HURRICANE MELISSA

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Jamaica

Situation Report #19 – 19-20-November-2025

HIGHLIGHTS

- Landfall: Category 5 hurricane at 12:00 on 28 Oct 2025, worst-hit parishes: St. Elizabeth, Trelawney, St. James, Hanover, Westmoreland.
- Almost three weeks after Hurricane Melissa, recovery efforts continue across Jamaica, with 45 confirmed deaths and nearly 1.6 million people affected.
- 47 primary care facilities are still unable to offer services.
- 90,000+ displaced households (preliminary).
- **191,000**+ buildings damaged, 182 communities impacted, 600+ schools impacted.
- Rapid Infrastructure Assessment: widespread roof, electrical, sewage, water, drainage, and patient-care area damage.
- Communications remain intermittent; alternate channels installed.
- A total of 34 partners have reported support to the health sector—the largest multi-agency health deployment to Jamaica in recent hurricane responses.
 Partners include international/local NGOs, UN agencies, donors, academic institutions, and volunteer medical teams.
- **Field missions launched** to support public health response and **MHPSS** in St. Elizabeth and Westmoreland.
- On 14 November, customs clearance was completed for emergency supplies arriving from Barbados aboard the Dutch Navy vessel Pelikaan. The shipment includes 40 deployment backpacks for first responders and four emergency medical backpacks donated by Direct Relief. All items will be transported to the National Health Fund (NHF) warehouses for distribution.
- PAHO is purchasing 9,750 mosquito nets and 10,000 drum covers to be distributed within MOHW health facilities.
- On 18 November, PAHO shipped the following primers and probes for PCR: 1 set for triplex detection of DENV/CHIKV/ZIKV; 1 set for DENV serotyping; 1 set for Leptospira detection.
- The activation level of the National Emergency Operations Centre (NEOC) remains at Level 3.
- The PAHO-supported platform for coordinating Emergency Medical Teams was activated on 5 November 2025 and is accessible at https://www.virtualcicom.org.

IN NUMBERS

Approx. 2.8m (entire population)

Potentially exposed¹

45 Deaths²

253 Injuries treated in A&E hospital departments across all 4 health regions³

14 Missing⁴

71 Evacuated⁵

29% Without electricity

5 Major hospitals⁶ severely impacted, widespread damage across Western and Southern Regions

98 active shelters⁷⁸

1: Statistical Institute of Jamaica

2:JISTV https://m.youtube.com/watch?v=se HnLvp_C7g

3,4,5,6: Ministry of Health and Wellness HEOC report #20

(11 November 2025, 8:00 p.m.)

7: OCHA Jamaica: Hurricane Melissa -Situation Report No. 4 (as of 11 November)

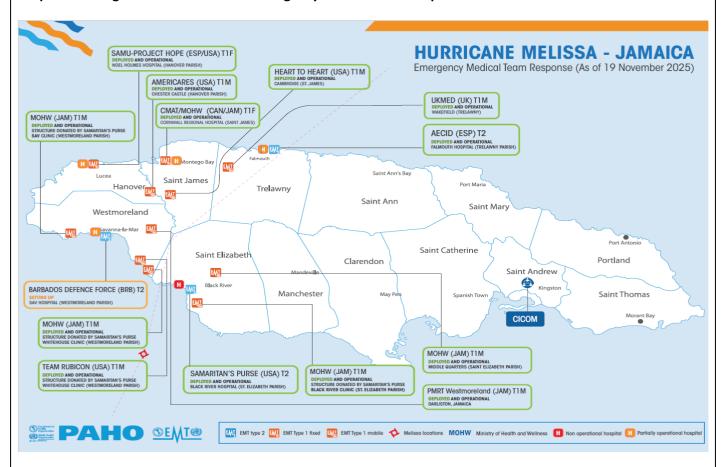
8 Ministry of Health & Wellness, Jamaica (HEOC), Report No. 21, November 12, 2025, 8:00 p.m.







Graphic showing the PAHO-facilitated Emergency Medical Team response as of 19 November 2025



Emergency Medical Teams (EMTs) Coordination

EMTs updates:

- EMT deployments are planned for 30–45 days with possible 14–30-day extensions.
- EMT sites are integrated as **sentinel sites** in the national surveillance system, reporting using the standardized HEOC/PAHO **Minimum Data Set (MDS)** tool.
- Training of local staff on the operation and maintenance of the field hospitals is scheduled to begin on 21
 November 2025, to support a gradual handover and ensure continuity of services.

