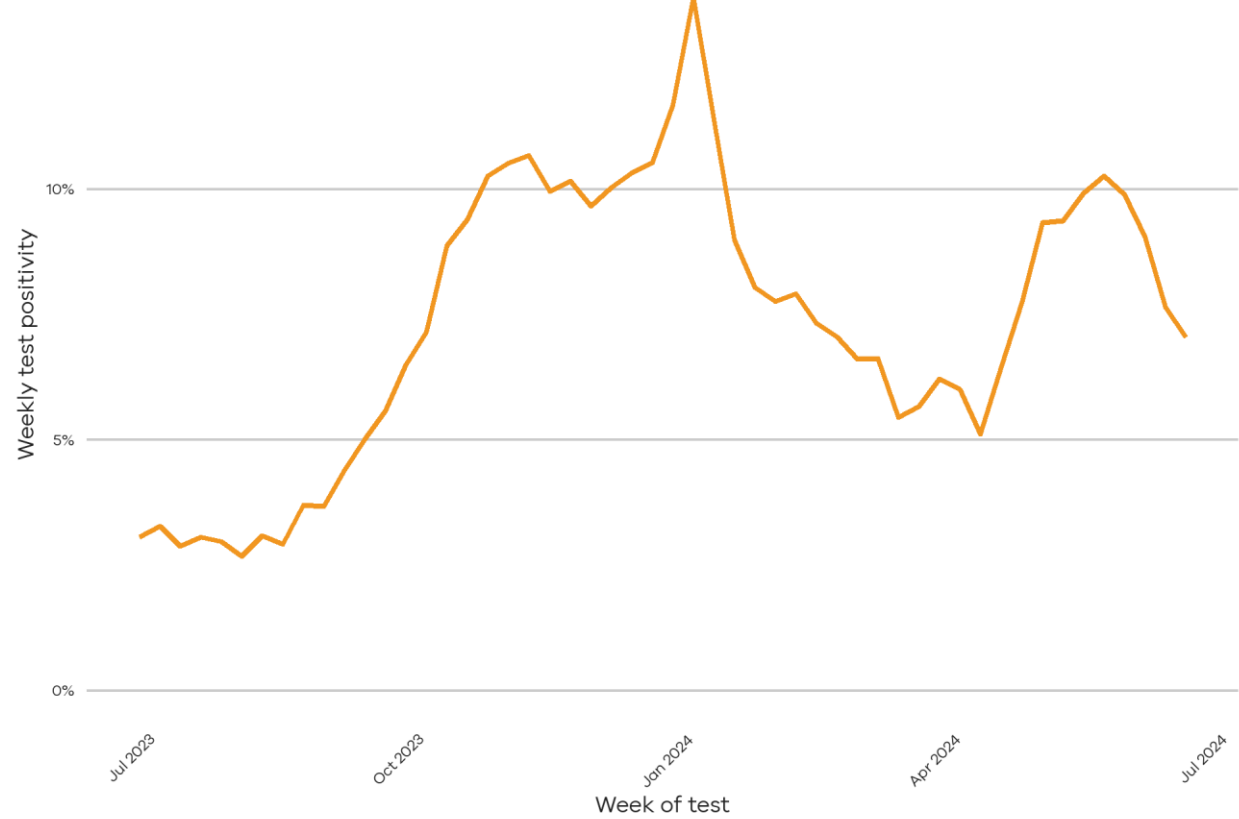
COVID-19 Cases and Testing

COVID-19 notifications (PCR-confirmed) by week in the past year
Data until 25 June 2024



