

THE REPUBLIC OF UGANDA MINISTRY OF HEALTH

COVID-19 DAILY SITUATION REPORT

1.0 HIGHLIGHTS

- Five hundred fifteen (515) new COVID-19 confirmed cases reported in the last 24 hours bringing the cumulative total to 32,914 from 135/136 districts.
- No COVID-19 death has been registered today. Cumulative deaths stand at 245 (Case Fatality Rate: 0.74%).
- Ninety six percent of confirmed cases 96% (31,457/32,914) are locally transmitted while 4% (1,457/32,914) are imported cases.
- A total of 398 confirmed cases (Ugandans: 389; Non-Ugandans: 09) are currently admitted across 18
 health facilities and 6 Non-Traditional Isolation Facilities.
- National bed capacity currently stands at 3,486 beds with 398 cases on active admission, giving a bed occupancy rate of 11%.
- A cumulative total of **11,606 cases** have recovered and been discharged (**10,560** cases under hospital management and **1,046** for Home Based Care)
- A total of 4,609 laboratory samples were tested today bringing it to a cumulative total of 727,923
 samples tested. Positivity rate today stands at 11.2% compared to 9.8% of the previous day.



Summary of COVID-19 outbreak in Uganda

Summary statistics as of 23rd December 2020	
Total Confirmed Cases	32,914
New deaths	00
Cumulative deaths (laboratory confirmed)	245
Health facilities	241
Community	04
Cumulative deaths (non-laboratory confirmed-probable)	74
Confirmed cases on admission	398
Ugandans	389
Non-Ugandans	09
Cumulative number of recoveries (Facility management)	10,560
Ugandans	10,141
Non-Ugandans	419
Runaways from isolation (Cumulative)	79 (59 prison)
Cumulative contacts listed	48,750
Contacts that have completed 14 days	47,199
Contacts still under follow up	1,551
Contacts followed up today	275(17%)
Contacts followed up today who became symptomatic	00
Contacts lost to follow up	00
Specimens collected and sent to the lab today	4,609
PoE	61
Travellers (intending travel out country)	1,720
Contacts and alerts	2,766
Health workers	62
Cumulative specimens collected	727,923
Number of cases with positive results today	515
Ground crossing POE	01
Travellers (intending travel out country)	75
Contacts	121
Alerts	300
Returnees via EIA	00
Health workers	18



2.0 EPIDEMIOLOGY

A total of 515 new cases have been registered today from 29 districts with Kampala still reporting the highest number of cases followed by Wakiso, Iganga and Luwero as shown below. Alerts continue to account for the highest number of cases registered on a daily with 300 cases (58%) reported today, followed by Contacts at 121 cases (23%) and Travellers (persons testing for travel purposes) at 75 cases (15%). To-date, only one district (Otuke) has not reported a COVID-19 case.

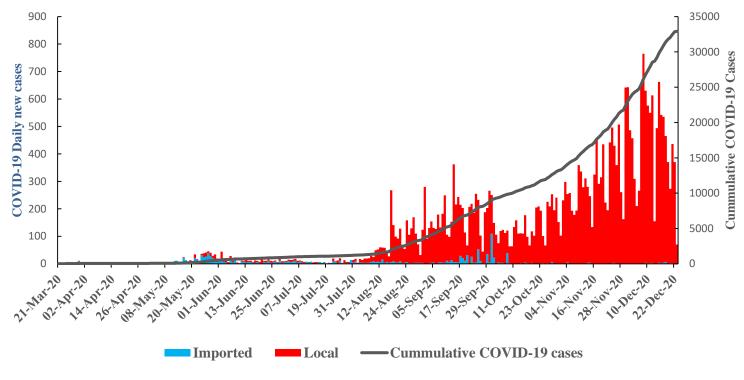
District	Alert	Contact	Health worker	Truck driver	Traveller	Total
Kampala	186	47	13		68	314
Wakiso	39	4			5	48
Iganga	4	28	1			33
Luwero	29					29
Tororo	7	6		1	2	16
Masaka	3	6				9
Jinja	3	3	2			8
Rubirizi	6	2				8
Ntungamo	1	4				5
Bugiri		4				4
Budaka		3	1			4
Ssembabule	2	2				4
Bushenyi		3				3
Kiryandongo	2	1				3

