Situation Summary
Highlights of Current Situation Report

- As of 6 September 2020, 274 confirmed cases of COVID-19 have been reported from Cambodia, of which 272 have recovered. 236 cases were acquired overseas, representing 11 nationalities in addition to Cambodian, with the rest locally acquired. One patient is currently being treated in Chak Angre Health Centre and one case is hospitalized at Khmer-Soviet Friendship Hospital, both in Phnom Penh.
- 81 contacts are being quarantined at a quarantine centre in Phnom Penh or in their respective province and are monitored daily for possible development of symptoms.
- The National COVID-19 Masterplan includes the creation of multi-sectorial provincial committees led by the provincial governors. Plans are being developed to build capacity at provincial and district level around key priority areas.
- There is a continued focus on strengthening health care readiness. 140 oxygen pulse oximeters, 196 bio boxes, more than 500,000 items of Personal Protective Equipment (PPE) and 300 oxygen concentrators have recently arrived in Cambodia.
- On the 25 August the Ministry of Education, Youth and Sport (MoEYS) issued guidelines for the second phase of the plan to reopen schools. Public kindergartens, primary and secondary schools will be allowed to open in September provided they can adhere to appropriate health safety standards.

Upcoming Events and Priorities

- Rapid Response Teams (RRTs) at provincial level will receive refresher trainings to build their surveillance and contact tracing capacities. A Training of Trainers is being led by MOH CDC with support from technical partners, including WHO. The training will be cascaded to districts and health centre RRTs.
- MOH has begun conducting national weekly transmission stage assessments using multisource surveillance. Meetings with the provinces to initiate and support provincial stage assessments have begun.
- MOH is beginning activities to expand the ILI sentinel surveillance system to include a further seven new sites across the country to strengthen surveillance and early detection for COVID-19.
- MOH are developing a rapid containment strategy to plan the detection and response activities in the event of localized transmission for COVID-19.
- MOH are progressing with plans to expand and decentralize laboratory testing capacity for COVID-19 to three provincial laboratories: Siem Reap, Sihanoukville and Battambang. A comprehensive proposal for the expansion of a sustainable Molecular Diagnostics capacity in Cambodia has been developed. Testing at the new laboratory in Siem Reap has begun, adding provincial laboratory testing capacity to the existing three labs. The University of Health Science has also been approved to begin testing for a one-month trial period.
- MOH Department of Hospital Services (DHS) is finalizing version 3.0 of the clinical guidelines. This version includes content on management of severe and critical cases; oxygen considerations; procedures for SARS-CoV-2 monitoring; discharge criteria; use of medicines; and post-discharge management. A Maternal, Newborn and Child Health Services COVID-19 technical brief, led by the National Maternal Child Health Centre, is also being finalized to complement the clinical guidelines.
- The National Immunization Programme is drafting the COVID-19 National Deployment and Vaccination Plan (NDVP).
- The government continuously assesses the adjustment of non-pharmaceutical interventions (NPIs) through a gradual step-wise approach that considers the effectiveness, socio-economic cost, and public acceptability of each measure, while continuing to increase surveillance to inform decision-making.
National Transmission Assessment

**1-Imported** As of 6 September 2020, 236 (86%) of the 274 cases were imported, and the remaining cases were locally acquired and have all been epidemiologically linked to confirmed cases. All cases since 11 April (n=152) have been imported or directly linked to an importation event. There is no indication of localized transmission. Both of the confirmed cases are isolated in hospital. There are no reports of undiagnosed respiratory clusters through the national hotline. Influenza-like illnesses (ILI) and severe respiratory illness (SRI) reports are below expected levels for September as is the case in most parts of the world. A total of 81,281 individuals have been tested using real-time polymerase chain reaction (RT-PCR), with a positivity rate of 0.34%. In total, 102,628 tests have been performed as of 07 September 2020 including 2,605 ILI/ SARI sentinel surveillance specimens which have been tested negative for SARS-CoV-2.

<table>
<thead>
<tr>
<th>Epi Update COVID-19</th>
<th>Tests</th>
<th>Cases</th>
<th>Deaths</th>
<th>ICU Admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5,702</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>NAT Tests past 7 days</td>
<td></td>
<td>New cases past 7 days</td>
<td>Deaths past 7 days</td>
<td>ICU Admissions past 7 days</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(-100% 7-day)</td>
<td>(0% 7-day)</td>
<td>(0% 7-day)</td>
</tr>
<tr>
<td>102,628</td>
<td>274</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Cumulative NAT Tests</td>
<td>Cumulative Cases</td>
<td>Cumulative Deaths</td>
<td>Cumulative ICU Admissions</td>
<td></td>
</tr>
</tbody>
</table>

- 100% Imported Cases in past 28 days (23)
- 0% Cases in past 28 days with no link (0)
- 0 Active Clusters
- 0 Active clusters with >3 generations

<table>
<thead>
<tr>
<th>Health Service Provision COVID-19</th>
<th>0 Healthcare worker cases reported past week</th>
<th>27 Hospitals admitting COVID-19 patients</th>
<th>13,667 Total public hospital beds</th>
<th>17 Number of hospitals with experience in COVID-19 case management</th>
</tr>
</thead>
</table>

