## **COVID-19: WHO European Region Operational Update** Epi Weeks 39–40 (20 September–4 October 2020)

## **Current global situation:**

The total number of global cases of COVID-19 have now surpassed 34.8 million with the number of new cases per week remaining stable at 2 million for the past three weeks. Over 1 million deaths have now been reported globally, of which the majority were reported in the Region of the Americas (55%), followed by Europe (23%). In Week 40, the regions of the Americas, South-East Asia and Europe accounted for 91% of new cases. Globally, the highest percentage of cases have been reported in the 25–39 years age group. However, the percentage of deaths increases with age, and approximately 75% of deaths have occurred in those over 65 years.

Please refer to the <u>WHO Weekly Epidemiological Updates</u> for further information.

## **Current situation in the Region:**

At the end of Week 40, Europe surpassed 6 million confirmed cases of COVID-19 with 240 000 known deaths recorded due to the disease. The number of cases reported in the Region increased by 11% to 520 035 in week 40 compared to week 39 and have now exceeded (96% increase) those reported when the pandemic first peaked in Europe in March and April (Week 14).

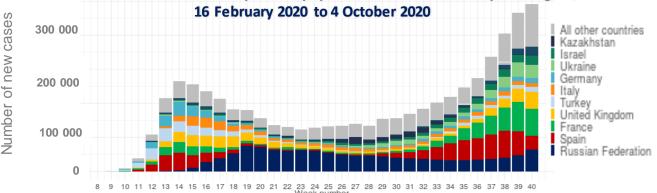
Cases continue to be reported mostly among young adults, with large outbreaks reported in several European universities as students return to their new academic year.

### Week 40 Epi Snapshot\*

- 63% of cases were reported from 6 countries: France, Spain, the Russian Federation, the United Kingdom, Israel and Ukraine.
- 88% of deaths were in people aged >65 years and 56% of all deaths were in males.
- 95% of deaths were in people with at least one underlying condition, with cardiovascular disease as the leading comorbidity (83%).

 $\ensuremath{^*\text{based}}$  on total records with available data

However, a recent increase of outbreaks occurring in long-term care settings, such as elderly care homes in several countries, is another sign that the most vulnerable in the Region remain at risk.



#### Number of COVID-19 cases reported by Epi-Week in the WHO European Region, 16 February 2020 to 4 October 2020

Please refer to the <u>WHO European Region Dashboard</u> and the <u>WHO European Region</u> Surveillance Bulletin for further information.

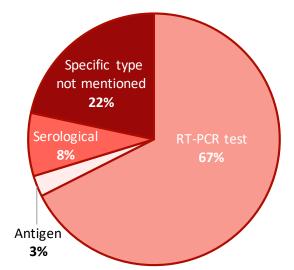
## **Emergency public health measures taken across the Region:**

Since the beginning of the pandemic, countries have been implementing restrictions on international travel to prevent imported cases of COVID-19 from sparking transmission in local communities. Where and when travellers have been allowed entry, they have often been subject to entry requirements such home quarantine, providing results of a COVID-19 test or a health declaration form, among others.

Over the past few months, many countries – nearly 80% of those in the Region – are both implementing and lifting quarantine and testing measures based on how origin/transit countries are categorized. This is most often based on epidemiological criteria such as increasing or decreasing 7-day or 14-day cumulative incidence in the country of departure, or a general increase in the number of cases.

The type of and period within which COVID-19 testing is required differs in countries. As of 29 September, 30 countries required a COVID-19 test before arrival, 25 countries on arrival, and 16 countries a follow-up test several days after arrival or entry into the country – the majority (67%) explicitly requiring negative reverse transcriptase-polymerase chain reaction (RT-PCR) tests.