EMT Registration Totals

- Total Doctors Registered: 87
- Total Nurses Registered: 98
- Total Medical Staff Registered: 185
- Total Medical Staff in country: 223
- **Spanish EMT Type 2:** Installed at Falmouth Public General Hospital. Operational since 12 November, services include C-sections.
- Samaritan's Purse EMT Type 2: Installed at Black River, operational since 4 November, Type 1 Field at Health Centres: Black River (6 November), and Whitehouse (13 November)
- EMT Type 2 (Barbados): Mobilized, expected in-country within 4 days
- Two more teams, *Team Rubicon* and *CMAT*, have completed their mission authorizations and are ready for immediate deployment.





Health Services – Hospitals (Secondary Care)

Hospitals above capacity:

- National bed occupancy: 3,632 in-patients (78%)
- National staffing coverage: 91%
- WRHA: 299 patients (63% occupancy, excluding Savanna-la-Mar).
- NERHA: 389 patients (76% occupancy).
- SRHA: 687 patients (125% occupancy excluding BRH; MRH, MPH, Lionel Town above capacity).
- SERHA: 2,257 patients (73% occupancy; KPH 46 over capacity).
- Note on Black River Field Hospital: 35 patients, 100% occupancy, 100% staffing.
- Mandeville: 156% (126 patients over capacity).
- May Pen: 126% (45 over).
- Lionel Town: 106% (3 over).

Critical care capacity is under pressure, with 9 ICU beds, 13 high-dependency beds and 61 NICU beds occupied nationally, including high occupancy in tertiary facilities in SERHA and WRHA.

Primary Health Care

In WRHA, mobile and outreach services have conducted multiple clinics across priority communities, attending several hundred patients for chronic disease follow-up, wound care, maternal and child health and acute complaints.

Southern Regional Health Authority (SRHA)

- Clarendon: All 31 health centres open except Mitchell Town HC.
- Manchester: 18/18 with 8 with electricity, 18 rely on tank water and all 18 do not have telephone service.
- St. Elizabeth: 11/24 open (emergency services only).
- Santa Cruz Smart Health Centre: Fully functional.

Western Regional Health Authority (WRHA)

- Trelawny: 11 HCs are functional (6 fully, 3 partially, 2 significantly). 8 HCs are not in operation.
- **St. James:** Services are provided by 9 HCs, 13 remain inoperative.
- **Hanover:** 13 HCs are open, 6 remain closed (Copse, Maryland, Nyerere, Mt. Pelier, Chester Castle and Ramble).
- Westmoreland:
 - 7 HCs open: Savanna-la-Mar, Negril, Little London, Grange Hill, Georges Plain, Baulk HC and Delveland are open.
 - o Mobile clinics have been set up to assist at Whitehouse & Darliston.

South East Regional Health Authority (SERHA)

- **St. Catherine:** 21/27 (78%) are open. Closed HCs are Connors, Bartons, Lluidas Vale, Redwood, Troja and Treadways.
- **Kingston & St. Andrew:** 34/40 are open. Mavis Bank remains inaccessible, Padmore and Rock Hall were closed prior to the hurricane.
- **St. Thomas:** 13/16 are open. Closed are Yallahs, White Horses (pre-hurricane), Hagley Gap (access issues).
- Mandeville: Smart Health Centre is in use.

North East Regional Health Authority (NERHA)

- **St. Ann:** 26/29 are operational. Non-operational are Madras, Queenhythe and Muirhouse HCs. A schedule for support mobile clinics has been sent to MOHW for these three HCs. Lime Hall HC is operational, but personnel are working in a reduced area due to damage.
- St. Mary: All 15 facilities are operational.
- **Portland:** All 15 facilities are operational.





Tertiary Care: Several tertiary facilities in SERHA are under **significant operational strain**.

- **KPH** reports ICU at full capacity (6/6 beds, 5 intubated) with general ward occupancy at 107% and congestion at A&E. Roof leaks in multiple wards and a broken operating lamp are constraining surgical throughput.
- Spanish Town Hospital has 16 critically ill patients, prolonged waiting times in A&E and non-functional HVAC, while medical waste storage at KPH, VJH and STH is over capacity, requiring urgent contracting of private waste-disposal services.

