



## Viet Nam COVID-19 Situation Report #21

10 December 2020

Report as of 10 December 2020, 18:00

### Situation Summary

#### Highlights of Current Situation Report

- It has been 10 days after the last locally transmitted case reported from the HCMC related cluster
- **Previously reported: New COVID-19 community cases reported from Ho Chi Minh City (HCMC) after 88 days of no local infections in country (or more than four months in HCMC).**
  - On 29 November, the Ministry of Health recorded a newly confirmed case of COVID-19 (#1347) who had a history of contact with a flight attendant during his home-quarantine period and subsequently tested positive for SARS-CoV-2 (case #1342).
  - **Case #1342** (notified on 29 Nov) – a 28-year-old male Vietnam Airlines (VNA) flight attendant who returned to Viet Nam from Japan on 14 Nov. Upon arrival in country, the flight crew members were quarantined in a designated centralized quarantine facility in Ho Chi Minh City (HCMC). After two negative tests (conducted on 15 and 18 Nov), the flight attendant was allowed to be home-quarantined at his rented apartment (in Ward 2, Tan Binh District, HCMC), as per the current Government regulations for VNA crew members (Official letter No. 358 dated 2<sup>nd</sup> Jul issued by the National Steering Committee for COVID-19). During the home-quarantine, the flight attendant has had direct contacts with three people including his mother and his two friends (one male, one female). The male friend (residing in Ward 3, District 6, HCMC) was reported to come and live with him (later known as case #1347). On 22 Nov, he also attended his University class (HUTECH). On 28 Nov, sample was taken from the flight attendant for the third time and showed positive results for SARS-CoV-2. Investigation revealed that previously, during the period of 14-18 Nov, while in the centralized quarantine facility, case #1342 had contact with a colleague from another flight (arrived on 11 Nov from Romania); this person was later tested positive (case #1325, notified on 26 Nov).
  - **Case #1347** (notified on 30 Nov) – a 32-year-old male English teacher who, prior to his positive test (from 18-28 Nov), had been to at least three Districts and contacted hundreds of people including those at English Centres, cafes, restaurants and karaoke bars, etc.
  - Two additional cases (cases #1348 and #1349) were notified on 1 Dec among the close contacts of case #1347:
    - ✓ **Case #1348:** a 1-year-old baby, nephew of case #1347, residing in Dist. 6, HCMC who had a history of close contact with #1347 on 22, 23, 25 and 27 Nov (parents had sent the baby to #1347 to look after). His sample was taken and tested positive on 30 Nov.
    - ✓ **Case #1349:** a 28-year-old female, residing in Dist. 6, HCMC who is a student of case #1347 in his English class. Her sample was taken and tested positive on 30 Nov.

(See Annex 1 for the Timeline of the event)

- **Response**
  - ✓ Rapid investigation with fast and thorough contact tracing conducted by local health authority (HCMC DoH and HCDC)
  - ✓ Risk communication: public announcement through mass media and social media of places (i.e. 14 places) where the cases have been to with specific timeframes; guiding public on necessary actions; reiterating “5K” messages of the MOH
  - ✓ Testing of contacts, disinfection/ blockade of places visited by the cases
  - ✓ Temporary suspension of all incoming commercial flights, except repatriation flights (also being carefully reviewed and approved by the Government)

- ✓ Reinforcing strict protocols in isolation and quarantine facilities
- ✓ Strengthening screening measures for all suspicious cases in all HCFs in HCMC and nationwide
- ✓ As of 8 Dec: 3 888 specimens had been collected among F1 and F2 contacts of cases and other community related suspected contacts and all have tested negative by RT-PCR.. **No additional community cases detected** so far.

