Japan Self-Defense Forces Engagement in response to COVID-19



18th May, 2020 Ministry of Defense, Japan **Updated**

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XUpdated contents underlined

I. Foreword



We continue to experience unprecedented state with the outbreak of COVID-19 which caused more than 4 million confirmed cases and 300,000 deaths globally. We would like to express our deepest sympathy to those who have been affected by the disease.

The Government of Japan is making concerted efforts with our people to take all possible measures to address the disease and the Ministry of Defense and the Self-Defense Forces have engaged in assistance in response to take measures at the airports and to prevent community spread infection. As we are still facing an extremely severe situation, we would like to share with you lessons learned from our engagements towards the earliest end of COVID-19.

We shared with you lessons learned from our engagements last month, and on this occasion we <u>updated the document</u> to include further lessons learned from our continuing activities. While we would like to show our respect for the efforts made by your government and organization to prevent the spread of the disease, we hope you find the material useful.

As mutual visits remain difficult, we would like to maintain communication between defense authorities and we hope to strongly promote defense cooperation and exchanges even further once the outbreaks come to an end.

We hope the day will come as soon as possible when we, humankind overcome the disease. Please accept our best wishes for the peace of each country, your good health and every success.

II. Activities and Lessons Learned



i . Ongoing Disaster Relief Operation (from 28 March onward / as of 17 May)

A. Disaster Relief at the airport (from 28 March onwards)

For returning Japanese nationals and visiting foreigners

- Quarantine Assistance at airports (Narita and Haneda)
 (collection of body fluid for the PCR test)
- b) Transportation from the airports* to accommodation to stay until the PCR test result is confirmed
 - * Narita, Haneda, Kansai and Chubu
 - Handover of transportation operation to private bus operation companies after 4-5 days-training on protective measures
- c) Assistance to those staying at above accommodation (distribution of meals etc.)



<Lecture on how to wear protective clothing addressed to private companies>



<Lecture on how to cover inside cars addressed to private companies>





B. Disaster Relief to prevent community spread infection

(from 3 April onwards, carried out in 29 prefectures)

For those who tested positive, private sector companies and others, etc.

- a) Assistance by medical officers and nurses in taking testing samples
- b) Life support assistance at privately-run accommodation to those who tested positive (asymptomatic or with mild symptoms)

 (Distribution of meals, collection of wastes, cleaning and sanitization after the use)
- c) Transportation assistance to those who tested positive (asymptomatic or with mild symptoms) from a hospital to privately-run accommodation
- (See lessons learned in slides 7 and 8)



<Distribution of meals to each room>



<Zoning>



<Affix plastic sheets>







d) Assistance in training

- <u>Organized a training program</u> on the infection preventative measures addressed <u>to local governments</u>, <u>privately-run accommodation and detention centers</u>
 - Transferred the task of Life Support Assistance at the privately-run accommodation to private companies



- Transferred the task of Transportation Assistance to privately-run accommodation to private companies
- · JSDF will thereafter regularly visit sites and offer advice where necessary

e) Transportation of patients from remote islands by aircraft







<Training of local government staff>





[Lessons learned from Life Support Assistance (B. b)]

1. Plan zoning map of the building

- a) Organize daily movement flow and prevent contact between those who are assisting and patients
- b) **Fix the route** to the room to be used when receiving those who need to be isolated



c) Separate entrance and lifts to be used between those who are assisting and patients

2. Set waste-handling standard

- a) Use different disposal bags in infection-free area and potentially-infectious area
- b) Separate wastes in potentially-infectious area from ordinary waste
- c) Collect rubbish placed in front of the room using the disposal bags distributed
- 3. Prepare for long-term assistance and consider a working routine which allows for plentiful rest
- 4. Use the accommodation facility to accommodate the deployed members who have higher risk of infection after the operation, rather than allowing them to return to the unit





[Lessons learned from Transportation Assistance (B. c)]

1. Plan protection measures inside the vehicle

- a) Affix plastic sheets inside the vehicle
- b) Ensure zoning of the areas for the driver's seat and passengers' seats and
 - **DO NOT** use two rows behind the driver's seat
- c) Ensure that **driver wears protective clothing** and does not use exit door to be used by the passenger
- d) Have **only the driver to handle baggage** to minimize contact with the baggage
- e) Collect used plastic sheets after transportation of patients

2. Plan sanitization measures inside the vehicle

- a) Have passengers to sanitize their hands and fingers before embarking on the vehicle
- b) Sanitize parts inside the vehicle such as handrails that may have been touched by passengers
- When <u>sanitizing</u>, <u>maintain the sequence of procedure from back to front</u>, and from <u>top to bottom</u> (Also sanitize driver's seat, ceiling, curtains, and loading platform)





