

Situational Report No. 02

Disease Outbreak: COVID-19
Date of report: 21st March, 2020
Country: Zambia

Preparedness Response start date: 30th January, 2020
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SITUATION REPORT NO. 3

➤ **Country situation:** As of 06hrs on 21st March 2020, there were **no new cases** recorded in the past 24 hours. The total number of confirmed cases is

1. CURRENT SITUATION UPDATE

- **Levy Mwanawasa Hospital:** There are currently five (5) patients (3 suspected and 2 confirmed cases) quarantined at Levy Mwanawasa Hospital in Lusaka; 3 suspected case were discharged today 20th March 2020.
- **Tubalange Hospital:** there are currently no persons admitted at the facility
- **Surveillance:** 2675 passengers from COVID-19 risk countries have been screened at KKIA. A total of 68 alerts have been received to date with 23 persons under investigation. There are currently 55 close contacts of the confirmed cases under observation.
- **Laboratory testing:** the University Teaching Hospital Virology Lab (UTHVL) has to date processed 58 samples, with 2 confirmed positive for COVID-19; 17 results are pending.

Zambia Current Numbers

👤 2 confirmed (0 new)
 🚰 0 deaths (0 new)

Global Numbers as of 20/03/20

(Source: WHO)

👤 **234,073** confirmed (24,247 new)
 🚰 9,840 deaths (1,061 new)

*New: in the last 24hrs

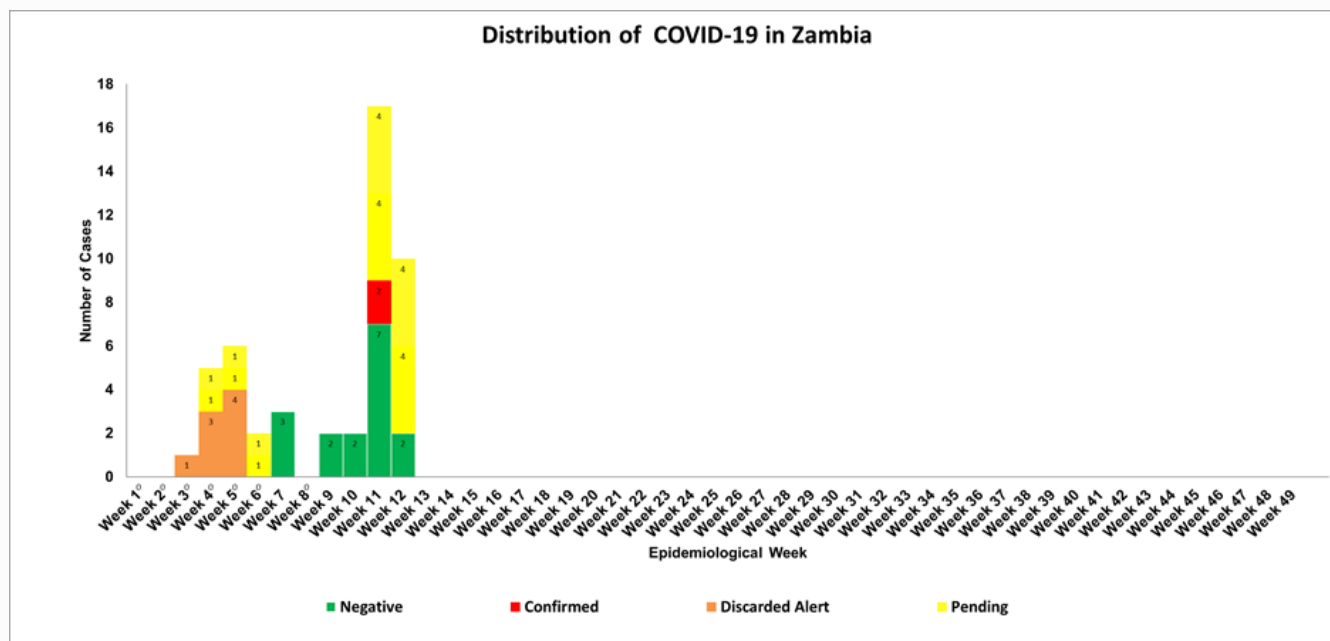
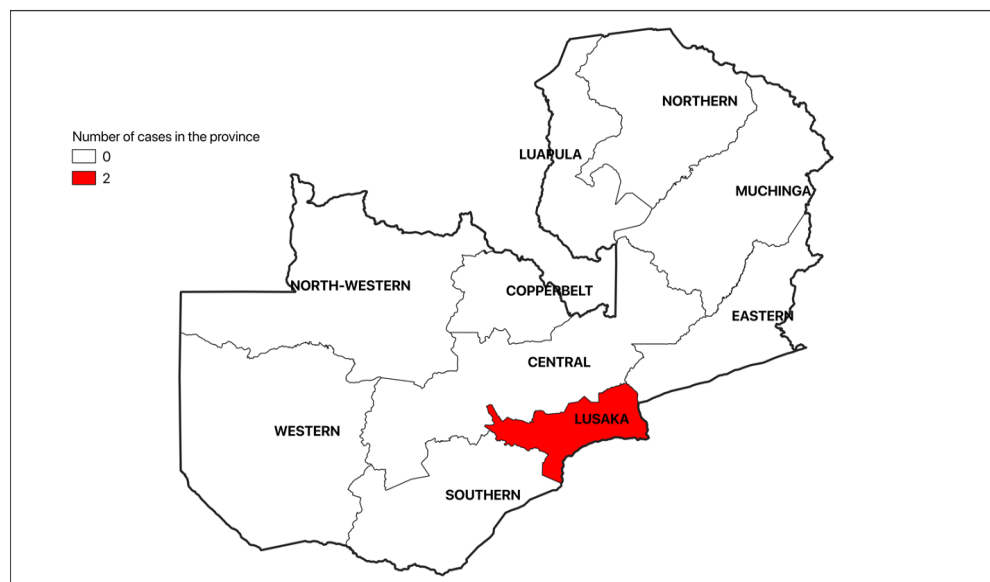


