

NATIONAL RECOVERY PLAN

Malaysia's Roadmap to Safely Exit the COVID-19 Pandemic

#menangbersama



Malaysia
**STRONGER
TOGETHER**

FOREWORD PRIME MINISTER

Since last year, the world has been hit by the COVID-19 pandemic, which has threatened humanity and affected the global economy. To date, close to 200 million people have been infected globally and this number is expected to rise with the emergence of more aggressive variants. The impact of the pandemic has seen the world experience its worst economic recession since World War 2.

Similar to the fate of the global population, Malaysians have also had to face the twin health-economic challenge brought about by COVID-19 that has simultaneously threatened the lives and livelihoods of the *Rakyat*.

To date, the Government has introduced 8 stimulus and aid packages amounting to more than RM530 billion. All these packages and Budget 2021 have enabled us to battle the COVID-19 pandemic, safeguarding the *Rakyat* and businesses, strengthening public healthcare system as well as ensuring the nation's economic resilience. In addition, with commendable progress on the national vaccination programme, the country is clearly on track towards recovery.

This is where the National Recovery Plan plays an important role in charting a path for Malaysia to exit the crisis systematically and effectively.

The Plan is designed based on the whole-of-nation approach. This requires all levels of society to extend their full cooperation to the Government in executing the exit strategy, to enable the *Rakyat* to return to their normal lives by adapting to the new normal.

The National Recovery Council established by the Government will ensure the Plan can be implemented in a strategic and dynamic manner, whilst effectively balancing the lives and livelihood of the people, based on scientific evidence and data in assessing the main indicators for various planning scenarios at the national level.

The Government's intention is for the Plan to be not just a guide to the nation, but also a catalyst to the *Rakyat's* well-being; a revival plan for the business continuity and a stimulus to economic growth, in line with our hopes to reopen the economic sectors, and continuing the country's progress towards achieving shared prosperity.

I would like to express my gratitude and appreciation to all the stakeholders involved in developing the Plan and pray that all our efforts are blessed by the Almighty.

Finally, I urge Malaysians to stand together to support this Plan. Our victory can only be achieved if we work hand in hand, advancing together each step of the way, ensuring our recovery together for our beloved Malaysia.

YAB TAN SRI DATO'
HJ. MUHYIDDIN BIN
HJ. MOHD. YASSIN
Prime Minister
Putrajaya
July 2021





FOREWORD NATIONAL RECOVERY PLAN COORDINATING MINISTER

Since the COVID-19 global pandemic reached our shores, 32 million Malaysians have lived in anxiety with this calamity.

Throughout the COVID-19 threat, the Government has expended its fiscal resources, specifically in launching 8 economic stimulus and aid packages for the *Rakyat*, including the Budget 2021 – valued at more than RM850 billion. Praise to the Almighty, the packages have continuously supported economic resilience, enhanced public healthcare and helped the *Rakyat* and our nation. We may have been badly hit, and we may be down but surrender, we will not!

Nonetheless, I am sure the current burning question from the *Rakyat* is: what's next?

On 15 June 2021, the Government announced the National Recovery Plan (NRP). It is a strategy to exit from the COVID-19 pandemic properly and safely.

The Plan has four transitional phases based on stipulated data-sets, with three main indicators that will be used as thresholds. These will provide clear guidance and clarity on current and future steps being undertaken by the Government to transition from one phase to the next.

It is the Government's hope that this plan will serve as a guide to all walks of life across all sectors and industries to facilitate proper planning in the coming months.

To that end, the Government has set up the National Recovery Council (NRC) to administer the plan whilst the Ministry of Finance has been entrusted as the coordinator of the plan.

As coordinator of the NRP, the Ministry of Finance will ensure that the dynamic and agile plan will be executed well and adapted based on current scenarios. Updates will not be random, but will be based on current needs supported by credible and the most recent data.

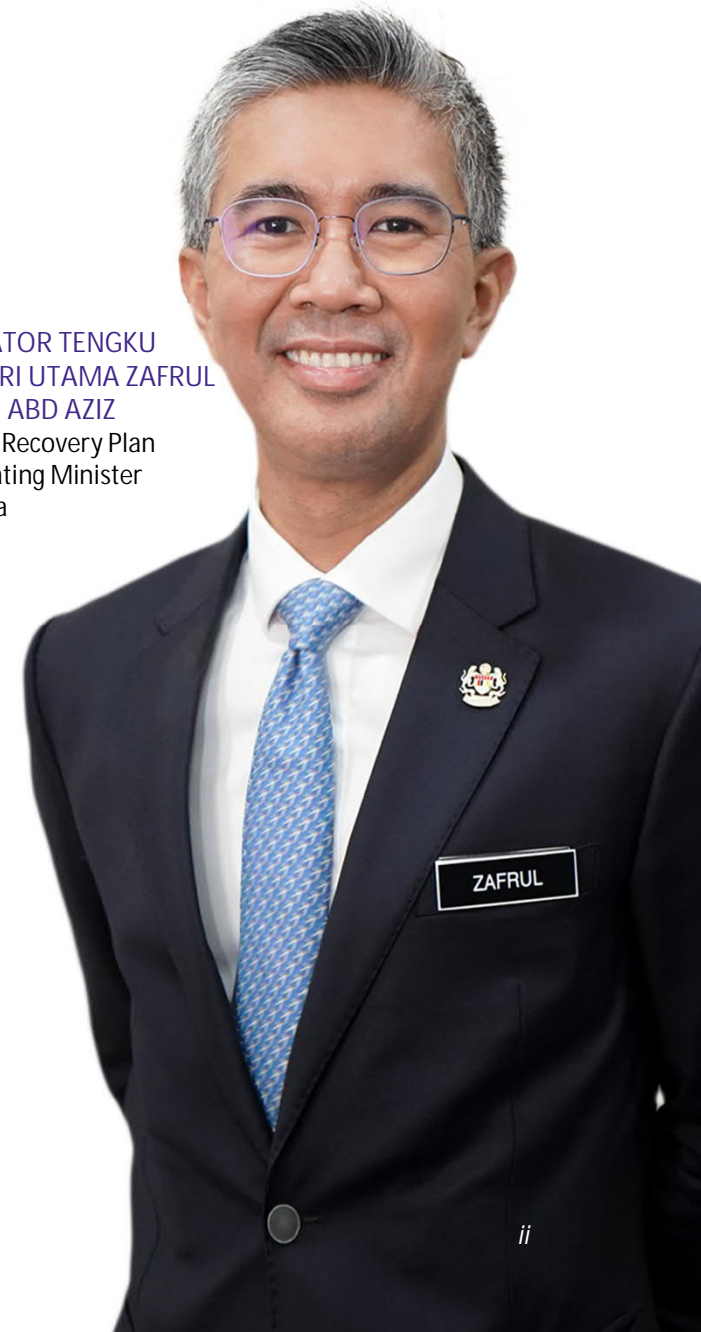
The inclusive approach has seen NRC inviting representatives from the state governments of Sabah and Sarawak, the opposition parties, as well as representatives from the private sector, industry experts and Non-Governmental Organisations to share their experience and expertise on various aspects of the NRP.

Let us pray that this plan will become a beacon of hope and cooperation between the *Rakyat*, a guiding compass for Malaysia to exit from this pandemic systematically and safely.

The Government hopes that this comprehensive and properly-crafted plan will instill confidence and inspire all parties to work hand in hand to curb the spread of COVID-19, as well as restore the *Rakyat's* livelihood and the nation's economy.

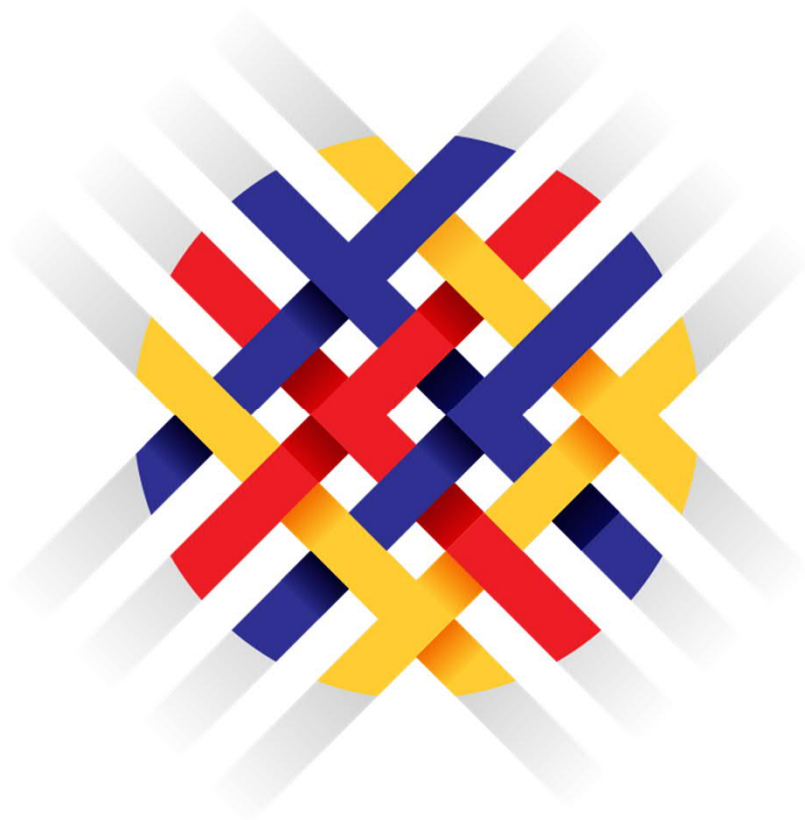
Malaysia, stronger together!

YB SENATOR TENGKU
DATO' SRI UTAMA ZAFRUL
TENGKU ABD AZIZ
National Recovery Plan
Coordinating Minister
Putrajaya
July 2021



The nation owes a deep debt of gratitude to the nation's frontliners.

We owe much to our doctors, nurses, hospital staff, vaccination centre operators and volunteers and countless others who risk their lives daily so that Malaysians and all who live here can be safe.



LOGO RATIONALE

THREAD AND WEAVE CONCEPT

A single thread may be strong.

But many threads, woven together,
are always stronger than any single one alone.

In our 64 years as a nation,
our foundation has always been
our unity in diversity.

In these unprecedented times,
we need the strength of many.

Coming together for Malaysia.

We need collective strength,
because our 34 million fellow Malaysians
need us to be strong.

For each other.
For our future.
And for our beloved country.
Let's come together, to win together.

#menangbersama #strongertogether

Table of Contents



Executive Summary	1
1 The New Environment	6
» Managing in an environment of increasing uncertainty and complexity	
» Defining a new approach to reopening	
2 An Evidence-Based Roadmap for Easing Restrictions	10
» The National Recovery Plan and its objectives	
» Global lessons on easing restrictions	
» A Common Opening Picture and Three Headline Indicators	
» A four phase roadmap to ease restrictions	
» Enhanced Movement Control Order	
» A Whole of Nation approach	
» Evolution of the Roadmap	
3 Strengthening the Healthcare Response to the Pandemic	24
» Breaking the chain of transmission through strengthened testing, contact tracing and isolation measures	
» Reducing morbidity and mortality through increased healthcare capacity and a wider range of treatment options	
» Maintaining sufficient support for non-COVID-19 needs	
4 Immunising the <i>Rakyat</i>	34
» Securing vaccine supply strategically	
» Accelerating Roll-out and Uptake	
» Improving vaccination experience	
» Looking forward	
5 Supporting People And Businesses	44
» Impacting lives and livelihoods	
» Supporting businesses	
» Linkages to past support packages	
» A commitment to support	
6 The Next Normal	59
» Moving from pandemic to endemic	
» Reforming Malaysian healthcare system	
» Building back better: Towards a more resilient, inclusive and competitive economy	



Executive Summary

Executive Summary

The COVID-19 pandemic continues to exact a painful toll. As of writing¹, Malaysia has registered over 927,000 cases with over 7,000 deaths, with severe impacts on society and the economy. The National Recovery Plan (NRP) has been developed as a roadmap to control the COVID-19 pandemic and to enable progressive reopening of society. However, as Malaysia continues its path towards recovery, new challenges are emerging:

- More dangerous variants: Variants of concern continue to arise. Most concerning are the Delta and Lambda variants which are significantly more transmissible and lethal. These pose an increased risk to public health and require adaptation of strategies to control the pandemic;
- Cases are unevenly spread: In some states infection transmission rates are falling, while in others they continue to rise, pushing demands upon the healthcare system beyond capacity. A more localised approach is needed;
- Growing community transmissions: A majority of cases now arise from community transmissions, without links to specific clusters. Mass testing will be critical to containment of these types of outbreaks; and
- Frontliners, the *Rakyat* and businesses are fatigued and anxious: Movement control measures have taken a toll on businesses and society. Medical frontliners are facing burnout, while vulnerable segments of society are struggling for basic needs.

The Government recognises the need for a comprehensive plan to address these challenges and as such the NRP is anchored on the following features:

- It is a forward-looking plan that balances lives and livelihoods;
- It sets out to provide transparency and clarity;
- It will remain dynamic to quickly respond to the changing situation;
- It uses a whole-of-nation approach; and

- It provides the basis on which the Government will monitor and track progress.

An Evidence-Based Roadmap for Easing Restrictions

This roadmap is a four-phase plan to ease restrictions cautiously and safely; anchored on vaccinating the population. Through the NRP, the Government aims to ease restrictions in a manner that achieves five objectives to protect lives and livelihoods:

1. To protect public health by managing transmissions, minimising hospitalisations and deaths;
2. To ensure that the healthcare system can cope in a sustainable manner;
3. To deploy vaccinations as quickly as possible to protect the *Rakyat*;
4. To reopen society and the economy as fairly and as quickly as possible; and
5. To be responsive and flexible in adapting to the evolving environment.

The Government will use a broad set of information to undertake a holistic assessment of a state's readiness to ease restrictions based on the five objectives, known as Malaysia's "Common Operating Picture". Currently, three specific metrics, linked to the first three objectives, provide a pulse on progress and have been critical in taking decisions on easing restrictions. These metrics are the number of daily new cases, the utilisation of Intensive Care Units (ICU) capacity and the percentage of the eligible population fully vaccinated. Over time as vaccination rates increase, the Government intends to shift the focus from daily new cases to hospitalisations and deaths as significant scientific evidence is emerging that vaccines are highly effective in preventing those incidences even if the virus continues to circulate in pockets of the community.

¹ As of 19 July 2021

The NRP lays out guidelines for each phase, as well as three thresholds that indicate a shift in phase could be considered. These phases are summarised below:

- Phase 1 restrictions are necessary when the virus transmissions are high and vaccinations are nascent. Phase 1 only allows essential business services to operate. Travel is only allowed within a radius of 10km, while sports activities are not permitted. Eight states in Malaysia have already transitioned from this phase into Phase 2;
- Phase 2 restrictions remain similar to Phase 1 with a few exceptions such as the resumption of face-to-face learning for classes with upcoming national examinations and an expanded list of sectors permitted to operate within capacity limits. Within Phase 2, the number of new cases is expected to reduce to between 2,000 to 4,000 cases per day nationally, with moderate ICU utilisation and between 10% and 40% of the adult population vaccinated;
- Phase 3 is when all sectors would be permitted to reopen subject to adherence to Standard Operating Procedures (SOPs) and capacity limits except those that are prone to a high risk of transmission such as spas, salons and night clubs. Schools and higher learning institutions will start progressively reopening for in-person learning. Within-state travel, gatherings within homes and dining in restaurants in limited group sizes will resume. In Phase 3, the number of new case is expected to reduce to 500 to 2000 cases per day nationally. ICU capacity will be at adequate levels, and vaccination rates will reach between 40% and 60% of the eligible population; and
- Phase 4 would allow most sectors to operate but they would be subject to compliance with social distancing SOPs and capacity limits. Large scale social gatherings can resume subject to a 50% capacity constraint, and businesses will be permitted to operate at maximum capacity and inter-state travel will be allowed. Phase 4 would see contained transmissions, such as fewer than

500 new cases per day, ICU capacity utilisation will be moderate, and over 60% of the eligible population will be fully vaccinated.

Phases can be applied at state as well as national levels, because virus risks can vary significantly by locality. The Enhanced Movement Control Order (EMCO) may also be deployed during any of the four phases as a targeted way of addressing a cluster of infections to avoid shifting a whole state (or nation) backward into a more stringent phase.

As vaccinations rise in Malaysia, the Government may explore the option of easing restrictions more quickly than has been laid out in the roadmap for those who have been fully vaccinated. The Government will continue to closely monitor the scientific evidence and experiences of other countries in making these determinations.

Strengthening the Healthcare Response to the Pandemic

The Government will strengthen Malaysia's healthcare response by anchoring on three pillars. The first pillar is to break the chains of transmissions through strengthened testing, contact tracing and isolation measures. The second pillar is to reduce morbidity and mortality through increased healthcare capacity and treatment options. Finally, the healthcare system must continue to protect the *Rakyat* by maintaining sufficient support for non-COVID-19 needs.

The key targeted healthcare outcomes include:

- Expansion of testing efforts via simpler and cheaper testing solutions made available to individuals and employers. From July 2021, additional test kits will be made available in the market, including five self-test kits;

- Accelerating contact tracing and introducing new care pathways: The Government will continue to improve the percentage of close contacts successfully traced within 48-hours of a confirmed case through an enhanced, technology-led approach. This will be linked to a new care pathway to be piloted in the Klang Valley, where individuals being isolated or quarantined at home will be given improved support;
- Providing surge support for Greater Klang Valley: Given the concerning situation in the Greater Klang Valley, the Government has established the Greater Klang Valley Special Task Force (GKVSTF) to mobilise surge support, including expanding testing, vaccinations and ICU capacity in this region. RM300 million has been allocated towards this surge support; and
- Expanding treatment options: The Government will continue to adopt an evidence-based approach to the use of COVID-19 treatments. The processes to bring in remdesivir, baricitinib and regen-cov will be expedited to provide more options for clinicians to improve patient recovery.

Immunising the *Rakyat*

Immunising the population is a key enabler for Malaysia's reopening. Malaysia's COVID-19 immunisation strategy involves securing adequate supply of safe and efficacious vaccines, increasing vaccine deployment and prioritising recipients according to health risk. The current vaccination programme covers all citizens and residents aged 18 and above. The national target is to fully vaccinate 40% of the eligible population by August 2021, 60% by September 2021 and 100%² by October 2021. As of July 2021, more than 80% of Malaysia's total eligible population have registered to be vaccinated. Vaccinations are progressing at a rate of 400,000 doses administered per day – the fastest rate per capita globally as of 17 July 2021.

The vaccination programme will continuously be enhanced to improve experience, provide responsive scheduling of vaccination appointments and

² Subject to eligible individuals registering to be vaccinated

achieve the target 1-hour turnaround time at the vaccination centres. Additionally, the Government will continue to monitor emerging scientific evidence to adapt the nation's vaccination strategy going forward such as strategies for immunising individuals below the age of 18 years. A National Vaccine Development Roadmap will also be finalised by end of 2021 to lay out plans to develop Malaysian-based vaccination production capabilities.

Supporting the *Rakyat* and businesses

As part of PEMULIH's RM150 billion in assistance, the Government aims to assist those who need it the most, such as the B40 and hardcore poor, as well as Small Medium Enterprises (SMEs) and hard-hit industries. Details of the PEMULIH support package are provided in the NRP. The following are highlights:

- *Rakyat* support: Direct cash assistance measures include *Bantuan Prihatin Rakyat* (BPR), *Bantuan Khas COVID-19* (BKC), and the *Bantuan Kehilangan Pendapatan* (BKP). Further assistance includes loan moratoriums, payment deferrals for educational loans, insurance premiums and takaful contributions. Reskilling and upskilling training programmes and job placement initiatives also have been introduced to provide more employment opportunities; and
- Business support: Up to 2.5 million employees will benefit from the Wage Subsidy Programme 4.0 (PSU 4.0). The *Geran Khas Prihatin* (GKP 4.0), where micro-enterprises would be entitled to one-off payments of RM500 in September 2021 and another RM500 in November 2021 will be continued. Other initiatives to support business liquidity include targeted loan moratoriums and utility bill discounts.

