# COVD-19

# PAHO JAMAICA CO EOC – COVID-19 SITUATION REPORT #473 28 OCTOBER 2021 (as at 6:00 p.m.) JAMAICA, BERMUDA AND THE CAYMAN ISLANDS

#### **EPIDEMIOLOGICAL SUMMARY**

Country	Confirmed	Active	Hospitalized	Deaths	Case	<b>Total Tests</b>	Transmission
	Cases	Cases	(% Active	(New	Fatality	(Cum.	
	(New	(% of	Cases)	within	Rate	Positivity	
	within	Total		<b>24hrs</b> )	(%)	Rate)	
	<b>24hrs</b> )	Cases)					
Jamaica <sup>i</sup>	88,775	28,397	291	2,223	2.5%	639,099	Community
	(109)	(32.0%)	(1.0%)	(18)		(13.9%)	Transmission
Bermudaii	5,647	84	16	101	1.8%	593,903	Community
	(10)	(1.5%)	(19.0%)	(2)		(1.0%)	Transmission
Caymaniii	1,496	521	4	2	0.1%	163,381	Sporadic
Islands	(126)	(34.8%)	(0.8%)	(0)		(0.9%)	Cases

#### JAMAICA:

Table 1. Summary as at end of Epidemiological Week 42

Confirmed Cases	New Cases	% Change in New Cases in last 7 days	Deaths	New Deaths	% Change in New Cases in last 7 days	Weekly Positivity Rate	% Change in Weekly Positivity Rate
88,259	870	-31.1%	2,185	69	-40.5%	15.07%	-5.5%

**TRENDS IN CASES & DEATHS:** As of 28 October 2021, Jamaica had **88,775 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **109 new cases** confirmed in the past 24 hours. There are currently 28,397 cases (32.0% of confirmed cases) in isolation across the island. New cases have decreased by 31.1% and new deaths have increased by 40.5% during EW 42. There are **2,223 COVID-19 related deaths** as at 28 October 2021. A total of 639,099 samples have been tested at the laboratory with a daily positivity rate of 12.2% and a cumulative positivity rate of 13.9%.

**SEX & AGE DISTRIBUTION OF CASES & DEATHS:** As of 26 October 2021, the highest burden of total confirmed cases remains within the 20-29 years and 30-39 years age groups, accounting for 18.7% and 18.0% of cases respectively. with the mean age at 41.2±20.6yrs. Females were primarily affected compared to males, with a male to female ratio (M:F) of 1:1.3; while the males accounted for more deaths, with a M:F ratio of 1:0.9.

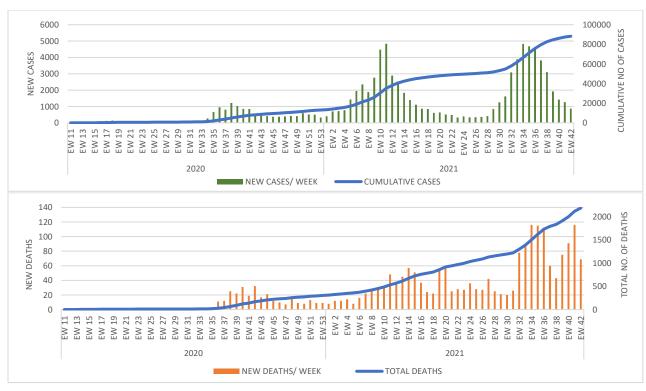
Figures 1&2. Cases and Deaths by Epidemiological Week.

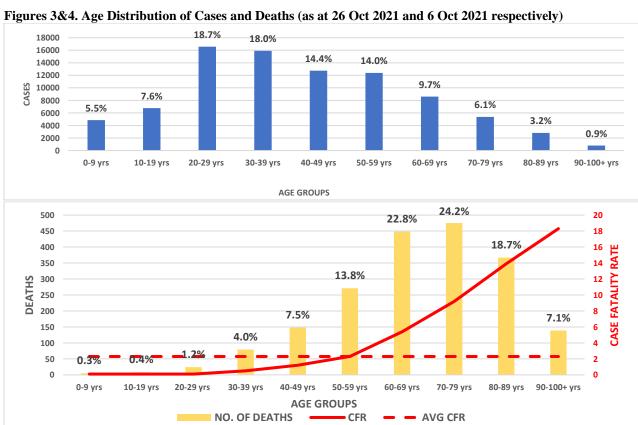
iii Cases and deaths as at 26 Oct 2021.



