



Viet Nam Coronavirus Disease 2019 (COVID-19) Situation Report #30 21 February 2021

Report as of 21 February 2021



Viet Nam COVID-19 Situation Report #30

21 February 2021 Report as of 21 February 2021, 18:00

Situation Summary

Highlights of Current Situation Report

- Almost one month since the new community outbreaks emerged in country which initiated from Hai Duong and Quang Ninh provinces on 25 Jan, - Case Investigation and response have been ongoing, even throughout the traditional new year (Tet) last week.
- From 25 Jan to 21 Feb, 791 locally transmitted cases have been reported from thirteen (13) cities/ provinces across the country (with one additional provinces in past 7 days). These include: Hai Duong (611); Quang Ninh (60), HCMC (36), Ha Noi (34), Gia Lai (27), Binh Duong (6), Bac Ninh (5), Dien Bien (3), Hung Yen (3), Hoa Binh (2), Bac Giang (2), Hai Phong (1), and Ha Giang (1). See Figures 1 and 2 for Epi curve of the current outbreak and case distribution by province.
- Even though most of the cases reported are linked with the outbreaks in Hai Duong (POYUN company in Chi Linh city) and Quang Ninh (Van Don international airport), there have been increasing number of cases with unknown or unclear epidemiological links in Hai Duong, Gia Lai, HCMC and Ha Noi. Investigations are ongoing.
- Nine provinces among 13 provinces have not reported additional cases in at least past 7 days.
 - Hai Duong: while whole province social-distancing commenced from 0h00 16 Feb, additional cases continued to be reported from district hotspots (Cam Giang, Chi Linh, Hai Duong cities), unknown epilinked cases still under investigation. New cluster of cases with unknow links started on 21 Feb in Kim Thanh district. Investigation is ongoing. Possible cross infection within centralized quarantine facilities is being monitored. Interventions measures being taken including spacing-out of facilities (i.e. increased 3 military-managed facilities in the province). There is a need to further increase testing including community surveillance and screening for early detection of cases.
 - Ha Noi: investigation is still ongoing for the Japanese deceased case (reported on 15 Feb). No additional cases were reported in past six days.
 - **HCMC:** the situation seems under control. No cases reported in the past nine days. Mass testing including random testing in community and targeting high risk groups (i.e. hospital staff; patients in ICU and those with chronic underlying condition; daily testing for Tan Son Nhat airport staff one day before their shift) continued, so far no additional cases detected).
- Majority of the cases either asymptomatic (82.5%) or with mild symptoms (14.7%), the remaining cases are severe, with severe prognosis and three cases are in critical condition.
- Sub-national transmission assessment1:
 - √ Three provinces are in Stage 2 Localized community transmission (Hai Duong, Quang Ninh, HCMC): cases with unknow/ unclear epi links.
 - √ The remaining 10 provinces are in Stage 1 Imported transmission: cases reported in these provinces were imported from either Hai Duong or Quang Ninh and, so far, transmission is still within 3 generations. There are no clear signals of locally acquired transmission. However, Ha Noi situation is still under a close monitoring.

Other ongoing response includes:

- 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).
- Fast and vigorous- whole system activated on 27 night: NSC met, VC meetings with 2 provinces

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





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- 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.
- A series of Government directions released, such as MOH telegrams, Prime Minister's Directive No.05; also at subnational levels.
- Centralized quarantine and community lockdown require 21 days instead of the previous practice of 14 days
- Targeted community lockdown based on outbreak situation and risk assessment.
- Reactivated technical teams at central level (contact tracing, information & rapid response, communication) to coordinate and support local response.
- 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 is being followed using different strategies including targeted testing of higher risk groups as well as random testing of households and inpatients. Wide testing is aiming 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.1.17 variants.
 - ✓ Full genome sequencing of the Tan Son Nhat (TSN) airport HCMC determined as PANGO linage 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.
- o Enhancing surveillance and testing more than 450,000 samples have been collected for testing in the 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.
- The MOH has amended the quarantine period, back to a 14-day duration as before, given the latest scientific evidence on the new variants.
- 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.
- Timely and transparent communication and risk communication activities.