While the PEMULIH package has been designed to provide additional support during Phase 1 restrictions, support packages from previous plans still apply – with over RM100 billion to be implemented in the second half of 2021. The Government recognises that prolonged periods of restrictions could require longer periods of support and more severe restrictions, such as those seen in under EMCO would require enhanced support. As such, support packages will continue to be updated to provide the necessary support to *Rakyat* and businesses so long as restrictions apply.

Moving towards the Next Normal

With COVID-19 expected to become endemic, the NRP broadly provides a plan on how Malaysians can live with the virus. There is increasing consensus amongst the scientific community that COVID-19 will not be eradicated in the near future and will continue to circulate in pockets across the world as an endemic disease. As such, the Government is studying a broad set of options to manage this next normal including boosters or multi-year vaccination programmes, formalising ventilation guidelines, vaccine passports for travel, and normalising public health measures such as masking.

The Government has also recognised the need for a more comprehensive healthcare reform strategy to address the underlying challenges and vulnerabilities of the health system that COVID-19 has exposed while addressing the nation's longer term needs for healthcare. A core element to this reform will be to strengthen the system's resiliency and preparedness for future pandemics.

As the nation looks to recover from this unprecedented crisis, there is an imperative to build back stronger. As such, the Budget 2022 and Twelfth Malaysia Plan (RMKe-12) have been formulated to address both near term economic revitalisation efforts to guide Malaysia's reopening, and medium term strategies to structurally reform the economy. Key themes across both plans include addressing inequality deepened by the pandemic, rehabilitating sectors

most severely impacted by the pandemic, seizing new growth opportunities from shifts in the global economy, anchoring Malaysia on a green recovery, supporting the transition to the Future of Work and driving digitisation and automation.

It has been 18 months since the pandemic landed on Malaysia's shores and the nation is fatigued. COVID-19 has disrupted the lives of every Malaysian and all who live here. The nation's healthcare frontliners are exhausted. Many have lost loved ones and more so are struggling to make ends meet. Parts of the nation are still in crisis where necessary – but painful – measures are being taken to control the pandemic swiftly.

But there are signs of hope. Malaysia has one of the highest vaccination rates in Southeast Asia, second only to the city-state of Singapore and more than 2x the vaccination rates of Thailand and Indonesia. By the end of August 2021, over 1 in every 2 eligible Malaysians will have received two doses of their vaccines.

This is the nation's path to recovery.

As of writing, over 13 million Malaysians across 8 states are already in Phase 2 – more states will soon join them. The Government is firmly committed to supporting the *Rakyat* and businesses through this difficult period. The support measures will continue so long as restrictions are required. Beyond the crisis, the nation has a once-in-a-generation opportunity to build back better towards the vision of a united, prosperous and dignified nation.



1

The New Environment

The New Environment

The COVID-19 pandemic is unprecedented with the global death toll eclipsing 4 million as of July 2021. As of writing¹, Malaysia has registered over 927,000 cases with over 7,000 deaths, with severe impacts on society and economy.

The Government's ultimate aim is to protect the lives and livelihoods of Malaysians and all who live here. As such, The National Recovery Plan (NRP) aims to provide a roadmap to control the COVID-19 pandemic while progressively reopening society and the economy towards the New Normal.

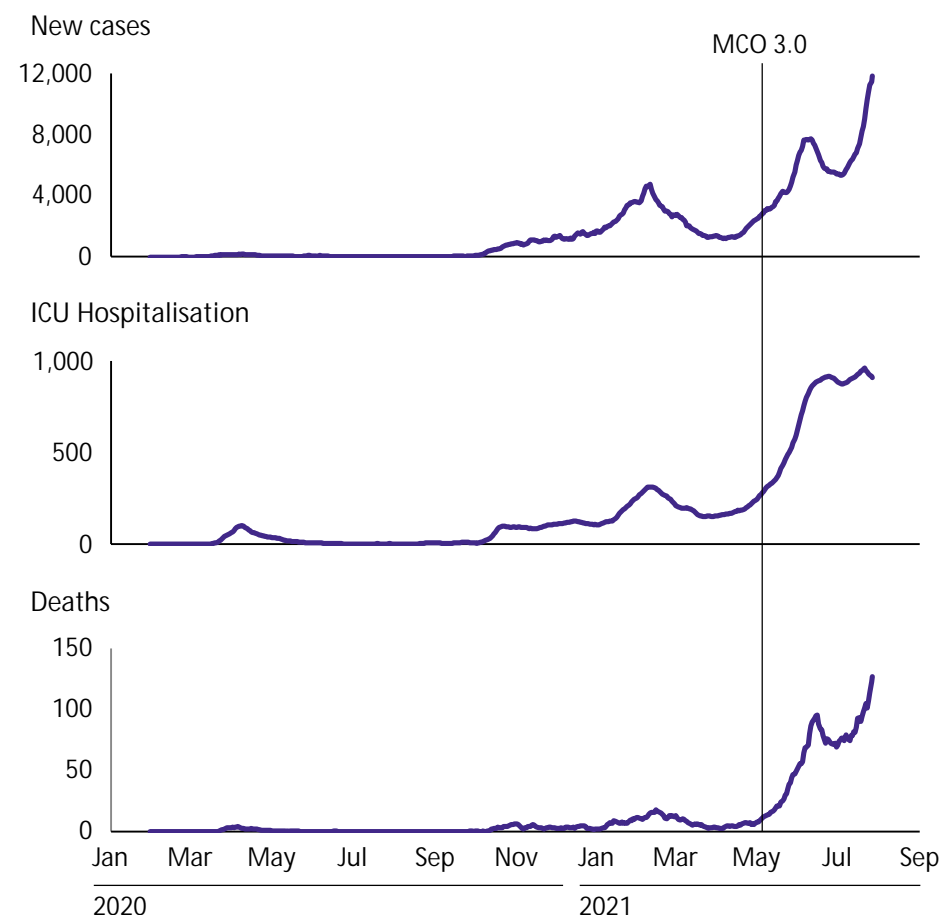
Managing an environment of increasing uncertainty and complexity

The third Movement Control Order (MCO 3.0) was initiated nationwide on 12 May 2021 in response to a surge in new cases. As shown in Figure 1.1, Malaysia reached 9,020 new cases on 29 May 2021 (or 27.5 cases per 100,000 population). After a brief decline, cases have begun to climb up again to a new peak of 13,215 new cases on 15 July 2021 (or 40.4 cases per 100,000 population) and with it, rising Intensive Care Units (ICU) hospitalisations and deaths. This has led the Government to impose stricter controls in the form of Enhanced Movement Control Order (EMCO) in areas of particular concern including parts of Kuala Lumpur and Selangor. This is a markedly different environment from when Malaysia experienced its first outbreak of COVID-19 in early 2020:

- More dangerous variants are emerging: The Delta variant is of significant concern – studies to-date indicate that it is up to 60% more transmissible than the Alpha variant, which is in turn 50% more transmissible than the original viral strain first detected in Wuhan². It has spread quickly in Malaysia, with 40 new cases reported at the end of June. As the virus mutates, new variants of varying lethality will continue to emerge. Most recently, the Lambda variant which has now been detected in over 30 countries is reportedly more virulent than the Delta variant. Such variants of

concern pose an increased risk to public health and require adaptation of strategies to further control the spread of the virus;

Figure 1.1 New cases, ICU hospitalisations and deaths³



¹ As of 19 July 2021

² Scientific Pandemic Influenza Group on Modelling, Operational sub-group (SPI-M-O) (June 2021); Consensus Statement on COVID-19

³ Ministry of Health, data from 25 January to 19 July 2021

- Cases are unevenly spread across the nation: The situation in Kuala Lumpur and Selangor is still extremely concerning, with case rates of 34.3 and 67.0 per 100,000 population respectively⁴ and the healthcare system operating significantly beyond its capacity. However, some parts of Malaysia have already shown significant decline such as in Kelantan, Pahang, Perak, Perlis, Pulau Pinang, Sabah, Sarawak and Terengganu⁵, where daily case rates are from 28.2 per 100,000 to as low as 0.4⁴. This means that a much more localised and targeted approach to managing the pandemic is required in order to protect lives and livelihoods;
- Growing community transmissions: Nearly 70% of cases⁶ are not linked to clusters, indicating outbreaks are in the community at large compared to the early stages of the pandemic where outbreaks occurred in specific clusters and testing, tracing and isolation were more targeted. With rising community transmissions, mass testing (rather than targeted testing) will be critical to contain the situation; and
- Frontliners, the *Rakyat* and businesses are increasingly fatigued and anxious: The cumulative impact of movement control measures have been extremely disruptive to the health and welfare of society and businesses. Medical frontliners are facing burnout, the vulnerable segments of society are grappling with bread and butter issues, businesses are struggling to survive, and mental health-related incidences are on the rise.

Defining a new approach to reopening

Malaysia is not alone in battling a new surge in cases. Many countries in Asia and Europe are experiencing similar challenges – driven in large part by the highly contagious Delta variant. In response to this, many have reinstated stay-at-home measures, while adapting their national strategies to cope with new variants of concern and to ramp up vaccination efforts.

Within this new environment that is uncertain, fast-evolving and increasingly complex, the Government recognises the criticality of setting out a new approach to combating the pandemic. Thus the NRP is anchored on the following five key features:

- It is a forward-looking plan that balances lives and livelihoods. The NRP lays out the Government's plan to control the COVID-19 pandemic, while progressively reopening Malaysia's society and economy. In doing so, the Government intends to stay guided by science and data while taking a balanced and measured approach to reopening;
- It sets out to provide transparency and clarity. The NRP intends to provide transparency on Malaysia's anticipated path to the New Normal, on what factors are taken into account in considering when and how to remove restrictions, and the measures that the Government intends to take to manage the pandemic and move the nation forward towards recovery;
- It will remain dynamic. While recognising the need for stability and certainty, the reality is that the pandemic had created a new environment marked by uncertainty. The NRP must remain dynamic so that Malaysia can respond quickly and effectively to lift restrictions in communities where the situation is manageable, to combat new dangerous variants and ensure that society and businesses are supported through this transition period. The continued progress of the vaccination programme and the epidemiological evidences of its success will be critical drivers of how strategies to manage lives and livelihoods will need to be adapted;

⁴ Ministry of Health as of 19 July 2021

⁵ As of 19 July 2021

⁶ Ministry of Health as of 30 June 2021

- It takes a Whole of Nation approach to tackling the pandemic. The nation will not succeed in its efforts without the support of the private sector, Non-Governmental Organisations (NGOs), community leaders and individual citizens. Cooperation will be critical for every single element of the NRP – from mobilising private healthcare providers to provide surge capacity in crisis areas, ramping up mass testing efforts, driving vaccination registrations and rates, and reaching the segments of society that need help the most during this difficult period; and
- It represents the basis on which the Government will monitor and track progress. The Government has established the *Majlis Pemulihan Negara* (MPN) which is responsible for driving the implementation of the NRP. This cross-ministerial committee will coordinate efforts across government supported by expert input from subject matter experts across health, economic and social issues. It will operate in close collaboration with the *Majlis Keselamatan Negara* (MKN) which will continue to function as the decision making body on the development of Standard Operating Procedures (SOPs), with advice from the MPN.

The National Recovery Plan represents a new approach to planning under uncertainty

The plan and the measures which it contains will be updated progressively based on scientific evidence and data on the prevailing situation and an assessment of various planning scenarios.

Updates will be provided on the NRP portal available at:



<http://pelanpemulihannegara.gov.my>



2

An Evidence-Based Roadmap for Easing Restrictions

An Evidence-Based Roadmap for Easing Restrictions

The restrictions to contain the transmission of the virus have exacted high costs on the Malaysian people and there is a shared national urgency to ease restrictions. The Government has laid out a plan to do this in a manner that preserves the nation's progress in battling COVID-19.

The National Recovery Plan and its objectives

The most recent Movement Control Order (MCO) that started on 12 May 2021 has incurred an estimated RM1.1 billion of economic losses daily. As movement restrictions and the challenging economic situation play out in personal lives, mental health issues have been on the rise, with police recording a 73% increase in average suicides cases per month between 2019 and 2021¹. School premises have been closed and replaced with home-based learning for nearly 10 months out of the last 18 months, with detrimental effects to student learning as well as placing additional childcare burden on parents.

The Government recognises the urgency of easing restrictions to alleviate these challenges and aspires to do this in a manner that does not squander the hard-won gains against the virus. It is critical to balance the urgent desire for lives to return to normal with an awareness of the risks of easing restrictions too quickly. The World Health Organization (WHO) has warned that prematurely lifting restrictions may result in a resurgence of outbreaks and cause cascading economic impact in the long term.

Thus, the Government aims to ease restrictions in a manner that achieves five objectives to protect lives and livelihoods:

1. To protect public health by managing transmissions, minimising hospitalisations and deaths;
2. To ensure that the healthcare system can cope in a sustainable manner;
3. To deploy vaccinations as quickly as possible to protect the *Rakyat*;
4. To reopen society and economy as fairly and as quickly as possible; and
5. To be responsive and flexible in adapting to the evolving environment.

On 15 June 2021, Yang Amat Berhormat (YAB) Prime Minister announced a National Recovery Plan (NRP) to ease restrictions in a manner that achieves these objectives. This paper expands on the original announcement and provides greater detail on the current plans to control the COVID-19 pandemic while progressively reopening society and the economy towards the New Normal. The NRP is a dynamic plan that will continue being updated over time.

¹ Source: Befrienders Kuala Lumpur emotional support help centre 2021

Global lessons on easing restrictions

A review of global experience of reopening and WHO advice unearths several instructive lessons that have been applied to crafting Malaysia's NRP.

Firstly, documents outlining countries' plans to ease restrictions are necessarily dynamic and evolving documents, with updates that are published as the context and understanding of COVID-19 evolves.

Secondly, WHO advice and the roadmaps of other countries favour an approach that evaluates risk holistically, rather than anchoring on single metrics as tipping points for relaxing restrictions. WHO recommends using a balance of six qualitative criteria to ease COVID-19 restrictions, namely, controlling the transmission; ensuring health system capacities are in place; minimising outbreak risks in settings like nursing homes and health facilities; educating, engaging and empowering communities to adjust to the New Normal; employing preventive measures in workplaces, schools and other essential locations and managing importation risks. Similarly countries such as the United Kingdom (UK), Australia, New Zealand and Singapore have each used a broad range of information and data to assess their readiness to ease COVID-19 restrictions.

Finally, a single dashboard or a "Common Operating Picture" that captures a pre-defined set of critical information at the local and national level and is used across government can help provide a clear shared basis for making evidence-based and timely decisions on re-opening.

Figure 2.1 provides more detail on how countries have approached laying out their roadmaps for easing restrictions.



Figure 2.1: International examples of criteria used to assess risks of easing restrictions



Australia

In October 2020, Australia published a Framework for National Reopening to provide consideration and guidance for reopening Australia to a state of “COVID Normal” while managing the health impact of COVID-19.

The framework outlined a Common Operating Picture to guide states on four factors to consider as they move through a three-step plan to ease restrictions, namely:

1. Cases;
2. Testing;
3. Aged care; and
4. Capacity.

18 metrics were defined to measure risk, as well as definitions of when the metrics indicate “red”, “amber” or “green” levels of risk.

The Framework built on the 3-Step Framework for a COVIDSafe Australia published previously in May 2020. More recently, in July 2021, the Prime Minister of Australia announced a four-phase pathway out of the COVID-19 pandemic that focuses on the criticality of vaccinations to ease restrictions.



United Kingdom

To support easing of restrictions, the UK laid out four tests in its Spring 2021 Roadmap, announced in February 2021. The four tests are:

1. The vaccine deployment programme continues successfully;
2. Evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated;
3. Infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the National Health Services (NHS); and
4. The assessment of the risks is not fundamentally changed by new variants of concern.

An array of data is tracked and published to assess whether these tests have been met, including the UK Coronavirus Dashboard which covers testing, cases, healthcare, vaccinations and deaths, with multiple metrics measuring each at national and local levels, the R number which measures rate of transmission, and the scientific evidence considered.

Then-Health Secretary, Matt Hancock, stressed in a speech on December 2020 that “While each metric is important in its own right, the interplay between each indicator for a given area is equally important, so a hard and fast numerical threshold on each metric is not appropriate.”

The Roadmap was preceded by the UK’s May 2020 “Our Plan to Rebuild”.



New Zealand

New Zealand uses a risk assessment based on four criteria for moving through four alert levels. The four criteria are:

1. Sustained and intensive and community transmission is occurring with widespread outbreaks;
2. Multiple cases of community transmission occurring with multiple active clusters in multiple regions;
3. Limited community transmission could be occurring with active clusters in more than one region; and
4. Sporadic imported cases, and isolated local transmission could be occurring in New Zealand.

Like the UK, New Zealand does not use specific targets but publishes a range of data that informs decision making through the NZ COVID-19 Dashboard. This includes data on case transmission, vaccine uptake, isolation and quarantine, and tracer app usage. New Zealand also publishes commissioned modelling reports that project the health outcomes and impact of COVID-19. In addition, StatsNZ tracks and reports COVID-19’s impact on economic, environmental and social aspects.



Singapore

On 20 Oct 2020, Singapore laid out a Roadmap to transition from Phase 2 to Phase 3 of COVID-19, which would allow an increase in group sizes for socialising and larger events.

The roadmap noted the factors that enabled the continued reopening of the economy, including “ramping up healthcare capacity, contact tracing and testing capabilities, putting in place safe management measures in the community, workplaces and dormitories, and opening our borders in a safe and calibrated manner.” It also noted that this resulted in being able to “control the infection and keep community transmission low”

It further laid out three enabling criteria:

1. Continued adherence to safe measurement measures;
2. Testing to enable more activities, especially quicker tests that could be used at events; and
3. Digital contact tracing tools to enable more activities, particularly, a higher take up rate of the TraceTogether application.

Like the UK and New Zealand, Singapore assessed the risk holistically rather than based on specific targets. Its criteria additionally include milestones in technology and citizen behaviour as considerations.

The Roadmap built on the phased approach to ending restrictions released in May 2020. More recently, the Ministerial taskforce announced an intention to publish a Roadmap to transition to a New Normal as vaccinations rise.

A Common Operating Picture and Three Headline Indicators

The Government will use a broad, shared set of information to undertake a holistic assessment of a state’s readiness to ease restrictions based on the five objectives, known as Malaysia’s “Common Operating Picture”. For example, to assess a state’s readiness to lift restrictions in light of the first objective of protecting public health by managing transmissions, minimising hospitalisations and deaths, metrics including new cases numbers, case rates per 100,000 population, transmission measured by R, hospitalisation rates and death rates will be examined. Figure 2.2 provides greater detail on the set of metrics that will be considered across the five objectives.

