

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 25 October (12:00 pm), there have been 588 COVID-19 cases and seven COVID-19 deaths reported in Papua New Guinea. From the period of 19 to 25 October, there have been 7 new cases: 5 from the National Capital District (including one international arrival in hotel quarantine), 1 from Western Province, and 1 from West New Britain. The total number of provinces that have reported COVID-19 cases to date is fourteen.
- ❑ The handover-takeover ceremony for the new Permanent Secretary for Health, Dr Osborne Liko, was held on 22 October at the National Department of Health.
- ❑ The National Control Centre (NCC) held a planning meeting for the NCC Operational Blueprint on 22 October.
- ❑ Surveillance, contact tracing, RRT and sample collection SOPs were approved for circulation.
- ❑ Trainings and provincial visits were held: (1) IATA training in Kimbe (West New Britain Province) on 19-21 October; and, (2) visit to Goroka in Eastern Highlands by NCC team comprised of members from Clinical Management and Laboratory clusters.
- ❑ Additional two provinces have completed the Rapid Convenience Survey: West New Britain and Simbu.
- ❑ Basic supply and warehouse management tools were developed with support from WHO to improve the COVID-19 supply flow, and daily management of supplies received from various stakeholders. Session to introduce the tools for implementation and use was conducted for the NCC logistics cells at Murray Barack Warehouse.

Table 1. COVID-19 IN PAPUA NEW GUINEA¹

	New Cases (19-25 October 2020)	Cumulative Total
National Capital District	5	342
Western	1	203
Eastern Highlands	0	12
Central	0	7
West New Britain	1	6
Morobe	0	5
East Sepik	0	3
Enga	0	2
East New Britain	0	2
Milne Bay	0	2
AROB	0	1
New Ireland	0	1
Sandaun	0	1
Southern Highlands	0	1
TOTAL	7	588

¹ As of 2020/10/25, 12:00 pm, PNG time

Table 2. COVID-19 GLOBAL AND REGIONAL UPDATE²

	Confirmed Cases	Deaths
Global	42 512 186	1 147 301
Western Pacific	707 355	15 167

² WHO COVID-19 Dashboard as of 2020/10/25, 2:09 pm CEST

Upcoming Events and Priorities

- ❑ **Surveillance:** Ongoing sub-national transmission stage assessments are being undertaken to provide greater discernment about transmission at the provincial level. A risk assessment algorithm has been developed for evaluating risk of importation from other countries in preparation for the resumption of international flights with consideration of type of measure to be in place for risk level. Surveillance, contact tracing, RRT and sample collection SOPs have been circulated. Updated surveillance and contact tracing training materials are being finalised in preparation for provincial and district training sessions. The revised Community Testing Strategy is being finalised. Further development and improvement of the electronic Health Declaration Form (eHDF) is being undertaken following a review of eHDF uptake and use to date. The Quarantine Monitoring Database is also being optimised for use. Plans for a full roll-out, with the possibility of translating the eHDF into other languages, are underway.
- ❑ **Laboratory:** IATA training is planned for Goroka (Eastern Highlands) on 26-28 October. An implementation plan for the use of antigen RDTs is under development. The NDOH Health Facilities Standards Branch is in the process of planning training for the use of biosafety cabinets with support from WHO.
- ❑ **Case Management and Infection Prevention and Control:** Field visits will be continued to encourage screening and swabbing at the clinics. Preparations for the critical care and ventilator training scheduled in November are underway.

with support from NDoH, WHO and UNICEF. Clearance will be obtained for the publication of the IPC Handbook for Healthcare Workers. The situational analysis and needs assessment on oxygen supply will continue.

- ❑ **Risk Communication & Non-Pharmaceutical Interventions (NPIs):** Four more provinces are scheduled to complete the Rapid Convenience Survey under the leadership of the Provincial Control Centres, Provincial Health Authorities and the NCC Risk Communication and Community Engagement Cluster with technical and operational support from WHO. Preliminary results are scheduled to be presented in the mid-November.
- ❑ **Logistics and Supplies:** A rapid assessment of the supply chain in the National Capital District is scheduled. The Logistics Cell will continue the discussion with the NDOH Medical Supplies Procurement and Distribution Branch on how the 'Basic Supply and Warehouse Management tools' can be integrated into the current management and rollout of mSupply. Following the presentation on the proposed logistics dashboard on 26 October, the NCC will send a formal request to partners to share their supplies information on a weekly basis. The tools and the dashboard will assist in having a smooth transition to mSupply with a transparent supply order mechanism for health facilities and clear status of COVID-19 supplies. An operational plan defining required support and timeline is being put together to advocate support from stakeholders including the PNG Business Council.
- ❑ **Training:** With the completion of the updating of training modules by all clusters, a training of trainers (TOT) is planned for surveillance, clinical management, IPC, risk communication and community engagement on 28 October. Following the TOT, the district-level training will commence.

