



Viet Nam COVID-19 Situation Report #38

18 April 2021

Report as of 18 April 2021, 18:00

Situation Summary

Highlights of Current Situation Report

- The **latest community outbreaks** have been **brought under control with no locally acquired cases reported in the past 24 days** (the last cases were reported on 25 Mar from Hai Duong).
- **During the past week, 91 new cases were reported, all were imported.** These included **nine foreign experts** from India (2), UAE (2), the U.S. (1), Ukraine (1), Moldova (1), Uzbekistan (1) and China (1) and **82 Vietnamese nationals** who were repatriated from Japan (41), Russia (10), UAE (6), Philippines (6), Germany (3), Angola (3), the U.S (2), the RoK (1), Ukraine (1), Qatar (1), Thailand (1), Rumania (1) or returned to Viet Nam via Ha Tien PoE – Kiên Giang province (4) and Long PoE – An Giang province (2), both border with Cambodia.
- **As of 18 Apr**, Viet Nam has reported **2,784 laboratory confirmed cases** from 50/63 provinces including **35 deaths (PFC 1.26%)**; of those **2,505 cases (90%) have recovered**, **279 cases** under treatment. Majority of the cases were either asymptomatic (82.3%) or with mild symptoms (16.9%), there remain 1 severe case and 1 critical case. **The last case (#2414) from Hai Duong was discharged from hospital** on 16 Apr. (<http://cdc.kcb.vn/covid>).
- **16 April – MOH held a videoconference meeting connecting 63 cities/provinces** and their health sectors on accelerating COVID-19 prevention and vaccination efforts. Health Minister Nguyen Thanh Long **again requested local authorities to closely monitor the COVID-19 situation** and to **strictly implement pandemic preventive measures** in the time to come, **especially in border areas**.
- **16 April - the PM issued the Resolution No. 45** on Orientation of Direction and Operation and key tasks to be implemented which include also COVID-19 prevention and control. The PM requested the Health Minister and Chairman of all City/ Provincial People's Committees to take highest responsibility for COVID-19 preparedness and response measures in their localities. Four key directions include: *i) Strictly implementing COVID-19 prevention and control measures, applying active prevention, early detection, fast isolation and quarantine, effective treatment, quick stabilization of the situation; ii) Controlling immigrants and emigrants, especially through south-west borders; iii) MOH to urgently implement Resolution No. 21 in order to have earliest vaccines available, to develop mechanisms, policies and guidance for qualified enterprises to import vaccines and provide service vaccination; urgently implement safety vaccination; and iv) MOH to urgently develop immunity passport mechanism for different targeted groups and different countries which would contribute to achieving dual objectives of economic development and disease control.*
- **17 April - MoH set up five monitoring and supervision groups** led by the Minister and four Vice Ministers to supervise the implementation of regulations on immigration, medical quarantine and COVID-19 prevention and control, as well as vaccination activities in higher risk localities in the south-western region, bordering with Cambodia.
- **18 April - A field hospital is being set up in Kien Giang province**, bordering with Cambodia, with support from Cho Ray hospital (HCMC) in anticipation of possible resurgence of cases.
- Vaccine supply and deployment:
 - ✓ Vaccination implementation: Viet Nam launched COVID-19 vaccination campaign Phase 1 on 8 Mar 2021 focusing on the first priority groups: healthcare workers at healthcare facilities, front-line workers working on outbreak prevention and response in 19 provinces. AS of 18 April, **79.182 people have received the first shot in Phase 1 vaccination. Twelve among 19 provinces had completed.** Hai Duong, Ha Noi, Quang Ninh, Hai Phong, Hung Yen, Dong Thap, and HCMC are under implementation; all 19 provinces had reached to the coverage at least 80%.

