

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

- ❑ Five new cases were detected in Port Moresby, with two cases confirmed on 15 July and three cases on 16 July. All are stable and admitted at the Rita Flynn Isolation Facility. Care and treatment is ongoing.
- ❑ Four of the new cases work at the Central Public Health Laboratory (CPHL), and the most recent one at Port Moresby General Hospital. This brings the total number of cases in PNG to sixteen.
- ❑ Upon confirmation of Case #12, CPHL conducted testing on all staff. All the CPHL staff with negative results are now under quarantine and health monitoring.
- ❑ The Rapid Response Team of the National Capital District (NCD) started contact tracing and collected 37 samples from immediate contacts of the five cases as of 16 July. All the immediate contacts are also in quarantine. Further case investigation and contact tracing (home, work and places visited by the confirmed cases) are ongoing.
- ❑ Papua Province in Indonesia continues to report 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.
- ❑ Even with enhanced testing strategy, testing rates across the country remain low. The National Control Center is supporting provinces to address barriers and increase testing with provision of supplies such as PPE and swabs, training of health workers, improving transportation of specimens and enhancing community support to address stigma and fear.
- ❑ From 10 to 16 July, the average national daily COVID-19 surveillance reporting rate is only at 60%, a small improvement from last week.

COVID-19 IN PAPUA NEW GUINEA		
	New Cases	Total
National Capital District	5	9
Eastern Highlands	0	1
East New Britain	0	2
Morobe	0	1
Western	0	3
<b>TOTAL</b>	<b>5</b>	<b>16</b>

COVID-19 GLOBAL AND REGIONAL UPDATE*		
	Confirmed Cases	Deaths
Global	13 876 441	593 087
Western Pacific	256 788	7 888

Source: WHO Situation Report # 180, data as of 18 July 2020.

## Upcoming Events and Priorities

- **Coordination:** COVID-19 Response Plans for the National Coordination Centre (NCC) and Provincial Coordination Centres will be put in place as mandated by the National Pandemic Act 2020. The previous National Response Plans prepared by the National Department of Health and the provincial plans written by Provincial Health Authorities shall be reviewed and can be used as bases for the revised/new plans.
- **Surveillance and Testing:** Testing is to be expanded with the implementation of an enhanced testing strategy. Surveillance and Regional Coordination Teams continue to raise awareness on the need to increase sample collection at health facilities and remind provinces to submit daily surveillance reports. With the recent cases, active surveillance and case finding shall be done. NCD PHA requires additional human resources to support case investigation and contact tracing. For the troops returning from the border provinces in late July, the NCC and WHO will continue to support the PNG Defence Force to prepare for quarantine and testing.
- **Case Management:** The priority is to accelerate the readiness of functioning quarantine and isolation facilities in all provinces. In preparation for a large-scale community transmission, the NCC is planning how to implement better home quarantine and put in place home isolation. The NCD PHA will continue to discuss options with partners to improve the turnaround of test results, scale up the capacity in case management for COVID-19, and plan for surge capacity in case of large scale community transmission.
- **Infection Prevention and Control:** With the recent approval of the National IPC Policy and Guidelines, printing and distribution to health facilities are being planned. The National IPC Technical Working Group shall meet and regular working discussions with the IPC focal points throughout the provinces shall be established. IPC measures in health facilities need to be improved.
- **Risk Communication & Non-Pharmaceutical Interventions (NPIs):** Work is ongoing to sustain messaging on prevention measures at national and provincial levels, however public risk perception remains low. With the launch of the Niupela

Pasin (New Normal), groups, sectors and establishments shall continuously be engaged for its implementation. NCC is developing communication strategy for employers of close contacts of cases and sites of exposure to guide prevention and mitigation measures.

## National Transmission Assessment

### 2 – Localised clusters/ localised community transmission

Between 15 and 16 July, five new COVID-19 cases were reported, bringing the cumulative number in Papua New Guinea to 16. The new cases comprise a cluster of workers from a local laboratory as well a hospital worker who regularly interacts with the laboratory staff. Source investigations are still underway, and an epidemiological link is yet to be established for the cluster. There were no epidemiological links established for Case #9 and Case #10. None of the 16 cases had travel history during their likely period of infection. As such, there is a high probability that community transmission continues. No new district has reported cases, with Cases #9 to #15 all reported from the National Capital District. However, testing in other provinces has also been very limited. Importation from bordering Papua province in Indonesia and incoming travellers from other countries reporting COVID-19 cases remains a threat. There is currently no evidence of hospitals being overwhelmed, therefore, large-scale community transmission may not be occurring. However, it is also acknowledged that submission of hospital admission data from the provinces may be delayed.

### Epi Update COVID-19

Tests <b>174</b> NAT Tests past 7 days	Cases <b>5</b> New cases past 7 days	Deaths <b>0</b> Deaths past 7 days	ICU Admissions <b>0</b> ICU Admissions past 7 days
<b>7690</b> Cumulative NAT Tests	<b>16</b> Cumulative Cases	<b>0</b> Cumulative Deaths	<b>0</b> Cumulative ICU Admissions
<b>0</b> Imported Cases in past 28 days	<b>5</b> Cases in past 28 days with no link	<b>1</b> Active Clusters	<b>-</b> Active clusters with >3 generations

### Health Service Provision COVID-19

<b>4512</b> Health care workers trained in COVID19 Case Management	<b>0</b> Healthcare worker cases reported past week	<b>15*</b> Hospitals admitting COVID-19 patients	<b>75</b> ICU beds for COVID-19 patients	<b>&gt;281</b> Non-ICU Hospital beds for COVID19 patients
-----------------------------------------------------------------------	--------------------------------------------------------	-----------------------------------------------------	---------------------------------------------	--------------------------------------------------------------

\* Hospitals with isolation facilities

## Epidemiology

- 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 18 July, Papua Province has reported a total of 2529 confirmed cases and 27 deaths (data accessible at <https://covid19.papua.go.id/>).



**Figure 1. Locations of Confirmed COVID-19 Cases in Papua New Guinea and Cases in Papua and West Papua Provinces, Indonesia from 10 to 16 July 2020**

## Strategic Approach

### National and Provincial Public Health Response

- The Pandemic Response Coordination Group, comprised of teams representing health operations, provincial health liaison, investigations and support (Royal PNG Constabulary), border security (PNG Defence Force), State Solicitor (legal), public information, planning and coordination, procurement and logistics, and finance, meets daily at the NCC.
- The Pandemic Response Measures issued on 17 June were revoked on 16 July. The new measures that took effect on 17 July are presented in Annex A. New provisions are highlighted in international travel measures (No. 2), COVID-19 testing measures (No. 7) and surveillance and testing measures (No. 8).
- The CEOs from PHAs met with the Deputy Controller and NCC. Agreements include: (1) Provincial Emergency Operation Centres will meet regularly; (2) NDOH Health Facilities Standards Branch will inspect the health facilities set up for COVID-19 response; and, (3) Issues on domestic flights and POE in the provinces shall be addressed with support from NDOH.

### Surveillance

- The COVID-19 National Control Centre Hotline (1800200) has adjusted its operations from 6 am to 10 pm. Any medical emergency outside of these hours are referred to the nearest hospital or ambulance services.
- For the period of 11 to 17 July, the COVID-19 National Hotline received 1058 calls. Of the only 55 (5%) health-related calls, 36 (3.4%) were referred to the Rapid Response Team. To date, the Hotline received 77 284 calls.
- Surveillance updates are disseminated daily to provinces by the Surveillance and Epi Team of the National Control Centre.
- Most of the provinces submit daily reports of suspected COVID-19 (including SARI) patients. While completeness of reporting is increasing, sample collection and testing are still not adequate to generate reliable transmission assessment.
- From 10 to 16 July, the average national daily COVID-19 surveillance reporting rate slightly improved to 60% compared to 56% from the previous week. Six provinces (i.e. Autonomous Region of Bougainville, Eastern Highlands, Hela, Morobe, Madang and West Sepik) recorded 100% reporting rate. In comparison, four provinces (i.e. Enga, National Capital District

or NCD, Manus and Jiwaka) had 86% reporting rate for the week. Four provinces (Central, Simbu, Southern Highlands and Western Highlands) did not submit any reports during the same week.

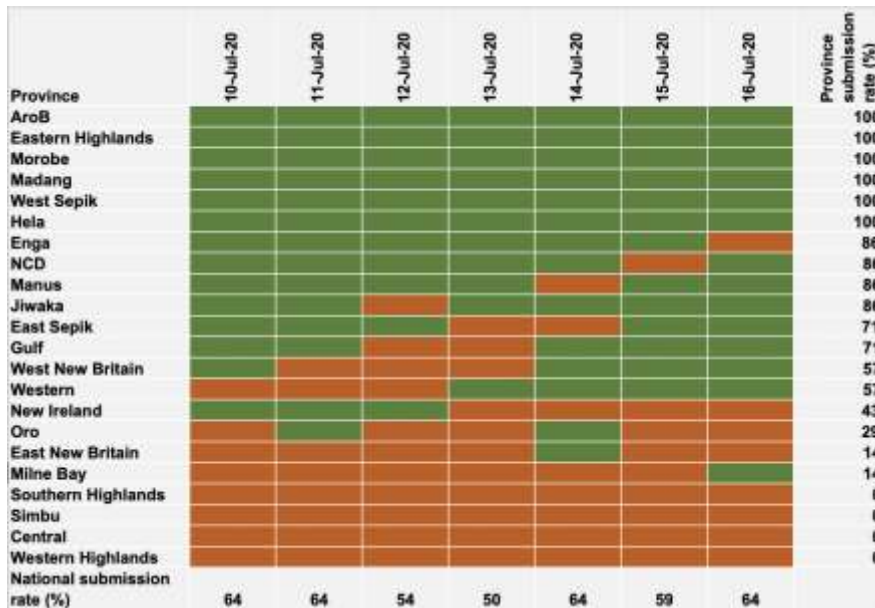


Figure 2. Daily COVID-19 Surveillance Reporting by Province from 10 to 16 July 2020

### Points of Entry and Quarantine

- As of 13 July, the total number of PNG citizens repatriated is 674. There are 228 PNG citizens that are yet to be repatriated.

