HIGHLIGHTS

- Papua New Guinea has **eight cases of COVID-19**, to date: six cases were mild and have fully recovered; two were moderate cases, admitted to hospital and recovered, one of which was repatriated.

- On 27 May, the PNG Defence Force (PNGDF) launched an aerial system of drones to be used for surveillance in border and maritime provinces. The Australian Defence Force (ADF) has supported and enhanced the work of PNG military with modern technology offered together with training.

- On 28 May, NDoH led by A/Health Secretary Dr Paison Dakulala and WHO convened the 2nd weekly virtual meeting with the CEOs of the Provincial Health Authorities, to discuss the ongoing health sector preparedness and response for COVID-19 and discuss ways forward.

- On 28 May, US Embassy Port Moresby announced an additional K8 million ($2.35 million) to support clinics in the National Capital District, building capacity on infection prevention and control, supporting facilities, expanding testing capacity, establishing response teams, upgrading WASH facilitates and facilitating contact tracing.

- As of 29 May, a total of PGK 5.271 million from various sources (GoPNG, DFAT, UNICEF, WHO and private sponsors) was spent on various preparedness and response activities at the national level and in the provinces, including: clinical management and health care; operations, procurement and logistics; laboratory; risk communication and community engagement; surveillance and rapid response; infection prevention and control; and points of entry.

- Following the issuance of the National Emergency Order No 37 dated 17 May, syndromic surveillance reporting, and testing have improved, but gaps remain. As of 29 May, 59% of all the provinces reported. Seven provinces (West Sepik, East Sepik, ARoB, Madang, Western, Simbu and Eastern Highlands) have achieved over 80% reporting during the recent week. However, five provinces (Manus, Oro, New Ireland, Western Highlands and Central) did not submit any reports during the recent week.
SURVEILLANCE AND POINTS OF ENTRY

- Syndromic surveillance reporting and testing have improved following the issuance of the National Emergency Order No 37 dated 17 May 2020 on COVID-19 Surveillance and Testing. The order mandated testing of all suspected COVID-19 cases (inclusive of all admitted severe acute respiratory cases), testing of clusters of influenza-like illness, daily syndromic reporting, and appropriate management of suspected COVID-19 cases.

- As of 30 May, 4646 samples were collected: 8 tested positive for COVID-19, 4410 tested negative while 228 samples are still pending result. [For number of samples collected and tested by province – refer Provincial Updates section]

<table>
<thead>
<tr>
<th>Point of entry</th>
<th>Cumulative number of persons screened at POE</th>
<th>Total number of persons screened at POE in the past 24 hours</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Air</td>
<td>1395</td>
<td>20 (9 passenger and 11 cabin crew)</td>
<td>17 from Brisbane (8 crew) 3 from Cairns (all crew)</td>
</tr>
<tr>
<td>Sea</td>
<td>730</td>
<td>0</td>
<td>Passengers and crew not allowed to disembark</td>
</tr>
<tr>
<td>Land</td>
<td>50</td>
<td>0</td>
<td>Border officially closed</td>
</tr>
</tbody>
</table>

- NDOH with the technical support from WHO is working with the provinces/PHAs to strengthen the existing surveillance system for monitoring the number of Influenza like illnesses and sub-acute respiratory illness. The daily COVID-19 surveillance reporting rate has improved, but gaps remain.

- As of 29 May, 59% of all the provinces reported. Seven provinces (West Sepik, East Sepik, ARoB, Madang, Western, Simbu and Eastern Highlands) have achieved over 80% reporting during the recent week. However, five provinces (Manus, Oro, New Ireland, Western Highlands and Central) did not submit any reports during the recent week.
CLINICAL MANAGEMENT and INFECTION PREVENTION AND CONTROL

- A team of officials from NDoH and WHO continues to roll out the comprehensive training on clinical management, IPC, surveillance, rapid response and risk communication; either virtually or face-face, as per the convenience of logistic arrangements:
  - On 2-3 May, a team from NDoH conducted a 2-day training for 20 healthcare workers in West Sepik. The participants were OICs of health centres, district health managers, and clinicians in the hospital.
  - On 5-6 May, a team from NoDH conducted a 2-day training for 32 healthcare workers in Kiunga, North Fly District, Western Province. The participants were OICs of health centres, surveillance officers and clinicians.
  - On 6-7 May, WHO supported the ‘Virtual Training on COVID-19 Response’ for 31 healthcare workers in Madang. Upon the request from the Provincial Health Authority, clinicians have been trained more in depth on clinical management of COVID-19 patients with focus on triage and early recognition of patients with severe acute respiratory infections, clinical syndromes such as acute respiratory distress syndrome, sepsis, oxygen therapy.
  - On 21-22 May, a team from NDoH and WHO conducted a 2-day training for 25 healthcare workers in Lae, Morobe Province. The participants were medical officers, HEOs and nursing officers from districts and Angau hospital.
  - On 23-24, a team from NDoH and WHO conducted a 2-day training for 25 healthcare workers in Bulolo in Morobe Province. The participants were HEOs, nursing officers, OIC of health centres and district health manager from Bulolo and Wau district.
On 4 May, Hon Jelta Wong, Minister for Health and HIV/AIDS issued a Ministerial Circular to the PHA Boards reminding the importance of continued delivery of all the essential healthcare services to the communities despite COVID-19 pandemic to prevent another disease outbreak and deaths from preventable conditions.

All provinces are ramping up their efforts for COVID-19 preparedness and response, including the establishment of pre-triaging areas and isolation facilities. [For details: Refer Updates from the Provinces Section]

Based on the PNG Health Service Profile, there are 741 health facilities with 5,400 hospital beds, more than 50 Intensive Care Unit (ICU) beds and 9147 health workers (medical doctors, Health Extension Officers, nurses and CHWs). Most provinces do not have quarantine facilities or isolation wards. The number of functional ICU facilities is inadequate.

COMMUNICATION AND COMMUNITY AND ENGAGEMENT

The PNG Communications Plan for COVID-19 (covering both risk communication and community engagement) continues to guide the communication response and public messaging on COVID-19, reinforcing the prevention messages and guarding against complacency.

Provincial teams continue to conduct mass awareness activities on COVID-19 using local radio and community dialogue and meetings.

