Weekly operational update on COVID-19

23-29 May 2020



Snapshot As of 29 May 2020 Confirmed cases

5,657,529

Confirmed deaths

356,254

Countries & territories affected

216

Public health response and coordination highlights

Coordination – United Nations Crisis Management Team (UN CMT)

The United Nations Crisis Management Team (UN CMT) was activated upon WHO's request by the UN Secretary-General on 4 February 2020. The UN CMT, chaired by WHO, brings together 23 UN entities for strategic UN-wide coordination on COVID-19. The UN CMT meets each week virtually to discuss specific topics in nine areas ranging from health to socio-economic impact and human rights. During the UN CMT meeting of 27 May 2020 WHO stressed the need for continued vigilance in countries moving out of restrictions to prevent a resurgence of cases. Adjustments to public health and social measures should be phased and coupled with surveillance to carefully calibrate next steps. The UN CMT Working Group on Travel and Trade Impact emphasized the need to support countries to carefully reopen their borders and restart international travel in a way that neither jeopardizes public health, nor negatively disadvantages those on the move, particularly vulnerable persons. For this, and the eight other workstreams, the UN system plays an important role to support countries through standard setting, policy advice, capacity enhancement, technical assistance and service delivery.

Joint statement to improve health services for refugees, displaced and stateless people

WHO and United Nations High Commissioner for Refugees (UNHCR) joined forces to improve health services for refugees, displaced and stateless people. WHO and UNHCR signed a new agreement to strengthen and advance public health services for the millions of displaced people around the world. A key aim this year will be to support ongoing efforts to protect some 70 million displaced people due to COVID-19.

List of Priority medicines and joint HS Classification list of medical supplies

WHO and the World Customs Organization developed <u>a list of priority medicines and a joint HS Classification list for medical supplies</u>. (HS, or Harmonized System, is a harmonized Commodity Description and Coding System.) This list was transmitted to customs authorities and will contribute to the rapid cross-border movement of medical supplies and medicines urgently needed during the current COVID-19 global pandemic

Agencies call for joint effort for routine immunization

At least 80 million children under one at risk of diseases such as diphtheria, measles and polio as COVID-19 disrupts routine vaccination efforts, warn Gavi, WHO and UNICEF. Agencies call for joint effort to safely deliver routine immunization and proceed with vaccination campaigns against deadly vaccine-preventable diseases.



Social media monitoring & surveillance systems

WHO reports the COVID-19 information ecosystem is sensitive to new "conversation inputs," such as news stories, influential statements or new research findings, highlighting how <u>social media monitoring</u> allowed timely communication intervention by the WHO in South Korea, helping to de-escalate speculation around immunity and reinfection in that country. Meanwhile, WHO is encouraging countries that have repurposed their <u>influenza surveillance systems</u> to detect COVID-19 to continue surveillance outside of traditional influenza seasons.

Announcement on a temporary pause on hydroxychloroquine

Recalling the observational study published in <u>The Lancet</u> on Friday, the WHO Director-General <u>announced</u> that the Executive Group of the Solidarity Trial, representing 10 of the participating countries has implemented a temporary pause of the hydroxychloroquine arm within the Solidarity Trial while the safety data is reviewed by the Data Safety Monitoring Board.

New COVID-19 response guide launched for young people

WHO has supported the Smithsonian Science Education Center and Inter Academy Partnership to launch a new COVID-19 rapid-response guide for young people aged 8–17 years, titled "COVID19! How can I protect myself and others?". The guide, which is based on the 2030 Sustainable Development Goals, aims to help young people understand the science and social science of COVID-19 as well as help them take action to keep themselves, their families and communities safe.

Updates released to the Operational Planning Guideline

WHO has updated a document on <u>Operational Planning Guidelines to Support Country Preparedness and Response</u>. The document provides a practical guide that can be used by national authorities to develop and update their COVID-19 national plans across the major pillars of COVID-19 preparedness and response. With the addition of 30 new actions aligned with the Strategy Update and recent technical guidance, the Updated Guidelines can be used to rapidly update existing COVID-19 national plans toward a fully collaborative and coordinated response to the pandemic, across the 9 pillars of public health.