<sup>&</sup>lt;sup>i</sup> Cases and deaths as at 28 Oct 2021.

<sup>&</sup>quot;Cases and deaths as at 25 Oct 2021.





**GEOGRAPHICAL DISTRIBUTION:** Data for 26 October 2021 highlighted that Kingston & St. Andrew (24.7%, n=21,898) and St. Catherine (18.6%, n=16,456) had the highest cumulative number of cases. The highest proportions of active cases for this week, however, were found in the parishes of St. Catherine and St. James (14.4% and 14.0% respectively). Total infection rates were the highest in the western parishes of St. James and Trelawny, accounting for 4,661 and 4,322 cases per 100,000 population respectively. The total rates of active infections, however for this reporting period were in the eastern parishes of St. Thomas (89.5 cases per 100,000 population) and St. Catherine (86.9 cases per 100,000 population).

COVID19 Cases by Parish

COVID19 Rates by Pari

Figures 5 & 6. COVID-19 Parish Distribution and Rates (cases per 100,000 population) of total and active cases (26 Oct 2021)

**HOSPITALIZATIONS:** As of 28 October 2021, hospitalizations decreased by approximately 14.2% since the last reporting period (21 Oct 2021). There was a total of 291 hospitalizations (1.0% of active cases), of which approximately 21.6% (n=63) were moderately ill, 7.6% (n=22) severely ill, and 6.2% (n=18) were critically ill. The average hospital occupancy rate as of 26 October 2021 has improved to 53.8%.

#### **GOVERNMENT RESPONSE**

The Disaster Risk Management (Enforcement Measures) (No. 10) (Amendment) Order, 2021 is in effect since 25 September 2021.

https://moj.gov.jm/sites/default/files/DRM2021No10A.pdf

As of 11 October 2021, the Disaster Risk Management (Enforcement Measures) (No.10) (Amendment) (no.2) Order, 2021 is also in effect.

HEALTH &

https://moj.gov.jm/sites/default/files/DRM2021No10A2.pdf

New measures will be in effect as of 29 October 2021 and will be provided once gazetted. All Public Health and Social measures and controlled measures for entry into Jamaica remain in place until 28 October 2021.

# **BERMUDA:**

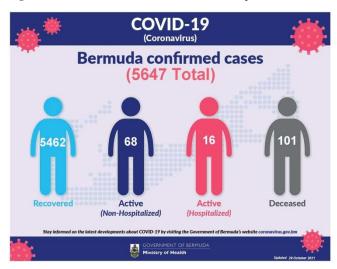
**TRENDS IN CASES & DEATHS:** As of 25 October 2021, Bermuda reported 5,647 confirmed cases of Coronavirus Disease 2019 (COVID-19) with 10 new cases within the last 24-48hr period. There were 84 active cases (1.5% of total cases), a reduction of 63.3% since the last report (21 Oct 2021). Of the active cases, 16 (19.0%) are hospitalized, representing a relative increase

of this proportion by 49.6% since the last reporting period (21 Oct 2021). New cases and deaths have decreased by 18.4% and 100% respectively between EW 40 and EW 41.

Table 2. Summary as at end of Epidemiological Week 42.

Confirmed Cases	New Cases in last 7	% Change in New Cases in	Deaths	New Deaths in last	% Change in Deaths in last 7 days	Positivity Rate	% Change in Positivity Rate in last 7 days
	days	last 7 days		7 days			
5,584	40	-18.4%	81	3	N/A	0.3%	-25.0%

Figures 7. Cases and deaths as of 25 Oct 2021 (updated 29 Oct 2021).



#### **GOVERNMENT RESPONSE:**

All travellers to Bermuda must follow the requirements set out in the Quarantine (COVID-19) (No.3) Order 2020.

http://www.bermudalaws.bm/laws/Consolidated%20Laws/Quarantine%20(COVID-19)%20(No.%203)%20Order%202020.pdf

Training should be provided for all employees and management on Infection Prevention & Control. As a result the Department of Health, has produced the following mandatory training course: https://www.gov.bm/infection-prevention-and-control-training

# **CAYMAN ISLANDS:**

TRENDS IN CASES & DEATHS: As of 26 Oct 2021, Cayman had 1,496 confirmed cases of Coronavirus Disease 2019 (COVID-19) with 126 new cases reported in the last 24 hrs. Cases ranged between 6 to 85 years of age, with a male to female distribution of 53% and 47% respectively (M:F ratio of 1:0.9). Active cases have increased by 101.9% since the last reporting period (of 21 October 2021) and now comprise 34.8% of confirmed cases. A total of 2 COVID-19

**related deaths have been recorded since March 2020**, with no new deaths occurring within the last 24hrs. A total of **163,381** samples were tested for COVID-19, with an **overall positivity rate of 0.9%**.

