

Coronavirus disease 2019 (COVID-19)

Papua New Guinea Situation Report 13



13 March 2020

Stating this week, the Situation Report on coronavirus disease 2019 (COVID-19) will be issued by the PNG National Emergency Operations Center (NEOC) **ONCE a WEEK**. This Report is not comprehensive and covers information that we have as of reporting date.

HIGHLIGHTS

- ❑ Papua New Guinea has **no case of COVID-19**, to date.
- ❑ On 11 March 2020, COVID-19 has been characterized by the World Health Organization (WHO) as a **pandemic**.
- ❑ **Globally**, there are **122 countries/territories/areas** affected by COVID-19 as of 13 March. It is likely that more countries will be reporting cases.
- ❑ In PNG, a total of **25,262** inbound passengers were screened at the points of entry at the Jacksons International Airport and seaports in Port Moresby by 12 March 2020. The health team has identified **2,927** 'persons of interest' and are being monitored regularly by the surveillance team.
- ❑ Of the 2,927 persons being monitored, **697** have completed the 14-day follow-up period, while **2,230** are still on active monitoring. Majority of those monitored are from Port Moresby.

- ❑ There have been **16 persons investigated** by the rapid response team. Samples were collected from **14 persons: 10 tested negative** for coronavirus while **4** samples are pending result. The other two persons did not meet the case definition; hence samples were not tested.
- ❑ The National Emergency Operations Centre (NEOC) continues to coordinate national preparedness measures while Provincial EOCs have already been activated. NEOC meetings are now scheduled **3x/week (Monday, Wednesday, Friday)** while the situation report is issued **once a week**.

GLOBAL SITUATION IN NUMBERS

The numbers are based on WHO Situation Report as of 13 March 2020.

Globally: 132,758 confirmed cases
4,955 deaths

China: 80,991 confirmed cases
3,180 deaths

Outside China:
51,767 confirmed cases
1,775 deaths

Countries/territories/areas affected: 122

Risk assessment: VERY HIGH (globally)

Papua New Guinea has no case of COVID-19 as of 12 March 2020



NDOH health promotion team talking to the students of Bavaroko Elementary School in Port Moresby about reducing the risk of COVID-19 and the importance of personal hygiene and cough etiquette

COORDINATION and LEADERSHIP

- ❑ On 11 March 2020, the WHO Director General Dr Tedros Adhanom Ghebreyesus has announced that WHO has characterized COVID-19 can **be characterized as a pandemic**. Describing the situation as a pandemic does not change WHO's assessment of the threat posed by this virus, which is **HIGH RISK** globally.
- ❑ The pandemic means that all countries, including Papua New Guinea, must take a whole-of-government, whole-of-society approach, built around a comprehensive, blended strategy to prevent infections, save lives and minimize impact.
- ❑ Papua New Guinea's preparedness is guided by the **Emergency Preparedness and Response Plan for COVID-19**, with key requirement identified across 10 focus areas.
- ❑ The Plan also identifies various scenarios and key actions for every phase. Detailed actions/requirements are outlined in the Plan submitted to National Executive Council (NEC).

Figure 1: Key Focus Areas of the PNG Emergency Preparedness and Response Plan for COVID-19



Figure 2: Color-Coded Scenario of the PNG Emergency Preparedness and Response Plan for COVID-19

Code	Scenario
ALERT	No case of COVID-19 in PNG (Cases are reported outside of Papua New Guinea)
CONTAINMENT	Confirmed case of COVID-19 in PNG (At least one case confirmed in PNG)
MITIGATION	Community spread of COVID-19 (Human-to-human transmission in clusters within the community)
RECOVERY and REVIEW	Epidemic brought under control globally

- ❑ Currently, Papua New Guinea is on **green zone – ALERT PHASE**. But we are preparing for a scenario that if the virus enters the country, containment of COVID-19 is the top priority. The plan outlines measures for “**three Cs**” scenarios – first case, first cluster, first evidence of community transmission and for dealing with sustained community transmission.
- ❑ The NEOC meets **3x/week (Monday, Wednesday, Friday)** while the Inter-Agency Task Force meets once a week (every Tuesday).