Monitoring & Evaluation framework released

WHO has published a COVID-19 Monitoring and Evaluation Framework listing the key public health and essential health services and systems indicators to monitor preparedness, response, and situations during the COVID-19 pandemic. The Framework aims to assess performance and provide recorded information to support analysis of progress against the COVID-19 SPRP and related Strategy Update across the 9 pillars of public health. Its main objective is to establish and maintain a set of global and country indicators to support: Strategic thinking, operational tracking, real-time evidence-based decision making and advocacy and transparency between countries/territories/ areas, donors, UN agencies and partners involved in the response.

Development of a global pool on health technologies

WHO MHP and the Science Division are collaborating closely with Cost Rica for the development of a global pool on health technologies that aims to promote open access to information on research and patents for new medicines, vaccines, diagnostics and equipment for the prevention and response to COVID19. A Call to Action for WHO Member States to support this Pool will be launched on 29 May 2020 by WHO DG, President of Cost-Rica and other Heads of States from various regions in the world.





New COVID-19 search feature on WHO website

WHO has <u>launched a new search feature</u> for questions on COVID-19. WHO's <u>COVID-19 webpage</u> now features an enhanced natural language processing search bar, which understands questions posed in everyday language and more accurately delivers answers to those queries.

Update to the COVID-19 Supply Portal

WHO informs that an updated version of the <u>COVID-19 Supply Portal</u> was launched last week; to date, the Portal has received 117 requests from 47 countries.

The COVID-19 Partners Platform

The <u>Platform</u> was launched as a tool to enable all countries/areas/territories, UN Country Teams and partners supporting the response to coordinate and combine efforts to address the COVID-19 pandemic. It features real-time tracking of planned activities, implementation and resourcing of COVID-19 national plans. The <u>Updated COVID-19 SPRP Operational Planning Guidelines</u> include 30 new actions aligned with the SPRP Strategy Update and recent technical guidance. These actions will be integrated into the Platform along with a dynamic costing model based on forecasting tools.

To date, 76% of WHO member states (149 countries) have engaged on the Platform (including regular users, as well as requests for demonstrations). 105 COVID-19 national plans have been uploaded and 56 donors have entered their contributions, totaling USD4 billion. The COVID-19 Supply Portal is now also available through the COVID-19 Partners Platform. It enables users to request critical supplies. Click here for more information.

WHO Prequalification unit

The WHO Prequalification Unit continues the assessment of products for Emergency Use Listing (EUL) for candidate in vitro diagnostics (IVDs) detecting SARS-CoV-2. The ninth Nucleic Acid Test (NAT) assay was listed as eligible for WHO procurement on 22 May 2020, based on its compliance with WHO EUL requirements. Rapid diagnostic tests (RDTs) for the detection of IgM/IgG to SARS-CoV-2 are also invited and three antibody detection tests are expected to be submitted for assessment of compliance with WHO EUL requirements.

Emergency Medical Teams (EMT)

EMT have developed as of 29 of May, 23 international missions. National operations supported or complemented by EMTs are still in place in most of the countries affected up to 43 reported in total. Additionally, over 500 national teams have been mobilized using the EMT methodology. EMT senior expert has been deployed during the reported period to Accra and EMT secretariat is working to send experts to Cox's Bazar in order provide support for Case Management activities On Friday, 29 May, the SAG (Strategy Advisory Group), the network's highest governing body, was held to review the work of the first quarter of the year, the EMT's response to the COVID emergency - 19 and to set priorities for the coming months. Read more





Releases

Weekly WHO Press briefing

WHO Director-General's opening remarks at the media briefing on COVID-19 - 25 May 2020

Guidance documents

Monitoring and Evaluation Framework - COVID-19 Strategic Preparedness and Response (SPRP)

Operational planning guidance to support country preparedness and response (update)

<u>Framework for decision-making: implementation of mass vaccination campaigns in the context of COVID-19</u> Controlling the spread of COVID-19 at ground crossings

Revealing the toll of COVID-19: A technical package for rapid mortality surveillance and epidemic response Clinical management of COVID-19

Ethical considerations to guide the use of digital proximity tracking technologies for COVID-19 contact tracing

IASC Interim Guidance

Localisation and the COVID-19 Response

Scientific Briefs

Smoking and COVID-19

COVID-19: Surveillance, case investigation and epidemiological protocols

Assessment of risk factors for coronavirus disease 2019 (COVID-19) in health workers: protocol for a case-control study

Population-based age-stratified seroepidemiological investigation protocol for COVID-19 virus infection Surveillance protocol for SARS-CoV-2 infection among health workers

Read all releases here.

