



MINISTRY OF HEALTH
MALAYSIA



Lesson Learnt of COVID-19 Prevention and Infection Control in Long Term Care Centers in Malaysia

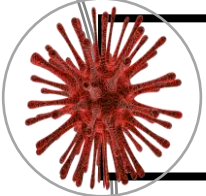


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Ministry of Health, Malaysia

Content:



Long Term Care (LTC) in Malaysia



COVID-19 Situation in Malaysia



Initiatives in Prevention and Infection Control for LTC Centers



Lesson learnt

Long Term Care (LTC) in Malaysia

Currently available in Malaysia :



Care at home or community

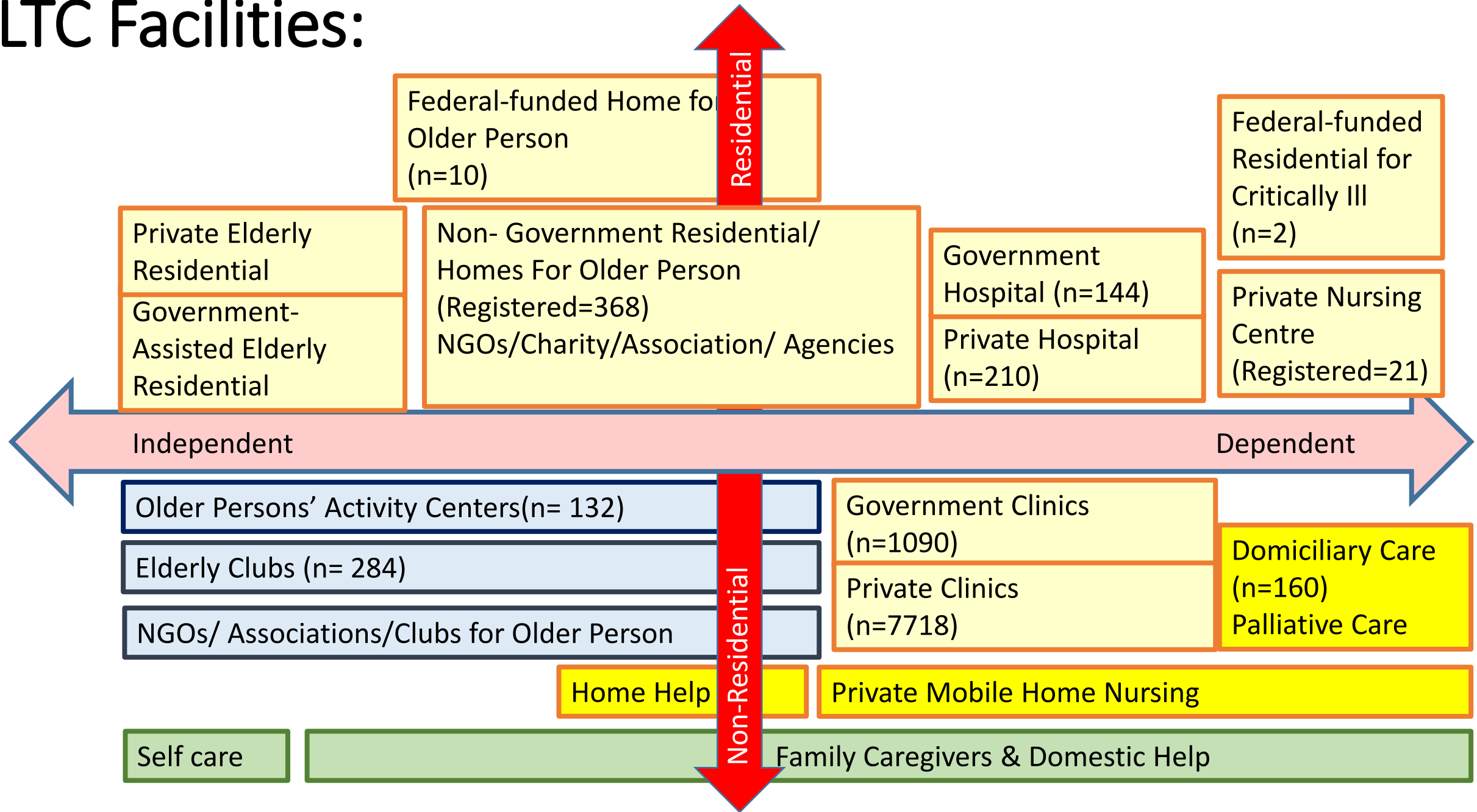


Care in public and private health facilities (hospitals and clinics)