- ✓ **The MoH has issued Decision No. 1888 / QĐ-BYT dated 15 Apr 2021 to establish the "Steering Committee on COVID-19 Vaccine Safety"** including scientists who are leading experts of wider areas including vaccination, infectious diseases, emergency resuscitation, intensive care, hematology, cardiology, and neurology.
- ✓ The Government tasked the MoH to organize the implementation of the program in a quick and absolutely safe manner towards completing the task by 15 May (*changed to by 5 May at the meeting on 16 Apr*), making sure that all vaccines delivered to Viet Nam through COVAX will be used before the vaccine expiry date.
- ✓ On 16 April, MOH organized the meeting with all 63 provinces and line Ministries where the overall COVID-19 response activities and vaccine safety were reemphasized. **The start of Phase 2 campaign** with 811,200 AZ COVID-19 doses was announced. In the meeting, COVID-19 overall response and ensuring the timely vaccination were emphasized by Minister following the COVID-19 situation update from GDPM, Phase 1 report and Phase 2 plan by NEPI, and safe vaccination guidance were shared by VAMS.
- ✓ **Phase 2 vaccine allocation plan** for 811,200 AZ COVID-19 vaccine doses through COVAX (Decision No.1821/QĐ-BYT) was amended with the Decision No. **1896/QĐ-BYT** dated 16 Apr 2021 signed by Vice Minister Truong Quoc Cuong.
 - Among 80,000 doses for Military forces, 35,000 doses will be saved to the Military, 34,350 doses to PCDCs in 44 cities/provinces for vaccination to the provincial Border guard, and 10,650 doses will be allocated to the five provinces of An Giang, Tay Ninh, Kien Giang, Dong Thap and Long An as additional doses due to recent affect to COVID-19.
 - 30,000 doses for Police officers were adjusted to be allocated to PCDCs of 62 cities/provinces and provinces will coordinate with Police sector to implement vaccination.
- ✓ Some provinces started Phase 2 on 16 April; **five cities and provinces** (Bac Ninh, Ha Tinh, Cao Bang, Phu Yen, and Bac Giang) vaccinated to **3,610 people as of 18 April**.
- ✓ **Binh Duong proposed purchasing over 3 million COVID-19 vaccine doses for local people**. The province is planning to use the local budget to buy the vaccines and will offer them free for residents.
- ✓ Domestic vaccines R&D: Six volunteers participating in the human trials of vaccine COVIVAC received second shots of the vaccine on 12 Apr. They are the first among 120 volunteers in the trials to receive the second shot, which is administered 28 days after the first one.
- **Issue of Immunity passport:** (still under consideration, no further updates)
 - 7 Apr - the Viet Nam MoH suggested that the country **may** first accept three groups of people with proof of vaccination against SARS-CoV-2 virus. These include 1) Vietnamese nationals left stranded overseas; 2) Foreign citizens/ experts/ highly skilled workers entering Viet Nam on business; and 3) Foreign travellers.
 - The protocol will only be applicable to certain vaccine types and certificates-issuing countries. The matter is being discussed and further studied and MOH will release a more detailed plan alongside with a guidance on quarantine and health monitoring for 'vaccine passport' holders in due course.
 - The Civil Aviation Administration of Viet Nam (CAAV) **plans** to implement vaccine passport programme. Those who hold vaccine passports confirming they have received COVID-19 vaccinations and tested negative for the coronavirus SARS-CoV-2 using the Real-time PCR technique will be allowed to enter Viet Nam with a minimum centralized quarantine period required.

Sub-national transmission assessment¹:

- **Hai Duong province remains in Stage 2** – Localized community transmission: no locally acquired cases were reported in past 24 days. There were however previously reported cases with unknown epi links.
- **Twenty-three (23) provinces are in Stage 1** – Imported transmission: of those, 5 provinces are from the latest community outbreaks including Ha Noi, Hai Phong, Quang Ninh, Binh Duong and HCMC as even though there were no locally acquired cases reported during past at least one month, there were imported cases reported from international flights during past weeks. Eighteen (18) other provinces also received imported cases from international/ charter flights including Khanh Hoa, Long An, Dong Thap, Kien Giang, Tien Giang, Ninh Thuan, Tay Ninh, Bac Ninh, Bac Giang, Ben Tre, Da Nang, Ca Mau, Quang Nam, Ninh Binh, Nghe An, Hung Yen, Thai Nguyen and Hoa Binh during past weeks. (Dong Nai moved to

¹ Transmission stage assessment continues to be adjusted based on evolving outbreak situation at subnational level.

Stage 0 last week after 4 weeks without imported cases).

- **The remaining 39 provinces are in Stage 0** – No transmission: no additional cases reported for at least 28 days and no clear signals of community transmission.

Other ongoing response includes:

- o Right after receiving a **notification from Japan on 25 Jan of the case from Viet Nam** –detected upon arrival in Osaka – with the **same variant found in the UK**, the Government has been taking **vigorous actions**. **All public health** measures being implemented this time are one-level higher (i.e. taking no-risk approach).
- o Fast and vigorous- whole system activated on 27 Jan night: NSC met, VC meetings with 2 provinces
- o Deputy Prime Minister (DPM), Chairman of NSC, ordered Hai Duong Province to stay focused to stamp out the outbreak within ten days, emphasizing that **every minute counts**.
- o Rapid case investigation with fast, thorough contact tracing (up to F3 & F4 of two index cases)
- o Sent national expert teams to Hai Duong, Quang Ninh, Dien Bien, Gia Lai to support local response.
- o A series of Government directions released, such as MOH telegrams, Prime Minister's Directive No.05; also at subnational levels.
- o Targeted community lockdown based on outbreak situation and risk assessment.
- o Reactivated technical teams at central level (contact tracing, information & rapid response, communication) to coordinate and support local response.
- o Reactivated/ strengthened **community COVID teams** at all levels.
- o Enhancing surveillance and testing, even up to F3 contacts in hotspots, test all presented with fever and cough
 - ✓ Mass testing approach applied using different strategies including targeted testing of higher risk groups as well as random testing of households and inpatients. Wide testing aimed at active and early identification of possible cases. There are currently 152 laboratories capable of detecting SARS-CoV-2 by Realtime RT-PCR technique with 98 designated as confirmatory laboratories. Testing capacity can be increased with guidance issued on pooling of lower risk specimens, up to 10 specimens may be pooled.
 - ✓ Full genome sequencing of the initial cases was conducted. NIHE reported the result of samples of Hai Duong COVID-19 cases, as SARS-CoV-2 B.1.17 variants. Hospital of Tropical Diseases (HTD) in HCMC also reported the result of a case whole travelled from Hai Duong to HCMC as SARS-CoV-2 B.1.1.7 variants.
 - ✓ Full genome sequencing of the Tan Son Nhat (TSN) airport HCMC determined as PANGO lineage A.23.1. The virus associated with this cluster does not have the E484K mutation reported in a sub-set of A.23.1 detected in the UK.
 - ✓ Full genome sequencing of the Japanese deceased case in Ha Noi revealed variant B.1.429 (otherwise known as CAL.20C) which has been circulating primarily in the US since late 2020 but has been detected globally in early 2021. So far there is no clear evidence of an increased or decreased transmissibility, virulence or severity of infection associated with the B.1.429. It is the first time in Viet Nam, to date.
- o Enhancing surveillance and testing – more than 1,307,000 samples have been collected for testing in the 13 affected provinces. An onsite laboratory in Hai Duong has been established with initial capacity of testing of about 5,000 tests per day and can be increased as needed. Three changes have been introduced during first week of Feb in the outbreak response strategy which included: i) Pool sampling; ii) Quarantine guidelines for under 5 years old children; and iii) Maintaining the flow of goods in the COVID-19 context.
- o After two weeks applied a 21-day quarantine and community lockdown, MOH has amended the quarantine period, back to a 14-day duration as before, given the latest scientific evidence on the new variants.
- o Field hospitals were established: 3 in Hai Duong, 1 each in Quang Ninh, Dien Bien and Gia Lai, ready to cater for increased number of cases. By 7 Apr, all the field hospitals have been disbanded. From 18 Apr - Given the ongoing community outbreaks in Cambodia, a field hospital is being set up in Kien Giang province, bordering with Cambodia.
- o The Ministry of Health issued the Resolution No 1215/ QLD-KD dated 17 Feb 2021 to approve importation of first 200,000 doses of AstraZeneca COVID-19 vaccine for emergency use.
- o **In order to improve laboratory response to future clusters MOH is working on drafting a guideline on the use of antigen RDTs.** Guideline proposes two uses of antigen RDTs; firstly, to routinely test healthcare

