



SITUATION REPORT NO. 5

Response start date: 30th January, 2020 Disease Outbreak: COVID-19 Date of report: 23rd March, 2020 Correspondence: ims.covid@znphi.co.zm

1. CURRENT SITUATION UPDATE

- **Country Highlights**: As of 06hrs on 23rd March 2020, there were **no new** confirmed cases recorded in the past 24 hours. The total number of confirmed cases is three (3). There have been 0 deaths recorded
- Levy Mwanawasa Hospital: There are currently eight (8) patients (3) confirmed and 5 suspected cases, results pending) quarantined at Levy Mwanawasa Hospital in Lusaka; there were no discharges (Refer to Annex 1)

Zambia Current Numbers

- 3 Confirmed (0 new)
- 0 Deaths (0 new)
- 0 Recoveries (0 new)

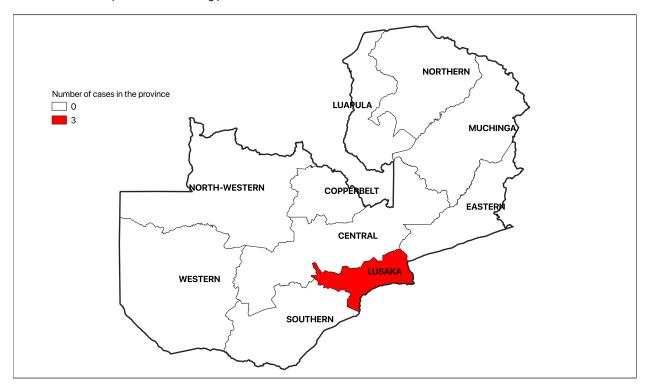
Global Numbers as of 22/03/20

(Source: WHO)

- **† 292,142** confirmed (26,069 new)
- 12,784 deaths (1,600 new)

*New: in the last 24hrs

Map of Zambia showing provinces with confirmed COVID-19 cases as at 23 March 2020







2. ACTIONS TO DATE

2.1 CO-ORDINATION

➤ Ministerial Level:

- Meetings of the council of ministers, inter-ministerial coordinating committee, and the National Epidemic Preparedness, Prevention Control and Management Committee (NEPPC&MC) have been convened since the declaration of the outbreak
- Statutory Instruments SI 21 and 22 were issued by the Minister of Health
- Regular press briefings have been held since the declaration of the outbreak in Zambia.

Technical level

- An Incident Management Structure (IMS) meets twice weekly on Tuesdays and Thursdays. (Refer to Annex 3 for the IMS structure)
- Technical co-ordinating meetings are being held with cooperating partners and other stakeholders. The meetings are chaired by the Director, ZNPHI.

2.4 CASE MANAGEMENT

- Levy Mwanawasa Hospital: There are currently eight (8) patients (3 confirmed and 3 suspected cases, results pending) quarantined at Levy Mwanawasa Hospital in Lusaka
- **Tubalange Hospital:** there are currently no persons admitted at the facility

2.5 LOGISTICS

- ➤ PPE distributed to Lusaka District Health Office for all sub-districts; distribution to other high risk districts scheduled for week of 22nd 27th March 2020
- PPE and consumables have also been delivered to Tubalange and Levy Isolation centres, as well as the UTH screening unit

2.6 HEALTH PROMOTION AND RISK COMMUNICATION

- Sensitisation of corporate entities scheduled to run from 23rd March to 3rd April 2020
- > Updated case definition posters have been printed and distributed to the Provincial Health Offices.
- A free messaging platform is active on all networks; type and send the message 'COVID' to 878.
- ➤ A USSD code *573# has been activated with support from USAID Discover





- 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 ZNPHI 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/

2.7 CAPACITY BUILDING

> Trainings for clinicians and district teams are currently ongoing in all ten provinces.

3. GAPS AND CHALLENGES

- > Surveillance: Non-compliance of quarantine rules by some passengers returning from COVID-19 risk countries
- Logistics: inadequate quantities of sample collection kits; require seven (7) additional vehicles for contact tracing (4), sample transportation (2) and logistics distribution (1); fuel for operations vehicles; and inadequate quantities of disinfectants and hand washing soap
- **Risk communication:** rampant rumours and fake news stories in circulation

4. PRIORITY ACTIONS AND RECOMMENDATIONS

- Follow up of cases of non-compliance among recent
- Procurement of additional quantities of PPE and consumables
- Continued implementation of scalable response plan commensurate with the level of the epidemic

5. CONCLUSION

Zambia recorded the third confirmed case of COVID-19; all recorded cases have been imported. A scalable response remains in effect across the country. Community participation in surveillance and implementation of public health measures such as social distancing and personal hygiene are key to controlling the outbreak.





ANNEX 1: EPIDEMIOLOGICAL DATA AS OF 6:00HRS ON 23rd MARCH 2020

	Tubalange	Levy	UTH	Daily Total	Cumulative since outbreak declared	Comments
Cases						
Suspected cases	0	2	0	2	17	
Confirmed cases	0	0	0	0	3	
Admissions/Discharges	<u> </u>		<u>I</u>	1		
Currently Admitted	0	8	0	8	20	
Discharges	0	0	0	0	12	
Transferred in	0	0	0	0	7	
Transferred out	0	0	0	0	7	
Deaths	<u> </u>		L	<u> </u>		
Deaths among suspected cases	0	0	0	0	0	
Deaths among lab confirmed cases	0	0	0	0	0	
UTH Virology Laboratory						
Samples received	-	-	-	16	91	
Samples processed	-	-	-	17	75	
Results pending	-	-	-	16		
COVID-19 positive	-	-	-	1	3	





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

