# FOCUSING OUR RESOURCES AND REFINING OUR HEALTHCARE PROTOCOLS TO DEAL WITH THE OMICRON WAVE

## **21ST JAN 2022**

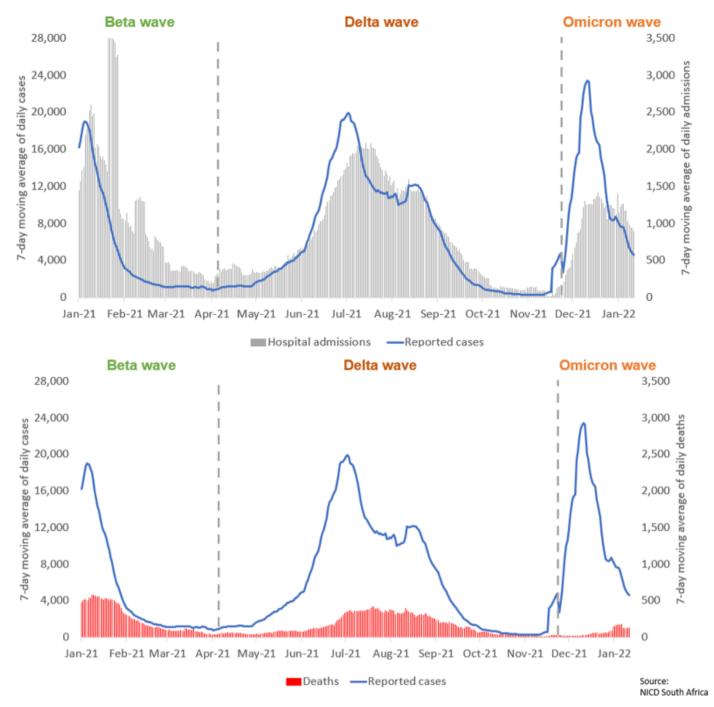
The number of confirmed Omicron cases has started to rise more sharply over the past week. With our high vaccination rates, steady uptake of booster doses, and Safe Management Measures (SMMs) including Vaccination Differentiated SMMs, the number of severe cases remains low. However, as Omicron is more transmissible than Delta, we should prepare for further surges in infections in the weeks ahead.

- 2. As seen in other countries, the high case numbers are likely to disrupt manpower resourcing nationally and will exert significant pressure on our healthcare system. Businesses should prepare their business continuity plans, adhere strictly to SMMs and encourage workers to test themselves regularly, so as to dampen transmission and minimise operational disruptions.
- 3. In the coming weeks, it is extremely important to protect our healthcare capacity and vulnerable seniors, so as ride through the Omicron wave. We will therefore temporarily suspend in-person visits to hospital wards and residential care homes ('Homes') for the next 4 weeks.
- 4. We have made plans to optimise our healthcare resources and adjusted our protocols to better prepare for this upcoming wave. We had earlier worked with primary care doctors to let low-risk individuals with mild COVID-19 symptoms recover safely at home under Protocol 2, while putting individuals needing more medical support under the Home Recovery Programme. We are making preparations to further widen the applications of Protocol 2 in the next couple of weeks, to progressively include more patient groups and settings.
- 5. Given a shorter infectious period for Omicron, we will also reduce the duration of isolation under Protocol 1 from 10 days to 7 days for fully vaccinated individuals.
- 6. We will refine the testing regime for Vaccinated Travel Lane (VTL) travellers. The current regime put in place in early December 2021 sought to delay the spread of Omicron while we understand the variant better. This is now less relevant given our understanding of the variant and the wider community transmission of Omicron.
- 7. To maximise our protection against Omicron as we go about our daily lives, we agreed with the recommendations of the Expert Committee on COVID-19 Vaccination (EC19V) to extend the booster programme to individuals aged 12 to 17. We had earlier announced that from **14 February 2022**, persons aged 18 years and above will be considered fully vaccinated only for 270 days after the last dose of their primary series of COVID-19 vaccines. Thereafter, to retain their fully vaccinated status, they need to receive a booster dose. For those aged 12 to 17, the deadline will be set later, from 14 March 2022. This will give them sufficient time to receive their booster dose. We urge our young to go for their booster vaccinations as soon as possible, once they are invited to do so 5 months after their last dose.
- 8. While our high vaccination coverage and strong booster take-up has helped to protect our population against severe illness and slowed the spread of Omicron, we should nonetheless exercise caution in the upcoming Chinese New Year festivities and limit our interactions with friends and family members. This will

reduce the spread of Omicron, particularly to our vulnerable or unvaccinated family members.

