

Situation Summary

Highlights of Current Situation Report

- As of 10 September, 22 confirmed cases of COVID-19 have been reported. The last confirmed cases were reported on 14 August.
- A multisource surveillance meeting was held on 8 September to review the current transmission status and assess the risk of importation of Covid-19 from Viet Nam, Thailand, and Myanmar.
- Local governance strengthening workshops for COVID-19 preparedness and quarantine assessments for Luangnamtha and Bokeo were conducted from the 7th to 11th September, led by the Ministry of Home Affairs (MOHA) with the support of MOH.
- A Point of Entry (PoE) workshop was held at Savannakhet province to strengthen coordination between different sectors at ground crossings and the airport, led by the Department of Communicable Disease Control (DCDC).
- Validation of GeneXpert to test for SARS-CoV-2 is ongoing at the National Centre for Laboratory and Epidemiology (NCLE).
- RT-PCR testing capacity has been expanded to Savannakhet, and the province is testing specimens independently with the support of WHO.
- Tablets have been procured for the collection of healthcare capacity indicators in hospitals using the District Health Information Software (DHIS-2).
- There is ongoing preparation for conducting cleaning and disinfection training in three provinces (for 26 district health offices and Nam saat staff) in collaboration with Department of Hygiene and Health Promotion (DHHP).
- Baseline assessment data collection forms and tools for water, sanitation, and hygiene (WASH) indicators in healthcare facilities were developed by the Ministry of Health (MOH) and WHO. The data collection plan has been discussed with Nam saat and DHHP. Nam saat is working on the Direct Financial Cooperation Agreement (DFC) plan and selection of healthcare facilities for baseline assessment.

Upcoming Events and Priorities

- There will be a multisource surveillance meeting on 15 September to conduct a risk assessment for the resumption of international flights. A review of multisource surveillance is being planned for October and roll-out to the sub-national levels from November are planned.
- Preparations by NCLE to certify biosafety cabinets to expand mobile PCR capacity to all provinces are being undertaken.
- District health offices are rolling out community engagement activities to support event detection and contact monitoring at the village level.
- NCLE is holding the Annual Influenza Meeting on 24-25 September with a focus on harmonization of influenza and Covid-19 surveillance including distributing a Standard Operating Procedure.
- The fourth version of the clinical management guidelines for Covid-19 will be printed.
- The Centre of Communication and Education on Health (CCEH) has requested WHO technical support on Risk Communication training for provincial and district levels. They plan to set up the Risk Communication taskforce in provinces, and will be developing the SOPs, TORs, and have a team of trained risk communicators that can be deployed to respond to outbreaks.
- DCDC is revising the Q&A and SOPs for the 166/165 Hotline. They plan to automate part of the process to improve efficiency and screen out wrong calls with support from a telco company.
- PoE training is being organized by Ministry of Public Security in collaboration with MOH and partners and WHO is providing technical support.

- Data on ICU capacity, including available ventilators, are being collected and updated. Trainings on the use of tablets for data collection of these indicators to be conducted in the next month.
- Revision of the hospital accreditation standards to include COVID-19 related measures such as screening and testing (“new normal”) is going to take place with the lead of DHR.
- Workshop for establishing mechanisms for climate change and health data sharing is planned for the 1st week of October by the Department of Climate Change (DCC), Ministry of Natural Resources and Environment (MONRE) and DHHP. WHO is supporting in preparation and providing assistance.
- Subnational Training of Trainers and hospital level training for 50 hospitals implementing Safe, Clean and Green Healthcare Facilities and provision of supply and equipment are planned for 27-29 October.

National Transmission Assessment:

1-Imported cases There have been twenty-two cases reported as of 10 September, with the last reported imported cases on 14 August. Weekly Influenza-like illness (ILI) and Severe Acute Respiratory Infection (SARI) cases have remained stable at low levels compared to previous years, and sentinel site specimen collection has increased. SARI cases are managed as suspected COVID cases, with isolation and specimen collection being done. All specimens tested have so far been negative. Further, there are no reports of laboratory or case-reporting backlogs; no reports of undiagnosed respiratory clusters through event-based surveillance (EBS), and no observed increase in weekly hotline calls.

