



**NATIONAL COMMISSIONER OF THE  
ICELANDIC POLICE**  
DEPARTMENT OF CIVIL PROTECTION  
AND EMERGENCY MANAGEMENT



**Applies to: The media, almannavarnir.is, Administration and Chief Epidemiologist's contacts.**

**STATUS REPORT**

**Date: 24.04.2020      Time: 16:30      Location: Coordination Centre / Directorate of Health /Chief Epidemiologist**

**Emergency / Distress Phase: COVID-19**

**Developments**

The civil protection authorities' Coordination Centre coordinates all action and disseminates information regarding COVID-19 all over the country. Dissemination of information, making of instructions and advice to the public, to institutions and enterprises. All instructions can be found on the [Directorate of Health](#) website, the [National Commissioner of the Icelandic Police](#) website and the [covid.is](#) information website.

**Scientists to examine the well-being of the nation in the time of COVID-19**

Scientists at the University of Iceland, in collaboration with the Directorate of Health and the Chief Epidemiologist, have initiated the scientific study "COVID-19 National Resilience Cohort". The aim is to gather as much knowledge as possible about the effects of the epidemic on the quality of life of the people of the country in order to, among other things, be able to plan even better future responses to the effects of societal shocks, such as pandemics. All individuals 18 and older are invited to participate in the study through the website [lidanicovid.is](#).



**LÍÐAN Í COVID-19**  
Vísindarannsókn Háskóla Íslands

**Amended rules on quarantine and the introduction of border checks at the internal borders In force as of 24 April 2020.**

Every person entering the country will be required to undergo a quarantine for 14 days, starting on arrival. At the same time, temporary border checks will be introduced at the internal borders. The quarantine requirement applies to the arrival of people from countries that the Chief Epidemiologist defines as high-risk areas, which currently applies to all countries. See further information [at the Ministry of Health website](#). Regular re-evaluations will be made to check whether the status of any countries has changed. Travellers are responsible for their accommodation and living costs while they are in quarantine, having come here by choice despite the official quarantine requirements. **The rules will be re-evaluated before 15 May.**

**The Ministry for Foreign Affairs' Consular Service**

Nearly 12 thousand people registered into the Consular Service's database, beginning at the end of February, and all of them received information regarding their travels at some point. Some 5,600 people were specially contacted, first outside Europe, and later those within Europe as well. Around 3,000 received phone calls and the rest received individualised email messages.

The majority have returned to Iceland (60 %) or are planning to remain abroad (30 %). Some 200 are still on their way home and 55 individuals in 22 countries are finding it difficult to get home. These numbers have remained stable, as new people keep being added to the list in place of those who make it home. Generally speaking, the majority of the people who have not already returned seem to be in the situation of being able to remain abroad until more flights are again available and the travel restrictions have been lifted. The Consular Service will continue its efforts to assist all those who wish to return home, but very few flights are available.

This week, all those who were still registered as being in Spain and who had not already been contacted in connection with the needs assessment for flights from Alicante at the beginning of the month, were contacted. The majority of them had arrived home or had decided to remain in Spain, but some wanted to return home. Most of those wishing to return from the Canary Islands were booked on a Lithuanian repatriation flight to Stockholm yesterday, 23 April, and onwards to Iceland with Icelandair from Stockholm tomorrow, 25 April. Registrations from Spain were a little over a third of the total number of registrations, or around 4,500, and over 3,000 people were still registered in the database on 19 March. Today, that number is 450. Around 1,000 were registered as being in the USA, of which 700 were still there on 19 March, but that number has fallen to 350.

In addition to the 133 persons who returned from Poland on a flight arranged by the Polish authorities at the beginning of the month, nearly 60 have used repatriation flights organised by the Nordic countries and other European countries, but that number may be higher, as some of these flights are booked like regular scheduled flights via the websites of airlines or travel agencies. Two people arrived this week on an Air Atlanta freight flight from Kenya.

### **Relaxed rules on visitation restrictions and other disease prevention measures due to COVID-19**

As of 4 May, the rules banning all nursing home visitations will be relaxed. Each nursing home will adapt the number of visitations to its circumstances (e.g. the size of the home, the situation in the home at any given time and the number of confirmed infections within the local community). It is recommended that only the closest family member be allowed to visit during the first two weeks after the rules are relaxed, possibly longer, as the case may be. Further information on this relaxing of the rules can be found at the [Directorate of Health website](#).