- **Implications:**

- ✓ POEs remain at higher risk for transmission
- ✓ Adherence to quarantine procedures in all settings

○ **Update from past 7 days:**

- From the last report (3 Dec), from 4 – 10 Dec, 24 new laboratory-confirmed cases of COVID-19 have been reported (20% decrease compared to last week), all were imported cases, and without any additional deaths. These included 22 Vietnamese and 2 foreigners (1 Turkish and 1 Libyan).
- Related to the HCMC cluster response, at least 3,888 specimens have been collected from 861 F1, 1,400 F2 contacts of cases and 1,627 community related contacts. Tests all were negative so far.
- Among the four locally transmitted cases, only case #1342 has symptoms; cases #1347, #1348 and #1349 so far remain asymptomatic.
- During the week, number of RT-PCR conducted daily remained at approximately 3,300 RT-PCR tests. Between 23 Jul and 19 Nov, more than 930,000 tests were conducted out of the total of more than 1.3 million RT-PCR tests conducted in country from the beginning of the outbreak.
- Two re-positive cases reported: 1) Case #1291 (imported, returned to Viet Nam from Romania on 8 Nov), discharged on 3 Dec and retested positive on 7 Dec; all 44 F1 and F2 contacts tested negative so far; 2) Case #1150 (imported, returned to Viet Nam from France on 21 Oct), discharged on 1 Dec and retested positive on 4 Dec; all 3 F1 contacts tested negative. Both the cases were well and without symptoms.
- The country reaffirms to **accelerate active measures to achieve dual objectives** of economic development and disease control, and moving toward a “**safe coexistence with COVID-19**”.
- As of 10 Dec 2020, Viet Nam has reported a total of **1,385 laboratory confirmed cases** of COVID-19, including 37 health care workers (HCWs), from 45 out of 63 cities/ provinces in country, including **35 deaths** (CFR  $\simeq$  2.5%) (see *Figure 1*). 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 1,385 cases, 729 cases (52%) are imported. About 90.6% are Vietnamese (see *Figure 2*).
  - The ages of cases range from 2 months to 100 years old. About 62.6% of all cases are in the 30-69 years old group, 4.3% above 70 years old, and the remaining 33.1% under 30 years old. The proportion of male vs female remains 53.4% vs 44.6%. (See *Table 1*).
  - 156 clusters have been recorded including from households, schools, workplaces, bus/train stations and one cluster (related to the event in HCMC) is ongoing, i.e. day 10<sup>th</sup> without new cases reported.
- 1,238 cases (**89.4%**) **have recovered**. All the remaining cases under treatment in various health care facilities (HCF) across the country are with mild symptoms or asymptomatic, no more patients required ICU. Among those, 22 cases have tested negative at least once.
- Numbers of quarantine:
  - A total of approximately 21,000 people are currently placed under quarantine.
  - Cumulatively: from beginning of the outbreak to date, a total of 9,906,630 people have been placed under quarantine. Of those 208,389 were quarantined in HCFs; 3,999,594 were centralized quarantined; and 5,698,647 were under self-/home quarantine.

