

Portfolio Committee No.2 – Inquiry into the COVID-19 classification of the Minister for Health  
Responses to Questions on Notice  
Health - 25 November 2022 (INQ22/XXX-XX)

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INQ22/XXX-XX

Transcript page: 34

COVID-19 classification of the Minister for Health - Post hearing responses

**The Hon. MARK LATHAM:** Through the pandemic, Dr Chant, has Health taken action against anyone for giving misleading advice to a contact tracer?

**KERRY CHANT:** The general approach to health has been to seek the cooperation of contact tracers. I'm not aware that we actually have, but I would actually have to just check with our legal team about whether we have brought charges against anyone.

**The Hon. MARK LATHAM:** If you could take that on notice. Thanks. It's a criminal offence, isn't it, to give false and misleading information to a contact tracer?

**KERRY CHANT:** I think there was a requirement for individuals to be appropriately correct in terms of their evidence to the contact tracers, Mr Latham.

**ANSWER:**

Clause 25A of the Public Health (COVID-19 Additional Restrictions for Delta Outbreak) Order 2021 commenced on 16 August 2021 and directed that a person must not provide information to a contact tracer that was not true and accurate. This direction was continued in later public health orders. Section 10 of the Public Health Act 2010 makes it an offence to, without reasonable excuse, fail to comply with a public health order. The NSW Ministry of Health has not prosecuted anyone for failure to comply with this direction.

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**The CHAIR:** You've indicated you didn't hear Ms Musto's evidence. I understand that *Hansard* will provide an actual reflection of what she said. But we know there's a handwritten note that she prepared. That was, as I understand, notes that she took essentially to prompt her. They were certainly not detailed notes, and she concedes that, nor were they intended to be detailed notes. But if I understand her evidence correctly, there's another stage whereby—and I presume this was done with Minister Hazzard. I think she used the words "a questionnaire", which is completed. A questionnaire is part of the contact tracing process. Forgive me if we've actually received this through Standing Order 52, but presumably there would be no reason why that would not have been required to be done for Minister Hazzard. Or would the fact he responded in the way that he did, by saying, "I wasn't in the vicinity," or "I wasn't a close contact" or "not directly involved with him face to face" obviate the whole thing so there would be no progressing to the next stage of doing the more complex questionnaire? Is that something we are able to check on notice?

**KERRY CHANT:** I'd have to understand the context of Ms Musto's response and the question put to her.

**The CHAIR:** That will be in the transcript, yes.

**KERRY CHANT:** But the process is that the contact tracers would routinely, in their case interviews, collect a lot of information about the case and who they thought they were in contact with, and the various circumstances, to make that assessment. In some cases they would then seek clarification, where we might delve in more deeply in terms of some of the casual or close contact—some of the contact. I don't want to get myself mixed up here in the language.

**The CHAIR:** I do understand; this is careful.

**KERRY CHANT:** But where people might have identified that they could have been in contact with these people, but can't actually recall, or anything like that, then further interviews are done with those individuals to clarify what the nature of it is. I think what Ms Musto might have been alluding to is the contact tracing for the cases, but I will double-check.

**ANSWER:**

All documents recording Minister Hazzard's interview have been produced. No questionnaire was requested to be completed by Minister Hazzard.

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COVID-19 classification of the Minister for Health - Post hearing responses

**The Hon. JOHN GRAHAM:** Yes, and I can accept that. There are clearly some different recollections here and a confusing situation, but the accounts are so far apart. That's the thing that we're really struggling to reconcile here. I put to you that statement from Adam Marshall:

The four of us were engaged in conversation at close quarters for several minutes before the Minister moved on to another part of the room.

I just cannot reconcile that with the statement that tipped the assessment over into casual contact, the statement put to Ms Musto that there was no conversation and there was no contact.

**KERRY CHANT:** Again, I did not listen to Ms Musto's evidence, but all I'm going on is the handwritten notes that I alluded to. It indicated there not face-to-face contact; it didn't necessarily reflect on—I don't know what Ms Musto's position was on whether a conversation occurred or not. I cannot comment on that.

**The Hon. JOHN GRAHAM:** Understood. Acknowledging that there's not a lot of light you can shed on that contradiction to bring that gulf together, why didn't the contradiction itself come to light at the time? Why wasn't it clear that there were two conflicting accounts? There are now; there were at the time. Why didn't that become more clear in the process?

**KERRY CHANT:** I can't comment on the processes; all I can say is that the staff team were acting rapidly to assess the cases and contacts and follow the process. I can't comment on the particular issues around—obviously the fact that Ms Musto was allocated the task of doing the assessment indicates that Minister Hazzard had been identified as being potentially in proximity or in some way needing to be assessed.

**The Hon. JOHN GRAHAM:** If a Minister of the Crown, the Minister for Health, says, "Look, I didn't have contact," I don't think it's unreasonable to take that at face value—except for that detailed and very different statement from Adam Marshall that was passed over to the contact tracing team at the time. That's the issue I'm struggling to understand.

