HIGHLIGHTS *Data as of MoHP Situation Report, 21 June 2021

- Of the total COVID-19 positive cases, 89.9% (559,928) of cases have recovered and 8.6% (53940) of cases are active.
- Of the total active cases, 92.2% (50,304) cases are in home isolation; 6.7% (3,636) of cases are undergoing hospital/institutional isolation. While 1.5% (811) patients require ICU admission, 0.4% (237) of the ICU admitted patients require ventilator support.
- Thirty nine districts have reported more than 500 active cases.
- Among the total new cases (12119) reported this week, 21.1% (2552) of the new cases are from Kathmandu district and 27.9% (3386) are from Kathmandu valley (Kathmandu, Lalitpur and Bhaktapur districts).
- COVID-19 vaccination coverage status (Data as of 18 June 2021):

<table>
<thead>
<tr>
<th>Vaccine Type</th>
<th>Doses Administered</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVISHIELD Vaccine</td>
<td>1,828,484</td>
</tr>
<tr>
<td>SARS-CoV-2 Vaccine (Vero Cell)</td>
<td>671,712</td>
</tr>
<tr>
<td>First dose</td>
<td>411,373</td>
</tr>
<tr>
<td>Second dose</td>
<td>291,035</td>
</tr>
</tbody>
</table>

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 22 June 2021, T07:00:00 hours (week no. 25), a total of 622,640 COVID-19 cases were confirmed through polymerase chain reaction (RT-PCR); 3,275,849 RT-PCR tests have been performed nationwide by 96 designated functional COVID-19 laboratories across the country of which 58 are public laboratories. A total of 27,308 cases were confirmed through Antigen RDT; 146,883 Antigen RDT have been performed nationwide.
- All 7 provinces in the country are now experiencing community transmission.
- Province-wise RT-PCR test positivity rate in the past week (week 24) ranged from 8.7% (Sudurpashchim Province) to 38.5% (Gandaki Province), with national positivity rate averaging 24.2%.
- Overall, the sex-distribution remains skewed towards males, who constitute 61% (378,731/622,640) of the RT-PCR confirmed cases. Amongst the males, 79% (298,358/378,731) are in the economically productive age group (15-54 years).
- National Public Health Laboratory (NPHEL) did not receive any diagnostic or surveillance influenza samples on EPID-week 24 (14 - 20 June 2021).
- 84 SARS-Cov-2 negative samples have been tested for influenza on EPID-week 24 (14-20 June 2021). None of the samples tested positive for influenza.
From 4 January until 20 June 2021, a total of 51 samples tested positive for influenza (all were Influenza A/H3) of 1786 samples (Sentinel and non-sentinel samples including SARS-CoV-2 negative SARI and ILI cases). Similarly, 273 samples tested positive for SARS-CoV-2 (all these positive cases are included in the COVID-19 database) from 1117 samples received from sentinel / non-sentinel ILI/SARI sites.

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 21 June 2021; Global Weekly Epidemiological Update 45) and cumulative incidence rate (per 100,000)

<table>
<thead>
<tr>
<th>SEAR Country</th>
<th>Total Population</th>
<th>COVID-19 Cases</th>
<th>Incidence (per 100,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>170306468</td>
<td>866877</td>
<td>502</td>
</tr>
<tr>
<td>Bhutan</td>
<td>748931</td>
<td>1970</td>
<td>261</td>
</tr>
<tr>
<td>DPR Korea</td>
<td>49403852</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>India</td>
<td>1401399022</td>
<td>30028709</td>
<td>2113</td>
</tr>
<tr>
<td>Indonesia</td>
<td>271052473</td>
<td>2033421</td>
<td>747</td>
</tr>
<tr>
<td>Maldives</td>
<td>557426</td>
<td>72466</td>
<td>13262</td>
</tr>
<tr>
<td>Myanmar</td>
<td>54283980</td>
<td>149927</td>
<td>273</td>
</tr>
<tr>
<td>Nepal</td>
<td>29803732</td>
<td>627854</td>
<td>2079</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>22034594</td>
<td>246109</td>
<td>1117</td>
</tr>
<tr>
<td>Thailand</td>
<td>66558935</td>
<td>228539</td>
<td>345</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>1327038</td>
<td>8843</td>
<td>671</td>
</tr>
<tr>
<td>SEAR</td>
<td>2066149413</td>
<td>34264715</td>
<td>1678</td>
</tr>
</tbody>
</table>