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)	3779	
Total Number of Travelers Screened after SOE (17 June – 16 July)	Air	1261
* 3 passengers and the rest are crew	Sea*	217
	Land	6
	Total	1484

### COVID-19 Prevention, Detection and Control

- The NDOH Senior Executive Management approved the National Infection Prevention and Control Policy and National IPC Guidelines for COVID-19.
- The NCC have issued enhanced testing guidance (See Annex B). All suspected COVID-19 cases must have sample collected and tested for COVID-19. These include any inpatient or outpatient pneumonia or SARI case. In addition, health facilities (selected by PHAs and representative of the province) are being requested to collect at least 10 samples a day not only from suspected COVID-19 cases but from people presenting with influenza like illness or simple cough.
- Even with enhanced testing strategy, testing rates remain low. The NCC is supporting provinces address barriers and increase testing with provision of supplies such as PPE and swabs, training of health workers, improving specimen transport and enhancing community support to address stigma and fear. SOPs on sample collection, transfer, and information for patient were drafted.
- To support enhanced testing, USAID supplied NCD with testing booths and 31 health facilities received UTM and PPEs.

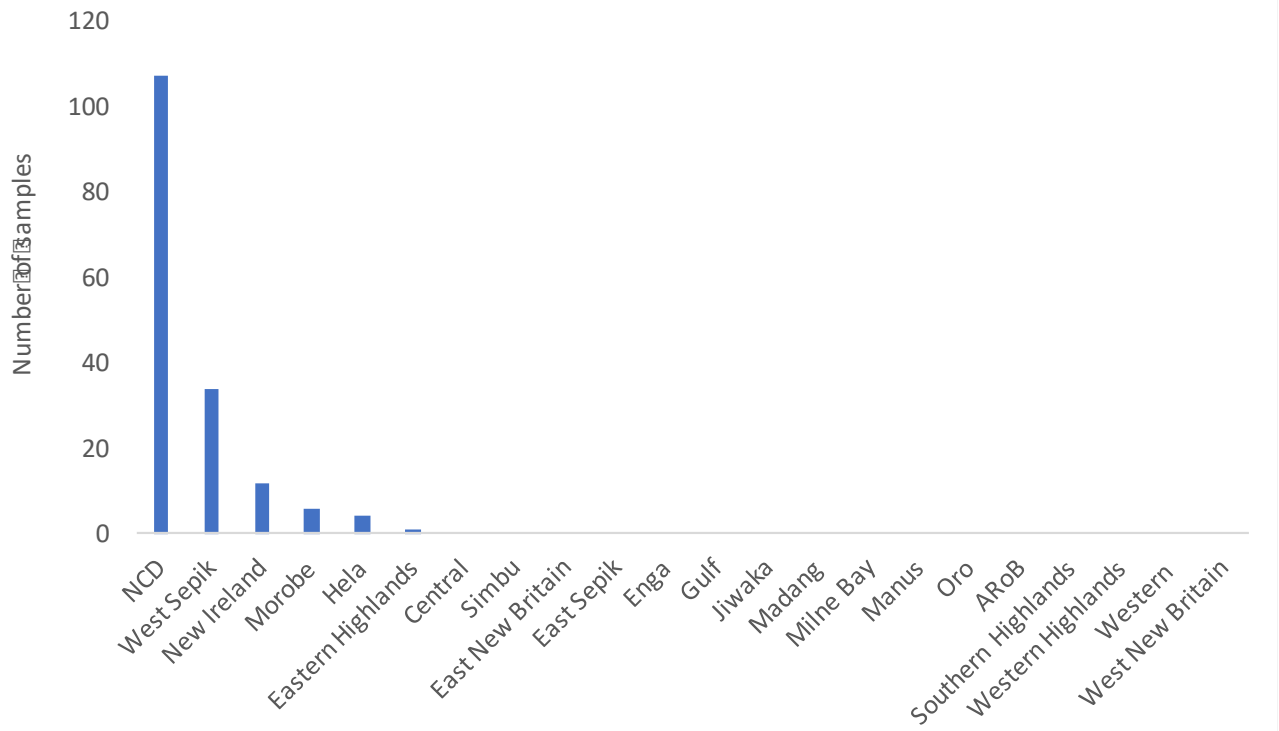


Figure 4. Number of COVID-19 Laboratory RT-PCR Results by Province, 10 to 16 July 2020 (n=174)

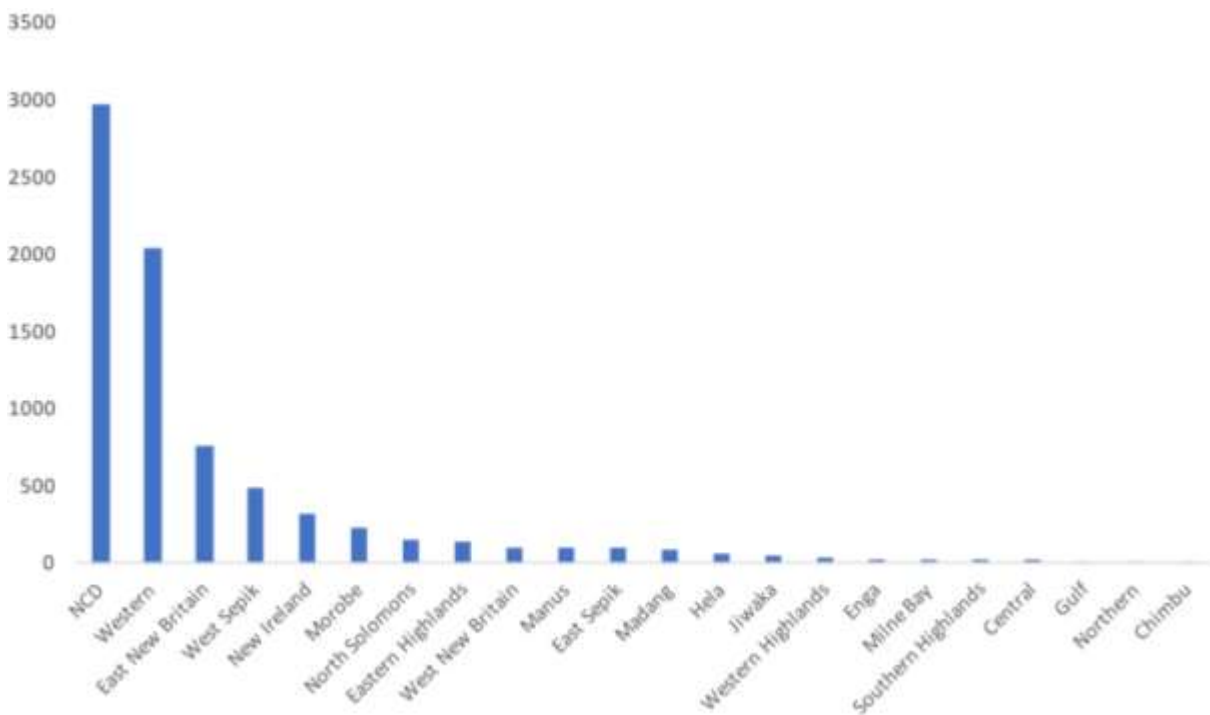


Figure 5. Cumulative Number of COVID-19 Laboratory RT-PCR Results by Province, January to 16 July 2020 (n=7690)

- Five new cases were detected in Port Moresby, with two cases confirmed on 15 July and three cases on 16 July. Four of these work at the Central Public Health Laboratory (CPHL), and the most recent one at Port Moresby General Hospital.

- The Rapid Response Team of the National Capital District (NCD) started contact tracing and collected 37 samples from immediate contacts of the five cases as of 16 July. All the immediate contacts are also in quarantine. Further case investigation and contact tracing (home, work and places visited by the confirmed cases) are ongoing.
- CPHL has undertaken decontamination and immediately implemented recommendations for prevention measures (physical distancing, wearing masks and hand hygiene).
- Contents of the eight modules of the online clinical management/IPC training developed by Johnstaff are being finalized with inputs from and in collaboration with NDOH, DFAT, Burnet Institute and WHO.