workers, quarantine staff and other frontline workers who come into contact with COVID-19 cases and their contacts and secondly, to be used in outbreak settings to test suspect cases and their close contacts when RT-PCR is not available, the laboratories are overwhelmed and/or the turn-around-time of RT-PCR is too slow to support a rapid response. RDTs may additionally be used to screen travelers on arrival for rapid detection and isolation of positives, however all travelers will still be testing with RT-PCR. In all situations, individuals with positive RDT results will be retested with RT-PCR, with final classification based on RT-PCR results.

COVID-19 VACCINE

- The Government issued the **Resolution No. 21/NQ-CP dated 26 Feb 2021 on COVID-19 vaccine procurement and deployment, signed by the Prime Minister**. The resolution highlights the priority groups and provinces for vaccination; specifies budget source and mechanism; and guides implementation.
- The PM has approved VND1.237 trillion (\$53.6 million) from the state budget to be spent on Covid-19 vaccines as the country speeds up mass inoculation.
- 23 Mar - GDPM received an announcement from UNICEF that vaccines delivery will be delayed due to production delays of the COVID-19 vaccine distributed through COVAX, the projected deliveries to all countries have had to be delayed, and the amount to be sent have been reviewed and adjusted. This means that Viet Nam will receive the first batch of vaccine under COVAX with 811,200 doses of the AstraZeneca Covid-19 vaccine by the middle of April.
 - ✓ The MoH has tried to access different sources of COVID-19 vaccine supplies. On 26 Mar, The Drug Administration of Viet Nam asked drug importers to urgently search for new supplies of COVID-19 vaccines (AstraZeneca, Pfizer, Johnson & Johnson, JSC Generium (Sputnik V), Moderna, Sinovac...) to increase supply and access to many safe and effective sources of vaccines.
 - ✓ More provinces plan to secure vaccines to provide its citizens for free, i.e. Bac Ninh People's Committee stated that Province would spend VND 185 billion (\$8 million) to vaccinate around 300,000 prioritized citizens; Khanh Hoa People's Committee plans to leverage VND140 billion (\$6.1 million) for this purpose
 - ✓ MOH organized remote training to ALL 713 districts on COVID-19 vaccination.
- Sputnik V (manufactured by Gamaleya institute) becomes the second COVID-19 vaccine got conditional approval in Viet Nam (as per Decision #1654/QD-BYT signed 23 Mar). The 2,000 doses of Sputnik V were given by Russian Govt as a 'gift' being stored at National EPI storage and are not yet included into the national allocation plan. POLYVAC is under discussion on collaboration with Gamaleya for its production.
- Vietnam Airlines is communicating with the MoH and relevant entities to buy Covid-19 vaccines for all its employees and their families as soon as possible. The vaccines would be provided for free to employees of Vietnam Airlines Group, which includes Vietnam Airlines, Pacific Airlines and Vasco.
- Viet Nam is also stepping up domestic vaccine R&D, with two manufacturers (Nano Covax and IVAC started their phase 2 CT in Feb – Mar). On 15 Mar, Viet Nam began first phase of human trials of COVIVAC - the second homegrown COVID-19 vaccine. The vaccine was developed by the Nha Trang-based Institute of Vaccines and Medical Biologicals (IVAC) and the Ha Noi Medical University since last May, using primary chicken embryo cell culture. Earlier, pre-clinical studies in India, the U.S. and Viet Nam showed that COVIVAC is safe and effective.
- Viet Nam may produce own COVID-19 vaccines by the end of the third quarter. Currently, four Vietnamese vaccines are in development, produced by Nanogen Pharmaceutical Biotechnology JSC, the Institute of Vaccines and Medical Biologicals (IVAC), Vaccine and Biological Production Company No. 1 (Vabiotech) and the Center for Research and Production of Vaccines and Biologicals (Polyvac).
- Viet Nam will receive additional 4.1 million COVID-19 vaccine doses in May as the country is stepping up efforts to secure enough vaccines for national vaccination program, said Minister of Health Nguyen Thanh Long.
- COVID-19 vaccination of 117,600 AZ doses have been implementing in the provinces without big safety concern.
- Eight cities and provinces including Tay Ninh, Long An, Ba Ria-Vung Tau, Khanh Hoa, Da Nang, Gia Lai, Hoa Binh, and Ha Giang have completed the first phase of COVID-19 vaccination with AstraZeneca (AZ) vaccine.
- **The AEFI surveillance system recorded about 33% of the people who received AZ vaccine having common side effects**, mostly with localized soreness, other side effects included fatigue, headache, muscle aches, chills, joint pain, and possibly some fever. These figures are similar to those provided by the manufacturer. To date Viet Nam has not recorded any cases of blood clotting following COVID-19 vaccination.

