



Situation Summary

Highlights of Current Situation Report

- There were 309 locally acquired COVID-19 cases in the last 7 days. This brings the total number of cases related to the 20 February Event to 810 (F:378, M:432).
 - On 11 March 2021, the first COVID-19 death was reported. The case was a 50 year old Cambodian male. As of 15 March 2021, 231 cases have recovered and 579 cases are hospitalized or in isolation.
- Confirmed cases in the 20 February Event have now been reported in 10 provinces. Two additional provinces Battambang (1) and Siem Reap (1) reported cases in the past week.
- So far, 19 clusters and 200 venues have been identified through case investigation and contact tracing.
- Over 57,600 tests have been performed by Institute Pasteur Cambodia (IPC) as part of the investigation.
- Government has implemented targeted NPIs in affected provinces including extension of school closures, travel restrictions and closure of entertainment venues “hotspots”.
- MoEYS announced the temporal closure of all public and private educational institutions and schools in Prey Veng province.
- The Kampong Cham, Svay Rieng, Pailin, Preah Vihear and Oddar Meanchey provincial authorities announced the suspension of weddings, parties and religious gatherings.
- Ministry of Health (MOH) is conducting risk assessment, active surveillance for pneumonia, hotspot testing, using the cluster based approach to identify cases and contact tracing and management.
- WHO, US CDC and partners are supporting National CDC to adopt a cluster-based approach to improve case detection including prioritization of 3C settings for targeted testing.
- On 15 March 2021, one new COVID-19 case involving a returnee from Thailand was reported.
- As of 15 March 2021 10am ICT, 1,325 (F:560, M:765) confirmed cases of COVID-19, including one death have been reported from Cambodia, of which 730 have recovered. 424 cases were acquired overseas, representing 22 nationalities in addition to Cambodian, with the rest locally acquired. 592 patients are currently being hospitalized.
- Vaccination services (Sinopharm) are now provided in all public hospitals across provinces and operational districts in Cambodia.
- As of 14 March 2021, 170,659 (F: 57,430, M:113,229) people were vaccinated through the MOH system.

Upcoming Events and Priorities

Surveillance

- MOH CDC with WHO support are working on early detection strategies to increase detection opportunities in the community: daily symptom screening at health care facilities for all patients and staff as well as testing of staff with ILI symptoms; testing of special populations (truck drivers, taxi drivers, police, garbage collectors) if have ILI symptoms, and asymptomatic screening of prison staff in Phnom Penh every 2 weeks.



- In response to the 20 February event (Prey Veng outbreak), MOH and WHO visited health centers in the affected area to review ILI data and support improving detection efforts by coordinating specimen collection for ILI patients.
- NCHP with WHO support have implemented surveillance with community engagement in one district in Battambang province. A ToT model was used to train OD, health centres and community groups to support early detection of COVID-19 in the community. Further supervision visits will be conducted as part of the monitoring process.
- With the support of WHO, MOH will strengthen provincial capacity for using EOC/IMS and multisource surveillance for risk assessment and decision making.

Laboratory

- Institute Pasteur, Cambodia (IPC), are conducting laboratory testing, serology and sequencing.
- MOH is conducting laboratory testing and infection source investigations. MOH with partner support is coordinating specimen collection, additional testing to support the 20 February Event investigations and laboratory data management and analysis.
- MOH are working closely with WHO, NIPH and IPC to expedite options for expanding testing capacity.
- WHO are working with NIPH and IPC to build the Regional Laboratory workforce for Molecular Diagnostics for COVID-19, through a three-phase training program, beginning next Monday.
- MOH is progressing with plans to expand and decentralize laboratory testing capacity for COVID-19 to three provincial laboratories: Siem Reap, Sihanoukville and Battambang. NIPH have activated a new high throughput automated instrument to increase daily testing capacity.

Healthcare delivery and pathways

- MOH is conducting the readiness check of clinical management for large scale community transmission.
- MOH Department of Hospital Services (DHS) is finalizing version 3.0 of the clinical guidelines. 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 Maternal, Newborn and Child Health Services COVID-19 technical brief, led by the National Maternal Child Health Centre, is also being finalized to complement the clinical guidelines.

