Situation Summary and Highlights

- The total number of COVID-19 cases in PNG has increased to 11, following the confirmation of Case #10 and Case #11 on 24 and 25 June, respectively.
- Case #10 is a 27-year-old female soldier at Murray Barracks in the National Capital District. Although working in the same building as Case #9, there was no direct link between these two cases.
- Case #11 is a 26-year-old female who is a close contact of Case #10 (housemate). Contact tracing, contact monitoring and quarantining of symptomatic contacts are ongoing.
- Four out of the eleven confirmed COVID-19 cases in PNG had a history of travel to countries reporting COVID-19 cases. Seven of the eleven cases had no travel history during the likely period of infection.
- The threat of case importation from Indonesia remains high.
- For the period of 17 to 23 June, the average national surveillance reporting rate is 60%. During the same period, three (3) provinces (New Ireland, Milne Bay and Western Highlands) did not submit any reports.

Surveillance and Points of Entry

- After the confirmation of Case #9, testing among the military personnel and close contacts was conducted. This testing was instrumental to identifying the succeeding cases. Contact tracing, contact monitoring and quarantining of symptomatic contacts are ongoing. As of 26 June, a total of 47 contacts of the three active cases are under monitoring.
- There is an improvement in the daily reporting of suspected COVID-19 (including SARI) patients by province over the last few weeks. While completeness of reporting is increasing, reports and collection of samples are still not representative to generate solid transmission assessment.
- For the period of 17 to 23 June, the average national surveillance reporting rate is 60%. Nine (9) provinces (ARoB, Enga, Madang, Western, East Sepik, Gulf, Jiwaka, NCD, Eastern Highlands) have achieved over 80% reporting. During the same period, three (3) provinces (New Ireland, Milne Bay and Western Highlands) did not submit any reports.
• Papua Province in Indonesia is continuously reporting COVID-19 cases in areas that border West Sepik and Western Provinces. While the border is officially closed, it is porous. The situation poses high risk of importation of COVID-19 cases. As of 27 June, Papua Province has reported a total of 1633 confirmed cases and 7 deaths.

• As of 26 June, a total of 7147 samples were collected for COVID-19 PCR testing. The surge in number is from the mass testing among uniformed personnel and contacts following the confirmation of the recent COVID-19 cases.

<table>
<thead>
<tr>
<th>Table 3. COVID-19 Sample Collection and PCR Testing (as of 26 June)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cumulative Report</strong></td>
</tr>
<tr>
<td>Total number of samples collected</td>
</tr>
<tr>
<td>Number of samples tested with available test results</td>
</tr>
<tr>
<td>Number of samples with lab results pending</td>
</tr>
</tbody>
</table>

• The figure below shows the number of COVID-19 PCR lab results by province from January to 25 June (prior to mass testing mentioned above).

Figure 2. Number of COVID-19 PCR Lab Results by Province from January to 25 June 2020 (n=5617)

Source: NCC RRT Dashboard as of 25 June, 10PM

• From 9 to 21 June, the total number of persons in quarantine (PIQs) is 482. As of 25 June, NCC monitors were able to speak with and successfully check on symptoms of 470 (99.6%) PIQs.

• On 27 June, the Protocol on COVID-19 ‘New Normal’ Management of International Arrivals (General Inbound Travellers and Foreign Workers) was issued. This detailed protocol aims to ensure a standardized system is established for quarantining all inbound passengers to prevent the spread of disease from countries /areas with community transmission and reduce transmission in areas of the country where community transmission has been established.

<table>
<thead>
<tr>
<th>Table 4. Persons Screened by Point of Entry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Number of Travelers Screened before SOE (until 22 March)</td>
</tr>
<tr>
<td>Total Number of Travelers Screened during SOE (23 March – 16 June)</td>
</tr>
<tr>
<td>Total Number of Travelers Screened after SOE (17 – 26 June)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>* 23 crew and 3 passengers</td>
</tr>
</tbody>
</table>
Clinical Management and Infection Prevention and Control

- In response to the new cases confirmed in Port Moresby recently, the National Control Centre implements the following measures:
  1. All confirmed COVID patients are to be isolated at a designated isolation facility regardless of severity, unless capacity of facilities is overwhelmed which may necessitate to introduce home isolation; and
  2. Rita Flynn Facility shall be fully activated to absorb up to 70 patients for NCD and Central Province; and
  3. All provincial hospitals should have isolation wards fully prepared to accept patients.

- The NCD PHA has a Surge Expansion Plan for COVID-19 where the neighbouring fields (Bisini Grounds) adjacent to the Rita Flynn Facility will be utilized for a 200-bed spillover isolation ward set up for mild to moderate patients. The PHA is planning to set up five (5) wards of forty (40) patients each. In such eventuality, the Rita Flynn Facility will be designated for severe patients.

- The data available at the national level in terms of number of facilities for COVID-19 pre-triage, quarantine and isolation are based on the responses of provincial authorities to the Provincial Preparedness Checklist (PPC) and the questionnaires (based on PPC) filled out by the provinces and/or interview of provincial staff by NDOH regional coordinators. Additional sources of information include the records of assessment for medical and non-medical equipment, laboratory diagnostics, health workforce and financial resources from stakeholders and partners. The data are undergoing validation.

### Table 5. Number of Facilities and Beds for COVID-19 (data as of 27 June)

<table>
<thead>
<tr>
<th>Health Facilities</th>
<th>Number of Provinces</th>
<th>Number of Facilities</th>
<th>Number of Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-triage facilities</td>
<td>16</td>
<td>65</td>
<td>N/A</td>
</tr>
<tr>
<td>Quarantine facilities</td>
<td>11</td>
<td>27</td>
<td>&gt; 104</td>
</tr>
<tr>
<td>Quarantine facilities (underway)</td>
<td>17</td>
<td>&gt; 24</td>
<td>&gt; 113</td>
</tr>
<tr>
<td>Isolation facilities</td>
<td>15</td>
<td>22</td>
<td>&gt; 279</td>
</tr>
<tr>
<td>Isolation facilities (underway)</td>
<td>17</td>
<td>28</td>
<td>&gt; 72</td>
</tr>
<tr>
<td>ICU</td>
<td>13</td>
<td>14</td>
<td>74</td>
</tr>
</tbody>
</table>

### Table 6. Number of Beds for Impatient Facilities

<table>
<thead>
<tr>
<th>Province</th>
<th>District</th>
<th>Facility</th>
<th>No of Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Southern Highlands</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central</td>
<td>Sigama</td>
<td>Kukila</td>
<td>19</td>
</tr>
<tr>
<td>Gulf</td>
<td>Kerema</td>
<td>Kerema</td>
<td>36</td>
</tr>
<tr>
<td>Milne Bay</td>
<td>Aotau</td>
<td>Aotau</td>
<td>160</td>
</tr>
<tr>
<td>NCD</td>
<td>Wewak</td>
<td>Bonam</td>
<td>254</td>
</tr>
<tr>
<td>Western</td>
<td>Middle Fly</td>
<td>Balme</td>
<td>69</td>
</tr>
<tr>
<td></td>
<td>North Fly</td>
<td>Kungia</td>
<td>49</td>
</tr>
<tr>
<td></td>
<td>South Fly</td>
<td>Daua</td>
<td>109</td>
</tr>
<tr>
<td>New Guinea Islands Region</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ARoB</td>
<td>Gela Central</td>
<td>Arawa</td>
<td>*</td>
</tr>
<tr>
<td></td>
<td>Buka North</td>
<td>Buka</td>
<td>*</td>
</tr>
<tr>
<td>East New Britain</td>
<td>Kokopo</td>
<td>Vunapope</td>
<td>206</td>
</tr>
<tr>
<td>Rabaul</td>
<td>Wonga</td>
<td></td>
<td>213</td>
</tr>
</tbody>
</table>

Source: NHS as of April 2020; * For confirmation.
• A team of technical officers from NDoH and WHO continues to roll out the comprehensive training on clinical management, infection prevention and control (IPC), surveillance, rapid response and risk communication.

