DEPARTMENT OF HEALTH
World Health Organization
Representative Office for Papua New Guinea

Papua New Guinea
Coronavirus Disease 2019 (COVID-19) Health Situation Report #37
7 September 2020
Period of report: 31 August – 6 September 2020

This Situation Report is jointly issued by PNG National Department of Health and World Health Organization once weekly. This Report is not comprehensive and covers information received as of reporting date.

Situation Summary and Highlights

- As of 6 September (12:00 pm), there have been 497 COVID-19 cases and five COVID-19 deaths reported in Papua New Guinea. From the period of 31 August to 6 September, there were 38 new cases.
- The total number of provinces that have reported COVID-19 cases to date is thirteen, after confirmation of three and two cases in East Sepik and West New Britain, respectively. Western Province (17) and the National Capital District (16) continued to report cases in the last week.
- Contact tracing is ongoing for all the cases confirmed.
- From 1 to 4 September, a team from the National Control Centre (Surveillance and Clinical Management Clusters) and WHO traveled to Tabubil in Western Province for outbreak and response investigation to provide support and recommendations regarding the large cluster outbreak at Ok Tedi Mining Limited.
- After the implementation review of the National Control Centre (NCC) Operational Blueprint last week, the NCC updated the key goals and strategies for implementation in the next four weeks.
- New National Pandemic Measures were issued on 3 September (See Annex A).
- The National Communications Plan for COVID-19 was updated with a communication strategy covering the period of September to December 2020, with a focus on long-term community engagement.
- The Niupela Pasin checklist was developed as a tool to monitor adoption of behaviours and actions to reduce the risk of COVID-19. The tool was piloted in the National Capital District (NCD) with different settings visited, including primary schools, public markets, shopping centres, banks, etc.

Table 1. COVID-19 IN PAPUA NEW GUINEA[1]

	New Cases (31 August – 6 September 2020)	Cumulative Total
National Capital District	16	290
Western	17	183
Central	0	6
Morobe	0	5
East Sepik	3	3
West New Britain	2	2
East New Britain	0	2
AROB	0	1
Eastern Highlands	0	1
Milne Bay	0	1
New Ireland	0	1
Sandaun	0	1
Southern Highlands	0	1
TOTAL	38	497

[1] As of 2020/09/06, 12:00 pm, PNG time

Table 2. COVID-19 GLOBAL AND REGIONAL UPDATE[2]

	Confirmed Cases	Deaths
Global	26 684 498	873 865
Western Pacific	469 523	10 846

[2] WHO COVID-19 Dashboard as of 2020/09/06, 2:14 pm CEST

Upcoming Events and Priorities

- **Coordination:** The National Control Centre will start implementing the new phase of the NCC Operational Blueprint, covering the period of 7 September – 4 October. The key strategies identified were in the areas of strategic leadership and overall oversight of the response, awareness raising, prevention of further transmission, and partnership coordination. A reporting template for the Provincial Control Centres will be piloted to monitor response efforts in the provinces using selected performance indicators. A meeting between NCC and the provincial CEOs and incident managers is planned on 8 September to improve overall coordination and implementation of key response strategies.
- **Surveillance:** Piloting of the electronic Health Declaration Form (eHDF) and engagement with stakeholders are priority activities for the week. The revised surveillance standard operating procedures will be finalised. Engagement with provinces on surveillance indicator reporting and planning for provincial support visits will also continue.
- **Case Management and Infection Prevention and Control:** COVID-19 Clinical Management Guidelines, Home and Community Quarantine Guidelines, and Home and Community Isolation Guidelines are in the process of finalization with consultation sessions planned and scheduled. Improving monitoring of case-based management at healthcare facility level and mortality tracking are priority areas. A National IPC Network is planned to be established to convene provincial and regional IPC focal points, the National Department of Health and relevant partners.
- **Risk Communication & Non-Pharmaceutical Interventions (NPIs):** The newly updated Communication Strategy will guide RCCE activities for the remainder of the year. A survey on knowledge, attitudes and practices (KAP) is planned

Four regional church leaders' sensitization workshops organized by the PNG Council of Churches are scheduled to be conducted in September and October (i.e. Highlands on 9-10 September, New Guinea Islands on 23-24 September, Momase on 7-8 October and Southern on 21 October), with the objective to coordinate church leadership involvement in raising awareness on the New Normal way of life in the COVID-19 pandemic. After the pilot of the Niupela Pasin checklist in NCD, the priority is to establish contact with Niupela Pasin focal points in the provinces. Provincial visits are planned to introduce the monitoring tool and support its roll out. A community consultation is being planned in NCD for the home and community isolation guidelines.

National Transmission Assessment

3 – Large-scale community transmission
Cases continue to increase in Papua New Guinea despite low testing. In the past 7 days, 38 newly confirmed cases have been reported nationally, with 13 out of 22 provinces affected. Of these new cases in the past 7 days, 16 (42%) have been reported from NCD, but majority of these are not epidemiologically linked (investigations are still ongoing) which indicates wide-spread community transmission in NCD. There have been 17 (45%) additional confirmed cases in Western Province in the past 7 days contributing to a large localised cluster of 180 confirmed cases. One out of the five cases in Morobe has no epidemiological link possibly indicating local transmission; however, more testing is needed to determine extent of transmission. The other provinces have reported 1 to 2 sporadic cases, with majority having travel history from Port Moresby or contact with a positive case from Port Moresby demonstrating the extent of transmission in the National Capital District. With ongoing population movement and low compliance to non-pharmaceutical interventions in NCD, ongoing increase in cases is expected. With movement to provinces, it is expected to see sporadic cases and local clusters reported by other provinces. Testing in all provinces remains critically low, therefore ongoing transmission in other parts of the country is a possibility as population mobility continues. Importation from bordering Papua Province in Indonesia and incoming travellers from other countries reporting COVID-19 cases also remains a threat. Testing needs to increase substantially to understand the extent of transmission.