Figure 1: Zambia epi-curve of COVID-19 test results and alerts received as of 21st March, 2020

- **Africa Situation:** As of 10am EAT on 21st March 2020, there were 1021 total COVID-19 confirmed cases recorded in 39 African countries and 2 territories (with 23 deaths and 103 recoveries recorded).

Map of Zambia showing provinces with confirmed COVID-19 cases as at 21 March 2020



2. ACTIONS TO DATE

2.1 CO-ORDINATION

➤ Ministerial Level:

- High level inter-ministerial coordinating meeting, chaired by the Secretary to the Cabinet, are held weekly.
- The National Epidemic Preparedness, Prevention Control and Management Committee (NEPPC&MC), chaired by the Hon. Minister of Health, Dr Chitalu Chilufya, has met twice
- The Minister of Health issued **Statutory Instruments SI 21 and 22**
- Regular press briefings have been held since the declaration of the outbreak in Zambia.

➤ Technical level

- An Incident Management Structure (IMS) was set up at the Zambia National Public Health Institute following the declaration of the outbreak as a PHEIC. The IMS meets twice weekly on Tuesdays and Thursdays. (Refer to Annex 2 for the IMS structure)
- Technical co-ordinating meetings are being held with cooperating partners and other stakeholders. The meetings are chaired by the Director, ZNPFI.

2.2 SURVEILLANCE

- Surveillance at POEs remains heightened. A total of 2,675 arrivals from COVID-19 risk countries have been screened. Of these, 2,407 are currently under observation; 507 persons have completed the 14-day observation period (See table 2 below).
- 68 COVID-19 alerts have been received; 23 persons have been placed under observations
- 55 passengers on board flight EK713 that was carrying the two confirmed cases have been identified and are currently under self- quarantine and monitoring for 14 days.
- As of 21st March 2020, the COVID-19 surveillance status for Zambia is summarised in the table below:

Table 1: COVID-19 surveillance and monitoring report as of 21st March 2020

Parameter	Number
Total screened to date	2,675
Risk persons currently being monitored	2,407
Risk persons that have completed 14 days	507
Number of alerts notified & verified as non-cases	68
Number of persons under investigation	23
Number of COVID-19 confirmed cases	2
Number of close contacts under investigation	55

Table 2: COVID-19 surveillance alerts received – 20th March 2020

Province	Alerts Received
Central	3
Copperbelt	4
Eastern	0
Luapula	0
Lusaka	26
Muchinga	0
Northern	0
North Western	0
Southern	2
Western	0
Total	37

2.3 LABORATORY CAPACITY

- The University Teaching Hospital Virology Lab (UTHVL) (is the designated primary diagnostic laboratory for COVID-19, with additional capacity at the School of Veterinary Medicine (SVM), UNZA.
- Seventy-five (75) samples have been received to date; 58 have been processed, two of which were positive. Seventeen (17) samples were pending.
- The test turn-around time is 24 hours, and can take up to 36-48 hours where repeat or confirmatory testing is required
- **Criteria for testing:** individuals who meet the case definition *or* individuals who have had

