MALAYSIA CASE STUDY
COVID-19
PREPAREDNESS & RESPONSE

DR THILAKA CHINNAYAH
DEPUTY DIRECTOR (SURVEILLANCE),
PREPAREDNESS, SURVEILLANCE AND RESPONSE SECTION
DISEASE CONTROL DIVISION
MINISTRY OF HEALTH MALAYSIA
30 JUN 2022
The Countries Best & Worst Prepared For An Epidemic

Countries/territories ranked by ability to respond to an epidemic/pandemic in 2019*

*100=greater level of preparedness; Index benchmarks 10 health security factors critical to fighting disease outbreaks. Source: 2019 Global Health Security Index, Express

PREVENTION

PREPAREDNESS

RECOVERY

RESPONSE
PREVENTION

INVESTMENT DURING PEACEFUL TIME
PREPAREDNESS LEVEL FOR PUBLIC HEALTH EMERGENCIES

Asia Pacific strategy for emerging diseases and public health emergencies (APSED III)

Malaysia Strategic Workplan for Emerging Diseases (MySED Workplan: 2012-2015)

ENHANCE PREPAREDNESS THROUGH SIMULATION EXERCISES

GLOBAL EOC EXERCISE (GEOCX) 4-6 DECEMBER 2018

PANDEMIC INFLUENZA EXERCISE (PANFLU-X) KLIA, JULY 2019

REGIONAL RABIES SIMULATION EXERCISE-2019

WHO – IHR CRYSTAL EXERCISE: 3 December 2021
HUMAN RABIES OUTBREAK IN SARAWAK, 2017

SABAH POLIO OUTBREAK 2019

ILLEGAL DUMPING OF TOXIC WASTE IN KIM KIM RIVER-2019
DEPLOYMENT TO WEST AFRICA - IN SUPPORT OF EBOLA OUTBREAK

FIELD EPIDEMIOLOGY TRAINING - EPIDEMIC INTELLIGENCE PROGRAM (EIP) - Started in 2001

ATTACHMENT OF OUR EIP TRAINEES WITH WPRO, WHO
EVALUATION OF IHR CORE CAPACITIES BY EXTERNAL EXPERTS

JEE 2019 Conclusion:
Malaysia has demonstrated a high level of achievement in fulfilling IHR requirements and has a well developed health security system.
The event started...

- Began in mid-December 2019 in the city of Wuhan in central China, as an emerging cluster of people with Pneumonia of unknown cause

- Linked primarily to stallholders who worked at the Huanan Seafood Market, which also sold live animals

- 12 Jan 2020- Chinese scientists subsequently isolated a new coronavirus, designated 2019-nCoV, which has been found to be at least 70% similar in gene sequence to SARS-CoV
RESPONSE LEVEL IN LOCAL EPIDEMIC

**ALERT**: The disease is mainly overseas and the response is to detect and minimise importation of disease. This requires border control measures and may require measures to try to stop the spread from individual cases or resultant clusters if they are imported into Malaysia.

**CONTAINMENT**: The disease has arrived in Malaysia and the primary response is to stop or limit the spread of the disease as much as possible. This requires extensive contact tracing and quarantine measures.

**MITIGATION**: The disease is spreading widely through the community, and measures to try to stop its spread are no longer effective. The response is to reduce the overall impact of the disease in the community. This requires an overall activation of business continuity plans, surge capacity for healthcare and essential services, and community based public health measures.
DISEASE OUTBREAK RESPONSE MATRIX MALAYSIA (DORMM)

1. ALERT PHASE
   - The disease is mild or;
   - Disease is severe but limited human to human transmission.
   - The disease is mainly overseas, and the response is to detect and minimise importation of disease.

2. EARLY CONTAINMENT PHASE
   - Documented human to human transmission but;
   - No sporadic cases in Malaysia.
   - No community or limited community spread.
   - The disease has arrived in Malaysia and require primary response.