Epi Update COVID-19

Tests	Cases	Deaths	ICU Admissions
1064 NAT Tests past 7 days	**38** New cases past 7days	**0** Deaths past 7days	**0** ICU Admissions past 7 days
16518 Cumulative NAT Tests	**497** Cumulative Cases	**5** Cumulative Deaths	**8** Cumulative ICU Admissions

0 Imported Cases in past 28 days	**22*** Cases in past 7 days with no link	* Active Clusters	* Active clusters with >3 generations

Health Service Provision COVID-19

4780 Health care workers trained in COVID19 Case Management	**1*** Healthcare worker cases reported past week	**1** Hospitals admitting COVID-19 patients	**97** ICU beds for COVID-19 patients	**>305** Non-ICU Hospital beds for COVID19 patients

* Case investigations are ongoing

Epidemiology

- As of 6 September (12:00 pm), there have been 497 COVID-19 cases and five COVID-19 deaths reported in Papua New Guinea. From the period of 31 August to 6 September, there were 38 new cases from Western (17, 45%), NCD (16, 42%), East Sepik (3, 8%) and West New Britain (2, 5%).
- Western Province cases are linked to a large local cluster at a mining site, with only 5 out of 17 cases in the past week identified as contacts of positive cases. In the past week, majority of NCD cases has not been epidemiologically linked.
- Majority of the confirmed cases are male. Ages range from 1 to 84. Most (54%) of the confirmed cases are asymptomatic.
- In the past week, 2 new provinces identified positive COVID-19 cases: West New Britain and East Sepik. There are now confirmed COVID-19 cases reported from 13 out of 22 provinces (60%): NCD, Autonomous Region of Bougainville, Central, Eastern Highlands, East New Britain, East Sepik, Milne Bay, Morobe, New Ireland, Sandaun, Southern Highlands, West New Britain and Western.
- Sample collection is still critically low throughout the country. In the past week, 1064 samples from 15 provinces were received at Central Public Health Laboratory and PNG Institute of Medical Research.

Figure 1. Epi Curve of COVID-19 cases in Papua New Guinea, April to 6 September 2020

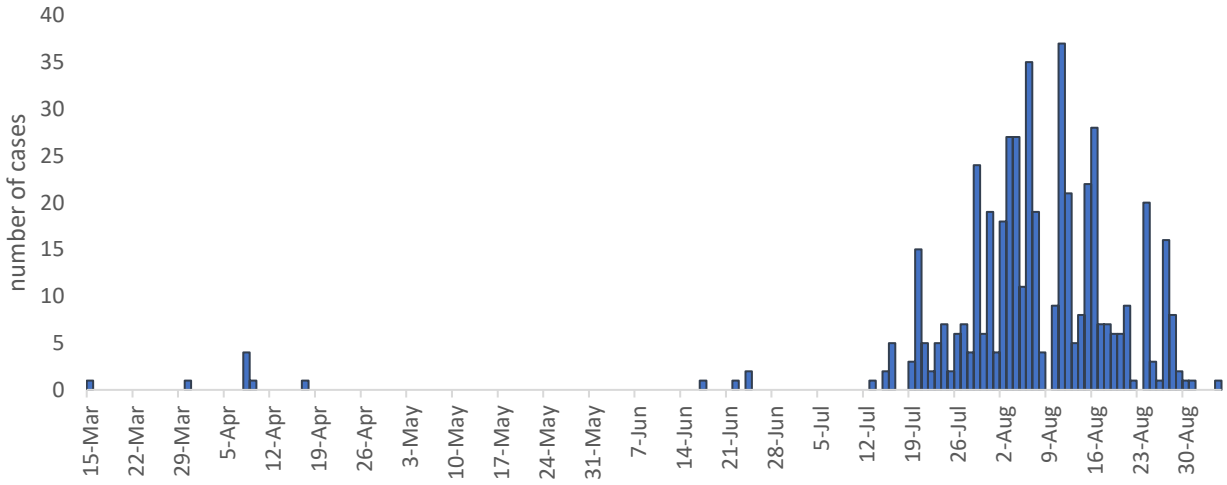


Figure 2. COVID-19 Cases by Age-Group and Sex in Papua New Guinea from March to 6 September 2020

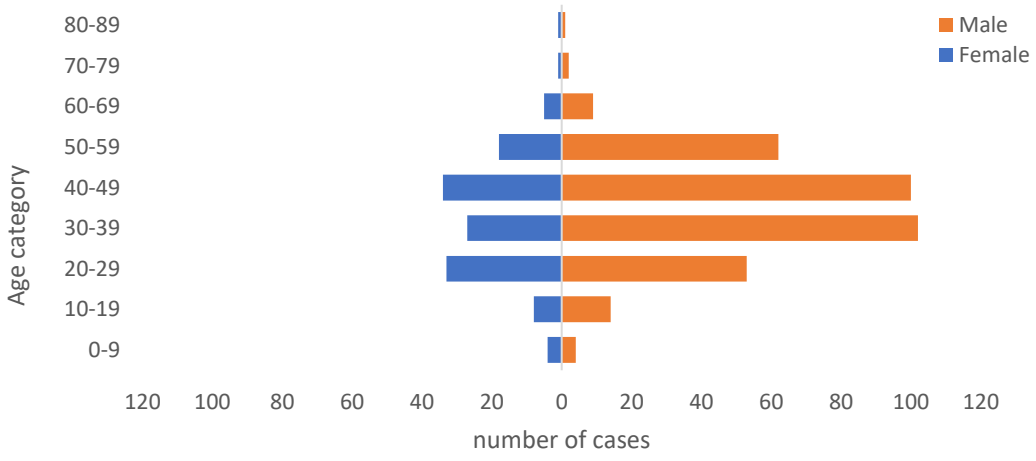
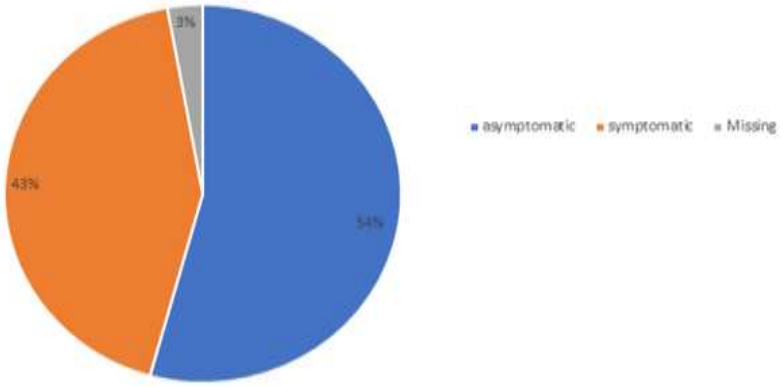