• Most of the provincial trainings were conducted together with awareness and sensitization activities for health workers, other government employees like teachers, disciplinary forces, NGOs, business houses, and other stakeholders. Some provinces have conducted their own trainings, but with varied scope and content.

• District-level integrated training of the frontline health workers on Infection Prevention & Control, Strengthening Surveillance & Contact Tracing, Clinical Management, and Risk Communication & Community Engagement is ongoing in 7 provinces of Highlands region. This is implemented by UNICEF through World Bank-funded NDOH-UNICEF financial agreement. The 1st batch of training was conducted on 23-26th June, where NDOH, WHO & UNICEF provided technical assistance and UNICEF representative & WHO team lead inaugurated it virtually.

<table>
<thead>
<tr>
<th>No</th>
<th>Province</th>
<th>Status</th>
<th>Date</th>
<th>No</th>
<th>Province</th>
<th>Status</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>National Capital District (TOT)</td>
<td>Completed</td>
<td>26-27 March &amp; 5 April</td>
<td>14</td>
<td>Eastern Highlands</td>
<td>Completed</td>
<td>25-27 May</td>
</tr>
<tr>
<td>2</td>
<td>Hela (Online)</td>
<td>Completed</td>
<td>23 April</td>
<td>15</td>
<td>Simbu</td>
<td>Completed</td>
<td>28-30 May</td>
</tr>
<tr>
<td>3</td>
<td>AFOB (Online)</td>
<td>Completed</td>
<td>27-29 April</td>
<td>16</td>
<td>Oro</td>
<td>Completed</td>
<td>31 May – 3 June</td>
</tr>
<tr>
<td>4</td>
<td>West Sepik</td>
<td>Completed</td>
<td>2-5 May</td>
<td>17</td>
<td>Jiwaka</td>
<td>Completed</td>
<td>1-3 June</td>
</tr>
<tr>
<td>5</td>
<td>Western (Kiunga)</td>
<td>Completed</td>
<td>5-6 May</td>
<td>18</td>
<td>Western Highlands</td>
<td>Completed</td>
<td>4-6 June</td>
</tr>
<tr>
<td>6</td>
<td>Madang (Online)</td>
<td>Completed</td>
<td>5-7 May</td>
<td>19</td>
<td>East Sepik</td>
<td>Completed</td>
<td>7-15 June</td>
</tr>
<tr>
<td>7</td>
<td>East New Britain</td>
<td>Completed</td>
<td>18-20 May</td>
<td>20</td>
<td>Enga</td>
<td>Completed</td>
<td>3-10 June</td>
</tr>
<tr>
<td>8</td>
<td>Morobe (Lae)</td>
<td>Completed</td>
<td>21-22 May</td>
<td>21</td>
<td>Milne Bay</td>
<td>Completed</td>
<td>1-13 June</td>
</tr>
<tr>
<td>9</td>
<td>Morobe (Bulolo)</td>
<td>Completed</td>
<td>23-24 May</td>
<td>22</td>
<td>Southern Highlands</td>
<td>Completed</td>
<td>11-13 June</td>
</tr>
<tr>
<td>10</td>
<td>New Ireland</td>
<td>Completed</td>
<td>22-25 May</td>
<td>23</td>
<td>Central</td>
<td>Completed</td>
<td>22-24 June</td>
</tr>
<tr>
<td>11</td>
<td>West New Britain</td>
<td>Completed</td>
<td>28-30 May</td>
<td>24</td>
<td>Manus</td>
<td>Completed</td>
<td>22-26 June</td>
</tr>
<tr>
<td>12</td>
<td>Madang</td>
<td>Completed</td>
<td>28-30 May</td>
<td>25</td>
<td>Gulf</td>
<td>Scheduled</td>
<td>29 June – 3 July</td>
</tr>
<tr>
<td>13</td>
<td>Western (Daru)</td>
<td>Completed</td>
<td>25-29 May</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 7. COVID-19 Trainings with Direct Support from NDOH and WHO

<table>
<thead>
<tr>
<th>No</th>
<th>Province</th>
<th>Total</th>
<th>Province</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Madang</td>
<td>146</td>
<td>AFOB</td>
<td>37</td>
</tr>
<tr>
<td>2</td>
<td>Morobe</td>
<td>425</td>
<td>East New Britain</td>
<td>236</td>
</tr>
<tr>
<td>3</td>
<td>East Sepik</td>
<td>92</td>
<td>Manus</td>
<td>99</td>
</tr>
<tr>
<td>4</td>
<td>West Sepik</td>
<td>200</td>
<td>New Ireland</td>
<td>320</td>
</tr>
<tr>
<td>5</td>
<td>Eastern Highlands</td>
<td>114</td>
<td>West New Britain</td>
<td>128</td>
</tr>
<tr>
<td>6</td>
<td>Enga</td>
<td>132</td>
<td>Central</td>
<td>276</td>
</tr>
<tr>
<td>7</td>
<td>Hela</td>
<td>81</td>
<td>Gulf</td>
<td>90</td>
</tr>
<tr>
<td>8</td>
<td>Jiwaka</td>
<td>73</td>
<td>Milne Bay</td>
<td>94</td>
</tr>
<tr>
<td>9</td>
<td>Simbu</td>
<td>**</td>
<td>NCD</td>
<td>**</td>
</tr>
<tr>
<td>10</td>
<td>Southern Highlands</td>
<td>367</td>
<td>Oro</td>
<td>34</td>
</tr>
<tr>
<td>11</td>
<td>Western Highlands</td>
<td>782</td>
<td>Western</td>
<td>71</td>
</tr>
</tbody>
</table>

Table 8. Number of Health Care Workers Trained by Province

Communication, Community Engagement and Non-Pharmaceutical Interventions (Social Measures) – NIUPELA PASIN

• National and provincial teams continue to conduct mass awareness activities using TV, radio, community dialogues and social media to raise risk perception on COVID-19, with messages developed by NDOH and WHO. Communication on other health issues such as immunization, dengue prevention and accessing health services continues to be disseminated at the national and provincial levels.

• UNICEF conducts awareness activities through broadcasting in NBC TV and FM 100.

• A ten-day training supported by UNICEF is ongoing for 300 school teachers and management staff on “New Normal” focusing on hygiene practices, mental health and psychosocial protection for all ECD, primary and secondary schools in Port Moresby.

• WHO supports NDOH and the National Command Center in promoting health measures under the “NIUPELA PASIN (New Normal).” These measures include: (1) Keep at least 1.5-meter distance at all times and in all public places; (2) Limit social gathering and time spent in crowded places; (3) Wear a face mask if physical distancing is not possible; (4) Greet each other without touching -- no handshake, no fist or elbow bumps but (5) Greet with the smile, bow, nod or a simple hello; (6) Clean hands frequently – wash with soap and water or alcohol-based sanitizer; (7) Cough into your bent elbow – not your hands; (8) Avoid touching your mouth, eyes and nose.; and, (9) Clean and disinfect frequently touched objects and surfaces. The public is advised to call 1-800-200 immediately if COVID-19 symptoms such as fever, dry cough, shortness of breath are experienced.

• Consultations on Niupela Pasin with stakeholders are ongoing. This week, initial dialogue was held in Port Moresby with Council of Churches Public Relations Manager. Dialogues were also held with ward councillors and a leader of a church in West Sepik.
Logistics and Supplies

- WHO supported the procurement of items for and assembly of 500 Quarantine Kits which shall be distributed to those who will be required to do home quarantine.

- A summary of procurement by UNICEF and UNOPS that are supported by the World Bank COVID-19 Project is presented below. Apart from these, World Bank has allocated resources under the UNICEF component for risk communication and community engagement activities, contact tracing in provinces, and logistics for provincial training; and, for specimen transportation under the UNOPS component.