Update from past 7 days:

- **From 5 April – 18 April 2021, 91 new laboratory-confirmed cases of COVID-19 have been reported (increase 46.8% compared to last week); all of cases were imported**, and without any additional deaths. Number of RT-PCR conducted from 25 Jan was approximately **1.309.042 tests**.
- **Hai Duong returned to a new normal from 1 April 2021**; however **non-essential services** (i.e. bars, discotheque, massage, gym services, etc.) **remain suspended** at least until 1st May. All field hospitals in country have been disbanded. Ha Tien field hospital in Kien Giang province (bordering with Cambodia) is being set up with a capacity up to 400 beds.
- Cumulatively, 910 locally acquired cases have been reported from Hai Duong related community outbreaks, affecting 13 cities/ provinces across the country. **Almost 80% (726 cases) of cases were from Hai Duong**. See Figures 1 and 2 for epi curve and case distribution by province from previous reports.
- **As of 18 Apr 2021**, Viet Nam has reported a total of **2,784 laboratory confirmed cases** of COVID-19, including 40 health care workers (HCWs), from **50 out of 63 cities/ provinces** in country, including **35 deaths** (PFC $\approx$ 1.26%) (see Figure 2). All the 35 death cases were related to the community outbreak in Da Nang (31 from Da Nang, 3 from Quang Nam and 1 from Quang Tri); most of them had long-term chronic diseases and comorbidities.
 - Of the 2,784 cases, 1,213 cases (43.6%) are imported. About 93% are Vietnamese (see Figure 1).
 - The ages of cases range from 2 months to 100 years old. About 58.6% of all cases are in the 30-69 years old group, 3% above 70 years old, and the remaining 38.4% under 30 years old. The proportion of male vs female is around 50.2% vs 49.8%. (See Table 1).
 - Approx. 182 clusters have been recorded including from households, schools, workplaces, bus/train stations and one cluster in Hai Duong that has not passed 28 days without new cases reported.
- **Other Non-pharmaceutical interventions (NPIs)**
 - Dozens of tons of essential goods, including food and medical supplies were allocated to Vietnamese Cambodians over the past week amidst the spread of the COVID-19 pandemic in the neighbouring country. The relief aid, contributed by agencies and organisations in Viet Nam's provinces bordering Cambodia like Binh Phuoc, Dong Nai, An Giang and Dong Thap, have also come to those working on the frontline against COVID-19 in the neighbouring country.
 - Community lockdown and social distancing: From 1 Apr, Hai Duong went back to a new normal, however continued suspension of non-essential services including bars, discotheque, massage, gym, etc., at least until 1st May. All field hospitals have been disbanded.
 - *Details before 12 Apr: refer to previous reports*
 - Travel restriction: Only Thua Thien - Hue continues to apply PCR testing and centralized quarantine for people coming from lockdown areas in Hai Phong, Binh Duong and HCMC due to the latest illegal immigration of COVID-19 cases from Cambodia reported on 26 Mar.
- **Incoming and exit travellers: from 12 – 17 Apr**
 - Through ground crossing:
 - Viet Nam - China: Immigrants: 11,365 (11,236 legal, 129 illegal), emigrants: 11,167
 - Viet Nam - Lao PDR: Immigrants: 6,562 (6,561, 1 illegal), emigrants: 6,515
 - Viet Nam - Cambodia: Immigrants: 260 (121 legal, 139 illegal, updated 18 Apr), emigrants: 128
 - Through airlines:
 - Foreigners: Immigrants: 1,037, emigrants: 1,264
 - Vietnamese: Immigrants: 4,966, emigrants: 2,422
 - Number of immigrants and emigrants from selected countries
 - ROK: immigrants: 510, emigrants: 610
 - Japan: immigrants: 108, emigrants: 152
 - USA: immigrants: 82, emigrants: 101
 - Schengen countries: immigrants: 49, emigrants: 73

○ **Case management:**

- **2,505 cases (89.9%) have recovered.** Case #1823 is still in critical condition at NHTD#2.
- Majority of the current 248 cases in treatment are either **asymptomatic (82.3%)** or with **mild symptoms (16.9%)**, remaining **1 severe case** with non-invasive ventilation and **1 critical case** with mechanical ventilation.
- 18th April, Kien Giang province (bordering with Cambodia) prepared to establish a field hospital
- 16th April, last case in Hai Duong was discharged from hospital. All field hospitals in Hai Duong disbanded.
- 8th April, Ha Noi started testing SARS-CoV-2 for more than 26,000 HCWs working in public health facilities.
- MoH has provided training on clinical management of SARI cases in the COVID-19 context for ICUs, ERs, ID doctors in targeted hospitals; and training on IPC for nursing force in selected provinces.