Figure 3. Proportion of Symptomatic and Asymptomatic COVID-19 Cases in Papua New Guinea at Time of Testing from March to 5 September 2020



Strategic Approach

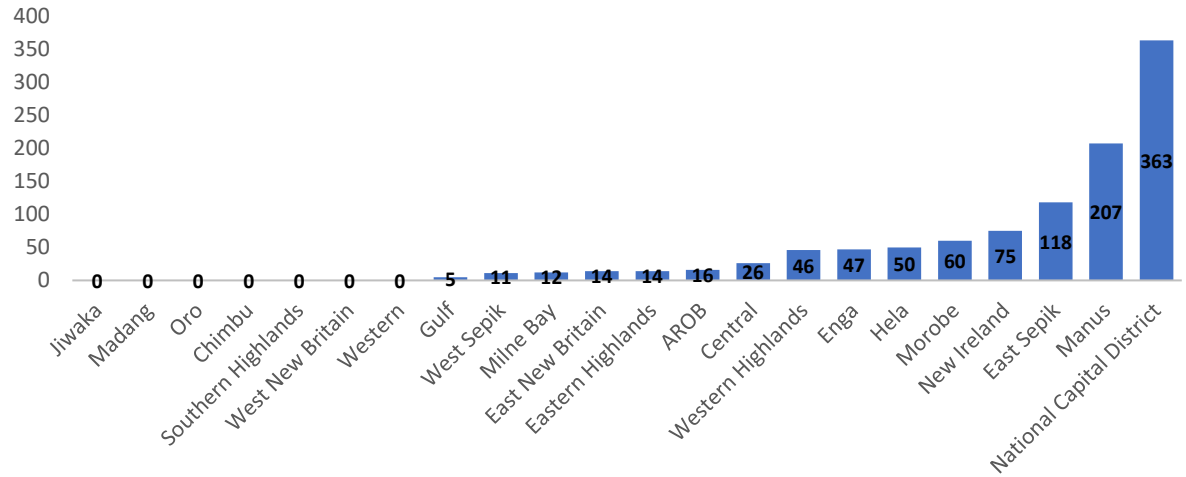
National and Provincial Public Health Response

- The Pandemic Response Coordination Group and the Health Operations Team continue to meet daily. The National Control Centre will implement the new phase of the NCC Operational Blueprint, for the next four weeks.

Surveillance and Testing

- Surveillance products are produced and distributed: (1) National Daily Epidemiological Situation Updates Presentation and Epi Updates; and, (2) Surveillance Bulletins.
- Most of the provinces submit daily reports of suspected COVID-19 (including SARI) patients. While completeness of reporting is increasing, sample collection and testing are still not adequate to generate reliable transmission assessment. See weekly surveillance bulletin for trends.
- The Provincial Surveillance Teams are leading the case investigation and contact tracing with support from the National Control Centre and WHO.
- The updated daily reporting forms for PNG IMR and CPHL are now being used to improve data flow on samples received, samples tested, and samples shipped for testing.

Figure 4. Total Number of Samples Received at CPHL and PNG IMR by Province from 31 August to 6 September 2020 (n=1064)



- Papua Province in Indonesia is continuously reporting COVID-19 cases in areas that border Sandaun and Western Provinces in Papua New Guinea. While the border is officially closed, the threat of case importation from Indonesia remains high. As of 5 September, Papua Province has reported a total of 3981 confirmed cases and 48 deaths (data accessible at https://covid19.papua.go.id/).
- Presentations were made to the e-Health Technical Working Group (TWG) on the proposed use of electronic Health Declaration Form (eHDF) and Senaite as the laboratory information management system to be used at the Central Public Health Laboratory. The TWG endorsed the pilot implementation of the eHDF for a month and recommended that relevant technical units at the NDOH be involved in further discussions related to Senaite. Presentations to the eHealth Steering Committee will be scheduled after the eHDF pilot is completed.

Table 3. Persons Screened by Point of Entry

Total Number of Travelers Screened before SOE (until 22 March)	29 387	
Total Number of Travelers Screened during SOE (23 March – 16 June)	3780	
Total Number of Travelers Screened after SOE (17 June – 5 September)	Air	3556
	Sea*	296
* 3 passengers and the rest are crew	Land	6
	Total	3858

COVID-19 Prevention and Control

- The Rita Flynn Isolation Facility has now the ability to conduct GeneXpert testing in a mobile laboratory repurposed for COVID-19 from the TB programme.
- NDoH and WHO conducted IPC refresher training for 20 staff at Rita Flynn Isolation Facility covering rational use of PPE, cleaning and disinfection.
- District-level trainings in the provinces are ongoing under the NDOH-UNICEF PNG COVID-19 Emergency Response Project with funding from World Bank and technical support from WHO.

Table 4. Number of Healthcare Workers and Programme Managers Trained under the NDOH-UNICEF PNG COVID-19 Emergency Response Project (funded by World Bank)

	Province	Number of Batches Completed	Number of Individuals Trained
1	Western Highland	1	24
2	Jiwaka	3	65
3	Simbu	3	62
4	Central	3	54
5	Enga	1	20
6	Morobe	2	31
7	Madang	6	86
8	Eastern Highland	1	32
9	Southern Highland	2	30
TOTAL		**22**	**404**

Table 5. Number of Health Care Workers Trained by Province

Province		Total	Province		Total
No.	**MOMASE REGION**		**No.**	**NEW GUINEA ISLANDS REGION**	
1	Madang	432	12	ARoB	37
2	Morobe	456	13	East New Britain	236
3	East Sepik	92	14	Manus	89
4	West Sepik	200	15	New Ireland	320
No.	**HIGHLANDS REGION**		16	West New Britain	328
5	Eastern Highlands	146	**No.**	**SOUTHERN REGION**	
6	Enga	132	17	Central	330
7	Hela	81	18	Gulf	30
8	Jiwaka	138	19	Milne Bay	94
9	Simbu	62	20	NCD	269
10	Southern Highlands	397	21	Oro	34
11	Western Highlands	803	22	Western	74

