

ZAMBIA SITUATION REPORT NO. 14

Disease Outbreak: COVID-19	Response start date: 30 th January, 2020	Outbreak Declared: 18 th March, 2020
Date of report: 1st April, 2020	Prepared by: MOH/ZNPPI/WHO	Correspondence: ims.covid@znphi.co.zm




1. SITUATION UPDATE

1.1 CURRENT CASE NUMBERS

➤ As of 17 hours on 1st April, 2020, there were **no new confirmed cases of COVID-19** recorded in the past 24 hours. The total number of confirmed cases is **thirty-six (36)**. There have been **zero (0) deaths** recorded to date (Refer to Annex 1). All cases (suspected/confirmed) are admitted to designated isolation facilities.




- **Levy Mwanawasa Hospital:** There are currently **36** patients admitted: 34 confirmed positive and 2 suspected cases (with results pending)
- **Masaiti District Hospital (Copperbelt):** There are currently two (2) confirmed positive cases.

Zambia Current Numbers

 **36 Confirmed (0 new)**
 **0 Deaths (0 new)**
 **0 Recoveries (0 new)**

Global Numbers

(Source: Johns Hopkins University)

 **883,225 Confirmed (79,575 new)**
 **44,156 Deaths (5,142 new)**
 **185,241 Recoveries (12,469 new)**

**New: in the last 24hrs*

1.2 EPIDEMIOLOGICAL HIGHLIGHTS

Table 1: COVID-19 Summary surveillance and case management report as of 1st April 2020

Parameter	Number
Cumulative number of high risk persons recorded	5,622
Number of high risk persons currently observation	1,193
Cumulative number of high risk persons that have completed 14 days observation	1,029
Cumulative number of alerts notified & verified as non-cases	258
Number of suspected cases reported today	176
Cumulative Number of Samples Received	825
Total Number of Results Processed	640
Total Number of Confirmed COVID-19 Positive Cases	36