○ **Numbers of quarantine:**

- **A total of approximately 39,340 people are currently placed under quarantine.** Of those **535** were quarantined in HCFs; **23,567** were centralized quarantined; and **15,238** were under self-/home quarantine.
- **Cumulatively:** from beginning of the outbreak to date, more than **15.7 million** people have been placed under quarantine.

○ **WHO supported activities & collaborative activities under vaccination:**

- Coordinate with WPRO on WHO tech advice for Ph3 CT design and its evaluation: ASTT will discuss with VM on 30 or 31 March.
- Support GDPM to conduct training for AEFI causality assessment committee at provincial level
- Support GDPM in developing tech info sheet on vaccine and immunization safety. Health Minister Long stated it during the meeting today: <https://ncov.moh.gov.vn/web/guest/-/6847426-2189>
- Support GDPM in developing the allocation plan for COVAX 811,200 doses

○ **Risk communication**

- Joint media release was issued by MOH, WHO and UNICEF, addressing safety of the Astra Zeneca vaccines. The media release is available in this link: [Joint Media Release on Vaccine Safety](#).
- Q&A on COVID-19 vaccines expiration dates has also been issued by MOH-WHO-UNICEF.
- Trainings for health workers, communication officers and media on vaccine safety communication are planned for April and May, to be jointly launched by MOH Department of Communications and WHO.
- Documentation of the COVAX vaccines roll-out from the monitoring visit on 22 April
- Communication on prevention messages continues on multiple platforms, including social media ads.

○ **Media monitoring and social listening**

- Reports in the local media focus on vaccine safety, expiration dates of the vaccines, and administration of the vaccine to priority groups. Some of these reports are highlighted below.
- COVAX-sponsored vaccines must be administered before May 15
- April 16, 2021 | 1:47 pm <https://nongnghiep.vn/truoc-ngay-15-5-phai-tiem-xong-vaxin-phong-covid-19-do-covax-tai-tro-d288564.html>
- The batch of vaccines from COVAX has an expiry date of May 31, 2021. MOH requested all provinces to finish inoculation before May 15 at the latest. The vaccines that are not administered must be returned to MOH.

The level of AEFI related to COVID-19 vaccines in Viet Nam is very low

- April 16, 2021 | 13:47 <https://netnews.vn/Muc-do-phan-ung-sau-khi-tiem-vaccine-COVID-19-tai-Viet-Nam-rat-thap-thoi-su-1-0-2635776.html>

HCMC, Da Nang to vaccinate journalists against Covid-19

- April 15, 2021 | 04:00 pm GMT+7 <https://e.vnexpress.net/news/news/hcmc-da-nang-to-vaccinate-journalists-against-covid-19-4263426.html>

- Ho Chi Minh City and Da Nang are planning to vaccinate journalists operating in areas with a high risk of coronavirus infection.

Health ministry wants quarantine for vaccine passport holders halved to 1 week

- April 16, 2021 | 09:09 am GMT+7 <https://e.vnexpress.net/news/news/health-ministry-wants-quarantine-for-vaccine-passport-holders-halved-to-1-week-4263688.html>
- The Ministry of Health has recommended that the centralized quarantine period for those entering the country with a Covid-19 vaccine passport should be halved to seven days.

Recent and upcoming Events and Priorities

- WHO continues supporting MOH in various technical areas, providing technical advice and scientific updates especially with relates to the mutated variants; supporting ongoing efforts on COVID-19 vaccine development and vaccine deployment and distribution plans, effective communication (e.g. reinforcement of preventive measures communications through social media such as reactivation of Facebook ads, produced social media cards on laboratory testing) - *See previous report*
- The MOH has requested support for approximately 200,000 primers and probes and 300,000 further specimen collection kits. WHO CO have been working with WPRO and HQ to gain the greenlight for request. Greenlight was received from MOH on the 5th of April. Shipments have arrived in Viet Nam as follows; specimen collection kits split between two shipments arriving on 11th and 17th of April and primers/probes arriving on the 12th April. Materials will be distributed between NIHE, PI-HCM and PINT.
- WHO working with MOH on draft guidelines on use of antigen RDTs, meeting was held on 12th April to discuss draft guidelines.
- WHO working with counterparts at regional institutes and other international partners to provide refresher training for laboratory staff on testing for SARS-CoV-2, with a focus on ensuring quality of testing and providing updates on variants of concern. Training was held for the central costal region 15-16th April and is being organized for Southern regions in May/June.

Transmission Stage Assessment

Overall assessment – the country has passed 24 days from the last locally acquired cases reported in in Hai Duong province on 25 March.