**Table 4. Trainings Conducted under the NDOH-UNICEF PNG COVID-19 Emergency Response Project (funded by World Bank)**

No	Province	Date	No. of Batches	No. of Healthcare Workers and Programme Managers Trained
1	Western Highland	23 – 25 June	1	21
2	Jiwaka	30 June – 02 July	2	38
3	Central	06 – 08 July	2	37
4	Simbu	07 – 09 July	1	20

**Table 5. Number of Health Care Workers Trained by Province**

Province		Total	Province		Total
No.	MOMASE REGION		No.	NEW GUINEA ISLANDS REGION	
1	Madang	346	12	ARoB	37
2	Morobe	425	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	114	No.	SOUTHERN REGION	
6	Enga	132	17	Central	313
7	Hela	81	18	Gulf	30
8	Jiwaka	111	19	Milne Bay	94
9	Simbu	20	20	NCD	269
10	Southern Highlands	367	21	Oro	34
11	Western Highlands	803	22	Western	71

- A program was initiated and facilitated by the team from the Directorate of Social Change and Mental Health Services (DSCMHS) that trained 244 medical professionals from Port Moresby General Hospital on the prevention of transmission of COVID-19 in Papua New Guinea. The trainees will be able to respond to issues associated with COVID-19 including violence against women, alcohol and drug abuse, caring for emergency service workers and mental health issues after exposure to a disaster. It will also help them to address stigma from COVID-19 or chronic physical health issues and gender-based violence.
- There is a separate mental health hotline (79074944) which is called by individuals seeking help, mainly for coping with stress and burnout and other medical conditions that require prescriptions, violence, depression and anxiety.
- A hands-on training was conducted on 11 July in Camp Aruma at Taurama Barracks and attended by 25 participants which include medical officers, nursing officers, community health care workers, laboratory science officers and preventative medicine officers. The training, facilitated by NDOH, NCD PHA and WHO, covered epidemiology of COVID-19, prevention and control measures, completing case investigation forms, donning and doffing of PPE and nasopharyngeal swabbing techniques. The activity is part of the ongoing support to mentor PNGDF in conducting COVID-19 screening for returning soldiers, diagnosis and surveillance at PNGDF clinic sites, and overall strengthening of the PNGDF's response to COVID-19.
- The data on COVID-19 pre-triage, quarantine and isolation are based on the responses of provincial authorities to the Provincial Preparedness Checklist (PPC) and the questionnaires (based on PPC) filled out by the provinces and/or

interview of provincial staff by NDOH regional coordinators. Additional sources of information include the records of the assessment for medical and non-medical equipment, laboratory diagnostics, health workforce and financial resources from stakeholders and partners. The data are regularly updated.

**Table 6. Number of Facilities and Beds for COVID-19 as of 19 July 2020**

Health Facilities	Number of Provinces	Number of Facilities	Number of Beds	Provinces that Reported
Pre-triage facilities	17	68	N/A	ARoB, ENB, NI, WNB, ES, Madang, Morobe, WS, EH, Enga, Hela, SH, Central, Gulf, NCD, Oro, Western
Quarantine facilities	11	27	>114	ARoB, ENB, Madang, Morobe, EH, Hela, Jiwaka, SH, NCD, Oro, Western
Quarantine facilities (underway)	17	> 24	>115	ARoB, ENB, Manus, NI, WNB, ES, Madang, WS, EH, Enga, Hela, SH, WH, Central, Gulf, NCD, Western
Isolation facilities	15	22	>281	ARoB, ENB, Manus, WNB, ES, Madang, Morobe, EH, Hela, Jiwaka, Gulf, MB, NCD, Oro, Western
Isolation facilities (underway)	17	>29	> 72	ARoB, NI, WNB, ES, Madang, Morobe, WS, EH, Enga, Hela, SH, WH, Central, MB, NCD, Oro, Western
Intensive Care Unit	14	15	75	ENB, Manus, WNB, Madang, Morobe, WS, EH, Hela, Simbu, SH, WH, MB, NCD, Western
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) – NIUPELA PASIN

- National and provincial teams continue to conduct mass awareness activities using TV, radio, community dialogues and social media to build awareness, raise risk perception on COVID-19, and encourage personal and community behaviour change, using messages developed by NDOH and WHO.
- Niupela Pasin (New Way) was launched by Prime Minister Hon James Marape on 17 July. It is a collection of information products that communicate the new normal of healthy behaviours for: individuals, families and communities; places of worship; health facilities; businesses, markets and shops; workplaces, banks and pharmacies; transportation; and, National Control Centre and other responders.
- A total of 116 health care workers and managers have been trained on risk communication and community engagement in the Western Highlands, Jiwaka, Simbu and Central Province. The master trainers will undertake the training of COVID-19 Niupela Pasin champions at district and sub-district level across the country.
- To promote testing and address stigma against it, a short information video is currently being developed to emphasize the importance of testing for COVID-19 and describe the country's testing strategy. It will show a simulation of the testing process at health facilities to allay fears and anxieties around swabbing.
- Famous rappers in PNG, Cammy Bee and Sprigga Mek, produced COVID-19 awareness song ("Wok Bung Wantaim") in partnership with NDOH and DFID/UKAid. The song is a mixture of English and Tok Pisin, and advocates for Niupela Pasin, including hygiene and sanitation practices as part of the country's COVID-19 response.
- With the support from the World Bank, UNICEF's project sets the 4-minute song video for 116 spots for primetime airing
- on FM100, Hot 97 FM, TVWAN and EMTV from 17 July to 16 August. The radio and TV stations take up to 95% of the listenership and viewership throughout the country.
- NDOH and WHO visited establishments (Vision City, Cuppa Café, Don Bosco Church, RH Hypermarket, RH Pharmacy, Taurama Aquatic Centre and Stop N Shop in Waigani Central) that were visited by the recently confirmed cases to discuss disinfection/decontamination and reinforcement of social distancing and hygiene measures inside their premises.

**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
Wearing Face Masks, Hand Hygiene, Respiratory Etiquette	16 January*	22 June	National	Recommended		
School Closure	23 March	5 June	National	Required		√
Workplace Closure	23 March	4 May	National	Required		√
Mass Gatherings	23 March	22 June	National	Required		
Stay at Home	23 March	4 May	National	Required		√
Restrictions on Internal Movement (within country)	23 March	22 June	National	Required	√*	
Restrictions on International Travel	14 February	22 June	National	Required		

\* First social media post done

\*\* ARoB has extended its SOE up to 14 August

## 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.
- On behalf of NCC, Deputy Controller and Acting Health Secretary Dr Paison Dakulala received 1740 GeneXpert cartridges from Australian High Commission, New Zealand High Commission and WHO on 10 July. WHO also provided 25 000 UTMs and 288 bottles of sanitisers.
- Coordination between the Logistics and Supply Team and Surveillance and Epi Team is ongoing for the logistical arrangements in operationalizing the enhanced testing strategy nationally.

## Funding and Expenditure

- Below is a summary of COVID-19 funding and expenditure by fund source as of 15 July. 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.).
- Total funds received from the Government of Papua New Guinea (GoPNG) 2020 Warrants is PGK 45.3 million. PGK 2.0 million was allocated to NCC activities. Expenditure to date is PGK 28.6 million (PGK 27.1 million for main activities and PGK 1.5 million for NCC activities). Outstanding commitments stand at PGK 16.5 million. Thus, the available funds out of the GoPNG Funds is PGK 214 828.
- A total of PGK 4.4 million allocated to 22 PHAs was transferred to the provinces via HSIP Subsidiary/Provincial Trust Accounts. Based on expenditure reports received, 97% of GoPNG funds in PHAs have been expended/committed.
- Funds received from New Zealand Aid amounts to PGK 6.29 million. PGK 5.99 million was transferred to the provinces while PGK 308 800 remain in the parent account for monitoring activities.
- Under the HSIP Trust Account, the total available funds from all sources is PGK 4 447 420.



**Table 8. COVID-19 Funding and Expenditure Summary by Fund Source as of 10 July 2020**

No.	Funding Source	Initial Amount	YTD Expend	O/S Commitments	Balance Available
1	GoPNG: NDoH 2019 HIV/AIDS Reprogrammed Funds	3 299 651	2 118 265	635 750	545 636
2	GoPNG COVID-19 Funds 2020 from Treasury 2020	43 300 000	27 111 459	16 188 540	0
3	GoPNG COVID-19 Funds 2020 from Treasury (NOC)	2 000 000	1 482 935	302 237	214 828
4	DFAT Emergency COVID-19 Funding	21 452 845	18 250 000		3 202 845
4	UNICEF Contribution to COVID-19	218 728	114 418		104 310
5	WHO COVID-19 Surveillance Funds (for 22 Provinces)	634 240	634 240		0
6	Private Sponsors	1 181 001	1 108 500	1 500	71 001
7	New Zealand Government	6 298 800	5 990 000		308 800
<b>Total Funds in HSIP</b>		<b>78 385 265</b>	<b>56 809 818</b>	<b>17 128 027</b>	<b>4 447 420</b>

## Best Practice/Lessons Learned

### Response Enabling Factors and Adjustments to the Response

- The Epi/Surveillance Pillar continues to generate essential data that informs national leadership for decision making.
- As with surveillance and case management, support for risk communication enabled timely public communication about the new cases detected in Port Moresby and advise behaviour change communication such as hand hygiene, cough and sneezing etiquette and physical distancing in the public space.
- Rumours and misinformation in the provinces are being addressed through the Provincial EOC focal points who provide feedback to correct them. Provincial authorities are conducting targeted awareness and education, while the NDOH and WHO work together to clarify issues and debunk misinformation and myths.
- Provincial profiles are regularly updated based on the responses of provincial authorities to the Provincial Preparedness Checklist. Additional sources of information include the records of assessment for medical and non-medical equipment, laboratory diagnostics, health workforce and financial resources from stakeholders and partners. These are helpful in priority actions to address the identified challenges and difficulties experienced by the provinces.
- 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 – Revised National Pandemic Measures Issued on 15 July 2020

Measure Number	Title	Scope of the National Pandemic Measures Issued on 22 June 2020	Modifications from the National Pandemic Measures on 15 July 2020
No. 1	Revocation of all previous measures	Revocation of all previous measures prior to 22 June 2020.	Revocation of all previous measures prior to 15 July 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; these measures do not apply to persons approved to enter PNG on or prior to 20 June; suspension of traditional border crossing arrangements (with Indonesia, Australia, FSM, Solomon Islands); boarding of aircraft bound for PNG only with exemption in writing by Controller; quarantine of returning citizens and permanent residents at designated facilities (at Government's cost) or designated hotels (at individuals' cost); quarantine of non-citizens and non-permanent residents at designated hotels (at individuals' cost); self-quarantine of foreign diplomats at appropriate residence for 14 days; failure to adhere to self-quarantine as an offence under National Pandemic Act 2020 and declaration as persona non grata of those who fail to comply; quarantine exemption granted by Controller; requirements for compliance for self-isolation and quarantine; conditions for leaving a designated place prior to completion of 14 days; and authorized officials to ensure appropriate levels of surveillance and border monitoring systems.	<p>15. 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.</p> <p>17. Persons require 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.</p> <p>20. Refusal of undertaking the PCR testing will result in extending 14-day quarantine since the date of denial for testing.</p> <p>23-26. Upon arrival at the designated hotel for quarantine, a person 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.</p> <p>27. Exemption of 23, 24 &amp; 25 for those who travel with a diplomatic travel document or a diplomatic passport.</p>
No. 3	Domestic travel measures	Conditions for compliance of all domestic flights; no restriction of flights within PNG; non-restriction of travel by foot, vehicle and vessel between provinces; and roadblocks to be established when directed by Controller.	No modification

Measure Number	Title	Scope of the National Pandemic Measures Issued on 22 June 2020	Modifications from the National Pandemic Measures on 15 July 2020
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 the purpose of 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 organizations to conduct testing are NDoH, IMR, PHAs, PMGH, St John Ambulance, OkTedi Mining, Simberi Gold, 2K Medical Clinic, Lihir, K92 Mining, Sky Health and Medical Services and Morobe Consolidated Goldfields Ltd.	Two more organizations were added as 'Approved Persons and Organizations to Conduct COVID-19 Testing'.