2.1 New COVID-19 Cases	confirmed	today by	district	and type
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District	Alert	Contact	Health worker	Traveller	Total
Kisoro	3				3
Zombo		3			3
Dokolo	2				2
Mbale		1	1		2
Moyo	1	1			2
Mitooma	2				2
Kaliro	2				2
Sheema	2				2
Butambala	2				2
Kalungu	2				2
Adjumani	1				1
Mbarara	1				1
Nebbi		1			1
Terego		1			1
Kiruhura		1			1

Figure 1: New COVID-19 Confirmed cases



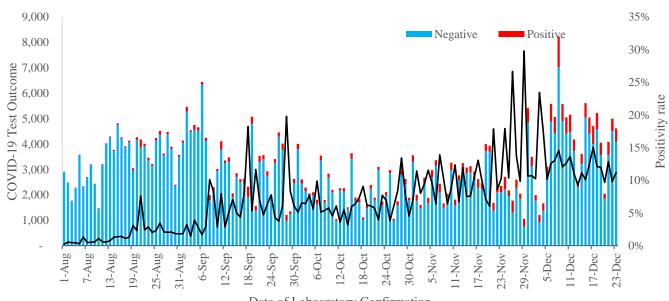


2.2 National trend of confirmed cases by date of laboratory confirmation

Figure 2: Confirmed cases by date of sample collection

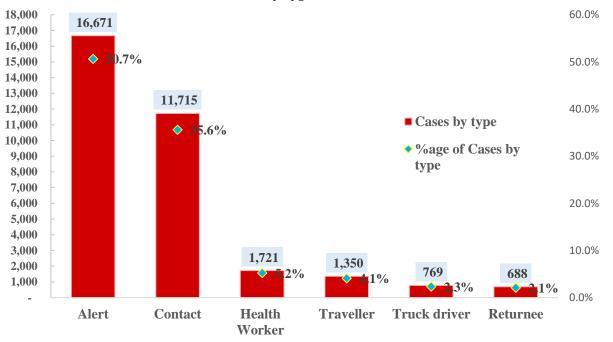
2.3 COVID-19 Laboratory testing outcome

Positivity rate today stands at 11.2% with 515 new confirmed cases out of the 4,609 samples tested which is an increase in comparison to the previous day. However, this is still above the average 7% positivity since August 2020.



Date of Laboaratory Confirmation





2.4 Distribution of COVID-19 Cases by type

Figure 4: COVID-19 cases reported to-date by type

2.5 Trends of contacts and alert cases registered since August 2020

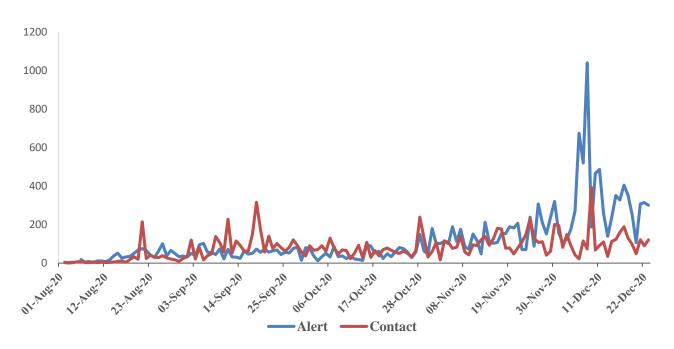
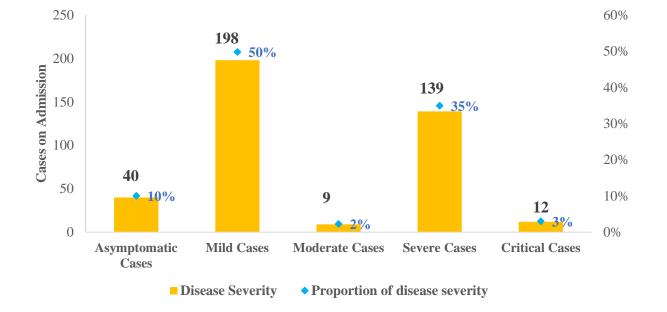


Figure 5: Daily trends in new contacts and alert cases confirmed by date of laboratory confirmation





2.8 Categorisation of confirmed cases on active admission by severity of disease (n=398)

Figure 8: Active cases on admission by disease severity

3.0 PUBLIC HEALTH ACTIONS

COORDINATION

• Incident Management Team (IMT) meeting chaired by the Incident Commander continues to meet daily.

