

# Tokyo COVID-19 Measures



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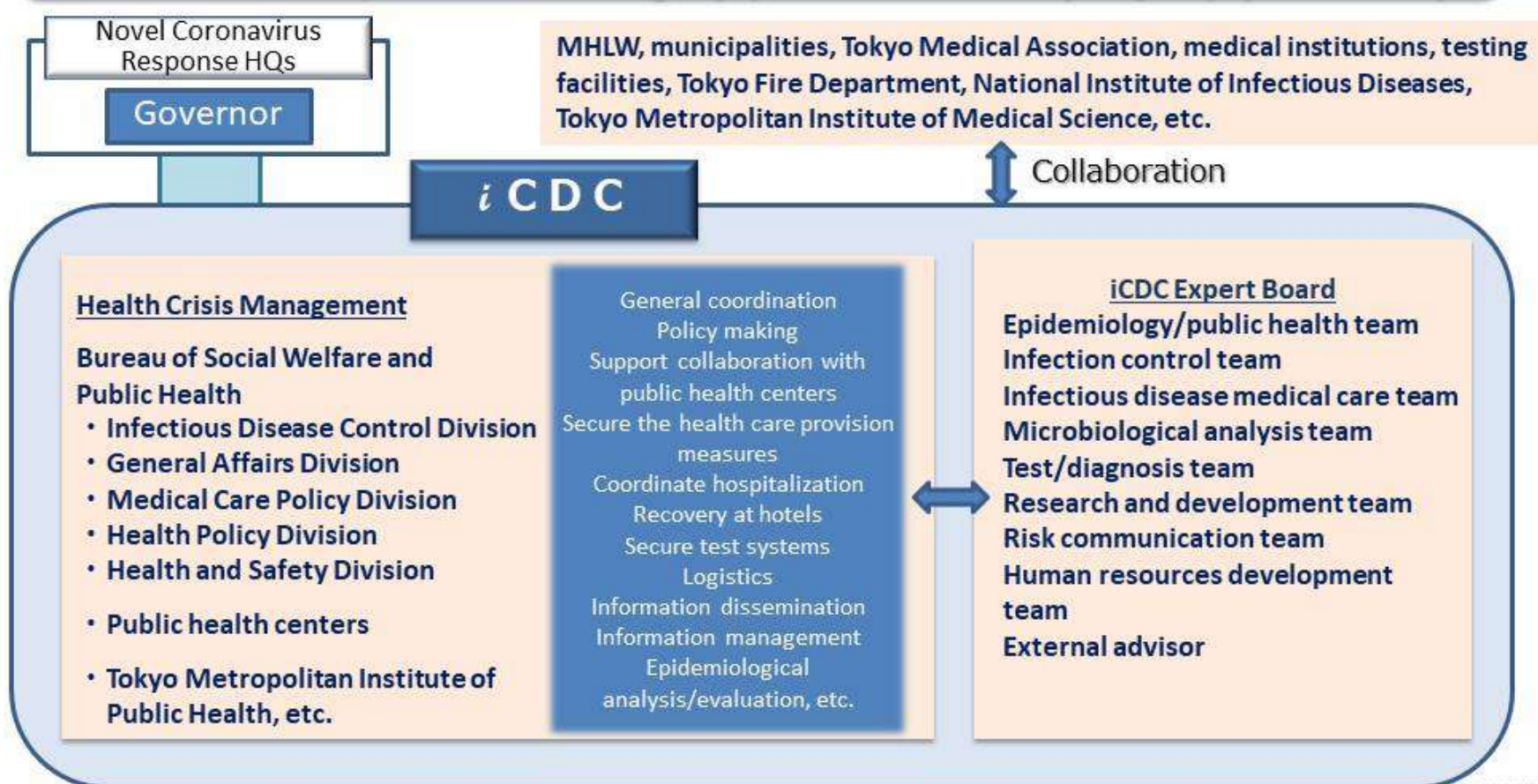
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# 1. How COVID-19 is handled under the Infectious Disease Act

Main measures taken under the Infectious Disease Act	COVID-19	SARS, MERS, avian influenza
Notify doctors who made diagnosis.	○	○
Hospitalize patients in designated medical institutions (recommendation).	○	○
Collect samples etc.	○	○
Disinfect areas contaminated with infectious pathogens.	○	○
Restrict or prohibit access to areas etc. contaminated with infectious pathogens, or restrict or block traffic to such areas.	×	×
Question and survey patients and other individuals concerned.	○	○
Publish information on positive cases and responses thereto.	○	×
Ask for cooperation to report health status of close contacts etc.	○	×

# 2. Tokyo Center for Infectious Disease Control and Prevention (Tokyo iCDC)

- Established on Oct. 1, 2020 as a permanent “control tower” integrally charged with taking effective infection control measures such as survey and analysis, information gathering and dissemination, etc.
- Intelligence functions are enhanced in time of peace by developing human resources and networking with municipalities, research institutes, etc.
- In the event of a crisis, it demonstrates emergency operation functions to respond promptly and effectively.