3. LATE CONTAINMENT PHASE
   - Local transmission established;
   - Disease is mild but could be severe in vulnerable group (elderly, children, pregnant woman, immune-compromised).
   - More sporadic cases reported
   - Increase fatality
   - Still being contained

4. MITIGATION PHASE
   - Disease is severe;
   - Spreading widely;
   - Control measures applied were no more effective.
   - The disease is spreading widely through the community. The response is to reduce the overall impact of the disease in the community. If fatality is high, must stay at containment phase.
PREPAREDNESS

 ALERT PHASE ACTVITIES
• Early alert to all our healthcare facilities and International point of entry- (5 January 2020)

• Sharing of WHO Guidelines for Entry Point Screening of Travellers from/Exiting Wuhan City - 16 January 2020

• Distribution of Interim Guideline- Strengthening fever screening at all International borders and also at all public and private health care facilities - 17 January 2020)
PROMOTIONAL ACTIVITIES AT POINT OF ENTRY

Awareness and health Education to,

- All front liners including healthcare workers
- International Travelers –especially from Wuhan, China
- General public
SCREENING AT POINT OF ENTRY USING THERMAL SCANNER - 19 January 2020

SURVEILLANCE ACTIVITIES

- Health Alert Card
- Flight announcement
- Aircraft Health Declaration Form
- Patients self declaration
- Temperature screening by thermal scanner
- Referral by the Immigration
- Distribution of health alert card and Home Assessment Tool
ADVICE FOR OUTBOUND TRAVEL AGENTS TO CHINA

Travel Association:
- Malaysian Chinese Travel Association- Johor Chapter
- The Malaysian Association of Tour & Travel Agents (MATTA) Johor Chapter

20 January 2020 - Visited Office of Ministry of Tourism in anticipation of high mobility during Chinese new year with school closure.

TRAVEL HEALTH ADVISORY

If you are going to China:
1. Avoid animals (alive or dead), animal markets, and products that come from animals (such as uncooked meat)
2. Avoid contact with sick people.
3. Wash hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer if soap and water are not available.

If you have returned from China, or you have been in contact with persons who have returned from China, monitor your body temperature and look out for fever (≥38°C) and symptoms of cough with breathlessness.

If those are present and treatment at the nearest hospital.

Please practice the following:
1. Cover your mouth when you sneeze. Throw the used tissues to the trash bin.
2. Always practice good hygiene when you are in close contact with people.
3. Use face mask whenever being in public places or you are in close contact with people.
4. Always maintain good personal hygiene and cleanliness.

TRAVEL HEALTH ADVISORY
23.01.2020

Jika anda pergi ke negara China:
1. Hindari hewan hati-hati (hidup atau mati), dan produk hewan asal (seperti daging atau telur)
2. Hindari kontak dengan orang yang sakit.
3. Cuci tangan dengan sabun dan air setiap kurang lebih selama 20 saat. Gunakan penyekat tangan (hand sanitizer) jika air tidak tersedia.

Jika anda datang daripada negara China, atau telah berada dalam kontak dengan orang yang datang daripada negara China, sila perhatikan tidak ada dan awal tanda-tanda gejala seperti demam (≥38°C) batuk dan sesak nafas.

Kami ianya anda tidak sakit, sila selalu menjaga kesihatan anda.

Travel health advisory
Nasihat kesihatan untuk pengembala

Prepared by Jabatan Kesihatan Negri Johor
BANNER DISPLAY ON TRIAGE AT ALL HEALTH CENTRES (23.1.2020)

✓ Placed at entrance of health clinics
✓ “Triage first; then register case”
✓ Preventive measures
✓ Encourage self declaration
AWARENESS AND HEALTH EDUCATION ON (N-COV) TO ALL HEALTHCARE WORKERS - 22 January 2020
RESPONSE ACTIVITIES

CONTAINMENT PHASE
**WUHAN VIRUS OUTBREAK**

**Dec 31 2019**
- Cluster reported

**Jan 1 2020**
- The Huanan Seafood Wholesale Market in Wuhan is closed as evidence suggests the outbreak is linked to it

**Jan 7 2020**
- Chinese authorities identify the virus as new type of coronavirus, nCoV

**Jan 13 2020**
- First case in Thailand

**Jan 16 2020**
- First case in Japan

**Jan 21 2020**
- 15 medical workers infected, 1 in critical condition, China confirms human-to-human transmission of Wuhan virus

**PHEIC DECLARED BY WHO 30 JANUARY 2020**

**PANDEMICS KNOW NO BORDERS**

The first case in Singapore was confirmed on 23 January 2020

**COMMUNICATION-**
"IHR Notification"

Malaysia reported the first Confirmed case on 25 January 2020
**Phase 1**
- Drastic immediate action is required to stop the spread of COVID-19.
- For more information on the restriction of movement order, call the National Operation Management Centre hotline at 03-0868 2010 when it opens from noon on March 17.
- Everyone in Malaysia must comply with the order.