National Transmission Assessment

3 – Large-scale community transmission

Due to low testing, there have been only a few reported cases in the past 7 days. Between 19 and 25 October, 7 newly confirmed cases have been reported nationally from three provinces. Fourteen out of 22 provinces have reported one or more cases since March 2020. Of the new cases in the past 7 days, 5 (71.4%) were from NCD, including one international arrival in hotel quarantine, 1 (14.3%) from Western Province and 1 (14.3%) from West New Britain. Majority of provinces are in stage 1, having 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. NCD and Western Province remain in stage 3 – large scale community transmission, and Enga Province in stage 2 – localised community transmission. With ongoing population movement, increasing mass gatherings, and low compliance to non-pharmaceutical interventions in NCD, increasing cases are expected. With movement from NCD out to the provinces, sporadic cases and local clusters reported by other provinces are expected. 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	Cases	Deaths	ICU Admissions
786	7	0	1
NAT Tests past 7 days	New cases past 7 days	Deaths past 7 days	ICU Admissions past 7 days
29107	588	7	9
Cumulative NAT Tests	Cumulative Cases	Cumulative Deaths	Cumulative ICU Admissions
1	5	1	*
Imported Cases in past 28 days	Cases in past 7 days with no link	Active Clusters in the past 7 days	Active clusters with >3 generations

Health Service Provision COVID-19

5116
Health care workers
trained in COVID19
Case Management

0
Healthcare worker cases
reported past week

1
Hospitals admitting
COVID-19 patients

93
ICU beds for
COVID-19 patients

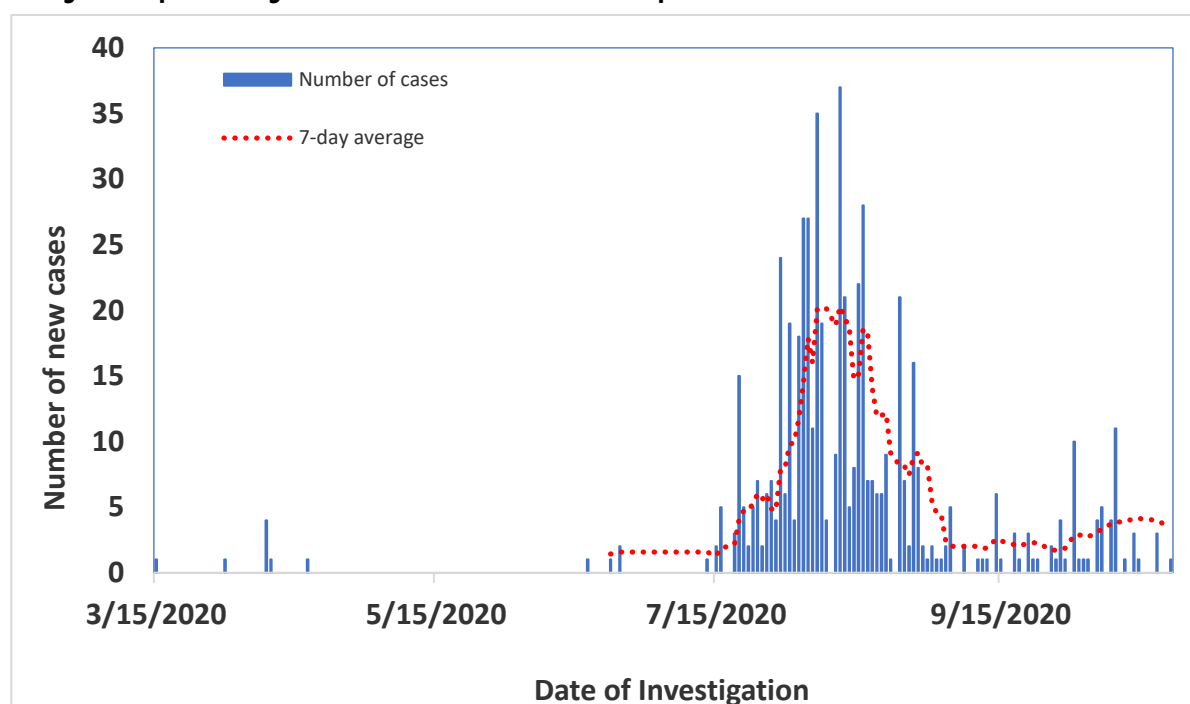
339
Non-ICU Hospital
beds for COVID19
patients

