

COVID-19

PAHO JAMAICA CO EOC – COVID-19 SITUATION REPORT #504
2 JUNE 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	138,110 (386)	2,962 (2.1%)	124 (4.2%)	3,068 (4)	2.2%	1,090,688 (12.7%)	Community Transmission
Bermuda ⁱⁱ	15,085 (46)	385 (2.6%)	13 (3.4%)	138 (0)	0.9%	922,306 (1.6%)	Community Transmission
Cayman Islands ⁱⁱⁱ	Pending (79)	1,423 (n/a)	6 (0.4%)	28 (0)	0.1%	Pending	Community Transmission

JAMAICA:

Table 1. Summary as at end of Epidemiological Week 21 (22 – 28 May 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
136,589	1,929	-5.7%	3,055	23	-17.9%	27.7%	-6.1%

TRENDS IN CASES & DEATHS: On 2 June 2022, Jamaica had **138,110 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **386 new cases** confirmed in the past 24 hours. Active cases accounted for 2.1% of confirmed cases. New cases and deaths have decreased by 5.7% and 17.9%, respectively during EW 21. There are currently **3,068 COVID-19 related deaths**, with 4 deaths occurring within the last 24 hours. Since 1 March 2021, unvaccinated cases accounted for 97.7% of deaths. A total of 1,090,688 samples were tested at the laboratory with a **daily positivity rate of 29.9%** and a cumulative positivity rate of 12.7%.

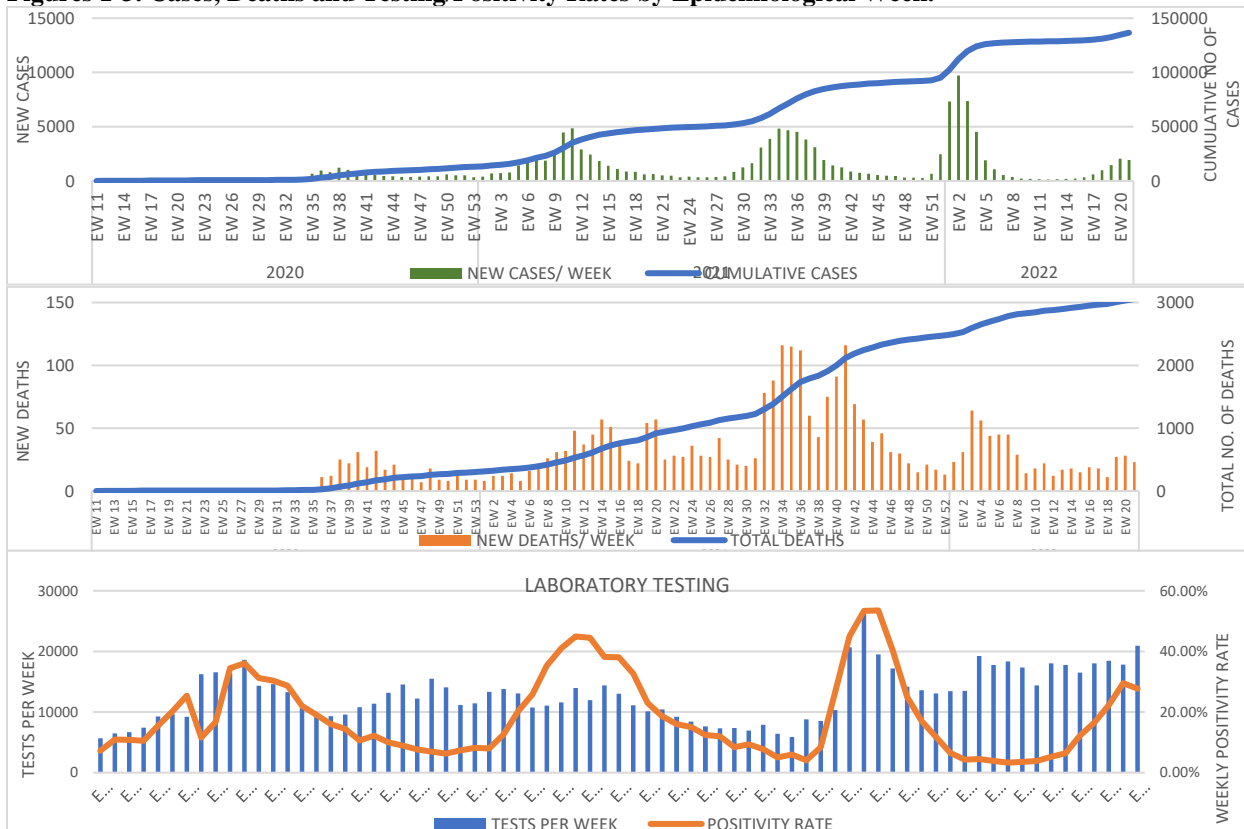
SEX & AGE DISTRIBUTION OF CASES & DEATHS: Persons within the 20-29 years and 30-39 years age groups account for the highest burden of total confirmed cases. These groups accounted for 19.5% and 18.5% of total cases respectively, with a mean age of 40.5±20.4yrs. Females were primarily affected compared to males, with a male to female ratio (M:F) of 1:1.4; while the males accounted for more deaths, with a M:F ratio of 1:0.9.

