

This Situation Report is jointly issued by PNG National Department of Health and World Health Organization once weekly. This Report is not comprehensive and covers information received as of reporting date.

Situation Summary and Highlights

- ❑ As of 04 October (12:00 pm), there have been 540 COVID-19 cases and seven COVID-19 deaths reported in Papua New Guinea. From the period of 28 September to 04 October, there were 4 new cases reported from the National Capital District and 2 from Western Province. The total number of provinces that have reported COVID-19 cases to date is thirteen. Contact tracing is ongoing for all the cases confirmed.
- ❑ On 02 October, outgoing Health Minister Jelta Wong acknowledged the Inter-Agency National Control Centre (NCC) in responding to the COVID-19 pandemic in Papua New Guinea in a meeting with representatives from different government agencies, donor agencies and the private sector. Sir Dr Puka Temu is the new Minister for Health and HIV as Minister Wong moves to the Ministry of Civil Aviation.
- ❑ Revised Pandemic National Measures were released for implementation starting on 03 October. Most notable changes include: (1) Passenger flights operated by certain PNG-based carriers are now permitted from Australia, Japan, Hong Kong, Singapore and Solomon Islands without expressed permission by the Controller; (2) Expansion of the 7-day abbreviated quarantine for passengers who have spent at least 7 days in Australia (except for Victoria), New Zealand, and the Pacific Island countries; and, (3) elimination of categories of permitted travel purposes for domestic travel.
- ❑ Teams from the NCC provided technical support in various provinces for specific areas of response: (1) laboratory team visited Angau Memorial Hospital in Morobe Province on 28 - 30 September; (2) surveillance and IPC teams visited Daru in Western Province on 29 September - 2 October; and, IPC team visited three urban clinics (6 Mile, 9 Mile and Tokorara) in National Capital District.
- ❑ The nationwide survey to assess people's knowledge, perceptions and behaviours on COVID-19 was completed in eight provinces: Central, East Sepik, West Sepik, Madang, Gulf, Southern Highlands, Jiwaka and Autonomous Region of Bougainville (AROB).
- ❑ NCC hosted two meetings with PNG Business Council, USAID-FHI-360, NDOH and WHO on collaboration to support and monitor COVID-19 resilient business communities as per public health measures (Niupela Pasin).

Table 1. COVID-19 IN PAPUA NEW GUINEA¹

	New Cases (28 September - 04 October 2020)	Cumulative Total
National Capital District	4	322
Western	2	191
Central	0	7
Morobe	0	5
East Sepik	0	3
West New Britain	0	3
East New Britain	0	2
Milne Bay	0	2
AROB	0	1
Eastern Highlands	0	1
New Ireland	0	1
Sandaun	0	1
Southern Highlands	0	1
TOTAL	6	540

¹ As of 2020/10/04, 12:00 pm, PNG time

Table 2. COVID-19 GLOBAL AND REGIONAL UPDATE²

	Confirmed Cases	Deaths
Global	34 724 785	1 030 160
Western Pacific	625 642	13 632

² WHO COVID-19 Dashboard as of 2020/10/04, 10:37 am CEST

Upcoming Events and Priorities

- ❑ **Coordination:** The National Control Centre is scheduled to conduct a planning meeting for the third phase of the implementation of the NCC Operational Blueprint.
- ❑ **Surveillance:** Risk assessment has been proposed and is expected to complete review in preparation for the resumption of international flights. The Surveillance SOP is also pending approval. Piloting of the electronic Health Declaration Form (eHDF) is ongoing, with the preliminary results to be presented to the e-Health Technical Working Group on 05 October.

- ❑ **Laboratory:** Laboratory visits are scheduled for nominated regional laboratories and other facilities in East New Britain, Western Highlands and Western Province. IATA training is planned in Kimbe (East New Britain) on 19-21 October and in Goroka (Eastern Highlands) on 26-28 October. COVID-19 Laboratory Response Plan is under development. To increase the testing capacity in the country, the National Control Centre and the NDoH is studying the introduction of antigen rapid diagnostic tests with guidance from WHO.
- ❑ **Case Management and Infection Prevention and Control:** Critical care and ventilator training will be conducted with support from NDoH, WHO and UNICEF by end of October 2020. Harmonised checklist for health facilities is under development. The approved Home Quarantine and Isolation Guidelines and the Cleaning and Disinfection Guidelines for Non-Healthcare Facilities shall be disseminated. An IPC Handbook for healthcare workers is the final stages of development. The NCC Clinical Management and IPC teams have planned visits to eight provinces in October and November to provide technical support: East Sepik; Southern Highlands; Morobe; Milne Bay; East New Britain; New Ireland; West New Britain; and, Autonomous Region of Bougainville.
- ❑ **Risk Communication & Non-Pharmaceutical Interventions (NPIs):** The Rapid Convenience Survey is ongoing in three provinces: Morobe, Eastern Highlands and NCD under the leadership of the Provincial Control Centers, Provincial Health Authorities and the NCC Risk Communication and Community Engagement Cluster and with technical and operational support from WHO. The next round of the church leaders' sensitization workshops organized by the PNG Council of Churches are scheduled to take place this month (Momas on 7-8 October and Southern on 21 October) with technical support from WHO and UNICEF. A community engagement follow-up at 9 Mile is planned for this week.

National Transmission Assessment

3 – Large-scale community transmission

Due to low testing, there has been a reduction in reported cases in the past 7 days. Between 28 September to 04 October, 6 newly confirmed cases have been reported nationally from two provinces. Thirteen out of 22 provinces have reported a case or more since March 2020. Of the new cases in the past 7 days, 4 (66.7%) have been reported from NCD. Two cases (33.3%) were reported from Western Province. With lack of testing in the community surrounding the mine site from where a large localised cluster of confirmed cases was reported, it is difficult to determine extent of transmission in Western Province. Majority of provinces have reported 1 to 2 sporadic cases, with cases having travel history from Port Moresby or contact with a positive case from Port Moresby which demonstrates the extent of transmission in the National Capital District. With ongoing population movement and low compliance to non-pharmaceutical interventions in NCD, and population movement and gatherings due to recent Independence Day celebrations, increase in cases is expected. With movement to provinces, it is expected to see sporadic cases and local clusters reported by other provinces. Testing in all provinces remains critically low, therefore ongoing transmission in other parts of the country is a possibility as population mobility continues. Importation from bordering Papua Province in Indonesia and incoming travellers from other countries reporting COVID-19 cases also remains a threat. Testing needs to increase substantially to understand the extent of transmission.