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

Figure 1. Number of confirmed COVID-19 cases by acquisition status and date of positive test

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

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cases</td>
<td>Deaths</td>
<td>Cases</td>
</tr>
<tr>
<td>0-9</td>
<td>1(0)</td>
<td>0(0)</td>
<td>2(0)</td>
</tr>
<tr>
<td>10-19</td>
<td>1(0)</td>
<td>0(0)</td>
<td>3(0)</td>
</tr>
<tr>
<td>20-29</td>
<td>10(0)</td>
<td>0(0)</td>
<td>101(0)</td>
</tr>
<tr>
<td>30-39</td>
<td>9(0)</td>
<td>0(0)</td>
<td>50(0)</td>
</tr>
<tr>
<td>40-49</td>
<td>6(0)</td>
<td>0(0)</td>
<td>18(0)</td>
</tr>
<tr>
<td>50-59</td>
<td>10(0)</td>
<td>0(0)</td>
<td>14(0)</td>
</tr>
<tr>
<td>60-69</td>
<td>15(0)</td>
<td>0(0)</td>
<td>27(0)</td>
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<tr>
<td>70-79</td>
<td>2(0)</td>
<td>0(0)</td>
<td>4(0)</td>
</tr>
<tr>
<td>80-89</td>
<td>0(0)</td>
<td>0(0)</td>
<td>0(0)</td>
</tr>
<tr>
<td>90+</td>
<td>0(0)</td>
<td>0(0)</td>
<td>0(0)</td>
</tr>
<tr>
<td>Unknown</td>
<td>0(0)</td>
<td>0(0)</td>
<td>1(0)</td>
</tr>
<tr>
<td>Total</td>
<td>54(0)</td>
<td>0(0)</td>
<td>220(0)</td>
</tr>
</tbody>
</table>
Figure 2. Proportion of confirmed COVID-19 cases by age group and nationality (n=274)

Figure 3. Number of ILI cases from ILI sentinel sites (n=7) by week, 2020 and 2017-2019

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Figure 4. Number of patients with severe respiratory illness by week, 2020 and 2017-2019

Strategic Approach
National and Provincial Public Health Response

Incident Management Systems
- Inter-Ministerial Committee, chaired by the Minister of Health, with Secretaries of State
- National COVID-19 Committee, chaired by Samdech Prime Minister
- Provincial COVID-19 Committees, chaired by Provincial Governors
- Committee on Economic and Financial Policy (CEFP)/ Ministry of Economy and Finance (MEF) of four Working Groups to address the socio-economic impacts of COVID-19

System and Policy Development
- State of Emergency legislation was promulgated into law on 29 April 2020; has not been enacted
- Go.Data Platform used as a surveillance database including laboratory and contact tracing information
- NIPH and CDC databases have been adjusted to allow for multisource dataset on testing and surveillance

Key Priorities
- A primary care strategy for COVID-19 is being developed by MOH departments. This document will include suggested roles and responsibilities for health centres in the potential scenario of community transmission, as well as guidance on clinical management and infection, prevention and control
- A survey of clinical management and infection prevention and control trainings is currently being implemented by MOH/DHS to support the development of a national curriculum for COVID-19
- A number of health system readiness assessments on hospital readiness, ICU capacity, oxygen, staffing, etc. are currently being conducted by MOH/DHS
- National programmes are developing specific COVID-19 preparedness and responses plans
- Implementing the laboratory expansion strategy to ensure sustained testing for COVID-19
- Strengthening facility quarantine to reduce the risk of onward transmission with the development of simple job aids for facility staff
- Strengthening the use of multisource surveillance at national and subnational levels for risk assessment and decision making
- Expanding laboratory testing capacity for COVID-19
Strategic Approach to COVID-19 Prevention, Detection and Control

- **Testing strategy and contact tracing system in place**
  A broad testing strategy is being implemented nationwide, including testing all suspect cases meeting case definition, active surveillance for pneumonia cases in hospitals, testing at POEs at day 1 and day 13 of 14-day quarantine and testing ILI and SARI samples from sentinel sites for COVID-19. Hot-spot surveillance strategies and targeted testing of high-risk populations are also being implemented as necessary.

- **Risk communication and community engagement**
  A strategy for surveillance using community engagement has been developed and will be piloted for case detection at the health centre level and in the community. The Ministry of Interior is reinforcing the monitoring of quarantine through follow-up and fines for individuals who do not follow guidelines. A community engagement strategy has been drafted. MOH has developed a Risk Communication and Community Engagement monitoring and supervision plan being implemented from May 2020 to July 2020 for health care personnel and village personnel in 12 provinces.