**Table 10. Procurement under the World Bank COVID-19 Project**

<table>
<thead>
<tr>
<th>Supported by</th>
<th>Planned Procurement</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNICEF and World Bank</td>
<td>Personal Protective Equipment</td>
</tr>
<tr>
<td></td>
<td>Environmental hygiene</td>
</tr>
<tr>
<td></td>
<td>Equipment and Consumables for Waste Management, including 9 incinerators</td>
</tr>
<tr>
<td>UNOPS and World Bank</td>
<td>GeneXpert Machine and related consumables (10 GeneXpert machines: 4 Module- inclusive of laptop, 15300 GeneXpert cartridges for Xpert Xpress SARS-COV-2, 10 high combustion incinerators, 10 scrubbers/pollution control device, 1 portable gas analyzer)</td>
</tr>
<tr>
<td></td>
<td>PCR and accessories (2 PCR machines, 27 Class II Biosafety Cabinets for Provincial Hospital Laboratories, 1 Containerized fully equipped PCR laboratory, 25 000 generic lab test kits and reagents, equipment and consumables compatible with PCR machines)</td>
</tr>
<tr>
<td></td>
<td>Equipment to be installed in other health facilities (15 Oxygen Concentrators for each of the 20 provincial hospitals including the accessories, solar panels for 3 provincial hospitals, 10 invasive bedside ventilators)</td>
</tr>
</tbody>
</table>

- A total of 631 000 PPE items (mask, face shields, gloves, gowns, goggles, coveralls and other items) supported by UNICEF arrived in two shipments in Port Moresby. Delivery and distribution are underway.

- Total PPE supplies distributed to provinces shall be presented in the following Situation Report to cover the period of April to June 2020. Thereafter, updates shall be provided monthly.

Funding and Expenditure

- The total USAID contribution for the COVID-19 response in Papua New Guinea is USD 3.55 million: USD 1.75 million through FHI 360; USD 1.2 million through UNICEF; and, USD 600 000 through WHO.

- The table below pertains to the funds that are at the NDOH Health Services Improvement Program (HSIP) Trust Account.

**Table 11. COVID-19 Funding and Expenditure Summary by Fund Source (as of 12 June)**

<table>
<thead>
<tr>
<th>No.</th>
<th>Funding Source</th>
<th>Initial Amount</th>
<th>YTD Expend</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>GoPNG: NDoH 2019 HIV/AIDS Reprogrammed Funds</td>
<td>3,299,651</td>
<td>2,071,488</td>
</tr>
<tr>
<td>2</td>
<td>GoPNG COVID-19 Funds 2020 from Treasury 2020</td>
<td>43,300,000</td>
<td>20,550,444</td>
</tr>
<tr>
<td>3</td>
<td>GoPNG COVID-19 Funds 2020 from Treasury (NOC)</td>
<td>2,000,000</td>
<td>1,286,135</td>
</tr>
<tr>
<td>4</td>
<td>DFAT Emergency COVID-19 Funding</td>
<td>21,452,845</td>
<td>18,250,000</td>
</tr>
<tr>
<td>5</td>
<td>UNICEF Contribution to COVID-19</td>
<td>218,728</td>
<td>98,498</td>
</tr>
<tr>
<td>6</td>
<td>WHO COVID-19 Surveillance Funds (for 22 Provinces)</td>
<td>634,240</td>
<td>634,240</td>
</tr>
<tr>
<td>7</td>
<td>Private Sponsors</td>
<td>1,181,001</td>
<td>1,108,500</td>
</tr>
<tr>
<td>8</td>
<td>New Zealand Government</td>
<td>6,298,800</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Funds in HSIP</strong></td>
<td><strong>78,385,265</strong></td>
<td><strong>44,009,306</strong></td>
<td></td>
</tr>
</tbody>
</table>
## ANNEX A – Pandemic Measure Orders

<table>
<thead>
<tr>
<th>Pandemic Measure Number</th>
<th>Title</th>
<th>Scope</th>
<th>Issuance Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. 1</td>
<td>Revocation of all previous measures</td>
<td>Revocation of all previous measures prior to 22 June 2020.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 2</td>
<td>International travel measures</td>
<td>Definition and designation of First Port of Entry; entry of vehicle, vessel or aircraft coming into PNG only through First Port of Entry; entry of persons to PNG (including citizens and permanent residents) by aircraft and vessels; No person is permitted to board an aircraft bound for PNG unless tested for COVID-19 using RT-PCR within 14-day period prior to boarding and have returned negative results; exemption can be given in writing by Controller; these measures do not apply to persons approved to enter PNG on or prior to 20 June; suspension of traditional border crossing arrangements (with Indonesia, Australia, FSM, Solomon Islands); boarding of aircraft bound for PNG only with exemption in writing by Controller; quarantine of returning citizens and permanent residents at designated facilities (at Government’s cost) or designated hotels (at individuals’ cost); quarantine of non-citizens and non-permanent residents at designated hotels (at individuals’ cost); self-quarantine of foreign diplomats at appropriate residence for 14 days; failure to adhere to self-quarantine as an offence under National Pandemic Act 2020 and declaration as persona non grata of those who fail to comply; quarantine exemption granted by Controller; requirements for compliance for self-isolation and quarantine; conditions for leaving a designated place prior to completion of 14 days; and authorized officials to ensure appropriate levels of surveillance and border monitoring systems.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 3</td>
<td>Domestic travel measures</td>
<td>Conditions for compliance of all domestic flights; no restriction of flights within PNG; non-restriction of travel by foot, vehicle and vessel between provinces; and roadblocks to be established when directed by Controller.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 4</td>
<td>Provincial coordination measures</td>
<td>Appointment of Provincial Administrators as authorised officers for implementation of measures in the respective provinces, and the Chief Secretary for ARoB; set-up and composition of Provincial Advisory Committee; the development of Provincial Response Plan consistent with National Response Plan; set up of Provincial Control Centre; daily required reporting of Provincial Administrators to the Controller; observance of safe health and hygiene practices as recommended by NDoH and PHA; and, provisions for provincial authorities to take additional measures such as curfews or fines.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 5</td>
<td>Burial of deceased persons measures</td>
<td>Controller’s authority upon request of PMGH or PHA to direct a mass grave, designate its location and direct burial of deceased persons in the designated mass grave as well as requisition of refrigerated shipping containers for the purpose of temporary interment; burial or temporary interment directed by Controller will be at the Government’s expense; PMGH or PHA to keep record of persons interred in designated grave or designated refrigerated shipping containers taken away from morgue they are responsible for.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 6</td>
<td>Customs duties measures</td>
<td>Exemption from all customs duties and import duties of all incoming medical supplies procured on behalf of the Government until the end of the declaration of the pandemic; and medical supplies shall be given priority and be released without delay.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 7</td>
<td>COVID-19 testing measures</td>
<td>Testing equipment to be used for COVID-19 are RT-PCR, GeneXpert and rapid diagnostic test; approved organizations to conduct testing are NDoH, IMR, PHAs, PMGH, St John Ambulance, OkTedi Mining, Simberi Gold, 2K Meical Clinic, Lihir, K92 Mining, Sky Health and Medical Services and Morobe Consolidated Goldfields Ltd.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 8</td>
<td>COVID-19 surveillance and testing measures</td>
<td>National case definitions of COVID-19 and Severe Acute Respiratory infection (SARI); all hospitalized/ admitted cases of respiratory illness, including pneumonia and all cases of SARI as suspected COVID-19 cases who should be tested within 24 hours of being admitted and to be managed using COVID-19 IPC protocols; and, requirement of swabbing for testing a minimum of five patients with influenza-like illness symptoms per week.</td>
<td>22.06.2020</td>
</tr>
<tr>
<td>No. 9</td>
<td>Business and social measures</td>
<td>No affiliated sporting codes shall train or participate in matches unless with approval from PNG Sports Foundation; responsibilities of PNG Sports Foundation are requirement to submit weekly report to controller; requirements for local religious activities in social distancing and hygiene standards; banning of religious gatherings such as provincial and national church gatherings, crusades, conventions and provincial or national outreach programmes; licensed gambling venues, nightclub, hourse racing at listed venues to operate on Wednesdays, Thursdays, Fridays and Saturdays; and ban on gatherings of over 100 persons.</td>
<td>22.06.2020</td>
</tr>
</tbody>
</table>
ANNEX B – Provincial Updates

Note: The data available at the national level in terms of number of facilities for COVID-19 pre-triaging, quarantine and isolation are based on the responses of provincial authorities to the Provincial Preparedness Checklist (PPC) and the questionnaires (based on PPC) filled out by the provinces and/or interview of provincial staff by NDOH regional coordinators. Additional sources of information include the records of assessment for medical and non-medical equipment, laboratory diagnostics, health workforce and financial resources from stakeholders and partners. The data is undergoing validation.