Currently, three specific metrics, linked to the first three objectives, provide a pulse check on progress on the objectives and have been critical in taking decisions on easing restrictions. These headline indicators are:

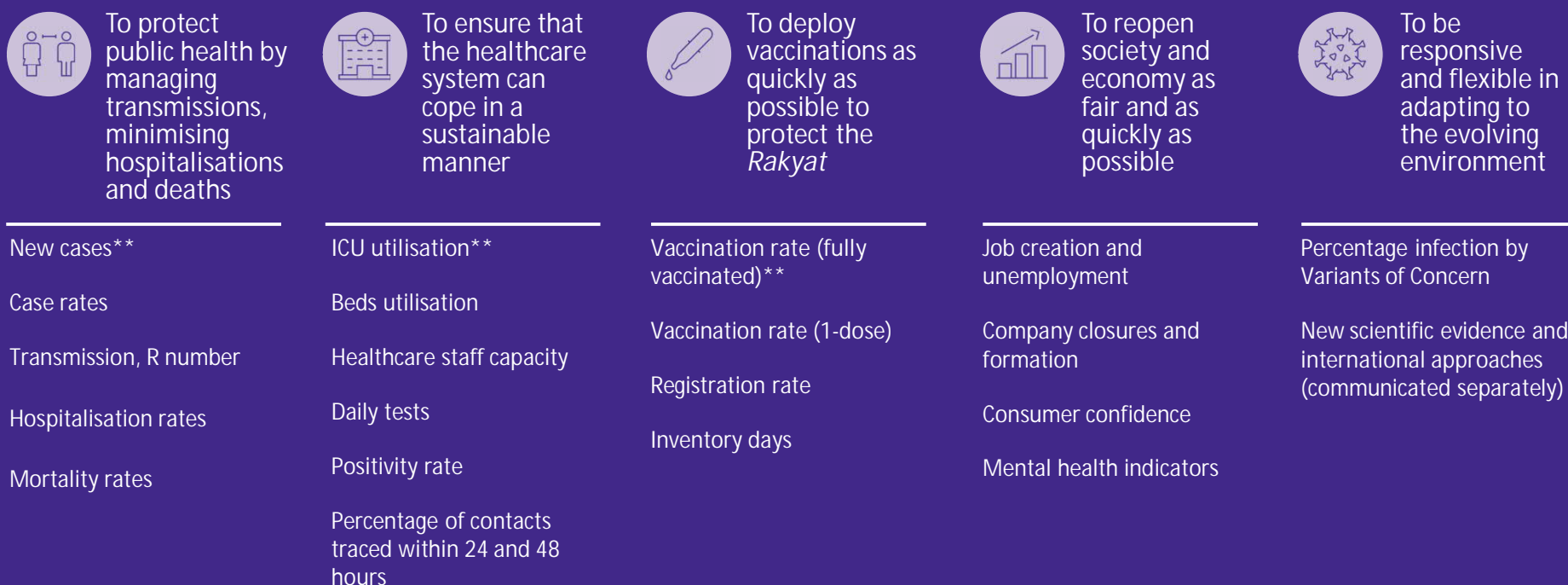
- The number of daily new cases provides an intuitive indication of the rate of transmission. This number is subject to a positivity rate of 5% or lower, which means that no more than five out of a hundred of the cases tested in Malaysia are positive. This ensures that the number of daily new cases is indicative of the number of cases nationally and is not artificially depressed by insufficient testing;
- The utilisation of Intensive Care Units (ICU) provides a good indication of system capacity as it is the primary bottleneck in many areas. Put another way, were cases to rise unfettered, the system would run out of ICU capacity before it runs out of other types of critical capacity such as COVID-19 beds or sufficient healthcare workers, making it a key measure of capacity; and
- The percentage of the eligible population fully vaccinated is used as the key metric. The eligible population refers to the adult population of Malaysia aged 18 or more, including citizens and non-citizens.

All else being equal, when these metrics reach the certain levels, the Government could consider easing restrictions following a four-phase roadmap.

Figure 2.2: The Common Operating Picture

The Common Operating Picture

- Consolidates data on progress on the five objectives, tracked at the state level
- Forms the shared basis that Government will use to make decisions about easing restrictions
- Will be updated and published weekly



** = Headline indicators for thresholds

Note: The COP will require tracking certain data that is currently not automated. Government will strengthen capabilities required to enable timely and accurate data to support decision-making

A four phase roadmap to ease restrictions

This roadmap is a four-phase plan to ease restrictions in Malaysia in a manner that achieves a balance of all five objectives of the NRP. It lays out guidelines for each phase, as well as thresholds for the three headline indicators that indicate a shift in phase could be considered.

It has been developed with a few principles in mind. Firstly, the thresholds of the three headline indicators have been defined to act as early indicators that a shift in restrictions could be considered. Before deciding to shift into a new phase, the government will review the full picture of the “Common Operating Picture” data and evidence holistically to assess risks.

Secondly, the phases can be applied at state as well as national levels, because situation and risks can vary significantly by locality. In assessing the criteria at a state level, the thresholds are translated into equivalent levels for the locality in question.

Thirdly, the Roadmap covers the Government’s current view on the Roadmap for easing restrictions but is not the last word on how Malaysia will address COVID-19. Future documents will address other elements of the recovery in greater detail as well as adaptations to the approach based on the latest evidence on successful approaches and methodologies.

The Government sees four broad phases for easing restrictions, outlined in Figure 2.3.




Full details of Standard Operating Procedures (SOPs) for Phases 1 and 2 can be found on the *Majlis Keselamatan Negara’s* (MKN’s) website.

Detailed SOPs for Phases 3 and 4 are currently being finalised



<https://www.mkn.gov.my/web/ms/sop-pkp/>

Figure 2.3: The four phase roadmap for reopening

	Phase 1	Phase 2
Headline indicators		<p> % of adult population fully vaccinated² 10%</p> <p> Daily new cases³ <4000</p> <p> Utilisation of ICU⁴ Moderate</p>
	Permitted activities	As per Phase 1, with the following additions..
Social, community & religious activities	<p>Jogging, cycling and other individual outdoor exercise</p> <p>Wedding solemnisation or registration at Houses of worship, Religious Associations, Islamic Religious Department Office or <i>Jabatan Pendaftaran Negara</i> (JPN) (up to 10 pax)</p> <p>Prayer groups (maximum capacity subject to guidelines by relevant authorities such as state religious bodies or Ministry of Unity (KPN))</p> <p>Funerals (up to 10 pax)</p> <p>No social gatherings</p>	
Education & care	<p>Nurseries and kindergartens for offspring of frontliners and those in essential services</p> <p>International exams and face-to-face learning for cohorts taking the examinations in international schools</p> <p>Selected activities in higher learning institutions, including face-to-face instruction for international exams, professional body activities, laboratory activities, subject to SOPs</p> <p>Residential care and rehabilitation centres subject to SOPs</p> <p>All other schools closed and other activities not permitted</p>	National exams and face-to-face learning for cohorts taking the examinations in all schools
Business	<p>Essential services⁵ only, subject to no capacity limit for agriculture and commodities, 60% for other private sector and 40% for public sector</p> <p>Take-away service from restaurants</p> <p>Interviews and newscasting</p> <p>Daily markets with limited operating hours</p> <p>All other businesses closed or to work from home</p>	Expanded list of sectors permitted to operate, subject to no capacity limit for agriculture and commodities, 80% for other private sector and 40% for public sector
Domestic & international travel	<p>Travelling for basic needs only within a 10km radius of home for 2 people per household</p> <p>Stay at home encouraged</p> <p>No crossing of state or district borders</p> <p>No inbound or outbound international tourism</p>	

² Indicator based on percentage of total adult population fully vaccinated







³ Threshold values for daily COVID-19 cases are subject to positivity rates being below 5% as per the World Health Organization (WHO) benchmark.

⁴ Based on total utilisation of Intensive Care Units (ICU)

⁵ Parameter Pelaksanaan Pelan Pemulihan Negara Berfasa



Details of the SOPs are dynamic and subject to MKN's re-evaluation based on ongoing risk assessments of the situation using the Common Operating Picture. For more information, kindly refer to [MKN's website](#)

Phase 3			Phase 4		
	% of adult population fully vaccinated ²	40%		% of adult population fully vaccinated ²	60%
	Daily new cases ³	<2000		Daily new cases ³	<500
	Utilisation of ICU ⁴	Adequate		Utilisation of ICU ⁴	Adequate
As per Phase 2, with the following additions			As per Phase 3, with the following additions		
House guests subject to capacity limits			Larger social gatherings subject to capacity limits and physical distancing		
All sports			Prayer groups at venue capacity subject to social distancing and other related SOP		
Wedding solemnisation or registration at Houses of worship, Religious Associations, Islamic Religious Department Office or JPN subject to increased capacity limits					
Nurseries and kindergartens open to the children of all parents					
Face-to-face learning in private schools, public schools and higher learning institutes starts to resume in stages, subject to the school calendar and meeting certain criteria					
All sectors can operate except those with high risk of transmission (e.g., spas, pedicures and manicures, pubs and night clubs), subject to capacity limits and SOPs			All sectors to operate at full capacity subject to social distancing and SOP compliance		
Dine-in service at restaurants subject to pax limits per table			Dine-in service at restaurants with social distancing and SOP compliance		
Live performances and events without an audience			Live performances and events with restricted audience capacity		
Night and weekly markets with SOPs					
Domestic travel within state for groups of limited size			Inter-state domestic tourism		
			International tourism, inbound and outbound, subject to risk assessments of variant and agreement with the respective countries		

² Indicator based on percentage of total adult population fully vaccinated

³ Threshold values for daily COVID-19 cases are subject to positivity rates being below 5% as per the World Health Organization (WHO) benchmark.

⁴ Based on total utilisation of Intensive Care Units (ICU)

Source for Phase 3 and Phase 4 activities: *Parameter Pelaksanaan Pelan Pemulihan Negara Berfasa*



Details of the SOPs are dynamic and subject to MKN's re-evaluation based on ongoing risk assessments of the situation using the Common Operating Picture. For more information, kindly refer to [MKN's website](#)

Phase 1

Phase 1 is the phase with the most stringent restrictions and implemented nationally from 12 May 2021. Phase 1 restrictions were introduced when transmissions were high, for example, exceeding 4,000 new cases a day at a national level, and vaccinations was still relatively nascent, for example below 10%, which places potential strain on the healthcare's system response capacity.

During this phase, restrictions focus on curbing the spread of virus within a population with low vaccination rates. Social activities or gatherings of any size are not permitted. Schools and higher learning institutions are to use home-based learning methods, with a few specific exceptions. Business premises will remain closed, and companies should operate on a work from home basis unless they are essential services. Essential services companies are required to comply with SOPs, which include caps on capacity of 60% (except the agriculture and commodity sectors) and working hours, as well as safe distancing procedures. All domestic and international tourism is restricted and movement is limited to a 10km radius of home for up to two people per household for essential tasks.

While these measures are necessary to curb virus transmission, the downsides are significant. Economic losses stood at RM1.1 billion per day when the whole nation was in Phase 1. Restricted sectors include the manufacturing sector, which contributes 23% to Malaysia's Gross Domestic Product (GDP) and employs 17% of the total workforce, and the services sector, which contributes 58% to Malaysia's GDP and employs 60% of the total workforce.

From a well-being perspective, it has been observed from global data that restricting face-to-face education has a significant adverse impact on children's

learning and development as well as their well-being⁶. Restrictions to school attendance have also impacted parents' ability to work, as they have had to oversee remote learning while working from home. Movement restrictions and economic strain place immense stress on the *Rakyat's* mental health and well-being. A recent study conducted on the UK population by University College London (UCL) in February 2021, shows that anxiety and depression levels are consistently higher now than pre-pandemic averages⁷ owing the lockdowns and the associated restrictions.

Phase 2

Phase 2 is where some of the restrictions from Phase 1 are relaxed. As of 19 July 2021, eight states, including Kelantan, Pahang, Perak, Perlis, Pulau Pinang, Sabah, Sarawak and Terengganu have shifted into Phase 2.

In Phase 2 restrictions are still in place because virus transmission is high and system capacity is moderate. For example, there might be between 2,000-4,000 new cases per day, between 10%-40% of the eligible population vaccinated, and with ICUs operating at moderate capacity levels. Close monitoring is required in this phase to ensure there is further strain on the economy and the healthcare system.

During this phase, most of the restrictions on social, religious and community activities, education and care and travel will remain similar to Phase 1 with a few exceptions. Face-to-face learning can resume specifically for classes that are preparing for imminent national or international examinations in all schools.

⁶ OECD (2020), "Focusing on the long-term impact of school closures", OECD Policy Responses to Coronavirus (COVID-19)

⁷ UCL (2021), "Social Survey Week 46-47", COVID-19 SocialStudy, Results Release 30

Business activities will see some relaxation in restrictions. Several more sectors in manufacturing, such as automotive, cement and furniture production will be permitted to operate beyond the list of essential sectors. Businesses permitted to operate can only operate up to 80% capacity (except agricultural and commodity sectors) and are subject to safe distancing SOPs.

The socio-economic costs of this phase remain significant, albeit lower than in Phase 1. Economic losses, are expected to fall to RM550 million per day driven by the opening up of the manufacturing sector that is a significant contributor to Malaysia's GDP and workforce. With the sectors opening up, there will be slight improvement in the mobility of the workforce, as 31% of the workforce will be allowed to operate from business premises, and the risk of further job losses will be reduced in this phase.

Challenges with well-being and education will likely persist in this phase.

Phase 3

In Phase 3, transmissions would start to come under control (for example with 500-2000 new cases per day), and critically, vaccine roll out will start to approach sufficient levels to significantly ease restrictions. The system would be equipped to cope with the transmission rate, with ICU capacity at adequate levels. Vaccination rates will reach critical mass, with over 40% of adult population vaccinated.

During Phase 3, schools and higher learning institutions will start to reopen to operate for face-to-face learning and teaching activities, subject to the school calendar and meeting specific criteria. Nurseries and kindergartens will be

allowed to operate for the children of all parents. Only business that are prone to a high risk of transmission such as spas, salons, night clubs, will remain closed, with other businesses permitted to operate at maximum 80% capacity. Travel within-state can resume for groups with limited numbers. Large social events remain restricted, but houses could start to receive guests and dining-in in groups of two can resume.

During this phase, relaxation on several restrictions is dependent on individual's vaccination status. Restrictions may be relaxed to those who have received full vaccination.

With transmissions increasingly under control and easing of restrictions in this phase, the downside economic loss will be moderate. Economic losses are expected to be at RM160 million per day. The reduction in losses will be driven by the opening of the manufacturing sector and domestic tourism, which are a significant contributors to Malaysia's GDP and workforce. With these sectors opening up, there will be a significant improvement in the mobility of the workforce, as 44% of the workforce can operate from business premises, and the risk of further job losses will be reduced in this phase.

Students will be able to resume school, with positive effects on their learning and mental health.

Phase 4

As the majority of the adult population is vaccinated, Phase 4 represents a critical shift towards a New Normal. Phase 4 would see contained transmission, adequate system capacity and high vaccination rates. For example, this could manifest as fewer than 500 new cases per day, moderate ICU capacity and over 60% of the adult population fully vaccinated. As the evidence on vaccinations and immunity evolves, it could become more valuable to monitor health outcomes from COVID-19, such as number of hospitalisations, number of deaths, rather than case numbers.

During this phase, most restrictions will be relaxed. Large events and social gatherings can resume subject to capacity constraints and businesses will be permitted to operate at maximum capacity, subject to safe-distancing SOPs. Inter-state movement will resume. Inbound and outbound international tourism could potentially start to resume. This would need to be carefully studied before being put into action given the fast-evolving situation playing out with regards to new, highly transmissible variants that could be brought in from overseas.

Similar to Phase 3, relaxation of several restrictions varies on the status of individual's vaccination.

Given that most of the economy will be reopened in this phase, driving stimulus and recovery measures is critical so that the Malaysian economy can not only recover to pre-pandemic levels, but be built back stronger. Measures to support this are outlined in Chapter 6. While life might not be exactly the same as it was before COVID-19, this could signal the start of a "Next Normal".

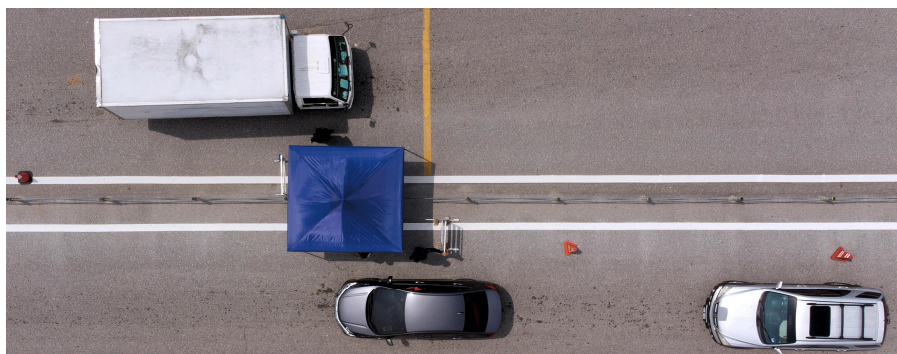


Enhanced Movement Control Order

The Enhanced Movement Control Order (EMCO) is a targeted set of measures to enhance virus transmission control in specific localities of risk. Such measures may be used independently of the phased recovery process to mitigate emerging risks in designated areas and target specific clusters within a state. It can be deployed during any of the four phases to avoid shifting a whole state (or nation) backward into a more stringent phase.

EMCO was first implemented within Phase 1 on 1 June 2021 in Sabah. As Selangor and Klang Valley have battled record cases in July, the EMCO has been employed in multiple districts in these areas to regain control of virus transmission. As of 16 July, EMCO has been lifted in all districts of Selangor.

Enhanced restrictions used in the EMCO have included restrictions on movement in and out of the area, restriction of movement to one member per household for basic necessities within the EMCO location or a 10km radius whichever is lower, an 8pm cut-off unless for emergencies while public transport operating at 50% passenger capacity. Depending on the situation, more stringent measures could be, imposed.



A Whole of Nation approach

Successfully executing this roadmap to ease restrictions will require a Whole of Nation approach where Ministries, frontline workers, public safety personnel, volunteers, Non-Governmental Organisations (NGOs) and the *Rakyat* work in concert to manage COVID-19.

Whole of Nation coordination will be anchored by a new coordinating body, the *Majlis Pemulihan Negara* (MPN), chaired by YAB Prime Minister, with *Agensi Pelaksanaan Ekonomi dan Koordinasi Strategik Nasional* (LAKSANA), Ministry of Finance (MOF) as its Secretariat. MPN's mandate is to monitor, coordinate and ensure the successful delivery of the NRP. It will deliver on this mandate across six areas:

1. Standard Operating Procedures (SOP), led by *Majlis Keselamatan Negara* (MKN), to set and ensure implementation of SOPs across social, religious and community activities, education and care, business activities, domestic and international tourism and vaccination privileges;
2. Healthcare system, led by Ministry of Health (MOH), to continue to monitor and manage testing, contract-tracing, quarantine, therapeutics and non-COVID-19 care;
3. Vaccinations, led by Ministry of Health and supported by Ministry of Science, Technology and Innovation (MOSTI), to continue to manage and monitor, vaccine supply, vaccine distribution both government and private sector driven, vaccine demand, vaccine efficacy and effectiveness;
4. Economic recovery, led by Ministry of Finance (MOF), to chart the recovery progress, and to allocate and implement budget initiatives such as cash assistance, wage subsidies, and tax incentives among others. These efforts will also be strongly linked to the Twelfth Malaysia Plan (RMKe-12) being developed by the Economic Planning Unit (EPU);

5. Social and welfare, jointly led by MOH and *Jabatan Kebajikan Masyarakat* (JKM), *Kementerian Pembangunan Wanita, Keluarga dan Masyarakat* (KPWK) to manage and provide assistance for the *Rakyat* in areas such as homelessness and mental health, among others; and
6. Stakeholder engagement, led by the Prime Minister's Office (PMO), to manage and support communication with stakeholders and to launch the NRP.

Close collaboration with stakeholders outside of government will be critical to successful easing of restrictions. Firstly, the Government will continue to seek and engage with the latest findings and advice from the scientific community through the Health and Sciences COVID-19 Advisory Group of Experts (EAG). The EAG comprises representatives from Malaysia's top medical associations.

Secondly, the public and private healthcare sectors will work hand-in-hand to ensure the full resources available are deployed towards fighting the COVID-19 pandemic. This includes accelerating arrangements to send non-COVID-19 patients to private hospitals to alleviate strained public hospital capacity and continuing to expand testing capacity, including through private facilities. As of July, the private sector has already made 129 ICU beds available to non-COVID-19 patients and COVID-19 test processing facilities have grown from three laboratories to 92 facilities operated by public and private organisations across Malaysia.