### **Big Clean-Up Day on Saturday 25 April, Environment Day**

Let's pick up trash around the country's health-care institutions, hospitals, hospital clinics and residential and nursing homes and show our gratitude to the staff in action. President Mr. Guðni Th. Jóhannesson and first lady Eliza Reid will launch The Big Clean Up Day tomorrow at the National University Hospital in Fossvogur (the old city hospital) along with the Minister for the Environment. The President is among Iceland's most diligent clean-up enthusiasts and a role model for all.



### **Amended rules regarding limitations on social gatherings as of 4 May**

On 4 May, the limitations on social gatherings will go from 20 persons to 50 in any place at any given time; upper secondary schools and universities will be able to re-open; and various service providers will be able to resume operations. At the same time, all restrictions on the number of pupils in preschools and primary and lower secondary schools will be lifted, as well as the restrictions on numbers practising sports and youth activities for children of preschool and primary and lower secondary school age. [See more](#)

## **Elective surgeries permitted again as of 4 May**

Elective surgeries and invasive procedures will be permitted as of 4 May, and various other health-care restrictions will be lifted. The Minister of Health has made this decision in accordance with the recommendation of the Director of Health.

[More information.](#)

## **Statistical information for Iceland**

No infections were diagnosed in the last 24 hours. The number of people in Iceland with confirmed infections is currently 1,789; there are 237 in isolation; 1,542 have recovered. The total number of domestic infections is 1,450. A total of 45,286 samples have been taken, including 193 in the last 24 hours. 10 of the people diagnosed with COVID-19 in Iceland have passed away.

[According to the National University Hospital](#) there are currently 12 patients in the hospital with COVID-19, of which 4 are in intensive care and 2 on respirators. 239 are being monitored by the COVID-19 outpatient unit, including 17 children who are being monitored by the Children's Hospital. 1,608 individuals have recovered and 91 individuals have been discharged from the hospital.

## **Information sharing and projects**

### **National Commissioner of the Icelandic Police's Department of Civil Protection and Emergency Management COVID-19 press conference, Friday 24 April**

**Participants: Víðir Reynisson, Chief Superintendent of Police; Þórólfur Guðnason, Chief Epidemiologist; Alma D. Möller, Director of Health.**

Chief Epidemiologist **Þórólfur Guðnason** reviewed the day's statistics. Although no infections have been diagnosed in the last 24 hours for the first time since the epidemic began, this should not be considered to be deeply significant. The diagnosed infections will fluctuate for the days and weeks to come and it is much too soon to be placing any real significance on today's outcome. It is clear that there are not many community infections and a small percentage of the nation have been infected, or around 1 %, and therefore a large percentage of the nation are still susceptible to the infection. If the development turns out to be that only a handful of infections are diagnosed each day, this might be grounds for re-evaluating the plans on relaxing the disease prevention measures, but the same applies if the number of infections starts to rise. All of this must be re-evaluated. Today, the travel restrictions took force and now every person entering the country will have to enter into a 2-week quarantine upon arrival. These restrictions will be in force until 15 May, and the status will be re-evaluated before that time. Remember that individual behaviour is the most important protective measure. This means that sick individuals should stay home and be in contact with their health-care provider about sampling. Isolation, contact tracing and quarantine measures will continue. The most important measure continues to be to respect the 2-metre rule, avoid places where there are many people, and to continue to protect the vulnerable groups.

Director of Health **Alma Möller** started by discussing health-care services in general terms. Everything is going well and the pressure is lessening. Certain tasks will return to normal, but we will have to learn from what has been done so far. In May, the health-care services will return to normal operations and all health-care services requiring touching will resume. Elective surgeries will be permitted. However, we expect to continue to prioritise the services. Dr. Möller stressed that we must all still be on our guard and bear in mind the things Dr. Guðnason mentioned. There are many research projects being carried out on the treatment of COVID-19 and we should always look to the projects where the knowledge is available. In the last few days, we have seen some very irresponsible advice being published in the international media, regarding methods to overcome the virus, and we must stand together to assist people in stopping such messages. Lastly, Dr. Möller discussed the “COVID-19 National Resilience Cohort” study, which is kicking off. The principal investigator is Unnur Anna Valdimarsdóttir, professor of epidemiology, Faculty of Medicine, University of Iceland. The study is a collaborative project of scientists at the University of Iceland and the Directorate of Health. The aim of the study is to advance understanding of the effects of the pandemic on the well-being and lifestyle of the nation. The study’s website is [www.lidanicovid.is](http://www.lidanicovid.is) and all persons who have reached the age of 18 are urged to participate.

Chief Superintendent of Police **Víðir Reynisson** urged the public to participate in the Big National Clean-Up Day tomorrow. The Clean-Up Day is a great way to add some variety to your day and to do good.

