Situation Summary
Highlights of Current Situation Report

- A total of 1,593 COVID-19 cases including 121 deaths were reported in the last 7 days. Of the 1,593 cases, 5.27% (84/1593) were imported and 94.73% (1,509/1,593) were locally acquired;
- In total, 3,731 Delta cases (1,904 females) have been detected from 31 March to 9 September 2021, affecting 24 municipality and provinces, involving migrants returning from Thailand and Viet Nam, airline passengers, health care workers and community cases;
- As of 11 October 2021, 10 am ICT, 115,068 confirmed cases of COVID-19, including 2,527 deaths have been reported from Cambodia, of which 108,403 have recovered. A total of 19,217 (16.7%) cases were acquired overseas;
- Since January 2020, a total of 1,632,950 individuals have been tested using real-time polymerase chain reaction (RT-PCR), with a positivity rate of 5.4%. As of 10 Oct 2021, a total of 2,138,694 tests have been performed using RT-PCR.
- As of 30 Sep 2021, only RT-PCR test results are being reported in the official case numbers.

Upcoming Events and Priorities

Surveillance

- MOH with WHO support is conducting weekly transmission stage, situation assessments and analyses to understand the effectiveness of interventions using multisource surveillance at subnational level.
- WHO is supporting MOH to develop subnational guidance on monitoring implementation of and compliance to NPIs as part of calibrating subnational NPIs.
- WHO is providing support on monitoring ICU bed capacity (bed occupancy) at subnational level and strengthening surveillance systems to monitor severity of cases.
- WHO is technically supporting MOH to update the COVID-19 surveillance strategy in preparation for an endemic COVID-19 scenario.
- MOH with technical guidance and support from partners is conducting death investigations in Phnom Penh to strengthen understanding of causes of death, access to care, and investigate underlying transmission in the community.
- MOH and WHO are now working in five border provinces to strengthen Incident Management System (IMS), RRT capacity for investigations and use multisource surveillance to assess the epidemiological situation and implement targeted response, and strengthen safe quarantine.

Laboratory

- WHO, Institute Pasteur in Cambodia (IPC) and partners are providing technical and coordination support to NIPH, CCDC and COVID-19 laboratories to ensure expanded and sustained testing capacity.
- Laboratory expansion plan continues with 17 active laboratories and a further three planned in the coming months.
- NIPH is strengthening capacity to perform whole genome sequencing, in addition to IPC.
- NIPH has been working with IPC, WHO and partners to develop and support the implementation of the SARS-CoV-2 External Quality Assurance (EQA) program to ensure quality testing at all COVID-19 laboratories.
WHO is supporting NIPH to strengthen Whole Genome Sequencing (WGS) to detect mutations and monitor Variants of Concern (VoC)/Variants of interest (VoI) by procuring laboratory commodities, with support from WPRO.

WHO is providing technical advice and guidance to MoH on sampling strategies for SARS-CoV-2 genomic surveillance and has developed a protocol and is working with IPC to finalise.

WHO is providing technical advice and support to MoH to review and update the SARS-CoV-2 testing strategy.

**Healthcare delivery and pathways**

- Department of Hospital Services (DHS), Ministry of Health, plans for rolling out onsite coaching on oxygen therapy to cover all provinces by end of this year. The training is in progress, as of now, 2 provinces (including 15 referral hospitals) already received onsite coaching and 2 more provinces Takeo and Kampong Speu will receive training next week, which will include 6 RHs.
- Mentorship to strengthen sub-national level on clinical management, patient pathway, ICU bed capacity & efficiency and infection prevention control with special focus on border provinces is ongoing. 14 provinces received mentorship program and next week will continue for Mekong Hospital, Kampong Cham of province.
- Continue monitoring severe cases and ICU bed capacity (bed occupancy) through network with provincial level.
- Meeting of Working Group for investigation of Covid-19 death to discuss about death classification. The working group conducted two meetings to investigate the difference in terms of clinical severity, how many days they developed to negative results, and duration of discharge between Alpha and Beta variants.

**Risk communication and community engagement**

- WHO is closely working with MoH in strengthening community engagement, engaging local influencers, VHSGs, health care workers and local authorities in priority provinces.
- WHO is supporting monitoring of vaccination sessions across the country and continues to provide surge support for monitoring and reaching the unreached applying evidence based RCCE interventions.
- To help countries plan for the year ahead, WHO HQ had hosted a meeting in August 2021 where countries discussed ongoing obstacles and opportunities to pandemic influenza preparedness, shared their practical experience and expertise and developed risk-mitigation plans and strategies to secure core capacity building even in the face of COVID-19, details here
- COVID-19 disease in children and adolescents: Scientific brief (LINK)
- The COVID-19 pandemic has had a major impact on people’s mental health. During this year’s World Mental Health Day campaign (Mental health care for all: let’s make it a reality), WHO HQ has shared new materials, in easy-to-read formats, of how to take care of your own mental health and provide support to others too (LINK).
- The Regional Office launched the first WHO Western Pacific Innovation Challenge: Innovation for the Future of Public Health. Calling for solutions to better the health and well-being of people in the Region including for COVID-19 innovation. [Learn more about the Innovation Challenge](https://www.who.int/wpr/innovation) and [submit an application](https://www.who.int/wpr/innovation) before 31 October 2021.
Transmission Assessment