Figure 2A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 622640) (Data reported on 22 June 2021 T0 7:00:00)

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation. Clinical information presented here is collected on the day of sample collection.
At a national level, the second wave of cases between July 2020 and February 2021 was followed by the third wave from the middle of March 2021. The total PCR tests done in Nepal on 21 June 2021 was 6583 which is 67% less than the number tested during the peak in the beginning of May 2021.

Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 622640) (Data reported on 22 June 2021 T0 7:00:00)

The cumulative case incidence has been increasing in Nepal since the first case which was confirmed in 23 January 2020. Cases have been largely reported from Bagmati Province followed by Lumbini Province and Province 1.

Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 622640) (Data reported on 22 June 2021 T0 7:00:00)

Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces
There were 2495 new cases reported in the past week in Province 1. Since week 10, new cases are continuously increasing. However, the cases have decreased by 30% in the past week compared to the previous week. There were 63 deaths reported in the past week, 41% less than that of the previous week. The test positivity rate in Province 1 decreased to 28.6% in the past week. A total of 8615 tests were performed in the past week, 16% less than that of the previous week.

There were 753 new cases reported in the past week in Province 2. Since week 11, new cases are steadily increasing. However, the cases have decreased by 44% in the past week compared to the previous week. There were 16 deaths reported in the past week, 45% less than that of the previous week. The test positivity rate in Province 2 decreased to 18.1% in the past week. A total of 3265 tests were performed in the past week, 38% less than that of the previous week.
In Bagmati, 5716 new cases were reported in the past week. Since week 11, new cases are continuously increasing. However, the cases have decreased by 40% in the past week compared to the previous week. There were 133 deaths reported in the past week, 35% less than that of the previous week. The test positivity rate in Bagmati decreased to 20.9% in the past week. A total of 29785 tests were performed in the past week, 21% less than that of the previous week.

In Gandaki, 2320 new cases were reported in the past week. Since week 11, new cases are continuously increasing. However, the cases have decreased by 4% in the past week compared to the previous week. There were 46 deaths reported in the past week, 16% less than that of the previous week. The test positivity rate in Gandaki increased to 38.5% in the past week. A total of 5325 tests were performed in the past week, 15% less than that of the previous week.

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Lumbini reported 760 new cases in the past week. Since week 12, new cases are increasing significantly. However, the cases have decreased by 57% in the past week compared to the previous week. There were 36 deaths reported in the past week, 44% less than that of the previous week. The test positivity rate in Lumbini decreased to 17.7% in the past week. A total of 4212 tests were performed in the past week, 40% less than that of the previous week.

In Karnali, 296 new cases were reported in the past week. Since week 12, new cases are continuously increasing. However, the cases have decreased by 63% in the past week compared to the previous week. There were 12 deaths reported in the past week, 64% less than that of the previous week.
previous week. The test positivity rate in Karnali decreased to 36.8% in the past week. A total of 768 tests were performed in the past week, 49% less than that of the previous week.