Epi Update COVID-19

Tests 648 NAT Tests past 7 days	Cases 6 New cases past 7 days	Deaths 0 Deaths past 7 days	ICU Admissions 0 ICU Admissions past 7 days
25 905 Cumulative NAT Tests	540 Cumulative Cases	7 Cumulative Deaths	8 Cumulative ICU Admissions
0 Imported Cases in past 28 days	* Cases in past 7 days with no link	* Active Clusters	* Active clusters with >3 generations

Health Service Provision COVID-19

4992 Health care workers trained in COVID19 Case Management	* Healthcare worker cases reported past week	1 Hospitals admitting COVID-19 patients	93 ICU beds for COVID-19 patients	339 Non-ICU Hospital beds for COVID19 patients
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* Case investigations are ongoing

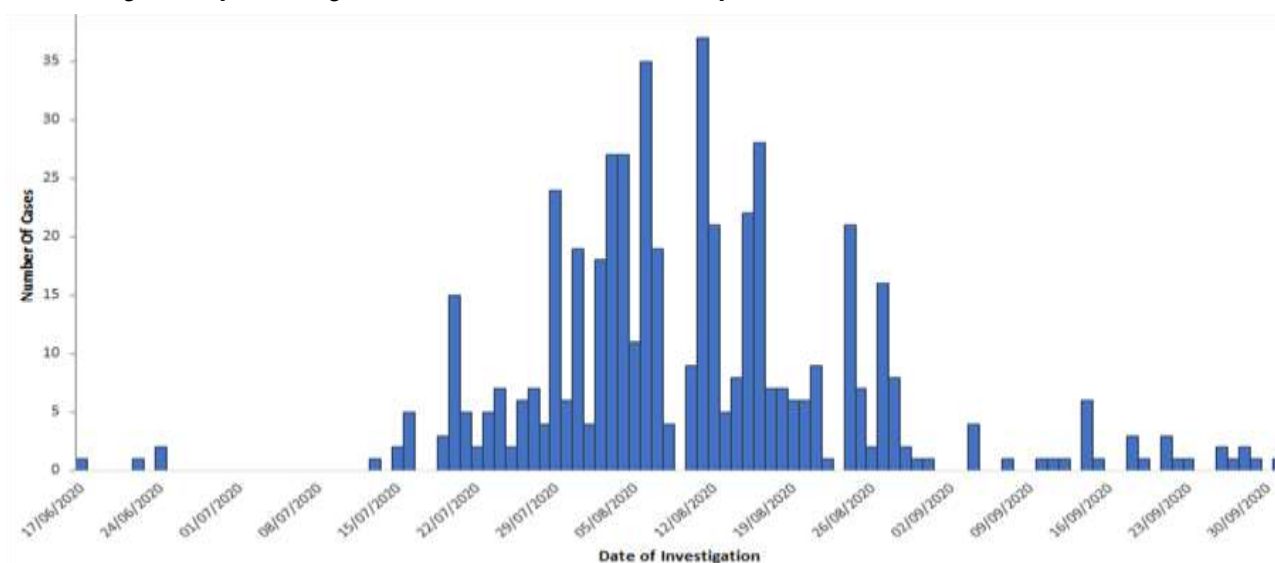
Epidemiology

- As of 04 October (12:00 pm), there have been 540 COVID-19 cases and seven COVID-19 deaths reported in Papua New Guinea. From the period of 28 September to 04 October, there were six new cases reported nationwide: 4 from the National Capital District and 2 from West Province. The total number of provinces that have reported COVID-19 cases to date is thirteen. Contact tracing is ongoing for all the cases confirmed.
- Majority of the confirmed cases are male. Ages range from 1 to 84, with majority of cases aged between 20 and 60 years.
- There are now confirmed COVID-19 cases reported from 13 out of 22 provinces (60%): NCD (322), Autonomous Region of Bougainville (1), Central (7), Eastern Highlands (1), East New Britain (2), East Sepik (3), Milne Bay (2), Morobe (5), New Ireland (1), Sandaun (1), Southern Highlands (1), West New Britain (3) and Western (191).

Figure 1. Distribution of COVID-19 Cases Reported in Papua New Guinea, March to 04 October 2020

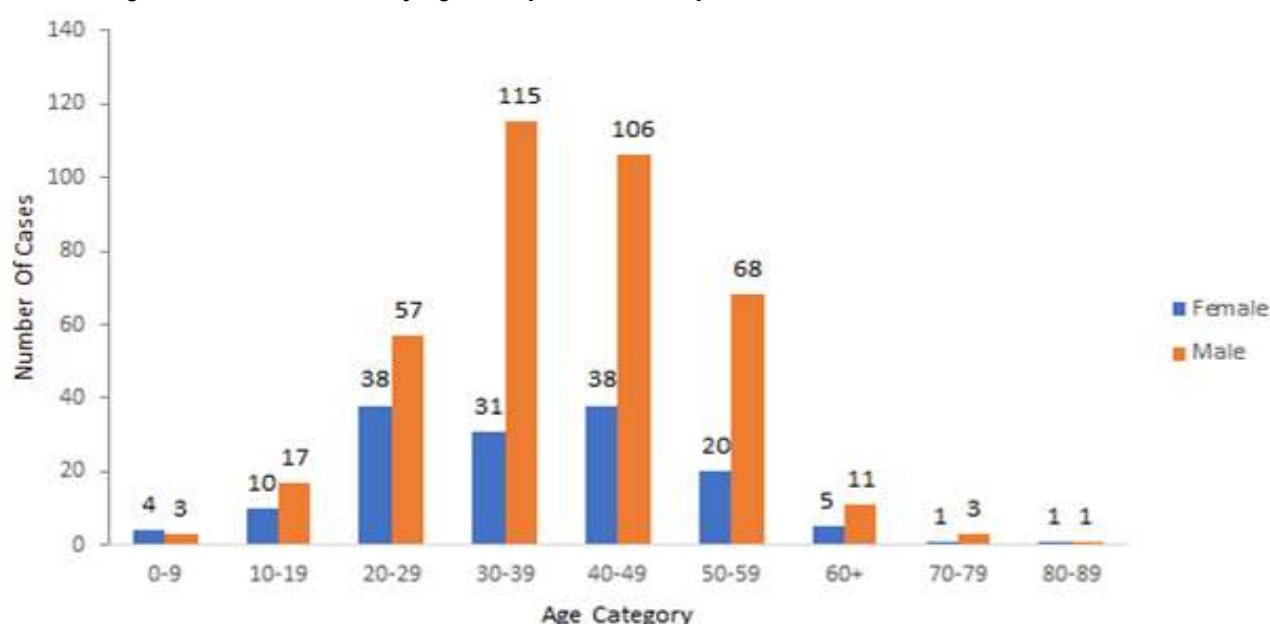


Figure 2. Epidemiological Curve of COVID-19 Cases in Papua New Guinea, March to 04 October 2020



- Nationally, majority of all confirmed cases are male. This could be due to employment status, movement and male-dominated industries affected, health seeking behavior and access to testing.

