

COVID-19

PAHO JAMAICA CO EOC – COVID-19 SITUATION REPORT #485
20 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	117,717 (773)	13,989 (11.9%)	575 (4.1%)	2,568 (7)	2.2% (2.3%)	771,129 (14.7%)	Community Transmission
Bermuda ⁱⁱ	9,766 (163)	1,886 (19.3%)	14 (0.7%)	112 (2)	1.1%	742,482 (1.3%)	Community Transmission
Cayman Islands ⁱⁱⁱ	11,666 (402)	3,967 (34.0%)	19 (0.5%)	15 (2)	0.1%	Pending	Community Transmission

JAMAICA:

Table 1. Summary as at end of Epidemiological Week 2 (9 – 15 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
116,944	9,713	+32.5%	2,530	31	+34.8%	53.4%	+18.7%

TRENDS IN CASES & DEATHS: As of 20 January 2022, Jamaica had **117,717 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **773 new cases** confirmed in the past 24 hours. There are currently 13,989 active cases (11.9% of confirmed cases) in isolation across the island. New cases and deaths have increased by 32.5% and 34.8% respectively during EW 2. There are **2,568 COVID-19 related deaths** as of 20 January 2022, with 7 deaths occurring within the last 24 hours. A total of 771,129 samples were tested at the laboratory with a **daily positivity rate of 48.2%** and a cumulative positivity rate of 14.7%.

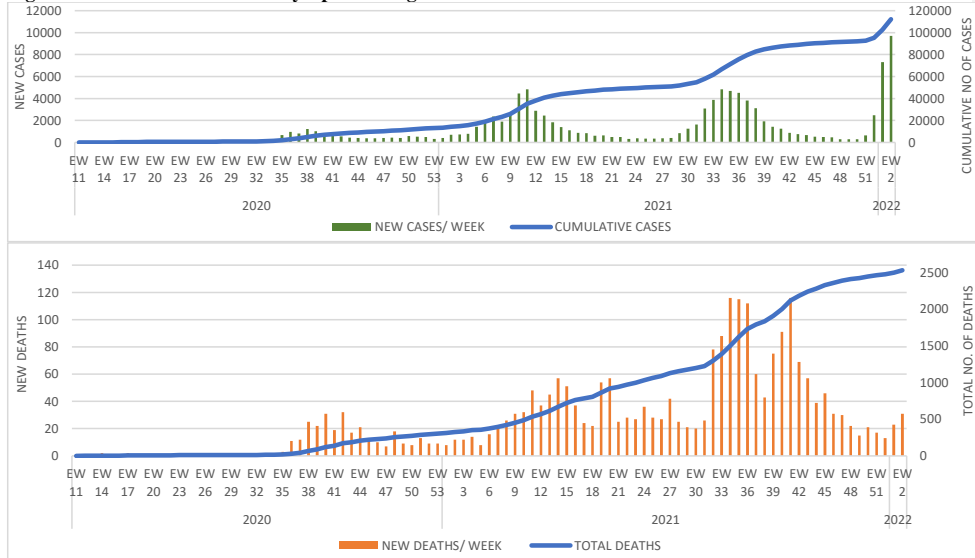
SEX & AGE DISTRIBUTION OF CASES & DEATHS: As of 19 January 2022, the highest burden of total confirmed cases remains within the 20-29 years and 30-39 years age groups, accounting for a marginally increased share of 19.9% and 18.6% of total cases respectively, with the mean age falling marginally to 40.6±20.4yrs. 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 20 Jan 2022, reported 21 Jan 2022.