### **Press conference on the First day of summer, 23 April.**

Yesterday, on the first day of summer, the press conference's guest was Icelandic Disability Alliance president **Puríður Harpa Sigurðardóttir**. She said that people’s united efforts in following the civil protection authorities’ instructions had been a big contribution to keeping COVID-19 at bay. Better times are hopefully coming and people will be able to visit their loved ones who are in nursing homes.

Ms. Sigurðardóttir first addressed the community of people with disabilities and long-term illnesses, who number around 20 thousand. A large part of this group is in protective quarantine at home, which is vitally important, first and foremost because of their own health, but also to lessen the pressure on the health-care institutions. You are just as important as everyone else in this community.

She added that the Icelandic Disability Alliance had made a study among people with disabilities, which revealed that 30 % found it difficult to get necessities and 70 % were lonely. The public has now had a chance to experience what it is like to be excluded from the community due to disabilities or illness.

It is normal for people to feel anxious and sad. It is important to phone a friend or relative – or make use of the Red Cross 1717 helpline. She also mentioned a number of associations, including the Icelandic Mental Health Alliance, municipal service centres and, lastly, a special email address [viðbragd@frn.is](mailto:viðbragd@frn.is) under the auspices of the public authorities, which can be found at the top of the Disability Alliance’s website. Ms. Sigurðardóttir urged the public to not hesitate to actively communicate with their friends and relatives with disabilities. It is important to show sympathy because no-one chooses to have a disability. Ms. Sigurðardóttir said it was important to think about what kind of community we want after the epidemic is over. The importance of the health-care and social services is obvious and access to those services is very important. She directed her words to the authorities, urging them not to leave anyone behind. If we are all in the same boat, the authorities must show it in action. Finally, she thanked the many aid organisations for their contributions. Poverty in the community has become very visible in the last several weeks and she urged everyone to make a united effort to eliminate it.

The second guest of the conference was Director of the National University Hospital **Páll Matthíasson**. Dr. Matthíasson said that although the number of patients was dropping, the hospital would continue to be on alert status. The hospital would continue to operate its COVID-19 outpatient unit and specific wards to take care of COVID-19 patients. Dr. Matthíasson added that he was thankful to be living in a country where the situation is evaluated on the basis of facts and where there is willingness and ability to respond in a united and swift manner. COVID-19 is, in many cases, a very serious illness, an illness everyone should try to avoid as much as possible. He told the story of his best friend, an Icelandic doctor who has resided abroad for a quarter of a century. He had to care for patients without the proper protective gear and caught the infection. It was a difficult illness and he was still in isolation and had to be hospitalised. He is now recovering, but one of his colleagues, a 30-year old woman, has died of COVID-19. This has all been very hard, but everyone, also the younger people, must take a personal responsibility to stop the infection from spreading.

## Various projects

### The Red Cross

The 1717 Red Cross helpline is still under a lot of strain, and the 1717.is net chat too. There has also been a considerable increase in requests for phone friends from all over the country. There are many volunteers and all requests for phone friends have been fulfilled.

There are now fewer people staying in the epidemic nursing units in Reykjavík and Akureyri than there were last week. The Red Cross volunteers all over the country have been very busy giving psychological support and delivering food to people who are under quarantine and in isolation. In the last few days, the biggest pressure point has been in the West Fjords.

### The website [www.covid.is](http://www.covid.is)

Statistical information about the disease is updated once a day and published at 13:00h at <https://www.covid.is/data>

The website contains information about the measures that have been taken in Iceland due to the COVID-19 disease and on projects related thereto. The website contains information in nine languages. In the period of 17 March to 15 April, the covid.is pages have been accessed over 7 million times.

### Upcoming:

- Press conferences are held every day at 14:03h. 14:03
- The next COVID-19 coordination meeting will be held on Monday 27 April at 9:00h.