## Other key updates

- 2 December 2020, the Prime Minister promulgated an urgent telegram requesting ministries, sectors and localities to strengthen public health measures on COVID-19. The telegram emphasizes the need for people to remain vigilance through applying preventive measures such as wearing face masks in public places; the central and local authorities/sectors to monitor and supervise the compliance with quarantine and isolation regulations; and to conduct case detection and contact tracing vigorously and thoroughly for the ongoing outbreak in HCMC.
- National Steering Committees (NSC) is convened on periodic and ad hoc basis to review the evolving outbreak situation and to discuss, direct adjusted response measures, especially as the country is striving to achieve its dual targets of outbreak control and economic development. For the current outbreak in HCMC, NSC and PSC of HCMC convened on a daily basis to review, assess the situation and to direct the local response.
- On 24 November, MOH issued a Directive No. 24 on strengthening COVID-19 prevention and response measures. As per the Directive, leaders of Provinces/cities Health Department and health facilities must strictly implement the previously issued Prime Minister's Directive, NSC guidance, and the MOH guidelines on COVID-19 prevention and response; hospitals, health care facilities need to enhance patient triage and IPC compliance, samples collection and testing for suspected cases, and stockpiling of drugs, equipment and PPEs; Preventive Medicine Sector to strengthen border health quarantine operation, enhance surveillance and preparation for large-scale laboratory testing as needed; Viet Nam Food administration (VFA) and sub-VFA to increase inspection of imported food products, and collect samples for SARS-CoV-2 testing if necessary; and National/ Regional Institutes to continue accelerating COVID-19 vaccines research and development.
- Continue to review and adjust NPIs to suit the current outbreak situation and changing travel/ trade opening-up policies including the ongoing outbreak event in HCMC, i.e. as of 1<sup>st</sup> December, all commercial flights are now temporarily suspended. See *NPI Table* and *Annex 2* for more details on key public health interventions along the outbreak timeline.
- Technical guidelines on surveillance, contact tracing, quarantine, infection prevention and control (IPC) case management continued to be reviewed and updated/ revised as needed. Dissemination workshops and training are provided to further equip and build on technical capacity for relevant staff, to be ready to respond to the current situation and any resurgence of cases in community should it happen. Latest updates include:
  - The technical guidance on contact tracing has been official approved by MOH. A ToT training for MOH and 4 regional institutes was conducted on 1-2 December, cascade training for subnational level will be conducted by 4 Regional Institutes in coming weeks.
  - Revision of technical guidelines on quarantine at centralized facilities and home/ self-quarantine is ongoing.
- Laboratory:
  - As of the 26<sup>th</sup> of November, there are 140 laboratories capable of testing for COVID-19 by RT-PCR. The maximum daily capacity in the country remains at 51,000 tests. Of these laboratories 91 are designated by MOH as confirmatory laboratories. MOH is currently preparing to extend testing capacity to further hospital laboratories including provincial and military hospitals, with further training ongoing, as preparedness in case of future widespread transmission.
  - Plans are underway to further expand laboratory testing to include use of GeneXpert machines within the lung hospital system. An operational plan is being developed; plans to use 14,000 GeneXpert COVID-19 cartridges across 42-46 lung hospitals.
  - On 21 Sept the MOH issued a revised SARS-CoV-2 testing strategy for COVID-19 (Decision No.4042/QD-BYT) to replace of Decision No. 2245/QD-BYT dated April 22. The new testing strategy restates that the RT-PCR remains the test for confirmation of COVID-19, but that antigen tests may now additionally be considered for confirmation, but only if quality reaches standards as recommended by WHO and US-CDC. The strategy also clarifies that serological testing can be used for investigation of cases and for sero-prevalence studies, but not for standalone patient testing and clinical decision making.
  - Dispatch No. 4995/BYT-DP an interim guidance on supervision of people on entry into Viet Nam, allows for the possibility of travellers to be tested by antigen RDT; positives are immediately brought to COVID-19 health

facilities, whilst negatives would still be transportation to registered quarantine facilities and tested before release by RT-PCR.

- Activities are being planned to build capacity for antigen RDT testing, to be prepared in case of new clusters or community transmission, so antigen testing may be used immediately. A meeting was held by GDMP with laboratory partners on 27<sup>th</sup> of Nov to discuss the best approaches to prepare for possible future use of antigen RDT's in Viet Nam. May order antigen RDT's through the Supply Portal, under discussion.
- The WHO supported COVID-19 EQA for sub-national laboratories is ongoing, involving 106 laboratories.
- o Communication:
  - Communications to the public have focused on providing updates on outbreak situation and government actions, including stories on the ground, promoting protective measures and countering rumours and misinformation. Messaging on protective measures has been repackaged as "5K": (1) facemask; (2) hygiene; (3) safe distance; (4) gathering; (5) health declaration.
  - WHO works with the Ministry of Health and UNICEF in building the country's communication preparedness for potential COVID-19 vaccine introduction. Discussions are ongoing to identify communication capacity gaps and agree on a direction and activities that will ensure equitable access and uptake, managing expectations, communicating uncertainties and managing reputational risk, whilst maintaining high levels of trust in vaccination and other protective behaviours against COVID-19.
  - Four regional risk communication trainings have been completed, participated in my provincial risk communication focal points in the North, Central, South and Mekong Delta regions. The training further enhances capacity of provinces in the said technical area, taking into consideration lessons learnt from the earlier COVID-19 response.
  - COVID-19 community engagement activities involving women's groups, youth unions, school administrations, commune leaders and community health workers have been completed in partnership with Viet Nam One Health University Network (VOHUN).
  - The Ministry of Health, with support from WHO, has started communication activities supporting the "safe coexistence with COVID-19" initiative. To further support this, a long-term online campaign titled, "Normalize the new normal", has been jointly launched by United Nations organizations and other international organizations in November. This is part of the activities of, UN+2 COVID-19 RCCE subgroup, the country's INGO risk communication and community engagement working group. WHO serves as the technical lead and coordinator of this group.
- o Clinical management and IPC
  - On 6 Nov, VAMS held a COVID-19 review meeting with all relevant partners, health sectors, central and provincial hospitals to discuss on lessons learned and experiences in response to COVID-19 of health care facilities, challenges and recommendations to prepare for health care facilities in coming time to better prepare for and response to COVID-19
  - VAMS with support of WHO is developing a handbook on COVID-19 response in HCFs to strengthen surge capacity and to support hospitals meeting requirements on criteria for safe hospitals from COVID-19
  - VAMS is updating the national guideline on IPC for COVID-19 to replace the current guideline No. 468