### 3. Monitoring Indicators

- Seven monitoring indicators of COVID-19 were established on two main pillars, the “infection status” and “health care provision system” in Tokyo.

- Infection status
  - (1) New positive cases
  - (2) Calls to \*#7119 about fever, etc.
  - (3) New untraceable cases
- Health care provision system
  - (4) Positive rate in testing (PCR/antigen)
  - (5) Cases not fulfilling the Tokyo Rule for Emergency Medical Care
  - (6) Hospitalized patients
  - (7) Patients with severe symptoms

Indicator	Indicators monitored	Previous figures (as of November 2)	Current figures (as of November 10)	Compared to last week	Highest up to now
Situation	1. Confirmed cases <sup>(1)</sup> (of which are 65 years and older)	21.7 (3.1)	22.9 (3.4)	→	4,849.4 (2021/6/19)
	2. Number of calls to *#7119 related to fever, etc. <sup>(2)</sup>	52.9	55.4	→	209.7 (2021/6/16)
	3. New untraceable cases <sup>(3)</sup>	Number: 14.5 Rate of increase: 79.4%	14.6 106.3%	→	2,972.6 (2021/6/19) 281.7% (2021/4/6)
Healthcare system	4. Positivity rate (single tested)	0.4% (1,448)	0.4% (1,579)	→	31.7% (2021/4/11)
	5. Number of cases by central coordination with the “Tokyo Rule for Emergency Medical Care” <sup>(4)</sup>	46.9	50.1	→	145.1 (2021/6/14)
	6. Hospitalized patients (Hospital bed capacity)	130 (4,848)	118 (4,834)	↓	4,351 (2021/6/6)
	7. Severe patients <sup>(5)</sup> (Patients requiring respiratory support, including ECMO) (Hospital bed capacity)	14 (384)	10 (356)	↓	297 (2021/6/28)

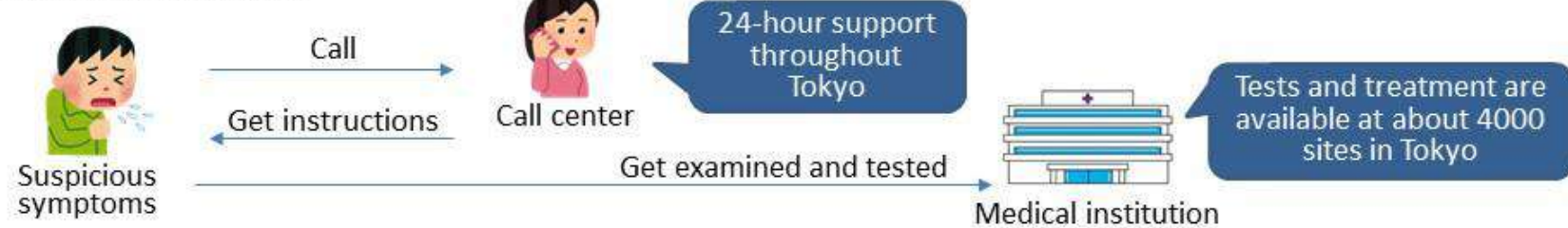
Term	Definition
*#7119	Telephone consultation service to advise on the necessity of emergency care and available medical institutions in case of sudden illness or injury
*Cases not fulfilling the Tokyo Rule	Number of cases that failed to satisfy the Tokyo Rule for Emergency Medical Care by requiring calls to over five institutions or taking over 20 minutes from the start of hospital selection to find an institution that can accept the patient.

- The status is analyzed weekly by experts for each indicator to evaluate Tokyo’s infection status and health care provision system in 4 stages.