WRHA:

- Cornwall Regional Hospital (St. James): Remains operational. Lost previously expanded temporary spaces. Inpatient capacity reduced by 50%. A&E full. Overcrowded wards with compromised infection control. Water restoration ongoing. Surgeries being shifted to private facility.
- Falmouth Public General Hospital (Trelawny): Partially functional, 130-bed facility with 60-70% roof damage. Only one operating theatre on standby, no AC. Maternity ward roof remained but leaking. Surgical & pediatric wards lost roofs. A&E block completely lost roof.
- Noel Holmes Hospital (Hanover): Functional with laboratory and pharmacy operational.
- **Savanna-La-Mar Public General Hospital (Westmoreland):** OPD structure **destroyed**. Inpatient services continue under **leaking areas**. Former **COVID isolation block** could house 20+ patients once repaired.

SRHA

- Black River Hospital (St. Elizabeth): Black River Hospital continues to rely on the Samaritan's Purse Emergency Medical Team Type 2, now operational. The facility remains non-functional. The laboratory was destroyed, and the operating theatre is unusable.
- Mandeville Regional Hospital (Manchester): Over capacity (162%) with emergency services only.
 Mandeville Regional Hospital provides Accidental and Emergency, OPD and Emergency surgery. Chapel Town Hospital is offering full service.
- May Pen Hospital (Clarendon): Over capacity (146%); partially operational, A&E/emergency surgery only. Lionel Town Hospital is fully functioning with 86% occupancy. Percy Junor Hospital is partially functioning with 77% of occupancy.

SERHA

- Kingston Public Hospital: Full operation; roof leaks; ICU 100% occupancy; general wards 107%.
- Spanish Town Hospital: Full operation; HVAC issues in A&E; circuit board repairs ongoing.
- Bustamante Hospital for Children: Full operation; ICU full.
- **UHWI:** Full operation; water shortages persist.

NERHA

- St. Ann's Bay Regional Hospital: Hospital is operational with outpatient services restored. Receiving support from an Israeli Medical Team since 7 November. 85% occupancy; roof damage. At St Ann's Bay Regional Hospital, the missing dietary-block roof is being replaced, and the Top Nurses' Home will temporarily house dietary services once gas piping is completed, phased OPD reopening.
- **Port Maria Hospital:** Operating on generator; NWC restored; 5-day fuel reserve.
- Annotto Bay Hospital: Normal services resumed. Leak detected in water system; continues to receive trucked water due to NWC disruption; generator for radiology; elective surgeries on hold until JPS returns, X-ray limited; electives surgeries remain paused, clinics have resumed.
- **Port Antonio Hospital** and the Health Department have reconnected to **JPS power**, providing emergency services only. Port Antonio Hospital is fully operational.
- Alexandria: The road remains inaccessible and the connection unavailable.

Surveillance

- Routine surveillance as of 17 November 2025: last epidemiological bulletin was published on Epi Week 44, 2025. No report published for the routine surveillance for the last 2 weeks.
- All sentinel sites in the parish of Hanover remain fully operational and are consistently submitting reports.
- There is an increase of 37% suspected cases of leptospirosis notified from CRH compared to the previous report. The majority of cases originate from the parishes of St. James and Hanover, with a notable cluster detected in the Catherine Hall area. A significant male predominance has been





observed. Approximately 60% of cases fall within the 20–59-year age group, representing the most active and occupationally exposed demographic.

- Syndromic surveillance in shelters:
 - o Increased notifications of fever related, and gastrointestinal syndromes align with the pattern of suspected leptospirosis, dengue, and gastroenteritis activity in the region.
 - Watery diarrhea trends continue to contribute significantly to syndromic counts in Westmoreland and St. James.

Surveillance:

- Leptospirosis activity in Jamaica has increased following Hurricane Melissa, with a total of 87 suspected or probable cases and 10 confirmed cases reported as of 20 November 2025. Nearly half of all suspected cases (42.5%) and nine of the ten confirmed cases occurred post-Melissa, resulting in a positivity rate of 24.3% during the post-disaster period. Cases have been reported across eight parishes, with Saint James accounting for the largest proportion (46%), and a defined cluster identified in the Catherine Hall area. Adults aged 25–59 years represent 60% of affected individuals, and there is a pronounced male predominance, with 95% of suspected cases and all reported deaths in the post-Melissa period occurring among males.
- Sentinel sites in Hanover remain fully operational and continue to submit regular surveillance reports.
- Pharmaceutical supplies for leptospirosis management are currently adequate, and pharmacies have been advised to maintain vigilance and ensure timely replenishment. The clinical presentation of suspected cases includes fever, jaundice, vomiting, diarrhea, abdominal pain, and body aches symptoms consistent with leptospirosis, particularly in post-flood contexts. Ongoing actions include strengthened surveillance, especially in high-burden areas such as Saint James; continued cluster investigation in Catherine Hall; and targeted public health messaging to high-risk groups, particularly males and occupational groups exposed to contaminated floodwaters.