Table 6. Number of Facilities and Beds for COVID-19 as of 6 September 2020

Health Facilities	Number of Provinces	Number of Facilities	Number of Beds	Provinces that Reported
Pre-triage facilities	20	89	N/A	ARoB, ENB, NI, WNB, ES, Madang, Morobe, WS, EH, Enga, Hela, SH, WH, Central, Gulf, NCD, Oro, Western
Quarantine facilities	15	21	>215	ARoB, ENB, Manus, NI, Madang, Morobe, EH, Hela, Jiwaka, SH, NCD, Oro, Western
Quarantine facilities (underway)	11	14	>51	ARoB, ENB, Manus, WNB, ES, Madang, WS, EH, Hela, SH, WH, Central, Gulf, NCD, Western
Isolation facilities	19	26	>305	ARoB, ENB, Manus, NI, WNB, ES, Madang, Morobe, WS, EH, Hela, Jiwaka, WH, Gulf, MB, NCD, Oro, Western
Isolation facilities (underway)	14	26	> 66	ARoB, Manus, Madang, Morobe, WS, EH, Enga, Hela, SH, WH, Central, MB, NCD, Oro, Western
Intensive Care Unit	16	17	97	ENB, Manus, WNB, Madang, Morobe, EH, Hela, Simbu, SH, WH, MB, NCD, Western
Autonomous Region of Bougainville (ARoB), East Sepik (ES), East New Britain (ENB), Eastern Highlands (EH), Milne Bay (MB), National Capital District (NCD), New Ireland (NI), Southern Highlands (SH), West New Britain (WNB), Western Highlands (WH), West Sepik (WS)				

Communication, Community Engagement and Non-Pharmaceutical Interventions (Social Measures) – NIUPELA PASIN

- The Communications Plan for COVID 19 (version 5) was finalised as an update and as required in the NCC Operational Blueprint with technical support from WHO. The communication strategy includes: (1) setting the baseline and monitoring trends in knowledge and practices; (2) empowering individuals and communities to identify localized solutions; (3) enhancing capacity of the provincial teams for community engagement; and, (4) scaling up public messaging using campaign approach.

- Indicators for risk communication and community engagement have been developed and will be rolled out to the provinces for weekly reporting. The pilot of the Niupela Pasin indicators and checklist was completed in NCD with support from NCC, NDOH and WHO. The compliance monitoring checklist has been used in various settings and establishments. The NCC Niupela Pasin Team found that most of the settings visited generally complied with the Niupela Pasin control measures and requirements, but with various challenges observed.

Table 7. Monitoring of NPIs Implemented in Papua New Guinea

Social Measures	Monitoring Status					
	Date first implemented	Date last modified	Implementation		Partial lift	Lifted
			Geographical (national or sub-national)	Recommended or Required	Lifted for some area	Lifted for all areas
Hand Hygiene and Respiratory Etiquette	16 January*	3 September	National	Recommended		
Wearing Face Masks	29 July	3 September	Sub-national**	Required		
School Closure	23 March	17 August	Sub-national	Required		√
Workplace Closure	23 March	3 September	National***	Required		
Mass Gatherings	23 March	3 September	National	Required		
Stay at Home	23 March	3 September	Sub-national****	Required		
Restrictions on Internal Movement (within country)	23 March	3 September	National	Required		
Restrictions on International Travel	14 February	3 September	National	Required		

* First social media post done; ** In National Capital District only; ***Only selected type of establishments; **** Curfew in NCD

Logistics and Supplies

- WHO encourages partners to utilize the COVID-19 Supply Portal accessible at https://covid-19-response.org/. The Portal is a purpose-built tool to facilitate requests for critical supplies by national authorities and partners. The requests are assigned to purchasing agencies that can execute the order and process it, utilizing existing ordering systems.
- A plan is being considered to expand the use of mSupply in COVID-19 to track consumption and better inform quantification.

Table 8. Personal Protective Equipment Distributed to Southern Region, April – September 2020

	Central	Gulf	Milne Bay	NCD	Oro	Western
Biohazard Bag	125	175	225	2111	225	645
Body Bag	240	70	140	710	180	60
Coverall	380	650	1330	1626	170	775
Face Shield	1450	2335	2382	9340	610	950
Gloves	46500	45600	54400	181770	32600	54800
Goggles	1010	1861	2004	4266	801	1261
Gown	860	1736	4772	19956	658	2145
Hand Sanitizer	10	154	20	312	20	20
Mask, KN95	-	6300	3000	900	-	-
Mask, N95	3530	4800	11244	53660	5600	5064
Mask, Surgical, Disposable, Face	14340	20850	28920	224300	10500	36440
Sample packing boxes	-	-	-	-	-	-
Shoe cover	200	-	200	4250	-	400
Spill Kits	2	2	2	26	2	2
Surgical Cap	300	100	300	3400	100	400
Thermometer	8	19	20	46	13	20

Table 9. Personal Protective Equipment Distributed to New Guinea Islands Region, April – September 2020

	AROB	East New Britain	Manus	New Ireland	West New Britain
Biohazard Bag	625	450	225	225	225
Body Bag	90	40	40	40	40
Coverall	170	370	230	240	260
Face Shield	625	2441	1012	1601	2676
Gloves	81600	98410	47600	46200	70000
Goggles	951	2203	1343	1602	2603
Gown	728	2524	2108	1806	2800
Hand Sanitizer	20	80	80	80	140
Mask, KN95	-	3800	1800	900	3000
Mask, N95	6716	8848	5046	6812	9720
Mask, Surgical, Disposable, Face	31480	37440	22030	16063	33200
Sample packing boxes		1	-	-	-
Shoe cover	100	300	-	-	200
Spill Kits	3	3	2	3	2
Surgical Cap	300	2200	100	200	200
Thermometer	13	17	7	10	16

Table 10. Personal Protective Equipment Distributed to Momase Region, April – September 2020

