



GOVERNMENT OF
BERMUDA

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[Click here for Coronavirus \(COVID-19\) Information and Updates](#) | [Check on your health today, visit HealthIQ](#)

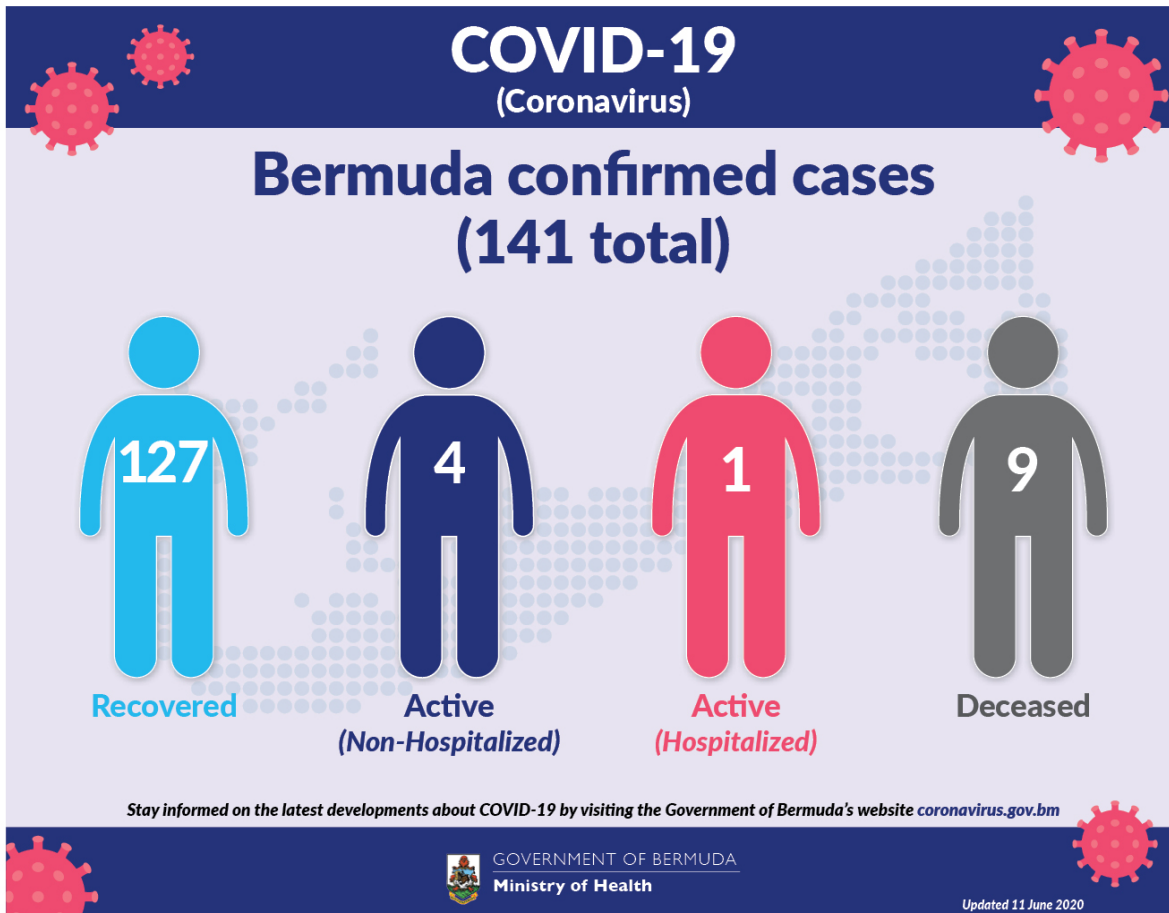
Coronavirus (COVID-19) update

The current World Health Organization risk assessment for novel coronavirus (COVID-19) is very high risk globally. It is advised that all countries prepare for the possibility of COVID-19 in their communities. Everyone has a role to play in getting ready and staying healthy by practicing everyday prevention measures like frequent hand washing, staying home when sick and covering coughs and sneezes. The World Health Organization has declared the current coronavirus situation as a pandemic. A pandemic is the increased and sustained transmission of a disease across many countries.

Surveillance for respiratory illness has been enhanced in collaboration with local public health partners. Persons with respiratory illness including fever and cough should call ahead and inform their health care provider of their travel history prior to attending for medical care.

This is a rapidly changing situation. Please regularly check this page for updates.