Thirdly, the views of the *Rakyat* and the business community will be critical to understand how NRP implementation is progressing and where adjustments are required. The government will set up channels and forums to solicit, understand and act on the feedback from the nation about their lived experiences.

Finally, Malaysia's ability to make progress depends on the collective behaviour of all who live here. If everyone adheres to the guidelines for each phase, the nation can move out of the pandemic quicker. If everyone practices good personal hygiene and wearing of masks, the community will be less likely to be

infected. If everyone is considerate to one another, staying away at home when they feel unwell, transmissions will be reduced.

Evolution of the Roadmap

The Roadmap laid out in this chapter is based on the best scientific and empirical evidence available at this time. However, COVID-19 evolves quickly—as do the approaches to managing it. As such, the Government intends to regularly refresh the roadmap and NRP to reflect the latest evidence on managing the virus.

One example of a possible evolution is how the nation monitors virus transmission as vaccinations rise. As vaccinations rise, countries are exploring the possibility that clinical outcomes of COVID-19 become comparable to influenza. Should this happen, COVID-19 may continue to circulate, but very serious cases leading to hospitalisation or death will be the focus of care. Under this scenario, the focus (and headline metric) could shift from tracking daily new cases to tracking health outcomes. Metrics such as the number of people who become very ill, that need intensive care, that need to be intubated for oxygen, and other variables could become increasingly important in determining whether or not to ease restrictions.

Another possible evolution is privileges for those that have been vaccinated. As vaccinations rise in Malaysia, the Government may ease restrictions more quickly for those who have been fully vaccinated. The Government will continue to closely monitor the scientific evidence and experiences of other countries in making these determinations.



3

Strengthening the
Healthcare Response
to the Pandemic

Strengthening the Healthcare Response to the Pandemic

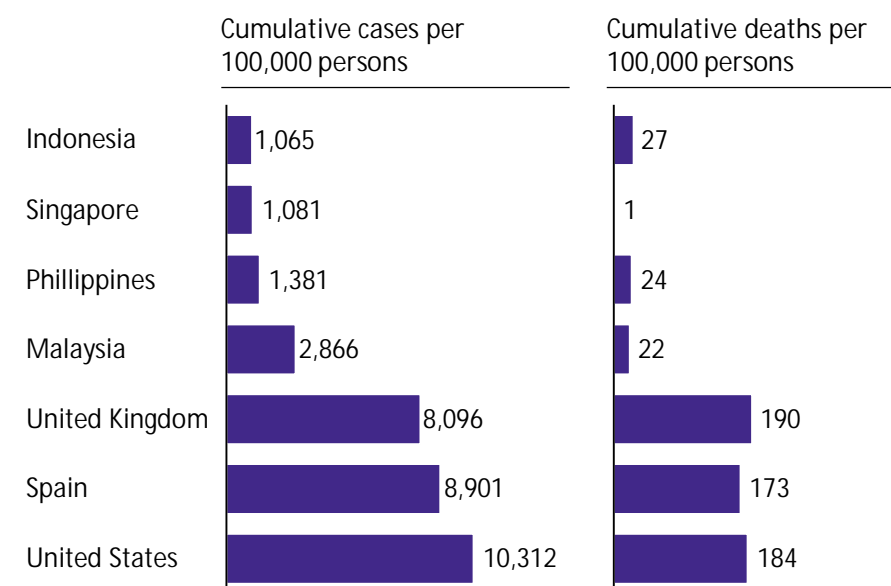
In battling COVID-19, countries are dealing with a virus that transmits rapidly and survives for a prolonged period, with infected persons remaining asymptomatic for as long as ten days, increasing the likelihood of infecting others. One in five people infected with COVID-19 have no symptoms but are still contagious¹. Additionally, global data shows that the rate of infected individuals progressing to a stage where they will require intensive care is approximately 26% and average mortality rates are approximately 2.2% of total COVID-19 cases².

Figure 3.1 compares cumulative cases and deaths per 100,000 population in Malaysia against other countries.

Bringing the pandemic under control requires concerted efforts from society and Government. Individuals, community leaders and businesses need to be vigilant in taking precautionary measures to prevent virus transmissions. In parallel, the Government will accelerate measures to strengthen Malaysia's healthcare system to support a progressive loosening of movement restrictions while protecting lives. These measures are anchored on three pillars:

- Breaking the chains of transmission through strengthened testing, contact tracing and isolation measures;
- Reducing morbidity and mortality through increased healthcare capacity and a wider range of treatment options; and
- Maintaining sufficient support for non-COVID-19 needs.

Figure 3.1: Cumulative cases and deaths per 100,000 population for selected countries³



Breaking the chains of transmission through strengthened testing, contact tracing and isolation measures

COVID-19 infectivity rates can be reduced by at least 40%, when 80% of close contacts are traced and quarantined within 4 days of isolating the index case⁴. This requires strengthened measures to Find, Trace, Test, Isolate and Support (FTTIS) the infected persons, including:

¹ Buitrago-Garcia D, et al. (2020), "Occurrence and transmission potential of asymptomatic and presymptomatic COVID-19 infections: A living systematic review and meta-analysis", PLoS Med 17(9): e1003346

² Abate SM, Ahmed Ali S, Mantfardo B, Basu B (2020), "Rate of Intensive Care Unit admission and outcomes among patients with COVID-19: A systematic review and Meta-analysis", PLoS ONE 15(7): e0235653bata

³ Source: Daily new confirmed COVID-19 cases per million people as of 19 July 2021 – Our World in Data

⁴ M.J.Plank.et.al (2021), "Successful contact tracing systems for COVID-19 rely on effective quarantine and isolation", PLoS ONE 16(6): e0252499

Highlights



Expand testing efforts via simpler and cheaper testing solutions made available to individuals and employers. From July 2021, additional test kits will be made available in the market, including five self-test kits



Trace 75% of close contacts for isolation within 48 hours of a confirmed case - through a technology-led approach leveraging mobile data



Strengthen support for those undergoing home-quarantine through General Practitioner (GP) visits, a support hotline and self-monitoring tools



Expand testing, vaccination and hospital capacity in Greater Klang Valley with additional allocation of RM300 million



Expedite processes to bring in new treatment drugs including remdesivir, baricitinib and regencov to shorten recovery time

Mass expansion of testing through Government and community efforts

Sufficient testing is important in ensuring that cases are detected and isolated early. To achieve this, a two-pronged approach will be adopted through Government-led and community measures.

The Government will adapt its testing strategy based on the stage of the pandemic. For example, in locations where the case rate is high, testing will focus on symptomatic populations and thus, a relatively high positivity rate can be expected. In a setting with limited transmissions, testing would focus on detecting cases early and the reintroduction of the virus to areas that had previously suppressed transmissions. In such a situation, the positivity rate would be lower.

At present, the Government will continue mass testing of high-risk populations and locations. These include those with high-risk jobs, high-risk population segments and those living or working in high-risk areas where social distancing is difficult to practice (e.g., wet markets, working in a confined factory or office). The Hotspot Identification for Dynamic Engagement (HIDE) system helps to predict potential COVID-19 hotspots and supports federal and state agencies in taking targeted actions on a daily basis. This analytics tool will be further enhanced through expansion of data sets including images and sound files.

In complementing Government efforts, employers and individuals are empowered to initiate their own testing efforts. Individuals should do this when:

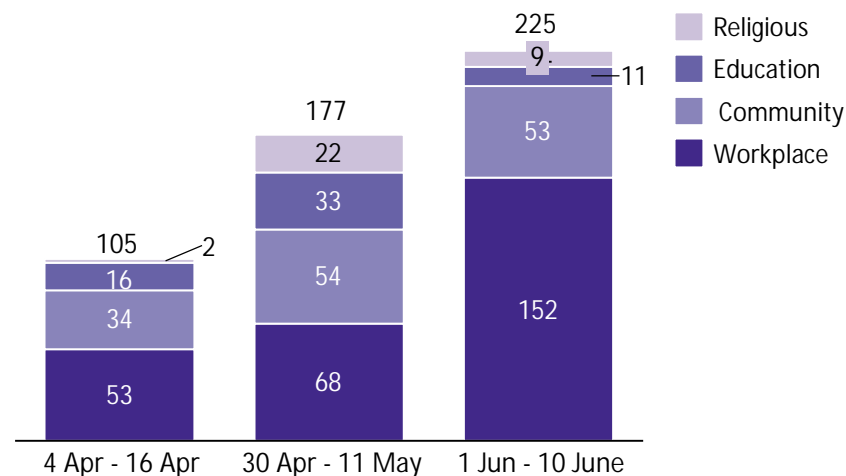
- They have been in close contact with a positive case; or
- They have COVID-related symptoms such as high fever and shortness of breath regardless of whether they have been a close contact.

Employers are also encouraged to regularly screen their workforce, particularly focusing on workers' housing areas and those with higher transmission risks.

To make testing more accessible, multiple types of test centres will be set-up including drive-through and walk-in centres. Cheaper test kits that are simpler to administer (including self-testing) will also be made available in the market.

These voluntary initiatives by employers and individuals are important because a substantial number of cases have spread through workplace and community clusters. Between April 2021 and early June 2021, the number of workplace clusters more than doubled.

Figure 3.2. Number of clusters between April and June 2021 in Malaysia



Due to the importance of containing clusters, the Government may periodically instruct certain sites to close down for up to two weeks to ensure infected individuals are isolated early, protecting the rest of the community. These measures will be key to supporting more localised lockdowns as the economy reopens.

Increasing testing capacity

While test sampling for COVID-19 can be done by on-site healthcare personnel and most public and private clinics and hospitals nationwide, test samples must be processed in COVID-19 Reverse Transcription Polymerase Chain Reaction (RTPCR) laboratories. At the beginning of the pandemic, Malaysia had the capacity to process only 1,000 samples per day across three facilities. This capacity was rapidly expanded, up to the current capacity of over 116,800 tests per day, carried out across 92 public and private organisations, including in East Malaysia. This increase in testing capacity has been an important factor in enabling test results to be available within 24 to 48 hours.

Overall, from the start of 2021, nearly 620,000 tests are conducted weekly, with positivity rates ranging from 8% to 9.3%. The number of tests conducted daily as of 18 July 2021 is approximately 123,000⁵. The Ministry of Health (MOH) will continuously expand testing activities and targets to increase laboratory capacity by up to 124,000 samples per day, including antigen tests, by end of 2021.

Continuously expanding testing options based on scientific evidence

Currently, Malaysia uses the Polymerase Chain Reaction (PCR) and Rapid Test Kits Antigen (RTK-Ag) tests, both of which use throat or nasal swabs. RTK-Ag test kits were used in East Malaysia to overcome initial challenges in transporting samples to laboratories.

Since July 2021, MOH has approved the use of saliva sampling for both PCR and RTK-Ag testing. This will enable self-administered sample collection and more rapid case detection in hard-to-reach areas. Starting from July 2021, new test kits approved by the Medical Device Authority will progressively be made available in the market, starting with five self-test kits.

⁵ Source: Daily new COVID-19 tests and Share of COVID-19 positive test daily - Our World in Data (Malaysia)

Accelerating contact tracing

As per MOH guidelines, close contacts of positive cases need to be monitored, tested and quarantined for ten days, while being given relevant medical support and guidance.

Given the recent high volume of cases, an enhanced approach to contact tracing will be implemented, expanding the use of technology and mobility data. With the new solution, once an individual tests positive for COVID-19, mobile phone data will be analysed to rapidly identify potential close contacts, notify them of the need to quarantine themselves and advise them to get tested if they start showing symptoms.

Currently, individuals who are confirmed COVID-19 cases but do not require hospitalisation are issued a Home Surveillance Order (HSO). This requires them to go to a public or private COVID-19 Assessment Centre (CAC) where a wristband will be fastened. In delivering better experience to infected individuals, a Digital HSO will be piloted in the Klang Valley. This will remove the need for COVID-positive individuals to physically go to a CAC and be issued a wristband.

Figure 3.3 shows the new care pathway for individuals who are confirmed cases or close contacts. This flow will be piloted in Klang Valley starting August 2021.

Strengthening at-home support

Of the confirmed COVID-19 cases, many will not need to be hospitalised because they are asymptomatic or have only minor symptoms. For this group, home support is critical to empower self-tracking of symptoms and ensure medical assistance is triggered when required. This support will be delivered via multiple channels including visits from healthcare professionals, a self-service app and a dedicated call centre to provide support and outreach to patients.

A key health indicator that should be monitored by individuals undergoing home-quarantine or isolation is their blood oxygen levels. To support this,

guidance will be provided on buying pulse oximeters (for monitoring blood oxygen levels), frequency of monitoring and when patients should reach out for help.

Non-Governmental Organisations (NGOs) – especially those with healthcare expertise – can contribute by supplying pulse oximeters to B40 families, supporting home monitoring and ensuring that those who need medical assistance are taken to the nearest COVID-19 hospital.

Recognising that home isolation may sometimes result in loss of income, the Government has expanded coverage of MySalam to provide income replacement of up to RM50 per day, for up to 14 days, subject to a cap of RM700. The assistance will be for individuals from the B40 who are diagnosed with COVID-19 and required to be isolated.

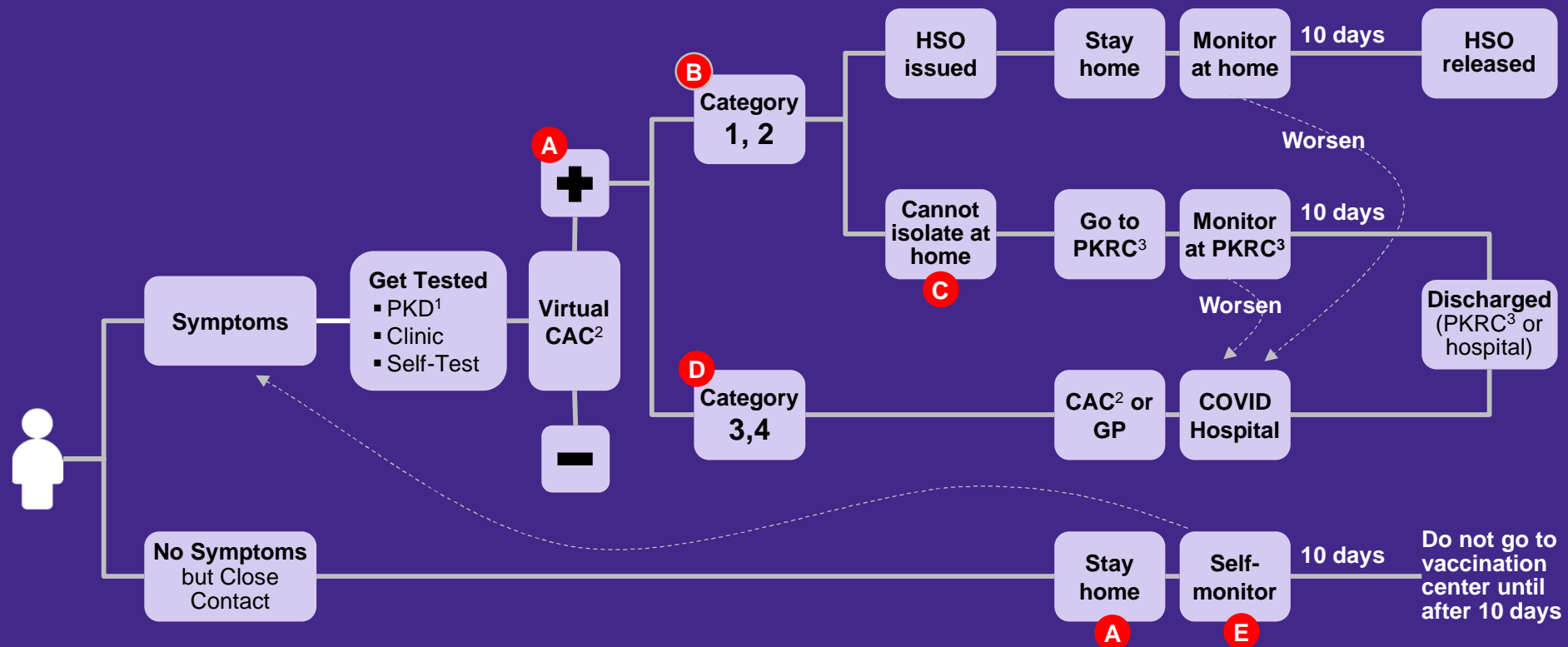
Enhancing surveillance for new variants

Viruses constantly change through mutation into new variants. Global evidence regarding new COVID-19 variants of concern indicate the risk of more rapid transmissions and more hospitalisations compared to existing strains. To detect the presence and spread of these variants in Malaysia, Whole Genome Sequencing undertaken by the Institute of Medical Research (IMR) will be expanded through a consortium involving MOH, MOSTI and the Ministry of Higher Education (MoHE). The initial target of this consortium is to perform full genome sequencing for at least 3,000 samples in the next three months.

In addition to domestic surveillance, the Government is evaluating enhanced measures to protect the country against foreign entry of new variants. These may include reviewing inbound travel permits from selected countries.

Figure 3.3: Pathway for individuals who are confirmed cases or close contacts

New care pathway and approach for COVID-19 cases to be rolled out in stages across the Greater Klang Valley



A Issue digital HSO, conduct self-assessment using Home Assessment Tool (HAT)

B If HAT shows Category 1 or 2, patient to stay at home and conduct daily health assessments. Call centre will monitor. Do not go to CAC or PKRC (unless cannot isolate at home)

C If home not suitable for household isolation and quarantine, contact call centre and go to nearest CAC

D Proceed to nearest CAC or GP

E If showing symptoms, get referred for testing

¹PKD – District Health Office
²CAC – COVID Assessment Centre
³PKRC – COVID Quarantine and Low-risk Treatment Centre
 HSO – Home Surveillance Order
 GP – General Practitioner

COVID-19 Cases Category Classification

Category 1: No symptoms

Category 2: Minor symptoms without pneumonia

Category 3: Minor symptoms and pneumonia

Category 4: Cases are symptomatic, have pneumonia and require supplemental oxygen

Reducing morbidity and mortality through increased healthcare capacity and a wider range of treatment options

In parallel with efforts to break the chains of transmission, the Government continues to undertake measures to expand and ensure sufficient healthcare system capacity and capability to manage COVID-19 patients.

Expanding critical healthcare capacity

There are 38,166 public hospital beds and 1,936 ICU beds nationwide as of July 2021. Since the start of the pandemic, the Government has undertaken numerous measures to increase critical healthcare capacity. In combination, these measures have enabled most states to have sufficient ICU beds up to May 2021, with COVID-19 ICU bed utilisation ranging between 89% and 102%.

Since 2020, the Government has allocated RM450 million to further expand the capacity of the public healthcare system (under PEMERKASA+) and RM110 million to support the transfer of patients from public to private hospitals.

With the recent surge in the number of cases, public hospital facilities have become increasingly strained. Ramping up the vaccination programme in August 2021 is a key strategy to reduce the number of serious cases requiring hospitalisation. Meanwhile, enhanced measures will be undertaken to address immediate healthcare capacity needs:

- Healthcare workforce: Redeployment of MOH healthcare personnel from states with stable case rates to Greater Klang Valley and redeployment of healthcare personnel serving in CACs to hospitals. Healthcare personnel serving in 72 ICUs treating COVID-19 patients will have their allowance increased from RM600 per month to RM1,000 per month; and

Examples of measures undertaken to increase COVID-10 bed availability in public hospitals

Collaborating across Ministries to establish COVID-19 hospitals

- Cross-ministry collaboration by MOH, MoHE and the Ministry of Defence on designation of COVID-19 hospitals. As of July 2021, 108 hospitals have been designated, with 10 of them gazetted as full COVID-19 hospitals

Expanding existing facilities and rapid construction of new field hospitals

- Rapid construction of field hospitals by the Malaysian Armed Forces. In total, 596 more hospital beds and ICU beds have been made available
- Rapid establishment of modular ICUs at selected MOH hospitals

Enabling public hospitals to focus on the more critical COVID-19 cases

- Transferring certain non-COVID-19 patients to private sector hospitals. As of July 2021, 128 private sector ICU beds have been made available
- Establishing Quarantine and Low-Risk Treatment Centres or PKRC (*Pusat Kuarantin dan Rawatan COVID-19*). As of July, there are 31,677 available beds across 127 PKRCs nationwide.