2	0	0	0
Imported Cases in past 28 days (100%)	Cases in past 28 days with no link (%)	Active Clusters	Active clusters with >3 generations

Epi Update COVID-19	Tests	Cases	Deaths	ICU Admissions
	3,241	0	0	0
	NAT Tests past 7 days (+36% 7-day)	New cases past 7days (0% 7-day)	Deaths past 7days (0% 7-day)	ICU Admissions past 7days (0% 7-day)
	43,597	22	0	0
	Cumulative NAT Tests	Cumulative Cases	Cumulative Deaths	Cumulative ICU Admissions

Health Service Provision COVID-19	618	0	22	N/A	310
	Health care workers trained in COVID19 Case Management	Healthcare worker cases reported past week	Hospitals admitting COVID-19 patients	ICU beds for COVID-19 patients <small>(Data is still being collected)</small>	Non-ICU Hospital beds for COVID19 patients

Epidemiology

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

Age Group	Female		Male	
	Cases	Deaths	Cases	Deaths
0-4	0(0)	0(0)	0(0)	0(0)
5-14	0(0)	0(0)	0(0)	0(0)
15-24	6(0)	0(0)	2(0)	0(0)
25-34	3(0)	0(0)	4(0)	0(0)
35-44	1(0)	0(0)	3(0)	0(0)
45-54	1(0)	0(0)	1(0)	0(0)
55-64	0(0)	0(0)	1(0)	0(0)
65+	0(0)	0(0)	0(0)	0(0)
Total	11(0)	0(0)	11(0)	0(0)

ILI/SARI surveillance

- ILI/SARI surveillance: 45 specimens (12 SARI and 33 ILI samples) collected from sentinel surveillance sites were tested for COVID-19 from 30 August to 5 September. One was invalid, but was negative for ribonucleoproteins, while the rest of the samples were negative. Cumulatively, 815 samples have been tested.
- Weekly ILI cases are observed to be lower than previous years, with an increasing trend observed starting week 20, but have stabilized since week 25.
- The weekly number of SARI cases has plateaued since week 15 with low level activity.
- One influenza positive case from ILI was reported in week 32, the first time since March 2020.

Figure 1. Weekly number of ILI presentations at sentinel sites, as of week 35, 2020 (Source: NCLE)

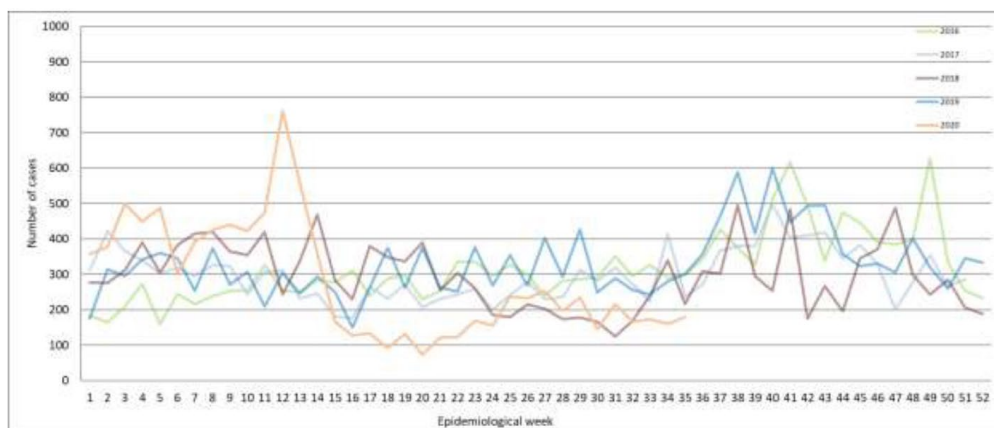


Figure 2: Weekly number of SARI cases reported to LaoEWARN, as of week 35, 2020 (Source: NCLE)

