

COVID-19

PAHO JAMAICA CO EOC – COVID-19 SITUATION REPORT #479
9 DECEMBER 2021 (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	91,601 (23)	25,238 (27.6%)	124 (0.5%)	2,416 (1)	2.6%	680,013 (13.5%)	Community Transmission
Bermuda ⁱⁱ	5,760 (4)	31 (0.5%)	0 (0%)	106 (0)	1.8%	656,650 (0.9%)	Community Transmission
Cayman Islands ⁱⁱⁱ	7,839 (45)	3,500 (44.6%)	17 (0.5%)	9 (0)	0.1%	212,473 (3.7%)	Community Transmission

JAMAICA:

Table 1. Summary as at end of Epidemiological Week 48

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
91,469	300	-35.3%	2,410	22	-26.7%	5.00%	-35.3%

TRENDS IN CASES & DEATHS: As of 8 December 2021, Jamaica had **91,601 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **23 new cases** confirmed in the past 24 hours. There are currently 25,238 cases (27.6% of confirmed cases) in isolation across the island. New cases have decreased by 35.3%, and the number of confirmed deaths decreased by 26.7% during EW 48. There are **2,416 COVID-19 related deaths** as of 8 December 2021. A total of 680,013 samples were tested at the laboratory with a daily positivity rate of 4.4% and a cumulative positivity rate of 13.5%.

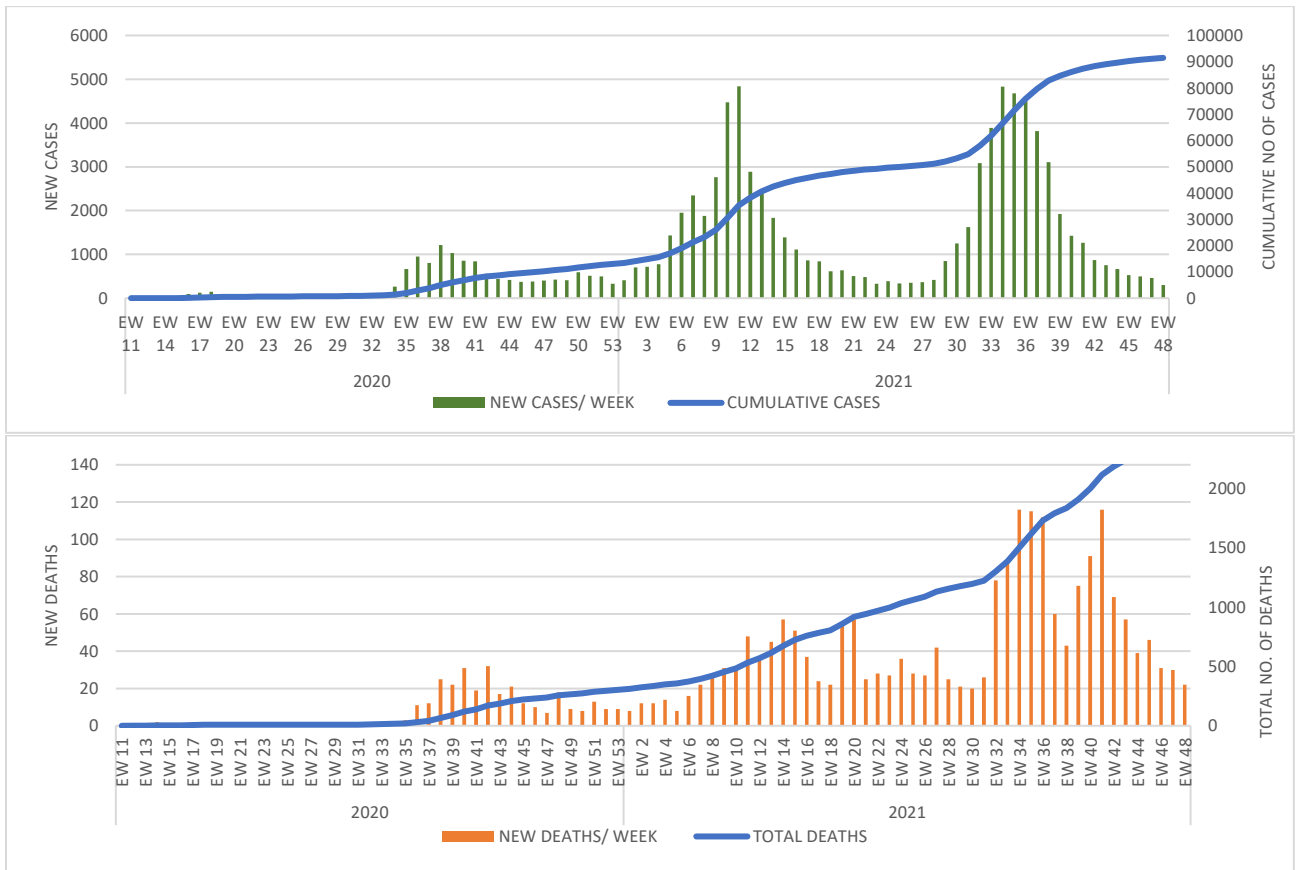
SEX & AGE DISTRIBUTION OF CASES & DEATHS: As of 7 December 2021, the highest burden of total confirmed cases remains within the 20-29 years and 30-39 years age groups, accounting for 18.6% and 17.8% of cases respectively, with the mean age at 41.3±20.7yrs. Females were primarily affected compared to 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.