	East Sepik	Madang	Morobe	West Sepik
Biohazard Bag	425	225	525	275
Body Bag	170	30	150	90
Coverall	260	360	1100	1190
Face Shield	1496	2086	2320	1920
Gloves	60000	44600	84810	63100
Goggles	1402	1804	1803	1402
Gown	5050	5668	2750	2710
Hand Sanitizer	20	30	55	20
Mask, KN95	2700	-	-	4500
Mask, N95	6600	9036	7840	6870
Mask, Surgical, Disposable, Face	25200	37680	52540	23350
Sample packing boxes	-	-	300	200
Shoe cover	2	2	-	2
Spill Kits	200	200	300	400
Surgical Cap	16	18	18	16
Thermometer	13	17	7	10

Table 11. Personal Protective Equipment Distributed to Highlands Region, April – September 2020

	Eastern Highlands	Enga	Hela	Jiwaka	Simbu	Southern Highlands	Western Highlands
Biohazard Bag	235	225	250	225	225	225	435
Body Bag	50	110	100	100	120	130	50
Coverall	360	410	60	160	240	210	310
Face Shield	2086	3746	1515	2906	1201	2701	2230
Gloves	84600	52000	54400	56400	52200	64200	57800
Goggles	1804	1403	601	1002	1202	1202	1670
Gown	5698	2449	2000	2242	2766	2476	2875
Hand Sanitizer	20	20	20	20	20	20	20
Mask, KN95	4000	5000	900	2000	4000	-	4000
Mask, N95	8786	7690	3100	4700	5720	5790	8360
Mask, Surgical, Disposable, Face	49600	18500	16250	18300	19880	26950	43450
Sample packing boxes	-	-	3	-	-	-	-
Shoe cover	200	-	200	-	-	-	-
Spill Kits	4	2	-	2	2	-	-
Surgical Cap	400	200	200	200	200	-	100
Thermometer	18	16	6	14	14	15	17

Funding and Expenditure

- Below is a summary of COVID-19 funding and expenditure by fund source as of 21 August. The table below pertains only to funds that were held and transacted through the NDOH Health Services Improvement Program (HSIP) Trust Account, thus not comprehensive to cover all COVID-19 support made available to the country and provinces through other modalities (e.g. funding through UN Agencies, etc.). Under the HSIP Trust Account, the total available funds from all sources is PGK 73 635 786.

Table 12. COVID-19 Funding and Expenditure Summary by Fund Source as of 4 September 2020

No.	Funding Source	Initial Amount	YTD Expend	O/S Commitments	Balance Available
1	GoPNG NDoH 2019 HIV/AIDS Reprogrammed Funds	3 299 651	2 633 631	666 020	-
2	GoPNG COVID-19 Funds 2020 from Treasury 2020	43 300 000	36 615 307	6 684 693	-
3	GoPNG COVID-19 Funds 2020 from Treasury (NOC)	2 000 000	1 732 546	267 454	-
4	GoPNG New COVID-19 Funds 2020 for PHAs	37 000 000	-	-	37 000 000
5	GoPNG New COVID-19 Funds for NDOH Clusters	30 000 000	-	-	30 000 000
6	DFAT Emergency COVID-19 Funding	24 800 967	18 250 000	1 000 000	5 550 967
7	UNICEF Contribution to COVID-19	368 480	142 048	-	226 432
8	WHO COVID-19 Surveillance Funds (for 22 Provinces)	634 240	634 240	-	0
9	Private Sponsors	1 181 001	1 108 500	1 500	71 001
10	New Zealand Government	6 298 800	5 990 000	-	308 800
11	UNFPA Support to COVID-19 Emergency Response	549 580	70 994	-	478 587
Total Funds in HSIP		**149 432 719**	**67 177 267**	**8 619 667**	**73 635 786**

Best Practice/Lessons Learned

Response Enabling Factors and Adjustments to the Response

- The National Control Centre is the body established under the National Pandemic Act, 2020 Section 6 with the mandated role to drive the operational, administrative and ancillary coordination support during the time of the declared pandemic. The NCC Operational Blueprint allows the NCC to objectively monitor its role in coordinating the national response efforts according to identified key objectives and strategies in a given time (i.e. 4 weeks). Results of the implementation review are used in recalibrating the response and the strategies.
- Testing is critical in assessing the transmission of COVID-19 in the country. With minimal testing and low reporting among the provinces, various aspects of the response remain uninformed. Targeted public messaging is critical to encourage the public to present themselves for testing.
- The quality and flow of information are important determinants of successful planning and response. As clusters tend to have separate sets of monitoring indicators, it is critical to identify opportunities to streamline and synergize in order to lessen the burden of reporting given to provinces.
- Continuous engagement and coordination with various stakeholders and development partners result to identification of areas of pandemic response where support is required. The regular Health Cluster meetings are important avenue to mobilize support from partners. Many of these partners do not only provide support for COVID-19, but also provide essential health services, including HIV counselling, testing and antiretroviral therapy services, TB treatment and family health services (maternal and child health, family planning and immunization).
- The COVID-19 response in PNG is updated on the NDOH's website. Weekly national situation report is issued and made accessible at https://covid19.info.gov.pg/.