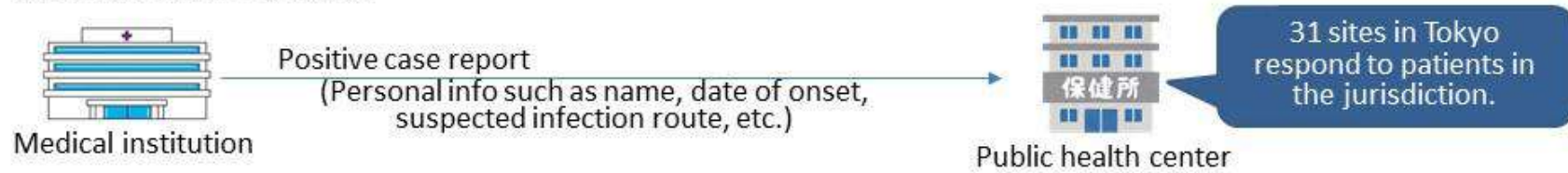


### 4. Detecting Infections and Response to Positive Cases

- If you have symptoms and suspect you have COVID-19, contact a call center or public health center to access a medical institution to get tested



- If you test positive, the medical institution will send a positive case report to the pertinent public health center (see next page for details).



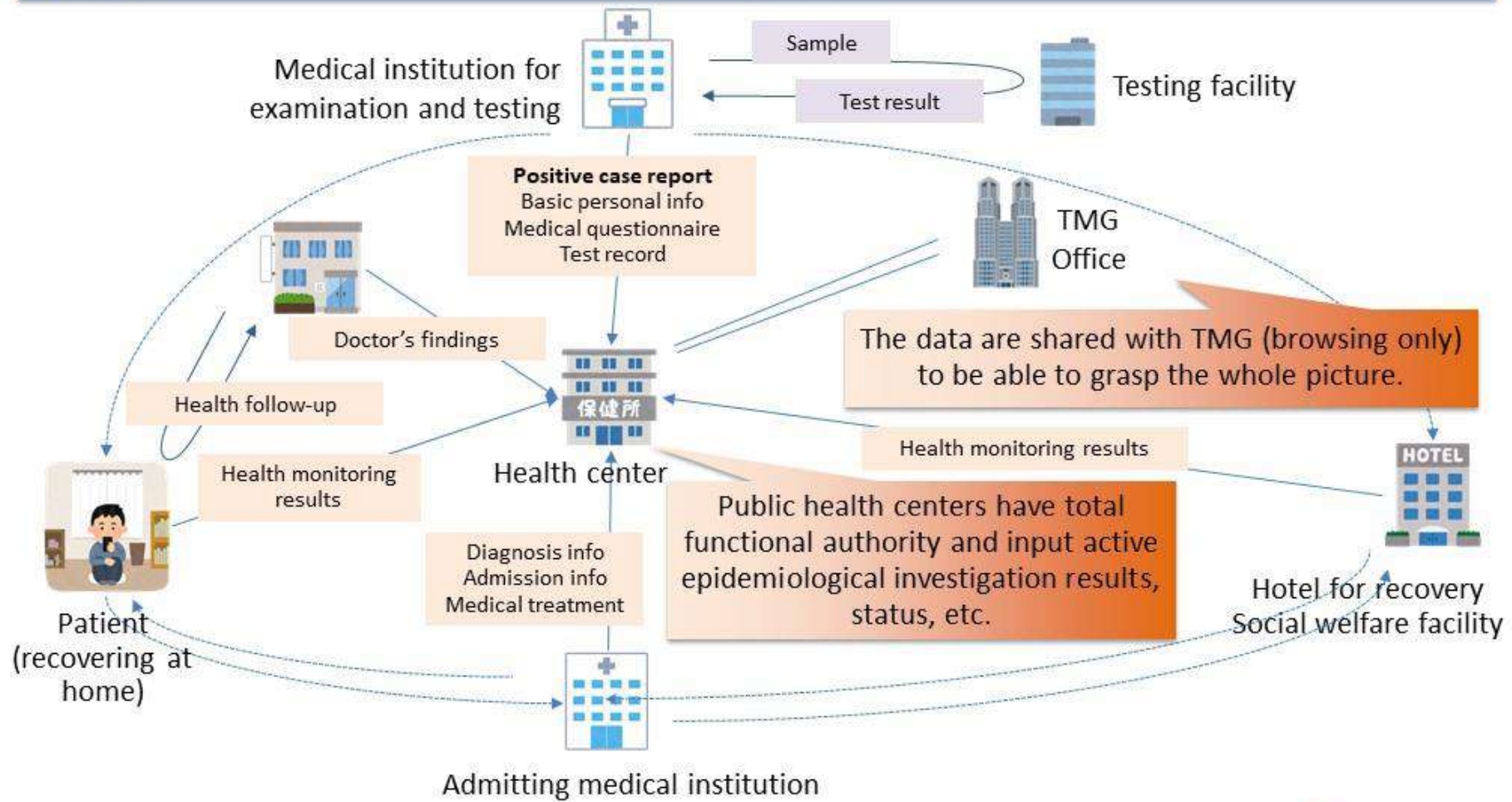
- Based on the report, the public health center contacts the patient about treatment for their condition, and takes measures to prevent further infection based on an epidemiological investigation.