Strategic Supply Chain

The roll-out of the Supply Portal continues. In requesting PPE through the Portal, the full needs for the COVID-19 response, including the maintenance of essential health services can be included. However, this is recognizing that the overall stocks available for distribution are limited and full requests may not be met even if full funding is secured

COVID-19 PPE supply shipped as of 27 May 2020

SHIPPED	Mask, Surgical	Mask, N95	Gloves, Examination	Gown	Goggles	Face Shield
AFR	1,439,750	24,200	386,300	46,779	6,930	30,910
EMR	474,250	35,845	694,000	79,922	7,420	25,800
EUR	221,100	7,250	249,100	24,648	4,140	7,000
PAH	76,000	2,440	76,000	13,016	1,300	7,900
SEAR	452,000	41,065	371,500	25,600	9,950	15,336
WPR	314,550	15,365	199,000	10,010	6,107	7,200
TOTAL	2,977,650	126,165	1,975,900	199,975	35,847	94,146





Appeals

The COVID-19 Strategic Response and Preparedness Plan (SPRP) has been updated and is reviewed on a regular. The updated SPRP consists of the following: the COVID-19 technical strategy update which was released on 14 April; the updated COVID-19 SPRP Operational Planning Guidelines to Support Country Preparedness and Response; the COVID-19 SPRP Monitoring and Evaluation Framework; WHO's updated resource requirements through to the end of December 2020.

These elements are laid out in the COVID-19 WHO Appeal, updated on May 24.

Global Strategic Preparedness & Response Plan (SPRP)

WHO has been engaging donors and the public to mobilize support for the COVID-19 response against the SPRP and many donors have contributed to date. The status of funding raised for WHO against the SPRP can be found here. WHO estimates that a total of US\$ 1.7 billion is needed to respond to COVID-19 across the three levels of the organization through till December 2020. The resources will be used to implement priority public health measures in support of countries to prepare and respond to coronavirus outbreaks, as well as to ensure continuation of essential health services. The US\$ 1.7 billion required under the updated SPRP takes into account the funds that WHO has received to date against SPRP, leaving WHO with a funding gap of US\$ 1.07 billion for 2020.

Global Humanitarian Response Plan (GHRP)

The 2nd iteration of the GHRP released on 7 May 2020 is a joint effort by members of the Inter-Agency Standing Committee (IASC), to analyse and respond to the direct public health and indirect immediate humanitarian consequences of COVID-19, particularly on people in countries already facing other crises. US\$6.7 billion are required through till end December 2020 for additional humanitarian interventions, above and beyond existing humanitarian needs, due to COVID-19.

WHO appreciates and thanks donors for the support already provided or pledged and encourages donors to give fully flexible funding for the SPRP or GHRP and avoid even high-level/soft geographic earmarking at e.g. regional or country level. This will allow WHO to direct resources to where they are most needed, which in some cases may be towards global procurement of supplies, intended for countries.



WHO funding mechanisms

COVID-19 Solidarity Response Fund

With support from the Solidarity Response Fund, the diagnostics consortium has secured 4 million manual PCR tests for \$49 million, and initiated purchase orders for allocation and distribution to 135 countries for the month of May. These initial purchases will serve as a catalyst for securing supplies for additional procurement, as payments from countries receiving these deliveries will provide additional funding for procuring more supplies and equipment for allocation and delivery in the coming months.

The WHO Contingency Fund for Emergencies (CFE)

CFE enables WHO to respond in real-time, playing a critical role in responding to outbreaks around the world in the most vulnerable countries with weak health systems. WHO has released US\$10 million for urgent preparedness and response COVID19 activities globally through the CFE and encourages donors to continue to replenish the CFE to allow WHO to respond to health emergencies in real time.