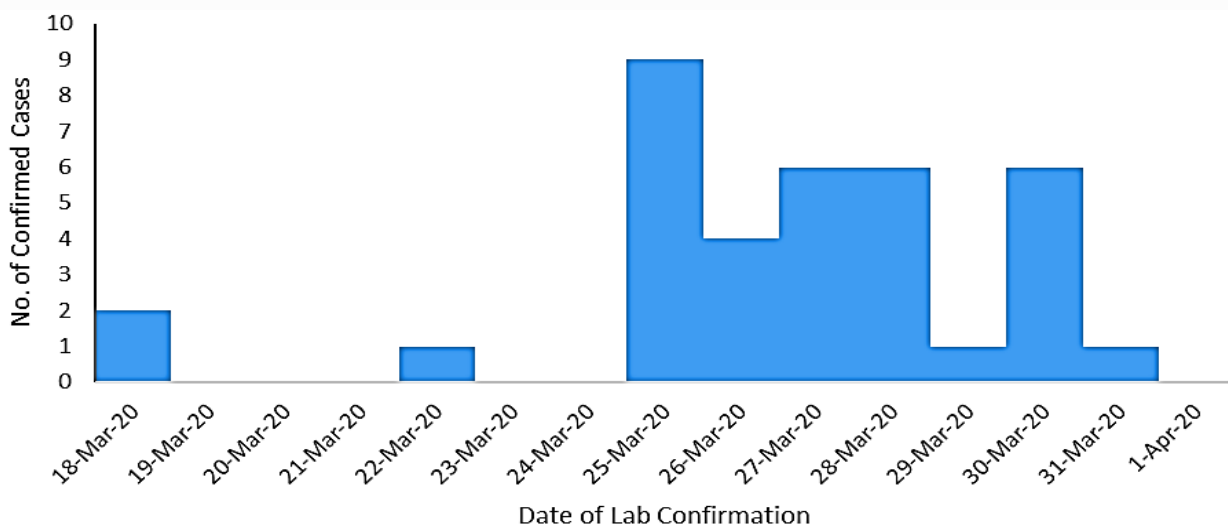


Figure 1: Epi-curve of COVID-19 confirmed cases (N=36) as of 1st April 2020

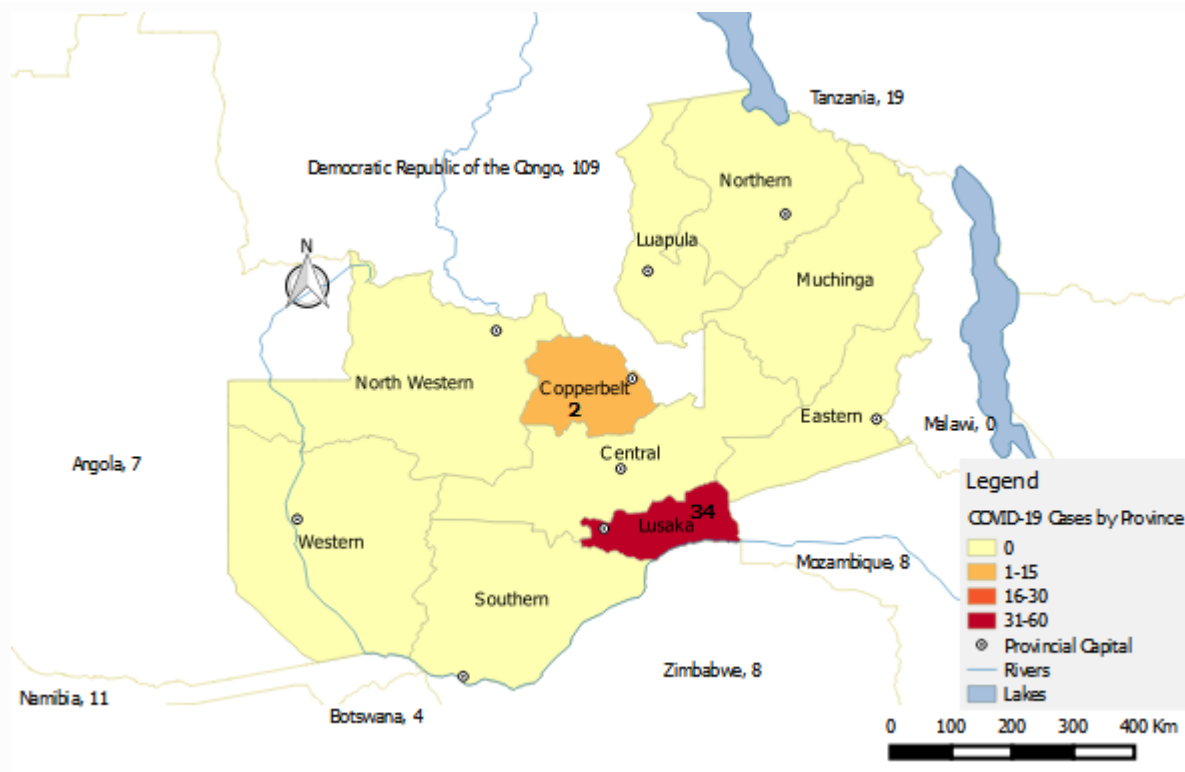


Figure 2: Map of Zambia showing confirmed COVID-19 cases by province, and confirmed cases in neighbouring countries as of 1st April 2020