Syndromic Surveillance:

- o Fever with cough and watery diarrhea are the most frequently reported syndromes.
- o No cases of jaundice or abdominal pain were reported, which may suggest low prevalence
- Close monitoring of respiratory and diarrhea syndromes is ongoing, particularly in Westmoreland, Hanover, and Trelawny.

Nutrition

- Nutrition services in primary care facilities have been impacted. Nutrition counselling is planned as part
 of maternal health outreach scheduled for St Elizabeth, Westmoreland and Trelawny in the week of 21
 to 25 November.
- As of 11 November 2025, relief agencies are distributing food packages and are also providing some hot meals.

Mental Health and Psychosocial Support

- PAHO, in collaboration with MOHW and UHWI, continue to provide an abbreviated PFA capacity building to provide continued support for the MHPSS Surge response underway. Training and sensitization sessions were held on 19-20 November 2025.
- The Ministry of Health and Wellness in collaboration with the Pan American Health Organization visited four parishes – Hanover, Westmoreland, Trelawny and St James, on Thursday, 13 November, to deliver an MHPSS intervention with health care workers. The team of approximately 20 health personnel from the SERHA, met with health care professionals and provided words of encouragement and empathy, as well as individual and group counselling.
- The MHPSS surge response continued on November 20. Approximately 20 Problem Management Plus providers provided MHPSS support to residents at 3 shelters, namely Pitfour in Montego Bay and Unity and Godfrey Stewart High School.

Laboratory Services

• Laboratory services across the four hospitals remain variably functional following hurricane related infrastructure and equipment damage. While some critical operations have been restored, all facilities continue to experience reduced capacity. Outpatient testing is restricted primarily to antenatal care,





- oncology patients, and urgent requests. CRH maintains the highest operational capability, providing CBC, chemistry, blood bank services, microbiology, immunology, and cytology; however, special chemistry remains offline due to water and infrastructure issues. Persistent challenges including leaks, loss of internet affecting the LIS, and lack of printing limit CRH's ability to support other hospitals.
- At NHH, full laboratory services are available, with only a brief suspension of electrolytes testing due to calibration issues that were subsequently resolved. SPGH can conduct manual CBCs, blood banking tests, coagulation studies, and blood cultures; its chemistry machine is functional, but LIS downtime necessitates manual entry, confining services to inpatients and emergency cases. Urine cultures remain suspended. FPGH is operating with significantly reduced capacity, offering only blood grouping, DCT, crossmatch, HIV, and syphilis testing. Hematology has been suspended, with samples redirected to CRH, and chemistry services are being referred to SABRH due to irreparable equipment damage

Risk Communication and Community Engagement

- Multiple PSAs and press briefings have run continuously since 24 Oct, covering mental health, injury prevention, vector control, facility operations, etc.
- The MOHW launched national calls for nurse volunteers and MHPSS volunteers via website & social media.



HEALTH RISK ASSESSMENT

- Post-hurricane vector-control capacity has been significantly disrupted, with over 70% of workers in the five most affected parishes experiencing major damage to their homes. To compensate, the MOHW is recruiting approximately 700 temporary vector-control workers, with around 400 already mobilized, and redeploying staff from less affected regions.
- In St. Mary, where prolonged flooding has displaced rodent populations, the health department has launched a 14-week rodent-control program across six communities, combining intensive baiting (500 premises per locality), school-based health education and systematic carcass collection and disposal.



INFRASTRUCTURE

Infrastructure - Structural Damages in the most affected parishes, namely St. James, Trelawny, Westmoreland, Hanover and St. Elizabeth

i. Falmouth General Hospital (Trelawny)

Update as of 17 November 2025: Operating theatre cleanup completed; repainting pending.

- Suffered catastrophic damage, losing approximately 60–70% of its roof.
- The only structurally standing block is the operating theatre area (previously used during the Cornwall Regional relocation), though it sustained damage, including shifted AC units and leaks.
- One theatre remains on standby for emergency cases, operating without air-conditioning.
- The maternity ward roof remained in place but leaked. The surgical block and pediatric ward lost their roofs.
- Dietary and storage areas were destroyed, forcing staff to cook outdoors while maintaining sanitation for staff and patients.
- The A&E block completely lost its roof. Services are offered at the activated EMT Type 2 managed by AECID.
- Pharmacy services remain partially active.
- As of 17 November 2025, the Field Hospital is accepting maternal patients (Elective C-Sections) from CRH starting today.





