COVID-19

Strategic Preparedness and Response Plan

The COVID-19 pandemic was confirmed to have spread to Malaysia on 25 January 2020. Following the spike of cases in March, the government of Malaysia and the Ministry of Health (MOH) are focusing on mitigation measures to curb the further growth of positive cases in the country through social distancing and movement control order (MCO). Following the strained healthcare system due to the increasing number of infections by the virus, MERCY Malaysia launched its COVID-19 Pandemic Fund to supporting medical services and the essential needs of marginalised groups within the country. This dedicated fund is to implement the COVID-19 Strategic Preparedness and Response Plan - a plan for humanitarian assistance to be delivered within a continuous cycle of total disaster risk management that focuses on prevention; preparedness; response; and recovery. All aid assistance and deliverables are coordinated with MOH and the National Crisis Preparedness and Response Centre (CPRC), and the National Agency for Disaster Management (NADMA).

MARCH - DECEMBER 2020





COVID-19

Strategic Preparedness and Response Plan

On behalf of MERCY Malaysia, I would like to thank fellow Malaysians and citizens of the world for your contribution and partnership with MERCY Malaysia in this very important and critical humanitarian mission to fight COVID-19.

We are living in an age of the greatest pandemic the world has seen for the last 100 years, the COVID-19 pandemic. This is a pandemic which we need to fight together, and for all that to happen we need all sections and sectors involved.

MERCY Malaysia has launched the COVID-19
Pandemic Fund together with this Strategic
Preparedness and Response Plan to support the severely strained healthcare system. The fund will also go towards supporting medical services and essential needs of marginalized and at-risks community groups.

We are very happy to be working with everyone, the public, private sector, other aid agencies, the government, partners and volunteers of MERCY Malaysia in reducing the humanitarian burden the country is facing now.

I also call on all donors and partners to maintain core support to activities and programs for the most vulnerable through this Strategic Preparedness and Response Plan, which will be delivered within a continuous cycle of total disaster risk management that focuses on prevention; preparedness; response; and recovery.

Since the news of COVID-19 broke in January 2020, the organization has been communicating closely with the relevant authorities to offer assistance where required. We hope by doing so, we would have conducted a substantive as well as a qualitative and quantitative programs that will help not just the front line medical and non-medical workers, but also poor families especially those among the *asnaf* and B40 income group and those living in poor dwelling, the elderly, refugees, stateless children, person with disability, and others groups with low or no access to health information and services.

COVID-19 is the biggest pandemic we have seen for a century and it is one that we need to fight together. There is no better way in overcoming this pandemic than to fight it with experience and knowledge and to act upon it holistically. Which is why MERCY Malaysia is very happy to work with all of you in assisting those in need with our experience and knowledge, and also spreading these knowledge and awareness to make Malaysia and the world a healthier and safer place for all of us.

Dato' Dr. Ahmad Faizal Perdaus

President, MERCY Malaysia





COVID-19

Strategic Preparedness and Response Plan

SUPPORT SERVICES/ **COMPONENTS**

INTENSIVE OPERATIONS **ACTIVITIES**

AID RECIPIENTS IMPACTED DIRECTLY **OR INDIRECTLY**

40.5 million FINANCIAL REQUIREMENTS*

COMPONENT

Critical preparedness, readiness and response support actions for **MOH and CPRC**



COMPONENT 2

Operational supplies support and logistics



COMPONENT 3

At-risk-community's livelihood support and logistics



COMPONENT 4

Infection prevention and control/ water, sanitation and hygiene (WASH)



COMPONENT 5

Mental health and psychosocial support (MHPSS)



COMPONENT 6

Information, education and communication (IEC) / awareness campaign



COMPONENT /

Epidemics/ pandemics risk reduction



COMPONENT 8

Quarantine centers and field hospital auxiliary support



COMPONENT 9

Targeted mass COVID-19 testing



*This financial requirement represent a portion of the country's needs required to address immediate and urgent health and non-health response to the pandemic, estimated to be at RM 95 billion1.

¹www.mier.org.my/the-economic-impacts-of-covid-19





Support services types and components	Activities	Outputs and timeline	Remarks and status
COMPONENT 1:	Medical support at screening points designated by MOH and CPRC.	Medical teams (100 person, different shifts) to conduct temperature screenings and early assessment. (Response; March - April 2020)	
Critical preparedness, readiness and response support actions for MOH and CPRC	Provision of personal protective equipment (PPE) for frontline health workers.	Supply of 10,000 sets of PPE level-2. (Response; March - April 2020)	
 Auxiliary support as required by MOH and CPRC. Support MOH in ensuring continuity of health and nutrition services throughput the response and recovery period. Assistance to health facilities as part of infection prevention and control. 	Provision of ventilators and powered air-purifying respirator (PAPR) for response operations.	Supply of 20 units of ICU ventilator, 50 units of portable ventilator and non-invasive ventilators, and 100 units of PAPR to designated hospitals and pusat kesihatan. (Response; March - April 2020)	
	Support delivery of food for frontline and support medical and non-medical staffs.	Food <u>(3 times daily)</u> for <u>2,000 (different shifts)</u> for <u>20 days.</u> (Response; March - April 2020)	
	Support delivery of health supplies.	Supply of: 1. NIBP with SPO2 2. ICU Bed 3. Syringe and infusion pump 4. Other supplies as per needs *quantities to be determined based on needs and requests. (Response; March - April 2020)	