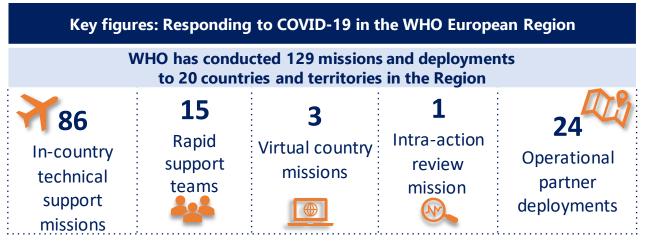




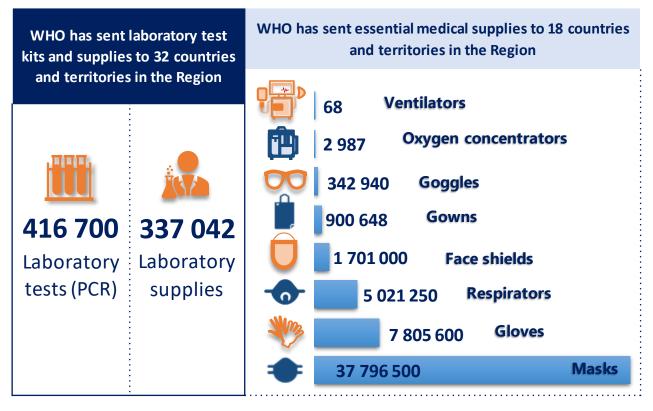
As per Article 43 of the International Health Regulations (IHR) (2005), WHO continues to monitor measures that significantly interfere with international traffic and their public health rationales or scientific justifications and report them on a weekly basis via the restricted platform for national IHR focal points, the <u>Event Information Site</u>. Please refer to the <u>COVID-19 Health Systems</u> <u>Response Monitor (HSRM)</u> for additional information.

### WHO Regional Office for Europe's response to COVID-19:

The WHO Regional Office for Europe's response is built around a <u>comprehensive strategy</u> to prevent the spread of the pandemic, save lives and minimize impact by targeting four areas: **prepare and be ready; detect, protect and treat; reduce transmission; innovate and learn.** 



For additional information on missions and deployments, please see the WHO/Europe COVID-19 Country Support Dashboard for <u>Pillar 1: Country-level coordination</u>, <u>planning and monitoring</u>.



For additional information on essential supplies delivered, please see the WHO/Europe COVID-19 Country Support Dashboard for <u>Pillar 8: Operational Support and Logistics</u>.

New WHO technical guidance published in weeks 39 and 40		
WHO Regional Office for Europe recommendations on influenza vaccination for the 2020/2021 season during the ongoing COVID-19 pandemic	Guidance for the European Region:	
Seasonal influenza epidemics can cause significant illness, hospitalization and death during the autumn and winter months. To ensure optimal control of influenza during the COVID-19 pandemic, especially in countries with limited supplies of seasonal influenza vaccines, recommendations that prioritize target groups have been made for influenza vaccination during the COVID-19 pandemic:	WHORegionalOfficeforEuroperecommendationson influenzavaccinationforthe2020/2021seasonduringtheongoingCOVID-19pandemicPublished21September2020HomecareforpatientswithsuspectedorconfirmedCOVID-19andmanagementoftheircontactsUpdated as ofSeptember2020	
• <i>High-risk priority groups</i> (health workers, older adults)	Global COVID-19 guidance:	
• Additional risk groups, in no particular order (pregnant women, individuals with underlying conditions, children)	Emergency Global Supply Chain System (COVID-19) catalogue Updated 2 October 2020	
Influenza vaccination is safe and the most effective means of preventing infection and severe outcomes caused by the influenza viruses.	Neglected tropical diseases:impact ofCOVID-19 and WHO's responsePublished 25 September 2020	

The WHO Regional Office for Europe supported Member States as they prepared for their first cases of COVID-19 and continues to provide support in preventing transmission.



The WHO Country Office in Kazakhstan continues to provide webinars on a weekly basis for public health practitioners (on case management, infection prevention and control [IPC], and laboratory testing). On 29 September, a webinar was held for health-care workers on IPC, with the support of the WHO Regional Office for Europe and the WHO Health Emergencies Hub for Central Asia.

WHO is supporting countries in developing tailored multidisciplinary approaches to care for patients with COVID-19 and helping frontline clinicians to operationalize these protocols.

In Week 39, the WHO Country Office in Armenia launched a project, updating guidelines and developing clear algorithms on COVID-19 and six other infectious conditions managed at the primary health care (PHC) level. The objective of the project is to strengthen essential health services by improving the management of common infectious conditions at the PHC level, avoiding the reported misuse of antibiotics and decreasing the burden of disease on hospitals.



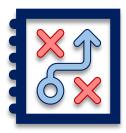
As of Week 40, **11 747** health-care workers in the Region were reached by WHO virtual capacity-building webinars.

There were **76 639** enrollees in OpenWHO courses related to IPC and **31 627** in the case management of COVID-19 patients, as of Week 40.



# WHO continues to support countries in strengthening their preparedness and readiness capacities to respond to the COVID-19 pandemic.