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**Phase 2**

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**Phase 3**

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**Phase 4**

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**Movement Control Order (MCO)**

<table>
<thead>
<tr>
<th>Movement Control Order (MCO)</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCO Phase 1</td>
<td>18 March 2020</td>
<td>31 March 2020</td>
</tr>
<tr>
<td>MCO Phase 2</td>
<td>1 April 2020</td>
<td>14 April 2020</td>
</tr>
<tr>
<td>MCO Phase 3</td>
<td>15 April 2020</td>
<td>28 April 2020</td>
</tr>
<tr>
<td>MCO Phase 4</td>
<td>29 April 2020</td>
<td>12 May 2020</td>
</tr>
<tr>
<td>Conditional MCO</td>
<td>13 May 2020</td>
<td>9 June 2020</td>
</tr>
<tr>
<td>Recovery MCO</td>
<td>10 June 2020</td>
<td>31 August 2020</td>
</tr>
</tbody>
</table>
Testing for COVID-19

Enhance Movement Control Order - locality

Issuing Home Surveillance Order

COVID-19 Assessment Center

Burial of COVID-19 death
**The National Recovery Plan**

<table>
<thead>
<tr>
<th>2021</th>
<th>June</th>
<th>July &amp; August</th>
<th>Sept &amp; October</th>
<th>November &amp; December</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase 1</strong></td>
<td><strong>Phase 2</strong></td>
<td><strong>Phase 3</strong></td>
<td><strong>Phase 4</strong></td>
<td></td>
</tr>
<tr>
<td>Full MCO with only essential services allowed to operate.</td>
<td>• Begins when average daily cases fall to below 4000</td>
<td>• Begins when average daily cases fall to below 2000</td>
<td>• Begins when average daily cases fall to below 500</td>
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</tr>
<tr>
<td></td>
<td>• Usage of ICU beds falls to moderate levels.</td>
<td>• 40% of the population is fully vaccinated</td>
<td>• 60% of the population is fully vaccinated</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• 10% of the population is fully vaccinated.</td>
<td>• All economic sectors can reopen except for those with high risk of infection</td>
<td>• All economic and social sectors can reopen.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• More economic sectors will reopen, but social activities remain closed.</td>
<td>• Social sectors will reopen in stages</td>
<td></td>
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</tr>
</tbody>
</table>
RISK COMMUNICATION

• RC Team manage the daily issues hotline, emails & Whatsapp Application

• Dedicated telephone lines, email, WhatsApp, Chatbot

• Collaboration with:
  • TM One - telephone
  • Infobip – WhatsApp
EQUILIBRIUM = ENDEMICITY

LIVELIHOOD

LIVES
IMPROVING STATUS OF COVID-19 PANDEMIC IN MALAYSIA

**BED OCCUPANCY RATE IN HOSPITAL VS COMPLETE VACCINATION STATUS**

**VALUE OF Rt = 0.96 As of EPID WEEK 23 (11 Jun 2022)**
**PAXLOVID & EVUSHIELD TREATMENTS TO PREVENT COVID**

**PAXLOVID**
The first COVID-19 oral antiviral drug in Malaysia for patients:
- With mild - moderate symptoms (Categories 2 – 3)
- Considered high-risk

Until June 5, 2022:
- 1,364 patients were treated & have fully recovered
- No reports of severe side effects

Have been dispensed at MOH health facilities since April 15, 2022

Free of charge at private health facilities, but patients are subject to:
- Consultation fee
- Other related charges

**EVUSHIELD**
The monoclonal antibody drug Tixagevimab plus Climagimab (EVUSHIELD) is now being administered in government hospitals

- Given in two separate but consecutive intramuscular injections
- Used as a PrEP for those yet to be infected with COVID-19
- Pre-exposure prophylaxis (PrEP) is the administration of drugs to prevent the spread of infection for those at high risk
- Can be taken by immunocompromised patients 2 weeks after COVID-19 vaccination