[COVID-19 Dashboard - 11 June](#) 



Data as of 3:00 pm 11 June 2020

Port Health Monitoring	Number
Quarantine with public health supervision	292

COVID-19 Testing	Total
Total	8430
Results negative	8289
Results positive	141
Transmission Status of Confirmed Cases	
Imported	41
Local Transmission [Known contact/source]	84
Local Transmission [Unknown contact/source]	11
Under Investigation	5

Status of Confirmed Cases	
Recovered	127
Active (non-hospitalized)	4
Active (hospitalized)	1
Deceased	9

Quarantine with public health supervision: All adults entering Bermuda are required to quarantine with public health supervision in a government quarantine facility for 14 days. These individuals will be monitored for symptoms during their time in quarantine. Exemptions allowed to self-quarantine at home for minors and for medical reasons.

Self-quarantine with public health supervision: All persons entering Bermuda from 17 March 2020 are to self-quarantine with public health supervision. Health personnel are in communication with these persons over the course of the self-quarantine period having provided a plan for self-monitoring for symptoms and clear instructions for notifying a health care provider before the person seeks health care if they develop fever, cough, or difficulty breathing.

Imported: Cases acquired outside of Bermuda.

Local transmission: Cases acquired within Bermuda

Under investigation: Type of transmission has not yet been determined. These cases are not imported and are likely the result of local transmission.

Recovered: Person has had no fever for at least 72 hours (3 days) without the use of fever-reducing medication, other symptoms have improved and at least 14 days have passed since onset of symptoms or testing date. Laboratory confirmation of at least one negative result may also be used as evidence of recovery.

Country status: Local transmission.

COVID-19 Reopening Indicators

Bermuda is monitoring critical indicators to see how we are doing in managing COVID-19 and assess our readiness to move to the next phase of our reopening plan. These indicators are updated on Mondays and Thursday.

As of 11th June 2020:

Lead Measures

As of 11th June 2020

"How Bermuda is doing; monitor bi-weekly to indicate likelihood of movement to the next phase"

Preventive Behaviours



Face mask wearing	Yellow
<i>HealthIQ Reports on observation of mask wearing</i>	
Physical Distancing	Red
<i>HealthIQ Reports on observation of 3 – 6ft physical distancing</i>	
Adoption of technology	Yellow
<i>Number of people participating in Health IQ / other apps</i>	

Capacity



Testing capacity	Yellow
<i>In stock of all lab consumables, reagents and kits plus enabling resources: staff & PPE</i>	
PPE supplies	Red
<i>In stock of: surgical mask, N95 mask, gloves, gowns and face shields</i>	

Lag Measures

"How Bermuda has done so far; to confirm at the end of each phase that it is safe to move to the next phase"

Transmission



WHO country classification	Yellow
<i>WHO country classification</i>	
Transmission	Yellow
<i>Proportion of cases able to be linked to known cases or clusters</i>	
Reproduction rate	Green
<i>Real time reproduction number (average over last 7 days)</i>	

Cases and hospitalizations



Hospitalizations	Green
<i>New COVID-related hospitalizations</i>	
Critical care	Green
<i>New COVID cases in critical care</i>	
COVID-19 cases	Green
<i>Number of new cases</i>	

Definitions

Lead measures:

1. Face mask wearing: HealthIQ Reports on observation of mask wearing –

- >95% report public wearing masks
- <80% report public wearing masks

2. Physical distancing: HealthIQ Reports on observation of 3 – 6ft physical distancing -

- >95% report public maintaining distance
- <80% report public maintaining distance

3. Adoption of Technology: Number of people participating in HealthIQ or Apps (public) -

- >10,000 unique respondents (All time)
- <5,000 unique respondents

4. Testing capacity: In stock of all lab consumables, reagents and kits plus enabling resources: staff & PPE

- >3 months' supply
- <1 months' supply

5. PPE supplies (critical): In stock of: surgical mask, N95 mask, gloves, gowns and face shields

- >5 months' supply
- >3 months' supply

Lag measures:

6. Classification: WHO Country classification

- Green: Sporadic cases
- Amber: Local transmission
- Red:Community transmission

7. Transmission: Proportion of cases able to be linked to known cases or clusters

- <10% unknown transmission
- >20% unknown transmission

8. Reproduction rate: Real time reproduction number average over last 7 days

- Rt <1.0
- Rt >1.4

9. Hospitalizations: New COVID-related hospitalizations

- <7 over last 7 days
- >21 over last 7 days

10. Critical care: COVID-related ICU cases

- <4 concurrent per week
- >7 concurrent per week

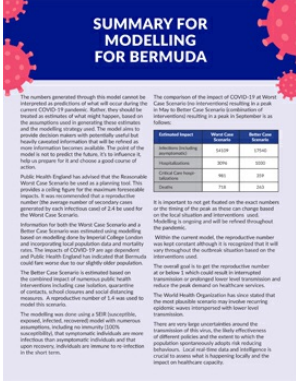
11. COVID-19 cases: Number of new cases per week