Measure Number	Title	Scope of the National Pandemic Measures Issued on 22 June 2020	Modifications from the National Pandemic Measures on 15 July 2020
No. 8	COVID-19 surveillance and testing measures	National case definitions of COVID-19 and Severe Acute Respiratory infection (SARI); all hospitalized/ admitted cases of respiratory illness, including pneumonia and all cases of SARI as suspected COVID-19 cases who should be tested within 24 hours of being admitted and to be managed using COVID-19 IPC protocols; and, the swabbing for testing a minimum of five patients with influenza-like illness symptoms per week.	<p>5-7. All the health facilities listed in Schedule 2 must set up pre-triage service and ensure IPC measures.</p> <p>8. All health facilities in Port Moresby to collect samples from COVID-19 suspected cases those who are over 10 years old.</p> <p>12. The delegate of the Controller is Deputy Controller, Dr Paison Dakulala.</p> <p>Schedule 2 for health facilities newly added, including all private urban health facilities, all public health facilities classified as Level 3 and above.</p>
No. 9	Business and social measures	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; licensed gambling venues, nightclub, horse racing at listed venues to operate on Wednesdays, Thursdays, Fridays and Saturdays; and ban on gatherings of over 100 persons.	No modifications

## ANNEX B – COVID-19 Enhanced Testing Strategy for Health Facilities in PNG from 28 June 2020

### COVID-19 Testing

Collect nasopharyngeal swabs from at least 10 patients daily in each health facility (provincial and district hospitals, urban clinics and private clinics) who present and with any of the below criteria:

#### Test ALL PATIENTS presenting at health facilities meeting the COVID-19 case definition.

##### COVID-19 suspected cases

- Collect nasopharyngeal swab specimen for COVID-19 testing from all persons that fit the COVID-19 case definition.
- Collect nasopharyngeal swab specimen for COVID-19 testing from all persons presenting with pneumonia (inpatient or outpatient) or severe acute respiratory illness (SARI).

#### Test SOME PATIENTS each day presenting with the following:

##### Influenza-Like Illness

- Collect nasopharyngeal swab specimen for COVID-19 testing from persons presenting with Influenza-like Illness (only a few each day per health facility, and no more than 10 per facility).

##### Simple cough

- Collect nasopharyngeal swab specimen for COVID-19 testing from persons presenting with simple cough (only a few each day per health facility, and no more than 10 per facility).

#### Post-mortem specimen collection from a patient who had respiratory illness before death

For a death in which the patient had respiratory illness and a specimen was not collected before death, collect the following postmortem specimen:

- Collect post-mortem Nasopharyngeal Swab specimen for COVID-19 testing as soon as possible.
- Specimen can be collected up to 3 days after death as virus may still be detected; however, sensitivity may be reduced with a longer post-mortem interval

#### Testing of confirmed cases for discharge from isolation

##### No test required for discharge

Criteria for discharging patients from isolation (i.e. discontinuing transmission-based precautions) without requiring retesting:

- For symptomatic patients: 10 days after symptom onset, plus at least 3 additional days without symptoms (including without fever and without respiratory symptoms)
- For asymptomatic cases: 10 days after positive test for SARS-CoV-2

### **COVID-19 test reporting**

- For every sample collected for COVID-19 testing, a COVID-19 Case Investigation Form (CIF) must be completed.
- Based on the presentation of the individual being tested, indicate on the CIF the reason for testing.
- Notify the Provincial Health Authority (PHA) Surveillance Team of any COVID-19 suspected case and notify the PDCO/DDCO immediately for pick-up of collected specimens or need for rapid response team (RRT) response.
- The PHA surveillance team will deliver/ship samples to CPHL/IMR.
- It is recommended that PHA have an inventory of UTM and PPE distribution to avoid stock out. A health facility must notify the PHA Surveillance Team in advance of a stock out of UTMs, CIFs or contact line-lists.
- If there is a case in which a clinician has high clinical suspicion of COVID-19, write "FOR URGENT TESTING" on the top of the CIF and notify the PDCO, CPHL and the National Surveillance Team.

Contact the National Surveillance Team on: [outbreaks@health.gov.pg](mailto:outbreaks@health.gov.pg)

#### **Rosheila Dagina**

National COVID-19 Surveillance Cluster Lead

Phone: 7992 7439

Email: [rdagina@gmail.com](mailto:rdagina@gmail.com)

## ANNEX C – Provincial Updates

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

### New Guinea Islands Region

#### Autonomous Region of Bougainville

##### Surveillance

Alerts from rural health centres	✓
COVID-19 hotlines *1	✓
Daily COVID-19 reporting *2	100%
No. of RRTs	3
Contact tracing team	3
Quarantine team	✓
Surveillance at POE	✓

##### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✗ 0
No. of GeneXpert machines	2 *3

Health facilities*4	Availability	No. of facilities	No. of beds
Pre-triage sites *5	✓	3	N/A
Quarantine facilities	✓	1	28
Quarantine (underway) *6	✓	1	12
Isolation facilities *7	✓	1	8
Isolation (underway) *8	✓	3	>4
ICU	✗	0	0
ICU (underway) *9	✓	1	4

##### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓ *10
Awareness activities conducted	✓ *11
Non-pharmaceutical interventions implemented	✓ *12

##### Challenges

- Communication between ARoB and the National Call Centre for following-up with persons under investigation.
- 12/40 health facilities report on daily basis. Misunderstanding of case definitions among HCWs.
- TNT staff in ARoB are not trained for IATA for sample shipping.
- Resource limitation and engagement of police and health team at POE.
- Readiness in case management for COVID-19, including staff surge capacity.
- Waste management: three incinerators in all three hospitals are not functioning.
- Communication with NDOH logistics team and funding for logistics to be discussed.

\*1 Provincial hotline in place, with three regional hotlines being prepared supported by DFAT. \*2 Between 10-16 July. \*3 Buka & Arawa. Design of main testing lab at Buka Hospital is currently underway. \*4 All health facility staff received IPC guidelines developed locally to suit the context which they are to adhere to. All the clinics had been closed and hospital had scaled down on patient numbers during the SOE. COVID-19 guidelines for hospital operation and clinical management protocol were developed and disseminated to the regional teams that are expected to cascade the guidelines and SOPs to primary health facility staff. Staff were identified for COVID-19 facilities and rosters were developed. Supplies are being rationed with distribution list. PCC monitors and communicates with all health facilities for guidance for readiness to detect and manage COVID-19 cases. \*5 Buka, Kieta and Arawa. Work is in progress in primary health facilities. \*6 Preparation for quarantine: Want tents if NDOH/partners can provide. For the two border posts, POE agencies in Buin and Siravai need quarantine space. \*7 Suhin Health Centre \*8 Preparation for isolation facilities: renovating Buka Hospital (4 beds), Arawa and Buin District Hospitals. List of essential equipment is not yet fully developed. Training for acute care for health staff was planned in early June. \*9 Preparation for ICU: renovating Buka Hospital (4 beds) \*10 Awareness reached all LLGs and schools. \*11 The Controller holds regular media conference. Hotlines are used as a platform for rumor management and myth busting. A communication plan developed. \*12 Seven supplementary orders were issued under the State of Emergency.

## East New Britain

### Surveillance

Alerts from rural health centres *1	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting *2	14% ↘
No. of RRTs	3 *3
Contact tracing team	3
Quarantine team	3

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓ 50
No. of GeneXpert machines	2 *4

\*1 Alerts from rural health centres are being addressed by the PEOC and referred to RRT teams to follow up and collection of samples. \*2 Between 10-16 July. \*3 RRT teams are on standby for any alerts in the province. \*4 Nonga and Butuwin. ILI/SARI Surveillance currently identified by St Mary's Hospital is collecting swabs for COVID-19 confirmation by GeneXpert \*5 32 health facilities are operating. Cough triage bay has been established in most of rural health centres. Hand washing basins are set up at the entrance of health facilities. \*6 Butuwin UC. Airport screening and home quarantine are implemented. \*7 Renovation of the Hunter Team Lodge (36 rooms)

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites *5	✓	5	N/A
Quarantine facilities *6	✓	1	3
Quarantine (underway) *7	✓	1	36
Isolation facilities	✓	1	5
Isolation (underway)	-	-	-
ICU	✓	1	3
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *8
Non-pharmaceutical interventions implemented	✓ *9

### Challenges

- Pending results for samples collected
- Stigma and discrimination in the community.
- Readiness in case management for COVID-19.
- Allowance payment to staff.
- Shortage and capacity of the staff at airport quarantine for response.
- Logistic support, PPE, transport pick up and drop off for officers, transport for identified cases to quarantine site or the treatment centre.