- ICU capacity: Designating additional hospitals as COVID-19 hospitals, converting more beds into ICU-beds and accelerating arrangements to transfer non-COVID-19 patients to private hospitals.

Given the high number of cases in Klang Valley, the Greater Klang Valley Task Force will act as the central node to oversee available capacity and allocate them based on priority. RM300 million has been allocated to expand testing, vaccination and hospital capacity in order to rapidly reduce infections and mortalities. Figure 3.4 shows the seven focus areas that the Task Force will prioritise.

Expanding Treatment Options

A major challenge with COVID-19 infections is that there is still no specific antiviral treatment, only supportive therapies including respiratory care where required. WHO data indicates that 15% of COVID-19 patients develop complications that require oxygen support, and 5% of patients progress into sepsis and multiple organ failures.

Internationally, there are many drugs currently being repurposed or developed for treatment of COVID-19, some of which have received emergency use authorisations in certain countries. However, it is important to note that for some of these therapies, as more scientific evidence became available, WHO as well as national regulatory bodies have issued conditional recommendations against their use, and against the recruitment of additional patients for trials.

Malaysia will continue adopting an evidence-based approach in the use of COVID-19 treatments and has participated in the WHO's COVID-19 Solidarity Trial for COVID-19 Treatments. Currently, the Malaysian Consensus Management Guidelines for COVID-19 maintain favipiravir as the preferred COVID-19 antiviral therapy. Three drugs are currently in either the approval or procurement stage; remdisivir (an antiviral drug), baricitinib (a janus kinase inhibitor) and regen-cov (monoclonal antibodies).

Maintaining sufficient support for non-COVID-19 needs

Global experiences have shown that health crises can sometimes lead to delayed treatment for illnesses not related to the pandemic (e.g., cancer treatments) and disruption to routine public health activities (e.g., infant vaccination programmes). To balance between non-COVID-19 related health needs of the *Rakyat* and capacity constraints of the health system, the Government will leverage private sector and NGO partnerships, while deferring non-urgent cases based on clinical assessments.

Procedures that can be outsourced from public to private hospitals to ensure patients still get the care they need include:

- Urgent and semi-urgent cases with priority given for cancer, cardiac, paediatric surgery and kidney patients;
- Elective cases categorised as Category 1; and
- Cases for which a prolonged waiting period has elapsed.

Figure 3.4: Overview of the Greater Klang Valley Special Taskforce

Greater Klang Valley Special Task Force (GKVSTF)

The GKVSTF was established on 8 July 2021 to address the urgent and critical situation arising from the surge in COVID-19 cases in Klang Valley and parts of Perak, Pahang and Negeri Sembilan.

The GKVSTF has the full mandate to strengthen health system resilience, especially in the areas of beds sufficiency, manpower needs, medical equipment and supplies, transportation and treatment, conversion of COVID-19 wards, placement of cases, step-up step-down care, COVID-19 patient management and care pathways. The GKVSTF will be focusing on driving and executing across seven sets of actions, as outlined below.

This model demonstrates the full commitment and deep collaboration across federal and state agencies, the Malaysian Armed Forces, as well as public and private institutions in jointly addressing the pandemic. This enhanced approach in tackling the epicentre of COVID-19 in Malaysia can be replicated at both federal and state levels going forward.

1	2	3	4	5	6	7
Ramp-up Intensive Care Unit (ICU) and bed capacity	Reinforce FTTIS (find, test, trace, isolate and support)	Reduce hospitalisation and deaths by strengthening support and monitoring for cases isolated at home	Replenish supply of medications and oxygen and avoid shortfalls at all costs	Reinvigorate, support and motivate frontliners	Rapid acceleration of vaccinations in Greater Klang Valley	Revitalise public communications and engagement
Establish integrated system for public and private ICU and beds coordination	Enhance use of technology and mobility data in contact tracing and notification	Start household isolation and quarantine programme – supply pulse oximeters, supplement with food distribution and support	Co-ordinate and ensure supply to public and private hospitals for ventilators, oxygen supplies, PPE disposables, essential medications and drugs, including anticoagulants, IL-6 inhibitors	Redeploy frontliners from other states	Deploy ring-strategy for vaccinations – bold goal of 100% adults with 1 st dose of vaccine by 1 Aug	Redirect Category 1 and 2 patients to home isolation (not to CACs)
Accelerate decanting of patients to private hospitals to release public hospital capacity	Cease mass asymptomatic testing and treat symptomatic patients as positive (unless tested negative)	Recruit and train non-medical support team for surveillance and outreach		Expansion of COVID-19 field hospitals and facilities	Extend vaccination hours and assign Protect Health staff to all vaccine centres	Educate public on isolation and quarantine approach, use of pulse oximeters, how to get support
Mobilise government-linked-company (GLC) facilities as PKRCs		Mobilise and assign GPs for home monitoring				Intensify vaccination outreach programme
		Authorise GPs and private health practitioners to test, assess and issue digital HSO				

The pandemic has led to an increase in the number of mental health cases reported in Malaysia. To provide support, psychosocial assistance hotlines were set up by MOH and collaborating NGOs. Between 25 March 2020 and 20 May 2021, a total of 145,173 calls were received. Of these, 85.5% required emotional and counselling support.

In 2021, MOH received a special allocation of RM24.6 million for Strengthening Mental Health, Substance Abuse and Violence Injury Prevention Programmes. This funding will be used to promote mental health and prevent mental illness, including:

- Promotion and advocacy initiatives such as a nationwide implementation of the “Let’s TALK, *Minda Sihat*” campaign, strengthening Healthy Minds programme in schools and providing allocations to NGOs for mental health promotion and advocacy;
- Strengthening support services such as mental health and psychosocial services in primary care and the community, telepsychosocial support helpline and expansion of MENTARI services; and
- Developing the National Suicide and Fatal Injury Registry for Malaysia and expanding mental health research.

In complementing these initiatives, the Government has allocated an additional RM15 million through the PEMULIH package to NGOs that help address mental well-being and other social concerns in the community.



4

Immunising
the *Rakyat*

Immunising the *Rakyat*

Population immunisation is a key agenda in Malaysia's response to the COVID-19 pandemic. Vaccines can reduce the virus transmission rate and risk of severe illness and mortality should infection still occur¹. Achieving the target level of population immunity is therefore a key enabler for Malaysia's reopening.

In formulating Malaysia's COVID-19 immunisation strategy, the Government has considered multiple factors, including vaccine safety and efficacy and a deployment approach that is prioritised according to health risk.

The national target is to fully vaccinate all of the eligible population by end of October 2021, subject to eligible individuals registering to be vaccinated. To achieve this, the Government's strategy is anchored on three pillars:

- Securing strategic vaccine sources;
- Accelerating roll-out and uptake; and
- Improving the vaccination experience.

Key elements of the National COVID-19 Immunisation Programme (PICK)

- Coverage: All Malaysian citizens and residents aged 18 and above are eligible to register to be vaccinated. For the younger population, Government is monitoring emerging data on the safety of the vaccines and any policy revision will be announced at a future date;
- Cost: Under the current Government-administered programme, the cost will be covered under the Federal Government Operating Budget;
- Choice: Vaccinations are highly encouraged due to the role they play in population immunity. At present, the COVID-19 vaccinations are given on a voluntary basis to consenting individuals;
- Alternatives to the Federal Government programme: Entities such as state governments, private hospitals and employers are welcome to organise vaccination programmes, provided they adhere to vaccines approved by the National Pharmaceutical Regulatory Agency (NPRA) and the ceiling price set by the Government. The Special Financial Aid for Severe Adverse Effects Following COVID-19 Vaccination will not be applicable for these programmes;
- Single issuing body: To facilitate international recognition, the Government will be the single issuing authority for COVID-19 vaccination certificates. This will be implemented using MySejahtera. Vaccination programmes by the private sector must align to the Government's platform for unified recognition; and
- Privileges for the vaccinated population: The Government is reviewing options for easing restrictions for those who have been fully vaccinated. These updates will be announced in due course.

¹ Centres for Disease Control and Prevention (2021), "Key Things to Know About COVID-19 Vaccines", About COVID-19 Vaccines; Polack FP, Thomas SJ, Kitchin N, et al. (2020), "Safety and efficacy of the BNT162b2 COVID-19 vaccine", New England Journal of Medicine, 383:2603-15; Baden, Lindsey R., et al (2020), "Efficacy and Safety of the mRNA-1273 SARS-CoV-2 Vaccine", New England Journal of Medicine; M Voysey et al. (2021), "Safety and efficacy of the ChAdOx1 nCoV-19 vaccine (AZD1222) against SARS-CoV-2: an interim analysis of four randomised controlled trials in Brazil, South Africa, and the UK", The Lancet, Issue 10269.

Securing Vaccine Supply Strategically

Malaysia's vaccine sourcing efforts are led by the Special Committee for Ensuring Access to COVID-19 Vaccine Supply (JKJAV). A multi-prong approach has been adopted which includes:

- Bilateral Negotiations with countries that develop COVID-19 vaccines (including China, Russia, United Kingdom, and United States of America) as well as 12 vaccine manufacturing companies; and
- Multi-lateral Negotiations with COVID-19 Vaccine Facility Global Access (COVAX) and Coalition for Epidemic Preparedness Innovation (CEPI).

As of July 2021, 79.9 million vaccine doses have been acquired, providing sufficient supply to meet the national vaccination target with an adequate buffer. From this total, 19.2 million doses have been delivered as of 14 July 2021. By August 2021, with an additional 21 million doses scheduled for delivery, more than 90% of current vaccine requirements (based on registered individuals) will be addressed. The vaccine supply portfolio is shown in Figure 4.1.

Additionally, Malaysia is expected to receive vaccine donations from Japan, USA and China in July 2021, which will help to accelerate the numbers of vaccinated individuals by August. With state governments and private sectors given the approval to source their own vaccines from 3 June 2021, the *Rakyat* will have more options to be vaccinated before the end of the year.

Accelerating Roll-out and Uptake

To support the reopening of the economy, the Government targets to fully vaccinate 40% of the eligible population by August 2021, 60% by September 2021 and 100%² by October 2021. Within these overall targets, vaccines will be

administered according to the following priorities:

- Ensuring operational continuity for the health sector and essential services: Priority is given to frontliners directly involved in containing the pandemic such as the healthcare workforce, volunteers and enforcement personnel. Subsequently, workers in other essential services will also be targeted;
- Prioritising vulnerable groups: These are groups that have shown a higher risk of morbidity and mortality should they become infected, and include senior citizens, people with disabilities and comorbidities and women who are pregnant or lactating. In parallel, to enable schooling to resume for students sitting for national examinations in 2021, adolescents aged 12 to 18 years with underlying medical conditions will also be targeted for vaccinations; and
- Controlling the spread of the disease: Targeted vaccination drives will be carried out in areas with high community transmission rates such as Greater Klang Valley, through programmes such the Operation Surge Capacity Klang Valley and walk-in appointments for the elderly.

The nationwide and state-level vaccination timelines are shown in Figures 4.2 and 4.5 respectively.

The Government has steadily ramped up capacity and throughput to enable the achievement of Malaysia's immunisation targets. Since 12 July 2021, more than 400,000 doses per day have been administered – more than double the average daily doses administered in June. Planning is underway for this to be further increased to over 482,000 per day, which will enable approximately 36.6 million doses to be administered by the end of August 2021. Once the majority of the eligible population has been vaccinated, capacity will be progressively scaled down in the final quarter of 2021. The monthly target for vaccine supply and administrations are shown in Figures 4.3 and 4.4 respectively.

² Subject to eligible individuals registering to be vaccinated.

Key outcomes



> 90% of vaccine requirements for registered individuals to be delivered by end of August 2021








36.6 million doses to be administered by the end of August 2021



Private sector vaccination initiatives allowed from June 2021

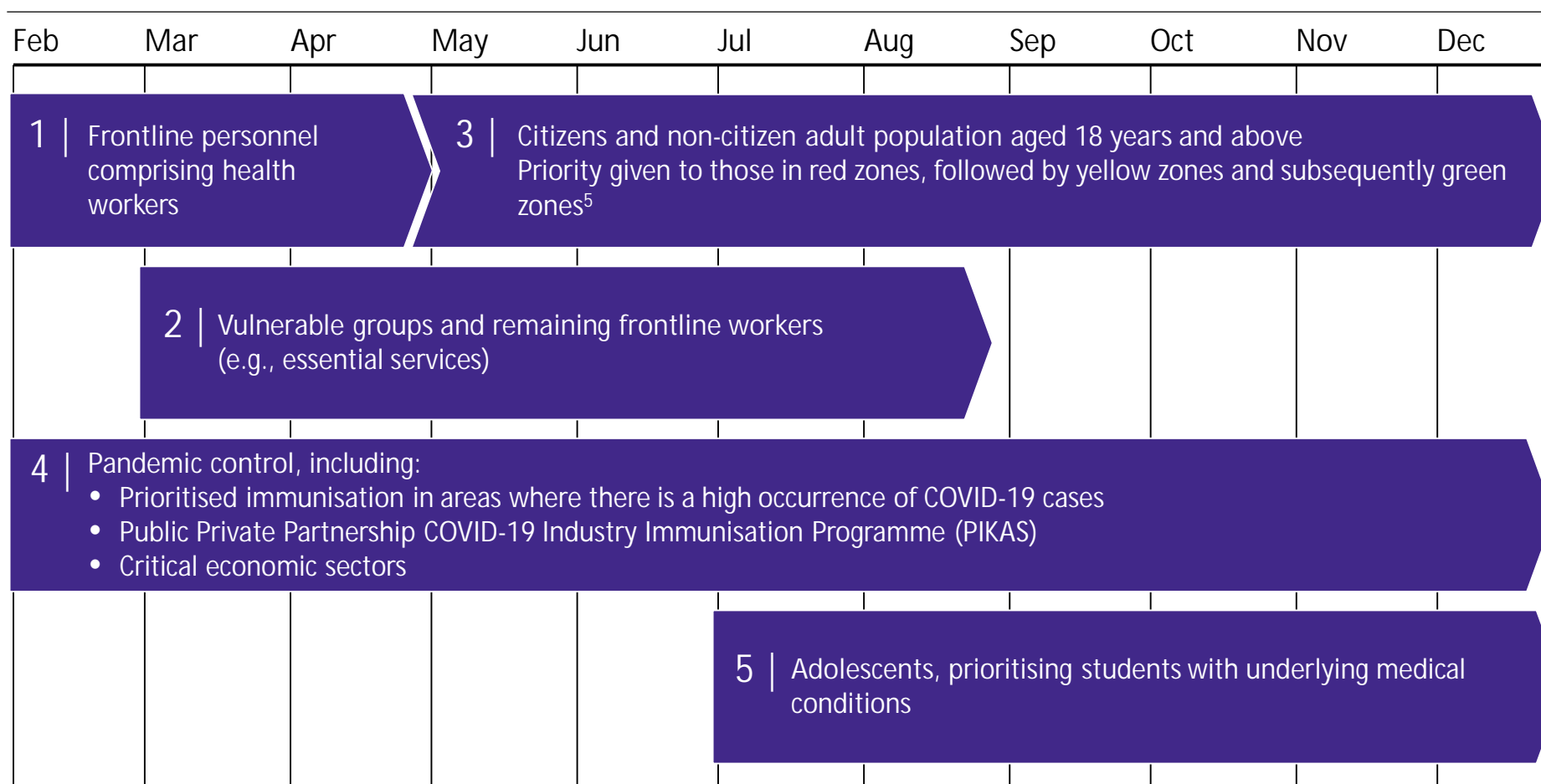
Figure 4.1 Malaysia's COVID-19 vaccine portfolio

					
Acquired Million doses	44.8	12.8 ⁴	12.4	3.5	6.4
Delivered ³ Million doses	6.7	1.4	11.1	-	-
Population coverage % Total population	70%	20%	19%	11%	10%
Dosage required #	2 doses	2 doses	2 doses	1 dose	2 doses
Approval status	Yes	Yes	Yes	Yes	Pending NPRA

³ As of 14 July 2021

⁴ Inclusive of 6.4 million doses of AstraZeneca-Oxford's vaccine from COVAX

Figure 4.2 Vaccination timeline by priority groups
2021



⁵ Categorisation of zones is subject to Ministry of Health's (MOH's) risk assessment on COVID-19 transmission rate within community

Figure 4.3 Vaccine supply and planned doses in 2021

Vaccine doses (million doses)

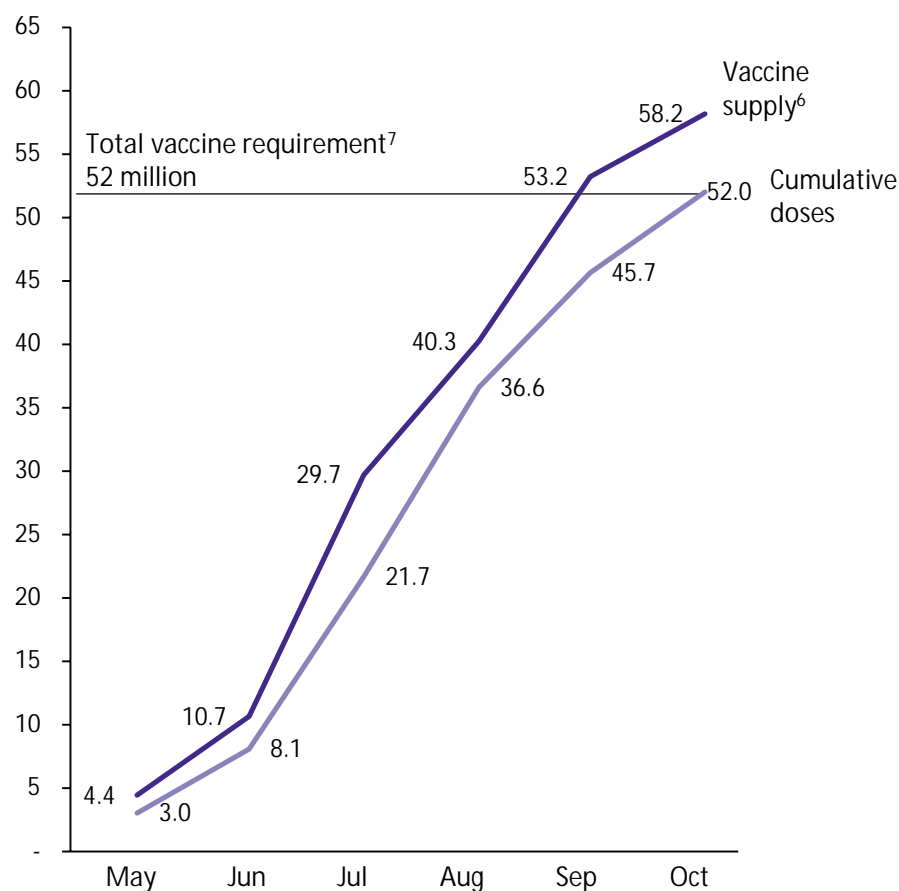
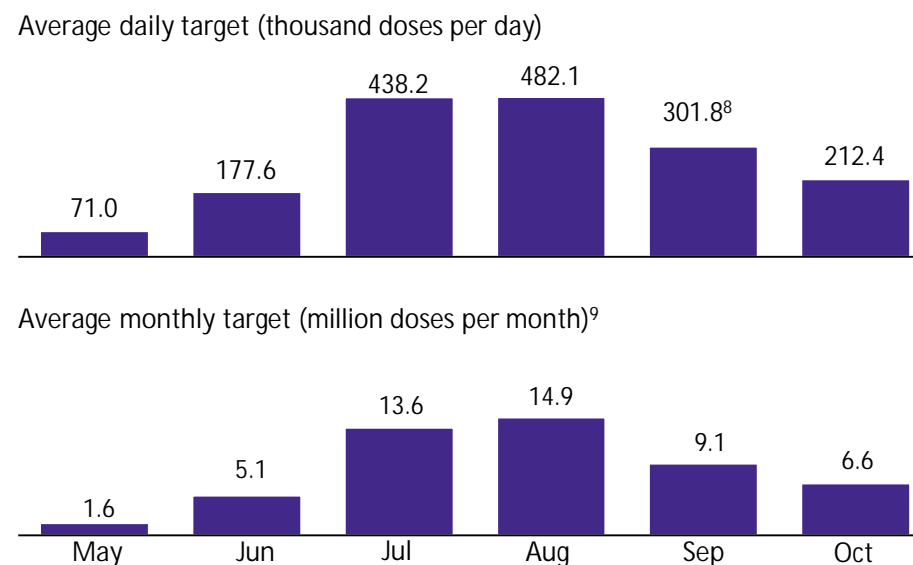


Figure 4.4 Daily target doses and monthly target doses for administration



The nationwide, large-scale vaccination operations have been enabled by dedicated vaccination centres (PPVs). As of 14 July 2021, there are more than 1,800 PPVs operating across the country, including 1,051 private general practitioner (GP) clinics and 134 private hospitals, with total maximum capacity of 500,000 doses. As the nationwide vaccination progresses, vaccination centres will continue to be set up or relocated based on the needs of the target groups.