- ◆ While it is a necessary function of defense authority to proactively support local governments and private companies, it is also important to maintain a system that allows defense authority to respond to any future circumstances and to uphold sustainability of preventative measures.
- ◆ From this perspective, <u>task transferring to private companies will be</u> <u>undertaken where appropriate</u>.
- Contribute towards containment of the virus at the earliest stage by sharing lessons learned from recent activities
 - ➤ Opened a dedicated page "JSDF engagement in response to COVID-19" on MOD/JSDF website
 - (https://www.mod.go.jp/e/d_act/disaster/covid/index.html)
 - > Opened a dedicated page "Response to COVID-19" on Joint Staff website (https://www.mod.go.jp/js/English_top.htm)

II. Activities and Lessons Learned



ii . Concluded activities (about 4,900 personnel deployed for 5 weeks and ZERO infected)

A. Deployment of Nurses (29 and 30 January, 2020)

As inter-governmental cooperation, deployment of two JSDF nurses on the chartered flight to/from Wuhan

⇒ Building on this experience, moved onto Disaster Relief Operation

B. Assistance at the accommodation* on the ground (From 31 January)

- a) Life Support Assistance (distribution of supplies of necessities and food, and collection of clinical questionnaires / assistance to those Japanese nationals and others who returned by chartered flights and who disembarked from the cruise ship)
- b) Healthcare administration (doing rounds and examination)

C. Assistance on the cruise ship Diamond Princess (From 6 February)

- a) Medical Assistance (examination, prescription and classification of medicine)
- b) Life Support Assistance (carrying in and categorisation of necessities)
- c) sanitization of the commonly used areas on the ship such as halls, handrails of stairs, floor buttons within the lifts, door-knobs and other metal parts that may be touched
- d) Transportation of the disembarking passengers
- ⇒ Involvement of High Risk and Exposure
- ⇒ Unprecedented operation on a huge complex site of cruise ship

^{*}National Tax College, National Institute of Public Health and Customs Training Institute



(1) Summary of Assistance on the cruise ship **Diamond Princess**

- Assistance provided to about 2,800 passengers out of total passengers of about 3,700
- About 2,700 deployed personnel for 3 weeks in total for the duration of three weeks (including NBC Counter Medical Unit*) and <u>ZERO infected</u>
- Transportation assistance to foreign passengers etc. (US/Australia and NZ/Israel/Canada/Italy (including other EU nationals)/UK/Philippines/India/Indonesia)

* NBC Counter Medical Unit

This unit is responsible for temporary quarantine of infected patients and emergency treatment; and for identifying biological agent used. Their expertise and trainings in treating patients infected with biological agent, as well as their previous disaster relief operation in responding to the Great East Japan Earthquake in 2011, proved to be a great asset on this occasion.

| | Duration | Number of personnel on duty | | |
|---|-----------------|-----------------------------|--|--|
| Medical Assistance | 7 to 26 Feb | About 700 | | |
| Life Support Assistance | 9 Feb to 1 Mar | About 1,300 | | |
| Transportation of the disembarking passengers | 14 Feb to 1 Mar | About 300 | | |
| Joint Liaison Base | 6 Feb to 1 Mar | About 400 | | |







<Transportation of the
disembarking passengers>



(2) Contributing factors to not having any JSDF members infected

1. Thoroughly ensure the basics

a) sanitize hands and fingers frequently after each task (every 1 to 2 hours)





b) Pay extra care to maximise effectiveness of facemask

- > When wearing, pressing facemask to ensure there is no gap
- ➤ When removing, touching only elastic strings to avoid contact with the surface of the facemask
- ➤ Changing the face mask at completion of each task (every one to two hours)





<Only touch the strings and maintain distance when disposing>



<Pressing facemask with hand>



<Portable Washing Machine>

c) Ensure preventative laundry methods

- Those with higher risk and exposure are to launder their clothing individually in the bathtub or using portable washing machine
- > Those with less risk and exposure are to share common washing machine on Hakuou



2. Thoroughly ensure protection

a) Introduced tougher protective measures as JSDF's own upgraded standards, and additionally imposed use of double gloves and duct tape to fill any potential gaps in the protective clothing (see next slide)

b) Worked in a team of two

- > Putting the protective clothing on and off
- > Double-checking if hair caps cover the hair fully and if there are no gaps between the protective clothing