Health learning

OpenWHO has more than 2.9 million enrolments. The platform hosts free trainings on 11 different topics across 26 languages to support the coronavirus response, for a total of 82 courses. This week, a new course has been published on the OpenWHO COVID-19 learning channel: Decontamination and sterilization of medical devices.

Global Research Highlights

The Solidarity Trial of COVID19 potential treatment options has been initiated and the <u>Solidarity Vaccine Trial protocol</u> developed. WHO is now seeking <u>expressions of interest</u> from vaccine trial sites around the world to take part in this protocol which will include several candidate COVID19 candidates that meet WHO prioritization criteria.

Additional medicines were sent to Iran for its participation in the <u>Solidarity Trial</u>; four re-purposed medicines – Remdesivir, Lopinavir/Ritonavir, Interferon (β1a), and hydroxychloroquine – are being evaluated. Recalling the observational study published in <u>The Lancet</u> on Friday, a temporary pause has been implemented for the hydroxychloroquine arm while the safety data is reviewed by the Data Safety Monitoring Board.

The WHO recently issued a <u>publication on the vaccine landscape</u>. For more information on global research, please refer to:

- Updated list of COVID-19 trials from the ICTRP database
- Updates on current research and development





COVID-19 Global Preparedness and Response Summary Indicators

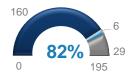
Data as of 26 May 2020a

Missing data





Countries have a COVID-19 preparedness and response plan



Countries have a functional multi-sectoral, multi-partner coordination mechanism for COVID-19



Countries have communicated **COVID-19** prevention and preparedness messages to the population



Countries have a COVID-19 community engagement plan



Countries have a national health occupational safety plan for HCWs



Countries have COVID-19 laboratory testing capacity



Countries have a clinical referral system in place to care for COVID-19 cases



Priority countries (n=64) have postponed at least 1 vaccination campaign due to COVID-19b



2 275 002 ENROLMENTS FOR OPENWHO COVID-19 COURSESC

INCREASING THE KNOWLEDGE BASE AND COUNTRY **UPTAKE OF WHO TOOLS**



464 086 users (8% increased) Available in 22 languages

132 884 users (4%

96 014 users (6%

increase) Available in 11

languages

increase)

languages

Available in 8

598 411 users

(3% increase)

Available in 15

469 622 users (5%

172 183 users (3%

languages

increase)

languages

increase) Available in 8 languages

Available in 8

(13% increase) Available in 4 languages 56 835 users (6% Go. Data Tool

increase) Available in 2 languages 117 248 users Hand (14% increase) Hygiene

languages Waste Management

Protective

Equipment

39 724 users (33% increase) Available in 1 language

Available in 2

127 995 users

UNITY STUDIES Transmission dynamics. severity and seroprevalence



Intention confirmed:

66 countries (AFR 18, AMR 6, EMR 8, EUR 22, SEAR 4, WPR 8)

Implementation started:

33 countries (AFR 8, AMR 3, EMR 3, EUR 13. SEAR 1. WPR 5)

CLINICAL PLATFORM



confirmed: 22 countries (AFR

4, AMR 2, EMR 2, EUR 9. SEAR 1. WPR 4)

Implementation started:

15 countries (AFR 3 AMR 2, EMR 0, EUR 7. SEAR 1. WPR 2)

SURVEILLANCE **PLATFORM** COVID-19 sentinel surveillance by GISRS



Sentinel surveillance reported: 18 countries (AFR 1, AMR 11, EMR 2, EUR 1. SEAR 0. WPR 3)

Sentinel specimens tested in Week 20: 46 896(28% increase) Percent positive

for COVID-19: 14 9%

- a) Data collected from 194 Member States and 1 territory through the WHO Regional Offices. The term "countries" should be understood as referring to "countries and territories"
- b) WHO immunization Repository https://www.who-immunization-repository.org/dhis-web-commons/security/login.action
- c) Data as of 26 May 2020.

and response planning

SARI Treatment

Facility Design

d) Incremental percentage compared to last week data



African Region (AFR)

Technical surveillance and epidemiological support was provided to many countries. Data management (Go. Data, Open Data Kit, EWARs) trainings and offered technical support to Algeria, Eswatini, Democratic Republic of the Congo, Liberia, Sierra Leone, South Africa, South Sudan and Zimbabwe. Virtual meetings were held with staff from the Ministries of Health and WHO Country Offices in Botswana, Eritrea, Mauritius, Sierra Leone, South Sudan and Tanzania to strengthen COVID-19 surveillance, including alert management system, contact tracing, reporting and data analysis. Technical support was provided to Niger, Senegal and Burkina Faso in contact tracing, data entry, quality control and analysis. Since the beginning of the pandemic 7 127 healthcare workers (948 more than last week) were trained in IPC.

