



Ministry of Health and Social Services Republic of Namibia

Situational Report No.17 for COVID-19 Namibia				
Outbreak Name	COVID-19	Country affected	Namibia	
Date & Time of report	04 April 2020 23:00	Investigation start date	13 March 2020	
Prepared by	Surveillance Team		anayan yang sa	

Date of outbreak declaration in Namibia: 14 March 2020.

1. SITUATION UPDATE / HIGHLIGHTS

- Two new confirmed cases were reported today (04 April 2020)
- Cumulatively, 16 confirmed cases have been reported in the country, to date.
- Two confirmed cases (5&6) have recovered and discharged on 04 April 2020
- Supervised quarantine for all Namibians arriving from other countries for 14 days is ongoing.
- A total of 35 people completed 14-day supervised quarantine on 4 April 2020 and were discharged.
- Partial lockdown of Erongo and Khomas regions took effect on 28 March 2020 till 16 April 2020.
 - Borders have been closed except for essential/critical services and humanitarian support to the response.
 - All others prevention measures are applicable to the entire country

• Key Challenges include:

- Inadequate isolation and quarantine facilities,
- o Inadequate human resources at all levels
- Chronic shortage of PPEs, amidst logistic supply chain problems
- o Inadequate material supplies including ICU units and ventilators.
- Inadequate infrastructure, equipment and supplies at Points of Entry

2. BACKGROUND

Description of the latest cases

 Index cases: Two confirmed cases of COVID-19 were reported in Windhoek district on 13 March 2020. The married couple; a 35-year-old male and a 25-yearold female, arrived from Madrid, Spain on 11 February 2020.

- Case (#14) is a 35 years old Namibian female health worker, who tested in Windhoek on the 28 March 2020 after presenting with fever, cough, sore throat, and headache.
- Two new confirmed cases were recorded on 4th April 2020
 - Case (#15) is a 31-year-old male Namibian, who was a driver for a family that arrived from South Africa on 26 March 2020. He reported at Robert Mugabe Clinic on 30 March 2020, with the complaints of cough, body pain, sore throat, and shortness of breath.
 - Case (#16) is a 46-year-old male Namibian permanent citizen healthcare worker, with the history of travel to South Africa and return to Namibia on 02 March 2020. He was tested at Robert Mugabe Clinic, with fever, chills, body pain, and sore throat on 30 March 2020.
 - Both the two tests came out inconclusive before it was sent to NICD in South Africa for confirmation. Positive results were received on 4 April 2020.

Table 1: Confirmed cases by region as of 4 April 2020

Reporting region	Total Cases	New cases	Active cases	Recovered	Death
Khomas	11	2	8	3	0
Karas	1	0	1	0	0
Erongo	4	0	4	0	0
Total	16	2	13	3	0

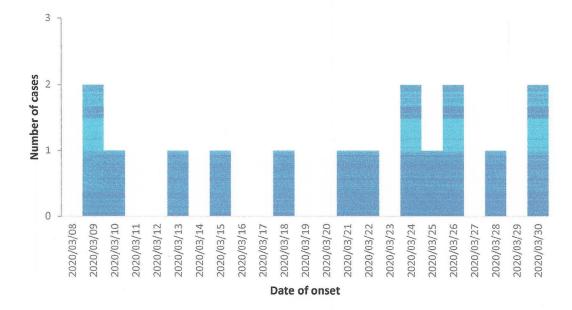


Figure 1: Epi-curve for COVID-19 confirmed cases in Namibia as of 04 April 2020

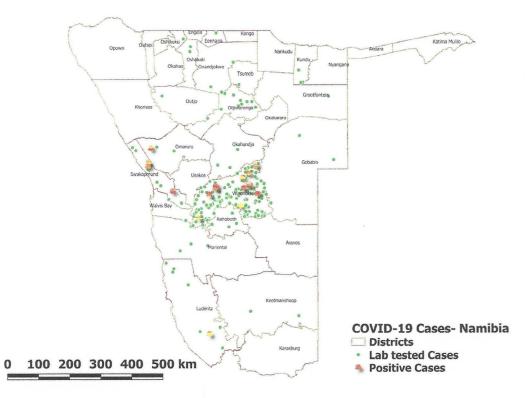


Figure 2: Suspected and confirmed COVID-19 cases in Namibia per District, as of 04 April 2020

3. PUBLIC HEALTH ACTION / RESPONSE INTERVENTIONS

EPIDEMIOLOGY & SURVEILLANCE

• Case definitions as of 20 March 2020:

Suspect case:

A. A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath), AND a history of travel to or residence in a location reporting community transmission of COVID-19 disease during the 14 days prior to symptom onset;

OR

B. A patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case (see definition of contact) in the last 14 days prior to symptom onset; OR

C. A patient with severe acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath; AND requiring hospitalization) AND in the absence of an alternative diagnosis that fully explains the clinical presentation.