## Recent/Upcoming Events and Priorities

- WHO continues dialogues with the Government of Viet Nam and provides support for making balanced decisions in view of the country's re-opening of international flights and safe co-existence with COVID-19, while paying due attention to other routine and priority activities, including responses to potential outbreaks following the recent floods and landslides disaster in the Central region.
- WHO continues to work closely with MOH to provide technical assistance in strengthening COVID-19 preparedness and response capacity, including:
  - o Supporting ongoing discussion on COVID-19 vaccine development and vaccine deployment and distribution plans, effective communication in response to the current situation and in preparation for a possible wider

community transmission, and adjusting the ongoing activities in light of the current community cluster of cases in HCMC.

- Continue facilitating after-action reviews (AAR) and intra-action reviews (IAR), including AARs in the Northern region (Quang Ninh, Ha Loi); Central region (Da Nang, Quang Nam, Quang Ngai); and Central Highland (Dak Lak).
  - Continue supporting IPC training for preventive medicine staff working in different settings (PoEs, Quarantine facilities, etc.) in the South (2 courses completed; 2 courses to be done in December 2020 and January 2021 ).
  - Supporting GDPM to conduct training workshops on mask wearing in public places and procedures on immigrations, supervision and medical quarantine for COVID-19 prevention and control for inbound travellers (in December); and other training on contact tracing, PoE, etc.
  - The National Pandemic Preparedness and Response Plan for Influenza is being updated (a national workshop was conducted on 7 Dec) using lessons learned from COVID-19 response in 2020. The idea is to make this PPRP for newly emerging infectious diseases including COVID-19.
- 30 Nov - WCO team participated in the MOH Workshop to Review COVID-19 response activities in 2020 in Da Nang city. Experiences, stories and lessons learned that were shared in this workshop would further facilitate WHO's work and collaboration with MOH and the Viet Nam Government in the joint effort to respond to the evolving outbreak situation.

## National Transmission Assessment

**Stage 1 – Imported transmission:** After 88 days since the last community case was reported, from 28 Nov to 1 Dec, four locally transmitted cases were reported as resulted from a case who got infected during the quarantine period. The transmission is linked to an imported case (a flight attendant, case #1325) who transmitted to another flight attendant (case #1342) while staying in a same quarantine facility. The onward transmission (case #1342 to #1347; then #1347 to #1348 and #1349) was resulted from non-compliance to the home/self-quarantine procedures of case #1342. So far, more than 3,888 specimens have been tested among contacts of these cases and no additional positive cases were found. Clear epi links were identified among these four cases and, so far, no signals of ongoing locally acquired transmission have been observed. As of 10 Dec, it has been 10 days since the last community case was reported. We will closely monitor and reassess the situation and adjust the transmission stage as needed. It is possible that sporadic cases from community might be reported as resulted from illegal immigrants and/or lack of adherence to testing/ quarantine requirements in coming days. Besides, imported cases will continue be expected among incoming repatriated citizens and travellers.