# COVID-19 in Iceland – Statistics

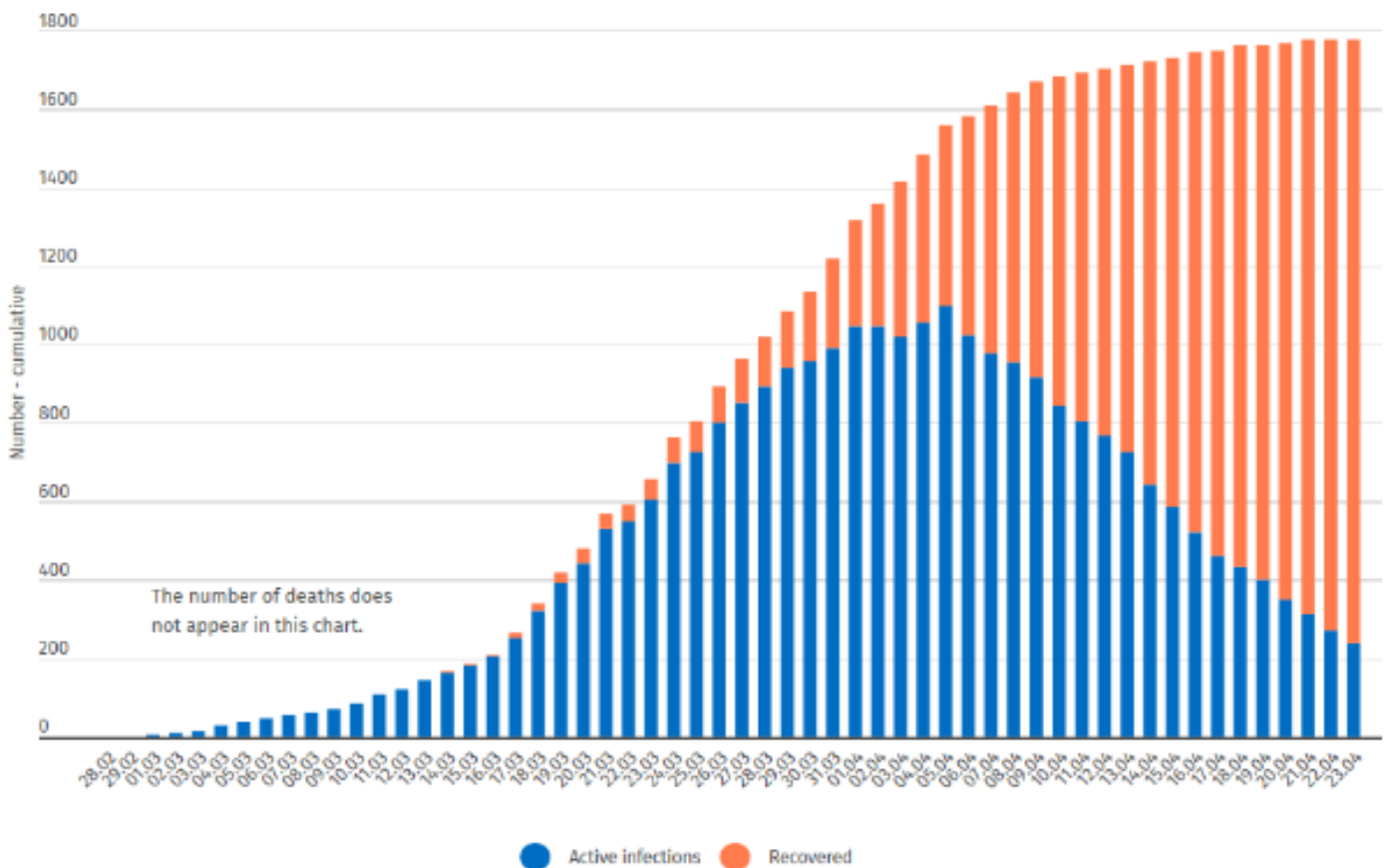
- Information on this page is obtained from the database at midnight.