Risk communication and community engagement

- MOH continue to issue 3C hotspot updates in four languages (Chinese, Vietnamese, Khmer and English) with call for contacts to come for testing and quarantine.
- Materials/messages being developed/disseminated:
 - Phnom Penh and Kandal provinces sentinel populations call for testing if symptomatic;
 - Everyone is at risk – everyone must be vigilant;
 - Quarantine reminder graphics for: post-discharge and post first test;
- Quarantine do's and don'ts poster is being revised based on three different quarantine options: home, hotel or facility.
- NCHP is revising COVID-19 booklet for VHSG, CCWC and Village Chiefs to include information about vaccines, which will be disseminated nation-wide.

- As part of the NVDP, a vaccine related communication and community engagement plan is being implemented by MOH with support from WHO, UNICEF and GIZ.

Non-Pharmaceutical interventions

- 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.
- Two sessions on MHPSS in the context of COVID-19 for 89 health staff at health centers and district referral hospitals were held on 9-12 March at Kampong Chhnang province.
- Occupational health activities in the context of COVID-19 for 36 health staff at health centers, Operational Health Districts (ODs) and referral hospitals Phnom Penh will be conducted on 29-31 March 2021
- Field monitoring and awareness raising activities to strengthen the implementation of COVID-19 NPI will be held from 15-17 March 2021 Kratie province. A total of 60 health staff in 20 health centers and ODs will participate these activities.

National Transmission Assessment

Imported cases: As of 15 March 2021, 900 (68%) of the 1,325 cases were locally acquired, the remaining cases were acquired overseas. There are no reports of undiagnosed respiratory clusters through the national hotline. Influenza-like illnesses (ILI) and severe respiratory illness (SRI) reports are below expected levels for March. A total of 331,027 individuals have been tested using real-time polymerase chain reaction (RT-PCR), with a positivity rate of 0.4%. In total, 498,847 tests have been performed as of 15 March 2021 including 4,901 ILI/ SARI sentinel surveillance specimens which have been tested negative for SARS-CoV-2.

Multi-source surveillance assessment for the 20 February Event indicates Stage 1 transmission in 10 provinces. However, the overall risk of transmission beyond the cluster and progression to Stage 2 (localized community transmission) is very high in Cambodia. By province, the risk of progressing to localized community transmission is very high in Phnom Penh, Preah Sihanouk, and Kandal, moderate in Prey Veng, and low in the other six provinces. No clear evidence of Stage 2 transmission in any provinces.



Epi Update COVID-19

Tests

40,718

NAT Tests past 7 days

498,847

Cumulative NAT Tests

Cases

314

New cases past 7 days
(64% 7-day)

1,325

Cumulative Cases

Deaths

1

Deaths past 7 days
(0% 7-day)

1

Cumulative Deaths

ICU Admissions

2

ICU Admissions past 7 days
(100% 7-day)

3

Cumulative ICU Admissions

37

Imported Cases in past 28 days

1

Cases in past 28 days with no link (0)