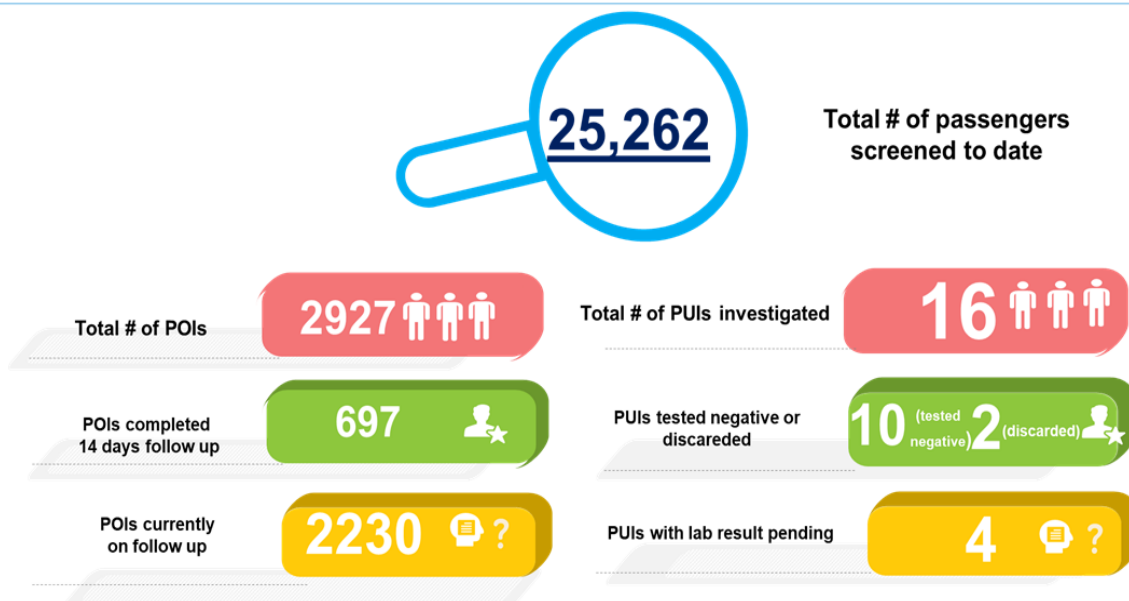
- ❑ To keep track of the overall country readiness, a Provincial Preparedness Checklist was sent out to the provinces for submission to NEOC. As of 13 March 2020, 8 provinces, namely: Central, Gulf, Western, Morobe, East Sepik, West Sepik, Southern Highlands and Manus submitted a completed form. Some of the data reported here were obtained from phone interviews, email correspondence and use of other channels facilitated by the NEOC Regional Coordinators. Follow up on provinces is ongoing to obtain missing information.
- ❑ To date, all 22 provinces of the country have activated their Provincial Emergency Operations Center (EOC) following the same functions of the incident management system (IMS) at the National EOC. Focal points have been identified for key technical areas. Ten provinces (45%) have intersectoral taskforce/committee in place for COVID-19.]
- ❑ Of these EOCs, 17 (77%) have submitted costed Emergency Preparedness and Response Plan (ERP) to the National Department of Health.
- ❑ Chief Executive Officers (CEOs) of Provincial Health Authorities have been briefed on the preparedness and response plan on 12 March at Gateway Hotel in Port Moresby.

SURVEILLANCE, LABORATORY AND POINTS OF ENTRY

- ❑ As of 12 March, the updates from the surveillance, points of entry and laboratory clusters are summarized below

Figure 3: Summary from Surveillance and Points of Entry

Surveillance: Points of Entry Update (airport and seaports as of 12 March 2020)