<Putting on/off protective clothing>



<Lecture on how to wear/undress protective clothing>



Upgraded Protective Standards for the JSDF

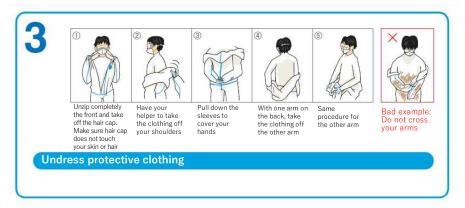
| Task | Image | Contact with the subject | Protective Measures taken for the JSDF operation (filled in orange) ✓: newly introduced JSDF standards ○: general standards | | | | | |
|--|-------|--------------------------------|---|----------|--------------------------|------|---------------------------|----------------|
| | | | Tyvek Suit | Hair cap | Face mask or N95 mask | Gown | Face shield or Goggles | Plastic gloves |
| Sanitisation of and within the ship | | Yes | *Tyvek suit consists of N95 mask, goggles, inner gloves, outer gloves, protective suit itself and shoe covers | | 0 | | | 0 |
| Examination, Prescription and Distribution of medicine | | Yes | | | 0 | 0 | 0 | 0 |
| Classification of medicine | | No | | V | 0 | V | | V |
| Transportation of PCR positive patients | | Yes | *Tyvek suit consists of N95 mask, goggles, inner gloves, outer gloves, protective suit itself and shoe covers | | 0 | 0 | | 0 |



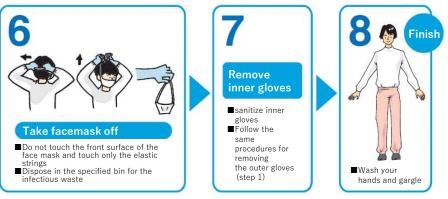
c) Instructed on how and where to take off and dispose protective clothing

(undressing sequence which prevents contact with the surface of the clothing / designation of infection-free, clothes-changing and potentially-infectious areas)









<Introduction on taking off protective clothing>

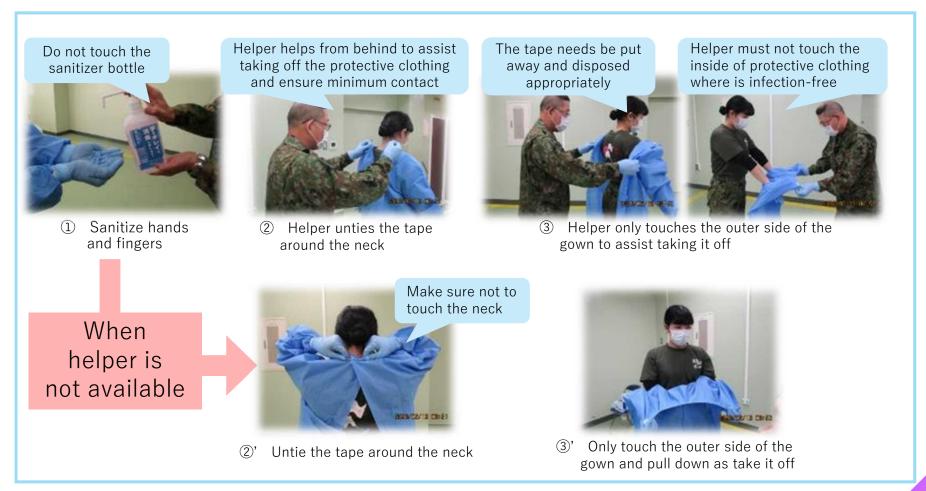
Source: Azearth guidance on how to take protective clothing off Tentative translation by MOD





c) Instructed on how and where to take off and dispose protective clothing

(undressing sequence which prevents contact with the surface of the clothing / designation of infection-free, clothes-changing and potentially-infectious areas)





3. Take three nutritious meals a day and plentiful rest to build up immune system

 Maintain both physical and mental health by ensuring to take three nutritious meals and sufficient sleep and rest

4. Use private ferries (Hakuou and Silver Queen) as a base of operation

- a) Planned meticulous and large-scale logistic support
- b) Designated different entry routes, floors and bathrooms to be used depending on the risk of infection (see next slide)
- c) Used the same ferries to accommodate the deployed members for the watch and wait period of 14 days after the operation







<Hakuou>

Example of meal box Menu

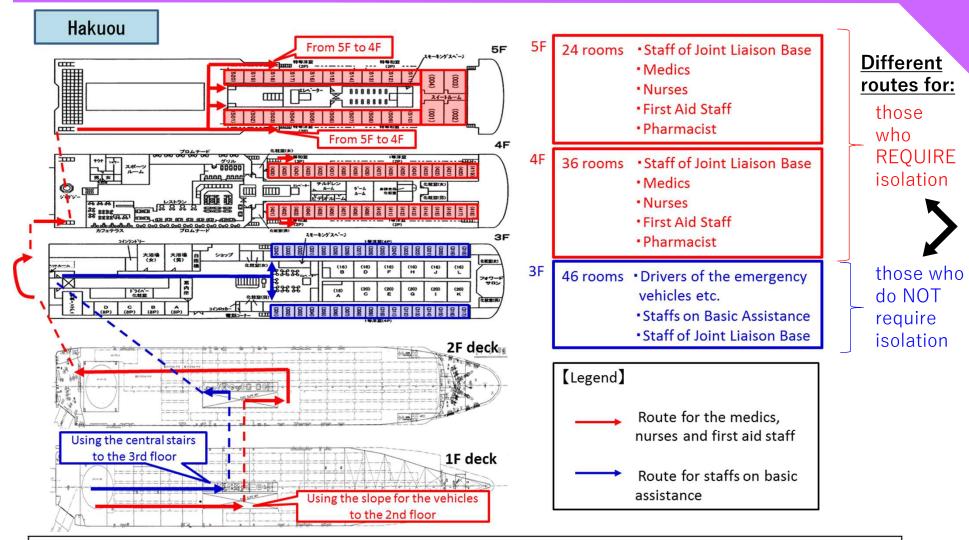
- Rice
- Main dish (stir fried fish and vegetables)
- Side dish (fried meat with peas)
- Vegetables
- · Soup
- Vegetable juice

