

# Guidance for managing a COVID-19 outbreak on a cruise ship in South Australia

28 October 2022



**Government of South Australia**  
SA Health

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## Who is this advice for?

This advice is for operators of cruise vessels planning to enter and operate in South Australia (SA).

## Supporting documents

This document should be read with the [National Guidelines for Cruising in Australia](#) developed by the Communicable Diseases Network Australia (CDNA) and the [Eastern Seaboard and Western Australian Cruise Protocols](#) developed in partnership by the Queensland, New South Wales (NSW), Western Australian and Victorian Governments. These documents provide guidance for outbreak preparation and management, outlining minimum expectations for COVID-19 testing, close contact management, notification, and communication, as well as recommendations for vaccination. Appendix 1 provides a summary of jurisdictional differences between SA and NSW, Victoria, Western Australia and Queensland as per the Eastern Seaboard and Western Australian Cruise Protocols.

## What is the aim of this guidance?

This guidance provides advice to prevent, prepare for and manage COVID-19 outbreaks on cruise ships operating in SA. The main aim of this guidance is to maximise the safety, health and wellbeing of all passengers and staff on cruise ships. It also aims to support cruise ship operators as they progress to a business-as-usual response to an outbreak, as COVID-19 becomes an endemic condition.

## Aboriginal health impact acknowledgement

Communicable Disease Control Branch (CDCB) COVID Operations adheres to the delivery of culturally respectful and safe engagement with the intention of positive health outcomes to South Australians who identify as Aboriginal and/or Torres Strait Islander, outlined in the SA Health COVID Operations Aboriginal Health Impact Statement.

CDCB COVID Operations strives to address the inequities seen within health systems in South Australia and recognises the impact these operations may have on Aboriginal and Torres Strait Islander Peoples. This acknowledgement, in all regards, aims to be of benefit to Aboriginal and Torres Strait Islander Peoples, aiming to improve the health outcomes of both individuals and the wider community.

CDCB COVID Operations continues to engage with Aboriginal and/or Torres Strait Islander stakeholders as well as individuals who identify as Aboriginal and/or Torres Strait Islander. CDCB COVID Operations values this ongoing connection with the Department for Health and Wellbeing Aboriginal Health Branch, Local Governments, Aboriginal Community Councils, Health Services, and non-government organisations (NGOs) throughout the response to COVID-19.

Additionally, CDCB COVID Operations wishes to emphasise that plans for shore excursions where a cruise ship is experiencing an outbreak should consider the specific needs of, and risk to local communities, including rural, remote, and Aboriginal communities. Entry into remote Aboriginal communities must at all times comply with any community-based restrictions.

## What is an outbreak on a cruise vessel?

An outbreak of COVID-19 on a cruise vessel is where the proportion of active cases reaches equal to or greater than 3% among passengers and/or crew OR the vessel is experiencing moderate impacts to critical services (including healthcare, cleaning, core food and beverage services, engineering and other services critical to the safe operation of the vessel) as a result of the rate of infection among crew.

## How must the cruise industry prepare for an outbreak?

- Develop an Outbreak Management Plan (OMP) to be implemented in the event of an outbreak.
- Continue to keep detailed documentation of positive crew and passengers as part of the OMP.
- Develop a clear and safe method to identify where positive passengers/crew are isolating as part of the OMP.
- Notify CDCB COVID Operations if additional cases are identified while in SA's jurisdiction as required under South Australian legislation. This includes mandatory notification of positive Rapid Antigen Tests (RATs).
- Ensure staff are familiar with the operator's OMP. Provide education and information for key crew members regarding roles and responsibilities.
- Be aware of how and when to contact SA Health CDCB COVID Operations for support, and how to identify when your service is experiencing an outbreak.
- Encourage passengers to be up to date with their COVID-19 vaccinations. Refer Eastern Seaboard and Western Australian Cruise Protocols which recommend that 95% of passengers be fully vaccinated (as per definition in the Eastern Seaboard and Western Australian Cruise Protocols). Children under 12 years old who are not fully vaccinated are permitted to travel, and there is no limit on the number of unvaccinated children permitted to travel.
- Ensure staff are up to date with their COVID-19 vaccinations.
- Ensure adequate stocks of personal protective equipment (PPE) e.g., surgical masks
- Cruise vessels should have specific facilities and capabilities on board to manage confirmed and probable cases. Sufficient cabins for isolation purposes must be available in the event of an outbreak, particularly for crew members, to avoid the need to offload cases on shore.
- Medical staff trained in managing COVID-19 should be present on cruise vessels along with stocks of appropriate medical equipment (including for intensive care level support where feasible), medications (including oral anti-viral medication) and the capacity to manage seriously ill passengers until medical evacuation to a hospital can occur, if clinically indicated.
- Ensure passengers have access to free COVID-19 testing – polymerase chain reaction (PCR) and/or rapid antigen test (RAT).
- Passengers should be provided with a statement by industry at the time of booking, acknowledging the risks and agreeing to comply with the cruise operator's COVID-19 safety protocols, including plans should a person become unwell or exposed to a positive case.
- Maintain communication with passengers about COVID-19 safe practices throughout the voyage. This should include regular reminders of the importance of mask wearing, physical distancing, hand hygiene and accessing free testing onboard if they have any COVID-19 symptoms.
- Educate staff in infection control processes and all vessels should have access to infection prevention and control expertise as per CDNA National Guidelines for Cruising in Australia. For resources refer to the Infection Control Expert Group (ICEG) endorsed infection prevention and control guidance website.