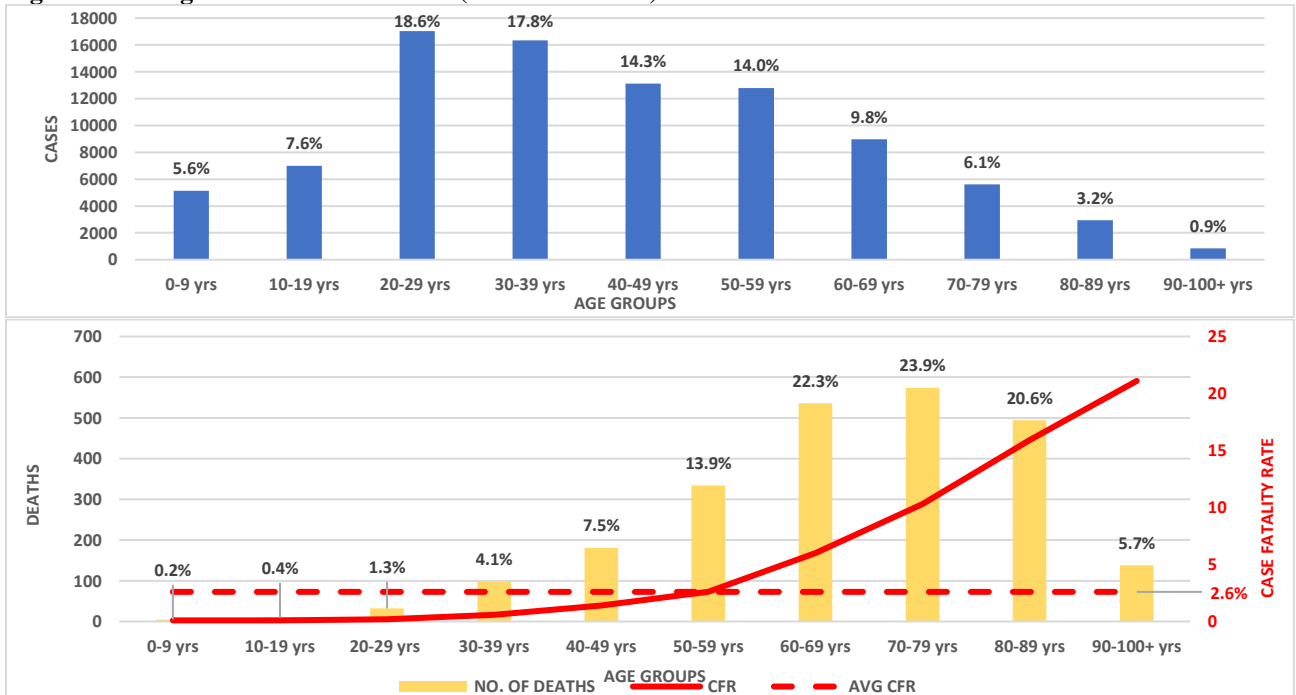
ⁱ Cases and deaths as at 8 Dec 2021, reported 9 Dec 2021.