**AVAILABILITY OF ANTI-VIRAL DRUGS & WIDE VACCINATION COVERAGE**

**Vaccination Status as of 28 June 2022**

- **At Least 1 Dose**
  - Children (5-11): 85.8%
  - Adolescents (12-17): 96.3%
  - Adults (18+): 93.5%

- **2 Doses**
  - Children (5-11): 83.5%
  - Adolescents (12-17): 93.5%
  - Adults (18+): 37.9%

- **Booster**
  - Children (5-11): 49.4%
  - Adolescents (12-17): 0.0%
  - Adults (18+): 0.0%

**ELIGIBILITY**
- Aged 12 years & above
- Weighing over 40 kg; AND
- Moderate – severely immunocompromised; OR
- Unable to be fully vaccinated due to medical reasons / history of severe reaction to COVID-19 vaccine

Source: Health Minister Khairy Jamaluddin
Published: June 8, 2022, Bernama Infographics
Malaysia:
Transition Phase to Endemic – 1 April 2022

Shift the management of COVID-19 pandemic from Government intervention through SOP and ACT by enforcement to individual responsibility and community solidarity.

“Living with the Virus”

- YB Khairy Jamaluddin; 9 March 2022
SEVEN COMPONENTS FOR SAFE REOPENING - LIVING WITH VIRUS

1. STANDARD OPERATING PROCEDURE (SOP)
   Single SOP and 9 Guidelines

2. HEIGHTENED ALERT SYSTEM (HAS)
   Warning & Response System

3. TESTING
   National Testing Strategy

4. TRIIS
   Test, Report, Isolate, Inform, Seek

5. DIGITALISATION
   Automated system of FTTIS

6. ECONOMY
   Re-Opening of International Borders in Stages

7. COMMUNITY
   Community Engagement & empowerment

RISK COMMUNICATION
1 SOP, 10 STIPULATIONS

FOR M'SIA'S 'TRANSITION TO ENDEMIC' PHASE

- Part of 7 requirements for the shift
- In efforts to return to a near-normal life
- 181 PPN SOPs have been narrowed down to 1 SOP
- Will be enforced under the Prevention & Control of Infectious Diseases Act 1988 (Act 342)

10 STIPULATIONS

- Must wear a face mask in a public place
- Businesses can resume operations as per licence
- Must practise good hand hygiene
- Must test for COVID-19
- Must manage suspected/confirmed COVID-19 case according to MOH guidelines
- Must use the MySejahtera app to check-in, as well as MySJ Trace
- Must keep a physical distance of 1 metre
- Must ensure there is proper ventilation
- Must ensure premises are kept clean
- Must ensure people are vaccinated for certain activities

DEPRECATED WEBSITE

- Being developed with assistance from the National Security Council (MKN)

9 SETS OF GUIDELINES

- Will help with making a safe choice
- Not compulsory, but encouraged

Covers activities related to:
1. Transportation & travel
2. Education & care
3. Retail, food & beverage
4. Enclosed workspaces
5. Open workspaces
6. Events, ceremonies, entertainment & tourist attractions
7. Hotels & other accommodation
8. Religious events, weddings & funerals
9. Sports, recreation & leisure
Effective May 1

**Face masks now optional**
- The wearing of face masks is still a must indoors but not outdoors, although encouraged

**MySejahtera scanning not compulsory**
- No longer compulsory to check-in with MySejahtera when entering premises but the MySJ Trace function should be activated

**All individuals allowed to enter premises**
- Individuals can now enter premises regardless of vaccination status, except positive cases and people observing house surveillance orders

**Travellers’ insurance**
- Covid-19 insurance no longer required to enter Malaysia

**No more physical distancing**
- All activities are now allowed to operate at full capacity, hence, physical distancing is not required

**Pre-departure and on-arrival tests eased**
- There is no need for the Covid-19 test before departure and upon arrival for fully vaccinated individuals aged 13 and above

**Updated test and release protocol for positive cases**
- Individuals who test positive for Covid-19 can be released from isolation if they test negative on day four
- If the individuals are still positive on day four, they must continue isolation until the seventh day

**Handshakes**
- People are now free to shake hands. However, they are advised to practise good hand hygiene

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Effective May 15

- All activities under the negative list will be dropped.
- As of April 1, only nightclub activities remained in the negative list since the first movement control order in 2020.
3. NATIONAL TESTING STRATEGY

What are the objectives of the National COVID-19 Testing Strategy?