On 21 September, two experts from the WHO Regional Office for Europe and headquarters in Geneva were deployed for three weeks to North Macedonia to support emergency operations and readiness planning. The team of WHO experts is supporting the WHO Country Office and the Government of North Macedonia in using the <u>WHO Partners</u> <u>Platform</u>. The mission team will work with government stakeholders to further strengthen planning and operational response in emergencies, as well as engage with the UN family on a collective strategy to support the Government in the response to COVID-19.



For further information on the types of support provided, please refer to the WHO/Europe COVID-19 Country Support Dashboards for <u>Pillar 6: Infection Prevention Control</u> and <u>Pillar 7: Case Management</u>.

#### Target 2: Detect, protect and treat patients with COVID-19

#### WHO continues to work with national authorities to strengthen COVID-19 detection capacities.



From 28 September to 3 October, the WHO Regional Office for Europe deployed a WHO technical mission to support strengthening of laboratory capacities in the Republic of Moldova. The mission focused on the development of a strategy to scale up testing for COVID-19 in the country and included visits to laboratories currently conducting COVID-19 testing, including the National Influenza Reference Laboratory of the National Agency for Public Health, the laboratory in the Regional Center for Public Health in Cahul, and a private laboratory "Invitro diagnostic" in Chisinau.

#### **In focus:** WHO partners with Germany to provide support to Kosovo<sup>1</sup>: 21 September-3 October 2020

Through the combined efforts of WHO's Global Outbreak Alert and Response Network (GOARN) partner Robert Koch Institute (RKI), Germany's emergency medical teams (EMTs) and the WHO Regional Office for Europe, a two-week mission recently concluded its technical support to Kosovo<sup>1</sup>. The joint mission covered several technical areas such as surveillance, laboratories and risk communication, and included WHO experts, clinicians from Germany's WHO-classified EMTs, and 10 GOARN experts from the RKI. The mission partnered with frontline teams in hospitals and clinics, as well as local heath authorities and the Institute of Public Health.

The German clinicians included intensivists, anaesthetists, infectious disease specialists, paramedics and IPC specialists. The German EMTs aimed to support the local health authorities in building capacity among local health-care workers involved in treating COVID-19 patients, particularly patients with severe disease in intensive care units.

The RKI public health team comprised epidemiologists, microbiologists and a risk communications expert, and undertook a series of training sessions to increase surveillance capacity and contact tracing. Coordination with the German RKI surveillance team was undertaken to synchronize planning for training on contact tracing, with a focus on Go.Data - an outbreak investigation tool used for field data collection and contact tracing.



*RKI and EMT joint mission supported by the WHO Country Office in Pristina* 

The Go.Data platform has been installed at the central and regional institutes of public health and is being rolled out.

<sup>1</sup> All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

#### **Target 3: Reduce transmission**

In the context of COVID-19, WHO is committed to working with all countries to prevent further spread of the virus as they safely reopen economies, societies, businesses and schools.

On 22 September, the WHO Country Office in Kazakhstan, in coordination with key partners, induding UNICEF and UNESCO, provided support to the Ministry of Health and the Ministry of Education on safe schooling during COVID-19. During the meeting, the WHO Country Office in Kazakhstan presented the new recommendations and considerations for <u>School Related Public Health Measures in the Context of COVID-19</u> to representatives from the ministries.



# **In focus:** WHO assists North Macedonia in preparing for the safe resumption of international travel in the context of COVID-19

The WHO Regional Office for Europe facilitated a training session on COVID-19 response at points of entry (PoEs) in North Macedonia. A total of 20 representatives from the health, transport, law enforcement and customs sectors came together on 24-25 September to review and discuss the public health measures and capacities in place at airports and ground crossings across North Macedonia for the control of COVID-19, and the safe resumption of international travel in a gradual manner, informed by continuous risk assessments. The training included:

- how to control COVID-19 at airports and ground crossings;
- the process of designating POEs under the IHR (2005);
- WHO tools available to assess capacities at POEs.



WHO Europe points of entry training exercise in Skopje, North Macedonia

Participants reviewed and discussed the plans, protocols, standard operating procedures, and public health and social measures implemented at POEs in North Macedonia during exercises simulating the arrival of a suspected case of COVID-19 at both the airport and at a ground crossing, effectively testing the measures in place. Experiences from Poland and Germany were also presented, thanks to the participation of representatives from the European Union (EU) Joint Action Healthy Gateways.