**KERRY CHANT:** And as I said, I think it may be the way language is described about direct contact. Obviously, in a group, you can be standing and having a conversation but very distanced. It's very different, those dynamics, and I can't comment on that.

**The Hon. JOHN GRAHAM:** But that is not what Adam Marshall is putting. He is saying "engaged in conversation at close quarters". He's quite specific about the fact that there's a lot he doesn't recall. This is quite some time ago. He has some other views that he hasn't put down because, on the balance of probabilities, he's probably got a recollection but he doesn't recall clearly. He says, "I have only provided here what I can recall today with absolute certainty." This bit he is certain of, and it's not a matter of language, and that is "conversation at close quarters for several minutes". That would have triggered the guidelines at the time for a close contact, if that was true, wouldn't it?

**KERRY CHANT:** If it was face-to-face contact with the individual. As I've said, per the CDNA guidelines, face-to-face contact would have constituted a close contact.

**The Hon. JOHN GRAHAM:** Are there other records held by Health that have not yet been provided to the Committee that might shed light on this question that you're aware of, records of interview or something from that matter?

**KERRY CHANT:** I'll just have to take that on notice and check in our NCIMS records whether there's anything more detailed in the NCIMS records.

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**ANSWER:**

A number of documents have already been produced to Parliament in response to a Standing Order 52. Two additional documents on the Notifiable Conditions Information Management System (NCIMS) have been identified, and are attached.

NSW Health takes patient privacy very seriously. Information collected on NCIMS is personal health information and would not normally be released. In this case, the Hon. Adam Marshall MP, in his submission to the inquiry dated 24 November 2022, gave his consent “for all records, written or audio, of my interviews with the NSW Health contact tracing team to be made available to your committee, for the purposes of this inquiry”.

Certain personal information (such as Mr Marshall’s residential address) and health information (unrelated to the positive COVID-19 diagnosis) of Mr Marshall have been redacted. Redactions of other individual’s personal information unconnected to the terms of reference of the inquiry have also been redacted. Noting the NCIMS records contain personal and health information, NSW Health requests these records not be used or disclosed otherwise than for the purpose of the inquiry.

The records are the following:

Document Name	Description	Time/Date of Upload
Tab A - novel-coronavirus-case-questionnaireAdMa108814214.pdf	Case questionnaire from initial case interview that was commenced on 23 June 2021 at approximately 11pm to 1230am 24 June 2021	24/06/2021 00:38
Tab B -ParlExposureDetailsAdMa.docx	Re-interview details from re-interview conducted on 24 June 2021	24/06/2021 14:23

## Attachments

Tab	Title
A	novel-coronavirus-case-questionnaireAdMa108814214.pdf (Case questionnaire from initial case interview that was commenced on 23 June 2021 at approximately 11pm to 1230am 24 June 2021)
B	ParlExposureDetailsAdMa.docx (Re-interview details from re-interview conducted on 24 June 2021)



# COVID-19 CASE QUESTIONNAIRE

## Initial Interview

NCIMS ID: 108814212

First Name: Adam \_\_\_\_\_ Surname: Marshall \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: [REDACTED] \_\_\_\_\_ Case type:  Confirmed  Probable  Suspected

Gender: M \_\_\_\_\_ Name of Interviewer: [REDACTED] \_\_\_\_\_

Date of interview: 23062021 \_\_\_\_\_

Address: [REDACTED] \_\_\_\_\_

Interpreter required?  No  Yes. Specify language spoken \_\_\_\_\_

Case interviewed?  Yes  No. If no, specify \_\_\_\_\_

### START INTERVIEW HERE

**Prompt:** Hi, my name is \_\_\_\_\_. I am calling from \_\_\_\_\_ Public Health Unit. I need to speak with you about your COVID-19 test. Has a Doctor already phoned you with your test results?\*

**Or if message is left:** Hi this is \_\_\_\_\_. I am calling from the Public Health Unit and need to speak with you urgently, please phone me back on \_\_\_\_\_ ask for \_\_\_\_\_.

<p><b>*If No: use next statement</b></p> <p><i>You recently had swabs taken and you have tested positive to coronavirus. We now need to collect some information about you and the people you have been in contact with – is that ok to do now?</i></p>	<p><b>*If Yes: use next statement</b></p> <p><i>Your Doctor has told you that you have tested positive to coronavirus. We now need to collect some information about you and the people you have been in contact with – is that ok to do now?</i></p>
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### Indigenous status

Do you identify as Aboriginal or Torres Strait Islander?