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



**World Health Organization**

Representative Office  
for Viet Nam

## Viet Nam

Coronavirus Disease 2019 (COVID-19) Situation Report #21

10 December 2020

Report as of 10 December 2020



## Epidemiology

### Epi Update COVID-19

Tests	Cases	Deaths	ICU Admissions
<b>30,233</b>	<b>24</b>	<b>0</b>	<b>0</b>
NAT Tests past 7days (+1.18 times 7-day)	New cases past 7days (-20% 7-day)	Deaths past 7days (-% 7-day)	ICU Admissions past 7days (-% 7-day)
<b>1,329,292</b>	<b>1,385</b>	<b>35</b>	<b>57</b> (TBC)
Cumulative NAT Tests	Cumulative Cases	Cumulative Deaths	Cumulative ICU Admissions

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<b>100%</b>	<b>0</b>	<b>1</b>	<b>0</b>
Imported Cases in past 28 days (128)	Cases in past 28 days with no link (0)	Active Clusters	Active clusters with >3 generations

### Health Service Provision COVID-19

<b>Most of national hospital staff</b>	<b>0</b>	<b>24</b>	<b>251</b>	<b>0</b>
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 (out of approx. 3,500 beds nationwide)	Non-ICU Hospital beds for COVID-19 patients (Two field hospitals in Da Nang dissolved)

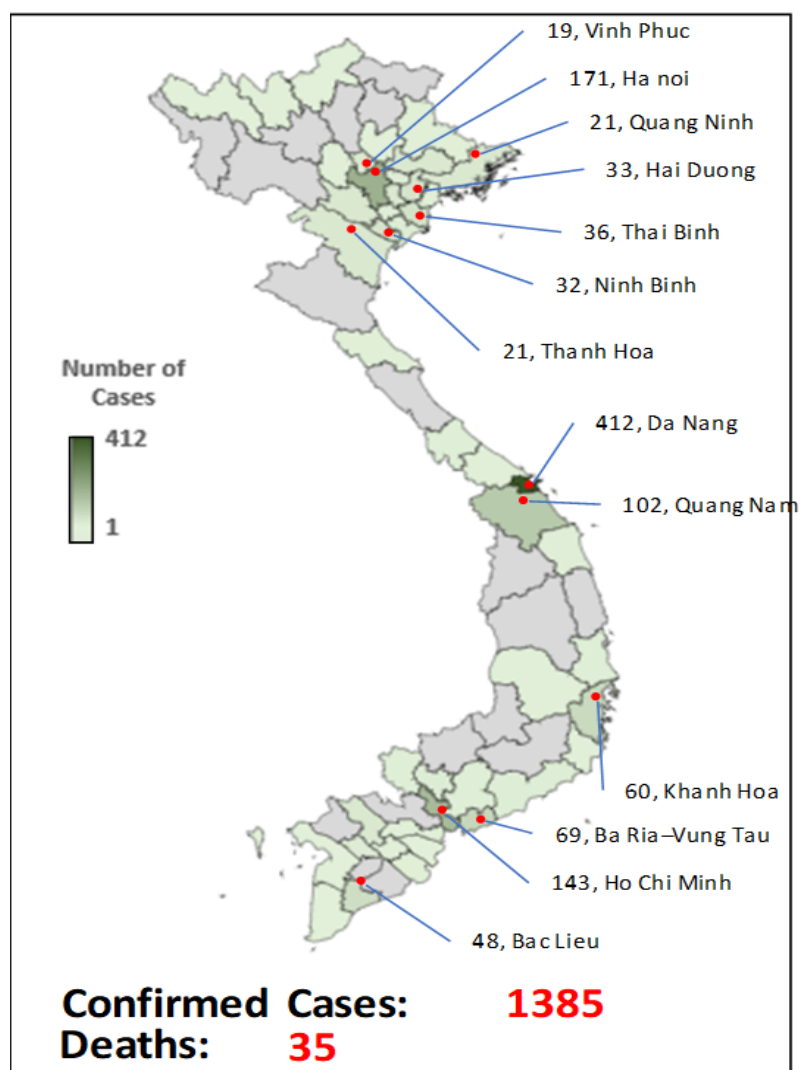
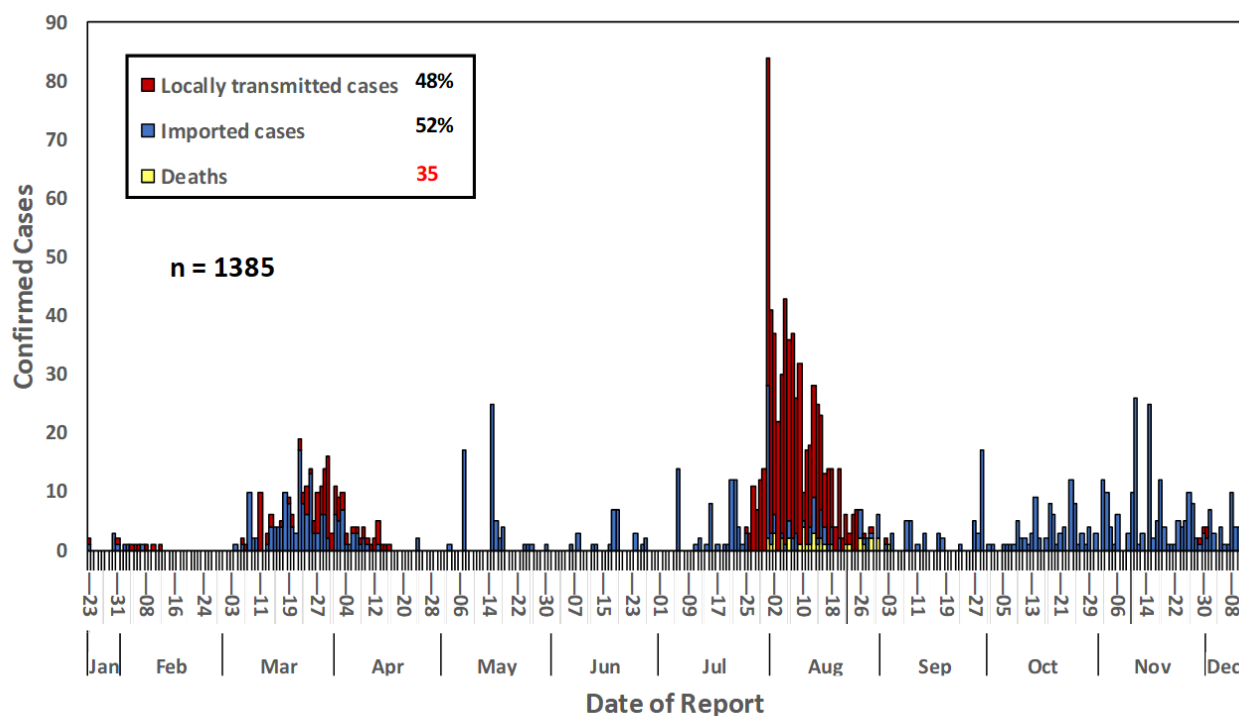