Update from past 7 days:

- From 15 21 Feb 2021, 155 new laboratory-confirmed cases of COVID-19 have been reported (decrease 14.8% compared to last week); of those 99.4% were locally transmitted cases, and without any additional deaths. There was one imported case during the week.
- During the week, number of RT-PCR conducted daily was approximately 26,800 tests, bringing total number of tests conducted to 1,997,072 since the beginning of the outbreak.
- As of 21 Feb 2021, Viet Nam has reported a total of 2,383 laboratory confirmed cases of COVID-19, including 37 health care workers (HCWs), from 48 out of 63 cities/ provinces in country, including 35 deaths (PFC ~ 1.5%) (see Figure 4). 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 2,383 cases, 931 cases (39.1%) are imported. About 93% are Vietnamese (see Figure 3).
 - The ages of cases range from 2 months to 100 years old. About 59.7% of all cases are in the 30-69 years old group, 3.2% above 70 years old, and the remaining 37.1% under 30 years old. The proportion of male vs female is around 49.7% vs 50.3%. (See *Table 1*).





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- 181 clusters have been recorded including from households, schools, workplaces, bus/train stations and 24 clusters are currently active which are relate to the ongoing community outbreaks in 13 cities/ provinces.
- o MOH moved their special standing unit from HCMC to Hai Duong to support local response.
- Other Non-pharmaceutical interventions (NPIs)
 - 6 Feb:
 - ✓ Social distancing for 15 days applied for the entire Hai Duong province starting from 0:00 16 Feb.
 - At least 40 provinces prolonged school closure until 28 Feb and/or until further notice and apply online classes. As of 21 Feb, more tha10 provinces among those have decided to reopen on 22 Feb.
 - ✓ After Tet holidays, different provinces applied different NPIs for people from Hai Duong who returned to those provinces (before Hai Duong was put under lock down), including health declaration, health notification to local health facilities, centralized quarantine and sample collection for testing; some provinces do not allow people from Hai Duong to enter/return to their provinces.

- 18-19 Feb:

- Ministry of Transport considers extension of lockdown in Van Don international airport, Quang Ninh until 3 March.
- Travel restriction: Most of provinces apply health declaration, testing, and home or centralized quarantine for people who returned to province from Hai Duong or from other outbreak areas (outbreak area is defined as a commune/ward with COVID-19 reported cases in this outbreak).

- 20-21 Feb:

- ✓ Ministry of Transport decided to continue lockdown of Van Don international airport until 3 March.
- ✓ HCMC: suspension of religious activities which gather more than 20 people.
- From 20 Feb- Hai Duong City of Hai Duong province: people can only go out to buy food using markt cards provided by local authorities.
- From 0:00 of 21 Feb: Quang Ninh province re-connected transportation within other provinces except for Dong Trieu district.
- All provinces still request people from Hai Duong province and other outbreak areas to inform local health autrities, to complete health declaration, sample to be collected for testing, and undrgo home quarantine (e.g. Ha Noi, Dien Bien province) or centralized quarantine (e.g. HCMC, Da Nang, Quang Ninh, Hai Phong, and Nghe An).

Case management:

- 1,627 cases (69%) have recovered. Three patients are in severe condition (in the current outbreak) and one in critical condition (imported cases previously reported) and under invasive mechanical ventilator (case #1536, an 79-yro-female who returned from the U.S. on 13 Jan, and having comorbidities including DM-2, hypertension, heart failure; being treated at Da Nang Lung hospital). Central treatment committee, including leading clinical experts conducted 2 virtual consultation meetings to provide support on treatment strategy for the critical patient.
- The remaining patients are being treated at Chi Linh DHC (213), Hospital of medical technology of Hai Duong (237); NHTD #2 (62); Field hospital #2 in Quang Ninh (22); Viet Nam Sweden hospital of Uong Bi/ Quang Ninh (24); provincial general hospital in Gia Lai (11); Ba Ria Vung Tau general hospital (15); Cu Chi field hospital (42); Lung hospital in Da Nang (3); Cam Ranh regional general hospital (9); other hospitals have one to seven patients. Majority of the patients are asymptomatic (82.5%) and about 14.7% have mild symptoms.
- Two index cases (#1552 and #1553) are being treated at (NHTD #2). Case #1553 has a comorbidity (DM type 1) and has developed pneumonia with 20% lung damaged shown on chest X-ray; he is under oxygen supplement in ER and being closely monitored. Case #1552 also developed pneumonia and is being monitored at ER. As of 21 Feb, both cases have improved and not required oxygen supplement.
- Case # 1652, a two-month-old girl (case #1565's daughter), is the youngest patient in the current community outbreak related to Chi Linh/ Hai Duong outbreak spot.