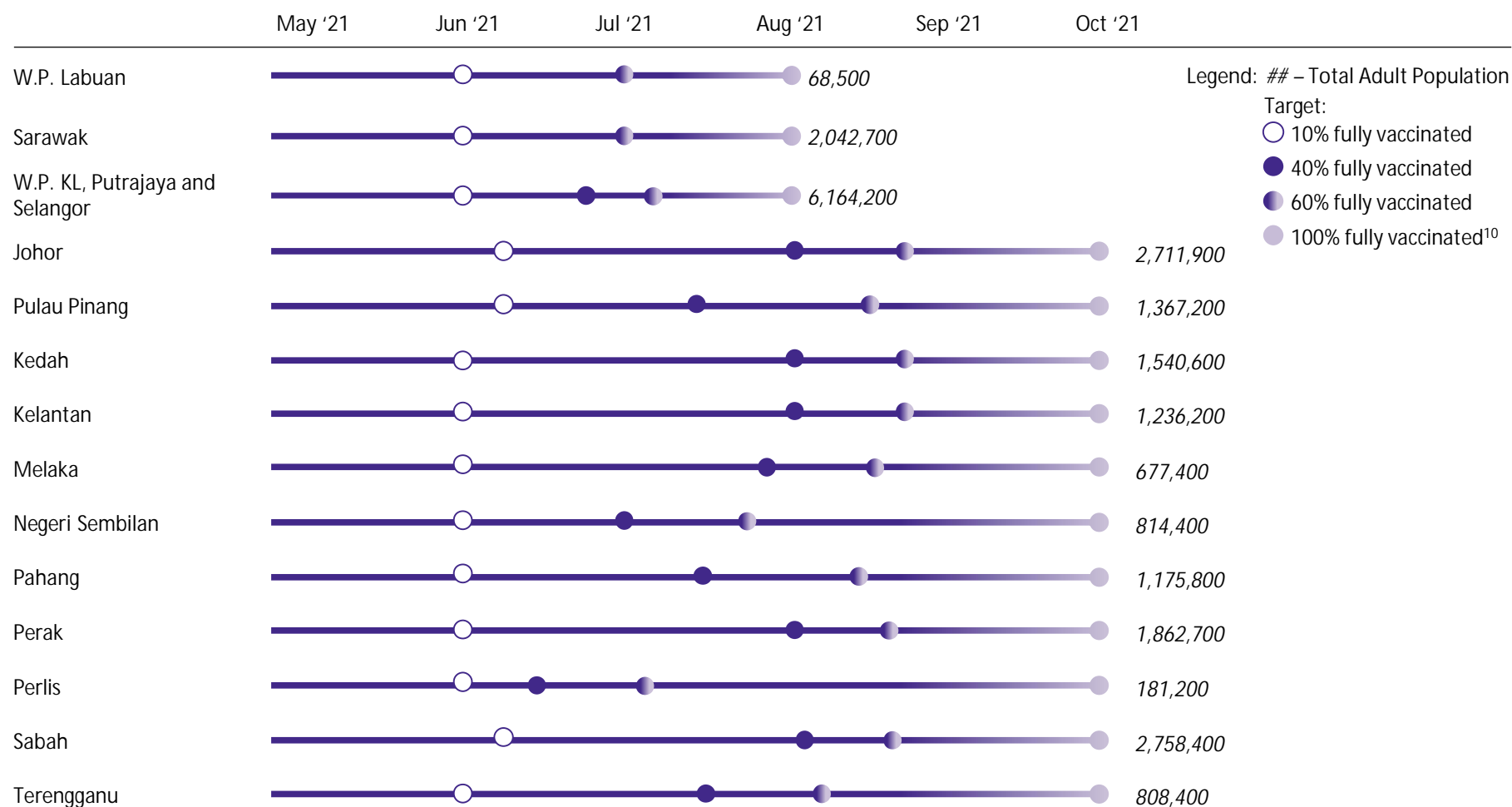
⁶ Vaccine supply has been projected based on delivery schedule for the immediate months

⁷ Vaccine requirements based on 100% of eligible citizens and residents

⁸ Drop in daily dose administered in September is due to Sarawak, Selangor, Kuala Lumpur and Putrajaya completing their vaccination target in August

⁹ Figures may not add up to 36.6 million doses by end August 2021 as it excludes the cumulative doses administered as of end April 2021 (1.4 million doses)

Figure 4.5 Vaccination timeline for eligible population by state



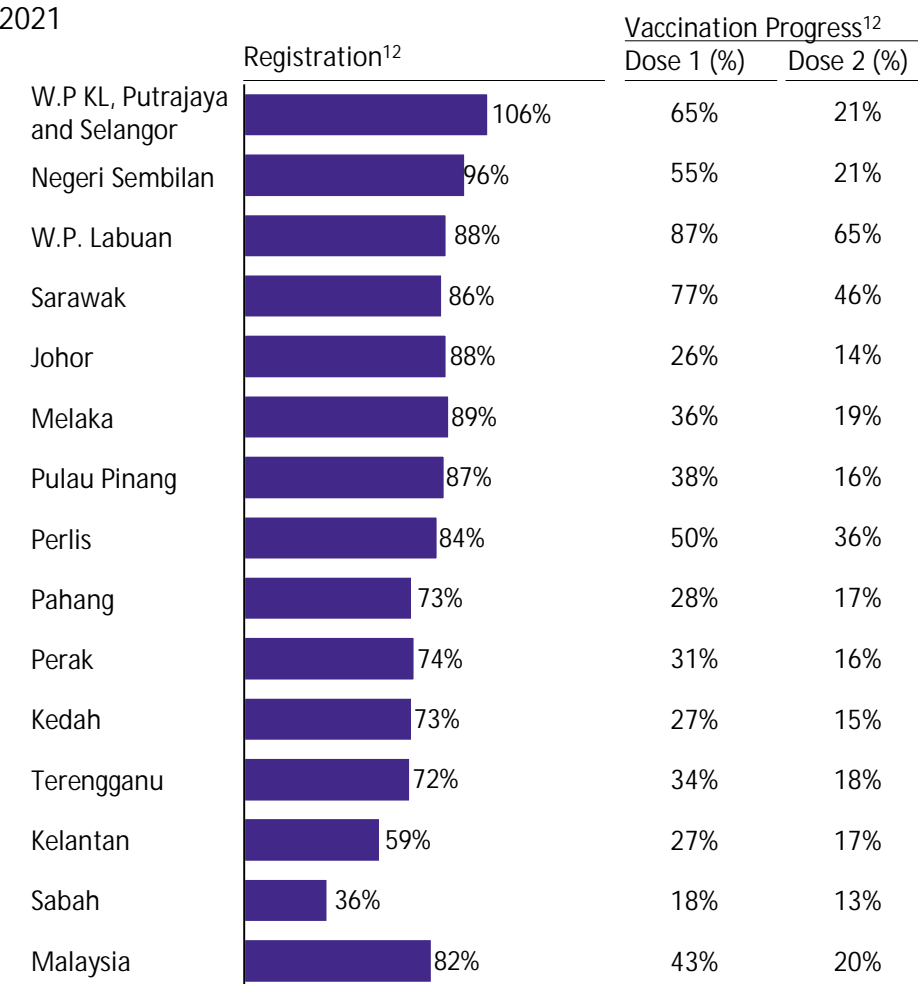
¹⁰ Subject to individuals registering to be vaccinated and the dosage interval of the vaccine
Note: All dates refer to last day of the month

Overall, the Malaysian public has shown strong interest to be vaccinated. As of 19 July 2021, more than 19 million individuals have registered - equivalent to 82% of the eligible population and 59% of Malaysia's total population. For the age group that has been prioritised (above 60-year olds), more than 85% have registered, out of which more than 80% have received their first dose and more than 45% have received both doses¹¹. Figure 4.6 shows vaccination uptake by state.

While COVID-19 vaccinations will remain voluntary, stepped-up efforts are ongoing to overcome vaccine hesitancy and ensure equitable access. Further information is provided in Chapter 2, with the key elements highlighted below:

- Incentives: Relaxation of operational capacity restrictions for companies that have managed to fully vaccinate their employees are being evaluated, along with other incentives to encourage vaccination uptake;
- Communications: Fact-based communication on vaccine safety, importance and effectiveness will continue to be disseminated across multiple platforms and languages, in partnership with local community leaders where required; and
- Proactive outreach with adaptable delivery model: "Mini" and "pop-up" vaccination centres will be expanded at *Orang Asli* villages, places of worship, schools, and similar venues in places that are harder to reach, while drive-through centres are being used for persons with disabilities. Single-dose vaccines will be prioritised for populations facing accessibility challenges.

Figure 4.6: Vaccination registration and status by state as of 19 July 2021



¹¹ As of 10 July 2021

¹² Based on eligible population. Registrations or doses exceeding 100% indicate that people residing outside the states concerned have registered to be vaccinated there

Improving Vaccination Experience

As the Government endeavours to vaccinate as many people as quickly as possible, there is also a commitment to ensure the vaccination experience for the *Rakyat* is well-organised and efficient. In particular, Government has emphasised the need for easy registration, responsive scheduling of vaccination appointments and fast turn-around times at the vaccination centres.

A wide range of digital and physical channels have been made available to facilitate ease of registration as depicted below.

Available Channels for PICK Registration



MySejahtera application



Outreach programme for rural and interior areas



Dedicated [JKJAV website](#)



Hotline: 1800-888-828



Private and public health facilities

Based on confirmed registrations, vaccination appointments are scheduled taking into account supply and logistical considerations (typically with a 2-3 weeks visibility), nationally-identified priority segments (e.g. the elderly, persons with comorbidities, pregnant mothers, students going for overseas study) as well as location-based priorities to contain the pandemic (e.g. red zones).

The secured supply of vaccines is sufficient to enable eligible individuals who registered before July 2021 to be vaccinated by August 2021.

In parallel to accelerating vaccination scheduling, the Government is continuously improving the efficiency of vaccination centres. The target is for individuals to complete their vaccination process within a one hour, from the time of checking in at the PPV to the time the observation period is completed.

Looking Forward

The unprecedented scale of the COVID-19 pandemic has forced countries around the world to respond by developing new vaccines in an accelerated timeline. Scientific findings are therefore continuously being updated with respect to the duration of vaccine efficacy, optimum dosage intervals, vaccine safety for the younger population, as well as effectiveness of the vaccine against new variants.

In the immediate term, the Government will closely monitor new evidence, as it focuses on completing the current vaccination drive. Future policy announcements (for example, regarding vaccinations for individuals below 18 years old) will be subject to evaluation of additional evidence.

At the same time, RM15 million has been allocated to the Institute of Medical Research (IMR) to undertake genomic surveillance and immuno-surveillance to assess the extent to which the population has developed immunity towards the virus. This analysis will enable the Government to identify additional policy measures to elevate population immunity.

As part of making Malaysia more resilient in facing future crises, there will be stepped-up efforts to develop Malaysian-based vaccination production capabilities. To drive the achievement of this objective, the Government is in the process of drafting the National Vaccine Development Roadmap, which is targeted for release at the end of 2021.



5

Supporting
People and
Businesses

Supporting People and Businesses

The COVID-19 pandemic has taken a toll not only on people's lives but also on their livelihoods. It has led to unemployment, economic loss and has severely affected the well-being of the *Rakyat* and businesses. In light of this, the Government has thus launched significant assistance mechanisms to support the nation through this difficult period.

Impacting lives and livelihoods

To tackle the impact of the pandemic on the *Rakyat*, the Government has launched various financial assistance packages with a focus on safeguarding livelihoods. These packages, amounting to more than RM500 billion in total, include initiatives under Budget 2021 (November 2020) and various stimulus packages such as PRIHATIN (March 2020), PENJANA (June 2020), KitaPrihatin (September 2020), PERMAI (January 2021), PEMERKASA (March 2021) and PEMERKASA+ (May 2021).

On 28 June 2021, to further support the *Rakyat* and businesses affected by the Movement Control Order 3.0 (MCO 3.0), *Yang Amat Berhormat* (YAB) Prime Minister announced additional financial assistance amounting more than RM150 billion through the *Pakej Perlindungan Rakyat dan Pemulihan Ekonomi* (PEMULIH). PEMULIH is particularly geared towards meeting Phase 1-specific needs, given the nature of the restrictions in this phase. Full details of the PEMULIH support available to the *Rakyat* are provided in Figure 5.1, and to businesses in Figure 5.5.

PEMULIH prioritises support for those that have been hit the hardest and have the least buffer to ride through the crisis, such as the B40, hardcore poor and micro-businesses. Several direct cash assistance measures are being implemented via PEMULIH, including *Bantuan Prihatin Rakyat* (BPR), *Bantuan*

Khas COVID-19 (BKC), and the *Bantuan Kehilangan Pendapatan* (BKP).

The Food Basket programme will also be continued, with RM300,000 provided to Members of Parliament and Senators regardless of political affiliation to provide basic essential food items to their constituencies.

Further assistance will be provided to the *Rakyat* to help manage their household expenses. These measures include loan moratoriums, as well as payment deferrals for educational loans, insurance premiums and takaful contributions. Electricity discounts and fuel and cooking oil subsidies will also continue.

Recognising the impact of the COVID-19 pandemic on *the Rakyat's* well-being, special assistance amounting to RM15 million has also been allocated under PEMULIH to increase support for mental health issues, in partnership with Non Governmental Organisations (NGOs).

As continuity of employment is critical, various reskilling and upskilling training programmes and Job Placement initiatives have been introduced to provide more employment opportunities. Further details on job retention and generation initiatives provided in Figure 5.4.

Full details of available assistance can be found at the MANFAAT portal

<https://belanjawan2021.treasury.gov.my/manfaat>



Figure 5.1: Summary of the assistance available for the *Rakyat* via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
<i>Direct Cash Assistance</i>				
<i>Bantuan Khas COVID-19</i>	Cash assistance for individuals and households: <ul style="list-style-type: none"> Hardcore poor households will receive RM500 in August, RM500 in November and RM300 in December 2021. Individuals will receive RM200 in August, RM300 in November 2021; B40 households will receive RM500 in August, RM300 and December 2021. Individuals will receive RM200 in August 2021; and M40 households will receive RM250 while individuals will receive RM100 in August 2021. 	Hardcore poor, B40 and M40 ¹	4,600	<i>Lembaga Hasil Dalam Negeri Malaysia</i> (LHDNM)
<i>Bantuan Prihatin Rakyat tambahan</i>	Cash assistance ranging from RM100 to RM1,400 in September 2021 for individuals and households; The amount depends on a number of factors which include household income, marital status, number of children, etc. ²	B40	500	LHDNM
Income loss assistance	Cash assistance of RM500 in October 2021 to individuals who have lost their income. Eligibility will be determined based on the individual's Employees Provident Fund (EPF) or Social Security Organisation (SOCSO) data in 2021.	Individuals who have lost income in 2021	500	LHDNM
Cash assistance for disabled	Cash assistance of RM500 monthly for three months for the disabled who have lost their jobs or are unemployed and are not recipients of the Disabled Workers Allowance.	Unemployed disabled	30	Ministry of Women, Family and Community Development (KPWK)
<i>Financing and Access to Banking Services</i>				
Loan moratorium	Moratorium on loan repayments for six months for all individual borrowers starting from July 2021.	Individual borrowers	80,000 ³	<i>Bank Negara Malaysia</i> (BNM) and financial institutions

¹ Hardcore poor: Income below RM1,000 defined by Implementation and Coordination Unit (ICU) and *Jabatan Kebajikan Masyarakat* (JKM);

B40: Income below RM5,000 (LHDNM); M40: Income between RM5,001-9,000 (LHDNM)

² More details are provided in *Soalan Lazim* (FAQ) *Bantuan Prihatin Rakyat* (2021)

³ Total value indicated represents combined value of loan moratorium for both individuals and businesses



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

Figure 5.1: Summary of the assistance available for the *Rakyat* via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
Financing and Access to Banking Services				
i-Citra	Withdrawals of up to RM5,000 from EPF accounts with a fixed payment rate of RM1,000 per month for five months starting from August 2021; capped at total EPF savings. Applications open from 12 July 2021 to 30 September 2021.	EPF members	30,000	EPF
Deferment of insurance premium and takaful contributions	Opt-in deferment of payment of insurance premiums and takaful contributions extended until 31 December 2021. This initiative covers policyholders, life insurance and family takaful certificates.	Insurance and takaful policyholders	2,600	Life Insurance Association of Malaysia (LIAM), Malaysian Takaful Association (MTA), <i>Persatuan Insurans Am Malaysia</i> (PIAM)
Deferment of education loan payment	Deferrals of educational loans including: <ul style="list-style-type: none"> • Moratorium for three months (1 June to 31 August 2021) for <i>Perbadanan Tabung Pendidikan Tinggi Nasional</i> (PTPTN) borrowers; • Deferred repayments of <i>Jabatan Perkhidmatan Awam</i> (JPA) loans and compensation claims for up to six months; • Deferred repayment of <i>Majlis Amanah Rakyat</i> (MARA) education loans for three months or rescheduled loan repayments with monthly instalments as low as RM100 for 12 months. Applications open from 10 June to 31 August 2021; and • Postponed repayment of the <i>Perbadanan Tabung Pembangunan Kemahiran</i> (PTPK) loan for three months. 	Students with study loans from the mentioned agencies	400	PTPTN, JPA, MARA, PTPK
Mobile banks	30 mobile banks providing basic banking services such as opening of new savings accounts and updating of banking information. The mobile banks will cover 250 rural areas and <i>mukims</i> in Peninsular Malaysia, Sabah and Sarawak.	<i>Rakyat</i> in selected rural areas	18	<i>Bank Simpanan Nasional</i> (BSN)



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

Figure 5.1: Summary of the assistance available for the *Rakyat* via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
Digital, Utilities and Commodities				
Cooking oil price control	Price controls based on threshold of Crude Palm Oil to ensure that the price of five kilogram bottle of cooking oil does not exceed RM30 per bottle and subsidised one kilogram pack of cooking oil remains at RM2.50.	Everyone	1,000	Ministry of Domestic Trade and Consumer Affairs (KPDNHEP)
Electricity bill discount	<ul style="list-style-type: none"> For households, discounts on electricity bills for 3 months starting from July 2021. Discounts applied will be in the range of 5% to 40% (depending on consumption), subject to a maximum of 900 kilowatt hours per month; and For affected economic sectors (e.g., hotels, theme parks, convention centres, shopping malls), discounts of 10% on electricity bills for an additional three months from October to December 2021. 	Everyone	650	Tenaga Nasional Berhad (TNB)
Internet data	Extension of the free 1GB internet data until 31 December 2021 for registered customers.	Registered customers	500	Malaysian Communications and Multimedia Commission (MCMC)
Well-Being				
Psychosocial support services	Engagement programmes to provide mental health support in partnership with Non-Governmental Organisations (NGOs).	Accredited NGOs by MOH	15	Ministry of Finance (MOF)
Food				
Food basket assistance programme	<ul style="list-style-type: none"> RM300,000 allocated to each Member of Parliament (MP) and Senator to buy and distribute essential daily items to their constituencies. A special allocation of RM10 million for the <i>Orang Asli</i> community. 	B40	100	Implementation Coordination Unit of <i>Jabatan Perdana Menteri</i> (ICU JPM), Department of Orang Asli Development (JAKOA)



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

Figure 5.1: Summary of the assistance available for the *Rakyat* via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
Employment				
eRezeki and GLOW programme	Enhancements to eRezeki and Global Online Workforce (GLOW) programmes to further help 20,000 job seekers in the gig economy: <ul style="list-style-type: none"> eRezeki profiles individuals interested in participating in the gig economy, particularly individuals from low-income groups, and matches the individuals with the digital sharing economy platform. This then enables the individuals to complete suitable tasks or jobs from the platform and generate additional income; and The Global Online Workforce (GLOW) programme is designed to enable Malaysians to be digital freelancers and earn incomes from completing tasks or jobs from both local and global market. Malaysia Digital Economy Corporation (MDEC) is working with more international platforms to provide higher income earning opportunities for Malaysians. 	Individuals interested in earning additional income through the gig economy including unemployed and retrenched workers	8	MDEC
Janapreneur programme	A Place-and-Train initiative that delivers skills training programmes with employment guarantees upon graduation to 30,000 youths.	School leavers and graduates	125	Human Resource Development Corporation (HRD Corp)
MYFutureJobs	Job search allowance of at least RM300, starting July 2021, for non-SOCSCO contributors to support new graduates, school leavers and informal sector workers in their job search.	Non-SOCSCO contributors	100	SOCSCO



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

A priority in designing the PEMULIH package was to ensure that the most vulnerable in society are supported through this challenging time, in cash as well through other types of support. Here is an illustration of the types of support people who are in the hardcore poor and B40 segments of society might experience.