## 5. Health Center Real-time Information-sharing System for COVID-19 (concept diagram)

HER-SYS: Health Center Real-time Information-sharing System for COVID-19

A system that allows medical institutions, public health centers, and patients (input only) to register information to be shared in the cloud



HER-SYS User Manual for Outpatient Returnees and Contacts



## 5. Health Center Real-time Information-sharing System for COVID-19 (features)

- Information on COVID-19 patients (symptoms, behavioral history, etc.) is **centrally managed and shared among stakeholders!**
- ◆ On-site operations of public health center personnel etc. are digitalized under the once-only principle. (No need to separately report already entered information)
- ◆ Patients enter health information using a smartphone.
- ◆ Promptly grasp and respond to changes in conditions of COVID-19 cases, etc.

Enhanced, secure support for patients.

Reduced burden on public health centers, medical institutions.

Supports appropriate patient management.

### Benefits of introducing system

[Medical institutions]

Input and reports made on tablets and PC  
Reduces workload of public health centers which initially had to input faxed information by hand.

[Residents]

Reports and welfare checks can easily be sent and received by smartphone

[Public health centers in Tokyo]

Patient information input by patients, medical institutions, and public health centers are promptly tabulated and shared with the metropolitan and national governments.

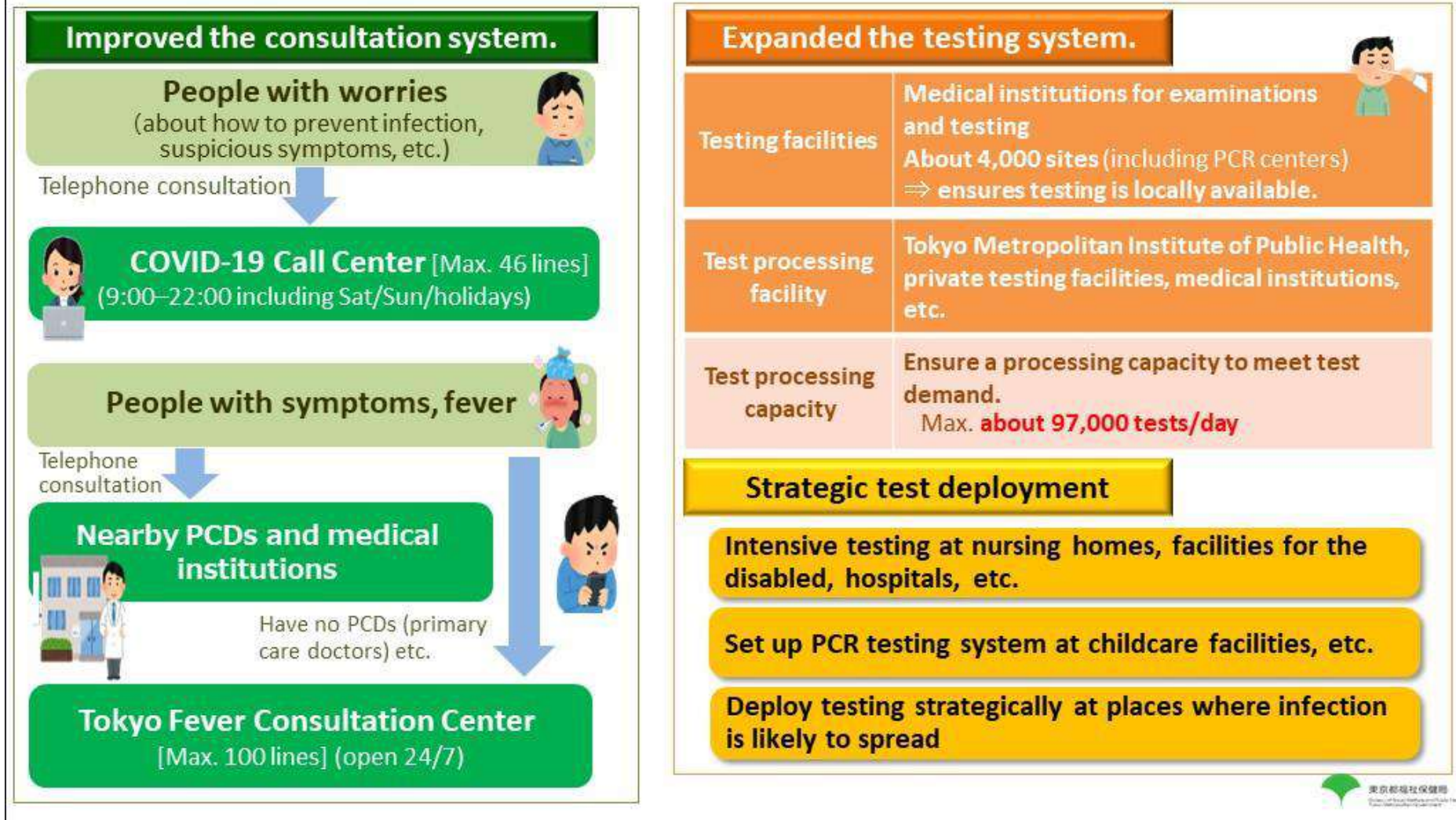


<https://www.mhlw.go.jp/content/12620000/000729154.pdf>



## 6. Expansion of consultation/testing systems and strategic testing deployment


- Improved the consultation system to ease anxiety among Tokyo residents and deploy intensive strategic testing at facilities with patients at a high risk for severe symptoms, places where infection is likely to spread, etc.



## 7. Securing health care provision systems etc. according to classified levels

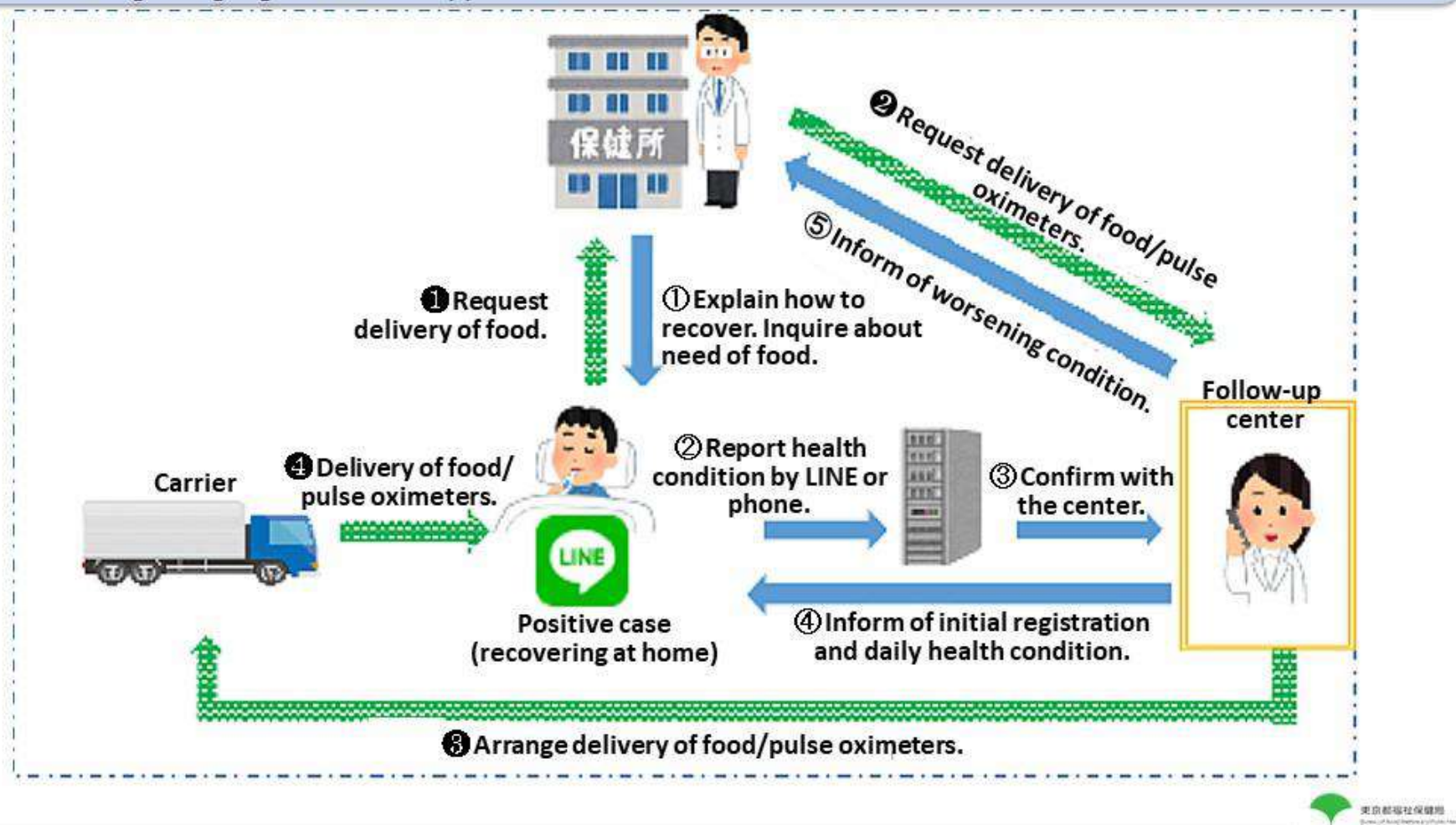
- Secure hospital beds and hotels for recovery according to the status of infection and, in response to a “medical state of emergency,” make requests based on the Infectious Disease Act.
- Secure hospital beds etc. (max. 6,891 beds) and establish a system for recovery at hotels (31 hotels in Tokyo, 7,900 rooms).