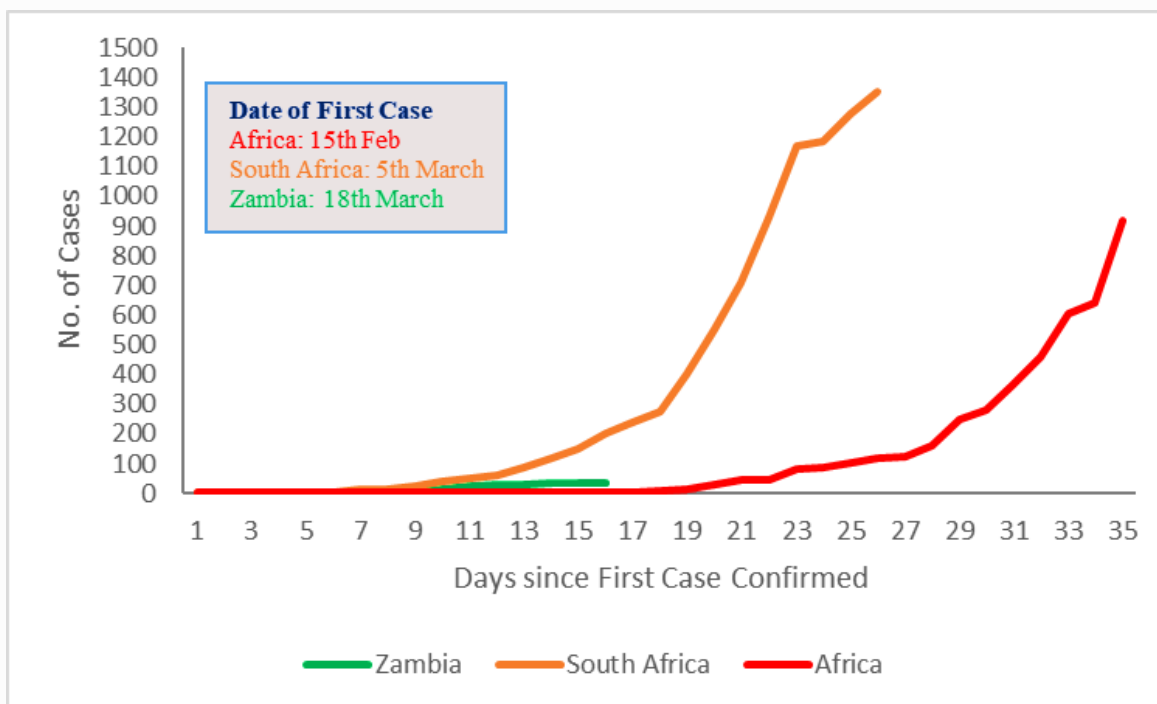


Figure 3: Cumulative trend graph comparing the number of confirmed cases in Zambia, South Africa and the whole of Africa recorded during the first 35 days (Sources: MoH Zambia, NICD South Africa, Africa CDC)

Table 2: Summary of COVID-19 cases recorded country-wide as of 1st April 2020

Reporting Province	New Cases	Total Confirmed Cases	New Deaths	Total Deaths	Transmission Classification	Days since last confirmed case discharged
Lusaka	0	34	0	0	25 Imported 9 Local	0
Copperbelt	0	2	0	0	2 Imported	0
Central	0	0	0	0	N/A	0
Southern	0	0	0	0	N/A	0
Eastern	0	0	0	0	N/A	0
Western	0	0	0	0	N/A	0
Northern	0	0	0	0	N/A	0
N/Western	0	0	0	0	N/A	0
Luapula	0	0	0	0	N/A	0
Muchinga	0	0	0	0	N/A	0
Total	0	36	0	0		

- **Sex distribution:** Of the confirmed cases, 28 are male and 6 are female (Note: data cleaning and verification in process to verify incomplete details of the 2 unknowns).

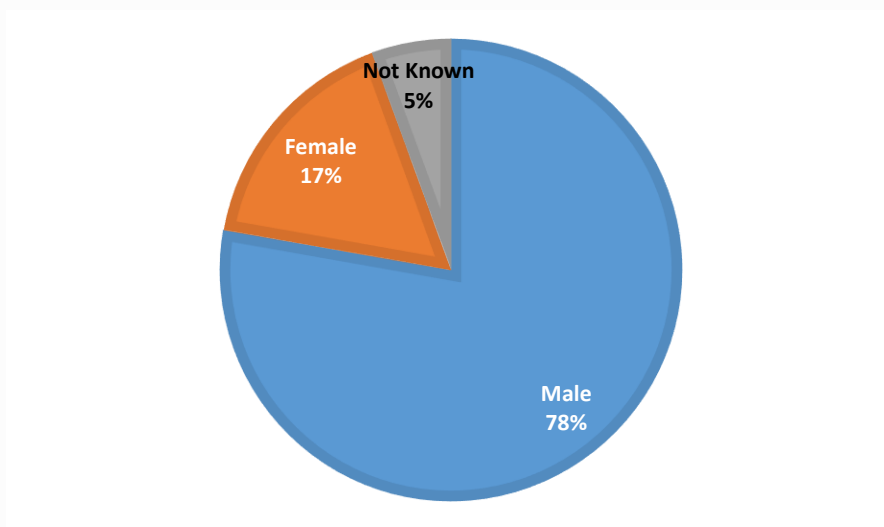


Figure 1: Sex distribution of confirmed cases reported as of 1st April 2020

- **Age distribution:** Of the confirmed cases, the most affected age group is between 15-30 years old. (Note: data cleaning and verification in process to verify incomplete details of the 2 unknowns).