New Guinea Islands Region

**Autonomous Region of Bougainville**

**Surveillance**
- Alerts from rural health centres: ✓
- COVID-19 hotline: ✓
- Daily COVID-19 reporting: 100%
- No. of RRs: 3
- Contact tracing team: ✓
- Quarantine team: ✓
- Surveillance at POEs: ✓

**Laboratory functions**
- No. of COVID-19 lab results: 31
- Functioning GeneXpert machines, trained staff: ✓
- No. of GeneXpert machines: 2

**East New Britain**

**Surveillance**
- Alerts from rural health centres: ✓
- COVID-19 hotline: ✓
- Daily COVID-19 reporting: 57% ✓
- No. of RRs: 2
- Contact tracing team: ✓

**Laboratory functions**
- No. of COVID-19 lab results: 24
- Functioning GeneXpert machines, trained staff: ✓
- No. of GeneXpert machines: 2

---

1. Alerts from rural health centres are being addressed by the PEOC and referred to RRT teams to follow up and collect samples. 2. Between 17-23 June, 3 RRT teams are on standby for any alerts in the province. 3. Between 15-26 June, 5 NAGs and Provincial Health Authorities update. 4. Surveillance is being conducted by MOH and MOFA. 5. NAGs are being identified. 6. MOH is working with partners on COVID-19 notification.

---

**Health facilities’ availability and number of beds**

<table>
<thead>
<tr>
<th>Health facilities</th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-triage sites</td>
<td>✓</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>Quarantine facilities</td>
<td>✓</td>
<td>1</td>
<td>18</td>
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<tr>
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<td>✓</td>
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<tr>
<td>Isolation facilities</td>
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<td>1</td>
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<tr>
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<tr>
<td>ICU (underway)</td>
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<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>

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**Risk areas, community engagement & non-pharmaceutical interventions**

- Communication materials distributed to the public: ✓
- Awareness activities conducted: ✓
- Non-pharmaceutical interventions implemented: ✓

---

**Challenges**
- Communication between ALLs and the National Call Centre for follow-up with patients under investigation.
- 24/7 health facility report on daily basis. Misunderstanding of case definitions among MOH.
- COVID-19 testing lab at Buka hospital is currently underway. MOHT health facility staff received MOH’s guidelines developed to assist the centre which they are to adhere to. All the clinics had closed and hospital had scaled down on patient numbers during the SDO COVID-19 guidelines for hospital operations and clinical management protocol were disseminated to the regional teams that are expected to cascade the guidelines and SOPs to primary health facility staff. Staff were identified for COVID-19 facilities and rostered were developed. Supplies are being returned with distribution list. PPE, monitors and other equipment are being delivered with all health facilities for guidance on readiness to detect and manage COVID-19 cases. 7. Buka, Kimor and Arua. Work is in progress in primary health facilities. 8. Preparation for quarantine: Want to see if NDOH partners can provide. For the two border posts, PPE agencies in Buni and Simuna need quarantine space. 9. Sultan Health Centre: 1. Preparation for isolation facilities: renovating Buka Hospital (2 beds), Arua and Buka District Hospitals. List of essential equipment is not yet fully developed. Training for acute care staff was planned in early June. 10. Preparation for ICU: renovating Buka Hospital (2 beds), 12 awareness reach enlightenment. 11. The Communicator holds regular media conference. 12. Communicate with NDOH logistics team and funding for logistics and need discussed.

---

**Health facilities’ availability and number of beds**

<table>
<thead>
<tr>
<th>Health facilities</th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
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<tr>
<td>ICU</td>
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<tr>
<td>ICU (underway)</td>
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<td>1</td>
</tr>
</tbody>
</table>

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**Risk areas, community engagement & non-pharmaceutical interventions**

- Communication materials distributed to the public: ✓
- Awareness activities conducted: ✓
- Non-pharmaceutical interventions implemented: ✓

---

**Challenges**
- Low surveillance reporting between 1/1-23 June.
- Presence cases for samples collected.
- Stigma and discrimination in the community.
- High numbers in one case management for COVID-19.
- Allowance payment to staff.
- Shortage of capacity of the staff at airport quarantine for response.
- Logistic support, IPE transport pick up and drop off for officers, transport for identified cases to quarantine site or treatment centre.

---

8 PM started awareness on stigma associated with COVID-19 in addition to the general awareness in villages in close collaboration with Lulu and village churches. Stigma reduction awareness also includes mental health partners. 11. All provincial directors are aligned with national direction.
Papua New Guinea Coronavirus disease 2019 (COVID-19)
Health Situation Report 27 (28 June 2020)

Manus

Surveillance
Alerts from rural health centres -
COVID-19 hotlines -
Daily COVID-19 reporting *1 29%
No. of RRTs -
Contact tracing team -
Quarantine team -

Laboratory functions
No. of COVID-19 lab results *2 0
Functioning GeneXpert machines, trained staff and COVID-19 cartridges X 3
No. of GeneXpert machines 1 *4

Health facilities
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<thead>
<tr>
<th>Availability</th>
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<td>ICU (underway)</td>
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</table>

Risk comm., community engagement & non-pharmaceutical interventions
Communication materials distributed to the public -
Awareness activities conducted ✓ *5
Non-pharmaceutical interventions implemented -

Challenges
- Low surveillance reporting between 17-23 June.
- No dedicated car or load for operational activities for COVID-19 response (i.e. access to islands in Manus).
- No operational ambulance vehicle nor sea ambulance to transport confirmed cases.
- Limited space in pathology unit and pharmacy that resulted in burns, and carbons being rigged up to calling with minimum space to move.
- Readiness for quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- No provisions for psychosocial support for the health workers.
- No incinerator; general waste & biohazard waste burnt and dumped in open area right next to hospital.

New Ireland

Surveillance
Alerts from rural health centres -
COVID-19 hotlines ✓
Daily COVID-19 reporting *1 0%
No. of RRTs 4 *2
Contact tracing team -
Quarantine team -

Laboratory functions
No. of COVID-19 lab results *3 1
Functioning GeneXpert machines, trained staff and COVID-19 cartridges ✓
No. of GeneXpert machines 2 *4

Health facilities
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<th>Availability</th>
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<td>ICU (underway)</td>
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</table>

Risk comm., community engagement & non-pharmaceutical interventions
Communication materials distributed to the public ✓
Awareness activities conducted ✓ *4
Non-pharmaceutical interventions implemented -

Challenges
- Low surveillance reporting between 17-23 June.
- Stigma in the community from a survey conducted.
- Readiness in case management for COVID-19:
  - No quarantine & isolation facilities and ICU.
  - No functional ventilators and oxygen concentrators.
  - 3 ADCs (no anaesthetist) at this stage.

