



COVID-19 OUTBREAK IN KENYA

DAILY SITUATION REPORT - 93

1.0 KEY HIGHLIGHTS

1. Kenya has reported its highest number of confirmed cases since the pandemic in March 2020. Two hundred and thirteen (213) new confirmed COVID-19 cases were reported in the last 24 hours bringing the total number of confirmed cases in Kenya to **4,257 cases** as of 18 June 2020. One hundred and ninety-seven (197) of the cases are Kenyans, Somalia (14) British (1), and Ugandan (1). All cases are local transmissions. Counties reporting new cases are **Nairobi (137), Mombasa (32), Kajiado (13), Kiambu (7), Busia (5), Machakos (4), Nakuru (4), Garissa (3), Isiolo (3), Taita Taveta (2), Embu (1), Migori (1) and Narok (1).**
2. **Ten (10) deaths have been reported over the last 24 hours.** The total number of deaths reported since the beginning of the outbreak is **117, case fatality rate (CFR) is 2.7 percent.**
3. In the last 24 hours, **one hundred and six (106)** COVID-19 patients were discharged. The total number of recoveries and discharges for COVID-19 stand at **one thousand four hundred and fifty-nine (1,459).**
4. As of today, **forty (40) out of 47 counties** have reported cases namely: Nairobi (2026), Mombasa (1176), Busia (334), Kajiado (151), Kiambu (131), Uasin Gishu (61), Migori (46), Kilifi (43), Kwale (36), Machakos (28), Taita Taveta (24), Nakuru (22), Garissa (20), Kisumu (18), Mandera (18), Wajir (16), Meru (15), Turkana (15), Siaya (12), Kitui (11), Nyeri (9), Isiolo (7), Bungoma (6), Murang'a (6), Homa Bay (3), Makueni (3), Narok (3), Embu (2), Kakamega (2), Kisii (2), Laikipia (2), Bomet (1), Elgeyo Marakwet (1), Kericho (1), Kirinyaga (1), Marsabit (1), Nandi (1), Nyamira (1), Trans Nzoia (1), and Vihiga (1).
5. **Mombasa and Nairobi City** Counties have the highest attack rates of COVID-19 at **97.3** and **46.1** per **100,000** populations respectively and **Busia county 37.4 per 100,000 population due mainly to truck drivers** when compared to **8.9/100,000** for the whole country and need enhanced interventions. In addition, the COVID-19 outbreak has so far spread to **85.1%** of the counties in the country. **Risk communication, laboratory testing, and sub-optimal support to sub – national level for investigating alerts and contact tracing** have been identified as key challenges.
6. **Three thousand eight hundred and ninety-five (91 percent) of the 4257 confirmed cases** are local transmissions.
7. Of the **2,011** contacts under follow-up **1,875 (93 percent)** were followed up today
8. In the last 24 hours, **6,024 samples** were tested across various laboratories of which **Two hundred and thirteen (213) samples** turned positive for COVID-19. A total of **130,498 cumulative tests** have so far been conducted.
9. A web – based laboratory data repository system for all COVID-19 testing laboratories has been rolled out, nine (70 percent) of the 13 that carried testing yesterday reported through the system and expected 100 percent rollout by the end of the week.

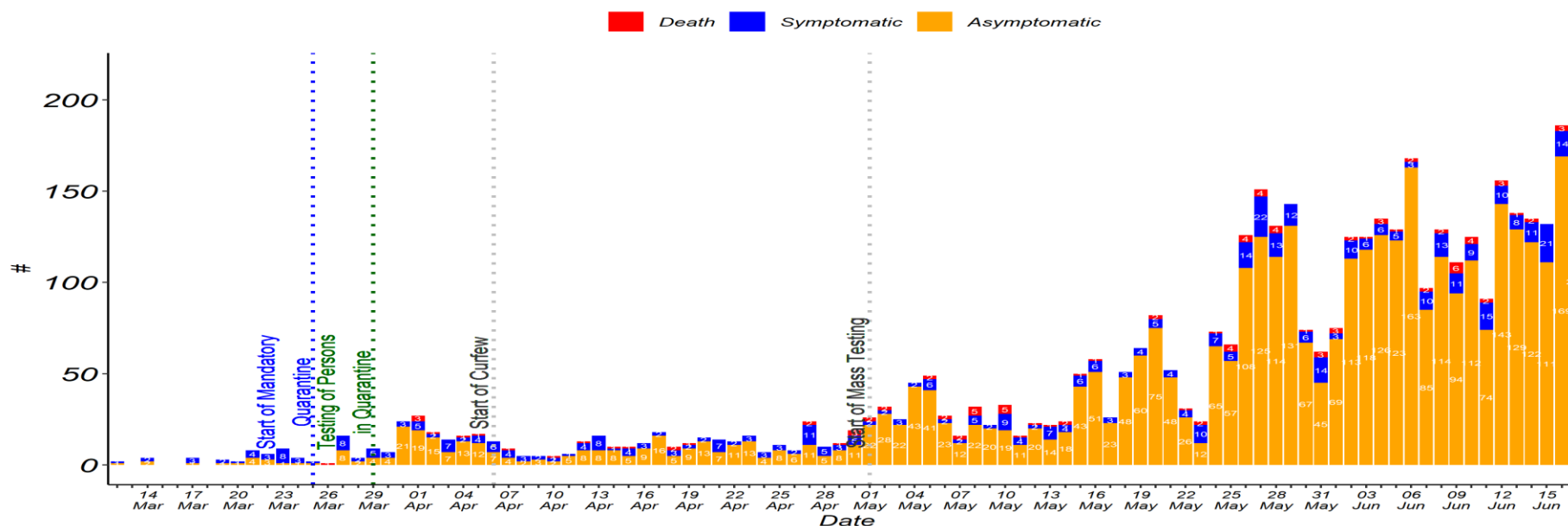
**Total Cases
=4257**

**Male = 2931
Female = 1326**

**Deaths
=117**

1.1 Epidemiology

Since 13 March 2020 when the first case was confirmed in Kenya, a total of **4257** confirmed cases and **117** have died giving a case fatality rate of **2.7 percent** have been line listed. Of these, 3895 cases (91 percent) were local transmissions and 362 (9 percent) are imported cases. The Figure 1 below shows trends of cases. Figure 2 shows cumulative caseload. Figure 3 shows number of samples tested by date indicating the positive and negative results. Laboratory test rate currently stands at 2744 samples per 1,000,000 people.