Figure 3. COVID-19 Cases by Age-Group and Sex in Papua New Guinea, March to 04 October 2020



- Most (56%) confirmed cases report being asymptomatic during presentation for swabbing (Figure 4). Contributing factors to the larger percentage of asymptomatic cases could be due to resilience and health seeking behaviors in Papua New Guinea, lack of reporting of past symptoms, lack of probing question about symptoms during swab collection, testing early during pre-symptomatic stage and mass testing. Of the symptomatic cases (44%), majority presented with cough or fever (Figure 5).

Figure 4. Proportion of Symptomatic and Asymptomatic COVID-19 Cases in Papua New Guinea at Time of Swabbing, March to 04 October 2020 (n=526)

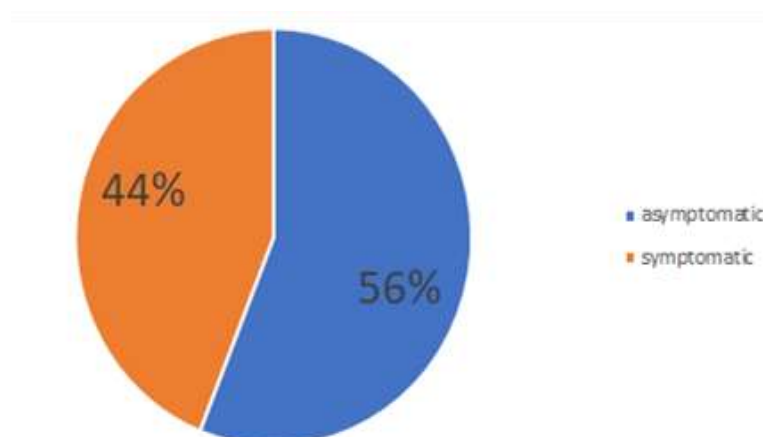
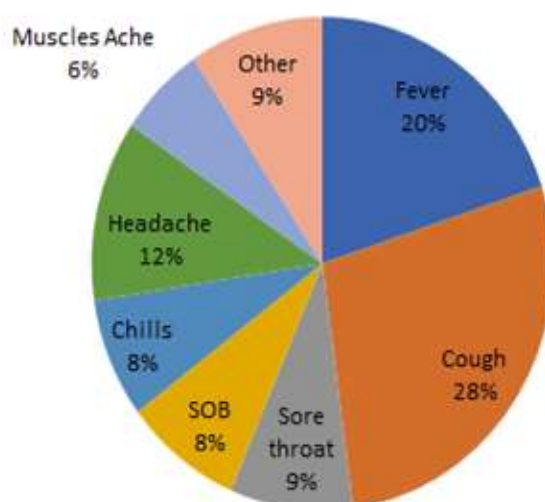


Figure 5. Symptoms on Presentation of COVID -19 Symptomatic Cases in Papua New Guinea, March to 04 October 2020 (n=526)



- As sample collection and testing are low, there is a need to increase testing across all provinces
- As the electronic Health Declaration Form is currently being piloted, the NDOH and WHO provide support for the on-the-job training of personnel involved with POE, data entry and quarantine.
- For the period of 28 September to 04 October, the COVID-19 National Hotline received 2790 calls. From which, 42 (1.5%) were health-related calls. Nineteen of these were referred to Rapid Response Team/PHA. As of 04 October, the Hotline received 122 173 calls. Of these, 4392 (3.6%) were health-related calls. A total of 1308 calls were referred to Rapid Response Team/PHA.
- Papua Province in Indonesia is continuously reporting COVID-19 cases in areas that border Sandaun and Western Provinces in Papua New Guinea. While the border is officially closed, the threat of case importation from Indonesia remains high. As of 01 October, Papua Province has reported a total of 6595 confirmed cases and 106 deaths (data accessible at <https://covid19.papua.go.id/>).

Table 3. Persons Screened by Point of Entry

Total Number of Travelers Screened before SOE (until 22 March)	29 387	
Total Number of Travelers Screened during SOE (23 March – 16 June)	3788	
Total Number of Travelers Screened after SOE (17 June – 03 October) * 3 passengers and the rest are crew	Air	5367
	Sea*	371
	Land	6
	Total	5744

Strategic Approach

National and Provincial Public Health Response

- The Pandemic Response Coordination Group continues to meet daily, while the Health Operations Team meets thrice weekly (M-W-F). A review meeting was conducted to identify the challenges in the COVID-19 response and implementation of the NCC Operational Blueprint (second phase). Findings shall be used in the upcoming planning meeting for the third phase of the Blueprint.
- The appointment of Sir Dr Puka Temu as the new Minister for Health and HIV was announced on 1 October.
- Revised Pandemic National Measures were released for implementation starting on 03 October. Most notable changes include: (1) Passenger flights operated by certain PNG-based carriers are now permitted from Australia, Japan, Hong Kong, Singapore and Solomon Islands without expressed permission by the Controller; (2) Expansion of the 7-day abbreviated quarantine for passengers who have spent at least 7 days in Australia (except for Victoria), New Zealand, and the Pacific Island countries; (3) expansion of the list of ports of entry to include Port Moresby, Rabaul (East New Britain), Morobe and Madang; (4) elimination of categories of permitted travel purposes for domestic travel; (5) permitting provinces to require PCR testing of inbound travellers at their discretion; (5) lifting of the ban on spectators at sporting events; and, (6) removal of restrictions on number of passengers in buses and taxis.