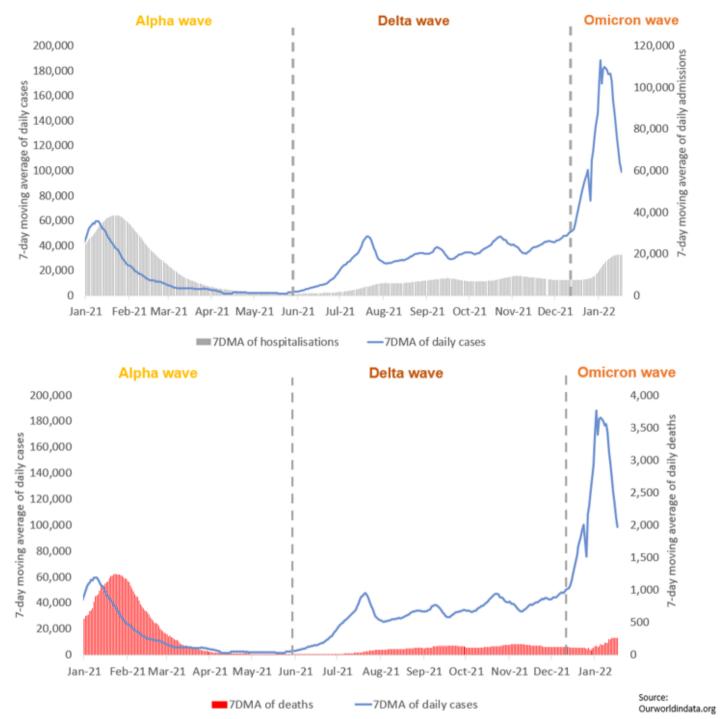
#### **Updates on Local Situation**

- 9. Our local COVID-19 situation remains under control. The numbers in ICU care remained low at 14 as of 20 January 2022. This is despite the rising numbers of PCR positive cases from around 800 daily last week, to 1,472 cases on 20 January 2022, with local cases forming a large and growing majority at 1,133 cases versus 339 imported cases. At the same time, with the expanded use of Protocol 2, there has been an increasing number testing positive on Antigen Rapid Tests (ARTs). In the past week, there was a daily average of around 800 patients who tested ART positive at healthcare facilities. As we make more pervasive use of ART in lieu of PCR tests, it is timely for us to publish the number of ART positive cases seen at healthcare facilities daily, alongside the number of PCR positive cases.
- 10. We expect the number of infected cases to rise sharply as the more transmissible Omicron wave spreads through our community. Cases could double every two to three days, and could reach 10,000 to 15,000, or even more, cases per day. However, international and local data shows that Omicron is less severe compared to Delta. Referencing data from South Africa (Chart 1) and the United Kingdom (UK) (Chart 2), we can expect hospitalisations and deaths to experience a gentler rise compared to the steeper climb in overall case numbers.



(https://www.moh.gov.sg/images/librariesprovider5/default-album/mtf21012022\_chart1.png?sfvrsn=60cd48ec\_0)

Chart 1: Reported Cases, Hospital Admissions and Deaths in South Africa



(https://www.moh.gov.sg/images/librariesprovider5/default-album/mtf21012022 chart2.png?sfvrsn=12be3ed9 0)