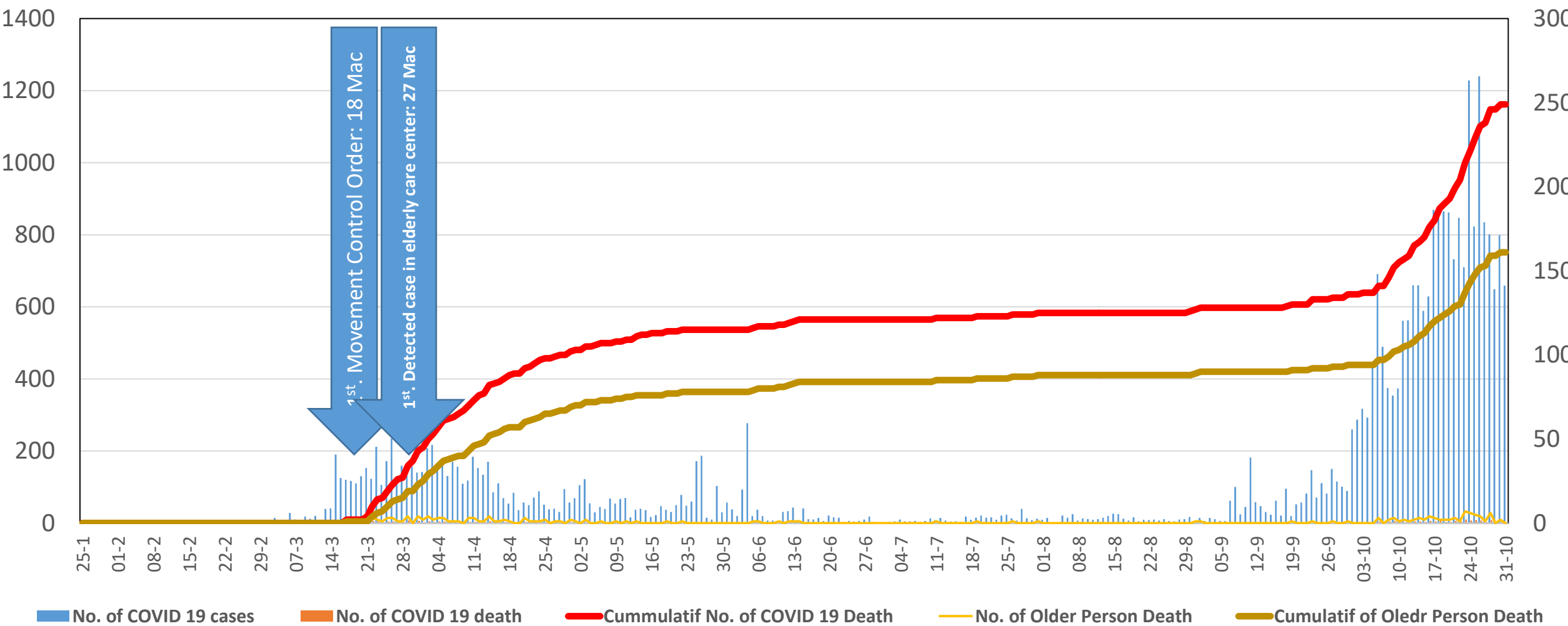
Care options in care centres and nursing homes

LTC Facilities:



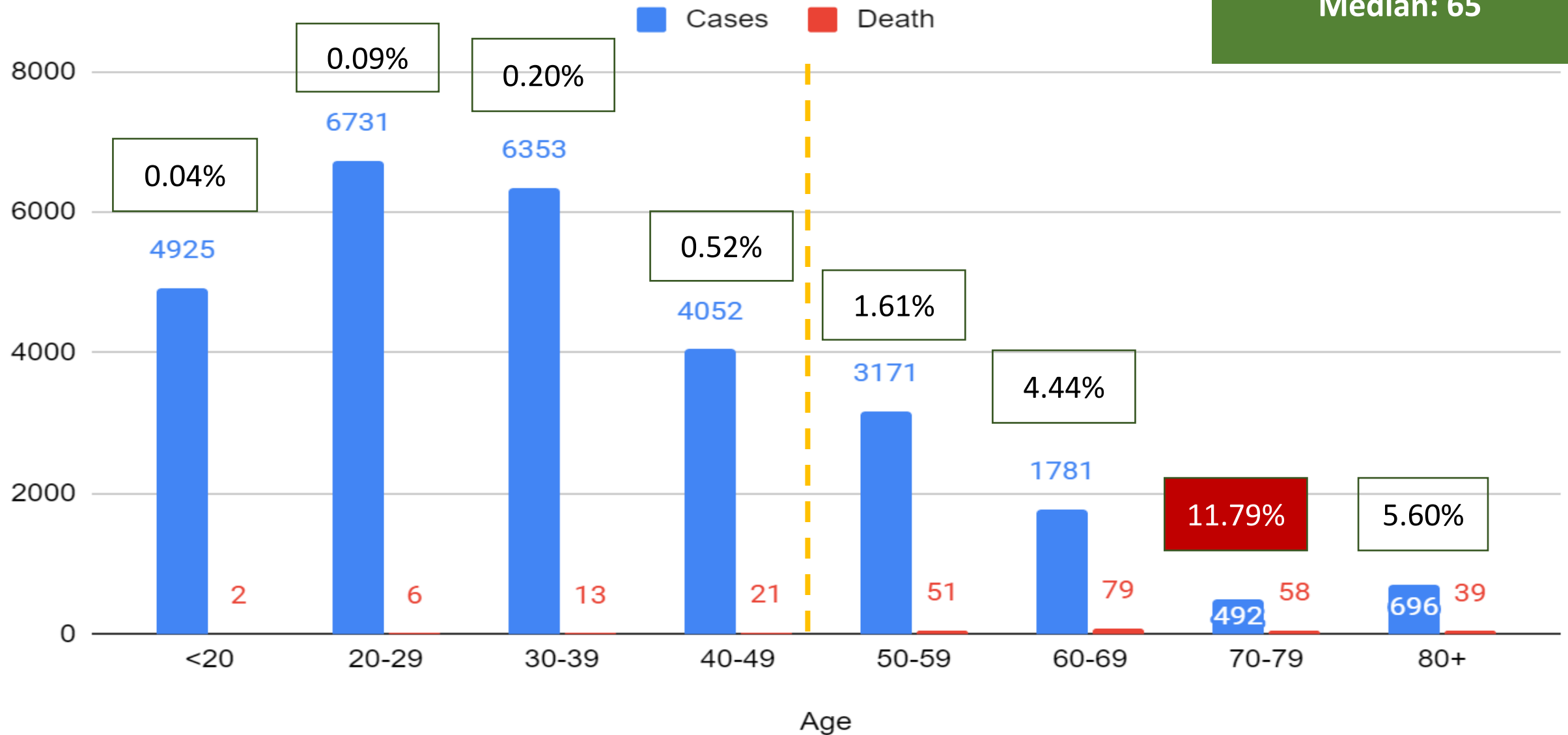
COVID-19 Situation in Malaysia

COVID-19 Cases and Death



Age-specific Mortality Rate (n=269)*

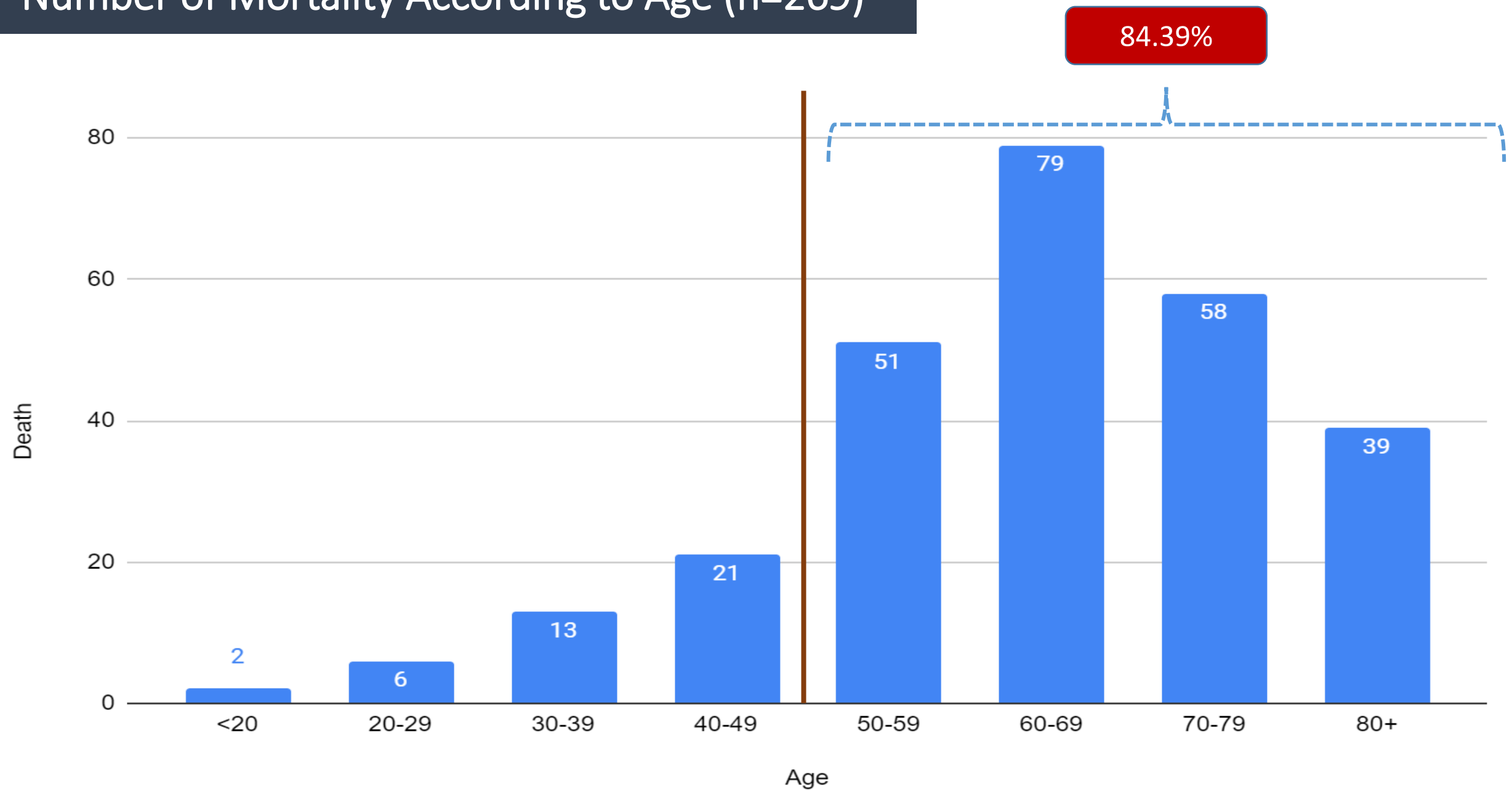
Mean: 63.52 (± 15.44)
Median: 65



