

APEC Emergency Preparedness Working Group

Voluntary Sharing of Practices in Responding to COVID-19

Australia

Full details of the Australian Government's response to COVID-19 are at [Australia.gov.au](https://www.australia.gov.au).

This includes detail of support measures from all of government including financial support and advice for businesses and employees, help for education providers, advice on domestic and international travel and other community services.

Measures include:

- Promoting good hygiene
- Stay at home unless:
 - going to work or education (if unable to do so at home)
 - shopping for essential supplies such as groceries,
 - going out for personal exercise in the neighbourhood, alone or with one other
 - attending medical appointments or compassionate visits
- Limits on public gatherings of more than two people
- Practicing [social distancing](#)
- [Isolating](#) people with the virus and their close contacts
- [Travel restrictions](#) for overseas travellers including mandatory 14-day quarantine for arriving Australian citizens and permanent residents
- Ban on non-essential domestic travel
- Closure of non-essential businesses
- [COVIDSafe app](#) to help find close contacts of COVID-19 cases and helps health officials to quickly contact people who may have been exposed to COVID-19.

State and territory health authorities are responsible for:

- testing of people for the virus
- monitoring close contacts of confirmed cases every day
- imposing travel restrictions between states
- opening fever clinics

China

China's Practices on Combating the COVID-19

Chinese President Xi Jinping has reiterated on multiple occasions that we should uphold the principle of putting people's lives and safety first.

After the COVID-19 outbreak, President Xi Jinping has personally directed and deployed the prevention and control work. The Central Leading Group for COVID-19 Prevention and Control, headed by Premier Li Keqiang of the State Council, was established. It works under the Standing Committee of the Political Bureau of the CPC Central Committee and aims to exercise unified leadership over epidemic prevention and control. A Central Guiding Team, led by Vice Premier Sun Chunlan of the State Council, was dispatched to Hubei province which was severely hit by the epidemic.

China has taken the safety and health of the people above everything else and given full play to the institutional advantages of the system of socialism with Chinese characteristics is showing strength in uniting all sectors and pooling all resources. We have taken the prevention and control of Wuhan and Hubei province as the top priority, implemented flexible and dynamic measures and established joint prevention and control mechanism to deal with this disease. The principle of early detection, reporting, isolation and treatment was put forward. And the principle of treating the infected in dedicated facilities by senior medical professionals from all over the country and with all necessary resources was laid down.

Across China, all provinces, autonomous regions and municipalities directly under the central government officially launched the first-level response to major public health emergency, established joint prevention and control mechanisms and taken society-wide efforts against the virus.

The Chinese government also called on the public to refrain from traveling and thus contribute to the epidemic fight. For this end, measures such as extending the Spring Festival holiday, postponing the reopening of schools, flexible resumption of work, and staggering the time of return trips of workers were adopted. Meanwhile, strict health monitoring and personnel management has been taken. By doing so, medical supplies and daily necessities in priority areas were provided in time.

Coordinated efforts were made to promote economic and social development while preventing and controlling the virus. We not only effectively contained the spread of the virus but started the restoration of work and production as well, thus maintaining the good momentum of economic and social development.

Ministry of Emergency Management of the People's Republic of China is among the members of Joint Prevention and Control Mechanism of the State Council. Guided by the Central Leading Group for COVID-19 Prevention and Control and Joint Prevention and Control Mechanism of the State Council, the Ministry leveraged its strengths and played its due role in this battle against the virus. In particular, through close cooperation with National Health

Commission and other relevant government departments, it took the initiative to undertake some urgent, difficult and dangerous tasks and provided important guarantees and necessary services.

First, it strengthened the prevention and control of work safety risks, thus supporting provinces, municipalities and autonomous regions across the country to focus on fighting the COVID-19. To prevent even small possibilities of disasters in their early stages, it intensified the supervision on work safety, disaster prevention, reduction and relief, ensuring that no major disasters or accidents will occur in the midst of a nationwide fight against the pandemic. Moreover, the Ministry is now keeping on standby for possible emergency rescue operations, and formulating and improving emergency rescue guidelines and operational procedures against the backdrop of pandemic to ensure that the rescue operation can be undertaken in an orderly and effective manner.

Second, it offered safety assurance to key government departments that have been engaged in epidemic prevention and control. It has taken such measures as organizing safety services groups to provide support at designated hospitals, quarantine spots and enterprises producing and delivering epidemic prevention supplies, offering point-to-point safety guidance, dispatching rescue forces to above-mentioned places in advance, and formulating and issuing requirements or reminders on safety technology based on different categories and places to address their needs and requirements.

Third, it leveraged its functional strengths and was directly engaged in the battle against the virus. All staffs and rescue teams have been deployed to participate in urgent, difficult and dangerous tasks such as receiving epidemic-related call for help, sending patients and medical workers to designated hospitals, transferring medical supplies and waste water, as well as cleaning and disinfecting. Necessary relief supplies were allocated several times to Hubei and other provinces.

Fourth, it created conditions for the resumption of work and production. Hidden risks and hazards were investigated to ensure workplace safety. Relevant agencies and personnel were required to fulfill their responsibilities of ensuring safety in the resumption of work and production. To this end, the Ministry has taken eight measures, including automatically extending expired certificates, online processing of administrative approvals, and streamlining resumption procedures, etc.