ANNEX A – National Pandemic Measures Issued on 3 September 2020

Number	Title	Scope of the National Pandemic Measures Issued on 12 August 2020	Modification in the National Pandemic Measures Issued on 3 September 2020
No. 1	Revocation of all previous measures	Revocation of all previous measures prior to 12 August 2020.	Revocation of all previous measures before 3 September 2020.
No. 2	International travel measures	Definition and designation of First Port of Entry; entry of vehicle, vessel or aircraft coming into PNG only through First Port of Entry; entry of persons to PNG (including citizens and permanent residents) by aircraft and vessels; no person is permitted to board an aircraft bound for PNG unless tested for COVID-19 using RT-PCR within 14-day period prior to boarding and have returned negative results; exemption can be given in writing by Controller; suspension of traditional border crossing arrangements (with Indonesia, Australia, FSM, Solomon Islands); boarding of aircraft bound for PNG only with exemption in writing by Controller; quarantine of returning citizens and permanent residents at designated facilities (at Government's cost) or designated hotels (at individuals' cost); quarantine of non-citizens and non-permanent residents at designated hotels (at individuals' cost); self-quarantine of foreign diplomats at appropriate residence for 14 days; approved by the Controller, a person will have seven days quarantine in a designated location in Port Moresby after staying in Queensland, Australia for seven days; persons requiring regular support in daily lives are allowed to be in quarantine with their carer upon arrival overseas together with the suitable arrangement made for accommodation; upon arrival at the designated hotel for quarantine, a person who requires quarantine shall surrender her or his passport to the designated hotel; the hotel is to return the passport upon completion of the quarantine and released by an authorised person; refusal of undertaking the PCR testing will result in extending 14-day quarantine since the date of denial for testing; failure to adhere to self-quarantine as an offence under National Pandemic Act 2020 and declaration as persona non grata of those who fail to comply; quarantine exemption granted by Controller; requirements for compliance for self-isolation and quarantine; conditions for leaving a designated place prior to completion of 14 days; exemption of 23, 24 & 25 for those who travel with a diplomatic travel document or a diplomatic passport; and authorized officials to ensure appropriate levels of surveillance	No modification

		and border monitoring systems. Aircraft are allowed to come into point of entry in PNG departing from Cairns and Brisbane Airports, and exempted in writing by the Controller. It was noted that these measures are compliant with the COVID-19 measures issued by the International Civil Aviation Organization.	
No. 3	Domestic travel measures	No person may travel by aircraft from one province to another province in PNG, unless provided an exemption in writing by the Controller or his delegate. No domestic flight may occur from one province in PNG to another province in PNG unless provided an exemption in writing. The following flights are exempted: cargo flights with no passengers and medivac flights. No roadblocks are to be established except those directed by the Controller; all domestic flights to comply with: hygiene and social distancing restriction, passengers to complete the Air Passenger Travel Form which also is submitted to PHA on arrival, and persons must have valid reason to travel including: (1) students returning to their usual place of residence or returning to their educational institutions; (2) persons returning to their usual home; (3) essential services; (4) seeking medical assistance and medical evacuation; and (5) emergency transport, including but not limited to the repatriation of deceased persons. Travel by foot, vehicle and vessel between provinces shall not be restricted unless ordered by Controller. A person or organisation that allows a person to board an aircraft in breach of the requirements of all domestic flights shall be deemed to have committed an offence under the National Pandemic Act 2020.	No modification
No. 4	Provincial coordination measures	Appointment of Provincial Administrators as authorised officers for implementation of measures in the respective provinces, and the Chief Secretary for ARoB; set-up and composition of Provincial Advisory Committee; the development of Provincial Response Plan consistent with National Response Plan; set up of Provincial Control Centre; daily required reporting of Provincial Administrators to the Controller; observance of safe health and hygiene practices as recommended by NDoH and PHA; and, provisions for provincial authorities to take additional measures such as curfews or fines.	No modification
No. 5	Burial of deceased persons measures	Controller's authority upon request of PMGH or PHA to direct a mass grave, designate its location and direct burial of deceased persons in the designated mass grave as well as requisition of refrigerated shipping containers for temporary internment; burial or temporary interment directed by Controller will be at the Government's expense; PMGH or PHA to keep	No modification

		a record of persons interred in a designated grave or designated refrigerated shipping containers taken away from morgue they are responsible for.	
No. 6	Customs duties measures	Exemption from all customs duties and import duties of all incoming medical supplies procured on behalf of the Government until the end of the declaration of the pandemic, and medical supplies shall be given priority and be released without delay.	No modification
No. 7	COVID-19 testing measures	Testing equipment to be used for COVID-19 are RT-PCR, GeneXpert and rapid diagnostic test; approved organisations to conduct testing are NDoH, IMR, PHAs, PMGH, St John Ambulance, OkTedi Mining, Simberi Gold, 2K Medical Clinic, Newcrest Mining, K92 Mining, Sky Health and Medical Services and Morobe Consolidated Goldfields Ltd, Pacific International Hospital and ExxonMobil.	No modification
No. 8	COVID-19 surveillance and testing measures	National case definitions of COVID-19 and Severe Acute Respiratory infection (SARI); all hospitalised/ admitted cases of respiratory illness, including pneumonia and all cases of SARI as suspected COVID-19 cases who should be tested within 24 hours of being admitted and to be managed using COVID-19 IPC protocols; all the health facilities listed in Schedule 2 must set up pre-triage service and ensure IPC measures; all health facilities in Port Moresby to collect samples from COVID-19 suspected cases those who are over 10 years old; the swabbing for testing a minimum of five patients with influenza-like illness symptoms per week; The delegate of the Controller is Deputy Controller, Dr Paison Dakulala; and Schedule 2 for health facilities newly added, including all private urban health facilities, all public health facilities classified as Level 3 and above.	No modification
No. 9	Business and social measures	The curfew is in place between 10 pm and 5 am daily in NCD except for urgent medical care, police assistance, emergencies and persons listed in Schedule 1; closures of venues or part of venues provides nightclubs activities; operation of restaurants and gambling place with hygiene practice; The closure of venues or part of venues that serve alcohol without food; licensed premises that sell takeaway alcohol shall not sell alcohol on Fridays, Saturdays and Sundays; no audience allowed for any clubs or sporting matches; reporting by PNG Sports Foundation is no longer in the measures; immediate closure of Boroko Market; all restaurants to submit information about physical size of restaurant seating areas and seating plans to the PNG Business Council; no professional or club sport teams to participate in matches; no affiliated sporting codes shall train or participate in matches unless with approval from	All schools and educational institutions to comply with physical distancing and hygiene practices.