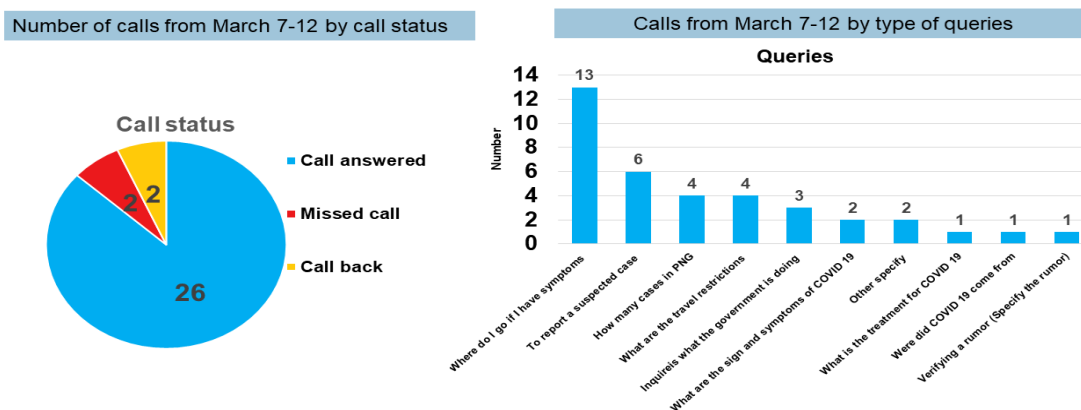


POIs are travelers from China, Singapore, S. Korea, Japan, Thailand, Malaysia, Italy, Iran and Indonesia
PUIs are persons who have developed signs and symptoms of Acute Respiratory Illnesses and under investigation

- ❑ The **declaration denying entry into Papua New Guinea** all persons who have travelled to mainland China (Designated Region) unless they have spent **14 consecutive days in a country outside of the designated region** issued on February 14 by the Minister for Health and HIV/AIDS Hon. Jelta Wong is still in effect.
- ❑ COVID Hotline (+675) 71960813 continues to be operational. From 7-12 March 2020, there were 30 calls received, with majority of the question inquiring where they go in case they have symptoms. The full analysis is in the figure below.

Figure 4: Analysis of Calls to COVID-19 Hotline (7-12 March 2020)

Hotline analysis



- ❑ Based on the preparedness checklist sent to provinces, half of the provinces have trained personnel for surveillance (55%) and laboratory services (50%), and with identified courier for sample transportation (55%). Three provinces have indicated that they have Rapid Response Teams (3 provinces, 14%) and available materials for sample collection, packaging and transportation (5 provinces, 23%).
- ❑ Seven provinces (32%) have gazetted quarantine officers. A referral system is in place for suspected cases at the points of entry in 4 provinces (18%).

CLINICAL MANAGEMENT and INFECTION PREVENTION AND CONTROL

- ❑ An isolation ward of 8 beds is ready at the Port Moresby General Hospital (PMGH). Nurses and doctors involved in the response have received training and have personal protective equipment (PPE) in stock. Other preparations still under way.
- ❑ PPEs for isolation wards across the country will be rolled out. PHAs are advised to contact regional coordinators to speed up the process. All Provincial PHAs are asked to align plans with the National Health Departments COVID-19 Emergency Response Plan.
- ❑ Based on the preparedness checklist sent to provinces, a quarter of the provinces have identified pre-triaging areas (5 provinces, 23%) and isolation facilities (6 provinces, 27%).

- ❑ Six provinces have trained their personnel on infection prevention and control (IPC)(27%) and use of PPE (4 provinces, 18%). Four provinces (18%) have indicated that they have waste management plans, but do not have all the appropriate materials and equipment for waste management. For example, so far, 3 provinces indicated that they have incinerators.
- ❑ **The issue of PPE supplies for the nation remain to be a concern.** The call for assistance from business houses, corporate entities, and our stakeholders to support still exists.