Aisyah is a 35 year-old single-mother of two children and was working as a domestic helper. She lost her job 5 months ago when the COVID-19 pandemic hit Malaysia.

With a household income of less than RM1,000 per month now, she falls in the “hardcore poor” segment of the society, and qualifies for special support during this challenging time, including RM9,500 in cash assistance. Figure 5.2 outlines the support Aisyah is entitled to in 2021. If she has an EPF account with sufficient savings, Aisyah could additionally be entitled to withdraw up to RM5,000 through the i-Citra programme.

Figure 5.2: Support for Aisyah

	1H 2021	2H 2021
Cash Assistance	RM3,000	RM6,500
Direct cash assistance	RM1,200	RM3,700
EIS/Job Search Allowance	-	RM1,000
Assistance for Children of Poor Families	RM1,800	RM1,800
Other Assistance	100	RM810
Electricity bill discount	-	RM60
Food Basket Assistance programme	RM100	RM450
<i>Jaringan Prihatin</i>	-	RM300



Vijay is a married 41-year old with two children. He is a school bus driver who is struggling to make ends meet as school closures during the MCO has meant demand for his services has been limited.

He has a household income of less than RM2,200, with a monthly car instalment of RM400. This places him in the B40 segment, and qualifies for special support during this challenging time, including RM5,050 in cash assistance, and other assistance valued at RM5,220. Figure 5.3 outlines the support Vijay is entitled to in 2021. If he has an EPF account with sufficient savings, Vijay could additionally be entitled to withdraw up to RM6,500 through the i-Sinar and i-Citra programmes.

Figure 5.3: Support for Vijay

	1H 2021	2H 2021
Cash Assistance	RM1,850	RM3,200
Direct cash assistance	RM1,200	RM2,700
E-Belia (for his children)	RM150	-
Special assistance for school bus drivers	RM500	RM500
Other Assistance	RM2,700	RM2,520
Loan moratorium	RM2,400	RM2,400
Electricity bill discount	-	RM120
<i>Jaringan Prihatin</i>	RM300	-

Note: Above examples are purely illustrative and is not intended to be exhaustive.



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

Figure 5.4: Ongoing job retention and generation initiatives

Ongoing Job Retention and Generation Initiatives

Over the COVID-19 pandemic period, the average unemployment rate in Malaysia has increased to 5.3% or 820,000 unemployed in the month of May 2020, which is the highest since 1989. Through the PRIHATIN and PENJANA initiatives, the rate has reduced to 4.7% in August 2020. In November 2020, the Government formed the National Employment Council chaired by YAB Prime Minister to coordinate initiatives to create job opportunities, skills enhancement and training for employees. RM7.4 billion has been allocated by the Government in Budget 2021 for initiatives related job retention and generation initiatives.

Outcomes to date from these initiatives include:

- 289,444 job placements completed as of June 2021, out of a target of 500,000 for 2021,
- 62,685 jobs created as of May 2021, out of a target of 160,000 for 2021
- 659,066 jobs received RM1.4 billion in support from the government to be retained by employers as of Jun 2021

	Description	Target Group
Corridor Reskilling and Upskilling	Skills courses for workers affected by the closure of borders and reduction in foreign tourists to assist them in securing new employment.	Unemployed graduates and retrenched workers
<i>Kementerian Pengajian Tinggi</i> Career Advancement Programme (KPT CAP)	Skill courses for university and vocational graduates with job placements as well as training new entrepreneurs	Fresh graduates from public university and vocational colleges
Ministry of International Trade and Industry (MITI) Reskilling and Upskilling	Skills courses for unemployed Malaysians which enable employment and income opportunities in priority industries.	Fresh graduates, unemployed and retrenched workers interested in priority industries
MySTEP	Short-term employment programme in the public sector, Government-Linked Companies (GLC) and its strategic partners for 50,000 job seekers.	Fresh graduates and the unemployed
Penjana Kerjaya 2.0	Hiring incentives of RM2 billion, including 40% in wage subsidies for employees with monthly salaries of RM1,500 to RM10,000. Additional 20% wage subsidy for employers that create opportunities for the vulnerable, long-term unemployed and retrenched worker or replace foreign workers.	Long-term unemployed, Retrenched, Vulnerable Groups
PENJANA Reskilling and Upskilling Programmes	Skills programmes worth RM2 billion by eight agencies to enhance employability.	Existing and unemployed workers
PERHEBAT	Skills programme for 12,000 retired army veterans.	Retired army personnel
PROTÉGÉ Ready-to-Work	Skills programme to develop high potential graduates for the future workforce.	Selected graduates
<i>Sistem Latihan Dua Nasional</i> (SLDN)	On-the-job training and placement programmes for vocational students worth RM60 million lasting 2 to 6 months.	Vocational students

Supporting businesses

Businesses have been severely impacted due to the COVID-19 pandemic. Starting from the first Movement Control Order (MCO) in March 2020, many businesses were forced to close their doors. These closures led to major losses in revenue, which in turn impacted the ability of the businesses to pay their employees, service their loans and pay rent and other bills.

To address these challenges, the Government is providing various assistance programmes to businesses and employees. Benefitting up to 2.5 million employees, the Wage Subsidy Programme (PSU) 4.0 under PEMULIH has been continued and expanded from the previous PSU 3.0 initiative. The Government will also continue the *Geran Khas Prihatin 4.0* (GKP 4.0), where micro-enterprises would be entitled to one-off payments of RM500 in September 2021 and another RM500 in November 2021.

Other initiatives to support business liquidity include targeted loan moratoriums and utility bill discounts. Business premises under MARA will also enjoy a 30% rental discount as part of the MARA PRIHATIN initiative.

Digitalisation remains critical for businesses to stay afloat as consumers move towards online purchasing. Under the Small Entrepreneur Digitisation Empowerment Programme (PUPUK), the Government allocated RM200 million for micro-businesses and RM100 million for SMEs. The SME Digitalisation Grant provides a matching grant valued at up to RM5,000 to promote the adoption of digital solutions in their operations. Collaboration with digital platform providers through Shop Malaysia Online and Go-eCommerce Onboarding will help micro-businesses embrace digital adoption for sales and other online transactions.

Recognising that businesses in the most affected sectors such as tourism, transportation and entertainment may require financing assistance to kick-start their recovery, various financing programmes with attractive rates are made available through *Bank Negara's* programmes and non-banking institutions such

as TEKUN Nasional, MARA and SME Corp. Industry-specific financing such as PENJANA Tourism Financing by BNM as well as creative industry financing by MyCreative and Cultural Economy Development Agency (CENDANA) will also be available.

Figure 5.5: Summary of the assistance available for businesses via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
Direct Cash Assistance				
PSU 4.0	Cash grants of RM600 for up to 500 employees for each employer. Companies in all sectors are eligible for this support for up to two months during Phase 2. Companies in sectors that are not permitted to operate during Phase 3 are eligible for support for two additional months during Phase 3.	Companies with revenue loss of above 30%	3,800	SOCSCO
GKP 4.0 for micro-businesses	Cash assistance of RM500 in September and RM500 in November 2021 for micro-businesses, especially barber shop operators, workshop owners, bakery and cake shops, health care centres and others.	Micro-businesses ⁴	1,000	MOF
<i>Penjana Kerjaya Program 3.0</i>	<ul style="list-style-type: none"> Hiring incentive covering up to 60% of an employee's salary or up to RM46,000 (whichever is lower) for six month for employers from 15 July 2021 to 31 December 2021. Salary eligibility limit reduced from RM1,500 to RM1,200 to encourage hiring locals (Malaysianisation). Eligible employment contract period for employees aged 50 and above, the disabled and ex-prisoners reduced from 12 months to 6 months. 	Employers and workers	400	SOCSCO
PUPUK	Matching grant of up to RM5,000 for the purchase of systems or digital platform subscriptions under the SME Digitalisation Grant.	SME and micro-businesses ⁵	100	BSN
Financing				
Microcredit financing	Microcredit financing to support micro-businesses.	Micro-businesses	1,100	AgroBank, BSN, TEKUN Nasional
Funding for SME entrepreneurs	Financial assistance to ease cash flow constraints for SMEs and micro-businesses.	SME and micro-businesses ⁵	2,000	BNM
Government guarantee schemes	Increase in the ceiling of funds for the guarantee scheme under <i>Syarikat Jaminan Pembiayaan Perniagaan Berhad</i> (SJPP) from RM36.5 billion to RM56.5 billion for 2021.	SME and micro-businesses ⁵	20,000	SJPP
<i>Program Jaringan Inisiatif Umum</i> (JITU)	Basic business capital assistance and mentorship for the disabled and homeless in business.	Disabled and homeless	20	<i>Yayasan Kebajikan Negara</i> (YKN), KPWK M

⁴ Micro-business are businesses that have sales turnover of less than RM300,000 OR full-time employees less than 5; Micro-businesses should also be registered with LHDNM or local authorities or Companies Commission of Malaysia (CCM)

⁵ For the manufacturing sector, SMEs are defined as firms with sales turnover not exceeding RM50 million OR number of full-time employees not exceeding 200. For the services and other sectors, SMEs are defined as firms with sales turnover not exceeding RM20 million OR number of full-time employees not exceeding 75 employees



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

Figure 5.5: Summary of the assistance available for businesses via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
Financing				
<i>Pembiayaan Intervensi Pemulihan Ekonomi Koperasi (PIPEK)</i>	Financial assistance for entrepreneurs to carry out economic activities in groups through cooperative businesses for one year, starting from July 2021 to July 2022. Group economic activities could include marketing products through online platforms as well as encouraging the purchase of goods in cooperative stores.	Cooperative businesses	20	Ministry of Entrepreneur Development and Cooperatives (MEDAC)
Tax Deferrals, Exemptions and Rental Relief				
HRD Corp levy	Levy exemption for two months for employers who are unable to operate during MCO from July 2021. Employers from the new sectors covered following the extension of the <i>Pembangunan Sumber Manusia Berhad</i> (PSMB) Act 2001 (e.g., construction, trading and wholesale) are given a further extension until 31 December 2021.	Companies and employers	425	HRD Corp
Tax deduction for premise owner	Special tax deduction for owners of buildings and business spaces who offer a rental reduction of at least 30% to businesses. The period of rental reduction offered is extended to 31 December 2021.	Owners who offer rental deduction	8	Ministry of Federal Territories (KWP)
Discount on MARA rental	A discount of 30% on the rental of MARA business premises for five months available from August to December 2021.	MARA's tenants	6	MARA
Defer income tax instalments and tax exemptions	Deferred income tax instalments payment for travel agents, hotel operators and airlines and selected industries (e.g., spas, cinemas). The Government will also offer the option of revisions in the income tax estimates in the third month in addition to existing tax treatments in which companies are allowed to revise the tax estimates in the sixth and ninth months of the base period.	All companies	-	MOF



Figure 5.5: Summary of the assistance available for businesses via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
Loan moratoriums				
Deferment of MARA business financing repayment	Deferment of repayment of MARA business financing for a period of three months or rescheduling of financing repayment by extending the financing period by up to 36 months. This will commence from 1 July to 30 September 2021.	MARA entrepreneurs	25	MARA
Loan moratorium	Moratorium for six months for SMEs and micro-businesses from July 2021. Opt-in is required and approvals will be given automatically with no additional requirements.	Micro-businesses, SMEs	80,000 ⁶	BNM and financial institutions
Targeted support				
Shop Malaysia Online and Go-eCommerce Onboarding	<ul style="list-style-type: none"> Discount vouchers for online transactions delivered through Shop Malaysia Online campaign to encourage online consumption. Go-eCommerce Onboarding targets 300,000 micro-businesses such as bazaar and market operators to adopt e-commerce and e-payment 	Micro-businesses	200	MDEC
Support for arts and creative industries	Incentives for creative production and digital content, career opportunities, skills upgrading programs, social security contributions under SOCSO as well as the procurement of products for the purpose of productions on television, radio and songs creation.	Creative industry and businesses	100	Ministry of Communications and Multimedia (KKMM)
Special assistance for nursery and kindergarten operators	One-off cash grant of RM3,000 for nursery and private kindergarten operators.	Nursery and private kindergarten operators	38	Ministry of Education (MOE), KPWKMM
Special assistance for sports centre operators	One-off cash grant of RM3,000 to sports centre operators (e.g. gyms, bowling, futsal). Applications start from 1 July to 31 August 2021.	Sports centre operators	18	Ministry of Youth and Sports (KBS)

⁶ Total value indicated represents combined value of loan moratorium for both individuals and businesses



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

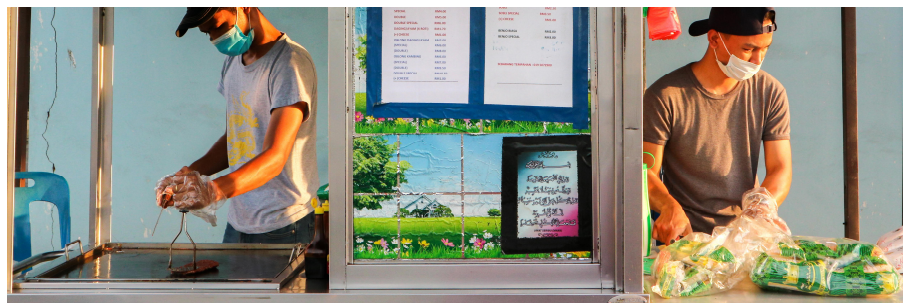
Figure 5.5: Summary of the assistance available for businesses via the PEMULIH package

Type of Support	Description	Target group	Value (RM million)	Leading Organisation
Targeted Support				
Assistance for travel agencies	One-off cash grant of RM3,000 for registered travel agencies. Exemption from tourism tax and service tax for hotel operators from 1 July to 31 December 2021. Towards the fourth phase of the NRP, appropriate allocations will be considered to rehabilitate and revitalise tourism activities.	All registered travel agencies	17	MOTAC
Special assistance for all registered canteen operators	One-off cash grant of RM1,000 for registered canteen operators.	Registered canteen operators	9	MOE
Special assistance for spa and foot massage operators	One-off cash grant of RM1,000 for spa and foot massage operators.	Spa and foot massage operators	1	MOTAC
Procurement				
Small scale projects assistance	Assistance for local G1 to G4 contractors to carry out small-scale projects by voting and quotation based on the new civil engineering and building work rate schedules, as well as electrical work rate schedules.	G1-G4 Contractor	Depends on projects	Various Ministries
Variation of price	Permitted variation of price (VOP) for work projects following a significant increase in the cost of building materials until 31 December 2021.	Government Contractor	-	-
Extension of Contract	Extension of time (EOT) of work projects or supply and service contracts affected by the implementation of MCO allowed subject to the contract clause.	Government Contractor	-	-



Here is an illustration of how the PEMULIH package might support two different types of businesses

Burger Sedap Enterprise



Burger Sedap Enterprise has been renting a premise owned by MARA. Due to the COVID-19 restrictions in Malaysia, they have been unable to operate, thus resulting in a loss of customers and revenue.

They have 4 employees with a total annual income of RM200,000. They fall within the SME segment and qualify for support during this challenging time, including RM3,500 in cash assistance, and other assistance valued at RM74,771. Figure 5.6 outlines the support Burger Sedap Enterprise is entitled to in 2021.

Figure 5.6: Support for Burger Sedap Enterprise

	1H 2021	2H 2021
Cash Assistance	RM2,000	RM1,500
Geran Khas Prihatin (GKP) Tambahan	RM1,000	
Geran Khas Prihatin 3.0	RM1,000	RM500
Geran Khas Prihatin 4.0		RM1,000
Other Assistance	RM33,600	RM41,171
Electricity bill discount	-	~ RM71 ⁷
Deferment of premise rental	-	RM7,500
Loan Moratorium	RM24,000	RM24,000
Wage Subsidy Programme	RM9,600	RM9,600

Note: Above examples are purely illustrative and is not intended to be exhaustive.

⁷ Assuming usage of 1000kWh per month

⁸ Assuming usage of 10,000 kWh per month

VF Supplies Sdn. Bhd.



VF Supplies Sdn. Bhd. is a medium-sized fruit distributor with 30 employees, 20 local workers and 10 foreign workers. Due to the COVID-19 restrictions in Malaysia, they have been unable to operate, thus resulting in a loss of revenue.

Their monthly premise loan instalment is RM20,000 with a total annual income of RM1,500,000. Hence, it does not falls into the SME segment of business and does not qualifies for special support provided. Nonetheless, cashflow assistance valued at RM193,237.50 will be given by the Government. Figure 5.7 outlines the support VF Supplies Sdn. Bhd. is entitled to in 2021.

Figure 5.7: Support for VF Supplies Sdn. Bhd.

	1H 2021	2H 2021
Other Assistance	RM36,000	RM157,237.50
Electricity bill discount	-	~RM517.50 ⁸
Loan Moratorium	-	RM120,000
Wage Subsidy Programme	RM36,000	RM36,000
Levy exemption	-	RM720



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)

Linkages to past support packages

The PEMULIH package worth more than RM150 billion is specifically designed to support the NRP, particularly during Phase 1 when restrictions are the most stringent. However, COVID-19 and its hardships predate the NRP by over a year. Prior to PEMULIH, more than RM200 billion from the existing financial aid packages has been spent with the remaining worth more than RM100 billion to be implemented in the second half of 2021.