Education and health sectors, church partners and NGOs are working together to develop communication materials for the schools – especially in the context of school resumption.

Teams are currently deployed to the provinces to conduct trainings on key elements of the response, including communication and community engagement.

NDOH in partnership with the Department of Information, Communication and Technology have been conducting a weekly program on Mondays, Wednesdays and Fridays. The programs run from 8:30pm – 10pm three times weekly. The program is hosted by the Minister for Information, Communication and Technology Hon Timothy Masiu, NDOH by Dr Daoni Esorom – Acting Executive Manager- Public Health Division and hosted by NBC Mr Peter Sindra.

For 10 days, NCD PHA trained 230 community, youth, women's leaders on basic health information about COVID-19 and the importance of taking ownership of their own health through behavioural change strategies. One important information disseminated during the training was about child protection and the rights of children during crisis and out breaks. The training was led by NCD Health Promotion Team, with support from NDoH, WHO, UNICEF and World Vision.

As of 31 May, ARoB printed and distributed 82,205 IEC materials (details shown in table below)
## ABG EMERGENCY OPERATING CENTER - COVID-19 IEC REPORT @ 31/05/20

<table>
<thead>
<tr>
<th>IEC Materials</th>
<th>Type</th>
<th>Size</th>
<th>Batch 1</th>
<th>Batch 2</th>
<th>Batch 3</th>
<th>Batch 4</th>
<th>TOTAL IEC received by printed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Know-the-facts</td>
<td>Poster</td>
<td>A3</td>
<td>400</td>
<td>9000</td>
<td>2500</td>
<td>11,900</td>
<td></td>
</tr>
<tr>
<td>Reduce the Risk</td>
<td>Poster</td>
<td>A3</td>
<td>600</td>
<td>9000</td>
<td>2500</td>
<td>21,900</td>
<td></td>
</tr>
<tr>
<td>Facts in COVID-19</td>
<td>Information Pamphlet</td>
<td>A4</td>
<td>26000</td>
<td>9000</td>
<td>94000</td>
<td>11,000</td>
<td></td>
</tr>
<tr>
<td>ABG Health Response Team Hotline</td>
<td>Poster</td>
<td>A3</td>
<td>400</td>
<td>9000</td>
<td>9000</td>
<td>9,400</td>
<td></td>
</tr>
<tr>
<td>Travel advice</td>
<td>Poster</td>
<td>A3</td>
<td>1200</td>
<td></td>
<td></td>
<td>1,200</td>
<td></td>
</tr>
<tr>
<td>Severity Series</td>
<td>Poster</td>
<td>A3</td>
<td>2000</td>
<td></td>
<td></td>
<td>2,000</td>
<td></td>
</tr>
<tr>
<td>Risk Communications for Health Workers</td>
<td>Poster</td>
<td>A3</td>
<td>685</td>
<td></td>
<td></td>
<td>685</td>
<td></td>
</tr>
<tr>
<td>Guide for Schools</td>
<td>Document</td>
<td>A4</td>
<td>800</td>
<td></td>
<td></td>
<td>800</td>
<td></td>
</tr>
<tr>
<td>PNG Emergency Response Plan</td>
<td>Document</td>
<td>A4</td>
<td>80</td>
<td></td>
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<td>80</td>
<td></td>
</tr>
<tr>
<td>Standard Operating Procedure</td>
<td>Document</td>
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<td>80</td>
<td></td>
<td></td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>OIA booklet</td>
<td>Document</td>
<td>A4</td>
<td>80</td>
<td></td>
<td></td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>Social Mobilizer Guide</td>
<td>Document</td>
<td>A4</td>
<td>80</td>
<td></td>
<td></td>
<td>80</td>
<td></td>
</tr>
</tbody>
</table>

**Total IEC printed and received**: 82,205

## KEY DATES

- **8th March 2020**: 1st Batch printed and distributed to 3 main district hospitals (Tuke, Arawa, Buin)
- **6th April 2020**: 2nd Batch printed and distributed to all 40 health facilities across Bougainville
- **10 April 2020**: 3rd Batch of IEC printed and distributed to Bougainville House of Representative Members (BHOR)
- **15 May 2020**: Received IEC 5000 posters = Know the facts and Reduce the Risk posters from NDoH

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**West New Britain**: Risk-communication presentation from NEOC during refresher training for PEOC and WNBPHA
NON-PHARMACEUTICAL INTERVENTIONS (PUBLIC HEALTH SOCIAL MEASURES): TRANSITION TO “NEW-NORMAL”

❑ Non-pharmaceutical interventions (or public health social measures) is one of the key pillars of the PNG COVID-19 pandemic preparedness and response plan. The implementation of the social measures was facilitated with the declaration of the State of Emergency (SOE) that took effect on 22 March, initially for 14 days, and now extended until 2 June.

❑ In line with the announcement by the SOE Controller David Manning regarding the PNG’s transition into the “new normal” way of life in the context of COVID-19 on 21 April, several restrictions under the SOE were relaxed, guided by public health principles, together with economic and societal considerations.

❑ One of the challenges in the enforcement of the health measures under the new normal is the limited facility for hygiene practices such as insufficient hand washing facilities in key areas.

❑ A policy paper on the new normal is being prepared.

LOGISTICS and SUPPLIES

❑ As of 28 May 2020, a total of 4 million assorted personnel protective equipment (PPEs) comprising of examination gloves, N95 masks, surgical masks, body bags and others were mobilized.

❑ In April 2020, the NDOH SOE Logistics team dispatched 20.9 tons of assorted PPEs, COVID-19 supplies and medical supplies throughout all 22 provinces. Bulk of the uplifting for the NDOH was through the Air Niugini Cargo services at the cost of almost PGK 2 million. These included tents donated by the UNICEF for COVID-19 triaging facilities, PPEs, vaccines and the routine medical supplies from the Badili Area Medical Store.

❑ As part of the PNG COVID-19 Emergency Response between GoPNG, the World Bank and the United Nations for Project Services (UNOPS), the ‘Request for Quotation’ (RFQ) has been initiated for procurement of the following: GeneXpert machines with 4 module and laptops, 2 PCR machines, and 12 bio cabinets, as of 17 May. Additional meetings were held between NDoH to finalize technical specifications for: 10 high combustible incinerators to destroy 50 kg/hr medical waste; mobile laboratory with full equipment; 25,000 generic COVID-19 test kits and reagents compatible with PCR machines; and transportation of specimens and viral mediums.