Hong Kong, China

Hong Kong, China (HKC) has implemented a series of comprehensive and coordinated measures to contain the spread of COVID-19 in the community. Examples of which include activating the Emergency Response Level of the Preparedness and Response Plan, enhancing quarantine arrangements for people at risk of carrying the infection (e.g. quarantine at quarantine centers or compulsory home quarantine); enhancing laboratory surveillance programme; promoting social distancing measures (e.g. suspension of classes, deferment of public examinations, implementation of work from home arrangement, prohibition of group gatherings of more than certain number of people in public places, etc.); boosting of supply of surgical masks, etc.). Details on HKC's multi-pronged response to COVID-19 are available at

https://www.brandhk.gov.hk/uploads/brandhk/files/factsheets/Hong_Kong_Themes/Factsheet_COVID-19_E.pdf

Daily briefings are held to regularly update the media and the public on the latest developments, including the number of cases and new measures related to COVID-19. Press conferences are held by senior officials to announce major government decisions and anti-epidemic measures etc. A dedicated website (<https://www.coronavirus.gov.hk/eng/index.html>) has been launched by the Government of HKC to disseminate useful information and timely updates on the COVID-19 pandemic situation.

To assist enterprises in coping with the pressure brought about by the economic downturn and alleviate their burden, the Government of HKC has announced various measures to support enterprises and safeguard jobs. As of 8 April 2020, the Government has pledged HK\$287.5 billion (US\$36.9 billion) – about 10 per cent of GDP – to help offset the economic fallout from COVID-19, including the HK\$120 billion (US\$15.4 billion) relief package in the 2020-21 Budget, the first round of HK\$30 billion (US\$3.9 billion) Anti-epidemic Fund and HK\$137.5 billion (US\$17.6 billion) relief package announced on 8 April 2020. Details of various business support measures are available at

https://www.brandhk.gov.hk/uploads/brandhk/files/factsheets/Hong_Kong_Themes/Business%20support%20measures_E.pdf.

*[**Note:** Please note that the above measures are subject to review from time to time having regard to the latest situation in Hong Kong, China.]*

Indonesia

Indonesian Government Response to COVID-19

1. The Government of the Republic of Indonesia has established COVID-19 Mitigation Task Force.
2. The Indonesian National Board for Disaster Management declared an emergency period of 91 days, effective until May 29, 2020.
3. The Ministry of Manpower has issued Circular No. M/67/HL.00.0-1/V/2020 on the Handout of Holiday Bonus for 2020 During the COVID-19 Pandemic.
4. The Finance Ministry has issued Minister of Finance Regulation No. 46/PMK.07/2020 on the Management of Grants from the Central Government to the Regional Government in the Effort to Mitigate the COVID-19 Pandemic and its Impact, which regulates the provision of grant money to regional administration.
5. The Minister of Health has issued a Decree and a Circular detailing the reimbursement claim process for hospitals treating COVID-19 patient.
6. Implementation of Large Scale Social Distancing (PSBB) for minimizing COVID-19 spread in Indonesia.
7. The Ministry of Health issued Circular No. HK.02.01/Menkes/303/2020 on the Provision of Health Services Through the Use of Information and Communication Technology. ('telemedicine').
8. The Ministry of Finance has issued Minister of Finance Regulation No. 43/PMK.05/2020 on the Mechanism of the Implementation of State Budget on Income and Expenses Borne in Handling the COVID-19 Pandemic, which serves as the underlying regulation in implementing the various tax discounts and exemptions as well as social aid implemented in response to the COVID-19 pandemic.
9. The Ministry of Finance also issued Minister of Finance regulation No. 44/PMK.03/2020 on Tax Incentives for Taxpayers Affected by the COVID-19 Pandemic.
10. The State Financial Service Authority (Otoritas Jasa Keuangan or OJK) has issued a guideline for the reporting of any restructuring of financing affected by COVID-19.
11. The Ministry of Transportation has issued Minister of Transportation Regulation No. 25/2020 regulating the use of transport vehicles during the exodus (also known as *mudik* or *pulang kampung*, which translates to going home) season that will come in the last weeks of May. The prohibition of *mudik* is also stated in the regulation.

12. Generally, the government has also:

- Promote health and hygiene lifestyles (washing hands and wearing mask)
- Upgrade 132 hospitals to treat COVID-19 patients.
- Facilitate and increase the testing capacity of COVID-19 referral laboratories which in turns increasing the amount of COVID-19 testing nationally.
- Coordinate with local manufacturers to develop personal protective equipments that are made in Indonesia using Indonesia local resources.
- Establish an integrated information system for COVID-19 control in Indonesia with name *Bersatu Lawan Covid*.

Japan

Response Measures to COVID-19 at Evacuation Centers

Supplementary Guidelines

The Government of Japan has requested Disaster Management Offices at the Local Governments to consider the following response measures against COVID-19 in disaster preparedness and disaster response, especially at the evacuation centers.

1. Open many evacuation centers, as possible

Taking into account the capacity of evacuation centers and number of people affected by disaster, open more evacuation centers on top of those already designated (e.g., utilizing hotels and *ryokans* as evacuation centers).

2. Minimize crowd at evacuation centers (other evacuees to stay at relatives' or friends' houses)

Avoid evacuation centers from getting overcrowded by notifying potential evacuees to consider staying at relatives' or friends' houses, if possible.

3. Discuss in advance the evacuation of *home care patients* with health and welfare offices

In close cooperation with the health and welfare offices, discuss in advance what appropriate response shall be given to home care patients who show mild symptom of COVID-19.

4. Regularly check evacuees' health condition

- Upon arrival at evacuation centers, check evacuees' health conditions following the *Infection Control Manual at Evacuation Centers*
- While at the evacuation centers, evacuees' health conditions must be checked regularly

5. Thoroughly practice basic preventive measures (e.g., washing hands and coughing etiquette)

Encourage evacuees and management staffers to wash hands frequently and practice basic measures against the new coronavirus (e.g., coughing etiquette).