\*8 PHA started awareness on stigma associated with COVID-19 in addition to the general awareness in villages in close collaboration with LLGs and village councillors. Stigma reduction awareness also includes multisectoral partners. \*9 All provincial directives are aligned with national directives.



## Manus

### Surveillance

Alerts from rural health centres	-
COVID-19 hotlines	✓
Daily COVID-19 reporting *1	86% ↗
No. of RRTs	2
Contact tracing team	2
Quarantine team	2

### Laboratory functions

Functioning GeneXpert machines, trained staff and 49 COVID-19 cartridges	✗ *2
No. of GeneXpert machines	1

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites	✗	0	-
Quarantine facilities	✗	0	0
Quarantine (underway) *3	✓	1	24
Isolation facilities	✓	1	8
Isolation (underway)	-	-	-
ICU	✓	1	2
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *4
Non-pharmaceutical interventions implemented	✓

### Challenges

- No dedicated car or boat for operational activities for COVID-19 response (i.e. access to islands in Manus).
- No operational ambulance vehicle to transport confirmed cases.
- Limited space in pathology unit and pharmacy that resulted in boxes and cartons being stacked up to ceiling with minimum space to move.
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- No provisions for psychosocial support for the health workers.
- No incinerator, general waste & biohazard waste burnt and dumped in open area right next to hospital.

\*1 Between 10-16 July \*2 Training planned \*3 Under renovation (24 beds) \*4 Community awareness in 12 LLGs and other health programmes included COVID-19 awareness

## New Ireland

### Surveillance

Alerts from rural health centres	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting <sup>*1</sup>	43% ↘
No. of RRTs	4 <sup>*2</sup>
Contact tracing team	4
Quarantine team	4

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓ 50
No. of GeneXpert machines	2 <sup>*3</sup>

<sup>\*1</sup> Between 10-16 July. <sup>\*2</sup> Two RRTs in PHA/District & 2RRTs in Lihir and Simberi. <sup>\*3</sup> Kavieng Hospital & Lihir Medical Centre (TBC) <sup>\*4</sup> Kavieng General Hospital, Namatanai District Hospital, Taskul HC, Kimadan HC, Lihir Medical Centre and Simberi Mine Clinic <sup>\*5</sup> Requesting tents from NDoH/ partners. <sup>\*6</sup> Planned (6 beds) <sup>\*7</sup> Two district health teams reaching all the villages. A survey found a fair understanding of COVID-19. The provincial team started capturing messages related to stigma.

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites <sup>*4</sup>	✓	6	N/A
Quarantine facilities	✗	0	0
Quarantine (underway) <sup>*5</sup>	✓	1	-
Isolation facilities	✗	0	0
Isolation (underway) <sup>*6</sup>	✓	1	6
ICU	✗	0	0
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ <sup>*7</sup>
Non-pharmaceutical interventions implemented	✓

### Challenges

- Stigma in the community from a survey conducted.
- Readiness in case management for COVID-19:
  - No quarantine & isolation facilities and ICU.
  - No functional ventilators and oxygen concentrators.
  - 3 ASOs (no anaesthetist) at this stage.

## West New Britain

### Surveillance

Alerts from rural health centres	-
COVID-19 hotlines	✓
Daily COVID-19 reporting *1	57% ↘
No. of RRTs	2 *2
Contact tracing team	2
Quarantine team	2

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓ 50
No. of GeneXpert machines	2 *3

Health facilities *4	Availability	No. of facilities	No. of beds
Pre-triage sites *5	✓	3	N/A
Quarantine facilities	✗	0	0
Quarantine (underway) *6	✓	1	-
Isolation facilities	✓	1	4
Isolation (underway) *7	✓	1	6
ICU	✓	1	1
ICU (underway)	✓	1	2

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *8
Non-pharmaceutical interventions implemented	-

### Challenges

- Staff are subject to stigma after they came to contact with people suspected to have COVID-19.
- PPE supplies to police.
- Security issues (armed hold-ups for the ambulances & security personnel abused by the public for denying entry for a hospital).
- Readiness for quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- Funding and support for the southern coast.

\*1 Between 10-16 July. \*2 One mobile team for outside response and one team for town/urban and close by areas, including three trained RRT members and a driver per team. \*3 Kimbel Hospital and Balia District hospital \*4 Surge plan still in draft and only one simulation exercise was done for the hospital response in early April. \*5 Town Urban Clinic, Kimbe Hospital & Mutuvel Sporting Stadium \*6 Planned at Mutuvel Sporting Stadium \*7 Yet to be equipped \*8 The teams reached more than 78400 people.

## Momase Region

### East Sepik

#### Surveillance

Alerts from rural health centres	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting <sup>*1</sup>	71%
No. of RRTs	1 <sup>*2</sup>
Contact tracing team	1
Quarantine team	1

#### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges (2 staff trained)	✓
No. of GeneXpert machines	2 <sup>*3</sup>

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites <sup>*4</sup>	✓	8	N/A
Quarantine facilities	✗	0	0
Quarantine (underway) <sup>*5</sup>	✓	1	-
Isolation facilities <sup>*6</sup>	✓	1	-
Isolation (underway) <sup>*7</sup>	✓	1	-
ICU	✗	0	0
ICU (underway) <sup>*8</sup>	✓	-	-

#### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓ <sup>*9</sup>
Awareness activities conducted	✓
Non-pharmaceutical interventions implemented	✓ <sup>*10</sup>

#### Challenges

- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- Border crossers for their livelihood to Indonesia.

<sup>\*1</sup> Between 10-16 July. <sup>\*2</sup> Indicated an RRT available and trained. Efficient teamwork and smooth movement through hired vehicles. <sup>\*3</sup> Boram & Maprik <sup>\*4</sup> At the districts with seven tents and one for Boram Hospital <sup>\*5</sup> Planned to have a guest house <sup>\*6</sup> Old TB clinic refurbished <sup>\*7</sup> Planned at Moem Barracks <sup>\*8</sup> Ongoing renovation at the hospital. <sup>\*9</sup> 40,000 posters distributed to the districts on 11 May. <sup>\*10</sup> Discussion with PHA held on ensuring compliance to NPIs by business establishments

## Madang

### Surveillance

Alerts from rural health centres	-
COVID-19 hotlines	✓
Daily COVID-19 reporting *1	100% ↗
No. of RRTs	2
Contact tracing team	1
Quarantine team	1

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges ( 2 trained )	✓
No. of GeneXpert machines	4 *2

Health facilities *3	Availability	No. of facilities	No. of beds
Pre-triage sites *4	✓	1	N/A
Quarantine facilities *5	✓	1	12
Quarantine (underway) *6	✓	1	-
Isolation facilities *7	✓	1	18
Isolation (underway) *8	✓	1	-
ICU *9	✓	1	5
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓ *10
Awareness activities conducted	✓ *11
Non-pharmaceutical interventions implemented	✓ *12

### Challenges

- Readiness in case management for COVID-19.
- No electricity at the building for Provincial Emergency Commanding Office.

\*1 Between 10-16 July. The surveillance system has a referral and workflow with a reporting mechanism. \*2 Two at Modilon Hospital, one at Gaubin & one at Malala Health Centre. \*3 All suspect COVID-19 cases will be referred from the pre-triaging tents. DWU medical school will support in the event that surge capacity is required. The provincial team has drafted a surge plan and SOP. \*4 Modilon Hospital outpatient departments. Planned at additional 4 sites \*5 Modilon Hospital \*6 Planned to have a guesthouse \*7 Yagaum Hospital \*8 Planned at Moem Barracks \*9 High Dependency Unit with five critical care-trained nurses. Six ventilators are all functioning, including one portable ventilator. There are 4 ASOs and 1 anaesthetic. \*10 Total of 40 000 posters distributed to all districts on 11 May. \*11 Tumbuna TV is tapped. The chairman has participated in the local radio program on the preparedness. A community group of youths drew murals depicting awareness, prevention and stigma messages. \*12 Consistency of the application of physical distancing measures.

## Morobe

### Surveillance

Alerts from rural health centres	-
COVID-19 hotlines	✓
Daily COVID-19 reporting <sup>*1</sup>	100%
No. of RRTs	2 <sup>*2</sup>
Contact tracing team	2
Quarantine team	2

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges ( 4 3 Female/1 Male Trained)	✓ <sup>*3</sup>
No. of GeneXpert machines	5 <sup>*4</sup>

Health facilities <sup>*5</sup>	Availability	No. of facilities	No. of beds
Pre-triage sites <sup>*6</sup>	✓	5	N/A
Quarantine facilities <sup>*7</sup>	✓	3	47
Quarantine (underway)	-	-	-
Isolation facilities <sup>*8</sup>	✓	2	>120
Isolation (underway) <sup>*9</sup>	✓	1	8
ICU <sup>*10</sup>	✓	2	19
ICU (underway)	✓	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓ <sup>*11</sup>
Awareness activities conducted	✓ <sup>*12</sup>
Non-pharmaceutical interventions implemented	-

### Challenges

- Readiness in case management for COVID-19.
- No clear directive from NDoH and NCC about collecting information for testing and surveillance.