❑ On 13 May, SOE Controller issued designated Inspector Kuaino as the new Logistics Cell Lead and is tasked with ensuring a single fully functional Logistics Cell. The role of the Logistics will be to support the SOE Controller and liaise with other functions and stakeholders through the procurement and maintenance of resources, facilities, services and materials.

❑ Personal protective equipment (PPE) and other supplies have been dispatched to the provinces.

❑ WHO and UNICEF providing technical support to the National Operations Centre and in providing coordination for PPE procurement and distribution to frontline workers nationally.

❑ It is expected to receive 90,000 surgical masks and 7200 protective suits donated by Jack Ma through Pacific Humanitarian Pathway (awaiting AWB/ETA).
UPDATE FROM THE PROVINCES

NEW GUINEA ISLANDS REGION

Autonomous Region of Bougainville

- On 23 May, Bougainville Emergency Controller issued a Supplementary Order No 6, amending Order No 2 to increase public gatherings, Assembly and meetings from 10 to 50 people, however, those facilitating such gatherings are required to mark 1.5 meters apart seating allocation.
- Surveillance mostly involved screening at Ports of Entry at the Buka Airport and Buka Wharves.
- A pre-triage (Cough Triage) has been set up at Buka Hospital for the outpatients. All patients with cough are directed to the cough Triage for review/screening.
- The current Pathology labs at Buka Hospital and Arawa District Hospitals do not have bio safety cabinets although both hospitals do run Gene Xperts. Buka Hospital has identified a previously designated laboratory-container (but never used) near the Acute COVID-19 ward that can be used to hold the Gene Xpert machine for COVID-19 testing if Gene Xpert testing is implemented.
- The renovation of Buka Hospital Acute COVID-19 Ward will begin shortly and changes have been made with NDOH endorsements. This ward will cater for 4 beds, however, if there are more cases, bed settings will have to be adjusted to cater for more cases.
- The staff roster for the isolation ward at Buka Hospital is prepared in advance.
- Suhin Health Center is identified as an Isolation Point and it is currently undergoing renovations
- ARoB produced and distributed 35,485 IEC materials to 40 health facilities, covering 356,387 people. The IEC materials included posters on prevention, travellers’ messages, messages for health care workers, schools and FAQs in both English and pidgin languages. Also issued 2x national ERPs and 2x SOPs for surveillance to each of the 40 HFs.
- Twenty-three samples collected so far- (13 ILI, 6 SARI, 4 PUI samples) majority of samples (39%) collected from ≥50 year olds. 96% are nationals, only 1 specimen collected from an expatriate and majority of samples were from non-travellers

East New Britain

- Surveillance at the airport and seaport are continued.
- A cough triage bay established in 60% of health facilities.
- On 1 May, Butuwin isolation and quarantine units were commissioned and officially opened.
- The training on IPC, clinical management, surveillance and infection prevention and control was conducted by the visiting national team with assistance from WHO: roll out to 80% of health facilities.
- A total of 21 rural health surveillance officers are trained on COVID-19 response, including surveillance, ILI/SARI and IPC.
- A total of 32 Health facilities are open and operating.
- The PHA started awareness on stigma associated with COVID-19 in addition to the general awareness in Villages in close collaboration with village councillors.

East New Britain: ENB RRT team demonstrating donning and doffing of PPE
On 6-7 May, a team of 10 healthcare workers led by Surveillance cluster (J. Kais) went to Pomio district by ship and conducted training and awareness to healthcare workers from 10 health facilities from Pomio district. They also brought PPEs and about 100 UTMs for training purposes and for the use in the district. The team will be there for at least 5 days before returning to Kokopo.

Asian business houses assisting with water basin and soap for handwashing in public areas like market, bus stops and outside shops.

ENB has completed assisting scaling up of sampling for additional 200 specimens provided as of 29 May 2020, in line with SOE order 37.

Manus

On 8 May, the Manus PHA commissioned the isolation unit: 12 rooms with beds, toilet and shower facilities, 1 common room and 2 storage rooms (40ft container relocated from refugee center).

Triage area will use tent donated by Unicef, has yet to be set up away from the main outpatient of Lorengau hospital.

A quarantine unit on state land 7-10mins drive from hospital, has 24 bed capacity is under renovation with the assistance of provincial government.

A 2-day training on infection control, triage referral pathway, use of PPE, Point-of-Entry surveillance and screening, specimen collection, risk communication and awareness, community engagement and waste management was conducted.

To date, still no operational ambulance vehicle to transport confirmed cases and no sea ambulance.

Momote airport and NAC has assigned 3 office space for POE and surveillance activities at the airport.

Manus PHA has trained RRTs. Routine weekly syndromic surveillance is being conducted for COVID-19, screenings to identify POIs and monitoring of POIs under quarantine.

Manus PHA has trained personnel and appropriate materials available to carry out specimen collection, packing and shipment. Designated courier for shipping the specimens is TNT.

The Emergency Department pre-screening procedures in place and a triage system, pre-triaging area and patient flowchart established.

There are no provisions for psychosocial support for the health worker.

Manus reports 45 samples sent for testing, 19 reported back negative results and 25 results pending.

The 12 LLGs in Manus through respective ward councillors have conducted COVID-19 community sensitization 3 weeks ago.

New Ireland

New Ireland PHA proposed the construction of a 6-bed COVID-19 Isolation Ward, pending confirmation of the construction site.

No ICU, only high dependency beds allocated in wards and no isolation and quarantine facilities yet. A building being marked for Isolation unit requires renovation and was costed, costed plan for isolation with ICU has been submitted by clinical management team/Kavieng General Hospital.

No functional ventilators, no oxygen concentrators and only 3x ASOs (no anaesthetist) at this stage.

Conducted a survey with an objective to assess the effectiveness of awareness to determine the level of understanding the communities have on the mass awareness being rolled out on COVID-19 in the province. The survey found fair understanding of the disease but there is still confusion and fear about the disease. This could be due to different messages from not only health personnel but other sources and agencies/NGOs. There is a need for clear and similar messages and addressing peoples’ fears and concerns including stigmatization.
A total of 298 healthcare workers were trained triaging and patient referral pathways, clinical management, IPC and surveillance, in the last 1 month using funds from NDOH.