In Sudurpashchim, 244 new cases were reported in the past week. Since week 12, new cases are continuously increasing. However, the cases have decreased by 73% in the past week compared to the previous week. There were 8 deaths reported in the past week, 65% less than that of the previous week. The test positivity rate in Sudurpashchim decreased to 8.7% in the past week. A total of 2571 tests were performed in the past week, 33% less than that in the previous week.
Cases and deaths have been reported in high numbers from Bagmati Province, mostly from Kathmandu valley area. The overall case fatality ratio (CFR) of Nepal is 1.41%. However, the CFR is relatively high in Karnali Province with 1.98% and Gandaki Province with 1.76%.
### Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces. (Data reported on 22 June 2021 T0 7:00:00)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases</th>
<th>Total Confirmed cumulative cases RTPCR Tests</th>
<th>Total Confirmed cumulative cases Antigen RDT test</th>
<th>% of total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification*</th>
<th>Total confirmed cases in last 14 days RTP-PCR test</th>
<th>Total confirmed cases in last 14 days Antigen RDT test</th>
<th>Total confirmed cases in last 14 days</th>
<th>% of total confirmed cumulative cases in last 14 days</th>
<th>Total Deaths in last 14 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>69136</td>
<td>4570</td>
<td>73706</td>
<td>11.5</td>
<td>1114</td>
<td>Community transmission</td>
<td>3395</td>
<td>6477</td>
<td>9872</td>
<td>21.3</td>
<td>161</td>
</tr>
<tr>
<td>Province 2</td>
<td>42948</td>
<td>323</td>
<td>43271</td>
<td>6.7</td>
<td>710</td>
<td>Community transmission</td>
<td>257</td>
<td>2156</td>
<td>2413</td>
<td>5.2</td>
<td>41</td>
</tr>
<tr>
<td>Bagmati</td>
<td>321171</td>
<td>4932</td>
<td>326103</td>
<td>50.8</td>
<td>3777</td>
<td>Community transmission</td>
<td>2578</td>
<td>15891</td>
<td>18469</td>
<td>39.8</td>
<td>317</td>
</tr>
<tr>
<td>Gandaki</td>
<td>49315</td>
<td>3504</td>
<td>52819</td>
<td>8.2</td>
<td>870</td>
<td>Community transmission</td>
<td>2408</td>
<td>5149</td>
<td>7557</td>
<td>16.3</td>
<td>96</td>
</tr>
<tr>
<td>Lumbini</td>
<td>86086</td>
<td>3491</td>
<td>89577</td>
<td>14.0</td>
<td>1495</td>
<td>Community transmission</td>
<td>2088</td>
<td>2578</td>
<td>4666</td>
<td>10.1</td>
<td>94</td>
</tr>
<tr>
<td>Karnali</td>
<td>18781</td>
<td>1143</td>
<td>19924</td>
<td>3.1</td>
<td>371</td>
<td>Community transmission</td>
<td>712</td>
<td>1114</td>
<td>1826</td>
<td>3.9</td>
<td>43</td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>35203</td>
<td>1182</td>
<td>36385</td>
<td>5.7</td>
<td>435</td>
<td>Community transmission</td>
<td>437</td>
<td>1151</td>
<td>1588</td>
<td>3.4</td>
<td>30</td>
</tr>
<tr>
<td>National Total</td>
<td>622640</td>
<td>19145*</td>
<td>641785</td>
<td>100</td>
<td>8772</td>
<td>Community transmission</td>
<td>11875</td>
<td>34516</td>
<td>46391</td>
<td>100</td>
<td>782</td>
</tr>
</tbody>
</table>

*Total reported in HEOC Sitrep of 21 June 27308; but IMU reported 19145

Notes:
1. The source for case data used in this update is from RT-PCR test positivity reported by laboratories from various locations across Nepal, as shared by HEOC Sitrep and IMU/IHIMS.
2. Case data is screened and cleaned by our data team for double entry, wrong entry and manual errors such as a city’s name in place of districts, district name in place of province, etc.
3. Whereas the test positivity rate is calculated based on the test positivity reported in Sitrep for RT-PCR which may or may not be scrutinized or cleaned the same way and mark the cases on location of the laboratories rather than their place of stay.
Overall, the sex-distribution remains skewed towards males. The incidence of cases is higher in the economically productive age group (15-54 years) for both males and females.

Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths* in COVID-19 confirmed cases (N = 622640) (Data reported on 22 June 2021 T0 7:00:00)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total confirmed cases</th>
<th>Death (male)</th>
<th>Death (female)</th>
<th>Deaths with any known comorbid condition</th>
<th>Age specific case fatality ratio (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 yrs</td>
<td>5721</td>
<td>12</td>
<td>15</td>
<td>9</td>
<td>0.47</td>
</tr>
<tr>
<td>5-14 yrs</td>
<td>22892</td>
<td>9</td>
<td>7</td>
<td>8</td>
<td>0.07</td>
</tr>
<tr>
<td>15-24 yrs</td>
<td>94332</td>
<td>64</td>
<td>66</td>
<td>40</td>
<td>0.14</td>
</tr>
<tr>
<td>25-34 yrs</td>
<td>168474</td>
<td>291</td>
<td>178</td>
<td>89</td>
<td>0.28</td>
</tr>
<tr>
<td>35-44 yrs</td>
<td>130550</td>
<td>704</td>
<td>318</td>
<td>190</td>
<td>0.78</td>
</tr>
<tr>
<td>45-54 yrs</td>
<td>92561</td>
<td>1073</td>
<td>474</td>
<td>377</td>
<td>1.67</td>
</tr>
<tr>
<td>55-64 yrs</td>
<td>57534</td>
<td>1296</td>
<td>557</td>
<td>536</td>
<td>3.22</td>
</tr>
<tr>
<td>65-74 yrs</td>
<td>29845</td>
<td>1217</td>
<td>617</td>
<td>665</td>
<td>6.15</td>
</tr>
<tr>
<td>75-84 yrs</td>
<td>13259</td>
<td>854</td>
<td>458</td>
<td>501</td>
<td>9.9</td>
</tr>
<tr>
<td>85+ yrs</td>
<td>3683</td>
<td>346</td>
<td>195</td>
<td>172</td>
<td>14.69</td>
</tr>
<tr>
<td>Unknown</td>
<td>3789</td>
<td>15</td>
<td>6</td>
<td>10</td>
<td>0.55</td>
</tr>
<tr>
<td>National</td>
<td>622640</td>
<td>5881</td>
<td>2891</td>
<td>2597</td>
<td>1.41</td>
</tr>
</tbody>
</table>

Case Fatality ratio (CFR, in%) = \( \frac{\text{Number of deaths from disease}}{\text{Number of confirmed cases of disease}} \times 100 \)

COVID-19 positive lab result is temporally associated with death; causal association under investigation.
A total of 8,772 deaths have been reported. Out of the total deaths, 5,881 (67.0%) were males and 2,891 (33.0%) were females. Amongst the deaths, 2,597 persons (29.6%) had at least one known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1%, the CFR progressively increases with age beyond 65 years of age, ranging from 6.2% to 14.7%.

**PREPAREDNESS AND RESPONSE**

**What are the Government of Nepal (GoN) & the Ministry of Health & Population (MoHP) doing?**

- **Meeting with MoSD, DHO & Municipal coordinators**
  - Ministry of Health and Population (MoHP) organized a meeting with Health officials from Ministry of Social Development (MoSD) from all Provinces, health officials from District Health Offices (DHO) and Health coordinators from Municipalities (Local) as a follow-up of the meetings held by the newly appointed Hon Health Minister.
  - MoHP highlighted the importance of public and social health measures, antigen testing at the community, activation of community based groups etc.
  - During the meeting, the trend of the COVID-19 cases by province was presented and emphasis was given to the high positivity rate and increased risk of transmission, although decreasing trend of cases was reported across the country. Feedback was provided to the federal ministry during the discussion which will be incorporated while developing new rapid action plan in responding to COVID-19 for the next 4/6 months period.