- <12 over last 7 days
- >35 over last 7 days

Coronavirus (COVID-19) Modelling Data - 24 April

The numbers generated through this model cannot be interpreted as predictions of what will occur during the current COVID-19 pandemic. Rather, they should be treated as estimates of what might happen, based on the assumptions used in generating these estimates and the modelling strategy used. The model aims to provide decision makers with potentially useful but heavily caveated information that will be refined as more information becomes available. The point of the model is not to predict the future, it's to influence it, help us prepare for it and choose a good course of action.

Our analyses on COVID-19 infections, hospitalizations, and testing can be found at the links below:



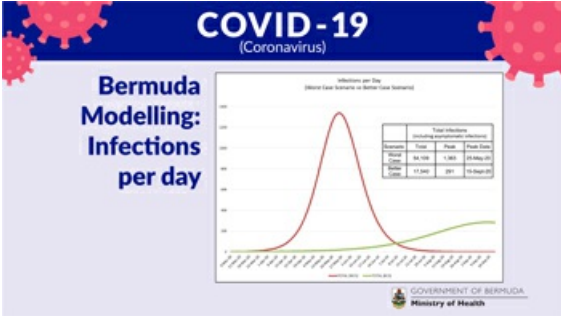
SUMMARY FOR MODELLING FOR BERMUDA

The numbers generated through this model cannot be interpreted as predictions of what will occur during the current COVID-19 pandemic. Rather, they should be treated as estimates of what might happen, based on available data and assumptions. The model uses available data to estimate the number of cases that would be expected if the current situation continues to evolve. It is not intended to provide information that will be used to inform public health decisions. The model is a tool to help us understand the impact of different interventions and to provide a range of possible outcomes.

Public Health England has advised that the Reproduction Number (R) is a key factor in determining the impact of interventions. The current R for COVID-19 is estimated to be around 2.5. This means that, on average, one person with COVID-19 will infect 2.5 other people. If the R is kept below 1, the number of cases will decrease over time. If the R is kept above 1, the number of cases will increase over time.

Parameter	Value	Units
Reproduction Number (R)	2.5	None
Population	64,000	People
Initial Case Count	100	Cases
Initial Case Count (with intervention)	100	Cases
Initial Case Count (with intervention and NPIs)	100	Cases

The comparison of the impact of COVID-19 at Worst Case, Best Case and Intermediate Case, is a key factor in determining the impact of interventions. The current R for COVID-19 is estimated to be around 2.5. This means that, on average, one person with COVID-19 will infect 2.5 other people. If the R is kept below 1, the number of cases will decrease over time. If the R is kept above 1, the number of cases will increase over time.



COVID-19 (Coronavirus)

Bermuda Modelling: Infections per day

Infections per Day (Worst Case Scenario in Bermuda Case Scenario)

Parameter	Value	Units
Population	64,000	People
Initial Case Count	100	Cases
Initial Case Count (with intervention)	100	Cases
Initial Case Count (with intervention and NPIs)	100	Cases

The overall goal is to get the reproduction number as low as possible, which would result in a lower peak and a shorter duration of the outbreak. This can be achieved through a combination of interventions, including social distancing, quarantine, and mask-wearing. The model also shows that the most likely scenario is a peak in infections around late April/early May, followed by a gradual decline. The impact on healthcare capacity is also shown, with a peak in cases around the same time as the peak in infections.

GOVERNMENT OF BERMUDA
Ministry of Health

[Summary for modelling for Bermuda](#)

[Modelling Estimates for Bermuda and Potential impact of Non-Pharmaceutical Interventions \(NPIs\) 24 April 2020](#)

COVID-19 Health Screening

Welcome to the Health Department's COVID-19 health screening registration form for the Bermuda Government Molecular Diagnostic Testing Laboratory at the old White's Supermarket at Southside. Please choose and register for a timeslot that suits you for your screening. Please ensure to bring your confirmation number with you for your screening. Instructions: Please remain in your car or on your bike, with a mask on and your windows up until directed. Your results will be communicated to you by your doctor.

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[The Zika Virus](#)

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Tip any standing water and call
Vector Control at 278 5397.

 GOVERNMENT OF BERMUDA
Ministry of Health and Services
Department of Health



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