#### Chart 2: Reported Cases, Hospital Admissions and Deaths in the UK

- 11. Given Omicron's lower severity, we should focus our attention on the numbers in ICU care instead of case numbers. Nevertheless, Omicron's higher transmissibility means that we cannot let our guard down, as an uncontrolled rise in overall case numbers could still push hospital and ICU admissions to unmanageable levels. Unvaccinated individuals, with no protection from infection and severe illness, will continue to disproportionately contribute to the number of severe cases requiring acute medical care, especially the elderly (see Annex A (https://www.moh.gov.sg/docs/librariesprovider5/default-document-library/mtf-21012022\_annex-a0998a282fd8c4a2aa3ce3c0a2a2163e5.pdf?sfvrsn=c814e84d\_0) for details). 12% of our non-fully vaccinated cases aged 60 and above were critically ill in ICU care or died, compared to 1% of fully vaccinated cases of the same age groups.
- 12. With Omicron's higher transmissibility, the number of individuals with severe symptoms could be even higher than the earlier Delta wave simply because more individuals will be infected. This will again strain our healthcare capacity. Hence, we urge unvaccinated individuals to get vaccinated at the earliest opportunity.

We also strongly encourage those who have completed their primary series vaccination and are eligible to receive their booster dose to do so as soon as possible, to maximise your protection against COVID-19 as cases rise.

#### Safeguarding Essential Services, Protecting Patients and Healthcare Workers

- 13. As observed in other countries which have already experienced Omicron waves, high case numbers in our workforce can disrupt business operations. Even if workers who are infected have mild or no symptoms, health protocols will require them to be isolated. As the number of infections could potentially be very large, absenteeism rate can go up very sharply.
- 14. Businesses, particularly those which provide essential services, should ensure robust business continuity plans, such as split team arrangements, and adhere strictly to workplace SMMs to minimise transmissions. Those returning to the workplace should self-test themselves regularly. If unwell, workers should visit a doctor for medical review and avoid entering their workplace.
- 15. Keeping our healthcare system functioning well under such circumstances will be a difficult challenge. To better protect our patients and healthcare workers, particularly settings with vulnerable persons, inperson visits to all hospital wards<sup>1</sup> and residential care homes ('Homes') will be suspended for a period of four weeks, **from 24 January to 20 February 2022 (both dates inclusive)**. During this period, Hospitals and Homes have the discretion to allow visits for exceptional cases, for example if the patient/resident is critically ill. Visitors would be subjected to visitor management measures (refer to Annex B (https://www.moh.gov.sg/docs/librariesprovider5/default-document-library/mtf-21012022\_annex-b.pdf? sfvrsn=3cb1e28d\_0) for details).
- 16. To ensure that patients/residents remain connected with their loved ones, the Hospitals and Homes will continue to support alternative methods of communication such as through telephone or video calls.

#### **Right-siting Patients and Streamlining our Healthcare Protocols**

- 17. NCID's studies have shown that the viral load for Omicron infections is lower than for Delta infections throughout the course of the infection period. Given that and Omicron's shorter infectious period, we will shorten the maximum isolation period for fully vaccinated individuals and children below the age of 12 years old for both Protocols 1 and 2 from 10 days to 7 days. The maximum isolation period for unvaccinated individuals aged 12 years old and above will remain at 14 days for both Protocols 1 and 2.
- 18. Since 6 January 2022, our Healthcare Protocols have focused on managing COVID-19 cases based on the severity of their symptoms and individual risk factors. Lower-risk individuals with mild symptoms can now be immediately diagnosed by their primary care doctors via a healthcare provider-administered Antigen Rapid Test (ART) and recover safely under Protocol 2; whilst those assessed by their doctors as high risk (e.g. elderly, pregnant, paediatrics, immunocompromised status, etc) or with significant symptoms (e.g. chest pain, shortness of breath, prolonged fever, etc) will be managed under Protocol 1. These higher risk patients will also be assessed for placement on the Ministry of Health's (MOH) Home Recovery Programme, or further management or monitoring in a care facility. Low-risk asymptomatic patients, including those who test positive on self-administered ARTs, will continue to be managed under Protocol 2.
- 19. These arrangements have worked well in ensuring that medical resources go to those who need them the most, and enabling patients to return to normal activity as soon as possible once it is safe for them to do so. We will therefore expand the application of Protocol 2, to more patient groups and settings.
- 20. With immediate effect, we will expand the age bracket suitable for Protocol 2 to include **children aged 5 to 11 years old, regardless of their vaccination status**. We urge those with non-emergency conditions, including children, to avoid seeking treatment at hospitals and to consult their primary care doctor instead. Those who test ART positive at non-clinical settings (e.g. unsupervised or employer supervised self-swab