Falmouth Health Centre

- Lost its roof; staff managed to save most records.
- 31 clients served (23 curative, 5 family planning, 1 postnatal, 1 antenatal, 1 BCG vaccination).
- OPD has light but needs consistent water supply and a cooling system.
- Requires hand sanitizers and a tent for the waiting area.
- Vaccine storage remains secure.

Other Trelawny Health Facilities

- Wakefield Health Centre: Extensive roof damage; structure tilted; no service.
- Bounty Hall Health Centre: Roof and cottage destroyed; no service.
- **Deeside Health Centre:** Roof destroyed; roads impassable; no service.
- Bunker's Hill Health Centre: Road impassable but no structural damage. Inoperable.
- **Sherwood Health Centre:** Roof of concrete tank gone; no other damages; no clinic today; no electricity or internet; using tank water.
- Rio Bueno Health Centre: Fence damaged; building intact; no utilities; using tank water.
- Stewart Town Health Centre: Roof severely damaged.
- Jackson Town Health Centre: Roof destroyed; needs tarpaulin; no utilities. Inoperable.
- **Duanvale Health Centre:** Roof severely damaged; no service.
- **Ulster Spring Health Centre:** Roof damaged in several areas.
- Warsop Health Centre: Roof destroyed; no service.
- Wait-a-Bit Health Centre: Roof destroyed; no service.
- **Rock Spring:** operational but water challenges due to damaged tank.

ii. Cornwall Regional Hospital (St. James)

- Remains operational but under severe strain.
- A&E is full, with nowhere to transfer admitted patients.
- Requires a field hospital for additional ward space and surgical support.
- Roofing was replaced as follows:
 - o Fully: block C, renal, 4E (repairs needed in old area), 7W, 7E, Medical Records container
 - Significant oncology, 9E, 4W
- The lab and A&E Department remain undone.

Associated St. James Facilities

- Mount Carey and Cambridge Health Centres: Facilities destroyed. Centres are inoperable.
- Type V, Salt Spring, Roehampton, Adelphi, Catherine Hall Health Centres: Flood, roof, and structural damage affecting equipment and furnishings.
- Somerton, Goodwill, Roehampton, Lottery, Tower Hill, Johns Hall, Garlands, Springfield, Catadupe, Health Centres: Major roof and infrastructure damage. They remain inoperable.
- Maroon Town: Functions carried out from outstation on compound.
- The Catherine Hall Health Centre remains closed and is in urgent need of cleaning as the floor is still
 covered with mud.

iii. Noel Holmes Hospital (Hanover)

- Remains functional in emergency mode; A&E operational.
- Patients are being housed in corridors and a former isolation unit.
- Roof damage on male ward and outpatient block managed with tarpaulin due to solid wall construction.
- Tarpaulin placed on roof of Dietary and General stores.
- Maternity and Observation ward no repair or restoration done.





General Ward-missing zinc replaced and 'stopleak' added, however, leaks persist.

Associated Hanover Facilities

- Ramble, Chester Castle, Mont Pelier, Nyerere, Maryland, Copse Health Centres: Facilities remain inoperable.
- Lucea, Ramble, Chester Castle Health Centres: Facilities destroyed or severely compromised.
- Hopewell, Sandy Bay, Maryland, Montpelier, Grange Kendall, Nyerere Health Centres: Roof, infrastructure, and furnishings damaged.
- Cave Valley Health Centre: Roof and infrastructure damage with water intrusion.
- Hanover Health Department: Roof and infrastructure affected.

iv. Savanna-la-Mar Public General Hospital (Westmoreland)

The third Emergency Medical Team-Type2 arrived in Westmoreland on 17 November 2025 to commence installation of Field Hospital, and services are expected to commence within the week.

- Emergency services ongoing; dialysis unit operating two shifts daily.
- Outpatient structure destroyed, but inpatient services continue.
- Leaking areas are being managed, with staff maintaining clean conditions.
- The former COVID-19 isolation area requires restoration and could accommodate over 20 patients once repaired.
- Dietary Department is partially functional, and some hotels provide food for patients. Top Nurses home will be used once piping for gas is complete.