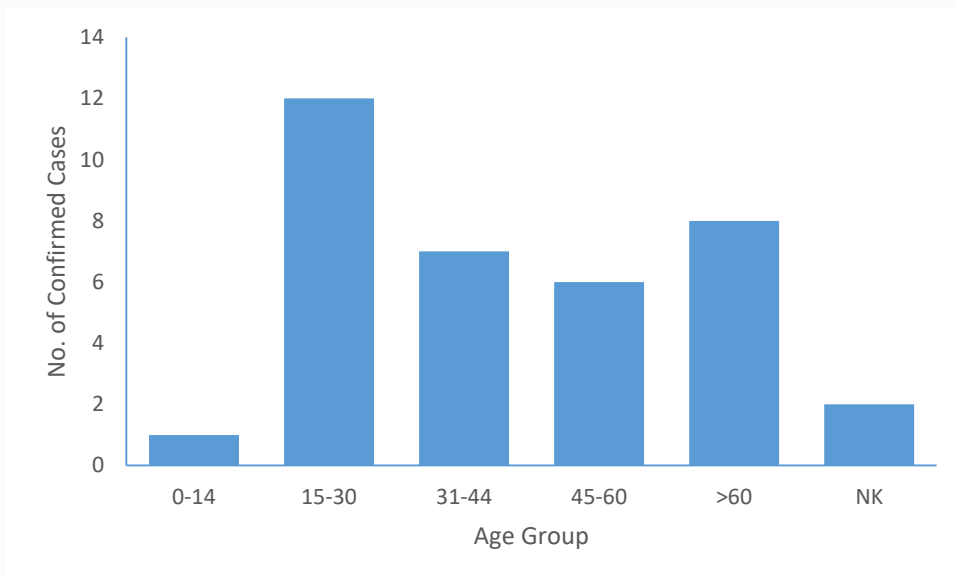


Figure 2: Age distribution of confirmed cases reported as of 1st April 2020

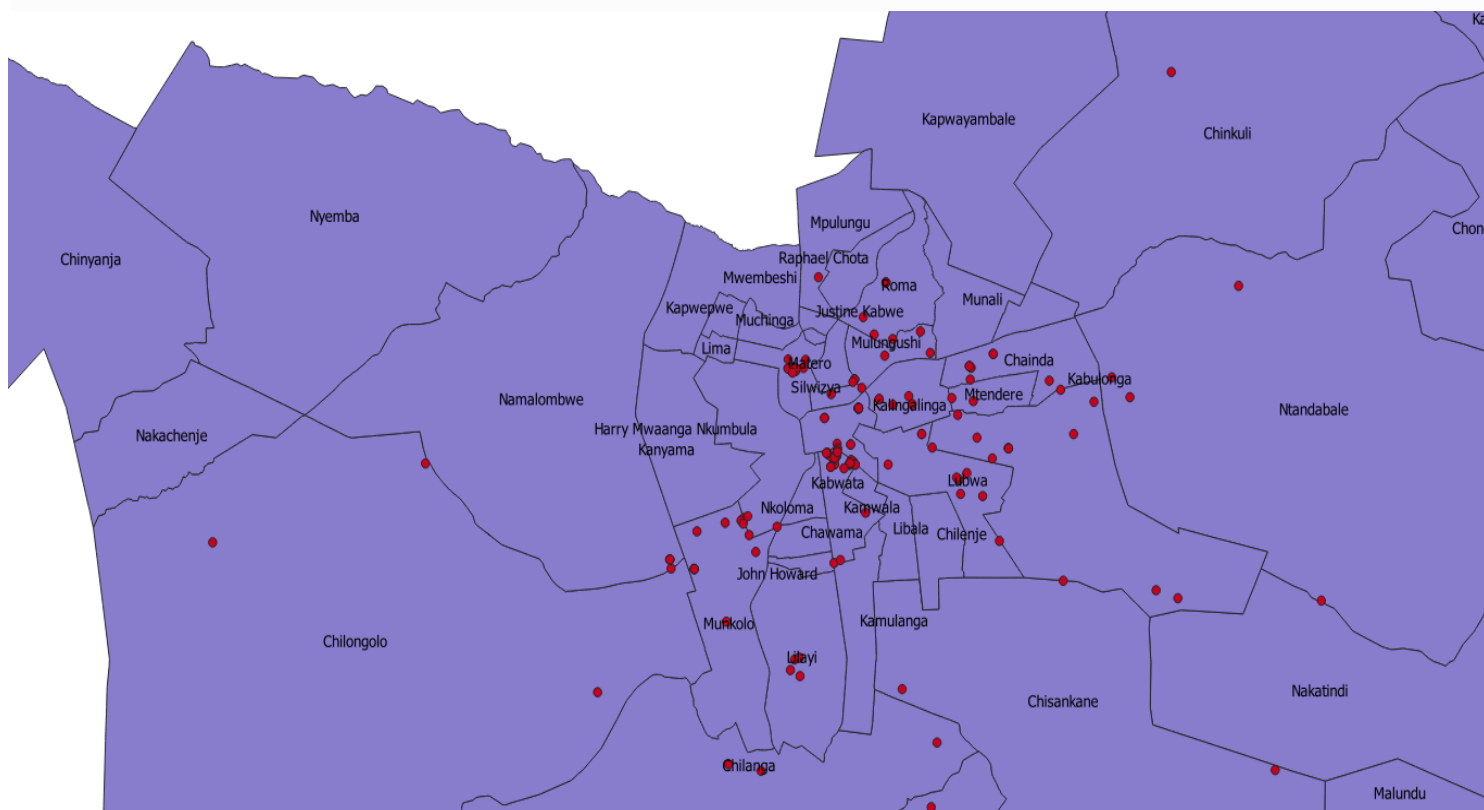


Figure 3: Map of contacts of confirmed cases within Lusaka , 1st April 2020

2. ACTIONS TO DATE

2.1 CO-ORDINATION

➤ Policy Level:

- At SADC level, Zambia is party 11 key areas agreed on by member states as part of regional initiatives to coordinate the outbreak response including preparedness and response, surveillance, diagnostics and laboratory testing, risk communication, facilitation of the movement of goods and services, regional trade, regulatory provisions, and disaster risk management.
- Meetings of the Council of Ministers, Committee of Permanent Secretaries, and the National Epidemic Preparedness, Prevention Control and Management Committee (NEPPC&MC) have been convened since the declaration of the outbreak
- Recruitment of surge staff to support the outbreak response including 400 doctors and over 3000 para-medical staff.
- Statutory instruments **SI21 and SI22 of 2020** to facilitate the management of COVID-19 were signed into effect on 13th March 2020. SI 21 and 22 have been operationalised through:
 - Closure of Simon Mwansa Kapwepwe (Copperbelt province), Harry Mwanga Nkumbula (Southern Province) and Mfuwe (Eastern province) International Airports. All international flights have been rerouted to Kenneth Kaunda International Airport (KKIA), Lusaka.
 - Screening of all travellers at points of entry (symptomatic travellers are isolated at a health facility; asymptomatic travellers are required to undergo quarantine and monitoring for at least 14 days);
 - Suspension of non-essential travel to countries with confirmed COVID-19 cases;
 - Restriction of public gatherings to no more than 50 people;
 - Restaurants to operate only on take away and delivery basis; closure of all bars, nightclubs, cinemas, gyms and casinos.
 - Closure of all schools and higher learning institutions until further notice
 - Government measures and interventions to control the spread of COVID-19 came into effect at midnight on Thursday 26th March, 2020 in line with the Public Health Act, SI21 and SI22, and the presidential directives.

➤ Technical level:

- Development, printing and distribution of various SOPs in targeted areas of operation is ongoing
- The IMS continues to meet on Tuesdays and Thursdays. (Refer to Annex 2 for structure)
- Technical co-ordinating meetings are being held with cooperating partners and other stakeholders. The meetings are chaired by the Director, ZNP HI

2.2 SURVEILLANCE