Level classification	Reinforcement of the health care provision system			
	Hospital beds (severe symptoms)	Extraordinary medical institutions etc.		Hotels for recovery
		Hospitalization waiting ST	Oxygen/health care ST	
<b>Level 1</b> (Should be maintained.)	<b>4,000 beds</b> (300 beds) Secured bed level 1	Suspended	<b>110 beds</b>	<b>1,750 rooms</b>
<b>Level 2</b> (Strengthen alert.)	<b>5,000 beds</b> (350 beds) Secured bed level 2	<b>20 beds</b>	<b>330 beds</b>	<b>3,070 rooms</b>
<b>Level 2.5</b> (Specific to Tokyo)	<b>6,891 beds</b> (503 beds) Secured bed level 3	<b>46 beds</b>	<b>720 beds</b>	<b>7,900 rooms</b>
<b>Level 3</b> (Strengthen measures.)				
<b>Level 4</b> (Preferably avoided.)	<b>Coordinate with the national government to increase beds.</b>	<b>Accept patients with symptoms or risk of developing severe symptoms while securing more facilities.</b>		



## 8. Follow-up of recovery at home

- Develop a follow-up system to integrally support the health and life of those recovering at home to provide them with enhanced health care support.
- Set up follow-up centers for those recovering at home and respond to their medical consultation on a 24-hour basis. Foreign languages are also supported.



## 9. Promotion of COVID-19 Vaccinations ①

- Promote inoculation of all Tokyo residents wishing to get vaccinated, promote vaccinations in collaboration with municipalities, etc.

- Priority vaccination for health care workers
  - Started in March 2021.
  - Vaccination appointment system and dedicated call centers.
- Vaccinations for residents
  - Started in April 2021 for people aged 65 years and older, and in June for those aged 64 years and younger.
  - Support for municipalities offering vaccines for residents.
  - Secures health care workers.
  - Coordinated wide-ranging municipalities.
- Deploys a system to respond to side effects
  - Set up a side effect consultation center.
- Information on vaccination
  - Set up a portal site (shown right).