Experts are being deployed to Comoros and Sao Tome to support initiation and strengthening of Polymerase Chain Reaction testing for SARS-CoV-2.

A comprehensive document Technical Guidance on Laboratory Operations for Coronavirus Disease (COVID-19) Testing in the WHO African Region to support countries in providing streamlined laboratory actions for COVID-19 was published in French, Portuguese and English and disseminated regionally.

Americas (AMR)

PAHO continued to disseminate key COVID-19-related information and knowledge across multiple media platforms. The regional team has also supported Argentina, Chile, Costa Rica, and Venezuela to establish their own GIS hubs to facilitate the monitoring of COVID-19 cases in these countries.

Efforts are underway to ensure that all countries in the Region integrate COVID-19 into their routine severe acute respiratory illness / influenza-like illness (SARI/ILI) surveillance systems.

Go.Data, WHO's contact tracing tool, is helping countries' health authorities follow up on cases and possible contacts. PAHO has trained countries (in use in 9 countries) in the Americas to use this tool and has facilitated the use of its servers for interested countries.

PAHO provided virtual technical cooperation in molecular diagnosis to Antigua and Barbuda. Troubleshooting support was provided to Cayman Islands, Costa Rica, Dominica, Guatemala, and Saint Lucia. In addition, recommendations on laboratory management were provided to Saint Kitts and Nevis. To date, PAHO has sent to several countries materials for over 3.178 million COVID-19 tests, as well as 21,500 swabs, 85 enzymes, and 114 extraction kits (among other material). In collaboration with Chile, PAHO facilitated continued virtual South-South cooperation effort to strengthen SARS-CoV-2 sequencing in Uruguay. PAHO shared experiences to date and recommendations on assays and other laboratory diagnostics issues with health professionals from the Andean Health Organism (ORAS), a subregional health mechanism.

The rise of COVID-19 cases has led to an increased need for oxygen concentrators and other related supplies. PAHO has facilitated donations of these supplies between external parties and Ministries of Health in Colombia, Guatemala, and Peru. PAHO developed recommendations for infection prevention and control (IPC) practices to be applied during care in nontraditional settings, such as hotels, motels, shelters, dormitories, and home care. PAHO maintains a platform with weekly updates on regulatory matters and good regulatory practices in response to the pandemic (PRAIS).



Considering the increased severity of the virus in older persons a webinar was developed to facilitate the exchange of experiences in caring for adults with COVID-19 in middle and low-income countries (86 participants from 12 countries). PAHO conducted a virtual meeting tailored to local authorities involved in regulatory aspects of using ventilators in the COVID-19 context (82 participants). In a meeting with blood services convened by the Andean Health Organization (ORAS), PAHO shared recommendations on blood availability, blood collection, national health authority responsibilities, and existing evidence on the use of convalescent plasma.

With WHO, PAHO coordinates to support countries from the Americas to participate in the SOLIDARITY trial, which aims to assess the efficacy of possible therapeutics for COVID-19. It is collaborating with WHO on developing a serioepidemiologic study, SOLIDARITY II, to

Eastern Mediterranean Region (EMR)

study the prevalence of the virus.