## Total figures

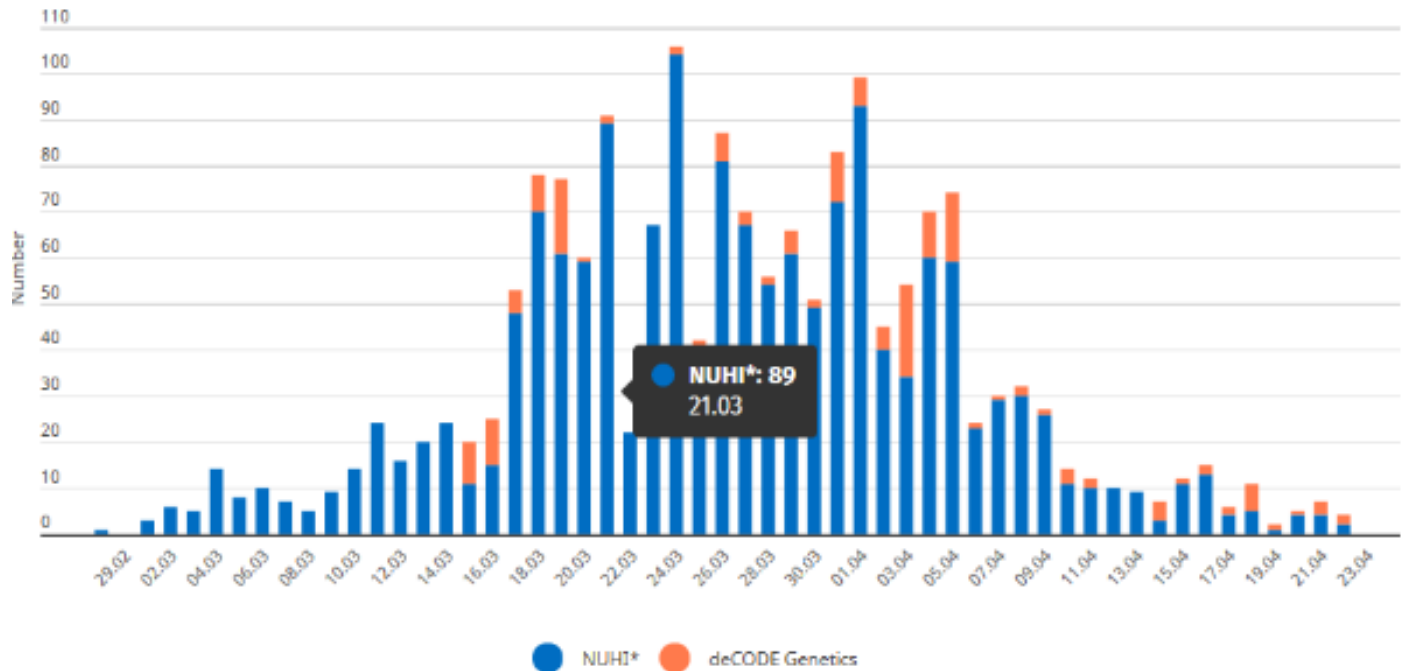
 <p><b>1.789</b> confirmed infections</p>	 <p><b>237</b> in isolation</p>	 <p><b>14</b> hospitalised</p>	 <p><b>5</b> intensive care</p>
 <p><b>1.542</b> recovered</p>	 <p><b>726</b> in quarantine</p>	 <p><b>18.691</b> quarantine completed</p>	 <p><b>45.286</b> samples</p>

Of those diagnosed with COVID-19, ten have died.