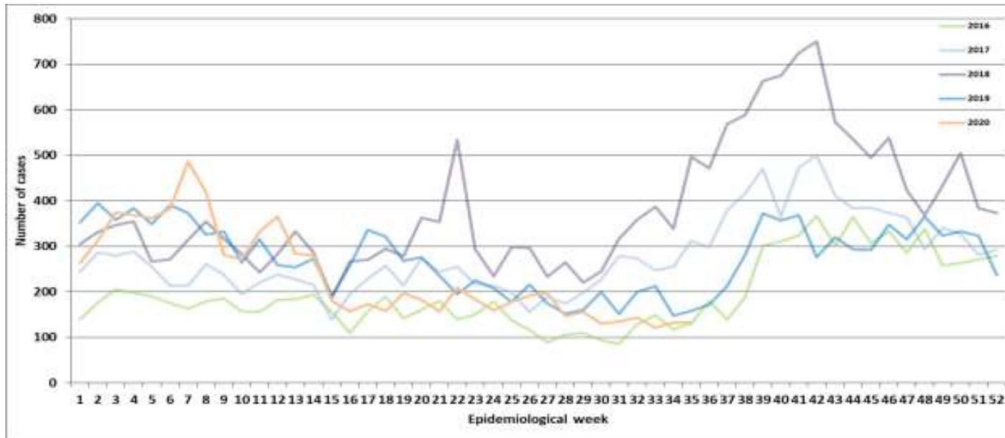
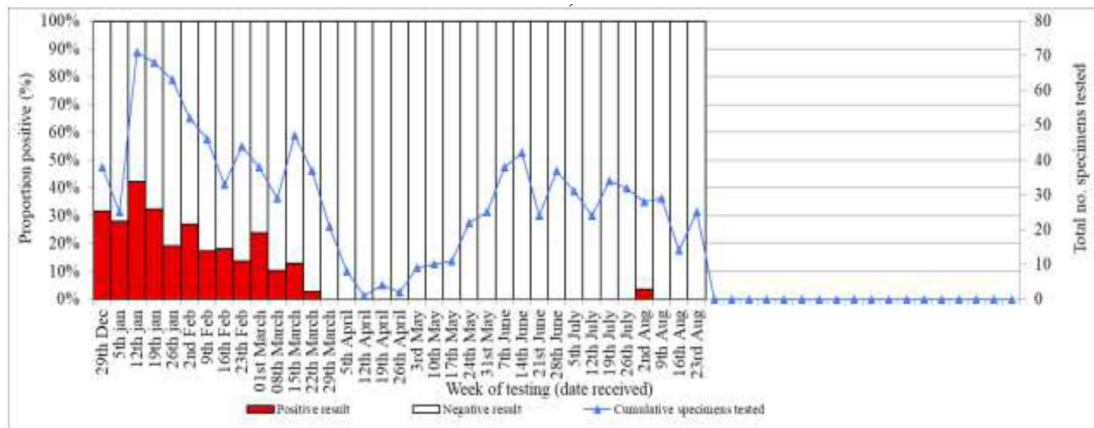


Figure 3: Proportion of ILI positive results from influenza RT-PCR testing by week, as of week 35, 2020 (Source: NCLE)



Strategic Approach

National and Provincial Public Health Response

- National EOC activated and continuing to meet on a daily basis. Co-Chaired by Health Minister and Vice Minister at Prime Minister Office to ensure strong coordination between health and other sectors.
- Finalisation of operational plans for the next 2 years to ensure COVID-19 response is adequately supported within the larger health system.
- Strengthening community engagement for COVID-19 response is critical to ensure implementation of the government's response plan. There are ongoing efforts to collaborate with relevant Ministries to strengthen the local government's role and responsibilities for community engagement.
- Continued efforts to monitor and maintain essential health services have been made to ensure performance of the broader health system during COVID-19.
- Transparency and visible leadership: MOH holds regular press conferences and publishes short updates online regularly.

Strategic Approach to COVID-19 Prevention, Detection and Control

- Establishment of multisource information surveillance to increase the net for early identification of cases.
- Increasing laboratory testing capacity through establishment of regional molecular laboratories. This will increase both the testing capacity and shorten the time for results to be available.
- Risk communication on COVID-19 and “new normal”.
- Community engagement to be strengthened to increase community ownership in health.
- Easing of restrictions, but also keeping the public informed to remain vigilant and the possibility of reintroduction of restrictions.

Best Practices / Lessons Learned

- Whole of government coordination, through ad-hoc committees, taskforces and EOC.
- Establishment and management of quarantine centres; incorporation of best practice for physical distancing, hygiene, WASH standards, mental health needs of people in quarantine and safety/security of those in quarantine centres.
- Planned expansion of the hotline as both a source of information for the public and a listening / surveillance point.
- Engagement of other sectors to assist with both the COVID-19 response and the larger socioeconomic impacts caused by COVID-19.

Challenges Encountered

- Discontinuation of screening at hospitals after relaxing public health and social measures –need hospital standards update and implementation monitoring for institutionalization for the “new normal”.
- Awareness raising of the revised suspected case definition for front-line health workers and an improved understanding on how to manage cases of severe acute respiratory illness are needed.

Non-Pharmaceutical Interventions (NPI)

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	3 February	None	National	Recommended	No	No
School Closure	17 March	2 June	National	Recommended	-	Yes
Workplace Closure	29 March	29 May	National	Required	-	Yes
Mass Gatherings	2 March	1 July	National	Recommended	Yes	Yes
Stay at Home	1 April	3 May	National	Required	-	Yes
Restrictions on Internal Movement (within country)	1 April	15 May	National	Required	-	Yes
Restrictions on International Travel	29 March	None	National	Required	No	No
Others;	None	None	-	-	-	-

Narrative Non-Pharmaceutical Interventions

- As of 10 September, majority of restrictions have been lifted, however international travel restrictions are still being implemented.
- The situation will continue to be monitored, particularly with the impending re-opening of international borders by neighbouring countries.
- Depending on the situation, NPIs will be reviewed and decisions will be made if they need to be reinstated, how strict they need to be, and which NPIs need to be reintroduced.

Figure 4: Epi curve by onset date* (n=22) and timeline of implemented and lifted social and public health measures in Lao, PDR

