HIGHLIGHTS

- Ministry of Health and Population has announced 82 confirmed COVID-19 cases as of 5th May 2020.
- WHO-HQ has recently updated the document on Country Preparedness and Response Status for COVID-19 which highlights that all countries are at risk and need to prepare for and respond to COVID-19. Each country is encouraged to plan its preparedness and response actions in line with the Global Strategic Preparedness and Response Plan. Based on capacity and risk assessment, Nepal is listed as having level 3 preparedness capacity (≤60%).
- WHO Director-General convened the 3rd meeting of the Emergency Committee under the International Health Regulations (2005) regarding COVID-19 on 30th April 2020. Statement of the meeting can be found here.
- WHO-HQ has expanded its COVID-19 reference laboratory network (figure in annexe) to include some two dozen laboratories with expertise in virology, diagnostics, sequencing, and often viral culture which will act to support Member States that currently do not have testing capacity or need to get confirmation of their initial test results while building in-country capacity. A shipment fund to allow transport of samples to WHO reference laboratories for confirmatory testing has been made available to cover transport costs.
- WHO-HQ has published a technical guidance titled ‘Strengthening Preparedness for COVID-19 in Cities and Urban Settings’ to support local leaders/policy-makers in cities & other urban settings in implementing actions that enhance the prevention, preparedness and readiness for COVID-19.
- On 5th May every year WHO celebrates Hand Hygiene Day to mobilize people around the world to increase adherence to hand hygiene practices in healthcare facilities. Dr Poonam Khetrapal Singh, WHO Regional Director for South-East Asia, has said that ‘Effective infection prevention and control measures, including hand hygiene, are crucial to ensuring health facilities do not become hubs of COVID-19 transmission.’ 5th May also marks the International Day of Midwife.
- WR Nepal participated in dialogues along with the UNRC with the highest officials of the Central Crisis Coordination Committee on strategic, technical and operational issues related to the national response to COVID-19.

SITUATION OVERVIEW
(reported up to 5th May 2020)

- 82 confirmed
- 0 deaths
- 16 recovered
- 13850 RT-PCR tests
EPIDEMIOLOGICAL SITUATION

In Nepal, 82 people have so far tested positive by RT-PCR for COVID-19 as of 5th May 2020. The vast majority of these are asymptomatic. This is the result of an approach by the government under which “hot spots” are identified, i.e. areas where the risk of COVID-19 is seen as above normal. In such hot spots certain people are sampled, regardless of their clinical status.

Figure 1A: Epidemic curve of laboratory confirmed COVID-19, by date of onset/sample collection/confirmation (N=82) (Data updated till 5th May 2020)

![Epidemic curve of laboratory confirmed COVID-19](image)

Note: Asymptomatic/symptomatic/unknown at the time of detection

Figure 1B: Cumulative case count by province (Data updated till 5th May 2020)

![Cumulative case count by province](image)

Note: The first case was developed symptoms on 31 Dec 2019 in China and was confirmed on 23 Jan 2020.
Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.
Table 1: Provinces with reported lab-confirmed COVID-19 cases & deaths. (Data updated till 05/05/2020)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification*</th>
<th>No of districts affected</th>
<th>Date of last casea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>31</td>
<td>0</td>
<td>Cluster of cases</td>
<td>3</td>
<td>26 Apr 2020</td>
</tr>
<tr>
<td>Province 2</td>
<td>13</td>
<td>0</td>
<td>Cluster of cases</td>
<td>4</td>
<td>03 May 2020</td>
</tr>
<tr>
<td>Bagmati</td>
<td>7</td>
<td>0</td>
<td>Sporadic cases</td>
<td>3</td>
<td>15 Apr 2020</td>
</tr>
<tr>
<td>Gandaki</td>
<td>2</td>
<td>0</td>
<td>Sporadic cases</td>
<td>1</td>
<td>30 Mar 2020</td>
</tr>
<tr>
<td>Province 5</td>
<td>24</td>
<td>0</td>
<td>Cluster of cases</td>
<td>2</td>
<td>04 May 2020</td>
</tr>
<tr>
<td>Karnali</td>
<td>0</td>
<td>0</td>
<td>No cases</td>
<td>-</td>
<td>N/A</td>
</tr>
<tr>
<td>Sudurpaschhim</td>
<td>5</td>
<td>0</td>
<td>Sporadic cases</td>
<td>2</td>
<td>07 Apr 2020</td>
</tr>
<tr>
<td>National Total</td>
<td>82</td>
<td>0</td>
<td></td>
<td>15</td>
<td>04 May 2020</td>
</tr>
</tbody>
</table>

* Date of last case is the date of onset or date of sample collection or date of lab report based on information available.