Sub-national level

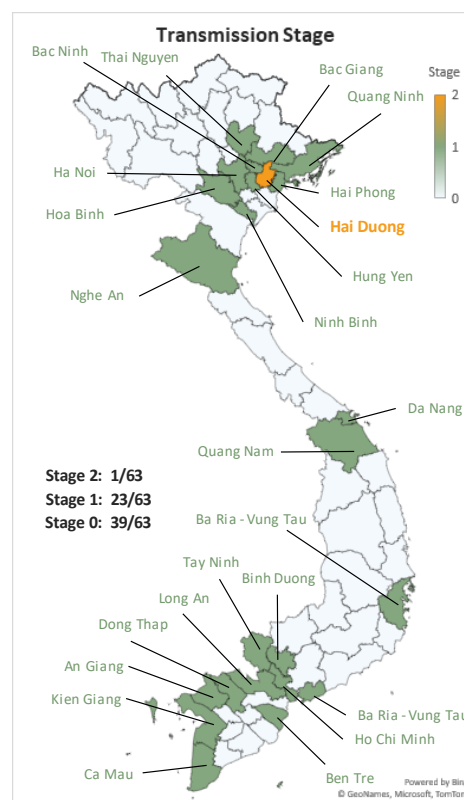
- Hai Duong remains the only province under Stage 2.** The last locally acquired cases were reported 24 days ago. There are no observed signals of a large-scale community transmission.
- 23 provinces are in Stage 1:** Ha Noi, Hai Phong, Quang Ninh, Binh Duong, HCMC, Khanh Hoa, Long An, Dong Thap, Kien Giang, Tien Giang, Ninh Thuan, Tay Ninh, Bac Ninh, Bac Giang, Ben Tre, Da Nang, Ca Mau, Quang Nam, Ninh Binh, Nghe An, Hung Yen, Thai Nguyen and Hoa Binh which reported imported cases from international flights within the past 28 days.
- The remaining 39 provinces are in Stage 0.**

As Viet Nam started resuming selected international flights, it is expected that there is increased number of imported cases in coming weeks. Besides, given the escalating outbreak situation in Cambodia, cases among the incoming travelers and repatriated citizens from Cambodia are also expected. During past week, 6 COVID-19 cases were detected (decreased 3.3 times compared to last week) among 260 incoming travelers (decreased 6.8% compared to last week) of those 139 were illegal travelers (increased 2.2% compared to last week). The risk of community transmission is high especially if cases among the illegal incoming travelers went undetected.

*WHO/WPR Transmission Assessment criteria

- Stage 0 – No transmission:** No clear signals of transmission for at least 28 days.
- Stage 1 – Imported transmission:** Recent transmission is imported from another sub-national or international area or is linked to such importation within 3 generations, no clear signals of locally acquired transmission.
- Stage 2 – Localized community transmission:** recent locally acquired and localized to place(s), and there are no clear signals of large-scale community transmission.
- Stage 3 – Large-scale community transmission:** recent transmission is locally acquired and not specific to place(s) or population sub-group(s). The risk of infection for most people in this area is high

Assessment done by WHO Viet Nam with concurrence from the Ministry of Health of Viet Nam.



Epidemiology

Epi Update COVID-19

Tests	Cases	Deaths	ICU Admissions
35,114	91	0	0
NAT Tests past 7 days (-0.09% 7-day)	New cases past 7 days (+46.8% 7-day)	Deaths past 7 days (-% 7-day)	ICU Admissions past 7 days (+0 cases 7-day)
2,882,890	2,784	35	60 (TBC)
Cumulative NAT Tests	Cumulative Cases	Cumulative Deaths	Cumulative ICU Admissions

99%	TBU	1 (in Hai Duong, not yet passed 28 days)	0
Imported Cases in past 28 days (210)	Cases in past 28 days with no link (0)	Active Clusters	Active clusters with >3 generations

Health Service Provision COVID-19

Most of national hospital staff	0	91	371	0 (TBD)
Health care workers trained in COVID19 Case Management	Healthcare worker cases reported past week	Hospitals admitting COVID-19 patients past week	ICU beds for COVID-19 patients (estimated in 6 currently affected provinces) (out of approx. 3,500 beds nationwide)	Non-ICU Hospital beds for COVID-19 patients (As of 7 Apr - All field hospitals disbanded)