ⁱⁱ Cases and deaths as at 4 Dec 2021, reported 7 Dec 2021.

ⁱⁱⁱ Cases and deaths as at 8 Dec 2021, reported 9 Dec 2021.

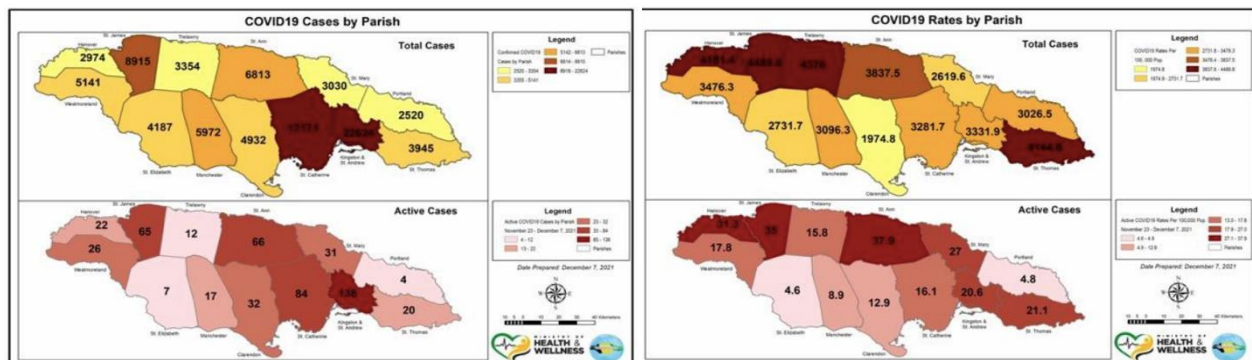


Figures 3&4. Age Distribution of Cases (as at 7 Dec 2021).



GEOGRAPHICAL DISTRIBUTION: Data for 7 December 2021 highlighted that Kingston & St. Andrew (24.7%, n=22,624) and St. Catherine (18.8%, n=17,171) had the highest cumulative number of cases. The highest proportions of active cases for this week, however, were found in the parishes of St. James and St. Ann (16.7% and 13.9% respectively). The total rates of active infections for this reporting period were highest in the parishes of St. James (38 cases per 100,000 population) and St. Ann (37.9 cases per 100,000 population).

Figures 5 & 6. COVID-19 Parish Distribution and Rates (cases per 100,000 population) of total and active cases (7 Dec 2021)



HOSPITALIZATIONS: As of 8 December 2021, hospitalizations decreased by approximately 20.5% since the last reporting period (3 December 2021). There was a total of 124 hospitalizations (0.5% of active cases). The average hospital occupancy rate as of 7 December 2021 has improved to 33.9%. Of the hospitalized cases, 22.6% (n=28) were moderately ill, 7.3% (n=9) severely ill, and 4.8% (n=6) were critically ill. Disaggregated hospitalization data from 7 December 2021 indicate that 62.5% of critically ill, 91.7% of severely ill, and 100% of moderately ill cases were unvaccinated.

GOVERNMENT RESPONSE

New measures to be introduced from 10 December 2021 – 13 January 2022, include a reduction in the time of nightly curfew, which will be from 10:00 p.m. to 5:00 a.m., except for the nights of 24 December 2021 and 31 December 2021 when the curfew will last for 4 hours from 1:00 a.m. – 5:00 a.m. Other protocols include a gathering limit of 10 persons, worship services of 100 persons and handing-over events of 100 persons. Fully vaccinated persons with a negative PCR test within 3 days of travel to Jamaica, no longer have to quarantine on arrival in Jamaica. There are no changes for other arrival protocols.