* Case investigations are ongoing

Epidemiology

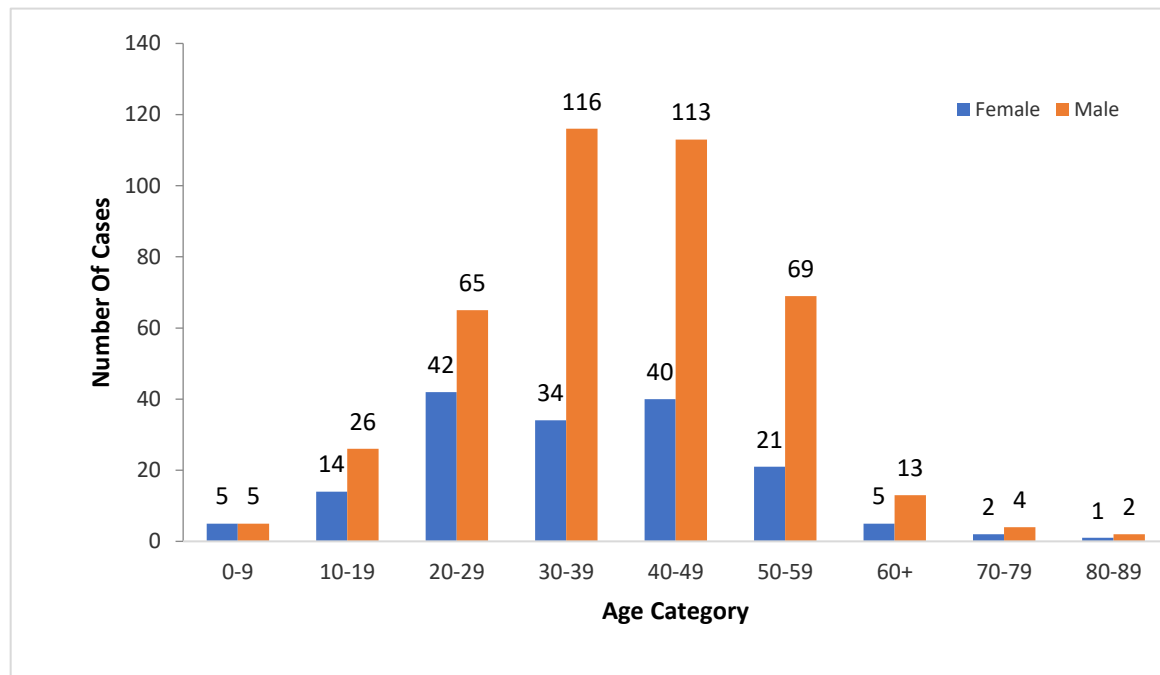
- As of 25 October (12:00 pm), there have been 588 COVID-19 cases and seven COVID-19 deaths reported in Papua New Guinea. From the period of 19 to 25 October, there have been 7 new cases: 5 from the National Capital District, 1 from Western, and 1 from West New Britain. The total number of provinces that have reported COVID-19 cases to date is fourteen. One case in NCD was international arrival in hotel quarantine. Contact tracing is ongoing for all the confirmed cases.
- There are now confirmed COVID-19 cases reported from 14 out of 22 provinces (63.6%): Autonomous Region of Bougainville (1), Central (7), Eastern Highlands (12), East New Britain (2), East Sepik (3), Enga (2), Milne Bay (2), Morobe (5), NCD (342), (3), New Ireland (1), Sandaun (1), Southern Highlands (1), West New Britain (6) and Western (203).