tests) but who identify themselves as potentially at risk (see Annex C (https://www.moh.gov.sg/docs/librariesprovider5/default-document-library/mtf-21012022\_annex-c.pdf? sfvrsn=67394c86\_0)) should still visit a doctor for medical advice even if they feel well.

- 21. We will also allow patients who are on Protocol 1, recovering well and whose symptoms have improved, to transit smoothly to Protocol 2. This means that they can be discharged earlier and return to normal activities if they test negative on a self-administered ART taken 72 hours or more after their first positive COVID-19 test.
- 22. This will be progressively put in place in the coming couple of weeks, where Protocol 2 can be applied to all low-risk, asymptomatic individuals who are in Protocol 1 settings, such as COVID Treatment Facilities, those who test positive for Pre-departure Tests (PDT), Pre-event Testing (PET), Rostered Routine Testing (RRT) and mandatory traveller tests (e.g. On-arrival Tests (OAT) and tests taken at the end of Stay-Home Notice (SHN) periods), so long as their medical conditions allow it.
- 23. These changes enable us to deal more nimbly with Omicron and minimise disruption to normal activities for fully vaccinated and boosted persons even as case numbers continue to rise. MOH will continue to monitor the situation closely and adjust our approaches as necessary.

#### **Updates to Border Measures**

#### **Calibrating Vaccinated Travel Lane (VTL) Testing Regimes**

- 24. On 31 December 2021, we announced a four-week extension to the enhanced 7- day testing regime for travellers arriving via VTLs in order to facilitate the detection of imported Omicron cases and slow transmission into the community. This has bought time for us to booster vaccinate more residents, learn more about the Omicron variant and make necessary adjustments to our COVID-19 strategy. As imported cases now form a shrinking proportion of our overall cases, we will simplify the VTL testing regime.
- 25. These measures are less relevant now. Hence, VTL travellers entering Singapore **after 23 January 2022, 2359 hours** via both air and land checkpoints will only be required to do unsupervised self-administered ARTs from Day 2 to Day 7 of their arrivals if they need to leave their place of residence or accommodation. Travellers need not submit their ART results but must test negative before going out. VTL travellers who arrive before 23 January 2022, 2359 hours are still required to continue with the existing testing regime (i.e. unsupervised self-administered ART on Days 2, 4, 5 and 6 with submission of results online, and supervised ART on Days 3 and 7 from their arrival).
- 26. Travellers who test positive on ARTs (i.e. the on-arrival test for VTL-Land and unsupervised self-administered ARTs on Days 2 to 7) no longer need to undergo a confirmatory PCR test, but should instead simply recover under Protocol 2.<sup>2</sup> That said, those who identify themselves as potentially at risk (as stipulated in Annex C (https://www.moh.gov.sg/docs/librariesprovider5/default-document-library/mtf-21012022\_annex-cc357d6a1eea145fcb2e6fc2c3c5f7986.pdf?sfvrsn=d1f693db\_0)) should visit a doctor for medical advice after testing positive even if they feel well.
- 27. We will continue to maintain a 50% limit on VTL flight and bus tickets for entry into Singapore for now. We will continue to review the local and global COVID-19 situation and adjust our measures accordingly.

#### **Facilitating Travel for Recently-Recovered Travellers**

28. With the growing number of cases worldwide, there is a rise in the number of travellers who have recently recovered from COVID-19. Such travellers can continue to shed non-infectious viral fragments even after they have recovered, and therefore test positive for COVID-19 despite posing no infection risk. As fully vaccinated individuals who recently recovered from infection have a high level of immunity through their recent COVID-19 infection and vaccination, the likelihood of reinfection is low.