東京都新型コロナウイルスワクチン接種ポータルサイト

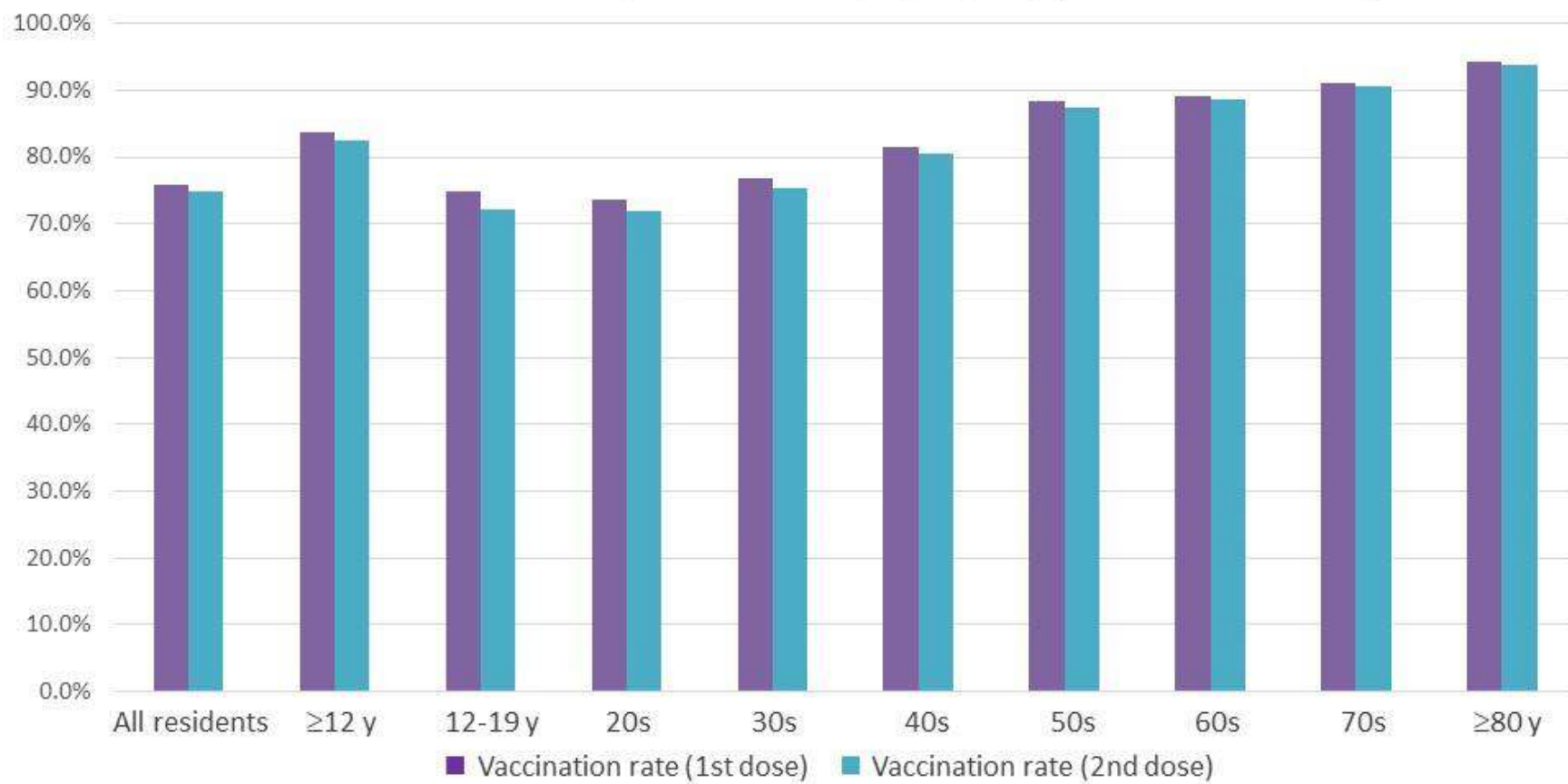


■ 都が設置する大規模接種会場については、東京都ワクチン接種会場コールセンター (0570-034-899) にお問い合わせください (受付時間等はこちら)。  
 ■ 大規模接種会場の情報は、公式Twitter (@tocho\_vaccine) でも発信しています。

## 9. Promotion of COVID-19 Vaccination ②

- 83.7% of Tokyo residents aged 12 years and older have been vaccinated with 1 dose, and 82.5% with 2 doses (as of Dec. 6, 2021).

Vaccination status in Tokyo residents by age group (1st and 2nd doses)



## 10. Enhancement of Public Health Center Functions

- Enhanced TMG responses, dispatching support personnel and improving the environment so public health centers can properly facilitate infection control, including consultation services, medical care guidance, active epidemiological investigations, and health monitoring.

### Main duties of public health center

Consultation services and medical care guidance

Hospitalization, accommodations, and home recovery coordination

Active epidemiological investigations  
(patient/active contact interviews, etc.)

Health monitoring  
(recovery at home, hotels, etc.)

Status of positive cases  
Hospitalization info management

### TMG's responses to support public health centers

#### Public health centers human resource support

- Dispatch support personnel.
- Secure experts.

#### Support organization development

- Have a contact tracing unit to reinforce active epidemiological investigations.
- Established an information management team to centrally manage patient information.