1.2 Cumulative Cases

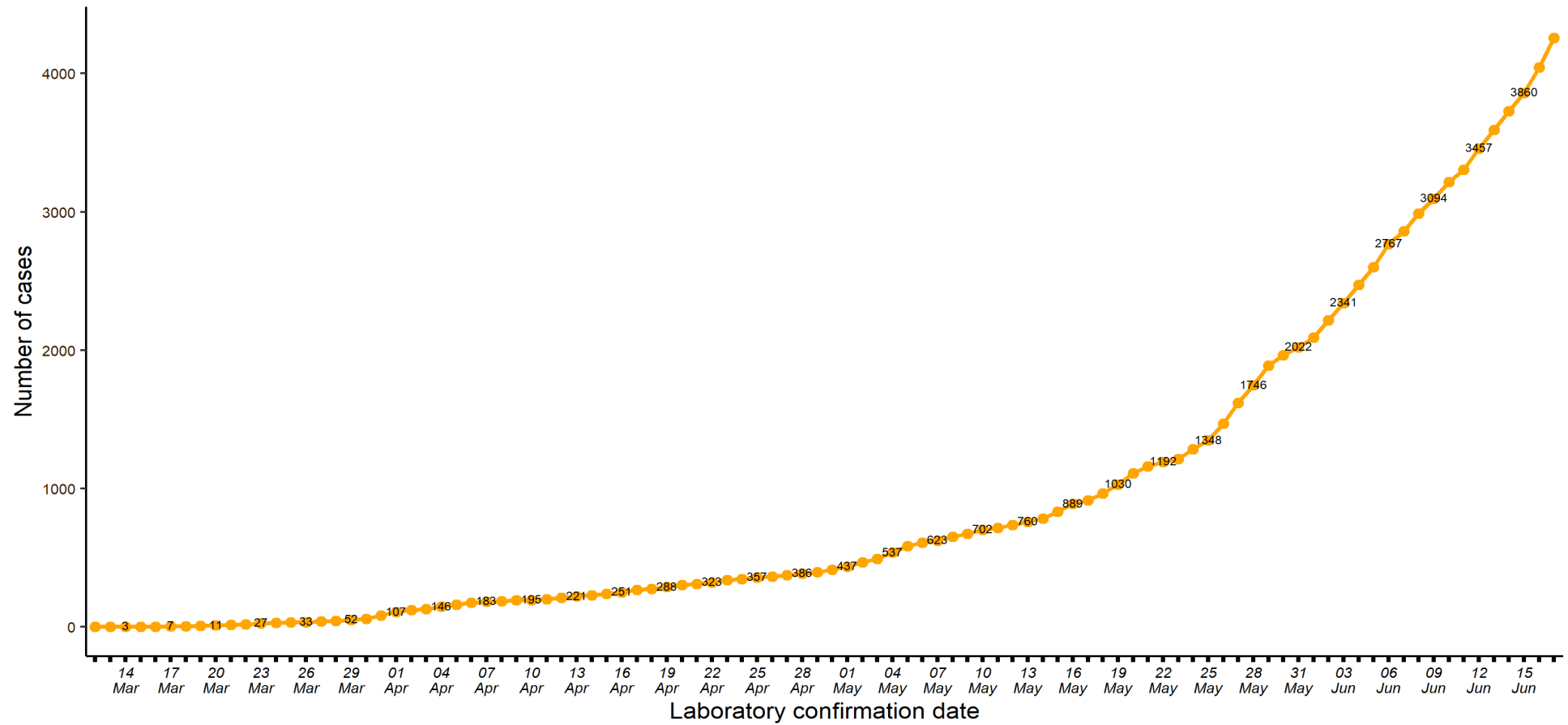


Figure 2: Cumulative case load

1.3 Laboratory Testing

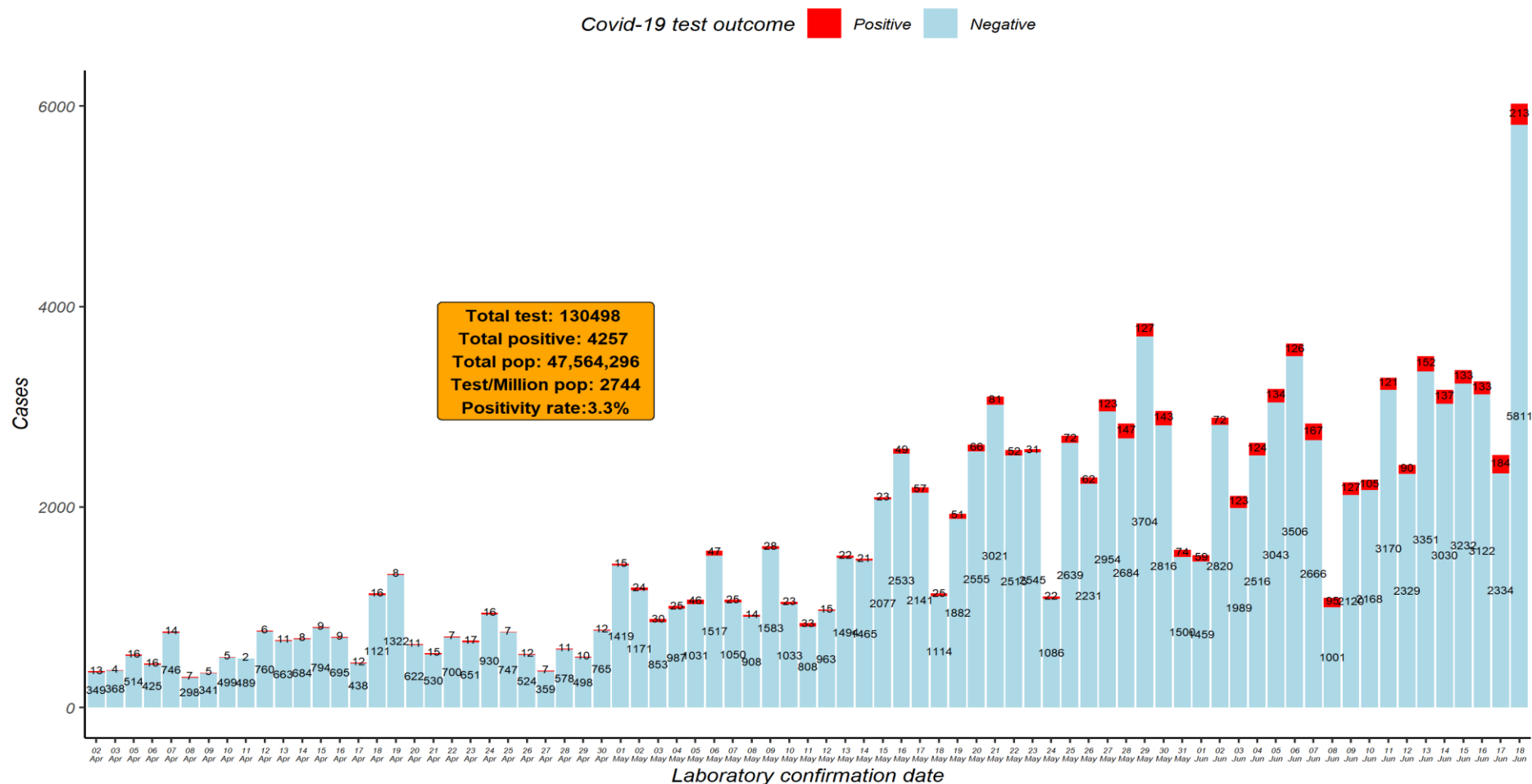


Figure 3: Laboratory Tests Conducted by Date Results Were Shared

1.4 Distribution of Confirmed COVID-19 Cases by Presentation

Of the **4257** confirmed cases, 479 (11 percent) presented with symptoms (Figure 4). Cough (47 percent) and fever (39 percent) were predominant presenting symptoms (Figure 5).

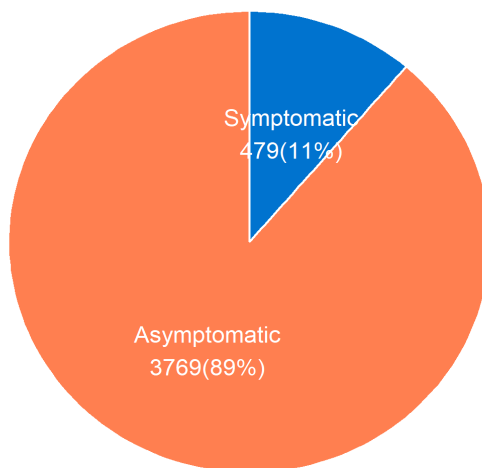


Figure 4: Distribution of Confirmed COVID-19 Cases by Presentation