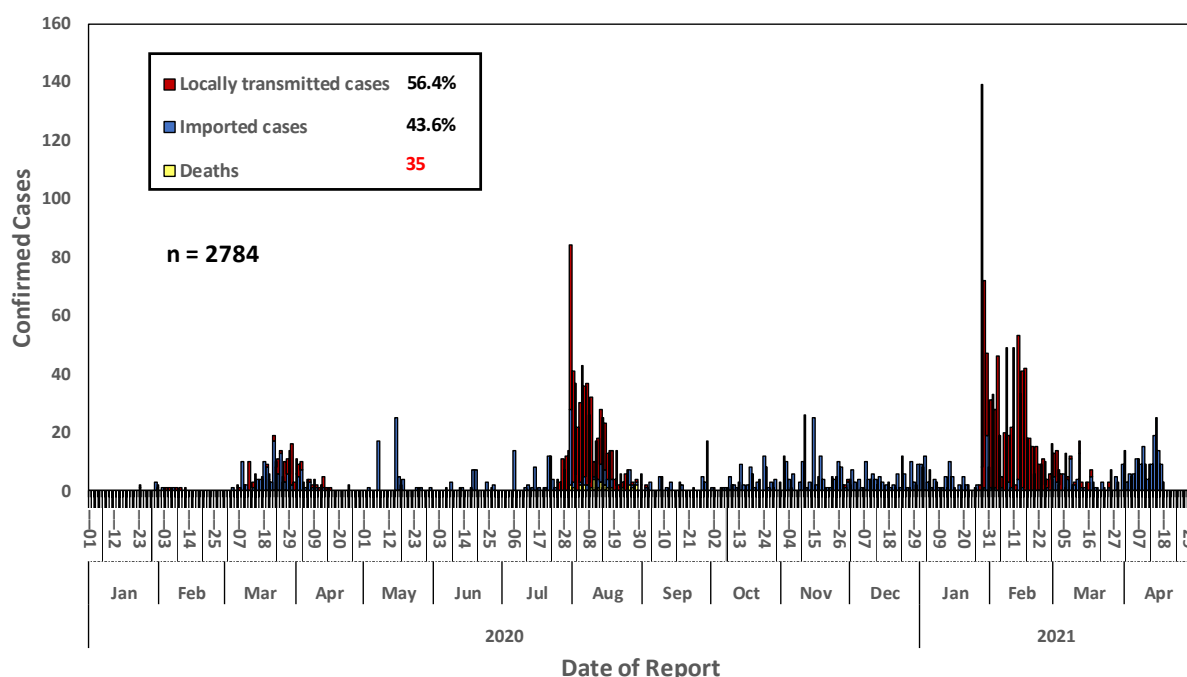


Figure 1. Epidemic curve of COVID-19 laboratory confirmed cases, Viet Nam, by date of reporting, as of 18 April 2021

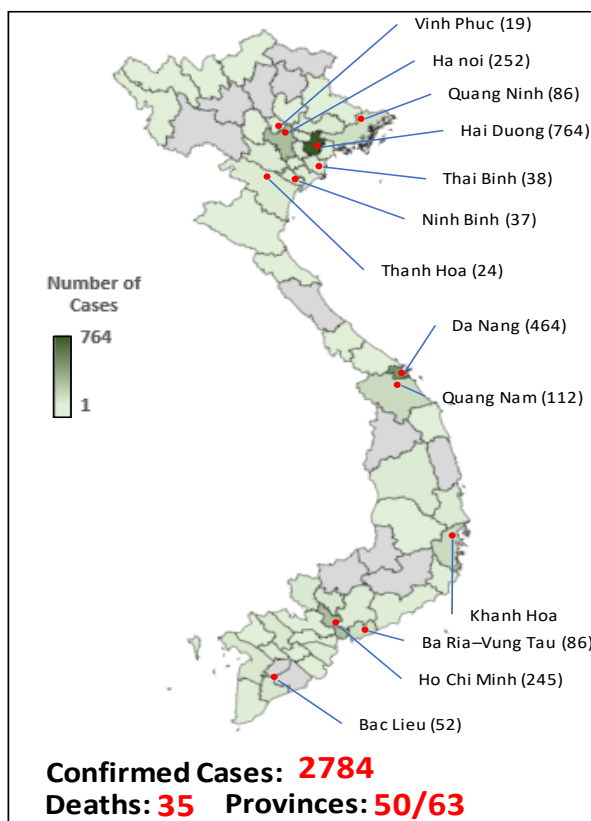


Figure 2. Distribution of cumulative COVID-19 laboratory confirmed cases by place of detection, Viet Nam, as of 18 April 2021

Age Group	Female		Male	
	Cases	Deaths	Cases	Deaths
0-9	67 (1)	0 (0)	58 (0)	0 (0)
10-19	79 (0)	0 (0)	76 (0)	0 (0)
20-29	369 (19)	2 (0)	420 (24)	0 (0)
30-39	394 (3)	1 (0)	389 (23)	1 (0)
40-49	173 (3)	1 (0)	184 (5)	0 (0)
50-59	160 (4)	5 (0)	152 (4)	3 (0)
60-69	100 (1)	6 (0)	81 (1)	6 (0)
70-79	30 (0)	2 (0)	23 (0)	1 (0)
80-89	13 (0)	5 (0)	9 (0)	1 (0)
90+	2 (0)	0 (0)	5 (0)	1 (0)
Total	1387 (31)	22 (0)	1397 (57)	13 (0)

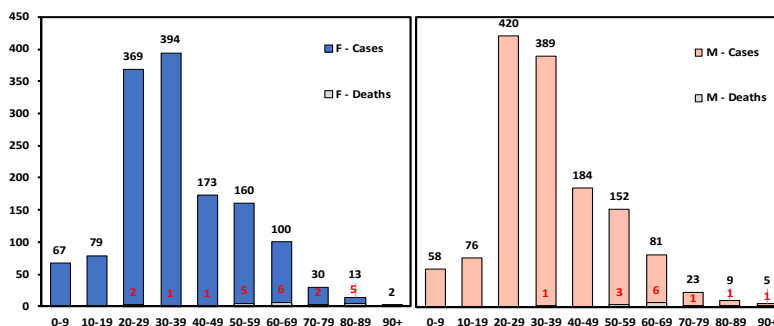


Table 1. Cumulative and new (past 7 days) cases and deaths by age and sex, as of 18 April 2021