*Based on 28201 (93.72%) of the total positive COVID-19 cases

04 Nov 2020 @ 12pm. Source: CPRC & NCMRC

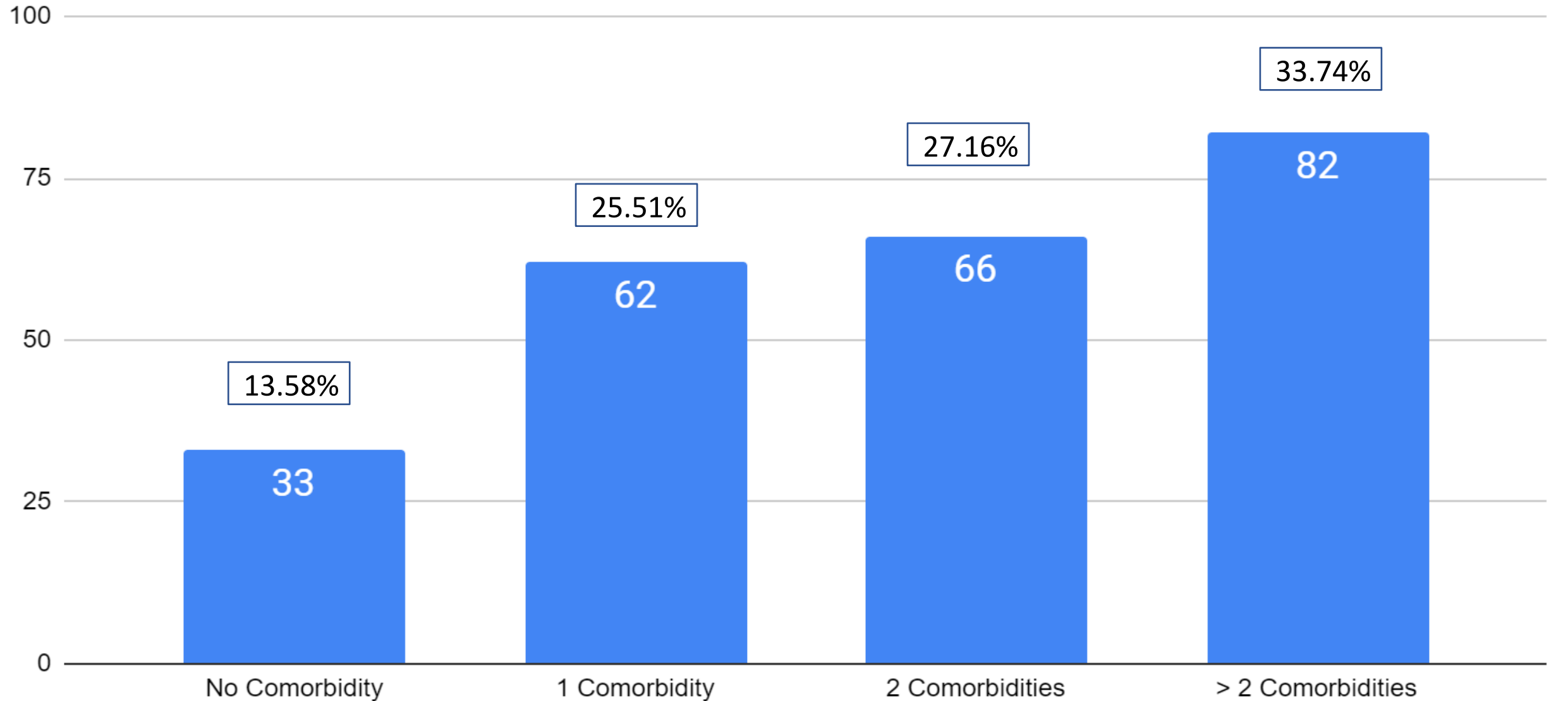
Number of Mortality According to Age (n=269)



Source: National Mortality Review Committee

No. of death with Comorbidity (n=243)