Aboriginal origin

Torres Strait Islander origin

Both Aboriginal and Torres Strait Islander origin

Not Aboriginal and Torres Strait Islander origin

Not Stated

Consider involving Aboriginal Health Worker as per local practices

Date of specimen collection : 23062021 (from NCIMS if available)

### 1. Death

Has this person died?  No

Yes. Date of death:   /  /  . Is cause of death COVID-19 related?  Yes  No  UK

Unknown

Cause of death: \_\_\_\_\_

### 2. Hospitalisation

Case admitted to hospital at time of interview?  Yes  No  UK

If yes, name of hospital: \_\_\_\_\_

Date of admission   /  /   MRN: \_\_\_\_\_

Reason for admission: \_\_\_\_\_

#### Obtain the following information from medical records:

Acute respiratory distress syndrome  Yes  No  UK

Pneumonia  Yes  No  UK

If yes, confirmed by X-ray or CT scan?  Yes  No

Pneumonitis  Yes  No  UK

Other diagnoses  Yes  No  UK

If yes, please specify: \_\_\_\_\_

### 3. Symptoms (up to the time of interview)

Prompt: Now I am going to ask you some questions about symptoms.

Did the person have symptoms?  Yes. If Yes, onset date:   /  /   (dd/mm/yyyy)  No  Unknown

Fever  Yes  No  Unknown

Highest temperature: \_\_\_\_\_ (Celsius)

Self-reported?  Yes  No  Unknown

Cough  Yes  No  Unknown

Chills or rigors  Yes  No  Unknown

Sore throat  Yes  No  Unknown

Shortness of breath  Yes  No  Unknown

Runny nose  Yes  No  Unknown

Headache  Yes  No  Unknown

Fatigue  Yes  No  Unknown

Loss of taste/smell  Yes  No  Unknown

Joint pain  Yes  No  Unknown

Muscle pain  Yes  No  Unknown

Confusion/irritability  Yes  No  Unknown

Malaise  Yes  No  Unknown

Diarrhoea  Yes  No  Unknown

Nausea  Yes  No  Unknown

Vomiting  Yes  No  Unknown

Conjunctivitis  Yes  No  Unknown

Abdominal pain  Yes  No  Unknown

Chest pain  Yes  No  Unknown

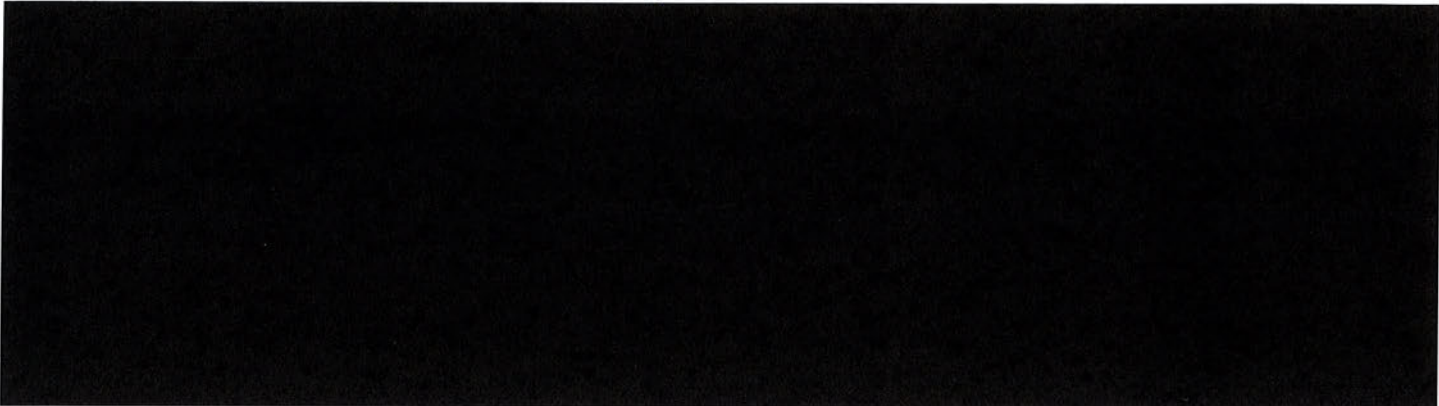
Other symptoms?  Yes  No  Unknown

If Yes, specify: tired - no symptoms - feels fine

Has the person been told by a doctor they have pneumonia?  Yes. Have they had a chest X-ray or CT scan?  Yes  No  Unknown  
 No  Unknown

For asymptomatic cases only, specify the reason for the COVID-19 test: \_\_\_\_\_

#### 4. Risk factors (to identify vulnerable cases)



Current smoker  Yes. Cigarettes per day: \_\_\_\_\_ Years of smoking: \_\_\_\_\_  No  Unknown

Pregnancy  Yes. Weeks gestation: \_\_\_\_\_  No  Unknown

#### 5. Vaccination Status

Have you ever received a COVID-19 vaccine?  Yes  No  Unknown by case or doctor

If Yes,

Dose 1. Date of Vaccination: \_\_\_/\_\_\_/\_\_\_\_ (dd/mm/yyyy)

Vaccine Type:  COMIRNATY (BioNTech/Pfizer)  Covishield (Oxford/AstraZeneca)  NVX-CoV2373 (Novavax)  
 Unable to recall  Other: \_\_\_\_\_