## What are the symptoms of COVID-19?

The most common symptoms of COVID-19 are cough, sore throat, or runny nose/nasal congestion.

Other symptoms can include headache, muscle aches (myalgia), fatigue, fever, or history of fever (chills and night sweats), diarrhoea, nausea or vomiting, loss of smell or taste and shortness of breath (difficulty breathing). For further information refer to the [Coronavirus \(COVID-19\) – CDNA National Guidelines for Public Health Units](#). (Date published: 14/10/2022).

## What testing is required for crew and passengers?

It is important to test and isolate symptomatic passengers and crew as soon as possible.

Symptomatic crew and passengers should have an onboard PCR test as soon as possible. Where PCR testing is unavailable, a RAT should be conducted. If the RAT is negative, the individual should isolate on board and repeat a test 24 hours later to rule out a possible initial false negative result. Report positive results using the Reporting Tool and notify [SA Health CDCB COVID Operations](#).

If passengers or crew become close contacts onboard, they will need to follow the requirements as outlined in the [Eastern Seaboard and Western Australian Cruise Protocols](#).

There is no requirement to undertake surveillance testing of passengers outside of symptomatic presentations and/or close contact requirements.

### Further recommendations for crew members:

Cruise operators are encouraged to adopt testing of crew before each new cruise embarks.

Asymptomatic crew should undergo surveillance testing every 14-days at a minimum, as per the [Eastern Seaboard and Western Australia Cruise Protocols](#).

## What to do if there is a positive case onboard?

For the purposes of cruise vessels, positive results from a PCR or RAT should be treated the same. A positive RAT result does not need to be confirmed with a PCR.

Identify and notify close contacts as soon as possible - for the purposes of cruise vessels, a close contact is a person who shares a cabin with a COVID-19 case or anyone who has had extended contact with a case as determined by onboard medical personnel.

See below sections: Isolate the Case and How to Manage Cases for further advice about managing cases onboard.

Report all positive cases to [SA Health CDCB COVID Operations](#).

## Onboard infection prevention and control measures

### Cleaning

Enhanced cleaning and disinfecting practices should be followed especially in regard to shared spaces and frequently touched surfaces.

### Ventilation

- > Maximise the use of outdoor spaces where possible.
- > Improve air-exchange rates by maximising air flow where possible (e.g. opening windows, increase air flow rates in mechanical ventilation systems).

## Isolation of cases

- > Isolate positive cases in single cabins (with an ensuite bathroom) with the door closed and located away from non-COVID-19 cases where possible.
- > Meals are to be delivered to the cabin of the COVID-19 positive passenger or crew member and left outside the door. Ensure a process is in place to minimise risk of exposure by ensuring the door is not opened whilst meal delivery is occurring.

## Masks, hand hygiene and physical distancing

- > Ensure adequate supply of free hand sanitiser and/or hand washing facilities are readily available for passengers and crew.
- > Actively encourage regular hand hygiene, particularly in high passenger traffic/communal areas.
- > Crew members should avoid taking meal breaks together and in indoor communal areas where possible.
- > Strongly encourage physical distancing (1.5m) where possible, particularly while indoors and during onshore excursions.
- > Provide free access to masks while onboard for passengers and crew at all times, and prior to disembarkation.
- > Encourage mask-use onboard, for indoor, on-shore excursions, and during disembarkation.
- > COVID-19 cases should always wear a mask if they need to open the door or leave the room for any reason.

## Who needs to be notified of a case onboard a cruise vessel?

- > Notify SA Health CDCB COVID Operations when there are positive case(s) identified onboard the vessel in South Australian waters using the **CDNA Cruise Vessel Reporting Tool** (appendix 2). SA Health CDCB COVID Operations will then inform interstate public health units in the next port of call if necessary.
- > Notify the Local Port Master of vessel status at least 24 hours prior to berthing.
- > Cruise vessels arriving from an international location are required to provide information and updates as per the COVID-19 [CDNA National Guidelines for Cruising](#).