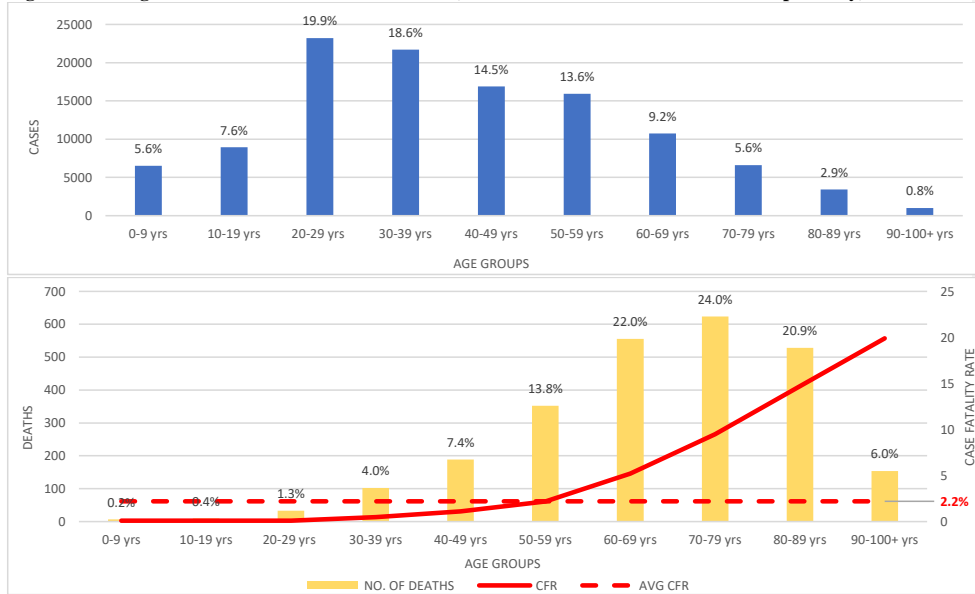
ⁱⁱ Cases and deaths as at 18 Jan 2022, reported 20 Jan 2022.

ⁱⁱⁱ Cases and deaths as at 18 Jan 2022, reported 20 Jan 2022.

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



Figures 3&4. Age Distribution of Cases and Deaths (as at 19 Jan 2022 and 18 Jan 2022 respectively).



GEOGRAPHICAL DISTRIBUTION: Data for 19 January 2022 highlighted that Kingston & St. Andrew (26.8%, n=31,429) and St. Catherine (18.2%, n=21,227) had the highest cumulative number of cases and new cases within the last 24 hours (35.6% and 16.9% respectively). The highest proportions of active cases for this week were found in the parishes of Kingston & St. Andrew, St. Catherine, and St. Ann (21.5%, 14.4% and 11.6% respectively). The total rates of active infections for this reporting period were highest in the parishes of St. James (836.6 per 100,000 population) and Kingston & St. Andrew (689.6 per 100,000 population).

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

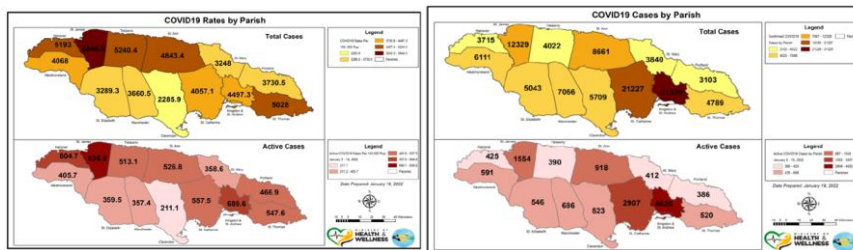
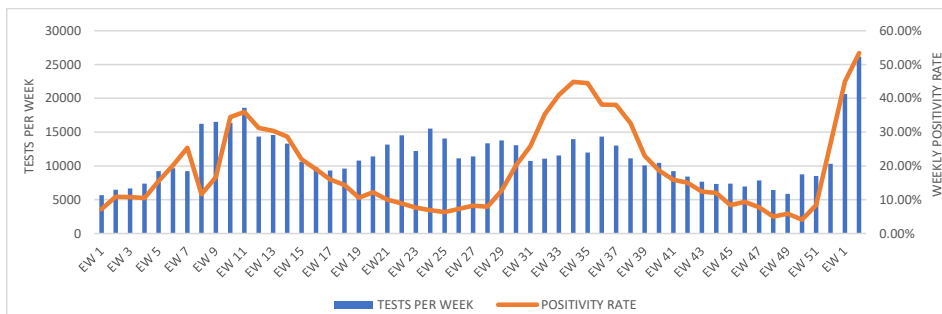


Figure 7. COVID-19 testing and Positivity Data by Epidemiological Week.