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Other health sector response:

- ✓ The field hospital #2 Hai Duong has increased beds capacity to 650 beds to meet the demand.
- ✓ Bach Mai hospital, NHTD and Cho Ray hospital continued to support clinical capacity, IPC, and testing capacity for Hai Duong.
- ✓ Two more field hospitals established: hospital # 3 in Hai Duong with max 300 beds. Total COVID-19 patient beds in Hai Duong is now 900 beds, with maximum capacity of 1200 beds.
- ✓ Dien Bien has completed establishment of a field hospital of 300 beds, 30 ICU beds with sufficient medical equipment, including an ECMO system located in Health Center of Dien Bien Phu city with support from Bach Mai hospital.
- ✓ The field hospital in Gia Lai is being established with support from Cho Ray hospital
- ✓ MoH has mobilized clinical experts from Bach Mai, Da Nang, and Cho Ray hospitals to support for Gia Lai and Dien Bien
- ✓ Sub-commitment on treatment of MoH has regularly hold VC to discuss on treatment and clinical management to field hospitals

Numbers of quarantine:

- A total of approximately 120,087 people are currently placed under quarantine. Of those 588 were quarantined in HCFs; 12,984 were centralized quarantined; and 107,255 were under self-/home quarantine.
- **Cumulatively:** from beginning of the outbreak to date, a total of **more than 13 million people have been placed under quarantine**.

Risk communication

- Proactive messaging on prevention messages continues. The Government sends daily text messages to update citizens on the outbreak response and advise them on how to stay safe.
- The MOH guidance on mask wearing continues to be promoted. Messages on preventive measures such as wearing of mask and physical distancing have been reinforced using infographics and audio-visual materials. Social media ads (e.g., Facebook) have been re-activated and cover the whole country.
- Communication plan for the vaccine roll-out has been developed, for inputs from the relevant partners. Both Government and WHO continue to share key messages on vaccination.
- WHO continues to provide strategic communication support to MOH, including the communication on vaccination.

Media monitoring and social listening continue and results feed into developing and reinforcing key messages: Some highlights from the social listening:

- Many people agree that healthcare and frontline workers should be the first to be vaccinated.
- There is a need to clarify the timing of the government's decision to put Hai Duong province on lockdown.

Other key updates (in past 7 days)

- Vaccine development and deployment plan: National Deployment and Vaccination plan (NDVP), a living document, was signed off by Vice Minister for Health on 9th Feb 2021. Viet Nam will receive the feedback of the Plan from NDVP review committee as one of the required steps to receive COVID-19 vaccines through COVAX Facility. WHO together with UNICEF continue providing technical support on NDVP refinement and other necessary readiness preparation in country for COVID-19 vaccine introduction.
- o Through COVAX, it is confirmed that Viet Nam will receive COVID-19 vaccine (AstraZeneca vaccine manufactured by SK Bioscience which was approved for use in urgent situation in Viet Nam) from minimum 4,886,400 doses to maximum 8,253,600 doses, of which 25-35% of the doses will be provided in the first quarter and the remaining doses will be provide in the second quarter of 2021. WHO Viet Nam is working with MOH to develop the detailed National Vaccination Plan following WHO's priority criteria.
- 30 Jan NIHE officially released the full genome sequencing result of case #1422, reported on 24 Dec 2020, who
 was confirmed to have been infected with the new mutated variant from South Africa. This case is a technical expert
 from South Africa coming to Viet Nam and was quarantined upon arrival.







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)
- A daily rapid report continues to be shared with WCO and RO
- This weekly external report follows the normal pattern of epidemiological week (i.e. from Mon to Sun)
- Working with VAMS to compile provincial request for PPE
- Through support from WPRO, WHO CO handed over 25,800 specimen collection kits to NIHE, to support ongoing outbreak response.
- The MOH has requested support for approximately 200,000 primers and probes and 300,000 further specimen collection kits. WHO CO working with WPRO and HQ on this request.