<Nutritious Meals>

Example of meal box Menu

- Rice
- · Main dish (fried meat with salad)
- · Side dish (stewed vegetables)
- Vegetables
- · Miso Soup
- Yoghurt





In order to minimize infection:

- O Used the 4th and 5th floors of the ship Hakuou and designated the outside stairs from the deck of the ship for those who require isolation; and
- O Allocated 3rd floor and the other ferry Silver Queen, and made available all other stairs for all other staff

II. Activities and Lessons Learned



iii. Admission of those who tested positive at the hospitals of SDF etc.

As of 17 May,

Admitted total of 415 persons who tested positive

306 of them were discharged
12 were transferred to different hospitals
73 were transferred to accommodation facilities
6 deaths, and
18 are still admitted



No secondary infection suffered by hospital staff



- ✓ Admitting a large number of patients over a short period of time
- ✓ Admitting nationals from 17 countries/regions
- **✓ Publicising with celerity the analysis of cases of admitted patients**

II. Activities and Lessons Learned



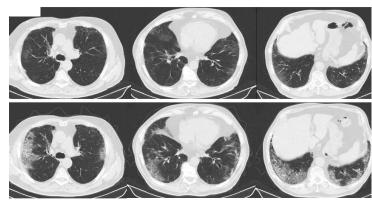
iv. Analysis of cases examined at the SDF Central Hospital

(1) Summary

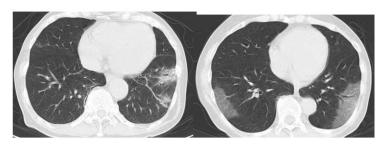
- Admittance of one of the largest group of infectious patients in Japan
- Publication of analysis of 104 admitted patients, based on their consent, with celerity (issued on 19 March)

(2) Effectiveness of CT scan

- a) CT scan showed high frequency of subclinical pneumonia even in cases of asymptomatic COVID-19 positive patient
- b) For some of those who initially tested negative in the PCR testing, repeated PCR testing later showed positive if CT scan indicated abnormalities



<Example of pneumonia becoming worse (from top to bottom)>



<Image of CT scan (PCR Positive, Asymptomatic)>



(3) Thorough preventative measures

- a) Zoning, and Prevention of infection through contact and airborne
 - · For the CT scan, ensure that CT is sanitized and that radiologists wear protective clothing
- b) Knowhow built from the training of admitting infectious patients as a designated medical institution for admitting Class I infectious disease
- c) Knowhow built from the training of admitting a large number of injured patients under scenarios of natural disasters such as earthquakes

(4) Considerations for foreign patients

- a) Interpretation services for communication with patients and foreign embassies
- b) Provision of wifi connection to allow for communication with their home countries and access to information
- c) Foreigner friendly hospital meals





<Zoning>

<Protective clothing>

<Hospital room>

III. Other engagement





i . Clinical trial of Avigan (favipiravir) at SDF Central Hospital and National Defense Medical College Hospital

From March, <u>treatment using Avigan (favipiravir)</u> developed by Fujifilm Toyama Chemical Co., Ltd. commenced <u>on a compassionate-use basis</u>*

From April, Central Hospital and National Defense Medical College Hospital commenced clinical trial of Avigan on COVID-19



<Avigan>

In the fight against COVID-19, <u>active role</u> is maintained by not only engaging in the treatment of COVID-19 but also <u>participating in the development of</u> the medical treatment

^{*}compassionate-use basis:

a treatment option to use unauthorized medicine for life threatening conditions for which no alternative medicine is available

^{*}Subject patients are those who contracted COVID-19 with no grave pneumonia and who meet the requirements of the clinical trial and have consented to the trial

IV. Achievements



- ACCOMPLISHED the mission with ZERO infected member of the JSDF deployed personnel as directed by the Minister himself to place due focus on not having any deployed member infected.
- The importance of **EVERY SINGLE MEMBER'S RIGID ADHERENCE** to the instruction cannot be overstated.
- Disaster Relief operation is ongoing under the same principles.