Support services types and components	Activities	Outputs and timeline	Remarks and status
COMPONENT 2:	Provision of personal protective equipment (PPE) for frontline health workers.	Supply of 10,000 sets of PPE level-2. (Response; March - April 2020)	
Operational supplies support and logistics 1. Triage/ screening PPE for prevention and control. 2. PPE healthcare facilities for	Delivery of supplies and logistics support based on request from operational centers and health facilities.	Supply of: 1. 10,000 bottles of 500ml sanitizers (70% alc.) 2. 10,000 pieces hand soaps 3. 2,000 units contactless thermometer 4. 10,000 sets of toothpaste and toothbrushes 5. 10,000 pieces hand towels. (Response; March - April 2020)	
case management.3. Support equipment and hygiene kits for operations.	Human resource support for home surveillance to support MOH CPRC and Angkatan Pertahan Awam (APM).	Medical teams (100 person – different shifts) to conduct home surveillance temperature screenings and early assessment on symptoms for 20 days (or more upon request from MOH). (Response; March – April 2020)	



Support services types and components	Activities	Outputs and timeline	Remarks and status
COMPONENT 3:	Mobile food distribution for urban and rural poor communities where public transit is becoming more limited.	Food pack distribution for 30,000 families from selected at-risk-communities. Food pack worth of RM 150 consisting of: 1. Rice 2. Biscuits	
At-risk-community's livelihood support and logistics		3. Flour4. Cooking oil5. Sugar6. Can sardines	
Livelihood support to targeted communities.		7. Dry food (Response; April - May 2020)	
2. Essential non-food items, test kits and hygiene kits distribution.	Cash aid transfer to urban poor population.	Transfer of RM 200 cash assistance to 3,000 families.	
3. Ensure needed supplies, logistics and operations are highlighted on time and ordered and distributed to identified facilities and institutions.	Delivery of hygiene and cleaning kits (disinfectants, hand sanitizers, hand soaps, face masks).	Supply of: 1. 10,000 bottles of 500ml sanitizers (70% alc.) 2. 10,000 hand soaps 3. 100,000 face masks (Prevention and recovery; April - May 2020)	
	Clothing set for people living in detention, immigration detention or rehab centers.	2,500 clothing sets. (Prevention and recovery; April - May 2020)	
	Hand washing stations at targeted places.	1,000 hand washing/ cleaning stations. (Prevention and recovery; April - September 2020)	





Suppor	t serv	ices	types
and	comp	onei	nts

Activities Outputs and timeline

d Remarks and status

COMPONENT 4:



Infection prevention and control/ water, sanitation and hygiene (WASH)

- 1. Support community-at-risk in ensuring continuity of health and nutrition services throughput the response and recovery period.
- 2. Technical and educational guidance on water, sanitation, hygiene and health care that are relevant to COVID-19 and pandemics.
- 3. Applied WASH and waste management practices in communities and facilities to prevent human-to-human transmission of the COVID-19 virus.

Promote use of personal protective equipment (PPE) in community settings, including the handling of food and household items.

Supply of <u>10,000 sets</u> of PPE level-1 (3-ply mask, disposable glove and isolation gown) (Response; April - May 2020)

Produce and disseminate guidance on the safe management of drinking water and sanitation and hygiene services. 30,000 information packs. (Prevention and preparedness; April - May 2020)

Hygiene education and promotion and safe wastewater and faecal waste education and promotion.

WASH education programs to 20,000 families from selected at-risk-communities. (Prevention and preparedness; May – September 2020)





Support	t serv	ices	types
and	comp	one	nts

Activities

Outputs and timeline

Remarks and status

COMPONENT 5:



Mental health and psychosocial support (MHPSS)

- 1. Establish unique platforms and access to MHPSS (i.e. online platforms and other non-traditional methods).
- 2. Establish or enhance inter-agency and inter-sectoral referral pathways to ensure that children and families with other concerns (such as protection, survival needs, etc.) or more severe distress may access needed services promptly.

Provide mental health and psychosocial support to children and families affected via a Psychological First Aid (PFA) hotline platform.

Promotion of self-care strategies.

Establish <u>1 phone hotline</u> and <u>1 online</u> <u>platform (VSee)</u> for PFA services.

Roster of 10 experts to attend to the hotline.

<u>2,000 packs</u> of self-care strategies information and communication kit.

(Response; March - May 2020)

Enhancing MHPSS capacity for local health and non-health actors.

MHPSS trainings for health actors (10 sessions) nationwide for selected groups.

