



GOVERNMENT OF
BERMUDA

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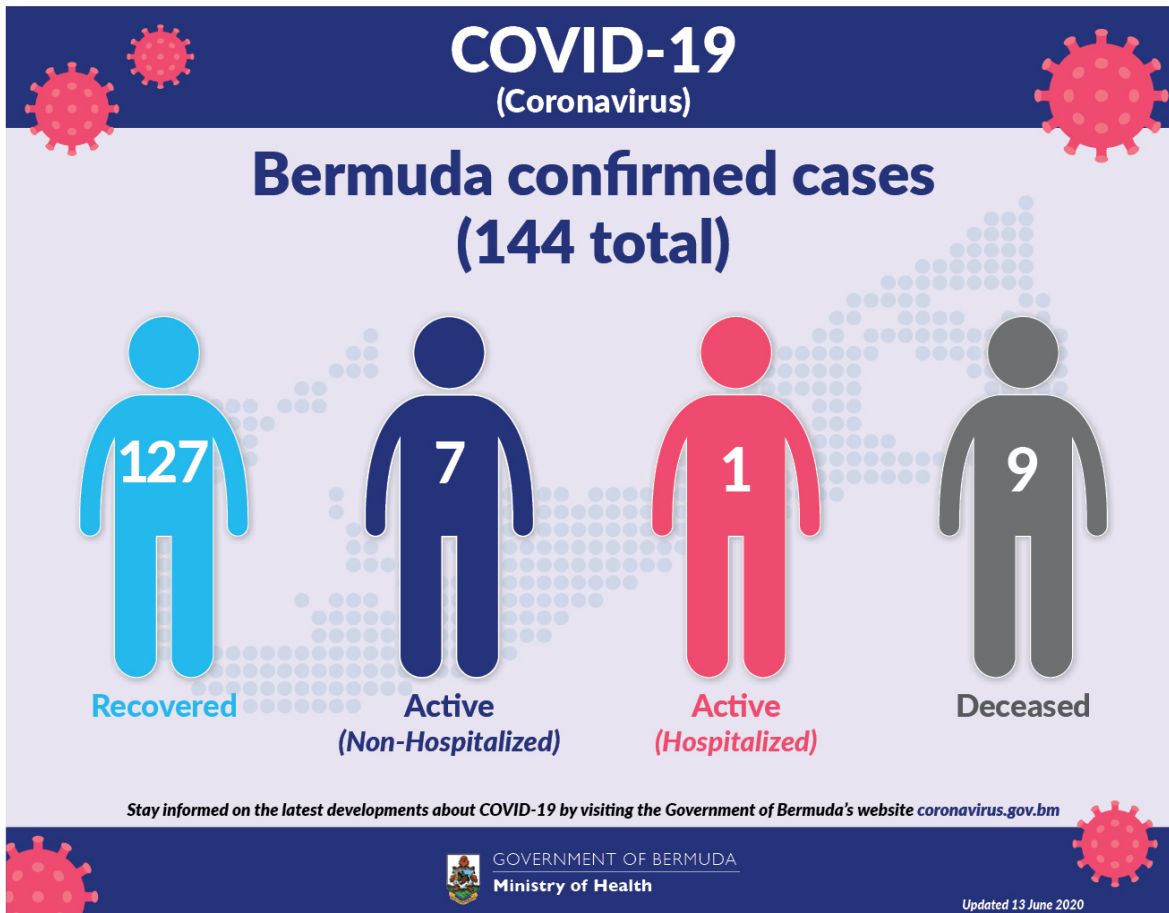
Coronavirus (COVID-19) update

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 - 13 June](#) 



Data as of 3:00 pm 13 June 2020

Port Health Monitoring	Number
Quarantine with public health supervision	187

COVID-19 Testing	Total
Total	8718
Results negative	8574
Results positive	144
Transmission Status of Confirmed Cases	
Imported	41
Local Transmission [Known contact/source]	85
Local Transmission [Unknown contact/source]	11
Under Investigation	7