Associated Westmoreland Facilities

- Savanna-la-Mar Health Centre: Roof, partitions, and equipment destroyed. Reduction in space.
- Westmoreland Health Department: Roof and water damage.
- Whitehouse: inoperable, serviced by Type 1 field health centre.
- Petersfield, Lambs River, St. Leonards, Berkshire, Bethel Town, Cornwall Mountain, Beeston Spring,
 Jerusalem Mountain, Williamsfield Health Centres: remain inoperable.
- **Darliston Health Centre:** Operating with tarpaulins.
- Bluefields, Negril Health Centres: Roof and structural damage due to water intrusion.
- Baulk, New Works, Beeston Spring, St. Leonards, Lambs River, Birkshire, Williamsfield, Bethel Town, Cornwall Mountain Health Centres: Roof, infrastructure, and furnishing damage.
- **Georges Plain Health Centre:** Minor roof and fence damage.
- New Works: roof covered but centre to be assessed, remains inoperable.

v. Black River Hospital (St. Elizabeth)

- Currently operating only its A&E services on the ground floor.
- Both inpatient blocks lost their roofs, including the recently refurbished surgical block.
- Laboratory destroyed.
- Former operating theatre and administrative buildings lost roofs and are unusable.
- Requires a field hospital with an operating theatre, wards, and laboratory capacity.
- WRHA: Adequate reserves at most hospitals; private trucking contracts in place.
- NERHA: 8 HCs in Portland without water; Annotto Bay leak detected.

INFRASTRUCTURE

Structural Damage

Preliminary findings indicate **widespread damage** to roofs, electrical networks, sewage systems, water storage facilities, backup power, drainage, and critical patient care areas. Several facilities remain partially functional, while others, particularly in SRHA and WRHA, require full reconstruction to resume services safely. The national cost is \$10,322,458,373.48 as outlined in the following table:





Region	Total (JMD)	% of National Cost
SRHA	\$6,135,000,000	59.4%
WRHA	\$3,173,132,000	30.7%
SERHA	\$483,326,373.48	4.7%
NERHA	\$250,000,000	2.4%
Bellevue Hospital (BVH)	\$281,000,000	2.7%
Grand Total	\$10,322,458,373.48	100%

SRHA

- Black River Hospital: major structural damage persists (estimated at JMD \$3.55B).
- o Percy Junor Hospital: roof & structural damage.
- Lionel Town Hospital: medium to major structural damage: loss of roof, medium to severe leakage from windows, ceilings and doors, flooding, damage to the dietetics side door caused by strong wind.
- Multiple St. Elizabeth HCs: roofs, fences, water intrusion (14/24 damaged).

WRHA

- o Falmouth PGH 60–70% roof loss; multiple blocks destroyed.
- o Savanna-la-Mar, PGH: OPD destroyed; major roof damage.
- Cornwall Regional Hospital: Doctors without Borders have restored zinc roofs to the female medical and surgical wards and is working to complete A&E, maternity, renal unit and oncology.
- o Noel Holmes Hospital: major roof & structural damage.
- Numerous HCs in Trelawny & Westmoreland roofs do not exist (Wakefield, Falmouth, Warsop, Bounty Hall, Wait-a-bit, Deeside HC, etc.).
- St. James: Catherine Hall HC flooded.

SERHA:

- o KPH roof leaks in multiple wards 2 North, 2 West and Edwina. Broken lamp in operating theatre has impacted surgeries.
- SJH generator failure for LINAC.
- PMH sections of the roof at Doctors and Matron quarters and the entire walkway blown away.
- o VJH has medical waste over capacity.
- o BHC has medical waste over capacity, HVAC A & E is not yet cooling.
- o St. Catherine: Point Hill HC suffered major damage due to flooding.
- o KSA: Mavis Bank remains inaccessible.
- St. Thomas: STH: medical waste over capacity, HVAC in A&E not working with no updates. Hagley Gap HC continues to have access issues.

NERHA

- SABRH: Plans are in place to utilize the Top Nurses home once piping for gas is complete.
 roof damage (Overflow Ward, OPD, Staff Quarters, Physiotherapy); dietary roof failure.
- o ABH: SCN roof leaks; PtMH: minor roof issues; PAH: windows blown out.

Water

SRHA

- St. Elizabeth: 23/24 (95%) HCs without NWC, only Newell HC has. Tanks are in use, but 2 are damaged.
- o Clarendon: All HCs have water, 22 with tanks and 9 with NWC. 5 HCs use both tanks and NWC.
- o Manchester: PJH relying on tanks, 18/18 HCs serviced via tanks.

WRHA

- CRH & SPGH: NWC low pressure; trucking ongoing.
- o FPGH: Water supply is now available. Still reliant on tanks. There is a schedule to full tanks daily.





MV Dawn desalination vessel supplying Hanover & Westmoreland.

