

Coronavirus Disease 2019 (COVID-19) Situation Report #4 27 July 2020

Report as of 27 July 2020, 6:45 pm ICT



Situation Summary

Highlights of Current Situation Report

- As of 27 July 2020, 225 confirmed cases of COVID-19 have been reported from Cambodia, of which 147 have recovered. 187 cases were acquired overseas, representing 10 nationalities in addition to Cambodian, with the rest locally acquired. Five patients are currently being treated in Khmer Soviet Friendship Hospital and 56 at Chak Angrae Health Centre, both in Phnom Penh, and 15 at Kampong Speu Provincial Referral Hospital.
- 464 contacts are being quarantined at a quarantine centre in Phnom Penh and are monitored daily for possible development of symptoms.
- On 22 July a 21-year-old Cambodian man died while isolated in a quarantine centre in Thong Khmum
 Province. He was a returning migrant worker who entered Cambodia by land via Thailand and was tested
 negative for COVID-19.
- Points of Entry (POE) measures are currently being strictly implemented, including testing on arrival and upon completion of 14-day quarantine for all airport passengers and at border crossings.
- Cambodia is preparing to participate in the upcoming APSED III TAG, which will focus on COVID-19 response
 efforts.
- The National COVID Masterplan includes the creation of multi-sectorial provincial committees led by the provincial governors. Plans are being developed to build capacity at provincial and district level around key priority areas, with support from WHO.
- Oxygen concentrators (300) are soon to be shipped to Cambodia to strengthen health care readiness.
- The MOH have published Standard Operating Procedures (SOPs) and guidance on home and facility-based quarantine as well as mental health support during COVID-19
- The MOH has published Infection Prevention and Control (IPC) SOPs for COVID-19 in Cambodia (version 1.0)

Upcoming Events and Priorities

- Rapid Response Teams (RRTs) at provincial level will receive refresher trainings to build their surveillance and
 contact tracing capacities. A Training of Trainers is being led by MOH Department of Communicable Disease
 Control (CDC) with support from technical partners, including WHO, US-CDC and Institute Pasteur Cambodia.
- WHO is supporting MOH to expand and decentralize laboratory testing capacity for COVID-19 using
 GeneXpert technology at three provincial laboratories: Siem Reap, Sihanoukville and Battambang. A funding
 proposal has been developed for Global Fund, implementation plans have been developed, the instruments
 have been delivered and renovations are ongoing at the laboratory in Siem Reap. WHO will participate in a
 field mission this week to Siem Reap to support implementation of testing and data management.
- MOH Department of Hospital Services is finalizing version 3.0 of the clinical guidelines, with support from WHO. This version includes content on management of severe and critical cases; oxygen considerations; procedures for SARS-CoV-2 monitoring; discharge criteria; use of medicines; and post-discharge management. A separate Maternal, Newborn and Child Health Services COVID-19 technical brief, led by the National Maternal Child Health Centre with support from WHO and UNFPA, is also being finalized to complement the clinical guidelines.
- The government continuously assesses the adjustment of non-pharmaceutical interventions (NPIs) through a
 gradual step-wise approach that considers the effectiveness, socio-economic cost, and public acceptability of
 each measure, while continuing to increase surveillance to inform decision-making.
- Capacity building trainings on mental health and psychosocial support (MHPSS) for health professionals in Banteay Meanchey Province will take place at the end of July.



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National Transmission Assessment

1-Imported. As of 27 July 2020, 187 (83%) of the 225 cases were imported, and the remaining cases were locally acquired and have all been epidemiologically linked to confirmed cases. All cases since 11 April (n=103) have been imported. There is no indication of localized transmission. All confirmed cases are isolated in hospitals; currently 76 are in hospital. There are no reports of undiagnosed respiratory clusters through the national hotline. ILI and SRI reports are below expected levels for July as is the case in most parts of the world. A total of 48,703 individuals have been tested using PCR, with a positivity rate of 0.46%. In total, 59,381 tests have been performed as of 27 July 2020, including 2,182 ILI/SARI sentinel surveillance specimens which have been tested negative for SARS-CoV-2.

Epi Update COVID-19	Tests 7,394 NAT Tests past 7 days 59,381 Cumulative NAT Tests	Cases 54 New cases past 7 days (260% 7-day) 225 Cumulative Cases	Deaths O Deaths past 7 days (0% 7-day) O Cumulative Deaths	ICU Admissions O ICU Admissions past 7days (0% 7-day) O Cumulative ICU Admissions	
	100% Imported Cases in past 28 days (84)	0% Cases in past 28 days with no link (0)	O Active Clusters	O Active clusters with >3 generations	
Health Service Provision COVID-19		27 Hospitals COVID-19	-	blic Number of	

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Epidemiology

Figure 1. Number of confirmed COVID-19 cases by acquisition status and date of positive test