COVID-19 Prevention and Control

- Preliminary survival analysis was carried out with data from the NCD clinical management database with support from WHO. The results are now being discussed with NCC.
- A comparative case for oxygen plant versus liquid oxygen supply was presented to the Senior Executive Management of the National Department of Health.
- A team comprised of members from CPHL and WHO provided technical support to Angau Memorial Hospital Laboratory in Morobe Province on 28-30 September. The team supported the hospital in: (1) assessing the feasibility and its readiness to introduce RT-PCR for COVID-19 testing; (2) conducting a laboratory audit of SARS-CoV-2 diagnostics using the existing GeneXpert system; and, (3) assessing the new laboratory space in the hospital refurbishment project to meet the PCR requirements.
- A team comprised of members from NDoH, AUSMAT and WHO visited Daru General Hospital in Western Province on 27 September to 2 October. The team conducted interviews to understand the challenges in COVID-19 testing and facilitated scenario-based IPC training for frontline clinical staff in Daru General Hospital. The team also supported the Daru General Hospital nurse managers assess their established patient flow from triage and testing through isolation.
- A team comprised of members from NDoH and WHO visited three urban clinics (6 Mile, 9 Mile and Tokorara) to provide technical support in infection prevention and control.
- Technical discussions were already initiated with the National Department of Health regarding COVAX Facility and critical aspects of COVID-19 vaccine introduction readiness. Follow up meetings are scheduled.
- District-level trainings in the provinces are ongoing under the NDOH's COVID-19 Emergency Response Project financed by the World Bank and with technical support provided by UNICEF and WHO.

Table 4. Number of Healthcare Workers and Programme Managers Trained under the NDOH PNG COVID-19 Emergency Response Project Financed by World Bank and with technical support by UNICEF and WHO as of 04 October

	Province	Number of Batches Completed	Number of Individuals Trained		Province	Number of Batches Completed	Number of Individuals Trained
1	Western Highland	3	72	7	Madang	6	85
2	Jiwaka	3	65	8	Eastern Highland	1	32
3	Simbu	3	64	9	Southern Highland	3	43
4	Central	3	54	10	Gulf	1	21
5	Hela	1	18	11	Milne Bay	3	38
6	Morobe	5	124				
TOTAL NUMBER OF BATCHES			32	TOTAL NUMBER OF TRAINED INDIVIDUALS			616

Table 5. Number of Health Care Workers Trained by Province

Province			Total	Province			Total
No.	MOMASE REGION			No.	NEW GUINEA ISLANDS REGION		
1	Madang		431	12	ARoB		37
2	Morobe		549	13	East New Britain		236
3	East Sepik		92	14	Manus		89
4	West Sepik		200	15	New Ireland		320
No.	HIGHLANDS REGION			16	West New Britain		328
5	Eastern Highlands		146	No.	SOUTHERN REGION		
6	Enga		112	17	Central		330
7	Hela		99	18	Gulf		51
8	Jiwaka		138	19	Milne Bay		132
9	Simbu		64	20	NCD		269
10	Southern Highlands		410	21	Oro		34
11	Western Highlands		851	22	Western		74

Table 6. Number of Facilities and Beds for COVID-19 as of 04 October 2020

Health Facilities	Number of Provinces	Number of Facilities OR Beds	Provinces that Reported
Pre-triage facilities	20	>120	ARoB, Central, EH, ENB, ES, Enga, Gulf, Hela, Jiwaka, Madang, Morobe, MB, NCD, NI, Oro, SH, Simbu, WS, Western, WH, WNB
Quarantine facilities	13	223	ARoB, EH, ENB, Enga, Hela, Jiwaka, Madang, Manus, Morobe, NCD, SH, Simbu, WH
Isolation facilities	17	339	ARoB, EH, ENB, Enga, Hela, Jiwaka, Madang, Manus, Morobe, MB, NCD, SH, Simbu, WS, Western, WH, WNB
Intensive Care Unit	16	93	ARoB, EH, ENB, Enga, Gulf, Hela, Madang, Manus, Morobe, MB, NCD, SH, Simbu, WS, Western, WNB
Autonomous Region of Bougainville (ARoB), East Sepik (ES), East New Britain (ENB), Eastern Highlands (EH), Milne Bay (MB), National Capital District (NCD), New Ireland (NI), Southern Highlands (SH), West New Britain (WNB), Western Highlands (WH), West Sepik (WS)			

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

- The Rapid Convenience Survey to assess people's knowledge, risk perception, prevention measures and information sources on COVID-19 is ongoing in many parts of the country. Eight provinces have completed the survey: Central, East Sepik, West Sepik, Madang, Gulf, Southern Highlands, Jiwaka and Autonomous Region of Bougainville. The survey is ongoing in 3 provinces: Morobe, Eastern Highlands and National Capital District. The survey is spearheaded by the NCC Risk Communication and Community Engagement Cluster with technical and operational support from WHO.
- The National Capital District Risk Communication Team was trained on the methodology of the survey and the use of the questionnaire on 01 October. The team will conduct the survey in NCD's three districts.
- Two meetings with the Business Council and USAID-FHI 360 on collaboration were hosted by the NCC to support and monitor COVID-19 resilient business communities as per public health measures (Niupela Pasin).
- The following activities are conducted under the NDOH's COVID-19 Emergency Response Project financed by World Bank and with technical support from UNICEF: (1) multi-media campaign is ongoing with particular messaging related to adherence to quarantine, prevention measures, basic hygiene practices, mask wearing, testing, stigma and community unity; (2) mass media, with a volume of 800 insertions is run through TVWAN, NBC TV, NBC National Radio, EMTV, Radio Light, FM100, Hot97 FM, YUMI FM, Nou FM, Legend FM, the National, Post Courier and Wantok Niuspepa; and, (3) NCD PHA Community Outreach and COVID-19 awareness booths and handwashing facilities continue to operate at Boroko and Gordons marketplaces, Waterfront and Vision City malls as well as the national and domestic terminals of Jacksons International Airport.

Table 7. Monitoring of NPIs Implemented in Papua New Guinea

Social Measures	Monitoring Status					
	Date first implemented	Date last modified	Implementation		Partial lift	Lifted
			Geographical (national or sub-national)	Recommended or Required	Lifted for some area	Lifted for all areas
Hand Hygiene and Respiratory Etiquette	16 January*	3 October	National	Required		
Wearing Face Masks	29 July	3 October	Sub-national**	Required		
School Closure	23 March	17 August	Sub-national	Required		√
Workplace Closure	23 March	3 October	National***	Required		
Mass Gatherings	23 March	3 October	National	Required		
Stay at Home	23 March	3 October	Sub-national****	Required		√
Restrictions on Internal Movement (within country)	23 March	3 October	National	Required		√
Restrictions on International Travel	14 February	3 October	National	Required	√	

* First social media post done; ** In National Capital District; in public transportation (including Central Province) and in aircrafts;