- **NPIs (recorded in table at end of report)**
  

Best Practices / Lessons Learned
Factors Contributing to Strong Response

- **Strong leadership and coordination**
  - Whole-of-government, whole-of-society response led by the Prime Minister, with public health actions led by Minister of Health
  - National Master Plan for COVID-19 developed with budget of $62 million for first year

- **Past investments have built a functional public health system**
  - Multisource surveillance for COVID-19, including event-based surveillance (with 115 hotline) and expanded ILI/SARI surveillance
  - Almost 3,000 RRT members across the country conduct case investigation and contact tracing

- **Risk communication and community engagement**
  - Timely messages disseminated through TV, radio and social media, regular press releases, press conferences and media briefings
  - Targeted communication materials developed for at-risk groups, including migrants and garment factory workers
  - Community engagement strategy being rolled out to encompass all aspects of surveillance and response for COVID-19, particularly in the event of community transmission

- **International solidarity and cooperation**
  - Open and transparent health system response in the country
  - Close technical and operational cooperation between UN agencies and other development partners
  - High-level participation in international meetings, including regular coordination between National International Health Regulations (IHR) Focal Points
Non-Pharmaceutical Interventions (NPI)

Large-scale NPIs announced on 16 March 2020 included the closure of all education facilities nationwide, with distance learning measures instituted.

On 21 July it was announced that 20 high-safety standard private schools in Phnom Penh, Siem Reap and Battambang will be allowed to open from August as the first of a three-phase reopening plan. Guidelines and Standard Operating Procedures (SOPs) on school health promotion in the context of COVID-19 followed soon after. A Memorandum of Understanding (MOU) between schools and the Ministry of Education, Youth and Sport (MoEYS) must be signed before they are allowed to reopen. On the 25 August the MoEYS issued guidelines for the second phase, which means public kindergartens, primary and secondary schools will be allowed to open in September provided they can adhere to appropriate health safety standards.

Karaoke bars (KTVs) and nightclubs were closed on 17 March. On 7 July, the Phnom Penh Municipal Administration announced KTVs and clubs could reopen, provided they convert their venues into restaurants and receive a city hall permit to operate. Venues must also follow MOH and Ministry of Tourism-mandated measures such as physical distancing, open-air ventilation and other precautions.

To limit importation of COVID-19 cases, international arrivals from several high-burden countries were banned beginning in March. Lifting of these bans on 20 May has been accompanied by strict entry requirements for all non-diplomatic foreigners entering Cambodia including: requiring negative COVID-19 health certificates, medical insurance, testing upon arrival, 14-day quarantine and further testing on day 13.

On 26 July it was announced that there will be a temporary suspension of incoming flights from Malaysia and Indonesia as of 1 August. The measures come in response to the significant increase in positive cases arriving from these countries in June and July. A later ban was also announced on flights coming from the Philippines, which came into effect 13 August.

Measures to curb any potential community transmission has also involved the cancellation of public holidays. Khmer New Year, which usually take places in April, was officially rescheduled for 17-21 August, and the three-day Water Festival in late October has also been cancelled.

On 5 September the MOH announced that Islamic religious practices will be allowed to resume in mosques for a one-month trial period, provided strict COVID-19 prevention and transmission measures are followed.

The second round of the COVID-19 Cash Transfer Programme for ID Poor Households, initially launched in June, reached 2.6 million citizens at a value of $30 million in late August, the Ministry of Economy and Finance has announced. Further payments will be made in the fourth week of September.
**Table 2. NPI implementation and lifting dates**

<table>
<thead>
<tr>
<th>NPI</th>
<th>Monitoring status</th>
<th>Date first implemented</th>
<th>Date last modified</th>
<th>Implementation</th>
<th>Partial lift</th>
<th>Lifted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wearing Face Masks, Hand Hygiene, Respiratory Etiquette</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
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<tr>
<td>School Closure</td>
<td>16 March</td>
<td>25 August</td>
<td>National</td>
<td>Required</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>Workplace Closure</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
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<tr>
<td>Mass Gatherings</td>
<td>3 April</td>
<td>15 June</td>
<td>National</td>
<td>Required</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Stay at Home</td>
<td>Government recommends stay home if possible</td>
<td>Government</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restrictions on Internal Movement (within country)</td>
<td>9 April</td>
<td>None</td>
<td>National</td>
<td>Required</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Restrictions on International Travel</td>
<td>27 March</td>
<td>11 August</td>
<td>National</td>
<td>Required</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Others; specify in narrative</td>
<td>None</td>
<td>None</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
Figure 5. NPIs timeline combined with epidemic curve

- 27 January: First case of COVID-19 diagnosed in Cambodia
- 22 March: Cambodian migrants called to self-quarantine
- 16 March: Education facilities closed nationwide
- 27 March: Travel restrictions issued
- 7 April: Prime Minister cancels the Khmer New Year celebrations scheduled for next week
- 9-16 April: Travel restrictions between districts and provinces
- 20 May: Ban on nationals of six countries lifted
- 11 June: New border measures implemented
- 25 July: 20 private schools allowed to reopen in August
- 18 August: Ban on flights from two countries
- 13 August: Ban on flights from one country (from three)
- 25 August: Medium risk, standard public schools allowed to reopen in September
- 11 August: Consolidation of water festival holiday scheduled for October