Surveillance (including Event Based Surveillance) is being actively conducted at POEs, health facilities, and sentinel sites. A technical team was dispatched from national level to Livingstone to strengthen capacity for port health services as well as to strengthen coordination and response at district level.

- **Screening at POEs:** screening of travellers into Zambia remains in effect. A secure location has been provided for trucks carrying commodities into the country while the truck drivers undergo mandatory 14 days quarantine at designated places. Rapid Response Teams have been put in place at the points of entry to ensure expedited screening and testing of truck drivers carrying essential commodities so as not to disrupt trade.
- **Contact Tracing:** surveillance teams continue to actively follow up contacts of confirmed cases. All travellers who arrived in Zambia aboard Turkish Airways, Kenya Airways, Emirates and South African Airlines from 15th March 2020 to date must remain in self-quarantine and notify the health authorities if they develop any symptoms.
- **Laboratory:** The University Teaching Hospital Virology Lab (UTHVL) (WHO-certified National Influenza Centre) is the designated primary diagnostic laboratory for COVID-19, with additional capacity at the School of Veterinary Medicine (SVM), UNZA.
 - Diagnostic capacity has been expanded to the Northern region. Tools, reagents and technical expertise have been provided to the Tropical Diseases Research Centre (TDRC) on the Copperbelt.
 - A sample referral system is in place for samples being collected in other provinces.
 - The total number of samples received to date is 825; 640 results have been processed with 36 confirmed positive for SARS-CoV-2. Summary of tests conducted to date is available in Annex 1
 - The standard test turn-around time is 24 hours, but 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 contact/been exposed to a confirmed positive case and are symptomatic
- **Case Management:** All symptomatic cases (suspected, probable and confirmed) are admitted to the designated isolation facilities. Patients are only discharged once their test results (initial test for suspected cases; re-test for confirmed cases) are negative. Refer to Annex 1 for detailed summary
 - **Levy Mwanawasa Hospital:** In the last 24 hours, the facility had two new admissions of suspected cases and three discharges (suspected cases with a negative test result). One of the suspected cases was admitted in a moderate/severe condition. There are currently 36 patients admitted at the facility

(34 confirmed positive; 2 suspected with results pending). The confirmed case with an underlying chronic respiratory illness remains in severe but stable condition.