6. Maintain hygienic environment at evacuation centers

Keep hygienic environment at evacuation centers by cleaning goods with detergent, especially when it looks dirty.

7. Ensure adequate ventilation and space

Pay attention to adequate ventilation as well as space for evacuees at evacuation centers.

8. Secure space for people with symptoms (e.g., cough and fever)

- Secure a private space for people who show symptoms (e.g., cough and fever), preferably with toilets
- If it is impossible to separate people with symptoms by giving a private room, ensure that physical distancing measures (e.g., using partitions) are taken into account

- Allocate different zone (special space) and different line (in using toilets) between general evacuees and those who show symptoms
- Discuss and coordinate in advance with relevant offices and facility managers regarding the utilization of spaces of evacuation centers

9. Prepare, in advance, appropriate measures in case someone is found infected of COVID-19

Discuss in advance appropriate response measures with health and welfare offices in case some evacuees are infected with COVID-19.

Republic of Korea

o COVID-19 Sample Collection (through screening stations)

- (Overview) Sample collection at the screening stations is aimed at minimizing the risk of infection between suspected cases and others including patients and visitors. Screening stations are located across the country at public health centers, medical centers, and open areas so that people with suspected symptoms can be consulted in a separate venue from healthcare facilities or emergency rooms (635 stations as of end of March).
- (Type) Different types of screening stations are in operation depending on circumstances and sample collection sites: drive-through stations where patients finish the whole process from check-in to sample collection within 10 minutes without leaving the car; walk-through stations where patients enter a transparent acrylic chamber resembling a phone booth and health workers on the other side of the wall collect samples; and outdoor open walk-through stations including one at Incheon International Airport to swiftly and safely collect samples from a large number of inbound travelers.
- (Effect) To contain the spread of the virus, the routes taken by suspected COVID-19 cases are separated from other patients and medical personnel at screening stations wear personal protective equipment (PPE). Reducing the time taken for sample collection, the screening stations contribute to effective response to COVID-19.

< Drive-Through, Walk-Through and Open Walk-Through Screening Stations >

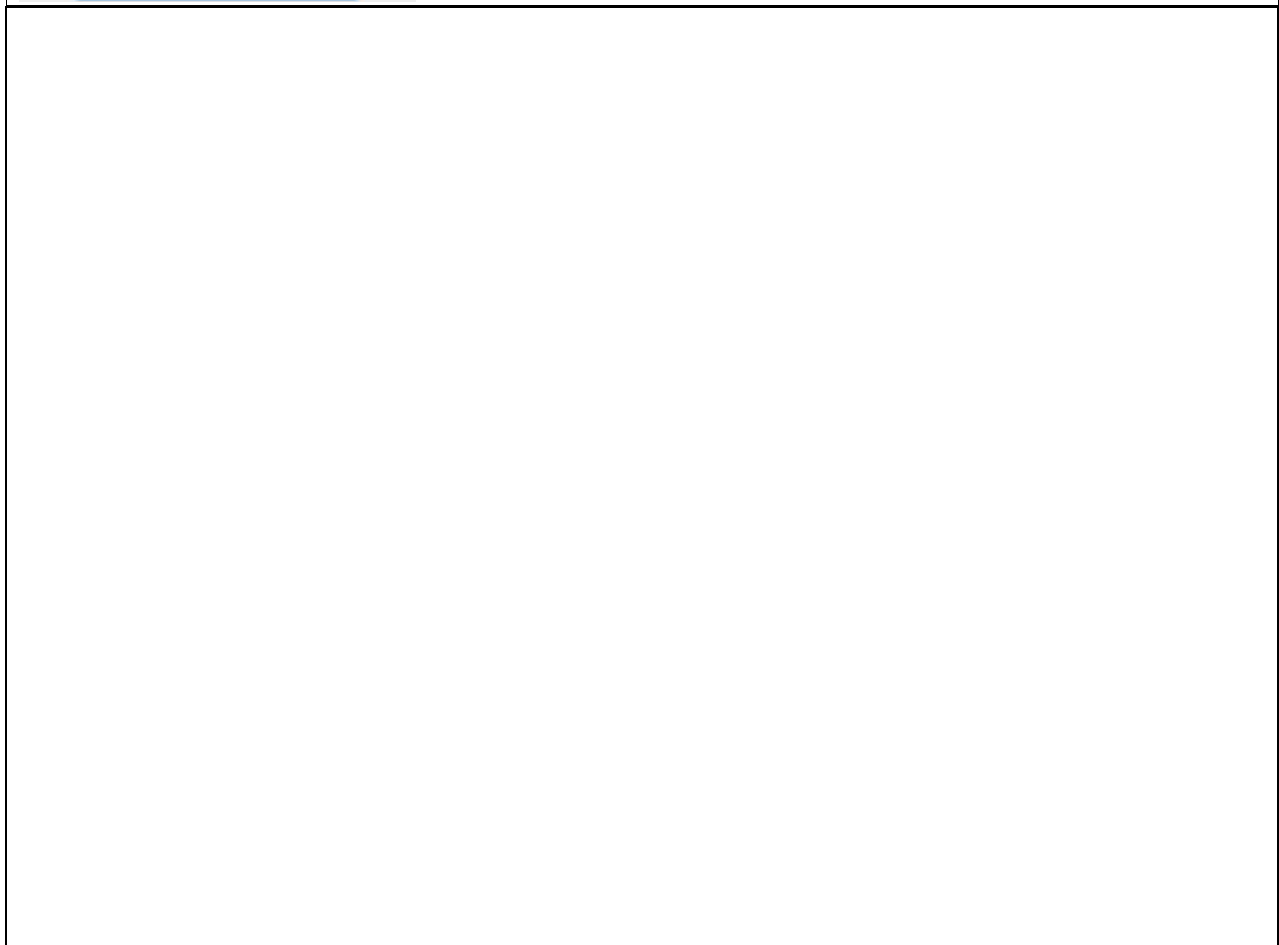
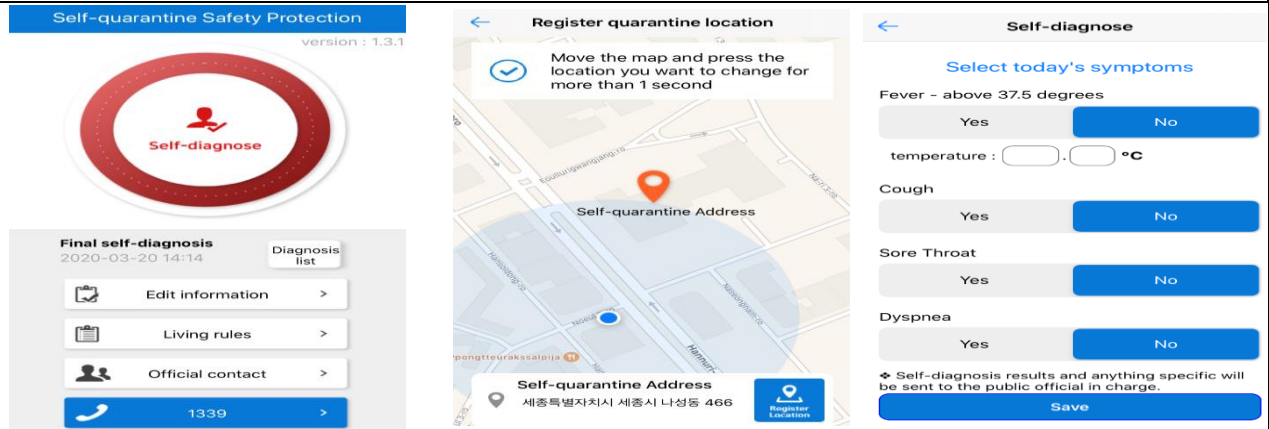


