

COVID-19

PAHO JAMAICA CO EOC – COVID-19 SITUATION REPORT #484
13 JANUARY 2022 (as at 6:00 p.m.)
JAMAICA, BERMUDA AND THE CAYMAN ISLANDS

EPIDEMIOLOGICAL SUMMARY

Country	Confirmed Cases (New within 24hrs)	Active Cases (% of Total Cases)	Hospitalized (% Active Cases)	Deaths (New within 24hrs)	Case Fatality Rate (%)	Total Tests (Cum. Positivity Rate)	Transmission
Jamaica ⁱ	108,983 (1,262)	12,587 (11.5%)	392 (3.1%)	2,517 (3)	2.3%	747,021 (14.6%)	Community Transmission
Bermuda ⁱⁱ	8,541 (258)	1,882 (22.0%)	10 (0.5%)	110 (0)	1.3%	728,035 (1.2%)	Community Transmission
Cayman ⁱⁱⁱ Islands	11,666 (440)	3,559 (30.5%)	6 (0.2%)	14 (2)	0.1%	Pending	Community Transmission

JAMAICA:

Table 1. Summary as at end of Epidemiological Week 1 (2 – 8 Jan 2022)

Confirmed Cases	New Cases	% Change in New Cases in last 7 days	Deaths	New Deaths	% Change in New Deaths in last 7 days	Weekly Positivity Rate	% Change in Weekly Positivity Rate
102,505	7,328	+196.4%	2,499	23	+76.9%	45.0%	+69.2%

TRENDS IN CASES & DEATHS: As of 12 January 2022, Jamaica had **108,983 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **1,262 new cases** confirmed in the past 24 hours. There are currently 12,587 cases (11.5% of confirmed cases) in isolation across the island. New cases and deaths have increased by 196.4% and 76.9% respectively during EW 1. There are **2,517 COVID-19 related deaths** as of 12 January 2022, with 3 deaths occurring within the last 24 hours. A total of 747,021 samples were tested at the laboratory with a **daily positivity rate of 68.6%** and a cumulative positivity rate of 14.6%.

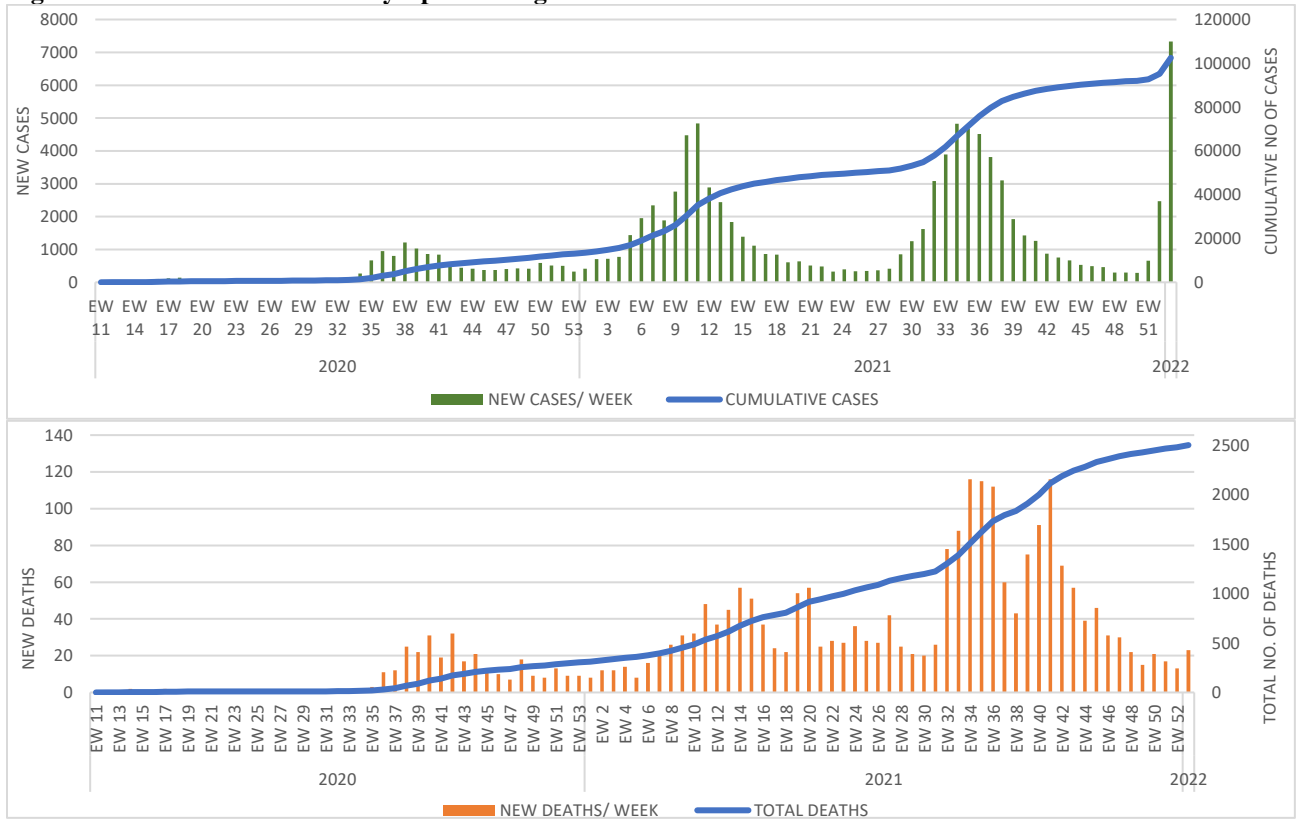
SEX & AGE DISTRIBUTION OF CASES & DEATHS: As of 10 January 2022, the highest burden of total confirmed cases remains within the 20-29 years and 30-39 years age groups, accounting for 19.6% and 18.3% of cases respectively with the mean age falling marginally to 40.7±20.5yrs (from 41.0±20.6yrs during the previous reporting period of 6 January 2022). 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.