COMMUNICATION AND SOCIAL MOBILIZATION

- ❑ Communications plan is in place at the national level across color-coded scenarios.
- ❑ Information, education and communication (IEC) materials on prevention messages have been developed, with support from WHO, and been made available online through the NDOH Facebook page. Provinces have received the electronic versions of the IEC materials. Some of them have translated them into local language. Radio spots are also aired on NBC Radio..
- ❑ Weekly media conference is held every Thursday. Ad hoc media interviews are responded to by the communications team.
- ❑ A week-long school awareness and hygiene promotion, part of the preparedness plan for COVID-19, was led by NDOH Health Promotion branch, with support from UNICEF. The campaign reached out to around 85,000 students in 82 elementary, primary, secondary, national high and technical schools in Moresby North-East electorate, Moresby South and Moresby North-west.
- ❑ UNICEF trained 23 emergency focal points and key staff in the social welfare sector of the government on critical psychosocial needs in context of infectious disease outbreaks such as COVID-19 with particular focus on children and families.
- ❑ Based on the preparedness checklist sent to provinces, 2 provinces (9%) have indicated that they have communications plan in place, while 9 provinces have available IEC materials (41%). Ten provinces have initiated social mobilization and awareness campaigns on prevention (45%). Three provinces (14%) have trained spokesperson and 6 provinces have a system in place to correct myths and rumors (27%). A number of provinces have also conducted social mobilization activities (in markets, schools and public places).



*Toksav
materials from
East New
Britain*

UPDATES FROM REGIONAL CLUSTERS

- ☐ A Provincial Preparedness Checklist was sent out to the provinces for and submission to NEOC.
- ☐ As of 13 March 2020, 8 provinces, namely: Central, Gulf, Western, Morobe, East Sepik, West Sepik, Southern Highlands and Manus submitted a completed form.
- ☐ Some of the data reported here were obtained from phone interviews, email correspondence and use of other channels facilitated by the NEOC Regional Coordinators. Follow up on provinces is ongoing to obtain missing information.
- ☐ The table summary will be updated on a weekly basis.

Summary of Provincial Preparedness for COVID-19

Focus Areas	Priorities	Status updates (Provinces with functioning priority areas)	
		Number	Percentage (%)
Incident Management and planning	PEOC activated with regular meetings	22	100%
	ERP with costing	17	77%
Surveillance, risk assessment and Rapid Response	Trained Surveillance person in place	12	55%
	RRT teams in place	3	14%
Laboratory (sample collection, packing and transportation)	Trained lab personnel in place	11	50%
	Availability of materials	5	23%
	Identified courier for transportation	12	55%
Clinical management and health care services	Pre-triage	5	23%
	Isolation Ward	6	27%
Infection prevention and control (IPC)	Personnel trained on PPE	4	18%
	Personnel trained on IPC	6	27%
Non-pharmaceutical public health measures	Public health and Social measures in place	2	9%
Risk Communication and community engagement	Availability of IEC Material	9	41%
	Initiated Social mobilization & Awareness campaigns on prevention	10	45%
Points of Entry	Gazetted Officers in place	7	32%
Operational logistics	Availability of PPEs	1	5%
Partner coordination	Inter-sectoral taskforce/Committee for COVID-19 in place	10	45%

- ☐ The preparedness across clusters by region is summarized in the tables below.