- **Masaiti District Hospital:** 2 confirmed positive cases admitted at the facility; no new admissions
- **Tubalange Hospital:** there are currently no cases admitted at the facility
- **University Teaching Hospital:** There are currently no patients admitted at the facility.
- **COVID-19 Screening Facilities:** Dedicated screening structures have been set up at the UTH and Levy Mwanawasa, away from the areas of routine service delivery.
- **Isolation facilities** have also been set up in all high risk districts across the ten provinces; a detailed list is available at Annex 4

3. GAPS AND CHALLENGES

- **Logistics:** low stocks of sample collection supplies and other logistical supplies due to limited availability and increased demand on the global market.
- **Surveillance:** inadequate manpower to respond to the escalating outbreak response

4. PRIORITY ACTIONS AND RECOMMENDATIONS

- **Policy:** Government has commenced the recruitment of 400 doctors and over 3000 para-medicals to support the response; a driver relay system at ports of entry to ensure there is no disruption to the supply of essential goods; incentives to be provided for all frontline staff serving on the response.
- **Surveillance:** Technical team dispatched to Southern province to strengthen port health services and coordination of the response at district level
- **Case management:** Additional facilities have been identified to serve as designated isolation facilities. The Courtyard hotel has been designated as an isolation centre for management of stable patients not requiring intensive clinical care management. The Victoria Hospital and another facility in Makeni with a 200 bed capacity have also been identified as isolation facilities. Levy Mwanawasa will be restricted for patients requiring intensive clinical care management.
- **Logistics:** tools, reagents and technical capacity provision to TDRC in order to expand lab capacity for the Northern region

5. CONCLUSION

Zambia recorded no new confirmed cases of COVID-19 in the last 24 hours. The total number of confirmed cases stands at 36. The government with support from partners continues to mount a scalable response to the outbreak. The public is urged to adhere to measures and guidelines put in place to stop the transmission of COVID-19.