o Development and Use of Self-quarantine Safety Protection App

- (Overview) Self-quarantine Safety Protection App is developed and used to contain the spread of COVID-19 and to support local governments in monitoring people under home quarantine.
 - * Separate apps were developed for home quarantined people and for assigned case officers. For foreigners entering Korea, the app for home quarantined people supports six languages: Korean, English, Chinese, Vietnamese, Thai, and Russian.
 - ** The app collects and uses location information of the users with their consent.

- (Effect) Home quarantined people register their home location and enter their personal information such as name and contact information on the app, which then automatically sends the current location of the user. When a home-quarantined person leaves the registered quarantine area, the app sends an automatic alert to an assigned case officer, thereby enabling swift response. The app also enables swift response to home quarantined people with symptoms, as they self-report their health condition twice a day and their condition is automatically notified to the assigned case officers.

< Self-quarantine Safety Protection App >



Malaysia

Malaysian Voluntary Sharing of Practices on the Fight against COVID-19

16th March 2020: the National Security Council (NSC) took over the role of coordinating Malaysia's responses to COVID-19 from the National Disaster Management (NADMA) once the management of the pandemic was no longer a disaster management issue per se but had become public order, economic well-beings and international affairs issues.

18 - 31 March 2020: The first phase of the Movement Control Order (MCO). The main objective of this phase was to break the COVID 19 transmission chain. It involved prohibition of all mass gatherings that included religious, sport, social and cultural activities. In addition, business premises, government offices, schools, universities were also ordered to be closed. During this phase, only services that were considered essential for the public to access food, medication remained open. Similarly, agencies and companies that provided essential services such as water, electricity, energy, telecommunications, post, transportation, irrigation, oil, gas, fuel and lubricants, broadcasting, finances, banking, health, pharmacies, fire and rescue, prisons, ports, airports, security, defence, public cleansing, were allowed to operate with conditions.

1 - 14 April 2020: The second phase of the MCO. More stringent measures to limit movements of the people were introduced. A total movement restriction was imposed on areas classified as red zone. Other than these areas, the government imposed shorter operating hours for supermarkets, petrol stations and other businesses, and introduced stricter conditions for inter-state, cross-town movements. To control imported cases of COVID 19, all Malaysian returnees from abroad must undergo a 14-days quarantine requirement at gazetted premises provided by the government before being allowed to go to their next destinations. For a similar reason, foreign visitors were not allowed to enter Malaysia.

15 – 28 April 2020: The 3rd phase of MCO. During this phase, areas with a large number of cases were subjected to stricter movement control (enhanced MCO) measures that imposed a total restriction on the effected areas' resident movement. However, at the same time, measures to gradual reopening of economic activities and people movement were introduced. Maintaining strict conditions, the government began to allow more industrial and business sectors to operate. Stranded university students were allowed to return to their home towns with government supervision. The government also began to allow freer movements such as access to wider economic activities to residents of areas which had been designated as green zones.

29 April - 12 May 2020: The 4th phase of MCO. The objective was to reopen the economic activities in stages and at the same time, ensure COVID-19 remains under control. All the economic sectors with the exception of few industrial and services sectors were allowed opened although with strict conditions. People's movements especially within a state were allowed. However, the restrictions on social gatherings, religious activities, certain sports remain in place. Schools and universities remain closed.

Two stimulus packages worth RM250bil have also been introduced by the government to assist the people as well as businesses to cope with the economic impacts of the MCO and COVID- 19. In addition, Malaysia has also strengthened cooperation with other regional and international partners such as ASEAN Health Ministers Meeting on 7 April 2020 to coordinate strategies and share information so that cross-border infections can be better controlled.