1. To enable safe reopening of the economy and social sectors
   The COVID-19 pandemic has severely affected our lives, livelihoods and the economy. The transition to endemicity with a clear testing policy is essential to reopen the economy and social sectors safely.

2. To empower the Rakyat to live safely in the endemic phase
   To live safely with COVID-19 in the endemic phase, we need to adopt and adapt to new norms such as self-testing for COVID-19. The National COVID-19 Testing Strategy is a guide that will help us protect ourselves and Keluarga Malaysia against COVID-19.

3. To instil confidence as well as break the chain of COVID-19 transmission
   Testing is important to reduce the risk of COVID-19 transmission while lowering the effects of morbidity and mortality. Regular testing and compliance with SOPs will instil trust in the community for the continuity of daily life.

Table of Contents

1. COVID-19 testing as a new normal
2. General COVID-19 testing requirements
   - When should you get tested for COVID-19?
   - What are the types of COVID-19 screening tests?
   - An example of how to use a COVID-19 RTK-Ag self-test kit
   - How to report COVID-19 self-test results and close contacts?
3. COVID-19 testing requirements for specific activities
   - Workplace
   - Education sector
   - Mass gatherings
   - Targeted groups
   - Inbound travellers
4. Case management
   - Positive case management
   - Close contact management
   - Self-quarantine guidelines
4. PRACTISE ‘TRIIS’ TO KEEP YOURSELF AND OTHERS SAFE!

**What is ‘TRIIS’?**

- **Test**
  Get tested with a self-test kit as soon as possible if you are experiencing any infection symptoms such as runny nose, fever or cough.

- **Report**
  Report the test result (negative, positive or invalid) on your MySejahtera immediately.

- **Isolate**
  Isolate yourself immediately with discipline if you have been tested positive for COVID-19. Adhere to the HSO\(^1\) imposed by MOH\(^2\).

- **Inform**
  Inform your close contacts and immediate family members urgently if your test result is positive. Inform the health authorities or any CAC\(^3\) nearby if your condition has worsened while self-quarantining at home.

- **Seek**
  Seek immediate treatment at any healthcare facility or a CAC nearby if you are experiencing worsening symptoms such as breathing difficulties or high fever.

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Note:  
\(^1\) Home Surveillance Order;  
\(^2\) Ministry of Health Malaysia (Kementerian Kesehatan Malaysia);  
\(^3\) COVID-19 Assessment Centre (Pusat Penilaian COVID-19)
LAUNCHED IN APRIL 2020, NOW WITH 30 MILLION UNIQUE USERS, CONSISTING 16 MODULES, INTEGRATED WITH 6 DIFFERENT SYSTEMS

5. DIGITALISATION

<table>
<thead>
<tr>
<th>MySejahtera Modules</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Premises Check-in (Contact Tracing)</td>
</tr>
<tr>
<td>Individuals travelling from Abroad: (Quarantine and HSO)</td>
</tr>
<tr>
<td>Voter’s Attendance Record (Contact Tracing)</td>
</tr>
<tr>
<td>Staff &amp; Visitors in the Office (Visitors + Contact Tracing)</td>
</tr>
<tr>
<td>User profile verification for e-penjana programme</td>
</tr>
<tr>
<td>Planning quarantine centres for all travelers</td>
</tr>
<tr>
<td>Covid-19 positive individuals detected via private laboratory or health facility update their status in MySejahtera</td>
</tr>
<tr>
<td>Asymptomatic Covid-19 individuals are quarantined at home</td>
</tr>
<tr>
<td>Users can identify their risk of contracting Covid-19 based on their behaviour and compliance to SOP</td>
</tr>
<tr>
<td>Users and their dependant’s can register for Covid-19 vaccination programme and obtain their digital certificate upon completion vaccination completion</td>
</tr>
<tr>
<td>All Covid-19 test results are automatically displayed in MySejahtera application</td>
</tr>
<tr>
<td>Individuals are identified via MySejahtera check - ins</td>
</tr>
</tbody>
</table>
6. ECONOMY: Opening of International Borders in Stages
7. COMMUNITY EMPOWERMENT & ENGAGEMENT
Thank you