19

Active clusters

1

Active clusters with
>3 generations

Health Service Provision COVID-19

1

Healthcare worker cases reported past week

27

Hospitals admitting COVID-19 patients

13,667

Total public hospital beds

17

Number of hospitals with experience in COVID-19 case management

Epidemiology

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

(case with unknown source of infection excluded) 15 March 2020 -15 March 2021

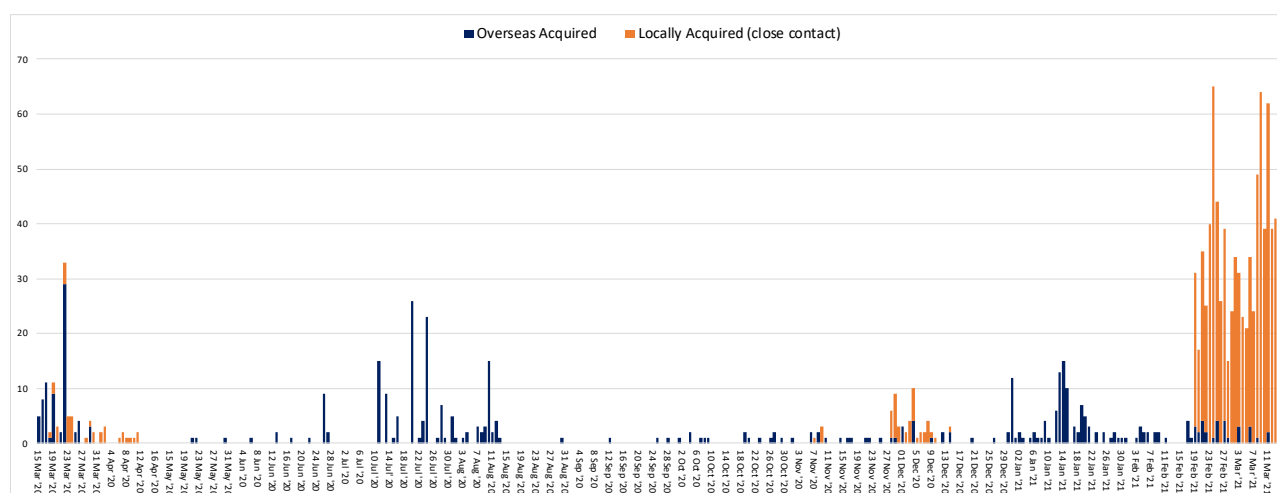


Table 1. Cumulative and new (past 7 days) cases and deaths by age and sex

Age Group	Female		Male		Total
	Cases	Deaths	Cases	Deaths	Cases
0-9	3(1)	0(0)	10(3)	0(0)	13(4)
10-19	36(18)	0(0)	22(14)	0(0)	58(32)
20-29	246(45)	0(0)	279(60)	0(0)	525(105)
30-39	160(28)	0(0)	270(59)	0(0)	430(87)
40-49	50(19)	0(0)	94(32)	0(0)	144(51)
50-59	29(8)	0(0)	41(10)	1(1)	71(19)
60-69	28(6)	0(0)	36(3)	0(0)	64(09)
70-79	6(3)	0(0)	12(4)	0(0)	18(07)
80-89	0(0)	0(0)	0(0)	0(0)	0(0)
90+	0(0)	0(0)	0(0)	0(0)	0(0)
Unknown	0(0)	0(0)	2(0)	0(0)	2(0)
Total	558(128)	0(0)	766(185)	1(1)	1,325(314)

Figure 2. Proportion of confirmed COVID-19 cases by age group and nationality (n=1,325)

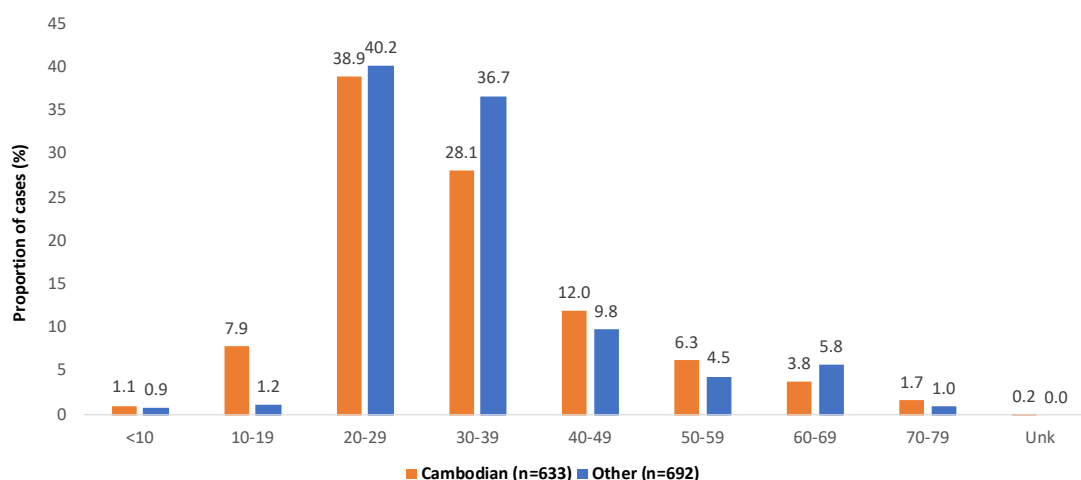




Figure 3. Number of ILI cases from ILI sentinel sites (n=7) by week, 2021 and 2018-2020