Only selected type of establishments; * Curfew in NCD between 12 to 5 am

- With financial support from USAID, UKAID and the EU, UNICEF has been able to support the COVID-19 response through provision of WASH service improvement as well as risk communication and community engagement including: (1) Improved access to clean water and hygiene for a total of 67 048 primary students in 46 primary and elementary schools in the National Capital District through the construction of 368 taps in 92 group handwashing stations and the distribution of 128 hygiene kits; (2) improved access to clean water and hygiene for an estimated 2 000 patients annually, through rehabilitation of WASH services in two health centres in Goroka; (3) strengthened hygiene promotion through capacity development of 479 student hygiene club members and 44 focal teachers in 44 National Capital District's primary and elementary schools; (4) supported schools to sustain promotion of hygiene practices through engagement of a total of 63 810 students and WASH committees in 44 primary and elementary schools in student-led hygiene promotion activities; (5) enhanced staff knowledge and accelerated efforts to support and sustain school hygiene promotion activities through capacity building for 468 teachers and six female ancillary staff on the importance of hygiene

and cleanliness in schools and how to prevent transmission of COVID-19; and, (6) strengthened standardisation of education systems for improving school WASH across PNG's 22 provinces through supporting the National Department of Education with the drafted national hygiene guidelines for school hygiene/WASH clubs.

Logistics and Supplies

- WHO encourages partners to utilize the COVID-19 Supply Portal accessible at <https://covid-19-response.org/>. The Portal is a purpose-built tool to facilitate requests for critical supplies by national authorities and partners. The requests are assigned to purchasing agencies that can execute the order and process it, utilizing existing ordering systems.
- Updating is ongoing for COVID-19 supply data to support procurement planning and distribution.
- Different partners continue to support the COVID-19 response: (1) Médecins Sans Frontières (MSF) donated 2000 GeneXpert cartridges to NCD PHA; (2) WHO donated android tablets and laptops to NCC in support of the eHDF pilot testing; and, (3) Ventilator accessories supported by UNICEF are expected to arrive in country this month.

Funding and Expenditure

- Below is a summary of COVID-19 funding and expenditure by fund source as of 02 October. The table below pertains only to funds that were held and transacted through the NDOH Health Services Improvement Program (HSIP) Trust Account, thus not comprehensive to cover all COVID-19 support made available to the country and provinces through other modalities (e.g. funding through UN Agencies, etc.). Under the HSIP Trust Account, the total available funds from all sources is PGK 53 074 148.

Table 10. COVID-19 Funding and Expenditure Summary by Fund Source as of 02 October 2020

No.	Funding Source	Initial Amount	YTD Expend	O/S Commitments	Balance Available
1	GoPNG NDoH 2019 HIV/AIDS Reprogrammed Funds	3 299 651	3 123 771	175 880	-
2	GoPNG COVID-19 Funds 2020 from Treasury 2020	43 300 000	36 615 307	6 684 693	-
3	GoPNG COVID-19 Funds 2020 from Treasury (NOC)	2 000 000	1 999 793	-	207
4	GoPNG New COVID-19 Funds 2020 for PHAs	37 000 000	-	16 900 000	20 100 000
5	GoPNG New COVID-19 Funds for NDOH Clusters	28 000 000	88 655	-	27 911 345
6	GoPNG COVID-19 Funds 2020 from Treasury (NOC)	2 000 000	155 289	-	1 844 711
7	DFAT Emergency COVID-19 Funding	24 800 967	18 250 000	4 348 122	2 202 845
8	UNICEF Contribution to COVID-19	368 480	213 328	-	155 152
9	WHO COVID-19 Surveillance Funds (for 22 Provinces)	634 240	634 240	-	-
10	Private Sponsors	1 181 001	1 108 500	-	72 501
11	New Zealand Government	6 298 800	5 990 000	-	308 800
12	UNFPA Support to COVID-19 Emergency Response	549 580	70 994	-	478 587
Total Funds in HSIP		149 432 719	68 249 877	28 108 694	53 074 148

Best Practice/Lessons Learned

Response Enabling Factors and Adjustments to the Response

- Coordination among the pillars/clusters is critical to maximise resources and enhance the synergy among the teams.
- To address human resource shortage in response to COVID-19, some provinces recruit nurses, health promotion and surveillance officers as short-term consultants.
- The COVID-19 response in PNG is updated on the NDOH's website. Weekly national situation report is issued and made accessible at <https://covid19.info.gov.pg/>.

ANNEX A – National Pandemic Measures

Number	Title	Scope of the National Pandemic Measures Issued on 3 September 2020	Modification in the National Pandemic Measures Issued on 2 October 2020
No. 1	Revocation of all previous measures	Revocation of all previous measures prior to 3 September 2020.	Revocation of all previous measures before 2 October 2020.
No. 2	International travel measures	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; 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; approved by the Controller, a person will have seven days quarantine in a designated location in Port Moresby after staying in Queensland, Australia for seven days; persons requiring regular support in daily lives are allowed to be in quarantine with their carer upon arrival overseas together with the suitable arrangement made for accommodation; upon arrival at the designated hotel for quarantine, a person who requires quarantine shall surrender her or his passport to the designated hotel; the hotel is to return the passport upon completion of the quarantine and released by an authorised person; refusal of undertaking the PCR testing will result in extending 14-day quarantine since the date of denial for testing; 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; exemption of 23, 24 & 25 for those who travel with a diplomatic travel document or a diplomatic	Aircrafts departing from Australia, except for the State of Victoria, New Zealand and other Pacific island countries are permitted to enter PNG; passenger flights operated by certain PNG-based carriers are now permitted from Australian, Japan, Hong Kong, Singapore and Solomon Islands without express permission by the Controller; all other flights still require the Controller's permission; expands the 7-day abbreviated quarantine for passengers who have spent at least 7 days in Australia (except for Victoria), New Zealand, and the Pacific Island states; one hotel added to the list of accepted hotels for quarantine.