MHPSS trainings for non-health actors (20 sessions) nationwide for selected groups. (Recovery and preparedness; May - September 2020)

MHPSS training programs for frontline workers (preparedness measure for future situation). MHPSS consultation services for frontline workers (5 sessions) nationwide for selected groups.

(Recovery and preparedness; May - September 2020)





Support services types and components	Activities	Outputs and timeline	Remarks and status
COMPONENT 6:	IEC materials in local languages (Bahasa Malaysia, English, Chinese and Tamil) and in local dialects for selected communities.	30,000 information packs. (Preparedness and prevention; May – September 2020)	
Information, education and communication (IEC)/awareness campaign	Awareness video series production.	10 video series (approximately 1 to 2 minutes duration) on:	
 IEC materials on risk communication and community engagement (RCCE) - awareness, advocacy, programs and trainings. Dissemination of messages aligned with MOH's technical messages and provide technical support for developing risk communication and community engagement and media activities. 		 Physical distancing and staying at home Good hygiene practice No need to panic/ keep calm Pandemic risk management The fight against COVID-19: our resilience (Response, recovery and preparedness; April - September 2020) 	
	Media briefings and information handouts.	<u>Daily</u> briefing papers and information handouts. (Response and recovery; March - May 2020)	
	Produce unique IEC materials for special-needs communities.	1,000 IEC packs (posters and banners). (Response, recovery and preparedness; April – September 2020)	
	Establish social media IEC assets for continuous improvement on public messaging.	1 online database for IEC assets. (Response, recovery and preparedness; April - September 2020)	





Strategic Preparedness and Response Plan

Support services types and components	Activities	Outputs and timeline	Remarks and status
COMPONENT 7:	Disinfection services for areas with high risk and confirmed contact of positive COVID-19 persons.	IHQ1 and IHQ2 type disinfection services at areas with high risk (PPR flats, surau, mosque, etc.) and places with confirmed contact. (Response and prevention; March - May 2020)	
Epidemics/ pandemics risk reduction			
1. Epidemics/ pandemics risk reduction for health throughout the whole-of-society.	Information and knowledge management.	Educate and actively communicate with the public through risk communication and community engagement for 10,000 families from selected at-risk-communities. (Preparedness and prevention; May –	
2. Strengthening of elements and systems that are common		September 2020)	
to the management of risks of emergencies from various hazards.	Sample collection services from home and for rRT-PCR testing.	Make available 1,000 COVID-19 tests via cash aid to B40/ asnaf that require testing. (Preparedness and prevention; April -	
3. Provide direct support in the scaling up country readiness and response operation in		September 2020)	





epidemics/ pandemics risk

reduction.

Support services types and components	Activities	Outputs and timeline	Remarks and status
COMPONENT 8:	Field hospital or quarantine for emergency holding of person under investigation (PUI)s and asymptomatic patients.	Setting up and equiping a disaster unit field hospital at designated site for minimum of 40 single rooms, 20 double bedrooms, and 20 dormitory/ward for 60 beds (200 beds), or proposed configuration and matrix by	
Quarantine centers and field hospital auxiliary support	pationio	staffing levels. (Response; April - June 2020) or	
1. Design, setting up and equipping field hospital or quarantine center*		Setting up of three quarantine centers at designated existing site for minimum of 20 single rooms, 10 double bedroom, and 1 dormitory/ward for 6 beds (50 beds), or	
2. Auxiliary support for the operations of the field hospital or quarantine center*		proposed configuration and matrix by staffing levels.	
*preparedness measure if activated by MOH/ NADMA	Human resource support at field hospital/ quarantine centers designated by MOH and CPRC.	Medical teams <u>(100 person, different shifts).</u> (Response; April - May 2020)	
	Support delivery of food for medical and support staffs working at thefield hospital/ quarantine centers.	Food (3 times daily) for 3000 (different shifts) frontline health workers for 20 days. (Response; April - May 2020)	



Support services types and components	Activities	Outputs and timeline	Remarks and status
COMPONENT 9:	Conduct RT- PCR test to targeted communities (locations to be selected through consultation with MOH).	Conduct 11,000 – 16,000 tests per day. Total target: 250,000 tests completed.	
Targeted mass COVID-19 testing Targeted mass testing to high risk and vulnerable groups* nationwide *High risk and vulnerable groups include: 1. Rural populations 2. Orang Asli	Lab processing.	Sample collection from nominated facilities within 24 hours (transport schedules allowing). Secure delivery of samples. Transportation protocols will adhere to internal Consortium Standard Operating Procedures, Ministry of Health guidelines and ISO 15189 standards. 24-hours turnaround time within Klang	
 Tahfiz school communities Detention/prison Refugees Immigrants Stateless person Migrant workers 	Data analytics and reporting.	Valley 48-hours turnaround time for the rest of Malaysia Results delivered and reported to patients and MOH for further action. (Response, recovery and prevention; May - July 2020)	







COVID-19 Pandemic Fund

Support us by donating through **www.mercy.org.my** or direct transfer to MERCY Humanitarian Fund (5621 7950 4126) or MERCY Malaysia (CIMB 8000-7929-08). All donations are tax-exempt.

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