Selected ongoing support from previous financial assistance packages include:

- *Jaringan Prihatin*, a subsidy of up to RM300 for BPR recipients for internet subscription or purchase of new devices. RM2 billion has been allocated for this programme and will continue to be available until August 2021;
- *MyKasih* is a programme in which beneficiaries will receive RM100 a month for three months, credited directly into their MyKad account, to purchase essential food items at the nearest participating retail outlet. RM100 million has been allocated for this programme. Registration for this programme is accepted until September 2021, and payment will be made until December 2021.
- Targeted Assistance and Rehabilitation facility (TRRF) to provide relief and recovery support for SMEs in the services sector affected by COVID-19 containment measures. RM6 billion has been allocated for this initiative and will be available until 31 December 2021; and
- RM5 billion allocated for small-scale projects such as repairs of public infrastructures and maintenance of *Program Perumahan Rakyat* (PPR) houses by G1, G2, G3 and G4 contractors to continue until 31 December 2023.

A commitment to support

COVID-19 has proven itself as a fast-moving virus—and the nation's response has to be equally dynamic. This pandemic has proven time and again that progress is not linear.

The support outlined here focusses on assistance in the immediate term, till the end of 2021. However, prolonged period of restrictions could require longer period of support and more severe restrictions, such as those as seen in the Enhanced Movement Control Order (EMCO), could require enhanced support. As long as the economic and social sectors remain closed, the Government commits to support the *Rakyat* and Businesses to ensure their livelihoods.

Further support for the national recovery will be looked at and announced in the 2022 Budget.



List is non-exhaustive. For more information, kindly refer to the [MANFAAT portal](#)



6

The Next
Normal

The Next Normal

The National Recovery Plan (NRP) broadly lays out the measures that Malaysia will take to control the pandemic and progressively reopen society and the economy. However, there is a need to plan beyond the pandemic and chart the next normal for how Malaysians will live, work and play; how the nation's healthcare system will need to prepare for the next pandemic and, how the economy can not only recover to pre-pandemic levels, but be built back stronger, more resilient and more inclusive with new sources of growth for generations to come.

Moving from pandemic to endemic

There is increasing consensus amongst the scientific community that COVID-19 will not be eradicated in the near future. This means that the virus could continue to circulate in pockets across the world as an endemic disease, similar to influenza. However, with sufficient immunity within society, good health practices and, early warning systems in place this virus could be much less threatening to lives compared to today.

Vaccines will be critical to enabling this transition. As COVID-19 transitions to endemic, the Government will increasingly shift from tracking cases to tracking hospitalisations and deaths. This is a similar strategy that has been applied in managing other endemic diseases such as influenza, dengue and H1N1.

The scientific community and some governments are studying a broad set of options to manage COVID-19 as an endemic disease. These include measures such as continuous epidemiological monitoring, boosters or multi-year vaccination programmes, continuation of targeted testing and isolation to contain outbreaks, vaccine passports for international travel and selected activities, therapeutics to effectively treat the illness, and normalising public health practices such as masking and good personal hygiene. Within this context, the Government will progressively update the NRP to prepare Malaysia for the next normal of living with COVID-19 as an endemic disease.



Reforming the Malaysian healthcare system

While the Malaysian healthcare system has been successful in delivering affordable and accessible care, the COVID-19 pandemic has also exposed several underlying challenges and vulnerabilities in the system today. Given this, the Government recognises the criticality of pursuing meaningful health reforms and has undertaken an effort to define a comprehensive healthcare reform strategy.

This healthcare reform will address the nation's longer term needs for healthcare which are increasing due to ageing and non-communicable diseases. Amongst the policies being considered are new care models with a focus on prevention, transforming productivity and quality in delivering healthcare, stronger integration between private, public and Non-Governmental Organisation (NGO) providers, new methods of rural care delivery and putting in place a more diversified funding approach to ensure financial sustainability.

A core element to broader healthcare reforms will be strengthening the health system's resiliency and preparedness for future pandemics. Policy measures being considered include:

- Putting in place an "always on" system and partnerships that can rapidly scale during epidemics covering strategic health supplies, a national self-sufficiency strategy for such supplies, frameworks for public-private collaboration, enhancement of border health control capabilities and regular outbreak simulations;
- Strengthening national and local mechanisms to detect infectious disease to stop individual chains of transmission at an early stage which could involve closing the gaps in foundational surveillance, strengthening data

integration and analysis, building and maintaining high-quality, flexible outbreak investigation capacity, and strengthening serosurveillance and vaccine effectiveness monitoring;

- Ensuring health system readiness to handle surges while maintaining essential services. Rapid case growth observed during certain phases of the pandemic may result in some health systems redirecting healthcare capacity to treating patients with COVID-19 resulting in secondary health effects. Standard protocols for triage and surge capacity – such as converting non-medical facilities to temporary medical facilities and establishing field hospitals – will be established; and
- Developing an integrated epidemic-prevention agenda. While recognising that Malaysia cannot prevent all future epidemics, the nation will use all the tools available to prevent what can be prevented. In this regard, some of the approaches to be further explored are; reducing the risk of zoonotic events by containing human and wild-life interactions (e.g., through economic incentives, legal changes, public education), limiting antimicrobial resistance and administering vaccines more widely.

In addition to healthcare reforms, the Government is in the midst of developing the National Vaccine Development Roadmap. Beyond expanding Malaysia's vaccination manufacturing through "fill and finish" of foreign-sourced vaccines, the Roadmap also includes a plan for Malaysia to manufacture vaccines locally. Efforts are being led by the Minister of Health (MOH) through the Institute for Medical Research (IMR) to develop two types of COVID-19 vaccines, one of which uses mRNA technology and another which uses an inactivated vaccine approach.

Building back better: Towards a more resilient, inclusive and competitive economy

With the pandemic, Malaysia has experienced its most severe economic crisis in the nation's history. Gross Domestic Product (GDP) in 2020 contracted by 17.1% in the second quarter of 2020, which outpaced the fourth quarter of 1998 when the economy contracted by 11.2% following the Asian Financial Crisis. Estimates show that over 210,000 jobs have been lost, with a daily economic cost of up to RM1.1 billion per day under a nationwide Phase 1 restriction.

As the nation looks to recover from this unprecedented crisis, it is imperative to build back stronger. This means accelerating the nation's path towards the Shared Prosperity Vision 2030 (SPV 2030) – which envisions a united, prosperous and dignified Malaysia by 2030. However, this path will not be without its challenges – the global economy after COVID-19 is unlikely to return to the world that was. Many trends that were already underway pre-pandemic have been accelerated as the result of it. Of particular relevance to Malaysia are:

- The pandemic has deepened inequality. Lower income groups and smaller businesses being the hardest hit by far. Therefore, immediate priorities include increasing social protection for vulnerable segments, eradicating poverty, driving inclusive growth across states, and rehabilitating the hardest hit sectors and Small Medium Enterprises (SMEs);
- The global economy will experience material shifts in trade, services, travel, information and technology. In particular, global supply chains are expected to reconfigure with greater regionalisation or multi-shoring to support an increasing focus on resilience. Such reconfigurations could present both challenges and opportunities for Malaysia – particularly in potential new export-focused sectors such as the advanced electrical and electronics (E&E) and aerospace industries;
- The rising importance of sustainability. Investments in sustainability can serve as both a means and an end towards a post-COVID recovery. Sustainable recovery can improve productivity, create new forms of jobs and income growth, while supporting transition towards a climate resilient economy. As such, the Government intends to prioritise green recovery measures including fiscal support and incentives for low carbon mobility, renewable energy development, and the circular economy;
- The acceleration of Future of Work. The future of work is arriving faster as a result of the pandemic, not only because of technological advancements but because of new considerations for health and safety and working models (e.g. partial work-from-home). Combined, these elements could create a major dislocation in the labour force due to fundamental shifts in the types of jobs and skills required for Malaysia's future. Recognising this, a major priority for the Government will be to build a Future Ready Workforce for Malaysia with an emphasis on supporting the transition of jobs and skills through upskilling and reskilling programmes; and
- The acceleration of digitisation and automation. During the pandemic, digital adoption has taken a quantum leap in society, companies and industries. While borne out of necessity, it is clear that this rapid shift will have long lasting consequences. Given this, the initiatives laid out under the Malaysian Digital Economy Blueprint (MyDigital) will be a crucial part of the recovery. Under MyDigital, Malaysia aims to become a competitive digital nation and attract up to RM70 billion in digital investments.

The Budget 2022 and Twelfth Malaysia Plan (RMKe-12) have been formulated in view of this major shifts. Combined, they aim to address both the near term economic revitalisation efforts to guide Malaysia's reopening as well as the medium term strategies to structurally reform the economy.

Figure 6.1 provides additional detail regarding Budget 2022 and the input-gathering process leading up to its release.

The RMKe-12 is now on track to be tabled to Parliament in September 2021 and will focus on three priority themes on resetting the economy, strengthening security, and inclusiveness, and advancing sustainability. It will also be supported by four major policy enablers, namely developing future talent, accelerating technology adoption and innovation; enhancing connectivity and transport infrastructure; and strengthening the public service.

Figure 6.1: Budget 2022

The 3Rs: Recovery, Resilience and Reform

Driving economic RECOVERY	Rebuilding RESILIENCE	Catalysing REFORM
Stimulating growth and facilitating recovery of principal sectors towards export-led sectors and to support employment recovery	Continuing the focus on healthcare systems and capacity including on pandemic resilience, widening vaccinations and preventative health for non-communicable diseases	Finding new sources of growth from higher value added activities such as research and development in core sectors of E&E, advancing the MyDigital agenda and facilitating the development of startups
Maintaining Malaysia's expansionary fiscal policy to support recovery and growth of domestic consumption	Broadening the scope for social protection with an emphasis on the informal sectors and unemployed	Developing distinctive Malaysian capabilities on emerging areas such as the Islamic and <i>wakaf</i> economy
Rehabilitating sectors and segments most adversely affected by the impact of COVID-19 such as tourism and SMEs	Rebuilding inclusiveness between regions and communities, leveraging digitalisation as a key enabler	Reskilling the nation's workforce for Future Ready Talent in the face of increasing digitisation and automation
	Regaining financial and fiscal resilience through a new Fiscal Responsibility Act, broadening sources of revenues and rationalisation of subsidies	Transitioning to the Green Economy with a focus on renewable energy, monetising green assets and ESG financing
		Transforming GLCs and public service delivery through Whole of Nation approach

What to expect

Transparency: Budget 2022 will begin with a pre-Budget statement by the end of August 2021 which identifies the Budget's priorities and macro-economic assumptions. Input from all stakeholders will be considered in finalising the Budget.

Stakeholder engagement: Budget 2022 will build on efforts of Budget 2021 to engage with stakeholders in all states, key industries and civil society groups, in addition to all political parties. Virtual platforms will be used depending on prevailing SOPs.

Public participation: Multiple platforms to seek input from and engage citizens will be made ready (e.g., issuance of policy consultative papers) and to determine budgetary allocations (e.g., matching grants and crowdsourcing of ideas).

It has been 18 months since the pandemic landed on Malaysia's shores and the nation is fatigued.

COVID-19 has disrupted the lives of every Malaysian and all who live here. The nation's healthcare frontliners are exhausted. Many have lost loved ones and more so are struggling to make ends meet. Parts of the nation, especially in Kuala Lumpur and Selangor, are still in crisis. In such areas – necessary, but painful, measures are being taken to control the pandemic swiftly.

But there are signs of hope.

Malaysia has one of the highest vaccination rates in Southeast Asia, second only to the city-state of Singapore and more than 2x the vaccination rates of Thailand and Indonesia. On average, over 400,00 people are receiving vaccines every day. By the end of August 2021, over 1 in every 2 eligible Malaysians will have received two doses of their vaccines. This is the nation's path to recovery.

As of writing, over 13 million Malaysians in the states of Kelantan, Pahang, Perak, Perlis, Pulau Pinang, Sabah, Sarawak and Terengganu are already in Phase 2 of the National Recovery Plan. The Government is confident that more states will soon join them.

The Government is firmly committed to supporting the *Rakyat* and businesses through this difficult period. The support measures will continue to be refined and targeted and will continue so long as restrictions are required. Beyond the crisis, the nation has a once-in-a-generation opportunity to build back better towards the vision of a united, prosperous and dignified nation. This entails building a new social contract, finding new sources of economic growth, helping our workforce transition to the future of work and anchoring on a green recovery.

#strongertogether

Table of Figures

Chapter	Figure and Title	Page
1	1.1 New cases, ICU hospitalisations and deaths	7
2	2.1 International examples of criteria used to assess risks of easing restrictions	13-14
	2.2 The Common Operating Picture	15
	2.3 The four phase roadmap for reopening	17-18
3	3.1 Cumulative cases and deaths per 100,000 population for selected countries	25
	3.2 Number of clusters between April and June 2021 in Malaysia	27
	3.3 Pathway for individuals who are confirmed cases or close contacts	29
	3.4 Overview of the Greater Klang Valley Special Taskforce	32
4	4.1 Malaysia's COVID-19 vaccine portfolio	37
	4.2 Vaccination timeline by priority groups	38
	4.3 Vaccine supply and planned doses in 2021	39
	4.4 Daily target doses and monthly target doses for administration	39
	4.5 Vaccination timeline for eligible population by state	40
	4.6 Vaccination registration and status by state as of 19 July 2021	41
5	5.1 Summary of the assistance available for the <i>Rakyat</i> via the PEMULIH package	46-49
	5.2 Support for Aisyah	50
	5.3 Support for Vijay	50
	5.4 Ongoing job retention and generation initiatives	51
	5.5 Summary of the assistance available for businesses via the PEMULIH package	53-56
	5.6 Support for Burger Sedap Enterprise	57
	5.7 Support for VF Supplies Sdn. Bhd.	57
6	6.1 Budget 2022	64

Table of Abbreviations

Abbreviation	Definition
BKC	Special COVID-19 Assistance
BKP	<i>Bantuan Kehilangan Pendapatan</i>
BNM	Bank Negara Malaysia
BPR	<i>Bantuan Prihatin Rakyat</i>
BSN	<i>Bank Simpanan Nasional</i>
CAC	COVID-19 Assessment Centre
CCM	Companies Commission of Malaysia
CENDANA	Cultural Economy Development Agency
CEPI	Coalition for Epidemic Preparedness Innovation
COVAX	COVID-19 Vaccine Facility Global Access
COVID-19	Coronavirus Disease 2019
E&E	Electrical and Electronics
EAG	Advisory Group of Experts
EIS	Employee Insurance Scheme
EMCO	Enhanced Movement Control Order
EOT	Extension of Contract
EPF	Employees Provident Fund
EPU	Economic Planning Unit
ESG	Environmental, Social, and Corporate Governance
FTTIS	Find, Test, Trace, Isolate, and Support
GDP	Gross Domestic Product

Abbreviation	Definition
GKP	Prihatin Special Grant Programme
GKV	Greater Klang Valley
GKVSTF	Greater Klang Valley Special Task Force
GLC	Government Linked Company
GLOW	Global Online Workforce
GP	General Practitioner
HIDE	Hotspot Identification for Dynamic Engagement
HRD Corp	Human Resource Development Corporation
HSO	Home Surveillance Order
ICU	Intensive Care Units
ICU JPM	Implementation Coordination Unit of <i>Jabatan Perdana Menteri</i>
IMR	Institute of Medical Research
JITU	<i>Program Jaringan Inisiatif Umum</i>
JKJAV	Special Committee for Ensuring Access to COVID-19 Vaccine Supply
JKR	Public Works Department
JPA	<i>Jabatan Perkhidmatan Awam</i>
JPN	<i>Jabatan Pendaftaran Negara</i>
KBS	Ministry of Youth and Sports
KPDNHEP	Ministry of Domestic Trade and Consumer Affairs
KPN	Ministry of Unity
KPT CAP	<i>Kementerian Pengajian Tinggi</i> Career Advancement Programme

Table of Abbreviations

Abbreviation	Definition
KPWKM	Ministry of Women, Family and Community Development
KWP	Ministry of Federal Territories
LAKSANA	<i>Agensi Pelaksanaan Ekonomi dan Koordinasi Strategik Nasional</i>
LHDNM	<i>Lembaga Hasil Dalam Negeri Malaysia</i>
LIAM	Life Insurance Association of Malaysia
MARA	<i>Majlis Amanah Rakyat</i>
MCMC	Malaysian Communications and Multimedia Commission
MCO	Movement Control Order
MDEC	Malaysia Digital Economy Corporation
MEDAC	Ministry of Entrepreneur Development and Cooperatives
MITI	Ministry of International Trade and Industry
MKN	<i>Majlis Keselamatan Negara</i>
MOE	Ministry of Education
MOF	Ministry of Finance
MOH	Ministry of Health
MoHE	Ministry of Higher Education
MOSTI	Ministry of Science, Technology and Innovation
MOTAC	Ministry of Tourism, Arts and Culture
MP	Member of Parliament
MPN	<i>Majlis Pemulihan Negara</i>
mRNA	Messenger Ribonucleic Acid

Abbreviation	Definition
MTA	Malaysian Takaful Association
MySTEP	Short-term Employment Programme
NGOs	Non-Governmental Organisations
NHS	National Health Service
NPRA	National Pharmaceutical Regulatory Agency
NRP	National Recovery Plan
OECD	Organisation for Economic Co-operation and Development
PCR	Polymerase Chain Reaction
PEMERKASA	<i>Program Strategik Memperkasa Rakyat Dan Ekonomi</i>
PEMERKASA+	<i>Program Strategik Memperkasa Rakyat Dan Ekonomi Tambahan</i>
PEMULIH	<i>Pakej Perlindungan Rakyat dan Pemulihan Ekonomi</i>
PENJANA	<i>Pelan Jana Semula Ekonomi Negara</i>
PERHEBAT	<i>Perbadanan Hal Ehwal Bekas Angkatan Tentera</i>
PERMAI	<i>Perlindungan Ekonomi & Rakyat Malaysia</i>
PIAM	<i>Persatuan Insurans Am Malaysia</i>
PICK	National COVID-19 Immunisation Programme
PIKAS	Public Private Partnership COVID-19 Industry Immunisation Programme
PIPEK	<i>Pembiayaan Intervensi Pemulihan Ekonomi Koperasi</i>
PKD	District Health Office
PKRC	<i>Pusat Kuarantin dan Rawatan COVID-19 Berisiko Rendah</i>
PMO	Prime Minister's Office

Table of Abbreviations

Abbreviation	Definition
PPE	Personal Protective Equipment
PPR	<i>Program Perumahan Rakyat</i>
PPV	Vaccination Centre
PRIHATIN	<i>Pakej Ransangan Ekonomi Prihatin Rakyat</i>
PSMB	<i>Pembangunan Sumber Manusia Berhad</i>
PSU	Wage Subsidy Programme
PTPK	<i>Perbadanan Tabung Pembangunan Kemahiran</i>
PTPTN	<i>Perbadanan Tabung Pendidikan Tinggi Nasional</i>
PUPUK	Small Entrepreneur Digitisation Empowerment Programme
RMKe-12	Twelfth Malaysia Plan, 2021-2025
RTK-Ag	Rapid Test Kits Antigen
RTPCR	Reverse Transcription Polymerase Chain Reaction
SJPP	<i>Syarikat Jaminan Pembiayaan Perniagaan Berhad</i>
SLDN	<i>Sistem Latihan Dua Nasional</i>
SME	Small and Medium Enterprise
SOCISO	Social Security Organisation
SOP	Standard Operating Procedures
SPV 2030	Shared Prosperity Vision 2030
TEKUN	<i>TEKUN Nasional</i>
TNB	<i>Tenaga Nasional Berhad</i>
TRRF	Targeted Assistance and Rehabilitation Facility

Abbreviation	Definition
UCL	University College London
UK	United Kingdom
USA	United States of America
VOP	Variation of Price
WHO	World Health Organization
W.P.	<i>Wilayah Persekutuan</i>
W.P. KL	<i>Wilayah Persekutuan Kuala Lumpur</i>
YAB	<i>Yang Amat Berhormat</i>



Malaysia
**STRONGER
TOGETHER**