- **Accelerated efforts to procure COVID-19 vaccine**
  - Government of Nepal has been reaching out to countries, producers and suppliers to obtain the COVID-19 vaccine. In this process, the Cabinet has decided to procure vaccine from China (BIBP). The amount of vaccine and price has not yet been disclosed. However there is an indication that a significant amount of vaccine will be made available from this procurement deal. Link [Here](#).

- **Loosening the lockdown**
  - After a long strict lockdown across the country, districts are gradually releasing the lockdown to revive social and economic activities.
  - The District Administration Offices in consultation with Ministry of Home Affairs (MoHA) and MoHP are making decisions to ensure compliance to the public health standards while conducting businesses and other activities. The ministries (MoHA & MOHP) agreed to reassess the risk in a bi-weekly basis.

- **Landslide and flood**
  - Due to heavy rainfall across the country last week, few districts (Sindhupalchok, Tanahun and Manang) were highly affected by landslide and flood.
  - Federal and provincial ministries have deployed medical teams along with essential medicines and supplies in the affected areas.
COVID-19 vaccination campaign for first dose of SAR-CoV-2 vaccine (VeroCell) started throughout the country for the 60 – 64 year old population in Kathmandu valley (Kathmandu, Bhaktapur and Lalitpur districts) and 62-64 years age group in the remaining 74 districts from 08 June 2021. As of 18 June 2021, 370395 out of 662367 people were vaccinated with VeroCell vaccine.

Government of Nepal is receiving medical equipment, supplies and health commodities from the various countries and donor agencies. Within the reporting time frame, the following countries and donor agencies have provided logistics support:
- UNICEF Nepal
- Gradian Health Systems in collaboration with America Nepal Medical Foundation and National Innovation Center Nepal
- Prime Life International Private Limited

What is the WHO Country Office for Nepal doing?

Laboratory Capacity
- WHO Nepal has been providing technical support to NPHL in the following activities:
  - Monitoring the quality standard of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 10 designated COVID-19 laboratories participated in the NQAP this week. The result of the participating laboratories was satisfactory with ≥90% result.
  - Shipment of External Quality Assurance Program (EQAP) panels received from the Royal College of Pathologists of Australasia Quality Assurance Programs to designated COVID-19 labs for their participation. Out of 75 panels received, 33 panels have been sent to 33 selected COVID-19 laboratories within the Kathmandu Valley. The remaining panels outside the valley are yet to be sent.
  - Dissemination of genome sequencing results of the samples (extracted RNA of SARS-CoV-2) from Council of Scientific and Industrial Research (CSIR) institute of Genomics and Integrative Biology, Delhi, India for genetic sequencing. The samples were sent from NPHL to CSIR in the past weeks.
  - Sample shipment (48 extracted RNA of SARS-CoV-2) to Council of Scientific and Industrial Research (CSIR) institute of Genomics and Integrative Biology, Delhi, India for genetic sequencing. The results are awaited.

Technical Planning and Operations
- A virtual meeting on Telemedicine programming was conducted by MoHP on 16 June 2021. The meeting was attended by officials from MoHP, Chief of HEOC, WHO-Nepal, focal persons from all 8 telemedicine centers from across the country, and hospital directors from Tribhuvan University Teaching hospital & Seti hospital. Updates on the progress of telemedicine centers with a need to link telemedicine services with services from Emergency Medical Deployment Team (EMDT) and hub satellite hospitals were also
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Discussed. SOP and software for improved functioning of the telemedicine center are in the process of development.


• ‘Unified central hospital of COVID-19 (Bir Hospital) Handover program’ was organized on 21 June 2021 where by, WHO Nepal handed over the logistics & ICT (information Communication & Technology) equipment to support the activities of the unified hospital.

