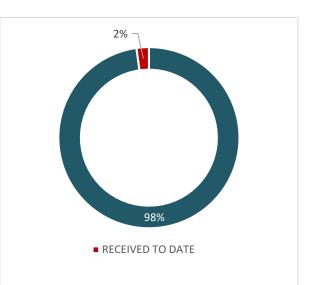
COVID-19 OUTBREAK

Operations update #2

14 February 2020

Emergency appeal:	MDR00005
GLIDE:	EP-2020-000012-CHN
Operation timeframe:	31 Jan - 31 Dec 2020
Funding requirements:	CHF 32,000,000
Funding gap:	CHF 31,278,496



A. SITUATION UPDATE







DATE

EVENT

11 Feb 2020

IFRC expands its response and preparedness programmes and issues revised Emergency Appeal for 32 million Swiss francs

B. OPERATIONAL UPDATE

Response by Red Cross Society of China and National Societies in East Asia

Red Cross Society of China

Ambulatory services and operations

Emergency rescue and transportation teams have also deployed to Wuhan in the evening of 10 February 2020, meeting up with an eight-member ERT specialized in transporting patients with infectious diseases, and will be assisting in operations in coordination with Beijing, Qinghai, and Inner Mongolia ERTs. PPE and logistical support materials for the ambulance transfer team have been delivered, and pre-hospital first aid protection training provided. Based on arrangements by the Hubei epidemic prevention and control headquarters, the RC ambulance and transport teams from Beijing, Inner Mongolia, Shanghai, and Qinghai will respectively carry out the patient transport tasks in Wuhan emergency centre and Tongji hospital in Wuhan. During the period 22 January to 10 February 2020, the 999-emergency response centre of the Beijing Red Cross Branch has dispatched a total of 8,239 vehicles for patients with fever.

¹ This includes only lab-confirmed cases, and excludes the 13,332 clinically diagnosed cases reported by China on the 13 February.

The Red Cross Society of China disinfection volunteer team in Hubei has conducted sanitation and disinfection tasks in six cities (Wuhan, Huanggang, Xiaogan, Jingmen and Jingzhou) in Hubei in the past 15 days, covering areas of 2,440,000 m². The disinfection items were mobilized and delivered to Hubei on average of 200 tons every day. The volunteers also provide disinfection trainings to the local people. The second batch of 20 negative pressure ambulances purchased by RCSC have arrived Wuhan on 7-9 February 2020. Ten of these ambulances will be temporarily used by the RCSC Ambulance convoy for critically ill patients, and the remaining were handed over to Wuhan Municipal Emergency Centre.

As of 11 February 2020, 5:00PM Central Standard Time (CST), RCSC Headquarter and Chinese Red Cross Foundation had received donations at a total value of CHF 140.17 million (1.002 billion yuan – out of which 789.45 million yuan in cash and 212.94 million yuan in-kind). The received funds and materials will be used in accordance with the needs of epidemic prevention and control and the wishes of donors. The RCSC Qinghai branch publishes and broadcasts the receipt and use of donated funds and goods on Qinghai Daily, Qinghai radio and television station and other media, and online training has been conducted for staff handling the customs and reception processes and procedures.

Communique

The RCSC Guangdong branch has issued "Guideline for Red Cross to carry on First Aid work during the period of new crown pneumonia epidemic prevention and control", put forward to innovate working mode, make full use of online First Aid training platform, to add relevant content of infectious diseases knowledge and protection in the training, strengthen epidemic prevention and control knowledge dissemination, and to improve public self-protection awareness and ability. The Guangdong Branch has also developed and launched the online training course "Public health safety plan for enterprises and public institutions to resume work".

Hong Kong branch of RCSC

Risk communication and community engagement activities include health and hand hygiene promotion information shared at four public exhibitions, together with the distribution of 1,725 packs of hand sanitizers. Weekly "live" online health talks are now available on the HKRC YouTube channel.