<sup>\*1</sup> Between 10-16 July. <sup>\*2</sup> One in Morobe District and three surveillance officers in Bulolo District with FETP graduates. The teams are effective through teamwork and coordinated Provincial Surveillance Team. <sup>\*3</sup> Trained staff in Morobe. <sup>\*4</sup> Two at Angau Hospital, one at Bulolo, one at Haicost & one at Mutzing. <sup>\*5</sup> Morobe PHA has identified healthcare workers from districts and unemployed ones for surge capacity. The surge capacity is available and in place in Morobe District while it is not documented yet in Bulolo District. There are also clearly designed separate ablution blocks for staff and patients. There should be five ablution blocks each for male and female in Morobe District and one each for male and female in Bulolo District. There are currently 6 in stock and all are functioning. There are plans for the procurement of 4 more. One portable X-ray for the COVID 19 hospital in Morobe District and one static X-Ray are available. There are also three backup generators as a standby power supply which will cater for the stadium and the other two for the ICU. Water tanks are available in Morobe District (9000L) and Bulolo District (5000L). <sup>\*6</sup> Planned in Bulolo District; waiting for tents from AMS (Lae). <sup>\*7</sup> 11-Mile (MKW) (12 units), 32 rooms in Morobe District, 3-bed capacity in Bulolo District. <sup>\*8</sup> Sir Ignatius Kilagi Stadium (120 beds) and Bulolo District. <sup>\*9</sup> Under construction in Morobe (8 beds). <sup>\*10</sup> Sir Ignatius Kilagi Stadium (15 beds) and Bulolo District (4 beds). <sup>\*11</sup> IEC materials were distributed in Morobe District. IEC materials were also printed locally and distributed in Bulolo District. Total of 40000 posters were distributed to the districts on 11 May. <sup>\*12</sup> Radio and TV programs on COVID-19 conducted led by PHAs.

## West Sepik

### Surveillance

Alerts from rural health centres	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting <sup>*1</sup>	100% <sup>↑</sup>
No. of RRTs	1 <sup>*2</sup>
Contact tracing team	1
Quarantine team	1

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓
No. of GeneXpert machines	2 <sup>*3</sup>

Health facilities <sup>*4</sup>	Availability	No. of facilities	No. of beds
Pre-triage sites <sup>*5</sup>	✓	4	N/A
Quarantine facilities	✗	0	0
Quarantine (underway) <sup>*6</sup>	✓	1	13
Isolation facilities	✗	0	0
Isolation (underway) <sup>*7</sup>	✓	2	-
ICU <sup>*8</sup>	✓	1	4
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓ <sup>*9</sup>
Awareness activities conducted	✓
Non-pharmaceutical interventions implemented	✓ <sup>*10</sup>

### Challenges

- Multiple bush tracks to monitor in Wutung and logistics challenges in Schotchiaw.
- Readiness to quarantine suspected COVID-19 patients and to do case management for COVID-19.
- Tents for pre-triage are still in Morobe.
- Referral of severely ill patients with COVID-19 from rural areas to the hospital.
- Stigma, panic and anxiety in the community.

<sup>\*1</sup> Between 10-16 July. <sup>\*2</sup> RRT is available with trained FETP graduates. Surveillance is coordinated with the Incident Management System. <sup>\*3</sup> Raihu District Hospital and Vanimo Hospital. <sup>\*4</sup> The referral pathway for WSPHA has been set and the teams are ready to implement. Guidelines have been shared and the district teams have met with their local ward members and councillors to prepare them in containing cases in their respective communities. There is a need for surge capacity in case of community transmission. <sup>\*5</sup> Vanimo Provincial Hospital, Medallion Hotel, Dapu CHP and Baro CHP <sup>\*6</sup> Planned at Weather Service (13-bed house) <sup>\*7</sup> Waiting for medical equipment for Vanimo Provincial Hospital (4 beds). Community or village-designated clinical isolation unit is planned <sup>\*8</sup> Vanimo Provincial Hospital, The ICU is not fully functional. It has three ventilators, but all are not working. <sup>\*9</sup> Visits to schools/institutions and organizations within Vanimo Green are continued to assess hand hygiene practices and physical distancing. WSPHA risk communication team members are still engaged in the SPG Enforcement Unit. Total of 400000 posters were distributed to the districts as of 11 May. <sup>\*10</sup> Border with Indonesia closed to stop people's movement; distancing measures applied in many business establishments.

## Highlands Region

### Eastern Highlands

#### Surveillance

Alerts from rural health centres	-
COVID-19 hotlines	✓
Daily COVID-19 reporting <sup>*1</sup>	100%
No. of RRTs	2 <sup>*2</sup>
Contact tracing team	-
Quarantine team	-

#### Laboratory functions

Functioning GeneXpert machines, trained staff and no COVID-19 cartridges	✗
No. of GeneXpert machines	4 <sup>*3</sup>

<sup>\*1</sup> Between 10-16 July. <sup>\*2</sup> The first team includes five officers trained to conduct specimen collection and contact tracing, and has a dedicated vehicle. The second team uses malaria spray equipment to disinfect contaminated sites (clinic, household, vehicle, etc.), and has a dedicated vehicle. <sup>\*3</sup> Highlands Provincial Hospital (2), Ialibu Health Centre (1) and Kainantu District Hospital (1).

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites <sup>*4</sup>	✓	1	N/A
Quarantine facilities <sup>*5</sup>	✓	1	14
Quarantine (underway) <sup>*6</sup>	✓	1	16-18
Isolation facilities	✓	1	5
Isolation (underway) <sup>*7</sup>	✓	1	6
ICU <sup>*8</sup>	✓	1	12
ICU (underway)	-	-	-

#### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ <sup>*9</sup>
Non-pharmaceutical interventions implemented	-

#### Challenges

- Nasal swabs are out of stock.
- Not informed about National Call Centre database. There were few phone calls requesting patient follow-up, but no sufficient information exchange took place.
- No COVID-19 cartridges after training.
- Readiness in case management for COVID-19.
- Potential fear for COVID-19 in the community prevents access to health.

<sup>\*4</sup> Goroka Hospital <sup>\*5</sup> Total of 12 beds and two maternity beds are completed. <sup>\*6</sup> Planned 12 more beds and 4-6 beds in the Paediatric Ward <sup>\*7</sup> Six rooms with separate bed each under renovation. All ward renovations are scheduled for completion by mid-June. <sup>\*8</sup> Two six-bed ICU wards at Goroka Hospital <sup>\*9</sup> Senior officers are planning a widespread community awareness supervision to all districts following completion of hospital renovations.



## Enga

### Surveillance

Alerts from rural health centres	-
COVID-19 hotlines	-
Daily COVID-19 reporting *1	86% ↘
No. of RRTs	-*2
Contact tracing team	-
Quarantine team	-

### Laboratory functions

Functioning GeneXpert machines, trained staff and no COVID-19 cartridges	✗
No. of GeneXpert machines	2 *3

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites *4	✓	1	N/A
Quarantine facilities	✗	0	0
Quarantine (underway) *5	✓	-	-
Isolation facilities	✗	0	0
Isolation (underway) *6	✓	-	-
ICU	-	-	-
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *7
Non-pharmaceutical interventions implemented	-

### Challenges

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

\*1 Between 10-16 July. \*2 There are ten staff in the surveillance team, including Provincial Disease Control Manager, FETP graduates and IATA trained officers. \*3 Kompiam District Hospital (1) and installation to be confirmed at Wabag Provincial Hospital. \*4 Wabag Hospital. \*5 All district hospitals will have quarantine facilities. Land was identified. \*6 Identified the site in Pausa in Wapenamanda. \*7 The province has a public spokesperson and a designated area for a press release. The spokespersons for the media and press release are Chief Executive Officer Enga PHA, Director of Public Health and Provincial Police Commander. The press release is usually held at the Provincial Emergency Operations Centre. The team leader has developed a micro-plan for the catchment population and will be shared with the national communications lead. Awareness and school health inspection work is ongoing.

# Hela

## Surveillance

Alerts from rural health centres	✓ *1
COVID-19 hotlines	✓ *2
Daily COVID-19 reporting *3	100% ↗
No. of RRTs	1 *4
Contact tracing team	-
Quarantine team	-

## Laboratory functions

Functioning GeneXpert machines, trained staff and no COVID-19 cartridges	✗
No. of GeneXpert machines	1 *5

\*1 Participatory surveillance encourages members of the public to report to the nearest health facilities without health worker attending, and enhanced surveillance for residential facilities and vulnerable groups. \*2 PHA is looking at negotiating with Digicel PNG LTD for the establishment of a free toll number. \*3 Between 10-16 July. \*4 One PHQ Rapid Response Team has four officers trained to conduct specimen collection and contact tracing with a dedicated vehicle. IPC and EHO are stationed to disinfect. Focal RRT leads at district hospitals are HEOs - one is a trained FETP. They are coordinating and mobilizing resources at districts. \*5 Hela Provincial Hospital

Health facilities *6	Availability	No. of facilities	No. of beds
Pre-triage sites *7	✓	1	N/A
Quarantine facilities *8	✓	3	-
Quarantine (underway) *9	✓	1	-
Isolation facilities *10	✓	3	>6
Isolation (underway)*11	✓	7	-
ICU *12	✓	1	6
ICU (underway)	-	-	-

## Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *13
Non-pharmaceutical interventions implemented	-

## Challenges

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

\*6 Two trained mental health nurses are available to provide socio-psychological support to COVID-19 suspect cases, their families and frontline staff. Clinical management and health care services staff meet daily at PHQ COVID-19 Centre. Pathway established for referral, screening, testing and transportation of patients. \*7 Provincial hospital. Hela PHA is emphasizing more on the "new normal" way of screening patients at entry points in hospitals and health centres. \*8 Three hospitals have quarantine facilities. \*9 Planned at Hope Centre at Pii Village 7 container buildings \*10 Three hospitals have isolation units with the essential PPE and consumables. Hope Centre at Pii Village is the primary isolation site. Hospital Board Room was converted to Isolation ward with six (6) beds installed. \*11 Exxon will supply seven container building materials. \*12 There is one ICU/HDU ward with six beds and two ventilators. \*13 Collective awareness and preparedness activities are ongoing.