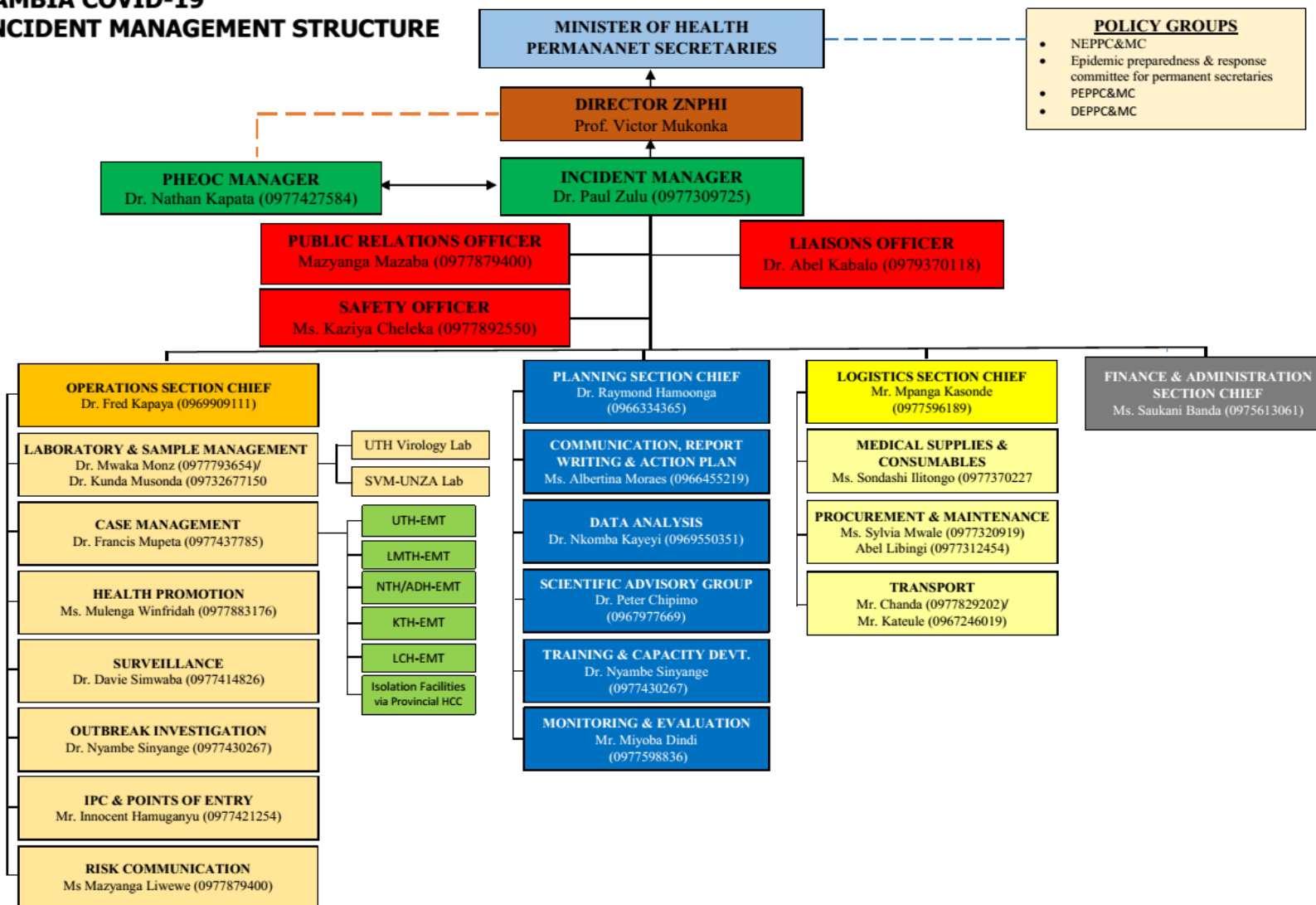
ANNEX 1: EPIDEMIOLOGICAL DATA AS OF 17:00HRS ON 1ST APRIL 2020 *

Total Cases	Daily Total			Cumulative since outbreak declared		
Suspected cases	176			-		
Confirmed cases	0			36		
Diagnostics and Laboratory Testing						
Samples received	111			825		
Samples with results processed	120			640		
Number of re-tests	0			6		
COVID-19 positive	0			36		
COVID-19 negative	120			598		
Samples with results pending	185			-		
Statistics By Health Facility	Tubalange	Levy	Masaiti	UTH	Daily Total	Cumulative since outbreak declared
Admissions/Discharges						
New Admissions	0	2	0	0	2	60
Currently Admitted	0	36	2	0	38	-
Discharges	0	3	0	0	3	22
Transferred in	0	0	0	0	0	7
Transferred out	0	0	0	0	0	7
Deaths						
Deaths among suspected cases	0	0	0	0	0	0
Deaths among lab confirmed cases	0	0	0	0	0	0

**Reported figures may vary due to continual data cleaning and verification as part of quality assurance*

ANNEX 2: NATIONAL LEVEL INCIDENT MANAGEMENT SYSTEM FOR THE COVID-19 PREPAREDNESS RESPONSE

ZAMBIA COVID-19 INCIDENT MANAGEMENT STRUCTURE



ANNEX 3: CORONAVIRUS DISEASE 2019 (COVID-19) CASE DEFINITIONS

Case Definitions

1. 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

2. 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.

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

4. Person Under Investigation: a suspected case, irrespective of admission status, with either history of travel to an area with local transmission or worked in/attended a health care facility treating COVID-19 infections or admission to a facility for severe pneumonia of unknown aetiology

5. Contact: a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case: a. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes; b. Direct physical contact with a probable or confirmed case; c. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment; OR d. Other situations as indicated by local risk assessments.