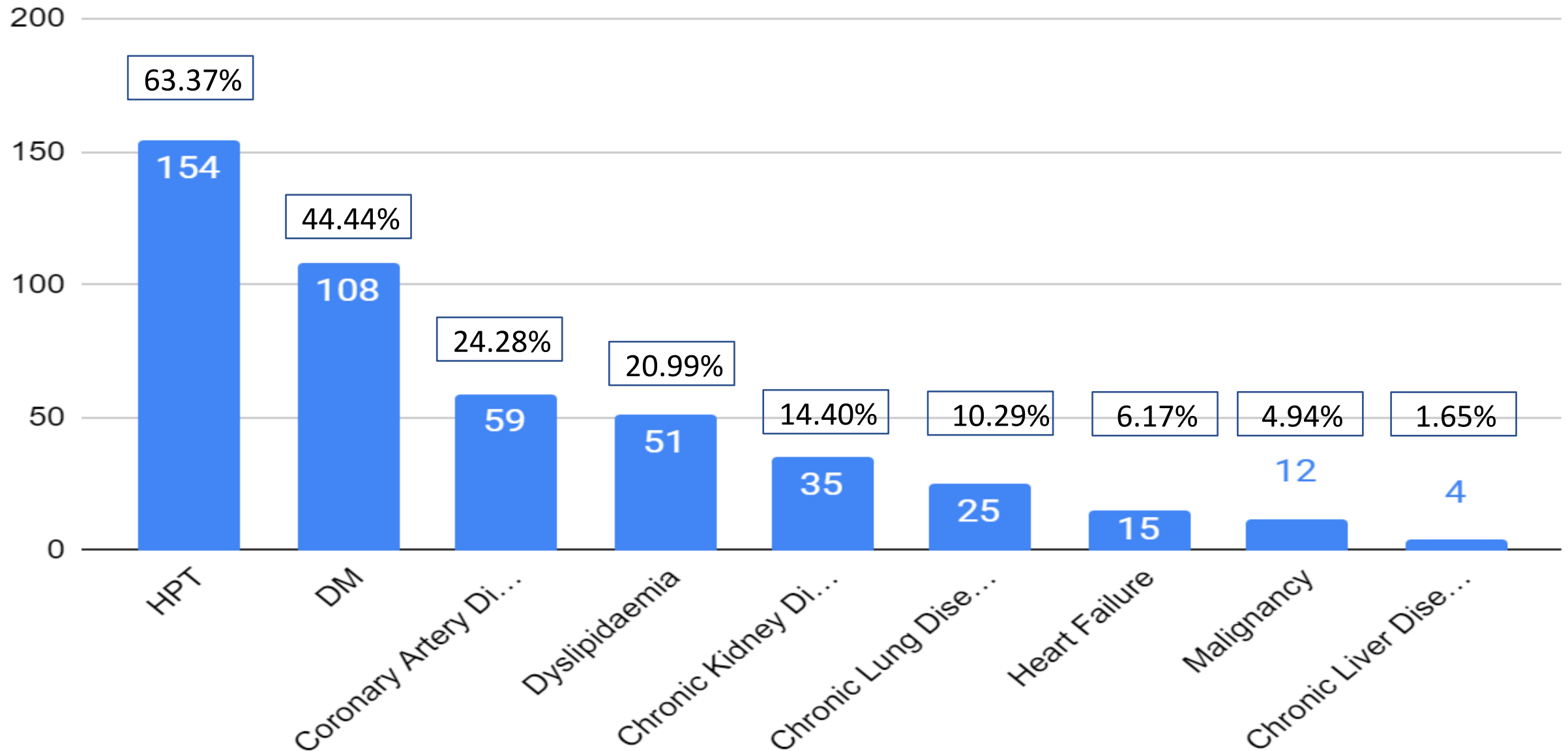
04th Nov 2020



Source: National Mortality Review Committee

No. of death with Comorbidity (n=243)

04th Nov 2020

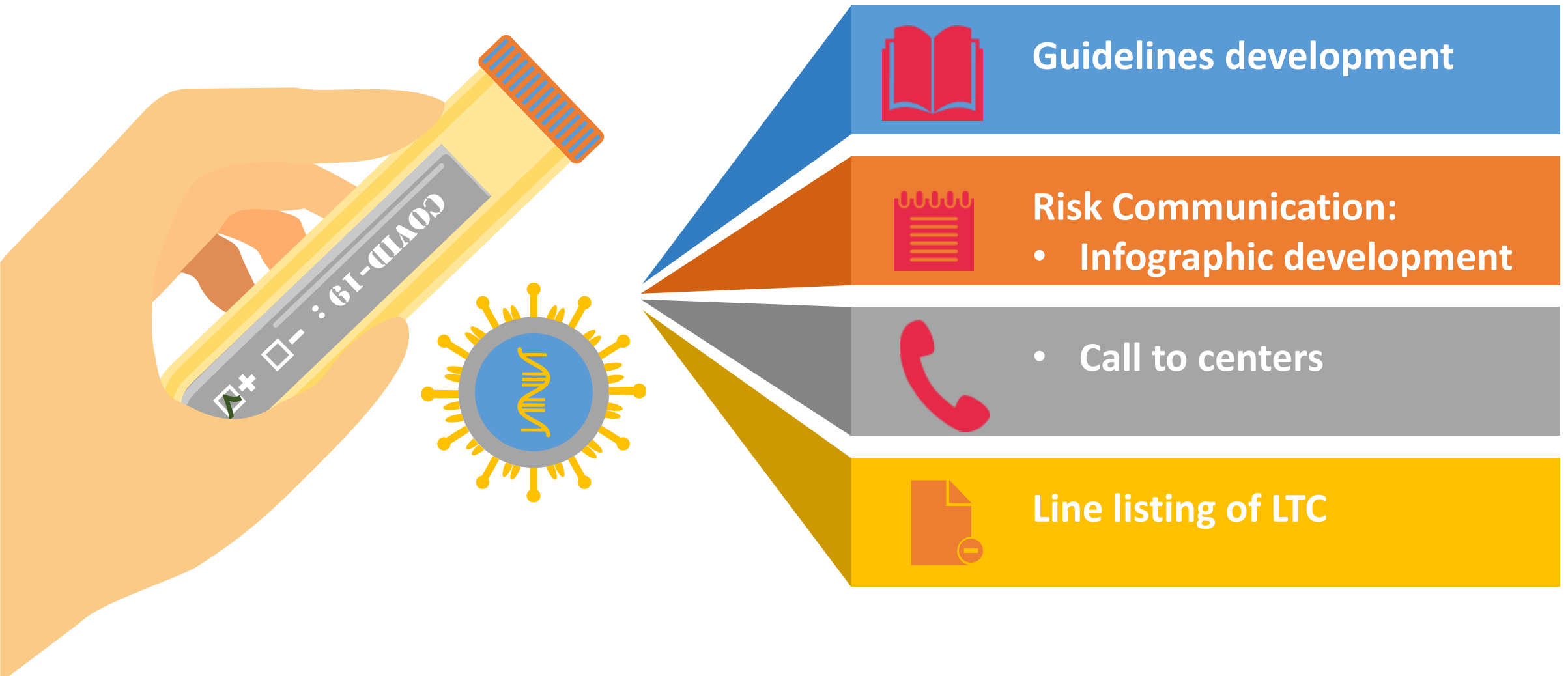




Initiatives in Prevention and Infection Control for LTC Centers

Preparedness:

COVID-19



Interim Recommendations for the COVID-19 Pandemic for Private, Public and NGO Residential Aged Care Facilities

Version 2.1 21 March 2020

Infection Prevention and Control guidance for Long-Term Care Facilities in the context of COVID-19

Interim guidance
21 March 2020



Background

On 30 January 2020, WHO announced that the COVID-19 outbreak was a Public Health Emergency of International Concern. Initially, most cases were reported from China and among individuals with travel history to China. Please refer to the latest [situation reports for COVID-19](#).

COVID-19 is an acute respiratory illness caused by a novel human coronavirus (SARS-CoV-2, called COVID-19 virus), which causes higher mortality in people aged ≥ 60 years and in people with underlying medical conditions such as cardiovascular disease, chronic respiratory disease, diabetes and cancer.

Long-term care facilities (LTCFs), such as nursing homes and rehabilitative centers, are facilities that care for people who suffer from physical or mental disability, some of who are of advanced age. The people living in LTCF are vulnerable populations who are at a higher risk for adverse outcome and for infection due to living in close proximity to others. Thus, LTCFs must take special precautions to protect their residents, employees, and visitors. Note that infection prevention and control (IPC) activities may affect the mental health and well-being of residents and staff, especially the use of PPE and restriction of visitors and group activities. For further information on resilience during the time of COVID, see [Mental health and psychosocial considerations during COVID-19 outbreak](#).

This interim guidance is for LTCF managers and corresponding IPC focal persons in LTCF. The objective of this document is to provide guidance on IPC in LTCFs in the context of COVID-19 to 1) prevent COVID-19 virus from entering the facility, 2) prevent COVID-19 from spreading within the facility, and 3) prevent COVID-19 from spreading to outside the facility. WHO will update these recommendations as new information becomes available. All [technical guidance for COVID-19](#) is available online.

System and service coordination to provide long-term care

- Coordinate with relevant authorities (e.g. Ministry of Health, Ministry of Social Welfare, Ministry of Social Justice, etc.) should be in place to provide

- Activate the local health and social care network to facilitate continuous care (clinic, acute-care hospital, day-care center, volunteer group, etc.)
- Facilitate additional support (resources, health care providers) if any older person in LTCFs is confirmed with COVID-19.

Prevention

IPC focal point and activities

LTCFs should ensure that there is an IPC focal point at the facility to lead and coordinate IPC activities, ideally supported by an IPC team with delegated responsibilities and advised by a multidisciplinary committee. WHO guiding principles for IPC can be found [online](#).

At a minimum, the IPC focal point should:¹

- Provide COVID-19 IPC training 'to all employees, including:
 - an overview of COVID-19: <https://openwho.org>;
 - hand hygiene and respiratory etiquette;
 - standard precautions; and
 - COVID-19 transmission-based precautions.²
- Provide information sessions for residents on COVID-19 to inform them about the virus, the disease it causes and how to protect themselves from infection
- Regularly audit IPC practices (hand hygiene compliance) and provide feedback to employees.
- Increase emphasis on hand hygiene and respiratory etiquette:
 - Ensure adequate supplies of alcohol-based hand rub (ABHR) (containing at least 60% alcohol) and availability of soap and clean water. Place them at all entrances, exits and points of care
 - Post reminders, posters, flyers around the facility, targeting employees, residents, and visitors to regularly use ABHR or wash hands.
 - Encourage hand washing with soap and water for a minimum of 40 seconds or with ABHR for a minimum of 20 seconds.³
 - Require employees to perform hand hygiene frequently, in particular at the beginning of the workday, before and after touching residents, after using the toilet, before and after preparing



GARIS PANDUAN PENCEGAHAN DAN KAWALAN PENYAKIT COVID-19 DI PUSAT JAGAAN WARGA EMAS KERAJAAN, SWASTA DAN BADAN BUKAN KERAJAAN PASCA-PERINTAH KAWALAN PERGERAKAN



JABATAN KEBAJIKAN MASYARAKAT

SOALAN LAZIM PANDUAN PENGENDALIAN WARGA EMAS DAN PENGHUNI DI INSTITUSI PASCA PERINTAH KAWALAN PERGERAKAN (PKP)

Soalan 1: Apakah maksud Penjarakan Sosial/Social Distancing?

Ia bermaksud tidak berjabat tangan, mengelakkan daripada berada di tempat orang ramai, menjarakkan diri dari orang sekeliling dan berada di rumah sepanjang masa atau jika tidak sihat kecuali untuk memenuhi keperluan-keperluan asas bagi mengelakkan jangkitan COVID-19. Penjarakan sosial bertujuan untuk meningkatkan jarak fizikal antara manusia atau mengurangkan kekerapan perkumpulan manusia dalam suasana yang padat.