Democratic People's Republic of Korea Red Cross Society (DPRK RCS)

As of 11 February 2020, a total of 250 new DPRK RCS volunteers have been trained in delivering key preventive messages against COVID-19 through household visits, focal group gathering and visits to public and working places. At national level, DPRK RCS volunteers are on the ground conducting surveillance work in close collaboration with the household doctors (community health workers), and have distributed the following; 5,000 blankets, kitchen sets, hygiene kits, water purification tablets and jerry cans, and provision of chlorine powder for disinfection in public institutions (clinics, schools, kindergartens and etc.).

In addition, the following activities have been planned for: creation and publishing of Information, Education and Communication (IEC) materials on COVID-19 and on handwashing (in Korean), communication support, WASH – hygiene promotion workshop for schools and kindergartens teachers, a 3-day training of 100 volunteer leaders/leaders to be trained in emergency volunteer management, and the archiving and promulgation of video clips and pictures of interviews and promotion on Red Cross activities against COVID-19 on the DPRK RCS website and by mass media. DPRK RCS will support MoPH with provision of reverse transcription polymerase chain reaction (RT-PCR equipment) and Personal Protective Equipment (PPE) kit for experts. However, UN sanctions (particularly banking transfers) have been a challenge for the NS as resources are running out to meet the needs of the communities.

Japanese Red Cross Society (JRCS)

In collaboration with the Ministry of Health (MoH), JRCS has been providing medical support for infected people onboard the cruise ship *Diamond Princess*, where 218 out of 3,700 people have so far been infected. Following the request of the MoH, Labour and Welfare, since 10 February, JRCS has dispatched Red Cross emergency medical teams consisting of doctors, nurses, pharmacist, and administrators for a duration of two weeks. Plans for

providing MHPSS inside the cruise ship, or remotely through teleconferencing with Disaster Psychiatric Assistance Team (DPAT) and other PNS, are underway.

Some Red Cross hospital staff, as part of the Disaster Medical Assistance Team (DMAT), have also been managing the transferring of infected persons to hospitals. An infectious diseases control doctor from a Red Cross hospital will also be deployed to the headquarters to develop guidelines for COVID-19.

Korean Red Cross (KNRC)

The first batch of in-kind donations from KNRC (consisting of medical PPE and bedsheets) have arrived at the Wuhan Branch of RCSC. A second batch of in-kind donations (consisting of eye and face PPE, masks, and infrared thermometers) is scheduled to be air-freighted around 19 February 2020. Books, stretching bands, hygiene and food items have also been provided to people quarantined at designated facilities.

Mongolia Red Cross Society (MRCS)

MRCS branches, along with their volunteers, have been actively working on the dissemination and distribution of hand sanitizers based on their capacity of existing stock. MRCS monitors media releases on a regular basis and publishes situational updates and prevention suggestions on the MRCS Facebook page on a daily basis. On average, Facebook page posts reach 13,000 people per day.

Response by Red Cross Red Crescent regionally

As of 13 February 2020, across China and the world, the number of cumulative lab-confirmed cases has risen to 46,997 cases, with 1,368 deaths - the largest caseload remains in Hubei Province with 34,874 cases, and 1,310 deaths. This number does not include people who have been clinically diagnosed in Hubei province, based on the presence of COVID-19 symptoms.

Cook Islands Red Cross

In collaboration with the Ministry of Health, awareness-raising efforts have been planned.

Fiji Red Cross Society

In collaboration with the Ministry of Health, Red Cross is ramping up risk communication efforts, including through printed materials in local languages. The NS has also participated in meetings with lead ministries in its auxiliary role and is currently working on translations of health messages relating to food, travel, appropriate mask use, into the languages of Fiji, Hindi, and iTaukei.

Indonesian Red Cross Society (PMI)

PMI is developing its preparedness and response plan for COVID-19 with three different level scenarios of outbreak transmission. It has released an official letter on PMI preparedness as national awareness to call for initial actions from all PMI branches/chapters on COVID-19 prevention campaign. At this stage, some PMI branches have started their actions at the community level - including PMI Central Java Province and North Halmahera.