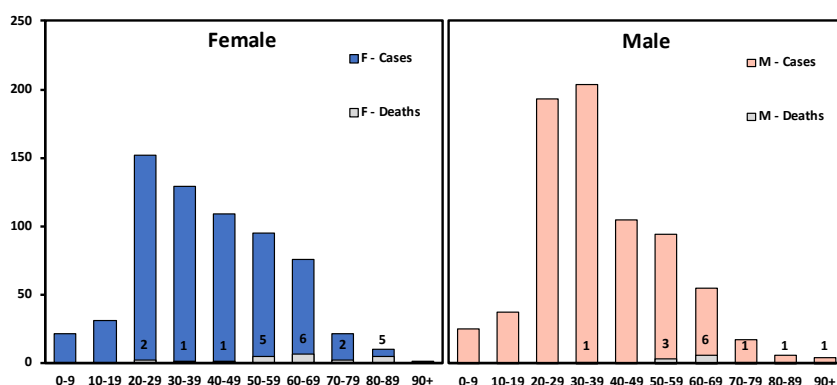
Figure 1. Distribution of cumulative COVID-19 laboratory confirmed cases by place of detection, Viet Nam





**Figure 2. Epidemic curve of COVID-19 laboratory confirmed cases, Viet Nam, by date of reporting**

Age Group	Female		Male	
	Cases	Deaths	Cases	Deaths
0-9	21 (0)	0 (0)	25 (1)	0 (0)
10-19	31 (0)	0 (0)	37 (0)	0 (0)
20-29	152 (3)	2 (0)	193 (5)	0 (0)
30-39	129 (4)	1 (0)	204 (5)	1 (0)
40-49	109 (3)	1 (0)	105 (0)	0 (0)
50-59	95 (2)	5 (0)	94 (1)	3 (0)
60-69	76 (0)	6 (0)	55 (0)	6 (0)
70-79	21 (0)	2 (0)	17 (0)	1 (0)
80-89	10 (0)	5 (0)	6 (0)	1 (0)
90+	1 (0)	0 (0)	4 (0)	1 (0)
<b>Total</b>	<b>645 (12)</b>	<b>22 (0)</b>	<b>740 (12)</b>	<b>13 (0)</b>



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



## Strategic Approach - unchanged

### 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 has remained the same in the response to the ongoing outbreak, considering a more complex nature of community transmission this time. Active mobilization of human resources from central and regional levels (leaders, professional experts), supply and equipment (testing machines, reagents and consumables, ventilators, masks, disinfectants, etc.) and logistic support to the community outbreak in Da Nang, and is ready to support HCMC with the current cluster of cases if required.

### 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. 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 - 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.



Currently, as per the government's direction to achieve the *dual targets of disease outbreak control and economic development*, Viet Nam resumed international commercial flights from 15 Sep but still only for priority groups (i.e. diplomats, highly-skilled officials, students, laborers), to be started with the following countries: China (Guangzhou), Japan (Tokyo), Korea (Seoul), Taiwan (Taipei), China, Cambodia (Phnom Penh), Lao PDR (Vientiane) and Thailand.

All travellers from the above-mentioned countries are required to present certificate of SARS-CoV-2 negative by certified local health authorities/ laboratories within 3-5 days prior to the arrival in Viet Nam. A 14-day quarantine duration is still required. A detailed guidance on testing/quarantine procedures upon arrival were provided in the **MOH decision No.4995/BYT-DP** – *Interim guidance on surveillance of inbound travellers to Viet Nam*, 20 Sep 2020.

**15 Oct** - Given the increase in number of imported COVID-19 cases reported in country during past week and the highest number of cases reported so far in a single week globally, the NSC issued an urgent telegram No. 1640/CD-BCD to Ministry of Defence and all Provincial People's Committees asking for strengthening of management of all inbound travellers to Viet Nam. These include (1) Strictly complying the direction of the Prime Minister, NSC and MOH technical guidance for management of people entry to Viet Nam; (2) Closely checking certificates of SARS-CoV-2 free among inbound travellers at PoEs and strictly implementing samples collection and testing for SARS-CoV-2 during quarantine periods; and (3) Strictly monitoring the centralized quarantine activities to prevent COVID-19 transmission within the quarantine facilities; not allowing unauthorized persons to enter the quarantine areas, and upon completion of centralized quarantine period, continue to strictly monitor health status for 14 days and refrain from getting into contact with other people.

**22 Oct** - Viet Nam and Japan have agreed to an expedited arrival procedure for short-term entrants from November 1, according to a press release of the Ministry of Foreign Affairs. Both countries will lift mandatory quarantine requirement for people from either country who are going on trips shorter than 14 days for the purposes of investment, trade, diplomacy, official businesses or highly skilled workers. Entrants need proof of negative tests for COVID-19 and will be tested and placed under frequent medical surveillance upon arrival.

**2 and 13 Nov** – At the recent NSC meetings, members of the NSC emphasized the need for strict enforcement of face mask wearing in public places. Currently, HCMC and Ha Noi requested people wearing face masks in public places and apply measures in case of violations. It is proposed that all cities/provinces reinforce mask wearing policy in public places such as health facilities, markets, mass gatherings, etc. The NSC also requested MOH to set up supervision teams to conduct onsite monitoring of COVID-19 prevention and response at local level.