2.4 CASE MANAGEMENT

contact/been exposed to a confirmed positive case and are symptomatic

- Five (5) patients are currently admitted at Levy Mwanawasa Hospital; two of whom were confirmed positive.
- Two patients were discharged in the last 24 hours. To date, a total of 8 suspected cases have been discharged.
- Two temporary screening structures have been set up at UTH and Levy for COVID-19 screening in

2.5 HEALTH PROMOTION AND RISK COMMUNICATION

order to decongest the facilities and reduce the risk of COVID-19

- Updated case definition posters have been printed with support from WHO and distributed to the Provincial Health Offices.
- UNICEF in conjunction with NAC have activated a free messaging platform on all networks; type and send the message 'COVID' to 878.
- A USSD code has been activated with support from USAID Discover on *573# to provide information to the public
- Interactive risk communication and health promotion programmes have been broadcast on a number of radio and television stations; regular press statements and press briefs have also been issued.
- Three hotlines (0953-898941; 0964-638726; 0974-493553) have been set up at the ZNPFI for the public to call for information regarding COVID-19.



- IEC materials are available at the following link: <http://znphi.co.zm/news/new-coronavirus-covid-19-travelers-guide-and-fact-sheet/>

3. GAPS AND CHALLENGES

- Incorrect/incomplete contact numbers submitted during passenger screening is hampering contact tracing and monitoring.
- Public frenzy and panic following the declaration of the outbreak; this has resulted in congestion at some facilities as people seek screening and testing

4. PRIORITY ACTIONS AND RECOMMENDATIONS

- IEC materials need to be updated to reflect the evolving outbreak situation.
- Use alternative numbers including foreign ones or e-mails for contact tracing
- Setting up of a dedicated COVID-10 toll free line and assign trained staff to respond to COVID-19 queries
- Develop an app on various platforms to provide information to the public; currently in talks with several partners
- Intensify risk communication activities on COVID-19
- Review and update IEC materials

5. CONCLUSION

Following the declaration of the COVID-19 outbreak in Zambia, the government has initiated additional key interventions, including stricter restrictions on public gatherings and heightened standards of sanitation in public places. All efforts are being made to ensure there is no local transmission of COVID-19.

ANNEX 1: EPIDEMIOLOGICAL DATA AS OF 6:00HRS ON 21st MARCH 2020

	Date	Tubalange	Levy	UTH	Daily Total	Cumulative since outbreak declared	Comments
Cases							
Suspected cases	21/03/20	0	0	0	0	11	
Confirmed cases	21/03/20	0	0	0	0	2	
Under treatment/Discharges							
Under treatment	21/03/20	0	5	0	5	13	
Discharges	21/03/20	0	2	0	2	8	
Transferred in	21/03/20	0	0	0	0	7	
Transferred out	21/03/20	0	0	0	0	7	
Deaths							
Deaths among suspected cases	21/03/20	0	0	0	0	0	
Deaths among lab confirmed cases	21/03/20	0	0	0	0	0	
UTH Virology Laboratory							
Samples received	21/03/20				20	75	
Samples processed	21/03/20				25	58	
Results pending	21/03/20				17		
COVID-19 positive	21/03/20	0	0	0	0	2	

ANNEX 2: CORONAVIRUS DISEASE 2019 (COVID-19) CASE DEFINITIONS

Case Definitions

Suspect case:

A. Patient with acute respiratory infection (fever and at least one sign/symptom of respiratory disease e.g. cough, shortness of breath), AND with no other aetiology that fully explains the clinical presentation AND a history of travel to or residence in a country/area or territory reporting local transmission of COVID-19 during the 14 days prior to symptom onset,

OR

B. Patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case in the last 14 days prior to symptom onset,

OR

C. Patient with severe acute respiratory infection (fever and at least one sign/symptom of respiratory disease e.g. cough, shortness of breath), AND requiring hospitalization AND with no other aetiology that fully explains the clinical presentation

Probable case: A suspect case for whom testing for COVID-19 is inconclusive or is tested positive using a pan-coronavirus assay and without laboratory evidence of other respiratory pathogens.

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

ANNEX 3: NATIONAL LEVEL INCIDENT MANAGEMENT SYSTEM FOR THE COVID-19 PREPAREDNESS RESPONSE

ZAMBIA COVID-19 INCIDENT MANAGEMENT STRUCTURE