PMI has continued its actions in Natuna Island (holding site for Indonesian citizens evacuated from Wuhan) by delivering assistance and providing risk communication, community engagement, and basic services to vulnerable communities. PMI has conveyed public health awareness on COVID-19 transmission and prevention actions as main gaps of community health literacy.

Through support from PMI National Headquarters, PMI branch in Natuna conducted rapid assessment on Community Engagement and Accountability (CEA) as reference to determine effective strategies on community engagement for COVID-19 risk communication.

An official request has been issued from the MoH to PMI for scaling up the operation to six high-risk areas which have been determined by MoH (Jakarta, Surabaya, Batam, Bali, Manado and Medan) due to those areas having direct flights to and from China.

PMI has continued to mobilize its resources for social mobilization at branches/chapters on COVID-19 prevention and promote health protection for staff/volunteers. In addition, PMI has set up media communication and community engagement strategies (including rumour-tracking and feedback mechanisms) on COVID-19. As of 9th February 2020, PMI has reached 22,152,862 viewers who have received health information for COVID-19 through social media (FB, Twitter and IG), and 66,175 people have re-shared the information on COVID-19.

- PMI's chairman Jusuf Kalla gave <u>official statement on PMI's commitment to support COVID-19</u> <u>preparedness</u> in Indonesia.
- PMI social mobilization for 2019-nCoV in Natuna Island.

Micronesia, Federated States of Micronesia Red Cross

Red Cross is supporting with the distribution of hygiene kits to people in quarantine, and with the distribution of health promotion material. The NS has also attended meetings with lead ministries in its auxiliary role.

Nepal Red Cross Society (NRCS)

Red Cross has launched an awareness campaign through media, including a prime-time (11.00AM-12.00PM) hotline and community engagement material, to share timely and trustworthy information, address misinformation and build knowledge, acceptance. The Red Cross hotline service has been activated. Out of 25 calls received, 11 callers reported that they came to know about the virus through NRCS's radio programs - messages for preventive measures and modes of transmission were also promulgated through the radio programme. Rick communication and community engagement activities have been also rolled out, including through TV and radio spots: Jugal Rural Municipality; Sindhupalchok; Dolakha; Lalipur; Kaski (10,000 pieces of IEC materials); Bharatpur; Ratnanagar; Illam; Morong; Japanese Encephalitis health facility in Lamjung; and Tarehtum. An orientation program led by the Chief District Officer (CDO) and a radio programme "Radio Jingle" were also held in Dhankuta district.

Palau Red Cross Society

A Training of Trainers (ToT) for Epidemic Control Volunteers (ECV) by the Ministry of Health/Public Health, consisting of two representatives each from 16 states, has been planned. This training includes the use of ECV tools, dissemination of health messages, and social media campaigns. The targeted audience for the initiative will be those who are home-bound; Omekesang (PLWD), the ageing, retirees, CWEP, Protected Area Network, Bureau of Customs and Border Protection, public places and schools and special education centers.

Philippine Red Cross (PRC)

The PRC continues to engage staff and volunteers across the country. 104 branches have been trained in COVID-19 prevention approaches. Technical trainings on epidemic response (ECV) have also been organized targeting 36 participants coming from 25 chapters on 11 February and COVID -19 training was also conducted with 17 Chapters in Mindanao on 8 February in conjunction with a polio workshop. A draft SOP for PRC's 129 ambulances has been developed and an initial 15 sets of frontline PPE kits have been made available for priority ambulance crews. Staff and volunteers are supporting communities in prevention and containment strategies. Currently, PRC has polio vaccination and community engagement activities in Metro Manila and Mindanao and are using all opportunities to share timely information about the virus and address and answer information gaps, believes and misconceptions, questions and rumours.