ⁱ Cases and deaths as at 12 Jan 2022, reported 13 Jan 2022.

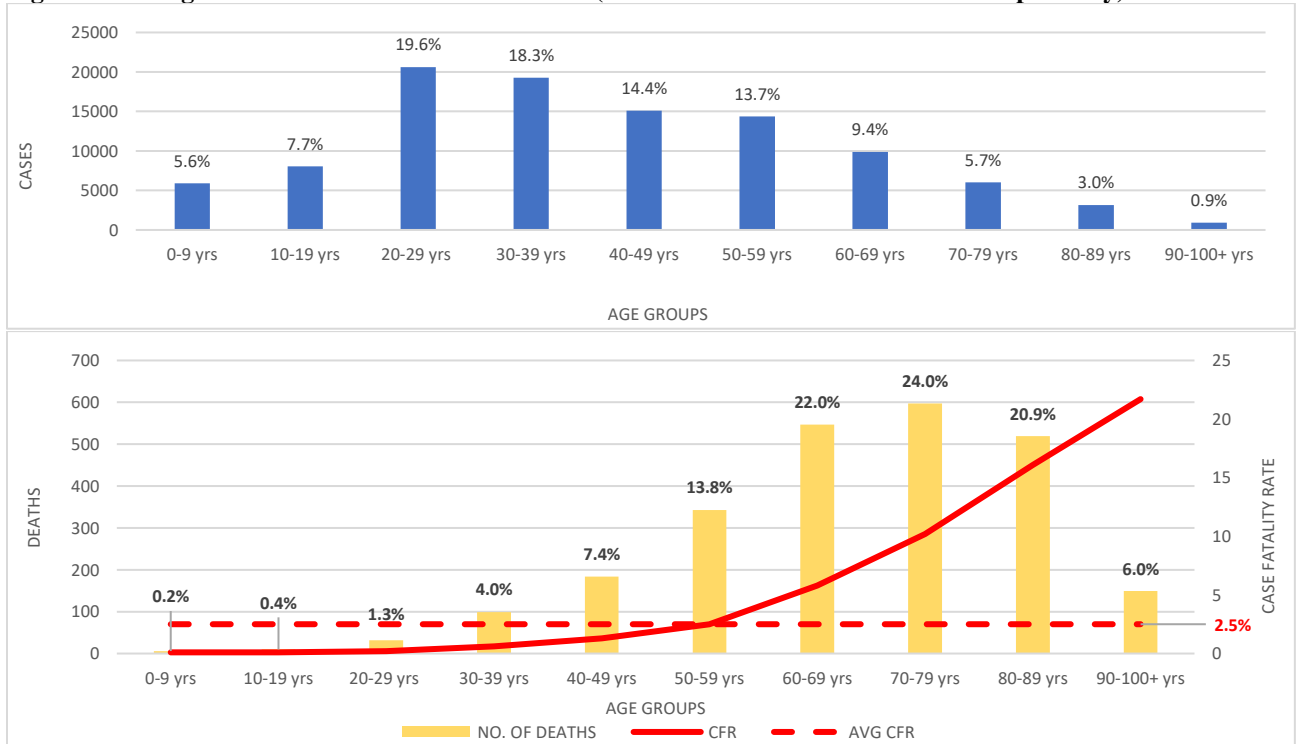
ⁱⁱ Cases and deaths as at 10 Jan 2022, reported 13 Jan 2022.