Vaccination Validation:  AIR or other register  Self report/carer recall  Health records  
 Unable to validate  Other: \_\_\_\_\_

Country of Vaccination:  Australia  Other: \_\_\_\_\_

Dose 2. Date of Vaccination: \_\_\_/\_\_\_/\_\_\_\_ (dd/mm/yyyy)

Vaccine Type:  COMIRNATY (BioNTech/Pfizer)  Covishield (Oxford/AstraZeneca)  NVX-CoV2373 (Novavax)  
 Unable to recall  Other: \_\_\_\_\_

Vaccination Validation:  AIR or other register  Self report/carer recall  Health records  
 Unable to validate  Other: \_\_\_\_\_

Country of Vaccination:  Australia  Other: \_\_\_\_\_

Notes: If the person has received more than two doses, please record their information here

## 6. Contact tracing

INFECTIOUS PERIOD: 22062021 (48 hours prior to symptom onset date) to 23062021 (Interview Date)

Use specimen collection date as onset date if asymptomatic

**Prompt:** *The following questions will help us identify others who may have been exposed to COVID-19. We will need to contact the people identified to let them know that they are at risk of infection. They will need to stay at home for a period of 14 days from their last exposure and get tested regardless of symptoms. This is important to limit the spread of the infection.*

Consider pausing the interview to provide the case or interviewer with an opportunity to advise any close contacts (especially a household member or friend who has had a lot of contact with the case in the infectious period) who are in high risk settings (e.g. in a health care or aged care facility, in close contact with a vulnerable person) to get tested and return home to quarantine as soon as possible. In such instances, the close contact/s should receive advice as to how to minimise their exposure to others until in quarantine and be informed that a public health staff member will contact them shortly.

The following questions relate to the time from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ (insert dates of infectious period).

Can you please take me through what you've been up to in this time? A calendar or diary, work roster, phone photos, credit or debit card information, might help.

List all close contacts in table on page 5 and complete Appendix A.

### Household contacts

During this time, was there anybody else living with you?

If yes, collect details of occupation and work location/s for table over page.

Yes  No

### Work-related close contacts

During this time did you work outside of your home?

If yes, collect details of occupation and work location/s for table over page.

Yes  No

### Other close contacts

Have you provided care/healthcare to anyone?

Yes  No

Outside of work and home who else have you had contact with?

(Ask about visits to health care or aged care facilities and attendance at any large gatherings or venues at higher risk for COVID-19 transmission including restaurants/clubs, places of worship and gyms)

### COVIDSafe App

Have you downloaded the COVIDSafe App?

Yes  No  UK

**Prompt:** *Since you have downloaded the COVIDSafe App, we would like to make use of your data to check if there are additional people who may be at risk of infection. This includes people who may not be known to you, such as people near you for an extended time on public transport or in other public spaces. Contact tracing using data available from the app is anonymous. This means that your identity will not be revealed to potential contacts, and the contacts' identity will not be revealed to you. Making your COVIDSafe App data available for the purpose of contact tracing is entirely voluntary. This means that there is no obligation for you to agree, and there are no negative consequences if you prefer not to share your data.*

Do you consent to making your COVIDSafe App data available to NSW Health for the purpose of contact tracing?  Yes  No

If yes, can I please confirm that number is the one I have called you on?  Yes  No Specify number: \_\_\_\_\_

**Option 1: Interviewer has access to the COVIDSafe App web portal**

**Option 2: Interviewer does NOT have access the COVIDSafe App web portal**

**Prompt:** *I will now log onto the web portal behind the app and send you a text message with a PIN. When you enter this PIN into a field on the COVIDSafe App, it will transfer recent contact data from your phone into the web portal for us to review. We may need to call you back at a later point to find out a bit more about encounters that the app may have registered.*

→ Download app data with the case, then continue with the interview

**Prompt:** *As this process involves a few steps, we would like to call you back to a later point to talk to you about the COVIDSafe App.*

→ Continue with the interview and get a web portal user to call the case later

Appendix B: COVIDSafe App Worksheet may assist with the assessment of potential close contacts outside the web portal, where required. Please submit Appendix C: COVIDSafe App minimum data collection form to [MOH-PHEOSurveillance@health.nsw.gov.au](mailto:MOH-PHEOSurveillance@health.nsw.gov.au) once app-based contact tracing is completed.



**Close Contacts**

To refer to Close Contact Tracing Team (for initial or follow up calls) in NCIMS select "To MOH contact tracing" in the Contacts referred field in the Case Wizard. The service doing the initial call MUST create the close contact event in NCIMS.

**Household contacts**

Name	DOB	Phone	Location of exposure	Date of last contact	Service doing initial call	Follow up service

**Non-household contacts**

List all contacts in the table below. Alternatively, attach file to NCIMS record and specify file name here.