*1 Between 17-23 June. *2 Two RRTs in Pidik District & 1 RRT in Lihir and Simbu. *3 Between 13-20 June *4 Kainantu Hospital & Lihir Medical Centre-TABO. *5 Kainantu General Hospital, National District Hospital, Tabul HC, Kmission HC, Lihir Medical Centre and Simbu Wine Centre. *6 Requiring tests from NSM infirmary partner. *7 Planned (8 beds) *8 Two district health teams reaching all the villages. A survey found a fair understanding of COVID-19. The provincial team started capturing messages related to stigma.
Papua New Guinea Coronavirus disease 2019 (COVID-19)
Health Situation Report 27 (28 June 2020)

West New Britain

Surveillance

Alerts from rural health centres -
COVID-19 hotlines ✔️
Daily COVID-19 reporting ✔️ 57% *
No. of RTTs 2
Contact tracing team -
Quarantine team -

Laboratory functions

No. of COVID-19 lab results 91
Functioning GeneXpert machines, trained staff and COVID-19 cartridges ✔️
No. of GeneXpert machines 2

Momase Region

East Sepik

Surveillance

Alerts from rural health centres ✔️
COVID-19 hotlines ✔️
Daily COVID-19 reporting ✔️ 86% *
No. of RTTs 1
Contact tracing team -
Quarantine team -

Laboratory functions

No. of COVID-19 lab results 0
Functioning GeneXpert machines, trained staff and COVID-19 cartridges ✔️
No. of GeneXpert machines 2

Health facilities

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</table>

Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public ✔️
Awareness activities conducted ✔️
Non-pharmaceutical interventions implemented -

Challenges

- Low surveillance reporting between 17-23 June.
- Staff are subject to stigmas after they came to contact with people suspected to have COVID-19.
- PPE supplies to police.
- Security issue: armed hold-ups for the ambulance & security personnel abused by the public for remitting entry for a hospital.
- Readiness for quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- Funding and support for the southern coast.

---

*1 Between 17-23 June. 2 One mobile team for outside response and one team for town/urban and close by areas, including three trained RTT members and a driver per team. 3 Between 13-26 June 4 Kimbe Hospital and Bula District Hospital 5 Large plan still in draft and only one simulation exercise was done for the hospital response in early April. 6 Town Urban Clinic, Kima Hospital & Motuakel Sporting Stadium 7 Planned at Motuakel Sporting Stadium 8 Yet to be equipped. 9 The teams worked more than 70,000 people.
**Madang**

**Surveillance**

- Alerts from rural health centres: -
- COVID-19 hotlines: ✓
- Daily COVID-19 reporting: 100% ✓
- No. of RRTs: 2 ✓
- Contact tracing team: -
- Quarantine team: -

**Laboratory functions**

- No. of COVID-19 lab results: 2 ✓
- Functioning GeneXpert machines, trained staff and COVID-19 cartridges: ✓
- No. of GeneXpert machines: 4 ✓

**Health facilities**

<table>
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<th>Availability</th>
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<th>No. of beds</th>
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</table>

**Risk comm., community engagement & non-pharmaceutical interventions**

- Communication materials distributed to the public: ✓
- Awareness activities conducted: ✓
- Non-pharmaceutical interventions implemented: ✓

**Challenges**

- |

---

**Morobe**

**Surveillance**

- Alerts from rural health centres: -
- COVID-19 hotlines: ✓
- Daily COVID-19 reporting: 71% ✓
- No. of RRTs: 2 ✓
- Contact tracing team: -
- Quarantine team: -

**Laboratory functions**

- No. of COVID-19 lab results: 1 ✓
- Functioning GeneXpert machines, trained staff and COVID-19 cartridges: ✓
- No. of GeneXpert machines: 5 ✓

**Health facilities**

<table>
<thead>
<tr>
<th>Facilities</th>
<th>Availability</th>
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<td>ICU</td>
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</tbody>
</table>

**Risk comm., community engagement & non-pharmaceutical interventions**

- Communication materials distributed to the public: ✓
- Awareness activities conducted: ✓
- Non-pharmaceutical interventions implemented: -

**Challenges**

- |

---

West Sepik

Surveillance

- Alerts from rural health centers: ✔
- COVID-19 hotlines: ✔
- Daily COVID-19 reporting: 57% ✔
- No. of RTs: 1 ✔
- Contact tracing team: -
- Quarantine team: -

Laboratory functions

- No. of COVID-19 lab results: 0
- Functioning GeneXpert machines: 2 ✔
- No. of GeneXpert machines: 2 ✔

Highlands Region

Eastern Highlands

Surveillance

- Alerts from rural health centers: -
- COVID-19 hotlines: ✔
- Daily COVID-19 reporting: 10% ✔
- No. of RTs: 2 ✔
- Contact tracing team: -
- Quarantine team: -

Laboratory functions

- No. of COVID-19 lab results: 38
- Functioning GeneXpert machines: 1 ✔
- No. of GeneXpert machines: 2 ✔

Health facilities

- Pre-triage sites: 2 ✔
- Quarantine facilities: 6 ✔
- Quarantine (underway): 7 ✔
- Isolation facilities: 10 ✔
- Isolation (underway): 3 ✔
- ICU: 2 ✔
- ICU (underway): -

Risk Comm, Community Engagement & Non-pharmaceutical interventions

- Communication materials distributed to the public: ✔
- Awareness activities conducted: ✔
- Non-pharmaceutical interventions implemented: ✔

Challenges

- Low surveillance reporting between 17-23 June.
- Multiple bush tracks to monitor in Wutung and Logistics challenges in Siochuo.
- Readiness to quarantine suspected COVID-19 patients and to do case management for COVID-19.
- Tests for pre-triage are still in Morobe.
- Referral of severely ill patients with COVID-19 from rural areas to the hospital.
- Stigma, panic and anxiety in the community.

*1 Between 17-23 June. *2 The first team includes five officers trained to conduct specimen collection and contact tracing, and has a dedicated vehicle. The second team uses manual sprays equipment to disinfect contaminated sites (clinic, households, vehicle, etc.) and has a dedicated vehicle. *3 Between 15-16 June.

11 of 23
Enga

Surveillance

- Alerts from rural health centres
- COVID-19 hotlines
- Daily COVID-19 reporting 100%
  - No. of RRTs: 1
- Contact tracing team
- Quarantine team

Laboratory functions

- No. of COVID-19 lab results: 0
- Functioning GeneXpert machines, trained staff and no COVID-19 cartridges
  - No. of GeneXpert machines: 2

Risk Comm, Community Engagement & Non-Pharmaceutical Interventions:

- Communication materials distributed to the public
- Awareness activities conducted
- Non-pharmaceutical interventions implemented

Challenges:

- Readiness to quarantine people who are suspected of having COVID-19
- Readiness in case management for COVID-19
- Healthcare workers require training in infection prevention and control

Hela

Surveillance

- Alerts from rural health centres
- COVID-19 hotlines
- Daily COVID-19 reporting 48.6%
  - No. of RRTs: 2
- Contact tracing team
- Quarantine team

Laboratory functions

- No. of COVID-19 lab results: 0
- Functioning GeneXpert machines, trained staff and no COVID-19 cartridges
  - No. of GeneXpert machines: 1

Risk Comm, Community Engagement & Non-Pharmaceutical Interventions:

- Communication materials distributed to the public
- Awareness activities conducted
- Non-pharmaceutical interventions implemented

Challenges:

- Low surveillance reporting between 17-23 June
- Cannot trace all people suspected with COVID-19 in tribal conflict areas
- No testing done for suspected COVID-19 cases without COVID-19 cartridges
- No training conducted yet
- PHA does not have the proper equipment to disinfect surfaces and buildings
- Additional clinical and support staff are needed
- Funding is not available for refurbishing provincial isolation and quarantine areas
- Readiness in case management for COVID-19

Health facilities

<table>
<thead>
<tr>
<th>Health facilities</th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-triage sites</td>
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<td>N/A</td>
</tr>
<tr>
<td>Quarantine facilities</td>
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Health facilities

<table>
<thead>
<tr>
<th>Health facilities</th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
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<td>ICU (underway)</td>
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</table>