## Number of active infections and number of recovered



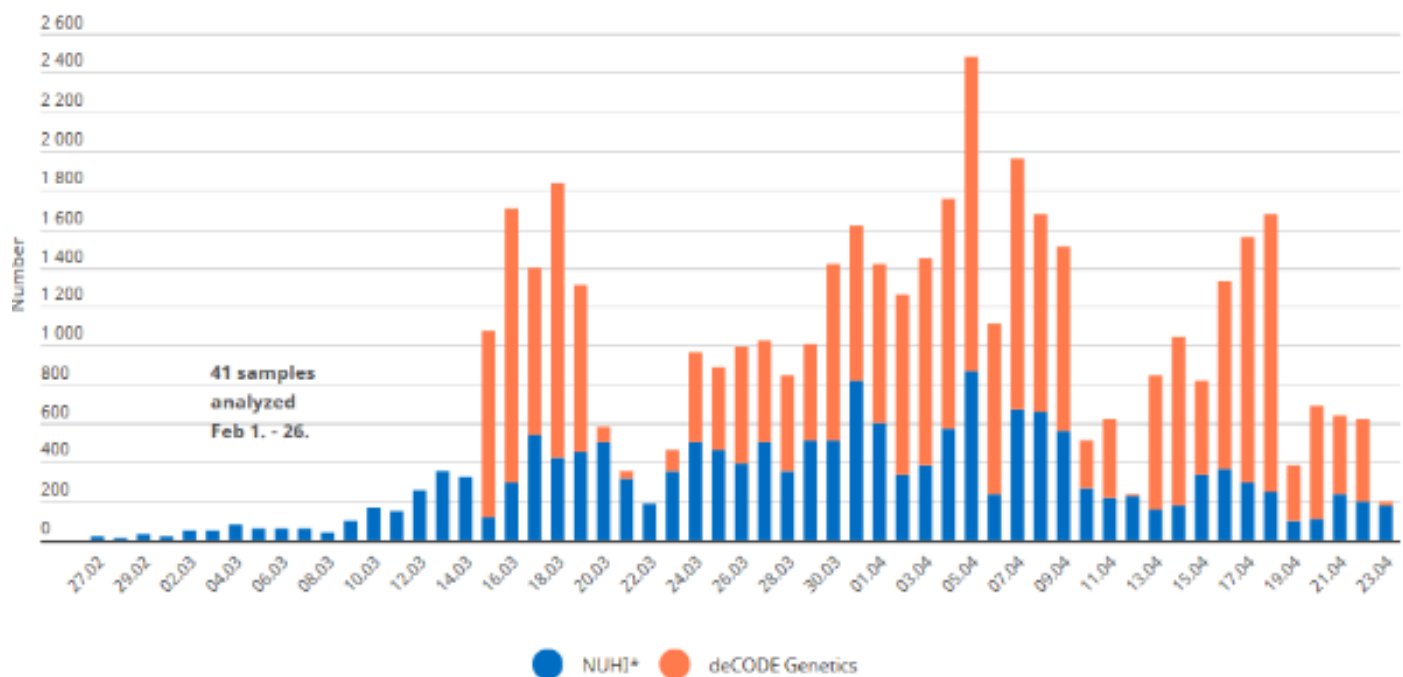
## Number of infected persons, by date



Download data

When information is published on the number of new infections since the previous day, it is possible that the column in the bar graph will not be the same. This is because the publication of information on new infections is based on the date the test was taken and not the date the infection was diagnosed.

## Number of tests per day



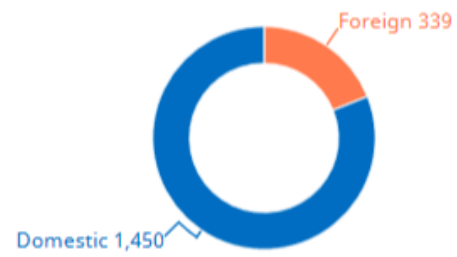
Download data

## Number of infected persons, by gender



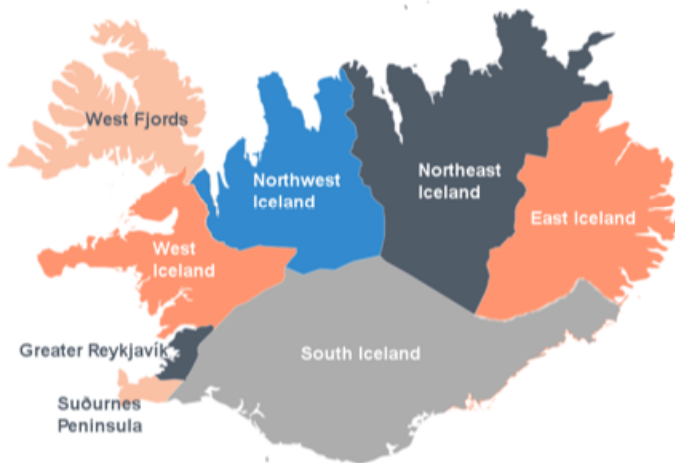
[Download data](#)

## Origin of infection



[Download data](#)