10th May 2020: The MCO has been extended until 9th June 2020. This was based on the sentiment of the people who wanted the government to continue to take precautions to contain the Covid-19 pandemic. It means all rules and SOPs during the conditional MCO will continue to be enforced until June 9. Any changes to the SOPs or lists of sectors which will be allowed to operate would be announced from time to time.

Mexico

The Federal Telecommunications Institute (IFT, for its acronym in Spanish), the regulator and competition authority in the telecommunications and broadcasting sectors in Mexico, has developed recommendations and actions in the face of the COVID-19 national contingency to maintain the effective provision of telecommunications service.

The recommendations and actions carried out by the IFT in this emergency mentioned as follow:

- Microsite “Face to Coronavirus”. The Institute has developed the microsite “Face to Coronavirus – the Telecom are on your side”, in the following link: <http://www.ift.org.mx/comunicacion-y-medios/frente-al-coronavirus-las-telecom-estan-de-tu-lado>. In this microsite, are available recommendations to:
 - Responsible use of telecommunications networks.
 - Tools for planning consumption in response to changes in user activities, such as the Data Consumption Simulator <http://simulador.ift.org.mx/simulador.php>.
 - Measures taken by the IFT and operators in response to the contingency, as well as official information published by the Ministry of Health, among other materials.
- Avoid saturating of networks, for this; the IFT has issued the following recommendations for users:
 - Prioritize the use of Internet for informational, work, educational and health purposes.
 - Restrict the using videoconferencing or video calls and give preference to the voice communications.
 - Preferably use instant messaging services (SMS, WhatsApp, Messenger), as well as landline.
 - Set schedules with lower data traffic, in the afternoon – evening, to download heavy files, movies, videos or play online.
- Mobile phone users will receive free updated information on the pandemic due to Coronavirus. Through coordination between the IFT, the telecommunications industry and the Federal Government, the following was decided:
 - The users of these services will receive free SMS with announcements and other updated information about the Covid-19.
 - Sending the SMS will be a permanent form of communications for the duration of the health contingency, with the aim that the population has timely access to official information sources, complying with the fundamental right of everyone to receive information such as the Constitution mandates.
 - Additionally, was agree free access to the Federal Government information portal on the Covid-19 pandemic (<https://coronavirus.gob.mx>), which allows users to consult the official information found on that portal, without consuming data from their balance.
- Continuation of the telecommunications and broadcasting services in the face of the COVID-19 Contingency. Given the measures ordered by the General Health Council to

face the health in Mexico due to the Coronavirus pandemic, the Institute has exhorted federal, state and municipal authorities to:

- Carry out the necessary actions to guarantee that the workers of the telecommunications and broadcasting concessionaires, as well as of the related services, have the sufficient and wide facilities to carry out of the telecommunications and broadcasting services in benefit of the population.
- Within its jurisdiction, facilitate to the concessionaires of telecommunications and broadcasting, the development and execution of actions aimed at the installation, operation and maintenance, both preventive and corrective, of their infrastructure; as well as authorizing, procuring and safeguarding their entry, exit and transit.
- Mobile telecommunications concessionaires will provide measures to support users during the COVID-19 contingency. The mobile service operators AT&T, Movistar and Telcel, will offer their users different supports, among which the implementation of and “emergency plan” for their active prepaid customers, which will allow them to have, for a single occasion and for free of charge, package of voice calls and short text messages (SMS) to keep communications during the emergency. Other measures are as follows:
 - At least 100 minutes of voice for national calls and 150 SMS, a validity of at least 15 days and activations of the emergent remotely plan, for example, by SMS or by telephone.
 - Users will be able to continue making, without cost, calls to emergency services such as 911 and to the authorized line by the Federal Government for the attention of health contingency.
 - Free navigation within the Internet portal of the health authority <https://coronavirus.gob.mx/>, as long as the content is access from that portal.
 - Users will be able to access the COVID-19MX mobile application of the Ministry of Health without cost and, depending on what is been implemented by each operator, to educational and cultural pages.
 - Is important to mention that the details of each plan may be consulted on the operators’ pages or by telephone in their customer services lines.
 - These concessionaires have strengthened their remote service channels (telephone or Internet) for balance recharges, payment of invoices and purchase of equipment, in order to avoid the mobility of the people.
 - During this period, some mobile service operators will be offering support schemes or measures for their users, such as flexibility of data limits and/ or fair use policies without extra charge, as well as the extension of the validity of some prepaid plans.
- Mobile Virtual Network Operator (MVNO). From April 17, users of Mobile Virtual Network Operator (MVNO), which provide services through the Wholesale Shared Network operated by Altán, will be able to request access to the “Stay at home” emergency plan, designed to guarantee service and access to the network during this emergency period. Customers of Addinteli, ADS Mobile, Bait-Bodega Aurrera Internet y Telefonía-, Diri, Diveracy, Grupo Inten, IENTC, Megacable, Newww, Retemex, Servitron, Vasanta, Wimo will have access to the plan that includes calls and short messages (SMS) unlimited, as well as 10 GB for Internet browsing at a cost of 100 Mexican pesos per month.

Additionally, this plan includes free calls to emergency services such as 911 and the line enabled by the Federal Government for the attention of Sanitary Contingency; as well as free navigation within the official Internet portal and access to the COVID-19MX mobile application of the Ministry of Health. In addition, and depending on what is implemented by each MVNO, to educational and cultural pages.