Status of Confirmed Cases	
Recovered	127
Active (non-hospitalized)	7
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

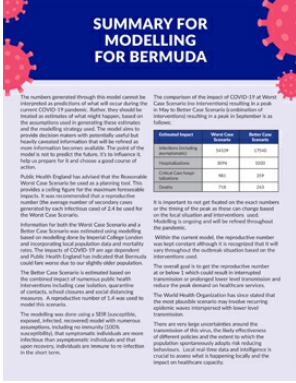
11. COVID-19 cases: Number of new cases per week

- <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 the assumptions used in generating these estimates and the modelling strategy used. The model uses an average disease severity rate (mortality rate) that is based on 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 a logical process for it to achieve a population of zero.

Public Health England has advised that the Reasonable Worst Case Scenario is used as a planning tool. This provides a useful figure for the maximum foreseeable impact. It is recommended that a reasonable worst case scenario be used for planning purposes.

The Bermuda Case Scenario is based on modelling done by Imperial College London and incorporating local population data and mortality rates. The impact of COVID-19 on age dependent and Public Health England's modelling that Bermuda could see would be for our citizens that plausible.

The Bermuda Case Scenario is estimated based on the implementation of current public health interventions including case isolation, quarantine of contacts, school closure and social distancing measures. A reproductive number of 1.4 was used to model this scenario.

The modelling was done using a SEIR (Susceptible, Exposed, Infected, Recovered) model with a scenario assumption that symptomatic individuals can mask, introduce their asymptomatic contacts and their open recovery individuals are immune to re-infection in the short term.

The comparison of the impact of COVID-19 at Worst Case Scenario (reasonable worst case) to a peak in May to Better Case Scenario (combination of interventions including a peak in November) is shown below:

Parameter/Event	Reasonable Worst Case	Better Case
Reproductive Number	1.4	1.0
Peak Date	May	Nov
Peak Infections	1000	1000
Peak Deaths	90	10
Peak ICU	100	10

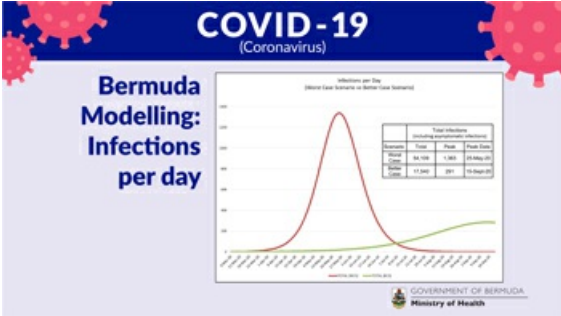
It is important to not get fixated on the exact numbers or the timing of the peak as these can change based on the local situation and interventions used. Modelling is ongoing and will be refined throughout the pandemic.

While the current model, the reproductive number was kept constant although it is expected that it will vary throughout the outbreak situation based on the interventions used.

The overall goal is to get the reproductive number at or below 1, which would result in international transmission of prolonged time that interventions and reduce the peak demand on healthcare services.

The World Health Organization has also stated that the most plausible scenario may involve requiring countries across the globe to implement social distancing.

There are many other uncertainties around the transmission of this virus, the body effectiveness of different public health interventions to reduce the overall reproductive number, the health care situation, loss of real time data and intelligence is crucial to assess what is happening locally and the impact on healthcare capacity.



COVID-19 (Coronavirus)

Bermuda Modelling: Infections per day

Infections per Day (Bermuda Case Scenario vs Better Case Scenario)

Parameter	Value	Peak Date
Reproductive Number	1.4	May
Peak Infections	1000	May
Peak Deaths	90	May
Peak ICU	100	May

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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Wear mosquito repellent and light-coloured clothing that covers your arms and legs.

 GOVERNMENT OF BERMUDA
Ministry of Health and Seniors
Department of Health



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