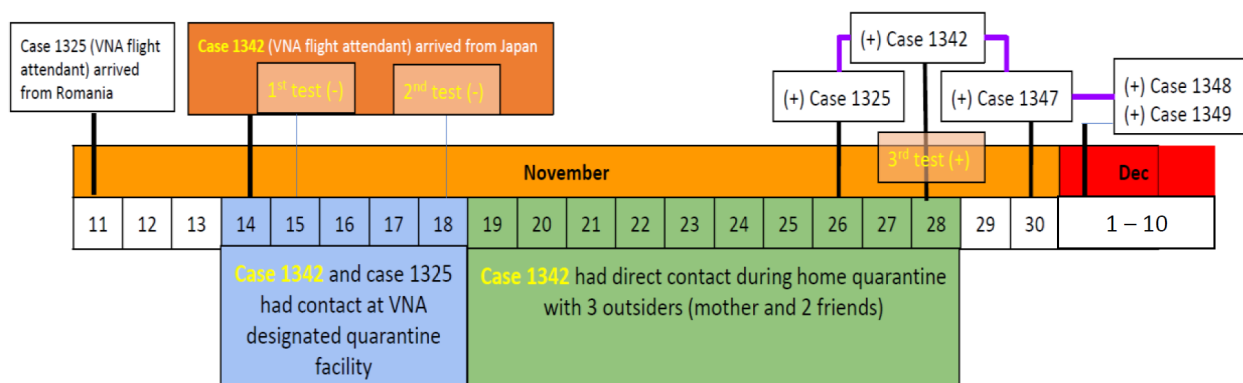
**30 Nov - 3 Dec** – in response to the current outbreak in HCMC, the City government has closed the registered quarantine centre of Vietnam Airlines in HCMC; 8 primary, secondary, and high schools closed, several classes across 175 schools, 12 universities have been closed since 2 Dec until further notice, consequently approximately 8,200 pupils, 663 teachers, 160,000 university students, and 6,000 lecturers are off from schools/ universities; all school exams, meetings, conferences, out-door activities have been cancelled or postponed; 3 residential areas with 148 households and 485 people are on temporary lockdown; suspension of unnecessary mass gathering events applied. In Ha Noi, the city government also requested suspension of unnecessary mass gathering events, application of preventive measures including face-mask wearing, hand hygiene, and disinfection of surfaces.

**7 Dec** – All school/ university students in HCMC returned to normal activities; except those at lockdown residential areas and those under centralized quarantine.

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	31 Jan		National	Recommended Required: 16 Mar-7 May	No	No
School Closure	22 Jan		-	-	4 May	11 May
	28 Jul	14 Sep		Required	Lifted in Da Nang	
	2 Dec		Sub-national: 20 schools and universities in HCMC	Required		7 Dec
Workplace Closure	1 Apr	1 June	Sub-national	Required	15 Apr	23 Apr
	28 Jul	5 Sep		Required		5 Sep
Mass Gatherings	31 Jan	None	National	Required		7 May
	27 Jul	10 Sep	Sub-national: Da Nang,	Required		
Stay at Home	1 Apr	None	National	Required	15 Apr	21 Apr
	28 Jul	5 Sep	Da Nang	Recommended		
Restrictions on Internal Movement (within country)	1 Apr	None	National	Required	15 Apr	23 Apr
	28 Jul	7 Sep	Health declaration applied in HCMC for visitors from Da Nang.			7 Sep
Restrictions on International Travel	China: 25 Jan; all countries: 22 Mar	22 March	National	Required	No	No
Communities/hospital lock down	28 Jul	2 Sep	Da Nang, HCMC, Ha Noi, Ha Nam, Khanh Hoa, and Hai Duong	Required	17 Aug: Dak Lak and Dong Nai; 20 Aug: Thai Binh province; 21 Aug: Hoan My Hospital in Da Nang; 25 Aug: Da Nang General Hospital; and Quang Ngai province; 26 Aug: Lang Son province and Phu Ly Dist., Ha Nam province; 29 Aug: Bac Giang and Quang Tri provinces; 1 Sep: Quang Nam province; 2 Sep: Thanh Hoa province.	17 Sep
	1-2 Dec		3 residential areas of COVID-19 confirmed cases in HCMC	Required		
Others; specify in narrative: Centralized Quarantine entry people	Hubei China: 7 Feb. All countries: 21 Mar	None	-	Required	No	No

## Annexes

### Annex 1 – Timeline of ongoing community cases in HCMC, November – December 2020



### Annex 2 – Key public health interventions on COVID-19, January – 10 December 2020