## Infections / Quarantine, by region

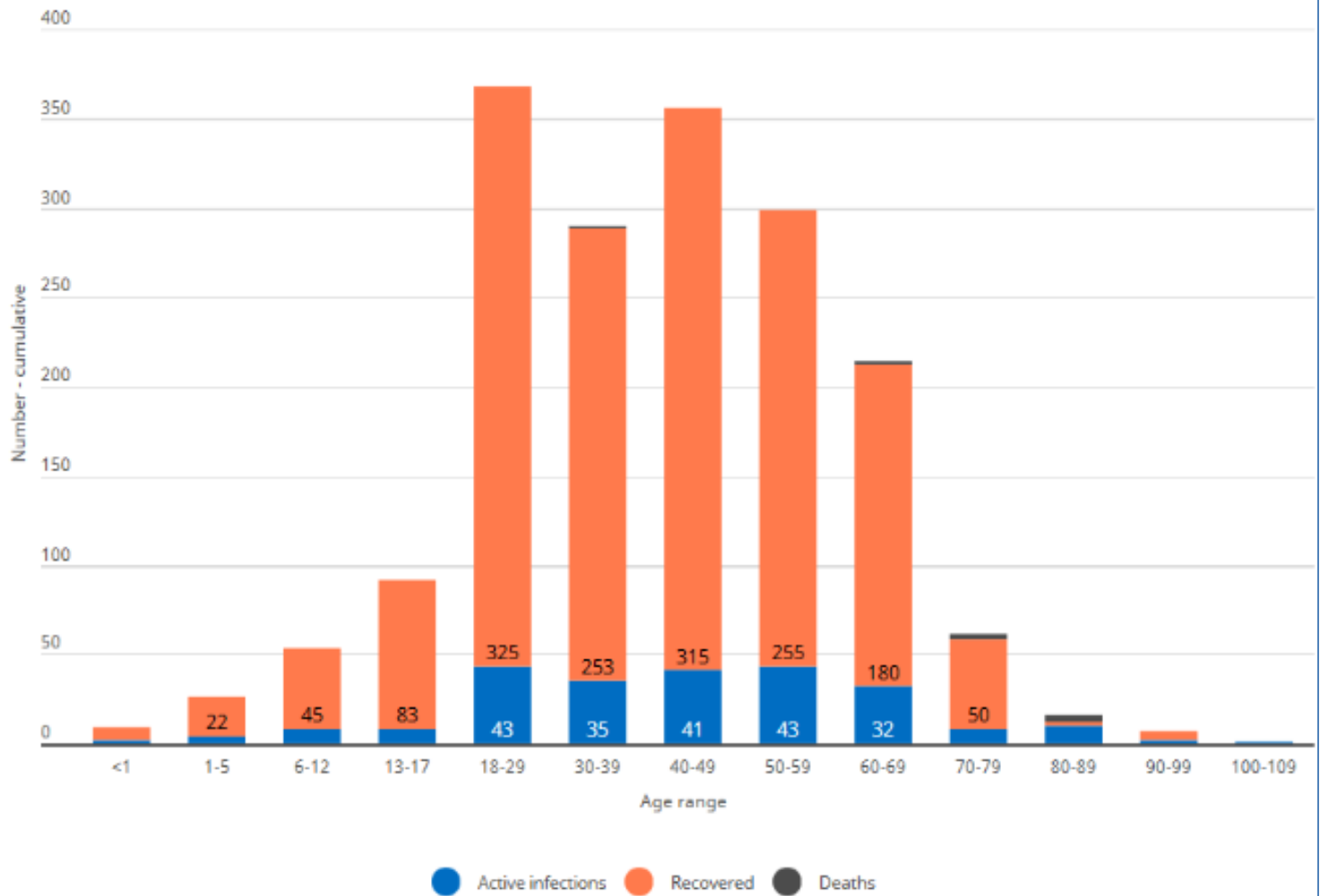


	Infections	Quarantine
Greater Reykjavík	1306	458
Suðurnes Peninsula	77	20
South Iceland	177	51
East Iceland	8	14
Northeast Iceland	46	18
Northwest Iceland	35	8
West Fjords	95	85
West Iceland	42	19
Unknown	2	53
Abroad	1	0

[Download data](#)



# Number of active infections, recovered and deaths by age



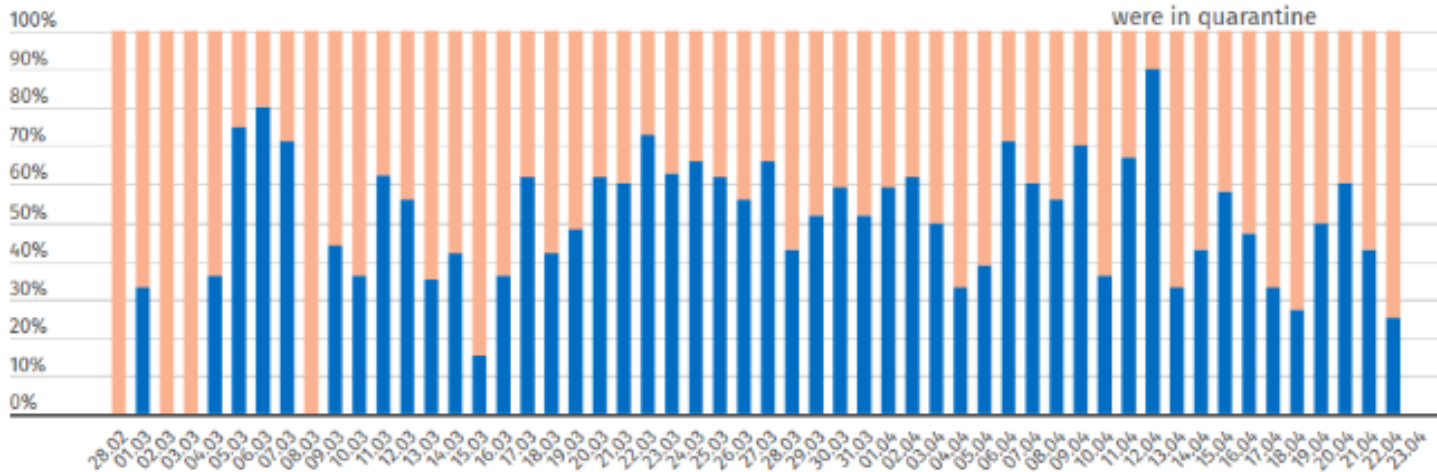
[Download data](#)