Risk Comm, Community Engagement & Non-Pharmaceutical Interventions:

- Communication materials distributed to the public
- Awareness activities conducted
- Non-pharmaceutical interventions implemented

Challenges:

- Low surveillance reporting between 17-23 June
- Cannot trace all people suspected with COVID-19 in tribal conflict areas
- No testing done for suspected COVID-19 cases without COVID-19 cartridges
- No training conducted yet
- PHA does not have the proper equipment to disinfect surfaces and buildings
- Additional clinical and support staff are needed
- Funding is not available for refurbishing provincial isolation and quarantine areas
- Readiness in case management for COVID-19

*1 Provincial hospital, Hela PHA is emphasizing more on the "non-normal" way of screening patients at entry points in hospitals and health centres. *2 Three hospitals have quarantine facilities. *3 Renal dialysis at Hela PHA is the primary isolation site. *4 Wabag Hospital was connected to isolation ward with six (6) beds installed. *5 These hospitals have isolation units with the essential PPE and consumables. *6 Four container buildings (9) are connected to the isolation ward.
Jiwaka

**Surveillance**

- **Alerts from rural health centres**: -
- **COVID-19 hotlines**: -
- **Daily COVID-19 reporting**: 85%*
- **No. of RTs**: -
- **Contact tracing team**: -
- **Quarantine team**: -

**Laboratory functions**

- **No. of COVID-19 lab results**: 11
- **Functioning GeneXpert machines, trained staff and no COVID-19 cartridges**: -
- **No. of GeneXpert machines**: -

*All 31 health facilities started daily surveillance reporting for all UI, SARI & COVID-19. *5* is the number of nurses trained to conduct specimen collection and contact tracing without a dedicated car. Proportional RT is underpreservation and ready to collect all specimens for all UI and SARI cases. IPC team has set at least one more referral to cover all covered areas. Proportional RTs trained laboratory officers are collecting samples for COVID-19.

**Health facilities**

<table>
<thead>
<tr>
<th></th>
<th>Availability</th>
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<tr>
<td>ICU (underway)</td>
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</tbody>
</table>

**Risk Comm, Community Engagement & Non-Pharmaceutical Interventions**

- Communication materials distributed to the public: ✓
- Awareness activities conducted: ✓ 9%
- Non-pharmaceutical interventions implemented: -

**Challenges**

- Readiness in case management for COVID-19.

Simbu

**Surveillance**

- **Alerts from rural health centres**: -
- **COVID-19 hotlines**: -
- **Daily COVID-19 reporting**: 71%*
- **No. of RTs**: 1*
- **Contact tracing team**: 1*
- **Quarantine team**: -

**Laboratory functions**

- **No. of COVID-19 lab results**: 0
- **Functioning GeneXpert machines, trained staff and no COVID-19 cartridges**: -
- **No. of GeneXpert machines**: 2*

*All 31 health facilities started daily surveillance reporting for all UI, SARI & COVID-19. *5* is the number of nurses trained to conduct specimen collection and contact tracing without a dedicated car. Proportional RT is underpreservation and ready to collect all specimens for all UI and SARI cases. IPC team has set at least one more referral to cover all covered areas. Proportional RTs trained laboratory officers are collecting samples for COVID-19.

**Health facilities**

<table>
<thead>
<tr>
<th></th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-triage sites</td>
<td>-</td>
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<tr>
<td>Quarantine facilities</td>
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<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Quarantine (underway)</td>
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<td>-</td>
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<tr>
<td>Isolation facilities</td>
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<td>Isolation (underway)</td>
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<td>ICU (underway)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

**Risk Comm, Community Engagement & Non-Pharmaceutical Interventions**

- Communication materials distributed to the public: ✓
- Awareness activities conducted: ✓ 9%
- Non-pharmaceutical interventions implemented: -

**Challenges**

- Readiness in case management for COVID-19.

*9 An information booth for COVID-19 is setup in all major district health centres and common marketplaces. Mainstream media (NBC Simbu) is broadcasting updates with local publication produced every three days. *7* Triage and information booth for COVID-19 are being set up at the Provincial Hospital and Megandi Rural Hospital. All Health centres will be coordinated appropriately and equipped after conducting infection prevention and control (IPC) district training. *8* Three beds with three ventilators. *9* Awareness through all 31 health facilities in the province.
Southern Highlands

Surveillance
Alerts from rural health centres - 1*
COVID-19 lines -
Daily COVID-19 reporting 7 - 17%
No. of RRTs -
Contact tracing team -
Quarantine team -

Laboratory functions
No. of COVID-19 lab results 2 0
Functioning GeneXpert machines, trained staff and no COVID-19 cartridges -
No. of GeneXpert machines - 2

1 Level 2 facilities such as sub-centres were only asked to give an alert when cases are detected. 2 Between 17-22 June. 3 Supersite visits to health facilities contributed to improving daily reporting for COVID-19. Reporting has been affected due to the technical issue in using DNA and training of surveillance officers from health facilities. 4 Between 13-26 June. 5 Mendi Hospital & Mere Hospital.

Western Highlands

Surveillance
Alerts from rural health centres -
COVID-19 lines -
Daily COVID-19 reporting 7 - 0%
No. of RRTs -
Contact tracing team -
Quarantine team -

Laboratory functions
No. of COVID-19 lab results 2 0
Functioning GeneXpert machines, trained staff and no COVID-19 cartridges -
No. of GeneXpert machines - 4

* Between 17-23 June. 2 Between 13-26 June. 3 Kundip Hospital. 4 Tinside LAB, Western Highlands Provincial Hospital & WHP Public Health Laboratory. 5 It is planned to build accommodation within the hospital compound for staff working with COVID-19 patients. Procurement is planned for two portable ventilators with mock for the ICU. 6 The construction of a quarantine pod is ongoing. Additional quarantine facilities at Tinside hospital and Tari hospital are proposed. 7 The isolation ward is being established in the chapel with support from ICRC. Additional resources are required to refurbish and furnish the isolation ward. 8 The MHPF and MSPP teams are leading the advocacy programme and have produced pamphlets and posters.

Papua New Guinea Coronavirus disease 2019 (COVID-19)
Health Situation Report 27 (28 June 2020)

<table>
<thead>
<tr>
<th>Health facilities</th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
</tr>
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<tr>
<td>Pre-triage sites</td>
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<td>3</td>
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<tr>
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</tr>
<tr>
<td>Isolation facilities</td>
<td>×</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Isolation (underway)</td>
<td>✓</td>
<td>2</td>
<td>-</td>
</tr>
<tr>
<td>ICU</td>
<td>✓</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>ICU (underway)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Risk Comm, Community Engagement & Non-Pharmaceutical Interventions
Communication materials distributed to the public: ✓
Awareness activities conducted: ✓ **0**
Non-pharmaceutical interventions implemented: -

Challenges
- Low surveillance reporting between 17-22 June.
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- Healthcare workers require training in infection prevention and control.

* Kimo Lodge. ** Planned for a permanent quarantine work 830 million. *Mavine for isolation work for NDB-7B and planned at Mendi Hospital. **9 Soo-bed capacity ICU. One ventilator is functioning, and two will undergo repair. There is one oxygen humidifier. **10 Conducted awareness in all five districts and health centres, including theInternal urban area. All district health facilities took part in COVID-19 awareness to their respective communities. The activity is now ongoing at the facility level. PPIs were used on the COVID-19 perceptions on social media and advised health care workers not to communicate any misleading information. Pangia Baptist Mission printed flyers and made radio announcements on their radio station on COVID-19 messages in the districts.
Southern Region

Central

Surveillance
Alerts from rural health centres ✓
COVID-19 hotlines ✓
Daily COVID-19 reporting *4 86%
No. of RTTs: 1 ×
Contact tracing team -
Quarantine team -

Laboratory functions
No. of COVID-19 lab results *5 0
Functioning GeneXpert machines, trained staff and COVID-19 cartridges ✓
No. of GeneXpert machines 2 ×

*1 Between 17-22 June *2 Between 13-26 June
*3 Between 13-26 June
*4 Kaviola & Birena District Hospital have GeneXpert machines powered by solar power system.
*5 The hours of the 3 doctors were identified as the isolation and quarantine facilities for all the staff managing the COVID-19 suspected cases.
*6 Abou District Hospital, Birena District Hospital and Veleia Hospital *7 Planned at Birena District Hospital *8 Planned at Abou District Hospital and Birena District Hospital.