Table 3. Summary as at end of Epidemiological Week 42.

Confirmed	New	% Change	Deaths	New	% Change	Positivity	% Change in
Cases	Cases in	in New		Deaths in	in Deaths	Rate	Positivity Rate
	last 7	Cases in		last 7 days	in last 7		in last 7 days
	days	last 7 days			days		
1,292	222	+276.3%	2	0	0%	4.0%	+90.5%

Figure 8. Daily COVID-19 Summary.



#### **GOVERNMENT RESPONSE**

On 7 October 2021, the premier advised that there would be early mid-term closure of Government schools in an effort to both mitigate the absence of several secondary school level teachers due to mandatory quarantine requirements and curtail the transmission of the virus within the school community.

On 24 September 2021, the Control and Management of COVID-19 Regulations, 2021 under the Public Health Act came into Force.

http://gazettes.gov.ky/portal/pls/portal/docs/1/13108558.PDF

#### **PAHO CO UPDATE:**

#### PILLAR 1 - COORDINATION, PLANNING, FINANCING, AND MONITORING

- a. PAHO CO submitted the revised proposal for COVID-19 response funding within the US American Rescue Plan project of US2.8 million dollars, in collaboration with the MOHW, Jamaica and the USAID Mission Team.
- b. Derails of the budget for the EU RESEMBID/Expertise France project proposal for CYM were discussed with the senior MOH team in CYM.

- c. PAHO CO completed the obligation of PAHO Assessed Contributions for COVID-19 response expiring in December 2021. Preparations for carry-over of funds to 2022 was completed as determined by Grant agreements.
- d. PAHO CO remains embedded in the MOHW, JAM EOC and provides 24-hr technical support and guidance, including at the daily EOC briefing meeting.
- e. PAHO CO maintained the technical lead for Health for the COVID-19 response within the UNCT and the Government of Jamaica (GOJ) system.

# PILLAR 3 – SURVEILLANCE, EPIDEMIOLOGICAL INVESTIGATION, CONTACT TRACING & ADJUSTMENT OF PUBLIC HEALTH AND SOCIAL MEASURES

 PAHO CO provided reminders to the IHR NFP, JAM on follow-up of information received from PAHO IHR on contacts of travellers after departure from Jamaica – during the week.

# PILLAR 4 – POINTS OF ENTRY, INTERNATIONAL TRAVEL AND TRANSPORT, AND MASS GATHERINGS

a. Plans were finalized with the MOHW IHR Director for the IHR Assessments of the Contingent Designated Points of Entry, from 8-11 November 2021 and the meeting of the IHR Stakeholders Advisory Group on 25 November 2021. – 27 October 2021.

#### PILLAR 7 – CASE MANAGEMENT, CLINICAL OPERATIONS AND THERAPEUTICS

a. Procurement of medical equipment and supplies and HEOC equipment was finalized utilizing MOHW approved priority list – 28 October 2021.

#### **PILLAR 10 - VACCINATION**

- a. Terms of Reference were finalized for a Health Records Technician (Medical Coder) to facilitate data retrieval at the KPH for a retrospective study.
- b. On-going technical guidance was provided for the MOHW, Jamaica on vaccine supply and delivery.

# **GAPS / CHALLENGES**

- 1. Vaccine hesitancy remains a challenge in Jamaica including among health care workers. Access to vaccination sites has been improved this week with hospitals being designated as vaccination sites and huse to house vaccination.
- 2. The MOHW, Jamaica needs to update the health sector COVID-19 program, protocols, and budget to guide support for the response.

#### **NEEDS**

#### 1. JAMAICA

- a. Health EOC strengthening.
- b. Support for National Laboratory Services long-term development plan.
- c. PPEs, laboratory equipment, reagents, and supplies.
- d. Medical equipment and supplies for isolation and quarantine facilities, wards, and rooms.
- e. Strengthening of pandemic preparedness planning.

# 2. BERMUDA

a. Strengthening of the Health Disaster Management Programme.

# 3. CAYMAN ISLANDS

a. Strengthening of the Health Disaster Management Programme and surveillance were noted as priorities to enhance the COVID-19 and any other responses for health emergencies.