A regional working group on Points of Entry has been established in EMRO to coordinate efforts at the regional level and ensure that all travel related aspects raised under COVID are well addressed from a public health perspective. Members of this group are WHO, the International Organization for Migration (IOM), the International Maritime Organization, and the international Civil Aviation Organization, and others. In addition, EMRO has also developed guidance on re-opening points of entry, that HQ will be issuing as global guidance. EMRO has expanded data collection and representation to include attack rates and tests by population distributed daily. Development of an on-line platform for collection, collation and sharing of alert data is ongoing. Maintenance and improvement of the development of the EMR COVID-19 Alerts Dashboard on the EMRO HUB and in Public Domain is also ongoing. EMRO has been providing technical assistance on RDTs and their potential application and has continued the mapping of the regional Whole Genome Sequencing capacities and identifying laboratories. EMRO has finalized clinical management slides for a PHC family medicine training package for COVID-19 and trained hospital staff in Somalia to treat COVID-10 patients. Further trainings have been carried out on the Essential Supplies Forecasting Tool. The logistics hub in Dubai handled the most complex airlift operation to date: two charter flights from WHO's the hub in Dubai landed in Yemen, containing more than US\$ 5 million worth of COVID-19 supplies (PPEs and testing kits), essential medicines and coldchain medicines requiring specific temperatures for safe transporting. Additionally, a charter to Iran containing COVID supplies was delivered on 22 May, and a Libya Charter is in-progress. Supplies from China to the hub in Dubai are expected on 28 & 30 May. On top, during the last two weeks, WHO delivered over 55 tons of medical supplies by road. These were the first deliveries by road to Al-Hasakeh governorate in northeast Syria in the past two years. EMRO convened a webinar on air pollution and COVID-19, attended by 44 participants from 16 EMR countries, WHO country offices, and three international experts.

European Region (EUR)

WHO EURO completed a 2-day, virtual technical mission to Kosovo¹ in collaboration with the Ministry of Health. WHO experts engaged with senior ministry officials and technical staff, providing technical support and next steps across COVID-19 response areas including health workforce coordination, medical supplies, infection prevention and control, essential health services delivery, surveillance and risk communication. WHO EURO convened the Regional WHO EURO-UN-Red Cross coordination platform for its third consultation, to further coordinate the ongoing regional COVID-19 response related to the health and non-health aspects of vulnerabilities and vulnerable groups and engage with agencies involved in social protection systems as part of the COVID-19 response. WHO EURO developed

a <u>technical guidance document</u>, identifying 10 policy objectives for decision-makers, policy-makers and national or regional health authorities as they strive to prevent and manage the COVID-19 pandemic in long-term care settings. It highlights how working in cooperation with those managing health systems can strengthen and secure the availability of long-term care services, but also minimize pressure on health systems during the pandemic. The <u>WHO EURO tool for behavioural insights</u> on COVID-19 provides rapid, flexible and cost-effective monitoring of public knowledge, risk perceptions, behaviours and trust. The tool developed in collaboration with the University of Erfurt, Germany, and the COSMO group, is freely available to all. The WHO EURO Insights Unit and Health Emergencies Programme are offering support to countries in implementation of the tool. The survey was most recently implemented in collaboration with WHO EURO and UNICEF in Azerbaijan, Georgia and Montenegro – ensuring their COVID-19-related responses are both relevant and actionable.

WHO EURO conducted an online training and Q&A for COVID-19 laboratories on virus testing, multi-disease platforms, verification and validation of tests, external quality assurance panels, procurement information and the strategic scaling up of laboratory capacities for laboratories in the Balkans and Moldova. The Adaptt Surge Planning Support Tool is an Excel-based tool intended for policymakers and senior planners. It allows Member States to focus on surge planning information, such as the number of beds required, dates of predicted bed shortages, and the detailed human resources needed. The tool is flexible, enabling users to input epidemiological data, vary mitigation scenarios and tailor the tool to account for attack rates. WHO EURO carried out a capacity building webinar for the tool with Uzbekistan with further discussions on scaling-up and scaling-down COVID-19 reconfigurations for hospitals.

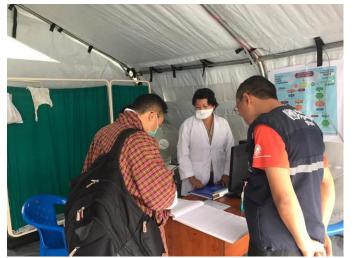
1 All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999)



South-East Asia Region (SEAR)