		passport; and authorized officials to ensure appropriate levels of surveillance and border monitoring systems. Aircraft are allowed to come into point of entry in PNG departing from Cairns and Brisbane Airports and exempted in writing by the Controller. Another hotel in Schedule 3 as designated hotel. It was noted that these measures are compliant with the COVID-19 measures issued by the International Civil Aviation Organization.	
No. 3	Domestic travel measures	No person may travel by aircraft from one province to another province i PNG, unless provided an exemption in writing by the Controller or his delegate. No domestic flight may occur from one province in PNG to another province in PNG unless provided an exemption in writing. The following flights are exempted: cargo flights with no passengers and medivac flights. No roadblocks are to be established except those directed by the Controller; all domestic flights to comply with: hygiene and social distancing restriction, passengers to complete the Air Passenger Travel Form which also is submitted to PHA on arrival, and persons must have valid reason to travel, including: (1) students returning to their usual place of residence or returning to their educational institutions; (2) persons returning to their usual home; (3) essential services; (4) seeking medical assistance and medical evacuation; and (5) emergency transport, including but not limited to the repatriation of deceased persons. Travel by foot, vehicle and vessel between provinces shall not be restricted unless ordered by Controller. A person or organisation that allows a person to board an aircraft in breach of the requirements of all domestic flights shall be deemed to have committed an offence under the National Pandemic Act 2020. All air passengers to complete an Air Passenger Travel Form.	Eliminates the categories of permitted travel purposes; permits provinces to require PCR testing only of in-bound travellers at their discretion.
No. 4	Provincial coordination measures	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.	No modification

No. 5	Burial of deceased persons measures	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 temporary interment; burial or temporary interment directed by Controller will be at the Government's expense; PMGH or PHA to keep a record of persons interred in a designated grave or designated refrigerated shipping containers taken away from morgue they are responsible for.	No modification
No. 6	Customs duties measures	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.	No modification
No. 7	COVID-19 testing measures	Testing equipment to be used for COVID-19 are RT-PCR, GeneXpert and rapid diagnostic test; approved organisations to conduct testing are NDoH, IMR, PHAs, PMGH, St John Ambulance, OkTedi Mining, Simberi Gold, 2K Medical Clinic, Newcrest Mining, K92 Mining, Sky Health and Medical Services and Morobe Consolidated Goldfields Ltd, Pacific International Hospital and ExxonMobil.	No modification
No. 8	COVID-19 surveillance and testing measures	National case definitions of COVID-19 and Severe Acute Respiratory infection (SARI); all hospitalised/ 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; all the health facilities listed in Schedule 2 must set up pre-triage service and ensure IPC measures; all health facilities in Port Moresby to collect samples from COVID-19 suspected cases those who are over 10 years old; the swabbing for testing a minimum of five patients with influenza-like illness symptoms per week; The delegate of the Controller is Deputy Controller, Dr Paison Dakulala; and Schedule 2 for health facilities newly added, including all private urban health facilities, all public health facilities classified as Level 3 and above.	No modification

No. 9	Business and social measures	<p>The curfew is in place between 10 pm and 5 am daily in NCD except for urgent medical care, police assistance, emergencies and persons listed in Schedule 1; closures of venues or part of venues provides nightclubs activities; operation of restaurants and gambling place with hygiene practice; The closure of venues or part of venues that serve alcohol without food; licensed premises that sell takeaway alcohol shall not sell alcohol on Fridays, Saturdays and Sundays; no audience allowed for any clubs or sporting matches; reporting by PNG Sports Foundation is no longer in the measures; immediate closure of Boroko Market; all restaurants to submit information about physical size of restaurant seating areas and seating plans to the PNG Business Council; no professional or club sport teams to participate in matches; no affiliated sporting codes shall train or participate in matches unless with approval from PNG Sports Foundation; responsibilities of PNG Sports Foundation area requirement to submit a weekly report to the 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; closures of nightclubs; hand hygiene and other hygiene measures are to be practiced at venues or part of the venues operates for the sales and consumption of alcohol; mandatory wearing of masks or face covering for all the spectators; lifted restriction for licensed gambling venues; ban on gatherings of over 50 persons; and, no chewing of buai in NCD except in private dwellings. Specific measures described for all markets, including maintaining 1.5 m physical distancing and washing hands or use hand sanitiser when people enter and exit into the place of worship. All schools and educational institutions to comply with physical distancing and hygiene practices.</p>	Lifts the curfews; lifts the ban on spectators at sporting event; and, lifts the closure of Boroko market.
No. 10	Mandatory Mask Wearing in Port Moresby	<p>Mandatory mask-wearing in Port Moresby effective on 29 July 2020. The measures specified wearing masks or face coverings in enclosed space in establishments (business establishments, health facilities, sporting venues, places of worship, community centres, libraries art galleries, museums, zoos and other similar facilities, convention centres arenas, stadiums, and other event spaces, and government facilities) aircraft, public transport (busses, vessels and taxis), and designated markets. Child care facilities schools and banks are exempted from the establishments for the purpose of these measures. Also, there are exemptions for wearing</p>	<p>All persons to wear masks where possible; lifts public markets where masks are required for all who enter and remain within; pilots are exempted to wear masks while operating aircrafts.</p>

		<p>masks for those who are: (1) children under 12; (2) persons with underlying medical conditions which inhibit their ability to wear a mask or face covering, including persons with physical or mental illness or impairment, or disability; (3) persons who are unable to place or remove a mask or face covering without assistance; (4) persons undergoing dental treatment or other medical care to be the extent that the procedure requires that no face covering may be worn; (5) persons within an area of work designated for them and not for public access, and who can work in an environment whereby they work a minimum of 2 metres from any other persons; (6) persons participating in sporting activities; (7) when directed to remove the face covering to ascertain identity; and (8) during emergencies. Furthermore, people are exempted and remove masks and face coverings to eat, drink or take medication. The exemption for pilots wearing masks on aircraft in PNG was removed. It is an offence under the National Pandemic Act 2020 to (1) fail to take reasonable steps to ensure adherence to the measures for a business, organisation or government department or agency; and (2) remove a mask or a face covering on aircraft.</p>	
No.11	Public Transport- Port Moresby	<p>Measures apply to the NCD and Central Province; no operation of public transport; taxis can operate so long as the driver wear mask or face covering and do not operate during curfew hours; private transportation may continue to operate but not limited to hotel and security transportation; these measures came into effect since 29 July 2020; Public transport may operate with the maximum passengers of 15 on 25-35 capacity vehicles and 5 passengers for all other public transport vehicles.</p>	Eliminates restrictions on number of passengers in buses and taxis.
No. 12	COVID-19 vaccination, testing and trials	<p>The Measures clarified: (1) no COVID-19 vaccination or unapproved pharmaceutical intervention to be provided to any persons; (2) no vaccine clinical trials for COVID-19; (3) No person shall enter PNG who has received a vaccine for COVID-19, that has not been approved by the Controller (4) not complying with measures shall be deemed to have committed to an offence under the National Pandemic Act 2020; Removal from PNG at the cost of individual or organisation if no compliance to the measure No.12.</p>	No modification

ANNEX B – Provincial Updates

* Health workforce includes medical doctors, health extension officers, pharmacists, dentists, nurses, community health workers, allied health professionals, medical laboratory staff, health support staff, health administrative staff, management, and unattached.