ANNEX 4: LIST OF DESIGNATED ISOLATION FACILITIES FOR THE COVID-19 OUTBREAK RESPONSE

PROVINCE	DISTRICT	ISOLATION FACILITY
Eastern	Chipata	Walera HP and Chipata District Hospital
	Chadiza	Sadzu RHC and Chilenga HP
	Lundazi	Lundazi New Hospital Male Ward
	Mambwe	Agriculture Field Training Centre and ADRA shade in Nsefu
	Petauke	Zuze Health Post
	Katete	Katete Livestock Market
	Nyimba	Chininkhu Health Post
	Sinda	Ukasimbe Health Post and Chinzule HP
	Vubwi	Chigwe Health Post
	Kasenengwa	Kanzutu Health Post
	Lumezi	Lumezi Hospital, Mwasemphangwe Zonal and Mwanya RHC
	Chasefu	Kanyanga Mission Hospital
	Chipangali	Mkanda RHC and Chinunda RHC
	Lusangazi	Ukwimi Trades
Southern	Livingstone	Mosi Oa Tunya Health centre
	Zimba	Zimba Basic school
	Siavonga	Kabbila Health Post
	Pemba	Pemba Main Clinic
	Kalomo	Mawaya Clinic
	Monze	Mulumbwa Health Post
	Mazabuka	Research clinic
	Chikankata	Nansenga Rural Health centre
	Namwala	Nchole Health Post
	Choma	Njase Clinic
	Gweembe	Munyumbwe HAHC
	Kazungula	Kazungula hospital admin block
	Sinazongwe	Sinazongwe rural health centre
	Lusaka	Chilanga

	Chirundu	Lumbembe Clinic
	Kafue	Shikoswe Clinic
	Luangwa	Kavalamanja RHC, Chitpoe RHC, Kasinsa RHC, Mandombe RHC
	Lusaka	Levy Mwanawasa, UTH, Tubalange Mini Hospital, Chawama SD, Matero SD, Chilenje SD, Kanyama SD, Chipata SD, Victoria Hospital, Bauleni
	Rufunsa	Rufunsa RHC, Chinyunyu RHC
Muchinga	Isoka	Lualizi and Kafwimbi RHC
	Lavushimanda	Red Rhino school, Muwele Market .
	Nakonde	Nakonde Hospital and Nakonde Urban Clinic.
	Chama	FTC
	Shiwang'andu	Lwanya RHC
	Mpika	Chibansa RHC
	Kanchibiya	Kopa Primary school , LuchembeKanchibiya resettlement scheme, Chalabesa RHC.
	Chinsali	Nambuluma RHC
	Mafinga	Mulekatembo
	Western	Senanga
Shangombo		Shangombo Secondary School
		Shangombo RHC
Kaoma		Kaoma Trades
		Kaoma Youth Resource Centre
Luampa		Kahumbu Primary School
Lukulu		Lukulu Old Hospital

	Mitete	Lukulu Old Hospital
	Kalabo	Wenela RHC
	Nalolo	Muoyo RHC
	Sioma	Old Nangwesh Refugee Camp
	Mulobezi	Mulobezi HAHC
	Mwandi	Situlu Health Post
	Sesheke	Mulimambango
	Sikongo	Sikongo RHC
	Limulunga	Nan'oko Health Post
	Mongu	Mongu D Hospital, Mweeke HP
	Nkeyema	Nkeyema Zonal Health Centre
Central	Chitambo	Muchinka RHC
	Mkushi	Kasalamkanga RHC
	Serenje	Serenje Boma School
	Iuano	Old Mkushi Health Centre
	Kapiri	Tazara dry port
	Kabwe	Old Mukobeko clinic
	Chibombo	Twalumba RHC
	Chisamba	Malombe RHC
	Shibuyunji	Sichobo Rural Health Centre
	Mumbwa	Mumbwa Urban Clinic
	Itezhi tezhi	Itezhi tezhi Basic School/Uphill Scholl and and Itezhi Tezhi Boarding School
	Ngabwe	Iwonde primary school

Copperbelt	Chililabombwe	Council Hall
	Chingola	Kalilo Health Centre
	Kalulushi	Kalulushi Urban Health Centre
	Kitwe	Garnerton Clinic
	Luanshya	Chibolya Clinic
	Lufwanyama	Shimukunami Rural Health Centre
	Masaiti	Masaiti District Hospital
	Mpongwe	Bwembelelo Health Post
	Mufulira	Mutundu RHC
	Ndola	Itawa clinic
	Northern	Chilubi
Kaputa		Kaputa RHC Kalaba RHC Kapepula HP
Kasama		Lukupa Rural Centre
Lunte		Chitoshi RHC Mukupa Koama RHC Mulenga Mapesa HP
Lupososhi		Chungu RHC Nsombo RHC
Luwingu		Ipusikilo RHC
Mbala		Chulungoma Urban Clinic Kaluluzi Health Post
Mporokoso		Township Clinic Chiwala RHC
Mpulungu		Mpulungu Urban Clinic
Mungwi		Mungwi Baptist HC, Kayambi RHC
Nsama		NsumbuRHC
Senga	Nsumbu RHC, Mwiluzi HP, Sumbi HP	