World Health Organization launched a special edition of the popular Thai comic magazine Kai Hua Ror [Laughter for Sale] designed to show families nationwide how to protect themselves from COVID-19. Using cartoons and humour, the 56-page magazine shows readers how to reduce the risks of infection for themselves and their communities by using basic but effective measures - washing hands frequently and properly, coughing and sneezing safely, avoiding touching your mouth and nose, and staying a safe distance (1-2 m) from others. The cartoons also take on sensitive topics in simple and easy-to-understand terms, such as showing people how to reduce stigma around coronavirus infection and how to be aware of the domestic violence that has increased as a result of the pandemic lockdowns. The project is a public-private partnership among WHO Thailand, Ministry of Social Development and Human Security, Ministry of Public Health, the Parliament of Thailand, Banlue Group and The KnowCOVID project. Knowledge partners of WHO include United Nations Country Team in Thailand, Ministry of Culture and Thai Health Foundation under the Administration of the Prime Minister's Office. Multi-sectoral partnerships such as these will be critical to stopping the COVID-19 outbreak.

WHO has supported Ministry of Health with seven MCKs and further facilitated along with MOH in training relevant sectors in MCK set up. These MCK were supplied to 7 districts based on their need and vulnerability of the districts. During the COVID-19 pandemic as part of intervention, Ministry of Health has established Flu Clinic in all the district. The flu clinics are established little bit away from the health care center with the objective that people with flu like or COVID-19 symptom are checked away from other hospital visitors. In seven districts MCK are being used as Flu Clinic (OPD, pharmacy, laboratory, resting area). MCK supported by WHO has helped Ministry of Health in immediately establishing of FLU clinics in the country.





Western Pacific Region (WPR)

WPRO developed and published an interim technical guidance on <u>community engagement</u> for Member States on effectively supporting the role of communities to prevent and manage the COVID-19 pandemic through empowerment and ownership of response activities such as adherence to non-pharmaceutical public health measures and optimizing the role of community health workers.

A regional IPC network webinar "Strengthening Triage Processes: Viet Nam's Experience" by Prof Le Anh Thu, was conducted in Vietnam with 70 participants attending. IPC healthcare facility assessment tools (triage, isolation areas) have been developed in collaboration with Bach Mai Hospital and WCO Vietnam. WPRO also conducted a webinar on vaccines in the pipeline and lessons learned from the 2009 Influenza A H1N1 pandemic vaccine deployment; shared a review of the previous week's COVID-19 publications; liaised with Australian sports teams regarding piloting the HQ mass gatherings sporting events risk assessment tools. Regional Office Information and Planning conducted a webinar on transmission assessment using multisource surveillance with WCO colleagues and MS counterparts. RO I&P led a working group with WCO colleagues to draft a regional guidance for conducting multisource surveillance of COVID-19 and conducted a situation analysis for six countries (Bangladesh, Brazil, Ecuador, India, Indonesia and Venezuela) outside the Region. More than 450 million people across the Western Pacific Region have been reached with risk communication messages through a partnership with Facebook. WPRO has established a process for analysing intel gathered on community perceptions, knowledge and behaviours gathered through listening activities (such as social media monitoring, media monitoring, surveys and polls) and using it to inform response decision-making. This analysis will be presented every two weeks at the regional IMST and shared with country offices and partners.

The distribution to WHO Western Pacific Region Member States of Personal Protection Equipment (PPE) and fingerpulse oximeters is ongoing. The Pacific distribution plan of Cepheid GeneXpert systems used in COVID-19 testing has been put on hold by the diagnostic consortium. RO is in contact with HQ to take into consideration systems and distribution plan setup by WPRO with partners.

To date, 8 country plans (Cambodia, Marshall Islands, Micronesia, Mongolia, PNG, Philippines, Samoa, Vietnam) and 1 WHO Country Office plan have been uploaded to the COVID-19 Partners Platform (https://covid-19-response.org/). Papua New Guinea's response has been quick and decisive. Days before COVID-19 was declared PHEIC, National EOC was convened, followed by activation of all Provincial EOCs and Inter-Ministerial Committee. After confirmation of first case, State of Emergency was declared prompting whole-of-society response. Over hundred partners had been mobilized and coordinated. To date, there were eight cases with no deaths.

Key links

COVID-19 web page
Case dashboard
Daily situation reports
Surveillance Report

Donors and partners

Response in countries
Regional updates (AFRO, EMRO, EURO, PAHO, SEARO, WPRO)

Rolling updates

Contact Emanuele Bruni Planning / M&E Officer brunie@who.int