PRC conducted a Movement partners meeting to update on COVID-19 on 6 February. PRC has pre-positioned PPE equipment to be used by responders with 6,015 sets are now available for PRC use prepositioned in regional warehouses and chapters in addition to a new batch of 1,500 recently procured sets of PPEs for volunteers. PRC has maintained close coordination with Philippine General Hospital and San Lazaro Hospital for possible support on provision of medical tents. Guidance notes have been shared with the blood bank and Welfare Unit on blood safety and psychosocial support activities during the outbreak. Information on prevention of COVID-19 has been shared with all chapters and is being circulated on PRC social media platforms including Virtual Volunteer which targets the large Overseas Filipino Worker community. The IFRC is participating in national meetings convened by

WHO, OCHA and other agencies, and is focusing on rumour-tracking and ensuring accurate messages are shared on our social media.

As of 11 February, the Philippines has only three confirmed cases and one death related to COVID-19.

Samoa Red Cross Society

Red Cross is engaging media and volunteers on the ground to scale up hygiene and health promotion approaches (including event booths to reach the public). Volunteers have also been trained on appropriate mask use. In addition, critical risk communication and health promotion material (including on food, travel, hygiene and appropriate mask use) are being translated into Samoan.

Solomon Islands Red Cross

The NS is liaising with the Ministry of Health, has conducted refresher ECV training for volunteers, and has printed awareness campaign materials.

Detailed information on the situation is available on Go

ASIA PACIFIC	Across Asia Pacific, as of 13 February there have been 46,997 lab-confirmed cases, 13,332 clinically diagnosed cases, and 1,368 deaths reported (primarily in mainland China, one death in Hong Kong and one death in the Philippines) ² . Outside of countries with confirmed cases,
	Mongolia has 12 suspect cases (the country will receive 3,000 diagnostic equipment this week).
	Country Cluster Support Team (CCST) Beijing continues to generate daily Information Bulletins and continues to actively monitor the update of the situation. CCST Indonesia and Timor Leste has indicated Indonesian Red Cross / Palang Merah Indonesia (PMI) has updated and translated into English its Preparedness and Response Plan for COVID-19, with scenarios that include multiple pandemic waves, and co-occurrence with natural disasters.
	IFRC offices across Asia Pacific are working actively to support and provide technical guidance to National Societies. The offices have also updated their business continuity plans to ensure that – in worst-case scenario – their ability to deliver services to and support National Societies continues.
	The Asia Pacific Regional Office (APRO) is providing guidance and coordination support to National Societies through five Country Cluster Support Teams (CCSTs) and eight Country Offices spread across East Asia, South Asia, Southeast Asia and the Pacific geographical areas. All Rapid Response members have been either deployed, are supporting remotely, or are awaiting deployment.
	In DPRK, the Government through the Ministry of Foreign Affairs informed to the diplomatic Community and International Organizations the extension of the quarantine till 15 th February.
	"Under the consideration of the last international staff arrival day to the country is 31 January 2020 and during the quarantine period the quarantined staff had contacted with other staff in the compound violating the quarantine policy, the staff of the Diplomatic Missions and International Organizations must be under the medical surveillance in quarantined till 15th February 2020".
AFRICA	As of 13 th February 2020, there are no confirmed cases of COVID-19 reported in the African region. Ministries of Health across the Region are strengthening capacities for detection and management of suspected cases. The close connection between African countries and China continues to be a potentially high risk for African Countries. In the past month over 20 African Countries have raised over 50 alerts on suspected cases of COVID-19, all samples have turned

² This information is based on WHO figures

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out negative so far. The 13 priority 1 countries in the region are presently receiving technical
support from WHO to scale up preparedness strategies.

The IFRC Africa Region is working in close coordination with Africa National Societies, Ministries of Health and WHO to support preparedness efforts across the Region with a Focus on the 13 priority 1 countries. IFRC and National Societies staff have been selected to participate in the WHO organized Corona virus preparedness trainings in Nigeria and Ivory Coast. As part of Preparedness for Effective Response (PER), seven African National Societies have progressed on Epidemic Preparedness, specifically Democratic Republic of the Congo (DRC), Mali, Uganda, Guinea, Kenya, Cameroon and Sierra Leone.