## Jiwaka

### Surveillance

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

### Laboratory functions

Functioning GeneXpert machines, trained staff and no COVID-19 cartridges	-
No. of GeneXpert machines	-

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites *2	-	-	N/A
Quarantine facilities *3	✓	1	-
Quarantine (underway)	-	-	-
Isolation facilities *4	✓	4	-
Isolation (underway)	-	-	-
ICU	-	-	-
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *5
Non-pharmaceutical interventions implemented	-

### Challenges

- Readiness in case management for COVID-19.

\*1 Between 10-16 July. \*2 All 28 reporting health facilities were ordered to set up cough triage, screen all cough cases separately, and report SARI urgently to PEOC daily. The transport allocated for SARI patients is one full-time dedicated ambulance. \*3 The facility set up for persons under investigation in Kindeng is now in use. \*4 Isolation facilities in Kindeng, Minj HC, Kol HC, Tabibuga HC are being equipped with beds, oxygen and water supply. \*5 The advocacy activities are estimated to have reached 20 000 people.

## Simbu

### Surveillance

Alerts from rural health centres ✓ \*1

COVID-19 hotlines -

Daily COVID-19 reporting \*2 0% ↻

No. of RRTs 1 \*3

Contact tracing team 1 \*3

Quarantine team -

### Laboratory functions

Functioning GeneXpert machines, trained staff and no COVID-19 cartridges -

No. of GeneXpert machines 2 \*4

\*1 All 36 health facilities started daily surveillance reporting for all ILI, SARI & COVID-19. \*2 Between 10-16 July. \*3 One RRT, including five officers trained to conduct specimen collection and contact tracing without a dedicated car. Provincial RRT is under preparation and ready to collect all specimens for all ILI and SARI cases. IPC team 2 is set but need more ethanol to cover all exposed areas completely. IATA trained laboratory officers are collecting samples for COVID-19. \*4 Megandi Rural Hospital & Kundiawa General Hospital.

Health facilities *5	Availability	No. of facilities	No. of beds
Pre-triage sites *6	-	-	N/A
Quarantine facilities	-	-	-
Quarantine (underway)	-	-	-
Isolation facilities	-	-	-
Isolation (underway)	-	-	-
ICU *7	✓	1	3
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public ✓

Awareness activities conducted ✓ \*8

Non-pharmaceutical interventions implemented -

### Challenges

- No nasal swabs and limited supply of PPE and stationery. Very limited vaccine carriers.
- Weak crowd control measures (Police commanders).
- Inadequate awareness coverage
- Readiness for quarantine of people who are suspected of having COVID-19
- Readiness in case management for COVID-19

\*5 An information booth for COVID-19 is set up in all major district health centres and common marketplaces. Mainstream media (NBC Simbu) is broadcasting updates with local publication produced every three days. \*6 Triage and information booth for COVID-19 are being set up at the Provincial Hospital and Megandi Rural Hospital. All Health centres will be coordinated appropriately and equipped after conducting infection prevention and control (IPC) district training. \*7 Three beds with three ventilators \*8 Awareness through all 36 Health Facilities in the province.

## Southern Highlands

### Surveillance

Alerts from rural health centres	✓ <sup>*1</sup>
COVID-19 hotlines	✓
Daily COVID-19 reporting <sup>*2</sup>	0% ↘ <sup>*3</sup>
No. of RRTs	1
Contact tracing team	5
Quarantine team	5

### Laboratory functions

Functioning GeneXpert machines, trained staff and 40 COVID-19 cartridges	✓
No. of GeneXpert machines	2 <sup>*4</sup>

<sup>\*1</sup> Level 2 facilities such as sub-centres were only asked to give an alert when suspected cases are identified. <sup>\*2</sup> Between 10-16 July. <sup>\*3</sup> Supervision visits to health facilities contributed to improving daily reporting for COVID-19. Reporting had some delays due to the technical issues in using ODK and training of surveillance officers from health facilities. <sup>\*4</sup> Mendi Hospital & Ialibu Hospital. One in Mendi Hospital is functioning, 15 trained.

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites	3	-	N/A
Quarantine facilities <sup>*5</sup>	✓	1	10
Quarantine (underway) <sup>*6</sup>	✓	1	-
Isolation facilities	✗	0	0
Isolation (underway) <sup>*7</sup>	✓	2	-
ICU <sup>*8</sup>	✓	1	6
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ <sup>*9</sup>
Non-pharmaceutical interventions implemented	-

### Challenges

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

<sup>\*5</sup> Kiburu Lodge <sup>\*6</sup> Planned for a permanent quarantine work (K3 million) <sup>\*7</sup> Maintenance for isolation ward for MDR-TB and planned at Munhu Health Centre <sup>\*8</sup> Six-bed capacity ICU. One ventilator is functioning, and two will undergo repair. There is one oxygen humidifier. <sup>\*9</sup> Conducted awareness in all five districts and health centres, including the Mendi urban area. All district health facilities took part in COVID-19 awareness to their respective communities. The activity is now ongoing at the facility level. PHA stressed on the COVID-19 perceptions on social media and advised health care workers not to recirculate/repost misleading information. Pangia Baptist Mission printed flyers and made radio announcements on their radio station on COVID-19 messages in the district.

## Western Highlands

### Surveillance

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

### Laboratory functions

Functioning GeneXpert machines, trained staff and no COVID-19 cartridges	✘
No. of GeneXpert machines	4 *2

Health facilities *3	Availability	No. of facilities	No. of beds
Pre-triage sites	-	-	N/A
Quarantine facilities	✘	0	0
Quarantine (underway) *4	✓	3	-
Isolation facilities	✘	0	0
Isolation (underway) *5	✓	1	-
ICU	✓	1	4
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *6
Non-pharmaceutical interventions implemented	-

### Challenges

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

\*1 Between 10-16 July. \*2 Kudjip Hospital, Tinsley TB LAB, Western Highlands Provincial Hospital & WHP Public Health Laboratory. \*3 It is planned to build accommodation within the hospital compound for staff working directly with COVID-19 patients. Procurement is planned for two portable ventilators with monitors for the ICU. \*4 The construction of a quarantine shed is ongoing. Additional quarantine facilities at Tinsley Hospital and Tambul are proposed. \*5 The isolation ward is being established in the chapel with support from ICRC. Additional resources are required to refurbish and furnish the isolation ward. \*6 The WHPHA Health Promotion and Disease Prevention teams are leading the advocacy programme and have produced pamphlets and posters.

## Southern Region

### Central

#### Surveillance

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

#### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓ 20
No. of GeneXpert machines	2 *3

\*1 Between 10-16 July. \*2 RRT was recently trained in June, \*3 Kwikila & Bereina District Hospitals have GeneXpert machines powered by solar power system. \*4 The houses of the 3 doctors were identified as the isolation and quarantine facilities for all the staff managing the COVID-19 suspect cases. \* 5 Abau District Hospital, Bereina District Hospital and Veifa'a Hospital. \*6 Planned at Bereina District Hospital \*7 Planned at Abau District Hospital and Bereina District Hospital.

Health facilities *4	Availability	No. of facilities	No. of beds
Pre-triage sites *5	✓	3	N/A
Quarantine facilities	✗	0	0
Quarantine (underway) *6	✓	1	-
Isolation facilities	✗	0	0
Isolation (underway) *7	✓	3	-
ICU	✗	0	0
ICU (underway)	✗	0	0

#### Risk comms, community engagement & non-pharmaceutical interventions

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

#### Challenges

- Readiness to quarantine people who are suspected of having COVID-19
- Readiness in case management for COVID-19.
- The province does not have a hospital status to address health facility readiness.
- Abau District: water supply, power supply, oxygen supply, workforce, renovation of the current building used as outpatient, Delivery and Labour Wards, and clinics for other public health programs, and waste management.
- Goilala District: Not enough PPEs for all health facilities. Needed triage tents for Tapini and Woitape, followed by the other four facilities. Absence of public servants at workstations. Implementation of routine immunization and regular supply of TB drugs.
- Bereina District: run-down facilities requiring renovation, power supply, water supply.

## Gulf

### Surveillance

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

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓
No. of GeneXpert machines	2 *2

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites *3	✓	1	N/A
Quarantine facilities	✗	0	0
Quarantine (underway) *4	✓	3	0
Isolation facilities *5	✓	1	0
Isolation (underway)	✗	0	0
ICU	✗	0	0
ICU (underway)	✗	0	0

### Risk comms, community engagement & non-pharmaceutical interventions

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

### Challenges

- RRT is not established (planned training).
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.

\*1 Between 10-16 July. \*2 Kapuna Rural Hospital & Kikori District Hospital. Installation at Kerema Hospital Laboratory to be confirmed. \*3 Triage areas are at the hospital. \*4 The province has identified three quarantine sites: Kanabea, Kerema and Kikori. One will be set up when the donated tents are received. \*5 The old TB Ward is repurposed to be used for isolation.



## Milne Bay

### Surveillance

Alerts from rural health centres	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting <sup>*1</sup>	14% ↻
No. of RRTs	1 <sup>*2</sup>
Contact tracing team	-
Quarantine team	-

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓
No. of GeneXpert machines	1 <sup>*3</sup>

<sup>\*1</sup> Between 10-16 July. The surveillance team is working on the strengthening of information management for ILI/SARI and surveillance at the health facilities. The health facilities surveillance system was adjusted to capture ILIs, PNA, URTIs and deaths. <sup>\*2</sup> RRT was established after the training. <sup>\*3</sup> Milne Bay Provincial Hospital.