ADI is a principle stakeholder in the province, assisting with transport, PPE, some items for the triage and awareness in the communities.

Waste management is an existing challenge for Namatanai district hospital and Kavieng General Hospital

The province has completed and assisted in providing the additional 200 specimens for ILI/SARI/COVID-19 surveillance as per SOE order 37, 100 specimens from Namatanai District and 100 specimens from Kavieng district in the last one week.

**West New Britain**

- The provincial COVID-19 response team developed a triaging pathway.
- The infrastructure development for isolation unit is in progress.
- While waiting for the 6 bed isolation building, the old cafeteria building in the hospital has been renovated and will serve as interim isolation ward for COVID 19 and ICU; 4 bed space-a room for a pregnant patient, 1 room for highly critical patient and 2 bed space for mild to critical care patients. The handing over of this building to the Kimbe General Hospital happened on the 28 May 2020.
- The next priorities are infrastructure development for quarantine facilities and triaging areas at the hospital and health facilities.
- For communication, the province set up a billboard at Hoskins airport; 15,000 IEC material distributed in the provinces; ~76,441 people reached through community awareness and community participation; and material for banners purchased for printing COVID-19 prevention messages. A total of 99 shops visited, 81 has hand washing basins with soap provided and the remaining were encouraged to have these facilities.
- The PEOC hotline: 74464931 (Digicel)/ 9835682 (Landline).
The health desks are set up and staffed at all ports of entries (airport & stevedoring).

The training on PPE and Clinical management of COVID-19 for 240 frontline health care workers were conducted in 4 batches; and 1 for law enforcement (22 police).

Concerns were raised regarding the PPEs for police personnel.

Total of K800,000 (WNB Provincial Government: K 600,000 and NDoH: K200,000) was allocated for COVID-19 response in WNB.

The business houses in the province donated IEC materials, PPEs, construction materials, rations and printed advocacy materials.

The upcoming priorities are: school and shops hand washing facility inspection; mortuary to be cleared, fix incinerator, complete set up of the 2 triage facilities, training for Bali, Vitu, Kandrain, Glousesta and Kandrian, and training for all school teachers.

There are several challenges in preparing for COVID-19 response: staff who are exposed to POIs are subject to stigmatization by neighbours and fellow staff members; armed hold-up on ambulance by thugs pretending to be patients; buai smuggling; security personnel abused by public for denying entry to hospital; funding and lack of support for Southcoast.
MOMASE REGION

**Morobe:**

- On 21-22 May, a team from NDoH and WHO facilitated a comprehensive 2-day training on clinical management, IPC, surveillance, rapid response and risk communication for 20 healthcare workers in Lae, Morobe Province. The participants were health care workers from districts and Angau hospital.
- On 23-24, a team from NDoH and WHO are facilitating a comprehensive 2-day training on clinical management, IPC, surveillance, rapid response and risk communication for healthcare workers in Bulolo in Morobe Province.
- Morobe PHA conducted series of trainings on ‘Infection Prevention and Control’ for COVID-19 for various stakeholders in the province during the month of April: trucking company (Mapai transport, Traisa Transport and IPI transport); Ramu sugar; Morobe Provincial Administration; Morobe CIS; Susu mama; Angau Hospital; Lutheran Health Services and Wampar Health Center.
- Immunization is piggybacking on awareness. PEOC focus mainly on surveillance.
- Morobe received 460 UTMs (cumulative). There are five GeneXpert machines: 2 at Angau hospital, 1 at Bulolo, 1 at Haicost and 1 at Mutzing.
- Pre-triage facilities are set up at Buimo UC and Markham Road UC. All districts health facilities will be screening and serious cases to be referred to Sir Ignatius COVID-19 hospital.
- Quarantine facility is set up at 11 mile (MKW) unit type accommodation (12 units).
- Sir Ignatius Kilagi Stadium is repurposed for COVID-19 hospital (18 bed capacity).
- For waste management, there is a 3 multi-chamber 50kg /cycle (2 very old in poor condition and 1 in good condition).
- Morobe PHA has identified healthcare workers from districts and unemployed ones for surge capacity.
- There are six tents to be used for pre-triage; 4000 pieces of surgical masks, 1500 pieces of N95/N96 mask, 5000 gloves and 200 goggles.

**Madang**

- There are 320 UTMs and 3 GeneXpert machines in Madang: 2 at Modilon hospital and 1 at Gaubin.
- The pre-triaging tents will be set up at Yabong field, Laiwaden field, hospital helipad and Tusbab secondary.
- All suspect COVID-19 cases will be referred from the pre triaging tents. Yagaum Hospital will be used as a quarantined facility as well as isolation facilities with 18 bed capacity. There are 2 bed ICU and 5 ventilators.
- For waste management, there is one multi-chamber 50kg/cycle but non-functional.
- Madang PHA identified the students at the health training institutes for surge teams, if required.
- IEC materials distribution is ongoing with IM PEOC on live on tumbuna TV and toll free number 4340130.
- There is one ten for pre-triaging; 4000 pieces of surgical masks; 1500 pieces of N95/N96 mask; 5000 gloves and 200 goggles.
- Modilon Hospital repurposed and refurbished Ward 5 and installed 4 beds to keep the suspected cases sample collection.
- The isolation ward will be improved to a self-contain unit with toilet, shower, cooking area, laundry and clothes line, hand washing basin, temporary fencing to prevent entering this area.
East Sepik:
- East Sepik PHA is piggybacking immunization with awareness on COVID-19.
- There are 400 UTMs and 2 GeneXpert machines: 1 at Boram and 1 at Maprik.
- For pre-triage, there are tents set up at the districts and one for the hospital. Old TB clinic will be refurbished into an isolation facility. There is no ICU facility due to renovation of the current hospital.
- For waste management, there is one multi-chamber 50kg/cycle: functioning but very old heavily corroded.
- They printed IEC materials locally.
- There are seven tents for pre-triaging; 4000 pieces of surgical masks; 1500 pieces of N95/N96 masks; 10,000 gloves and 200 goggles.