ⁱⁱⁱ Cases and deaths as at 11 Jan 2022.

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



Figures 3&4. Age Distribution of Cases and Deaths (as at 10 Jan 2022 and 5 Jan 2022 respectively).



GEOGRAPHICAL DISTRIBUTION: Data for 13 January 2022 highlighted that Kingston & St. Andrew (26.8%, n=29,221) and St. Catherine (18.1%, n=19,452) had the highest cumulative number of cases and new cases within the last 24 hours (35.3% and 21.9% respectively). The highest proportions of active cases for this week were found in the parishes of Kingston & St. Andrew, St. Catherine, and St. Ann (19.0%, 13.1% and 12.9% respectively). The total rates of active infections for this reporting period were highest in the parishes of Kingston & St. Andrew (603.2 per 100,000 population) and St. James (481.8 cases per 100,000 population).

Figures 5 & 6. COVID-19 Parish Distribution and Rates (cases per 100,000 population) of total and active cases (10 Jan 2022)

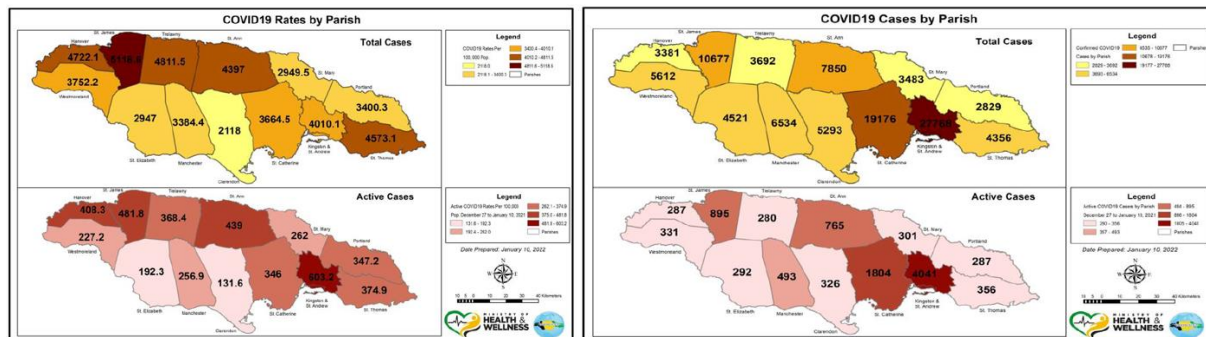
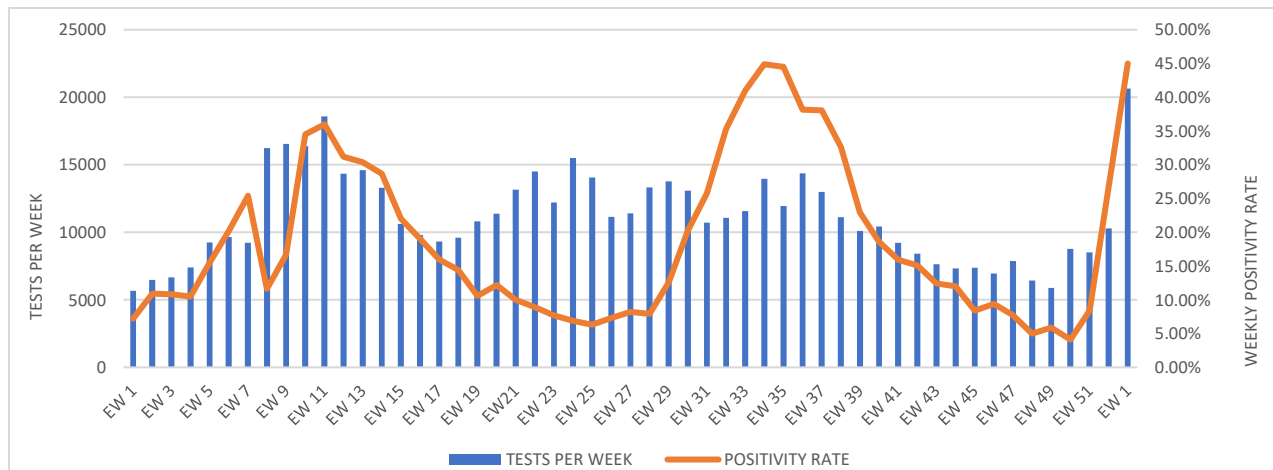


Figure 7. COVID-19 testing and Positivity Data by Epidemiological Week.