Preparedness for COVID-19: MOMASE REGION

COVID-19 Preparedness and Response Priority Areas	Morobe	Madang	West Sepik	East Sepik
Incident Management and planning				
PEOC activated with Command center	✓	✓	✓	✓
Convened regular meetings	✓ (9 meetings over 6 weeks)	✓	✓ X2 weekly	✓ daily meetings
ERP with costing	✓	✓ (6 months)	✓ (6 months)	✓ (Training not covered)
Surveillance, risk assessment and Rapid Response				
Trained Surveillance person	✓ 5	✓	✓ 3	✓ 3
Trained RRT	✓ 5	Pending	No	No
Laboratory				
Trained personnel to conduct sample collection, packing and transportation	✓ 1 (1 IATA)	Pending	✓ 1 (2 IATA)	✓ 1 (1 IATA)
Materials available to conduct proper sample collection, packing and transportation	No	Pending	6 UTM received – needs more	No
Company/courier to transport your samples to the designated laboratory	Yes, WHO TNT	Pending	Yes, WHO TNT	No
Clinical management and health care services				
Pre-triage	Yes	Pending	Yes	No
Isolation Ward	No	Pending	Yes – Sandaun Prov Hospital, # beds 6, HR 22	Yes, MDRTB ward while waiting for construction of new isolation ward. # of beds 4 HR: 20
Infection prevention and control (IPC)				
Training on PPE	✓ available trained personnel	Need training	Planned for mid-March	✓ 1 trained personnel
Training on IPC	Yes	Pending	Yes X 3	Yes x 1
Non-pharmaceutical public health measures				
Public health and Social measures in place	No	Pending	Yes	No
Risk Communication and community engagement				
IEC Material available	✓ (Pidgin also)	✓	✓ (Pidgin also)	No
Social mobilization & Awareness campaigns on prevention	Yes, public awareness	✓	Yes, public awareness	No
Points of Entry				
Sea Port	✓ ongoing	✓ issues with PPE	✓ 1	4 POE but logistics issues
Airport	✓ (Nadzab & Bulolo)	Pending	✓ 2	1 POE but logistics issues
Land crossing border	✓ (Mutzing)	Pending	✓ 8	3 POE but logistics issues
Guaranteed Gazette Officers + issues	4 Funding to source ICT materials + Logistics	Pending	2	Available gazette officers
Operational logistics				
Availability of PPEs	NO	Pending	Inadequate	No
Partner coordination				
Inter-sectoral taskforce/Committee for COVID-19	✓	✓ (PEOC includes all stakeholders)	✓ (Inter-sectoral Coordinating Committee)	✓ (Disaster Committee)

Preparedness for COVID-19: NEW GUINEA ISLANDS

COVID-19 Preparedness and Response Priority Areas	West New Britain	East New Britain	Manus	New Ireland	AROB
Incident Management and planning					
PEOC activated with Command center	✓	✓	✓	✓	✓
Convened regular meetings	✓	✓	✓	✓	✓
ERP with costing	Contingency plan, ERP yet to submit	✓	✓ (Budget excludes CM, RRT, Surveillance, lab & logistics)	No ERP but budget without CM, surveillance, lab, RRT and logistics)	In progress
Surveillance, risk assessment and Rapid Response					
Trained Surveillance person	Pending	Pending	Pending	Pending	Pending
Trained RRT	Pending	Pending	Pending	Pending	Pending
Laboratory					
Trained personnel to conduct sample collection, packing and transportation	Pending	Pending	Pending	Pending	Pending
Materials available to conduct proper sample collection, packing and transportation	Pending	Pending	Pending	Pending	Pending
Company/courier to transport your samples to the designated laboratory	Pending	Pending	Pending	Pending	Pending
Clinical management and health care services					
Pre-triage	Pending	Pending	Pending	Pending	Pending
Isolation Ward	Pending	✓ (Butuwin HC)	✓ (Lombrum Asylum seekers building)	Pending	Pending
Infection prevention and control (IPC)					
Training on PPE	Need training	Need training	Need training	Pending	Pending
Training on IPC	Need training	Need training	Need training	Pending	Pending
Non-pharmaceutical public health measures					
Public health and Social measures in place	Pending	Pending	Pending	Pending	
Risk Communication and community engagement					
IEC Material available	✓	✓	✓	✓	✓
Social mobilization & Awareness campaigns on prevention	Pending	✓	✓	✓	Pending
Points of Entry					
Sea Port	Flagged Logging ships as a concern	✓ (health declaration data yet to be received)	Ships directed to POM	Flagged Logging ships as a concern	Pending
Airport	Not relevant (No International flights)				Pending) esp West Solomon's)
Land crossing border	Not relevant				Pending
Operational logistics					
Availability of PPEs	Pending	Pending	Pending	Pending	Pending
Partner coordination					
Inter-sectoral taskforce/Committee for COVID-19	Pending	Pending	Pending	Pending	Pending