West Sepik:
- Surveillance and Point of Entry: all the health facilities started collecting ILI samples and send to CPHL in line with the National Emergency Order No 37 [for number of samples collected till date – refer table on provincial updates].
- Clinical Management and Infection Prevention and Control: Pre-triage facilities/SPH cough triage is nearing completion. For the patients waiting area, an extension with canopy will be set up.
- Referral pathways: The referral pathway for WSPHA has been set and the teams are ready to move at any time. Guidelines have been shared and the district teams have met with their local ward members and councillors to prepare them to be able to contain any cases with the respective communities. The COVID-19 suspect cases in the rural areas will be quarantined in the community designated quarantine site such as the garden house back in the village and inform the health worker who will monitor and report to DEOC & PEOC. The COVID-19 suspect cases who develop
worsening symptoms will be moved to a community designated isolation unit such as an empty church or classroom and will be managed by the Rapid Response Team.

- **Isolation facilities:** In rural facilities moderate - severely sick cases will be managed at the community or village designated clinical isolation unit (a church, a classroom or in the pre-triage tent). The SPH isolation unit for clinical management is complete, awaiting medical equipment.
- The Hospital isolation unit is ready to be equipped with a ventilator and suction equipment. The relevant staff at SPH will be trained through refresher to handle this equipment.
- The PNG stranded citizens and prisoners from Jaya Pura will be coming in batches and accommodated at the quarantine centre, funding for this operation has been proposed by NDoH to be accessed through our DFAT HSIP funds. The quarantine centre has 2 building and a tent ready for these people.

- **Risk Communication and Social Mobilization:** Communication focused on living with COVID-19 strengthening the ‘new normal’ continues. This ‘new normal’ is expected to continue in West Sepik Province until a vaccine is available. COVID-19 social mobilization and risk communication training was conducted for PHA volunteers at the Dapu cluster of Vanimo District. In this session a total of 11 participants attended and the training will be continued to other clusters in the coming weeks. The key COVID-19 preventative measures (complying social distancing and Hand hygiene) and how to identify suspects with integration community leaders were addressed during the training. After the training they will do community awareness.

- **Logistic and Supplies:** PPE stocks received. 42m2 pre triage tents x 1 for the provincial quarantine site has been put up to provide shelter for the prisoners and stranded citizens that are coming in from Jaya Pura. 72m2 pre-triage tents for WSP has not arrived yet. 13 cartons of PPE for WSPHA purchased through HFG 252 arrived 21 May and yet to be opened for stock update.

- **Other Issues and Challenges:** People are still crossing into Jaya Pura despite the positive cases in the Papua Province. The unpredictable future of WSP once SOE is uplifted on 2 June. Quarantine accommodation for the Papua New Guineans prisoners and stranded citizens from Jaya Pura.
HIGHLANDS REGION

Eastern Highlands:
- Cough Triage established at Goroka hospital with 2 medical doctors, 4 HEOs and 5 nurses on rotation.

Enga
- Enga province has set up a command centre with its incident command group. The provincial emergency response taskforce is chaired by the provincial administrator.
- For risk communication, Enga has a public spokesperson, and a designated area for press release. IEC materials have been produced locally in A3 sizes and additional IEC materials for the districts from NDOH. The team meets weekly on every Mondays and have reliable communication systems via mobile and email. The team leader has developed a micro-plan for the catchment population and will be shared with the national communications lead. The spokespersons for the media, press release are; Chief Executive Officer Enga PHA, Director Public Health and the provincial police commander. Press release is usually held at the Provincial emergency operation centre.
- For surveillance, Enga has set up two points of entry (POE) and a 4-member surveillance team at each point of entry. Data base in place. The priority POEs are: Pogera, Wabag provincial town, Wapenamanda and Kandep. Still waiting for their test kits. Tests are done on people with influenza like illnesses or respiratory infection with fever. If passengers are found to be ill, tests are done immediately, and patients taken to triage and managed according to symptoms.
- Location for Quarantine and isolation centres identified and yet to be established. A triage centre was set up at Wabag hospital.
- All hospital services are operating normally.
- PPE received twice but needs more for the districts.
- The healthcare workers require a training in infection prevention and control.

Hela
- On 23 April, NDoH with the technical support of WHO conducted a ‘Virtual Training on COVID-19 Response’ for five trainers in Hela Provincial Health Authority. The virtual training covered surveillance, clinical management and infection prevention and control, and risk communication. The logistic support, including the training venue and internet facilities were provided by Oil Search Foundation office based in Hela. These trainers will train the health workers responsible for respective technical area in the province. Similar virtual trainings will be conducted for the provinces in the coming days.
**Jiwaka**

- All 28 reporting health facilities were ordered to set up cough triage, screen all cough cases separately, and report SARI urgently to PEOC daily.
- The facility set up for persons under investigation in Kindeng is now ready and in use.
- Other activities include: transport allocation for SARI patients with 1 full-time dedicated ambulance; preparation of isolation unit equipped with beds, oxygen and water supply; set up and operation of check point surveillance at the eastern and western parts of the Highlands Highway; IPC and PPE distribution to surveillance focal points and frontline health workers; and, IEC distribution (17,492 issued posters and brochures and 3 billboards) and advocacy (estimated reach of 20,000 population).
- The priorities for the upcoming week: Specimen run to Goroka; routine immunization; district training on COVID-19; PPE distribution for HIV clients by NAC; RAM mosquito net survey; Screening and testing of COVID-19 suspects; Second Isolation Centre preparation with 3rd isolation Centre Plumbing and triage centre; and preparation for provincial COVID-19 training by NDoH.