1.5 Presenting Symptoms among Symptomatic COVID-19 Cases

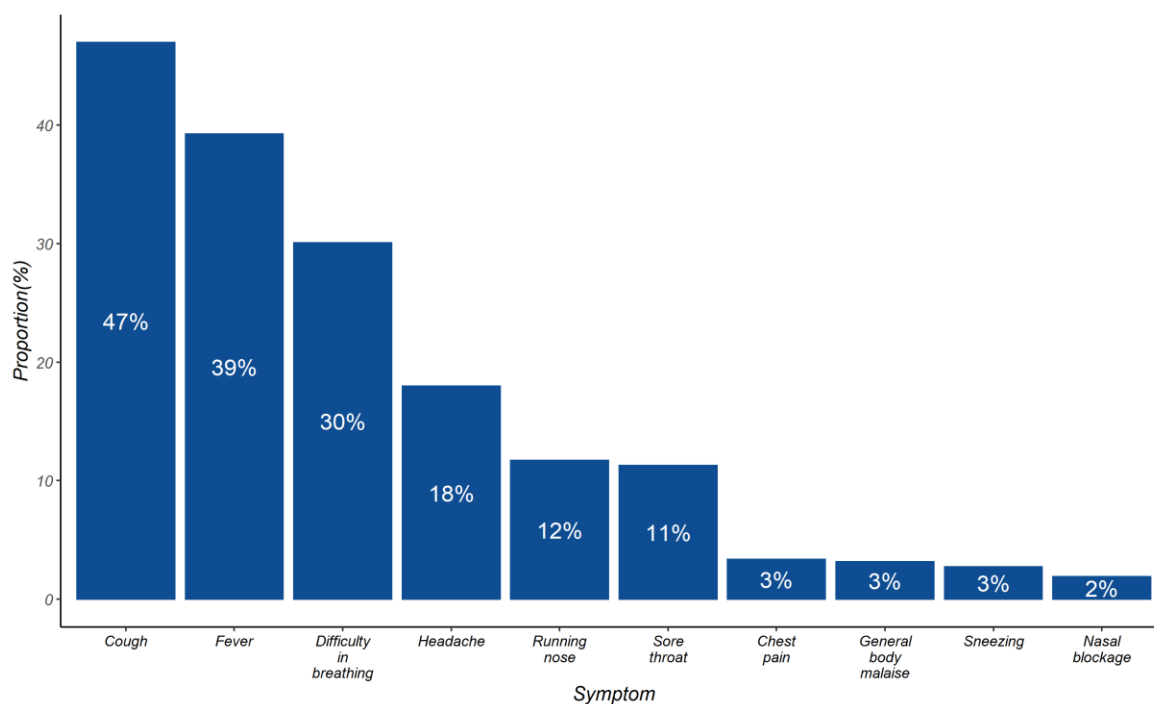


Figure 5: Distribution of Presenting Symptoms among Symptomatic COVID-19 Cases

1.6 Age and Sex Distribution of COVID Confirmed Cases and Deaths

Two thousand nine hundred and thirty-one (69 percent) are males and 1326 (31 percent) are females. Most of the cases; 1365 (32 percent), are in the age group of 30-39 years. Figure 6 below shows age and sex distribution of COVID-19 cases. 117 deaths have been reported so far, 87 (74 percent) being males and 30 (26 percent) were females (Figure 7).