** Case classification is based on [WHO transmission classification](#)

No cases- provinces with no cases
Sporadic cases- provinces with one or more cases, imported or locally detected*
Cluster of cases- provinces experiencing cases, clustered in time, geographic location and/or by common exposures
Community transmission- experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to:

- Large numbers of cases not linkable to transmission chains
- Large numbers of cases from sentinel lab surveillance
- Multiple unrelated clusters in several areas of the country/territory/area

Figure 2: Municipalities (by domicile) with reported laboratory confirmed COVID-19 cases
(Data updated till 5th May 2020)
Figure 3: Epidemiological characteristics of laboratory confirmed COVID-19 cases (data updated till 5th May 2020)

Figure 4: Comorbidity and recovery status of COVID-19 cases in Nepal (data updated till 5th May 2020)
PREPAREDNESS AND RESPONSE

What Government of Nepal (GoN) and MoHP is doing?

- Nationwide lock-down extended till 18\textsuperscript{th} May 2020. International flights will remain suspended until 31\textsuperscript{st} May 2020, except for emergency services, repatriation of expatriates and import of medical logistics and essential supplies. International borders will also remain closed until 31\textsuperscript{st} May 2020.
- Step-down strategy to transition from the lock-down formulated by the MoHP and presented to the high-level crisis coordination committee for consideration.
- Prioritized and costed Health Response Plan for COVID-19 to be endorsed in the next few days.
- Provinces and municipalities being facilitated to constitute dedicated teams for detailed case investigation and contact tracing using national SOPs.
- Joint rapid assessment protocol for designated hospitals readiness for IPC, Clinical Management, WASH and Health Care Waste Management implemented at the three designated hospitals at Kathmandu; findings have been validated and are being analyzed; preparations and negotiations for the implementation of the finalized tool at the provincial level ongoing.
- To expand the RT-PCR testing facilities, a total of 18 COVID-19 testing centers are now functional for performing RT PCR tests in all the provinces.
- MoHP participated in a weekly virtual “Information Session on COVID-19” organized by WHO-HQ for the member states.
- MoHP has released a standard operating procedure of cleaning and decontamination of the ambulance used in COVID-19.
- Department of Ayurveda and alternate medicine has recently published a national guidelines on preventive measures and management protocol for COVID-19 in Nepal.
What is WHO Country Office for Nepal doing?

- Since the start of the COVID-19 response in March, WHO staff have been embedded in most MoHP units, centers and teams to provide hands-on support on a daily basis. This support continues.
- WHO co-leads together with MoHP the Health Cluster, with weekly meetings with all partners and provinces. Clear asks from the MoHP to the partners for COVID-19 response remains support in the areas of TEST, PPE, Risk Communication, Support for Quarantine facilities.
- The UNCT Country Preparedness and Response Plan (CPRP) for COVID-19 is being redrafted. WHO has coordinated the updating of the Health Cluster component in the CPRP in line with the draft MoHP country response plan for COVID-19.
- Supported the public and partner advocacy on rational use of PPE undertaken by MoHP.
- High level engagement of the WHO with the experts group convened by the MoHP on elaborating the criteria and conditionalities for easing the lock-down in phases
- Dialogue and agreement with key partners in supporting the systematic documentation of the response by the MoHP.
- Support to EDCD in finalizing the operations research collaboration with external research partners.
- Support and facilitation to activate the health cluster in all seven provinces which is chaired by the Provincial Health Directors and co-chaired by the WHO-PHOs. Provincial health clusters are meeting weekly before the central health cluster.
- The reporting forms for information collected through the provincial health cluster for reporting to the central health cluster have been standardized.
- Provided support to EDCD to conduct case investigation and contact tracing with the field WHO staff (SMO, FMO).
- Support to the provincial Ministry of Social Development (MOSD) and the related health directorate focal person in capacity building for case investigation and contact tracing.
- WHO supported EDCD in conduct epi-analysis of Severe Acute Respiratory Illness, Influenza Like Illness cases reported from EWARS.
- WHO is providing ongoing support on a daily basis to EDCD in data analysis of COVID-19 cases and support data management and entry in the Go.Data
- WHO staff, including a WHO- GOARN epidemiologist is a part of the team currently investigating the latest COVID-19 cluster in and around Nepalgunj (Province 5).
- Coordinate with WHO’s Regional Office, MoHP and partners on the availability of chartered flights to repatriate foreigners from Nepal. Such charters may provide an opportunity to bring in logistic supplies to Nepal, which is otherwise difficult given the current context of lock-down and flight restrictions.
- WHO has mobilized logistics support for surveillance teams in all the provinces and ground crossings.
• Support to the Logistics Cluster and Management Division, DoHS, MoHP for transportation of logistics items to sub-national level through the Logistics cluster services and facilitation with WFP.
• Support the development of a new protocol for the collection of nasal and oral swab in 0.9% normal saline as an alternative medium to VTM.
• Development of measures for quality assurance of provincial PCR labs ongoing with NPHL.
• Supported the rapid assessment (RA) of IPC, WASH, Health Care Waste Management and Clinical Management Readiness which is completed in all three level 2 hospitals in Kathmandu followed by onsite verification and validation. WHO field staff and some partners/officials have been oriented on this rapid assessment. All the provinces were facilitated to identify the team members to take this RA forward with timelines.
•WHO trained twenty-two senior officials of MoHP/DoHS on Principles of Crisis and Risk Communications.
• Supported the harmonization of the data flow, with the objective to improve the COVID-19 web portal of MoHP.
• WHO staff provided a brief update on rationale use of PPE during the live media brief hosted by MoHP.
• WHO supported EDCD and NHEICC in the development of a preliminary framework on Risk Communication during Emergencies.
• Infographics on NCD, tobacco use in the context of COVID-19 were finalized with WHO support and uploaded on NHEICC web portal.
• “Open WHO” training modules on COVID-19 have been made available on the NHTC website. WHO is supporting the translation into Nepali language of these modules, which will be available soon.