		PNG Sports Foundation; responsibilities of PNG Sports Foundation area requirement to submit a weekly report to the Controller; requirements for local religious activities in social distancing and hygiene standards; banning of religious gatherings such as provincial and national church gatherings, crusades, conventions and provincial or national outreach programmes; closures of nightclubs; hand hygiene and other hygiene measures are to be practiced at venues or part of the venues operates for the sales and consumption of alcohol; mandatory wearing of masks or face covering for all the spectators; lifted restriction for licensed gambling venues; ban on gatherings of over 50 persons; and, no chewing of buai in NCD except in private dwellings. Specific measures described for all markets, including maintaining 1.5 m physical distancing and washing hands or use hand sanitiser when people enter and exit into the place of worship.	
No. 10	Mandatory Mask Wearing in Port Moresby	Mandatory mask-wearing in Port Moresby effective on 29 July 2020. The measures specified wearing masks or face coverings in enclosed space in establishments (business establishments, health facilities, sporting venues, places of worship, community centres, libraries art galleries, museums, zoos and other similar facilities, convention centres arenas, stadiums, and other event spaces, and government facilities) aircraft, public transport (busses, vessels and taxis), and designated markets. Child care facilities schools and banks are exempted from the establishments for the purpose of these measures. Also, there are exemptions for wearing masks for those who are: (1) children under 12; (2) persons with underlying medical conditions which inhibit their ability to wear a mask or face covering, including persons with physical or mental illness or impairment, or disability; (3) persons who are unable to place or remove a mask or face covering without assistance; (4) persons undergoing dental treatment or other medical care to be the extent that the procedure requires that no face covering may be worn; (5) persons within an area of work designated for them and not for public access, and who can work in an environment whereby they work a minimum of 2 metres from any other persons; (6) persons participating in sporting activities; (7) when directed to remove the face covering to ascertain identity; and (8) during emergencies. Furthermore, people are exempted and remove masks and face coverings to eat, drink or take medication. The exemption for pilots wearing masks on aircraft in PNG was removed. It is an offence under the National Pandemic Act 2020 to (1) fail to take reasonable steps to ensure adherence to the measures for a business,	No modification.

		organisation or government department or agency; and (2) remove a mask or a face covering on aircraft.	
No.11	Public Transport-Port Moresby	Measures apply to the NCD and Central Province; no operation of public transport; taxis can operate so long as the driver wear mask or face covering and do not operate during curfew hours; private transportation may continue to operate but not limited to hotel and security transportation; these measures came into effect since 29 July 2020; Public transport may operate with the maximum passengers of 15 on 25-35 capacity vehicles and 5 passengers for all other public transport vehicles.	
No. 12	COVID-19 vaccination, testing and trials	The Measures clarified: (1) no COVID-19 vaccination or unapproved pharmaceutical intervention to be provided to any persons; (2) no vaccine clinical trials for COVID-19; (3) persons who claim to have COVID-19 vaccinations overseas must comply with quarantine measures in place in Papua New Guinea; (4) not bcomplyabide by measures shall be deemed to have committed to an offence under the National Pandemic Act 2020.	No person shall enter PNG who has received a vaccine for COVID-19, that has not been approved by the Controller; Removal from PNG at the cost of individual or organisation if non-compliant to measure No.12.

ANNEX B – Provincial Updates

* Health workforce includes medical doctors, health extension officers, pharmacists, dentists, nurses, community health workers, allied health professionals, medical laboratory staff, health support staff, health administrative staff, management, and unattached.

UPDATED 6 September 2020	Southern Region					
	Western	Gulf	Central	NCD	Milne Bay	Oro
Total Provincial Population	299,351	190,153	317,847	449,469	347,546	236,700
Incident Management and Planning						
PCC functioning (Yes = 1; No = 0)	1	1	1	1	1	1
PEOC functioning (Yes = 1; No = 0)	1	1	1	1	1	1
Surveillance						
No. of trained rapid response teams	1	0	1	1	4	1
No. of trained contact tracing teams	0	0	1	1	1	1
No. of trained quarantine teams	1	0	1	1	1	1
Laboratory / Waste Management						
No. of available swabs/UTMs	800/166	10	340	700	376	250
No. of functioning GeneXpert machines	3	3	2	3	1	1
No. of available GeneXpert cartridges	13	29	20	0	60	38
No. of GeneXpert – trained staff	3	2	1	CPHL	2	2
No. of functioning biosafety cabinets	0	1	1	1	1	1
No. of functioning incinerators	0	1	0	1	0	0
Clinical Management						
No. established pre-triage sites	8	1	3	18	6	2
No. quarantine beds	0	0	0	Hotels	0	0
No. of quarantine beds per 10,000 population	0.00	0.00	0.00	-	0.00	0.00
No. isolation ward beds	24	0	0	76	7	0
No. of isolation beds per 10,000 population	0.80	0.00	0.00	1.69	0.20	0.00
No. inpatient beds at provincial hospital	109	36	19	1096	160	109
Critical Care						
No. ICU beds	4	3	0	4	2	0
No. of ICU beds per 10,000 population	0.13	0.16	0.00	0.09	0.06	0.00
No. of functioning oxygen concentrators	0	0	1		0	0
No. functioning ventilators	0	0	0	2	0	0
No. of nurses trained in critical care	2	1	9	135	20	4
No. of anaesthetists	5			7	1	
No. of anaesthetic scientific officer	1	2	5	2	2	2
Workforce						
No. of doctors	9	6	0	244	20	10
No. of nurses and midwives	19	48	13	704	264	80
No. of health extension officers	2	8	35	6	29	9
No. of community health workers	40	88	198	282	493	107
Total clinical workforce COVID-19 trained	71	30	276	94	94	34
Total health workforce *	258	281	316	274	1163	302