If transport contacts are referred provide details to enable follow up with relevant company (e.g. travel route,time,company,seat number, ride share)

**Social contacts**

Social contacts are friends or extended family as nominated by the case. An exposure location is required for all social contacts. If close contact occurred in multiple locations in the infectious period including in public and at a residential home list the public location. If exposure occurred only in one or more residential homes list location as residential home - no further detail is required.

Name	DOB	Phone	Location of exposure	Date of last contact	Work-related	Social contact	Service doing initial call (PHU/MOH)	Follow up method (required only if initial call done by PHU)
								<input type="checkbox"/> Whispir <input type="checkbox"/> MOH <input type="checkbox"/> PHU
								<input type="checkbox"/> Whispir <input type="checkbox"/> MOH <input type="checkbox"/> PHU
								<input type="checkbox"/> Whispir <input type="checkbox"/> MOH <input type="checkbox"/> PHU
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								<input type="checkbox"/> Whispir <input type="checkbox"/> MOH <input type="checkbox"/> PHU

## 7. Source of infection

INCUBATION PERIOD: \_\_\_/\_\_\_/\_\_\_\_\_ (14 days prior to symptom onset) to \_\_\_/\_\_\_/\_\_\_\_\_ (1 day prior to symptom onset date)

Use specimen collection date as onset date if asymptomatic

Check NCIMS to determine if case has been identified as a close contact with an exposure in the incubation period.

### 7a. Overseas travel

Prompt: *Did you travel outside of Australia in the 14 days prior to symptom onset?*

Yes. Date of Arrival \_\_\_/\_\_\_/\_\_\_\_\_  No  Unknown

If yes, specify country/countries: If traveled in infectious period, specify dates and details of travel e.g. flight numbers, allocated seat

Following investigation of recent travel, which is the most likely country of acquisition

What was the quarantine location of the case on collection of their **first** positive specimen relevant to this event — *Under current orders all overseas arrivals are required to quarantine*

- Police managed hotel
- Health managed accommodation (incl. healthcare facility) – includes people who are screened at the airport
- Other hotel – people who have a privately organised hotel to complete their quarantine
- Private residence
- Other – specify

Tested positive overseas?  Yes  No Date \_\_\_/\_\_\_/\_\_\_\_\_

Prompt: *Prompt: Since you have likely acquired COVID-19 in \_\_\_\_\_ (country of acquisition), do you consent for NSW health to provide your contact details to the health authority in \_\_\_\_\_ (country of acquisition) to aid them in contract tracing?*

Consent received to release contact details to relevant health authorities?  Yes  No

### 7b. Cases who have already been identified as close contacts on NCIMS

Prompt: *I understand you have been identified as a close contact of a confirmed COVID-19 case.*

*Have you been in quarantine?*

Yes. Date quarantine began 22/06/2021  No

*Where did you come into contact with the person with COVID-19?*

At home

• Relationship to case being interviewed:

\_\_\_\_\_

• Name of source case /s:

\_\_\_\_\_

• *Does he/she live in the same home as you?*

*What best describes your home:*

- Residential address
- Boarding school
- Hostel
- Aged care facility
- Group/disability home
- Military facility
- Other (specify)

**If source case is part of a known cluster, ask case if they also attended the cluster location.**

Outside of home.

**Confirm information regarding the place and time of exposure from NCIMS with case.**

Length of time at location:

If source case known, ask about time spent and proximity to source case.

**If acquired from a known case move to Section 7.**

### 7c. Links with known clusters

Obtain information on the location, date and time of current clusters and venues where cases have reported visiting while infectious.

**Prompt:** *We would like to understand where you may have come into contact with COVID-19. From information provided by people who have been diagnosed with COVID-19 we think it is likely there were one or more people infectious at the following locations in recent weeks. Have you been to any of these locations?*

Collect date and time of attendance:

Date quarantine began \_\_/\_\_/----

### 7d. All remaining cases

**Prompt:** *We'd like to investigate further where you may have come into contact with the COVID-19 virus, to do this we need to explore the 14 days prior to the day of your onset of symptoms. We are keen to understand where you have been and who you have spent time with. We ask this information of all cases without an obvious source of infection. Places that are common to a number of people help us understand where community transmission may be occurring. This is very important to help us understand and control the outbreak.*

*Can you please take me through the two-weeks leading up to the onset of your symptom? A calendar or diary, work roster, phone photos, credit or debit card information, might help. If you would like more time to remember where you have been, we can arrange to call you back so you can gather this information?*

*Have you been in isolation?*

Yes. Date isolation began \_\_/\_\_/----

No

The questions below may be used to prompt recall of all the people they have had contact with and places visited

**Prompt:** *In the 14 days prior to symptom onset, are you aware of having any kind of contact with someone with COVID-19?*

Yes  No  UK

If yes, specify type of contact, date, and location:

**Prompt:** *In the 14 days prior to symptom onset, can you recall having close contact with someone with respiratory symptoms? (e.g. fever, cough, sore/scratchy throat or shortness of breath including mild symptoms)*

Yes If yes, please provide details  No  UK

COVID-19 testing is recommended for anyone with respiratory symptoms.