Point of Entry

• Chief district offices of Kathmandu (Link Here), Bhaktapur (Link Here), and Lalitpur (Link Here) have decided to extend the ongoing lockdown officially with a prohibitory order imposed in the valley by seven days until 28 June 2021. While most restrictions remain unchanged since first issued on April 26, the most current modifications dated June 21, 2021 include:
  o Operational hours for grocery stores limited to hours between 0700 hours to 1100 hours, and pharmacies and health related shops are permitted to operate under normal hours.
  o Other businesses are permitted to open on alternate days. Some banks and certain government offices remain open. Public transport, except for taxis, remains prohibited, but personal vehicles are permitted in the Kathmandu Valley on an odd/even day basis.
  o Individuals entering the Kathmandu valley are subject to a mandatory quarantine upon arrival, and mask use and social distancing are mandated when out in town.

Risk Communication and Community Engagement

• Science in 5 videos were translated, dubbed, and published (15 - 21 June 2021):

<table>
<thead>
<tr>
<th>Episodes</th>
<th>Titles</th>
<th>Language</th>
<th>Links</th>
</tr>
</thead>
<tbody>
<tr>
<td>42</td>
<td>Vaccines and children</td>
<td>कोभिड–१९ खोपहरू र बालबाभलकाहरू</td>
<td>Nepali</td>
</tr>
<tr>
<td>42</td>
<td>Vaccines and children</td>
<td>कोभिड–१९ खोप आ धियापुता</td>
<td>Maithili</td>
</tr>
</tbody>
</table>

• The latest episodes were also shared with WHO HQ and WHO Country Office for India to be disseminated via their respective channels.

• The news of the arrival of the first of several shipments carrying medical supplies in Nepal as part of WHO partnership with USAID - US Agency for International Development was shared on Facebook (link here) and Twitter (link here (English); link here (Nepali)). The two agencies have been collaborating on maintaining an emergency stockpile of supplies in case of infectious disease outbreaks such as the COVID-19 pandemic.

• The news of the formation of the Control Room at the COVID-19 Unified Central Hospital, ready for operation with support from WHO, Country Office for Nepal, was shared on

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Facebook (link [here](#)) and Twitter (link [here](#)). As the central command center, the office is expected to enable coordination and communication among COVID-19 hospitals, strengthening COVID-19 response in the country.

- The announcement of the next session in the *Dissemination of Best Practices on Management of COVID-19* was published on Facebook (link [here](#)). Experts elaborated on COVID-19 in pregnancy, COVID-19 vaccination, and post COVID-19 sequelae and management.

- The news of the collaboration of UN Women and WHO Country Office for Nepal, commitment to strengthening a gender-responsive health system in Nepal, and a COVID-19 preparedness and response grounded in strong gender analysis, was shared via Twitter (link [here](#) (English) and [here](#) (Nepali)).

- The following documents were uploaded on ReliefWeb (link [here](#)):
  - Daily *Focused COVID-19 Media Monitoring*, and
  - The latest *Weekly WHO Nepal COVID-19 Situation Update*

- Infographics on the following topics were shared via WHO Nepal’s social media:
  I. The relationship between mental health, yoga and COVID-19 on the occasion of *International Day of Yoga* (Nepali): Facebook [link](#) | Twitter [link](#)
  II. Information on mucormycosis (Nepali): Facebook [link](#)
  III. Preventive measures to take during national disasters and COVID-19:
      - Facebook (Nepali): [Link 1](#) | [Link 2](#)
      - Twitter (Nepali): [Link 1](#) | [Link 2](#)
  IV. Importance of prevention measures of COVID-19 after ease of lockdown (Nepali): Facebook [link](#)
  V. Importance of preventive measures for COVID-19:
      - Facebook (English): [Link 1](#) | [Link 2](#)
      - Facebook (Nepali): [Link 1](#)
      - Twitter (English): [Link 1](#) | [Link 2](#)
  VI. Typical side effects of the COVID-19 vaccine (English): Facebook [link](#)
  VII. The importance of testing for COVID-19 (Nepali): Facebook [link](#) | Twitter [link](#)