#### **Target 4: Innovate and learn**

Decisions about how and when to allow gatherings of all types, including national, regional and local elections, must be taken with a risk-based approach, in the local context. WHO is supporting countries by sharing best practices and lessons learned and employing WHO tools, such as the <u>Risk Assessment for Mass Gatherings during COVID-19</u>, to guide the decision-making process.

On 22 September, following a request from national authorities, the WHO Country Office in Tajikistan, along with experts from the WHO Regional Office for Europe and WHO headquarters, Geneva, provided support to the Ministry of Health and Social Protection in Tajikistan regarding the safe organization of the electoral process in the context of COVID-19. WHO experts also shared experiences in holding elections during the pandemic from other countries in the Region and beyond. During the meeting, a preliminary version of the WHO Public Health Guidelines for Electoral Processes in the Context of the COVID-19 Pandemic were presented and discussed.



The WHO Regional Office for Europe continues to offer support to countries in implementing the WHO tools for monitoring public knowledge, risk perceptions, behaviours and trust to make their COVID-19-related response relevant and actionable.



In the Republic of North Macedonia, the first round of the behavioural insights study on COVID-19 has been completed, using the WHO <u>Behavioural Insights Tool</u>, to inform the country's outbreak response to the pandemic.

Data were collected via telephone using the computer-assisted telephone interviewing (CATI) survey and will directly contribute to the COVID-19 response in North Macedonia in the areas of communications and messaging, as well as interventions, programme and policy development. These will complement epidemiological data and incorporate economic, cultural, ethical, structural and political considerations.

As of Week 40, **25 countries** in the Region are implementing the findings of behavioural insights research using WHO tools.

## **Continuously monitoring regional readiness:**

The WHO Regional Office for Europe is monitoring readiness and response capacities in the **Region.** Indicators are used to monitor the global and regional situation, priority countries with operational support provided by the international community, and WHO's response.



To allow for transparent communication, coordination and consistency, and to better monitor the WHO Regional Office for Europe's response to COVID-19, a <u>COVID-19 Country Support</u> <u>Dashboard</u> has been developed which, in its beta form, provides a dynamic overview and real-time display of the support that has been provided to Member States across the Region since January 2020 and throughout the response to the pandemic – aligned to the nine pillars of the <u>Strategic</u> <u>Preparedness and Response Plan (SPRP)</u>.

Carlo Barte Martin	Support to strengthen cour monitoring among Namber European Region	ntry level coordination, planning, and States/ Territories / Areas in the Witt
113	A.K.	
19	20	RET
March of Residual chapts Residual State (Security) BHT Schedul Super Hars	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Contraction and the
Aprox of Heavaer Heavaer, Hone Jone, 1911 Administration and your you happens Milling County To Data Reason Will Sear Lange To Arts Milling County To Arts	Anton Soca Sector at the at the sector at th	Parenter of managements of managements of managements
The state	Received Accepting (Arrival) Georgia	

World Health Organization summers target WHO/Europe Risk Communication and Community Engagement Milestones and support to Member States / Territories / Areas				
External communication	Capacity building	Listening		
Media Q&A documents	Activities	Countries impleme	nting Behavioural Insights research	
24	33	25		
Media queries responded to (estimate)	Attendees	Countries participating in message testing pilot		
5550	1887	8		
Social media posts (estimate)	Country Office Support requests fulfilled	Country Offices checking in weekly with WHO/Europe		
113	319	25		
Web stories	Technical guidance	HealthBuddy user questions received		
150	Guidance documents	123574		
Web traffic increase (%)	2	Message testing study participants (Facebook partnership)		
1449	RCCE strategy templates	600000		
WHO/Europe newsletter issues	2			
24	Risk communication products	Coordination		
	HealthBuddy languages	Partners	WH0/Europe coordinated networks	
Media coverage highlights	17	UNICEF ECARO	Global Shapers	
Agence France Presse	HealthBuddy messages sent	UNHCR	Healthcare Workers Network	
Aljazeera	304694	UNFPA	Regional Risk Communication and Community Engag.	
Associated Press	RCCE materials on Canto	IOM	WHO European Healthy Cities Network	
BBC Mundo	1611	LO	PLEASE NOTE: THIS IS A BETA VERS	

## **COVID-19 heatmap of the WHO European Region:**



© World Health Organization 2020. Some rights reserved. This work is available under the CC BY-NC-SA3.0 IGO license