Soalan 2: Siapakah yang tidak dibenarkan memasuki Institusi?

Mereka tidak dibenarkan memasuki ke Institusi termasuklah kakitangan, pekerja kontrak swasta, ALP, pelawat dan orang awam jika ada:

- Sejarah perjalanan ke mana-mana negara dalam 14 hari terakhir.
- Potensi hubungan dengan sesiapa yang telah diuji untuk COVID-19 melainkan keputusannya negatif.
- Berada dengan sesiapa yang positif COVID-19 dalam 14 hari yang lalu.
- Mempunyai sebarang gejala COVID-19 seperti batuk, demam dan sukar bernafas.

Guidelines

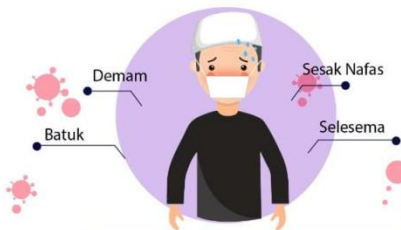


LANGKAH-LANGKAH PENCEGAHAN JANGKITAN COVID-19 DI INSTITUSI JAGAAN WARGA EMAS



MESEJ KEPADA PENGHUNI INSTITUSI

Adakah anda mempunyai tanda-tanda ini:



- Dan pernah ke kawasan yang terjejas dengan jangkitan COVID-19 atau hadir di perhimpunan ramai dalam tempoh 14 hari sebelum bermulanya gejala.

Atau

- Mempunyai kontak rapat dengan pesakit COVID-19 yang disahkan dalam tempoh 14 hari sebelum bermulanya gejala.

SEGERA MAKLUMKAN PADA PENJAGA ANDA

PESANAN AM



- Kerap cuci tangan anda. Gunakan air dan sabun; atau dengan bahan pencuci tangan (Hand Sanitizer).



- Tutup mulut dan hidung dengan siku atau tisu semasa batuk atau bersin. Buang tisu yang telah digunakan ke dalam tong sampah. Cuci tangan selepas batuk atau bersin.



- Elakkan menyentuh mata, hidung dan mulut. Cuci tangan sebelum dan selepas menyentuh mata, hidung dan mulut.



- Jauhkan diri anda dari tempat orang berkumpul.
- Jarakkan diri anda sekurang-kurangnya 1 meter dari orang lain.

Diterbitkan oleh: Bahagian Pembangunan Kesihatan Keluarga



Bahagian Pembangunan Kesihatan Keluarga



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Bahagian Pembangunan Kesihatan Keluarga



LANGKAH-LANGKAH PENCEGAHAN JANGKITAN COVID-19 DI INSTITUSI JAGAAN WARGA EMAS



BAGI PEKERJA INSTITUSI

Anda boleh membantu melindungi diri anda, rakan sekerja dan penghuni institusi dari jangkitan COVID-19 dengan:



- Cuci tangan:
 - Sebelum dan selepas mengendalikan perkakasan/ persekitaran/ peralatan dan penghuni



- Maklumkan kepada majikan jika ada penghuni yang tidak sihat.



- Pastikan anda memakai alat pelindung seperti sarung tangan, penutup hidung dan mulut (mask), penutup kepala dan sarung pakaian apabila mengendalikan penghuni yang sakit.



- Jika anda tidak sihat, maklumkan kepada majikan anda. Elakkan dari datang ke institusi. Segera dapatkan rawatan di klinik / hospital.

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LANGKAH-LANGKAH PENCEGAHAN JANGKITAN COVID-19 DI INSTITUSI JAGAAN WARGA EMAS



BAGI PENGHUNI INSTITUSI

Warga emas adalah kumpulan paling berisiko untuk mendapat jangkitan penyakit COVID-19. Oleh itu:



Jika rasa tidak sihat, maklumkan kepada penjaga segera.



Pakai penutup hidung dan mulut, jika ada tanda-tanda sakit tekak, batuk atau selesema.

PESANAN AM



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Bahagian Pembangunan Kesihatan Keluarga



LANGKAH-LANGKAH PENCEGAHAN JANGKITAN COVID-19 DI INSTITUSI JAGAAN WARGA EMAS



BAGI PELAWAT INSTITUSI

Anda boleh membantu melindungi pekerja dan penghuni institusi:



1. Elakkan lawatan ke institusi sehingga wabak tamat.



2. Lawatan perlu ringkas. Elakkan bersentuhan dengan penghuni.



3. Cuci tangan dengan segera sebelum dan selepas lawatan.



4. Jika perlu melawat, pastikan:

- Anda sihat
- Anda bukan Person Under Investigation
- Anda tidak pernah ke kawasan yang terjejas dengan jangkitan COVID-19 atau hadir di perhimpunan ramai dalam tempoh 14 hari
- Anda tidak mempunyai kontak rapat dengan pesakit COVID-19 yang disahkan

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LANGKAH-LANGKAH PENCEGAHAN JANGKITAN COVID-19 DI INSTITUSI JAGAAN WARGA EMAS



BAGI MAJIKAN INSTITUSI

Anda boleh membantu melindungi pekerja dan penghuni institusi anda dari jangkitan COVID-19 dengan:

Pastikan sabun dan air / hand sanitizer mencukupi untuk pencucian tangan pekerja, penghuni dan pelawat.