Preparedness for COVID-19: SOUTHERN REGION


COVID-19 Preparedness and Response Priority Areas	Western	Gulf	Central	NCD	Milne Bay	Oro
Incident Management and planning						
PEOC activated with Command center	✓	✓	✓	✓	✓	✓
Convened regular meetings	✓	✓	✓	✓	✓	✓
ERP with costing	✓	✓	✓	✓	✓	Yet to draft
Surveillance, risk assessment and Rapid Response						
Trained Surveillance person	✓	✓	✓	✓	Pending	Pending
Trained RRT	Pending	Pending	Pending	✓	Pending	Pending
Laboratory						
Trained personnel to conduct sample collection, packing and transportation	✓ 3	✓ 4	✓ 4	Pending	Pending	Pending
Materials available to conduct proper sample collection, packing and transportation	✓ need additional masks and packing packs	✓	Pending	Pending	Pending	Pending
Company/courier to transport your samples to the designated laboratory	Air Niugini	Oil Search Foundation	Pending	Pending	Pending	Pending
Clinical management and health care services						
Pre-triage	✓	✓	Pending	Pending	Pending	Pending
Isolation Ward	✓ Isolation Separate room in the TB ward	Pending	Pending	✓ (PMGH)	Pending	Pending
Infection prevention and control (IPC)						
Training on PPE	Need training	Need training	Need training	✓ (PMGH)	Need training	Need training
Training on IPC	✓ Trained officer	Need training	Need training	✓ (PMGH)	Need training	Need training
Non-pharmaceutical public health measures						
Public health and Social measures in place	Pending	Pending	Pending	Pending	Pending	Pending
Risk Communication and community engagement						
IEC Material available	Pending	Pending	✓	Pending	Pending	Pending
Social mobilization & Awareness campaigns on prevention	✓	Pending	Pending	Pending	Pending	Pending
Points of Entry						
Sea Port	Clearance done in POM				Cruise Ship cleared	Pending
Airport	Clearance done in POM				Pending	Pending
Land crossing border	✓	Pending	✓	Pending	Pending	Pending
Operational logistics						
Availability of PPEs	✓ Need additional	Pending	Pending	Pending	Pending	Pending
Partner coordination						
Inter-sectoral taskforce/Committee for COVID-19	✓	✓	Pending	Pending	Pending	Pending

Preparedness for COVID-19: HIGHLANDS REGION

COVID-19 Preparedness and Response Priority Areas	Southern Highlands	Hela	Enga	Western Highlands	Jiwaka	Chimbu	Eastern Highlands
Incident Management and planning							
PEOC activated with Command center	✓	✓	✓	Pending	✓	✓	✓
Convened regular meetings	✓ Ongoing	✓	✓	✓ (Ad hoc)	✓ Ongoing	✓ Ongoing	✓ Ongoing
ERP with costing	✓	✓	✓	✓	✓	✓	✓
Surveillance, risk assessment and Rapid Response							
Trained Surveillance person	✓ 2	✓ 2	✓	✓	Pending	Pending	✓
Trained RRT	Pending	✓	Pending	✓	Pending	Pending	Yet to be mobilized
Laboratory							
Trained personnel to conduct sample collection, packing and transportation	✓	✓	✓	✓	Pending	✓	✓
Materials available to conduct proper sample collection, packing and transportation	No available	Nil	No available	Insufficient	No available	No available	✓
Company/courier to transport your samples to the designated laboratory	✓	✓	✓	✓	✓	✓	✓
Clinical management and health care services							
Pre-triage	Need training	Case Isolation Tents construction -starts 04/03/20	Not indicated	Not indicated	Pending	Pending	Pending
Isolation Ward	Not indicated	Pending	None	Not available	None	Not yet	Identified, need construction work
Infection prevention and control (IPC)							
Training on PPE	Not done	Training of all Provincial Hospital staff - 5/03/2020	None	Pending	Pending	Pending	Pending
Training on IPC	Not done		None	None	None	None	Pending
Non-pharmaceutical public health measures							
Public health and Social measures in place	Discussion going at PEOC	Pending	Pending	Pending	Pending	Pending	Pending
Risk Communication and community engagement							
IEC Material available	None available on COVID-19	✓ (Translation of COVID-19 in Huli language-in progress)	Unavailable	Unavailable	Unavailable	Unavailable	In urgent need
Social mobilization & Awareness campaigns on prevention	Preparation underway	60 VHVs or social mobilizers training on 06/03/20	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing
Points of Entry							
Sea Port	NA	NA	Pending	NA	NA	NA	NA
Airport	NA	General awareness	Pending	NA	NA	NA	NA
Land crossing border	under construction	Pending	NA	NA	NA	NA	NA
Operational logistics							
Availability of PPEs	Pending	Procurement in process	Nil	Nil	Pending	Needed more	Nil
Others	Pending	Allocated two vehicles, TA, and fuel	Nil	Nil	Pending	Pending	Pending
Partner coordination							
Inter-sectoral taskforce/Committee for COVID-19	Under discussion	✓ (Intersectoral Coordination Task force committee)	Available	Pending	Pending	Established	A Committee has been established