HOSPITALIZATIONS: As of 20 January 2022, there was a total of 575 hospitalizations (4.1% of active cases), with **average figures increasing by 74.3% between EW 1 (n=214) and EW 2 (n=373)**. Of the hospitalized cases, 21.7% (n=118) 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 was at 66.1%, with 100% of COVID-19 designated ICU beds being available.

GOVERNMENT RESPONSE

Effective 19 January 2022, the Ministry of Health announced that Jamaica’s public hospitals will be restricted to conducting emergency care services only. This comes as several of the island’s

hospitals face increased pressure due to the growing number of confirmed and suspected COVID-19 cases.

<https://jis.gov.jm/emergency-care-services-now-the-focus-at-hospitals/>

Field Code Changed

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>

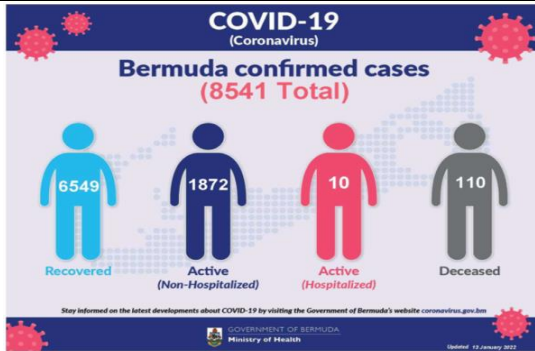
All public primary and secondary schools were officially re-opened by Government on 3 January 2022, though the majority had not achieved the target of 65% vaccination of the school population.

BERMUDA:

TRENDS IN CASES & DEATHS: As of 18 Jan 2022 (reported 20 Jan 2022), Bermuda reported 9,766 confirmed cases of Coronavirus Disease 2019 (COVID-19) with 163 new cases within the last 24-72hr period. There were 1,886 active cases (19.3% of total cases) and 14 hospitalized cases (0.7% of active cases), with two ICU admissions. New cases decreased marginally by 4.0% and there were no new deaths for EW 2.

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

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
9,380	1,197	-4.0%	110	0	0%	8.3%	+1.2%



GOVERNMENT RESPONSE:

Effective 20 January 2022:

All Travellers to Bermuda must follow the requirements set-out in the [Quarantine \(COVID-19\) \(No. 3\) Order 2020](#).
Testing Requirements for entry into Bermuda

A pre-arrival test is mandatory for non-residents aged 2 and above. [Click here](#) for pre-arrival test requirements.

Residents 2-years-old and older are strongly encouraged to have a negative pre-arrival test although it is not mandatory to enter Bermuda. Vaccinated residents without a valid pre-test will be expected to quarantine for 4 days on arrival.

Vaccinated air travelers as defined [here](#) may get either a PCR (within 4 days of travel) or antigen test (within 3 days of travel) as a pre-arrival test.

Additional information can be found at:

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

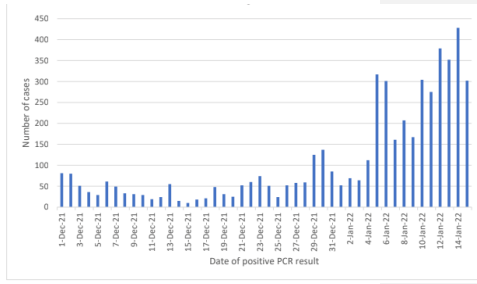
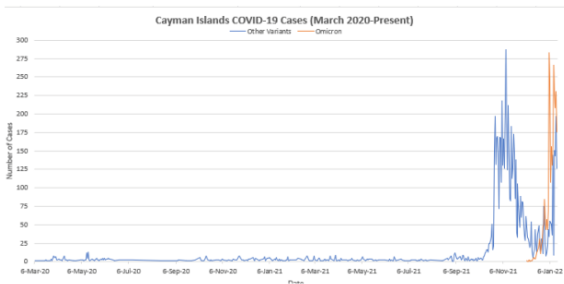
CAYMAN ISLANDS:

TRENDS IN CASES & DEATHS: As of 19 Jan 2022, Cayman had **11,666 confirmed cases** of Coronavirus Disease 2019 (COVID-19) with **402 new cases** reported in the last 24 hrs. Active cases now comprise 34.0% of confirmed cases. A **total of 15 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 2.

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
13,564	2,276	+3.1%	15	2	0%	35.8%	+58.4%

Figures 8 & 9. Trend in daily cases Mar 2020 – Jan 2022, and 1 Dec 2021 – 15 Jan 2022.



GOVERNMENT RESPONSE

Phase 5 of the Cayman Islands reopening plan commenced on 20 January 2022. Premier Hon. Wayne Panton announced this at a [COVID-19 community update](#).

All children, Caymanians, residents or visitors, arriving as travellers, will now take on the vaccination status of the adult they are travelling with, resulting in no need to quarantine for the majority of travellers. The children of unvaccinated parents will continue to have to quarantine, upon arrival, albeit all for a recently reduced shorter period of time (now for 10 days instead of 14).

All travellers exempt from quarantine age 5 and over are required to undergo a certified lateral flow test on Days 2, 5, and 7 (3 tests in total) at an authorised provider.

[Click here](#) to download a summary of Phase 5.

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 – 18 January 2022.
- b. PAHO CO continued the procurement of items within the USAID GH-ARP project for case management and waste management for the vaccination programme – 20 January 2022.
- c. PAHO CO is awaiting feedback on the approval of the EU RESEMBID/Expertise France project proposal for the Cayman Islands. – 20 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 held on 18 January 2022 (See pictures and links at the end of the report) – 20 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 held a Special Meeting of the IHR Stakeholders Advisory Group on 14 January 2022 and started the preparation of the IHR State Party Self-Assessment Annual Report.
- 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 – 20 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. – 20 January 2022.

PILLAR 9: MAINTAINING ESSENTIAL HEALTH SERVICES AND SYSTEMS

- a. Planning was advanced with the MOHW, JAM for the Handing-Over Ceremony on 27 January 2022 for nine Health Centres which were retrofitted within the Smart Health Care Facilities project – 20 January 2022.
- b. Re-scheduling of the technical cooperation activities requested for core health emergency preparedness and response programmes, including HEOC and MCM capacity building, continued due to the surge in cases of the Omicron Variant of Concern – 19 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 Health EOC establishment and management.

HAND-OVER CEREMONY – Donation of Surgical Masks and Items Procured with Funds From Award 71761 (Germany)



Dr Christopher Tufton, Minister of Health and Wellness (2nd right) holds a just donated patient vital signs monitor while in discussion with (L-R) Dr Marion Bullock DuCasse, Adviser - Emergencies, Pan American Health Organization, Ian Stein, PAHO/WHO Representative in Jamaica, Bermuda and the Cayman Islands and Frank Bernhardt, Chargé d'Affaires at the Embassy of the Federal Republic of Germany in Kingston at this morning's handover of equipment to support Jamaica's COVID-19 response. (Photo contributed)

<https://jis.gov.jm/germany-donates-equipment-to-fight-covid-19/>

<https://jamaica-gleaner.com/article/news/20220119/germany-gifts-supplies-covid-19-fight>

<https://www.paho.org/en/news/18-1-2022-paho-german-embassy-partner-bolster-covid-19-response-jamaica>

https://www.jamaicaobserver.com/latestnews/PAHO_German_Embassy_partner_to_bolster_COVID-19_response_in_Jamaica