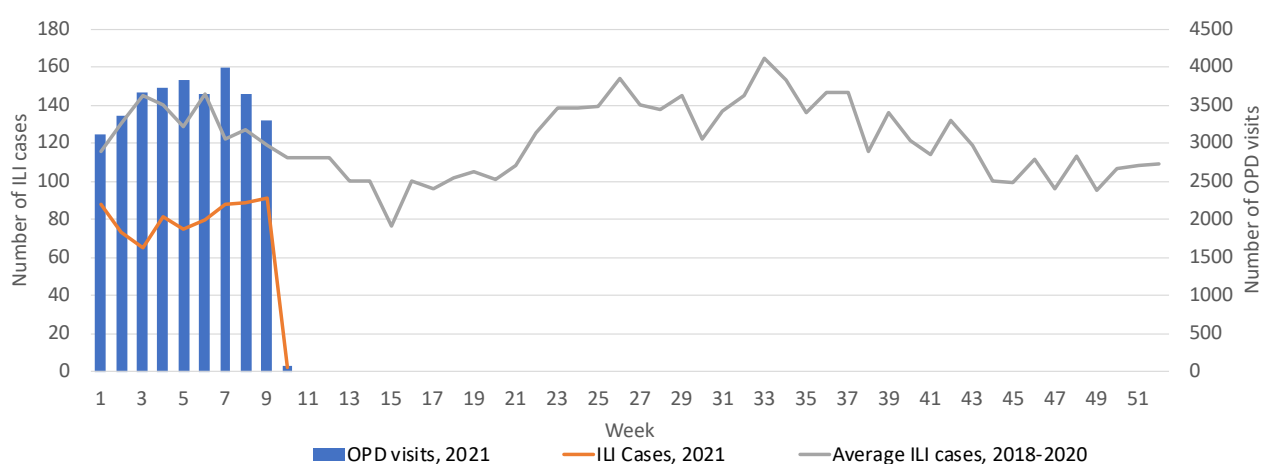
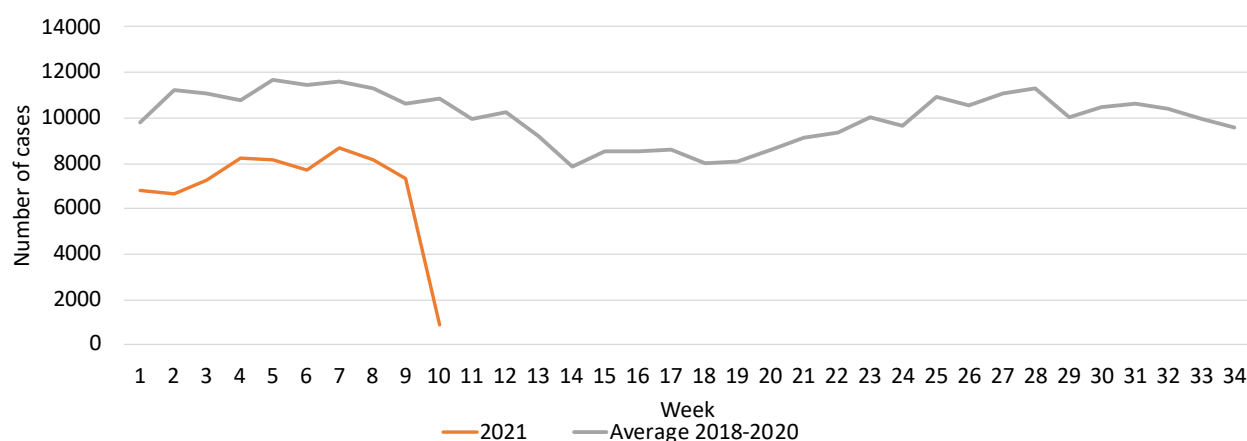


Figure 4. Number of patients with severe respiratory illness by week, 2021 and 2018-2020





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)/ Ministry of Economy and Finance (MEF) of four Working Groups to address the socio-economic 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 multisource dataset on testing and surveillance