ADVISORY TO THE PUBLIC

Currently 4 of 5 people infected with COVID-19 will experience only mild symptoms, like fever and a dry cough.



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DEPARTMENT OF HEALTH


Around 95% of people who have been sick with COVID-19 to date have recovered or are recovering.



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While COVID-19 is often mild, it is spreading very quickly. **We all need to work together now to protect the most vulnerable:**

- Healthcare workers
- People over 60 years of age
- Those with underlying health conditions (e.g. heart or lung disease, diabetes, or immunocompromised)



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COVID-19 spreads primarily from person to person

- Droplets released when someone sick sneezes or coughs can land on the mouths or noses of people nearby
- Close contact with someone sick – like hugging or shaking hands



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COVID-19 mainly spreads from person to person

But it can also be left on objects and surfaces...



So if you touch something contaminated and then touch your face or another's face, you might all fall ill.

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Protect yourself and others from COVID-19:

- Wash your hands frequently with soap and water or alcohol-based hand rub.
- Cover coughs and sneezes with a bent elbow. Wash hands after.
- Avoid touching your eyes, nose & mouth.
- Keep 1m distance away from others.



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Reduce your risk of COVID-19 infection

1. Clean your hands often
2. Cough or sneeze in your bent elbow – not your hands!
3. Avoid touching your eyes, nose and mouth
4. Avoid close contact with someone who is sick
5. Clean and disinfect frequently touched objects and surfaces



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

NDOH Facebook page:

<https://www.facebook.com/PNGNDOH/>

WHO Papua New Guinea Facebook page:

<https://www.facebook.com/WHOPapuaNewGuinea/>

WHO Website:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/>

ANNEX 1: Coordination Mechanisms for COVID-19 Preparedness and Response in Papua New Guinea

Ministerial Committee on COVID-19

(Appointed by the **Prime Minister James Marape**)

- ☐ Minister for Health and HIV/AIDS Hon. Jelta Wong (Chairperson)
- ☐ Minister for Foreign Affairs and International Trade Hon. Patrick Pruaitch
- ☐ Minister for Information and Communication Technology Hon. Timothy Masiu
- ☐ Minister for Civil Aviation Hon. Lekwa Gure
- ☐ Minister for Immigration, Citizenship and Border Security Hon. Westly Nukundj
- ☐ Minister for State-Owned Enterprises Hon. Sasindran Muthuvel
- ☐ Minister for Transport and Infrastructure Hon. William Samb

Intersectoral Coordination Task Force on COVID-19

(Established by National Executive Council Decision 20/2020)

Chairperson: A/Deputy Secretary, National Health Services Standards Dr Sibauk Bieb

Members:

- | | |
|---|--|
| <input type="checkbox"/> Executive Manager, Medical Standards | <input type="checkbox"/> Representatives from: |
| <input type="checkbox"/> Executive Manager, Public Health | - Department of Treasury |
| <input type="checkbox"/> Executive Manager, Strategic Policy | - Department of Finance |
| <input type="checkbox"/> Manager, Disease Control | - Department of Immigration and Citizenship Authority |
| <input type="checkbox"/> Manager, Health Promotion | - Department of Transport and Infrastructure |
| <input type="checkbox"/> First Secretary, Ministry of Health and HIV/AIDS | - National Airports Corporation |
| <input type="checkbox"/> Institute of Medical Research | - Air Niugini |
| <input type="checkbox"/> Representatives of DPs: | - PNG Ports |
| - World Health Organization (WHO) | - National Agriculture and Quarantine Inspection Authority (NAQIA) |
| - United Nations Children's Fund (UNICEF) | - PNG Customs Service, |
| - Australian High Commission | - PNG Tourism Promotion Authority |
| - Ministry of Foreign Affairs and Trade (MFAT), New Zealand | - Information Communication and Technology, |
| - Médecins Sans Frontières (MSF) | - PNG Defence Force (PNGDF) |
| <input type="checkbox"/> Representatives from all private hospitals and clinics | - Royal Papua New Guinea Constabulary (RPNGC) |