The current multi-source surveillance assessment indicates Phnom Penh, Preah Sihanouk, Kampong Speu, Kandal, Takeo, Kampot, Banteay Meanchey, Battambang, Kampong Cham, Kampong Chhnang, Prey Veng, Preah Vihear, Svay Rieng, Tbong Khmum, Stung Treng, Kampong Thom, Siem Reap and Oddar Meanchey are in stage 2 transmission (localized community transmission), the other 7 provinces (Koh Kong, Kep, Kratie, Pailin, Pursat, Mondulkiri, and Ratanakiri) are in Stage 1 transmission.

<table>
<thead>
<tr>
<th>Epi Update COVID-19</th>
<th>Tests</th>
<th>Cases</th>
<th>Deaths</th>
<th>Imported cases in the past 28 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tests</td>
<td>79,814</td>
<td>1,593</td>
<td>121</td>
<td>2,184</td>
</tr>
<tr>
<td>NAT Tests past 7 days</td>
<td></td>
<td>New cases past 7 days (1.4% 7-day)</td>
<td>Deaths past 7 days (4.8 % 7-day)</td>
<td>84 Imported cases past 7 days</td>
</tr>
<tr>
<td>2,138,694 Cumulative NAT Tests</td>
<td></td>
<td>115,068 Cumulative Cases</td>
<td>2,527 Cumulative Deaths</td>
<td></td>
</tr>
</tbody>
</table>

| Health Service Provision COVID-19 | 225 Hospitals admitting COVID-19 patients | 13,782 Total public hospital beds | 116 Number of hospitals with experience in COVID-19 case management (including 9 in PP, 27 provincial hospitals and 80 District Hospitals) |

DISCLAIMER: This report contains the best available data and information at the time of publication. As the COVID-19 pandemic represents an evolving situation, the information might change with emerging new information.
Epidemiology

Figure 1. Epidemic curve of confirmed COVID-19 cases by date of report, 2021*
*as of 30 Sep 2021 only RT-PCR test results are being reported in the case numbers

Figure 2. Number of ILI cases from ILI sentinel sites by week, 2021 and 2018-2020*
*Delayed reporting for some sentinel sites in recent weeks

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Figure 3. Number of patients with severe respiratory illness by week, 2021 and 2017-2020
Strategic Approach
National and Provincial Public Health Response

Incident Management Systems

- National COVID-19 Committee (CCC), chaired by Samdech Prime Minister
- Standing committee of CCC, Chaired by Deputy Prime Minister and Minister of Economy and Finance
  - Municipal-Provincial COVID-19 committees, chaired by Municipal-Provincial Governors
  - Ad Hoc committee on national COVID-19 vaccination
  - Ad-Hoc committee in charge of COVID-19 vaccine procurement
- Inter-Ministerial Committee, chaired by the Minister of Health, with Secretaries of State
- Sub-committee for Evaluation, Planning, and Strategy, chaired by Secretary of State of the Ministry of Health
- Sub-Committee for Management at Points of Entry and Quarantine, chaired by Director-General of the General Department of Intelligence, Ministry of National Defense
- Sub-Committee for Rapid Response and Investigation into Persons with COVID-19, chaired by Deputy National Police Commissioner, Ministry of Interior
- Technical and Treatment Sub-Committee, chaired by Secretary of State, Ministry of Health
- Sub-Committee for Laboratory Services, chaired by Secretary of State, Ministry of Health
- Sub-Committee for Education, Training and Public Affairs, chaired by Secretary of State, Ministry of Health
- Sub-Committee for Supplies and Finance chaired by Secretary of State, Ministry of Health
- Sub-Committee on Technology and Data chaired by Secretary of State, Ministry of Posts and Telecommunications
- Sub-Committee for Construction and Repair chaired by Deputy Commissioner of National Police, Ministry of Interior
- Sub-Committee for Management and Handling of Bodies of Persons with Confirmed or Suspected COVID-19 chaired by Secretary of State, Ministry of Interior
- 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

- On 5 March 2021, the draft law “Measures to Prevent the Spread of COVID-19 and other Dangerous Infectious Diseases” was approved by the National Assembly.
- 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 a multisource dataset on testing and surveillance.