Strategic Approach –

National and Provincial Public Health Response

In January 2020, the Government of Viet Nam rapidly issued the first National Response Plan and assembled the National Steering Committee (NSC) to implement this plan. The NSC is central to the command and control governance of the COVID-19 response. The Committee is chaired by Deputy Prime Minister Vu Duc Dam with high-level representation from 14 Ministries and sectors, the National Assembly, media, and information technology companies, and oversees four sub-committees in technical and logistic areas. The plan outlines clear roles and responsibilities of each sector and levels of authority – central, provincial, district, and commune. The rapid mobilization of financial and human resources allowed the Prime Minister and Deputy Prime Minister to lead a whole-of-society approach, based on the Prime Minister's Directive No. 05/CT-TTg, toward combating COVID-19, with the principle of “protecting people's health first.” The Government's commitment had remained the same, even one-level higher given the recent important events including Vietnamese New Year, the 13th National Party Congress, ongoing national efforts to achieve dual objectives of disease control and economic development, in the response to the most recent community outbreaks initiated from Hai Duong and Quang Ninh provinces. This has resulted in a quick containment of the outbreak across the 13 affected cities/ provinces after just more than one month (from end of Jan to early Mar). The country is now actively implementing COVID-19 vaccination (the biggest campaign ever which commenced on 8 March) based on the vaccine procurement and deployment plan that was developed with a consultation and planning support from WHO, UNICEF and other partners.

Strategic Approach to COVID-19 Prevention, Detection and Control

Viet Nam has successfully and rapidly implemented necessary COVID-19 prevention, detection, and control activities under the strong leadership of the Government and effective multi-sectoral coordination and collaboration. There have been persistent and strict applications of key outbreak response measures: **early detection – testing and treatment – contact tracing – isolation/quarantine, along with strategic risk communications**. This was evident during the first phase of the outbreak response and once again reconfirmed in the response to the latest outbreaks (i.e. Da Nang related outbreaks in Jul – Aug 2020; Hai Duong related community outbreaks in Jan – Mar 2021) which have been successfully controlled. To support Government efforts with early detection and control further community transmission, WHO continues to provide additional laboratory test kits and reagents for mass and targeted testing, especially in the affected provinces. WHO Country Office has also been working with UNICEF to support the vaccine deployment plan including development of guidance, training, logistics and vaccine safety (AEFI) surveillance. For years, WHO has been supporting Viet Nam in building and strengthening the capacities for managing disease outbreaks and public health emergencies, as required by the International Health Regulations (IHR) (2005). Guided by the APSED III, Viet Nam has made significant progress in enhancing capacity in the required technical areas and all the years of investment are reflected in the country's ongoing response to COVID-19.

Best Practice/Lessons Learned

The Response Enabling Factors and Adjustments to the Response

- Strong government leadership with effective multi-sectoral collaboration and coordination and successful mobilization of national resources using a whole-of-society approach.
- Early activation of a strong response system, including surveillance and risk assessment, laboratory, clinical management and IPC, and risk communication, which enabled Viet Nam's successful control of COVID-19.
- WHO supports long-term country investment to strengthen the health emergency response after previous epidemics, and is providing technical support in necessary areas, including the continuation of essential public health services.



World Health
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Viet Nam

Coronavirus Disease 2019 (COVID-19) Situation Report #38

18 April 2021

Report as of 18 April 2021



From the **MOH meeting connecting with 63 cities/ provinces** last **Friday 16 April**, **six main lessons learned** in dealing with the country's third wave of cases, were drawn and reached the consensus among the health ministry officials and experts. **These lessons are:**²

- First, centralized quarantine of suspected COVID-19 cases and direct contacts of the infected – not self/home-quarantine – is still the solution to prevent the spread of the virus in the community, as shown in the case of recent Hai Duong outbreak and Da Nang outbreak last year.
- Second, targeted lockdowns – with mass lockdowns still can be considered if needed – and increased testing kept infections under control while impacts on socio-economic development could be minimized.
- Third, the involvement of police force in contact tracing efforts in Hai Duong proven to be valuable and replicable.
- Fourth, preparation and co-ordination between different agencies were needed to ramp up testing (including pooled testing) as fast as possible to contain the outbreaks.
- Fifth, the quick establishment of field hospitals using existing facilities to treat COVID-19 patients was a must when cases exploded to ensure that routine HCFs can provide treatment services to other diseases/conditions and not being disrupted or overwhelmed.
- Sixth, the deployment of central-level health officials to hotspots helped to achieve better co-ordination with local authorities to ensure timely and appropriate responses.

Non-Pharmaceutical Interventions (NPI)

Narrative Non-Pharmaceutical Interventions

Viet Nam instituted a gradual roll-out of comprehensive NPIs based on the evolving context/evidence, thus they did not come as a “shock” to the public. Such interventions were implemented along with strong economic relief efforts, thereby minimizing the economic impact to businesses and households, especially vulnerable populations, during these uncertain times. As the global situation of COVID-19 has continued to evolve with complexity, the country borders have basically remained close except for specific circumstances. This whole-of-society approach is being one more time well reflected in the ongoing response to community outbreaks across the country under a strong leadership and guidance of GoV, NSC and MOH. (**Latest updates** – see also Key updates section on pages 1 to 4).

² <https://vietnamnews.vn/society/926772/health-minister-tells-localities-to-use-covid-19-vaccines-before-may-5-or-lose-them.html>