Figure 1. Epidemiological Curve of COVID-19 Cases in Papua New Guinea, 15 March to 25 October 2020



- Majority of the confirmed cases are male. Ages range from 1 to 84, with majority of cases aged between 20 and 60 years.
- 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 2. COVID-19 Cases by Age-Group and Sex in Papua New Guinea, 15 March to 25 October 2020



- Most (58%) 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 behaviours 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, the most common symptoms were cough (26%) or fever (19%) (Figure 5).

Figure 3. Proportion of Symptomatic and Asymptomatic COVID-19 Cases in Papua New Guinea at Time of Swabbing, March to 25 October 2020

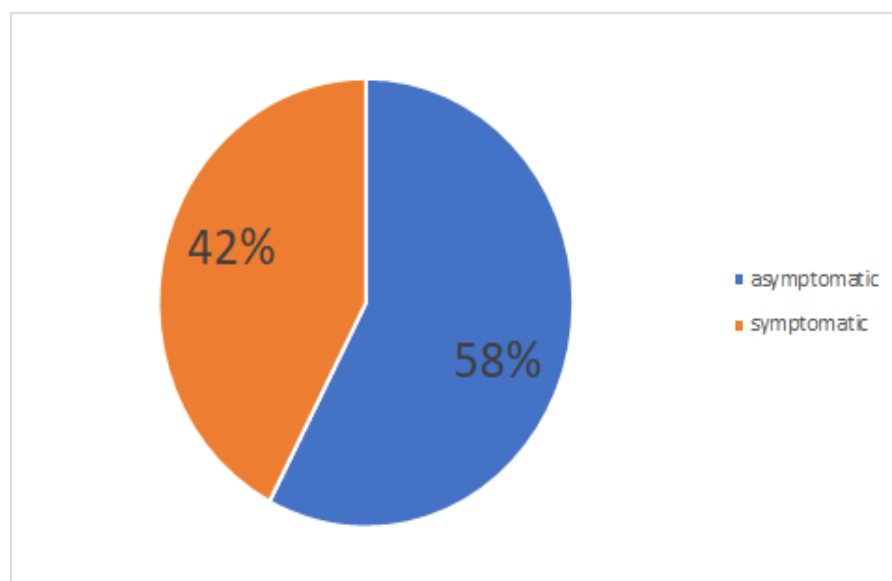
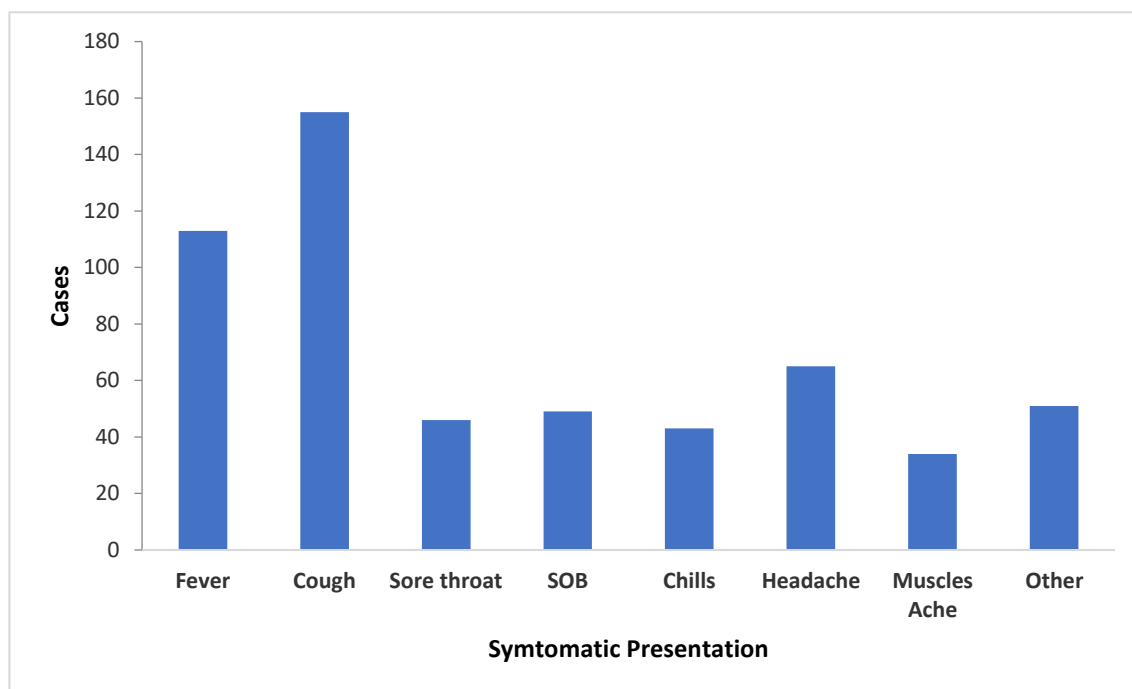