Health facilities

<table>
<thead>
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<th>Facilities</th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
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</thead>
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<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Isolation facilities</td>
<td>×</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
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<td>7</td>
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<tr>
<td>ICU</td>
<td>×</td>
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<td>0</td>
</tr>
<tr>
<td>ICU (underway)</td>
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<td></td>
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</tr>
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</table>

Risk concerns, community engagement & non-pharmaceutical interventions
Communication materials distributed to the public ✓
Awareness activities conducted ✓
Non-pharmaceutical interventions implemented -

Challenges
- Low surveillance reporting between 17-23 June.
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- The province does not have a hospital status to address health facility readiness.
- Abou District: water supply, power supply, oxygen supply, workforce, renovation of the current building used as outpatient, delivery and labor wards, and clinics for other public health programs and waste management.
- Gola District: Not enough PPEs for all health facilities. Needlet triage tents for Teina and Wotape. Followed by the other four facilities. Absence of public servants at workstations. Implementation of routine immunization and regular supply of TB drugs.
- Birena District: ran-down facilities requiring renovation, power supply, water supply.

Gulf

Surveillance
Alerts from rural health centres ✓
COVID-19 hotlines ✓
Daily COVID-19 reporting *4 86%
No. of RTTs: -
Contact tracing team -
Quarantine team -

Laboratory functions
No. of COVID-19 lab results *5 0
Functioning GeneXpert machines, trained staff and COVID-19 cartridges -
No. of GeneXpert machines 2 ×

*1 Between 17-23 June *2 Between 13-26 June
*3 Between 13-26 June
*4 Kapiurai Rural Hospital & Kili District Hospital. Installation at Kerema Hospital Laboratory to be confirmed. *5 The province has identified three quarantine sites: Korotua, Kerema and Kili. One will be set up when the donated tests are received. *6 The old 18 Ward is repurposed for isolation.

Health facilities

<table>
<thead>
<tr>
<th>Facilities</th>
<th>Availability</th>
<th>No. of facilities</th>
<th>No. of beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-triage sites *4</td>
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<td>0</td>
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</tr>
<tr>
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<tr>
<td>ICU</td>
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<td>0</td>
</tr>
<tr>
<td>ICU (underway)</td>
<td></td>
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</table>

Risk concerns, community engagement & non-pharmaceutical interventions
Communication materials distributed to the public ✓
Awareness activities conducted ✓
Non-pharmaceutical interventions implemented -

Challenges
- RTI not established (planned training).
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
Papua New Guinea Coronavirus disease 2019 (COVID-19)
Health Situation Report 27 (28 June 2020)

Milne Bay

**Surveillance**
- Alerts from rural health centres: ✔
- COVID-19 hotlines: ✔
- Daily COVID-19 reporting:* 0%
- No. of RRTs: 1
- Contact tracing team -
- Quarantine team -

**Laboratory functions**
- No. of COVID-19 lab results:* 0
- Functioning GeneXpert machines, trained staff and COVID-19 cartridges: ✔
- No. of GeneXpert machines: 1

*1 Between 17-23 June, the surveillance team is working on the strengthening of information management for E/UGSI and surveillance at the health facilities. The health facilities surveillance system was adjusted to capture 10%, PHA, URTIs and deaths. 12 RRT was established after the training. *2 Between 18-23 June, Milne Bay Provincial Hospital - 5. The team visits schools. A vehicle has been designated for transportation of the COVID 19 patients.

National Capital District

**Surveillance**
- Alerts from rural health centres: ✔
- COVID-19 hotlines ✔
- Daily COVID-19 reporting:* 86%[*]
- No. of RRTs: 1
- Contact tracing team -
- Quarantine team -

**Laboratory functions**
- No. of COVID-19 lab results:* 704
- Functioning GeneXpert machines, trained staff and COVID-19 cartridges: ✔
- No. of GeneXpert machines: 3


**Health facilities**

<table>
<thead>
<tr>
<th>Facilities</th>
<th>Availability</th>
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<td>ICU</td>
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<td>2</td>
</tr>
<tr>
<td>ICU (underway)</td>
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</tr>
</tbody>
</table>

**Risk comms, community engagement & non-pharmaceutical interventions**
- Communication materials distributed to the public: ✔
- Awareness activities conducted: ✔
- Non-pharmaceutical interventions implemented: [-]

**Challenges**
- Zero surveillance reporting between 17-23 June.
- No reports from health facilities in Kikau and Goodenough.
- Limited supplies of PPE.
- No space for pre-triage and quarantine facilities.
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- Challenges in health workforce due to age.

*There are two beds in the isolation facility currently, including a delivery bed in Atiast Hospital. *1 The construction and refurbishment of the COVID-19 isolation/hospital facility is in progress.

**Health facilities**

<table>
<thead>
<tr>
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<th>No. of facilities</th>
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<tr>
<td>ICU</td>
<td>✔</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>ICU (underway)</td>
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</tbody>
</table>

**Risk comms, community engagement & non-pharmaceutical interventions**
- Communication materials distributed to the public: ✔
- Awareness activities conducted: ✔
- Non-pharmaceutical interventions implemented: ✔

**Challenges**
- NCDFH has an ageing workforce with the majority over 50.
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- The clinics and hospitals are full to capacity with no space for outpatients.

*1 Sixteen public clinics, PNGH and Gerehu Hospital. The figure does not include private clinics and hospitals. *2 Hotels in HCM provide quarantine services. Government designated facilities include: Ponderosa Hotel, Hiramaya Hotel, Lalama Hotel, Gateway Hotel and Neil Lodge. Designated hotels include Hiramaya Inn, Eia Beach Hotel, Crown Papua Hotel, Loyola Hotel, Hilton Hotel, Stanley Hotel, Lamana Hotel and Airways Hotel. *3 Dagurs and 6 wala Facilities: 8 Kita Flim Facilties. *4 Six separate bedrooms under renovation - all ward renovation is scheduled for completion by mid-June. *5 PMU. *6 City wide awareness covering more than 80% of the city drivers by the municipal arm of the NCDFP Provincial Government and NCDFH team. ST JOHN’S Ambulance ran a massive awareness campaign and TOT for private sectors to advocate.

16 of 23
**Oro**

**Surveillance**
- Alerts from rural health centres: ✔
- COVID-19 hotlines: ✔
- Daily COVID-19 reporting: 14%, 1
- No. of RTIs: 11
- Contact tracing team: –
- Quarantine team: –

**Laboratory functions**
- No. of COVID-19 lab results: 0
- Functioning GeneXpert machines, trained staff and COVID-19 cartridges: ✔
- No. of GeneXpert machines: 3

**Health facilities**
- Pre-triage sites: ✔
- Quarantine facilities: ✔
- Quarantine (underway): –
- Isolation facilities: ✔
- Isolation (underway): –
- ICU: –

**Risk comms, community engagement & non-pharmaceutical interventions**
- Communication materials distributed to the public: ✔
- Awareness activities conducted: ✔
- Non-pharmaceutical interventions implemented: –

**Challenges**
- Low surveillance reporting between 17-23 June.
- Readiness in case management for COVID-19.

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**Western**

**Surveillance**
- Alerts from rural health centres: ✔
- COVID-19 hotlines: ✔
- Daily COVID-19 reporting: 1
- No. of RTIs: 3
- Contact tracing team: –
- Quarantine team: –

**Laboratory functions**
- No. of COVID-19 lab results: 6
- Functioning GeneXpert machines, trained staff and COVID-19 cartridges: ✔
- No. of GeneXpert machines: 3

**Health facilities**
- Pre-triage sites: ✔
- Quarantine facilities: ✔
- Quarantine (underway): –
- Isolation facilities: ✔
- Isolation (underway): –
- ICU: 4

**Risk comms, community engagement & non-pharmaceutical interventions**
- Communication materials distributed to the public: ✔
- Awareness activities conducted: ✔
- Non-pharmaceutical interventions implemented: ✔

**Challenges**
- Following up with the contacts.
- The Kungia Surveillance Team needs HR support from Ndik.
- Surveillance data flow, data management, and enhancement of (Li) surveillance (including event based surveillance and the establishment of sentinel surveillance sites).
- Readiness in case management for COVID-19.
- Averting issues in health workforce.
- Border crossing by their livelihood to Indonesia.
- Accessing to provincial budget from districts.