Health facilities <sup>*4</sup>	Availability	No. of facilities	No. of beds
Pre-triage sites	✗	0	N/A
Quarantine facilities <sup>*5</sup>	✗	0	0
Quarantine (underway)	✗	0	0
Isolation facilities <sup>*6</sup>	✓	1	7
Isolation (underway) <sup>*7</sup>	✓	1	-
ICU	✓	1	2
ICU (underway)	✗	0	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ <sup>*8</sup>
Non-pharmaceutical interventions implemented	-

### Challenges

- No reports from health facilities in Kitava and Goodenough.
- Limited supplies of PPE.
- No space for pre-triage and quarantine facilities.
- Readiness to quarantine people who are suspected of having COVID-19.
- Readiness in case management for COVID-19.
- Challenge in health workforce due to age.

<sup>\*4</sup> A vehicle has been designated for transportation of the COVID 19 patients <sup>\*5</sup> Home quarantine <sup>\*6</sup> There are five beds in the isolation facility currently, including a delivery bed in Alotau Hospital. <sup>\*7</sup> The construction and refurbishment of the COVID-19 Isolation 'roundhouse' facility is in progress. <sup>\*8</sup> The team visits schools.

## National Capital District

Surveillance	
Alerts from rural health centres	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting *1	86% ↘
No. of RRTs	1*2
Contact tracing team	1
Quarantine team	-
Laboratory functions	
Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓
No. of GeneXpert machines	3 *3

\*1 Between 10-16 July. \*2 Landlines were installed at NCD PHA PEOC for POI follow-up. Full contact list is released to all health facilities to activate a response. A team of 12 is in place to cover province and cater for on-site Rita Flynn swabbing. Rapid response is also covered by this team. A 24-hour roster is in place. \*3 Bereina Health Centre, CPHL & Lawes Road Urban Clinic. Installation at Gerehu Hospital needs to be confirmed.

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites *4	✓	18	N/A
Quarantine facilities *5	✓	12	-
Quarantine (underway)*6	✓	2	-
Isolation facilities *7	✓	1	76
Isolation (underway) *8	✓	1	6
ICU *9	✓	1	4
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓
Awareness activities conducted	✓ *10
Non-pharmaceutical interventions implemented	✓

### Challenges

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

\*4 Sixteen public clinics, PMGH and Gerehu Hospital. The figure does not include private clinics and hospitals. \*5 Hotels in POM provide quarantine rooms. Government designated facilities include Ponderosa Hotel, Hideaway Hotel, Lamana Hotel, Gateway Hotel and Peai Lodge. Designated hotels include Holiday Inn Hotel, Ela Beach Hotel, Grand Papua Hotel, Laguna Hotel, Hilton Hotel, Stanley Hotel, Lamana Hotel and Airways Hotel. \*6 Dogura and 6 mile Facilities. \*7 Rita Flynn Facility. \*8 Six separate bedrooms under renovation - all ward renovation is scheduled for completion by mid-June. \*9 PMGH \*10 City wide awareness covering more than 80 % of the city driven by the municipal arm of the NCD Provincial Government and NCDPHA team. ST JOHN'S Ambulance ran a massive awareness campaign and TOT for private sectors to advocate.

## Oro

### Surveillance

Alerts from rural health centres	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting *1	29% ↗
No. of RRTs	1 *2
Contact tracing team	1
Quarantine team	-

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓
No. of GeneXpert machines	1 *3

Health facilities	Availability	No. of facilities	No. of beds
Pre-triage sites *4	✓	1	N/A
Quarantine facilities *5	✓	2	-
Quarantine (underway)	-	-	-
Isolation facilities *6	✓	1	-
Isolation (underway) *7	✓	1	8
ICU	-	-	-
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓ *8
Awareness activities conducted	✓
Non-pharmaceutical interventions implemented	-

### Challenges

- Readiness in case management for COVID-19.

\*1 Between 10-16 July. \*2 There is surveillance at the airport. Seaport is a challenge due to a workforce issue. NAC also conducts airport surveillance. \*3 Popondetta Hospital \*4 Siroga Health Centre set up pre-triage at the clinic entrance. Setting up pre-triage at Popondetta hospital is underway with a tent. \*5 Popondetta Hospital and Siroga Health Centre have quarantine facilities with tents. \*6 New Britain Palm Oil Health and PHA renovated the old dental area to an isolation ward. \*7 Popondetta Hospital's isolation ward is under construction (8 beds). \*8 Awareness is doing well. The team is now doing schools and are going out to the districts. A hotel in Oro put handwashing facilities outside the hotel entrance, which demonstrated an example of good practice in the private sector.

## Western

### Surveillance

Alerts from rural health centres	✓
COVID-19 hotlines	✓
Daily COVID-19 reporting *1	57%
No. of RRTs	3 *2
Contact tracing team	1
Quarantine team	-

### Laboratory functions

Functioning GeneXpert machines, trained staff and COVID-19 cartridges	✓
No. of GeneXpert machines	3 *3

\*1 Between 10-16 July. \*2 A team based in Daru trained for surveillance and rapid response conducts sample collection in South Fly. Another team is responsible for point of entry screening at the ports for every passenger entering and leaving Daru and Kiunga. Two officers were trained for sample collection from the visiting Surveillance Team. \*3 Two in Daru General Hospital and one in Kiunga Hospital. Installation of one in Tabubil Hospital needs to be confirmed. Only 2 working. \*4 Daru is maintaining a residential staff building and Kiunga is building a new staff facility. Rumginae and Balimo have not yet identified facilities for staff who will provide care for COVID 19 patients. A Clinical Emergency Team consists of a critical care nurse, an anaesthetist, an emergency registrar, a laboratory scientist, Director for Medical Services, and a specialist Obstetrician and Gynaecologist.

Health facilities *4	Availability	No. of facilities	No. of beds
Pre-triage sites *5	✓	4	-
Quarantine facilities *6	✓	1	-
Quarantine (underway) *7	✓	4	>12
Isolation facilities *8	✓	2	24
Isolation (underway) *9	✓	2	28
ICU	✓	1	4
ICU (underway)	-	-	-

### Risk comms, community engagement & non-pharmaceutical interventions

Communication materials distributed to the public	✓ *10
Awareness activities conducted	✓ *11
Non-pharmaceutical interventions implemented	✓ *12

### Challenges

- Following-up with the contacts.
- The Kiunga Surveillance Team needs HR support from NDoH.
- Surveillance data flow, data management, and enhancement of ILI surveillance (including event-based surveillance and the establishment of sentinel surveillance sites).
- Readiness in case management for COVID-19.
- Ageing issue in health workforce.
- Border crossers for their livelihood to Indonesia.
- Access to provincial budget of districts.

\*5 Entrances at four hospitals (Dauru, Kiunga, Balimo and Rumginae) conduct pre-triaging with handwashing facilities available for people accessing the hospitals. \*6 One quarantine facility is in Daru Provincial Hospital (GESI Building). \*7 Twelve beds quarantine planned. Three district hospitals in Kiunga, Rumginae and Balimo will set up donated tents as quarantine facilities.\*8 Two isolation facilities are set up in Daru Provincial Hospital and Kiunga District Hospital with six self-contained rooms and ten cubicles with 18 beds, respectively. \*9 Two District Hospitals prepare isolation facilities. Rumginae has identified the old TB ward with six beds for COVID 19 isolation which requires minor renovation. There are 22 isolation beds planned with one delivery bed. \*10 Risk communication materials are under development for printing and distribution. Needs are observed in the communities for enhanced risk communication activities on hand hygiene and social distancing. \*11 Awareness activities conducted by NGOs, in collaboration with PNG Defence Force. \*12 Movement restrictions along borders.

### ANNEX D – Photos



Photo 1. Handover of GeneXpert cartridges and UTMs to the National Control Centre on 10 July 2020 with (from left) Ms Andrea Cole (Counsellor, Health Security, Australian High Commission), Dr Paison Dakulala (A/Secretary of the National Department of Health and Deputy Controller), Dr Luo Dapeng (WHO Representative in Papua New Guinea) and Mr Adam Linnell (First Secretary, New Zealand High Commission)



Photos 2-7. Hands-on training at Camp Aruma in Taurama Barracks on 11 July 2020 facilitated by NCD PHA, NDOH and WHO



Photo 8. Announcement of new confirmed COVID-19 cases by Deputy Controller and A/Secretary for Health Dr Paison Dakulala on 16 July 2020



Photos 9-10. Press conference and launching of Niupela Pasin at the National Control Centre by Prime Minister Hon James Marape on 17 July 2020



Photo 11. Handing over of PPEs by the National Control Centre and NDOH represented by Dr Daoni Esorom to the member for South Bougainville Hon Timothy Masiu at the Buin Health



Photo 12. Conduct of COVID-19 training for all development partners across Bougainville



Photos 13-14. IEC materials distributed to development partners in Bougainville



Photos 15-17. Airing of COVID-19 awareness song advocating Niupela Pasin, including hygiene and sanitation practices as part of the country's COVID-19 response



Photos 18-19. Regular Surveillance & Epi Team and Health Operations Meetings at the National Control Centre



Photo 20. Meeting between Deputy Controller and A/Secretary for Health Dr paison Dakulala, CEOs of Provincial Health Authorities and NCC Provincial Coordination Team





Photo 21. Isolation set up at the Rita Flynn Facility



Photos 22-30. Meetings with various establishments for disinfection/decontamination and reinforcement of social distancing and hygiene measures

-----  
For more information about this Situation Report, contact:

**Dr Daoni Esorom**  
A/Executive Manager, Public Health, National Department of Health  
Email: [daoniesorom@gmail.com](mailto:daoniesorom@gmail.com); Mobile: +675-72313983

**Mr Eric Salenga**  
Information and Planning Team, World Health Organization  
Email: [salengar@who.int](mailto:salengar@who.int)