ⁱ Cases and deaths as at 2 June 2022, reported 3 June 2022.

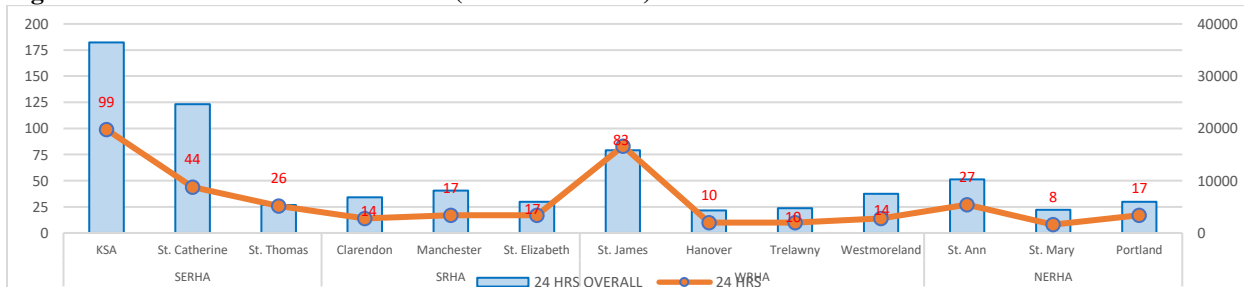
ⁱⁱ Cases and deaths as at 30 May 2022, reported 1 June 2022.

ⁱⁱⁱ Cases and deaths as at 31 May 2022, reported 1 June 2022.

Figures 1-3. Cases, Deaths and Testing/Positivity Rates by Epidemiological Week.



Figures 4. Parish Distribution of Cases (24hrs and Total) as of 1 June 2022.



GEOGRAPHICAL DISTRIBUTION: Data for 2 June 2022 highlighted that Kingston & St. Andrew (26.0%, n=36,475) and St. Catherine (17.6%, n=24,662) had the highest cumulative number of cases. The greater proportion of new cases within 24 hours was detected in Kingston & St. Andrew (25.6%) and St. James (21.5%). Fatality data indicated that unvaccinated cases accounted for 97.7% of deaths. Higher than average case fatality rates were observed in the Southern and Western Regional Health Authorities, most notably in the parish of St. Elizabeth.

HOSPITALIZATIONS: On 2 June 2022, there were 124 hospitalized cases, representing 4.2% of active cases. Of these cases, 23.4% (n=29) were moderately ill, 4.0% (n=5) were severely ill, and

4.0% (n=5) were critically ill. **Average hospitalization figures decreased by 45.7% between EW 20 (n=81) and EW 21 (n=118).**

GOVERNMENT RESPONSE

On 20 May 2022, the Office of the Prime Minister posted the following excerpt from a speech by the Prime Minister:

“I am urging all Jamaicans to act responsibly; by now we know what to do. If you have not yet gotten your vaccine, I encourage you to do so. Vaccine sites are still open, and vaccination is ongoing, get vaccinated. Wear your mask, particularly indoors, but wear them generally, practice social distancing and sanitize.”

The Prime Minister was speaking at the Handing over ceremony of a New Social Housing Project (NSHP) in St. James East Central.