ANNEX 2: PNG National Emergency Operations Center (NEOC)
Preparedness and Response for Coronavirus Disease: Cluster Leaders and Contact Details

Function	NDOH Cluster Lead	WHO Technical Counterpart
Incident management	Dr Daoni Esorom (Incident Manager and National Coordinator) Mobile: +675 72313983 Email: daoniesorom@gmail.com	Dr Zhang Zaixing Mobile: +675 74763392 Email: zhangz@who.int
Plan development, strategy and information	Dr Daoni Esorom	Ms Joy Rivaca, Dr Zhang Zaixing, Ms Deki and Mr Eric Salenga Mobile: +675-79728398 (Joy) Email: caminadej@who.int
Surveillance, rapid response and laboratory	Mr Barry Ropa and Ms Janlyn Kumbu Mobile: +675 71291609 Email: bropa2013@gmail.com	Dr Dessie Mekonnen, Ms Nola Ndrewei, Dr Gilbert Hiawalyer and Mr Getinet Adenager Mobile: +675 73372700 (Dessie) 675 79261425 (Nola) or +675 72020714 (Getinet) Email: mekonnend@who.int ; ndrewein@who.int ; getinets.adenager@gmail.com
Points of entry (airport, seaports and land crossing)	Dr Mathias Bauri Mobile: +675 70056293 Email: mathiasbauri@gmail.com	Ms Nola Ndrewei Mobile: +675 79261425 Email: ndrewein@who.int
Clinical management, hospital preparedness and ambulance	Dr Duncan Dobunaba Email: duncan.dobunaba@gmail.com Dr Garry Nou Mobile: +675 73028350 Email: geregana@gmail.com	Dr Anup Gurung Mobile: +675 71009914 Email: gurunga@who.int Dr James Wangi Mobile: +675 72804900 Email: wangij@who.int
Infection prevention and control	Dr Duncan Dobunaba and Dr Peter Pindan Mobile: +675 70491932 Email: ppindan3@gmail.com	Dr Narrantuya Jadambaa Mobile: +675 73046587 Email: jadambaan@who.int
Communications	Mr Jacob Marcos Mobile: +675 72068115 Email: jcbmarcos@gmail.com	Ms Joy Rivaca Mobile: +675-79728398 Email: joyrivaca@yahoo.com ; caminadej@who.int
Operational support, procurement, logistics and supply mgt	Ms Sharon Aisi and Ms Loina Yafai Mobile: 79420880 (Loina) Email: lkyafai@gmail.com	Mr Brian Lewis Email: lewisb@who.int
Finance	Ms Zerah Lauwo Email: zerah.lauwo@hhisp.org	Ms Lucille Nievera Email: nieveral@who.int
Partner Coordination	Dr Daoni Esorom	Mr Richard Higgins (UNRC) Email: richard.higgins@undp.org Dr Zhang Zaixing and Ms Nola Nderewei
Provincial EOC Coordination	Dr Mathias Bauri Mobile: +675 70056293 Email: mathiasbauri@gmail.com	Ms Joy Rivaca, Deki and Eric Salenga Mobile: +675-79728398 Email: joyrivaca@yahoo.com ; caminadej@who.int
Regional Coordinator (Southern Region)	Ms Vicky Wari Mobile: 76950292 / 73775934 (Email: victoriawari@gmail.com)	
Regional Coordinator (Momase Region)	Ms Theresa Palou Mobile: 79261884 / 75622104 (Email: paloujtheresa@gmail.com)	
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