**Prompt:** *Did you travel outside of NSW in the 14 days prior to symptom onset?*

Yes  No

If yes, specify destination and dates and mode of travel. Where relevant collection flight/train/bus details.

**Prompt:** *In the 14 days prior to symptom onset, did you work outside of your home?*

Yes  No

If yes, specify occupation and work location/s and dates:

**Prompt:** *Outside of work, did you spend any time in the following settings in the 14 days prior to symptom onset?*  
(see Fourteen Day Diary over page)

## Fourteen Day Diary

Setting category	Subcategory	Details (dates, name, suburb)
<input type="checkbox"/> Aged care facility		
<input type="checkbox"/> Other residential facility	<input type="checkbox"/> Boarding school <input type="checkbox"/> Hostel <input type="checkbox"/> Group home/ disability home <input type="checkbox"/> Other	
<input type="checkbox"/> Aboriginal rural or remote community		
<input type="checkbox"/> Educational facility	<input type="checkbox"/> Childcare <input type="checkbox"/> Primary school <input type="checkbox"/> Outside hours school care <input type="checkbox"/> High school <input type="checkbox"/> University <input type="checkbox"/> TAFE <input type="checkbox"/> Other (describe)	
<input type="checkbox"/> Healthcare	<input type="checkbox"/> Hospital-public <input type="checkbox"/> Hospital-private <input type="checkbox"/> GP <input type="checkbox"/> Outpatient non-hospital <input type="checkbox"/> Pathology collection centre <input type="checkbox"/> Ambulance <input type="checkbox"/> Community pharmacy <input type="checkbox"/> Dental practice <input type="checkbox"/> Physiotherapy <input type="checkbox"/> Other (describe)	
<input type="checkbox"/> Correctional facility		
<input type="checkbox"/> Detention centre		
<input type="checkbox"/> Airport		
<input type="checkbox"/> Military facility		
<input type="checkbox"/> Transport	<input type="checkbox"/> Bus <input type="checkbox"/> Taxi <input type="checkbox"/> Rideshare <input type="checkbox"/> Ferry <input type="checkbox"/> Train <input type="checkbox"/> Minibus/van <input type="checkbox"/> Car	

## Fourteen Day Diary (continued)

Setting category	Subcategory	Details (dates, name, suburb)
<input type="checkbox"/> Community	<input type="checkbox"/> Beach <input type="checkbox"/> Park <input type="checkbox"/> Swimming pool <input type="checkbox"/> Sporting ground <input type="checkbox"/> Sporting stadium <input type="checkbox"/> Golf course <input type="checkbox"/> Gym <input type="checkbox"/> Other exercise venue <input type="checkbox"/> Restaurant/pub/nightclub/club <input type="checkbox"/> Hotel <input type="checkbox"/> Venue hired for event <input type="checkbox"/> House of family member/friend <input type="checkbox"/> House non-family member/friend <input type="checkbox"/> Place of worship <input type="checkbox"/> Construction site <input type="checkbox"/> Office building <input type="checkbox"/> Cultural venue (museum, art gallery, cinema, theatre, concert hall) <input type="checkbox"/> Shopping centre <input type="checkbox"/> Library <input type="checkbox"/> Hairdresser <input type="checkbox"/> Other (describe)	

## 8. Demographics

**Prompt:** Now I have few questions about you and your background.

Country of birth	
Ethnic and cultural background	<p><b>Prompt:</b> How would you describe your ethnic or cultural background? This can be based on a mix of your main language, your family origins, your culture, your religion or other shared values. It is not the same as nationality.</p>
Home setting	<input type="checkbox"/> Residential <input type="checkbox"/> Aged-care facility <input type="checkbox"/> Educational Institution <input type="checkbox"/> Assisted Living <input type="checkbox"/> Military Barracks <input type="checkbox"/> Correctional facility <input type="checkbox"/> Hostel <input type="checkbox"/> Other, specify:
Primary Occupation	Specify role and usual location/s. Minister
GP	Regular GP name:  Practice name:  Phone number:
Other services	Do you regularly have other health services that support you and your family? (e.g. community nursing, mental health or drug & alcohol services)  If Yes, provide details:

## 9. Assessment for home isolation (providing case is clinically well)

Identify where the case is currently isolating and plans to reside for the remainder of their isolation period.

If person is unable to isolate themselves within the home alternative accommodation should be arranged. This should be assessed on a case by case basis by senior public health staff as per local practice. Household members who are well may need to relocate for the isolation period. Consider immediate referral to relevant local service for cases who are more vulnerable (e.g. age over 70 years, significant underlying illness) as per local practices.