- Support for pay TV and fixed Internet users. The concessionaires affiliated to the Independent Telecommunications Association of Mexico, join the support to their users through the “Line of Life” emergency plan, in order to keep them communicated during the health contingency. This plan guarantees its subscribers that, in case of not being able to pay, they receive the fixed internet service with access to 2 Mbps speed and, in the pay television service, access to national and local channels, as well as the educational, news and cultural bar of the Public Broadcasting System.

For the benefit of HughesNet satellite Internet service subscribers, the installation promotion (for leased equipment) and activation of the service is free until June 30, 2020. In addition, while the health emergency lasts, the user will not be affected by their speed and will be able to continue browsing at 25 Mbps, because the condition based on fair use policies of reducing browsing speed is suspended for this period when the subscriber ends the contracted data capacity.

- Emerging and provisional package of fixed Internet and telephony services, due to the contingency by COVID - 19. As a result of the collaborative regulation mechanisms led by the IFT, and in order to support users during the health emergency caused by COVID-19, landline and telephony service operators Izzi, Megacable, Telmex, Totalplay and Maxcom agreed to offer their clients the option of temporarily migrating to a low-cost plan.

The “Contingency Support” package responds to the commitment and social responsibility of the concessionaires in order that users who face a difficult situation due to the effects of the pandemic maintain connectivity services in their homes. Therefore, it will be available from 1 May for active subscribers with a fixed Internet access contract. Said plan will only be available to residential users; it will cost 100 Mexican pesos per package, including VAT, or per month, as defined by each operator in accordance with their commercial policies.

Residential users, who require it, will be able to migrate to this package for a single occasion, without any penalty, during the month of May and stay in it until June 30. The plan includes an Internet speed of up to 2 Mbps, as well as unlimited browsing and data, with the exception of video and video game downloads.

- Access to multiprogramming channels on open TV to transmit educational content. The IFT approved an agreement whose purpose is to facilitate the concessionaires of the open television service the use of additional programming channels under the multiprogramming scheme, to temporarily broadcast audiovisual content that includes school sessions that the Ministry of Public Education (SEP, for its acronym in Spanish) is transmitting to the contingency for the epidemic by COVID-19. This temporary transmission in multiprogramming will be limited until the date on which the competent

authorities in health and educational matters determine, by any official means or communication, the resumption of school activities throughout the country in person.

- Industry support. In addition to the measures provided by the industry indicated above, other measures in favor of users regarding digital platform services, pay television, telephony and fixed Internet may be consulted on the IFT portal: <http://www.ift.org.mx/comunicacion-y-medios/frente-al-coronavirus-las-telecom-estan-de-tu-lado/la-industria-te-apoya>

Russia**Practices on the fight against COVID-19
(EMERCOM of Russia)**

Within the framework of national efforts aimed at struggle with COVID-19, EMERCOM of Russia as a federal executive body performs a number of specific tasks within the competence.

EMERCOM of Russia is a member of the Governmental Coordination Council to control the incidence of novel coronavirus infection in the Russian Federation headed by Prime Minister.

According to its responsibilities, EMERCOM of Russia provides necessary services to the public, as following:

- deployment of mobile field hospitals,
- disinfection of public places (hospitals, educational institutions and schools, transport infrastructure),
- distributing information on preventive measures through media channels,
- engagement of EMERCOM psychological team for rendering support to compatriots abroad,
- implementation of additional measures to guarantee the preparedness of search-rescue teams for response to emergencies.

Deployment of mobile field hospitals

EMERCOM of Russia provides assistance to the executive branch of the constituent entities of the Russian Federation.

In the Murmansk region, EMERCOM units deployed an airmobile field hospital and a temporary accommodation center (TAC). The forces and means are integrated in the local healthcare care system and provide medical care for the population and take disinfection measures.

On May 1, Ilyushin 76 aircraft of EMERCOM delivered to the Republic of Sakha (Yakutia) a group of medical personnel and technical specialists to provide medical care and priority life support for the population. A mobile hospital and TAC are deployed near the Chayandinskoye oil and gas condensate field, where quarantine has been declared due to the outbreak of coronavirus infection.

In the Dagestan region a TAC(capacity up to 210 pers.) was deployed for providing assistance to foreign citizens and stateless persons who cannot leave the Russian Federation during the period of action to combat the spread of infection. Foreign citizens are provided with PPE and the infrastructure is being disinfected.

Disinfection of public places

More than 1600 medical facilities with total area more than 1,5 million m² have been disinfected; more than 800 educational facilities with total area more than 1,5 million m² have been disinfected; more than 5100 social service facilities with total area more than 2.8 million m² have been disinfected; more than 21 thousand buildings of transport infrastructure with total area more than 3,5 million m² have been disinfected; more than 4200 km of roads and routes have been disinfected.

Singapore

Practices in Responding to Covid-19

National Task Force

Multi-Ministry Taskforce (MTF) on COVID-19. The MTF was set up on 22 January 2020, prior to the discovery of our first confirmed case of infection. Co-chaired by Minister for Health and Minister for National Development and Second Minister for Finance.

Health Related Measures

- Expanded version of WHO's recommended suspect case definition
- Surveillance for COVID19 by testing individuals in the community with prolonged acute respiratory illness (ARI) [>37.5 °C and ARI symptoms with duration for > 4 days] and on all individuals with pneumonia at our public hospitals, polyclinics and private clinics.
- Expanded laboratory testing capacity.
- Isolation and treatment of confirmed cases.
- Rigorous contact tracing to identify and quarantine close contacts of the confirmed cases.
- Rigorous epidemiological investigations to establish chain of infection.
- Activation of Public Health Preparedness Clinics to provide subsidized care for patients in the community with respiratory symptoms in order to enhance and tighten disease surveillance.
- Joint clinical guidance on the management of COVID19 suspect cases.
- Tighter measures for healthcare institutions such as segregating patients with pneumonia from the other patients, and limiting number of visitors entering healthcare institutions as part of infection prevention and control practices.