29. Hence, travellers arriving after **23 January 2022**, **2359 hours** who are fully vaccinated and recently recovered (i.e. within 90 days of their last infection) will be exempted from all testing and SHN requirements if they are able to provide appropriate documentary proof. Non-fully vaccinated recently-recovered travellers will be exempted from pre-departure testing requirements, but will still be subjected to all other prevailing border measures. This will facilitate the safe return of recently-recovered residents who travel overseas. See Annex D (https://www.moh.gov.sg/docs/librariesprovider5/default-document-library/mtf-21012022\_annex-d.pdf?sfvrsn=9ce0221f\_0) for the list of documentation to be presented by such travellers at check-in and arrival immigration to qualify for this exemption.

#### **Regular Review of Border Measures**

- 30. A summary of the prevailing border measures can be found in Annex D. The full set of Safe Travel Lanes for travel to Singapore and prevailing border measures under each lane for different categories will be updated on the SafeTravel website (https://safetravel.ica.gov.sg). Travellers are advised to visit the website to check the latest border measures for the associated country or region before entering Singapore; and be prepared to be subjected to the prevailing border measures upon entry into Singapore.
- 31. We will continue to monitor the global COVID-19 situation and adjust our border measures in tandem with our roadmap to becoming a COVID resilient nation.

#### **Increasing our Protection with Vaccinations and Boosters**

- 32. Vaccinations, especially boosters, will ensure we retain substantial protection against Omicron. Boosters have helped dampen the rise in Omicron cases thus far and increases our protection against infection and severe illness.
- 33. Interim analysis of 50 cases from KK Women and Children's Hospital from their COVID-19 vaccination study of 150 children aged 5 to 11 years showed that all of them developed high antibody levels in response to two doses of the Pfizer-BioNTech/ Comirnaty vaccine at the paediatric dose. The rates of adverse reactions after vaccination were lower than in adolescents, with none requiring medical review or hospitalisation to date. With these positive findings locally, we encourage all children aged 5 to 11 years to come forward to be vaccinated.

#### **Extension of Booster Vaccination Programme to Persons Aged 12 to 17 Years**

- 34. MOH and EC19V had previously recommended for all persons aged 18 years and above to receive a booster dose of an mRNA vaccine offered under the National Vaccination Programme five months after completing their primary vaccination series. This recommendation is now extended to individuals aged 12 to 17 years. From early February 2022, we will progressively invite individuals, starting with those aged 16 and 17 years, to receive their booster dose, followed by those aged 12 to 15 years.
- 35. Individuals aged 12 to 17 years will require the consent of their parent/guardian to book an appointment. Parents/guardians of these individuals will receive an SMS with a personalised booking link to the mobile number that they had registered with for the primary series, to provide consent and book their child/ward's booster vaccination appointment. They can be boosted in any vaccination centre offering the Pfizer-BioNTech/ Comirnaty vaccine and should bring along their Student Identification, or if not available, other forms of identification (e.g. Birth Certificate/Passport/SingPass) for verification purposes.
- 36. Parents/guardians of children/wards aged 13 and above are not required to accompany them on the day of vaccination. However, children/wards aged 12 and students of Special Education (SPED) schools will need to be accompanied by a parent/ guardian, as per the arrangements for the primary series vaccination. MOH and the Health Promotion Board will work with SPED schools, and more details will be shared by SPED schools with parents/guardians at a later date.

37. Individuals aged 12 to 17 years who are medically ineligible for the Pfizer-BioNTech/ Comirnaty vaccine will be offered a Sinovac-CoronaVac booster dose under a dedicated public health programme. This programme will also be extended to children aged 5 to 11 years who are medically ineligible for the Pfizer-BioNTech/ Comirnaty vaccine for their primary vaccination series. Participants in the public health programme will be closely monitored by trained medical personnel. MOH will contact eligible persons with detailed instructions.

