



Ministry of Health and Social Services Republic of Namibia

Situational Report No.8 for COVID-19 Namibia						
Outbreak Name	COVID-19	Country affected	Namibia			
Date & Time of report	25 March 2020 23:30	Investigation start date	13 March 2020			
Prepared by	Surveillance team	anne de la companya del companya de la companya de la companya del companya de la companya del la companya del la companya de	•			

Date of outbreak declaration in Namibia: 14 March 2020.

1. SITUATION UPDATE / HIGHLIGHTS

- Three passenger planes arrived at Hosea Kutako Airport from SA, all passengers went to self-quarantine at their houses
- A plane arrived from Europe with 40 Namibians and permanent residents, 39 passengers were sent to Hardap Region to be quarantined at Namibia Wildlife Resort (NWR) facilities. One pregnant passenger was taken to Etegameno, in Windhoek.
- Case number 7 was reported late on 24 March 2020. Contact tracing is ongoing.
- Case number 8 was the probable case, with positive result on 25 march 2020
- Cumulatively, 7 confirmed cases in Windhoek (RT-CPR for COVID-19) and 1 confirmed case in Aus, Luderitz district.
- Thematic group meetings continue to be held daily, since the 14 March 2020
- Key Challenges include:
 - Inadequate isolation and quarantine facilities, human resources and material supplies including PPE, ICU units and ventilators.

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 35year-old male and a 25-year-old female, arrived from Madrid, Spain on 11 February 2020.
- Case number 7, a 46 year old French national, who arrived on 13 march and tested on 23 March 2020 at Aus. The results were reported on the night of 24 March 2020.
- Case number 8, a 69 year old German national, who has traveled in the region since 28 FEB with last arrival in Windhoek from Victoria Falls on 11 MAR is in selfisolation on a farm in Windhoek. His indeterminate results were confirmed positive on 25 MAR 2020.

Table 1: Cases by reporting region

Number of cases		
6		
1		
1		
8		
	1 1	

3. EPIDEMIOLOGY & SURVEILLANCE

Number of Laboratory confirmed cases: 8
Alive and dead: 0 death and 8 cases alive

Contact Tracing Summary

Table 2: Contacts tracing summary as of 25.03.2020

,	Contact risk level			
Variables	High	Medium	Low	Total
Potential number of contacts	16	13	60	89
Number of contact reached	16	10	46	72
Number of contact monitored today	13 (81%)	8 (62%%)	16 (26%)	37 (42%)
Number of contact that developed signs & symptoms	0	0	0	0
Number of contact with signs and symptoms tested	1	1	3	5
Number of contact without signs and symptoms tested	2	0	1	3

20 contacts finished the 14 days' self-quarantine.

4. LABORATORY INVESTIGATIONS

- The samples of 5 confirmed cases were taken by Path-Care and tested in South Africa, while 2 confirmed cases were taken and tested by NIP. An additional confirmed case was tested in South Africa and received positive result in Namibia. The turnaround time range between 2 to 5 days for test done by Path-care, while for test by NIP is 2 days.
- As of 25th March 2020, a total of 207 COVID-19 specimens were recorded in the two laboratories (NIP and Path-care) as per table below:

Table 3: COVID-19 specimens recorded in at NIP and Path care as of 25.03.2020

As of 25/03/2020	15	Laboratory		
	NIP	Path care	South Africa	Total
Total sample sent to th Laboratory	e 55	152	0	207
Total sample tested	47	122	0	169
Total results received	40	117	0	157
Total results positive	2	5	*1	8
Total results negative	38	113	0	151
Total results pending	8	29	0	37
Inconclusive	0	0	0	0

^{*1} Patient specimen collected and tested in South Africa

5. PUBLIC HEALTH ACTION / RESPONSE INTERVENTIONS

O COORDINATION AND LEADERSHIP:

- National Health Emergency Management Committee special committee on COVID-19 response was activated on 14 March 2020.
- The outbreak was declared by Hon. Minister of Health on 14 March 2020.
- The Ministry continue to conduct press briefing as the situation progress. Last press briefing conducted on 24 March 2020.
- Coordination meetings are held daily
- His Excellency Dr Hage Geingob declared a lockdown of Khomas Region and Erongo Region effective as of midnight 27 March 2020.

o SURVEILLANCE:

- Training on surveillance and contact trancing have started, 25-26 March 2020 targeting Regional surveillance officers, Environmental Health Practitioners and Tutors responsible for continuous development from MoHSS training network.
- Daily pillar and interpillar meetings are held to discuss daily progress, gaps and way forward;
- Contact trancing is ongoing

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 laboratory

Confirmed case: A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

CASE MANAGEMENT

- There are 8 confirmed cases to date. All cases are within the Khomas Region, except case #7 in Kharas Region
- All cases exhibit either mild symptoms or are asymptomatic.
- As of 25 March 2020, all patients are stable.
- Case # 7 and #8 are in self-isolation at home and are stable. Otherwise all other cases are admitted in isolation ward at HKIA (case #3 admitted in WCH Isolation ward).
- Robert Mugabe Clinic is functioning 24 hours. 2 Patients admitted in Robert Mugabe Clinic are stable and are being prepared for discharge (both were swabbed and both are negative).
- Regions, such as Zambezi, Otjozondjupa, Hardap, Omaheke, Omusati & Oshana have HCW trained on COVID-19 and also have screening facilities and Isolation rooms in place.
- Training on COVID-19 is ongoing since February 2020 (Training of Trainers Workshop).
- Robert Mugabe Clinic hosts daily training sessions on PPE and collecting specimens since 18 March 2020. We also have ZOOM lectures every week. Next ZOOM meeting is 27 March 2020.

o LOGISTICS:

- Deployment of basic PPEs to Zambezi, Hardap, Omusati, Khomas and Otjozondjupa region.
- Set up a mobile clinic at quarantine facility in Windhoek
- Installation of Ventilators and ICU monitors at Robert Mugabe Clinic
- Facilitation the allocation of quarantine facilities in the country

C. CHALLENGES

- Country coordination and communication related challenges (beyond MoHSS) for implementing IMS and multi-sectoral coordination still facing some bottlenecks.
- Lack of fully equipped isolation facilities in the regions at health facilities and points of entry in the regions.
- o Insufficient Personal Protective Equipment/clothing.
- o Insufficient isolation facilities
- o Delay in receiving lab results sent to South Africa

D. RECOMMENDATIONS & PRIORITY FOLLOW UP ACTIONS

- Need for improving country coordination, planning and monitoring,
- Finalization of all relevant SOPs per pillar
- Need for complete Rapid Response Team
- Fully equip National Public Health Emergency Operations Centre
- All positive cases must be in isolation centres.

Cleared by:_

Incident Manager

Date: 25.03 2020

Secretariat