Movement Restrictions and Border Control

- Stepped up border control measures to limit the risk that affected regions and countries may pose to Singaporeans.
- **20 March 2020, 2359hrs:** all travellers entering Singapore will be issued with a 14day Stay Home Notice (SHN). They will be required to provide proof of the place where they will serve the 14-day SHN, for example a hotel booking covering the entire period, or a place of residence they or their family members own. All new and existing work pass holders (including dependents)

planning to enter/return to Singapore from any country are also required to obtain MOM's approval before commencing the journey. Upon arrival, all affected work pass holders will be placed on a mandatory 14-day SHN.

- **20 March 2020:** the Singapore-Malaysia Special Working Committee agreed that Malaysians with Singapore work permits will continue to work in Singapore during this period, with appropriate health screening and suitable accommodation arrangements. Likewise, the transport of all types of goods between Malaysia and Singapore will also be facilitated.

- **23 March 2020, 2359hrs:** all short-term visitors will not be allowed to enter or transit through Singapore. The Ministry of Manpower (MOM) in Singapore will only allow the entry / return of work pass holders, including their dependents, for those providing essential services, such as in healthcare and transport. All Singapore Citizens, Permanent Residents, Long Term Pass holders returning to Singapore will be issued a 14-day SHN. Persons under SHN must remain in their place of residence dedicated SHN facilities (for those returning from 8 April, 2359hrs) at all times. SHN will not apply to Singapore Citizens, Permanent Residents and Long Term Pass holders transiting in Singapore without leaving the transit area.

- **25 March 2020:** All returning residents, with travel history to USA or United Kingdom in the last 14 days, are required to serve out their mandatory 14-day SHN at dedicated hotels.

- **27 March 2020, 0900hrs:** all travellers arriving in Singapore must submit a health declaration via the SG Arrival Card e-Service before proceeding with immigration clearance.

- **29 March 2020, 2359hrs:** All holders of Long-Term Visit Passes (LTVP) issued by the Immigration and Checkpoints Authority (ICA), and those who have been granted InPrinciple Approval (IPA) by ICA for LTVP, will require an approval letter of entry by ICA to gain entry into Singapore. All Student Pass (STP) holders, and those who have been granted IPA by ICA for STP, will require an approval letter of entry by the Ministry of Education (MOE) to gain entry into Singapore.

- **Implementation of Circuit Breaker from 7 April 2020 to 4 May 2020:** All workplace premises and retail outlets except for those necessary to support the daily living needs of the population will be closed. Members of the public are strongly advised to stay at home and avoid going out unnecessarily, except to purchase daily necessities, essential services, exercise, or for urgent medical needs. There should be no social gatherings. Social contact should be confined to immediate family members living in the same household during this period. All recreation venues, attractions and places of worships will be closed. Schools and institutes of higher learning have moved to full home-based learning, while preschool and student care services have suspended services.

- **9 April 2020:** All Singapore Citizens, Permanent Residents, and Long-Term Pass holders entering Singapore will be required to serve a 14-day self-isolation at dedicated SHN facilities. - In response to cases of COVID-19 infection in foreign worker dormitories, Singapore's Multi-

Ministry Task Force undertook further measures to curb further spread of COVID-19 in these areas:

- 5 April 2020: issuance of advisories to dormitory operators, with provisions including: prohibiting movement within blocks; advising workers to cease social interactions with others who do not reside in the same room or floor; and ensuring social distancing in communal areas.
 - 7 April 2020: In view of the Circuit Breaker measures, foreign workers are not able to go to work. The Singapore Government set up an inter-agency task force to support foreign workers and dormitory operators during this period. Senior Minister and Coordinating Minister for National Security Teo Chee Hean is advising the ministers on the issue.
1. The Task Force has since deployed Forward Assurance and Support Teams in all the dormitories, to enable them to respond quickly to these worker's essential needs. These include setting up medical facilities and triage clinics; bringing in supplies and food; managing the logistics and housekeeping; and making sure the workers have food and water, and Wifi to keep in touch with their families back home and friends in Singapore, and for entertainment. Based on their medical assessment, foreign workers will also be accorded COVID-19 testing and treatment as appropriate – no different from Singaporeans.
 2. The Singapore Government has also set up temporary accommodations for some of our workers, including at used public housing blocks' void decks and multi-storey car parks. These are completed structures that are safe and liveable. These temporary arrangements will help to improve safe distancing by spreading out the workers. All premises are checked to ensure that the living conditions are airy and comfortable, and meals have been catered for the workers according to their dietary requirements.
 3. Employers must continue paying these workers, even for workers who cannot go to work during the month-long "circuit-breaker". Under our laws, employers are also required to provide for their workers' upkeep or repatriation to their home countries. For foreign workers whose Work Passes have been cancelled, employers are still responsible for their foreign workers' upkeep, including the provision for their accommodation, until they are repatriated. MOM takes firm action against employers who do not fulfil these obligations. To enable their employers to meet these obligations, the Singapore Government has waived their employers' levy payments and also provided a one-off rebate of S\$750 for each foreign worker employed.
 4. The Singapore Government is working with the Migrant Workers' Centre and Healthserve, which are NGOs, to provide counselling sessions to the workers in dormitories who require them.

Information Sharing and Public Awareness

- Introduce calibrated safe distancing measures and step up public education efforts to encourage Singaporeans to uphold safe distancing principles and practice good personal hygiene and social responsibility. These are critical factors in slowing the transmission of the virus.
- Development of sector-specific health advisories.
- Latest information of the disease and local situation can be found on the Singapore Ministry of Health website (www.moh.gov.sg/covid19), or by signing up at the Gov.sg WhatsApp channel (go.gov.sg/whatsapp).