Transmission Stage Assessment

Overall assessment – Localized community transmission: the recent community outbreaks emerged after 57 days since the last locally transmitted case was reported. Between 25 Jan and 21 Feb, 791 cases have been reported from 13 cities/ provinces. So far, even though majority of cases were linked to the two initial outbreak spots in Hai Duong and Quang Ninh, there are cases with unknow or unclear epidemiological links especially in Hai Duong, HCMC, Gia Lai and Ha Noi. To date, there are no clear signals of large-scale community transmission. However, the situation is being closely investigated and monitored, especially where no epi links have been identified among the cases. Yet it requires more detailed information to reinforce risk assessment outcomes. Targeted lockdowns are being implemented in all affected communes/ areas. School closures, suspension of nonessential activities/ mass gatherings, social distancing are being applied based on local situation assessment. Given the vigorous response actions, fast and thorough contact tracings and mass testing (including targeting high risk groups) being conducted in country, it is anticipated that more community cases will be reported in coming days. Risk of cases detected among illegal immigrants remains; also as resulted from non-adherence to health declaration, testing and quarantine procedures.

Sub-national level*

City/ province	No. of cases reported, as of 21 Feb 2021	Transmission Stage Assessment	Notes
Hai Duong	611	2	Mostly related to POYUN company (79%). Unknown/ unclear epi links cases in other 6 clusters (Chi Linh City, Hai Duong City, Cam Giang, Kim Mon, Ba Sach, Kim Thanh Districts). Source of infection for index case (#1552) still under investigation.
Quang Ninh	60	2	Basically, under control. All cases linked with POYUN company or Van Don airport. Source of infection for index case (#1553) remains unknown. No additional cases reported in past 5 days.
НСМС	36	2	Unknown epi links in Tan Son Nhat airport staff case. More cases being detected related to this airport cluster. Investigation ongoing. 34 cases reported in past 2 weeks. No additional cases reported in past 8 days.
Ha Noi	34	1	All three clusters with known epi links. Transmission within 3 generations. Source of transmission for the recent Japanese deceased case is under investigation. No additional cases reported in past 5 days. Under a close monitoring.
Gia Lai	27	1	One case with unknow epi links. Investigation ongoing. No additional cases reported in past 10 days.
Binh Duong	6	1	All cases linked with Hai Duong. No additional cases reported in past 2 weeks.
Bac Ninh	5	1	All cases with clear epi links. No new cases reported in past 9 days
Dien Bien	3	1	All cases with clear epi links. No new cases reported in past 16 days





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Hoa Binh	2	1	All cases with clear epi links. No new cases reported in past 21 days
Hai Phong	1	1	Case with clear epi links. No new cases reported in past 21 days
Bac Giang	2	1	All cases with clear epi links. No new cases reported in past 18 days
Ha Giang	1	1	Case with clear epi links. No new cases reported in past 18 days
Hung Yen	3	1	All cases with clear epi links. No new cases reported in past 12 days
TOTAL	791		

^{*}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	Tes 187,88 NAT Tests past 7 da (+33.2 7-da 1,997,07 Cumulative NAT Tes	9 ys New cases y) (-14.8	Cases 155 past 7days 3% 7-day) 2,383 ative Cases	Deaths pa	% 7-day)	ICU Ad	ICU Admissions 2 dmissions past 7days (+2 cases 7-day) 60 (TBC) ative ICU Admissions
	5.3% Imported Cases in past days (4	28 Cases in pas	835 st 28 days o link (72)		4 (TBU) re Clusters		O Active clusters with >3 generations
Health Service Provision COVID-19	Hational	O ealthcare worker es reported past week	COVID-1	155 admitting 19 patients past week	ICU be COV pa (estimate cu afi prov	vition 19 attients and in 6 arently fected arences) approx.	O (TBD) Non-ICU Hospital beds for COVID-19 patients (Six field hospitals established: 3 in Hai Duong, 1 each in Quang Ninh, Dien Bien, Gia Lai)