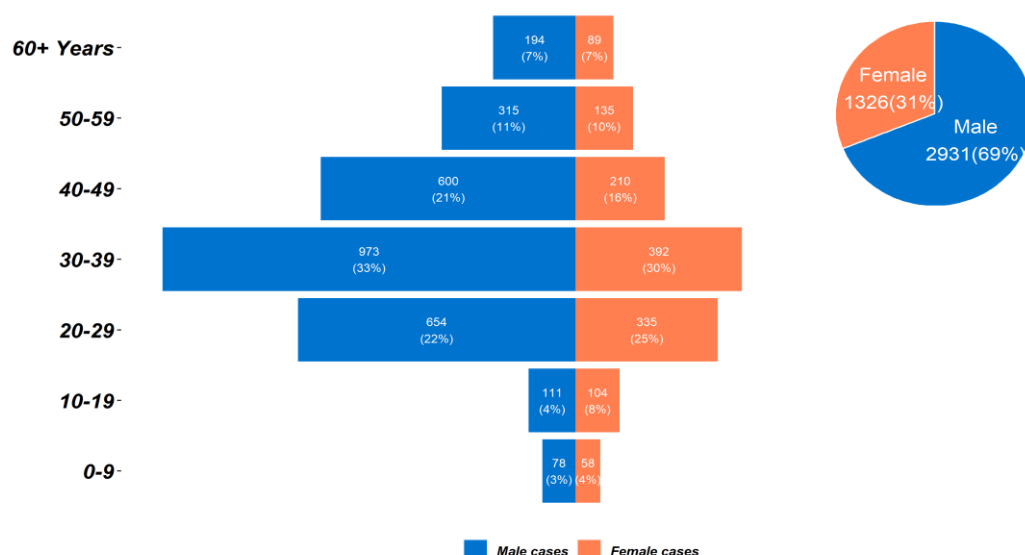


Figure 6: Age and Sex Distribution of COVID-19 Cases Kenya

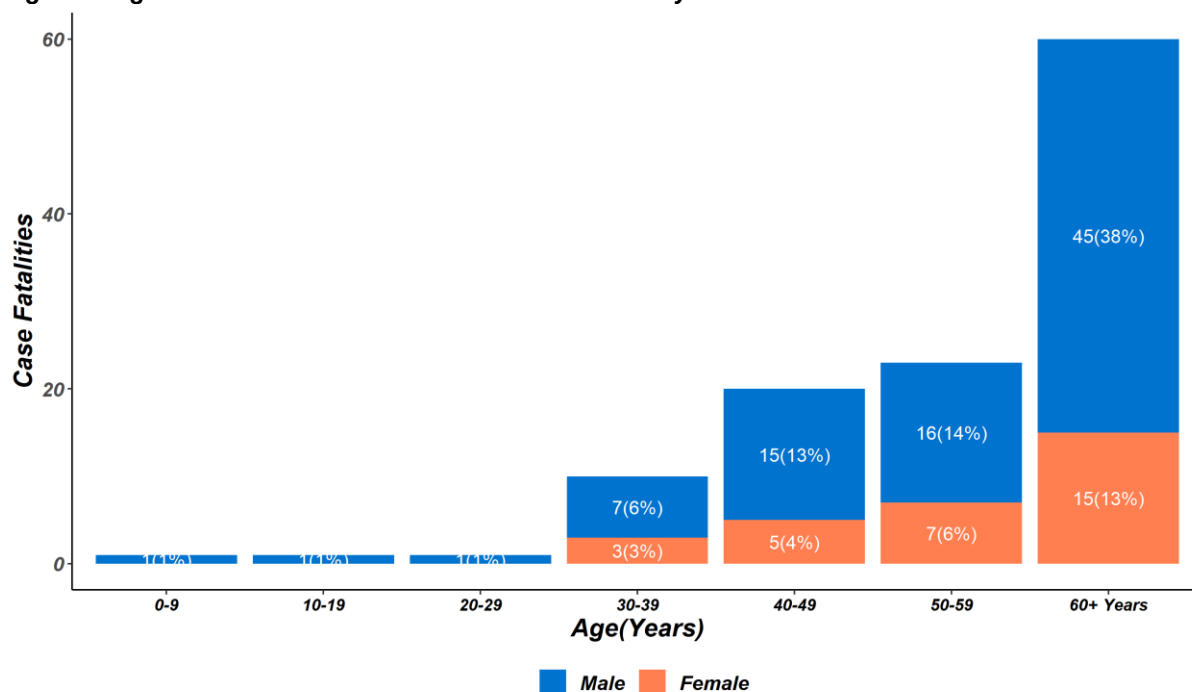


Figure 7: Distribution of Case Fatalities by Age and Sex

1.7 Distribution of Confirmed COVID-19 Cases by County and Transmission Classification

Of the **4257** cases, 2026 (48 percent) are from Nairobi County followed by Mombasa County with 1176 (28 percent) as shown in Figure 8. Mombasa County has the highest attack rate of 97.3 per 100,000 population followed by Nairobi City County at 46.1 per 100,000 populations (Table 1).