**Simbu**

- **Surveillance:** All 36 health facilities started daily surveillance reporting for all ILI, SARI, COVID-19 and other respiratory related illness through the established ODK link and supervisors by district disease control officers. Surveillance RRT is equipped and ready to collect specimens for all ILI, SARI and COVID-19 suspects.
- CPHL installed the software for testing COVID-19 with GeneXpert machine at Megandi rural hospital and Kundiawa general hospital. A total of 50 cartridges were issued.
- As of 26 April, a total of 325 healthcare workers were trained on IPC, risk communication, case management, surveillance and rapid response.
Western Highlands
- The total budget required for WHPHA to achieve the goals including the ability to expand its capacity for COVID-19 response is estimated at K 3,618,000.00, out of which K 420,000 is allocated.
- Training of health care workers to manage COVID-19 is a priority for the province.
- The WHPHA Health promotion and Disease Prevention teams are leading the advocacy programme and have produced pamphlets and posters to ensure the message is continued when they have left the site.
- To maintain minimum disruption to the essential health services, clinical plans for O&G, Eye, Paediatric, Emergency Department/Adults are completed and the plans for Medicine and surgery are in draft form pending sign off.
- The isolation ward is being established in the chapel considering proximity to laundry and the incinerator. In addition to the current support from ICRC, additional resources are required to refurbish and furnish the isolation ward. It is also planned to build accommodation on the Hospital compound for staff working directly with COVID-19 patients to prevent infection.
- It is planned to procure 2 portable ventilators with monitors for the ICU.
- The construction of a quarantine shed is ongoing.
- For additional quarantine facilities: Tinsley Hospital and Tambul are proposed.

SOUTHERN REGION
Central
- Central Provincial Health Authority (CPHA) COVID-19 Rapid Response Team had series of meetings with Central Provincial Government, Board of the CPHA and other relevant partner organizations for technical and funding support.
- As Central and Gulf Provinces had been zoned together with NCD, CPHA had been working very closely with NCD PHA especially with the Technical Medical Team that is managing the Rita Flynn Quarantine & Isolation Field Hospital.
- On 28 April, CPHA COVID-19 response team met Hon. Lekwa Gure, Member for Rigo at Kwikila. One Pre-triage tent, one table, two chairs and a bigger UNICEF donated Isolation tent were delivered and identified the area for setting up the pre-triaging tent and the Isolation. The 3 doctors’ houses were identified as the Isolation and quarantine facilities for all the staff managing the COVID-19 suspect cases. Toilet and washing facilities for patients had been identified and will be relocated closer to the Isolation area. The GeneXpert Machine for Kwikila, which was kept at Port Moresby will be installed in Kwikila as Hon. Lekwa Gure committed to resolve the issues related to infrastructure, power supply and water supply.
On 1 May, CPHA COVID-19 response team met Hon. Sir Dr Puka Temu and the full DDA Assembly (LLG Presidents, Ward Members, LLG Managers & Abau District CEO) at Kupiano, Abau District Headquarters. Delivered one pre-triage tent, one table & two chairs. Site for setting up the pre-triage tent was identified; the new administration wing of the district hospital was identified as the Isolation Ward for COVID-19 patients and Quarantine facility for health staff managing the cases. Issues identified were: water supply, power supply, oxygen supply, manpower, renovation of current building used as outpatient, Delivery & Labour Ward, and clinics for other public health programs, and waste management. From the Checklist of equipment, assets, PPEs, medical supplies and other consumables for Pre-triaging, surveillance and clinical management an initial budget estimate of K100,000 was made to start the process. The Abau DDA approved the initial budget estimate and approved a budget of K1 million for COVID-19 related activities.
On 2-3 May, Hon. William Samb, Member for Goilala and CPHA COVID-19 response team visited Tapini & Woitape Goilala District. During the visit, several issues were identified: not enough PPEs for all Health facilities in Goilala; needed triage tents for Tapini and Woitape to start with, followed by other four facilities; IEC materials for schools; staffs to be at the work station in Goilala, especially public servants; routine immunization activities to be implemented in the district; routine supplies of TB drugs to be made available at major health facilities; improve Laboratory Services at Tapini and Woitape Health facilities; and continue COVID-19 Awareness in Key Hot spot area in the district, e.g. Yongai area, Tolukuma area.

On 4 May, CPHA COVID-19 response team met with Kairuku/Hiri MP Hon. Mr Peter Isoaimo, Kairuku LLG President, Central Provincial Chairman for Health and other Ward Members from the Kairuku area in Bereina District Office. The team visited Bereina District Hospital. Delivered one pre-triage tent, one table, 2 chairs and UNICEF donated tent for Isolation of COVID-19 cases. Pre-triage area and the Isolation area were identified. The TB ward was identified as the Isolation Ward for COVID-19 cases, which requires urgent renovation. The team had a look at the TB GeneXpert powered by solar power system. Water supply to the Health facility is functional but needs renovation. Issues identified included the following: some of the facilities are run down and need renovation, power supply, water supply and waste management. Hon. Mr. Peter Isoaimo committed to renovate the current outpatient building were the staff screen patients at the earliest and provide K250,000 as initial support to COVID-19 preparedness activities. One pre-triage tent, one table & two chairs were also delivered to Dr C Gaso for Veifa’a Hospital.
Gulf
- Repurposed the old TB ward to be used for isolation.
- The province has identified 3 quarantine sites: Kanabea, Kerema and Kikori, however, work has not started due to inadequate funding. One will be set up when the donated tents are received.
- The training for the RRT is a priority for the province.

Milne Bay
- The construction and refurbishment of the COVID-19 Isolation ‘round house’ facility is in progress and will be ready by next week.
- The team is working on the strengthening of information management for ILI/SARI and surveillance at the health facilities. SOP/IPC to be done with Alotau DHS health centres on Tuesday. NPS and Testing to be implemented for SARI/ILI. Management of counselling and acceptance and stigmatising of SARI and ILI from Districts.
- A total of 200 UTMs received from NEOC; out of which 40 UTMs distributed to the districts by MV Curringa team as follows: 10 Bwagoia, 10 Losuia, 5 Guasopa, 5 Bolubolu, 5 Esâ’ala and 5 for patrol.
- Preparedness for isolation facilities in the health centres are in progress but slow due to some unrealistic expectations.
- Limited supplies of PPEs sent out to health centres. Mask to be supplemented by cloth locally made for everyday use.
- As of 6 May, 564 travellers were screened and monitored, majority being from the airport. A total of 191 completed 14-days monitoring. Seven suspect COVID-19 cases were tested; one was tested negative and six are pending result.
- The health facilities surveillance system adjusted to capture ILIs, pneumonia, and URTIs, as well as deaths.
- The MBPHA allocated 5 HF radios for COVID-19 response, 5 for hospital and installed one at Guasopa HC.
- Schools commenced with shift teaching sessions and maintaining ‘social distancing’ in desk arrangements. Masks (cloth masks, hand washing/sanitizers) with check points; toilets ratio, tippy taps being encouraged where insufficient water taps.
- MV Curringa loaded with 20 gasses for HC CCE and 10 drums of zoom to distribute to Bwagoia, Guasopa, Losuia, Bolubolu and Esâ’ala.
- Issues with routine immunization vaccine disbursement from NDoH to Alotau and PNGA to Misima DVS.
- **Alotau District:** Alotau Member contributed K100,000 for MBPHA COVID-19 response, and MBPHA allocated 30% for Training, 30% for IPC and 40% Risk Communication. Awareness done in most places. Basic hygiene supplies purchased by Alotau DHS being distributed to all 15 HCs viz
laundry soap, bleach, protex soap, hand washing liquids, rubbish bins, hand towels, disposable garbage bags, hand washing bowls, water bailer, water containers, mop heads, mop buckets, mop handles and bolts of material to sew cloth masks. Planned rapid response training and update on response for health centres next week. Increased number of ILIs noted at AUC and Alotau. Definitions improved and reporting to be improved.