*We are going to talk about your plan for the coming days. You are required to isolate yourself until you are no longer infectious. Until this time you should not go outside your home, except to seek medical care. You will need to let your employer know that you cannot attend the workplace until you are told it is safe to do so (this will depend on how long it takes you to recover).*

*The following questions will help us understand if you are able to isolate at home.*

**If answer NO to any of the following questions discuss with senior staff:**

- |   |   |                             |
|---|---|-----------------------------|
| Is the person able to isolate in separate bedroom   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is the person able to use separate bathroom   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the person feel safe to stay at home for the whole isolation period  | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the person have food, essential medicines for the next couple of weeks (includes able to be delivered by family and friends) | <input type="checkbox"/> Yes            | <input type="checkbox"/> No |
| For people who live with others, is there someone that can prepare food for them:   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No |

**If answer YES to any of the following discuss with senior staff:**

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| Does the person need to provide care to others (e.g. children, disabled, elderly) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is there a healthcare worker or aged care worker in the household                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the person live with vulnerable people (elderly or with health problems)     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the person have any other concerns about being at home for next week         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the person have any substance use that will be impacted by their isolation   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

## 10. Information for case

**Advice for cases isolating at home with other household members**

- Do not leave the home except for seeking medical care
- Stay in a separate room and only use common area when others are absent
- Food must be prepared for you and delivered to you
- Wipe down surfaces and items used with detergent and hot water after use

**Plan of action should the case deteriorate**

- Provide advice as per local practice
- Remind the case to always call 000 in an emergency and inform the ambulance of the COVID-19 diagnosis.
- Encourage to contact GP if needed.

**Information sharing**

**Prompt:** *As a part of a Public Health Order, the NSW Police and NSW Ambulance will be provided with your name and address. They may perform welfare checks to your residence during your isolation period.*

**Factsheets**

Collect details to email or post relevant factsheets.



## Appendix A

List the places visited and people seen in exposure period up to the day of interview. Where known, include length of time spent with each person and proximity.

Day -14 Date \_\_/\_\_/\_\_

Day -13 Date \_\_/\_\_/\_\_

Day -12 Date \_\_/\_\_/\_\_

Day -11 Date \_\_/\_\_/\_\_

Day -10 Date \_\_/\_\_/\_\_

Day -9 Date \_\_/\_\_/\_\_

Day -8 Date \_\_/\_\_/\_\_

## Appendix A (continued)

Day -7 Date \_\_/\_\_/\_\_

Day -6 Date \_\_/\_\_/\_\_

Day -5 Date \_\_/\_\_/\_\_

Day -4 Date \_\_/\_\_/\_\_

Day -3 Date \_\_/\_\_/\_\_

**Day -2** Date 21/06/21

Arrived in Sydney at 130pm - flew out of Melbourne - in Victoria over the weekend - in regional victoria - partner lives in Regional Victoria QF440 Melbourne - Sydney  
Driver picked up at Sydney Airport - brought to ministerial office building at 52 martin place - office on level 17 - in office about 2pm  
Full cabinet meeting on level 13 230pm-all spaced out 415pm  
went back to office until 530 - driver drove to Paddington

**Day -1** Date 22/06/21

woke early - radio interviews, left at 8am and walked directly to parliament house and into your office (Level 9 in Parliament House)  
checkin through parliament house - temperature scan 36.6 or 36.8  
walked straight into office - sat down at computer - walked up  
830 meeting - with National party colleagues until 1030 - 20 people - every single member of National party - sat directly next to [REDACTED] and [REDACTED] - spoke a few times in that meeting

## Appendix A (continued)

**ONSET DATE (Day 0)** Date 23/06/2021

Woke up. Walked up martin place about 745am, tested at same time as [REDACTED] - 250m; stopped briefly at traffic lights; hardly anyone around; was wearing a mask to the clinic and walked straight back. Home all day

**Day +1** Date   /  /  

**Day +2** Date   /  /  

**Day +3** Date   /  /  

**Day +4** Date   /  /  

**Day +5** Date   /  /  

**Day +6** Date   /  /  

Add additional days in infectious period as needed.

B

## Timeline of Exposures

### **Day - 2: 21 June 2021**

Arrived in Sydney at 130pm - flew out of Melbourne-Sydney QF440 (in regional Victoria visiting partner)

Driver picked up at Sydney Airport - brought to ministerial office building at 52 martin place

Office on Level 17 - office about 2pm Full cabinet meeting on level 13 230pm-all spaced out 415pm went back to office until 530

Driver drove to Paddington and met 2 colleagues were in the Royal Hotel opposite pizza place

Had two drinks there with them (half hour - [REDACTED])

[REDACTED] went directly into Christo's Pizzeria at 6:44pm - sat there for about 20 mins - 3 joined at about 650-7pm.