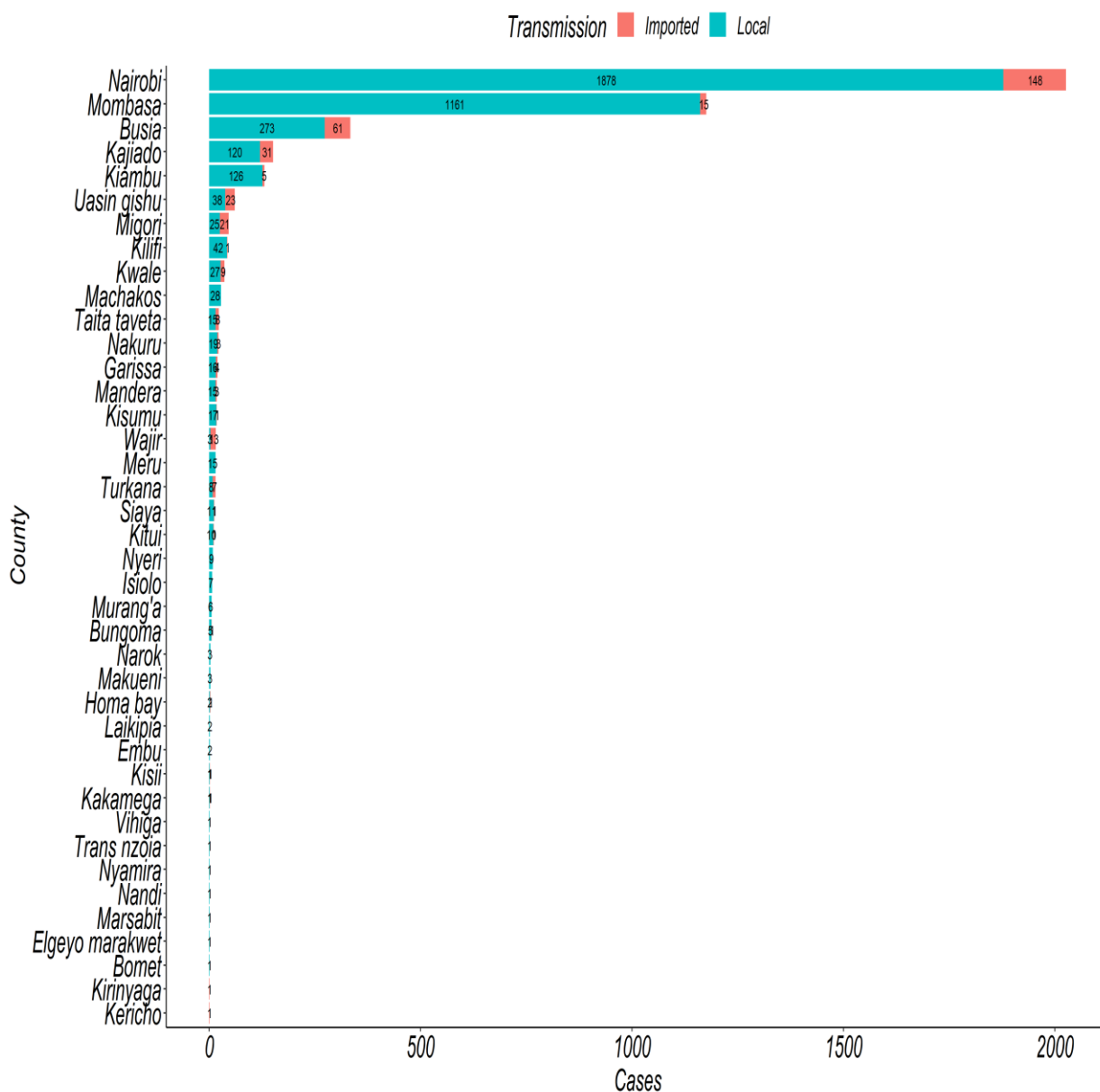


Figure 8: Distribution of confirmed COVID-19 Cases by County and transmission classification

**Table 1: County Attack Rate/100,000 population**

S/ No	County	Population (2019 Census KNBS)	Cumulative Cases	Cases per 100,000 population
1	Mombasa	1,208,333	1176	97.3
2	Nairobi City	4,397,073	2026	46.1
3	Busia	893,681	334	37.4
4	Kajiado	1,117,840	151	13.5
5	Taita/Taveta	340,671	24	7.0
6	Kiambu	2,417,735	131	5.4
7	Uasin Gishu	1,163,186	61	5.2
8	Kwale	866,820	36	4.2
9	Migori	1,116,436	46	4.1
10	Kilifi	1,453,787	43	3.0
11	Isiolo	268,002	7	2.6
12	Garissa	841,353	20	2.4
13	Mandera	867,457	18	2.1
14	Wajir	781,263	16	2.0
15	Machakos	1,421,932	28	2.0
16	Turkana	926,976	15	1.6
17	Kisumu	1,155,574	18	1.6
18	Nyeri	759,164	9	1.2
19	Siaya	993,183	12	1.2
20	Meru	1,545,714	15	1.0
21	Kitui	1,136,187	11	1.0
22	Nakuru	2,162,202	22	1.0
23	Murang'a	1,056,640	6	0.6
24	Laikipia	518,560	2	0.4
25	Bungoma	1,670,570	6	0.4
26	Embu	608,599	2	0.3
27	Makueni	987,653	3	0.3
28	Narok	1,157,873	3	0.3
29	Homa Bay	1,131,950	3	0.3
30	Marsabit	459,785	1	0.2
31	Kirinyaga	610,411	1	0.2
32	Elgeyo/Marakwet	454,480	1	0.2
33	Vihiga	590,013	1	0.2
34	Kisii	1,266,860	2	0.2
35	Nyamira	605,576	1	0.2
36	Trans Nzoia	990,341	1	0.1
37	Nandi	885,711	1	0.1
38	Kericho	901,777	1	0.1
39	Bomet	875,689	1	0.1
40	Kakamega	1,867,579	2	0.1
Kenya		47,564,300	4257	8.9