UPDATED 04 October 2020	Southern Region					
	Western	Gulf	Central	NCD	Milne Bay	Oro
Total Provincial Population	299,351	190,153	317,847	449,469	347,546	236,700
Incident Management and Planning						
PCC functioning	Yes	Yes	Yes	Yes	Yes	Yes
PEOC functioning	Yes	Yes	Yes	Yes	Yes	Yes
Surveillance						
No. of trained rapid response teams	1	0	1	1	4	1
No. of trained contact tracing teams	0	0	1	1	1	1
No. of trained quarantine teams	1	0	1	1	1	1
Laboratory / Waste Management						
No. of available swabs/UTMs	800/166	10	340	700	376	250
No. of functioning GeneXpert machines	3	3	2	3	1	1
No. of available GeneXpert cartridges	13	29	20	0	60	38
No. of GeneXpert – trained staff	3	2	1	CPHL	2	2
No. of functioning biosafety cabinets	0	1	1	1	1	1
No. of functioning incinerators	0	1	0	1	0	0
Clinical Management						
No. established pre-triage sites	8	1	3	18	6	2
No. quarantine beds	0	0	0	Hotels	0	0
No. of quarantine beds per 10,000 population	0	0	0	-	0	0
No. isolation ward beds	24	0	0	76	7	0
No. of isolation beds per 10,000 population	0.80	0	0	1.69	0.20	0
No. inpatient beds at provincial hospital	109	36	19	1096	160	109
Critical Care						
No. ICU beds	4	3	0	4	2	0
No. of ICU beds per 10,000 population	0.13	0.16	0	0.09	0.06	0
No. of functioning oxygen concentrators	0	0	1		0	0
No. functioning ventilators	0	0	0	2	0	0
No. of nurses trained in critical care	2	1	9	135	20	4
No. of anaesthetists	5			7	1	
No. of anaesthetic scientific officer	1	2	5	2	2	2
Workforce						
No. of doctors	9	6	0	244	20	10
No. of nurses and midwives	19	48	13	704	264	80
No. of health extension officers	2	8	35	6	29	9
No. of community health workers	40	88	198	282	493	107
Total clinical workforce COVID-19 trained	71	30	276	94	94	34
Total health workforce *	258	281	316	274	1163	302

UPDATED 04 October 2020	New Guinea Island Region				
	WNB	ENB	Manus	NI	ARoB
Total Provincial Population	348,596	375,875	66,918	218,472	334,162
Incident Management and Planning					
PCC functioning		Yes	Yes	Yes	Yes
PEOC functioning	No	Yes	Yes	Yes	Yes
Surveillance					
No. of trained rapid response teams	2	3	2	4	3
No. of trained contact tracing teams	2	3	2	4	3
No. of trained quarantine teams	2	3	2	4	
Laboratory / Waste Management					
No. of available swabs/UTMs	20	1087	300	328	450
No. of functioning GeneXpert machines	2	2	1	2	2
No. of available GeneXpert cartridges	20	82	48	48	0
No. of GeneXpert – trained staff	5	6	5	4	0
No. of functioning biosafety cabinets	1	0	1	1	0
No. of functioning incinerators	1	1	1	1	0
Clinical Management					
No. established pre-triage sites	3	5	0	1	3
No. quarantine beds	0	32	24	0	28
No. of quarantine beds per 10,000 population	0	0.85	3.59	0	0.84
No. isolation ward beds	4	5	6	0	8
No. of isolation beds per 10,000 population	0.11	0.13	0.90	0	0.24
No. inpatient beds at provincial hospital	271	213	92	106	
Critical Care					
No. ICU beds	1	3	2	0	4
No. of ICU beds per 10,000 population	0.03	0.08	0.30	0	0.12
No. of functioning oxygen concentrators	2	8	0	0	0
No. functioning ventilators	2	2	0	0	0
No. of nurses trained in critical care	6	16	3	8	6
No. of anaesthetists	2	7	1	0	3
No. of anaesthetic scientific officer	0	2	0	2	
Workforce					
No. of doctors	15	19	6	16	10
No. of nurses and midwives	171	254	64	209	94
No. of health extension officers	52	23	13	31	3
No. of community health workers	247	257	81	192	71
Total clinical workforce COVID-19 trained	328	236	89	320	37
Total health workforce *	749	895	292	611	235

UPDATED 04 October 2020	Momase Region			
	Morobe	Madang	WSP	ESP
Total Provincial Population	926,432	719,869	316,533	644,053
Incident Management and Planning				
PCC functioning	Yes	Yes	Yes	Yes
PEOC functioning	Yes	Yes	Yes	Yes
Surveillance				
No. of trained rapid response teams	2	2	1	1
No. of trained contact tracing teams	2	1	1	1
No. of trained quarantine teams	2	1	1	1
Laboratory / Waste Management				
No. of available swabs/UTMs	103	103	450	
No. of functioning GeneXpert machines	5	4	2	2
No. of available GeneXpert cartridges	135	135	11	5
No. of GeneXpert – trained staff		2		2
No. of functioning biosafety cabinets	1	2	1	0
No. of functioning incinerators	1	0	0	0
Clinical Management				
No. established pre-triage sites	6	1	4	8
No. quarantine beds	47	12		
No. of quarantine beds per 10,000 population	0.51	0.17	0.00	0.00
No. isolation ward beds	120	18	4	
No. of isolation beds per 10,000 population	1.30	0.25	0.13	0
No. inpatient beds at provincial hospital	560	281	96	254
Critical Care				
No. ICU beds	19	5	4	
No. of ICU beds per 10,000 population	0.21	0.07	0.13	0.00
No. of functioning oxygen concentrators				
No. functioning ventilators				
No. of nurses trained in critical care	30	3	7	14
No. of anaesthetists	2	3	2	3
No. of anaesthetic scientific officer	4	1		1
Workforce				
No. of doctors	48	22	10	17
No. of nurses and midwives	443	223	119	158
No. of health extension officers	11	28	19	21
No. of community health workers	143	390	332	243
Total clinical workforce COVID-19 trained	425	346	200	92
Total health workforce *	920	905	691	724