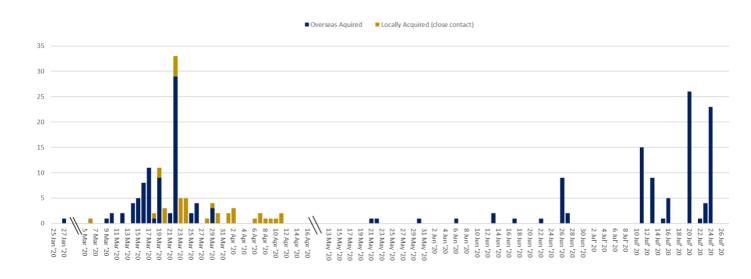


Table 1. Cumulative and new (past 7 days) cases and deaths by age and sex

Age Group	Female		Male		Total	
	Cases	Deaths	Cases	Deaths	Cases	
0-9	1(0)	0(0)	2(0)	0(0)	3(0)	
10-19	0(0)	0(0)	2(0)	0(0)	2(0)	
20-29	7(1)	0(0)	78(39)	0(0)	85(40)	
30-39	9(1)	0(0)	39(10)	0(0)	48(11)	
40-49	3(0)	0(0)	14(1)	0(0)	17(1)	
50-59	8(1)	0(0)	14(0)	0(0)	22(1)	
60-69	15(1)	0(0)	27(1)	0(0)	42(1)	
70-79	2(0)	0(0)	4(0)	0(0)	6(0)	
80-89	0(0)	0(0)	0(0)	0(0)	0(0)	
90+	0(0)	0(0)	0(0)	0(0)	0(0)	
Total	45(3)	0(0)	180(51)	0(0)	225(54)	



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Figure 2. Proportion of confirmed COVID-19 cases by age group and nationality (n=225)

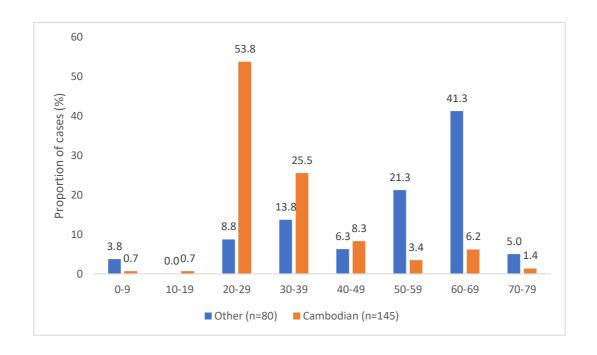


Figure 3. Number of ILI cases from ILI sentinel sites (n=7) by week, 2020 and 2017-2019

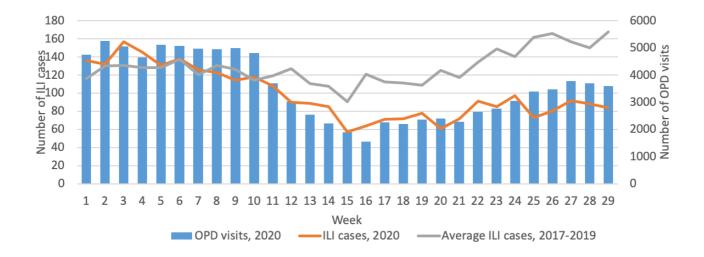
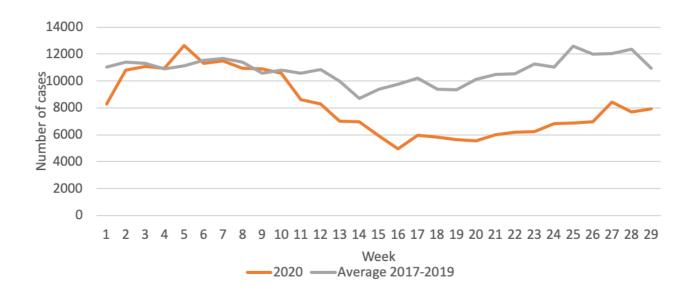




Figure 4. Number of patients with severe respiratory infection (SRI) by week, 2020 and 2017-2019



Strategic Approach

National and Provincial Public Health Response

Incident Management Systems

- Inter-Ministerial Committee, chaired by the Minister of Health, with Secretaries of State
- National COVID-19 Committee, chaired by Samdech Prime Minister
- Provincial COVID-19 Committees, chaired by Provincial Governors
- Committee on Economic and Financial Policy (CEFP)/ MEF of 4 Working Groups to address the socioeconomic impacts of COVID-19

System and Policy Development

- State of Emergency legislation was promulgated into law on 29 April 2020; has not been enacted
- Go.Data Platform used as a surveillance database including laboratory and contact tracing information
- NIPH and CDC databases have been adjusted to allow for multi-source dataset on testing and surveillance

Key Priorities

- Weekly clinician webinars and a Telegram group have been established by MOH Department of Hospital Services (MOH/DHS) to accelerate the dissemination of clinical and IPC guidance materials and to respond to emerging questions and concerns from clinicians on case management
- A survey of clinical and IPC trainings is currently being implemented by MOH/DHS to support the development of a national curriculum for COVID-19