SERHA

- o LPH: intermittent NWC; trucked water twice daily.
- St. Catherine: 14/28 (50%) HCs remain without access to NWC. 26 health facilities and the Health Department are serviced by tanks, except Riversdale HC.
- KSA: Dallas HC has no water; Lawrence Tavern HC has no connection to NWC.

NERHA

o PtMH & ABH – NWC restored but leaks detected, PAH stable.

Electricity

SRHA

- o BRH generator only; MRH & PJH JPS restored; LTH full utilities.
- Clarendon: 13 centres have no electricity.
- Manchester: 8/18 HCs (4 JPS, 4 generator).
- o St. Elizabeth: All HCs are without JPS; 5 on generator.

WRHA

- CRH JPS restored.
- SPGH & NHH generator reliance.
- FPGH generator only, with support from EMT T2 for 3 days a week. As of 13 November, FPGH
 restored to JPS.
- St. James: The generator at Cambridge HC is no longer present.
- Trelawny: 10 HCs without JPS connection.

SERHA

- o St. Catherine: 9/28 HCs are without JPS. As of 13 November 2025, 7/28, HCs are without JPS (25%).
- KSA: Dallas and Lawrence Tavern have no light.
- KPH, VJH, UHWI JPS restored; SJH LINAC backup generator failure; PMH JPS restored.
- St. Thomas: two HCs without electricity.

NERHA

- o SABRH, PtMH, ABH, PAH JPS restored; ABH had generator issues earlier.
- o Portland: All HCs have been reconnected to JPS.
- St. Ann: 27/29 HCs are still functioning without generator or JPS.

Communications

At the national level, DECOM VHF radios have been installed but there are low response rates on daily checks.

SRHA: BRH – intermittent; MRH – telephone operational; PJH – inconsistent. Manchester: HCs have no telephone service.

WRHA: CRH, SPGH, NHH – poor phone service; Starlink in A&E only; server damage at FPGH.

SERHA: NCH switchboard down; SJH partial; KPH/VJH internet functional; PMH intermittent. BCH: Internet and mobile communications 'choppy', switchboard partially operational.

NERHA: SABRH: communication is intermittent; ABH/PtMH – partial; PAH stable.

- As of 11 November, **36% of the population remains without electricity**, while **57% of Digicel mobile sites** have been restored.
- Coordination notes for Emergency Medical Teams will rely on PAHO's licensed virtual platform (Virtual CICOM).





- **216 VHF radios** installed under the **JICA-ODPEM DECOM Project** across MOHW facilities, including **42 base** stations, **102 mobile**, and **72 handheld units**.
- 80% of base stations are operational.
- Daily radio checks conducted from the HEOC to all parishes to ensure connectivity and system readiness.
- PAHO virtual Map with layers:
 https://who.maps.arcgis.com/apps/instant/sidebar/index.html?appid=9226e33620e5458290a820b60f1b3
 e27



WASH

WASH

- WASH Assessment in health care facilities has been led by PAHO, which has covered 23 facilities:
 - Westmoreland: 6 facilities assessed
 - Trelawny: 6 facilities assessed
 - St. James: 2 facilities assessed, 2 closed
 - Hanover: 1 facility assessed
 - St Elizabeth: 3 facilities assessed, 1 closed
 - o Manchester: 2 facilities assessed
- Main needs include roof coverage, waste collection (medical and common), pipe connection between water tanks and facilities, and reposition of cleaning materials and PPEs.

Environmental Health

Community Risk Assessment has been led by the MOHW Environmental Health Team in the most impacted parishes: St. James (458), Westmoreland (458 premises):

- Water Access: St. James relies on piped (40), trucked (11), river/spring (10), and rainwater harvesting (40); Westmoreland mainly piped (24) and river/spring (3).
- Potable Water Gaps: 50 premises in St. James and 175 in Hanover lack safe water.
- Vector & Pest Issues: High mosquito presence (St. James: 55 complaints, 64 breeding sites; Westmoreland: 338 cases); rodents, followed by roaches and flies were also reported.
- Sanitation & Waste: Solid waste mostly satisfactory in Westmoreland (348), but 73 unsatisfactory; sanitary facilities present in most premises, though some lack convenient access.
- Key Recommendations: Urgent waste collection, potable water interventions, intensified vector/rodent control, and continued health education on water treatment and sanitation.