HOSPITALIZATIONS: As of 13 January 2022, there was a total of 392 hospitalizations (3.1% of active cases), with **average figures increasing by 118.4% between EW 52 (n=98) and EW 1 (n=214)**. Of the hospitalized cases, 21.7% (n=85) were moderately ill, 9.4% (n=37) severely ill, and 2.3% (n=9) were critically ill. Disaggregated hospitalization data from 10 January 2022 indicated that 90% of critically ill, 100% of severely ill and moderately ill cases were unvaccinated. On 10 January 2022, the average hospital occupancy rate as at 66.1%, with 100% of COVID-19 designated ICU beds being available.

GOVERNMENT RESPONSE

All public primary and secondary schools were officially re-opened by Government on 3 January 2022, though the majority had not achieved the target of 65% vaccination of the school population.

The Government has extended the current COVID-19 containment measures for a further two weeks until 27 January 2022. The nightly curfew remains from 10:00 p.m. to 5:00 a.m. All other protocols remain the same, including for Public Health and Social Measures and arrival protocols.

The Disaster Risk Management (Enforcement Measures) (No. 12) Order, 2021 is in effect since 10 December 2021.

<https://moj.gov.jm/sites/default/files/DRM2021No12.pdf>

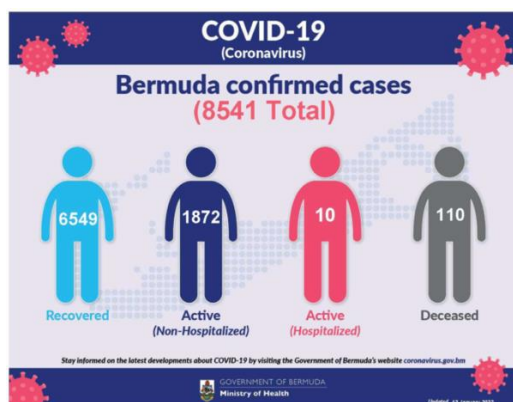
BERMUDA:

TRENDS IN CASES & DEATHS: As of 10 Jan 2022, (reported on 13 Jan 2022), Bermuda had 8,541 confirmed cases of Coronavirus Disease 2019 (COVID-19) with 258 new cases within the last 24-72hr period. There were 1,882 active cases (22.0% of total cases) and 10 hospitalized cases (0.5% of active cases), with one ICU admission. New cases increased by 73.4% and there were no new deaths for EW 1.

Table 2. Summary as at end of Epidemiological Week 1.

Confirmed Cases	New Cases in last 7 days	% Change in New Cases in last 7 days	Deaths	New Deaths in last 7 days	% Change in Deaths in last 7 days	Positivity Rate	% Change in Positivity Rate in last 7 days
8,183	1,247	+73.4%	110	0	0%	8.2%	+74.5%

Figure 8. Cases and deaths as of 10 Jan 2022 (reported 13 Jan 2022).



GOVERNMENT RESPONSE:

There is a curfew in effect between 12:30 a.m. and 5:00 a.m.

Effective 23 December 2021:

- Gatherings are restricted to groups of no more than 20 people.
- The Minister of Youth, Culture and Sport may grant a Large Group Exemption permitting more than 20 persons to assemble, provided appropriate physical distancing is maintained and relevant guidance is followed at all times.
- Exemptions will be subject to the [Standard Large Group Conditions](#), including a limit of 50% capacity at any venue to enter the event. Additional conditions may be imposed by the Minister of Youth, Culture and Sport.

Additional information can be found at:

<https://www.gov.bm/covid-19-guidance-events-and-gatherings>

CAYMAN ISLANDS:

TRENDS IN CASES & DEATHS: As of 11 Jan 2022, Cayman had **11,666 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **440 new cases** reported in the last 24 hrs. Active cases now comprise 30.5% of confirmed cases. A **total of 14 COVID-19 related deaths have been recorded since March 2020**, with two new deaths occurring within the last 24-72hrs.

Table 3. Summary as at end of Epidemiological Week 1.