#### **Expansion of Requirement for Booster Dose**

- 38. As announced previously, from **14 February 2022**, persons aged 18 years and above who have completed the primary vaccination series and are eligible for booster vaccination will be considered as fully vaccinated for only 270 days after the last dose in their primary vaccination series. Upon receiving their booster, they will continue to maintain their vaccinated status. In tandem with the immediate extension of eligibility for booster doses to them, starting from **14 March 2022**, persons aged 12 17 years who have completed their primary series and are now eligible for booster vaccination will similarly be considered fully vaccinated for only 270 days after their last primary series dose, and will require a booster dose to maintain their vaccinated status thereafter.
- 39. Persons who have recovered from COVID-19 and have completed their primary series vaccination<sup>3</sup> do not require an additional booster dose at this point in time. They will continue to be considered fully vaccinated after 14 February 2022. However, it is safe for such persons to receive a booster dose from five months after their last dose and our vaccination centres will not turn away such individuals.

#### Reminder to Receive Booster Dose to Maintain Vaccinated Status After 14 February 2022

- 40. Persons aged 12 years and above who have been offered the booster dose should not delay receiving the booster dose beyond nine months after the last dose of their primary vaccination series. Also, the Sinovac-CoronaVac vaccine should only be used as a booster by persons medically contraindicated to receive the mRNA vaccines.
- 41. Persons who had received two or more doses of the Sinovac-CoronaVac or Sinopharm vaccines as part of a three-dose primary vaccination series are strongly recommended to receive one dose of an mRNA vaccine as a booster.
- a. Persons who had received an mRNA vaccine as the third dose of their 3-dose primary series should receive their booster around **five months thereafter**.
- b. Persons who received the Sinovac-CoronaVac or Sinopharm vaccine for all three doses should receive their booster at **three months thereafter**, due to lower antibody levels generated by the third vaccine dose.
- 42. We strongly encourage all those who are eligible to receive booster doses to take them as soon as possible. This will help to keep you and your loved ones safe.

#### **Updates on Community Safe Management Measures**

#### **Exercising Caution During the Chinese New Year (CNY) Festive Period**

- 43. Our high vaccination and booster rates give us confidence that we will be able to mitigate the impact of the Omicron wave on our society and economy. We seek everyone's cooperation to uphold the prevailing SMMs especially during the CNY period:
- a. **House visits**. The permissible group size for social gatherings remains at 5 persons. Correspondingly, the maximum number of unique visitors per household will remain at 5 persons per day. Individuals may wish to

take an ART in advance of such gatherings, particularly if there will be elderly or unvaccinated family members present.

- b. Dine in at Food & Beverage (F&B) establishments. Prevailing rules at F&B establishments will continue to apply, including to reunion dinners or other CNY meals at these establishments. Social gatherings remain capped at 5 persons and multiple table bookings exceeding this are not permitted, except for those from the same household.
- c. Other religious or customary activities. Large-scale events, including religious processions or dinner banquets (including company-organised meals or tuan bai) will continue to be disallowed to avoid superspreading events.

#### **Riding through the Omicron Wave**

We have been monitoring data on Omicron cases and optimising our responses to ensure we are able to ride through this wave of Omicron cases. Boosters and vaccinations remain a critical part of our COVID-19 strategy in ensuring our population is well protected against infection and severe illness. We urge all who are eligible for vaccinations and booster doses to receive them as soon as possible. We seek the continued cooperation and support of all in complying with the adjusted protocols and measures as we pave the way to living with COVID-19.

### **MINISTRY OF HEALTH** 21 JANUARY 2022

- <sup>1</sup> Includes public acute hospitals, community hospitals and private hospitals
- <sup>2</sup> You may refer to www.covid.gov.sg/well-and-positive-or-condition-assessed-mild-by-doctor (http://www.covid.gov.sg/well-and-positive-or-condition-assessed-mild-by-doctor) for more details on Protocol 2. For more information on what to do if you feel unwell while travelling in Singapore, please refer to www.covid.gov.sg/travellers (http://www.covid.gov.sg/travellers).
- <sup>3</sup> Persons who have recovered from COVID-19 and have completed their primary series vaccination include those who were fully vaccinated when they were infected with COVID-19, and those who received a valid dose of an mRNA vaccine (or two valid doses of Sinovac) after they were infected with COVID-19.

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