<https://opm.gov.jm/news/prime-minister-andrew-holness-says-mask-requirement-to-be-re-instituted/>

BERMUDA:

TRENDS IN CASES & DEATHS:

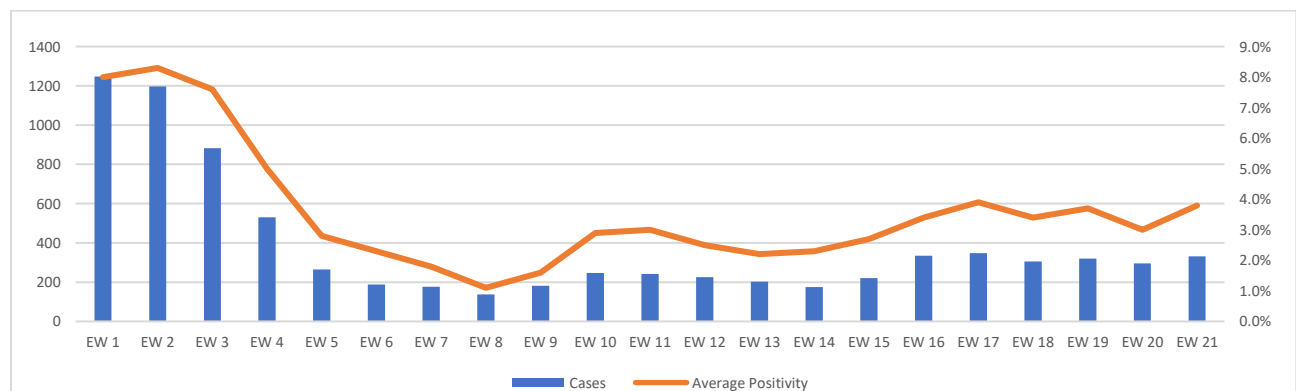
On 30 Jun 2022 Bermuda confirmed **15,085 cases** of Coronavirus Disease 2019, with **46 new cases** within the last 24-72hr period. There were 385 active cases (2.6% of total cases), 13 hospitalized cases (3.4% of active cases), and 1 case admitted to ICU. New cases have increased by 12.2% during EW 21.



Table 2. Summary as at end of Epidemiological Week 21 (22 – 28 May 2022).

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
14,987	331	+12.2%	138	0	-100.0%	3.7%	+27.6%

Figure 5. Cases, Positivity Rates by Epidemiological Week (2 Jan – 28 May 2022).



GOVERNMENT RESPONSE:

On 1 June 2022, the Minister of Health stressed the need to maintain the focus on the testing status of students, as below:

The Minister said, “I wish to reiterate an important reminder to parents who are using the Saliva Screening Programme for their school-age children. The Ministry notes that there are concerns that positive cases identified through the Saliva Screening Programme are not being reported to respective schools by their parents.

“Parents and guardians should be reporting their child’s positive result to the school. This will allow schools to identify close and casual contacts to reduce the risk of transmission and illness. It should be noted that a child’s positive status will not be revealed to anyone other than the required school staff.”

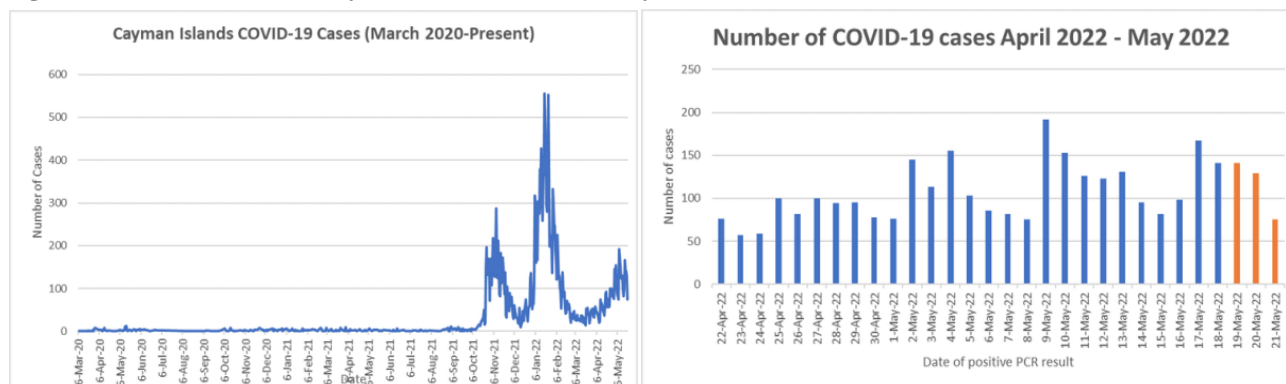
CAYMAN ISLANDS:

TRENDS IN CASES & DEATHS: On 31 May 2022 (reported 1 June 2022), Cayman Islands reported **79 new confirmed cases** of Coronavirus Disease 2019 (COVID-19) within 24hrs. A total of **833 new cases** were reported during EW 20 (15 – 21 May 2022). A total of **28 COVID-19 related deaths** were recorded since March 2020, with **no deaths occurring within the last 24-48hrs**. There were 6 hospitalized cases, with no case receiving treatment in the Intensive Care Unit (ICU).