At the same time, several National Societies are working closely with other Movement partners to enhance their capacities to prepare for and respond to epidemics. Many National societies are members of the National COVID-19 national task force on Corona Virus. The IFRC Africa Region is presently conducting a preparedness mapping of NSs preparedness capacities for a better understanding of preparedness capacities, needs and gaps.

In the America only two countries have confirmed COVID-19 cases, since the onset of the **AMERICAS** epidemic. United States of America with 13 cases and Canada with 7 cases. Most of these cases have history of travelling to China (17) while two (2) are under investigation for possible transmission outside China and one (1), in Canada is still under investigation. No other American countries have confirmed cases, although there are several suspected cases still under investigation. No deaths have been reported. Countries receiving direct flights from China are USA, Canada and Panama, and have in place specific health measures for traveler to reduce risks of transmission of COVID-19, as well as assist who has symptoms of acute respiratory infections.

> Preventive and monitoring systems have been set up in almost all countries, and Red Cross-National Societies are in contact with health authorities or national disaster coordination entities. The IFRC regional office organized the coordination team comprising BCPRR, health and WASH, logistics, finance, PRD and Communication staff. The team scheduled weekly meetings, and teleconferences in Spanish and English for sharing updated information on the epidemic with National Societies and IFRC clusters. The health unit has translated IFRC and WHO materials into Spanish and opened two group in teams for maintaining a smooth communication with colleagues in the region.

> The LAC Humanitarian Group led a meeting on the 4th of February. There concerns about the capacity to respond to an outbreak in country as Venezuela, Haiti, and Bolivia, because their weak health systems, and in countries were a social unrest is most likely to paralyze all public health and educational services. A contingency and business continuity plans are under preparation.

As of 13th of February, 46 cases have been reported in Europe. Sixteen cases in Germany (two **EUROPE** imported, 14 locally-acquired), eleven cases in France (five imported, six locally-acquired), nine cases in the United Kingdom (eight imported, one locally-acquired), three cases in Italy (three imported), two cases in Spain (two imported), one case in Belgium (imported), one case in Finland (imported), and one case in Sweden (imported) and 2 cases in Russia.

> IFRC Regional Office Health Team is working in close coordination with WHO Europe. IFRC Regional Office Task force is established and working in close communication with National Societies technical focal points, sharing guidance and information on risk communication and CEA / RCCE. As of 13 February 2020, 16 National Societies including Armenia RC, Azerbaijan RC, British RC, Bulgaria RC, Croatia RC, Finnish RC, Georgia RC, German RC, Hungarian RC Italian RC, Kyrgyzstan RC, Magen David Adom, The Red Cross of Republic of North Macedonia, Spanish RC and Tajikistan RC, which are already involved in preparedness and / or response activities and

involved in the national coordination mechanism, developed, adapted and translated and disseminating information materials among population, including social media.

Kyrgyzstan Red Crescent directly involved to the response actions: staff and volunteers of Red Crescent with local Chinese language skills support to the MoH in the medical checkpoints established in the international airports and car road points. NS requested support on PPE for their staff and volunteers. MoH officially requested support from Kyrgyzstan RC on Conduction of public campaigns among general population, printing out informational materials (Kyrgyz language, Russian language, Chinese and English), disinfection and hygiene materials.

MENA The total number of confirmed cases stands at eight cases in the United Arab Emirates as of the 12th of Feb, the IFRC MENA regional taskforce continues to closely monitor the situation and provide the necessary technical guidance and support to MENA NSs. Additional technical guidance and materials are under translation and design with a focus on risk communication, community engagement as well as the dissemination of learning from IFRC previous pandemic response operations. Close regional coordination and information sharing with WHO Regional Office for the Eastern Mediterranean were established with a priority goal to coordinate preparedness and contingency planning efforts in countries at higher risk in the region together with the host national societies. as part of the global rapid response personnel alert, MENA regional taskforce prioritized Risk Communication/CEA and Pandemic Preparedness roles for immediate deployment to support the ongoing work at regional level but also to support NSs in their national preparedness.