- **Kiriwina Goodenough District**: Regular reports from Losuia for Kiriwina health facilities: Losuia, Omarakana and occasionally from Sinaketa; however, none from Kitava and Goodenough health facilities. Issues with Land Order with Police response current. Increased number of ILI reports noted from NEOC. Definitions improved and reminders with Surveillance team sees some improvement. Routine supplies for HC hygiene and sanitation distributed to all HCs.

### National Capital District
- The facility at Rita Flynn Complex in NCD has 76 beds available and is being expanded to accommodate 100 beds. It can be further extended to up to 1,000 beds in the worst-case scenario.
- NCD PHA recruited 50 surge staff, including 6 medical officers and 1 HEO on short term contract to be deployed at the Rita Flynn Isolation facility. The surge will be undergoing clinical rotation at Gerehu hospital, while waiting to be deployed at the facility when the cases are admitted.

### Oro
- Isolation facilities are under construction and almost completed. Now the priority is to furnish the isolation ward with all the necessary equipment and drugs.
- Quarantine area has been identified but no progress due to inadequate funding. Meanwhile, one will be set up when the donated tents are received.
- The training for the RRT is a priority for the province.

### Western
- On 5-6 May, a team from NoDH conducted a 2-day training on clinical management, IPC, surveillance and risk communication for 32 healthcare workers in Kiunga, North Fly District, Western Province. The participants were OICs of health centres, surveillance officers and clinicians.
- Following the confirmation of the 3 cases, a team from the national level was deployed to the province to assist contact tracing and other preventative measures.
- Kiunga hospital is in containment phase; conducting preparedness and triaging on everybody entering hospital.
- North Fly District has identified the isolation and quarantine areas in Kiunga, and renovation work is ongoing.
- South Fly district administration provided funding for the ongoing major renovation of the buildings for triaging and isolation wards.
- Normal Surveillance is being carried out along the border villages between North and South Fly districts.
- Daru Hospital started screening and triaging patients.
### Summary of the updates from the Provinces on COVID-19 Response Priority Areas:

<table>
<thead>
<tr>
<th>Province</th>
<th>Isolation facilities</th>
<th>Quarantine facilities</th>
<th>Available HRH</th>
<th>Surveillance (number of samples collected and tested (29 May 2020))</th>
<th>Training on IPC, Clinical Management &amp; RRT</th>
<th>Funding with sources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AROB</strong></td>
<td>Suhin HC &amp; Buka Hospital (6 beds)</td>
<td>Pre-triage but no confirmed quarantine facility (want tents if NDOH/partners can provide)</td>
<td>Doctors: 10 HEOs: 3 Nurses: 94 CHWs: 71</td>
<td>14: all negative</td>
<td>Completed trainings on risk communication and COVID-19 case management for 14 batches (383 participants)</td>
<td>NDoH: K200,000 DFAT: K840,000</td>
</tr>
<tr>
<td><strong>East New Britain</strong></td>
<td>Butuwin UC (8 beds)</td>
<td>Butuwin UC (8 beds) (isolation and quarantine are side by side at Butuwin-former HIV/AIDS buildings)</td>
<td>Doctors: 19 HEOs: 23 Nurses: 254 CHWs: 257</td>
<td>549: 2 positive and 547 negative</td>
<td>Completed 2 batches of training</td>
<td>NDoH: K200,000 DFAT: K840,000</td>
</tr>
<tr>
<td><strong>Manus</strong></td>
<td>40 foot container from Asylum seekers leftover taken to hospital ground-6 bed capacity) – A.Kwaramb and team to give clearance for use</td>
<td>40 foot container taken to hospital ground-6 bed capacity) – A.Kwaramb and team to give clearance for use</td>
<td>Doctors: 17 HEOs: 13 Nurses: 89 CHWs: 74</td>
<td>40: all negative</td>
<td>Provincial conducted trainings while waiting for NDOH/WHO</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td><strong>New Ireland</strong></td>
<td>6-bed isolation ward proposed for construction, pending confirmation of the site</td>
<td>Pre-triage in Kavieng hospital. No quarantine facility also requesting for NDOH/partners to support with tent</td>
<td>Doctors: 17 HEOs: 28 Nurses: 160 CHWs: 124</td>
<td>24: all negative</td>
<td>Provincial conducted trainings while waiting for NDOH/WHO</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td><strong>West New Britain</strong></td>
<td>Identified old TB ward for isolation, 6 bed capacity. Needs renovation and A. Kwaramb and team to approve</td>
<td>Pre-triage set up at provincial Mutuvel stadium with quarantine possibility. Have 3x similar set-ups for tri-age (town urban clinic, Kimbe hospital and Mutuvel stadium)</td>
<td>Doctors: 14 HEOs: 23 Nurses: 170 CHWs: 245</td>
<td>10: all negative</td>
<td>Provincial conducted trainings while waiting for NDOH/WHO teams</td>
<td>NDoH: K200,000 WNBPG: K600,000</td>
</tr>
<tr>
<td>Province</td>
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<td>East Sepik</td>
<td>Old TB clinic refurbished (4 beds)</td>
<td>Guest house (planned)</td>
<td>Doctors: 17 HEOs: 21 Nurses: 158 CHWs: 243</td>
<td>70: all negative</td>
<td>In house training completed x 2</td>
<td>NDoH: K200,000</td>
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<td>HHISP: 1,187,640 South Sea Tuna: K50,000 for PPEs</td>
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<tr>
<td>Madang</td>
<td>Yagaun hospital (18 beds)</td>
<td>Yagaun hospital</td>
<td>Doctors: 21 HEOs: 28 Nurses: 223 CHWs: 390</td>
<td>13: all negative</td>
<td>No training conducted yet</td>
<td>NDoH: K200,000</td>
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<td>HHISP: 1,187,640 Chinese Community: K20,000</td>
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<td>MCC: K10,000</td>
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<td>Yama Group: K250,000</td>
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<tr>
<td>Morobe</td>
<td>Sir Ignatius Kilage stadium (18 beds)</td>
<td>11 mile (MKW) unit type accommodation (12 units)</td>
<td>Doctors: 48 HEOs: 11 Nurses: 444 CHWs:143</td>
<td>79: 1 positive and 78 negative</td>
<td>Completed</td>
<td>NDoH: K200,000</td>
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<td>HHISP: K2,146,820</td>
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<tr>
<td>West Sepik</td>
<td>Old weather station (12 rooms)</td>
<td>Old weather station owned by Catholic Diocese (13 bed house)</td>
<td>Doctors: 10 HEOs: 19 Nurses: 119 CHWs: 332</td>
<td>374: all negative</td>
<td>40 officers trained on sample collection &amp; packaging</td>
<td>NDoH: K200,000</td>
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<td>HHISP: 1,179,480 Logging companies: K300,000</td>
</tr>
<tr>
<td>Eastern Highlands</td>
<td>Renovated and Completed but require beds etc</td>
<td>PHA has built one</td>
<td>Doctors: 28 HEOs: 15 Nurses: 222 CHWs:371</td>
<td>43: 1 positive and 42 negative</td>
<td>Training on use of PPE and specimen collection</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Enga</td>
<td>Pausa in Wapenamanda</td>
<td>None available</td>
<td>Doctors: 21 HEOs: 18 Nurses: 163 CHWs: 226</td>
<td>2: all negative</td>
<td></td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Hela</td>
<td>None available, proposed at a new site</td>
<td>None available, proposed at a new site, staff nursing quarter identified</td>
<td>Doctors: 7 HEOs: 8 Nurses: 51 CHWs: 39</td>
<td>10: all negative</td>
<td>Conducted virtual Training (TOT) on Surveillance, IPC, Clinical management and Risk communication for 5 focal persons on 23 April</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Province</td>
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<tr>
<td>Jiwaka</td>
<td>Kindeng, Minj HC, Kol HC, Tabibuga HC</td>
<td>Identified 3 facilities</td>
<td>Doctors: 1 HEOs: 8 Nurses: 146 CHWs: 102</td>
<td>6: all negative</td>
<td></td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Simbu</td>
<td>None available</td>
<td>None available</td>
<td>Doctors: 31 HEOs: 9 Nurses: 139 CHWs: 142</td>
<td>3: all negative</td>
<td></td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Southern Highlands</td>
<td>Munihu HC</td>
<td>Old Mendi airport hangar</td>
<td>Doctors: 18 HEOs: 10 Nurses: 152 CHWs: 195</td>
<td>2: all negative</td>
<td>X2 RRT, ToT training for districts</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Western Highlands</td>
<td>Chapel in the hospital</td>
<td>Identifying warehouse already, needs funding</td>
<td>Doctors: 22 HEOs: 13 Nurses: 217 CHWs: 293</td>
<td>29: all negative</td>
<td>RRT being finalized</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Central</td>
<td>Bereina HC and Kwikila Hospital</td>
<td></td>
<td>Doctors: 1 HEOs: 13 Nurses: 35 CHWs: 198</td>
<td>3: all negative</td>
<td>3 Trainers trained, Other officers identified for training</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Gulf</td>
<td>Old TB ward</td>
<td>Not yet needs funding, areas identified are Kanabea, Kerema and Kikori, awaiting tents to set up</td>
<td>Doctors: 6 HEOs: 8 Nurses: 48 CHWs: 88</td>
<td>10: all negative</td>
<td>Still needs training</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Milne Bay</td>
<td>Alotau Hospital</td>
<td>Identified, yet to progress</td>
<td>Doctors: 20 HEOs: 29 Nurses: 264 CHWs: 493</td>
<td>7: all negative</td>
<td>RRT established</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>NCD</td>
<td>Rita Flynn Court (76 beds)</td>
<td>9 designated hotels</td>
<td>Doctors: 115 HEOs: 2 Nurses: 667 CHWs: 285</td>
<td>1231: 1 positive and 1230 negative</td>
<td>49 Trainers trained</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Oro</td>
<td>Ward under construction almost completed,</td>
<td>Identified using tents received</td>
<td>Doctors: 10 HEOs: 9 Nurses: 80 CHWs: 107</td>
<td>7: all negative</td>
<td>Needs training</td>
<td>NDoH: K200,000</td>
</tr>
<tr>
<td>Western</td>
<td>TB Isolation ward at Daru Hospital</td>
<td>Location to be used pending</td>
<td>Doctors: 9 HEOs: 2 Nurses: 19 CHWs: 40</td>
<td>1811: 3 positive and 1808 negative</td>
<td>Training in North Fly done in Kiunga Middle Fly and South Fly training pending</td>
<td>NDoH: K200,000</td>
</tr>
</tbody>
</table>
New Materials on COVID-19

We must all BE READY for #coronavirus

✅ Dab when you cough ✅ Dab when you sneeze ✅ Dab to beat #coronavirus

Learn more about #COVID19 & share with your loved ones: www.who.int/COVID-19

UNITED NATIONS

World Health Organization

These advisories are available online. For any new information and updates, check out the links below:

NDOH Facebook page: https://www.facebook.com/PNGND_OH/
WHO Papua New Guinea Facebook page: https://www.facebook.com/WHOPapuaNewGuinea/
WHO Website: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/

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