Table 3. Summary as at end of Epidemiological Week 20 (15 – 21 May 2022).

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
25,318	833	-6.9%	28	0	0%	31.0%	-11.4%

Figures 11 & 12. Trend in daily cases Mar 2020 – 21 May 2022.



GOVERNMENT RESPONSE

As of 27 May 2022, the Government announced that no more than 750 people may gather in public indoors. Places not exempt from public meetings (like a private home) may allow up to 750 persons to gather indoors. There is no longer a public gathering limit for the outdoors.

PAHO CO UPDATE:

PILLAR 1 – COORDINATION, PLANNING, FINANCING, AND MONITORING

- a. PAHO CO continued the implementation of COVID-19 response activities within 8 COVID-19 Awards / Grants and Contributions.
 - i. USG Contributions: PAHO CO continued implementation with procurement of cold chain equipment underway in collaboration with PRO, CDC – 3 June 2022
 - ii. USAID GH-ARP and 2022 Supplement: PAHO CO continued with procurement of equipment and supplies for vaccination and clinical management in collaboration with PRO, WDC. MOHW will provide specifications for 11 generators by the end of June 2022, following findings of electrical assessments. – 3 June 2022.
 - iii. US CDC COAG: PAHO CO reviewed the MOHW list of medical equipment and supplies to be purchased with funds re-directed from ambulance procurement and awaits technical specifications from MOHW. – 3 June 2022.
 - iv. Canada Vaccination project: The work plan was revised with implementation of activities, such as procurement of 30 tablets and salary payment for vaccination consultant and communication consultant. Procurement of cold chain equipment is underway – 3 June 2022.
 - v. CYM - EU RESEMBID / Expertise France project – The project is awaiting approval from the donors and PAHO Legal Team.
- b. PAHO CO remains embedded in the MOHW, JAM EOC and provides 24-hr technical support and guidance, including at the weekly EOC briefing meeting.
- c. 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 briefed the IHR Stakeholders Advisory Group on the current situation globally and regionally on the COVID-19 pandemic and the multi-country monkeypox outbreak in non-endemic countries. – 31 May 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 – 3 June 2022.

PILLAR 7 – CASE MANAGEMENT, CLINICAL OPERATIONS AND THERAPEUTICS

- a. PAHO CO collaborated with MOHW on the acceptance of the allocation of Nirmatrelvir-Ritonavir – 3 June 2022.

PILLAR 9: MAINTAINING ESSENTIAL HEALTH SERVICES AND SYSTEMS

- a. Smart Health Care Facilities Project.
 - a. Santa Cruz Health Centre: The Pre-Monthly Progress Meeting Site Visit was held on 1 June 2022. The report will follow.
 - b. Port Antonio Health Centre: Follow-up continued with Smart project team and MOHW on the priority activities determined during the meeting of 13 May 2022 to review progress within the Defects Liability Period. – 19 May 2022
- b. Re-scheduling continues for the technical cooperation activities requested for core health emergency preparedness and response programmes, including for the COVID-19 IHR Intra-Action Review scheduled for 19 – 21 July 2022.– 3 June 2022.

PILLAR 10 - VACCINATION

- a. PAHO CO collaborated with MOHW, JAM to plan for support of the Cold Chain and other activities related to COVID-19 vaccines. – 19 May 2022.

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

JAMAICA COUNTRY OFFICE - HIGHLIGHT

The PAHO/WHO Representative's inaugural visit to the Cayman Islands took place from 30 – 31 May 2022 to re-engage partnerships affected by the COVID-19 pandemic and bolster public health initiatives.

<https://www.paho.org/en/news/7-6-2022-pahowho-strengthens-relationship-cayman-islands>

GAPS / CHALLENGES

1. 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.
2. 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.
3. Intra Action Reviews have not been conducted in JAM, BMU and CYM and will be arranged for the second 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. Laboratory and medical equipment and supplies.
- d. 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 Health EOC establishment and management.