**Field Operation and Logistics**

- WHO Nepal has been supporting the ongoing renovation, flooring and furnishing of the unified COVID Hospital Control Room and also provided IT equipment (Laptops, Desktops and TV screen) and an internet connection to the control room.
Left: Dr. Rajesh Sambhajirao Pandav, WHO Country Representative to Nepal, inspecting the control room at the COVID-19 Unified Central Hospital (Bir Hospital). Right: Handover of the control room at the COVID-19 Unified Central Hospital (Bir Hospital) with support from WHO Nepal on 21 June 2021. In the frame Prof. Dr. Jageshwor Gautam, Chief Administrative Officer of Unified Central Hospital (Bir Hospital) and Dr. Rajesh Sambhajirao Pandav, WHO Country Representative to Nepal. Picture Credit: WHO Nepal/A. Maharjan

- MoHP has received USAID and WHO-supported Personal Protective Equipment (PPE) items (Gown and N95 respiratory Masks) and stocked them at Management Division’s warehouse. DoHS.

Left: The first of several shipments carrying medical supplies has arrived in Nepal as part of World Health Organization (WHO)’s partnership with USAID - US Agency for International Development. Right: Arranging the medical supplies boxes in the warehouse. Picture Credit: WHO Nepal/A. Maharjan

What are the health clusters partners doing?

- Weekly Health Cluster Coordination meeting (every Thursday) for health sector response is ongoing at the Federal level for coordinated COVID-19 response support to MOHP. Provincial Health Directorate Offices are organizing the Provincial Level Health Cluster Coordination meeting as and when on a required basis.
- MOHP re-convened the weekly coordination meeting (every Tuesday) with COVID hospitals and PHDOs from 20 April 2021.
- Health partners are providing their support to government for the continuation of COVID and non-COVID responses throughout the country. The support provided through Ministry
of Health and Population (MOHP) especially with Health Emergency Operation Centre (HEOC), Health Coordination Division (HCD), Policy, Planning & Monitoring Division (PP&MD), Epidemiology and Diseases Control Division (EDCD), National Public Health Laboratory (NPHL), National Health Training Centre (NHTC), National Health Education Information Communication Centre (NHEICC), Family Welfare Division (FWD), Management Division (MD), Hub hospital networks; Ministry of Social Development (MOSD) especially with Provincial Health Directorate Offices, District Public/Health Offices, and municipalities.

- Health Partners recently provided support on tele-counseling to ANC, PNC mothers as well as service delivery support at health facilities, counseling to suspected and confirmed cases, medical supplies for health facilities and safety kits for home isolation cases.
- WHO and UNICEF are providing support for the COVID-19 vaccination campaign in close coordination with External Development Partners (EDPs) which includes:
  - Micro planning including financing for the procurement of vaccination;
  - Training/orientations – to health personnel at various levels, local governments;
  - Provision of Logistics support – vehicle, cold chain boxes, delivery of vaccines, transportation of beneficiaries to the vaccination site;
  - Information Technology - registration, information communication, data management, IMU app etc;
  - Risk communication and community engagement – production and dissemination of messages, public awareness campaigns and
  - Continuation of Technical Assistance.

**WHO’s STRATEGIC OBJECTIVES FOR COVID-19 RESPONSE- link here**

**RECOMMENDATION AND ADVICE FOR THE PUBLIC**
- **Protect yourself**
- **Questions and answers**
- **Travel advice**
- **EPI-WIN**: tailored information for individuals, organizations and communities

**USEFUL LINKS**
- MoHP COVID-19 official portal is available [here](#).
- Nepal COVID-19 regular updates and resources are available [here](#).
- For COVID-19 updates from the WHO South-East Asia Region Office, please visit [here](#).
- For information regarding coronavirus disease (COVID-19) Pandemic from WHO, please visit [here](#).
- Please visit this [site](#) for all technical guidance from WHO.
- Online courses on COVID-19 from WHO can be found [here](#).
- WHO Coronavirus (COVID-19) Dashboard can be found [here](#).
- Visit the WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#)
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