MENA health & WASH forum, and MENA (Mental Health and psychosocial support) MHPSS Network and technical committee are also informed on the current available technical guidance and information. The members of both networks are closely coordinating with IFRC on next steps related to the preparedness.

MENA regional office is also proceeding with business continuity planning targeting regional office, country offices and national societies but giving the priority to those in high risk countries.

Response by Red Cross Red Crescent globally

The IFRC Secretariat is coordinating with global public health and outbreak response partners, including the WHO, UNICEF and partners in the Global Outbreak Alert and Response Network (GOARN). In addition, tools and guidelines are being developed to ensure a consistent, high-quality and appropriate response by Red Cross and Red Crescent National Societies experiencing various levels of risk and outbreak.

IFRC global coordination cell has been established and it is fully operational. The actual composition of the cell is the following:

- Operations Coordinator
- Medical Logistics
- Public Health in Emergencies
- Business continuity planning

The following position will be filled soon via rapid response mechanism:

- Pandemic Preparedness
- PMER
- WHO Liaison (Geneva)
- Risk Communication (Geneva)

Strengthening disaster and crisis preparedness at global, regional, sub-regional, national and local levels is critical to save lives, protect livelihoods in facing the COVID-19 outbreak. IFRC's National Society Preparedness for Effective Response (PER) approach aims to enable National Societies to fulfil their auxiliary role by strengthening

local preparedness capacities to ensure timely and effective humanitarian assistance. Continuous support to Red Cross Red Crescent National Societies in their PER efforts, in addition to epidemic preparedness considerations are ongoing, with translations into Spanish, French and Arabic languages. The materials will be further adapted and translated as appropriate to local languages in coordination with the regions.

Since the outbreak, a guidance note for IFRC and National Societies on the COVID-19 outbreak was developed and is updated on a weekly basis. It includes the most up to date information on the virus and related symptoms, risks, as well as practical actions a National Society can take in support of its country's national response.

Risk communication and community engagement guidelines are also part of the global guidance material. It guides the membership in the development of community engagement approaches that allow community voices, priorities and perspectives to be heard and responded to by the broader outbreak prevention and response partners. In addition, IFRC is supporting interagency efforts with additional community engagement guidance material for social mobilizers and community volunteers as well as a field guide to avoiding and addressing social stigma related to COVID-19. IFRC and its membership continues to amplify and share timely and trustworthy information and address misinformation through media platforms. IFRC is also co-leading with UNICEF and WHO risk communication and community engagement coordination efforts globally.

The Business continuity plan (BCP) function inside the cell has updated and disseminated in all regional offices a Business continuity plan guideline which is also under translation in the official language. The Business Continuity (BC) Planning Guideline is applicable to all IFRC Secretariat offices worldwide and National Societies and can be adjusted depending on the context of the region. The BC Guideline illustrates a series of interrelated processes and activities that will assist in creating, testing, and maintaining an organization-wide plan for use in the event of a crisis that threatens the viability and continuity of the RC/RC activities. It is complementary to the contingency planning activities.

The updating of Geneva level BCP is ongoing and all the regional office working to updating their own BCP. Based on the regional prioritization tailored support will be provided, upon request, to National Societies.

The Medical Logistics (MedLog) function inside the cell is coordinating all operational IFRC medical logistics activities with the Asia-Pacific Regional LPSCM unit as well as the medical supplies required for the operation with internal stakeholders. The MedLog is also ensuring technical standards for medical items are up to date and disseminated within the organisation and provides technical validation for procurement of medical items.

C. FUNDING UPDATE

Donor response to the Appeal MDR00005

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