Key Priorities

- WHO have supported MOH to conduct joint field missions to the provinces throughout April-September to support local preparedness and response for COVID-19.
A survey of clinical management and infection prevention and control training is being implemented by MOH/DHS to support the development of a national curriculum for COVID-19.

Number of health system readiness assessments on hospital readiness, ICU capacity, oxygen, staffing, etc. are currently being conducted by MOH/DHS.

National programs are developing specific COVID-19 preparedness and response plans.

The laboratory expansion strategy and molecular diagnostics training plan are being implemented to ensure sustained testing for COVID-19 at the National and Regional level.

Strengthening local preparedness to prepare for potential localized outbreak and other public health emergencies in the future and minimizing 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. Targeted testing of high-risk populations is 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 center 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.

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 a budget of $62 million for the first year.
- On 01 July 2021, Samdech Prime Minister introduced six COVID-19 response strategies that are aimed at preventing the importation of new variants, reducing cases, providing effective and standard treatment, strengthening contact tracing and management, handling of bodies and vaccination.

Past investments have built a functional public health system

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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.
  - Risk-based approach for the development of targeted communication materials for at-risk groups, including migrants and garment factory workers, markets, prisons, restaurants/pubs, etc.
  - Community engagement strategy being rolled out to encompass all aspects of surveillance and response for COVID-19, particularly in the event of community transmission.
  - Close coordination and collaboration with other UN agencies, INGOs, and other stakeholders on RCCE implementation, monitoring, adapting, and reinforcing.

- **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 Point.

**COVID-19 Vaccinations**

**As of 11 October 2021:**

- **COVID-19 vaccine updated**
  - The Royal Government of Cambodia received 35,606,640 doses of COVID-19 vaccines
    - 28,500,000 (80%) doses procured from China
    - 4,715,040 (13%) doses donated: People’s Republic of China (4,300,000) and the United Kingdom (415,040)
    - 2,391,600 (7%) doses though COVAX (including dose sharing from Japan and USA)
  - Next arrival: 124,800
    - 124,800 doses of Sinovac through COVAX, expected to arrive early October

**COVID-19 vaccination Roll Out**

1. **COVID-19 vaccination coverage of health care workers and the elderly ≥ 60 years old:**
   - 42,562 (98%) health care workers were vaccinated with first dose and
   - 42,556 (98%) health care workers were vaccinated with second dose of COVID-19 vaccine
   - 1,372,272 (100%) elderly aged ≥ 60 years old were vaccinated with first dose and
   - 1,289,628 (94%) elderly aged ≥ 60 years old were with second dose of COVID-19 vaccine

2. **COVID-19 Vaccination roll out for ≥ 18 years:**
   - 9,923,517 people were vaccinated with first dose of COVID-19 vaccine (99% of target population ≥ 18 years).
9,544,805 people were vaccinated with second dose of COVID-19 vaccine (95% of target population ≥ 18 years).
- The proportion of female receiving the first and second dose is 50% among total doses vaccinated.
- Out of 25 provinces, eighteen (18) provinces reported vaccination coverage with first dose ≥ 90%, and seven (7) Provinces reported 50% to 89%. Fourteen (14) provinces reported vaccination coverage with second dose ≥ 90% and eleven (11) provinces reported 50% to 89%

3. **COVID-19 Vaccination roll out from 12 years to under 18 years**:
- 1,768,292 children were vaccinated with first dose of COVID-19 vaccine (90% of target population from 12 to under 18 years old)
- 1,648,288 children were vaccinated with second dose of COVID-19 vaccine (84% of target population from 12 to under 18 years)
- The proportion of female receiving the first is 49% and second dose is 50% among total doses vaccinated.
- Out of 25 provinces, sixteen (16) provinces reported vaccination coverage of first dose ≥ 90%, and nine (9) Provinces reported 50% to 89% and Seven (7) provinces reported vaccination coverage of second dose ≥ 90% and eighteen (18) provinces reported 50% to 89%

4. **COVID-19 Vaccination roll out from 6 years to under 12 years**:
- 1,818,476 children were vaccinated with first dose of COVID-19 vaccine (96% of target population from 6 to under 12 years old)
- 531,268 children were vaccinated with second dose of COVID-19 vaccine (23% of target population from 6 to under 12 years old)
- Out of 25 provinces, twenty-four (24) provinces reported vaccination coverage of first dose ≥ 90%, and only Kampong Chhnang Province reported 50% to 89%
- The proportion of female receiving the first dose and second dose is 49% among total doses vaccinated.