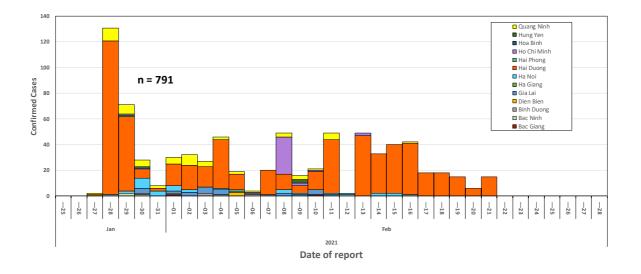


Figure 1. Epidemic curve of COVID-19 laboratory confirmed cases by date of reporting, current outbreak, Viet Nam, as of 21 Feb 2021

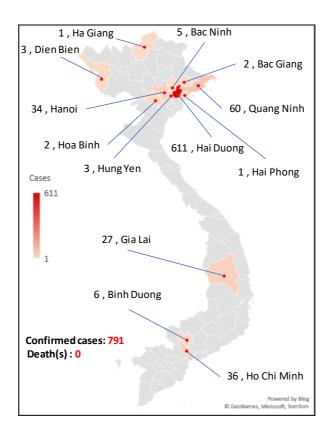


Figure 2. Distribution of COVID-19 laboratory confirmed cases by place of detection, current outbreak, Viet Nam, as of 21 Feb 2021







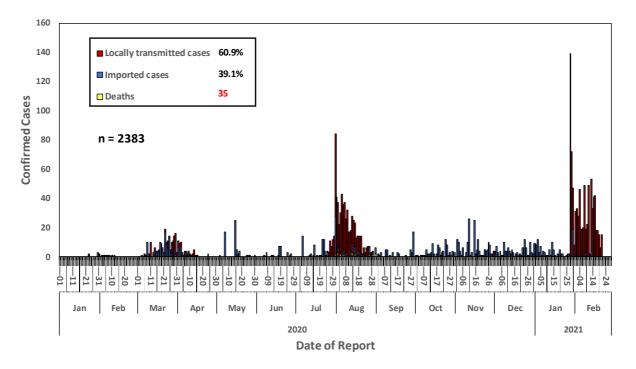


Figure 3. Epidemic curve of COVID-19 laboratory confirmed cases, Viet Nam, by date of reporting

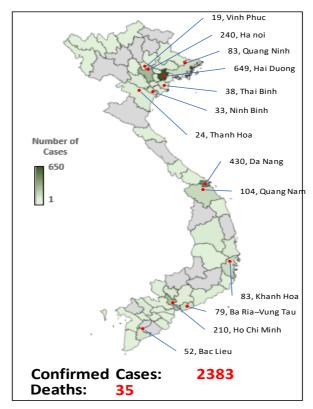


Figure 4. Distribution of cumulative COVID-19 laboratory confirmed cases by place of detection, Viet Nam







	Fema	ıle	Male			
Age Group	Cases	Deaths	Cases	Deaths		
0-9	55 (6)	0 (0)	51 (2)	0 (0)		
10-19	71 (11)	0 (0)	71 (11)	0 (0)		
20-29	296 (26)	2 (0)	341 (12)	0 (0)		
30-39	343 (31)	1 (0)	323 (14)	1 (0)		
40-49	158 (10)	1 (0)	157 (9)	0 (0)		
50-59	138 (8)	5 (0)	137 (6)	3 (0)		
60-69	93 (2)	6 (0)	73 (2)	6 (0)		
70-79	29 (1)	2 (0)	20 (1)	1 (0)		
80-89	0-89 12 (0)		9 (2)	1 (0)		
90+	2 (1)	0 (0)	4 (0)	1 (0)		
Total	1197 (96)	22 (0)	1186 (59)	13 (0)		

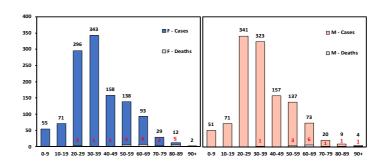


Table 1. Cumulative and new (past 7 days) cases and deaths by age and sex

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 current community outbreaks initiated from Hai Duong and Quang Ninh provinces.

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 resurgence of cases in the community related to Da Nang and HCMC events, and for the ongoing community outbreaks that is affecting at 13 cities/ provinces (as of 21 Feb 2021). 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.





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Best Practice/Lessons Learned - unchanged

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.

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 3).