Had dinner there – ordered 3 pizzas. [REDACTED] went to the bathroom. No one else used the bathroom. There for about an hour. Left about 8pm - all left together, no one else leaving the restaurant at the time. [REDACTED] drove home separately. Driver dropped off [REDACTED] who live around Surry Hills area – driver then dropped case back at the apartment. 8:45pm

### **Day -1: 20 June 2021**

Woke early - radio interviews at home

Left at 8am and walked directly to parliament house and into office (Level 9 in Parliament House) Checkin through parliament house - temperature scan 36.6 or 36.8 then walked up stairs straight into office - sat down at computer

830 -1030 meeting on Level 12 – walked up stairs to get there- with National party colleagues – all members of National Party

- sat directly next to [REDACTED] and [REDACTED] - spoke a few times in that meeting

1030 - 1120am On level 12 Government party room

- one person next to him ([REDACTED]) and every single member in that room - everyone spaced out (liberal and national party) - didn't speak

Walked back downstairs to office from until time for budget speech

12pm – 1245 - all members of parliament listening to budget speech for 45 mins - distanced – on the right [REDACTED] [REDACTED] (all spaced out - 1 m distance) - no one was wearing masks – cae didn't speak

Went back to office via stairs - writing a press release, radio interviews

Went to level 6 for a tv interview with channel 9 - only cameraman from channel - [REDACTED] skinny young guy (no journalists) 145pm - 5 to 10 mins took lifts - also people in the lift

Walked back to office to prepare for question time

215pm back in chamber with all the members same people ( [REDACTED] next to him) - no questions so no speaking - went until about 330pm

Walked back to office, had a bowl of cereal in office at 430pm, no coffee in the day – no time for a coffee on that particular day

330-6pm Series of issues to address a number of ministerial offices so went to a number of offices (see attachment for details of who he spoke to)

610pm Walked down internal stairs – Went directly down to the Stranger's Dining room - big dining room in parliament house

610—845 Function hosted by National Party approximately 80 people present, including members of parliament and public - spread out tables - 8 people seated at each table (see additional details below)

845pm Went straight up to office - no staff present - grabbed laptop and ipad walked straight out of parliament and straight back to home – people around in Martin Place but didn't speak to anyone, not wearing mask

915/920pm – arrived home, home for the evening

#### **Day 0: 23/6/2021**

Woke up. Walked up to martin place about 250m at about 745am, tested at same time as [REDACTED]; stopped briefly at traffic lights; hardly anyone around; was wearing a mask to the clinic and walked straight back. Home all day

#### **Details of Fundraiser Function in Stranger's Dining Room**

[REDACTED] – opposite him at the table

Other guests – [REDACTED]

First 45 minutes of the evening wandering around – go and talk to every guest in the room

Guest Speakers – [REDACTED] spoke – on the opposite side of the room – walked in, spoke and then left – 30m away

Guest Speakers – Health Minister Hazard – 3 or 4m at the closest – came and over talked to guests close to case

Guest Speaker – [REDACTED] – spoke – about 15m away but remained at function

Guest Speaker – [REDACTED] - all seated at tables – premier walked in and spoke and walked out – 15m away

*State Director of National Party – contact details for function attendees*

[REDACTED] [REDACTED]

### Details of Ministerial Office Visits

Dropped into to speak to staff and offices – 5,10,15 minutes – quite small offices – other people – 5-6

[redacted] – spoke to [redacted] – brief interaction – big open plan office – standing up – spoke to staff members

Minister of [redacted] – [redacted] wasn't there, spoke to staff

Minister for [redacted] – [redacted] wasn't there, spoke to staff

Minister of [redacted] – sat down and spoke to [redacted] ck – spoke for about 10 mins

Minister for [redacted] – sat down and spoke to [redacted] – spoke for a few minutes

Minister for [redacted] – sat down and spoke to [redacted] – 5 mins

Minister for [redacted] – [redacted] wasn't there – 2 minutes in office

Minister for [redacted] – [redacted] – spoke to [redacted] for about 5 mins

Minister for [redacted] – wasn't there, just staff, 10 mins

Minister for Health – minister wasn't there, talking with and standing next to [redacted] [redacted] [redacted] – only one there – spoke for 10 mins

[redacted] Office – [redacted] not there at the time – spent some time talking to [redacted] [redacted] for 5 mins – just [redacted]

### Staff in his Office:

[redacted] (should have contact details)

[redacted]

[redacted]

[redacted]

[redacted]

- All at home isolating – have been tested and report negative results - waiting for contact from health

[redacted] – driver - didn't drive at all during infectious period

### Notes from Re-interview Focusing on Parliamentary Exposures:

#### National Party Room 830-1030 on level 12

- Room is not that big – sitting reasonably close together



Layout – built 130 years ago – not that big – sit where the markers are placed. Sit on front bench as minister

Left hand side – Sat next to [REDACTED]

Right hand side – nothing – big gap to the opposition bench

[REDACTED] and [REDACTED] – 10 metres away

People sitting on seats about 2.5m away – fixed seating plan and stickers where you set

People sitting about 1m behind (backs of seats quite high so can't physically see people behind)

Possibly spoke with [REDACTED] discussing something and then left

### **Chamber at Question Time – walked down the stairs**

sat next to [REDACTED] again (same people, same seating)

- Any interactions? – everyone too far away -didn't speak
- Exited through one of the exit doors – took stairs to office