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*1 Between 17-23 June. *2 A team based in Daru trained for surveillance and rapid response conducts sample collection in South Fly. Another team is responsible for point of entry screening at the ports for every passenger arriving inching Daru and Kungia. Two officers were trained for sample collection from the visiting Surveillance team. *3 Between 11-30 June. *4 Two in Daru General Hospital and one in Kungia Hospital. 1 staff in Tabula Hospital needs to be confirmed. *5 Daru is maintaining residential staff housing and Kungia is building a new staff facility. Kungia and Balimo have not yet identified facilities for staff who will provide care for COVID-19 patients. *6 Clinical Imaging Team consists of a critical care nurse, an anesthetist, an emergency registrar, a laboratory scientist, a Conservative Officer, a specialist Obstetrician and Gynaecologist.

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*1 Erimine at four hospitals (Daru, Kungia, Balimo and Kupang) conduct pre-triage with handwashing facilities available for people accessing the hospitals. 2 The quarantine facility is in Daru Provincial Hospital (CHS) Building. 3 Twelve beds quarantine planned. Three districts hospitals in Kungia, Rupang and Balimo will set up limited tents in quarantine facilities. 4 Two isolation facilities are set up in Daru Provincial Hospital and Kungia District Hospital with 10 self-contained rooms and are unoccupied with 10 beds, respectively. 5 Two District hospitals prepare isolation facilities. Kupang has identified the old ICU ward with 10 beds for COVID-19 isolation which requires minor changes. There are 2 isolation tents proposed with one delivery bed. 6 Risk communication materials are under development for printing and distribution. Needs are outlined in the communities for enhanced risk communication activities at hand hygiene and social distancing. 7 Awareness activities conducted by Ndik, in collaboration with PMG, District teams. 8 Movement restrictions along borders.
ANNEX C – Photos

Photo 1. Rollout of COVID-19 Training Package for provinces supported by NDoH and WHO

Photo 2. Training on communication and community engagement for school teachers in NCD supported by UNICEF

Photo 3. Handover of first shipment of personal protective equipment from UNICEF to Minister for Health and HIV/AIDS Hon Jelta Wong and Acting Health Secretary Dr Paison Dakulala

Photo 4. Health care workers receive training on the appropriate and rational use of PPE
Photos 6 to 8. Consultations on Niupela Pasin (New Normal) with stakeholders in Port Moresby and West Sepik

Photo 5. Joint NDOH and WHO surveillance and information management teams analyzing field investigation reports and conducting risk assessment for COVID-19
Photos 9 to 11. Official opening of the Isolation Centre in East New Britain by Deputy Prime Minister and Minister for Justice and Attorney General Hon Davis Steven and Minister for Health and HIV/AIDS Hon Jelta Wong on 26 June 2020
ANNEX D – New Information and Communication Products

Travel Quarantine

Welcome to Papua New Guinea!
The Government of Papua New Guinea requires all incoming travellers to get tested for COVID-19 within a 14-day period prior to arrival in PNG. The result should indicate they do not have detectable levels of COVID-19.

Incoming travelers are also REQUIRED to be on quarantine for 14 days upon arrival in PNG.

What is quarantine and why are you being asked to do it?
Quarantine separates people who may have been infected with COVID-19 before their arrival to Papua New Guinea from the general public. It is required to minimize the spread of COVID-19 infection.

Upon your arrival in the country, you will be required to quarantine in a designated hotel for 14 days. Our Quarantine Officers will monitor you for any COVID-19 related symptoms during the quarantine period.

The 14-day quarantine is mandatory for all incoming travellers. There will be NO consideration with requests for early discharge from quarantine.

What to expect while you are on quarantine?
- You are required to stay in your hotel room for a full 14 days and nights.
- You are not allowed to receive physical visits or interact with friends, family or any other member of the public. You can stay connected with your friends and family through emails, phone calls and internet.
- Leaving your place of quarantine or receiving physical visits is considered a breach of the National Pandemic Act 2020 and may result in prosecution.
- The hotel will also be guarded by security personnel 24 hours, seven days per week to ensure no one breaks quarantine rules.
- During the 14 days, you will receive calls or visits from the Quarantine Officers of the National Department of Health to check if you are experiencing any clinical symptoms such as fever, cough, difficulty breathing, sore throat or any other respiratory symptoms.
- You are also required to self-monitor and call your hotel reception or the COVID-19 toll-free hotline 1-600200 if you experience any of the above symptoms.
- After completing your 14-day quarantine, a Quarantine Officer of the National Department of Health will check on you. If you do not have any symptom, you will be issued an official clearance certificate. You are NOT allowed to leave the hotel without the clearance of the health team.
- For any urgent medical needs that are not related to COVID-19, call the hotel reception immediately or the St John ambulance in this number 111.

As of 24 June 2020
Home Quarantine

What is home quarantine?
Quarantine is when you are well but may have been in contact with someone with COVID-19.

You must avoid contact with others and quarantine at home for 14 days to prevent the spread of the virus.

Quarantine means you:
Must not leave your home except:
• in an emergency
• to obtain essential medical care

Must not go into public places including work and shops

Must not let anyone into your home unless they:
• usually live with you
• are entering to provide medical care

How to quarantine?
Stay in your own room - if you can’t do this, keep 1 metre distance from others at all times.

Use a separate bathroom, if possible.

Avoid shared areas and items such as utensils, drinking cup and glass, towels, etc.

Wear a mask when in the same room as others.

Have a supply of healthy food, water and any prescription medicine.

Preventing infection during home quarantine
- Wash your hands frequently with soap and clean water for at least 20 seconds.
- Cover your coughs and sneezes with a bent elbow or tissue. Throw tissue immediately into a bin with cover.
- Avoid touching your eyes, nose and mouth.
- Clean places that you touch with bleach or alcohol disinfectant solution: door handles, phones, laptops, bathroom, toilet, light switches, etc.
- Wash your clothes and beddings in hot water (at 60-90 degrees if possible) with regular detergent.
Monitor your health during quarantine

Monitor your symptoms daily.

If you develop a cough, fever or shortness of breath, call the COVID-19 toll-free hotline 1-800-200 immediately.

Planning home care in case you get COVID-19

If you test positive for COVID-19, your doctor will make a recommendation on your care either at home or at the hospital.

Consider who will take care of you if you do become sick.

Quarantine and vulnerable people

People over 60 and people with underlying medical conditions are more likely to get very sick from COVID-19.

Arrange support from family, friends, neighbors and healthcare professionals for your care if you become sick.

Your well-being

Quarantine is important to stop the spread of COVID-19 – but it can be stressful and boring.

Look after your well-being and mental health.

Keep in touch with family members and friends via telephone, email or social media.

Where possible, keep your normal daily routines that can be done while in your room, such as reading and pursuing a hobby.

Eat a healthy diet and get plenty of fluids.

Exercise regularly.

Arrange to work from home if this option is available to you.

As of 24 June 2020

For more information about this Situation Report, contact:

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