## Reporting deaths

Cruise ship providers must report the death of individuals diagnosed with COVID-19 (including information about the actual cause of death, if known) that occurred in South Australia. This may include individuals who were released from isolation while aboard the vessel prior to death. Deaths related to COVID-19 should be reported to [SA Health CDCB COVID Operations](#) within 24 hours.

## How to manage cases

### Isolation

Passengers and crew who test positive for COVID-19 must immediately isolate in their own cabin or a dedicated isolation cabin. Cases should adhere to requirements to isolate as per the [Eastern Seaboard and Western Australian Cruise Protocols](#), from their positive test date (date of positive test is considered day zero), regardless of vaccination status. Further information on isolation should be followed as per the [Eastern Seaboard and Western Australia Cruise Protocols](#).

Family groups or dependents may isolate together if necessary, or if they choose to do so, even if not all members are cases. Non-cases are to remain in isolation for the duration of the cases isolation period.

If the voyage ends before the isolation period is complete, cases should follow local recommendations as outlined on the [SA Health website](#)

## Clearance

Following the prescribed number of isolation days, cases can come out of isolation if afebrile in the last 24 hours and have substantive resolution of acute respiratory symptoms (sore throat, runny nose, shortness of breath and cough). A test is not required to end isolation.

## Management of critical cases

If a COVID-19 positive passenger or crew member becomes seriously ill but can be clinically managed onboard, standard medical emergency protocols for that vessel should be followed. Responding services should be advised of the patient's COVID-19 positive status. The onboard medical unit should consult with the receiving emergency department/medical unit with the transfer facilitated by SA Ambulance Services (SAAS) using airborne respiratory precautions.

If concerns arise about a passenger or crew member's health out of hours, contact the [National Coronavirus Helpline](#) on 1800 020 080 (24 hours a day, 7 days a week).

If a case requires urgent care and off boarding for hospitalisation, onboard medical staff are to escalate the person's care by calling 000.

For all other cases requiring offboarding to a local health service, the transfer of care should be initiated by the onboard medical staff to Medstar 13 STAR (137827) or by calling 000.

## How to manage close contacts

Close contacts are not required to quarantine if they abide by the following conditions for seven full days whilst on board as outlined in the [Eastern Seaboard and Western Australian Cruise Protocol](#):

- Test negative using a self-administered RAT each day
- Wear a mask at all times when outside the cabin, including when outdoors
- Eat in dining areas separate to other passengers.

Cruise lines must ensure close contacts have access to free masks and RATs for this purpose. If close contacts disembark at the end of the voyage prior to seven full days, they are to follow the [close contact guidelines](#) on the SA Health website.

Close contacts may attend on-shore excursions if the above criteria are met and they are asymptomatic. It is recommended that on-shore tour operators are advised of any close contacts attending their tours and to make COVID-19 safe arrangements as appropriate.

If a close contact has symptoms and returns a negative RAT, PCR testing should be undertaken if available. Where PCR testing is unavailable, the close contact should remain isolated onboard and conduct a second RAT 24 hours later to rule out a possible initial false negative result.

Crew and passengers who have previously tested positive to COVID-19 should not be considered a close contact and should not be required to test for COVID-19 for the 35 days since their previous positive test. These individuals can be considered close contacts if based on a clinical decision made by on board medical staff. It is the responsibility of cruise operators to obtain appropriate evidence of recent infection from passengers/crew.



## Identifying, managing, and reporting outbreak

### Activate your Outbreak Management Plan

In the event of an outbreak, activate your OMP immediately and nominate appropriate personnel responsible for overseeing testing, quarantine, isolation, and communication with CDCB COVID Operations.

### Identifying an outbreak

Refer to the below outbreak thresholds defined in the [Eastern Seaboard and Western Australian Cruise Protocol](#) and [CDNA National Guidelines for Cruising in Australia](#). An active case refers to a PCR or RAT positive case that does not meet the release from isolation criteria – see [CDNA National Guidelines for Public Health Units](#)

Tier 1	Tier 2	Tier 3
0-3% active cases	3-10% active cases (or minimum 20 persons for vessels with <150 persons) (Outbreak threshold met)	More than 10% active cases (Outbreak threshold met)
Minor impact to staffing and/or resources.  No impact to critical services (e.g. healthcare, engineering, etc.	Moderate impact to staffing and/or resources  Able to maintain critical services.	Major impact to staffing and/or resource shortages  Unable to maintain critical services and/or imminent cessation of critical services.