1.8 Map of Kenya Showing Distribution of Confirmed COVID-19 Cases by County

COVID19 REPORTED CASES BY COUNTY

As of 18 June 2020

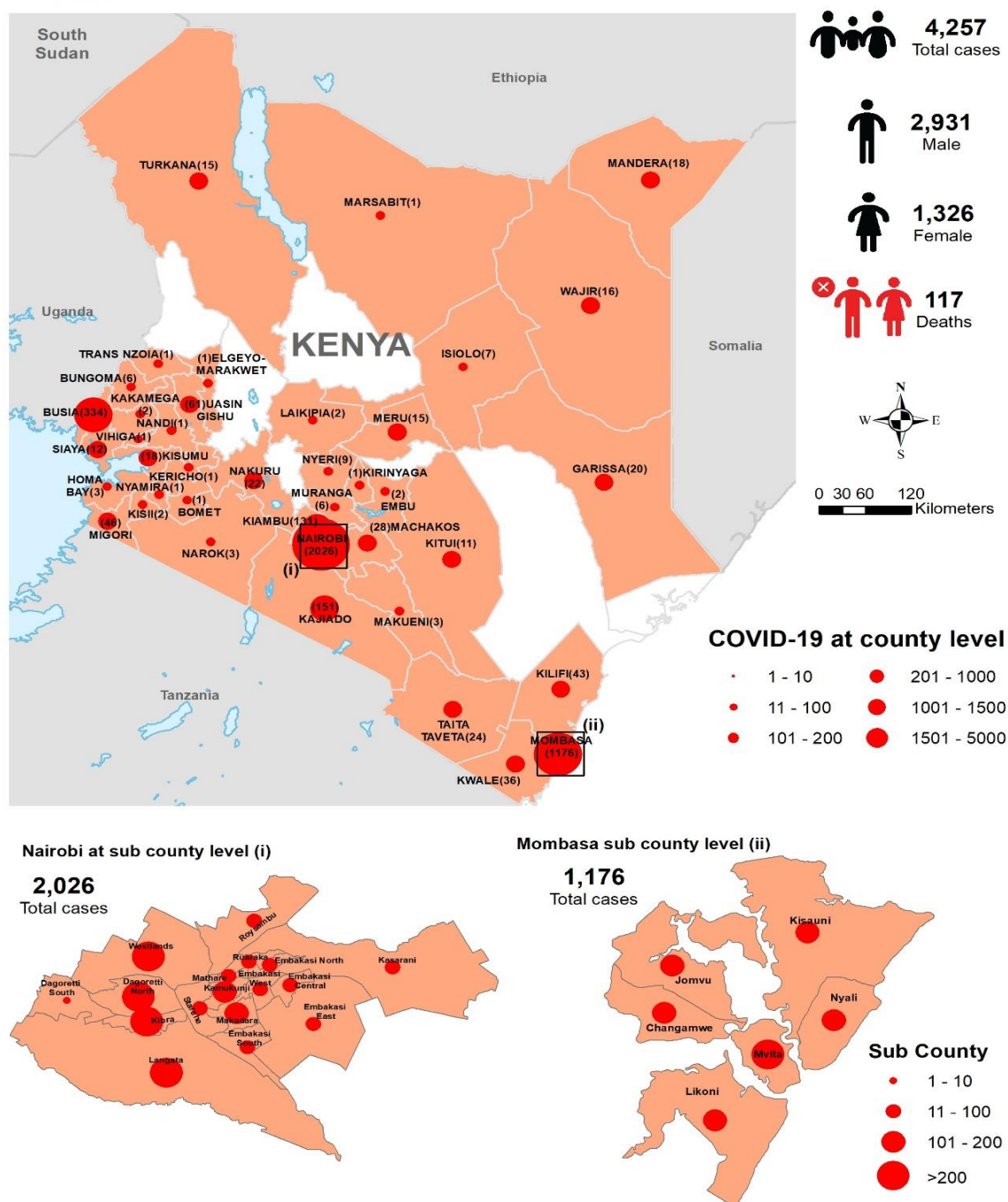


Figure 9: Distribution of confirmed COVID-19 cases by County



1.9 Status of Contract Tracing as at Today

Of the 4,257 confirmed COVID-19 cases a total of 8,603 contacts have been listed, 366 contacts (4.3 percent) have tested positive for COVID-19 (Table 2). Of the 2,011 contacts under follow up 1,874 (93 percent) were followed up today. A total of 137 contacts were not reached today across the affected counties. Table 2 shows summary status of contact tracing as of today.

Table 2: Status of Contract Tracing as at Today

County	Number of Cases forwarded to contact tracing	Cases Pending contact listing	% of cases without contacts	Contacts identified	Contacts finished 14 days	Contacts on follow up	Number Responded today	Response rate	Positive Contacts
Bomet	2	-	-	35	35	0	0	-	3
Bungoma	6	4	67%	12	12	0	0	-	1
Busia	329	309	94%	22	14	8	9	113%	0
Elgeyo Marakwet	1	-	-	0	0	0	0	-	0
Embu	1	-	-	30	0	30	30	100%	0
Garissa	17	5	29%	94	16	78	78	100%	3
Homa Bay	4	1	25%	93	89	4	0	0%	0
Isiolo	4	-	-	105	55	50	48	96%	1
Kajiado	137	61	45%	570	399	171	171	100%	11
Kakamega	2	1	50%	13	13	0	0	-	0
Kericho	2	1	50%	1	0	1	1	100%	0
Kiambu	124	77	62%	347	146	201	188	94%	10
Kilifi	44	27	61%	328	265	63	61	97%	9
Kirinyaga	1	-	-	0	0	0	0	-	0
Kisii	2	-	-	50	15	35	35	100%	2
Kisumu	18	15	83%	5	0	5	5	100%	0
Kitui	11	2	18%	71	71	0	0	-	6