On 27 November 2021, in keeping with previous protocols once new Variants of Concern are identified and as a precaution, Jamaica has imposed restrictions on travellers from Botswana, Eswatini, Lesotho, Malawi, Mozambique, Namibia, South Africa and Zimbabwe. All persons who are not citizens or permanent residents of Jamaica and who have visited these countries within the last 14 days will not be allowed entry into the island. Additional information is available at: <https://jis.gov.jm/dr-tufton-urges-vigilance-in-light-of-omicron-variant/>

The Disaster Risk Management (Enforcement Measures) (No. 11) (Amendment) (No. 2) Order, 2021 is in effect since 27 November 2021.

<https://moj.gov.jm/sites/default/files/DRM2021No11A2.pdf>

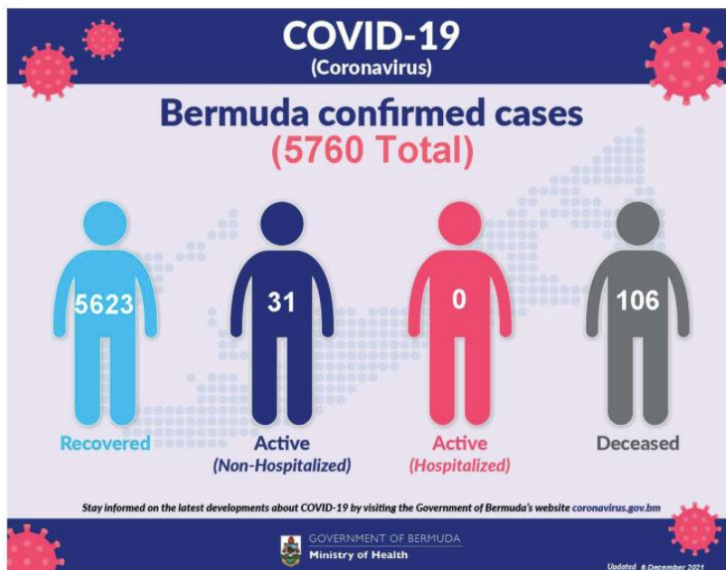
BERMUDA:

TRENDS IN CASES & DEATHS: As of 4 December 2021 (reported on 7 Dec 2021), Bermuda had 5,760 confirmed cases of Coronavirus Disease 2019 (COVID-19) with 4 new cases within the last 24-48hr period. There were 31 active cases (0.5% of total cases), and this proportion of total cases remained the same since the last report (3 Dec 2021). There were no hospitalized cases. New cases decreased by 50.0% and there were no new deaths for EW 48.

Table 2. Summary as at end of Epidemiological Week 48.

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
5,719	12	-50.0%	106	0	0%	0.1%	-50.0%

Figures 7. Cases and deaths as of 4 Dec 2021 (reported 7 Dec 2021).



GOVERNMENT RESPONSE:

On 7 December 2021, the Government announced confirmation of the first case of Variant of Concern Omicron in a traveler from overseas. All contacts are quarantined and have tested negatives to date.

There are no curfews in place.

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

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

The Government announced on 26 November 2021, that as of 29 November 2021 there will be relaxation of a number of COVID-19 restrictions, including the increase in the gathering limit from 30 to 50 persons, while special permission may be granted from Government for larger gatherings. Additional information can be found at:

<https://www.gov.bm/coronavirus>

CAYMAN ISLANDS:

TRENDS IN CASES & DEATHS: As of 8 Dec 2021, Cayman had **7,839 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **45 new cases** reported in the last 24 hrs. Active cases have decreased by 9.5% since the last reporting period (of 3 December 2021) and now comprise 44.6% of confirmed cases. A **total of 9 COVID-19 related deaths have been recorded since March 2020**, with no new deaths occurring within the last 24hrs. A total of **212,473** samples were tested for COVID-19, with a new **overall positivity rate of 3.7%**.