Key Priorities

- A primary care strategy for COVID-19 is being developed by MOH departments. This document will include suggested roles and responsibilities for health centres in the potential scenario of community transmission, as well as guidance on clinical management and infection, prevention and control
- A survey of clinical management and infection prevention and control trainings is currently being implemented by MOH/DHS to support the development of a national curriculum for COVID-19
- A number of health system readiness assessments on hospital readiness, ICU capacity, oxygen, staffing, etc. are currently being conducted by MOH/DHS
- National programmes are developing specific COVID-19 preparedness and response plans
- Implementing the laboratory expansion strategy and molecular diagnostics training plan to ensure sustained testing for COVID-19 at National and Regional level
- Strengthening facility quarantine to reduce the risk of onward transmission with the development of simple job aids for facility staff
- The MOH guidance on surveillance and contact tracing for COVID-19 has been updated with the inclusion of an updated suspect case definition that incorporates living in an area with community transmission (updated 07 January 2021)
- Development of an implementation plan for use of multisource surveillance at subnational levels for risk assessment and decision making.
- Strengthening local preparedness in case of potential localized outbreak in the future and to minimize disruptions to the delivery of essential health services

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 ILI and 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 strategy for surveillance using community engagement 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. 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**
 - Multisource 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
- **International solidarity and cooperation**
 - Open and transparent health system response in the country
 - Close technical and operational cooperation between UN agencies and other development partners
 - High-level participation in international meetings, including regular coordination between National International Health Regulations (IHR) Focal Points

COVID-19 Vaccinations

- Vaccination program with COVISHIELD (AZ/SII) were suspended because of overcrowded facilities in Phnom Penh. Vaccinations will resume on 10 March.
- The E-registration service was established, but currently only the onsite registration system is functional.
- Vaccination services (Sinopharm) are now provided in all public hospitals across provinces and operational districts.
- MOH announcement on March 5 stated that the AstraZeneca (Covishield) vaccine will be provided to the priority groups, particularly those individuals aged 60 and above living in Phnom Penh, Kandal and Preah Sihanouk Province.
- As of 10 March 2021, there have been no reported cases from adverse effects of vaccines.



Non-Pharmaceutical Interventions (NPI)

February 20 Event

- As of 15 March 2021, five provincial authorities; Svay Rieng, Pailin, Preah Vihear, Kampot and Oddar Meanchey announced the suspension of weddings, parties and religious gatherings.
- On the 10 March, MoEYS announced the temporal closure of all public and private educational institutions/schools in Prey Veng province starting from 10 March 2021 until further notice.
- On 9 March 2021, Samdech Techo Hun Sen Prime Minister of the Kingdom of Cambodia gave a voice-recorded message requesting private companies, where possible to reduce the number of employees and have alternative working arrangements.
- On 9 March, the Kandal Provincial administration announced travel restrictions to Chrey Thom, Kandal Province.
- On 21 February 2021, MOH announced on the implementation of a QR Code system "Stop COVID-19" developed by the Ministry of Posts and Telecommunications.
- On 20 February 2021, a press release by PM announced the:
 - Closure of the clubhouse and other areas related to the COVID-19 cases
 - Encouraged all individuals linked to the 32 cases to come for testing
 - Reminded public to practice the three Do's and Don'ts and encouraged non-discrimination against Chinese people
 - Due to the 14-day mandatory quarantine, Cambodian workers are urged not to return from Thailand to participate in the Khmer New Year in April
- On 20 February 2021, the Ministry of Education, Youth and Sport issued a press release on restrictions on the implementation of health and safety measures at public and private educational establishments in Phnom Penh
 - Gatherings and sporting activities with more than 20 participants are temporarily suspended
 - Staff identified as contacts to strictly follow quarantine measures

Table 2. NPI implementation and lifting dates

NPI	Monitoring status					
	Date first implemented	Date last modified	Implementation		Partial lift	Lifted
			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	10 March 2021	Subnational	Required	Yes	No
Workplace Closure	None	None				
Mass Gatherings	3 April	29 December	National	Required	No	No
Stay at Home	Government recommends stay home if possible	None				
Restrictions on Internal Movement (within country)	9 April	09 March 2021	Subnational	Recommended	No	Yes
Restrictions on International Travel	27 March	11 November	National	Required	Yes	No
Others; specify in narrative	None	None	-	-	-	-