SHELTERS

- As of 15 November 2025, 99 of 881 known Emergency Shelters remain activated islandwide, with an occupancy of 1470 persons.
- Shelter monitoring confirms 98 active shelters hosting 1,417 people, including 308 shelterees across 22 sites in St. Elizabeth. No outbreaks have been reported, with only isolated conditions noted: two cases of cough, one hypertensive patient, one person with diabetes requiring insulin, a 15-year-old male with open sutures, and one individual in Manchester needing prescribed medication.
- During an aerial assessment in Petersville on 13 November, health teams reviewed 16 people in the official shelter and 5 in an unofficial site, identifying acute issues such as a nail-stick injury, diaper rash, persistent cough, and uncontrolled hypertension.



HEALTH NEEDS





- By **18 November**, there should exist a consolidated list of needs across the following areas: environmental health, medical supplies, and infrastructure damage.
- **Support for the rapid restoration of essential services**, including debris removal, electricity, water, and communications.
- Maintenance of life-saving health services through field hospitals, emergency repairs, deployment of EMTs, provision of medical supplies, generators, WASH support, and essential medicines.
- **Provision of mental health and psychosocial support (MHPSS)** for patients, health workers, and affected communities.
- Rehabilitation and repair of five major hospitals and multiple health facilities across the western and southern regions to restore full functionality and service delivery.



RESPONSE

GOVERNMENT RESPONSE:

- National and international partners have supported the response with large-scale food, cash and in-kind assistance, including over 1.4 million meals, more than 11,000 food kits and substantial monetary and in-kind donations.
- The Preliminary National Needs List published by ODPEM, including detailed health needs, is available ODPEM at https://supportjamaica.gov.jm/needs. The list is based on support for response and recovery for an estimated 400,000 people affected by the hurricane.

PAHO Coordination & Response Planning - Health Cluster & EMT Coordination

- A total of 34 partners have reported support to the health sector—the largest multi-agency health deployment to Jamaica in recent hurricane responses. Partners include international/local NGOs, UN agencies, donors, academic institutions, and volunteer medical teams. The 8th Health Cluster Coordination meeting co-chaired by PAHO and the MOHW was held on 20 November 2025, and featured partner updates from agencies carrying out field responses in western Jamaica.
- The new EMT sub-group of the Health Cluster Coordination group had its 1st meeting on 18 November 2025 and have shared the MOHW-approved Minimum Data Set for all EMTs to use for reporting.

MHPSS:

- At least **6 partners** are providing trauma-informed care, community and school-based psychosocial support, child protection services, and support for first responders.
- Supplies & Equipment:
- More than **10 partners** are supplying or have the capacity to supply reproductive health kits, medicines, neonatal equipment, hygiene items, water purification systems, and digital health tools.
- Community Health & Vulnerable Groups:
- Multiple partners are supporting PLHIV, children, women, elderly, displaced persons, rural communities, and shelters, with strong outreach and community health activities.
- Health Systems Strengthening:
- Support includes logistics platforms, EHR systems, HIV service continuity, facility repairs, and responder capacity building.
- **Geographic Focus:** Greatest concentration of support is in **western parishes**—St. Elizabeth, Westmoreland, Hanover, St. James and Trelawny, along with national coverage for HIV, MHPSS, telehealth, and WASH.
- **Key Focus:** Strong MHPSS resources available and the sub-group coordination being established; preparation for activation of the other subgroups in progress; offers align with priority gaps and comprehensive health needs list being finalized; guidance on credentialing continues to ensure foreign health teams have timely submission and approval; increased community-based support observed.

PAHO Deployments:

- WASH, damage assessment 30/10/2025 to 20/11/2025
- Coordination, Health Cluster support, JAM CO EOC support 04/11/2025 to 24/11/2025





- EMT Coordination 11/02/2025 to 25/11/2025
- Environmental Health 09/11/2025 to 23/11/2025
- Information Management 05/11/2025 to 20/11/2025
- Logistics 04/11/2025 to 17/12/2025
- Damage Assessment (Structural)
- MHPSS 03/11/2025 to 28/11/2025
- Procurement (virtual)
- RCCE 05/11/2025 to 20/11/2025
- Administrative Assistance 11/11/2025 to 25/11/2025

PAHO virtual Map with layers:

https://who.maps.arcgis.com/apps/instant/sidebar/index.html?appid=9226e33620e5458290a820b60f1b3e 27 The map also includes layers showing hurricane wind strength and path, as well as population density.

Photos





PAHO-deployed WASH and Infrastructure Specialists have been undertaking assessments of various Primary Health Care facilities. L to R: - Whitehouse Health Centre in the parish of Westmoreland, Falmouth Hospital in the parish of Trelawny.