What partners are doing?

▪ Partners are fully engaged in the COVID-19 response in a structured manner since the formal activation of the Health Cluster on 9th April 2020, led by the IMS - MoHP and co-led by WHO.
▪ Several partners are contributing to the COVID-19 response as well as for continuity of other essential health services by providing supplies of Laboratory Tests, PPE and other items. The partners systematically share information on this support with each other in detail so that supplies are provided in a coordinated manner.
▪ On a weekly basis, partners exchange information through a virtual meeting.
▪ Within the UN, Heads of Agencies meet thrice a week to discuss the health and other impacts of the COVID-19 crisis. UN agencies co-lead other clusters to support the COVID-19 preparedness and response in areas such as communication, protection, food supply etc.
WHO’s STRATEGIC OBJECTIVES FOR COVID-19 RESPONSE

The overarching goal is to control the pandemic by slowing down the transmission and reducing mortality associated with COVID-19. The global strategic objectives are as follows:

▪ **Mobilize** all sectors and communities to ensure that every sector of government and society takes ownership of and participates in the response and in preventing cases through hand hygiene, respiratory etiquette and individual-level physical distancing.

▪ **Control** sporadic cases & clusters and prevent community transmission by rapidly finding and isolating all cases, providing them with appropriate care, and tracing, quarantining, and supporting all contacts.

▪ **Suppress** community transmission through context-appropriate infection prevention and control measures, population level physical distancing measures, and appropriate and proportionate restrictions on non-essential domestic and international travel.

▪ **Reduce** mortality by providing appropriate clinical care for those affected by COVID-19, ensuring continuity of essential health & social services; protecting frontline workers & vulnerable populations.

▪ **Develop** safe and effective vaccines and therapeutics that can be delivered at scale and that are accessible based on need.

RECOMMENDATION AND ADVICE FOR THE PUBLIC

If you are not in an area where COVID-19 is spreading or have not travelled from an area where COVID-19 is spreading or have not been in contact with a COVID-19 case, your risk of infection is low. It is understandable that you may feel anxious about the outbreak. Get the facts from reliable sources to help you accurately determine your risks so that you can take reasonable precautions. Seek guidance from WHO, your healthcare provider, your health authority or your employer for accurate information on COVID-19 and whether COVID-19 is circulating where you live. It is important to be informed of the situation and take appropriate measures to protect yourself and your family.

If you are in an area where there are cases of COVID-19, you need to take the risk of infection seriously. Follow the advice of WHO and guidance issued by national, provincial and local health authorities. For most people, COVID-19 infection will cause mild illness however, it can make some people very ill and, in some people, it can be fatal. Older people, and those with pre-existing medical conditions (such as cardiovascular disease, chronic respiratory disease or diabetes) are at risk for severe disease.

For detailed information please visit the WHO site.

USEFUL LINKS

▪ For information regarding coronavirus disease 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

▪ For global WHO situation report, please visit this site

▪ Global coronavirus disease situation dashboard can be found here

▪ For COVID-19 updates from WHO South East Asia Region Office, please visit here.

▪ Visit WHO Nepal webpage on COVID-19 here; Facebook page here.

▪ MoHP’s COVID-19 official portal is available here.

▪ Regular updates on MoHP Nepal’s COVID-19 updates (including situation reports) and resources are available here.
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ANNEXE: Figure 5: WHO COVID-19 Reference Laboratory Network