Probable case: A suspect case for whom testing for COVID-19 is inconclusive.Inconclusive being the result of the test reported by the laboratoryConfirmed case: A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

- Surveillance activities
 - Daily pillar and intra-pillar discussions are held to deliberate daily progress, gaps and way forward;
 - Call centre continue operations for 24 hours per day.
 - People under mandatory quarantine are being monitored daily (see table 3)
 - Data entry is ongoing and data dashboards are under development using existing platforms.
 - Contact tracing is ongoing (see table 2)

Contact tracing Summary

Table 2: Contacts tracing summary as of 04.04.2020

	Contact risk level			
Variables	High	Medium	Low	Total
Number of potential contacts	35	28	99	162
Number of contacts identified	35	27	87	152
Number of active contacts	20	11	21	52
Number of contacts monitored	16	6	4	26
Contacts of contacts discharged	11	14	61	86
Number of contacts that developed signs & symptoms	8	1	5	14
*Number of contacts tested without signs and symptoms	3	0	4	7
Number of contacts tested positive	3	1	0	4
© Number of contacts lost to follow up	0	2	5	7
# Contacts never reached	0	0	10	10

*Number of (highly exposed) contacts without signs & symptoms tested. One tested positive. © Seven contacts are lost to follow up, all are non-Namibians and have travelled back to their countries.

Three contacts could not be reached as they did not provide contact numbers

Name of the Facility	Cumulative number of people	Number of people who developed signs & symptoms	Number of people discharged
Hardap Resort	40	0	0
Rock Lodge (Debmarine)	39	0	0
*Other places in Windhoek	139	4	35
Zambezi Waterfront park	68	3	0
Gross Barman	22	0	0
Total	308	7	35

Table 3: Number of people in mandatory quarantine facility of 04.04.2020

LABORATORY INVESTIGATIONS

- Stock level of testing kits (laboratory extraction phase) at NIP is 700.
- As of 4 April 2020, a total of 362 COVID-19 specimens were recorded for testing in the two laboratories (NIP and Path Care) as per table below:

Table 4: COVID-1	9 specimens re	ecorded in at NIP	and Path care of	is of 04.04.2020
------------------	----------------	-------------------	------------------	------------------

As of 04/04/2020	Laboratory			Tetal
	NIP	Path care	South Africa	- Total
Total sample sent to the Laboratory	206	156	-	362
Total sample tested	158	154	-	312
Total results received	157	154	-	311
Total results positive	9	6	*1	16
Total results negative	147	148	-	295
Total results pending	1	0	-	1
Total results inconclusive/indeterminate	1	0	-	1
Total sample discarded	28	2	-	30
Total new suspected cases in last 24 hours		0	-	6

*1 Patient specimen collected and tested in South Africa

COORDINATION AND LEADERSHIP:

- COVID-19 responders from all 8 thematic (Pillar) groups have been activated and are operating from the National Public Health Emergency Operation Centre (PHEOC) since 14 March 2020.
- Coordination and other pillar team meetings on COVID-19 response are held daily.
- A Media Centre for providing up-to date and accurate information has been established at the Khomas Regional Council offices and provides daily updates twice a day – 10am and 4pm by the MoHSS and key stakeholders.
- Monitoring and Evaluation is being conducted regularly to ensure smooth coordination of COVID-19 interventions.
- Various partners are actively participating in different pillar groups for COVID-19 response.

CASE MANAGEMENT

- Out of the 16 cumulative confirmed cases, 3 recovered, and have been discharged, after tested negative for COVID-19.
- The other 13 confirmed cases are in stable conditions.
- Conversion of casualty department at WCH into a highly infectious referral ICU underway.
- A 12-bed Isolation Unit is under construction at final stage of completion at WCH.
- Ramatex renovation underway to be repurposed as an isolation facility
- Repurposed hotels/lodges/resorts identified for accommodation of front-liners and asymptomatic/mild suspect/probable/confirmed cases of COVID-19.
- Consultations with UNAM to avail a clinic for COVID-19 patients is ongoing.
- More screening sites have been identified in the regions.
- Project Active Case Finding (ACF) is currently underway in Khomas, Erongo and Kharas regions, aimed to look for possible community transmission

LOGISTICS:

- Facilitated the allocation of quarantine facilities in the country.
- Procurement of PPE, Medical suppliers and pharmaceuticals is ongoing
- Provision of commodities' specifications and verification for procurement is being done constantly

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT:

- Educational sessions continue to be conducted in various media
- Psychosocial support is being offered on daily basis to people under quarantine
- The MoHSS in-conjunction with other sectors continues to give daily updates and prevention measures on COVID-19 at the communication hub.
- The MoHSS continue to conduct press briefing as the situation progresses.

CHALLENGES

- Inadequate and at some places lack of isolation units at health facilities and at points of entry in the regions.
- Inadequate PPE and printed IEC materials on COVID-19
- Insufficient COVID-19 laboratory testing kits
- o Need for health information and education materials in multiple languages

RECOMMENDATIONS

- Establish fully equipped isolation units at health facilities and at points of entry in the regions.
- Fast track procurement process for Personal Protective Equipment and COVID-19 laboratory testing kits
- Expedite printing of IEC materials in different vernacular languages

Approved:

m

Incident Manager Date: 04.04.2020

Secretariat