UPDATED 04 October 2020	Highlands Region						
	EHP	Simbu	Jiwaka	Hela	WHP	Enga	SHP
Total Provincial Population	717,957	378,381	332,619	304,955	442,638	480,691	651,001
Incident Management and Planning							
PCC functioning	Yes	Yes	No	Yes	Yes	Yes	
PEOC functioning	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Surveillance							
No. of trained rapid response teams	2	7	1	1	1	10	1
No. of trained contact tracing teams	2	8	1	1	1	1	5
No. of trained quarantine teams	1	2	1	1	1	1	5
Laboratory / Waste Management							
No. of available swabs/UTMs	50	550	150	400	350	100	100/100
No. of functioning GeneXpert machines	4	3	1	1	4	3	2
No. of available GeneXpert cartridges	38	83	50	36	97	8	20
No. of GeneXpert – trained staff	1	3	3	3	10	6	40
No. of functioning biosafety cabinets	1	1	1	0	2	1	1
No. of functioning incinerators	0	1	1	1	1	3	1
Clinical Management							
No. established pre-triage sites	1	7	28	2	7	3	3
No. quarantine beds	14	10	20	6	10	10	10
No. of quarantine beds per 10,000 population	0.19	0.26	0	0.20	0.23	0.21	0.15
No. isolation ward beds	5	1	30	6	11	10	4
No. of isolation beds per 10,000 population	0.07	0.03	0.00	0.20	0.25	0.21	0.06
No. inpatient beds at provincial hospital	306	233	129	86	252	86	425
Critical Care							
No. ICU beds	12	8	0	6	0	10	6
No. of ICU beds per 10,000 population	0.17	0.21	0	0.20	0	0.21	0.09
No. of functioning oxygen concentrators	4	6	5	1	7	3	
No. functioning ventilators	2	3	0	0	1	0	
No. of nurses trained in critical care	60	6	1	1	30	8	9
No. of anaesthetists	9	0	0	0	0	0	5
No. of anaesthetic scientific officer	3	4	3	2	5	3	
Workforce							
No. of doctors	28	30	1	9	35	34	18
No. of nurses and midwives	222	305	146	86	217	163	151
No. of health extension officers	15	15	8	13	13	34	10
No. of community health workers	371	197	102	80	293	226	189
Total clinical workforce COVID-19 trained	114	431	73	81	112	169	367
Total health workforce *	899	495		214	852	761	857

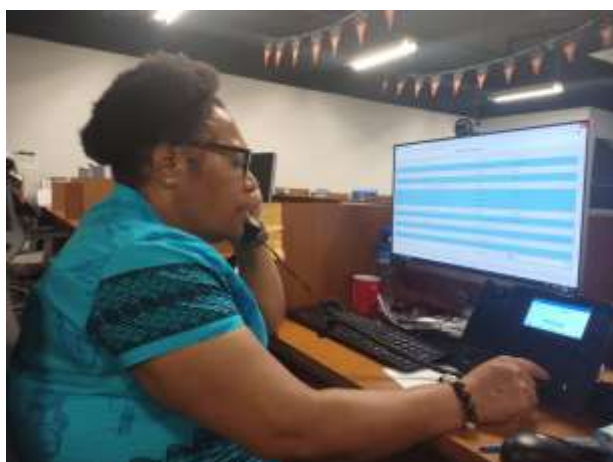
Updated in the past 7 days

incomplete/pending / not reported

ANNEX C – Photos



Photo 1. Health operations meetings held every Monday, Wednesday and Friday at the National Control Centre



Photos 2-5. On-the-job training on the electronic Health Declaration Form for point of entry, data entry and quarantine teams



Photo 6. PPE training at Sandaun Provincial Hospital (Photo credit: Australian High Commission)



Photos 7-8. Discussions on referral pathways, isolation capacity and facility needs with Vanimo Green District Health Manager & hospital staff during a visit to Bewani District Hospital (Photo credit: Australian High Commission)



Photos 9-10. NDOH and AUSMAT supported the Daru General Hospital nurse managers to assess their established patient flow (Photo credit: Australian High Commission)



Photos 11-12. AUSMAT conducted PPE training at Bewani Health Clinic and handed over PPEs to Bewani Health Clinic in West Sepik Province (Photo credit: Australian High Commission)



Photo 13. Scenario-based IPC training for frontline clinical staff at Daru General Hospital facilitated by NDOH



Photos 14-15. Assessment of the laboratory space in Angau Memorial Hospital for PCR diagnostics by CPHL and WHO



Photo 16. Regular radio talk back show guesting of Incident Manager Dr Daoni Esorom for risk communication on COVID-19



Photos 17-18. Training of NCD Team on Rapid Convenience Survey



Photos 19-22. Conduct of Convenience Survey in various provinces: Madang, Eastern Highlands, Southern Highlands, Jiwaka, AROB and West Sepik (clockwise from upper left)

ANNEX D – Risk Communication Materials

CONTACT TRACING





means finding everyone who came in close contact with a person who tested positive for COVID-19.



It is an effective public health intervention to reduce infections in the population and stop the spread of COVID-19.

HOW IT WORKS

Identify and list close contacts	Based on criteria, inform and quarantine close contacts	Monitor contact for symptoms while in quarantine	Complete quarantine
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Step 1: IDENTIFY and LIST close contacts

Close contacts are identified (based on criteria):



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Step 2: INFORM and PROFILE close contacts, and DETERMINE nature of exposure

The identified close contacts are informed about the process and rationale.

A person's activities are reviewed 2 days before the onset of symptoms up until they are admitted to an isolation facility.

<p>WHERE They will be quarantined</p> <p>WHAT symptoms to look-out for</p> <p>HOW they can be cared for</p> <p>WHAT to do</p>	<p>WHERE HAVE YOU BEEN? settings and places visited</p> <p>WHAT HAVE YOU BEEN DOING? activities or social gatherings attended</p>
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Step 3: MONITOR close contacts

<h4>CLOSE CONTACTS WITHOUT SYMPTOMS</h4> <p>They are quarantined and monitored for up to 14 days for symptoms from the last date of contact with a COVID-19 case.</p> 	<h4>CLOSE CONTACTS WITH SYMPTOMS</h4> <p>If a contact becomes symptomatic, an authorized healthcare worker will assess them and take a swab for COVID-19 testing. This is done so that the contact can get medical treatment as soon as possible if they return a positive result. Contacts are required to complete their quarantine period if they return a negative result.</p> 
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ADVICE

As soon as you develop fever, cough, sore throat or shortness of breath, call 1-800-2000

MAKE ANNOUNCEMENTS

If there have been positive cases in your community, or if you have attended a gathering where there has been a positive case, and you start to develop fever, cough, sore throat or shortness of breath, contact your Provincial Health Authority or call the COVID-19 Hotline 1-800-2000



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