### Managing an outbreak

If the number of COVID-19 cases meets the outbreak threshold ("Tier 2" or above), the cruise vessel should implement the following recommended actions outlined in [CDNA National Guidelines for Cruising in Australia](#) outbreak threshold table:

- Notify SA Health CDCB COVID Operations and provide additional information upon request.
- Seek advice from SA Health CDCB COVID Operations on management actions and advise of actions taken to date.
- Direct the use of masks for all passengers and crew outside of cabins (except when outside or eating/drinking).
- Meals to be taken to cabins and close communal dining areas where possible.
- Limit crew members congregating in shared spaces for meals, smoke breaks etc.
- Increase testing of asymptomatic passengers and crew.
- The cruise vessel outbreak management team to consider end of voyage testing where Tier 2/Tier 3 thresholds are reached.



- Increase communication to passengers to monitor for symptoms of COVID-19 and encourage them to get tested if any symptoms develop.
- Cruise ship to maintain records of positive cases among staff and crew.
- Consideration of surveillance testing ahead of shore excursions or cancellation of on-shore visits to communities of concern identified in discussion with SA Health CDCB COVID Operations. Please note that close contacts must have undertaken their daily RAT prior to a shore excursion.
- Consideration of additional infection control measures such as increased mask use.

In the event that an outbreak meets the Tier 3 threshold (i.e., more than 10% of total passengers and crew are COVID positive), cruise operators should consider cancellation of social activities and shore visits.

All vessels should take additional precautions to reduce the risk of transmission of COVID-19 into regional and other high-risk communities, including changing itineraries to reduce community interaction, when there are concerning levels of circulating infection on the vessel.

### Reporting an outbreak

Contact CDCB COVID Operations within 24 hours (or as soon as possible) to report the outbreak (Tier 2 or above).

Email: [healthdsiu@sa.gov.au](mailto:healthdsiu@sa.gov.au) (During business hours 9am – 5pm)

Contact number: 1300 232 272 (outside business hours 5pm-9am)

### Declaring an outbreak over

An outbreak can be declared over when the proportion of active cases falls <3% among passengers/crew, and/or, the vessel is no longer experiencing impacts to critical services.

## Appendix 1: Summary of Maritime Protocol Differences specific to South Australia

The table below directly corresponds to the [Eastern Seaboard and Western Australian Cruise Protocols](#). The text in the left-hand column is copied directly from the Protocols, whilst the text in the right-hand column highlights South Australian jurisdictional differences.

As guidelines on Isolation and other requirements change over time, this protocol will be subject to change.

Eastern Seaboard Cruise Protocols	
Summary of Maritime Protocol Differences – South Australia	
Agreed Protocols	SA Jurisdictional Advice
Shore Excursions	
<p>4.1 Cruise lines should develop COVID-safe protocols or plans for each shore excursion. The plans should outline risk mitigation measures that will be put in place during a shore excursion. COVID-Safe Plans for shore excursions should consider the specific needs of the local communities, including rural, remote, and Aboriginal communities. These plans should be developed in consultation with local health authorities.</p> <p>4.2 Masks must be worn onshore in accordance with local Public Health Order rules for local settings and will be highly recommended during indoor onshore activities in public indoor spaces and in crowded outdoor spaces.</p>	<p>Entry into remote Aboriginal communities should, at all times, comply with any community-based restrictions.</p>
Testing Protocols	
<p>6.4 Passengers are to follow the reporting requirements of local health authorities for self-administered RATs. Cruise lines should have robust systems in place to capture positive COVID-19 results of passengers and crew while onboard the vessel.</p>	<p>Cruise operators to use CDNA Cruise Vessel Reporting Tool (Attachment 1) and provide this to SA Health via email below: <a href="mailto:healthdsiu@sa.gov.au">healthdsiu@sa.gov.au</a></p>
Onboard Health Care	
<p>8.3 Cruise lines must have the ability to supply approved COVID-19 anti-viral medication onboard for patients if clinically indicated.</p>	<p>SA Health strongly recommend cruise operators facilitate access to <a href="#">anti-viral treatment</a> for people at higher risk of severe illness as per national eligibility criteria.</p>

### Escalation of Health Issues

12.1 Cruise lines must refer and transfer COVID-19 cases to hospital where they cannot be safely managed onboard, in line with the process required by local health authorities.

12.2 Cruise lines should work with local authorities to develop a notification and referral process for each port. This will outline the containment arrangements for transferring cases to hospital.

All critical cases to be offboarded by calling 000

All other cases that are non-critical, but still require offboarding to a local health service should be initiated by onboard medical staff to Medstar 13 STAR (137827)

### Disembarkation

13.2 Passengers with COVID-19 are able to drive home if they have their private transport at the port and are well enough to travel. These passengers must comply with restrictions in the local jurisdiction when considering alternative transport options (such as public transport, taxi or rideshare).

SA Health strongly recommend that COVID-19 positive individuals follow SA Health's [COVID-19 positive case advice](#) when travelling home.



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28 / 10 / 2022