County	Number of Cases forwarded to contact tracing	Cases Pending contact listing	% of cases without contacts	Contacts identified	Contacts finished 14 days	Contacts on follow up	Number Responded today	Response rate	Positive Contacts
Kwale	36	25	69%	124	120	4	4	100%	0
Laikipia	2	1	50%	26	0	26	26	100%	0
Machakos	25	20	80%	74	25	49	0	0%	0
Makueni	3	1	33%	15	15	0	0	-	2
Mandera	18	-	-	176	176	0	0	-	6
Marsabit	1	1	100%	11	0	11	11	100%	0
Meru	16	14	88%	63	63	0	0	-	0
Migori	44	27	61%	153	142	11	44	400%	1
Mombasa	1145	730	64%	2174	1781	393	379	96%	142
Muranga	7	4	57%	46	15	31	31	100%	0
Nairobi	1881	1161	62%	3107	2523	584	495	85%	161
Nakuru	20	8	40%	310	275	35	35	100%	0
Narok	2	2	100%	0	0	0	0	-	0
Nyamira	1	1	100%	0	0	0	0	-	0
Nyeri	9	3	33%	81	0	81	81	100%	0
Siaya	12	3	25%	82	82	0	0	-	4
Taita Taveta	22	8	36%	79	47	32	28	88%	0
Trans Nzoia	1	-	-	10	0	10	10	100%	0
Turkana	16	3	19%	108	53	55	55	100%	1
Uasin Gishu	61	43	70%	109	66	43	43	100%	0
Vihiga	1	1	100%	0	0	0	0	-	0
Wajir	16		0%	79	79	0	6	-	3
Total	4044	2559	63%	8603	6592	2011	1874	93%	366

2.0 KEY ACTIONS

2.1 Coordination

- **The Cabinet Secretary for Health** addressed the nation and he observed community transmission is now well established and the spread of the virus in the borders of Busia, Malaba, Taveta and Namanga remains a concern.
- He emphasised that all truck drivers and owners must get a test at the point of origin atleast 48 hours before commencement of the journey.
- The country has received/procured adequate laboratory testing kits and all the back log in sample processing previously observed has now been resolved
- He encouraged employers to advise their staffs and general public accessing their places, to adhere to the laid down containment measures at all times.
- **The National COVID-19 Task Force** had the weekly meeting today. The Meeting was chaired by the Permanent Secretary for Health.
 - Following the roll out of the home-based care and community-based strategy being rolled out, the Risk Communication sub committee is developing a communication strategy to support its implementation. The theme of the strategy is the COVID -19 pandemic control is in the hands of each individuals. The final strategy will be presented to the Task Force next week.
 - The laboratory testing committee also presented their new strategic interventions focusing on the WHO and MOH case definitions. The targeted populations to be tested will include those who meet the case definitions, presenting in health facilities for admission and those who meet the case definitions, truck drivers, health workers who are at risk and epidemiologically guided communities. Contact tracing and rapid response to individual and community needs will be scaled up in the communities.
 - The roll out of the home based and community-based care will be rapidly expanded to all counties.
 - The new case management guidelines and capacity building is ongoing.
 - Infection prevention and control (IPC) measures will rationally be enhanced in health facilities to increase uptake of essential health services. PPEs will be made available to all including for essential health care workers.
- **The Kenya Humanitarian Partners Team (KHPT)** also had their weekly meeting today. The team discussed the progress on interventions for the flood and displaced populations, control of locusts in the country, COVID-19 and other disease outbreaks. The meeting was chaired by UNOCHA. FAO briefed on the locust control activities in Turkana and

Marsabit and Kenya Red Cross presented the current situation on the floods and displaced populations. The rains are expected to stop in the next two weeks. The main issue discussed on COVID-19 was on the new WHO discharge guidelines. The WR explained in detail the discharge from Isolation and quarantine to the participants.

- **The PHEOC IMT** held its regular meeting today, where an elaborate plan to provide technical support to counties in addressing gaps noted in RRT, contact tracing and data management particularly the low uptake of the web-based system in counties through a strategy of adopt a county.
- **In Mombasa** a joint meeting between WHO, County Directors of Medical and Public Health and all sub county MoHs from all the six sub-counties was held to deliberate on the progress of home-based care for the confirmed cases and need to strengthen implementation Home Based Care for it to work effectively was agreed upon. It was noted slow implementation of COVID-19 response activities supported by partners in the county.
- **The WHO Incident Management Team** also finalized their Operational Plan to support MOH for the COVID-19 response plan to the end of the year. Key areas of support are laboratory testing, risk communication, rapid response, contact tracing, support to counties for coordination and operations and case management.

2.2 Case Management and Infection Prevention & Control

- In the last 24 hours, 106 COVID-19 patients were discharged. The total number of recoveries and discharges for COVID-19 stand at 1,459.
- In Migori county, currently 27 people are in quarantine centers in the county and 17 people at the isolation center in Macalder Sub – County Hospital.
- The National COVID-19 Taskforce through the Kenya Health Professionals Oversight Authority has inspected the following health facilities for management of cases:
 - Baringo: Mogotio Sub – County Hospital
 - Bomet: Koiwa Level 4 Hospital
 - Bungoma: Webuye Level 3 Health Centre
 - Busia: Alupe Level 4 Hospital
 - Elgeyo Marakwet: Tambach Sub – County Hospital, Iten Referral Hospital
 - Embu: Siakago Level 4 Hospital
 - Garissa: Bura Level 4 Hospital
 - Homa Bay: Ober Level 4 Hospital, Malela Health Centre
 - Isiolo: Isiolo Level 4 COVID Isolation Centre
 - Kajiado: Ngong Sub – County Hospital