## Percentage of infected persons who were diagnosed while in quarantine

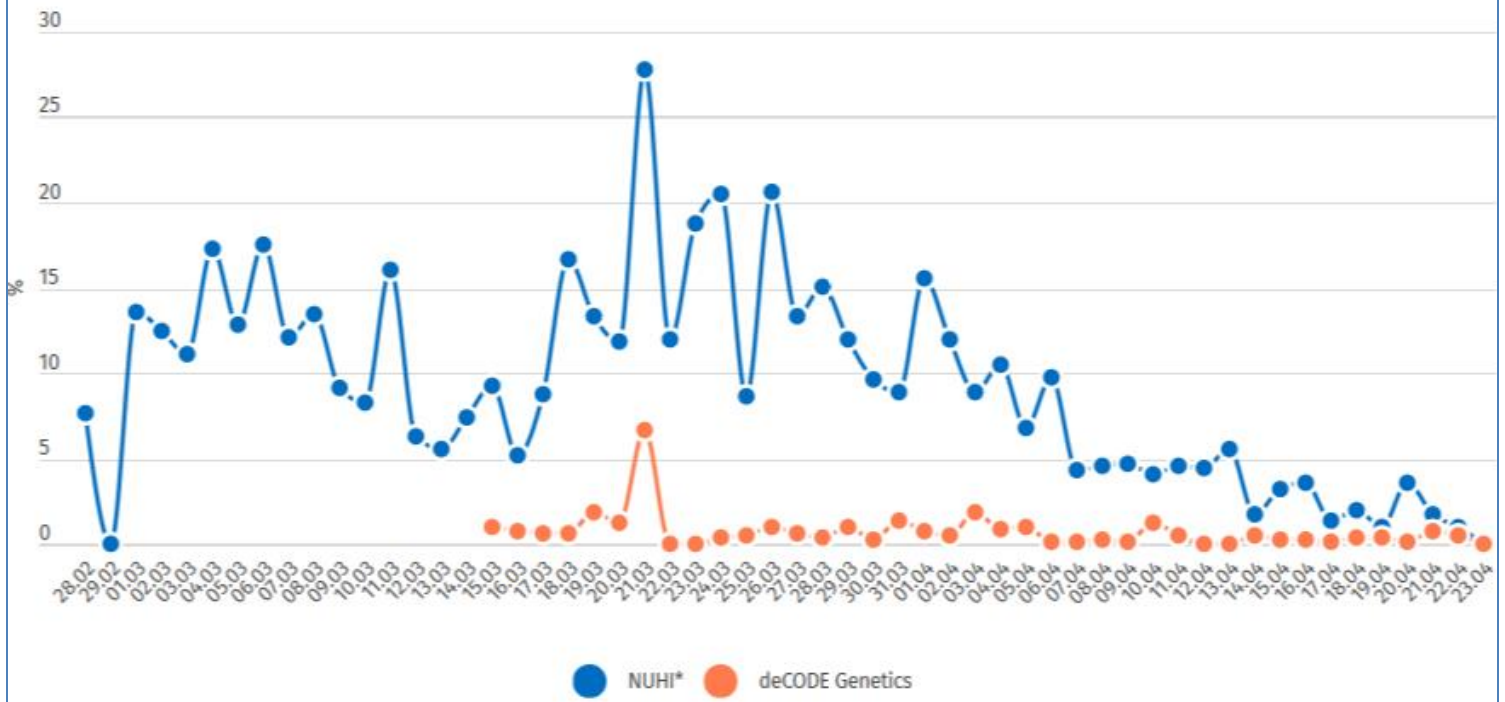


**54%**

of those who were diagnosed were in quarantine



## Infections as a percentage of tests conducted



### Coronavirus – Global spread

According to Johns Hopkins, **2,735,117 individual cases** of COVID-19 have been confirmed today and **192,019 individuals** have died. An additional **751,501 individuals** have already recovered from the illness. According to the ECDC, the epidemic is currently considered to be a moderate public health threat for healthy individuals and very high threat for older adults and individuals with chronic underlying conditions. Cf. the [European Centre for Disease Prevention and Control \(ECDC\)](#) website for information on the development in each country. Cf. the ECDC risk assessment.