Figure 4. Symptoms on Presentation of COVID -19 Symptomatic Cases in Papua New Guinea, 15 March to 25 October 2020



- As sample collection and testing are low, there is a need to increase testing across all provinces
- For the period of 19 to 25 October, the COVID-19 National Hotline received 2048 calls. From which, 41 (2.0%) were health-related calls. Thirty of these were referred to Rapid Response Team/PHA. As of 24 October, the Hotline received 129 628 calls. Of these, 4519 (3.5%) were health-related calls. A total of 1411 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 23 October, Papua Province has reported a total of 9071 confirmed cases and 143 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 – 24 October) * 3 passengers and the rest are crew	Air	7074
	Sea*	671
	Land	6
	Total	7751

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). The NCC Operational Blueprint is on its third implementation cycle which covers the period between 5 October and 15 November 2020. Another planning meeting is scheduled on 29 October.

COVID-19 Prevention and Control

- Joint teams from the National Control Centre visited Eastern Highlands Province. The Laboratory Cluster discuss ongoing support with PNG Institute for Medical Research for the COVID-19 response and assessed the feasibility of developing rRT-PCR capacity at the Eastern Highlands Provincial Hospital. On the other hand, the Clinical Management Cluster has piloted the Health Facility Checklist and conducted needs assessment on oxygen supplies.
- A team from the Central Public Health Laboratory travelled to Aitape to install GeneXpert machine at Raihu District Hospital Lab in West Sepik. The team also loaded SARS-CoV-2 test cartridge into the GeneXpert machine in Malala Health Centre, Bogia District in Madang.
- Training modules of various pillars had been updated to support the continuation of the district-level training under the NDOH's COVID-19 Emergency Response Project financed by the World Bank and with technical support by UNICEF and WHO. To date, trainings have been completed in eight provinces: Central, Gulf, Jiwaka, Madang, Oro, Simbu, Southern Highlands and Western Highlands provinces. Trainings are yet to be completed for six more including Eastern Highlands, Hela, Milne Bay, Morobe and Western Provinces.

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 25 October 2020

	Province	Number of Batches Completed	Number of Individuals Trained		Province	Number of Batches Completed	Number of Individuals Trained
1	Western Highland	3	72	8	Eastern Highland	1	32
2	Jiwaka	3	65	9	Southern Highland	3	43
3	Simbu	3	64	10	Gulf	2	21
4	Central	3	54	11	Milne Bay	2	38
5	Hela	1	18	12	Oro	2	44
6	Morobe	8	124	13	Western	2	80
7	Madang	2	85				
TOTAL NUMBER OF BATCHES			35	TOTAL NUMBER OF TRAINED INDIVIDUALS			740

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		78
11	Western Highlands		851	22	Western		154

*Trained under WHO trainings and NDOH PNG COVID-19 Emergency Response Project

Table 6. Number of Facilities and Beds for COVID-19 as of 25 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 has now been completed in eighteen provinces: West New Britain, Simbu, Central, East Sepik, West Sepik, Madang, Gulf, Southern Highlands, Jiwaka, Autonomous Region of Bougainville, NCD, Morobe, Eastern Highlands, Manus, Oro, East New Britain, Milne Bay and Hela. The survey is spearheaded by the NCC Risk Communication and Community Engagement Cluster with technical and operational support from WHO.
- 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) a total of 8 television commercial spots weekly from two television stations: EMTV in all provinces reaching 4.4 million viewers and TVWan in certain provinces and rural areas reaching up to 1.2 million viewers; (2) a total of 350 radio spots weekly from four radio stations (FM100, Hot FM, Yumi FM and Wantok Radio) broadcasted across the country; and, (3) a total of six COVID-19 advertisements weekly featured on two daily newspapers (National Newspaper and Post Courier) and on the only Tok Pisin weekly newspaper (Wantok Niuspepa).