Data source: TREVI

COVID-19 test positivity by week in the past year
Data until 25 June 2024



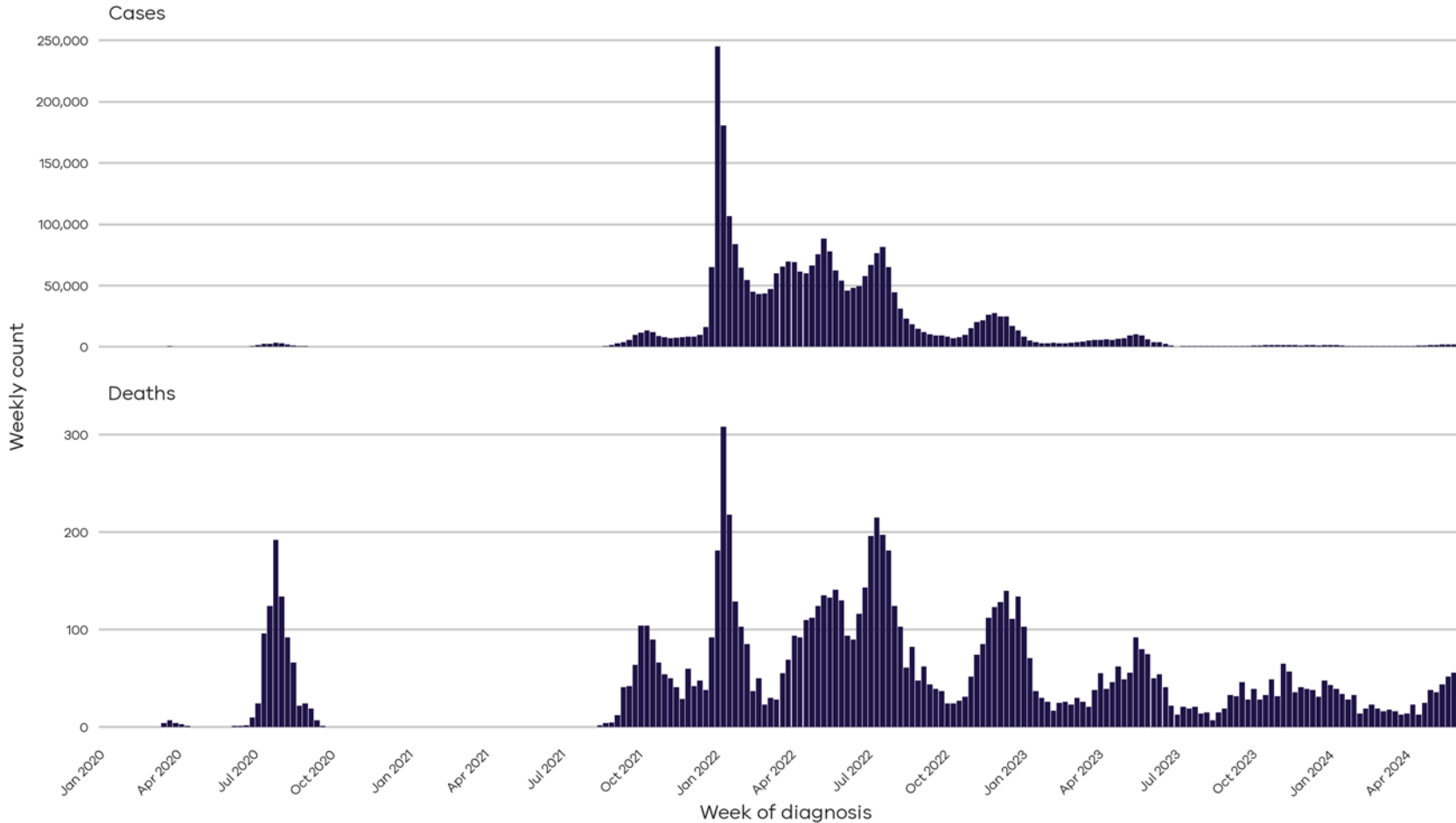
Data source: TREVI

Only confirmed notifications diagnosed by PCR are included. Rapid Antigen Test (RAT) results are no longer collected by the Department of Health.

Appendix

COVID-19 Historical Data & Definitions

Epidemic curve of weekly COVID-19 metrics
Data until 25 June 2024



Data source: TREVI

COVID-19 Cases are reported according to the definitions given in the Coronavirus (COVID-19) CDNA National Guidelines for Public Health Units. Where multiple positive test results are received for the same person within 35 days of the initial test result they are counted as a single case.

As of 30 June 2023, probable cases are not collected by the Victorian Department of Health, case counts since this date reflect cases with a positive PCR test only. Rapid Antigen Testing remains an important tool for individuals to access treatment and protect their community.

Changes in case numbers may be indicative of trends but they are a small subset of the total COVID-19 infections in Victoria.

COVID-19 Hospitalisations represent the number of active COVID-19 patients in hospital on a given day. This is reported by Victorian hospitals with an ICU to the Critical Health Resource Information Service (CHRIS) as daily aggregated data.

COVID-19 Deaths are counted according to the Victorian surveillance definition, including all deaths reported in the Victorian Deaths Index (VDI) with COVID-19 listed as a primary or contributing cause of death on the medical death certificate, or a death within 35 days of diagnosis, excluding clearly unrelated causes such as trauma. Deaths may be reported retrospectively as the time between death, submission of the data to VDI and linkage to case data may vary.

Test positivity is the percentage of SARS-CoV-2 tests with SARS-CoV-2 virus detected.