- Kakamega: Kakamega Teaching and Referral Hospital Annex
- Kericho: Kericho Level 4 Hospital
- Kiambu: Gatundu Level 4 Hospital (Annex), Tigoni Level 4 Hospital
- Kilifi: Kilifi Level 5 Annex, Gede Health Centre
- Kirinyaga: Kerugoya County Referral Hospital
- Kisii: Kisii Teaching and Referral Hospital, Gucha Level 4 Hospital
- Kisumu: Jaramogi Oginga Odinga Teaching and Referral Hospital, Kisumu County level 4 Referral Hospital
- Kitui: Kitui Level 4 Hospital (Annex), Kauwi level 4 Hospital
- Kwale: Msambweni Level 4 Hospital (Annex)
- Laikipia: Nyahururu County level 4 Hospital (Annex)
- Lamu: Mpeketoni Level 4 Hospital
- Machakos: Kangundo Level 4 Hospital, Machakos Level 5 Hospital
- Makueni: Makindu level 4 Hospital, Makueni County Referral Hospital
- Mandera: Mandera County Referral hospital (Annex), Kamor Infectious Disease Hospital
- Marsabit: Moyale Level 4 Hospital
- Meru: Meru Level 5 Hospital (Annex)
- Migori: Macalder Level 4 Hospital
- Mombasa: Coast General Hospital, Mombasa Hospital, Mombasa Technical Institute
- Murang'a: Kiharu Level 3, Murang'a Level 4 Hospital
- Nairobi: Kenyatta National Hospital, Kenyatta University Teaching & Referral Hospital, Mbagathi Infectious Diseases Hospital, Mama Lucy Kibaki Hospital, The Nairobi Hospital (Main Hospital), The Nairobi Hospital (Silver springs), Aga Khan University Hospital, MP Shah, Mater Hospital, Nairobi Women's Hospital (Rongai Branch), Nairobi West Hospital
- Nakuru: Langalanga Sub County Hospital
- Nandi: Nandi Hills Level 4 Hospital
- Narok: Trans Mara Level 4 Hospital
- Nyamira: Nyamira Level 4 Annex
- Nyandarua: Engineer level 4 Hospital
- Nyeri: Mukurweini Sub –County Hospital, Mt. Kenya Level 4 Hospital
- Samburu: Samburu Level 4 Hospital
- Siaya: Bondo Level 4 Hospital
- Taita Taveta: Mwatate Level 3 Hospital
- Tana River: Hola Level 4 Hospital

- Tharaka Nithi: Chuka Level 4 Hospital (Annex), Magutuni Level 3 Hospital
- Trans Nzoia: Mt. Elgon Level 4 Hospital
- Turkana: Lopiding Level 4 Hospital
- Uasin Gishu: Moi Teaching and Referral Hospital, Kamalel Level 4, Kyepyakwai Level 3
- Vihiga: Emuhaya Level 4 Hospital
- Wajir: Wajir Isolation Covid Centre
- West Pokot: Kacheliba Level 3 Hospital

2.3 Surveillance, Laboratory and Points of Entry

- In the last 24 hours, 6,024 samples were tested across various laboratories of which 213 samples turned positive for COVID-19. A total of 130,498 cumulative tests have so far been conducted.
- A web – based laboratory data repository system for all COVID-19 testing laboratories has been rolled out, nine (70 percent) of the 13 that carried testing yesterday reported through the system and expected 100 percent rollout by the end of the week. The nine are: NPHL – National Influenza Centre, KEMRI HIV (Nairobi), KEMRI (Alupe), Lancet, Moi Teaching and Referral Hospital (AMPATH), Coast General Hospital, Busia County Referral Hospital Laboratory, NPHL Mobile Laboratories (Namanga and Mai Mahiu), The system allows data from all the testing laboratories to be available by 0600 hours daily at national level.
- In Mombasa, the County Disease Surveillance Coordinator and WHO field officer visited the Lancet Laboratory Centre in Mombasa to discuss on the slow relay of results from Nairobi to Mombasa. The laboratory manager agreed to be sharing results with CDSC on real time basis for effective and efficiency contact tracing. Mentorship on the essence of proper labelling as either baseline or follow up on laboratory investigation forms to avoid duplication of confirmed cases was done. Samples collected from targeted testing are being shipped to KEMRI Kilifi due to lack of reagents in the Coast General Hospital Laboratory.

3.0 KEY CHALLENGES

- Commodity insecurity across a number of counties for PPE and laboratory supplies in some testing laboratories e.g. shortage of reagents for the Cobas® machine in Coast General Hospital molecular laboratory. These have resulted in long turnaround time for relying laboratory results to clients. This is manifest by long traffic of trucks in Busia and Malaba borders.
- Poor data quality submitted to the NPHL data centre from the testing laboratories with a number of key variables missing including phone numbers among others.
- Sub-optimal support to sub – national level for investigating alerts and contact tracing
- Community health workers and volunteers have been working without stipend and will now be risking even more when home based care is rolled out. It is therefore important to urgently explore how best to incentivise them to ensure successful rollout of home-based care.
- Concerns on implementation of policy of testing food handlers with regards to which are the designated testing sites, cost for each test, turnaround time to receive the test result, who issues the COVID-19 free certificate and how long does the certificate remain valid.
- Emerging infection prevention and control challenges on how best to protect prison wardens who guard inmates who are COVID-19 positive cases (remandees) at isolation centres.
- An emerging challenge in coordination of isolation and contact tracing in communities that live across county borders.

4.0 NEXT STEPS

- The Ministry of Health in collaboration with the WHO plan to build capacities for the counties that have newly been affected by COVID-19 as well as the managers of the quarantine facilities across the country.
- The Ministry of Health is rolling out the home and community-based isolation and quarantine protocols across the country to reduce excess loads on the current facilities.
- In Migori county, risk communication and community engagement will be enhanced to address the challenges especially for police officers and public health officers on how frontline workers will handle dead bodies.
- Urgent need for inter-county protocol for contact tracing between different counties. The cooperation between counties on contract tracing is happening but without a proper framework.
- There is a need for an engagement framework for CHVs now that covid-19 response is moving towards HBC. The CHVs have been receiving a stipend from the county government even before covid-19, but now with their engagement in monitoring cases and contacts under HBC, appropriate levels of compensation need to be put into consideration.
- Plans have been finalized to roll out home based care in the Kisumu county within and training of healthcare workers employed under Universal Health Coverage through support from by USAID Afya-Halisi.

Emergency Operation Center:

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COVID-19 Call center: *719# (short message only), 719 (Audio)

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