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 aircraft;

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

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.
- The Logistics Cell finalised the 'Basic Supply and Warehouse Management tools' with support from WHO to improve the COVID-19 supply flow and daily management of supplies received from various stakeholders. An introduction of the tools was conducted for the NCC Logistics Cell at Murray Barracks Warehouse to discuss the implementation of the tools.

Funding and Expenditure

- Below is a summary of COVID-19 funding and expenditure by fund source as of 23 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 43 019 093.

Table 8. COVID-19 Funding and Expenditure Summary by Fund Source as of 23 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	3 169 067	130 584	-
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	2 000 000	22 300 000	12 700 000
5	GoPNG New COVID-19 Funds for NDOH Clusters	28 000 000	2 515 177	-	25 484 823
6	GoPNG COVID-19 Funds 2020 from Treasury (NCC)	2 000 000	155 289	-	1 844 711
7	DFAT Emergency COVID-19 Funding	24 800 967	19 250 000	3 348 122	2 202 845
8	UNICEF Contribution to COVID-19	368 480	367 971	-	509
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	144 883	-	404 697
13	Incentive Funds for Risk Communication Support in WNB	156 171	156 171	-	-
Total Funds in HSIP		149 588 889	74 106 397	32 463 399	43 019 093

Table 9. COVID-19 Government and Development Partners Funding and Expenditure Summary as of 23 October 2020

No.	Funding Source	Amount Received	Total Expenditure	Committed Funds	Funds Available
1	Government of Papua New Guinea	115 599 651	46 454 632	29 115 277	40 029 742
2	Development Partners	33 989 238	27 651 765	3 348 122	2 989 352
TOTAL		149 588 889	74 106 397	32 463 399	43 019 094

ANNEX A – Quality Requirements for COVID-19 Medical Products

(Source: NDOH Circular No. 38/2020 Attachment)

Quality Requirements for COVID 19 Medical Products

Registered pharmaceutical importers, wholesalers and exporters are required to submit the following quality documentation in advance of importation. These technical documents must be current and in coloured copies of the original documents. The technical documents also must be stamped and signed appropriately and must be legible and written in English.

Medicines:

1. Letter of authorisation from the manufacturer in the country of origin where the product will be sourced.
2. Certificate of Good Manufacturing Practice of the manufacturer.
3. Certificate of Pharmaceutical Product or evidence of registration by the mutual drug regulatory authority from the country of origin.
4. Certificate of Analysis of the Batch of the Product to be imported
5. Specimens of Product Labels or a clear coloured photograph of the Product to be imported.
6. The total quantity of the Product to be imported.

Medical Devices:

1. Letter of authorisation from the manufacturer of the medical device in the country of origin.
2. Quality Management System Certification: ISO: 13485: 2016 from the manufacturer of the Medical Device in the country of origin and Product Schedule.
3. Specimens of Product Labels or Product Brochure/Catalogue including Medical Device Specifications.
4. The total quantity of the medical device to be imported.

ANNEX B – Photos



Photos 1-2. Health Operations meeting held every Mondays, Wednesdays and Fridays.



Photos 3-6. The Laboratory Cluster visited Tabubil Hospital Laboratory between 15-17 October to conduct laboratory audit of PCR diagnostics using GeneSig™ system and run quality control panel.



Photos 7-8. CPHL and WHO visited Rumginae District Hospital to discuss how to strengthen coordination and documentation for laboratory supplies and communicating testing results between CPHL and Kiunga Hospital Laboratory.



Photos 9-11. Goroka Hospital and PNGIMR visits by the Laboratory and Clinical Management Clusters for conduct of laboratory assessment and needs assessment of oxygen supplies, and piloting of the health facility checklist.



Photos 12-13. Conduct of Rapid Convenience Survey in West New Britain



Photos 14-15. Conduct of Rapid Convenience Survey in Daru, Western Province



Photos 16-17. Conduct of Rapid Convenience Survey in Milne Bay



Photos 18-20. Session to introduce supply chain management tools to the NCC Logistics Cell at Murray Baracks Warehouse



Photos 21-22. Conduct of COVID-19 training in Boac Health Centre in Nawaeb District



Photo 23. Joint WSPHA and CPHL Team departed Aitape for GeneXpert machine installation at Raihu District Hospital Laboratory.

ANNEX C – Risk Communication Materials



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