#### Digitalization of work at public health centers

- Headsets, large displays, etc.
- Promote automatic digitization of input data, such as positive case reports.
- Have a chatbot-style health monitoring system.

## 11. Ask residents to limit activities and businesses to cooperate with measures

- Depending on the infection situation, make appeals to Tokyo residents to prevent the spread of infection by refraining from non-essential outings and travel, while closing TMG facilities, and postponing or cancelling TMG-sponsored events.

### Appeals to Tokyo residents

- Refrain from all non-essential outings and travel, in particular non-essential outings after 20:00.
  - Refrain from crossing prefectural borders
  - Promote "Stay Home" policy.
  - Suspend or postpone leisure travel and activities.
- Strictly promote infection control: mask wearing, hand washing, avoiding 3 C's.
  - Refrain from drinking parties on streets or in parks.
  - Refrain from patronizing restaurants, etc. not complying with control measures.
- Strictly promote teleworking.
  - Reduce commuting workers via teleworking, staggered commute times, etc.
  - Request workers leave work by 20:00.
  - Refrain from business trips, use online meetings.

### Suspension of facilities, collaboration with businesses, etc.

- TMG facilities and parks
  - Close facilities and parks.
  - Restrict entry and use.
  - Close parking lots.
  - Restrict alcohol sales.
- Schools
  - Keep schools open with infection control measures securely in place.
  - Implement online classes, staggered commuting, flexible attendance, shortened school hours, etc. depending on the situation.
  - Suspend extracurricular and other activities likely to spread infection by droplets, depending on infection status.
- Collaboration with businesses
  - Turn off lights and neon signs after 20:00.
  - Suspend illumination at large-scale facilities.
  - Reduce public transport services etc.



## 12. Tokyo's Response to State of Emergency Measures

- To prevent the spread of infection, state of emergency measures such as requests for Tokyo residents and businesses have been implemented in line with the national government's basic policy. Currently, measures to prevent resurgence after the 4th state of emergency are in place.

	TMG measures and duration	Outline of TMG measures	
		[Tokyo residents]	[Businesses]
2020	<b>State of emergency measure ①</b> (Residents) [Apr. 7 to May 25] (Businesses) [Apr. 11 to May 25]	Request to refrain from non-essential outings	Request facilities to suspend business. Request restaurants to shorten business hours (5:00-20:00). Request to refrain from holding events.
	<b>State of emergency measure ②</b> [Jan. 8 to Mar. 21]	Request to refrain from non-essential outings etc.	Request restaurants etc. to shorten business hours (5:00-20:00). Request restrictions on events.
2021	<b>State of emergency measure ③</b> [Apr. 25 to Jun. 20]	Request to refrain from non-essential outings, non-essential travel across prefectural borders, etc.	Request large-scale commercial facilities to suspend business or shorten business hours. Request event facilities etc. to hold events without spectators, shorten business hours, etc. Request restaurants etc. serving alcoholic beverages to suspend business. Request restaurants etc. not serving alcoholic beverages to shorten business hours (5:00-20:00) Request restrictions on events.
	<b>State of emergency measure ④</b> [7/12 to Sep. 30]	Request to refrain from non-essential outings, reduce outings to crowded places by half, etc.	Request restaurants etc. serving alcoholic beverages to suspend business. Request restaurants etc. not serving alcoholic beverages to shorten business hours (5:00-20:00). Request large-scale commercial facilities, event facilities, etc. to shorten business hours etc. Request restriction in holding events. Request 70% of workers commuting to jobs to switch to telework, etc.



Hope to see you here in Tokyo soon  
when things get back to normal!

**GO>TOKYO**  
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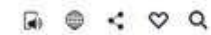
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いま人気のスポット



# Countermeasures to Combat Infectious Disease in Asia Project

—Basic Research on Risk Communication for COVID-19—

Disease Prevention and Information/Data Management Section, Infectious Disease Control Division, Bureau of Social Welfare and Public Health, Tokyo Metropolitan Government

1

## Research Overview

A basic study on effectively communicating information on COVID-19 to and from foreign residents in Tokyo

- Method: Online survey
- Respondents: 1,129 people (top 5 nationalities of foreign residents in Tokyo)

Chinese	Koreans	Vietnamese	Filipinos	Nepalese	Total
316	204	204	203	202	1,129

- Research period: From March 5 to 28, 2021
- Questions: Respondent gender, age, occupation, ways of collecting information, disease infection control in daily living, and cooperation in active epidemiologic research etc.

2