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- A number of health system readiness assessments on health facility readiness, ICU capacity, oxygen, staffing,
 etc. are currently being conducted by MOH/DHS, with support from WHO and partners
- A primary health care strategy for COVID-19 is currently being developed by WHO and includes suggested roles and responsibilities for health centres in the potential scenario of community transmission
- National programmes are developing specific COVID-19 preparedness and responses plans

Strategic Approach to COVID-19 Prevention, Detection and Control

Testing strategy and contact tracing system in place

A broad testing strategy is being implemented nationwide, including testing all suspect cases meeting case definition, active surveillance for pneumonia cases in hospitals, testing at POEs at day 1 and day 13 of 14-day quarantine and testing influenza-like illness (ILI) and severe acute respiratory illness (SARI) samples from sentinel sites for COVID-19. Hot-spot surveillance strategies and targeted testing of high-risk populations are also being implemented as necessary.

• Risk communication and community engagement

A community-based surveillance strategy has been developed and will be piloted for case detection at the health centre level and in the community. The Ministry of Interior is reinforcing the monitoring of quarantine through follow-up and fines for individuals who do not follow guidelines.

A community engagement strategy has been drafted in line with WPRO guidance. MOH has developed a Risk Communication and Community Engagement monitoring and supervision plan being implemented from May 2020 to July 2020 for health care personnel and village personnel in 12 provinces.

• NPIs (recorded in table at end of report)

Best Practices / Lessons Learned

Factors Contributing to Strong Response

- Strong leadership and coordination
 - Whole-of-government, whole-of-society response led by the Prime Minister, with public health actions led by Minister of Health
 - National Master Plan for COVID-19 developed with budget of \$62 million for first year
- Past investments have built a functional public health system
 - Multi-source surveillance for COVID-19, including event-based surveillance (with 115 hotline) and expanded ILI/SARI surveillance
 - Almost 3,000 RRT members across the country conduct case investigation and contact tracing
- Risk communication and community engagement
 - Timely messages disseminated through TV, radio and social media, regular press releases, press conferences and media briefings
 - Targeted communication materials developed for at-risk groups, including migrants and garment factory workers
 - Community engagement strategy being rolled out to encompass all aspects of surveillance and response for COVID-19, particularly in the event of community transmission



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International solidarity and cooperation

- Open and transparent health system response in the country
- o Close technical and operational cooperation between UN agencies and other development partners
- High-level participation in international meetings, including regular coordination between National IHR Focal Points

Non-Pharmaceutical Interventions (NPI)

Narrative Non-Pharmaceutical Interventions

Large-scale NPIs announced on 16 March 2020 included the closure of all education facilities nationwide, with distance learning measures instituted. WHO guidelines on schools and workplaces reopening with eight main recommendations have been incorporated into the national guidelines.

A Council of the Ministers letter dated 21 July announced that 20 high-safety standard schools in Phnom Penh, Siem Reap and Battambang will be allowed to open from August as the first of a three-phase reopening plan. WHO have provided guidance to the schools with clear recommendations to the School Health Department of the Ministry of Education, Youth and Sport.

On 15 July, the Ministry of the Interior hosted a high-level meeting between the Royal Government of Cambodia and the UN Country Team on the Joint Programme to Support Returning Migrants during COVID-19 Crisis and its Impacts. Work is ongoing between government and UN partners to develop a detailed COVID-19 Multi-Partner Trust Fund work plan.

Karaoke bars (KTVs) and nightclubs were closed on 17 March. On 7 July, the Phnom Penh Municipal Administration announced KTVs and clubs could reopen, provided they convert their venues into restaurants and receive a city hall permit to operate. Venues must also follow MOH and Ministry of Tourism-mandated measures such as physical distancing, open-air ventilation and other precautions.

To limit importation of COVID-19 cases, international arrivals from several high-burden countries were banned beginning in March. Lifting of these bans on 20 May has been accompanied by strict entry requirements for all non-diplomatic foreigners entering Cambodia including: requiring negative COVID-19 health certificates, medical insurance, testing upon arrival, 14-day quarantine and further testing on day 13.

On 26 July it was announced that there will be a temporary suspension of incoming flights from Malaysia and Indonesia as of 1 August. The measures come in response to the significant increase in positive cases arriving from these countries in June and July.



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Table 2. NPI implementation and lifting dates

	Monitoring status							
			Implementation	Partial lift		Lifted		
NPI	Date first implemented	Date last modified	Geographical (national or sub- national)	Recommended or Required	Lifted for some area	Lifted for all areas		
Wearing Face Masks, Hand Hygiene, Respiratory Etiquette	None	None						
School Closure	16 March	Plan to open 20 private schools that are able to implement measures in August	National	Required	No	No		
Workplace Closure	None	None						
Mass Gatherings	3 April	15 June	National	Required	No	No		
Stay at Home	Government recommends stay home if possible	None						
Restrictions on Internal Movement (within country)	9 April	None	National	Required	No	Yes		
Restrictions on International Travel	27 March	26 July	National	Required	No	No		
Others; specify in narrative	None	None	-	-	-	-		

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Figure 5. NPIs timeline combined with epidemic curve