SURVEILLANCE

- Active case finding focusing on most affected areas.
- Strengthening alert management system and daily reporting from all districts and health facilities.
- Continued investigation of alerts and suspected cases, especially new clusters and newly affected areas.



CASE MANAGEMENT

• There are **398** confirmed cases on active facility admission across the country. Below is summary by treatment site.

Isolation Facility Type	Isolation Facility Name	Active Facility Admissions	Cumulative Discharges	Total Bed Capacity	% Bed Occupancy
	Mulago NRH	152	2400	356	43%
	Naguru Hospital	9	92	12	75%
	Entebbe Hospital	106	1080	141	75%
	Jinja RRH	5	251	63	8%
	Mbale RRH	5	430	50	10%
	Moroto RRH	7	222	100	7%
	Soroti RRH	14	458	90	16%
	Lira RRH	4	316	51	8%
Hospital	Gulu RRH	4	642	12	33%
COVID-19	Arua RRH	3	313	56	5%
Treatment	Hoima RRH	2	126	49	4%
Unit	Mubende RRH	4	128	25	16%
	Fort Portal RRH	6	62	26	23%
	Kabale RRH	8	468	64	13%
	Mbarara RRH	20	203	30	67%
	Masaka RRH	7	186	41	17%
	Bombo Military Hospital	5	201	60	8%
	Adjumani General Hospital	0	57	20	0%
	Namboole	21	1826	800	3%
Non	Kyangwali	0	12	40	0%
Tradional	Achwa power	0	208	200	0%
Isolation	Gulu Prison	9	323	400	2%
Facility	Moroto Prison	0	115	200	0%
	Jinja Prison	7	441	600	1%



RISK COMMUNICATION AND SOCIAL MOBILIZATION

• The team continues to release daily press briefs to update the general public on the COVID-19 outbreak.

LOGISTICS

- With funding support from Global Fund, process is on-going to;
 - Procure COVID19 Diagnostics with specific focus to scale up testing with Rapid Diagnostic Tests (RDTs).
 - Procure Personal Protective Equipment (PPEs) for Health Workers supporting COVID-19 response and continuation of essential service i.e. HIV, Tuberculosis and Malaria as shown below.

ltem	QTY (PCS)	Total Cost
Mask, Surgical, Type IIR fluid resistant, s.u./disp Pack of 50	114,714	2,466,346
Respirator, Surgical, High-filt, FPP2/N95, no-valve, none ster - Pack of		
20	45,652.17	2,100,000
Gloves, Examination, non-ster, s.u./disp, pwd free, nitrile, size M - Pack		
of 100	200,000.00	2,198,440
Gloves, Examination, non-ster, s.u./disp, pwd free, nitrile, size L - Pack		
of 10	91,115.52	1,001,560
Coveralls Protection CatIII, 6b,L	32,734.00	266,828
Apron, 100Pcs	20,338.20	427,102
Gown, fluid-resistant, disposable, with elastic wrists	90,000.00	292,500
Shoe Covers	90,000.00	111,600
Hood water proof (to be used with gowns) [1]	90,000.00	453,600
Total product costs		9,317,976
PSM costs		2,191,076
TOTAL		11,509,052

ICT AND INNOVATIONS

- Digitise tools using DHIS2 platform for school-based surveillance and monitoring.
- Digitization of tools for effective surveillance and monitoring of patients under Home Based Care.
- Integration of COVID-19 Routine Aggregate and Case Reporting into the national system.



- Connection of COVID-19 Treatment Units (C19TU) and Point of Entry (PoEs) to the National Back Bone Infrastructure (NBI).
- Incorporation of automated email notification of positive results to Case Management, Surveillance and Emergency Medical Services.
- Roll out of electronic laboratory request to reduce burden of data entry and improve consistency of data end to end.
- The Uganda COVID-19 dashboard can be accessed at <u>https://covid19.gou.go.ug/</u>

4.0 CHALLENGES

- Delay in dispatch of results to districts; electronic laboratory request application to be rolled out to reduce data entry workload and thus turnaround time.
- Resistance from community to be evacuated for confirmed cases, denial of results and non-compliance with directives and guidelines especially within Kampala.
- Inadequate resources/funding to facilitate smooth operation of the different COVID-19 response activities.

Given the fast-evolving nature of this epidemic, errors and omissions are inevitable. The Incident Management Team welcomes feedback and any information that could help rectify this. Send any comments and feedback to: E-mail: mohugpheoc@gmail.com