UPDATED 6 September 2020	New Guinea Island Region				
	WNB	ENB	Manus	NI	ARoB
Total Provincial Population	348,596	375,875	66,918	218,472	334,162
Incident Management and Planning					
PCC functioning (Yes = 1; No = 0)		1	1	1	1
PEOC functioning (Yes = 1; No = 0)	0	1	1	1	1
Surveillance					
No. of trained rapid response teams	2	3	2	4	3
No. of trained contact tracing teams	2	3	2	4	3
No. of trained quarantine teams	2	3	2	4	
Laboratory / Waste Management					
No. of available swabs/UTMs	20	1087	300	328	450
No. of functioning GeneXpert machines	2	2	1	2	2
No. of available GeneXpert cartridges	20	37	48	48	0
No. of GeneXpert – trained staff	5	6	5	4	0
No. of functioning biosafety cabinets	1	0	1	1	0
No. of functioning incinerators	1	1	1	1	0
Clinical Management					
No. established pre-triage sites	3	5	0	1	3
No. quarantine beds	0	32	24	0	28
No. of quarantine beds per 10,000 population	0.00	0.85	3.59	0.00	0.84
No. isolation ward beds	4	5	6	0	8
No. of isolation beds per 10,000 population	0.11	0.13	0.90	0.00	0.24
No. inpatient beds at provincial hospital	271	213	92	106	
Critical Care					
No. ICU beds	1	3	2	0	4
No. of ICU beds per 10,000 population	0.03	0.08	0.30	0.00	0.12
No. of functioning oxygen concentrators	2	8	0	0	0
No. functioning ventilators	2	2	0	0	0
No. of nurses trained in critical care	6	16	3	8	6
No. of anaesthetists	2	7	1	2	3
No. of anaesthetic scientific officer	0	2	0	0	
Workforce					
No. of doctors	15	19	6	16	10
No. of nurses and midwives	171	254	64	209	94
No. of health extension officers	52	23	13	31	3
No. of community health workers	247	257	81	192	71
Total clinical workforce COVID-19 trained	328	236	89	320	37
Total health workforce *	749	895	292	611	235

UPDATED 6 September 2020	Momase Region			
	Morobe	Madang	WSP	ESP
Total Provincial Population	926,432	719,869	316,533	644,053
Incident Management and Planning				
PCC functioning (Yes = 1; No = 0)	1	1	1	1
PEOC functioning (Yes = 1; No = 0)	1	1	1	1
Surveillance				
No. of trained rapid response teams	2	2	1	1
No. of trained contact tracing teams	2	1	1	1
No. of trained quarantine teams	2	1	1	1
Laboratory / Waste Management				
No. of available swabs/UTMs	210	103	450	
No. of functioning GeneXpert machines	5	4	119	2
No. of available GeneXpert cartridges	0	135	11	5
No. of GeneXpert – trained staff		2		2
No. of functioning biosafety cabinets	1	2	1	0
No. of functioning incinerators	1	0	0	0
Clinical Management				
No. established pre-triage sites	>6	1	4	8
No. quarantine beds	47	12		
No. of quarantine beds per 10,000 population	0.51	0.17	0.00	0.00
No. isolation ward beds	120	18	4	
No. of isolation beds per 10,000 population	1.30	0.25	0.13	0.00
No. inpatient beds at provincial hospital	560	281	96	254
Critical Care				
No. ICU beds	19	5	4	
No. of ICU beds per 10,000 population	0.21	0.07	0.13	0.00
No. of functioning oxygen concentrators				
No. functioning ventilators				
No. of nurses trained in critical care	30	3	7	14
No. of anaesthetists	2	3	2	3
No. of anaesthetic scientific officer	4	1		1
Workforce				
No. of doctors	48	22	10	17
No. of nurses and midwives	443	223	119	158
No. of health extension officers	11	28	19	21
No. of community health workers	143	390	332	243
Total clinical workforce COVID-19 trained	425	346	200	92
Total health workforce *	920	905	691	724

UPDATED 6 September 2020	Highlands Region						
	EHP	Simbu	Jiwaka	Hela	WHP	Enga	SHP
Total Provincial Population	717,957	378,381	332,619	304,955	442,638	480,691	651,001
Incident Management and Planning							
PCC functioning (Yes = 1; No = 0)				1	1	1	
PEOC functioning (Yes = 1; No = 0)	1	1	1	1	1	1	1
Surveillance							
No. of trained rapid response teams	2	7	1	1	1	10	1
No. of trained contact tracing teams	2	8		1	1	1	5
No. of trained quarantine teams	1	2		1	1	1	5
Laboratory / Waste Management							
No. of available swabs/UTMs		550		400	350	100	100/100
No. of functioning GeneXpert machines	4	9	1	1	1	3	2
No. of available GeneXpert cartridges	38	83	15	36	46	8	20
No. of GeneXpert – trained staff		3		3	2	6	40
No. of functioning biosafety cabinets	1	1		0	1	1	1
No. of functioning incinerators	0	1	1	1	0	3	1
Clinical Management							
No. established pre-triage sites	1	7		2	4	3	3
No. quarantine beds	14	10		6	10	10	10
No. of quarantine beds per 10,000 population	0.19	0.26	0.00	0.20	0.23	0.21	0.15
No. isolation ward beds	5	1		6	11	10	4
No. of isolation beds per 10,000 population	0.07	0.03	0.00	0.20	0.25	0.21	0.06
No. inpatient beds at provincial hospital	306	560	129	86	252	86	425
Critical Care							
No. ICU beds	12	8		6	4	10	6
No. of ICU beds per 10,000 population	0.17	0.21	0.00	0.20	0.09	0.21	0.09
No. of functioning oxygen concentrators		6		1	7	3	
No. functioning ventilators		5		0	1	0	
No. of nurses trained in critical care	60	6	1	1	30	8	9
No. of anaesthetists	9	30	4	0	0	0	5
No. of anaesthetic scientific officer	3	4		2	5	3	
Workforce							
No. of doctors	28	30	1	9	35	34	18
No. of nurses and midwives	222	305	146	86	217	163	151
No. of health extension officers	15	15	8	13	13	34	10
No. of community health workers	371	197	102	80	293	226	189
Total clinical workforce COVID-19 trained	114	431	73	81	112	169	367
Total health workforce *	899	495	309	214	852	761	857

Updated in the past 7 days
incomplete/pending / not reported

ANNEX D – Photos

Photo 1. Daily Meeting of the Health Operations Team at the National Control Centre in Morauta Haus

Photo 2. Implementation Review of the NCC Operational Blueprint for COVID-19 Response at the National Control Centre in Morauta Haus on 1 September 2020

Photo 3. Presentation of the Electronic Health Declaration Form and Senaite Laboratory Information Management System to the eHealth Technical Working Group on 2 September 2020

Photos 4 – 7. Visit of NCC Team to Tabubil in Western Province to provide support and recommendations regarding the large cluster outbreak at Ok Tedi Mining Limited

ANNEX F – Risk Communication Materials

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