Confirmed Cases	New Cases in last 7 days	% Change in New Cases in last 7 days	Deaths	New Deaths in last 7 days	% Change in Deaths in last 7 days	Positivity Rate of PCR tests	% Change in Positivity Rate in PCR tests in the last 7 days
11,288	2,208	+290.1%	14	2	+100%	22.6%	+8.1%

Figure 9. Daily COVID-19 Summary.



GOVERNMENT RESPONSE

New travel rules are in effect with the travel testing window being 24 hours. Accepted tests include lateral flow tests.

PAHO CO UPDATE:

PILLAR 1 – COORDINATION, PLANNING, FINANCING, AND MONITORING

- a. PAHO CO provided Ministries of Health of JAM, BMU and CYM with updated information, including the WHO COVID-19 Weekly Epidemiological Update – 11 January 2022.
- b. PAHO CO continued the procurement of items for waste management for the vaccination programme – 11 January 2022.
- c. PAHO CO is awaiting feedback on the approval of the EU RESEMBID/Expertise France project proposal for the Cayman Islands. – 13 January 2022.
- d. PAHO CO continued dialogue with MOHW and partners to finalize arrangements for handing-over events in January 2022, with the one for donations from Germany scheduled for 18 January 2022 – 12 January 2022.
- e. PAHO CO remains embedded in the MOHW, JAM EOC and provides 24-hr technical support and guidance, including at the weekly EOC briefing meeting.
- f. PAHO CO maintained the technical lead for Health for the COVID-19 response within the UNCT and the Government of Jamaica (GOJ) system.

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

- a. PAHO CO in collaboration with MOHW, JAM finalized plans for a Special Meeting of the IHR Stakeholders Advisory Group on 14 January 2022 to start the preparation of the IHR State Party Self-Assessment Annual Report- 13 January 2022.
- b. PAHO CO continued to provide reminders to the IHR NFP, JAM on follow-up of information received from PAHO IHR on travellers after departure from Jamaica and the provision of reports – 13 January 2022.

PILLAR 7 – CASE MANAGEMENT, CLINICAL OPERATIONS AND THERAPEUTICS

- a. Arrangements for distribution of medical equipment and supplies and HEOC equipment for JAM, BMU and CYM continued based on approved lists. – 13 January 2022.

PILLAR 9: MAINTAINING ESSENTIAL HEALTH SERVICES AND SYSTEMS

- a. The MOHW, JAM advised that 27 January 2022 is the proposed date of the Handing-Over Ceremony for the St. Ann’s Bay Health Centre within the Smart Health Care Facilities project – 11 January 2022.
- b. MOHW, JAM provided a request for technical cooperation and support for core health emergency preparedness and response programmes, including HEOC and MCM capacity building, following a planning meeting with PAHO CO in December 2021–6 January 2022.

PILLAR 10 - VACCINATION

- a. On-going technical guidance was provided for the MOHW, Jamaica on vaccine supply, storage and delivery.

GAPS / CHALLENGES

1. The absorptive capacity within the MOHW for the implementation of multiple projects needs strengthening to ensure enhanced programme and project management.

2. Vaccine coverage remains low in Jamaica with a lack of evidence of the causation for various population groups, whether vaccine hesitancy, access and/or other reasons.
3. The COVID-19 pandemic has delayed review, strengthening and implementation of the health emergency / disaster risk management programmes, including plans for Health EOC capacity building to include the Medical Information and Coordination Cell (CICOM) for the Emergency Medical Team, for Jamaica, Bermuda and Cayman.
4. Strategic risk assessment to guide the priorities of the emergency and disaster management programmes has not been achieved in Jamaica, Bermuda and the Cayman Islands and should be addressed with urgency, in 2022.
5. Intra Action Reviews have not been conducted in JAM, BMU and CYM and will be arranged for the first semester in 2022 to ensure that recommendation for strengthening pandemic preparedness and response can be provided based on lessons identified for the COVID-19 response.

NEEDS

1. JAMAICA

- a. Health EOC strengthening.
- b. Assessment of causation for low COVID-19 vaccination coverage to guide implementation of appropriate strategies
- c. Support for National Laboratory Services long-term development plan.
- d. PPEs, laboratory equipment, reagents, and supplies.
- e. Medical equipment and supplies for isolation and quarantine facilities, wards, and rooms.
- f. Strengthening of pandemic preparedness planning.

2. BERMUDA

- a. Strengthening of the Health Disaster Management Programme and Health EOC establishment and management

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.
- b. Strengthening of the Health EOC establishment and management.