5. **Third dose of COVID-19 Vaccination coverage**:
- 981,031 (10%) people aged ≥ 18 years old, including health care workers, frontline Government officials, people aged 60 years old and older, and immunocompromised persons, were vaccinated with booster dose of COVID-19 vaccine

**Vaccine Safety**:
- 206 AEFI cases were reported from 25 provinces and AEFI reporting rate per 100,000 doses = 0.82
- AEFI reporting rate per 100,000 doses for Sinovac vaccine = (95 cases) 0.62
- AEFI reporting rate per 100,000 doses for Sinopharm vaccine = (78 cases) = 1.11
- AEFI reporting rate per 100,000 doses for AZ COVISHIELD vaccine = (29 cases) = 8.97
- AEFI reporting rate per 100,000 doses for J&J vaccine = (3 cases) = 0.38

- Conducted field monitoring and supervision COVID-19 vaccination roll out on three vaccination sites in OD Kamchay Mear, OD Peam Chor and OD Preah Sdach of Prey Veng province and three vaccination sites in OD Porsenchey of Phnom Penh
- Conducted Rapid Convenience Assessment (RCA) at 9 villages of Prey Veng province bordering with Viet Nam to ensure all target populations are not left behind especially in villages bordering with Viet Nam, elderly populations, vulnerable populations
- Reaching to unreach strategy: Conducted a meeting with Director of Provincial Health Department and OD EPI Managers of Prey Veng province to discuss reaching
to the unreach strategy, and local authority were started listing of unvaccinated target population and provincial health department started mobilizing vaccination team to communities by close collaboration with village chief and local authorities.

Non-Pharmaceutical Interventions (NPI)

On 5 October, Phnom Penh City Hall required adults and children aged 6 years old and over to present their vaccination card or certificate when entering a school, a market or business location.

Phnom Penh Capital and seven other provinces (Banteay Meanchey, Kampong Cham, Kandal, Oddar Meanchey, Preah Vihear, Siem Reap and Svay Rieng) continue to suspend high-risk work and business activities, and have gathering restrictions and curfews.

On 3 October, the Royal Government issued a circular instructing concerned ministries-institutions, Capital-provincial administrations to closely monitor the implementation of health, administrative and legal measures for travelers using shared means of transport as well as resorts, restaurants and food stores to strengthen implementation of safe tourism measures and minimum standard operating procedures (SoP). The Government also instructed authorities to proactively provide education and take additional measures where necessary and urged ministries-institutions, the private sector, especially factories-enterprises to test their workers-employees after Pchum Ben.

On 4 October, Minister of Health and Chair of the Inter-Ministerial Committee to Combat COVID-19 urged Capital-provincial governors to dutifully strengthen implementation of the national “Acting Responsibly Together to Stop COVID-19 Transmission” campaign and to promote COVID-19 vaccination among their residents.

On 4 October, Ministry of Labour and Vocational Training encouraged owners or directors of factories-enterprises to test their workers-employees after Pchum Ben and workers-employees having Pchum Ben holiday adhere to 3 do and 3 don't measures, especially mask wearing, regular handwash, physical distancing during their travels using shared means of transport.

On 4 October, Ministry of Tourism instructed owners and staff of tourism services to participate in strengthening implementation of health, administrative and legal measures, especially safety tourism measures and minimum SoP and encouraged owners of tourism service businesses to test their tourism operators after Pchum Ben and regularly monitor their health. Tourism operators having Pchum Ben holiday are required to strictly implement 3 do and 3 don’t measures when traveling using shared means of transportation, gatherings with family members and people.
Table 2. NPI implementation and lifting dates

<table>
<thead>
<tr>
<th>NPI</th>
<th>Monitoring status</th>
<th>Implementation</th>
<th>Partial lift</th>
<th>Lifted</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Date first implemented</td>
<td>Date last modified</td>
<td>Geographical (national or sub-national)</td>
<td>Recommended or Required</td>
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<tr>
<td>Wearing Face Masks, Hand Hygiene, Respiratory Etiquette</td>
<td>None</td>
<td>03 May 2021</td>
<td>National</td>
<td>Required</td>
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<tr>
<td>School Closure</td>
<td>16 March 2020</td>
<td>15 September 2021</td>
<td>National</td>
<td>Recommended</td>
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<tr>
<td>Workplace Closure</td>
<td>None</td>
<td>None</td>
<td>National</td>
<td>Required</td>
</tr>
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<td>Mass Gatherings</td>
<td>3 April 2020</td>
<td>19 June 2021</td>
<td>National</td>
<td>Required</td>
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<td>Stay at Home</td>
<td>Government recommends staying home if possible</td>
<td>None</td>
<td>National</td>
<td>Recommended</td>
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<tr>
<td>Restrictions on Internal Movement (within country)</td>
<td>9 April 2020</td>
<td>29 July 2021</td>
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<td>Restrictions on International Travel</td>
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<td>11 November 2020</td>
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<td>Others; specify in narrative</td>
<td>None</td>
<td>None</td>
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