Chinese Taipei

Chinese Taipei's Advanced Deployments of Quarantine and Dynamic Allocation of Societal Resources

The 2003 SARS outbreak did give Chinese Taipei learned lessons about how to contain and control the pandemic by paying huge social capitals and exposing insufficiency of public health system. Then after a series review and improvements, Chinese Taipei has comprehensively amended the Communicable Disease Control Act. Besides amendments of the laws to meet real demands, the match-up measures were enforced to ensure a better health safety shield against threats of pandemic.

The nine major reinforcing measures include:

1. To establish a better disease control command system;
2. To strengthen the capacity to conduct border quarantine;
3. To set up diversified and multiple surveillance systems on most communicable disease;
4. To reinforce the surveillance of populous institutes;
5. To thoroughly implement nosocomial infection control policies;
6. To formulate response plans for emerging infectious diseases and routine drills;
7. To build up reference laboratories to improve infectious disease testing technology and capacity;
8. To initiate the “Infectious Disease Prevention Medical Network”; and
9. To set up the mechanism for operating the “Central Epidemic Command Center”.

After practical tests by and operations against other infectious diseases such as avian influenza and novel H1N1 influenza, “**prudent action**”, “**rapid response**” and “**early deployment**” are the basic guidance for handling public health events in Chinese Taipei. To cope with COVID-19, all the mentioned measures do follow the plans and procedures with rotational updates to identify the most appropriate and effective approaches to contain all possible spreading channels. In summary, the Prevention Strategies are:

1. **Boarder Control:** From December 31, 2019 to January 23, 2020, Chinese Taipei implemented onboard quarantine inspection, and elevated related prevention measures to travelers from other member economies.
2. **Control on Community Transmission:** 14-day home quarantine or home isolation have been enforced to all travelers after their arrivals. If develop symptoms reported by quarantined travelers, health agencies will place them in the hospital in isolation and electronic fencing helps to locate all quarantined travelers.
3. **Surveillance and Laboratory Diagnosis:** To ensure safety for all medical staff, through on-line integration of medical insurance records and travel history, doctors can know required information of patients. At the same time, rapid increasing capacity are deployed

to meet rising demands.

4. **Medical System Response and Preparedness:** 52 regional hospitals or medical centers have been designated for treatment of confirmed severe cases. Furthermore 165 medical facilities are designated for taking specimens and for treatment of confirmed mild cases.
5. **Stockpile and Allocation of PPE:** To provide enough surgical masks for medical staff, the government has accumulated stockpile of surgical masks and other materials.
6. **Health Education and Fighting Disinformation:** To seek public awareness and collaboration on person hygiene and social distancing, CDC has been regularly updating information through multiple media channels. Meanwhile, quick actions against disinformation help to answer all questions raised by the public.

United States

This is a selected list of U.S. practices and guidance related to emergency management for COVID-19 and is not all-inclusive:

U.S. Department of Homeland Security Federal Emergency Management Agency

Compilation of Coronavirus Emergency Management Best Practices:

<https://www.fema.gov/coronavirus/best-practices>

Planning Considerations for Organizations in Reconstituting Operations During the COVID-19 Pandemic:

<https://www.fema.gov/news-release/2020/04/30/planning-considerations-organizations-reconstituting-operations-during-covid>

Prioritization and Allocation of Certain Scarce or Threatened Health and Medical Resources for Domestic Use - A Rule by the Federal Emergency Management Agency on 04/10/2020:

<https://www.federalregister.gov/documents/2020/04/10/2020-07659/prioritization-and-allocation-of-certain-scarce-or-threatened-health-and-medical-resources-for>

Coronavirus (COVID-19) Pandemic: National Resource Prioritization Cell:

<https://www.fema.gov/news-release/2020/04/18/coronavirus-covid-19-pandemic-national-resource-prioritization-cell>

Supply Chain Stabilization Task Force:

<https://www.fema.gov/news-release/2020/04/08/fema-covid-19-supply-chain-task-force-supply-chain-stabilization>

COVID-19 Best Practice Information - Supply Chain:

<https://www.fema.gov/media-library-data/1586011228351-ee9dd63af03bc879168c827bf922cb90/COVID19SupplyChain.pdf>

Coronavirus Rumor Control:

<https://www.fema.gov/coronavirus/rumor-control>

Public Assistance Disaster-Specific Guidance - COVID-19 Declarations:

<https://www.fema.gov/media-library/assets/documents/187108>

Fiscal Year 2020 Emergency Management Performance Grant Program – COVID-19 Supplemental:

<https://www.fema.gov/media-library/assets/documents/187029>

Supplemental Funding Through CARES Act:

<https://www.fema.gov/news-release/2020/05/04/fema-announces-supplemental-funding-through-cares-act>

FY 2020 Assistance to Firefighters Grant Program - COVID-19 Supplemental (AFG-S):
<https://www.fema.gov/media-library/assets/documents/187460>

U.S. Department of Homeland Security

Indoor Predictive Modeling Tool for Coronavirus Stability:
<https://www.dhs.gov/science-and-technology/news/2020/05/13/news-release-st-launches-indoor-predictive-modeling-tool-coronavirus-stability>

Countering COVID-19 Related Fraud: https://www.dhs.gov/news/2020/04/24/fact-sheet-dhs-taking-covid-19-related-fraud?utm_source=hp_slideshow&utm_medium=web&utm_campaign=dhsgov

U.S. Department of Health and Human Services

Health-related practices may be found in the U.S. response to the related Health Working Group request.