Asingkan penghuni yang sakit. Segera dapatkan rawatan kepada penghuni tersebut di klinik / hospital.

Sediakan alat pelindung seperti sarung tangan, penutup hidung dan mulut (mask), penutup kepala dan sarung pakaian yang mencukupi.

Pastikan pekerja sihat sebelum memasuki tempat kerja.

Pastikan kebersihan institusi dijaga.

Amalkan penjarakan sosial dalam institusi.

PESANAN AM



- Kerap cuci tangan anda. Gunakan air dan sabun; atau dengan bahan pencuci tangan (Hand Sanitizer).



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Bahagian Pembangunan Kesihatan Keluarga



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Bahagian Pembangunan Kesihatan Keluarga

Infographics

MASS SCREENING OF CARE CENTRES





Director General of Health Malaysia: Press Statement



From the Desk of the Director-General of Health Malaysia

A NATION WORKING TOGETHER FOR BETTER HEALTH

COMMUNICABLE DISEASE

KPK Press Statement 3 May 2020 - Current Situation of Coronavirus Disease 2019 (COVID-19) in Malaysia

BY DG OF HEALTH ON MAY 3, 2020

CURRENT STATUS OF COVID-19 CONFIRMED COVID-19

The Ministry of Health Malaysia (MOH) would like to inform that there are **87 cases** that have been recovered and allowed to be discharged today. This makes the cumulative number of cases that have fully recovered from COVID-19 and have been discharged from the ward is **4,413 cases** (70 percent of the total number of cases).

IMPLICATIONS OF COVID-19 TO SENIORS

As previously reported, the elderly were found to be quite affected by the COVID-19 outbreak where there were many cases of COVID-19-related infections and deaths among the age group of 60 years and above. Elderly people are a high risk group for complications and death due to COVID-19 infection due to age factors as well as chronic diseases. This is a global issue faced by countries affected by the epidemic.

Based on information obtained through *mortality review* on 99 out of 105 deaths reported in Malaysia, the age group with the highest number of COVID-19 deaths is between 61 to 70 years (ie 32 cases, 32.2 percent) and the second highest age group ranged from 71 to 80 years (i.e. 19 cases, 19.2%).

Although we do not yet fully understand COVID-19 infection, what is clear is that the risk of infection increases with age, and individuals with chronic or *non-communicable diseases* (NCDs) such as diabetes, high blood pressure, heart disease, fruit disease waist and cancer) and NCD disease risk factors (such as smoking and obesity) are more at risk of getting worse symptoms of COVID-19 infection and higher risk of death.

HEALTH ADVICE RELATED TO COVID-19

Taking into account these statistics, it is proven that the elderly are more at risk of being infected with COVID-19 by all parties. Compliance with health advice is the safety and health of the elderly.

Elderly people who need to get treatment for chronic diseases at the health clinic, they are advised to come for follow-up treatment according to the set date and time set. To reduce the frequency of visits and congestion at the clinic to take partial supply of medicine, MOH has provided *Value Added Service* pharmacy services such as Post Through Medicine (UMP), Locker2U, Integrated Drug Dispensing System (SPUB) and Drive Pharmacy according to the suitability of the services offered.

As senior citizens are a high-risk group for COVID-19 infection, the MOH has decided to conduct a COVID-19 screening test on employees and residents of nursing homes. This screening will be conducted in phases, starting with 17 Rumah Sri Kenangan and Rumah Ehsan under the supervision of the Social Welfare Department. Next, screening will be conducted at 357 care centers registered under Act 506 and 26 *nursing homes* registered under Act 586.

MOH is aware that there are almost or more than 1,000 private senior care centers that are not registered under any Act. The District Health Office was instructed to identify private care centers for senior citizens including religious hut institutions in their respective districts to ensure that COVID-19 screening coverage is comprehensive. Therefore, private care center operators are encouraged to contact the nearest District Health Office.

MOH will continue to monitor the incidence of COVID-19 infection in Malaysia. Malaysians are advised to stay at home and only go out for the necessary business. Continue to practice high personal hygiene such as frequent hand washing with soap and water, and practice a safe *social network* that is at least 1 meter (*social distancing*). This is important in breaking the chain of transmission of COVID-19 in society.

That is all and thank you.

DATUK DR. NOOR HISHAM ABDULLAH

CHIEF DIRECTOR OF HEALTH MALAYSIA

Search...

RECENT POSTS

- KPK Press Statement 5 November 2020 - Prohibition of Sale of Food Products Detected Contains Scheduled Poison and Displays False Information on Label November 5, 2020

Elderly Care Centre COVID-19 Screening

No. of Elderly Care Centre	432
No. of resident/ caregivers/ staff	18268
No. of sample done (%)	16425 (89.9%)
No. of positive cases (%)	47 (0.3%)
No. of positive cases with symptoms (%)	11 (23.4%)
No. of positive cases without symptoms (%)	36 (76.6%)



Challenges:

COVID-19



Cooperation issues with LTC

Non Registered LTC:

- ❖ Medico legal implication
- ❖ Lack of Resources

Prevention and Infection Control:

- ❖ In-out going visitor
- ❖ Limited PPE
- ❖ Skill and knowledge



Lesson learnt

- Need LTC to be registered
- LTC preparedness for new emerging disease
- Community awareness
- Physical and mental support
- Learning to live in New Norms





THANK YOU