Table 3. Summary as at end of Epidemiological Week 48.

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
7,656	582	-40.8%	9	3	+50.0%	10.4%	-39.2%

Figure 8. Daily COVID-19 Summary.



GOVERNMENT RESPONSE

As of 20 November 2021, Cayman Islands moved to border re-opening Phase 4 criteria. This includes measures for pre-arrival PCR testing within 72 hours prior to travel date for all travellers

age 5 years and older and quarantine exit PCR for all travellers and their quarantine companions aged 4 years and older.

Who can travel: Includes all vaccinated travellers (securely and non-securely verifiable)

Further information can be found at:

<https://www.explore.gov.ky/reopening-plan>

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 on Omicron SARS-COV-2 Variant of Concern and the WHO interim guidance on the Janssen vaccine – 9 December 2021 from PAHO/WHO and responded to questions from the technical teams – 5 – 10 December 2021.
- b. PAHO CO consulted with USAID Mission team and met with them and MOHW and implementing partners to advance preparatory activities for the implementation of the USAID American Rescue Plan Project Work Plan for the COVID-19 response – 7 December 2021.
- c. PAHO CO is awaiting feedback on the approval of the EU RESEMBID/Expertise France project proposal for the Cayman Islands. – 10 December 2021.
- d. PAHO CO submitted the required documentation for carry-over of funds within the CDC Project C. COVID-19 response in Jamaica. – week of 5 December 2021.
- e. PAHO CO continued the finalization of obligations of PAHO Assessed Contributions for COVID-19 response expiring in December 2021. – 10 December 2021.
- f. PAHO CO remains embedded in the MOHW, JAM EOC and provides 24-hr technical support and guidance, including at the weekly EOC briefing meeting.
- g. PAHO CO maintained the technical lead for Health for the COVID-19 response within the UNCT and the Government of Jamaica (GOJ) system.

PILLAR 2 – RISK COMMUNICATION, COMMUNITY ENGAGEMENT AND INFODEMIC MANAGEMENT

- a. PAHO CO met with UNICEF to explore areas of collaboration on the COVID-19 Vaccination Promotion Campaign. – 8 December 2021

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

- a. PAHO CO requested an update from MOHW, JAM on National Contact Points for the National Influenza and Respiratory Viruses Programme for surveillance, National Public Health Laboratory, National Influenza Centre and Clinical Management. – due by 9 December 2021.

- b. PAHO CO continued to provide reminders to the IHR NFP, JAM on follow-up of information received from PAHO IHR on contacts of travellers after departure from Jamaica and the provision of reports – during the week.

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

- a. PAHO CO continues to request documentation for the IHR Audits at the Contingent Designated Points of Entry and an assessment of the Port of Montego Bay, from 22 - 24 November 2021

PILLAR 7 – CASE MANAGEMENT, CLINICAL OPERATIONS AND THERAPEUTICS

- a. Procurement of medical equipment and supplies and HEOC equipment continued based on approved lists received from the Ministry of Health and Wellness. – 10 December 2021.

PILLAR 9: MAINTAINING ESSENTIAL HEALTH SERVICES AND SYSTEMS

- a. For the Smart Health Care Facilities project, PAHO CO:
 - a. Briefed the new British High Commissioner to Jamaica on the Smart Health Care Facilities project, focusing on achievements in Jamaica with completion of retrofitting works at 9 of 12 facilities within the project. Links with Climate Change activities were highlighted. – 7 December 2021.
 - b. Advised the MOHW of the award of contract for retrofitting of Santa Cruz Health Centre, with the Kick-Off meeting scheduled for 17 December 2021 and works to start in mid-January 2022- week of 5 December 2021.
 - c. Provided As-built drawings to the MOHW for the St. Ann’s Bay Health Centre. The hand-over is proposed for mid – end January 2022.

PILLAR 10 - VACCINATION

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